



Year End Report for Caregivers

———— FISCAL YEAR 2023 ————





Queen Emma and King Kamehameha IV

Aloha Queen's Caregivers

The QHS strategic plan our Trustees and Leadership Team developed has now guided our work for three years. Designed to strengthen our foundation and transform our health system, the plan will enable us to meet the demands of the changing healthcare environment and achieve our aspirational goals over the next decade. Most importantly, our plan will help ensure Queen's continues to fulfill its mission into perpetuity.

So much has transpired since we first began—from navigating the pandemic to managing the subsequent economic downturn. Even now, health systems nationwide face ongoing financial and workforce challenges. Caregiver burnout and increasing patient demands are putting pressure on our teams. Inflation and clinical workforce shortages add financial pressure. Queen's is no exception, and those headwinds faced by health systems across the country are impacting us as well.

As an example, in FY23, QMC Manamana cared for the highest number of patients since 2019. This sharp increase, coupled with limited options for patients to be discharged to Skilled and Intermediate Nursing Facilities, led to overcrowding, quality and safety concerns. Meanwhile, even as hospital lengths of stay increased, Medicare and Medicaid reimbursements remained at a fixed rate, which only added to the financial strain.

We know from experience, however, that maintaining high quality care while ensuring sustainability requires a delicate balance. We cannot solely focus on sustainability—making cuts to the detriment of quality—nor can we only focus on improving quality, adding programs and staff at a level that is not sustainable.



Jill Hoggard Green, PhD, RN

To ensure the long-term sustainability of Queen's, these strategies must work in tandem. Achieving an optimal balance was the focus of our efforts in FY23.

To more effectively expand and support our teams in their efforts to achieve our aspirational goals and strategies, we increased our bandwidth by drawing upon significant talents of our leaders. The promotion of Dr. Rick Bruno to President, Queen's Medical Center and President, Queen's University Medical Group improves our ability to seamlessly integrate ambulatory and inpatient care. Darlena Chadwick, RN, MBA was promoted to Executive Vice President and Chief Operating Officer of The Queen's Health System, increasing the leadership of key operations such as patient flow, staffing, support services and enhancing clinically integrated care between our hospitals. Our regional hospitals now report directly to Darlena. To better enable us to create and utilize innovation and transformative approaches to achieve our mission, we promoted Jason Chang to President of the Innovation Institute and Executive Vice President. Finally, we hired Scott Whiting, MBA as Senior Vice President of Population Health to prepare us for major changes in how health care is reimbursed. These promotions strengthened our leadership team and are already making a difference in our ability to drive our critical strategies, programs, and services.

To strengthen our foundation, we grew and supported our people, achieving an overall retention rate of 88%. Our vacancy rate of only 9.8%, was 27% below FY22. For context, the national vacancy rate average is 18.9%, and half of U.S. hospitals have vacancy rates greater than 50%. We are especially proud that our retention rate for RNs is 90%, and our retention rate for new RN graduates is 93%. Nationwide, roughly 30% of new nurses leave within their first year of practice, so having fewer than 10% leave is a significant achievement. We also continued to decrease our RN vacancy rate, which now stands at 5.7%, a 32% improvement from FY22. The national average vacancy rate for RNs is 15.7%, and 51% of U.S. hospitals have RN vacancy rates that are greater than 15%.

July 1, 2023 marked the first anniversary of the incorporation of the Queen's University Medical Group (QUMG). The group experienced phenomenal growth in FY23, adding more than 75 new physicians and advanced practice providers (APPs). QUMG now has nearly 700 providers, including 510 physicians and 175 APPs. Also during this past year, QUMG secured nonprofit status and became the second largest entity within The Queen's Health System.

