



# 2016 Implementation Strategy Report for Community Health Needs

Kaiser Foundation Hospital Honolulu  
License #31-H

Approved by KFH Board of Directors  
March 16, 2017

To provide feedback about this Implementation Strategy Report,  
email [chna-communications@kp.org](mailto:chna-communications@kp.org)

**Kaiser Foundation Hospitals  
Community Health Needs Assessment (CHNA)  
Implementation Strategy Report  
2016**

Kaiser Foundation Hospital – Honolulu

License #31-H

3288 Moanalua Road  
Honolulu, HI 96819

**I. General Information**

Contact Person:	Joy Barua, MBA, MA-OC, Managing Director Community Benefit, Community Relations and Health Policy
Date of Written Plan:	December 9, 2016
Date Written Plan Was Adopted by Authorized Governing Body:	March 16, 2017
Date Written Plan Was Required to Be Adopted:	May 15, 2017
Authorized Governing Body that Adopted the Written Plan:	Kaiser Foundation Hospital/Health Plan Boards of Directors
Was the Written Plan Adopted by Authorized Governing Body On or Before the 15 <sup>th</sup> Day of the Fifth Month After the End of the Taxable Year the CHNA was Completed?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Facility's Prior Written Plan Was Adopted by Organization's Governing Body:	December 4, 2013
Name and EIN of Hospital Organization Operating Hospital Facility:	Kaiser Foundation Hospitals, 94-1105628
Address of Hospital Organization:	One Kaiser Plaza, Oakland, CA 94612

## II. About Kaiser Permanente

Kaiser Permanente is a not for profit, integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and The Permanente Medical Groups. For more than 65 years, Kaiser Permanente has been dedicated to providing high-quality, affordable health care services and to improving the health of our members and the communities we serve. Today we serve more than 10.2 million members in eight states and the District of Columbia. Since our beginnings, we have been committed to helping shape the future of health care. Kaiser Permanente is dedicated to care innovations, clinical research, health education and the support of community health.

## III. About Kaiser Permanente Community Benefit

We believe good health is a basic aspiration shared by all, and we recognize that promoting good health extends beyond the doctor's office and the hospital. Like our approach to medicine, our work in the community takes a prevention-focused, evidence-based approach. We go beyond traditional corporate philanthropy or grant-making to leverage financial resources with medical research, physician expertise, and clinical practices. Historically, we have focused our investments in three areas—Health Access, Healthy Communities, and Health Knowledge—to address critical health issues in our communities.

For many years, we have worked collaboratively with other organizations to address serious public health issues such as obesity, access to care, and violence. We have conducted Community Health Needs Assessments (CHNA) to better understand each community's unique needs and resources. The CHNA process informs our community investments and helps us develop strategies aimed at making long-term, sustainable change—and it allows us to deepen the strong relationships we have with other organizations that are working to improve community health.

In addition, Kaiser Permanente seeks to promote community health upstream by leveraging its assets to positively influence social determinants of health – social, economic, environmental – in the communities we serve.

## IV. Kaiser Foundation Hospitals – Honolulu Service Area



The service area for Kaiser Foundation Hospital (KFH) Honolulu covers the entirety of Honolulu; Honolulu is a city–county located in the U.S. State of Hawaii. The City and County include both the urban district of Honolulu (the State's capital) and the rest of the island of Oahu. The total island area is 600 square miles. Honolulu County has 71 zip codes.

KFH Honolulu Demographic Data	
Total Population	975,690
White	21.51%
Black	2.48%
Asian	43.17%
Native American/ Alaskan Native	0.18%
Pacific Islander/ Native Hawaiian	9.38%
Some Other Race	0.94%
Multiple Races	22.34%
Hispanic/Latino	8.91%

KFH Honolulu Socio-economic Data	
Living in Poverty (<200% FPL)	23.3%
Children in Poverty	12.95%
Unemployed	4.1
Uninsured	5.62%
No High School Diploma	9.33%

**V. Purpose of Implementation Strategy**

This Implementation Strategy has been prepared in order to comply with federal tax law requirements set forth in Internal Revenue Code section 501(r) requiring hospital facilities owned and operated by an organization described in Code section 501(c)(3) to conduct a community health needs assessment at least once every three years and adopt an implementation strategy to meet the community health needs identified through the community health needs assessment.

