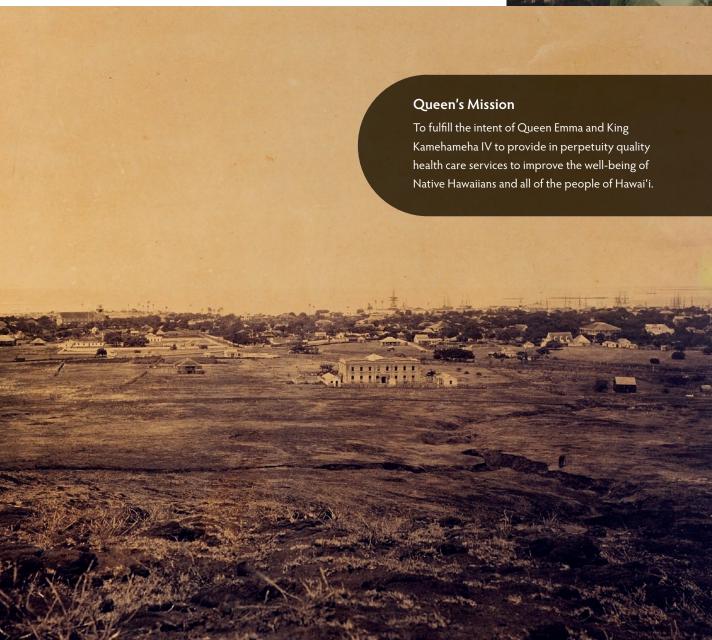




Native Hawaiian Health Program Report 2007 2015







Above: The Queen's Hospital's first building emerged in a barren tract of land called Manamana. Photo by Charles L. Weed, Bishop Museum Archives

Prologue

Destruction, then rebirth, comes to the land, the 'āina. Under the unrelenting power of molten lava, all is buried, turned to ash. Yet, a kīpuka remains—an opening, an oasis of life, a place spared by Pele's fury. From this kīpuka, the seeds of rebirth emerge. A tiny cricket ventures out. Spores from the kupukupu fern waft in the breeze and land in crevices in the desolate lava field. They lead the way for rebirth.

Like the 'āina, the Hawaiian people have been decimated by disease. Between the arrival of Captain Cook in 1778 and the first official census in 1853, introduced diseases—as well as war and famine—had reduced the Native Hawaiian population by more than 75%, from some 300,000 to 71,000. In that very year, the smallpox epidemic came. During the epidemic, teams of horse-drawn, covered yellow wagons, heavily laden with the dead, could be seen every day on the streets of Honolulu, traveling from one ravaged house to another. By the end of the epidemic in January 1854, there were at least 6,400 cases of smallpox and about 2,500 deaths, virtually all among the Native Hawaiian population.

Earlier epidemics had taken more lives, but the 1853 smallpox epidemic, which was both rapid and deadly, came at a time when the population was already decimated. It was the catalyst that led King Kamehameha IV and Queen Emma to establish The Queen's Hospital in 1859. A kīpuka had emerged in the cycle of death and rebirth.

Over a century, many of the diseases that decimated the Hawaiian people were defeated or controlled. Treatments have been found for diseases like syphilis, gonorrhea, bubonic plague, cholera, typhoid fever, influenza, measles, dysentery, tuberculosis, and small-pox. However, others, like heart disease, cancer, and diabetes, have taken their place, and have affected the Hawaiian people disproportionately.

Then, other kīpuka have emerged. The Queen's Hospital grew into The Queen's Medical Center, which became the leader in health care for Hawai'i's people. Today, its parent company, The Queen's Health Systems, operates four hospitals including The Queen's Medical Center. Three of them—The Queen's Medical Center – West O'ahu, Molokai General Hospital,* and North Hawai'i Community Hospital—serve in locations with large Native Hawaiian populations.

Queen's mission to improve the health and well-being of Native Hawaiians has ventured out yet again: the Native Hawaiian Health Program was established.

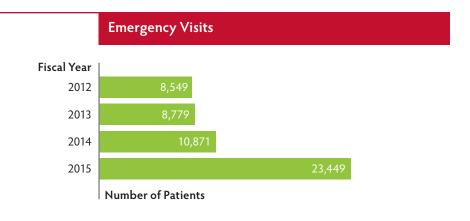
*Molokai is used without the diacritical to respect the majority of Molokai residents' pronunciation and usage.

