

House District 29

Senate District 13

THE TWENTY-SIXTH LEGISLATURE
HAWAII STATE LEGISLATURE
APPLICATION FOR GRANTS & SUBSIDIES
CHAPTER 42F, HAWAII REVISED STATUTES

Log No: 44-0

For Legislature's Use Only

Type of Grant or Subsidy Request:

Rec'd JAN 28 2011

GRANT REQUEST - OPERATING

GRANT REQUEST - CAPITAL

SUBSIDY REQUEST

"Grant" means an award of state funds by the legislature, by an appropriation to a specified recipient, to support the activities of the recipient and permit the community to benefit from those activities.

"Subsidy" means an award of state funds by the legislature, by an appropriation to a recipient specified in the appropriation, to reduce the costs incurred by the organization or individual in providing a service available to some or all members of the public.

"Recipient" means any organization or person receiving a grant or subsidy.

STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST (LEAVE BLANK IF UNKNOWN):

DEPARTMENT OF HEALTH - ADULT MENTAL HEALTH DIVISION

STATE PROGRAM I.D. NO. (LEAVE BLANK IF UNKNOWN): _____

1. APPLICANT INFORMATION:

Legal Name of Requesting Organization or Individual: **Helping Hands Hawaii**

Db/a:

Street Address: **2100 N. Nimitz Highway Honolulu, HI 96819**

Mailing Address: **Same as above.**

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name STACY KRACHER

Title Clinical Director

Phone # 440-3861

Fax # 536-7237

e-mail skracher@helpinghandshawaii.org

3. TYPE OF BUSINESS ENTITY:

- NON PROFIT CORPORATION
- FOR PROFIT CORPORATION
- LIMITED LIABILITY COMPANY
- SOLE PROPRIETORSHIP/INDIVIDUAL

6. DESCRIPTIVE TITLE OF APPLICANT'S REQUEST:

COMMUNITY BASED CASE MANAGEMENT AND COMMUNITY BASED CARE COORDINATION FOR ADULTS WITH SERIOUS AND PERSISTENT MENTAL ILLNESS.

4. FEDERAL TAX ID #: _____

5. STATE TAX ID #: _____

7. AMOUNT OF STATE FUNDS REQUESTED:

FY 2011-2012: \$ 35,000

8. STATUS OF SERVICE DESCRIBED IN THIS REQUEST:

- NEW SERVICE (PRESENTLY DOES NOT EXIST)
- EXISTING SERVICE (PRESENTLY IN OPERATION)

SPECIFY THE AMOUNT BY SOURCES OF FUNDS AVAILABLE AT THE TIME OF THIS REQUEST:

STATE \$ _____

FEDERAL \$ _____

COUNTY \$ _____

PRIVATE/OTHER \$ 201,270

TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE:



JAN M. HARADA, PRESIDENT & CEO
NAME & TITLE

1-28-11
DATE SIGNED

**DECLARATION STATEMENT
APPLICANTS FOR GRANTS AND SUBSIDIES
CHAPTER 42F, HAWAII REVISED STATUTES**

The undersigned authorized representative of the applicant acknowledges that said applicant meets and will comply with all of the following standards for the award of grants and subsidies pursuant to section 42F-103, Hawaii Revised Statutes:

- (1) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant or subsidy is awarded;
- (2) Comply with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
- (3) Agree not to use state funds for entertainment or lobbying activities; and
- (4) Allow the state agency to which funds for the grant or subsidy were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and ensuring the proper expenditure of the grant or subsidy.

In addition, a grant or subsidy may be made to an organization only if the organization:

- (1) Is incorporated under the laws of the State; and
- (2) Has bylaws or policies that describe the manner in which the activities or services for which a grant or subsidy is awarded shall be conducted or provided.

Further, a grant or subsidy may be awarded to a non-profit organization only if the organization:

- (1) Has been determined and designated to be a non-profit organization by the Internal Revenue Service; and
- (2) Has a governing board whose members have no material conflict of interest and serve without compensation.

For a grant or subsidy used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant or subsidy was awarded and disposes of the land in fee simple or by lease, the organization shall negotiate with the expending agency for a lump sum or installment repayment to the State of the amount of the grant or subsidy used for the acquisition of the land.

Further, the undersigned authorized representative certifies that this statement is true and correct to the best of the applicant's knowledge.

Helping Hands Hawaii

(Typed Name of Individual or Organization)



1-28-11

(Date)

Jan M. Harada

(Typed Name)

President & CEO

(Title)

Application for Grants and Subsidies

I. Background and Summary

Through this proposal, Helping Hands Hawai'i (HHH), a 501(c)(3) non-profit social service agency, respectfully requests **\$35,000** in Grant-in-Aid (GIA) funding from the Legislature to support Community Based Care Coordination (CBCC) services for adults with Serious and Persistent Mental Illness (SPMI) on the island of Oahu. Funding is needed to ensure that "safety net" services for this at-risk population will continue at the levels needed to ensure the well-being and security of the target population, as well as the public at large.

1. *A brief description of the applicant's background.*

For more than 30 years, since its incorporation in 1974, HHH has consistently upheld its mission "*to strengthen our community by enhancing the quality of people's lives through the delivery of goods and services to those in need.*" The agency provides critical social services for an average of 37,000 individuals and families each year through its Behavioral Health and Human Services Divisions.

Behavioral Health services to individuals diagnosed with SPMI or substance use are a core function of the agency. In particular, HHH currently administers Community-Based Case Management (CBCM), Community-Based Care Coordination (CBCC), Day Treatment and Aftercare, Psychosocial Rehabilitation, Intensive Outpatient Program, and Representative Payee services to assist this population. HHH has a long history of providing these types of services in Hawaii, and previously administered the Suicide & Crisis Center, a Jail Diversion Program, and in 1997 initiated the first Assertive Community Treatment (ACT) team to service SPMI individuals in the State of Hawaii. In 2009, HHH was re-accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) for a three-year period, which demonstrates that the agency has met nationally recognized standards for the quality of service in the behavioral health field.

HHH also administers a general Human Services Division, which provides low-income families and individuals with access to emergency material and financial assistance, assistance with completing applications for SNAP (i.e. "food stamps") and other public benefits, and interpretation and translation services for the Limited English Proficient (LEP) population.

HHH currently has an annual operating budget of \$3.93 million, with approximately 51% of funding coming from Federal, State, and City & County government contracts. The remainder of the agency budget is supported through grants from private foundations, financial support from individual donors, program service fees, and other miscellaneous sources of income. The agency's current government contracts include funding from the Hawaii Department of Health – Adult Mental Health Division (AMHD) and Alcohol &

Drug Addiction Division (ADAD), Hawaii Department of Human Services – Benefit, Employment & Support Services Division (BESSD), and the City & County of Honolulu Department of Community Services.

2. *The goals and objectives related to the request.*

The goal of this request is to provide quality mental health services for SPMI individuals who require care coordination in order to lead lives that are stable and healthy, and ensure the potential for these individuals' recovery.

Whereas, HHH CBCM services are provided through a contract and referral process with the Department of Health Adult Mental Health Division (AMHD), CBCC services provide case management through contracts with third-party private insurance carriers Aloha Care and Kaiser for SPMI adults with QUEST coverage. In 2009, in light of budgetary challenges facing the State, HHH established its CBCC program for SPMI adults as part of an effort to continue providing services to this at-risk population, and to expand the type of clients (i.e. those with private insurance) that HHH would be able to assist. However, with the scope of services and level of skill required to run the CBCC program, HHH costs outweigh the income we receive through the reimbursements from third-party payors by approximately \$35,000.

