

## **Adventist Health Castle 2020 Community Health Plan**



The following Implementation Strategy serves as the 2020 – 2022 Community Health Plan for Adventist Health Castle and is respectfully submitted to the Office of Statewide Health Planning and Development on May 28, 2021 reporting on 2020 results.

## Executive Summary

### Introduction & Purpose

Adventist Health Castle is pleased to share its Community Health Implementation Strategy. This follows the development of its 2019 Community Health Needs Assessment (CHNA) in accordance with requirements in the Affordable Care Act and IRS 990 Schedule H requirements and approved by the Adventist Health Board of Directors on October 17, 2019. The 2019 CHNA was a coordinated collaboration across 19 not-for-profit hospitals across Hawaii led by the Healthcare Association of Hawaii.

After a thorough review of the health status in our community through the community health needs assessment (CHNA), we identified areas that we could address using our resources, expertise and community partners. Through these actions and relationships, we aim to empower our community and fulfill our mission of “Living God’s love by inspiring health, wholeness and hope.”

The results of the CHNA guided this creation of this document and aided us in how we could best provide for our community and the vulnerable among us. Three major issues inhibit people’s abilities to achieve a truly healthy life:

1. A lack of foundation for health that includes the basic things that every human being needs;
2. Loss of community, including the aspects of place values, culture, and practices;
3. A poor relationship to the healthcare system, which is seen as lacking in humanity, empathy, and availability.

Through the CHNA, three goals and 11 priorities were identified, along with a new “community prescription for health”. People studied identified 12 factors that make up health: security, justice, love, hope, time, food, place, community, healthy keiki, healthy kupuna, care, and available healthcare.

This Implementation Strategy summarizes the plans for Adventist Health Castle to develop and collaborate on community benefit programs that address prioritized health needs identified in its 2019 CHNA. Adventist Health Castle has adopted the following two of the 11 priority areas for our community health investments. Next, is a table summarizing all 11 statewide priorities from the CHNA.

STATEWIDE PRIORITIES	Hawai'i	Maui	Moloka'i	Lāna'i	O'ahu	Kaua'i
<b>GOAL 1 - FOUNDATIONS</b> : Provide the basic foundations so that people can have more control over their own health						
1.1 <b>Address financial insecurity.</b> Create coordinated and systemic opportunities for communities and families to make good food and housing realistically accessible, develop workforce skills, create new economic opportunities, build financial assets, and reestablish active lifestyles.	•	•	•	•		
1.2 <b>Work together for equality and justice.</b> Work alongside affected populations to address inequitable treatment and opportunity.	•	•			•	•
1.3 <b>Strengthen families.</b> Create the conditions and opportunities for families to be healing forces for its own members, including addressing financial stress that will enable more healthy time together.		•	•		•	•
1.4 <b>Prepare for emergencies.</b> Mitigate future health impacts by engaging people, increasing understanding of the most vulnerable populations, building food systems, and strengthening relationships and community cohesion.			•			
1.5 <b>Build good food systems.</b> Establish access to nutritious food so that it is available to all.	•			•	•	•
<b>GOAL 2 - COMMUNITY</b> : Preserve, nurture, expand, and employ the healing properties of community						
2.1 <b>Restore environment and sense of place.</b> Better protect Hawai'i's natural resources, prepare adequately for climate change, develop good design and integration of the built environment, and reduce the negative environmental impacts of the visitor industry.		•			•	•
2.2 <b>Nurture community identity and cohesiveness.</b> Support community led efforts through shared activities and events, active organizing around shared purposes, and instilling community pride to foster greater trust and connectivity.	•	•	•	•	•	
2.3 <b>Invest in teenagers and healthy starts.</b> Invest in health and education at the earliest stages of life. Support school-based structures, community-based activities, and youth empowerment for pre-teens and teens.	•	•	•			•
2.4 <b>Shift kūpuna care away from "sick care."</b> Build a new paradigm of aging so that healthy aging is available to more. Combat the grave threats of boredom, loneliness, purposelessness, inactivity, and other social and emotional hardships of aging.		•	•	•		
<b>GOAL 3 - HEALTHCARE</b> : Improve the relationship between people and the healthcare system						
3.1 <b>Strengthen trust in healthcare.</b> Rebuild and strengthen trust through listening, empathy, compassion, and treating the whole person, while also paying attention to the use of language and cultural nuances.	•	•	•			
3.2 <b>Provide accessible, proactive support for those with high needs.</b> Identify, develop, and strengthen outreach, early intervention, free healthcare services, mental health, and oral health for those who are struggling with houselessness, mental illness, and addiction.	•	•	•	•	•	•