This Implementation Strategy is intended to satisfy each of the applicable requirements set forth in final regulations released in December 2014. This implementation strategy describes KFH Honolulu’s planned response to the needs identified through the 2016 Community Health Needs Assessment (CHNA) process. For information about KFH Honolulu’s 2016 CHNA process and for a copy of the report please visit [www.kp.org/chna](http://www.kp.org/chna).

**VI. List of Community Health Needs Identified in 2016 CHNA Report**

The list below summarizes the health needs identified for the KFH Honolulu service area through the 2016 Community Health Needs Assessment process.

- Exercise, Nutrition and Weight/Diabetes
- Mental Health and Mental Disorders
- Access to Care
- Cardiovascular Disease and Stroke
- Substance Abuse, including Tobacco
- Oral Health
- Prevention and Safety, including Violence/Injury
- Maternal, Fetal and Infant Health
- Respiratory Diseases, including Asthma
- Cancers
- Immunizations and Infectious Disease

**VII. Who was Involved in the Implementation Strategy Development**

The Implementation Strategy development process involved the following stakeholders internal to Kaiser Permanente:

- Michael Hasselle, Director, Supply Chain

- Daryl Kurozawa, MD, AMD, Sales & Marketing, Service Delivery Planning, and Community Benefit
- Laura Lott, Director, Communications & Public Relations
- Samir Patel, MD, AMD, Primary Care Operations and Innovations
- Linda Puu, Hospital Administrator
- Ben Tamura, MD, AMD, Primary Care
- Kimberly Yamahara, Assistant Clinic Administration Manager, Honolulu and Hawaii Kai Clinics

Community stakeholders representing a variety of high need populations also provided input to the KFH Honolulu Implementation Strategy. The community input process is described below in section VII b.

**a. Partner Organizations**

KFH Honolulu worked independently on the development of the hospital’s Implementation Strategy.

**b. Community Engagement Strategy**

While not required by Federal CHNA regulations, Kaiser Permanente encourages all KFH facilities developing Implementation Strategy plans to elicit community input throughout the plan development process. Voluntary community member and stakeholder engagement in the implementation strategy development process is intended to enable:

- KFH facilities to develop a deeper understanding of community perspective in developing Implementation Strategies, allowing opportunities for increased collaboration, potential impact, and sustainability
- Opportunities to engage community members beyond organizations and leaders with whom facilities may typically collaborate
- Transparency throughout the implementation strategy development process
- Opportunities to inform community leaders about Kaiser Permanente’s unique structure and resources to effectively foster meaningful partnerships.

KFH Honolulu engaged community input in the Implementation Strategy through a meeting with four representatives from community-based organizations working with the service area’s highest need populations.

Community stakeholders participating in the Implementation Strategy planning meeting included:

- May Okihiro, MD, MS, Pediatrician Waianae Coast Comprehensive Health Center and Assistant Professor, University of Hawaii John A. Burns School of Medicine, Department of Pediatrics
- Robert Hirokawa, Chief Executive Officer, Hawai’i Primary Care Association
- Annie Valentin, Executive Director, Project Vision Hawaii
- Jennifer Dang, Fresh Fruit and Vegetable Program (FFVP) & Special Projects Coordinator, Hawaii Child Nutrition Program (HCNP)

At the community input meeting, community stakeholders reviewed the KFH Honolulu needs selected to address and provided input on the following:

- The most important interventions that have the greatest, most sustainable impact.
- The sub-populations (age, ethnicity, geographic area) in the KFH Honolulu service area most in need of intervention.
- The sectors and/or institutions (i.e. schools, workplaces, community health clinics) that should implement the interventions.

A robust discussion among the community stakeholders affirmed the priority of the health needs selected to address and produced the following recommendations for strategies to address the needs. These recommendations capture the perspective of the KFH Honolulu communities experiencing the greatest health inequities and assure that this viewpoint is included in the final Implementation Strategy Plan.

### **Cross-Cutting Strategies**

- Deliver culturally competent care.
- Address overlooked subpopulations: young men, older adults, blue collar workforce.

### **Exercise, Nutrition, Weight/Diabetes**

- Increase coverage for CDC Diabetes Prevention Program/diabetes prevention.
- Increase access to healthy food: food hubs, school gardens, Electronic Benefits Transfer (EBT)/Double Buck programs.
- Improve school infrastructure: physical activity, healthy eating, access to water.
- Train service providers on “life course” approach: link teen obesity, gestational diabetes, infant health.