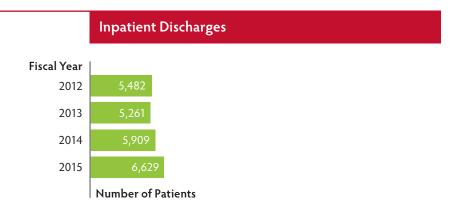


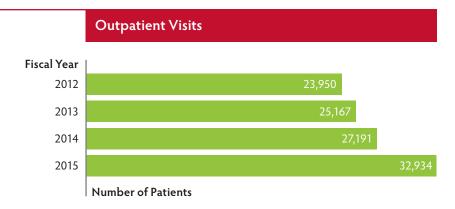


Native Hawaiian Patients

Native Hawaiian patients seen at The Queen's Medical Center, The Queen's Medical Center – West O'ahu, and Molokai General Hospital, Fiscal Years 2012 to 2015. (Fiscal years are from July 1 to June 30.)









Right: (L-R) The Queen's Medical Center; The Queen's Medical Center – West O'ahu; Molokai General Hospital; North Hawai'i Community Hospital

Introduction



Core Strategy

Hardwire the Native Hawaiian Health Strategic Plan throughout all Queen's entities and their day-to-day activities

The Native Hawaiian Health Program was started with a vision to enhance the ola pono (health, well-being) of Native Hawaiians by elevating their overall health status to a level comparable with that of other ethnic groups in Hawai'i. In support of this vision, The Queen's Health Systems made a long-term commitment to provide in perpetuity quality health care services by aligning its strengths with the priority health needs of Native Hawaiians.

The four goals of the Native Hawaiian Health Program are:

- 1 Improving clinical outcomes for Native Hawaiians
- 2 Increasing access to Queen's services and improving outreach to the Native Hawaiian community
- 3 Providing health care training opportunities for Native Hawaiians
- **4** Conducting and participating in research that will help improve Native Hawaiian health

The seeds of the Native Hawaiian Health Program were planted in 2004 when The Queen's Health Systems Board of Trustees formed a task force to develop a strategic plan focused on Native Hawaiian health. The Native Hawaiian Health Strategy Task Force was guided by The Queen's Health Systems' mission statement: "To fulfill the intent of Queen Emma and King Kamehameha IV to provide in perpetuity quality

health care services to improve the well-being of Native Hawaiians and all of the people of Hawai'i."

In the summer of 2005, the Task Force set a strategic direction, followed by strategic planning which resulted in tactical implementation. The approach to achieving the plan to provide quality health care services to Native Hawaiians included initiatives in research, training, and collaborations.

The Task Force determined that a long-term commitment by The Queen's Health Systems was critical in achieving meaningful improvements in the health status of Native Hawaiians. Furthermore, this commitment must be "hard-wired" throughout Queen's and become an integral part of its identity, culture, and day-to-day activities.

By December 2005, at the recommendation of the Native Hawaiian Health Strategy Task Force, The Queen's Health Systems Board of Trustees approved a Strategic Direction Conceptual Model where major health issues were identified and health needs prioritized.

In April 2006, the Trustees approved a Native Hawaiian Health Strategic Plan. Then, in Fiscal Year 2007, the Native Hawaiian Health Program infrastructure was established and staffed through an extensive recruitment process. What follows is an account of what we have accomplished thus far.

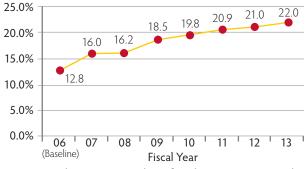




Cardiac Health Initiative

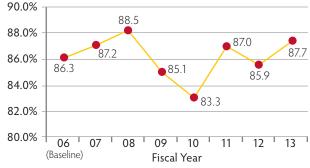
(Funded from FY07 through FY10)

Utilization - Cardiac Services (inpatient)



Utilization increased significantly over time. We attribute this to better documentation of ethnicity for Native Hawaiian patients.

Patient Satisfaction - Cardiac



Fairly consistent Native Hawaiian patient satisfaction for Queen's Heart has been maintained.

Readmission - Congestive Heart Failure



Volume at the baseline can be attributed to the limited number of Native Hawaiians identified in FY06. The ethnicity verification process was implemented in Queen's electronic medical records in FY07.

1 Clinical Outcomes

The Native Hawaiian Health Program is working to provide a framework for the development, implementation, and evaluation of clinical initiatives that aim to enhance the ola pono of Native Hawaiians.

Cardiac

Cardiac was chosen as the first clinical service line. The Native Hawaiian Health Program focused on the results of a conceptual model that gathered data on major Native Hawaiian health issues and Queen's strengths. Data was collected for FY 2006 to establish a baseline.

