1. PROJECT IDENTIFICATION

Project Title: Healthy Tomorrows Partnership for Children’s Program (HTPCP) aka: Healthy Tomorrows Hawaii (HTH)

Project Number: H17MC25696

Project Director: Doris Segal Matsunaga, Maternal Child Health Director

Grantee Organization: Kokua Kalihi Valley Comprehensive Family Services

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Project Period: 3/01/2013 – 2/28/2018

Total Amount of Grant Awarded: $235,635
ABSTRACT OF FINAL REPORT

PURPOSE OF PROJECT AND RELATIONSHIP TO SSA TITLE V MATERNAL AND CHILD HEALTH (MCH): The purpose of the Healthy Tomorrows Hawaii (HTH) Project is to empower Kalihi Valley parents to better support their children’s healthy development, to improve parental skills, confidence, and access to health and community services, to increase medical providers’ capacity to provide culturally competent care, and to build collaboration among area service providers. PROGRAM PRIORITY under which the project was funded is Title V of the Social Security Act, Special Projects of Regional and National Significance. STATE TITLE V MCH PROGRAM: The State of Hawaii Department of Health division that administers Title V funds has a long history of support and linkages with Kokua Kalihi Valley Comprehensive Family Services (KKV), including on-going federal and state funding and monitoring of KKV’s Perinatal and Family Planning programs; and funding to provide training and develop the CenteringPregnancy and CenteringParenting models at KKV, as well as at other interested health centers. AAP – HAWAII CHAPTER: Dr. Turlington, KKV Pediatrician, CenteringParenting facilitator, and key player in KKV’s Centering Steering Committee, is a member of the American Academy of Pediatrics, Hawaii Chapter. Key officials from the organization joined the Technical Assistance Team that visited and advised KKV in 2014.

GOALS AND OBJECTIVES: 1) Empower Kalihi Valley parents to better support their children’s healthy socio-emotional development through peer learning and KKV staff mentorship. (a)500 parents will take part in clinic-based family strengthening activities by the end of Year 5. (b)At least 75% of regular participants will report and demonstrate increased parent-child nurturing behaviors, improvement in family protective factors; and/or a stronger support network.

2) Streamline Kalihi Valley families’ access to health, legal and social services through collaboration with key agency partners. (a) 200 children will access screening, education or clinical services provided by KKV
at Linapuni Elementary School by the end of Year 5. (b) KKV will plan and pilot 3 collaborative projects with Linapuni Elementary School by end of Year 5.

3) Improve families’ access to health care and parents’ skills and confidence by implementing medical group visits for prenatal and pediatric care. Process Measures: (a) 50 families will take part in prenatal group visits by the end of Year 5. (b) 50 families will take part in pediatric group visits by the end of Year 5. (c) At least 80% of families will express satisfaction with the services received. (d) Participation and no-show rates will compare favorably with standard pre-natal and well-child visits.

Outcome Measures: (a) 80% of regular CenteringPregnancy participants will report and demonstrate increased knowledge, skills and/or confidence levels regarding pregnancy, childbirth and parenting (b) 80% of regular CenteringParenting participants will report and demonstrate increased knowledge, skills and confidence levels regarding child development and parenting. (c) Assess pilot findings to determine whether group medical visits will become standard care for prenatal and well child patients at KKV by Year 5.

4) Increase medical providers’ capacity to provide culturally-competent health care. (a) 12 Pediatric Residents will learn from KKV’s multicultural staff by the end of Year 5. (b) 12 Pediatric Residents will engage in cultural competency training activities, such as attending Bridging the Gap Medical Interpreter training for Providers, attending cultural presentations with KKV staff, participating in local school events, and/or participating in community gardening and reforestation efforts at Ho‘oulu ‘Aina Nature Park, by the end of Year 5. (c) At least 75% of residents will demonstrate increased cross-cultural competency including the ability to work with medical interpreters.

5) Build collaboration and capacity among Kalihi area health and social service providers. (a) Representatives of at least 4 agencies will participate in three (3) Advisory Board meetings each year, starting in November 2013. (b) Linapuni One-Stop-Shop advisors will participate in quarterly meetings
to increase collaboration with and capacity of the Linapuni School community. (c) 80% of Advisory Board members will report they have gained knowledge on community health issues and enhanced opportunities for collaboration.

**METHODOLOGY:** Kokua Kalihi Valley built evidence-based family strengthening approaches into a multi-cultural medical home by planning and implementing strengths-based models and interventions. Under the HTH grant, KKV staff has worked to engage parents via a constellation of complementary programs which include the following: Centering Pregnancy and Parenting Medical Group Visits, ‘Ohana Play and Learn groups in the medical clinics and in neighborhood settings, parenting education, peer educators, school readiness skill building, identifying families in need of resources, providing support and services to KKV and Kalihi families, enhancing cultural competency of providers and staff, and connecting with community partners to maximize family services. With the emphasis on Family Strengthening and Protective Factors (PF) framework, KKV has incorporated family strengthening and protective factors methods into both clinical and community programs.

