



JOHN A. BURNS School of Medicine



# Striving for ALOHA with ALOHA

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# Disclosures

 Neither I nor my spouse have relevant financial relationships or affiliations with commercial interests







# Objectives

- Recognize core values and strategies essential to transform learning and work environments into psychologically safe organizations
- Examine examples of schoolwide initiatives that have community and equity as core drivers
- Evaluate core components of academic affiliation agreements needed to achieve shared missions of aloha







- to greet, hail; compassionate, affection, mercy, sympathy, kindness, sentiment, grace; beloved, loving, kind, charitable; pity; to venerate
- Attaining Lasting Optimal Health for All
- Adaptability, Leadership, Opportunity, Humor and Humanism,
   Accessibility





# Connections and Relationships

- alo, 1. sharing 2. in the present oha, joyous affection, joy ha, life energy, life, breath
- JABSOM Vision: Attaining
   Lasting Optimal Health for All

`Ōlelo Noeau #203

'A'ohe pau ka 'ike i ka hālau ho'okahi. #203 All knowledge is not taught in the same school. [One can learn from many sources.] The Aloha Spirit Law Hawaii Revised Statutes, Section 5-7.5

A Akahai – meaning kindness (grace), expressed with tenderness;

L Lokahi – meaning unity (unbroken), expressed with harmony;

O 'Olu'olu – meaning agreeable (gentle), expressed with pleasantness;

**H** Ha'aha'a – meaning humility (empty), expressed with modesty;

A Ahonui – meaning patience (waiting for the moment), expressed with perseverance.



### JOHN A. BURNS School of Medicine

https://www.hookuaaina.org/%CA%BBolelo-noeau-a%CA%BBo-teaching-and-learning/https://law.justia.com/codes/hawaii/2013/title-1/chapter-5/section-5-7.5





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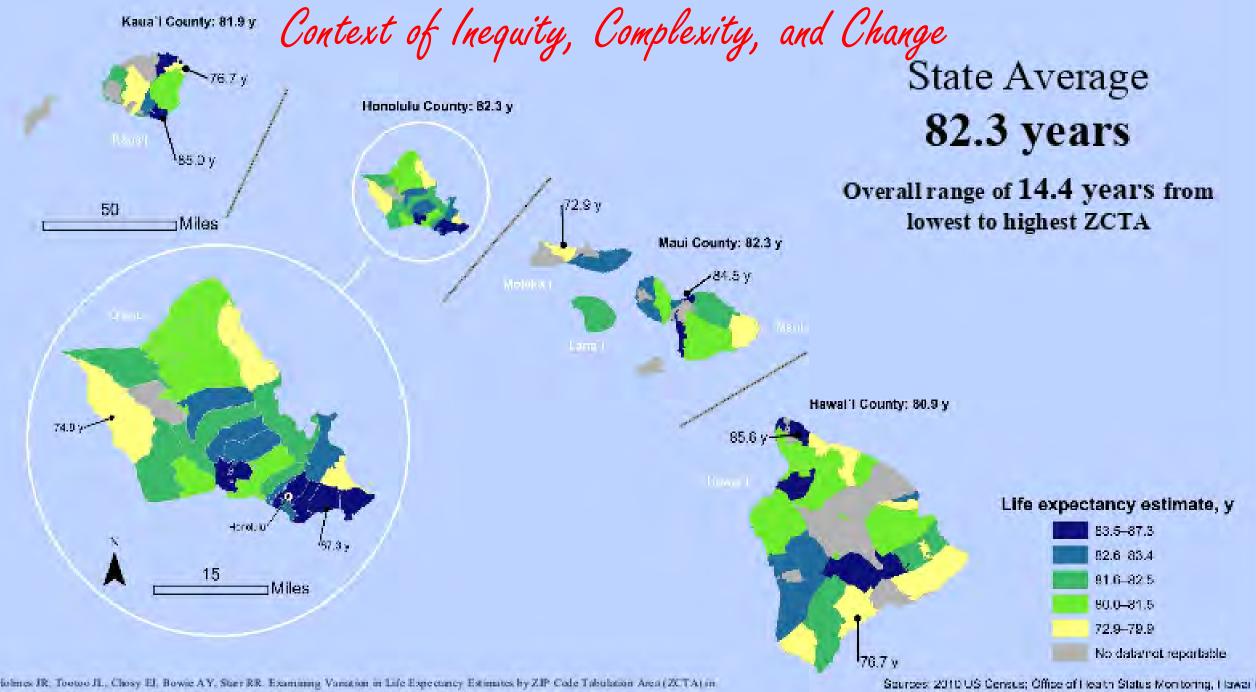


# Guiding Native Hawaiian Values

- A'o: to learn, teach, counsel
- Alu: to cooperate, work together
- Mālama: to care for, protect and preserve
- Kuleana: responsibility, duty
- Pono: to be in a state of harmony or balance with all things in life, righteousness, behaving correctly and forthrightly







Holmes JR; Tootoo JL, Chosy El, Bowie AY, Start RR. Examining Vanation in Life Expectancy Estimates by ZIP Code Tabulation Area (ZCTA) in Hawkiii 's Four Main Counties, 2008-2012. Preventing Chronic Disease, 2018;15:5888/pcd180035

State Department of Health, 2008-2012.

Asset Limited, Income Constrained, Employed: households with income above the FPL but below the basic cost of living

ALICE in Hawai'i: 2022 Facts & Figures

### **POVERTY SHARPLY INCREASED**

There was a sharp increase in the number of households pushed below the poverty line (15% in 2022 vs. 9% in 2018).

### **COVID'S LASTING IMPACT**

The COVID-19 pandemic negatively impacted Hawai'i residents' financial and emotional wellbeing, and many of these negative impacts persist.

### **RESIDENTS IN DEBT**

More than 3 in 4 Hawai'i households are carrying debt and 1 in 3 below the ALICE Threshold owe more than is manageable.

# MORE PEOPLE ARE AT A TIPPING POINT

More Hawai'i households have fallen below the ALICE Threshold (44% in 2022 vs. 42% in 2018).