The following steps were taken:

- A library of culturally appropriate educational material was developed for common cardiac diseases and procedures. This included Ho'omau Ka Pu'uwai, an educational booklet on maintaining a healthy heart for patients who are diagnosed with congestive heart failure.
- Cardiac discharge classes began in December 2006. Native Hawaiians received patient education consults by an Advanced Practice Registered Nurse (APRN) and a clinical pharmacist provided education on medications.
- Weight scales and digital blood pressure machines were provided to Native Hawaiian patients upon discharge, and a cardiology nurse practitioner provided follow-up.
- A cardiac integrative program was developed at Queen's Heart. The program included traditional Hawaiian practices and evidence-based complementary and alternative medicine modalities.* Poi was also added to the food service menu.

- Cardiac
- Oncology
- Obesity
- Neuroscience
- Diabetes
- Clinical Medicine

Clinical outcomes that were tracked from baseline to current include utilization, patient satisfaction, and readmission. Funding for the Cardiac Native Hawaiian Health Initiative was from FY 2007 through FY 2010 (see graphs, left).

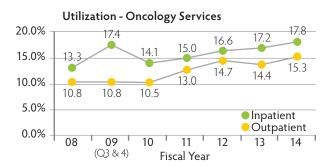
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^{*} Not including plant/herbal medicines, acupuncture, and other modalities that conflict with hospital standards and accreditation.

1 Clinical Outcomes (cont.)

Oncology Health Initiative (Funded from FY07 through FY10)



Utilization by Native Hawaiians has increased over time.

Patient Satisfaction - Oncology 94.0% 92.5 92.3 92.0% 90.6 90.8 90.3 90.4 90.1 90.0% 89.1 88.0% 87.0 86.7 86.3 86.5 86.0% 84.0% Inpatient Outpatient 82.0% 09 11 13 (Q3 & 4) Fiscal Year

Stable over time. Both Native Hawaiian inpatients and outpatients peaked during the last fiscal year of funding.

Oncology

Oncology was chosen as the next clinical service line. Data was collected for FY 2008 to establish a baseline. Data was tracked from the 3rd quarter of FY 2009 through FY 2014. As with the cardiac service line, utilization and patient satisfaction were tracked for both inpatient and outpatient oncology.

Other initiatives:

- BCCCP (Breast and Cervical Cancer Control Program) screening
- Financial Advocacy
- Survivorship Program
- Community Education
- Decreasing no-show rate at Molokai General Hospital

The hiring of a mammography clerk at Molokai General Hospital decreased the no-show rate for mammograms from 18% (FY 2009) to 10%.

Obesity

In February 2009, the Office of Hawaiian Affairs funded \$100,000 for a research project at Queen's Comprehensive Weight Management Program to determine the effects of bariatric surgery on type 2 diabetes for Native Hawaiian patients.

Inclusion criteria:

- Native Hawaiian
- Age 25-60
- Type 2 diabetes mellitus on medication
- BMI (body mass index) between 40 and 60

Recruitment was extended to include the neighbor islands. By the end of FY 2013, 177 individuals were screened and 25 enrolled. As a result of recruitment

into this study, an overall increase in Native Hawaiian utilization occurred at the Comprehensive Weight Management Program. Although not all Native Hawaiian patients enrolled in the study, many did enroll in the general Comprehensive Weight Management Program. In FY 2013, over 50% of the patients in the Comprehensive Weight Management Program were of Native Hawaiian ancestry. The story of the first person enrolled in the study was highlighted in the February 2011 issue of *Ka Wai Ola o OHA*, illustrating the control of diabetes and the gaining of a new lifestyle with the ability to participate in canoe paddling.

Neuroscience

In FY 2012, the Native Hawaiian Health Program funded protected research time for Queen Emma Stroke Study Principal Investigator Kazuma Nakagawa, MD. Dr. Nakagawa conducted a qualitative study to find the determining factors that lead to a high burden of cardiovascular risk at a young age and the barriers that Native Hawaiian families experience when caring for patients with hemorrhagic stroke after hospitalization.

Key findings from this study indicated:

- Transportation issues after discharge
- Lack of adequate stroke education
- Lack of social worker follow-up after discharge

Of eligible Native Hawaiians, 70.8% were enrolled in the research study.

In the analysis of the Queen Emma Stroke Study, Dr. Nakagawa found that Native Hawaiians suffered from Intracerebral Hemorrhage (ICH) 10 years sooner than the rest of the population. He further found that this younger presentation in age for Native Hawaiians is more likely caused by undiagnosed or untreated



Kazuma Nakagawa, MD

hypertension. It was also noted in the research that the younger age presentation was independent of methamphetamine use.