Important island priorities marked with “●”

Highest need areas on island in RED

Note: *all* statewide priorities are significant on all islands

## Prioritized Health Needs – Planning to Address

- **Health Priority #1:** Nurture community identity and cohesiveness.  
Within our community working age adults face the common challenge of working more than 1 job and caring for their keiki and kupuna. Therefore, it is essential to promote and support activities and relationships that create opportunities to preserve well-being, healing, and recovery from illness, allowing people and families to be healing forces for themselves.
- **Health Priority #2:** Provide accessible, proactive support for those with high needs.  
In Hawaii's economy, many households are one unexpected emergency away from being in financial turmoil. Within the community, people with great needs live with challenges with regard to housing, mental illness, and addiction. We are working to provide proactive outreach and preventative services ranging from medical, oral, mental and financial assistance.

Building a healthy community requires multiple stakeholders working together with a common purpose. We invite you to explore how we intend to address health challenges in our community and partner to achieve change. More importantly, we hope you imagine a healthier region and work with us to find solutions across a broad range of sectors to create communities that define the well-being of people.

The purpose of the CHNA was to offer a comprehensive understanding of the health needs in the Adventist Health Castle service area and guide the hospital's planning efforts to address those needs.

The significant health needs were identified through an analysis of secondary data and community input. These health needs were prioritized according to a set of criteria that included the following:

- Alignment with the Adventist Health Mission
- Use of services which provide meaningful impact based on our resources and expertise

- Opportunities to collaborate with community partners to extend beyond healthcare to address root causes

For further information about the process to identify and prioritize significant health needs, please refer to Adventist Health Castle CHNA report at the following link:

<https://www.adventisthealth.org/about-us/community-benefit/>

## Adventist Health Castle and Adventist Health

Adventist Health Castle is an affiliate of Adventist Health, a faith-based, nonprofit integrated health system serving more than 80 communities on the West Coast and Hawaii.

### Vision

Adventist Health will be a recognized leader in mission focus, quality care and fiscal strength.

### Mission Statement

Living God's love by inspiring health, wholeness and hope.

### Adventist Health Includes:

- 23 hospitals with more than 3,600 beds
- 290 clinics (hospital-based, rural health and physician clinics)
- 15 home care agencies and eight hospice agencies
- Three retirement centers & one continuing care retirement community
- A workforce of 37,000 including associated, medical staff physicians, allied health professionals and volunteers

We owe much of our heritage and organizational success to the Seventh-day Adventist Church, which has long been a promoter of prevention and whole person care. Inspired by our belief in the loving and healing power of Jesus Christ, we aim to bring physical, mental and spiritual health and healing to our neighbors of all faiths. Every individual, regardless of his/her personal beliefs, is welcome in our facilities. We are also eager to partner with members of all faiths to enhance the health of the communities we serve.

Our commitment to quality health care stems from our heritage, which dates to 1866 when the first Seventh-day Adventist healthcare facility opened in Battle Creek, Michigan. There, dedicated pioneers promoted the "radical" concepts of proper nutrition, exercise and



sanitation. Early on, the facility was devoted to prevention as well as healing. They called it a sanitarium, a place where patients—and their families—could learn to be well.

More than a century later, the health care system sponsored by the Seventh-day Adventist Church circles the globe with more than 170 hospitals and more than 500 clinics, nursing homes and dispensaries worldwide. And the same vision to treat the whole person—mind, body and spirit—continues to provide the foundation for our progressive approach to health care.

Adventist Health Castle was founded 65 years ago through a grassroots collaboration by local Windward O’ahu residents, concerned physicians, benefactors, and the Seventh-day Adventist Church. It became the first hospital located on the Windward side of O’ahu, which is separate from Honolulu by the Ko’olau Range. It was from these humble beginnings that Castle was born to care for its community. Today, Castle is known for its commitment to its community through patient care that is delivered with compassion deeply rooted in our spiritual heritage while engaging in a constant quest for clinical quality and performance excellence.

## Summary of Implementation Strategies

### Implementation Strategy Design Process

Stakeholders from the 19 hospital facilities in the Adventist Health System were invited to participate in a Mission Integration Summit on September 26 and 27, 2019. During this two day-long event, participants were introduced to the 2019 Adventist Health Implementation Strategy Template. After the summit, each hospital was invited to participate in a series of technical assistance calls and consultation sessions with representatives from Adventist Health Community Integration and Conduent Health Communities Institute to further develop and refine their implementation strategy.

