

# Priority #1: Prevention, Education and Services to Address High Mortality Rates, Chronic Diseases, Preventable Conditions and Unhealthy Lifestyles

## Rationale:

As noted within the HAH 2016 Community Health Needs Assessment, prevention, education and services to address high mortality rates, chronic diseases, preventable conditions and unhealthy lifestyles is needed significantly within the community. In 2009, a slightly smaller proportion of adults engaged in regular physical activity in Honolulu County (52.1%) than Hawaii overall (53.2%). Many teens and young teens also failed to meet physical activity guidelines. Many adults and teens in Honolulu County do not meet recommendations for fruit and vegetable consumption. In 2013, only 16.4% of adults and 15.1% of teens consumed five or more servings of fruits and vegetables daily, and 24.6% of adults ate less than one serving of vegetables per day. Among public high school students, 16.7% drank non-diet soda at least once per day in 2013, compared to 15.8% in Hawaii overall. A key informant stressed the importance of proximity to healthy food choices, and praised farmers markets for their positive impact on access to nutritious foods. Multiple key informants identified the related issues of obesity and diabetes as major health concerns in Honolulu County, and one suggested both conditions needed to be addressed in a community setting. In 2012, 28.5% of Medicare beneficiaries in the county were treated for diabetes, indicating a high prevalence among Honolulu County's Medicare population relative to other U.S. counties. The rate of lower-extremity amputation, often an indication of poorly managed diabetes, was also higher in Honolulu County compared to Hawaii (18.7 vs. 17.4 per 100,000 population) as of 2011. Rates of hospitalization due to long-term complications of diabetes were also relatively high, 89.7 per 100,000 population compared to the state's 82.8 hospitalizations per 100,000 population in 2011. In 2013, only 46.7% of diabetic adults in Honolulu County took a course in diabetes self-management, failing to meet the Healthy People 2020 target of 62.5%. A crucial part of managing diabetes is testing, as controlling blood glucose levels helps delay diabetic complications, such as eye disease, kidney disease, and nerve damage. The glycosylated hemoglobin (HbA1C, or A1c) test allows health providers to see how well blood glucose levels were controlled in the previous few months. Overall, Honolulu County did not meet 12 of the 16 Healthy People 2020 Goals for Heart Disease and Stroke, indicating that this is a health area in need of improvement. In 2011, 17.7 adults per 100,000 in Honolulu County were hospitalized for angina without a cardiac procedure, which was higher than the rate for Hawaii overall, 16.7 hospitalizations per 100,000 population. Hospitalizations for heart failure were also high for the county, at 285.8 hospitalizations per 100,000, compared to the state's 267.4 hospitalizations per 100,000. The prevalence of stroke is slightly higher among Honolulu County's adult and Medicare populations compared to Hawaii's: 2.8% of the county's adult population experienced a stroke in 2013, compared to 2.7% of the state, and 3.9% of the county's Medicare population were treated for a stroke in 2012, compared to 3.7% of the state's Medicare population.

## Objective:

*Increase healthy lifestyle education and prevention resources at the hospital and in the community*

Action Steps	Key Results (As Appropriate)
1.A. WGH will continue to participate in health fairs to promote the hospital's services, such as telestroke services, as opportunities arise.	WGH continues to participate in local health fairs and community events
1.B. WGH staff members are involved in various community endeavors such as cleaning up homeless camps, providing injury prevention materials to the community, etc.	Multiple staff volunteer for these events
1.C. WGH will continue to donate medical supplies for a doctor who provides medical care for surf contests on the North Shore.	Discontinued due to regulatory and compliance considerations
1.D. WGH will continue to provide space for support groups in the community to gather and enjoy light refreshments, such as a local hemodialysis support group, diabetes support group, and caregiver support group.	WGH continues to provide room use for Dialysis monthly meetings