Diabetes

In FY 2012, the Native Hawaiian Health Program supported a diabetes initiative. A dedicated Advanced Practice Registered Nurse (APRN) was hired to round on Native Hawaiian inpatients upon initial identification of diabetes within 24 hours of admission.

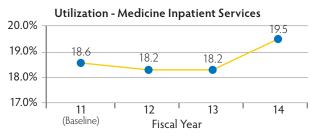
Ho'omau Ke Ola, a culturally appropriate diabetes educational booklet on caring for diabetes, was developed and used by the APRN. There was a sharp decrease in readmission rates for Native Hawaiian patients seen by the dedicated APRN.

The Queen's Medical Center also collaborated with Native Hawaiian health community agencies to refer the diabetic patients to them on an outpatient basis. At the end of funding, an average of eight patients per month were referred and followed up on by community agencies.

1 Clinical Outcomes (cont.)

Clinical Medicine Health Initiative

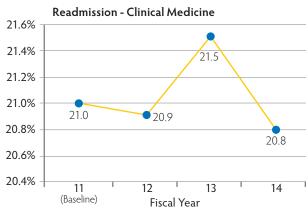
(Funded from FY11 through present)



Utilization by Native Hawaiians increased approx 1%.

Patient Satisfaction - Clinical Medicine 88.0% 86.0% 84.0% 82.0% 81.4 80.0% 76.0% 11 (Baseline) 12 13 14 Fiscal Year

Native Hawaiian patient satisfaction increased significantly from a baseline of 81.4% to 84.4 in 3 years.



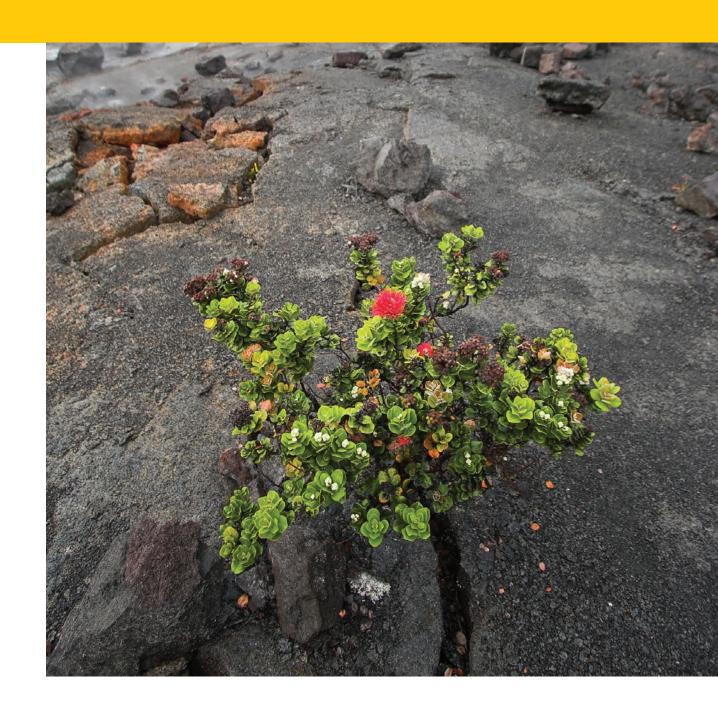
Readmission stable. However, APRN-followed Native Hawaiians showed lower rates vs. all Native Hawaiian patients.

Clinical Medicine

In FY 2012, the Native Hawaiian Health Program supported Clinical Medicine initiatives. The clinical outcomes tracked were utilization, patient satisfaction, and readmission.

- APRNs and pharmacists were funded to aid multidisciplinary teams at The Queen's Medical Center Punchbowl and The Queen's Medical Center – West O'ahu campuses.
- Culturally-appropriate educational materials were created and printed on COPD (Chronic Obstructive Pulmonary Disease) and Cellulitis (infection of the skin and soft tissues underneath).
- Resources for the People of Hawai'i, a general resource brochure, was created. The brochure lists contact information for local organizations that care for the physical, spiritual, and/or mental well-being of Native Hawaiians.
- The pulmonary clinic at Molokai General Hospital was increased from one to two clinics per month through Native Hawaiian Health Program support.
- Following an extensive review, telemedicine equipment was purchased to provide Molokai General
 Hospital access to the expertise of The Queen's
 Medical Center's Medical Intensive Care Unit (MICU).







Heritage Day ceremony at Mauna 'Ala

2 Access & Outreach

The Native Hawaiian Health Program focuses on quality improvement and increased access for Native Hawaiians to The Queen's Medical Center, as well as collaboration with the Native Hawaiian community in education, research, and community outreach.

