Implementing and Integrating Population Health in Hospital Work

Tatiana Lin, KHI and Cindy Samuelson, KHA

2019 Population Health Workshop

June 28, 2019

Presentation Overview

- KHA and KHI Collaboration on Population Health
- Resources and examples
- Integrating population health in:
  - Community Health Needs Assessments (CHNAs)
  - Community Benefit
  - Strategic Planning
  - Daily Work
- Implementing strategies across areas (e.g., transportation, housing)

Population Health: Awareness and Education on the Hospital's Role

- KHA/KHI population health collaboration
- Population health survey of hospital leaders
- Case studies of Kansas hospitals
- County health rankings event
- Implementing and integrating population health

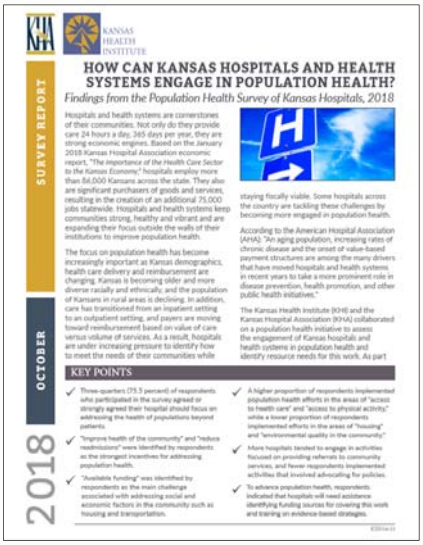
Summary Definition of Population Health

Strategies that link clinical and non-clinical approaches (such as housing or access to food) for improving the health of a group of individuals, including the distribution of such outcomes within the group. These groups can be geographically defined (e.g., zip code or city) or they may share some characteristics (such as age or income level).

Source: Summary of the definitions developed by Kindig, D., & Stoddart, G. (2003) and the American Hospital Association.

Survey of Kansas Hospital Leaders

- Definition of population health
- Drivers of population health activities
- Types of activities
- Challenges / barriers
- Resource and education needs


SURVEY REPORT

OCTOBER 2018

KANSAS HEALTH INSTITUTE

HOW CAN KANSAS HOSPITALS AND HEALTH SYSTEMS ENGAGE IN POPULATION HEALTH?

Findings from the Population Health Survey of Kansas Hospitals, 2018

KEY POINTS

Population Health Survey: Key Findings

Three-quarters (75.5%) of survey respondents agreed or strongly agreed that their hospital should focus on addressing the health of population beyond patients.

"Improve health of the community" and "reduce readmissions" were identified by respondents as the strongest incentives for addressing population health.

"Available funding" was identified by respondents as the main challenge associated with addressing social and economic factors in the community such as housing and transportation.

Population Health Survey: Key Findings

A higher proportion of respondents implemented population health efforts in the areas of "access to health care" and "access to physical activity," while a lower proportion of respondents implemented efforts in the areas of "housing" and "environmental quality in the community."

More hospitals tended to engage in activities focused on providing referrals to community services, and fewer respondents implemented activities that involved advocating for policies.

To advance population health, respondents indicated that hospitals will need assistance identifying funding sources for covering this work and training on evidence-based strategies.

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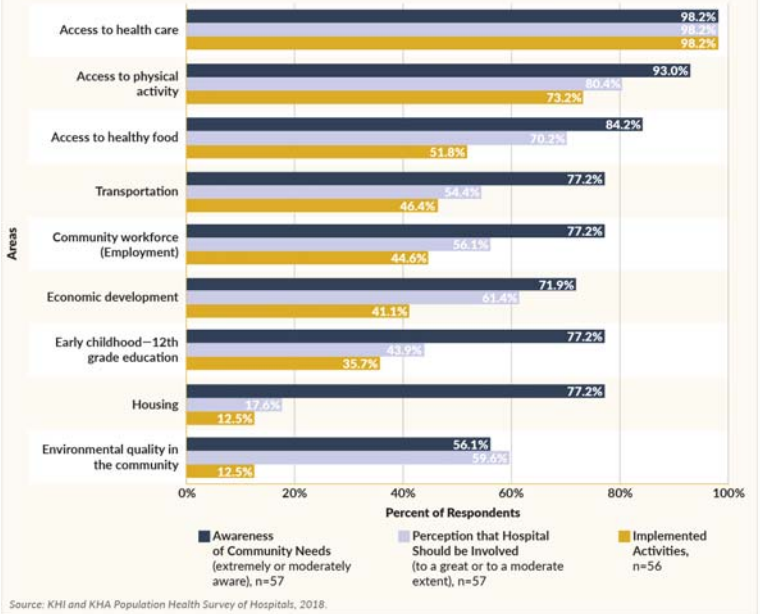
Figure 3. Awareness, Interest and Implemented Activities by Population Health Area