### **Access to Care**

- Support School Based Health Centers to enhance access to services.
- Provide prevention services at schools.
- Link medical homes to schools.
- Convene health care system to plan unified, coordinated systems of care that avoid competition.
- Address workforce shortages: specialty providers, rural areas.
- Develop systems for comprehensive services for the homeless.

The key recommendations emerging from the community stakeholder discussion were presented to the KFH Honolulu leadership and integrated into the final set of strategies planned to address the needs selected.

### **c. Consultant Used**

The process was led by the Community Benefit Manager for KFH Honolulu and facilitated by Ad Lucem Consulting.

Ad Lucem Consulting specializes in initiative design, strategic planning, grants management, and program evaluation. Ad Lucem Consulting has developed CHNA reports and Implementation Plans for hospitals including synthesis of secondary and primary data, needs prioritization, and identification of assets and implementation strategies. To learn more about Ad Lucem Consulting visit [www.adlucemconsulting.com](http://www.adlucemconsulting.com).



## VIII. Health Needs that KFH Honolulu Plans to Address

### a. Process and Criteria Used to Select Health Needs

The health needs prioritized in the CHNA were examined to identify a smaller set of health needs that KFH Honolulu would address in its Implementation Strategy. A robust set of criteria was identified to determine the priority health needs on which KFH Honolulu could have the greatest impact and to justify the needs that the service area chose not to address. The criteria were applied to the health needs via a facilitated discussion with the KFH Honolulu Community Benefit Manager and approved by the Kaiser Permanente Leadership Group (listed in Section VII), based on experience working and/or living in the Honolulu County, knowledge of health assets and deficits in the county, experience with community residents, and vision for how Kaiser Permanente can promote healthy communities.

Points were assigned to the CHNA health needs based on the criteria described below. A scale of zero to two points was used for general criteria (highlighted below in blue), with two points assigned to health needs meeting the criteria well, one point for health needs somewhat meeting the criteria, and zero points for health needs not meeting the criteria. Criteria that describe Kaiser Permanente specific expertise or resources (highlighted in green) were weighted as follows: four points assigned to health needs meeting the criteria well, two points for health needs somewhat meeting the criteria, and zero points for health needs not meeting the criteria.

Criteria	Definition
<b>CHNA prioritization</b>	How the health need ranked in the CHNA (takes into account severity, scale, and community prioritization).
<b>Health disparities and equity</b>	The health need disproportionately impacts the health status of one or more vulnerable population groups.
<b>Kaiser Permanente expertise</b>	Kaiser Permanente can make a meaningful contribution to addressing the need because of its relevant expertise as an integrated health system and because of an organizational commitment to addressing the need.
<b>Ability to leverage organizational assets</b>	Opportunity to deploy Kaiser Permanente Regional Community Benefit funding due to alignment with region wide needs as well as opportunity to draw down other assets of the organization.
<b>Feasibility</b>	Kaiser Permanente has the ability to have an impact given the resources available.
<b>Existing or promising approaches</b>	There are effective or promising strategies, preferably evidence-based, that could be applied to address the need.
<b>Ability to leverage community assets</b>	Opportunity to collaborate with existing community partnerships working to address the need, or to build on current programs, emerging opportunities, or other community assets.

**b. Health Needs that KFH Honolulu Plans to Address**

**Access to Care:** Access to high quality, culturally competent, affordable healthcare and health services that provide a coordinated system of community care is essential to the prevention and treatment of morbidity and increases the quality of life, especially for the most vulnerable. While many residents have health insurance coverage in Honolulu County, there is a shortage of mental health and oral health care providers, especially those who accept Medicaid. Native Hawaiians and Pacific Islanders are less likely to have health insurance. Key informants identified the need for more culturally competent care, as well as the need for more translation and interpretation services.

**Exercise, Nutrition and Weight/Diabetes:** A lifestyle that includes healthy eating and physical activity improves overall health, mental health, and cardiovascular health, thus reducing costly and life-threatening health outcomes such as obesity, diabetes, cardiovascular disease, and strokes. Honolulu County benchmarks poorly compared to the State on many contributing factors to diabetes, including fruit and vegetable consumption and number of grocery stores. Obesity prevalence and death rates due to diabetes are especially high among residents of Pacific Islander or Native Hawaiian descent. Multiple key informants identified Native Hawaiians and Pacific Islanders as disproportionately impacted by diabetes and other preventable chronic diseases.