### A GROWING CRISIS: MENTAL HEALTH

The three most common issues that continue to impact Hawai'i households overall are:

- · Mental health challenges
- · Difficulty paying off debts
- · Difficulty paying for housing

### NEW MINIMUM WAGE CLOSER TO ALICE THRESHOLD

The vast majority of households below the ALICE Threshold (84%) have combined annual household income of less than \$75,000, the equivalent of two full-time wage earners making \$18/hr. each.

## STRUCTURAL DISPARITIES PERSIST

There are significant disparities by race/ethnicity, household size and households with children that mean some households are much more likely than others to be below the ALICE Threshold.

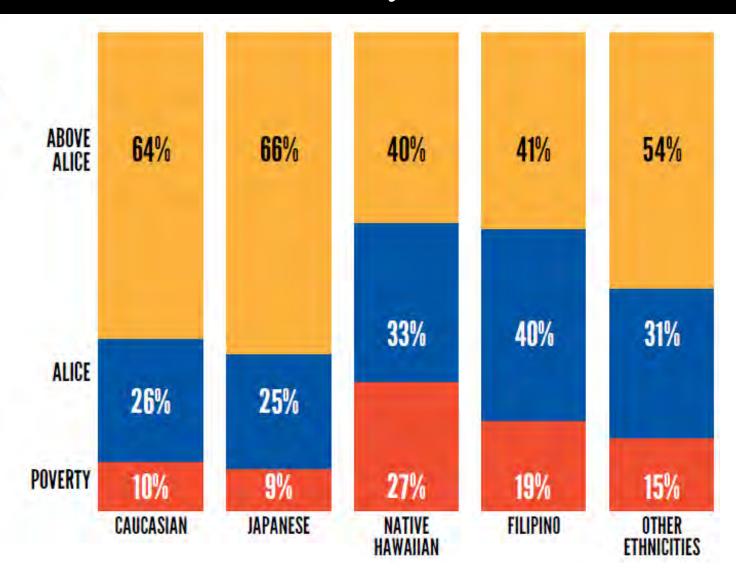
# ALICE in Hawaii: 2022 Facts and Figures

## Percentage of ALICE Households by Ethnicity

Household Survival Budget: The bareminimum costs of basic necessities (housing, childcare, food, transportation, health care, and a smartphone plan, plus taxes). The average Household Survival Budget in Hawai'i for a single adult is just over \$35,000 and the cost for a family of four (two adults, one infant, one preschooler) is more than \$100,000.

Poverty: FPL-Hawai'i \$15,630 (single) and \$31,920 (4-person household)

ALICE: Income above FPL but below COL



### The communities we serve

### Specifically, households below the ALICE Threshold are more likely...

# To have children in the household:

**54**%

of households with children are below the ALICE Threshold.

# To live in larger households:

**65**%

of households with 3 or more occupants are below the ALICE Threshold.

### To be Native Hawaiian or Filipino:

A majority of Native Hawaiian (60%) and Filipino (59%) residents fall below the ALICE Threshold.

# To have lower levels of educational attainment:

**65**%

of respondents without a college degree are below the ALICE Threshold.

# To struggle with paying for basic household expenses:

46%

of households below the ALICE Threshold are unable to pay all of their bills on time.

# To have insufficient income:

**84**%

have combined annual household income of less than \$75,000, well below the median income of \$87,722 as reported by the Census Bureau for 2020.

# To be working, but with inconsistent work opportunities:

**62**%

have members of the household who work full time

**30**%

**29**%

work part-time

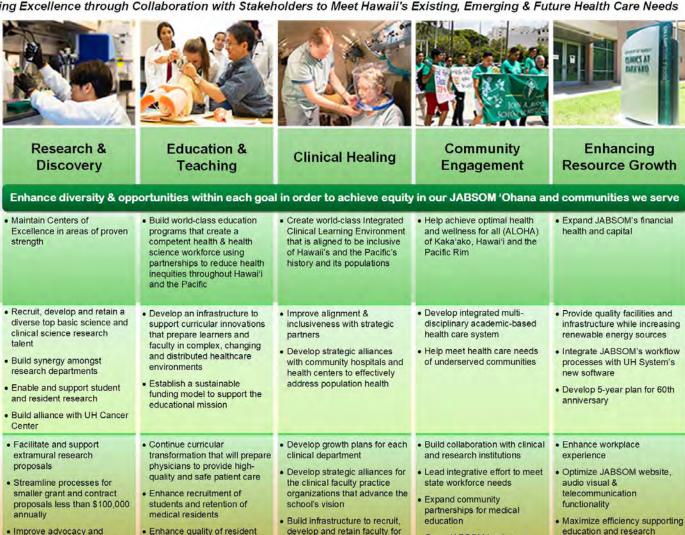
are paid hourly

### JABSOM Strategic Summary

VISION – Maika'i Loa: Attaining Lasting Optimal Health for All A.L.O.H.A.



Seeking Excellence through Collaboration with Stakeholders to Meet Hawaii's Existing, Emerging & Future Health Care Needs



clinical teaching and research

Grow JABSOM leaders,

leadership and innovation

# A Vision of ALOHA

Maika'i Loa: Attaining Lasting Optimal Health for All

Enhance diversity and opportunities within each strategic goal in order to achieve equity in our JABSOM `ohana and the communities we serve

### **Shared, Core Values**

- Collaboration: Shared accomplishments in the spirit of partnership
- Diversity and Inclusion: Respect for the entire spectrum of human experience
- Excellence: Guiding all of our efforts in research, education, and service
- Innovation and Discovery: The generation, application, and transmission of new knowledge
- Pono: Integrity, morality, and equity, taking action to eliminate health disparities in the spirit of social justice

GOALS

representation for research

within JABSOM & the public

support and training programs

Provide education for learners

and faculty that promotes resilience, professionalism. healthcare leadership, and

humanism

# JABSOM Mission

JABSOM, as part of the fabric of Hawai'i, is a diverse learning community committed to excellence and leadership in:

- Educating current and future healthcare professionals and leaders
- Delivering high-quality healthcare
- Conducting research and translating discoveries into practice
- Establishing community partnerships and fostering multidisciplinary collaboration
- Pursuing alliances unique to Hawai'i and the Asia-Pacific region
- Acting with forethought regarding right relationships, respect, and moral action. Pono

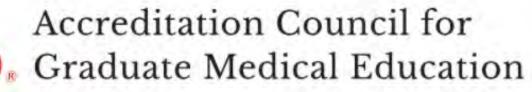








MEDICAL EDUCATION



# A Healthier Future for All The AAMC Strategic Plan

OCTOBER 2020

# IS AMERICA'S APPROACH TO HEALTH BROKEN?

The Association of American Medical Colleges (AAMC) Strategic Plan includes "strengthening the medical education continuum for transformed health care and learning environments" to "improve patient-level and system-level outcomes", resulting in "current and future physicians engaged in a lifetime of learning for the benefit of patients and their families and communities."