In better times, that type of loss is sustainable because other types of funding can be acquired to make up the difference. However, two years of a down economy have begun to strain HHH's finances. Due to the decreased ability to diversify income streams and spread the financial responsibility for such services across as many different sources as possible, it has become harder for the organization to sustain such losses year after year. Without the requested funding, HHH can maintain existing services but puts its ability to continue to provide needed case management services to the SPMI population at risk in the future.

HHH intends to provide CBCC services to **60 adults with SPMI** on the island of Oahu. In addition, HHH has developed a "Quality Indicators Outcome Evaluator & Plan" to measure its ability in meeting its overall program goal, will measure its effectiveness based on the following outcome indicators:

- Number of direct face-to-face services hours;
- Number of consumers to Care Coordinator;
- Quality of Life Inventory (QOLI) at admission, prior to admission to care coordination services;
- QOLI every six months following admission to care coordination services;
- QOLI at discharge;
- Number of psychiatric hospitalizations during care coordination services;
- Number of newly engaged consumers to care coordination; and
- Percentage of consumers served rating services as "average" or higher.

3. ***State the public purpose and need to be served.***

Background Regarding Community Need.

The need for mental health case management services is critical. According to a 2007 report issued by the Department of Health, an estimated 13.9% of Hawaii's adult population (133,000 adults 18 and older) had at least one mental health condition.¹ Of this amount, 53.4% (approximately 71,100 adults) reported not receiving any type of mental health treatment.

Despite the critical need in the community, funding for services for adults with serious mental illness have been significantly reduced over the years, due to the budgetary challenges of not only the State government, but private insurers as well. This is not only a statewide problem, but is a recurrent theme in the continental U.S.. According to the National Alliance on Mental Illness (NAMI), funding for mental health services nationwide were cut by approximately \$2 billion between FY 2009 and FY 2011.²

On average, HHH absorbs a little over \$10,000 each month in necessary program expenditures that are not provided for within the current CBCC contracts. Necessary program expenditures include salary for qualified program staff (i.e. Psychiatrist, Registered Nurse, etc.), and operating expenses necessary to support program operations (i.e. utilities, general liability insurance, etc.). Community agencies, such as HHH, have chosen to continue to provide these necessary services despite funding challenges, but will not be able to indefinitely sustain such services without additional financial support.

Serving an Essential Public Purpose.

Research on the direct and indirect costs of mental illness in the United States estimate that the total economic impact is an estimated \$317 billion per year – or “more than \$1,000/year for every man, woman, and child in the United States.”³ This estimated economic impact includes estimates to potential income lost as a result of mental illness, as well as the public cost of providing health care and disability benefits, such as Social Security Disability Insurance (SSDI), Supplemental Security Income (SSI), food stamps

¹ Reyes-Salvail, F., Liang, S., and Gross, P. (2007). *The Hawaii Behavioral Risk Factor Surveillance System: Mental Health and Stigma Report*. Honolulu, HI: Hawaii Department of Health. Retrieved from: http://hawaii.gov/health/statistics/brfss/reports/Mental07_rpt.pdf

² National Alliance on Mental Illness. (2010). *NAMI Lists Top 10 States Hurt by Mental Health Budget Cuts; Are Candidates Addressing the Facts?* Arlington, VA: Author. Retrieved from: http://www.nami.org/Template.cfm?Section=press_room&template=/ContentManagement/ContentDisplay.cfm&ContentID=107293.

³ Insel, T. (2008). “Assessing the Economic Costs of Serious Mental Illness.” *The American Journal of Psychiatry*. Retrieved January 26, 2011 from: <http://ajp.psychiatryonline.org/cgi/content/full/165/6/663>.

and public housing. The total economic impact would be even higher if the costs of incarceration, hospitalization, and homelessness were also factored into this equation.

Mental health services, such as CBCC, serve an essential public purpose by providing needed quality care to adults with SPMI, while at the same time helping to reduce the economic impact of mental illness by adopting a service model focused on recovery. The recovery-centered focus of CBCC aims to eventually transition SPMI clients to independence. CBCC case managers play a critical role in providing their clients with a wide range of services designed to assist adults with SPMI to not only live, but also to thrive, within their community. These services include, but are not limited to:

- Crisis management, including assessment, intervention, and stabilization;
- Assisting with the development of interpersonal skills, community coping, and independent living skills so that individuals may eventually transition to independent living;
- Assisting the individual to develop symptom monitoring and management skills to more effectively manage their mental health concerns;
- Medication prescription, administration, and monitoring so that individuals receive the necessary treatment for their mental illness;
- Assistance with obtaining medical and rehabilitative treatment for substance use or other co-occurring disorders;
- Assistance with basic hygiene and personal care, including access to food, shelter, and other necessities;
- Identification of personal goals – both short-term and long-term; and
- Assistance with accessing other services or resources that are necessary to maximize the individual's independence and assist them in achieving their stated goals.

One example of how these services truly help to transition SPMI adults to independence is "Julia," a recent CBCC client. Julia is a young woman in her mid-20s, who is currently homeless and has a long history of abuse resulting from domestic violence. Julia had applied for General Assistance (GA) and SSI benefits for her mental illness, but was denied for both programs, which was a serious financial setback. Julia's CBCC Care Coordinator was able to work with Julia to secure part-time employment, which provided her with a stable source of income so that she will be able to save and pursue housing. In addition, the Care Coordinator also worked closely with Julia to develop her interpersonal relationship and coping skills, which had been damaged due to many years of serious domestic abuse.

The CBCC program places a strong focus on assisting clients, such as Julia, to recover from their mental illness. Due to services provided by CBCC, these individuals can develop the skills to eventually rejoin the workforce, transition off of public benefit assistance, and be at reduced risk of incarceration or hospitalization. In this way, CBCC

helps to keep the long-term economic impact of mental illness in check, while meeting an essential community need at the same time.

Meeting the Need & Planning for the Future.

The **\$35,000** requested through this proposal will enable HHH to close the “hole” in the “safety net” and continue to meet the need of adults with SPMI who receive CBCC services. Although the requested funding will cover only a 12-month period, HHH will utilize this period to aggressively pursue outside/non-governmental funding to ensure the continuation of this essential service.

4. *Describe the target population to be served.*

The target population is low-income adults (over the age of 18) with Serious and Persistent Mental Illness (SPMI) who reside on the island of Oahu. CBCC clients are individuals who are insured through 3rd party payors.

5. *Describe the geographic coverage.*

CBCC services are provided throughout the island of Oahu. While administrative functions for CBCC are based out of the agency’s main facility, which is located in Kalihi, most of the direct work of CBCC case managers is conducted in the field at areas where SPMI individuals reside or gather.

II. Service Summary and Outcomes

Within its CBCC program, HHH has established an empathic, consumer-centered approach that promotes the Recovery Model, and enhances the lives of those it serves. Through its strong, interdisciplinary approach, the program has been able to assist adults with SPMI who traditionally would have been difficult to treat, both in the hospital and in the community.

The following describes the CBCC program in further detail:

1. *Description of scope of work, tasks, and responsibilities.*

(1) CBCC services shall be provided to adults with SPMI who are referred to HHH through a third-party health insurance provider (i.e. Aloha Care or Kaiser). HHH will assure that services will be provided in the least restrictive environment, and in a manner that responds to the varied needs of the individual client. In general, admission criteria to receive CBCC services shall include meeting the level of care service criteria established by third-party payors for case management services.

(2) Service hours of operation will be based on client needs. Additionally, the CBCC program maintains a separate cell phone for any crisis calls after normal business hours.