Heritage Program

- Coordinated annual tributes of Queen Emma and King Kamehameha IV on the dates of their births, as well as Heritage Day, which celebrates the founding of The Queen's Hospital in 1859. Approximately 1,200 employees and members of the community attend Heritage Day each year to celebrate this significant cultural event.
- Queen's 150th Anniversary: 1) Created a time capsule to be opened at the 200th anniversary; 2) Developed a relationship with Royal School, which began as the Chiefs' Children's School that Emma Rooke and Alexander Liholiho attended; 3) Created a service project with Queen's employees and Trustees to paint and landscape Lunalilo Home in honor of William Lunalilo, a portion of whose lands were bequeathed to Queen Emma and continues to benefit the hospital.
- Developed cultural training and protocols for The Queen's Health Systems.
- Conducted Hawaiian language classes for employees beginning January 2009. A total of 292 people have been enrolled.
- The Queen's Historical Room and Mamiya Medical

Heritage collections were successfully relocated from their original sites. The Native Hawaiian Health Program supports, maintains, and stores the huge collections and provides limited access in response to monthly inquiries. There are ongoing efforts to inventory and digitize the entire collection. A \$110,000 contract with OHA helped to begin the process on large sections of the collection.

(Continued on next page.)



Queen's staff landscape the grounds of Lunalilo Home.



Queen's group photo in front of Lunalilo Home.

2 Access & Outreach (cont.)

External Community Collaborations

- Department of Native Hawaiian Health, John A. Burns School of Medicine, University of Hawai'i at Mānoa
- The Native Hawaiian Health Program provides Easter baskets with school supplies and toiletries for Royal School students. In turn, students create greeting cards for Queen's patients on Heritage Day.
- Native Hawaiian Health Consortium, Nā Limahana o Lonopūhā
- Mālama Mauna 'Ala, a consortium of organizations with ties to the Royal Mausoleum
- Access to care for Native Hawaiians at The Queen's Medical Center – West O'ahu, Molokai General Hospital, and North Hawai'i Community Hospital







3 Training



The Native Hawaiian Health Program develops collaborations and partnerships to provide health care training and educational opportunities to Native Hawaiian students and those committed to serving Native Hawaiian communities. A total of 388 students have been supported to date.

Scholarship Programs

The Native Hawaiian Health Program funds scholar-ships to address the shortage in Hawai'i's health care workforce while providing educational opportunities in health care to Native Hawaiians. It was determined that there are more workforce gaps at The Queen's Medical Center and Molokai General Hospital for allied health and technical positions than positions at the master's and doctoral levels, which already receive significant scholarship funding support from federal, state, and private sources.

- Native Hawaiian Health Scholarship. The first higher learning scholarship to be funded by the Native Hawaiian Health Program was for the Kapi'olani Community College Health Sciences Department, starting in FY 2007. Molokai General Hospital's mammographer was a recipient in 2009.
- Windward Community College Nursing Pathways Scholarship. In FY 2010, this scholarship was funded to train non-traditional students (e.g., those going back to school for a different career or after raising a family) to prepare them for continued education in the Kapi'olani Community College Registered Nursing Program or in the Chaminade University Nursing Program.

- E Ulu Ka Maoli Ola: The CNA-LPN-RN Pathway Program. This program promotes economic stability (working toward earning a livable wage) and health (students learn to care for their own health) while making connections through culturally-based learning. Students are required to perform a community service in the form of volunteer hours. In FY 2011, four students volunteered at The Queen's Medical Center and three scholarship recipients were employed as CNAs (Certified Nursing Assistants) at the hospital.
- Chaminade University Nursing Program Scholarship. In FY 2013, this scholarship for the Chaminade University Nursing Program was established to support six Native Hawaiian students. Priority was given to CNAs who completed the Windward Community College Nursing Pathways Program. The scholarship is also partially funded by Kamehameha Schools and the Office of Hawaiian Affairs.

(Continued on next page.)





3 Training (cont.)

The Ulu Kukui Project

Named Ulu Kukui (Ulu meaning growth and Kukui referring to the tree that provides light and inspired enlightenment), this project developed a partnership between The Queen's Medical Center and the R.L. Stevenson Middle School, with help from the John A. Burns School of Medicine Office of Medical Education and Pacific Resources for Education and Learning. Funded by a five-year grant from the Howard Hughes Medical Institute in FY 2007, the Ulu Kukui Project was a pre-college science education program at R.L. Stevenson Middle School that promoted excellence in science education and the pursuit of biomedical careers by Native Hawaiians and Pacific Islanders. The project's goal was to reduce health disparities by improving health literacy and by increasing the number of Native Hawaiians and Pacific Islanders who enroll in programs to become medical, biomedical, and allied health professionals. Through family/community outreach and teacher professional development, the project also aimed to increase knowledge among the parents and teachers of Native Hawaiians and Pacific Islanders on the necessity of a rigorous high school and college curriculum.