Graduates of the University of Hawai'i John A. Burns School of Medicine are lifelong learners. They apply their knowledge of foundational and clinical sciences, demonstrate a deep appreciation for their community, and communicate effectively in the care of their patients, particularly the peoples of Hawai'i and the Pacific Basin. They practice medicine with the highest professional standards while maintaining their wellness and resiliency.

WE HAVE A PLAN TO MAKE AMERICA HEALTHIER.



# JABSOM C-CODE

# Coordinating Committee on Opportunity, Diversity, and Equity

- Support JABSOM's efforts to identify strategic priorities and coordinate/support initiatives relevant to diversity, inclusion, and equity
- Champions from foundational and clinical departments, units, programs, all levels of trainees, staff
- Focus: resource hub (training, policies) for learner, faculty & staff development, trainee curricula, recruitment & retention, coordinated community engagement, policies/procedures



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# Revised graduation objectives - 2021-2022

- 1. Lifelong Learning
- 2. Foundational Knowledge and Discovery non-biological determinants
- 3. Care of patients IPE, QI, PS
- 4. Communication & Interpersonal Skills IPE, EI, influence of bias
- 5. Population & Community Health NH and other Indigenous views, broad SDH including racism, population health mgmt
- 6. Professionalism professionalism philosophy
- 7. Wellness & Resiliency critical incident debriefing, mental health







# Residency & Fellowships

 Transforms medical students into physician scholars who care for the patient, family, and a diverse community

Results in the development of physicians who

equitable, affordable, quality care; and the

health of all members of the community

focus on excellence in delivery of safe,

### CLER PATHWAYS TO EXCELLENCE

EXPECTATIONS FOR AN OPTIMAL CLINICAL LEARNING ENVIRONMENT TO ACHIEVE SAFE AND HIGH-QUALITY PATIENT CARE

VERSION 2.0

 Design and conduct the programs in a fashion consistent with the needs of the community, the mission(s) of the Sponsoring Institution, and the mission(s) of the Program

Residents must demonstrate competence in accountability to patients, society and the profession





ACGME EQUITYMATTERS<sup>TM</sup>

Well-Being in the Time of

# ADAPTABILITY, LEADERSHIP, OPPORTUNITY: COVID-19 adjustments and lessons learned

JABSOM Liaison to the Hawai'i Emergency Management Agency ESF-8 (community care & outreach co-lead; home-based care of COVID+; telehealth)

Co-Chair, DOH Medical Advisory Working Group
(Vaccine Implementation Planning Committee, Communications, Provider Enrollment)

UH System Health & Well-Being Group & COVID-19 Policies and Practices Group

Participant in weekly statewide Chief Medical Officers' meetings

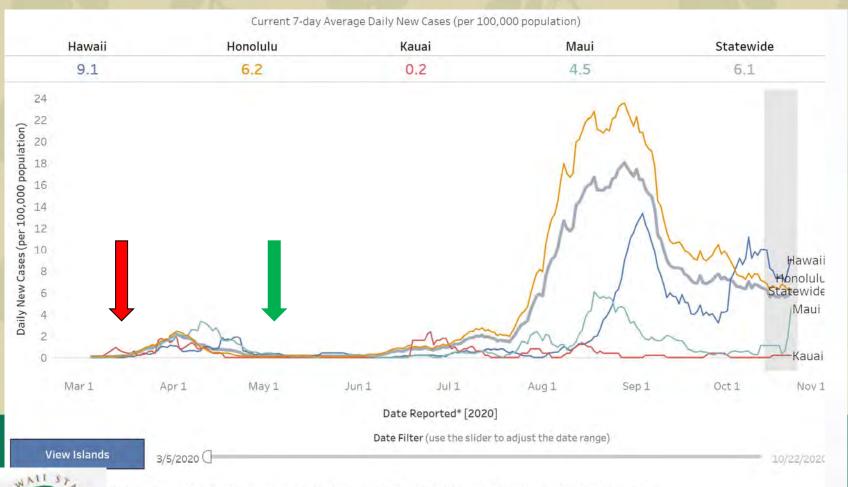


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# M3 & M4 students pulled from clinical March 16–May 1, 2020 Some impact from the Delta surge in August 2020