We made strides towards our goal of becoming a clinically integrated regional network of care. We continued our significant focus on Hawai'i Island, which lacks

sufficient ambulatory care to serve the island's burgeoning populations. In our efforts to keep care close to home for those who live on Hawai'i Island, we are increasing access to primary and specialty care through the Queen's Clinically Integrated Physician Network (QCIPN). By the end FY23, QCIPN included 52 primary care providers and 100 specialists (including employed and private practice providers) practicing across all three regions (North, West and East Hawai'i) in a pluralistic practice model. In addition, with the IT integration of Kona Hospital, all hospitals in North and West Hawai'i now have access to Queen's electronic medical record system. Finally, near the close of FY23, Queen's acquired a 31.15-acre parcel of land at Honokōhau Nui (West Hawai'i Business Park) in Kailua-Kona. In partnership with clinicians and key community partners, we will plan and develop ambulatory care services on this parcel to ensure we meet the needs of the West Hawai'i community.

I would be remiss if I did not call attention to the bright spots for Hawai'i's healthcare industry in 2023. Hawai'i earned recognition as the top state for healthcare, according to U.S. News & World Report's annual best state rankings. Hawai'i also was #2 in the 2023 State Scorecard national rankings for health system performance according to the Commonwealth Fund, a national foundation that conducts independent research on healthcare. As Hawai'i's largest health system operating the state's two busiest emergency departments, the state's only Level 1 trauma center, comprehensive stroke center, organ transplant program, and the state's busiest STEMI center—in addition to caring for the greatest number of patients with behavioral health conditions. Queen's can take pride in knowing that we contribute greatly to these national rankings for healthcare in Hawai'i.

I am honored to share the achievements our teams realized in FY23. The year-end review highlights the most significant accomplishments, and the appendix provides additional context and supporting material.

On behalf of the Queen's Trustees and Leadership Team, I send my sincerest appreciation for your leadership and support, all of which helped to make these achievements possible.

Mahalo,



Jill Hoggard Green, PhD, RN
President and CEO

Aspirational Goals and Strategies

To improve the health, well-being and extend the life well lived of Native Hawaiians addressing health inequities and reducing the gap of life expectancy by half within the decade; and
To become a lifetime partner, improving the health and well-being of all those we serve.



GOAL : COMMUNITY SERVICES SUPPORT NETWORK

Connect patients to resources in the community to address health-related social needs
Priority – Transformation in Community Engagement

Engaged Community Partners

The NHH team added 50 new community partnerships for a total of 83 non-profit organizations, state agencies and universities. They developed an assessment tool to determine the strategic, matched values, and complementary missions of these partnerships including alignment to support mutual strategic goals that serve NH youth, elders and expectant mothers.

Community Health Needs Assessment (CHNA) Priorities

NHH partnered with QHS Administrative Services and community and legislative affairs to develop a strategic framework within which non-profit, State, and agencies serving Native Hawaiians could find a common ground to meet the CHNA and QHS NHH priorities through shared resources of people, joint projects, and funding.



Empowered Transformational Community Leaders

NHH met with 20 Hawai'i Island Native Hawaiian leaders to introduce the Kahua Ola 2.0 Strategic Plan, followed by the community leaders presenting their organizations' work and issues impacting Native Hawaiians in their communities. Organizations included:

- Hawai'i Island Community Health Center (FQHC)
- Hui Mālama Ola nā 'Ōiwi (Native Hawaiian Health)
- The Kohala Center
- Hui Mālama i ke Ala 'Ūlili
- Kū-A-Kanaka
- University of Hawai'i System
- Native Hawaiian healers/practitioners
- Nā Kālai Wa'a/Makali'i
- Education
- Hawaiian Homestead
- Kūpuna
- Ka Pā o Lonopuha

The three Nā Momi (Pearls of Wisdom) that were a top priority for all 20 leaders:

- **Āina:** What are we doing about 'āina? The health of the 'āina = the health of the people.
- **Education:** Kū-A-Kanaka — innovation for on-line, asynchronous cultural learning.
- **Access:** Remember the manapua man who brought food into communities



Strengthening Our Foundation

Federal Medical Assistance (F-MAP)

As part of the American Rescue Plan (ARP) law, U.S. Indigenous peoples, including Native Hawaiians treated in a Native Hawaiian Health Center—under the Native Hawaiian Health Care Improvement Act (NHHCIA)—may be eligible for temporary 60% F-MAP on eligible Medicaid services provided from April 1, 2021 to March 31, 2022. Rowena Buffett Timms and the NHH team applied, and QHS was recognized by Papa Ola Lōkahi as a Native Hawaiian Health Center. This means Queen's is eligible for funds from the Hawai'i State MedQUEST Division of the State Department of Human Services.