### Adventist Health Castle Implementation Strategy

The implementation strategy outlined below summarizes the strategies and activities by Adventist Health Castle to directly address the prioritized health needs. They include:

- **Health Need 1: Nurture community identity and cohesiveness**
  - Strategy 1 Promotion of Healthy Lifestyles**
  - 1.1** Healthy Lifestyles (The Daniel Plan, CHIP)
  - 1.2** Youth Well-being (Boys and Girls Club)
  - 1.3** Healthy Weight and Your Child family based lifestyle change program for high BMI youth
  - 1.4** Expanded Food and Nutrition Program “Life Skills” family based lifestyle change program for low income families

1.5 Community Events Promoting Healthy Lifestyles

**Strategy 2 Support People and Their Families Living with Chronic Diseases**

2.1 Support Groups for Chronic Illness and Caregiving

**Strategy 3 Youth Education and Outreach to Develop Hawai'i's Workforce**

3.1 Cope Scholars

3.2 Career Days

- **Health Need 2: Provide accessible, proactive support for those with high needs**

**Strategy 1 Expanded Clinic Access to Increase Health Prevention and Improve Treatment to Prevent Avoidable Admissions and Readmissions**

1.1 Provide Urgent Care Services

1.2 Educate Community on When to Use Urgent Care Services

1.3 Extend Primary Care Clinic Hours

1.4 Extend Specialists' Clinic Hours

1.5 Telehealth Program

1.6 Provide Behavioral Health Clinic

**Strategy Develop Standard Guidelines for Primary Care Offices to Risk Stratify Patients' Risk Level**

2.1 Provider Education Using ICD-10 Codes for Accurate Risk Adjusted Scoring

2.2 Payor Contracts to Fund Community Resources Based on Risk Adjusted Scores

2.3 Develop a Case Management Program to Support Patients Outside of the Hospital Setting

**Strategy 3 Deliver Nicotine Reduction Services in the Community in Addition to Hospital Patients to Proactively Reach Disparate Populations**

3.1 Behavioral Health Inpatient Visits

3.2 Onsite Support Groups at the Hospital

3.3 Community Based Groups

The Action Plan presented below outlines in detail the individual strategies and activities Adventist Health Castle will implement to address the health needs identified through the CHNA process. The following components are outlined in detail in the tables below: 1) actions the hospital intends to take to address the health needs identified in the CHNA, 2) the anticipated impact of these actions as reflected in the Process and Outcomes measures for each activity, 3) the resources the hospital plans to commit to each strategy, and 4) any planned collaboration to support the work outlined.

No hospital can address all the health needs identified in its community. Adventist Health Castle is committed to serving the community by adhering to its mission, and using its skills, expertise and resources to provide a range of community benefit programs.

### Significant Health Needs – NOT Planning to Address

Other needs identified in the CHNA and listed in the above table yet not specifically addressed did not meet the criteria of the Implementation Strategy.

## COVID 19 Considerations

The COVID-19 global pandemic has caused extraordinary challenges for Adventist Health hospitals and health care systems across the world including keeping front line workers safe, shortages of protective equipment, limited ICU bed space and developing testing protocols. They have also focused on helping patients and families deal with the isolation needed to stop the spread of the virus, and more recently vaccine roll out efforts.

Adventist Health, like other health care systems, had to pivot its focus to meet the most urgent healthcare needs of its community during the pandemic, as well as reassess the ability to continue with some community health strategies due public health guidelines for social distancing. Adjustments have been made to continue community health improvement efforts as possible, while ensuring the health and safety of those participating. The Strategy Action Plan Grids on the following pages reflect updated activities for each strategy.

In FY20, Adventist Health as a system took the following actions in response to the needs created or exacerbated by COVID-19:

- Adventist Health as a system directed “Community Strength Fund grants” to each hospital to support community partners’ immediate response to COVID-19
- Adventist Health as a system directed “Community Integration Catalyst” funds to each hospital to support internal new or expanded community wellbeing programming and innovation as an immediate response to COVID-19
- Began offering more virtual health care visits to keep community members safe and healthy
- Developed an online symptom tracker to help community members determine if they may have COVID-19 or some other flu type illness and what steps to take
- Partnered with MaskUp, a collaboration of 100 leading health systems representing thousands of hospitals across the U.S. joining to create messages for the betterment of the communities they serve



- Was part of a communitywide effort by the local health system to vaccinate eligible community members to help stop the spread of the virus

Locally, Adventist Health Castle took these additional actions:

- In Waimanalo, a few miles from Castle, Hui Mahi'ai tiny home community helped 37 homeless people previously living in makeshift shelters at the beach transition to a residence in a safe, alternative. The Adventist Health \$10,000 grant provided funding to create a safe and sanitary kitchen area. Half newly found medical coverage, food stamps, and other assistance.
- In May 2020, with assistance from funding from Adventist Health, Habilitat (drug treatment recovery residence, many formerly incarcerated) has 150 residents sheltering in place and they were able to effectively continue services by preparing 1,000 meals a day for themselves and for the community in partnership with community organizations like our local community college as a distribution site for meals.
- 18,801 COVID drive through tests
- 1,700 Drive through flu vaccinations
- 1,305 COVID vaccinations as vaccine clinic began on December 22, 2020

## Adventist Health Castle Implementation Strategy Action Plan

**PRIORITY HEALTH NEED: Nurture community identity and cohesiveness**

**GOAL STATEMENT: Adventist Health Castle will work with community members, groups and organizations to inspire hope, provide education and skills to promote well-being as well as ways to prevent avoidable admissions and readmissions**

**Mission Alignment: Well-being of People; Well-being of Places = sense of belonging to a community**

**Strategy 1: Promote healthy lifestyles and behavior**

Programs/ Activities	Process Measures	Results: Year 1	Short Term Outcomes	Results: Year 2	Medium Term Outcomes	Results: Year 3
<b>Activity 1.1 Increase healthy lifestyles (a. The b. Daniel Plan, CHIP c. Healthy Lifestyles)</b>	<b>Daniel Plan</b>	<b>Daniel Plan</b>	<b>Daniel Plan</b>	<b>Daniel Plan</b>	<b>Daniel Plan</b>	<b>Daniel Plan</b>
	# enrolled % completed % Reduction in body fat Reduction in weight Reduction in metabolic age Improvement in lab results, if applicable	46 enrolled 76% completed 1.1% Reduction in body fat 2.1 lbs average reduction in weight 1.4 years Reduction in metabolic age	Not planning to continue, see narrative		Not planning to continue, see narrative	
	<b>CHIP</b>	<b>CHIP</b>	<b>CHIP</b>	<b>CHIP</b>	<b>CHIP</b>	<b>CHIP</b>
	# attended # enrolled	15 attended 17 enrolled	# attended # enrolled		# attended # enrolled	

**PRIORITY HEALTH NEED: Nurture community identity and cohesiveness**

	% completed program BP Weight Lab results	82% completed program	% completed program BP Weight Lab results		% completed program BP Weight Lab results	
	<b>Healthy Lifestyle Class</b> # attended # enrolled # enrolled, if applicable % completed program % completed program, if applicable % would refer friend/family member	<b>Healthy Lifestyle Class</b> 15 enrolled 73% completed program 90% strongly agree/agree they would refer a friend	<b>Healthy Lifestyle Class</b> # enrolled % completed program % would refer	<b>Healthy Lifestyle Class</b>	<b>Healthy Lifestyle Class</b> # enrolled % completed program % would refer friend/family member	<b>Healthy Lifestyle Class</b>
	% improvement in overall health  % improvement in healthy eating	or family to the program  12% improvement in overall health  13% improvement in healthy eating	friend/family member  % improvement in overall health  % improvement in healthy eating		% improvement in overall health  % improvement in healthy eating	

**Source of Data:**

- AHC participant survey, and AHC bioimpedance scale readings

**Target Population(s):**  
Community residents including vulnerable populations

**PRIORITY HEALTH NEED: Nurture community identity and cohesiveness**
**Adventist Health Resources:** (financial, staff, supplies, in-kind etc.)

- Staff, supplies, meeting space

**Collaboration Partners:** (place a "\*" by the lead organization if other than Adventist Health)

- Hale Kokua O' Manoa
- First Presbyterian of Honolulu

**CBISA Category:** (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations) **A1, A2, E3**
**Strategy Results 2020:**

Three different healthy lifestyle offerings were provided during the year. The Daniel Plan is a nationally recognized program including a faith component and was delivered in-person before COVID as a pilot program. Although there were positive behavior changes from the program, due to COVID, the program has not restarted. CHIP and the Healthy Lifestyle programs have been offered virtually with success. Both are expected to continue in 2021. Each of these programs is evidence based and two common aspects of each offering includes the support of peers in a group setting, and program flexibility. Participants choose which healthy habit(s) to focus on as a starting point to sustainable changes toward greater well-being.