- Outpt sites, some FQHCs, space/rounding, hybrid or tele-psych, tele-geri



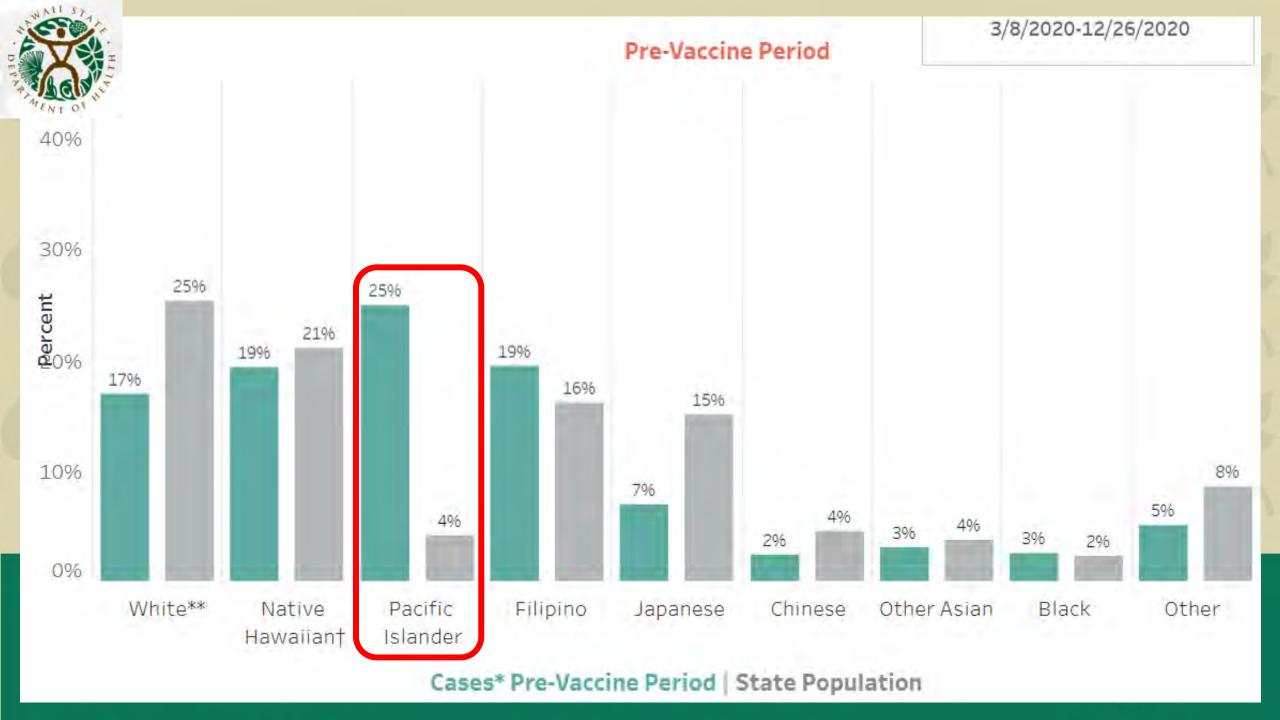
- 3/16/20: Virtual learning (everyone, including M3 & 4); Town Halls
- ADAA and Director of OME as campus COVID-19 contacts; contact tracing; communication w/ UHM CRT
- May 1-4, 2020: Most clinical sites allowed return
- (3/16/20-4/21) Virtual large group events and classes; hybrid PBL 1/21
- May 2020 Virtual convocation
- 7/2020 started Learning Communities
- 11/2020 started C-CODE
- March 2021 vaccine mandate for all med students
- Hybrid Match (21, 22), Convocation (21), White Coat for the Class of 2025