(3) After receiving a referral for CBCC services, the referral source will be contacted immediately regarding the approval for admission to receive case management. The Qualified Mental Health Professional (QMHP) and the Team Leader will make the decision to accept the case, and shall assign the case to a case manager within the team. The QMHP and the Team Leader will assure that an initial face-to-face intake contact occurs with the consumer, and that all appropriate written consents and releases of information will be obtained from the consumer as soon as possible.

(4) The purpose of the assessment is to assist in developing an appropriate Master Recovery Plan (MRP) for each client. In general, each MRP aims to help the client and the case manager to work together to establish meaningful goals towards recovery – which are usually stated in the client's own words or perspective. The MRP will also address crisis response and other critical aspects of service delivery.

(5) At a minimum, the CBCC case management "team," shall consist of the client, the psychiatrist, and the case manager. The psychiatrist and/or an Advance Practice Registered Nurse with Prescriptive Authority (APRN Rx) shall have clinical leadership within the team, and will represent the ultimate authority for all clinical decisions. The case manager will be responsible for coordinating development of the MRP and will act as a communications liaison for the team. If the client has significant medical issues

which need to be addressed, a Registered Nurse will also be included as a member of the "team."

(6) There will be documented evidence of each client's input into all aspects of their treatment planning, inclusive of service-related decisions. This will be measurable as client goals will be presented in the client's own words.

(7) HHH will conduct assertive outreach to engage CBCC clients within the location of their choice, thus allowing for service delivery to the client in the least intrusive manner possible.

(8) The CBCC program staff has established partnerships with other agencies and community providers to develop continuity of care for program clients. Each CBCC case manager will be knowledgeable about services that are relevant to their client interests, and the case manager will also advocate on each client's behalf to assure that services are both accessible and relevant for the client.

(9) CBCC case managers, under the supervision of the QMHP and Team Leader and the Psychiatrist, will assure that the following services are provided by a member of the case management team or through other means identified in their clients' MRP:

- Symptom assessment and management;
- Dual diagnosis substance abuse services;
- Services to support Activities of Daily Living (ADLs) in community-based settings;
- Services to support social / interpersonal relationships and other social skills;
- Education and support to clients' families and other major supports; and
- Culturally and linguistically appropriate services.

2. *A projected annual timeline for accomplishing the results or outcomes of the service.*

HHH will adhere to the following projected annual timeline for the implementation and delivery of the proposed services:

PERIOD	ACTIVITY (Designated Staff Responsible)
Quarter I (Months 1-3)	<ul style="list-style-type: none"> • PROVIDER SELECTION & NOTIFICATION OF AWARD • COORDINATE WITH STATE AGENCY TO REVIEW PROJECT OBJECTIVES & TIMELINE • OUTREACH ACTIVITIES WITH GOVERNMENT AGENCIES & THIRD-PARTY INSURERS Meet with third-party insurers Aloha Care and Kaiser to disseminate program information and conduct outreach for program referrals. • BEGIN DELIVERY OF SERVICES

Applicant: Helping Hands Hawai'i

RFP No.: HMS 903-11-02-S

	<ul style="list-style-type: none">• GOAL: 25% of funds are expended by the completion of Quarter I, and program statistics for the period will be submitted to the appropriate State agency.
Quarter 2 (Months 4-6)	<ul style="list-style-type: none">• CBCC SERVICES CONTINUE• FOLLOW-UP WITH GOVERNMENT AGENCIES & THIRD-PARTY INSURERS Staff will follow up with AMHD and third-party insurers and continue outreach for program referrals.• GOAL: 50% of funds are expended by the completion of Quarter 2, and program statistics for the period will be submitted to the appropriate State agency.
Quarter 3 (Months 7-9)	<ul style="list-style-type: none">• CBCC SERVICES CONTINUE• FOLLOW-UP WITH GOVERNMENT AGENCIES & THIRD-PARTY INSURERS Staff will follow up with third-party insurers and continue outreach for program referrals.• REVIEW PROGRAM DATA FROM QUARTERS 1 & 2 Review program data from Quarters 1 & 2 to analyze the effectiveness of the project, and reassess program procedures and guidelines to more effectively utilize project funds.• GOAL: 75% of funds are expended by the completion of Quarter 3, and program statistics for the period will be submitted to the appropriate State agency.
Quarter 4 (Months 10-12)	<ul style="list-style-type: none">• CBCC SERVICES CONTINUE• FOLLOW-UP WITH GOVERNMENT AGENCIES & THIRD-PARTY INSURERS Staff will follow up with AMHD and third-party insurers and continue outreach for program referrals.• REVIEW PROGRAM DATA FROM QUARTERS 1, 2 & 3 Review program data from Quarters 1, 2 & 3 to analyze the effectiveness of the project, and reassess program procedures and guidelines to more effectively utilize project funds.• GOAL: 100% of funds are expended by the completion of Quarter 4, and program statistics for the period will be submitted to the appropriate State agency.

3. ***Quality assurance and evaluation plans relating to the request, including how the applicant plans to monitor, evaluate, and improve results.***

HHH is committed to achieving consistent and high quality services for all agency beneficiaries and program participants. The agency is able to demonstrate the sufficiency of its Quality Assurance and Evaluation plan for CBCC services.

For all agency services, HHH has adopted a Quality Management (QM) program, which includes a Quality Committee, Governing Board involvement, and a written process for goal and priority setting following standardized methodology and data-collection. This agency-wide QM program will address Quality Assurance for the CBCC services.

Consumer complaints, grievances, appeals, and consumer satisfaction.

Consumer complaints, grievances, appeals, and consumer satisfaction are all tracked and monitored by the QM committee. In the past, corrective actions have been formulated when problems have been identified.

Reporting of Consumer Concerns

The QM program has developed a system that outlines how items are collected, tacked, reviewed, analyzed, and reported to program monitors and funding agencies when appropriate. HHH is committed to following up diligently on these QM issues when potential matters on quality of care have arisen.

Program Evaluation & Work Plan

HHH has developed a system for periodic measurement, reporting, and analysis of well-defined output, outcomes measures, and performance indicators of the delivery system. Such results and information are used to improve the delivery system and clinical operations in regard to treatment planning and consumer safety issues. Feedback is provided to staff members, with subsequent follow-up to determine the impact on the agency's system of care.

Satisfaction Surveys are conducted on a monthly basis and the survey results are reviewed and are reported to the QM Committee. Program staff are given the results in a summary form.

The HHH QM Program also includes a Work Plan that is established annually, and identifies goals and activities based on an Annual Program Evaluation. The Work Plan includes designated timelines for the project, with identified department / persons responsible for carrying out items on the Work Plan.

Consumer Complaints

Regarding Consumer Complaints, HHH has a policy and procedure for all consumer complaints, grievances, and appeals. This includes documentation and identification of potential problems, actions taken, and demonstrated systems improvement. The QM Committee will track all of these activities and document follow up on all items.

Maintenance of QM Policies & Procedures

HHH assures that it has established and will maintain and regularly update the following QM policies and procedures: (a) Consumer Complaints, Grievances and Appeals, (b) Consumer Safety, (c) Consumer Satisfaction, (d) Disaster Preparedness, (e) Emergency Evacuation, (f) Evidence Based Practice Guidelines, (g) LOCUS/Level of Care Placement, (h) Compliance, (i) Consumer Rights and Orientation, (j) Confidentiality/HIPAA, (k) Treatment Records, (l) Individualized Service Plan, (m) Transition of consumers to other programs, (n) treatment team, (o) use of restraints, (p) restricting consumer rights, and (q) credentialing staff.

