Increasing Access to Wound Care for Native Hawaiians at QMCWO

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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
• 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.


**Internal Source:** Kahua Ola Strategic Plan 2018
• 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 QMC 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

Source 1: State of Hawai‘i Primary Care Needs Assessment 2016, Hawai‘i Department of Health (data as of 2010)
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

<table>
<thead>
<tr>
<th>✓ Completed</th>
<th>❋ In Process</th>
<th>□ Not Started</th>
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### Infrastructure

- Completed Dec 2020 - Official patient care launch
- Completed Aug 2020 - PCN recruitment & training

### Patient Population

- All NHs scheduled at wound clinic with transportation or navigation needs
- N= 2,016 (FY 22 Q2) NH seen at QMCW Wound Center
- N= 687 engagement attempts to 229 unique patients
- N= 173 of 229 (75%) didnʻt need transportation/navigation assistance after multiple attempts
- N= 32 active (as of Dec. 2021)
- N= 21 on wait list (as of Dec. 2021)

  Two most common SDoH needs in addition to transportation are food & housing
  - 82% food insufficiency
  - 58% housing insecurity
  - 58% report mental health issues
  - 39% report substance abuse issues

### Short-Term Outcomes

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

TARGET: <1.0% READMISSION
Monthly ED Utilization Rate: FY21 - PRESENT

TARGET: <1.0% ED UTILIZATION RATE
Monthly Wound Healing Rate: FY 22 - PRESENT

TARGET: 3.24%
Annual # of NH Healed Wounds: FY21 vs FY22

FY21: 24
FY22: 82
Lessons learned

• Complex Persistent Needs of the Native Hawaiian community
• Limited Staffing Support
• Transportation reservation challenges
Next Steps:

1. Expansion to primary care
2. Additional Team Members for the wound center:
   - Social Work
   - Case Manager
   - 2nd Navigator
Wound Care Center Staff

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