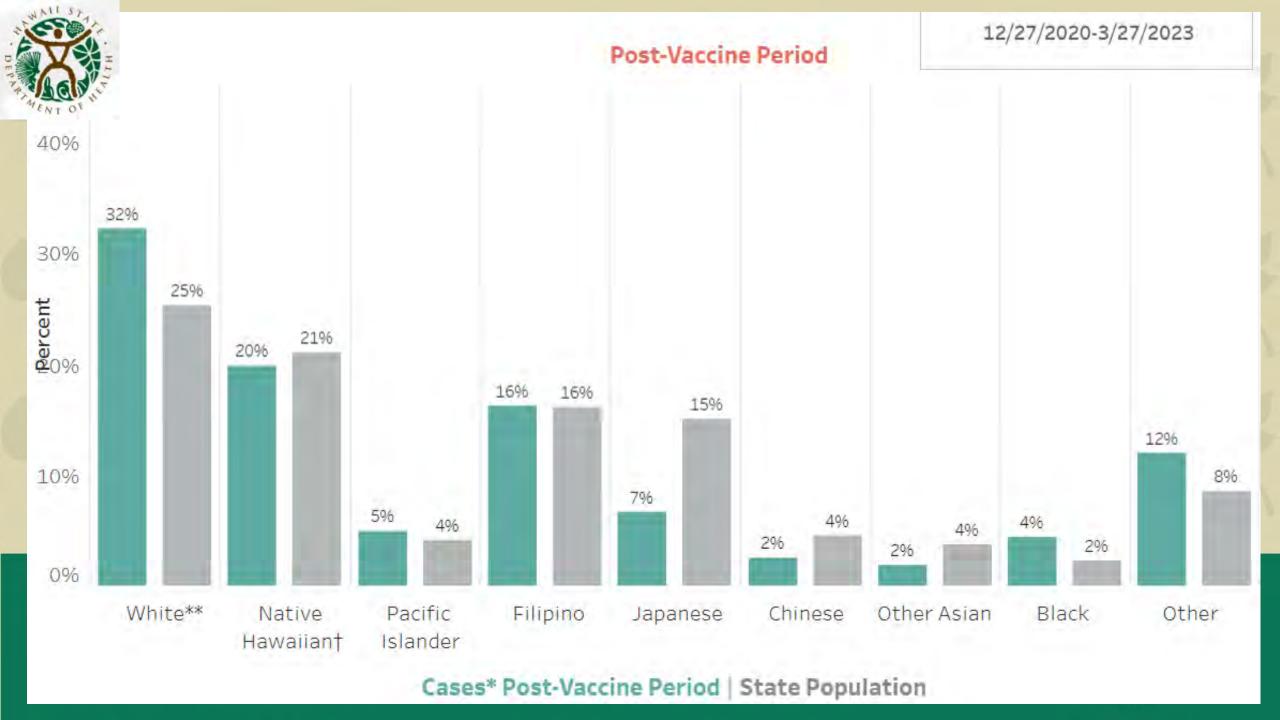


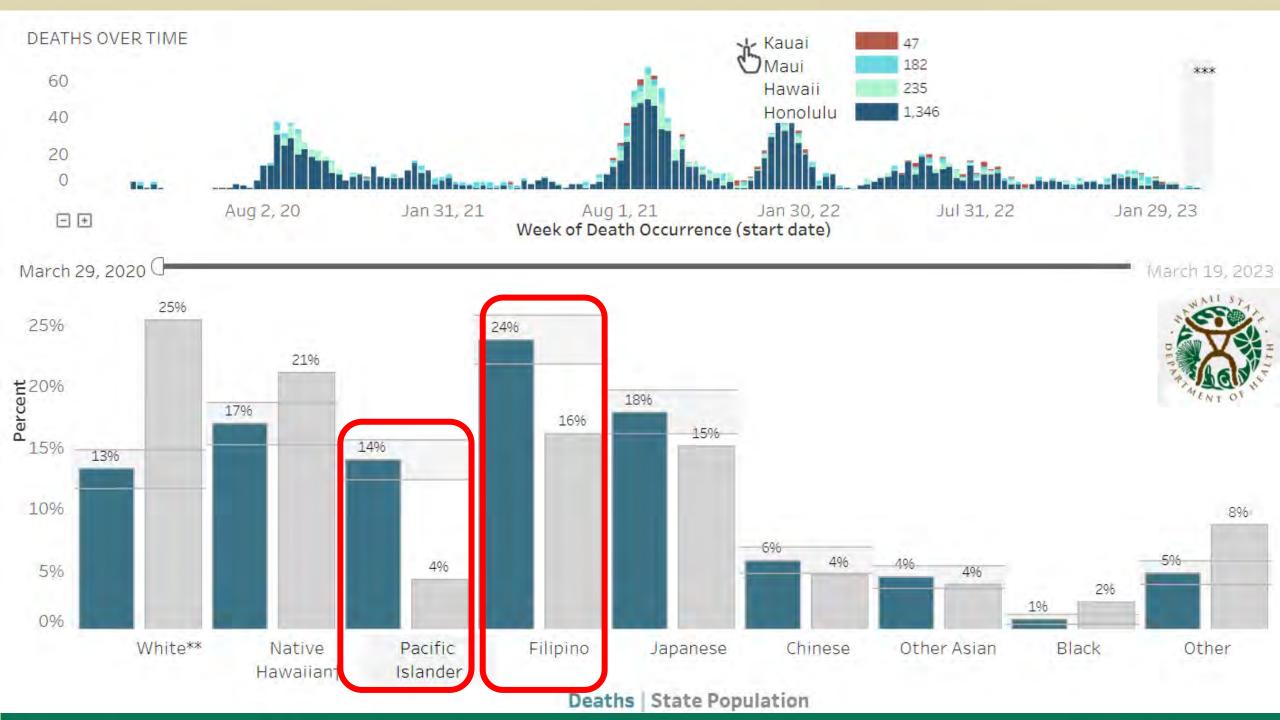
n in the previous 10 days may not yet have been reported; 7-day moving daily average cases per 100,000 population;



#### 7-day Average Daily Cases per 100,000 Population Mar 18, 2023 - Mar 24, 2023 13.2 5.8 9.0 6.4 8.1 o.6 0.0Maui Dahu State Hawaii Molokal Kauai History of 7-day Average Daily Cases per 100,000 Population Omicron Variant / subvariants Delta Variant 78.7% completed primary per 100,000 Population 26.5% booster in last 12 mo Vaccine & Boosters 21.2% bivalent booster 400 Residents 8/21 -2/22: PBL & large & students groups virtual 300 vaccinated! In-person Clinical skills, bootcamps, longitudinal clinical mentoring & Virtual PBL & lg groups, learning communities (hybrid) Daily New Cases "normal" M4 and M1 events alternate clinical curriculum 200 7/22 Full in-person\* 100 Jun 1, 20 Oct 1, 20 Feb 1: 21 Jun 1: 21 Oct 1 21 Feb 1, 22 Jun 1, 22 Oct 1, 22







# COVID-19 Impacts

- ◆Cohesiveness in Class of 2024 and PGY-1s entering July 2020
- **◆**Different stressors everywhere
- ◆Staffing to help with the tech
- ◆Class of 2022 is not quite as ready for clerkships
- **♦**Digital equity
- ◆Telehealth (Mar-May '20)
- ◆Students asking to defer USMLE 1

- **↑**Learning Communities
- **↑**Virtual anatomy
- ↑Virtual interviews & learning works! (for most things)
- ♠Agility and flexibility
- **↑**Better use of Google Drives/communication
- ↑Re-tooled most M1/2 didactics
- ↑Improved communication & coordination UME, GME, clinical learning environments
- ↑Easier prof development (virtual)
- ↑Telehealth (June 2020 now)
- ↑Value of the medical school & stronger partnerships

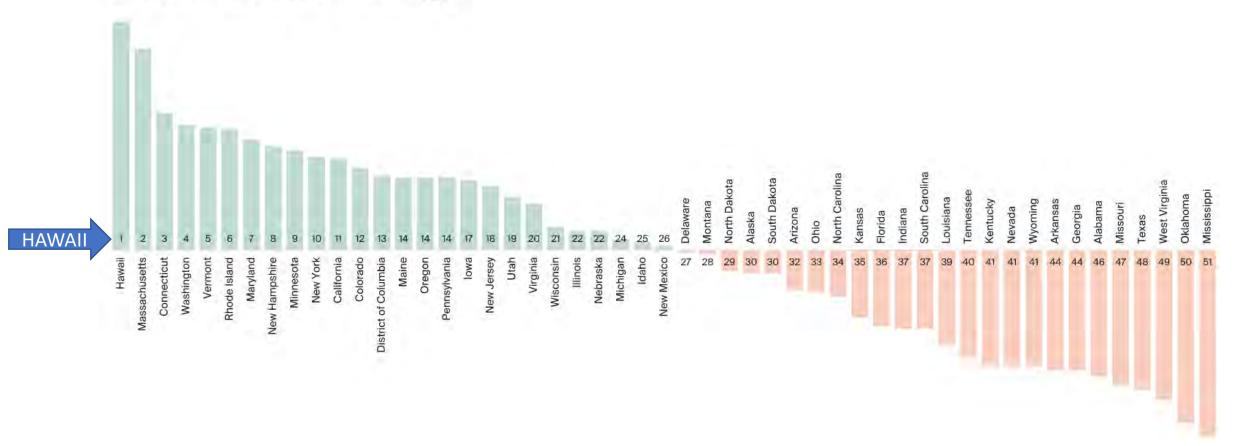


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# Commonwealth Fund 2022 Scorecard on State Health System Performance: How did states do during the COVID-19 pandemic?

