

# COMMUNITY HEALTH IMPLEMENTATION STRATEGY 2025

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**Children's  
Wisconsin**

Kids deserve the best.

# Introduction

At Children’s Wisconsin, we are committed to ensuring that Wisconsin’s kids are the healthiest in the nation. To achieve that vision and provide the best care, we first need to understand the factors that shape children’s lives and health before they ever enter our care and then align our resources accordingly.

The Community Health Needs Assessment (CHNA) is the first step. Every three years, Children’s Wisconsin partners with other area health systems through the Milwaukee Health Care Partnership (MHCP) and Tri-County Community Health Improvement Coalition (Tri-Co CHIC; formerly the Fox Valley Community Health Improvement Coalition) to complete a comprehensive assessment of health needs in our primary service areas: Milwaukee County and the tri-county region of Calumet, Outagamie and Winnebago counties in Northeast Wisconsin. You can find the full assessments at [childrenswi.org/communityreports](https://childrenswi.org/communityreports).

The Community Health Implementation Strategy (CHIS) is our action plan in response to those identified needs, and it helps direct our programs, services and advocacy efforts to the areas where we can make the biggest impact on kids’ health. Children’s Wisconsin is uniquely positioned to be a force of good for kids and families because of our pediatric expertise and strong community partnerships. With our community’s priorities as our guide, we are eager to continue our collaborative work to enhance the health and well-being of Wisconsin’s kids.



## ABOUT CHILDREN’S WISCONSIN

We are the region’s only independent health care system dedicated solely to the health and well-being of children and adolescents. In Milwaukee, Northeast Wisconsin and throughout the state, we provide kids and their families with a wide range of care and support: primary, specialty, urgent and emergency care; community health services; injury and violence prevention services; foster care and adoption services; child and family counseling; child advocacy services; family resource centers and more. In 2024, Children’s Wisconsin invested more than \$189 million in community programs and services, including more than \$102 million in uncompensated care for kids covered by Medicaid, with the long-term goal of keeping all children healthy, happy and safe.

## CHILDREN’S WISCONSIN VISION

Our vision is that Wisconsin’s kids will be the healthiest in the nation — physically, mentally and socially. That means collaborating with community partners because no organization can achieve such an ambitious goal alone, and it means putting kids’ health at the center of every decision we make. We understand that in order to monitor our progress toward this vision, we need to identify areas of focus and measures that reflect the overall health and well-being of Wisconsin’s kids.

# Variations in Health Outcomes

To achieve our vision of Wisconsin's kids being the healthiest in the nation, we must support all kids in meeting their full health potential. We work to achieve this in three primary ways: focusing on health care quality, building a culture of belonging and understanding variations in health outcomes.

## Advancing Health Care Quality

Adapted from The Institute for Healthcare Improvement 2001 publication, *Crossing the Quality Chasm*, Children's Wisconsin defines quality as the degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge. There are six domains associated with the Children's Wisconsin framework on quality, including providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location and socioeconomic status, and is, therefore, care that is equitable.

As an important component of Children's Wisconsin's overall commitment to health care quality, we strive to understand and address obstacles to good health faced by our patients and their families, such as poverty, lack of access to employment, quality education and housing, safe environments, and health care accessibility and affordability. We acknowledge many of those examples of health factors are social drivers of health. And, although many of these community conditions are outside the direct control of Children's Wisconsin or any health care provider, they affect opportunities patients, families and communities have to be healthy and are an appropriate part of our focus on whole child health.

Equitable care is individualized and means closing gaps in opportunities for good health. Kids and families may need more or different things to achieve the same health outcomes. Understanding individual health-related social needs can be critical for designing practical, person-centered care plans.