Source: KHI and KHA Population Health Survey of Hospitals, 2018.

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CASE STUDIES

DECEMBER 2018

ADVANCING POPULATION HEALTH: KANSAS HOSPITALS SHARE THEIR STORIES

Background

While treating patients remains a cornerstone mission, Kansas hospitals increasingly are moving outside the walls of their facilities to engage in activities aimed at improving the health of their communities. This focus on population health is driven by several factors, such as an aging population, an increased emphasis on disease prevention and a move away from a volume-based payment model to a value-based payment system.

Earlier this year, the Kansas Hospital Association (KHA) and the Kansas Health Institute (KHI) surveyed CEOs of KHA member hospitals and found that 75.5 percent of survey respondents agreed or strongly agreed that their hospitals should be engaged in population health work. Among the primary reasons hospitals gave were to "improve the health of their community" and to "reduce readmissions." The results of the survey were published in a November 2018 population health survey report, which is located at kha-net.org and khi.org.

As a follow-up to the survey, KHA and KHI conducted in-depth interviews with eight hospital leaders and their staff or partners from across the state (*Figure 1, page 3*) to learn more about population health activities Kansas hospitals are implementing. This report summarizes those interviews.

Defining Population Health

The definition of "population health" has evolved over time and often is confused with definitions of "community health" or "population health management." The American Hospital Association (AHA) describes population health as both a goal and a strategy to foster healthy, equitable populations through linking clinical and community-based approaches. According to the AHA, population health encompasses population health management and community health. To help hospitals and health systems connect population health management and population health concepts, this report offers a summary definition of population health that links a definition developed by David Kindig and Greg Stoddart with a definition developed by the AHA.

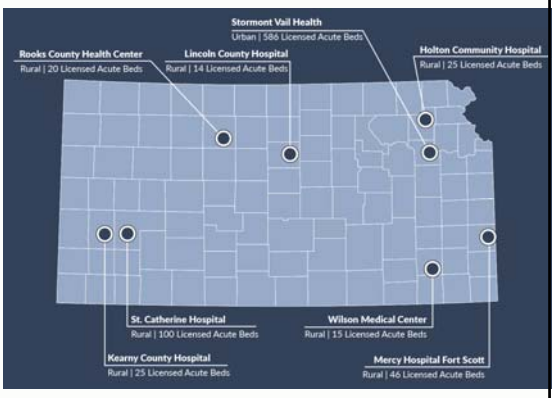
Summary Definition of Population Health

Strategies that link clinical and non-clinical approaches (such as housing or access to food) for improving the health of a group of individuals, including the distribution of such outcomes within the group. These groups can be geographically defined (e.g., zip code or city) or they may share some characteristics (such as age or income level).

Population Health Video

The Kansas Hospital Association (KHA) and the Kansas Health Institute (KHI) recently completed a video interviewing several key participants from hospitals across Kansas regarding their efforts in population health. To view the video, visit kha-net.org or khi.org.

