



Pali Momi Medical Center Implementation Strategy Plan

May 2013



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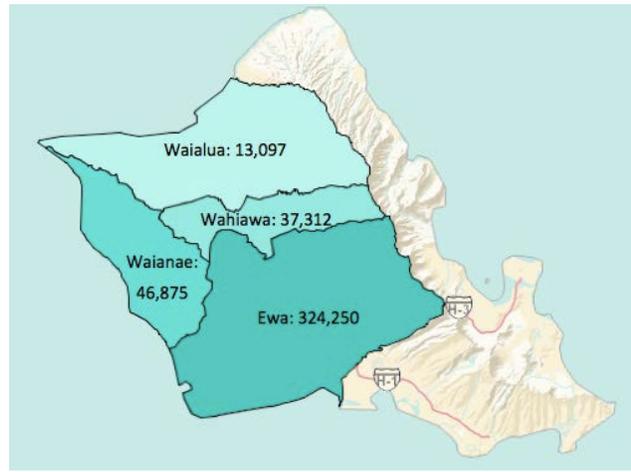
1 Introduction

Pali Momi Medical Center is pleased to share their Implementation Strategy Plan, which follows the development of the June 2013 Community Health Needs Assessment (CHNA). In accordance with requirements in the Affordable Care Act and IRS 990 Schedule H requirements, this Plan was approved by the Board of Directors for Pali Momi Medical Center on June 17, 2013.

2 Community Served by Pali Momi Medical Center

Pali Momi Medical Center’s hospital service area is defined by a geographical boundary of West Oahu, HI. The Census County Divisions (CCDs) of Ewa, Wahiawa, Waialua, and Waianae are included in the service area, which had an estimated population of 421,534 in 2007-2011. There is a heavy concentration of residents in the Ewa region, seen in Figure 1.¹ As measured by the decennial Census, West Oahu grew by 16.1% between 2000 and 2010, almost double the Honolulu County average of 8.8%. Ewa experienced the fastest growth in the decade, at 18.7%. Waialua was the only region that experienced a decrease in population.^{2,3}

Figure 1: Population by West Oahu CCD, 2007-2011



The median ages of the West Oahu CCDs range from 27.0 in Wahiawa to 35.6 in Ewa, making the region younger on average than the rest of Honolulu County, which has a median age of 37.7. The largest single race group in West Oahu is Asian at 41.8%, with the majority of the Asian population identifying as Japanese or Filipino. West Oahu has a larger Native Hawaiian/Other Pacific Islander population than the rest of the island; of this group, Native Hawaiians make up the largest share.¹

Figure 2: Ewa Subdivisions



Per capita income in West Oahu is lower than the Honolulu County average, at just \$26,410 vs. \$29,516 in 2006-2010. Within the region, Wahiawa and Waianae had the lowest income levels. Ewa, the most populous CCD in West Oahu and the home of many Pali Momi Medical Center patients, had the highest income levels, both when measured per capita and when measured by household. However, wealth is unevenly distributed across Ewa. Geographic subdivisions within Ewa are presented in Figure 2. Waipahu and Millilani had the lowest per capita income and highest levels of poverty in Ewa. Certain

race/ethnicity groups in West Oahu are also more affected by poverty: overall, the “Other” and Native Hawaiian or Other Pacific Islander populations had the highest poverty rates in 2006-2010. These two race/ethnic groups also had the highest poverty levels when considering

¹ U.S. Census Bureau, American Community Survey, 2007-2011 Estimates

² U.S. Census Bureau, 2000 Census

³ U.S. Census Bureau, 2010 Census

children, families, and adults over age 65. The two least impoverished groups overall were Asian and White.⁴

Compared to Honolulu County overall, a lower percentage of West Oahu residents have at least a high school degree or a bachelor's degree. Within Ewa, Waianae residents had the lowest levels of educational attainment at both the high school and college levels.⁴

Health Resources and Services Administration (HRSA), a federal agency of the U.S. Department of Health and Human Services, has designated Waianae as a Medically Underserved Area. Such a designation indicates that residents of this CCD encounter substantial barriers in accessing primary medical care due to a combination of demographics, socioeconomic factors, and provider shortages.

