

# Increasing Access to Wound Care for Native Hawaiians at QMCWO

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**THE QUEEN'S  
HEALTH SYSTEMS**

# Patient Safety Story

Mrs. LS, 61 Native Hawaiian from Wai'anae

**Insurance:** HMAA – Hawaiian Electricians

**Safety Message:** amount of support system needed to address barrier to care in order to prevent worsening of disease/health

**Barrier of care:** lack of transportation

## **Support System:**

- Daughter
- Dr. Ryan Snyder
- West Oncology Navigator Debbie Tory
- Queens Clinically Integrated Physician Network
  - Social Work associate Kelsie Tuamoheloa
  - Community navigator Tanya Rae Villanueva
- Handi-Van Eligibility application manager Malia
- Punch Bowl radiology staff, Gil
- Punchbowl concierge service Kelly Lizardi



# Background

- The American Hospital Association (2017) reported a direct link between transportation and health:
  - **“Only 20% of health can be attributed to medical care, while social and economic factors like access to... transportation and other barriers account for 40% of health.”**
  - **“Transportation barriers can affect a person’s access to health care services... missed or delayed health care appointments, increased health expenditures, and overall poorer health outcomes.”**
- Health disparities among NH indicate an underserved population with **higher prevalence of obesity, negative health behaviors, socioeconomic issues, increased risk for development of 2 or more chronic conditions and lower life expectancy.**

External Source: Health Research & Educational Trust. (2017, November). *Social determinants of health series: Transportation and the role of hospitals*. Chicago, IL: Health Research & Educational Trust. Accessed at [www.aha.org/transportation](http://www.aha.org/transportation)

Internal Source: Kahua Ola Strategic Plan 2018

# Case for Action - Data

- **20% of canceled and no-shows by Part-Hawaiians were attributed to “lack of transportation” or “unable to get accommodations”**
  - Financial Impact: \$440 (net revenue) lost per canceled/no-show visit at QMCWO Wound Center
- In 2015, **Native Hawaiians accounted for 21% of total readmissions at QMC**
  - Sepsis and Cellulitis are among top readmission DRGs
- Results from the QMC Ke Ku’una Na’au Patient Navigation Pilot indicated that **the use of non-clinical navigators with a culturally relevant approach successfully engaged patients, increased compliance with care, and effectively reduced 30 day readmission for Native Hawaiian patients<sup>2</sup>**

Source 1: State of Hawai'i Primary Care Needs Assessment 2016, Hawai'i Department of Health (data as of 2010)  
Source 2: Kim, J. K., Garrett, L., Latimer, R., Nishizaki, L. K., Kimura, J., Taira, D.T., Sentell, T. (2019). Ke Ku'una Na'au: A Native Hawaiian Behavioral Health Initiative at The Queen's Medical Center.

# Intervention – Wound Care Navigator Role

- Work with the care team to **identify and address other psychosocial factors that may be contributing to no show or cancellation** or lack of adherence to wound care treatment.
- Contact recently no-showed or cancelled NH patients and **assist with scheduling transportation and follow-up appointments.**
- **Accompany patients** (in special cases) to and from appointments.
- **Support provider and staff to implement designated plan of care to complete wound treatment course.** Wound care staff will keep a record of all individuals who have utilized the transportation service.