## A Culture of Belonging

Aligned with our values, in every action and interaction at Children's Wisconsin, we strive to promote health equity and positive experiences for our team members and providers, kids and families, volunteers and the communities we serve. We do this through the following principles:

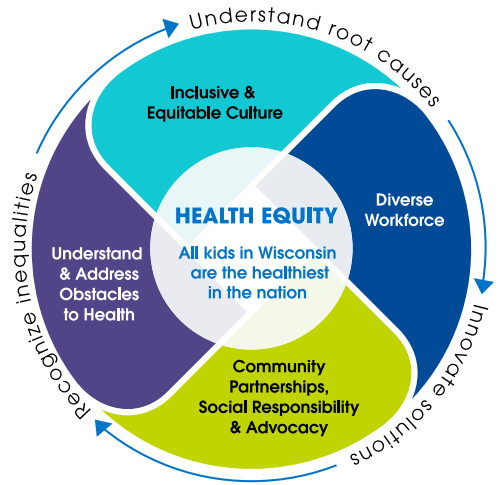
- Assure a respectful culture that is intentionally diverse, inclusive and anti-racist.
- Build a diverse and inclusive workplace that reflects a broad range of experiences, backgrounds and perspectives.
- Advance our steadfast commitment to inclusion and health equity for the children and families we serve.
- Advocate for and partner with the community to strengthen inclusion, diversity and health equity.



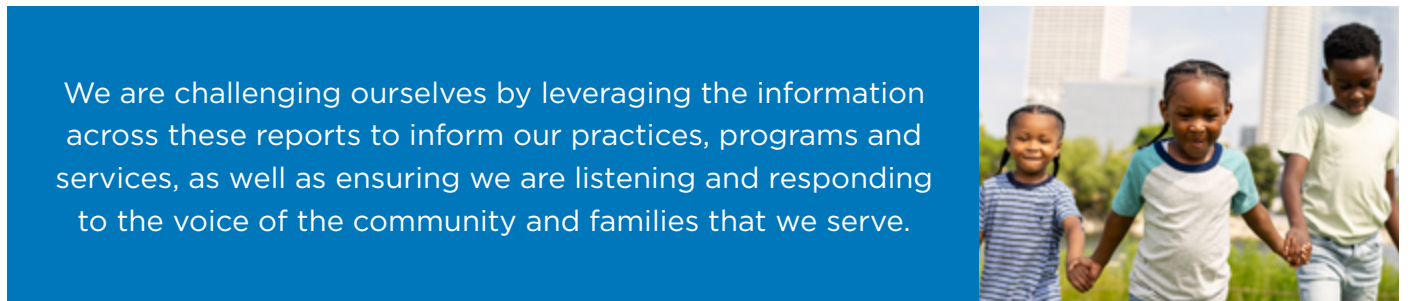
## Understanding Variations in Opportunities for Good Health and Positive Outcomes

When people have unmet needs related to social drivers of health, such as limited access to health care or adequate housing, or exposure to violence and other toxic stress, their health outcomes and quality of life are limited. These community conditions, present where people are born, live, learn or worship, can lead to differences in health outcomes, such as life expectancy and infant mortality.

At Children’s Wisconsin, we strive to recognize when these variations exist, seek to understand the root causes of variations and work to innovate solutions that provide all kids with opportunities to be healthy. This approach is represented in the graphic (at right).



Everyone on our team at Children’s Wisconsin, no matter their role, plays a part in ensuring kids have access to the care and services they need to achieve their full health potential based on their unique needs and life circumstances. And we know that we can do better; we have a chance to close the gaps in opportunities and outcomes between the healthiest and least healthy kids.



We are challenging ourselves by leveraging the information across these reports to inform our practices, programs and services, as well as ensuring we are listening and responding to the voice of the community and families that we serve.

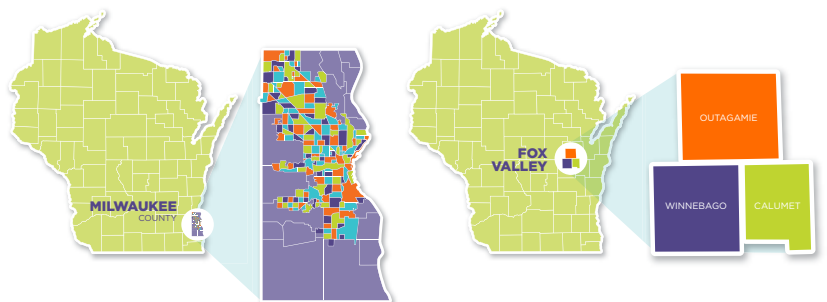
## Our Community

Children’s Wisconsin serves children and adolescents from across the state and beyond. However, for the purposes of this report, we defined our community as the children and adolescents living in Milwaukee County. Children’s Wisconsin has made significant investments in neighborhoods where health disparities are most pronounced. While data shows that these communities experience higher rates of chronic illness, barriers to care and increased needs, they are also home to strong social networks, dedicated community leaders and trusted organizations that serve as vital assets in advancing health equity.