Ulu Kukui Project activities included:

- Family Health Science Evenings
- Summer Explorations in Biomedical Sciences
- Daily problem-based learning modules in the science classroom
- Faculty project-based learning trainings



- Neighbor island science excursions
- National Science Teacher Association Conference sponsorship
- Hō'ā i ke Kukui Health Careers Fair
- Science department equipment and supplies budget supplementation
- Mentor videos

Pacific Resources for Education and Learning, a nonprofit organization that conducts research and evaluates education programs to determine effectiveness, evaluated students' knowledge of science education and careers and found a statistically significant increase in interest in science and the pursuit of biomedical careers. The 2012 nationally administered ACT EXPLORER report indicated that 33% of Stevenson students showed a preference for pursuing a four-year science degree, and that science and math achievement were the highest among all subjects.

The Queen's Medical Center Student Research Internship

In the summers of 2008 and 2009, the Native Hawaiian Health Program hosted a college undergraduate student for eight weeks and introduced them to clinical research and the field of medicine. (A master's student in social work was an intern from 2013 to 2014.) The project was cosponsored by the John A. Burns School of Medicine's Department of Native Hawaiian Health.







4 Research

The Native Hawaiian Health Program conducts ongoing assessment and development of Queen's programs and services focused on Native Hawaiians.

Ethnicity Accuracy Project

To provide quality health care services, we must know who we are serving. Accurate information about a patient's ethnic background can have an impact on how physicians diagnose and treat individual patients. By routinely collecting data on patients' race, ethnicity, and language, the data can be linked to measures of quality, safety, and utilization.

Prior to 2007, The Queen's Medical Center could not assess the accuracy of the patient population's ethnicity. To ensure accuracy, the Native Hawaiian Health Program embarked on face-to-face interviews in both inpatient and outpatient settings at The Queen's Medical Center. Baseline data for ethnicity accuracy, specifically for Native Hawaiians, was collected between the summers of 2006 and 2007.

Because Hawai'i's population has a very diverse background and individuals are often multi-ethnic, participants were asked to name all of their ethnicities/races, then to choose one ethnicity that they most identified with. Taking into account that there may be Native Hawaiians who prefer to identify themselves as another ethnicity, a "yes/no" field was added in addition to ethnicity ("Are you Hawaiian/Part Hawaiian?") to capture whether the patient is Native Hawaiian but self-identified with another ethnicity. When the participants' ethnicity data was analyzed, it was found that there was a 6.42% misclassification of Native Hawaiians.



In the summer of 2008, a follow-up study was done to see if there was an improvement in misclassifications, which was found to have been reduced to 4.9%. Between August 2013 to May 2014, another follow-up survey was conducted, and the misclassification rate was further reduced to 0.7%.

Ethnicity Accuracy Project (Funded from FY06 through FY13)



Comparative Effectiveness Research to Eliminate Cardiometabolic Disparities (CER-ECD)

In FY 2011, the Native Hawaiian Health Program partnered with the John A. Burns School of Medicine's Department of Native Hawaiian Health in a grant to translate the community-tested Mālama Pu'uwai Heart Failure Education Program to a clinical setting. The funding totaled \$100,000 over two years. Staff at six clinical sites (three inpatient and outpatient sites at The Queen's Medical Center, one at Lunalilo Home, and two on Hawai'i Island) were trained on the translated material, which was called Ho'omau Ka Pu'uwai. As of FY 2015, Ho'omau Ka Pu'uwai has continued to be used in cardiac inpatient education at The Queen's Medical Center.

(Continued on next page.)



4 Research (cont.)

PILI 'Ohana Research Project

In FY 2012, the PILI 'Ohana Research Project used The Queen's Medical Center as one of 14 sites to conduct a worksite wellness weight loss and weight management randomized control study. The Native Hawaiian Health Program collaborated with the John A. Burns School of Medicine's Department of Native Hawaiian Health and 'Imi Hale: Native Hawaiian Cancer Network, with funding by the National Cancer Institute. Study groups began in November 2011 and May 2012 with a total of 45 participants. A third group completed the study in June 2014.