Remote Patient Monitoring (RPM) Phase 1 Pilot

RPM uses different virtual devices (e.g., notebooks, smartphones) to track biometric data, including blood pressure, weight, blood glucose level and certain mental/behavioral health problems. RPM is a component of a virtual health system. Federal funding was allocated to the State of Hawai'i from the National Telecommunications and Information Administration (NTIA) to serve Native Hawaiians. The University of Hawai'i is administering these NTIA funds and asked us to conduct the pilot. NHH is partnering with our Telehealth, Quality and Patient Safety, CARE*Link, Supply Chain and Virtual Health teams to oversee this project.

Our top priority is to ensure every patient receives high quality, personalized care grounded in evidence and compassion. We also must develop a sustainable pipeline of Hawai'i's nursing and healthcare workforce, maintain sustainable financial policies that improve our organization's capacity to support future growth and development, and increase access so patients can receive their care where, when and how they want it.

Be a truly great place to work and practice

With the leadership of Sheila Meadows, the Human Resources (HR) team redesigned and improved how we recruit, retain, develop and support our caregivers at Queen's. HR introduced the HR Business Partner model and, transformed into a strategic division with a goal of effectively supporting the organization and building the next generation of caregivers. Of note is that existing staff members make up the leadership of the new structure, and six of nine directors are Native Hawaiians promoted from within Queen's.

By continuing to develop and recognize the talents of our people, we increased the number of caregivers promoted from 517 in FY22 to 557 in FY23. In addition, the number of Native Hawaiian team members promoted increased significantly and comprised 23% of all promotions (128 out of 557) in FY23. We have also made headway towards our goal of developing a more diverse workforce, growing the number and percentage of Native Hawaiian/Pacific Islanders placed (internal and external candidates) by 114.3% over a five-year period (from 327 new hires in FY19 to 701 in FY23).

Retaining our caregivers is critical as we have a large number who will retire within the next decade. Turnover rates at Queen's have remained much lower than national averages. For example:

- FY23 turnover rate was 13.6% (national average = 22.7%)
- FY23 RN turnover rate was 11.4% (national average = 22.5%)
- Achieved a 90% RN Retention Rate
- RN Retention Agreements with a two-year commitment signed by 1,615 RNs, a 96% signage rate.



Engaging our caregivers is critical to moving our aspirational goals and strategies forward, and we are proud to report that caregiver engagement improved as we implemented Standout. 22% more employees/leaders took the assessment and used the platform in FY23 with 52.3% of leaders checking in bi-weekly. As of May 2023, 38% of employees were “Fully Engaged,” which is almost double the national average.

To be a Great Place to Work and Practice, caregivers at Queen’s must thrive and we must address the challenges they face. The workplace safety program provided opportunities for 418 staff from Behavioral Health, Emergency and Security, and 1,826 direct patient care staff at QMCM, QMCW and QNHCH to participate in an outstanding course, which received an average evaluation rating of 3.59 (out of 4.00).

Because we consider workplace violence to be one of the most critical issues facing caregivers, Queen’s prioritized their safety and well-being by implementing Strongline, a state-of-the-art duress alerting system in FY23. We deployed Strongline system-wide, giving every team member a discrete, personal duress alarm to ensure early de-escalation and help prevent serious safety and security incidents. With this significant investment, we are making sure that every team member feels and is safe at work.

