

## Kapiolani Medical Center for Women and Children Implementation Strategy Plan

May 2013





## **Table of Contents**

1	Introduction	1
2	Community Served by Kapiolani Medical Center for Women and Children.	2
3	Community Benefit Planning Process	3
3.1	HAH Advisory Committee and Development of CHNA	
3.2	Kapiolani Medical Center for Women and Children Community Benefit Team	
3.3	Areas of Need	3
3.4	Priorities	4
3	.4.1 Validation of Priorities	
	.4.2 CHNA Areas of Need not Addressed	
4	Implementation Strategy	5
4.1	Strategy 1: Increase the capacity of Hawaii's professional medical workforce through	
me	lical residency and education programs	5
4.2	Strategy 2: Increase access to and availability of specialty medical care for women and	
chil	dren	5
4.3	Strategy 3: Increase child passenger safety	6
4.4	Strategy 4: Improve diabetes management among high-risk women	6
4.5	Strategy 5: Evaluate community benefit activities and assess new opportunities for	
com	nmunity health improvement	6





## **1** Introduction

Kapiolani Medical Center for Women and Children's 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 Boards of Directors for Kapiolani Medical Center for Women and Children and Hawaii Pacific Health on June 19, 2013.





## 2 Community Served by Kapiolani Medical Center for Women and Children

Kapiolani Medical Center for Women and Children serves the health needs of women and children living in the State of Hawai'i and the Pacific Basin.

As measured by the decennial Census, the population of children under age 18 in the State of Hawaii grew from 295,767 in 2000 to 303,818 in 2010. This change of 2.7% is greater than the growth of the under-18 population in the U.S. overall (2.6%). The population of women over age 18 in the State of Hawaii also grew faster than the national average of 11.6% between the measurements of the 2000 Census and 2010 Census, from 459,324 to 531,252 (15.7%).<sup>1,2</sup>

Children of mixed race make up 41.9% of the under-18 population in Hawaii, over seven times higher than the national average of 5.6%. Higher proportions of children are also of Asian or Native Hawaiian or Other Pacific Islander descent in Hawaii compared to the U.S. Only 16.3% of children under age 18 in Hawaii are White only, compared to 68.2% of children nationwide. Of the female 18-and-over population in Hawaii, 23.3% report a race of White only, compared to 66.7% of adult women nationwide. Black or African American, Hispanic or Latino, and Other race/ethnicity groups are also much smaller than the U.S. overall, among both women and children. Among women ages 18 and over in Hawaii, the largest single race/ethnicity group represented is Asian, at 41.7%—almost ten times higher than the national average of 4.5%. Higher proportions of women also report mixed race or Native Hawaiian or Other Pacific Islander heritage compared to the nation.<sup>3</sup>

Based on federal poverty levels, the poverty rate among children in the state (13.6%) is 32% lower than the national average of 20.0%; the poverty rate for women ages 18 and over is 26% lower in Hawaii (10.5%) than the national average (14.2%). However, it is important to note that federal definitions of poverty are not geographically adjusted so the data may not adequately reflect the proportion of Hawaii residents who struggle financially due to the high cost of living in the state. Compared across genders, women in Hawaii experience higher levels of poverty than men in the state. Certain race/ethnicity groups are also more affected by poverty. American Indian/Alaska Native and Native Hawaiian/Other Pacific Islander children have the highest poverty rates. Of women ages 18 and over, those reporting a race/ethnicity of Other Race and American Indian/Alaska Native have the highest poverty rates. The two least impoverished groups among both women and children are Asian and White.<sup>4</sup>

Women in Hawaii are well educated compared to the rest of the nation, as measured by proportions of female residents ages 25 and over with at least a high school degree or at least a Bachelor's degree.<sup>4</sup>

Health Resources and Services Administration (HRSA), a federal agency of the U.S. Department of Health and Human Services, has designated the majority of the State of Hawaii either being Medically Undeserved Areas or as having Medically Underserved Populations. Such designations indicate many Hawaii residents encounter provider shortages and/or economic, cultural, and linguistic barriers when trying to access primary medical care services.

<sup>&</sup>lt;sup>4</sup> U.S. Census Bureau, American Community Survey, 2007-2011 Estimates



<sup>&</sup>lt;sup>1</sup> U.S. Census Bureau, 2000 Census

<sup>&</sup>lt;sup>2</sup> U.S. Census Bureau, 2010 Census

<sup>&</sup>lt;sup>3</sup> U.S. Census Bureau, American Community Survey, 2011 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, 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 across the state of Hawaii participated in the CHNA project. The CHNA process has been informed by hospital leaders and other key stakeholders from the community who constitute the Advisory Committee. A CHNA for the state of Hawaii was one of the outcomes of the collaborative CHNA process. The CHNA for Kapiolani Medical Center for Women and Children further customized the statewide CHNA to include data highlighting the needs of women and children in Hawaii. http://www.kapiolani.org/docs/kapiolani-chna.pdf

#### Kapiolani Medical Center for Women and Children Community 3.2 **Benefit Team**

Kapiolani Medical Center for Women and Children established an internal community benefit team composed of seven staff members to guide the Community Health Needs Assessment process and develop the Implementation Strategy to support the hospital's community health improvement plans. The team consists of:

- Chief Executive Officer
- Executive Director of Pediatric Service Line
  Chief Medical Officer of Kapiolani Medical
- Vice President and Chief Nurse Executive
- Vice Presidents of Hospital Operations (2)
- Specialists
- Director Financial Planning

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 Kapiolani Medical Center for Women and Children and Hawaii Pacific Health Boards of Directors.