**PRIORITY HEALTH NEED: Nurture community identity and cohesiveness**

**GOAL STATEMENT: Adventist Health Castle will work with community members, groups and organizations to inspire hope, provide education and skills to promote well-being as well as ways to prevent avoidable admissions and readmissions**

**Mission Alignment: Well-being of People; Well-being of Places = sense of belonging to a community**

**Strategy 1: Promote healthy lifestyles and behavior**

Programs/ Activities	Process Measures	Results: Year 1	Short Term Outcomes	Results: Year 2	Medium Term Outcomes	Results: Year 3
<b>Activity 1.2 Youth Well-being</b>	# attended # classes	See narrative below	Greater resiliency, lower levels of risky behaviors improved -Emotional Safety -Sense of Belonging -Recognition		% of total truancy rates for 8 <sup>th</sup> grade  % of total completing 8 <sup>th</sup> grade	

**Source of Data:** Boys & Girls National Survey Tool NYOI (National Youth Outcomes Initiative)

**Target Population(s):** Youth

**Adventist Health Resources:** (financial, staff, supplies, in-kind etc.)

- Staff, supplies

**Collaboration Partners:** (place a "\*" by the lead organization if other than Adventist Health)

- \* Boys and Girls Club Windward Oahu
- \*UFC Gym
- \*Windward Community College
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**CBISA Category:** (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations) **A1,**

**Strategy Results 2020:**

Due to COVID precautions, Castle was unable to participate in 2020. The Boys & Girls Windward Clubhouse shifted from in-person services to virtual outreach and then back to in-person services to a limited community. Throughout these shifts, the programming to members were adjusted and Castle is now unable to participate as guest facilitators.

**PRIORITY HEALTH NEED: Nurture community identity and cohesiveness**

**GOAL STATEMENT: Adventist Health Castle will work with community members, groups and organizations to inspire hope, provide education and skills to promote well-being as well as ways to prevent avoidable admissions and readmissions**

**Mission Alignment: Well-being of People; Well-being of Places = sense of belonging to a community**

**Strategy 1: Promote healthy lifestyles and behavior**

<b>Programs/ Activities</b>	<b>Process Measures</b>	<b>Results: Year 1</b>	<b>Short Term Outcomes</b>	<b>Results: Year 2</b>	<b>Medium Term Outcomes</b>	<b>Results: Year 3</b>
<b>Activity 1.3 Healthy Weight and Your Child</b> family based lifestyle change program for youth with high BMI	# attended # cohorts	See narrative below	Increased knowledge including 20+ health topics		Reduced BMI Avg change in BMI	

**Source of Data:** YMCA

**Target Population(s):**

Community residents including vulnerable populations

**Adventist Health Resources:** (financial, staff, supplies, in-kind etc.)

- Staff, meeting space

**Collaboration Partners:** (place a "\*" by the lead organization if other than Adventist Health)

- \* Hawaii Pacific Health
- YMCA of Honolulu
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**CBISA Category:** (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations) **A1, A2, E3**

**Strategy Results 2020:** Due to COVID, the Healthy Weight and Your Child program was suspended with plans to restart in the future.



**PRIORITY HEALTH NEED: Nurture community identity and cohesiveness**

**GOAL STATEMENT: Adventist Health Castle will work with community members, groups and organizations to inspire hope, provide education and skills to promote well-being as well as ways to prevent avoidable admissions and readmissions**

**Mission Alignment: Well-being of People; Well-being of Places = sense of belonging to a community**

**Strategy 1: Promote healthy lifestyles and behavior**

Programs/ Activities	Process Measures	Results: Year 1	Short Term Outcomes	Results: Year 2	Medium Term Outcomes	Results: Year 3
<b>Activity 1.4 Expanded Food and Nutrition Program “Life Skills”</b> family based lifestyle change program for low income families	# attended # cohorts	See narrative below	Increased knowledge on budgeting, shopping, and meal prep and movement		% Motivation: makes small changes  % increase in physical activity  % eat more food/vegetables  % drink fewer sugary drinks	

**Source of Data:** University of Hawaii

**Target Population(s):**  
Community residents which meet low income criteria

**Adventist Health Resources:** (financial, staff, supplies, in-kind etc.)

- Staff, meeting space

**Collaboration Partners:** (place a “\*” by the lead organization if other than Adventist Health)

- \* University of Hawaii Expanded Food & Nutrition Program

**CBISA Category:** (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations) **A1, A2, E3**

**Strategy Results 2020:**

Previously, this program was held at Castle in the Wellness & Lifestyle Medicine Center. Due to COVID, the program adapted and shifted the class to live virtual sessions in 2021. Castle continues to support the program by connecting families to the Expanded Food and Nutrition Program “Life Skills.” Castle pediatric practices are inviting patients to enroll in the program in an effort to create healthy lifestyle habits. In 2020, average pediatric weight gain reported ranged from 12 to 30 lbs for those patients who gained weight.