We launched Caring for our Caregiver’s, a mental health screening program for anxiety and depression that connects employees to mental health resources. More than 1,000 staff have been screened and nearly 300 have been connected to the resources they need. Six were identified as suicidal and were immediately connected to help.

Lastly, to ensure a strong pipeline for our next generation of caregivers, HR hosted RN Residency New Graduate Cohorts, worked with three local schools for nursing assistant externships, engaged with seven local high schools, colleges and certification training providers to create medical assistant pipelines, and attended 58 elementary/middle school and high school visits/activities/events. Details may be found in the Appendix.

Provide the highest quality, safe, compassionate care – where, when and how consumers want it

This past fiscal year (and continuing into FY24), key quality and safety efforts centered on improving processes to increase access and enhance patient experience.



We collaborated with the consulting group ECG on increasing access to ambulatory clinics and ancillary imaging, imaging strategic planning, and professional revenue optimization. This work led to further development of the Patient Support Center. It also led to improving the process of referral management in the Electronic Health Records. It reduced system leakage, increased access and reduced patient wait times. Moreover, we achieved the following:

- Implemented the Capacity Management Plan at QMC Manamana in the first quarter of FY23 and began “bending the curve” to create an upward trend of ED admissions.
- Opened the Virtual Command Center in December 2022 with 1,000 escalations in the first two months and a resolution rate of 92%.

In our Journey to High Reliability, we continued to put timely and actionable key performance indicators in the hands of staff. The Center for Patient Safety and Quality deployed an additional 47 LENS Boards (for a total now of 70) across our four hospitals and clinics, and more are coming! LENS Boards provide a technology platform for timely visual management of Key Performance Indicators (metrics) used in huddles and to improve work.

To grow our culture and our caregivers’ capacity for high reliability, safety and quality, we implemented new structures, standardized work, policies, procedures, training and auditing that included:



- Weekly Executive Quality and Patient Safety Rounding
- Patient Flow Multidisciplinary Rounds
- Improved geographic cohorting and physician level loading
- The Safe and Reliable Score Survey of staff at all levels

Our data capabilities advanced as well, which will help us compare Queen's to national benchmarks and respond more quickly. For instance, we incorporated the Analytic Accelerator, a data visualization tool, into every Clinical Process Model that we deployed. This will provide easy access to automated process and outcome measures and will allow us to evaluate the impact of our Clinical Programs.

We continued to advance best practices and evidence-based medicine with the addition of five new Clinical Programs (now at nine). We implemented 10 Clinical Practice Models from those Clinical Programs to address our top five mortality drivers. These models enabled us to reduce in-patient mortality from 1.05 in FY22 to 1.03 through May 2023. We also successfully resolved important DOH/CMS investigations.

Importantly, we strengthened the Patient Safety Officer (PSO) program, expanding from 12 PSOs across six service lines to 18 PSOs across nine service lines. The program also expanded its infrastructure to include:

- Strengthening program administration policies and procedures
- Clarifying roles and responsibilities of PSOs
- Standardizing the onboarding and education process for new PSOs
- Leading and hosting state-wide patient safety conferences

- Setting up PSI-90 (Serious Complications) Review Process and Committee
- Conducting >45 RCAs across QHS
- Enrolling 60 clinics into the RL Event Report System, including a comprehensive Workplace Violence report option

Throughout the year, our hospitals demonstrated excellence and received national recognition for quality, safety and patient experience. These recognitions included the following:

- **The Queen's Medical Center was named the #1 hospital in Hawai'i by U.S. News & World Report for the 11th straight year.** QMC was rated as "High Performing" in the following specialties:

- Cancer
- Diabetes and Endocrinology (Ranked #49 in the Nation)
- Gastroenterology & GI Surgery (Ranked #49 in the Nation)
- Geriatrics
- Neurology & Neurosurgery
- Orthopedics (Ranked #14 in the Nation)
- Pulmonology & Lung Surgery (Ranked #50 in the Nation)
- Urology (Ranked in a Tie as #43 in the Nation)