1.E. The WGH Cafeteria will continue to provide food for the homeless population and donate food to that population on an annual basis.	Annual event continues
1.F. WGH is available to speak at any community events, provide information, or participate in other educational opportunities upon request.	Various leaders have made presentations at multiple events and this will continue
1.G. WGH will continue to provide staff representation at various conferences focused around its patient population's needs, such as Medicare Compliance and CMS conferences and workshops, and will also provide staff representation at local town hall meetings to represent the hospital and assess what the most current needs of the community are.	Various staff have attended multiple meetings and this will continue
1.H. WGH will continue to provide education funds for nursing staff to attend conferences on the island.	Ongoing
1.I. WGH staff members will continue to participate in the state department of health's Healthcare Associated Infection coalition and advisory committee.	Continue to attend monthly
1.J. WGH will continue to provide nursing staff as first aid nurses for various community events.	As able and within licensing and regulatory guidelines
1.K. WGH will continue to provide information on smoking cessation, as well as signage around the hospital to promote smoking cessation.	Each patient receives information.
1.L. WGH will continue to provide both ACLS (Advanced Cardiac Life Support), BLS (Basic Life Support), and infant stability classes for the community. WGH also provides Pediatric Advanced Life Support (PALS) courses to both internal employees and outside participants looking to be certified.	Continuous-monthly for internal/external participants
1.M. WGH offers the flu vaccination free of charge for employees.	Annual flu vaccine campaign (approx. 400 vaccines provided this year)
1.N. WGH offers a promotional discount for employees at the local 24 Hour Fitness.	Not at this time
1.O. WGH will continue to promote the Walk with a Doc events where local physicians walk around the community park during the weekend to promote healthy lifestyles.	Continues to support and promote

## Priority #2: Access to Primary Care Services and Providers

### Rationale:

As noted in the 2016 HAH Honolulu County Community Health Needs Assessment, access to primary care services and providers is a significant need in the community. In 2012, there were few practicing Doctors of Osteopathic Medicine (DOs) in Honolulu County, at just 3.5 DOs per 100,000 population, compared to the state ratio of 4.2 DOs for every 100,000 population. One key informant attributed the physician shortage to low reimbursement rates and difficulty in claiming Medicaid and Medicare payments. Another discussed how physician shortages particularly impact indigent patients. Utilization of certain preventive services among older men and women in Honolulu County falls below Hawaii averages and the Healthy People 2020 targets. For adults aged 65 and older, these services include a flu shot in the past year, a pneumonia vaccination, and either a colonoscopy/sigmoidoscopy in the past 10 years or a fecal occult blood test in the past year, plus a mammogram in the past two years for women. 39.1% of women and 40.0% of men aged 65 and older in Honolulu County received these preventive services in 2013, compared to the Healthy People 2020 target of 44.6%. In 2013, teens and young teens (together representing grades 6-12) in Honolulu County did not meet the Healthy People 2020 targets for the percentage receiving a physical in the past year. A key informant identified a need for more education on the difference between preventive and emergency care, especially for low-income individuals for whom the cost of an ED visit is especially burdensome. The informant elaborated that the ED is sometimes used for preventive services that could be accessed through other, less expensive means. Residents of Pacific Islander and Native Hawaiian descent face substantially greater challenges in accessing health services, as measured by two indicators: adults without health insurance, and adults who did not see a doctor due to cost in the past year. A high proportion of Filipino residents also reported not being able to see a doctor due to cost.

### Objective:

*Participate in initiatives and create opportunities to increase access to primary care services and providers within the defined service area of the hospital*

Action Steps	Key Results (As Appropriate)
2.A. WGH will continue to recruit hospitalists.	No longer necessary with our present hospitalist group contract with MPH
2.B. WGH Clinical Educators will continue to mentor local students interested in pursuing education and future careers in providing health care services within occupational therapy and physical therapy assistant programs.	Continues
2.C. WGH will continue to offer scholarships to high school students that are interested in medical careers.	Continues but this is in collaboration with Hawaii Emergency Physicians Associated (HEPA)
2.D. The WGH Wahiawa Nursing & Rehab Center (WNRC) works with local schools for physical therapy assistants and the hospital works with local schools for social work programs.	Continues with PTA students and MSW students
2.E. WGH will continue to offer a volunteer program for local students during the summer time that need community service hours.	Ongoing, based Activities Staff resources