**PRIORITY HEALTH NEED: Nurture community identity and cohesiveness**

**GOAL STATEMENT: Adventist Health Castle will work with community members, groups and organizations to inspire hope, provide education and skills to promote well-being as well as ways to prevent avoidable admissions and readmissions**

**Mission Alignment: Well-being of People; Well-being of Places = sense of belonging to a community**

**Strategy 1: Promote healthy lifestyles and behavior**

Programs/ Activities	Process Measures	Results: Year 1	Short Term Outcomes	Results: Year 2	Medium Term Outcomes	Results: Year 3
<b>Activity 1.5 Community Events</b> exposing and inviting community members to experience healthy lifestyles, screening		See narrative below	# of meals served per day		Increased # of attributed lives	

**Source of Data:** AH Castle- Castle Health Network

**Target Population(s):**  
Community residents in primary and secondary service areas

**Adventist Health Resources:** (financial, staff, supplies, in-kind etc.)

- Staff, meeting space

**Collaboration Partners:** (place a "\*" by the lead organization if other than Adventist Health)

- VegFest Oahu: \* Vegetarian Society
- I Love Kailua Town Party: \* Outdoor Circle, Lanikai
- 6 Pillar of Brain Health Symposium; \* Hawaii Pacific Neuroscience
- Blue Zones Summit; \* Blue Zones
- Christmas morning: \* Institute for Human Services
- Convoy of Hope: \* First Assembly of God
- Habilitat (Residential Recovery Treatment Program) \* Food Preparation 1,000 meals per day

**CBISA Category:** (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations) **A, E**

**Strategy Results 2020:**

Due to COVID, the events offered to our community changed and many events were cancelled. Of those that occurred, below is a description of key activities.

Hawaii Foodbank supplies food to the Waimanalo community and Castle provided 1,120 volunteer hours helping to pack groceries for 3,500 households.

Castle tree lighting shifted from in-person to virtual on December 3, 2020, with 8,287 virtual hits

Castle hosted the mobile Blood Bank on-site for donor collection of blood. In total, 3464 donors were registered and 2,766 donations were captured. This resulted in positively impacting 8,298 community members as one donation can save up to three lives.

Additionally, Castle became an active member of the Compassionate Ko’olaupoko group which is a coalition for community partners working to strengthen a culture of caring to ensure communities are trauma informed and responsive. The ultimate goal is to help kids and families be resilient and compassionate so they can care for themselves and others. Compassionate Ko’olaupoko began by bringing together educators and staff from the K-12 and community college, along with other community agencies including Castle. The group has created an online asset map and focused on the provision of equipping and skill building.

**PRIORITY HEALTH NEED: Nurture community identity and cohesiveness**

**GOAL STATEMENT: Adventist Health Castle will work with community members, groups and organizations to inspire hope, provide education and skills to promote well-being as well as ways to prevent avoidable admissions and readmissions**

**Mission Alignment: Well-being of People; Well-being of Places = sense of belonging to a community**

**Strategy 2: Support people and their families living with chronic diseases**

<b>Programs/ Activities</b>	<b>Process Measures</b>	<b>Results: Year 1</b>	<b>Short Term Outcomes</b>	<b>Results: Year 2</b>	<b>Medium Term Outcomes</b>	<b>Results: Year 3</b>
<b>Activity 2.1 Support Groups</b>	# attended  # sessions offered by group	See narrative below	Increased knowledge as applicable and increase in positive outlook		% Improved in CMS Accountable Health Communities (AHC). Health-Related Social Needs (HRSN) Screening, or equivalent assessment tool	

**Source of Data:** AHC participant survey, and AHC scale readings

**Target Population(s):**  
Community residents including vulnerable populations

**Adventist Health Resources:** (financial, staff, supplies, in-kind etc.)

**PRIORITY HEALTH NEED: Nurture community identity and cohesiveness**

- Staff, supplies, meeting space

**Collaboration Partners:** (place a "\*" by the lead organization if other than Adventist Health)

- Alzheimer’s Caregivers Group: \* Alzheimer’s Association Hawaii, Aloha Chapter
- Grief Support
- Hospice Hawai’i support for those grieving a loss: Navian Hawaii
- Mamma Hui (lactation consultation for infants 0-12 months and mothers)
- Mental Health: \* NAMI (National Association for Mental Illness)
- Parkinson’s people with the disease and their caregivers: \*
- Aloha Kidney people at risk or with the disease: \* Dr. Ramona Wong
- Tobacco Treatment current and ex-smokers support
- Bariatric Back on Track Program
- In Sickness in Health – free health talks for the community
- Eat Well for Life – Vegan cooking demonstration available to the community

**CBISA Category:** (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations) **A1, A2, E3**

**Strategy Results 2020:**

The various support groups listed above were previously in-person gatherings at Castle. Some of the groups discontinued meeting and many shifted to meeting virtually. Every year a Christmas lunch is provided to community members who participate in wellness programs at Castle. For this group of community members, in 2020, 180 healthy drive through meals were prepared free of charge, and distributed at Windward Community College as a partnership opportunity, serving the community. The meal drive through location was located off the Castle campus to accommodate COVID drive through testing.