### GEOGRAPHY

Milwaukee County, which covers 241 square miles, sits on the western shore of Lake Michigan and is home to the state’s largest city. It is the most populous county in Wisconsin, with an estimated 2023 population of 927,656.

Our Northeast Wisconsin hospital is located in Neenah, Wis., and it primarily serves families from Calumet, Outagamie and Winnebago counties in the Fox River Valley region in eastern Wisconsin. The tri-county area covers 1,390 square miles and is home to 417,217 residents.



# 2025 Methodology

Our process follows the Association for Community Health Improvement's (ACHI) model.

1. Map Your Development Process
2. Identify Stakeholders and Build Trusting Relationships
3. Develop a Community Health Profile
4. Increase Equity Through Data
5. Prioritize Community Health Needs and Assets
6. Document and Communicate the Results
7. Plan Strategies to Accelerate Health Equity
8. Develop an Action Plan
9. Evaluate Progress



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The result of this process is captured in two reports. The Community Health Needs Assessment (CHNA) reflects steps 1-6. Using that as a foundation, the Community Health Implementation Strategy (CHIS) focuses on steps 7-9.

These two reports also serve to meet the IRS requirements for charitable hospital organizations - Section 501(r)(3).

## **STEP 7: Plan Strategies to Accelerate Health Equity**

The CHIS Steering Committee convened stakeholders from youth-serving community organizations in Milwaukee and Northeast Wisconsin/Fox Valley to share their insights through listening sessions. Four sessions were conducted, discussing results of the CHNA and exploring potential areas of influence for the CHIS. Steering Committee members incorporated community insights into strategic planning and prioritization of Children's Wisconsin programs and services.

## **STEP 8: Develop an Action Plan**

Many committees and work groups across Children's Wisconsin are engaged in developing and completing the action plans to meet these objectives. Programs and services that our health system has invested in will continue over the next three years to meet the goals outlined in the CHIS. Together, this ensures a strong foundation for the resources that support these tactics.

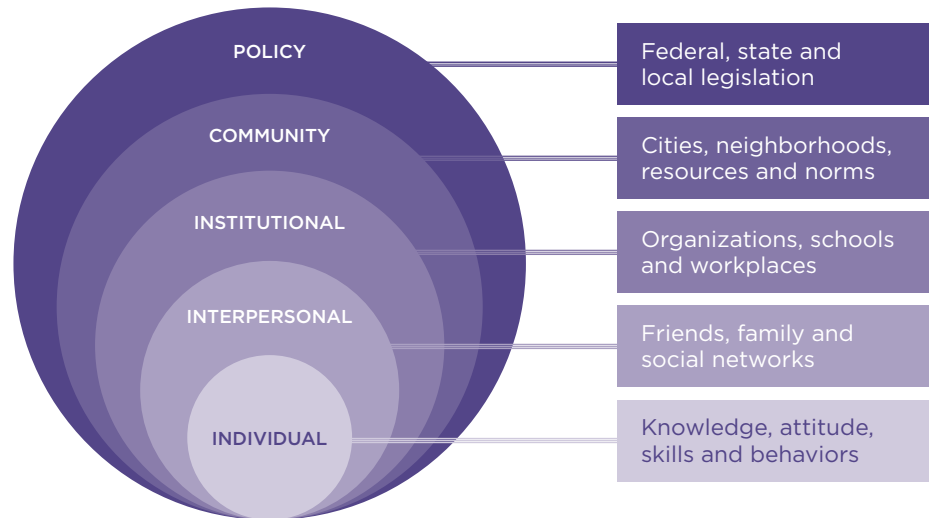
## **STEP 9: Evaluate Progress**

Over the next three years, Children's Wisconsin will use a variety of metrics to measure and evaluate our progress toward the goals. We will share the impact of these strategies with stakeholders and the community in many formats, including future CHNAs and the Community Benefits Report.