Kansas Case Studies



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Population Health Video

17-minute video
Discussion Guide Available

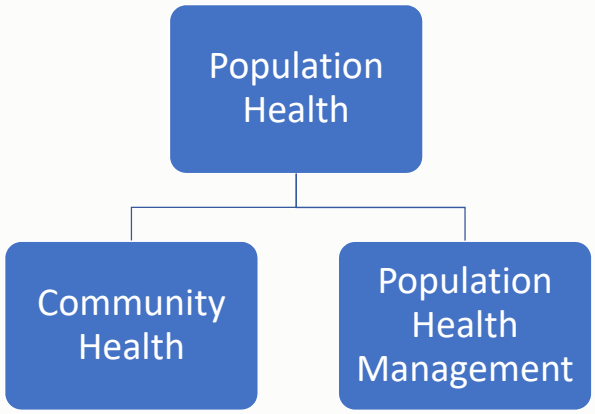
2019 County Health Rankings Event

Highlights

- Partnership: KHI and KHA
- More than 170 participants (in-person, online and satellite sites)
- Local and national speakers
- Discussion: County Health Rankings, demographics, behavioral health

Neosho Memorial Regional Medical Center in Chanute and Republic County Hospital in Belleville were the satellite locations of "*County Health Rankings in a Changing Kansas*."

Population Health vs. Population Health Management



Source: American Hospital Association, 2018 Population Health Survey

Community Health Needs Assessments: Strengthening Population Heath Focus

Hospital Requirements

The Affordable Care Act, enacted March 23, 2010, created a new IRS Code Section 501(r)(3) which imposes four additional requirements for hospitals exempt from taxation under Section 501(c)(3).

CHARITABLE HOSPITALS MUST:

- Complete Community Health Needs Assessment
- Meet Financial Assistance Policy Requirements
- Adhere to Limitations on Charges
- Follow Billing and Collection Practices

Community Health Needs Assessments

- Conduct at least once every three years.
- Define the community served.
- Assess health needs of the community served by the hospital.
- Include input from persons who represent the broad interest of the community, including those having public health knowledge or expertise.
- Make two subsequent CHNA reports widely available to the public.
- Include on hospital Web site; give to anyone who asks.
- Adopt a written implementation strategy to address identified community needs that is adopted by an authorized body of the facility.
- Failure to comply results in excise tax penalty of $50,000 per year.

Patient Protection and Affordable Care Act (Health Care Reform Law March 23, 2010)

** Notice 2011-52 – must be approved by authorized governing body (board of directors)*

Population Health: Community Engagement

Use culturally, linguistically and physically appropriate methods to increase participation of community residents and community-based organizations.

- Build personal relationships
  - attend community driven gatherings
- Create welcoming atmosphere
  - utilize facilitators from the community
- Increase accessibility
  - address barriers (language, location, time, transportation, childcare, power dynamics)
- Develop an alternative methods of engagement
  - conduct interviews, photovoice
- Maintain presence within the community
  - establish places for ongoing interactions
- Partner with diverse organizations
  - connect with organizations who have already ties with target communities

Engagement Beyond Surveys

Focus Group 1 Participants in Wamego, Kansas
November 6, 2017

Lisa Kenworthy, Health Department Director	Pottawatomie County Health
Shane Jager, Undersheriff	Pottawatomie Sheriff Office
Audrey Schremmer, Director	Three Rivers Inc.
Tim Winter, Superintendent of Schools	USD#320
Jennifer Jones, Director of Case Management	Via Christi Hospital – Manhattan
Bob Copple, President	Via Christi Hospital – Manhattan
Cheyenne Strunk, Executive Director	Via Christi Village
Daryn Soldan, Director	Wamego Chamber of Commerce
Darin Miller, Board Member	Wamego Community Foundation
Mike McCall, Director	Wamego Community Foundation
Rick Hernandez, CEO	Wamego Community Health Ministry
Theresa Hamilton, R.N., C.M.	Wamego Health Center
Shelley Rickstrew, Counselor	Wamego High School

Focus Group 2 Participants in Manhattan, Kansas
November 9, 2017

Susan Inskeep, Executive Director	Flint Hills Community Clinic
Lee Wolf, CEO	Konza Prairie Community Health
Casey Smithson, Park Superintendent	Manhattan Parks & Recreation
Michelle Jones, Communications Director	USD #383
Robin Mull, R.N. Manhattan High School	USD #383
Mackenzie Dobie, Emergency Department R.N.	Via Christi Hospital – Manhattan
Jodi Woomer, Emergency Room Charge Nurse	Wamego Health Center