# QMC West-O'ahu Nā Pua Kaiona Project Performance

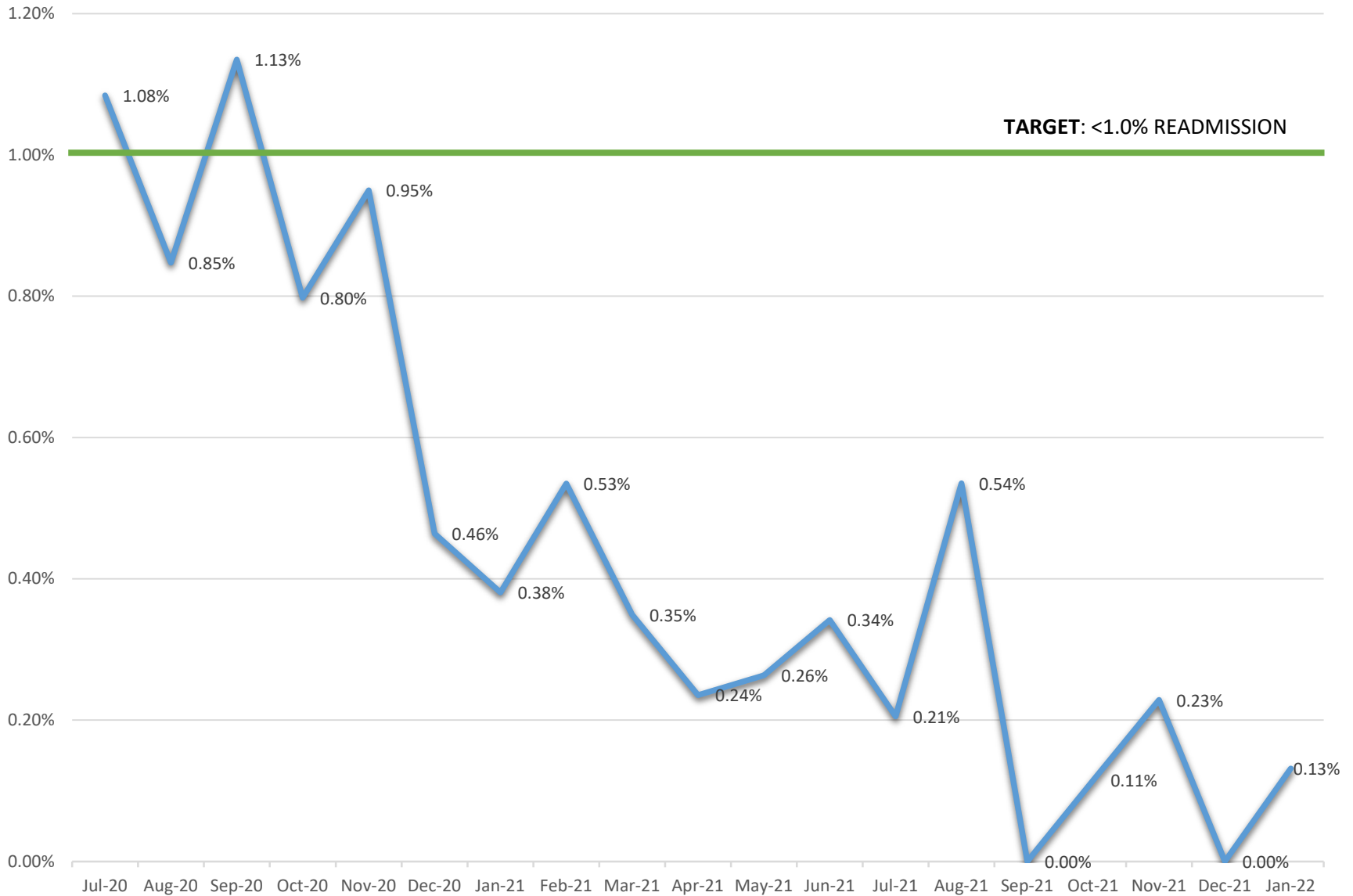


**PROJECT Q2 UPDATE**    Status    (✓ Completed    ❖ In Process    ☐ Not Started)

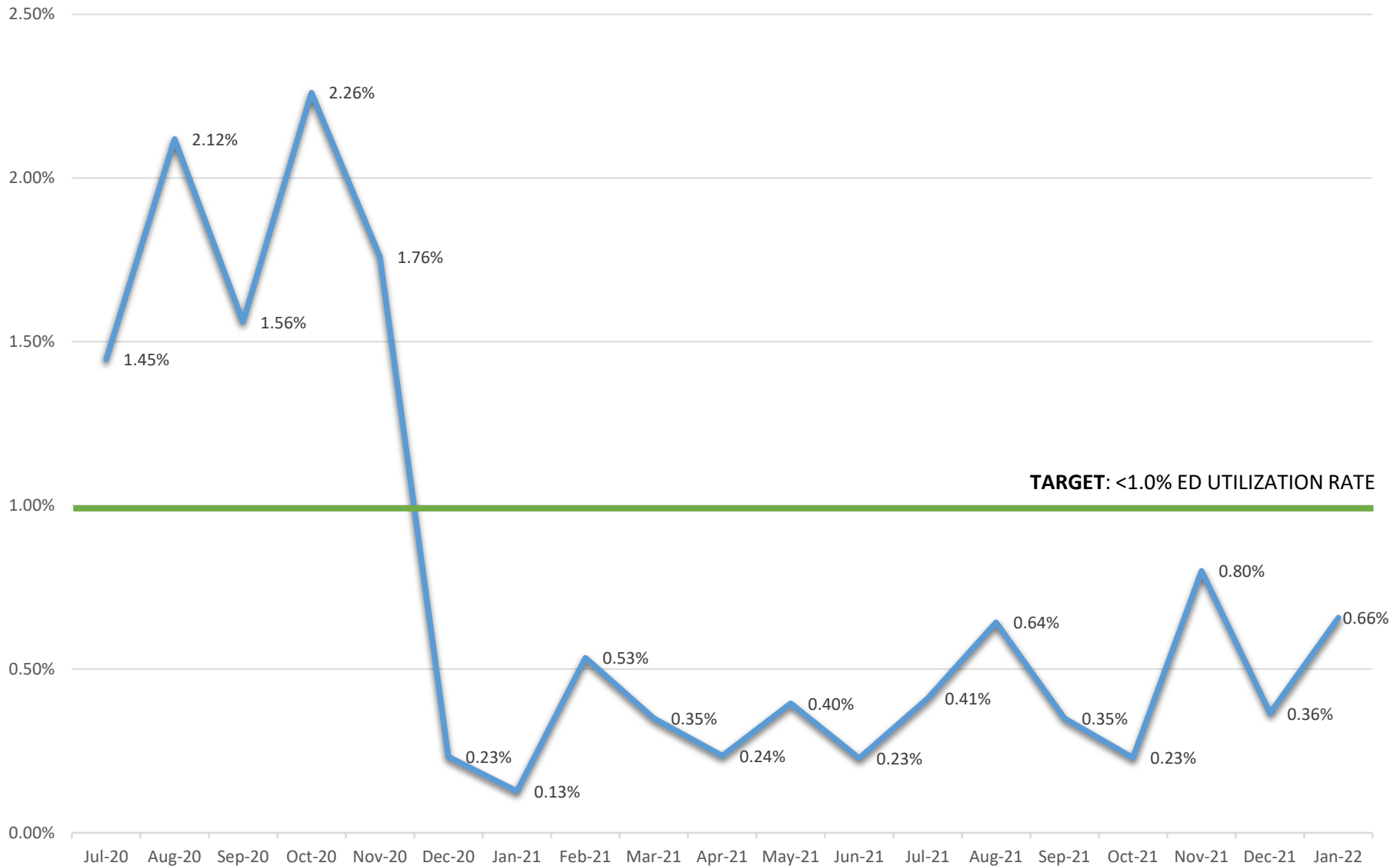
<b>Infrastructure</b>	✓	<ul style="list-style-type: none"> <li>Completed Dec 2020 - Official patient care launch</li> <li>Completed Aug 2020 - PCN recruitment &amp; training</li> </ul>
<b>Patient Population</b>	✓	<ul style="list-style-type: none"> <li>All NHs scheduled at wound clinic with transportation or navigation needs</li> <li>N= 2,016 (FY 22 Q2) NH seen at QMCW Wound Center</li> <li>N= 687 engagement attempts to 229 unique patients</li> <li>N= 173 of 229 (75%) didn't need transportation/navigation assistance <del>after multiple attempts</del></li> <li>N= 32 active (as of Dec. 2021)</li> <li>N= 21 on wait list (as of Dec. 2021)</li> <li><i>Two most common SDoH needs in addition to transportation are food &amp; housing</i> <ul style="list-style-type: none"> <li><i>82% food insufficiency</i></li> <li><i>58% housing insecurity</i></li> <li><i>58% report mental health issues</i></li> <li><i>39% report substance abuse issues</i></li> </ul> </li> </ul>

Short-Term Outcomes	FY 21	Target	FY 22 Quarter 2
Decrease no show/cancellation by 10% by the end of FY21	1,786	1,604	457
Increase NH visits by 10%.	1,954	2,149	1,429
Increase unique NHs served by ride share program, Year over Year (YOY)	20	≥100	20
Increase NHs served by navigator, YOY	157	>157	191
Decrease wound-specific readmissions for QMCWO wound patients	57	<57	10
Decrease ER visits for wound care for QMCWO wound patients	85	<85	25
Improve wound healing rate through appointment compliance	3.24%	>3.24%	5%