### Overall 2022 Rankings



Notes: States arranged in rank order based on overall ranking. Bar height corresponds to overall performance score, aggregated from 56 performance indicators. Green bars indicate higher than average performance; orange bars indicate lower than average performance.

Source: David C. Radley, Jesse C. Baumgartner, and Sara R. Collins, 2022 Scorecard on State Health System Performance: How Did States Do During the COVID-19 Pandemic? (Commonwealth Fund, June 2022). https://doi.org/10.26099/3127-xy78

# How did Hawaii fare so "well"?

- A'o: to learn, teach, counsel
- Alu: to cooperate, work together
- Mālama: to care for, protect and preserve
- Kuleana: responsibility, duty
- Pono: to be in a state of harmony or balance with all things in life, righteousness, behaving correctly and forthrightly







Keeping equity, community, and humanism at the core



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# Medical student curriculum

- Problem-based learning since 1989
  - Small groups, collaborative supplemented by large group sessions & labs
- Patient-centered, community-based
- Addresses national standards and initiatives
- Current biomedical and social issues, reflecting the needs and issues of the community
- Integration of foundational, clinical, and health system sciences across the four years





### Four Year Curriculum John A. Burns School of Medicine, University of Hawaii

July → December January → June

#### MD 1 (9 weeks)

Health and Illness
PBL Tutorial
Lectures & Labs
Clinical Skills
Community Health

#### MD 2 (12 weeks)

Cardiovascular and Pulmonary Problems
PBL Tutorial
Lectures & Labs
Clinical Skills
Community Health
Electives available

#### MD3 (11 weeks)

Renal and Hematologic Problems
PBL Tutorial
Lectures & Labs
Clinical Skills
Community Health
Electives available

#### MD 4 (12 weeks)

Gastrointestinal and Endocrine Problems
PBL Tutorial
Lectures & Labs
Clinical Skills
Community Health
Electives available

#### Learning Communities and Longitudinal Clinical Mentorship

#### MD 5 (8 weeks)

Summer Session Selectives

#### MD6 (15 weeks)

Locomotor, Neurological, and Behavioral Problems PBL Tutorial Lectures & Labs Clinical Skills Electives available

#### MD7 (11weeks)

The Life Cycle
PBL Tutorial
Lectures & Labs
Clinical Skills
Evidence-Based Medicine
Electives available

#### MD8 (10 weeks)

Consolidation and Transitiion

Learning Communities and Longitudinal Clinical Mentorship

### Four Year Curriculum John A. Burns School of Medicine, University of Hawaii

December May January Longitudinal Clerkships (Family Medicine, Internal Medicine, Obstetrics and Gynecology, Pediatrics, Psychiatry, Surgery) Colloquia: Topics in Health and Illness **Learning Communities** Senior Rotations Senior Senior Senior Senior Seminars Seminars Seminars Rotations Emergency Medicine -4 weeks Geriatric and Palliative Medicine - 4 weeks (1 week) (1 week) (1 week) (continued) Sub-Internship - 4 weeks Electives - 20 weeks **Learning Communities** 

# What's new in the past 3 years?

- Clinical skills revamp
  - Centralized with reinforcement in learning communities, boot camps, more sims
- Longitudinal Integrated Clerkships
- Longitudinal Clinical Mentoring
- Learning Communities
- Increased emphasis on resiliency, differing abilities, LGBTQ+, racism, climate
- Philanthropy: Kaua`i Medical Training Track
- State of Hawai'i investment in expanding UME and GME to neighbor islands





# JABSOM LEARNING COMMUNITIES

HTTPS://WWW.YOUTUBE.COM/WATCH?V=6CP1IICG HA

Kyra Len & Vanessa Wong
Co-Directors



### What is a Learning Community?

- Intentionally developed longitudinal groups of faculty and students
- Meant to enhance the experience of medical school and maximize learning
- Longitudinal relationships between students and mentors

### What are the benefits?

- LC schools more positive learning environment.
- Positive learning environments correlate with better resiliency and recovery from burnout
- Develop students' and faculty's clinical skills
- Satisfaction with wellness and career counseling
- Avoid erosion of empathy in clinical years
- Help with professional identity formation



## CONNECTION TO COMMUNITY

### Divided into 6 main groups called Moku

- •Correspond to 6 *Mokus* (district) on the mokupuni (island) of O`ahu in the pae'āina of Hawai'i
- All 6 Mokus have a Director