**EVALUATION:** HTH measured via survey and observation patient, provider and community satisfaction, increases in skills and confidence, and organizational and community change and capacity building.

**RESULTS/OUTCOMES:** As a result of the Healthy Tomorrows Hawai‘i Project, Kalihi Valley residents and our community health center now have: (1) A unique ‘Ohana Play and Learn Room: a beautiful child-focused early learning environment for parents and children to wait for appointments at KKV’s main clinic; and a mobile Play & Learn Group that sets up during Pediatric Clinics at KKV Wellness Center. (2) Multiple Family-Friendly Waiting Areas with Wall-Mounted Toys and Pop-Up Libraries. (3) Trained and employed part-time Peer Parent helpers (‘Ohana Support Partners) (4) CenteringPregnancy and CenteringParenting Group Medical Visits. (5) Clinic Staff and Community Partners Trained in Protective Factors and Creating Positive Encounters with Parents and Children. (6) Pediatric Residents who
graduate with enhanced experiential cultural competency skills. (7) Organizational multi-disciplinary collaboration across silos (including Prenatal, Pediatrics, Behavioral Health, Family Planning, ‘Aina (Land)-Based and Food Security Programs). (8) An organization commitment to continue to integrate Parent Support and Family Strengthening Services into KKV service model. (9) Stronger collaborative working relationships with neighborhood elementary school and other early childhood and family service providers; and (10) At least 3,000 unduplicated parents, children, medical providers, and community service providers were served. 95% were Asian and/or Pacific Islanders.

PUBLICATIONS/PRODUCTS: See List in Narrative

DISSEMINATION/UTILIZATION OF RESULTS: See List of Presentations and Publications in Narrative

FUTURE PLANS/SUSTAINABILITY: KKV made a large investment of resources in the HTH Project during the 5 years of the grant. The bulk of resources came from KKV’s core budget and staffing, and therefore options for sustainability are good as HT grant ends. Remarkable buy in and ownership by key administrative and provider staff will advance sustainability. All of this time was contributed in-kind by KKV, reflecting our Administration’s strong commitment to the transformation of our care model for parents and young children.

KKV was recently awarded multi-year grants for Trauma Informed Care Office of Attorney and Improving Outcomes for Medicaid Patients. These grants are now providing resources to support cross-cutting silo-busting integrated services work by KKV staff, including Family Strengthening/Parent Support staff time. KKV recognizes that one of its unique programs is Family Strengthening/Parent Support services integrated with clinical services. We know of no other community health center with a fully staffed developmentally designed ‘Ohana Play and Learn Room for waiting and drop in families. KKV strategic plans call for more large multi-year integrated services grants, which bodes well for sustainability of the services developed under the HTH Project.
1. **PURPOSE OF PROJECT AND RELATIONSHIP TO SSA TITLE V MATERNAL AND CHILD HEALTH (MCH) PROGRAMS:**

   **PURPOSE:** The purpose of the Healthy Tomorrows Hawaii (HTH) Project is to empower Kalihi Valley parents to better support their children’s healthy development, to improve parental skills, confidence, and access to health and community services, to increase medical providers’ capacity to provide culturally competent care, and to build collaboration among area service providers.

   **PROGRAM PRIORITY** under which the project was funded is Title V of the Social Security Act, Special Projects of Regional and National Significance.

   **STATE TITLE V MCH PROGRAM:** The State of Hawaii Department of Health division that administers Title V funds has a long history of support and linkages with Kokua Kalihi Valley Comprehensive Family Services (KKV). This division provides on-going federal and state funding and monitoring of KKV’s Perinatal and Family Planning programs. In 2014 through 2018, one or both offices provided additional funds to KKV via contract modification, a sign of their faith in the work we do. This division has supported KKV in developing the CenteringPregnancy model, and contracted with KKV during the first year of the HT grant to coordinate CenteringPregnancy and CenteringParenting training for health personnel at KKV as well as at other interested health centers. More detail included in the 2014 Progress Report.

   **AAP – HAWAII CHAPTER:** Dr. Turlington, KKV Pediatrician, CenteringParenting facilitator, and key player in KKV’s Centering Steering Committee, is a member of the American Academy of Pediatrics, Hawaii Chapter. Key officials from the organization joined the Technical Assistance Team that visited and advised KKV in 2014. In 2016, officials advised KKV re: a proposal submitted for a CATCH grant. KKV was not awarded the grant, but the generous guidance from the AAP officials was valuable and will be
incorporated in future grants. The AAP Hawaii Chapter has also written letters of support for recent child-health related grants. Plans are underway to invite AAP reps for a KKV visit to discuss future collaboration.