⁴ U.S. Census Bureau, American Community Survey, 2006-2010 Estimates

3 Community Benefit Planning Process

3.1 HAH Advisory Committee and Development of CHNA

The state of Hawaii is unique in that all of its community hospitals and hospital systems joined efforts to fulfill new requirements under the Affordable Care Act, for which the IRS developed guidelines to implement. The Healthcare Association of Hawaii (HAH) led this collaboration to conduct state- and county-wide assessments for its members.

Twenty-six Hawaii hospitals, including Pali Momi Medical Center, participated in the collaborative HAH CHNA project. The CHNA process has been informed by hospital leaders and other key stakeholders from the community who constitute the Advisory Committee. Following the development of a Honolulu County CHNA, Pali Momi Medical Center contracted with Healthy Communities Institute to develop a CHNA report focused on the hospital's West Oahu service area. <http://www.palimomi.org/docs/pali-momi-chna.pdf>

3.2 Pali Momi Medical Center Community Benefit Team

Pali Momi Medical Center established an internal community benefit team composed of eight staff members to guide the CHNA process, develop the Implementation Strategy, and support the hospital's community health improvement plans. The team consists of:

- Chief Executive Officer
- Vice President Patient Services, Chief Nurse Executive
- Chief Medical Officer
- Financial Partner
- Director of Case Management
- Director of Philanthropy
- Director of Cardiac Services
- Director of Quality and Patient Safety

This newly formed team's goal is to continue to refine and expand the impact of the hospital's community benefit activities. The Community Benefit team has access to and a reporting relationship with the Pali Momi Medical Center and Hawaii Pacific Health Boards of Directors.

Pali Momi Medical Center contracted with Healthy Communities Institute to work with the hospital community benefit team to develop the Implementation Strategy.

3.3 Areas of Need

The CHNA identified 20 topic areas of need in Honolulu County. The needs assessment looked at health broadly and considered a wide array of health and quality of life of data.

Access to Health Services	Exercise, Nutrition, & Weight	Mental Health & Mental
Cancer	Family Planning	Disorders
Diabetes	Heart Disease & Stroke	Older Adults & Aging
Disabilities	Immunizations & Infectious	Oral Health
Economy	Diseases	Respiratory Diseases
Education	Injury Prevention & Safety	Social Environment
Environment	Maternal, Fetal & Infant	Substance Abuse & Lifestyle
	Health	Transportation

3.4 Priorities

On March 26, 2013, the Pali Momi Medical Center community benefit team used the Nominal Group Planning Process, facilitated by Healthy Communities Institute, to prioritize the identified needs from the assessment. Two priorities were selected and are the focus of the three-year Implementation Strategy:

1. Heart Disease and Stroke
2. Exercise, Nutrition and Weight

The group used the following criteria for selecting priorities:

- Magnitude/Severity of problem
- Opportunity to intervene at prevention level
- Alignment with Pali Momi Medical Center’s mission/strengths/programs
- Opportunity for partnership
- Solution could impact multiple problems
- Feasibility of change
- Importance of problem to community

3.4.1 Validation of Priorities

Pali Momi Medical Center shared and obtained feedback on the selected priorities through interviews, conducted by HCI, with two key public health stakeholders: Hawaii Department of Health Director Loretta Fuddy, and Kamehameha Schools CEO Dee Jay Mailer.

3.4.2 CHNA Areas of Need not Addressed

The following areas of need identified from the CHNA will not be addressed in this Implementation Strategy Plan.

Access to Health Services	Family Planning	Older Adults & Aging
Cancer	Immunizations & Infectious	Oral Health
Diabetes	Diseases	Respiratory Diseases
Disabilities	Injury Prevention & Safety	Social Environment
Economy	Maternal, Fetal &	Substance Abuse & Lifestyle
Education	Infant Health	Transportation
Environment	Mental Health & Mental	
	Disorders	

These needs were not selected because they are beyond Pali Momi Medical Center’s current community benefit resource capacity and/or areas of expertise.