4. *Measures of effectiveness that will be reported to the State agency through which grant funds are appropriated.*

HHH will measure the effectiveness of its CBCC services based on the following measurable outcomes:

- Number of direct face-to-face services hours;
- Number of consumers to Care Coordinator;
- Quality of Life Inventory (QOLI) at admission, prior to admission to care coordination services;
- QOLI every six months following admission to care coordination services;
- QOLI at discharge;
- Number of psychiatric hospitalizations during care coordination services;
- Number of newly engaged consumers to care coordination; and
- Percentage of consumers served rating services as “average” or higher.

Outcome measurements will be reported to the appropriate third party private insurance payor on a quarterly basis to enable them to measure HHH's effectiveness in carrying out the proposed service.

III. Financial

Budget

1. Proposed Program Budget.

Please refer to the State budget forms enclosed as Attachment A.

2. Anticipated quarterly funding requests for the fiscal year 2011-2012.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$8750	\$8750	\$8750	\$8750	\$35,000

3. A detailed listing of other potential sources of funding for Fiscal year 2011-2012.

In addition to the funds requested through this proposal, for Fiscal Year (FY) 2011-2012, HHH anticipates receiving funding for CBCC services through the following sources:

Kaiser Permanente, Oahu - \$36,000

Aloha Care, Oahu – \$126,000

Other Private Revenue - \$8,000

Helping Hands Hawaii – General Funds - \$31,270

As previously mentioned, the **\$35,000** requested through this proposal will cover only a 12-month period. However, if awarded funding, HHH intends to gather program data within the 12-months to demonstrate the level of service that can be provided if costs for CBCC can be fully covered. HHH will utilize the data it gathers to aggressively pursue funding from outside sources to ensure the continuation of essential CBCC service.

IV. Experience and Capability

A. Necessary Skills and Experience

HHH is one of the most cost-effective and efficient not-for-profit organizations in the State of Hawai'i. Since its incorporation in 1974, the agency has acquired the necessary skills, abilities, and knowledge required to successfully continue providing CBCC services as described within this proposal. More specifically, Behavioral Health services, including case management for SPMI adults, has been a core part of the agency's mission for over 20 years.

1. Demonstrated skills, abilities, and knowledge relating to the delivery of the proposed service.

HHH has extensive experience and provides a vital lifeline for the community, assisting its members to help one another through its wide variety of BH and Human Services Programs. In particular, HHH provides critical Case Management and support services to adults with serious and persistent mental illness (SPMI). In particular, HHH has developed a specialized expertise in providing services for SPMI individuals who are dually diagnosed and in recovery from substance use. This expertise includes the ability to anticipate systems problems, gaps in service delivery, and accessibility issues for this specific population.

Moreover, BH staff are knowledgeable of community resources (both formal and informal) throughout the State of Hawaii. This knowledge capitalizes on embracing community resources outside the mental health system to help recipients move forward in their recovery. In regards to employment, housing, psychosocial skill building, and other recovery-orientated needs, HHH has demonstrated successful engagements with positive client outcomes, as noted in our client satisfactions surveys. In addition, HHH provides food, financial support, and primary health care linkage. These interventions have helped HHH clients remain stable in the community. HHH BH staff is committed to addressing co-occurring psychiatric and substance use disorders by using stage-wise interventions.

HHH is also accredited by CARF, and was recently re-accredited in 2009 for a three-year period. The 2009 accreditation for CARF included acknowledgements of the following agency strengths which are essential to delivering quality BH services:

- HHH staff are deeply committed, dedicated, and loyal. Personnel in this organization show the highest concern and respect for the persons they serve.
- Aggressive financial planning and accountability have resulted in financial stability and solvency in the recent difficult financial environment. Helping Hands leadership and board members have positioned themselves to sustain the

- organization despite the recent cuts and changes in service reimbursement.
- The leadership of this organization leads staff members in an ethical and responsible manner.
 - The HHH Board of Directors is active and functions in an aggressive manner to keep the organization viable during the recent turbulent economic period in Hawaii. Board members are very involved in appropriate areas and provide leadership and direction to the organization.
 - HHH employees go above and beyond in the services provided, including meeting the needs of the clients whether they have service units available, having a food bank available, and hosting holiday dinners.
 - Quality Assurance, supervision, and training practice ensure quality services for persons served.
 - Services are provided in culturally competent manner. This is important on an island where there are many different Polynesian, Asian, and other cultures represented in the populations being served.

In addition to its skills and experience relevant to BH services, HHH also helps to meet the basic social service needs of the community through its Bilingual Access Line, Community Clearinghouse, and Ready-to-Learn programs, which provide emergency financial and material assistance year-round and offer special seasonal projects such as assistance with school supplies and provision of toys and goods during the holiday season. These in-house resources are a tremendous asset to anyone who receives services from HHH.

2. Experience of the agency relating directly to the delivery of the proposed service.

HHH has been providing case management services specifically targeted at adults with SPMI since 1997, when the agency initiated the first Assertive Community Treatment (ACT) team in the State. In the early 2000s, HHH initiated Community Based Case Management (CBCM) services through a contract with AMHD, and more recently added a Community Based Care Coordination (CBCC) component in 2009 through contracts with third-party insurers Aloha Care and Kaiser. All of HHH's case management services for SPMI adults are based upon a recovery model, which emphasizes the principles of recovery and personal choice.

Adults with SPMI typically face a multitude of challenges, including substance use as well as housing concerns. According to NAMI, housing is a particular challenge for adults with SPMI because average housing costs far exceed the average benefit amount for SPMI adults who rely on public benefits for income.⁴

⁴ National Alliance for Mental Illness. (2010). *State Statistics: Hawaii*. Arlington, VA: Author. Retrieved from: <http://www.nami.org/ContentManagement/ContentDisplay.cfm?ContentFileID=93489>.

CBCC/CBCM services not only focus on crisis management and stabilization, but also assist in serving as a broker of services to connect clients with other community resources that can address these other areas of concern. CBCC/CBCM staff have effectively addressed substance use and dual diagnosis issues with many of the clients by providing motivational techniques and other unique, progressive approaches for clients who are frequently at the pre-contemplation stage of treatment. In addition, despite housing shortages in the community, CBCC/CBCM staff have taken clients to independent living sites, care homes, and group homes when necessary. HHH has also provided food, financial support, primary health care linkage, and other services that have not traditionally been included in the AMHD system of care.

In addition to CBCC and CBCM experience, HHH has also developed specific experience in addressing both housing and substance use concerns for SPMI adults through other contracts with both government and outside private agencies.

More specifically, HHH has directly assisted individuals in recovery from substance use since 2005, when it was contracted to provide Intensive Outpatient (IOP) services through the Department of Health – Alcohol & Drug Addiction Division (ADAD). HHH currently provides IOP services, as well as Day Treatment and a Psychosocial Rehabilitation (PSR) program for individuals in recovery from substance use. IOP, Day Treatment, and PSR are dual diagnosis programs in a group setting with the goal of transitioning participants to recovery and independence.

HHH also previously provided Access to Recovery (ATR) services, which included conducting detailed intake assessments and providing referrals for individuals in recovery from substance use. ATR referrals included referrals for appropriate treatment, as well as to other community resources that addressed housing, employment, and educational barriers facing participants.

In addition to targeted services for substance use, HHH has developed specialized experience in addressing the unique concerns of homeless adults with SPMI through a current collaborative contract with Mental Health Kokua to provide case management and community placement services for the Safe Haven Project in downtown Honolulu. Safe Haven is a “portal of entry” to housing and treatment for many homeless adults with SPMI who may otherwise lack access to basic psychiatric, medical, and social services. HHH case managers not only provide case management for Safe Haven clients, but also help to place clients in long-term, stable permanent housing in the community.