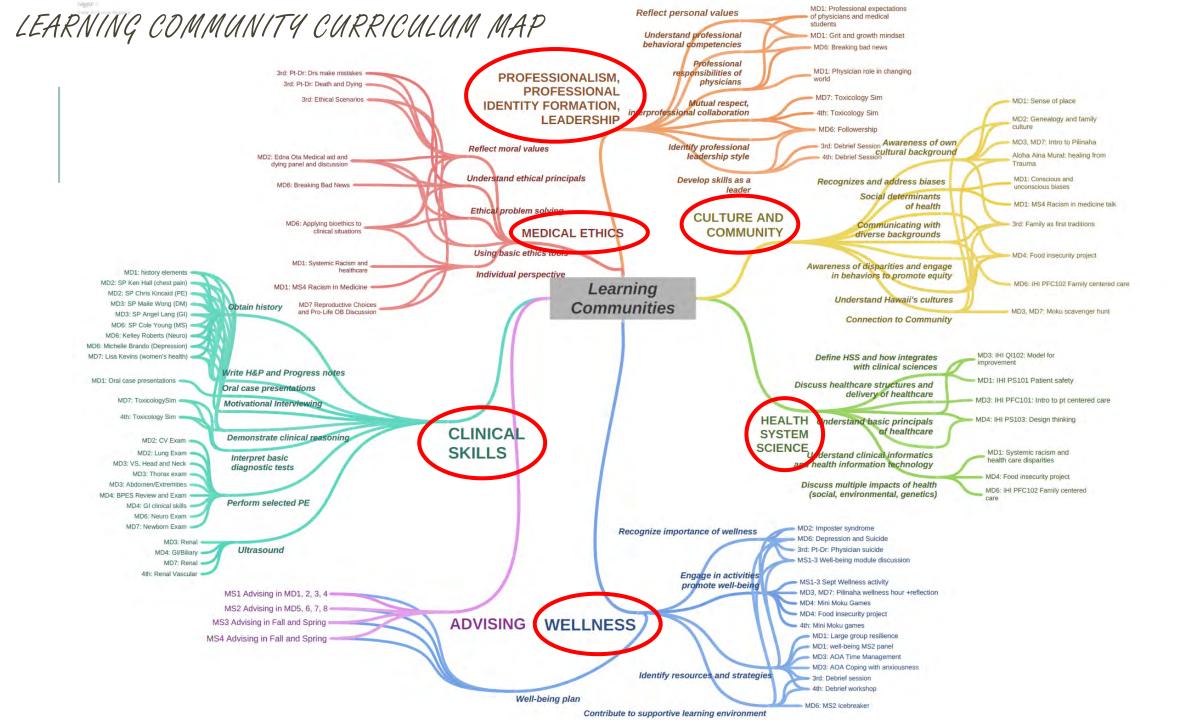
### Each Moku has a Mauka and Makai group

- •12 groups led by 12 faculty mentors
- •6-7 students/class/year assigned to LC group
- Most LC activities take place within these small groups
- Will remain together for all 4 years of medical school

#### **Connect with communities**

- •Learn about, develop relationships, and work with their communities
- Increased sense of connection and commitment





### WHAT DID LC ADD TO THE CURRICULUM?

#### Small group discussions

Ethics, racism, reproductive choices

#### Clinical skills practice

- Individualized observation and feedback
- Standardized patient encounter and write-up feedback
- Simulation
- Ultrasound

#### Individualized advising

- Academic
- Personal and professional well-being
- Curriculum integration and expansion
- Cultural and community framework

#### Opportunities for students

- LC student board
- Projects and presentations



12 Learning Community Mentors

6 Moku Directors

Standardized



Learning Community 2020-2021

299

### Students

2 Moku games

805
Advising
Sessions

121 Faculty
Development
Hours

### MS1 COMMENTS

- "I love the idea of being with a group of peers and a physician in the community for a long time and watching us grow together. ... Probably one of the best things that happened in this age of COVID."
- "It is a way for me to connect with my peers and faculty on a deeper level and discuss controversial topics in a safe space. The questions raised in these topics often force me to think deeply about my own perspectives and the beliefs I stand for. "
- "...having one-on-one mentorship with a physician mentor is invaluable."
- "Especially during COVID, LCs have helped me form meaningful connections with my classmates despite being apart. I really think they were the best part about MD1 and I don't know how I would have made it without my LC group."





### MS2 COMMENTS

- "I thought the *feedback that comes immediately after* each session from either the proctor or my moku mentor is so helpful."
- "It was great to have an advisor who supports us mentally and academically. It was great to have a continuity of advising from one faculty."
- "I liked all of the clinical sessions/standardized patients we had with our moku. It was *nice to practice/learn in smaller groups* so we could ask more questions."
- "...I also really *appreciate the time and effort* these moku leaders invest into us."

#### Suggestions

• Less time commitment (shorter sessions, less frequent)





## LC MENTOR COMMENTS



- "Being an LC mentor has...helped me on a daily basis to be a better physician and person, including for my patients and students..."
- "...I find it very rewarding if I can help students to be healthy, motivated, compassionate, knowledgeable, wise, and prepared now and for their future... being an LC mentor gives me this opportunity on a direct, frequent, and ongoing basis.
- "The faculty also gain an opportunity to teach and learn from each other as we teach and help the students. It has been wonderful to get to connect with and learn from faculty from various specialties, generations, organizations, experiences, and backgrounds."

### HAWAI'I HOME PROJECT COLLABORATION

# Clinical site for all students, beginning as MS1s

- Promote empathy and humanism
- Learn/refine clinical skills
- Engage with community
- Learn about and utilize resources within their moku
- Peer teaching/advising
- Opportunity for QI projects
- Introduction to EHR and population health management







GME



Produce fully trained specialty and subspecialty physicians and develops environments within hospitals, clinics, and community settings in which quality patient care, health promotion, and academic excellence are sustained, and thereby advance the health and well-being of the people of Hawai`i



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- Secure additional resources to maintain and expand GME programs
- Develop a multi-pronged approach to improve physician retention in Hawai'i
- Develop strategies, in partnership with the health systems and insurers, to address and prevent physician burnout and to promote physician well-being
- Expand neighbor island and telehealth training opportunities for residents and fellows
- Incorporate more aspects of population health and inter-professional education and training into all GME programs in order to better equip future physicians to practice in team-based, patient, and population-centered clinical settings





#### **Graduate Medical Education**

6 Categories - Priority Action Items



Quality Improvement (QI) & Patient Safety (PS)



Scholarly Activity (SA) & Research



Faculty (Professional) Development (FD)



Population
Health &
Interprofessional
Education
(IPE)



Well-Being (Faculty & Residents)



Diversity, Equity & Inclusion (DEI) Started 2020



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# Alignment: internal and external

- 2021: New academic affiliation agreements with the two largest health systems in Hawai'i
  - Academic mission to include scholarly activity/research, education, quality improvement/patient safety, diversity, and equity areas
- A comprehensive opportunity, diversity, & equity strategy includes
  - Well-being and resilience
  - Professionalism
  - Faculty development: Title IX, microaggressions, implicit bias, professionalism components, 'regular' faculty development, clinician educator competencies!
  - Curriculum, CLER, and scholarly activity through a health equity lens