**IX. KFH Honolulu’s Implementation Strategies**

As part of the Kaiser Permanente integrated health system, KFH Honolulu has a long history of working internally with Kaiser Foundation Health Plan, The Permanente Medical Group, and other Kaiser Foundation Hospitals, as well as externally with multiple stakeholders, to identify, develop and implement strategies to address the health needs in the community. These strategies are developed so that they:

- ✓ Are available broadly to the public and serve low-income individuals.
- ✓ Reduce geographic, financial, or cultural barriers to accessing health services, and if they ceased would result in access problems.
- ✓ Address federal, state, or local public health priorities
- ✓ Leverage or enhance public health department activities
- ✓ Advance increased general knowledge through education or research that benefits the public
- ✓ Otherwise would *not* become the responsibility of government or another tax-exempt organization

KFH Honolulu is committed to enhancing its understanding about how best to develop and implement effective strategies to address community health needs and recognizes that good health outcomes cannot be achieved without joint planning and partnerships with community stakeholders and leaders. As such, KFH Honolulu welcomes future opportunities to enhance its strategic plans by relying on and building upon the strong community partnerships it currently has in place.

KFH Honolulu will draw on a broad array of strategies and organizational resources to improve the health of vulnerable populations within our communities, such as grantmaking, in-kind resources, collaborations and partnerships, as well as several internal KFH programs. The goals, outcomes, strategies, and examples of resources planned are described below for each selected health need.

**Access to Care**  
**Long-term Goal**

All community members have access to high quality, culturally and linguistically appropriate health care services in coordinated delivery systems.



## **Intermediate Goals**

- Increase access to comprehensive health care services for low income and vulnerable populations.
- Improve the capacity of health care systems to provide quality health care services.
- Increase access to social non-medical services that support health for low income and vulnerable populations.

## **Strategies**

### Coverage & Access

- Participate in efforts to provide high-quality medical care to Medicaid participants who would otherwise struggle to access care.
  - Enhance cultural competence of care to residents with Medicaid coverage to address disparities in access to health services.
- Charitable health coverage. Participate in efforts to provide access and comprehensive health care to low-income individuals and families who do not have access to public or private health coverage.
  - Provide Charity Care and Charitable Coverage to uninsured residents to address disparities in access to health services.
- Medical financial assistance. Participate in efforts to provide financial assistance to low-income individuals who receive care at Kaiser Permanente facilities and can't afford medical expenses and/or cost sharing.
- Support promising, culturally competent models for managing non-medical needs.
  - Fund programs that promote empowering and mentoring for at risk youth, particularly Native Hawaiians and Pacific Islanders.

### Health Care Capacity Building

- Contribute to developing the pipeline of healthcare professionals to provide high-quality, culturally competent care.
  - Fund programs to stimulate development of the primary care workforce to meet community health needs.
  - Collaborate with health care sector and education partners on workforce development and health care pipeline strategy development.
  - Fund programs to enhance the healthcare workforce pipeline.
- Support the business vitality of partners by helping meet their needs for space, systems, and employees, and aiding them in gaining the business-savvy to meet their missions.
  - Through funding and collaboration, support community clinics to improve care quality for underserved populations through strategies such as implementing improved billing systems and quality improvement metrics.

### Clinic-Community Integration

- Support integration of our partners' healthcare provision with community-based programs and services.
  - Collaborate with food banks, YMCA, Diabetes Prevention Program and other community-based partners to improve integration of clinical and community-based services.
- Foster coordination between partners and with Kaiser Permanente.
  - Participate in collaboratives to enhance coordination between health care systems and community organizations. Partners include Hawaii Primary Care Association, Safety Net Providers, and Healthcare Association of Hawaii.

### Policy, Systems, & Environmental Change

- Leverage our partners' experience to support efforts to change policy, systems and environments through grant making, partnerships, convening, strategic communications, and advocacy, with an emphasis on addressing historical equities.

- Participate in Hawaii Keiki Initiative advisory committee to work for enhanced access to health services in schools.
- Fund School Based Health Centers to facilitate health care system navigation and referral to primary and specialty health services.
- Partner with Hawaii Primary Care Association and Hawaii Department of Health to support systems to make oral health services available to high need underserved populations.
- Through funding and collaboration, support systems that increase access to behavioral health and vision care for diverse, high need populations.
- Encourage policy, systems and environmental change efforts to be culturally and linguistically competent.

