

The Queen's Health Systems

Community Health Needs Assessment 3-Year Implementation and Action Plan (FY 2026 – FY 2028) Reported: 6/17/2025



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I. THE LEGACY OF THE QUEEN'S HEALTH SYSTEMS

In 1859, Queen Emma and King Kamehameha IV founded The Queen's Hospital in response to devastating epidemics that plagued the Native Hawaiian population. Following first contact with foreigners in 1778, waves of infectious diseases caused a catastrophic population collapse among Native Hawaiians. By the 1840s, only about 70,000 remained — a staggering decline from the estimated 683,000 at first contact.

In response to the decline, the Queen and King sought to provide access to health care for their people, especially those most in need or unable to afford treatment, to reduce the impact of future epidemics.



Over the next 100 years, Queen's would expand to meet the health needs of the community.

In 1967, the hospital was renamed The Queen's Medical Center and today, it continues to be the State's only Level 1 Trauma Center, providing tertiary and quaternary care services.

The Queen's Health Systems (QHS) was established in 1985 as a not-for-profit health care system. As the largest, private health care system in Hawai'i, QHS has six hospitals, nearly 10,000 employees, and more than 70 health care locations and labs throughout the Pacific region.

Queen's caregivers are the heart and soul of the organization, deeply committed to the mission of providing high-quality, compassionate care. Our tagline — "Your Health, Our Legacy" — highlights our dual focus of honoring the past while advancing health care through education, research, and innovation for a healthier future. It also recognizes the trust that Hawai'i's diverse communities place in us as their health care provider and our responsibility to ensure the best outcomes for individuals and their families.



Our Mission:

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 the people of Hawai'i.

Our Vision:

To be the preeminent health care system of the Pacific, providing superior patient care that is continually advanced through education and research.

II. COMMUNITY HEALTH NEEDS ASSESSMENT AND ACTION PLAN METHODOLOGY

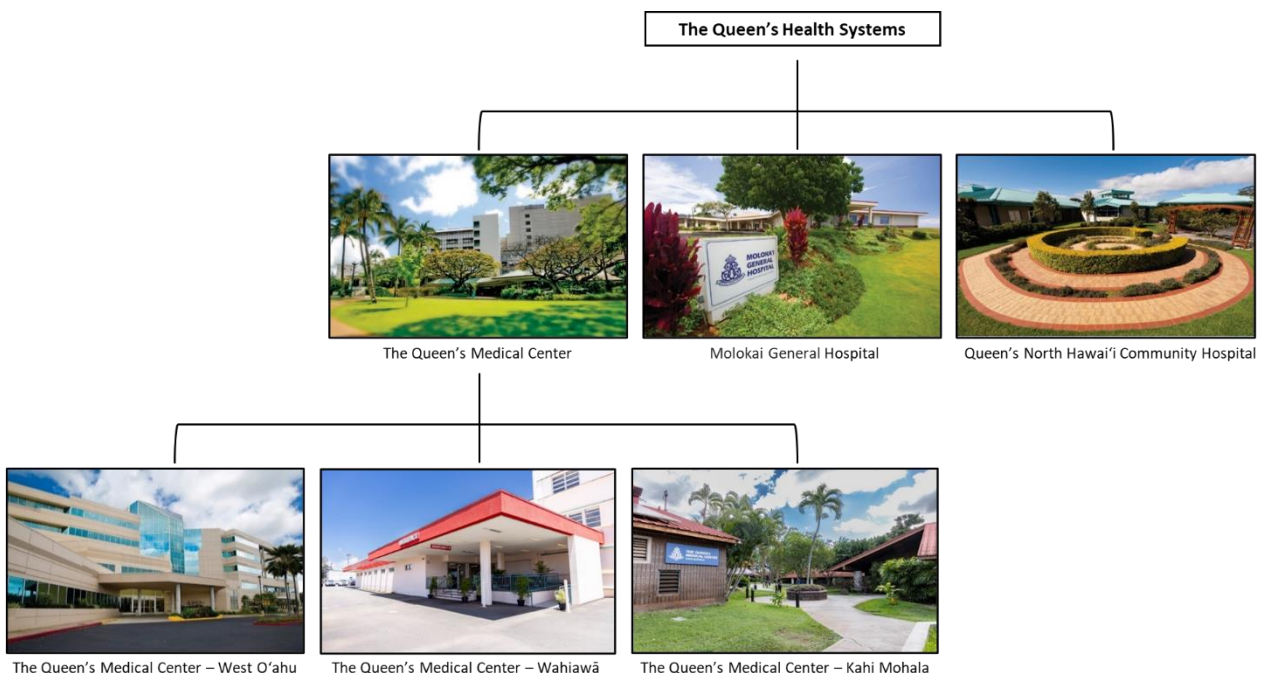
Requirements:

IRS Section 501(r)(3)(A) requires tax-exempt hospital organizations to conduct a Community Health Needs Assessment (CHNA) every three years to identify and prioritize the significant needs of the community, based upon the input of key stakeholders and community members, available research, and other key data points.