- **Molokai General Hospital** was named one of the **top 20 critical access hospitals** (CAHs) for quality in the country as determined by the Chartis Center for Rural Health for Best Practice in Quality.
- Healthgrades awarded QMC with the “**Outstanding Patient Experience Award**” for the second consecutive year. Healthgrades evaluates patient experience based on 10 measures, using data collected from surveys of the hospital’s own patients. Hospitals in the top 15% are recognized as “Outstanding Patient Experience Award™” recipients.
- QMC - West O’ahu achieved the **Gold Plus award for the AHA Get With The Guidelines – Stroke Program** for the 7th consecutive year.
- Queen’s North Hawai’i Community Hospital received Level III ACS trauma survey with no citations and their ED continues to lead the system for HCAHPS, consistently scoring in the 90th percentile.
- The ED leadership at QMC - West O’ahu was selected as one of five presenters (from over 600 abstract submissions) to present a creative and positive approach to process improvement at the Vizient summit.
- Molokai General Hospital passed its TJC survey with only one minor infraction, had an ED satisfaction score that was consistently over 97%, and 90% of their full-time RN positions were filled.

Increase value (quality and efficiency) to ensure a sustainable future

Health systems across the country continue to face significant financial headwinds, and Queen’s has not been spared from the obstacles created by a continually volatile market, rising costs and flat government reimbursements converging with a tremendous increase in demand for our services. Nonetheless, our finance, legal and endowment teams, expertly led by Paul McDowell, John Nitao, Eric Martinson, and Guy Nitta navigated the ongoing challenges.

As promised for this fiscal year, we presented financial modeling of major projects, providing a multi-year view of how they integrate with the system’s long-range financial plan and Endowment modeling.

Queen’s has achieved **approximately \$52 million in Mission Sustainment Plan** financial improvements this year, surpassing our goal of **\$30 million by 73%**. This achievement has helped to offset some of the financial damage of the year’s last major Covid-19 surge and partially offset the high costs associated with needed workforce supplementation (i.e., contractors and travel nurses). These gains were realized in part by the following:



- Significant maturity in our supply chain operations in which approximately **\$4.6 million** was recovered or saved through supply chain MSP initiatives. More importantly, we initiated significant projects that will provide even greater savings into the future.
- Legal negotiated a settlement with Kronos following the company’s ransomware attack, resulting in a **\$27M** savings in a new Kronos contract and negotiated savings of **\$13M** (as of May 2023), **\$2.6M** of which is reflected in MSP savings.
- Risk Management oversaw FEMA claims for reimbursement of covered COVID-19 pandemic expenses. To date, QHS has submitted claims totaling **\$8.9M**, and **\$2.2M** has already been committed to QMC by FEMA (through HIEMA).
- Queen’s was refunded **\$1M** from the State of Hawai’i’s Department of Taxation regarding the treatment of pharmaceuticals purchased from McKesson.
- QEL’s completed the sale of non-heritage, non-strategic parcels in Campbell Industrial Park for \$28 million that provided liquidity to pursue other strategic investment opportunities.



Transforming Our Health System

Expanding primary care is the cornerstone of any health system desiring to be a lifetime partner in health. Thus, we are focusing attention on primary care, while ensuring we remain on the leading edge of healthcare and building regional networks of care. Simultaneously, we are also taking steps to reduce the overall cost of the care we provide. In addition to these important initiatives, Queen's is making investments for the future to innovate and prepare the next generation of healthcare providers.

Below are highlights of our FY23 achievements in these areas.

Near the end of FY23, we met with the **S&P bond rating team** about our financial performance and plans for the future. They were pleased with our transparency and liquidity, and gave Queen's a rating of **AA- with a Stable outlook**. We also received an **AA bond rating with a Stable outlook from Fitch**.