4 Implementation Strategy

4.1 Strategy 1: Increase access to heart disease and stroke risk factor education and screening tests

Priority Area: Heart Disease and Stroke

Goal: Increase access to and availability of screening tests for heart disease and chronic disease risk factors for all residents, including residents from Waianae and low socioeconomic status (SES) geographies.

Activities

- Pali Momi Annual Health Fair: Free annual event that provides heart and chronic disease education, screening, and follow-up recommendations for attendees. The events are held in partnership with the American Heart Association, the American Cancer Association, and the Honolulu Police Department.
- Heart Disease Risk Factor Screening at the Pearlridge Shopping Center: Pali Momi medical staff provide free weekly blood pressure and diabetes screening for the community.
- Women's Center Speaker Series: Free speaker series that focuses on heart disease and other related chronic disease in women. The events are offered at the Ala Moana Conference Center and are also broadcast from a West Oahu hotel and VTC to enable wide-scale participation.
- American Heart Association Heart Walk and Screening: Annual event held in partnership with the American Heart Association to provide heart disease, stroke, and diabetes screening and risk factor education for men and women. Cardiologist consultations are offered on site through the "Ask a Doc" service.
- Kids Fest: Annual event that provides children with hands-on health and wellness workshops, with a focus on healthy, active lifestyles as well as exercise and nutrition. Children's physicals are offered on-site.

4.2 Strategy 2: Increase community capacity to provide emergency response to cardiac events

Priority Area: Heart Disease and Stroke

Goal: Increase community capacity to provide emergency response through CPR trainings, especially in rural communities and in communities with limited access to emergency responders.

Activities

- Offer CPR training for local high school students, especially in the Waianae and Waipahu communities, through a pilot program created in partnership with area high schools, American Heart Association, and local firefighters and emergency responders.

4.3 Strategy 3: Increase Physical Activity

Priority Area: Exercise, Nutrition, and Weight

Goal: Increase physical activity to improve health and help prevent chronic disease.

Activities

- Walking Path Development: Continue planning with community partners to create new walking paths in the community.
- Community Exercise Classes: Increase physical activity opportunities through free exercise classes; identify community partners with appropriate physical space to offer exercise classes in multiple locations.

4.4 Strategy 4: Reduce Obesity

Priority Area: Exercise, Nutrition, and Weight

Goal: Reduce obesity, one of the root causes of chronic disease.

Activity

- Weight Loss Class: Provide 12-week weight loss class to overweight or obese residents.

4.5 Strategy 5: Increase community health education opportunities on optimum exercise, nutrition and weight

Priority Area: Exercise, Nutrition, and Weight

Goal: Increase community health education opportunities for learning about optimum exercise, nutrition, and weight to positively impact individual and community lifestyle patterns.

Activities

- Nutrition Education Program: Explore partnering with local schools, community colleges, farms, and community health centers to provide education and cooking demonstrations on healthy eating, especially for Waianae residents.
- Women's Center Speaker Series: Provide education on nutrition and wellness through this free speaker series. The events are offered at the Ala Moana Conference Center and are also broadcast from a West Oahu hotel and VTC to enable wide scale participation.

4.6 Strategy 6: Evaluate community benefit activities and assess new opportunities for community health improvement

Priority Areas: *Heart Disease and Stroke; Exercise, Nutrition, and Weight*

Goal: Refine the implementation strategy through the exploration of new programs, enhancements to current programs, and new partnerships that can expand the impact of Pali Momi Medical Center's community health improvement efforts.

Activities

Pali Momi Medical Center plans to evaluate current community benefit programs and externally explore new program opportunities and partnerships that:

- Align with at least one of Pali Momi Medical Center's selected priorities of Heart Disease and Stroke and Exercise, Nutrition, and Weight.
- Are evidence-based or evidence-informed approaches to improving health in the community.