Via The Healthy Tomorrows Hawaii Project, Kokua Kalihi Valley, a FQHC community health center, aimed to build evidence-based family strengthening approaches into a multi-cultural medical home by planning and implementing strengths-based models and interventions. Under the HTH grant, KKV staff has worked to engage parents via a constellation of complementary programs which include the following: Centering Pregnancy and Parenting Medical Group Visits, ‘Ohana Play and Learn groups in the medical clinics and in neighborhood settings, parenting education, peer educators, school readiness skill building, identifying families in need of resources, providing support and services to KKV and Kalihi families, enhancing cultural competency of providers and staff, and connecting with community partners to maximize family services. With the emphasis on Family Strengthening and Protective Factors (PF) framework, KKV has incorporated family strengthening and protective factors methods into both clinical and community programs.

2. GOALS AND OBJECTIVES; METHODOLOGY, EVALUATION and OUTCOMES (#2 to #5):

Notes: Methodology(#3), Evaluation Measures(#4) and Outcomes(#5) are nested within Goals and Objectives. A Summary of Outcomes is follows on p. ____.

For purposes of this report, FY 2017-2018 will be referred to as 2017 since most of the activities occurred in calendar year 2017.

Goal 1: Empower Kalihi Valley parents to better support their children’s healthy socio-emotional development through peer learning and KKV staff mentorship

Objective:

1) Empower Kalihi Valley parents to better support their children’s healthy socio-emotional development through peer learning and KKV staff mentorship.
Methodology:

‘Ohana Play and Learn (OPL) and Pediatric Clinic Play and Learn (Developmental family friendly waiting rooms or areas with a bilingual Peer Parent Educator modeling child play and informal parent conversation); Child and Family Friendly Wait Area Enhancement (installation of wall mount and table-top toys and pop up libraries); ‘Ohana Support Partners (parent peer educators hired on part time basis); Reach Out And Read Literacy Program (Books given out by medical providers at well-child checks); Parent Talk Story Time at Linapuni School and KPT Housing Project (Parent-Child activities in neighborhood settings).

Evaluation Measures and Outcomes:

a) 500 parents will take part in clinic-based family strengthening activities by the end of Year 5. In 2017, KKV recorded 2070 parent encounters and 2687 child encounters in clinic-based family strengthening activities. It is estimated that: 1201 unduplicated parents have been served since the start of this grant; 1586 people were served in 2017; and 690 parents served in 2017. **1201 = Total estimated parents served 2013-2018 (Years 1 to 5)**

Estimates based upon the following assumptions:

- The number of encounters is documented on a monthly tally sheet.
- ⅓ of monthly encounters are new participants; 2/3 are repeat participants
- ½ of participants served each year are repeat participants from the following year

b) At least 75% of regular participants will report and demonstrate increased parent-child nurturing behaviors, improvement in family protective factors; and/or a stronger support network.

Point in time surveys of ‘Ohana Play & Learn participants show an average of 89% of parents self-reported and/or demonstrated an increased understanding of child behaviors and acknowledged the importance of being engaged in their children’s learning, health and well-being.
Pediatricians and other providers note when families wait in the Play & Learn Room or groups, they find children are calmer during exams and parents are more open to communication during medical visits.

Four (4) `Ohana Support Partners reported and demonstrated increased parent-child nurturing behaviors, improvement in family protective factors; and stronger support networks during their participation in the program. `Ohana Support Partners are parents who were identified as having interest and skills in working with children and/or families while attending Play and Learn sites. These parents were invited to attend a training program focused on how to work with parents and promote literacy. Four (4) parents participated in training and internship in the past three years; and all provided peer-peer parent modeling and support at clinic and community Play and Learn sites. Two (2) parents participated in an unpaid internship in exchange for income benefits via the TANF- First-To-Work (FTW) program, and two (2) parents were hired as part-time employees by KKV in fall 2017, working alongside KKV staff for 5 to 10 hours/week; One (1) parent continues in this peer parent educator position as of this writing.

During Year 5, a survey of Parent Talk Story participants (Linapuni School and KPT Housing) reported 78% were very satisfied and 22% satisfied; All parents self-reported and/or demonstrated an increased understanding of child behaviors and acknowledged the importance of being engaged in their children’s learning, health and well-being. Participant quotes:

“The best part is the circle time and all different kinds of toys, them to help kids play and learn. Kids can learn their preschool knowledge through this program.”

“Getting together with other families and small children.”

“Best part was young kids and their family get together share their learning. Train them to be independent and get ready for preschool.”
“The best part of this program is for my daughter to have to opportunity to prepare and learn activities & knowledge gain for school readiness.”