3. Description of projects / contracts implemented in the past five (5) years that are relevant to the proposed service.

The agency's experience in delivering the proposed services is demonstrated through the following contracts, which have been implemented over the past five (5) years:

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RFP No.: HMS 903-11-02-S

Day Treatment & Aftercare (Island of Oahu)
Adult Mental Health Division

CBCM Oahu, Adult Mental Health Division

Representative Payee Services Oahu, Adult Mental Health Division

ADAD Access to Recovery Oahu, Alcohol and Drug Abuse Division

Kaiser Permanente, Oahu -Case Management, Intensive Outpatient/Outpatient and

Aloha Care, Oahu –Case Management, Psychosocial Rehabilitation Services

**HMSA, Oahu - Intensive Outpatient, Outpatient, and Partial Hospitalization
Treatment Services**

**Mental Health Kokua (MHK) Safe Haven Project, Oahu- Case Management
Services**

APS Healthcare, Community Care Services (CCS)

B. Facilities

HHH CBCC services will be provided at the following location:

Helping Hands Hawai'i
2100 North Nimitz Highway
Honolulu, HI 96813

This main facility also houses the Administration, Accounting, and other Behavioral Health and Human Services programs of the agency. The office is conveniently located in a non-congested area along Nimitz Highway, which is a main traffic thoroughfare. There are several bus stops located nearby as well as easy access to the H-1 freeway. The office is ADA compliant and has two designated parking stalls for individuals with disabilities.

The HHH office provides a warm and welcoming environment for clientele, and can comfortably support offices for program staff and case managers. Individual therapy will be available for clients during normal business hours, from 8:00 a.m. to 4:30 p.m., and will be scheduled as needed. The office has designated areas for group therapy and individual psychotherapy services as well as secured and private staffing offices. In addition, the office also contains a working kitchen, which can be utilized

for providing healthy snack preparation for clients. In the event that the program outgrows the space, HHH will search for additional space to rent, that meets program needs.

The HHH facility for Oahu meets all ADA requirements. Wheelchair recipients and others have been reasonably accommodated in this facility. Moreover, this office has met all CARF safety requirements during site visits and inspections.

To comply with CARF requirements for case management, HHH will adhere to the following facility quality standards at its Nimitz Highway location:

1. HHH will maintain a structurally sound facility that does not pose a threat to the health and safety of the recipients it serves;
2. HHH will ensure the facility is accessible and capable of being utilized without unauthorized egress and regress through other private properties. The HHH facilities will have multiple means of egress in case of fire or disaster;
3. HHH ensure each site is afforded adequate space and security for personnel effects;
4. HHH will ensure all facilities have natural or mechanical ventilation, including window or air conditioning units. HHH facilities will be free of pollutants;
5. HHH will ensure all recipients have access to bathrooms that are in proper operating condition, maintain privacy, and are adequate for personal cleanliness;
6. HHH will ensure all facilities have adequate lighting provided by a natural source, either such as sunlight, or by artificial means, including light fixtures;
7. HHH will ensure recipients have access to a kitchen area and adequate space for healthy snack preparation, including refrigerator, stove and microwave;
8. HHH will ensure all equipment and appliances within all facilities are in operational and sanitary condition;
9. HHH will ensure each facility has at a minimum, one battery-operated or hardwired smoke detector that is maintained in proper working order;
10. HHH will ensure all facilities develop and adhere to health, fire, and safety regulations within the residence in accordance with State, City, County, and accreditation standards; and
11. HHH staff will supervise all recipients within each facility to ensure each facility

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is maintained in a clean, safe, manner. HHH will strive to create a comfortable homelike but professional environment for all its facilities.

V. Personnel: Project Organization and Staffing

A. Proposed Staffing, Staff Qualifications, Supervision and Training

1. Proposed Staffing.

HHH's CBCC program will be staffed by the following positions:

- QMHP
- Team Leader
- Psychiatrist
- Registered Nurse
- Care Coordinators
- Administrative Manager
- Program Assistant

The client:staff ratios for each position are as follows, according to guidelines recommended by AMHD:

- One (1) QMHP to oversee CBCC services;
- One (1) Psychiatrist for 250 consumers;
- One (1) Team Leader for 300 consumers
- One (1) Registered Nurse for each 150 consumers
- One (1) Care Coordinator for each 30 consumers

HHH has structured its CBCC program to have the capacity to take on additional consumers if needed.

2. Staff Qualifications.

Minimum qualifications (i.e. level of education, special licenses, and/or certifications, and work experience) are pre-determined based on the requirements and scope of service established by third-party payors for CBCC contracted services.

HHH has established Agency Job Descriptions, which include both essential and marginal duties to be provided by qualified staff. The established Job Descriptions are the basis of the agency's recruitment process to ensure that applicants are properly screened to meet required qualifications. Upon hire, HHH will also perform additional verification of staff's current and prior relevant background. This includes, but is not limited to: Verification of credentials; Criminal background checks; and Sex offender registry checks.

Please refer to agency Job Descriptions for the above-referenced positions, which are enclosed as Attachment B.

3. *Supervision of Project Staff.*

The QMHP will provide administration and oversight for the overall delivery of CBCC services provided by HHH. In addition, the QMHP will directly supervise both the Team Leader, Psychiatrist and the Program Assistant.

The Team Leader – who shall be a qualified individual in the mental health field with at least one (1) year of direct supervisory experience – will provide day-to-day supervision for the Bachelors Degree level Case Managers, and Registered Nurses.

Staff supervision shall occur on a weekly basis, evidenced by progressive documentation towards a competency-based performance evaluation of the staff. Data will be used and analyzed to ensure that required service levels of each staff member comply with applicable requirements, as established by AMHD.

Helping Hands Hawaii has experienced and strong leadership in its Board of Directors, Executives, Human Resources, and Accounting offices to support all of its programs and its employees. Policies and procedures are developed in compliance with state and federal laws and are regularly assessed to accommodate for changes in laws, to ensure appropriate service levels and to provide added security measures.

4. *Training of Relevant Program Staff.*

Staff training begins with New Hire Orientation. New Hire Orientation is provided by the Human Resources Department. All new employees regardless of their status must complete orientation before employment begins. This training covers employment, benefits, HIPAA, and agency rules and regulations, including but not limited to confidentiality, code of ethics, and safety procedures.

In addition, the agency also mandates specific clinical training for Behavioral Health staff.

Documentation of attendance and applicable competency based training shall be maintained by the HHH Human Resources Department.

B. *Organization Chart*

Please refer to the Program-wide and Agency-wide Organizational Charts enclosed as Attachment C.

VI. Other

A. Litigation

HHH does not have any current pending litigation to which it is a party.

B. Licensure or Accreditation

HHH was recently re-accredited in 2009 by the Commission on Accreditation for Rehabilitation Facilities (CARF) for a three-year period, which will expire in 2012.

A copy of the agency's CARF Accreditation Certificate is enclosed as Attachment D.