# Monthly Readmission Rate: FY21 - PRESENT

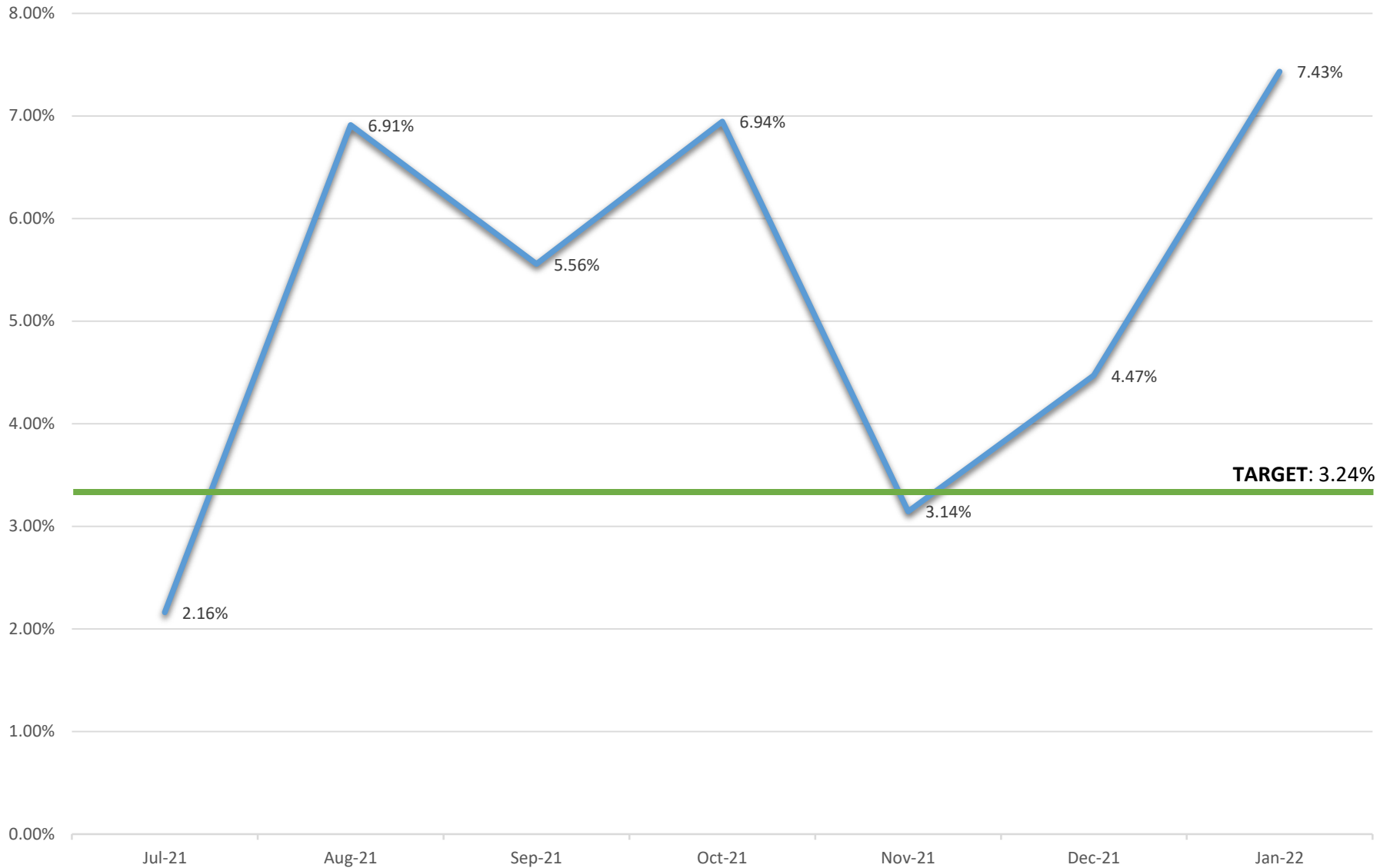


# Monthly ED Utilization Rate: FY21 - PRESENT



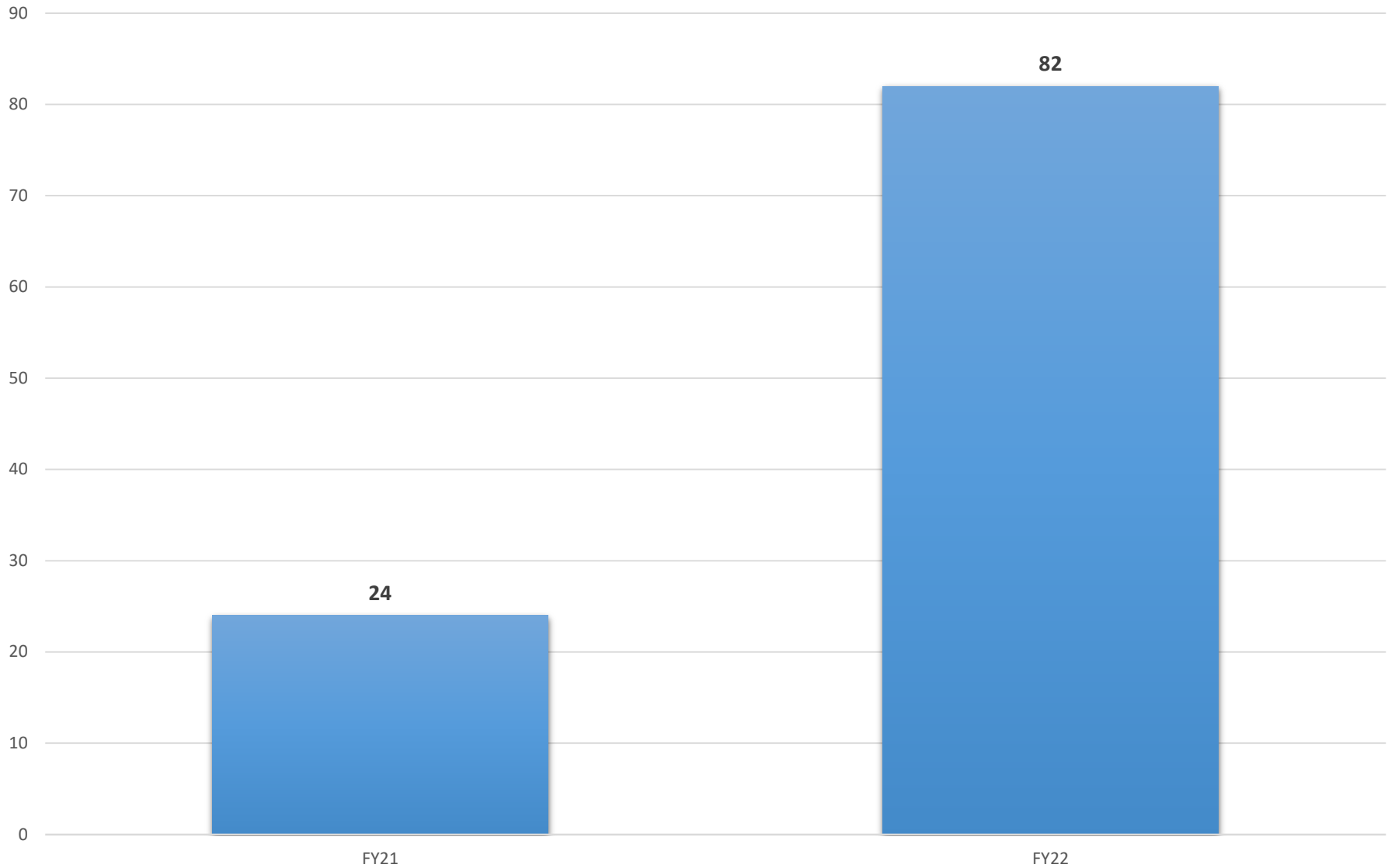


# Monthly Wound Healing Rate: FY 22 - PRESENT



**TARGET: 3.24%**

# Annual # of NH Healed Wounds: FY21 vs FY22



# Lessons learned

- Complex Persistent Needs of the Native Hawaiian community
- Limited Staffing Support
- Transportation reservation challenges



# Next Steps



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## Next Steps:

1. Expansion to primary care
2. Additional Team Members for the wound center:
  - Social Work
  - Case Manager
  - 2<sup>nd</sup> Navigator

# Mahalo



**Wound Care Center Staff**



**Charlene Young**



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**Kaleolani Helekunihi**