**Goal 2: Streamline Kalihi Valley families’ access to health, legal and social services through collaboration with key agency partners.**

**Objectives:**

a) **200 children** will access screening, education or clinical services provided by KKV at Linapuni Elementary School by the end of Year 5

b) **KKV will plan and pilot 3 collaborative projects** with Linapuni Elementary School by end of Year 5

**Methodology:**

KKV has partnered with Linapuni Elementary School as follows:

- **Summer Literacy Fair:** 144 families attended the community partnership Summer Literacy Fair at Linapuni School in May 2017. Children were given free books to read over the summer. 5 Literacy partners; Head Start partners (Read To Me; Hawaii Literacy; YMCA; Linapuni PCNC- Tuesday’s Club) along with 4 KKV health programs provided activities relating to reading to children and with children. Over 300 books were given away to families.

- **Back To School Health Fair:** 137 families attended the Back To School Health Fair held in August 2017 at Linapuni. 8 community partners, and 4 Pediatric Residents provided activities related to health and wellness. The theme was “Stay Healthy & Strong”. Along with community partners, former council member, Dennis Arakaki, and KKV Dental Van partnered with us, adding to the success of the event. 3 Dental Residents assisted in Dental Van and with activity table.

- **Parent Talk Story Time (PTS)** started in 2015 is a parent support playgroup held at Linapuni.
School. In September 2016 we partnered with YMCA-at Kuhio Park Terrace (KPT) low income housing to expand programming to families. The “Come with Me” YMCA-KPT program is held on Wednesdays and Fridays. They now join Parent Talk Story Time play group at Towers of Kuhio Park on Thursday mornings. The partnership allows us to support each other with staffing, parenting and early childhood activities on both days. Each morning parents attend 30 minutes of parenting classes. The topics have become parent directed, as coordinator facilitates the group. Topics: Importance of school attendance; bullying; Becoming a Calm Parent; Children Learn What They Live; Wrinkled Heart; Why can’t I hit my child?” Talk to children not at children; Different parenting styles; Safe and Loving Homes and managing Temper Tantrums. Currently, 20 parents attend weekly along with 22 children. New parents can join at any time. Peer Parent Educator, ‘Ohana Support Partner, and UH practicum students coordinate activities and engage parents in early childhood activities. Healthy snacks are served and mealtime conversations encouraged and modeled.

Evaluation Measures and Outcomes

a) Over 500 families have participated in events co-sponsored with Linapuni during the past 5 years.

b) 3 collaborative projects were implemented in partnership with Linapuni Elementary School:

Annual Summer Literacy Fair, Annual Back to School Health Fair, and a weekly Parent Talk Story Time Group.

Goal 3: Improve families’ access to health care and parents’ skills and confidence by implementing medical group visits for prenatal and pediatric care.

Methodology:

KKV planned, implemented and evaluated the CenteringPregnancy and CenteringParenting
model of group medical visits. 16 Centering Groups were held: 8 CenteringPregnancy and 8 CenteringParenting (with one ongoing as of May 2018). The planning stage included forming a Centering Steering Committee, training key providers and staff, and piloting groups.

Objectives - Process Evaluation Measures:

a) 50 families will take part in prenatal group visits by the end of Year 5.

11 Centering Pregnancy patients participated in 2017 (Two CP groups)
51 Total patients participated between Dec 2013 and February 2018.

# participants who attended at least 1 group visit; those who attended more than half of the group sessions receive a Ross’ $50 gift certificate to purchase baby items.

b) 50 families will take part in pediatric group visits by the end of Year 5.

30 Centering Parenting patients participated in 2017 (5 CP groups)
56 Total patients participated between Dec 2013 and February 2018.

# participants who attended at least 1 group visit; those who attended more than half of the group sessions receive age and developmentally appropriate baby items and 4 children’s books. (Thermometer and nail clippers are given to new moms and a demonstration and discussion is held on how and when to use these items).

c) At least 80% of families will express satisfaction with the services received.

100% participant satisfaction rate by those completing the program based on responses given through written evaluations as well as confidence scale. 100% expressed strong levels of satisfaction in follow-up telephone interviews with a random sample of Centering group participants in 2018 (see 3.g. for details)

d) Participation and no-show rates will compare favorably with standard prenatal and well-child visits:
The average number of participants per group was small, and several Centering Pregnancy groups have been cancelled and re-scheduled due to low participation rate. Provider productivity for KKV Centering groups was lower than for standard prenatal and well-child care. Both patients and providers reported consistently high satisfaction with the groups, and providers observed and noted high participant engagement. A full outcomes evaluation will be completed in calendar year 2018, pending additional data.

**Objectives - Outcome Measures:**

1. **e) 80% of regular CenteringPregnancy participants will report and demonstrate increased knowledge, skills and/or confidence levels regarding pregnancy, childbirth and parenting.**

   100% of patients self-report increased knowledge skills and confidence levels regarding pregnancy, childbirth and parenting at each session, when they share or engage in “talk story” discussions with staff or each other. Follow-up telephone interviews with a random sample of Centering group participants (described in detail below in 3.g) show participants were able to recall specific information and topics discussed 6 months to 3 years later.