Attachment A
Program Budget

BUDGET REQUEST BY SOURCE OF FUNDS
(Period: July 1, 2011 to June 30, 2012)

Applicant: Helping Hands Hawaii

BUDGET CATEGORIES	Total State Funds Requested			
	(a)	(b)	(c)	(d)
A. PERSONNEL COST				
1. Salaries	0			
2. Payroll Taxes & Assessments	0			
3. Fringe Benefits	0			
TOTAL PERSONNEL COST	0			
B. OTHER CURRENT EXPENSES				
1. Insurance	5,000			
2. Lease/Rental of Space	1,974			
3. Staff Training/Prof. Development	300			
4. Supplies	500			
5. Telecommunication	1,350			
6. Utilities	3,526			
7. Prof. Fees (Psychiatrists)	6,000			
8. Prof. Fees (Temp. Assistance)	0			
9. Payroll Charges	0			
10. Audit Fees	3,500			
11. Postage	200			
12. Occupancy	0			
13. Cable/Internet	150			
14. Maintenance	0			
15. Mgmt. Info System Maintenance	8,000			
16. RPT	0			
17. Mileage	4,200			
18. Depreciation	0			
19. Membership Dues	0			
20. Printing & Publication	300			
21. Miscellaneous	0			
TOTAL OTHER CURRENT EXPENSES	35,000			
C. EQUIPMENT PURCHASES	0			
D. MOTOR VEHICLE PURCHASES	0			
E. CAPITAL	0			
TOTAL (A+B+C+D+E)	35,000			
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	35,000	Jan M. Harada	536-7234	
(b) 3rd Party Payors	180,000	Name (Please type or print)	Phone	
(c) Helping Hands Hawaii	21,270			1/26/2011
(d)		Signature of Authorized Official		Date
TOTAL BUDGET	236,270	Jan M. Harada, President & CEO		
		Name and Title (Please type or print)		

BUDGET JUSTIFICATION PERSONNEL - SALARIES AND WAGES

Applicant: Helping Hands Hawaii

Period: July 1, 2011 to June 30, 2012

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
None.				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
TOTAL:				
JUSTIFICATION/COMMENTS:				
Not applicable. Staffing costs will be covered by other funding sources.				

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Applicant: Helping Hands Hawaii

Period: July 1, 2011 to June 30, 2012

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
None.			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				
JUSTIFICATION/COMMENTS:				
Not applicable.				

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
None.			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				
JUSTIFICATION/COMMENTS:				
Not applicable.				

BUDGET JUSTIFICATION CAPITAL PROJECT DETAILS

Applicant: Helping Hands Hawaii

Period: July 1, 2011 to June 30, 2012

FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2009-2010	FY: 2010-2011	FY:2011-2012	FY:2011-2012	FY:2012-2013	FY:2013-2014
PLANS						
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT						
TOTAL:						
JUSTIFICATION/COMMENTS:						
Not applicable.						

Attachment B
Job Descriptions

HELPING HANDS HAWAII JOB DESCRIPTION

Position: Clinical Director
Reports To: Executive Director
Division: Behavioral Health
Department: Substance Abuse Treatment Services (SATS)
Community Based Case Management (CBCM)
Representative Payee Services
Day Treatment and Aftercare
Outpatient and Intensive Outpatient (IOP)
Community Based Care Coordination (CBCC)
Safe Haven Project in Partnership with Mental Health Kokua
Psychosocial Rehabilitation Services (PSR)
Type: Full time
FLSA Status: Salary, Exempt
EEO Job Code: 1.1 – Executive/Senior Level Officials and Managers
Location: 2100 N. Nimitz Hwy, Honolulu, HI 96819

OBJECTIVES:

To provide supervision of Qualified Mental Health Professional's, Master's Health Professional's, Certified Substance Abuse Counselors, and others as directed per contractual agreements. Maintain and continue to provide development, management, and organization of various mental health and substance abuse programs for Helping Hands Hawaii. To comply with company code of ethics, confidentiality practices, HIPAA, 42CFR, safety and all other policies and procedures.

ESSENTIAL DUTIES & RESPONSIBILITIES:

1. Establish highest level of competency, professionalism, quality and best practices and/or evidence-based practices in each program through program and staff supervisions.
2. Conduct assessments and surveys of community needs, government services, service providers, and trends in the mental health and substance abuse fields.
3. Develop and establish collaborative relationship with community service providers to ensure wrap around delivery of care for consumers, and effective substance abuse treatment services.
4. Develop leadership and management for all behavioral health and substance abuse programs.
5. Develop and maintain public speaking opportunities for educational and awareness purposes.
6. Monitor budgets and financial reports with accounting department and take corrective measures as needed and appropriate.
7. Monitor quality assurance reviews of contracts and ensuring that CARF accreditation standards and all contractual requirements are met.
8. Secure alternative funding sources and new business opportunities.
9. Assist in establishing goals and objectives through short and long term planning.

SUPERVISORY RESPONSIBILITIES:

1. Provide program administration, supervision, and evaluation of the behavioral health programs, including **Substance Abuse Treatment Services (SATS)**, Community Based Case Management (CBCM), Representative Payee Services; Day Treatment and Aftercare, Outpatient and Intensive Outpatient (IOP), Community Based Care Coordination (CBCC), Safe Haven Project in Partnership with Mental Health Kokua, and Psychosocial Rehabilitation Services (PSR)
2. Ensure opportunities for staff training and development.
3. Train and develop leadership/management skills in supervisors.
4. Conduct staff "Performance Appraisals" on a regular basis.

5. Ensure that the programs are optimally staffed. Partner with the Human Resources Department for interviews hiring, disciplinary action, termination etc

REPORTING REQUIREMENTS:

1. Preparation and submission of all statistical reports required by funding sources.
2. Conduct all programs quality management reports, collaborating with Executive team members

OTHER DUTIES:

1. Promote and maintain effective relationships with appropriate public and non-profit community agencies, and professionals.
 2. Promote and maintain cooperative relationships with other programs and staff.
 3. Other duties as assigned by the Executive Director.
-

Note: The Company reserves the right to assign additional duties and to add, delete or modify any essential or marginal job functions.

WORKING CONDITIONS:

Indoors, office setting, occasionally outdoors.

TRAVELING REQUIREMENTS:

Job requires position to travel to various program sites, company offices, and other locations for business meetings, etc. as required by the job.

WORKING HOURS:

Monday-Friday 8:00 a.m. to 4:30 p.m. with on call duties for clinical backup of behavioral health programs.

MENTAL AND PHYSICAL DEMANDS:

1. Duties require the use of considerable initiative, judgment, and problem solving.
2. Interpreting policies and procedures.
3. Work under minimal supervision.
4. Requires working under deadlines and pressure.
5. Requires dealing with difficult people or situations involving complex issues.
6. Establishes and maintains cooperative and productive work relationships.
7. Requires sitting for an extended period of time.
8. Requires traveling to various business locations as required by the job.

COMMUNICATION DEMANDS:

Requires communicating effectively both orally and in writing in the English language; speaking before small and large groups; giving instructions or directions to other; and seeking information from a variety of sources.

MINIMUM QUALIFICATIONS:

In addition to meeting the mental, physical and communication demands listed above, the job requires:

1. Licensed QMHP and CSAC.
2. Five (5) years working knowledge of the Mental Health field. Experience with managed care preferred.
3. Three (3) years experience in administration (program oversight, development, fiscal and/or personnel).
4. Working knowledge of Federal and State laws and regulations pertaining to Mental Health and substance abuse, including HIPAA and 42CFR.
5. Experience with accreditation, RFP, and grant writing.

6. Clear pre-employment background check (criminal & sex offender) within the past ten (10) years, clear driver's abstract, access to properly insured vehicle, annual TB clearance, pre-employment physical health clearance.
7. Basic knowledge of Microsoft Word and Excel.

COMPANY RIGHTS:

The above information has been designated to indicate the general nature and level of work performed for this position. It is not to be interpreted as a comprehensive inventory, or all duties, responsibilities, and qualifications of the employee assigned to this job. This job description does not constitute an employment contract. Reasonable accommodations will be made to enable qualified individuals with disabilities to perform the essential functions.

I, (print name) _____, hereby acknowledge and accept all responsibilities as the Clinical Director.