# Community Assets

We know that it takes more than health care to adequately address the health needs of our children, and we are fortunate to have many community leaders, organizations, corporations and other assets working together to improve the health of children in our community.

Children’s Wisconsin is committed to working across the social ecological model of health and with many sectors. Participants in the assessment identified existing assets within each of the 11 community sectors:



**Business Community and Leaders:** Businesses of all sizes, including local businesses and industries



**Community and Volunteer Groups:** Individuals and organizations who are actively involved in community issues



**Education:** Schools, universities and other educational institutions



**Faith-Based Organizations:** Churches, synagogues, mosques and other religious institutions



**Government:** Local, state and federal government agencies, as well as elected officials



**Health Care:** Hospitals, clinics, public health departments and other health service providers



**Law Enforcement:** Police departments, sheriffs’ offices and other law enforcement agencies



**Media:** Newspapers, television stations, social media, radio stations and other news outlets



**Nonprofit Organizations:** Community centers, charities and other organizations that operate for the public good



**Parents:** Families, caregivers and trusted adults who play a vital role in the lives of children and youth



**Youth-Serving Organizations:** Organizations that focus on supporting young people and their needs

# 2025-2027 Implementation Strategies

As a leader in pediatric health care, Children’s Wisconsin is committed to working with our community partners to address the key issues identified in our 2025-2027 CHNA reports. Through evidence-based programming, collaboration, education and advocacy, we continue to leverage many resources to improve kids’ health and well-being.

## AIM: IMPROVED COMMUNITY HEALTH OUTCOMES



## CHILDREN’S ROLE TO LEAD, PARTNER AND SUPPORT THE COMMUNITY IN EACH OF THESE AREAS



## ADVOCACY & POLICY

## IMPROVED HEALTH OUTCOMES FOR KIDS



Children’s Wisconsin has outlined a CHIS approach in Milwaukee and Northeast Wisconsin that recognizes a global aim, population-level outcomes, highlighted strategic investments, partnership projects, and supportive opportunities for each community health priority.

The global aims and population-level outcome measures are what Children’s, along with many others, are working toward and monitor regularly for improvement. Across each global aim, Children’s advances advocacy and policy, quality and equitable care, and a systemwide social drivers

of health strategy to promote whole child health and care model transformation. These serve as strategic enablers to strengthen efforts across each community health priority.

The programs and services that follow represent a sampling of Children’s Wisconsin strategic investments and collaborations with others in the community that improve population outcomes and multiply the impacts of our work.

More information on the broader scope of programs and services that Children’s offers can be found on our website: [childrenswi.org](http://childrenswi.org).

# Chronic Disease

Chronic disease can significantly affect a family's health and well-being. While a variety of chronic conditions emerged as health issues for our community, Children's Wisconsin is focusing intentionally on two that are most prevalent for children and adolescents: asthma and oral health. When families lack access to high-quality, affordable health care, they are more likely to have unmet health needs that can lead to more missed school and work time and lower quality of life.

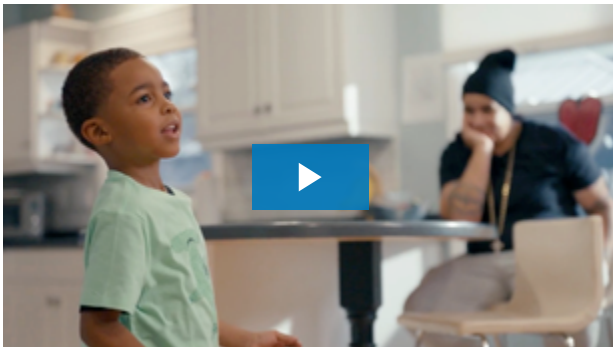


**AIM: ALL CHILDREN ARE FREE FROM CHRONIC CONDITIONS THAT IMPACT THEIR QUALITY OF LIFE AND ABILITY TO THRIVE.**



## **CHILDREN'S WISCONSIN WILL: STRATEGICALLY INVEST**

**Wisconsin Medical Dental Integration** is a care model that integrates dental hygienists into the primary care appointment to provide early dental prevention and intervention services. This model uses the medical visit, the primary care team and integrated dental hygienists to more equitably address the maternal and child dental needs. *Learn more:* [chawisconsin.org/initiatives/oral-health/wisconsin-medical-dental-integration](https://chawisconsin.org/initiatives/oral-health/wisconsin-medical-dental-integration).