To meet the IRS' requirements, QHS has incorporated and managed the following:

1. Utilized the Healthcare Association of Hawaii's Executive Summary, Community Health Needs Assessment 2024 Update for Hawaii.
 - a. QHS is one of 170 health care member organizations that belong to the Healthcare Association of Hawaii (HAH), a non-profit corporation established in 1939.
 - b. QHS adopted HAH's CHNA 2024 Update for Hawaii document for its 2024 Community Health Needs Assessment (CHNA) Report.

- c. The CHNA report is an informative tool that provides guidance and informs QHS' clinical decisions, business decisions, and contributions/investments to utilize its health system resources to further and positively impact the health of the community.
2. QHS developed the accompanying Implementation and Action Plan to demonstrate the intended work the QHS teams are managing to address the Top 5 Significant Health Need Priorities identified.
3. The QHS hospitals that are included in the QHS Action Plan Report are:
 - a. The Queen's Medical Center
 - b. The Queen's Medical Center – West O'ahu
 - c. The Queen's Medical Center – Wahiawā
 - d. The Queen's Medical Center – Kahi Mohala
 - e. Molokai General Hospital
 - f. Queen's North Hawai'i Community Hospital
4. QHS will manage its Implementation and Action Plan Report as a health system.



Action Planning Methodology:

QHS' commitment to manage the 3-year Implementation and Action Plan (FY 2026 – FY 2028) included the following:

1. QHS' intent and commitment to address the HAH CHNA Top 5 Significant Health Need Priorities:
 - a. Financial security
 - b. Food security
 - c. Mental and behavioral health
 - d. Housing
 - e. Equitable access

2. The Project Team conducted 33 key informant interviews and engaged 84 team members that included clinical and shared service representation from the six hospital facilities.
 - a. Interviews were held in person and via video meetings.
 - b. Follow-up team documents were used for program learning and additional research was performed on the projects.
3. Action Plans were addressed within the following timeframes:
 - a. Year 1: 1/1/2025 - 6/30/2026 (FY 2026). This 18-month time period was selected because the HAH CHNA 2024 Report was completed in November 2024 and QHS hospitals were already well into the fiscal year.
 - b. Year 2: 7/1/2026 - 6/30/2027 (FY 2027).
 - c. Year 3: 7/1/2027 - 6/30/2028 (FY 2028).
4. Action Plans were addressed based on the Top 5 HAH CHNA 2024 Significant Health Need Priorities on a “go forward” basis and included projects new or ongoing and continue to add critical project dimensions to further drive capacity and capability excellence.
 - a. To manage the definition of access, QHS utilized the Agency for Healthcare Research and Quality (AHRQ)’s definition:
 - 1) “The timely use of personal health services to achieve the best health outcome. Access to health care consists of four components:
 - a) Coverage: facilitates entry into the health care system. Uninsured people are less likely to receive medical care and more likely to have poor health status.
 - b) Services: having a usual source of care is associated with adults receiving recommended screening and preventative services.
 - c) Timeliness: ability to provide health care when the need is recognized.
 - d) Workforce: capable, qualified, culturally competent providers.”
5. QHS’ CHNA Action Plan Documents:
 - a. Appendix A: QHS’ 3-Year Road Map, Tactics and Activities
 - b. Appendix B: FY25 Consolidated Research and Grant List
 - c. Appendix C: FY25 Contribution 501c3 List
 - d. Appendix D: FY25 Contribution Non-501c3 List
 - e. Appendix E: Executive Summary HAH CHNA 2024 Update Hawaii

6. **QHS’ CHNA 3-YEAR IMPLEMENTATION PLAN**

The QHS CHNA Action Plan 2024 addresses the Top 5 HAH CHNA 2024 Significant Health Need Priorities by direct action or through contributions to the community. The Action Plan targets four key goals with an emphasis on improving access to care.

Goal #1: Identify and address patients with Social Determinants of Health (SDoH) and other disparities to support overall health and well-being

- a. Develop standardized SDoH screening tools.
- b. Strategically partner to address and refer patients to appropriate community resources.
- c. Identify grants and funding to support early preventative screening, earlier detection of disease, and/or earlier access to treatment.