Signature: _____ Date: _____

Helping Hands Hawaii Job Description

Position: Team Leader
Reports To: Clinical Director
Division: Behavioral Health
Department: Community Based Case Management (CBCM) &
Community Based Care Coordination (CBCC)
Type: Full Time
FLSA Status: Salary, Exempt
EEO Code: 1.2 – First/Mid-Level Officials and Managers
Location: 2100 N. Nimitz Hwy, Honolulu, HI 96819

OBJECTIVES:

The Community Based Case Management (CBCM) program is funded by the State of Hawaii, Department of Health, Adult Mental Health Division. The Community Based Care Coordination (CBCC) program is funded by the State of Hawaii, Department of Health, Med-Quest Division through third party contracts (i.e., Kaiser and Aloha Care). The Team Leader (TL) is a member of a multidisciplinary team who oversees clinical operations for both CBCM and CBCC. Both programs are in line with the agency's mission by embracing Recovery in all aspects of service delivery. In many respects, CBCM and CBCC emphasize and capitalize on using consumer strengths and informal social supports. Both programs rely on the talents, skills, and abilities of all its staff members to function effectively, and achieve program goals.

CBCM and CBCC are under the direct supervision of the QMHP, Team Leader and Medical Director. The TL is responsible for ensuring adequate staffing is available to provide a safe, structured, and therapeutic environment for all consumers served. The TL is responsible for maintaining program goals in terms of effectiveness and financial stability. The TL is responsible for ensuring both programs maintain compliance to all contractual mandates. Further, the TL is responsible for honoring and abiding by the company's code of ethics, confidentiality practices, HIPAA, safety and all other applicable policies and procedures.

ESSENTIAL DUTIES & RESPONSIBILITIES:

1. Provide direct clinical supervision of the CBCM and CBCC programs, in line with specific contract requirements and as directed by the Clinical Director and/or Executive Team.
2. Ensure therapeutic activities consumers, include but are not limited to, individual, family therapeutic activities congruent with consumer's individual recovery plan. Interventions shall include but not be limited to, substance abuse, relapse prevention, legal issues, medication and independent living and coping skills.(QUOTE CONTRACT)
3. Ensure CBCM and CBCC programs honor the agency's policy on warm and welcoming staff are warm, kind, and empathic. Ensure staff provide services with compassion and knowledge regarding mental illness. Ensure staff use interventions that promote positive outcomes towards recovery.
4. Provide clinical supervision in line with contract mandates and as directed by the Clinical Director, Medical Director, and/or Executive Team.
5. Ensure all staff receive appropriate support and training in line with contract mandates and as directed by the Clinical Director, Medical Director, and/or Executive Team.
6. Oversee admission processes to both programs by ensuring all authorization are secured and verified, intake assessment and other screenings are completed in a timely manner as defined by contract.
7. Participate in the assessment of all consumer(s) on both teams using appropriate diagnostic and evaluation procedures to make appropriate dispositions, recommendations, and coordination of services.
8. Ensure that all consumers, and their informal and formal supports are provided with face-to-face interventions as defined by contract.

9. Provide clinical direction and assistance to ensure the following modalities are available and achievable for all consumers on the team, housing, employment, food and financial aid and/or refer the client(s) to the appropriate community resource.
10. Ensure all consumers are provided with psychiatric and medication support and evaluation, including appropriate referral to outside psychiatrist(s).
11. In collaboration with the Medical Director, Clinical Director, assess the physical/mental health of the consumers to ascertain whether or not they are receiving adequate care and make appropriate referrals.
12. Oversee the completion of the programs registration, clinical assessment, individualized treatment plan, case management and consumer/family education groups.
13. Develop linkages and necessary working agreements with community programs who come in contact with people who may benefit from CBCM or CBCC services.
14. Provide consultation to community programs to assist them in identifying those in crisis and responding to their needs.
15. Provide training to community programs and public information and education about the availability of CBCM and CBCC team services.
16. Participate in programs on-going Quality Assurance monitoring, tracking and trending of outcomes; CARF Accreditation surveying and AMHD audit processes.

SUPERVISORY RESPONSIBILITIES:

1. Supervises all activities of designated CBCM and CBCC teams to ensure their implementation according to goals and objectives, as per contracts and/or as directed.
2. Conduct staff "Performance Appraisals" on a regular basis.
3. Ensure opportunities for staff training and development.
4. Supervises Groups, CSACs, Registered Nurses, Peer Specialist, Administrative support, and other staff as assigned to his/her team.
5. Ensure that the team is optimally staffed. Partner with the Human Resources Department for interviews, hiring, disciplinary action, termination etc.

REPORTING REQUIREMENTS:

1. Prepare weekly, monthly, quarterly, and yearly statistical reports in a timely manner, as required and defined by the Clinical Director and/or Executive Team.
2. Collect, track, and trend program outcomes, as defined by the Clinical Director and QA Committee.

OTHER DUTIES:

1. Attend and participate in staff meetings, case conferences, and other meetings pertaining to the CBCM and CBCC teams.
2. Maintain cooperative relationship and open communication with management and staff.
3. Attend and participate in continuing education and training as required and as needed.
4. Performs other related duties as assigned by the Clinical Director.

Note: The Company reserves the right to assign additional duties and to add, delete or modify any essential or marginal job functions.

WORKING CONDITIONS:

Indoors, office setting, occasionally outdoors; may travel to see employees, other program sites, meeting sites, etc. as required by the job.

WORKING HOURS:

Primarily Monday – Friday, 8:00 a.m. to 4:30 p.m. Additional hours may be required to meet program and business needs.

EQUIPMENT USE:

Personal computer, standard office equipment and tools.

MENTAL & PHYSICAL DEMANDS:

1. Duties require the use of considerable initiative, judgment, problem-solving and or interpreting policies.
2. Work under minimal supervision and direction.
3. Requires working under deadlines and pressure.
4. Requires dealing with difficult people or situations involving complex issues.
5. Establishes and maintains cooperative and productive work relationships.
6. Requires sitting for an extended period of time.
7. Requires traveling to various business locations as required by the job.

COMMUNICATION DEMANDS:

Requires communicating effectively both orally and in writing in the English language; giving instructions or directions to others; and seeking information from a variety of sources.

MINIMUM QUALIFICATIONS:

1. Master’s degree in a clinical mental health discipline, AND two (2) year of experience in behavioral health; or a BSN with five (5) years experience in behavioral health.
2. At least one (1) year of supervisory experience and
3. Clear pre-employment background check (criminal & sex offender) within the past ten (10) years, clear driver’s abstract, properly insured vehicle, annual TB Clearance, CPR and First Aid (within 30 days of hire), pre-employment physical.
4. Valid Hawaii State Driver’s license and able to use properly insured personal car.

COMPANY RIGHTS:

The above information has been designated to indicate the general nature and level of work performed for this position. It is not to be interpreted as a comprehensive inventory of all duties, responsibilities, and qualifications of the employee assigned to this job. This job description does not constitute an employment contract. Reasonable accommodations will be made to enable qualified individuals with disabilities to perform the essential functions.

I, (print name) _____, hereby acknowledge and accept all responsibilities as the Team Leader (CBCM/CBCC).

Signature: _____

Date: _____

Helping Hands Hawaii Job Description

Position: Care Coordinator
Reports To: Team Leader
Division: Behavioral Health
Department: Community Based Care Coordination (CBCC)
Type: Full Time
FLSA Status: Exempt
EEO Code: 2 - Professionals
Location: 2100 North Nimitz Hwy Honolulu, Hi 96819

OBJECTIVES:

The CBCC Care Coordinator is a member of a multi-disciplinary team responsible for ensuring all Quest members are provided case management services based on clinical necessity. The CBCC Care Coordinator is under the direct supervision of the CBCC Team Leader and/or Clinical Director. The CBCC Care Coordinator is to comply with the company code of ethics, confidentiality practices, HIPAA, safety and all other applicable policies and procedures.