#### Create and Spread Knowledge in the Field

- Support new ideas and research, and bring an equity lens to the growing knowledge base about care for the underserved through participation in health care collaboratives.
  - Participate in multi-sector collaboratives to advance a health equity orientation to serve the needs of Native Hawaiian, Pacific Islander and other underserved communities in Honolulu County.

#### Total Health

- Leverage Kaiser Permanente assets to drive community health.
  - Support procurement of services and supplies from local vendors, where feasible.
  - Donate excess supplies to community clinics, when appropriate.
  - Collaborate with CBOs, associations and health care organizations to support health care workforce pipeline programs to train diverse, underrepresented populations to address the healthcare workforce shortage.
- Work to improve the quality of care delivered within Kaiser Permanente by harvesting and applying knowledge from our collaborative efforts and partnerships.
  - Collaborate with internal and external partners to identify strategies for workforce planning.
  - Promote local hiring.
  - Explore career pathways for workers to promote greater access to opportunities and economic stability.
  - Partner with workforce development organizations and associated entities to encourage workforce pipeline from local communities.
  - Work with Kaiser Permanente departments to identify activities/projects for internships and mentorships.
  - Facilitate linking mentors to new hires to support their success.
  - Support workforce training for current and future healthcare providers to build cultural competence to meet the healthcare needs of diverse communities.

#### **Expected Outcomes**

##### Short- to Mid-term Outcomes:

- Technical assistance provided to partners to enhance their core clinical, and operational capabilities.
- Practices adopted to facilitate referrals between primary care, specialty care and social non-medical services.
- Increased number of opportunities for providers to receive training on providing linguistically and culturally competent care.
- Increased number of programs that feed into health career pathways.
- Low-income Honolulu residents experience fewer barriers to receiving care.

##### Long-term Outcomes:

- The health delivery system is better able to meet the continuum of Honolulu residents' physical, mental, oral care needs and is aligned with community organizations to meet their social non-medical needs.

- Low-income and underserved individuals who are served by safety net partners and Kaiser Permanente are treated with dignity and have their unique needs met.
- Safety net partners are educated on and mobilized around addressing conditions that support the health of low-income and underserved individuals and that advance equity.
- Low-income individuals have improved health outcomes.

## **Exercise, Nutrition and Weight/Diabetes**

### **Long-term Goal**

All community members eat better and move more as part of daily life.

### **Intermediate Goals**

- Improve healthy eating among residents in low income, under-resourced communities.
- Increase physical activity among residents in low income, under-resourced communities.
- Improve prevention, treatment and management of obesity, diabetes, and/or heart disease.

### **Strategies**

#### Support access to care, coverage and information

- Foster high-quality, culturally and linguistically competent care to the underserved in Kaiser Permanente and other settings (safety net clinics, public hospitals) to work towards improved prevention, treatment and management of obesity, diabetes, and/or heart disease.
- Provide culturally and linguistically competent health education to support healthy eating, active living.
  - Education Theater Program educates the community on healthy eating and physical activity behaviors.
  - Provide resources to translate Hawaii 5-2-1-0 physical activity promotion materials into multiple languages.

#### Strengthen vital community organizations and create conditions of health

- Support place-based and multi-sector collaborative efforts to support healthy eating, active living.
  - Partner with Pioneering Healthy Communities Coalition, Hawaii Public Health Institute and Hawaii 5-2-1-0 (also a grant) to promote access to healthy food and active transportation opportunities in a culturally and linguistically competent manner.
- Support health-promoting policies and practice changes in organizations to support healthy eating, active living.
  - Collaborate with multi sector partners to advance school wellness policy implementation.
  - Fund water stations in schools to reduce sugar sweetened beverage consumption in schools.

#### Create and spread knowledge in the field

- Disseminate information about what works to improve health, including healthy eating and active living, especially in diverse ethnic and linguistic communities.
  - Participate in multi-sector collaboratives to contribute to the evidence base for addressing healthy eating and active living inequities in Native Hawaiian, Pacific Islander and other underserved communities in Honolulu County.