**Children's Asthma Management Program (CHAMP)**, looks at a child's whole health by assessing their home and social needs. Identifying and managing asthma triggers can reduce the number of missed school days and emergency visits for care. *Learn more:* [childrenswi.org/find-care/asthma-allergy-immunology/asthma](https://childrenswi.org/find-care/asthma-allergy-immunology/asthma).

## **CHILDREN'S WISCONSIN WILL: PARTNER**

As a member of the Milwaukee Health Care Partnership, Children's Wisconsin care providers coordinate with **Housing is Health** to help families secure temporary housing, provide case management and aid in their ultimate transition to permanent housing stability. The program aims to address patient's housing needs to improve health outcomes, like asthma, and reduce Emergency Department visits, inpatient stays and readmissions. *Learn more:* [mkehcp.org/publication/housing-is-health-program-brief](https://mkehcp.org/publication/housing-is-health-program-brief).

## **CHILDREN'S WISCONSIN WILL: MONITOR OUTCOMES**

- Asthma-related Emergency Department visits
- Non-traumatic dental condition Emergency Department visits

# Infant and Early Childhood Health

Comprehensive infant health encompasses many factors through the first 1,000 days of life that can provide a child with the opportunity to be as healthy as possible. Safe, affordable housing, transportation and access to high-quality health care can shape the health and well-being of our youngest residents.



**AIM: ALL FAMILIES HAVE COMPREHENSIVE, EQUITABLE SUPPORT THROUGH THE FIRST 1,000 DAYS OF A CHILD'S LIFE.**

## CHILDREN'S WISCONSIN WILL: STRATEGICALLY INVEST

**Children's Wisconsin parent education and support services** are family-centered, culturally sensitive and strength-based to support positive child development, strengthen families, and promote safe and healthy environments. These programs focus on connections to clinical health services and social support. Care is delivered outside of clinical walls in home and community locations. Two examples of this are the Community Health Advocates and Community Connectors and the Triple P Positive Parenting Program.

**Community Health Advocates and Community Connectors** offer one-on-one support to empower parents to set goals and improve future outcomes and connect families with resources to help them make positive changes.

**Triple P Positive Parenting Program** helps families grow strong relationships by developing skills to manage stress, build new, healthy habits and support the child's whole health.



**Learn more:** [childrenswi.org/who-we-are/community-programs](https://childrenswi.org/who-we-are/community-programs).

## CHILDREN'S WISCONSIN WILL: PARTNER

In addition to providing clinical services, Children's Wisconsin collaborates with Milwaukee County coalitions and public agencies to support prenatal health, parenting skills and early child development that extend pediatric care beyond the hospitals into community settings.

## CHILDREN'S WISCONSIN WILL: MONITOR OUTCOMES

- Infant mortality
- Access to social supports and community resources
- Immunizations



### **Co-Creating Tools to Manage New Baby's Medical Care**

The Community Health Advocates in the Northeast Wisconsin area received a referral from the Children's Wisconsin NICU social work team. The family had just given birth to an infant receiving support in the NICU to assist with his eating challenges and navigate his genetic condition.

The Advocate contacted the family with a Spanish interpreter after they were discharged from the NICU and had scheduled a time to meet at their home. During the first visit, the mother shared information about their family and their son's genetic condition. The family was receiving services and support from a variety of Children's Wisconsin specialties and clinics, including: social workers, NICU, cardiology, physical therapy, neurology, GI and geneticists.

The family wanted to have printed medical information about their child's condition to ensure his medical care needs were met in the event of an emergency and asked for help gathering medical documentation from each of the specialists to have in a binder. Working with the NICU social work team, the Advocate helped gather the necessary documentation from each of the specialty doctors, provided financial assistance information to the family and shared information on public assistance programs they may be eligible for.