**PRIORITY HEALTH NEED: Nurture community identity and cohesiveness**

**GOAL STATEMENT: Adventist Health Castle will work with community members, groups and organizations to inspire hope, provide education and skills to promote well-being as well as ways to prevent avoidable admissions and readmissions**

**Mission Alignment: Well-being of People; Well-being of Places = sense of belonging to a community**

**Strategy 3: Youth Education and Outreach to Develop Hawai'i's Workforce**

Programs/ Activities	Process Measures	Results: Year 1	Short Term Outcomes	Results: Year 2	Medium Term Outcomes	Results: Year 3
<b>Activity 3.1</b>  Increase pathways to health careers with community serving community	# enrolled  # high school aged and # 18+  # cohorts  # hospital shifts # hours worked	86 enrolled  10 high school aged; 76 18+ yrs  4 cohorts  1,359 hospital shifts 8,128 hours worked	# enrolled  # high school aged and # 18+  # cohorts  # hospital shifts # hours worked		# COPE Scholars placed in jobs'  # COPE scholars enrolled /graduated in accredited college/university	

**Source of Data:**  
COPE Health Solutions

**Target Population(s):**  
80% from Oahu, with an emphasis on the primary service area, Windward Oahu

**Adventist Health Resources:** (financial, staff, supplies, in-kind etc.)

- Staff, supplies, meeting space

**Collaboration Partners:** (place a "\*" by the lead organization if other than Adventist Health)

COPE Health Solutions

- UCLA Health Policy & Management

**CBISA Category:** (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations) **A1, A2, E3**

### Strategy Results 2020:

The COPE scholar program provides an immersive opportunity for high school aged youth and young adults to gain insight and direction into career pathways in a healthcare setting. The COPE Health Scholar gains hands on experience, learning the day-to-day work activities of healthcare professionals. The goal is to mentor the next generation of healthcare leaders within the community. In 2020, 100% of all the 18+ COPE scholars were enrolled in college. As Hawaii experienced stay-at-home orders, the COPE Scholar had 2 related shutdowns. However, the COPE scholars remained resilient and many were able to finish the year strong.

**PRIORITY HEALTH NEED: Provide accessible, proactive support for those with high needs.**

**GOAL STATEMENT: Increase community member's access to care**

**Mission Alignment: Well-being of People**

**Strategy 1: Expanded clinic access to increase health prevention and improve treatment to prevent avoidable admissions and readmissions**

Programs/ Activities	Process Measures	Results: Year 1	Short Term Outcomes	Results: Year 2	Medium Term Outcomes	Results: Year 3
<b>Activity 1.1 Provide telehealth program</b>	# telehealth encounters 15,345	See narrative below	# telehealth hours with specialists for rural community clinic # telehealth hours off-site		Reduced # emergency department sick visits	
<b>Activity 1.2 Expansion of behavioral health clinic services</b>	# behavioral health 910 encounters	See narrative below	# behavioral health encounters		Decrease % of avoidable admissions related to behavioral health	

**Source of Data:** Castle Health Group

**Target Population(s):**

- Community residents in our primary service area including 135, 345 people

**Adventist Health Resources:** (financial, staff, supplies, in-kind etc.)

- Staff, Supplies, Services, Telehealth staff

**Collaboration Partners:** (place a "\*" by the lead organization if other than Adventist Health)

- Castle Health Group

**CBISA Category:** (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations) A2, A3, G1, G3



### Strategy Results 2020:

Due to the pandemic all services were reviewed and this resulted in not adding urgent care services, expanding primary care hours, or specialists hours. However, care was continued by the addition of telehealth visit options to augment in-person visits. At Castle’s Rural Health Center in Laie, operations expanded beyond medical care to include oral care services.

Additionally, with the exception of massage and in-person cooking classes which was paused due to COVID safety precautions, all other lifestyle medicine services were shifted to being provided virtually. This included 880 diabetic self-management education encounters, 233 nutrition counseling sessions, tobacco treatment services to 142 people and exercise memberships to 43 households with access to 11 fitness classes a week. As the community sheltered in place the importance of these services was magnified as it provided a social connection for many who have had very little contact outside of their homes. Even in a virtual setting, the group sessions are conducted in a way that encourages positive emotional and mental health.