#### Thriving Schools/Place Based Initiatives

- Support multi-level, multi-component initiatives in school settings to promote the health of students, staff and teachers in K-12 schools within communities served by Kaiser Permanente.
  - Support school wellness policy implementation.
  - Through funding and collaboration support availability of healthy school meals.
  - Collaborate with Office of Child Nutrition and other partners to enhance enrollment in and utilization of federal food programs.

- Through funding and collaboration promote active recess, biking to school, and walking school bus programs.
- Kaiser Permanente Communications and Events Team supports activities that promote healthy eating and physical activity behaviors in schools.
- Encourage culturally and linguistically competent school based efforts.

#### Policy, Systems & Environmental Change

- Support policy, systems, and environmental change through a variety of strategies such as: grantmaking, convening, strategic communications, participation in/support of coalitions and partnerships, policy advocacy, and by modeling healthy organizational practice.
  - Fund food banks to promote access to fresh produce.
  - Participate in collaboratives that work to increase access to fresh foods through farmer’s markets and food hubs.
  - Through funding and collaboration, support active living design, bicycle lanes, bike sharing programs, or Safe Routes to School.
  - Collaborate with multi-sector partners to promote increased access to safe parks and public spaces.
  - Encourage policy, systems and environmental change efforts to be culturally and linguistically competent.

#### Scaling Change

- Cultivate partnerships and networks that lift up priorities, evidence and experience of communities, and contribute to building the field of healthy eating and active living.
  - Participate in multi-sector collaboratives to advance evidence based, culturally and linguistically competent, policy, systems and environmental change strategies to address the healthy eating and physical activity inequities experienced by low income, high need communities.

#### Total Health

- Leverage Kaiser Permanente assets to support community health, including healthy eating and active living and champion organizational practice changes within Kaiser Permanente that promote health.
  - Support local restaurants and caterers that promote healthy food in our communities.
  - Support spread of farmers markets, including weekly market at KFH Honolulu facility.
  - Encourage staircase use.
  - Work toward all facilities meeting the American Disabilities Act.
  - Participate in active transportation scan of Honolulu County.
  - Participate in the Honolulu Age Friendly Cities project and transit oriented development planning to support active transportation policies and practices.
  - Encourage amenities such as bike parking to facilitate physical activity.

#### **Expected Outcomes**

##### Short- to Mid-term Outcomes:

- Policies and practices adopted to promote increased access to health-promoting environments, programs and services related to healthy eating and active living.
- Increased access to programs that support adoption of healthy behaviors.
- Efforts to promote healthy eating and physical activity have increased linguistic and cultural competence.

##### Long-term Outcomes:

- The physical and institutional environments in communities support healthy behaviors and reduce environmental contributors of disease.
- Honolulu residents practice health behaviors that improve modifiable risk factors.

### **Additional Strategies to Promote Community Health**

Kaiser Permanente, as an integrated health care delivery system, dedicates resources that target broader health system needs and upstream determinants of health. In addition to our significant Community Benefit investments, Kaiser Permanente is aware of the significant impact that our organization has on the health of our communities as a consequence of our business practices including hiring, purchasing, and environmental stewardship. We have explored opportunities to align our hiring practices, our purchasing, our building and our environmental stewardship efforts with the goal of improving the conditions that contribute to health in our communities. The following strategies are illustrations of the types of organizational business practices we implement to address priority health needs and contribute to community health and well-being:

- Implement green business practices to address climate and health by purchasing clean wind and solar energy, supporting procurement of services and supplies from local vendors, donating excess medical supplies to community clinics (when appropriate), purchasing safe chemicals for cleaning, securing vendors that limit packaging materials and/or use recyclable materials in packing and shipping, and leveraging KP influence to increase demand (and therefore supply) of healthier products and practices.
- Implement healthy food policies to address obesity/overweight, such as purchasing sustainable, locally produced fruits and vegetables; supporting local restaurants and caterers that meet KP's Healthy Picks and to make more available healthier food options in our communities; and supporting vendors that hire under/unemployed residents (with living wages and benefits) in the food production/distribution process.
- Contribute toward supplier diversity in the community to address economic security by implementing policies and standards to procure supplies and services from a diverse set of providers; working with vendors to support sub-contracting with diverse suppliers/service providers; working with community-based workforce development programs to support a pipeline for diverse suppliers/service providers; and building the capacity of local small businesses that can through training on business fundamentals (core competencies, finance, business plans, human resources, marketing, gaining access to equity/debt financing, etc.)