Through regular check-ins with the family, the Advocate reported the infant is gaining weight and being cared for at home with his family, thanks to the wraparound support of Children's Wisconsin.

# Mental and Behavioral Health

Kids across Wisconsin continue to struggle with anxiety, depression and behavioral problems. A family's financial stress, transportation challenges, unsafe living conditions or other factors can take a toll on a child's mental and behavioral health and make it even more difficult for families to get timely and regular access to care.



**AIM: EVERY CHILD RECEIVES THE RIGHT SUPPORT AT THE RIGHT TIME FOR THEIR DEVELOPMENTAL, MENTAL AND BEHAVIORAL WELL-BEING.**

## CHILDREN'S WISCONSIN WILL: STRATEGICALLY INVEST

**Mental Health Walk-in Clinics** are a first-of-its-kind in the state. The Milwaukee clinic is open seven days a week to provide immediate support to kids ages 5-18 with urgent mental health needs. Emergency cases are still referred to the hospital's Emergency Department and Trauma Center, where a behavioral health crisis team is available to help kids in crisis 24/7. In late 2025, Children's Wisconsin opened a Mental Health Walk-in Clinic in Green Bay to serve families in Northeast Wisconsin. **Learn more:** [childrenswi.org/medical-care/mental-and-behavioral-health/walk-in-mental-health-care](https://childrenswi.org/medical-care/mental-and-behavioral-health/walk-in-mental-health-care).



**Children's Wisconsin Mental and Emotional Health E-Learning** are fun and engaging programs that inspire kids and their families to lead healthier lives, both physically and emotionally. Offered to families and schools across Wisconsin at no cost, the Mental and Emotional Health programs meet national health education standards and were developed using evidence-based research and community input. **Learn more:** [childrenswi.org/elearningcenter/topics/mental-and-emotional-health](https://childrenswi.org/elearningcenter/topics/mental-and-emotional-health).

## CHILDREN'S WISCONSIN WILL: PARTNER

As a member of the Tri-County Community Health Improvement Coalition, Children's Wisconsin is partnering in Northeast Wisconsin to empower children and youth, families, schools and communities to create connections that are healthy, lasting and rooted in belonging, including mindful use of technology. Across Milwaukee County and the Northeast Wisconsin region, these partnerships focus on early identification, reducing barriers to care and connecting families to coordinated supports that strengthen children's emotional well-being.

## CHILDREN'S WISCONSIN WILL: MONITOR OUTCOMES

- Feeling sad or hopeless
- Sense of belonging at school
- Stress, anxiety rates

## A Safe Haven for Kids in Crisis

Abbi's parents knew something was off. At bedtime, the normally talkative 11-year-old was quiet and distant.

"I asked her if she was okay, but she didn't want to tell me about it," said Abbi's mom, "so I didn't push."

The next morning, Abbi's school alerted the family that her email communications were flagged. Abbi broke down and told her mom the disturbing story: a friend who was attempting suicide had been emailing her throughout the evening. Not only did she share details with Abbi — she encouraged Abbi to join her. Abbi wanted to help her friend but wasn't sure what to do. Her friend was later found unconscious.

Abbi needed professional mental health support to process the traumatic situation, but she didn't have a regular therapist. That's when her mom called the Milwaukee Mental Health Walk-In Clinic at Children's Wisconsin.

The first clinic of its kind in the state, the walk-in clinic provides children and teens with same-day mental and behavioral health care. The clinic's care is available without an appointment or referral, 7 days a week in Milwaukee, Kenosha and Green Bay, which serves Northeast and Central Wisconsin.

For Abbi and her family, the walk-in clinic was a lifeline at a difficult time. "From the moment we arrived, the staff was so kind and helpful. They really took care of us," said Abbi's mom. "We are so grateful to have this in our community."

"The clinic was exactly what Abbi needed that day," said Abbi's mom. "A therapist talked her through what happened, and it helped to know they were there for us."