As a follow up to the PILI 'Ohana Project, a pilot study was also completed in FY 2014 with the Department of Native Hawaiian Health to bring an adapted version of PILI 'Ohana to the workplace. PILI@Work held three cohorts to measure the effectiveness of a DVDbased intervention versus a face-to-face intervention. Weight, systolic/diastolic blood pressure, physical functioning, frequency of physical activity, fat intake, family support, and eating self-efficacy improved from pre- to post-intervention. Regression analysis indicated that worksite type, decreased diastolic blood pressure, increased physical activity, and more internalized locus of weight control were significantly associated with three-month weight loss. PILI@Work initiated weight loss in Queen's employees. The results were published in the journal Translational Behavioral Medicine, January 2016.



The late Kaleo and Patsy Kaina (third from left & photo in front), who invited Queen's to Hāna, were founding community members of Hana Ulu Pono.

Hana Ulu Pono

Funded by the Office of Hawaiian Affairs for the first year, the Hana Ulu Pono project created physical activities for Native Hawaiian residents in the Hāna community in FY 2013. With over 150 initial participants, enough momentum was built to apply for and secure two additional years of funding for the Hāna-based program. The Queen's Medical Center is the fiscal agent for the grant and provides the clinical basis for a community-based intervention program addressing obesity.

In year two, the physical activity and nutrition program had 235 participants. A interdepartmental team, including the Native Hawaiian Health Program and the Queen's Clinical Research Department, work collaboratively on this project.

Project Connect: Futures Without Violence

In FY 2013, the Native Hawaiian Health Program was awarded a three year, \$150,000 grant for health training and advocacy for health care professionals in domestic violence/intimate partner violence. Focused on Native Hawaiian communities, this grant raised awareness in the community and health care



industry of appropriately addressing the needs of victims through the health care system. In addition, victims of domestic violence were provided with the phone numbers for local resources. The Domestic Violence Action Center was a community partner, and the project focused on the Queen Emma Clinics and the Emergency Department at The Queen's Medical Center Punchbowl.





Publications

The following were published with the support of the Native Hawaiian Health Program:

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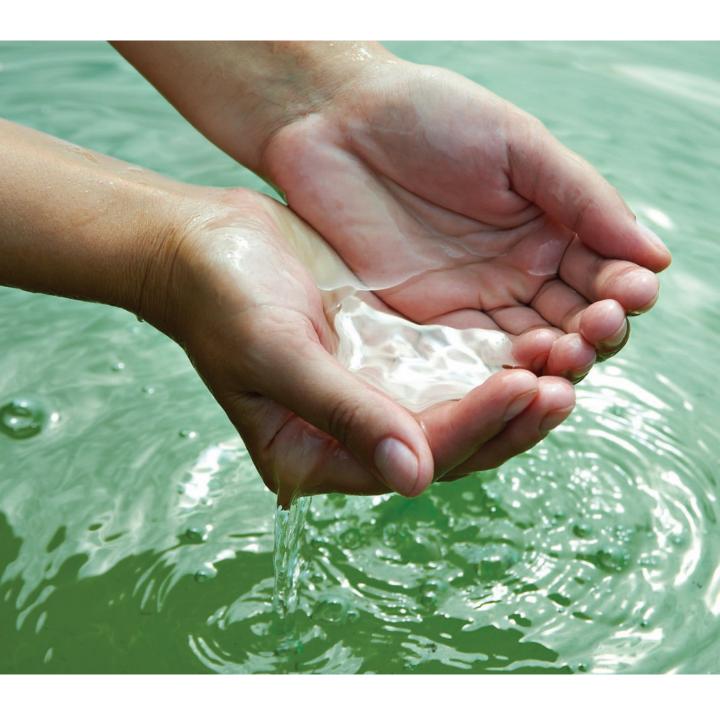
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Financial Overview

Annual Expenditures for the Native Hawaiian Health Program, Fiscal Years 2007 - 2014

Fiscal Year	2007	2008	2009	2010	2011	2012	2013	2014
Program Office/ Program Initiatives	\$280,788	\$368,262	\$254,677	\$278,591	\$445,551	\$463,264	\$410,058	\$293,079
Clinical Initiatives		\$147,994	\$357,944	\$469,540	\$798,528	\$9 71,814	\$843,756	\$761,550
Totals	\$280,788	\$516,256	\$612,621	\$748,131	\$1,244,079	\$1,435,078	\$1,253,814	\$1,054,629

Other Native Hawaiian Health Investments, Fiscal Years 2005 - 2015

In addition to The Queen's Health Systems programs, significant contributions to external organizations have assisted in improving Native Hawaiian Health in Hawai'i:

\$6.97 million

John A. Burns School of Medicine, Department of Native Hawaiian Health (2003 - present)

\$1.62 million

Native Hawaiian organizations and external scholarship programs (2005 - 2015)