### **X. Evaluation Plans**

KFH Honolulu will monitor and evaluate the strategies listed above for the purpose of tracking the implementation of those strategies as well as to document the anticipated impact. Plans to monitor will be tailored to each strategy and will include the collection and documentation of tracking measures, such as the number of grants made, number of dollars spent, and number of people reached/served. In addition, KFH Honolulu will require grantees to propose, track and report outcomes, including behavior and health outcomes as appropriate. For example, outcome measures for a strategy that addresses obesity/overweight by increasing access to physical activity and healthy eating options might include number of students walking or biking to school, access to fresh locally grown fruits and vegetables at schools, or number of weekly physical activity minutes.

### **XI. Health Needs KFH Honolulu Does Not Intend to Address**

The remaining prioritized health needs for Honolulu will not be addressed by KFH Honolulu because, using the criteria described previously, they were not ranked as highly as Exercise, Nutrition, Weight and Diabetes, and Equitable Access to Health Services. KFH Honolulu has unique resources and capacity to

dedicate to the two chosen health needs, and a number of the strategies developed to address the chosen health needs will impact the other health needs that were not selected in this Implementation Strategy. Additionally, many of the specific health needs identified through the CHNA can be addressed by strategies implemented under the needs selected to address. In addition, there are other strong community partners who are currently addressing the needs below. The needs that will not be addressed through this Implementation Strategy are:

#### Mental Health and Mental Disorders

Although Mental Health and Mental Disorders were identified as a high priority in the CHNA multi-voting ranking process, Honolulu County as a whole benchmarks well compared to the state on mental health indicators. KFH Honolulu has only a moderate ability to leverage internal expertise and organizational and community assets to address mental health. Mental Health and Mental Disorders will be addressed in part by strategies implemented under Access to Care.

#### Cardiovascular Disease and Stroke

Cardiovascular disease (CVD) and Stroke was identified as only a moderate priority in the CHNA multi-voting ranking process. Strategies implemented under Exercise, Nutrition, Weight and Diabetes and Access to Care will address CVD and Stroke prevention. In addition, there are many existing programs that address this need; KFH Honolulu and other area hospitals conduct ongoing CVD/Stroke prevention, education and screening as part of their clinical and outreach activities.

#### Substance Abuse, including Tobacco

KFH Honolulu does not have expertise in Substance Abuse and has only a moderate ability to leverage organizational and community assets to address this health need. In addition, Honolulu County overall (the KFH Honolulu service area) benchmarks well on substance abuse indicators as compared to the rest of the state.

#### Oral Health

KFH Honolulu does not have expertise in Oral Health and other organizations are addressing this health need. Oral Health will be addressed in part by strategies implemented under the Access to Care health need area.

#### Prevention and Safety, including Violence/Injury

Prevention and Safety was categorized as low priority during the multi voting process conducted to prioritize health needs during the CHNA. KFH Honolulu has only moderate expertise and ability to leverage community assets to address this need.

#### Maternal, Fetal and Infant Health

Honolulu County overall benchmarks well compared to the State on Maternal, Fetal and Infant Health core indicators, and this need was identified as a low priority during the CHNA ranking process.

#### Respiratory Diseases, including Asthma

Respiratory Diseases were not mentioned as a priority during the CHNA community input process and were categorized as a low priority during the multi voting process conducted to prioritize health needs during the CHNA. KFH Honolulu perceives a limited ability to make an impact on preventing Respiratory Diseases given resources available.

#### Cancers

Cancers were categorized as a low priority during the multi voting process conducted to prioritize health needs during the CHNA. Cancer prevention is addressed in part through KFH Honolulu's strategies under Exercise, Nutrition, Weight and Diabetes and Access to Care.



### Immunizations and Infectious Disease

Immunizations and Infectious Diseases did not emerge as a topic during the CHNA community input process and Immunizations and Infectious Disease was categorized as a low priority during the multi voting process conducted to prioritize health needs during the CHNA.

While this Implementation Strategy Report responds to the CHNA and Implementation Strategy requirements in the Affordable Care Act and IRS Notices, it is not exhaustive of everything we do to enhance the health of our communities. KFH Honolulu will look for collaboration opportunities that address needs not selected where it can appropriately contribute to addressing those needs.