Goal #2: Keep care local and close to home to improve access to culturally responsive care

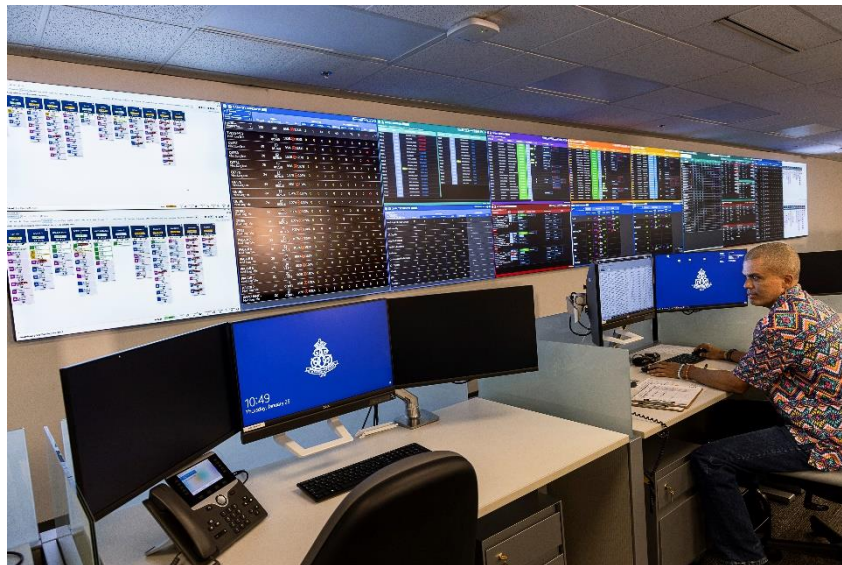
- a. Expand and grow clinical networks based on regional strategic plans.
- b. Commit provider resources as available to rotate and service strategic locations in neighbor island communities.

"I'm grateful for the opportunity to develop a truly patient-centered Maternal Fetal Medicine (MFM) program. We are able to provide high-risk obstetric services to patients in West O'ahu, on the Big Island, and on Maui which are the same high-quality services as in Honolulu. We can accommodate families and children at appointments, and address barriers to care with our dedicated Maternal Fetal Medicine Coordinator."

*Queen's University Medical Group MFM Physician, University of Hawai'i
John A. Burns School of Medicine (UH JABSOM) Associate Professor*

Goal #3: Innovate, research, and partner to accelerate the development of our capability and capacity to provide high-quality care for all

- a. Expand the traditional definition of care within a health system to include new capacity care activities:
 - 1) Pre-hospital care
 - 2) Early diagnosis intervention and treatment
 - 3) Working directly with clinical experts to manage ongoing care in the community
- b. Expand Information Technology (IT) capabilities to reach rural communities.
- c. Enhance partnerships and collaborations with third-party vendors and contractors to manage clinical efficiencies, cost structures, and resource management.
- d. Expand research to learn, design, and improve clinical protocols and accessibility to culturally responsive care.



Goal #4: Invest in the development and well-being of today's workforce, and build future leaders and clinicians to support the diverse needs and cultural preferences of patients in the community

- a. Support the health, well-being, and development of caregivers who care for patients.
- b. Strengthen culturally responsive patient-centric care.
- c. Formal training and education:
 - 1) Strengthen financial investments in partnership with UH JABSOM and Hawaii Residency Programs to manage assigned FTEs sponsored by QHS.
 - 2) Develop and expand faculty and training location support.
- d. Build relationships to engage students earlier, and develop knowledge, relationships, and capacity.
- e. Establish connections with learners, especially those from underserved communities to build a pipeline into the health care industry.

"I enjoyed being able to talk with individuals who are so passionate about what they do. Seeing their passion and drive to learn is so inspiring, and it pushes me to do the same. I foresee this project having an impact on future cardiology-based health care workers."

High School Student attending Cardiology Shadowing Experience

"This event has been such a fun experience and very fulfilling, especially for someone who felt very deterred by others who were much more academically stronger than me. This event has helped me feel much more confident about being in the health care field. Thank you for all the physicians and staff who took time out of their day to give us the experience of a lifetime."

High School Student attending "Hands On" Cardiology Experience

"As a single dad, navigating school without the burden of tuition has allowed me to fully focus on studying and raising my two boys. I look forward to paying this opportunity forward."

Imi Ho'ola Cohort 3 Scholar

Imi Ho'ola Cohort 3



IV. CONCLUSION:

The HAH CHNA 2024 Executive Summary Hawaii Report and the Significant Health Need Priorities and findings are challenging and complex, and require significant partnerships and collaborations with Federal, State, Community, and Local organizations. Partnering with the Healthcare Association of Hawaii and its 170 organizational members will be critical to continuing to “move the needle” on these issues.

QHS’ deepest commitment is to continue to provide, in perpetuity, high-quality, compassionate care to the communities it serves.

“Let me remind you that so long as sickness shall exist there will be a duty imposed upon us.”

Kamehameha IV, 1860

QHS wishes to thank the more than 100 caregivers who provided invaluable information for this report. Their hard work is extremely appreciated.

For more information, please visit: <https://www.queens.org/about/community-benefit-qhs/>