2. **f) 80% of regular CenteringParenting participants will report and demonstrate increased knowledge, skills and confidence levels regarding child development and parenting.**

   Evaluation of participant satisfaction is at 100% rate based on responses given through written evaluations as well as confidence scale. Patients also self-report increased knowledge skills and confidence levels regarding pregnancy, childbirth and parenting at each session, when they share or engage in “talk story” discussions with staff or each other. Staff also conducted observations of parent/child interactions and noted that parents were more engaged with infants, asked questions relating to parenting, and were increasingly responsive to parenting strategies shared with them by staff. Follow-up telephone interviews with a random sample of
Centering group participants (described in detail below in 3.g) show participants able to recall specific information and topics discussed 6 months to 3 years later.

**g) Assess pilot findings to determine whether group medical visits will become standard care for prenatal and well child patients at KKV by Year 5.**

The Centering Steering Committee is in process of assembling and reviewing quantitative and qualitative data from the past 3 full years of Centering implementation. They have determined that Centering patient participation is not high enough for this to become KKV’s sole approach to providing prenatal care, but that for those who do complete the program, show a very high satisfaction rate. KKV now has two Providers leading CenteringPregnancy and 3 Providers leading CenteringParenting groups.

**CenteringPregnancy Outcomes:**

Birth outcomes for CenteringPregnancy participants vs. overall KKV perinatal patients 2014-2018: CenteringPregnancy low birth weight rate is lower than KKV average LBW rate (6% vs 7.8%). Centering Pre-term birth rate is slightly higher than average for KKV standard (10% vs 9.25%). The most striking difference was in the % of vaginal births for Centering vs KKV standard (88% vs 75%), however KKV C-section and vaginal birth data was only available for 2017.

**Birth outcomes for CenteringPregnancy patients vs. KKV perinatal patients 2014-2018:**

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<thead>
<tr>
<th></th>
<th>CenteringPregnancy average</th>
<th>KKV Average</th>
</tr>
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<tbody>
<tr>
<td>Low birth weight</td>
<td>6%</td>
<td>7.8%</td>
</tr>
<tr>
<td>Pre-term</td>
<td>10%</td>
<td>9.25%</td>
</tr>
<tr>
<td>Vaginal births</td>
<td>88%</td>
<td>75% (2017 only)</td>
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A full outcomes evaluation for both CenteringPregnancy and CenteringParenting will be completed in calendar year 2018, pending additional data and assessment, and the Steering
Committee will make recommendations re: the role of Centering in KKV’s perinatal model within this calendar year.

**Qualitative data re: patient perceptions of Centering** was gathered via follow-up telephone interview with a random sample of Centering group participants in groups held between 2013 and 2017 (3 full calendar years). 32 names were randomly selected for interview. All were contacted, and 15 people (14 mothers + 1 father) agreed to and completed interviews, age range of 20-35 years old. No refusal or polite refusals from participants, only no answer or wrong numbers. Most had attended both Centering Pregnancy and Parenting.

When clients were asked about their experiences in Centering, most reported they experienced an emotional impact, but all said they felt supported, satisfied and comfortable. They reported being able to share their experiences with each other and have their questions answered. Common experiences shared:

“Me & my husband attended. Remembered: “How to support the kids.”

“Be sociable, everybody got to talk, they all were nice.”

First pregnancy: “Made me feel comfortable going through emotions, others going through the same thing.”

“Best experience, and know what to expect.”

Concepts that participants reported (and recalled) learning: giving birth, learning to take care of baby, massage baby, SIDS, Breastfeeding vs. Formula, breathing, contractions, what to do when baby cries, what to do when baby is sick, and bowel movement color. Specific concepts mentioned by participants learned:

“How cultures are same and different.”

“Giving birth, what to do if baby cries all the time.”
“Healthy foods, what to avoid, 0-9 months of pregnancy. Learned about healthy birth and children.”

“Playing with toys & reading books. Know which one to play with, like blocks. Describe color and size with baby.”

Other comments participants shared:

“Staff offered can to pick up and drop off, but I had a ride.”

“Snacks were very healthy, still come to sessions if wasn’t offered.” And “Going into class, not expected to be fed.”

Two families had asked if there were classes for children older than one year. Discussion of Parent Talk Story on Thursdays are open.

**Goal 4: Increase medical providers’ capacity to provide culturally-competent health care.**

**Objectives:**

a) 12 Pediatric Residents will learn from KKV’s multicultural staff by the end of Year 5.