For FY23, the financial assets portfolio was up **7.4% or \$134 million**, net of fees, outperforming its benchmark by nearly 1%. Strong active manager performance in equities and real estate assets were the largest contributors to the financial assets portfolio. Notably, portfolio performance represents a **\$27 million positive variance to budgeted return**. The FY23 tri-annual core real estate portfolio appraisal resulted in a value of **\$1.384 billion**, up **6.0% or \$80.0 million** from FY20. The appraisal underscores the resiliency and credit quality of our core real estate portfolio despite negative impacts of the pandemic on the hospitality and retail sectors.

The QEL portfolio demonstrated once again the importance of QEL's ability to generate stable and reliable income while also continuing to capitalize on ground lease restructuring opportunities. Centered on QEL's core real estate portfolio, the Endowment's asset allocation strategy continues to be validated. Even amidst the highly volatile environment, the total Endowment met or exceeded its performance benchmarks over all measured time periods, finishing FY23 at \$3.4 billion, a roughly \$170 million year-over-year gain.

Improve the health of the community by elevating quality and reducing the total cost of care

The Queen's Health System Medicare Shared Savings Program Accountable Care Organization (MSSP ACO), continues to improve quality, coordinate and remove barriers to care, educate patients and reduce unnecessary costs. In FY23, the MSSP ACO earned a savings bonus of **more than \$4.5 million**, which was shared between the health system and its participating providers. Moreover, the number of attributed lives **increased by 35%, from 96,730 in FY22 to 131,378**.

Additionally, we signed valued-based contracts with all major Medicare Advantage plans, including HMSA, United Health, Humana, Centene and Devoted Health. We also signed an at-risk Medicare Advantage contract with HMSA (Akamai Advantage), which will allow us to start the shadow capitation process.

Grow a clinically integrated regional network of care throughout Hawai'i

Whether our clinicians provide care virtually or in homes, ambulatory clinics or hospitals, they work together in interdisciplinary teams to provide effective, evidence-based, culturally humble, compassionate care. The growth of QUMG, in partnership with our QCIPN, significantly expanded access to high quality, culturally sensitive, compassionate care and further developed our regional network.

QUMG marked its two-year anniversary this year. Since the merger of QMG with UHP faculty in 2021, it has grown to include 80 distinct clinics spread across our campuses and ambulatory locations. Amazingly, by 2024, QUMG will have more than 700 providers. In FY23, QUMG continued development of its Primary Care Network to improve access and support our population health goals while engaging in workforce planning for specialty care. We have included a full summary of QUMG’s major accomplishments in FY23 in the Appendix.

QCIPN grew to 1,350 providers across the state with 1,177 specialists and 173 primary care providers, primarily focusing recruitment on O’ahu and Hawai’i Island.

Increasing access to care and shortening lengths of stay were central focuses of all our clinical teams. Toward that end, we achieved the following:

- Centralized scheduling for primary care patients, which improved primary care access by up to 38% (based on early data).
- Implemented an enterprise-wide redesign of “access to care,” increasing availability of physician office visits and streamlining our referral management processes.
- Accelerated access to imaging services by scheduling advanced imaging services before insurance authorizations.
- Opened West Sports Medicine Clinic in March 2023, and added a new Radiation Therapy department at The Queen’s West Cancer Center.
- Launched the LEAP program to discharge patients by 9:00 a.m.

To expand access to appropriate care after discharge for the increasing number of patients who are houseless and provide them a safe place to recover after being discharged, we contracted with Kalaheo Paloma (H4) to open 18 more respite beds for houseless patients and supported the launch of Pulama Ola Kauhale, a medical respite village of 10 tiny homes located in the DOH parking lot across the street from QMC. We also partnered with the city’s CORE team for assistance in the ED to meet the rapidly increasing demand.

Innovation, research, education, and building the next generation of caregivers

Under the leadership of Jason Chang, we launched The Queen’s Innovation Institute — the first of its kind in Hawai’i — in March 2023. Our goal is to use technology to improve access to care — from emergency care to elective appointments and from admissions without long boarding times to timely discharges and transfers. The Innovation Institute’s initial focus is to advance our digital platform to expand care across the state.