## State investment in expanding GME and UME

- July 2022: 6.0 additional FTE and funding in the JABSOM base budget
- One-time appropriation to expand GME to neighbor islands and expand educational opportunities with the VA Pacific Islands Healthcare System
  - 2023 legislature: 4.0 FTE and an additional \$\$ in JABSOM base budget
    - Innovative loan repayment program







# Academic affiliation agreements with health systems

- University-based medical school with many clinical affiliates (UH does not own a hospital)
- Shift to heavily value-based care and ACO models in the State
- Severe workforce shortages and recognition that strong clinical learning environments are the best recruitment tool to retain students and residents in-state and to attract physicians back home
- Increasing pressures from graduate medical education and the community to integrate learners into interprofessional care processes, quality, and patient safety initiatives.
- Growing health disparities and inequities, especially in Native Hawaiians, Other Pacific Islanders, Filipinos, neighbor islands, and kupuna and keiki poverty rates
- COMPLETELY ALIGNED VISIONS



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# Strategy

- Negotiated academic affiliation agreements with two health systems simultaneously
- Melding of JABSOM's major clinical departments into the employed medical groups of the health systems' respective faculty practices in Fall 2021
- Formation of Joint Operating Committees
- Defined health systems' investment in SoM academic mission
- Funding for faculty expansion and academic physician start-ups





### Outcomes based on Mālama, Kuleana, and Pono

- Department Chairs and dean-level input into operations and governance roles
  - Addressing LCME and ACGME requirements with tangible early results
- Health system input into University efforts to better coordinate health sciences schools and programs
- Successful recruitment of JABSOM graduates
- In the process of strengthening health-system-based research programs for the benefit of the population
- Coordinated strategic planning a statewide model for education & research





### JABSOM Strategic Summary

VISION - Maika'i Loa: Attaining Lasting Optimal Health for All A.L.O.H.A.



Seeking Excellence through Collaboration with Stakeholders to Meet Hawaii's Existing, Emerging & Future Health Care Needs











Research & Discovery

Excellence in areas of proven

Education & Teaching

Clinical Healing

Community Engagement

Enhancing Resource Growth

Enhance diversity & opportunities within each goal in order to achieve equity in our JABSOM 'Ohana and communities we serve

GOALS

· Recruit, develop and retain a diverse top basic science and clinical science research

· Maintain Centers of

strength

- Build synergy amongst research departments
- Enable and support student and resident research
- Build alliance with UH Cancer Center
- Facilitate and support extramural research proposals
- Streamline processes for smaller grant and contract proposals less than \$100,000 annually
- · Improve advocacy and representation for research within JABSOM & the public

· Build world-class education programs that create a competent health & health science workforce using partnerships to reduce health inequities throughout Hawai'i and the Pacific

· Develop an infrastructure to

that prepare learners and

and distributed healthcare

· Establish a sustainable

educational mission

support curricular innovations

faculty in complex, changing

funding model to support the

 Create world-class Integrated Clinical Learning Environment that is aligned to be inclusive of Hawaii's and the Pacific's history and its populations

Improve alignment &

inclusiveness with strategic

Develop strategic alliances

with community hospitals and

health centers to effectively

address population health

- · Help achieve optimal health and wellness for all (ALOHA) of Kaka'ako, Hawai'i and the Pacific Rim
- Expand JABSOM's financial health and capital
- · Develop integrated multidisciplinary academic-based health care system
- · Help meet health care needs of underserved communities
- · Provide quality facilities and infrastructure while increasing renewable energy sources
- Integrate JABSOM's workflow processes with UH System's new software
- . Develop 5-year plan for 60th anniversary

 Continue curricular transformation that will prepare physicians to provide highquality and safe patient care

humanism

environments

- · Enhance recruitment of students and retention of medical residents
- · Enhance quality of resident support and training programs
- Provide education for learners and faculty that promotes resilience, professionalism. healthcare leadership, and

- Develop growth plans for each clinical department
- Develop strategic alliances for the clinical faculty practice organizations that advance the school's vision
- Build infrastructure to recruit. develop and retain faculty for clinical teaching and research
- Build collaboration with clinical and research institutions
- · Lead integrative effort to meet state workforce needs
- Expand community partnerships for medical education
- Grow JABSOM leaders, leadership and innovation

- Enhance workplace experience
- · Optimize JABSOM website. audio visual & telecommunication functionality
- · Maximize efficiency supporting education and research

## A Vision of ALOHA

- Updating strategic plan
- Curriculum: schoolwide
- Data to drive policy and process updates
- Expand pathway programs & GME
- Multi-level connections and partnerships
- Health disparities-focused research
- **UH Health Sciences Steering Committee** 
  - Revamping UH Council of Health Sciences
  - New amplifying structure within UH
- Multi-pronged approach to physician and healthcare workforce shortages

#### RNS DICINE



## Value each other and our community

- A`o: to learn, teach, counsel
- Alu: to cooperate, work together,
   JABSOM as a convener
- Mālama: to care for, protect and preserve
- Kuleana: responsibility, duty
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A Akahai – meaning kindness (grace), expressed with tenderness;

L Lokahi – meaning unity (unbroken), expressed with harmony;

O 'Olu'olu – meaning agreeable (gentle), expressed with pleasantness;

**H** Ha'aha'a – meaning humility (empty), expressed with modesty;

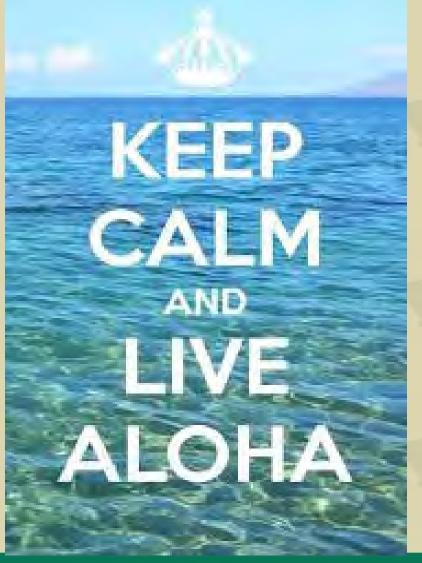
A Ahonui – meaning patience (waiting for the moment), expressed with perseverance.











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