Three Pediatric Residents have conducted CenteringParenting groups since 2015. The groups provide them with a wide array of experiences in working with a multi-cultural environment. Interpreters are present to assist with interpretation as needed. The 10 session CenteringParenting program starts at babies 1\textsuperscript{st} well-baby checkup and ends around the time each baby reaches their 1\textsuperscript{st} birthday. Residents plan and implement the entire curriculum under the guidance of KKV’s Pediatrician, Dr. A. Turlington. Evaluations of each session show a 95% satisfactory rate by facilitators. Dr. Turlington says “I think Centering is a huge help in teaching anticipatory guidance, confidence and independence.” Since 2013, 10 Pediatric Residents have been worked alongside and learned from KKV multi-cultural staff.

b) 12 Pediatric Residents will engage in cultural competency training activities, such as
attending *Bridging the Gap* Medical Interpreter training for Providers, attending cultural presentations with KKV staff, participating in local school events, and/or participating in community gardening and reforestation efforts at Ho’oulu ‘Aina Nature Park, by the end of Year 5.

- A total of 13 Pediatric Residents have participated in one or more KKV-sponsored cultural competency training activities since 2013
- In 2017: 4 Pediatric Residents (PR) participated in the Linapuni Back to School Fair.
- 3 PR were the primary facilitators for CenteringParenting groups; and
- 3 PR participated in cultural, community gardening and reforestation efforts at Ho’oulu ‘Aina Nature Park

The annual community-based Back to School Fairs, held on the grounds of a neighborhood early childhood school, gives the Residents an opportunity to interact with children and parents in an environment that is more familiar for the families and new for the Residents, which tends to put all on a more equal footing. It is in a less structured setting than the brief medical encounter, where more informal observation and interaction can occur, allowing for more honest exchanges, and opportunities for learning about patient context and culture. The following anecdote provides an illustration:

*After the Linapuni Health Fair a Pediatric Resident working with KKV staff on an Anti-Bullying activity; “The Wrinkled Heart” shared how working with the families and talking with the children about bullying “opened up her eyes” to the issue. She shared that she would be more aware when working with children in a medical setting. She read from 2 children’s books, “Hands are not for Hitting” and “Words are not for Hurting”. Parents and children shared how bullying has impacted them in 1-1 discussions. She shared how her 1-1 talks with children gave her*
insight into their feelings and struggles with bullying as well as increasing her understanding as to why the children choose to keep silent and not seek adult help. It was an experience she stated she would share with her peers.

c) At least 75% of residents will demonstrate increased cross-cultural competency including the ability to work with medical interpreters.

In 2016, HTH staff developed and implemented a “Cultural Competency Assessment” survey to evaluate Residents experience and skills working with KKV families in clinic and community settings. 4 students participated (1 third year Resident, 2 second year residents, and 1 intern).

Findings:

- All rated their current cultural awareness as higher than it was at the start of their residency (average of 4 vs 2.5 on a scale of 1 to 5).
- Residents listed specific KKV activities that contributed to their cultural competency, including learning about patient and family cultural beliefs, informal conversations and observation in the Peds Play and Learn waiting room, facilitating CenteringParenting groups, connection to land, roots and culture at the Ho’oulu ‘Aina Nature Park.
- All expressed interest in further skill enhancement activities and training at KKV, including Protective Factor training, community health fairs, in addition to the activities above.

Goal 5: Build collaboration and capacity among Kalihi area health and social services providers.

Objectives:

a) Representatives of at least 4 agencies will participate in three (3) Advisory Board meetings each year, starting in November 2013.

Methodology: Convened and staffed 3 Advisory Board groups: 1) HTH Service Provider Group,
2) HTH Parent Advisory Group and 3) Centering Steering Committee.

*Centering Steering Committee,* is an internal group of key KKV providers and staff who have been meeting regularly since who guide, implement and evaluate KKV’s CenteringPregnancy and CenteringParenting group visit model. From the beginning of the HTH Project, this Committee has maintained a core of influential program and provider champions, including KKV’s Medical Director/Family Practice MD, Pediatrician, Certified Nurse Midwife, Maternal Child Health Director, Perinatal Case Manager, Pediatric Medical Assistant, and Parenting Educator. A BH Psychologist has joined episodically for planning pilot “Two Generation Care” programs.

*Service Provider Advisory Group* was formed in 2014, met at least twice per year, and last met in 2017. At the last meeting discussion included the next 5 years of HTH with grant writers, with focus was on building capacity, “Two Generation Care” and building a Family Friendly Medical Home, and evaluation of the HTH Provider Board.