Focus Group 3 Participants in Manhattan, Kansas
November 16, 2017

Ellyn Mulcahy, Director Master in Public Health	Kansas State University
Karen Armbrust, Administrator	Mosier & Mosier Family Physicians
Robbin Cole, Executive Director	Pawnee Mental Health
Jennifer Green, Director	Riley County Health Department
Julie Hettinger, Health Education	Riley County Health Department
Beverly Olson, Executive Director	Shepherd's Crossing
Andy Hutchinson, Program Director	USD #383 Head Start & Early Head

Community Partner Organizations

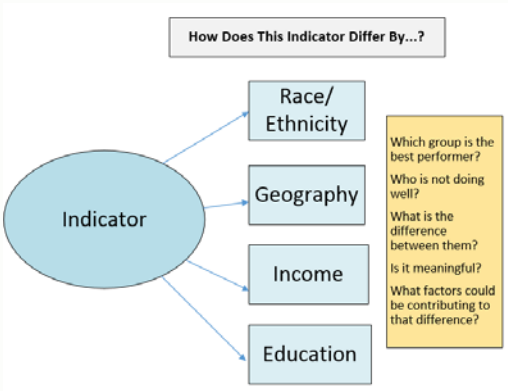
In July, 2018 community organizations were invited to a Key-Informed CHNA prioritization meeting, to review the community measures, discuss the issues and provide input as to the relative importance of each. Saline County community entities invited to participate included but not limited to the following agencies/organizations:

American Red Cross
Catholic Charities
Central KS Foundation
Central KS Mental Health
Chamber of Commerce
Child Advocacy & Parenting Services
City and County Commissioners
ComCare PA
Commission on Aging
Domestic Violence Association of Central KS
Emergency Management
Heartland Programs
Salina Police Department
National Association for the Advancement of Colored People
North Central KS Trauma Council
Occupational Center of Central KS
Parks & Recreation
Salina Area United Way
Salina Community Foundation
Salina Emergency Medical Services
Salina Family Healthcare
Salina Family YMCA
Salina Regional Health Center
Salina Surgical Hospital
Salina Saline County Health Department
Saline County Extension Office
Saline County Human Relations
Saline County Sherriff's Office
USD 305
USD 306
USD 307
Volunteer Connection

Population Health: Data Collection

Include data collection on health disparities, social and economic determinates of health impacting vulnerable populations within its community.

- Collection methods: community surveys, focus groups, data hospitals collected through routine screenings.



Example: Population Health: Data Collection on Disparities

Table 7. Adults not participating in recommended aerobic and strengthening physical activity State of Kansas 2015		
Significantly less likely to participate in recommended strength training and aerobic exercise among:		
Females	**Compared to**	Males
Adults aged 25 years and older	**Compared to**	Adults 18 – 24 years
Hispanics and non-Hispanic African-Americans*	**Compared to**	Non-Hispanic Whites
Lower education**	**Compared to**	Higher education
Lower annual household income	**Compared to**	Higher annual income ($50,000 or more)
Disability	**Compared to**	Living without a disability
No Insurance	**Compared to**	Insured
* Age-adjusted to U.S. 2000 standard population ** Douglas County Disparity		

Population Health: CHNA's Priorities

The hospital's CHNA report identifies at least one health disparity, social and economic determinant of health as a significant community health priority.

This past year, Stormont Vail Health, Shawnee County Health Agency and St. Francis Health collaborated to complete the 2016 Community Health Needs Assessment. With input from local health care providers and the community, in addition to extensive public health data, these health issues emerged:

Healthy Eating & Active Living
- 68 percent of Shawnee County adults are overweight or obese.
- 10 percent of low income residents live in food deserts.

Babies & Youth
- 54 percent of Shawnee County infants are not fully immunized by age two.
- 9 percent of births are to teen moms (ages 15-19).

Access to Care & Chronic Conditions
- 17 percent of Shawnee County adults under the age of 65 do not have health insurance.
- Approximately half of the adult population has one or more chronic conditions such as diabetes, heart disease or arthritis.

Social Determinants
- 60 percent of health outcomes are tied to social and environmental factors and the personal behaviors influenced by those factors (20 percent attributed to medical care and 20 percent to genetic predispositions).

Mental Health & Substance Abuse
- 22 percent of adults will be diagnosed with depression sometime in their lifetime.
- There is a shortage of mental health services locally and statewide.
- 20 percent of Shawnee County adults smoke cigarettes.