Kapiolani Medical Center for Women and Children contracted with Healthy Communities Institute to work with the hospital community benefit team to develop the Implementation Strategy Plan.

## 3.3 Areas of Need

The CHNA identified 20 topic areas of need for women and children in the State of Hawaii. The needs assessment looked at health broadly and considered a wide array of health and quality of life 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 25, 2013, the Kapiolani Medical Center for Women and Children 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. Access to Health Services
- 2. Maternal, Fetal and Infant Health

The group used the following criteria for selecting priorities:

- Magnitude/Severity of problem
- Opportunity to intervene at prevention level
- Alignment with Kapiolani Medical Center for Women and Children'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

Kapiolani Medical Center for Women and Children shared and obtained feedback on the selected priorities through interviews, conducted by HCI in April 2013, with three key public health stakeholders: Hawaii Department of Health Director Loretta Fuddy, Kamehameha Schools CEO Dee Jay Mailer, and Hawaii Primary Care Association CEO Beth Geisting.

#### 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.

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

The above were not selected because they were not identified as the highest priority for community benefit needs.





## 4 Implementation Strategy

# 4.1 Strategy 1: Increase the capacity of Hawaii's professional medical workforce through medical residency and education programs

#### Priority Area: Access to Health Services

*Goal:* Provide general and specialty medical training opportunities in Hawaii through the medical residency and medical professions training programs to increase local healthcare capacity.

#### **Activities**

- Physician Medical Residency Program: Provide medical residency training opportunities in general medicine and medical specialties in partnership with the University of Hawai'i, John A. Burns School of Medicine and Tripler Army Medical Center.
- Medical and Nursing Student Training Programs: Provide clinical training for medical and nursing students.
- Allied Health Professionals and Technician Training: Provide clinical training in partnership with the Universities, Community Colleges and Technical schools.
- Summer Student Intern Program: Provide career learning opportunities for local high school and college students pursuing careers in the health professions.
- Summer Student Research Program: Provide medical research opportunities for college students.

# 4.2 Strategy 2: Increase access to and availability of specialty medical care for women and children

#### Priority Area: Access to Health Services

*Goal:* Increase access to and availability of quality specialty medical care and services, not otherwise available to the community.

#### Activities

- Breast and Cervical Cancer Control Program: Comprehensive program that provides breast and cervical cancer screening and outreach for women. This initiative employs an integrated public health model that incorporates professional and public education efforts, partnerships with community groups and coalitions, case follow-up, disease outcomes tracking, and evaluation. This program is provided in partnership with the Chronic Disease Management and Control Branch of the Hawaii State Department of Health.
- Hawaii Community Genetics Program
- OB-GYN Clinic
- Pediatric Oncology
- Pediatric Specialty Care
- Medical Transport Services: Provides critical pediatric and neonatal interhospital transport services for the State of Hawaii; includes travel across Oahu, neighbor islands, and to the mainland.





### 4.3 Strategy 3: Increase child passenger safety

#### Priority Area: Maternal, Fetal and Infant Health

*Goal:* Educate parents and caregivers on proper child passenger restraints and provide safety equipment to prevent child injuries and mortality.

#### **Activities**

- Provide education and training on safe child passenger restraints at the hospital and at community health fairs.
- Assist parents and caregivers in acquiring needed safety equipment, through a partnership with the Hawaii Department of Transportation, Keiki Injury Prevention Coalition, and the Hawaii Department of Health.

### 4.4 Strategy 4: Improve diabetes management among high-risk women

#### Priority Areas: Maternal, Fetal and Infant Health; Access to Health Services

*Goal:* Manage diabetes in high-risk women with gestational diabetes or postpartum diabetes through intensive education and counseling on optimum management to improve health outcomes of mothers and babies.

#### Activity

• Sweeter Choice Diabetic Intervention Program: Provides comprehensive education, counseling, and support on diabetes prevention and management for high-risk women.

## 4.5 Strategy 5: Evaluate community benefit activities and assess new opportunities for community health improvement

#### Priority Areas: Maternal, Fetal and Infant Health; Access to Health Services

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

#### **Activities**

Kapiolani Medical Center for Women and Children plans to evaluate current community benefit programs and externally explore new program opportunities and partnerships that:

- Align with at least one of Kapiolani Medical Center for Women and Children's selected priorities of Access to Health Services and Maternal, Fetal and Infant Health.
- Are evidence-based or evidence-informed approaches to improving health in the community.