## Priority #3: Access to Specialty Care Services and Providers

### Rationale:

As identified from the data within the HAH Honolulu County 2016 Community Health Needs Assessment, there is a need for increased access to specialty care services and providers in the community. Key informants mentioned a lack of specialist providers that are able to take on new patients. Key informants reported seeing increasingly more of Honolulu County's older residents with behavioral health needs and complex medication requirements. Additionally, a growing number are unable to afford the cost of medications due to insufficient insurance coverage. Several key informants commented on the lack of programs available for developmental disabilities. They noted the need for more screening in children, especially in rural areas and in low-income populations. Indicators of women's preventive care show that Honolulu County must improve in order to meet Healthy People 2020 targets, especially in regards to preventive services for older women and Pap smears among adult women ages 18-64. Incidence of breast cancer in 2007-2011 was also high in the county at 131.4 cases/100,000 females, compared to 126.0 cases/100,00 females statewide and 122.7 cases/100,000 females nationwide. Although Honolulu County compares well against the state and Healthy People 2020 target, cervical cancer death rates are trending poorly.

### Objective:

*Participate in initiatives and create opportunities to increase access to specialty care services and providers within the defined service area of the hospital*

Action Steps	Key Results (As Appropriate)
3.A. WGH provides space for rotating specialists to reduce the hardship of transportation on local residents and patients.	Ongoing with 5 specialties represented
3.B. WGH maintains several affiliation agreements with nursing, rehabilitation, respiratory, LPN, CNA, and radiology programs within the area for students to rotate through the hospital.	Ongoing
3.C. WGH staff members are involved in many organizations and agencies, such as the Disaster Medical Assistance Team of Hawaii and the Association for Prevention and Infection Control (APEC) Hawaii Chapter.	Yes, Chief Nursing Officer (CNO) and Infection Preventionist (IP) RN
3.D. WGH will continue to provide patients' other physicians with a copy of their discharge summaries upon request.	Ongoing
3.E. WGH will continue to place follow up phone calls for discharged patients.	Ongoing
3.F. WGH will continue to provide space for and participate in blood drives a few times per year for employees and community members to donate blood.	Yes - quarterly
3.G. WGH maintains a program with Pali Momi to expedite transfers of heart patients who may require a higher level of care.	WGH recently created a formal transfer agreement with Queen's Health for cardiac Patients

## Priority #4: Access to Affordable Care and Reducing Health Disparities Among Specific Populations

### Rationale:

As noted within the HAH Honolulu County 2016 Community Health Needs Assessment, access to affordable care and reducing health disparities among specific populations are significant needs within the community. Although Honolulu County performs well on indicators of insurance coverage, key informants identified other significant access and affordability issues, including the high cost of prescription refills and home health coverage gaps on some insurance plans. Even among insured residents, the cost of co-pays can be burdensome, and their insurance plans may not meet their health needs. The insured may also be unaware of services available to them, experience long wait times for appointments, or delay seeking care until their health issues worsen.

### Objective:

*Participate in initiatives and create opportunities to increase access to affordable care and reduce health disparities among specific populations*

Action Steps	Key Results (As Appropriate)
4.A. WGH will provide space for Medicaid Outreach Workers who assist with patients and community residents in getting qualified for Medicaid, and will compensate the worker based on the number of referrals.	Ongoing
4.B. WGH provides an indigent medication policy, which provides medications – depending on the duration (i.e., 7 day, 30 day supply) – for those who are not able to afford the prescription, or have not yet enrolled under Medicaid coverage, if applicable.	Ongoing
4.C. WGH provides transportation assistance through bus vouchers on a limited basis.	Yes, through donations from WGH Foundation
4.D. WGH tracks the number of homeless patients that present to the Emergency Department.	Ongoing
4.E. WGH offers telestroke services in partnership with Queens Health System.	Continuous and received Gold Plus Award for this program
4.F. WGH provides space for EMS to utilize facilities, as well as parking lot space for EMS transportation. EMS personnel have access to a sleep facility, shower, bathrooms, and food and refreshments.	Ongoing
4.G. WGH offers its owned nursing home, WNRC, to increase access to care for those requiring nursing home housing or facilities.	Ongoing, currently with 93 beds
4.H. With both hospital patients and nursing home residents, WGH offers payment plan education and financial education through a staffed liaison and financial counselor.	Ongoing
4.I. WGH provides translation services through a language line when necessary.	Ongoing with 2 companies