Population Health: Implementation

Clearly describe how your hospital will commit resources, independently or in partnership with others. For example….

- Provide transportation to individuals that have transportation needs to social and health care services (e.g., grocery stores, jobs, clinic visits, pharmacy, outpatient visits).
- Offer home safety assessments for environmental hazards and health risks (e.g., lead, pests, etc.).
- Work with local grocery providers and restaurants to offer fresh, affordable, healthy choices

Implementation Strategy Examples

Needs to be Addressed and Measured

- **Access to healthy food options – goal is to increase access to healthy food options through pro-active community partnerships and education**

Strategy:

- Work with local partners to enable community members to access healthy food options

Anticipated impact:

- Active participation with Farmer's Market
- Participation in community outreach events, providing resources around healthy food options
- Partnership with key meal and nutrition organizations

Milestone / Sub-Activity	Description	Measures	Start Date	Expected End Date
3	**Increased Access to Physical Activity and Nutrition**			
3.1	**Reduce Obesity in Anderson County**			
3.1.1	Anderson County Hospital will be engaged in the The Spring into Fitness program, which is a free program for the children of Anderson County focusing on health, exercise, and nutrition.	Number of participants that complete the program	1/1/2019	12/31/2021
3.1.2	Anderson County Hospital will be engaged in the Women in Training program, which is an eight-week training program for women of all ages that offers one-on-one support from fitness and health experts.	Number of participants that complete the program	1/1/2019	12/31/2021
3.1.3	Anderson County Hospital will continue to host the ACH Family Health Festival, which is a fun filled day of health for Anderson County residents. Community members will be encouraged to participate in a free event featuring health screenings and education.	Number of screenings | Number served	1/1/2019	12/31/2021
3.2	**Reduce Food Insecurity in Anderson County**			
3.2.1	Anderson County Hospital will look into screening patients for food insecurity and referrals to the appropriate community resources.	Strategy considered | Partners identified | Number of positive screens | Number of referrals	1/1/2020	12/31/2021

POPULATION HEALTH PRINCIPLES

☐ Aim to reduce disparities
☑ Tackle social, economic and environmental determinants of health
☐ Focus on broader populations beyond patients
☑ Engage cross-sector partners and community
☐ Use non-clinical data (e.g., access to food)

Community Benefit: Strengthening Population Heath Focus

Definition of Community Benefit

Community benefits are programs or activities that provide treatment and/or promote health and healing as a response to identified community needs. They are not provided for marketing purposes.

Catholic Health Association of the United States

What is Community Benefit

Hospitals can report costs as community benefit if the program:

Addresses an Identified Community Need ...
and meets at least of the following criteria

- Improves Access to Health Services
- Enhances Population Health (health of the community)
- Advances Medical or Health Knowledge
- Relieves or Reduces the Burden of Government or Other Community Efforts

Source: Catholic Health Association of the United States. Housing and Community Benefit: What Counts? January 2018 . Available at https://www.enterprisecommunity.org/download?fid=8868&nid=6230

Community Benefit Includes

- Financial Assistance
- Government-sponsored means-tested programs — unpaid costs of public programs
- Other Community Benefit Services
  - Community Health Improvement Services
  - Health Professions Education
  - Subsidized Health Services
  - Research
  - Cash and In-Kind Contributions
  - Community-Building Activities
  - Community Benefit Operations

Integrating Population Health in Community Benefit Program

- Be clear and transparent about the process the hospital will use to make community benefit decisions.
- Ensure that staff responsible for the community benefit program reflects the population the program serves.
- Provide clear, comprehensive public reports about hospital's community benefit programs and budgets that trace the connection between priority community needs identified in CHNA report and implementation strategy.

Integrating Population Health in Community Benefit Program

- Provide community partners with access to evaluation data and opportunities to inform the design and implementation of community evaluation.
  - Ensure that community benefit evaluation plan includes specific goals, outcomes and metrics to measure improvements in health disparities.
  - Use the evaluation findings to inform future interventions and to increase engagement and depth of partnership.