As our first project, we are building a command center to house our virtual care programs (i.e., Virtual Urgent Care, Remote Patient Monitoring, the Transfer Center, Care Coordination and the Patient Support Center). The Command Center will also operate the Bed Capacity Management system for DOH, HiEMA and HAH, giving Queen’s insight into availability of hospital beds across the state. We are also launching Hawai’i’s first Care-at-Home program, building our Virtual Nursing program, evaluating the best applications for artificial intelligence and process automation, and building a stronger relationship with the University of Hawai’i’s Department of Biomedical Engineering.

In FY23, we started a new Movement Disorder Fellowship Program, and received approvals to launch the Queen Emma Research Institute (QUERI) and the Caregiver Pathway Program. The Queen Emma Research Institute was instrumental in obtaining six federally supported research grants totaling close to \$2 million. These grants, awarded to principal researchers Drs. Todd Seto and Todd Allen, will be used to build research infrastructure and advance research for health equity.

Additionally, our teams made great strides in education through clinical and GME programs. We also provided support to JABSOM residency programs, scholarship programs at community colleges, undergraduate and graduate schools to develop our future workforce. All total for FY23, Queen’s has provided the following:

- \$150,000 in funding for nursing scholarships.
- \$350,000 in funding to the UH School of Nursing.
- \$512,220 for medical school scholarships.
- \$22M in funding for Graduate Medical Education.

- 116 Residents and Fellows supported annually by QHS across the following five fellowship programs: Family Planning, Maternal Fetal Medicine, Cardiovascular, Geriatric Medicine and Addiction Medicine
- Plans are underway to start fellowships in Neuro-Interventional Radiology and Primary Care/Internal Medicine.
- Added nine residency programs: Adult Psychiatry, Child Psychiatry, Pathology, Surgery, Orthopedics, OBGyn, Internal Medicine, Pediatrics and Family Medicine
- Six nursing research studies were submitted through the institutional review board (IRB) process. Two were through the Nursing Research Fellowship, an academic partnership program between the Queen Emma Nursing Institute and the University of Hawai'i's Nancy Atmospera-Walch School of Nursing.
- 100% of the dental residents who graduated from the FY23 program will remain in Hawai'i and become attendings in the Dental Clinic.
- Provided workforce development education and initiatives to more than 2,300 students and faculty to foster our West O'ahu community and encourage our future workforce to stay and work in Hawai'i.

Queen's has selected HKS as architectural partners for the Manamana and West masterplans, and their first priority was completing a System-wide Integrated Feasibility Assessment (SIFA) comprised of four components: demand modeling, program modeling, development modeling and financial modeling. Each component informs the others to measure community demand based on population growth, utilization rate of services, and growth assumptions by service-line to determine

the number of additional beds needed by type. The result was a summary of the additional square footage needed and options for where the new tower could be located. The SIFA also generated a cost estimate that was built into our long-range financial plan.



The telehealth program was expanded to Kona Community Hospital in March as Neurology and Cardiology consultations were extended to their ED and inpatients. Other telehealth programs initiated included:

- Virtual Urgent Care
- Tele-sitter, which went live on June 1 and has had 11,664 hours of monitoring within two months
- E-consult: MD to MD consult service with coverage by payers
- Tele-hospitalists coverage for Molokai General Hospital
- QMC West had a 50-75% increase in telehealth consults due to improvements in telehealth workflow

Finally, Queen's was selected by the Patient Centered Outcomes Research Institute (PCORI) to be part of its groundbreaking Health Systems Implementation Initiative, a consortium of 42 U.S. health systems that will advance the uptake of practice-changing comparative clinical effectiveness research results into health care practice.

Closing

While it has been a challenging year, I would like to extend my sincerest appreciation to the Board of Trustees, the Queen's Leadership Team, and the Queen's 'Ohana for your unwavering commitment to the Queen's mission.



**THE QUEEN'S
HEALTH SYSTEM**