**PRIORITY HEALTH NEED: Provide accessible, proactive support for those with high needs.**

**GOAL STATEMENT: Reduce nicotine use among disparate population**

**Mission Alignment: Well-being of People**

**Strategy 2: Deliver nicotine reduction services in the community as opposed to traditionally hospital focused patient populations in order to proactively reach disparate populations**

Programs/ Activities	Process Measures	Results: Year 1	Short Term Outcomes	Results: Year 2	Medium Term Outcomes	Results: Year 3
<b>Activity 2.1 Behavioral Health Inpatient Visits</b>	# nicotine users reached  # enrolled in program  % who are from priority population  % use stop smoking medication  % 24-hour quit rate	25 nicotine users reached 3 enrolled in program 100% who are from priority population	32.7% use stop-smoking medication (benchmark of 30%)  81.6% 24-hour quit rate (benchmark of 90%)		% use stop-smoking medication  % 24 hour quit rate	

**PRIORITY HEALTH NEED: Provide accessible, proactive support for those with high needs.**

<b>Activity 2.2 Support groups originating from Castle</b>	# attended  # encounters  # sessions offered by group  Virtual groups # attended # encounters # virtual sessions	14 attended  68 encounters  16 sessions offered by group  Virtual groups 17 attended 130 encounters	Included in the above		Included in the above	
<b>Activity 2.3 Community based groups</b>	# attended  # encounters  # sessions offered by group  Virtual groups # attended  # encounters  # virtual sessions offered	15 attended  20 encounters  2 in-person sessions offered by group  Virtual groups 10 attended  94 encounters  20 virtual sessions offered by group	Included in the above		Included in the above	

**Source of Data:** Adventist Health Castle and Professional Data Associates (PDA) Interim Year 2 Evaluation Report, April 2021

**Target Population(s):**

- Priority population: primarily low-income, low-education, or unemployed (important, vulnerable groups who have higher tobacco use prevalence and may face additional barriers to quitting tobacco), expectant Moms who use nicotine

**Adventist Health Resources:** (financial, staff, supplies, in-kind etc.)

- Staff, Supplies, Services

**Collaboration Partners:** (place a "\*" by the lead organization if other than Adventist Health)

**PRIORITY HEALTH NEED: Provide accessible, proactive support for those with high needs.**

Hawaii Community Foundation  
 Windward Community College  
 Habilitat  
 Hawaii State Hospital  
 Castle Health Group

- Ko’olau Clubhouse

**CBISA Category:** (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations) A,F, G

**Strategy Results 2020:**

As of February 2020, due to COVID precautions. Inpatient Behavioral Health Services patients were provided access to services by phone and online visits. Initially, onsite support groups were available at the hospital campus and expanded to our medical office building in Kaneohe. In March 2020, due to COVID-19 precautions, onsite groups transitioned to virtual classes and support groups via web conferencing. Most in-person community-based groups were also cancelled due to COVID-19 restrictions, except for virtual classes to the Habilitat community.

The Adventist Health + Blue Zones Solution

Our desire to improve community well-being grew out of not only our mission at Adventist Health – to live God’s love by inspiring health, wholeness and hope – but also by the sheer need as seen across our system of 23 hospitals. Overwhelmingly, we see diseases of despair including suicide, substance abuse, mental health and chronic illnesses plaguing the communities in which we have a significant presence in. That is why we have focused our work around addressing behavior and the systems keeping the most vulnerable people in cycles of poverty and high utilization.

In an effort to heal these communities, we have strategically invested in our communities by partnering with national leaders in community well-being. We believe the power of community transformation lies in the hands of the community. Our solution for transformation is to create a sustainable model of well-being that measurably impacts the well-being of people, well-being of places and equity.

2020 saw the acquisition of Blue Zones by Adventist Health as the first step toward reaching that goal. By partnering with Blue Zones, we will be able to gain ground in shifting the balance from healthcare – treating people once they are ill – to transformative well-being- changing the way communities live, work and play. Blue Zones widens our impact from only reaching our hospitals’ communities in four states to a global mission practice.

Last year marked the fifth year since Blue Zones Project launched in Hawaii. Blue Zones Project supports well-being in 8 communities across three islands. Castle and Blue Zones Project promoted well-being to the community by sharing and promoting various virtual community events and activities including those provided by community partners, organizations and agencies and Castle such as virtual volunteer opportunities, cooking demonstrations, and exercise.