4.J. WGH WNRC staffs two social workers who connect patients with resources in the community in connection with the Going Home Plus program and other case management agencies within the community.	Ongoing
4.K. WGH hosts an in-house school supply drive in the fall for students within the area in need of supplies, as well as various other donation drives – such as eye glasses and food drives – when possible.	Yes, yearly
4.L. WGH will participate in community health fairs to provide education as opportunities arise.	Ongoing
4.M. WGH WNRC will participate in local senior health fairs to provide marketing materials and promote the facility to local residents.	Yes
4.N. WGH will continue to provide staff volunteers at the local YMCA Healthy Kids Fair to provide education on hygiene and infection control to local families on an annual basis.	Annually-Infection Preventionist RN attends
4.O. WGH Emergency Response personnel will continue to provide various health screenings and exams for Child Protection Services (CPS) foster children.	Ongoing

## Priority #5: Access to Mental Health Services and Providers

### Rationale:

As noted in the 2016 HAH Honolulu County Community Health Needs Assessment, access to mental health services and providers is noted as a significant need in the community. Key informants identified a shortage of psychiatrists and mental health care providers as an area of need. One key informant specifically identified the need for an additional psychiatric hospital to meet demand. The Health Resources and Services Administration (HRSA) has designated areas where there are 30,000 or more individuals per psychiatrist as Mental Health Health Professional Shortage Areas (Mental Health HPSAs). By these criteria, a portion of the North Shore is identified as a Mental Health HPSA. It is important to note that the HPSA metric does not account for higher need for services among specific populations, such as low-income residents, in its analysis. Multiple key informants also noted a shortage of psychiatrists in Honolulu County, and Medicaid payments are a contributing factor – the reimbursement process has become increasingly bureaucratic and difficult. Multiple key informants expressed concern over insufficient psychiatric beds; private in-patient beds in Honolulu County are plentiful, but public beds are not. Another key informant highlighted the need for better population-based mental health data to improve understanding of the disease burden. In terms of services, there are insufficient levels of care for different populations. Severely mentally ill patients can only access state hospital services if they are in a crisis and commit a crime first. The mentally ill are not receiving the necessary wraparound services to prevent repeated behaviors and problems. Key informants identified a need for more mental health resources tailored for children and adolescents, such as autism programs, behavioral health programs, and improved care following release from the ER for suicide attempts. There is also a need to improve care coordination, social support, and early intervention for families with a child who has complex medical needs. With regards to substance abuse, in 2013, almost one in three Honolulu County public high school students were offered, sold, or given illegal drugs on school property. In 2012, 6.0% of adults in Honolulu County reported drinking and driving at least once in the past 30 days, compared to 5.9% of adults in the state and 1.8% of adults nationwide. In June 2015, Hawaii raised the smoking age to 21, becoming the first U.S. state to do so.

### Objective:

*Participate in initiatives and create opportunities to increase access to mental health services and providers in the service area*

Action Steps	Key Results (As Appropriate)
5.A. WGH Emergency Room staff will address patients who present to the Emergency Room with a mental or behavioral health condition by connecting those applicable patients with available services within the community.	WGH ED staff continue to serve this population while WGH works with DOH to build a more comprehensive program
5.B. WGH will continue to provide access to the in-house Behavioral Health Unit and Geropsych Unit (patients cannot be younger than 63 years to qualify for the program).	Unit closed in 2017. Soon to reopen as a Mental Health/Substance Abuse program
5.C. WGH will continue to provide suicide prevention educational materials within the Emergency Department.	Ongoing
5.D. WGH provides a list of resources available to patients requiring specialized care with regards to sexual assault or domestic abuse.	Ongoing
5.E. WGH staffs a contracted psychologist for the hospital and the WNRC.	Has been ongoing, however presently recruiting for a replacement for this service