"It was great talking to someone about all the things I was feeling," said Abbi. "We made a plan to get through the night and made a list of things I can control and things I should reach out to adults for help with."

The team also connected Abbi to the Behavioral Health Consultant at her Children's Wisconsin pediatrician's office, where Abbi received follow-up care.



# Safety and Violence

Every child deserves to be safe and secure from physical, mental and emotional harm. Unfortunately, that's not the reality for every young person in our community. Many social and environmental factors can affect safety, including family financial stress, adult substance abuse, adult mental health and neighborhood violence.



**AIM: EVERY CHILD IS SAFE FROM PHYSICAL, MENTAL AND EMOTIONAL HARM AT HOME, IN SCHOOL AND IN THE COMMUNITY.**

## CHILDREN'S WISCONSIN WILL: STRATEGICALLY INVEST

**Project Ujima** works to stop the cycle of violent crimes through crisis intervention and case management, social and emotional support, youth development and mentoring, mental health, and medical services for young people and their families who have been affected by violence. Project Ujima provides crime victim advocates,

nurses, mental health coordinators, and therapists who help patients and their families process the trauma they've experienced and connect them with resources and support. **Learn more:** [childrenswi.org/family-resources/parenting-resources/family-resource-centers/project-ujima](https://childrenswi.org/family-resources/parenting-resources/family-resource-centers/project-ujima).



### Supporting Students at School and Home

A student was experiencing behavior outbursts and receiving suspension after suspension as consequences of those actions. They missed 20% of school days — that's 20% less learning time than their classmates. They were also a frequent visitor to the school health room, and the Children's Wisconsin school nurse suspected that more was going on at home ...

[Read more >](#)

By focusing on daily empathy and collaboration, we saw a withdrawn student engage and a teaser become an advocate.

— Educator



**Children’s Wisconsin E-Learning Bullying Prevention** increases awareness about bullying among students, educators, and families and gives students the grade-appropriate skills they need to prevent and stop it, as well as providing resources for adults. These fun and engaging programs are offered at no cost to families and schools across Wisconsin. **Learn more:** [childrenswi.org/elearningcenter/topics/bullying-prevention](https://childrenswi.org/elearningcenter/topics/bullying-prevention).

**The Safety Center** provides education and resources to families to keep kids and teens of all ages safe from injury, with information on car and booster seats, teen driving, bikes and helmets, pedestrian safety, play and sports safety, fire safety and more, including Safe at Home, which addresses poisoning prevention and firearm safety. **Learn more:** [childrenswi.org/childrens-and-the-community/families-and-clients/safety-center](https://childrenswi.org/childrens-and-the-community/families-and-clients/safety-center).

### **CHILDREN’S WISCONSIN WILL: PARTNER**

Children’s Wisconsin is actively partnering with community organizations, the city of Milwaukee and Milwaukee County government agencies, and the Milwaukee Health Care Partnership to reduce youth gun violence in the community. We are also a partner in the Violence Response: Public Health and Safety Team multi-sector public health and public safety response. In both the Milwaukee County and Northeast Wisconsin regions, Children’s Wisconsin works closely with Child Advocacy Centers to prevent abuse, reduce violence and promote safe environments for children.

### **CHILDREN’S WISCONSIN WILL: MONITOR OUTCOMES**

- Bullying rates
- Firearm-related Emergency Department visits and deaths
- Suicide rates



## Conclusion

Children's Wisconsin is committed to doing everything we can to improve the health and well-being of our patients, families and communities. While this report does not encompass all our health system's substantial work, it demonstrates our commitment to addressing the child and adolescent health needs identified by the communities we serve. Each of these needs - chronic disease, infant health, mental and behavioral health, and safety and violence - are significant health priorities that require long-term work and strong partnerships. With the support of patients, families and community partners, we are making progress, and we won't give up until Wisconsin's kids are the healthiest in the nation.

## Acknowledgements

Children's Wisconsin acknowledges the subject-matter experts and leaders of each implementation area who shaped the content in each section and continue to move this work forward. The Community Health Needs Assessment and Implementation Strategy Advisory Group was also instrumental in prioritizing community health needs in alignment with Children's Wisconsin's strategy.

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