*Parent Advisory Group:* Parent Advisors participated in two Focus Groups held in February 2016, and in informal “talk-story” focus group discussions in 2017. The identified issue with sustaining the group was that parents were not comfortable being in an identified “leadership” role. In October 2017, the members of the “Talk Story” group were able to provide feedback with HTH staff and how we can better serve Kalihi families. Participants were asked what services at KKV were important to them, the ‘Ohana Play & Learn (OPL), Parent Talk Story, Pediatric clinic and books Reach Out and Read (ROR). The OPL was a stress reliever for parents. Children do not want to go to the doctor, but they want to play in the OPL. One participant shared, “When is time for us to go to the doctor, they don’t want to come. They cry that they don’t want to go. But they ask, “Are we going to Aunty’s room to play?” and when I tell them
“yes” and they are so excited to come to their appointment.” One participant shared, “Location is helpful, close to work and school areas” and another individual shared, “KKV offers a lot of services and the services are free.”

Programs and services the participants would like to see continue at KKV: OPL. Parent Talk Story, PEDS clinic, books and events at Linapuni School. **Tuesday Club:** This Linapuni school-sponsored parent club has been a partner with HTH for more than 4 years. They have joined us at both Linapuni Fairs. The parents made healthy after school snack bags to give away and helped at their club table on event day. The school’s PCNC (Parent Child Community Networking Center staff) coordinates this group. In October HTH Project Coordinator and Parent Educator was invited to do a parenting presentation to 13 parents and 7 school staff.

b) **Linapuni One-Stop-Shop advisors will participate in quarterly meetings to increase collaboration with and capacity of the Linapuni School community.**

Linapuni Elementary School is an early childhood school (pre-K to Grade 2) located within the Kuhio Park Terrace (KPT) Housing Project. The program using the name “Linapuni One-Stop-Shop” disbanded in 2014, and members of the group are invited to attend HTH Advisory Board events and meetings. Most of the programs started by the Kellogg-funded Lei Hipu’u Project continue in the community (Sunday’s Group; Tuesday Club; and Pacific Voices, a program for youth). PACIFIC VOICES is a community program located in Hawaii’s largest public housing project: Kuhio Park Terrace (KPT). They provide cultural programs to the community and an after school program to assist children with homework and learning of technology. Pacific Voices and HTH staff has partnered to start a Play and Learn for families at their site. The weekly morning group is primarily for Chuukese-speaking families who live at KPT Housing Project. The program has a focus on literacy development. HTH project staff provided training and
consultation, mentoring of staff, early childhood basics and literacy, and assisted with ordering of supplies for set up.

c) **80% of Advisory Board members will report they have gained knowledge on community health issues and enhanced opportunities for collaboration.**

In Year 4 and 5, members of the three Groups comprising the Advisory Board were asked via oral survey and/or email survey to evaluate the Board and their experience of the HTH project. Responses indicated all (100%) participants know about, understand, and believe in the value of the work of the HTH Project. They feel that they know how to support the Project and can see how it benefits their work and organizations. Results reflected a group who felt connected and committed to the HTH Project and KKV’s efforts to build a true community-based medical home for residents.

5. RESULTS/OUTCOMES: SUMMARY

Outcomes are detailed under each Objective above. In summary, as a result of the Healthy Tomorrows Hawai‘i Project, Kalihi Valley residents and our community health center now have:

- A unique ‘Ohana Play and Learn Room: a beautiful child-focused early learning environment for parents and children to wait for appointments at KKV’s main clinic; and a mobile Play & Learn Group that sets up during Pediatric Clinics at KKV Wellness Center.
- Multiple Family-Friendly Waiting Areas with Wall-Mounted Toys and Pop-Up Libraries.
- Trained and employed part-time Peer Parent helpers (‘Ohana Support Partners)
- CenteringPregnancy and CenteringParenting Group Medical Visits.
- Clinic Staff and Community Partners Trained in Protective Factors and Creating Positive Encounters with Parents and Children.
- Pediatric Residents who graduate with enhanced experiential cultural competency skills.
- Organizational multi-disciplinary collaboration across silos (including Prenatal, Pediatrics, Behavioral Health, Family Planning, ‘Aina (Land)-Based and Food Security Programs).
- An organization commitment to continue to integrate Parent Support and Family Strengthening Services into KKV service model.
- Stronger collaborative working relationships with neighborhood elementary school and other early childhood and family service providers.

At least 3,000 unduplicated parents, children, medical providers, and community service providers were served. 95% were Asian and/or Pacific Islanders.

6. PUBLICATIONS/PRODUCTS: **HTH List of Publications/Products** (audience)

**Publication:**

**Products:** (audience)
**MCH/Family Strengthening**
Family Strengthening Program brochure (Clients)
KKV Material and Child Health, Health is...A great start in life! Booklet (Clients)
“How does Protective Factors impact our work?” training (Staff)
Evaluation of Protective Factors workshop survey (Staff)
HTH Partnership for Children HRSA TA Team Visit PP presentation-May 15, 2015 Providers?)
Healthy Tomorrows Hawaii Programs flyer (Providers?)
Building Family Strengthening into a Multicultural Medical Home poster (Providers?)