Addressing Housing as Community Benefit

- "Physical Improvement and housing" – listed as Part II (Community Building)
- In 2011, IRS amended instructions to Schedule H to say:
  - Some community building activities may also meet the definition of community benefit…"
- The IRS further clarified in a December 2015 IRS Executive Order Update:
  - …some housing improvements and other spending on social determinants of health that meet a documented community health need may qualify as a community benefit…."

Addressing Housing as Community Benefit

Condition #1 Housing-related activity must be provided primarily to address an identified community health need.

Condition #2 Should be reasonable evidence that the activity is known to improve health.

Population Health Strategies as Community Benefit

Supportive Housing Services	To formally homeless or incarcerated, disabled or low-income persons to ensure they become and remain stably housed. Services: case management, peer-support services, substance abuse services, independent living classes, mental health services.
Screening	For housing-related needs (e.g., housing instability) during patient visits.
Health Assessments	Partnering with affordable housing developers to analyze resident health needs and the impact of the housing development on these needs.

Population Health Strategies as Community Benefit

Legal Aid	Facilitating access to legal aid for low-income persons to help them address poor-quality housing conditions.
Housing Quality Improvement	Mitigating housing conditions that can cause elevated blood lead levels; remediating housing-based asthma triggers, weathering homes.
Housing Subsidies	Temporally subsiding housing for individual who are low income, chronically homeless, formerly incarcerated, disabled to help them remain stably housed.

Source: Catholic Health Association of the United States. Housing and Community Benefit: What Counts? January 2018 . Available at https://www.enterprisecommunity.org/download?fid=8868&nid=6230

Strategic Plan: Strengthening Population Heath Focus

Strategic Planning

A roadmap for how you will build on your history, your existing strengths and your values as you move forward to transform delivery of care in your community.

What will your organization look like and how will it serve the community in the future?

POPULATION HEALTH PRINCIPLES

- ☐ Aim to reduce disparities
- ☐ Tackle social, economic and environmental determinants of health
- ☐ Focus on broader populations beyond patients
- ☐ Engage cross-sector partners and community
- ☐ Use non-clinical data (e.g., access to food)

Strategic Planning

Integrating Population Health in Strategic Plan

Funding: Focus on Determinants of Health

- Align grant writing efforts with community needs and priorities (specifically related to social, economic and environmental issues).
- Pursue grant funding focused on addressing disparities and determinants of health.

Staff: Focus on Building Capacity in Population Health

- Increase staff understanding of population health and how to integrate specific strategies in their work.
- Designate staff (staff time) to work on addressing population health.
- Build staff expertise and internal capacity to support population health initiatives.

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Integrating Population Health in Strategic Plan

Hospital Facility: Focus on Becoming a Convener of Population Health Conversations

- Hospital's facility hosts community and regional conversation about population health needs. Participants include representatives from various sectors and various parts of the community.

Partnerships: Focus on Cross Sector Collaboration

- Expand and strengthen relationships with organizations from various sectors.
- Serve on the committees, workgroups, coalitions aimed at improving population health.
- Engage with partners in initiatives aimed at addressing determinants of health and reducing disparities.

STRATEGIC PLAN 2018-2020

NCH NORTON COUNTY HOSPITAL

4.1.1 Study the gap between needs and resources for areas identified in the 2018 needs assessment and market analysis, including but not limited to:
- Behavioral Health
- Oncology
- Substance Abuse
- Aging population needs

4.1.2 Develop cross-sector work groups to address findings of gap analysis, best practices, integrated programs to address identified needs, etc.

4.1.3 Seek funding strategies to develop programs.

POPULATION HEALTH PRINCIPLES

☐ Aim to reduce disparities
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Integrating Population Health in Strategic Plan

Understand Community Needs: Focus on Collecting Quantitative and Qualitative Data

- Regularly (1-3 years) collect data and when possible analyze it by race, ethnicity, gender and etc.

Initiatives/Activities: Focus on Determinants of Health (name specific areas)

- Identify and engage in improving population health by focusing on transportation, housing, access to healthy foods.