Future Directions

Over the past eight years, the kīpuka that is the Native Hawaiian Health Program has created a firm paepae, or foundation, that will spread. The joining of other kīpuka continues to create a reforested community for Native Hawaiians. In 2014, The Queen's Health Systems expanded significantly with two additional hospital sites. The Queen's Medical Center – West O'ahu and North Hawai'i Community Hospital were added to The Queen's Medical Center and Molokai General Hospital. The expansion better addresses the needs of communities where large populations of Native Hawaiians live. West O'ahu is home to the largest concentration of Native Hawaiians in the State, and approximately 30% of North Hawai'i residents are Native Hawaiian. We also continue the work of improving the health status of Native Hawaiians through a network of Native Hawaiian community partnerships.

The Native Hawaiian Health Program begins with the Queen's Mission to provide in perpetuity quality health care services to improve the well-being of Native Hawaiians and all of the people of Hawai'i. From this Mission, we have made a long-term commitment to align Queen's strengths with the priority health needs of Native Hawaiians to enhance their ola pono (health and well-being) to a comparable status with that of other ethnic groups in Hawai'i. To achieve this, we employed a Core Strategy of hardwiring our strategic plan throughout all Queen's entities and their day-to-day activities to build upon a cultural competence in the way we practice medicine. The four goals remain the pillars of our efforts.

The Native Hawaiian Health Program is now poised to enter into its next phase by maintaining and building upon the foundation it has created. Building on the four goals in the next three years (beginning in FY 2017) while maintaining current initiatives, the Native Hawaiian Health Program will develop the following:

Clinical Outcomes

• Behavioral health initiative to address the needs of

Four Goals of the Native Hawaiian Health Program

- 1 Improving clinical outcomes for Native Hawaiians
- 2 Increasing access to Queen's services and improving outreach to the Native Hawaiian community
- 3 Providing health care training opportunities for Native Hawaiians
- 4 Conducting and participating in research that will help improve Native Hawaiian health

Native Hawaiian inpatients while decreasing readmissions and emergency room usage.

 Focus on diabetes through education, prevention, and intervention, and expanding the Diabetes Management and Education Center at Queen's – West O'ahu.

Access & Outreach

- Continue to build strategic alliances with Native Hawaiian health organizations through active participation in Nā Limahana o Lonopūhā (Native Hawaiian Health Consortium).
- Assess and streamline Queen's historical collection; develop a digital library to better integrate history and heritage into The Queen's Health Systems' organizational culture; and create an interactive experience to educate the public on Queen's history and health care in Hawai'i.
- Hawaiian culture enrichment for Queen's employees that includes food and nutrition, sustainability, kalo preparation, oli (chant) protocols, and history.
- Native Hawaiian Health Program presence at North Hawai'i Community Hospital.

Training

 Increasing the health care workforce through partnerships with North Hawai'i community organizations and schools, and maintaining current health-related scholarships while exploring new ones at all levels of study.

Research

- Building a research partnership with the John A. Burns School of Medicine's Department of Native Hawaiian Health and exploring external local and national grants.
- Developing Queen's Native Hawaiian patient database and analyzing the data for trends and improvements.

Our kīpuka is growing, and as others grow alongside us, we all contribute toward a flourishing 'āina.

Ola ke awa o Kou i ka ua Wa'ahila*

Life comes to the harbor of Kou because of the Wa'ahila rain. It is the rain of Nu'uanu that gives water to Kou (now central Honolulu)

As the life-giving Wa'ahila rain of Nu'uanu and Mānoa makes its way to the shores of Kou, we are reminded of the meaning of this 'ōlelo no'eau, or Hawaiian proverb.

We know rain and fresh water give life to that which they touch, a metaphor of the good works of their majesties, Queen Emma and Kamehameha IV, who founded The Queen's Hospital, and of the legacy left to us that continues to touch the lives of Native Hawaiians and all of the people of Hawai'i.

We are also aware of our connections to Nu'uanu. The lush valley is home to Hānaiakamalama, the Queen Emma Summer Palace, and Mauna 'Ala, the Royal Mausoleum, our founders' eternal resting place. As the valley opens its arms, we find Manamana, the present site of The Queen's Medical Center, and eventually Kou, the former site of the temporary dispensary opened in 1859, the kīpuka that grew into what is today The Queen's Health Systems.

Each of these places and the sweeping life-giving rain that touches them conjures deep meaning and serves as a poignant reminder of our mission.

^{*} Kawena, Mary Pukui, 'Ōlelo No'eau: Hawaiian Proverbs & Poetical Sayings, No. 2486.



NATIVE HAWAIIAN HEALTH PROGRAM



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