**Centering Pregnancy/Parenting**
Think...Child Safety First PP presentation (Clients)
Healthy Pregnancy Program flyer, including Chuukese language (Clients)
Centering Pregnancy is coming flyer (Clients)
Is Your Baby Due in 2014-Centering Parenting with Dr. Laura DeVilbiss (Clients)
Centering Pregnancy “What is it?” pull tab flyer (Clients)
Centering Parenting is...Well Mother & Well Baby (Clients)
Centering Pregnancy and Parenting Binder (Clients)

‘Ohana Support Partners (OSP)
OSP Sanitization Log form (Staff)
Safety Guidelines form (Staff)
Sanitizing and Cleaning form (Staff)
Timesheet form (Staff)
Family Strengthening Weekly Reflection form (Staff)
Volunteer Tool Kit Checklist form (Staff)

‘Ohana Play and Learn
Children Learn What They Live poem (Clients)
Early Cues for a hungry baby flyer (Clients)
Hands are not for hitting flyer (Clients)
Words are not for hurting flyer (Clients)
Words are not for hurting mini flyer (Clients)
Read while you wait flyer (Clients)
Family Strengthening Supports survey (Clients)
Safety Rules flyer (Clients)

Child Birth Class
Baby Care PP presentation (Clients)
Breastfeeding and Nutrition PP presentation (Clients)
Car Seat Safety PP presentation (Clients)
Hello family, letter to family from newborn baby flyer (Clients)
Protective Factors Are Important flyer (Clients)

Parent Talk Story
What Is Your Baby Feeling? PP presentation (Clients)
Parent Talk Story Time groups flyer (Clients)
Build Strong Family Foundations Early pyramid flyer (Clients/Staff)
Program evaluation for baby group (Clients)
Program evaluation for preschool group (Clients)
How To Bring Out The Best In Your Child flyer (Clients)
Teaching Values resource (Clients)
Keiki who read/keiki can read resource (Clients)
Teach Numbers resource (Clients)
Teach Letters resource (Clients)
Teach Colors resource (Clients)
Teach Shapes resource (Clients)
Parenting Styles resource (Clients)
My Child does not listen to me! Resource (Clients)
Routines resource (Clients)
I can do it! Developmentally Age Appropriate Chore chart (Clients)

7. DISSEMINATION/UTILIZATION OF RESULTS:

Presentations and Publications


Group Medical Visits and Education for Pregnant and Parenting Families at Kokua Kalihi Valley. Presentation at Perinatal Support Services Quarterly Meeting. May 2017. Darrah Arruda, Certified Medical Assistant and Doris Segal Matsunaga, MPH.

8. FUTURE PLANS/SUSTAINABILITY:

KKV made a large investment of resources in the HTH Project during the 5 years of the grant. As a result, while the HRSA/AAP Healthy Tomorrows grant provided a small bolus of critical continuous staff support for planning, training and piloting, the bulk of resources came from KKV’s core budget and staffing, and therefore options for sustainability are good as HT grant ends. Most importantly, the remarkable buy in and ownership by key administrative and provider staff will advance sustainability. KKV’s MCH Director, Doris Segal Matsunaga, has been integral to the oversight and initial implementation of this project, as have KKV’s Nurse Midwife, Joanne Amberg, KKV’s Clinical Director Dr. Laura DeVilbiss, and Pediatrician Dr. Alicia Turlington who have participated in HTH planning meetings and are leading the implementation of the CenteringPregnancy and CenteringParenting group visits. All of this time was contributed in-
kind by KKV, reflecting our Administration’s strong commitment to the transformation of our care model for parents and young children.

KKV was recently awarded multi-year grants for Trauma Informed Care (VOCA-DOJ-Hawaii Office of Attorney General) and Improving Outcomes for Medicaid Patients (HMSA – largest local medical insurance company). These grants are now providing resources to support cross-cutting silo-busting integrated services work by KKV staff across a wide variety of clinical and community programs, including Family Strengthening/Parent Support staff time. KKV recognizes that one of its unique programs is Family Strengthening/Parent Support services integrated with clinical services, a program has been built and strengthened under the HTH grant. We know of no other community health center with a fully staffed developmentally designed ‘Ohana Play and Learn Room for waiting and drop in families. KKV strategic plans call for more large multi-year integrated services grants, which bodes well for sustainability of the services developed under the HTH Project.
• **ANNOTATION**

Via The Healthy Tomorrows Hawaii Project, KKV built evidence-based family strengthening approaches into a multi-cultural community health center medical home by planning and implementing strengths-based interventions such as clinic-based Play and Learn groups, CenteringPregnancy and CenteringParenting medical group visits, training of health providers in Protective Factors Framework, and collaboration with a neighborhood elementary school.

• **KEY WORDS**