Examples:
Population Heath Efforts Across Kansas

Addressing Food Insecurity and Access to Healthy Foods

- Build Greenhouses
- Create Gardens
- Host farmers markets
- Partner with food pantries
- Host / support summer lunch programs
- Collaborate with local food service providers and farmers
- Provide healthy food "prescriptions"

Farmer's Market at Geary Community Hospital, Junction City, Kansas

Addressing Transportation

- Hospital-provided transportation to:
  - Pharmacy
  - Medical appointments
  - Grocery store
  - Fitness programs
- Develop walking paths
- Support safe sidewalk programs
- Create indoor walking paths at the hospital
- Provide walking "prescriptions"

Prescriptions for Walking, Finney County, Kansas

Bike share at Kearny County Hospital, Lakin, KS

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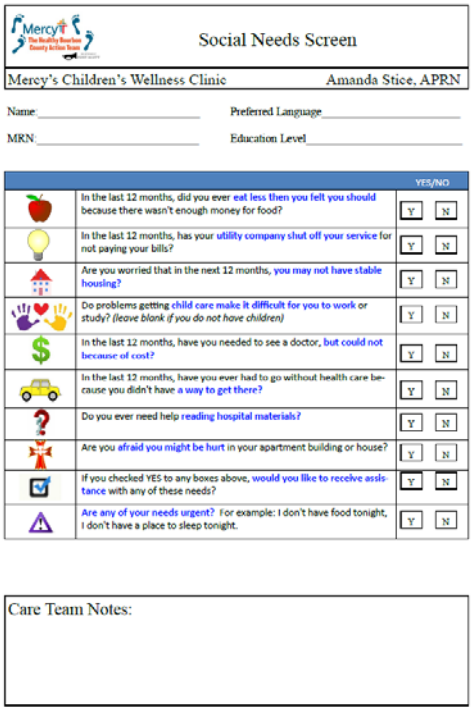
How to Integrate Population Health Into Your Daily Routine



Social Needs Screen

Mercy's Children's Wellness Clinic — Amanda Stice, APRN

Name: _____ Preferred Language _____

MRN: _____ Education Level _____

		YES/NO
	In the last 12 months, did you ever eat less then you felt you should because there wasn't enough money for food?	Y N
	In the last 12 months, has your utility company shut off your service for not paying your bills?	Y N
	Are you worried that in the next 12 months, you may not have stable housing?	Y N
	Do problems getting child care make it difficult for you to work or study? *(leave blank if you do not have children)*	Y N
	In the last 12 months, have you needed to see a doctor, but could not because of cost?	Y N
	In the last 12 months, have you ever had to go without health care because you didn't have a way to get there?	Y N
	Do you ever need help reading hospital materials?	Y N
	Are you afraid you might be hurt in your apartment building or house?	Y N
	If you checked YES to any boxes above, would you like to receive assistance with any of these needs?	Y N
	Are any of your needs urgent? For example: I don't have food tonight, I don't have a place to sleep tonight.	Y N

Care Team Notes:

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Social Needs Screener

Overview

- Assess social needs
- Standard tool that can be adopted
- Connect to services

Adapting the Screener

- Capacity to address specific needs
- Referral network
- Ease of use

Activities

- Integrate with existing services/tools
- Conduct an inventory of community's resources (e.g., 211 system, Healthify)
- Establish relationships with non-traditional partners (e.g., food banks)
- Conduct referrals and/or "warm hand-off"

Impacts

- Growing evidence indicates – potential to narrow gap between clinical services and community services

Next Steps

- Secure leadership commitment to working on population health
- Review data from CHNA, County Health Rankings or Kansas Health Matters
- Identify any ongoing efforts (e.g., community coalitions)
- Engage with stakeholders and community
- Review a list of potential activities (KHA and KHI resources) and identify an area of potential work

Don't afraid to start small!

Implement activity!

Evaluate results, make changes and sustain!

Thank you!
Any Questions?

You can connect with us:

Tatiana Lin, M.A., tlin@khi.org, (785) 233-5443
Kansas Health Institute

Cindy Samuelson, csamuelson@kha-net.org, (785) 233-7436
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The Kansas Hospital Association (KHA) is a voluntary, non-profit organization existing to be the leading advocate and resource for members. KHA membership includes 223 member facilities, of which 124 are full-service, community hospitals. KHA and its affiliates provide a wide array of services to the hospitals of Kansas and the Midwest region. Founded in 1910, KHA's vision is: "Optimal Health for Kansans."
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