ESSENTIAL DUTIES & RESPONSIBILITIES:

1. Demonstrate a warm welcoming, empathic, and integrated approach towards all members on the team.
2. Ensure all CBCC members meet admission criteria for Services, and are authorized for services prior to direct care.
3. Complete an integrated intake assessment for each member through face-to-face contacts and with significant others involved in the members treatment and recovery, as well as, on going comprehensive assessments of each member's mental health symptoms, accurate diagnosis, and response to treatment.
4. Work with each member on developing a Master Recovery Plan (MRP); that shall include the members input into all aspects of their treatment planning, ensuring the MRP is signed and dated by the member and the Care Coordinator.
5. Ensure each member is contacted face-to-face by a Care Coordinator based on acuity and clinical necessity.
6. Attend and participate in team meetings.
7. Attend clinical supervision with CBCC Team Leader.
8. Provide members with support and education in regards to psychotherapy, medications, clinical services, general health services, dental services, living support and crisis services.
9. Offer assertive outreach to engage each member at their place of choice, in the least intrusive manner possible. Using alternative engagement approaches in response to varied member needs, cultural backgrounds, life stages, and linguistic needs.
10. Ensure each member has a Crisis Plan incorporated into their MRP to assist members with plans that promote wellness, identify early signs of relapse, and identify triggering responses to people, places, or events that pose a risk for relapse in the need for higher level of care and or eviction from programming or housing.
11. Assist with medication support and symptom management, as appropriate.

12. Ensure availability of emergency services twenty four (24) hours a day, seven (7) days a week, including treatment and cooperation with authorizing agencies, as designated.
13. Provide support to the members, both on a planned and as needed basis, to help them accomplish their personal goals, to cope with day-to-day stressors.
14. Provide support with activities of daily living in a community-based setting. Services include individualized assessment, problem solving, sufficient side-by-side assistance and support, skills training, environmental adaptations and on-going supervision using prompts, assignments, monitoring and encouragement.
15. Assist members to gain skills in obtaining, and maintaining safe, good quality and affordable housing, this may include apartment hunting, finding a roommate, landlord negotiations, cleaning, furnishing and decorating and procuring necessities such as telephone, furnishings and linens.
16. Assist members to gain skills in performing household activities such as house cleaning, cooking, grocery shopping, and laundry.
17. Assist the member with money management skills.
18. Assist the member with the use of available public and private transportation.
19. Provide social/interpersonal relationship and leisure-time skills, by helping members design and structure their time, increase their social experiences, have opportunities to practice social skills. Such services include supportive individual therapy; (i.e. problem solving,, role playing, modeling, assertiveness training, through side-by-side support and coaching).
20. Ensure members attend all psychiatrist appointments, as well as, appointments related to goals on the MRP, providing transportation, as needed.
21. Attend in-service training in techniques and modalities relevant to treatment and rehabilitation.
22. Educate and support clients' families, and advocate for client's rights and preferences.
23. Provide direct services to all members during the hours of 8:00 am-4:30 pm, including after hours, as needed.
24. All documentation will be charted within 48 hours of all contacts.
25. Assess members need for interpreter services with limited English proficiency, as well as, sign language services for members who are deaf or hearing impaired.
26. Acts as a liaison and consult with community agencies, families, and collateral contacts
27. Provide direct clinical "in-vivo" services on an individual, group, and family basis.
28. Work as a Team player by working with other Members of the CBCC team, assisting other team members, as needed.

SUPERVISORY RESPONSIBILITIES:

N/A

REPORTING REQUIREMENTS:

N/A

OTHER DUTIES:

1. Develop linkages and necessary working agreements with community programs that come in contact with CBCC members.
 2. Provides public information and education about the availability of CBCC services.
 3. Willingly performs other duties/responsibilities, as requested
 4. Participates in continuing education and training as required or needed.
-

Note: The Company reserves the right to assign additional duties and to add, delete or modify any essential or marginal job functions.

WORKING CONDITIONS:

Indoors, office setting, occasionally outdoors; may travel to see members, other program sites, meeting and training sites, etc. as required by the job.

WORKING HOURS:

Primarily Monday – Friday, 8:00 a.m. to 4:30 p.m.; with on-call availability twenty-four (24) hours a day, seven (7) days a week, including holidays, based on member need, or as assigned.

EQUIPMENT USE:

Personal computer, standard office equipment, and tools.

MENTAL & PHYSICAL DEMANDS:

1. Duties require the use of considerable initiative and judgment.
2. Work under minimal supervision and direction.
3. Requires working under deadlines and pressure.
4. Requires dealing with difficult people or situations.
5. Establishes and maintains cooperative and productive work relationships.
6. Requires sitting for an extended period of time.
7. Requires traveling to various business locations as required by the job.

COMMUNICATION DEMANDS:

Requires communicating effectively both orally and in writing in the English language; giving instructions or directions to others; and seeking information from a variety of sources.

MINIMUM QUALIFICATIONS:

1. Bachelors Degree preferred, with a minimum of twelve (12)-semester credit ours in courses such as counseling, criminal justice, human services, psychology, social work, social welfare, sociology, or other behavioral science AND 1-1/2 years of specialized experience.
2. At least one and a half (1 1/2) years of experience and knowledge in substance abuse treatment and/or be a Certified Substance Abuse Counselor (CSAC).
3. Must have strong commitment to the right and ability of each person with severe and persistent mental illness to live in normal community residences; work in market jobs; and have access to helpful, adequate, competent, and continuous supports and services.
4. Skills and competence to establish supportive trusting relationships with persons with severe and persistent mental illnesses and respect for client rights and personal preferences in treatment are essential.
5. Valid Hawaii Driver's license and willingness to use properly insured car.
6. CPR/First Aid/CPI certified; TB clearance.

COMPANY RIGHTS:

The above information has been designated to indicate the general nature and level of work performed for this position. It is not to be interpreted as a comprehensive inventory of all duties, responsibilities, and qualifications of the employee assigned to this job. This job description does not constitute an employment contract. Reasonable accommodations will be made to enable qualified individuals with disabilities to perform the essential functions.

I, (print name) _____, hereby acknowledge and accept all responsibilities as a Community Care Coordinator.

Signature: _____

Date: _____

An Equal Opportunity Employer

Helping Hands Hawaii Job Description

Position: Program Assistant
Reports To: CBCC Team Leader (50%) and,
SRSP Day Treatment & Aftercare, IOP, OP, PSR Program Coordinator (50%)
Division: Behavioral Health
Department: Community Based Care Coordination (CBCC)
SRSP-Day Treatment & Aftercare
Intensive Outpatient (IOP) Services
Outpatient (OP) Services
Psychosocial Rehabilitation Services (PSR)
Type: Full Time
FLSA Status: Salaried, Exempt
EEO Code: 5 – Office and Clerical, Clinical
Location: 2100 N. Nimitz Hwy, Honolulu, HI 96819

OBJECTIVES:

To provide administrative oversight and support Community Based Care Coordination (CBCC), SRSP-Day Treatment & Aftercare, Intensive Outpatient (IOP), Outpatient (OP) Service, and Psychosocial Rehabilitation Services (PSR) programs. Establish and maintain efficient methods of office coordination and services for consumers on the CBCC program. To comply with company code of ethics, confidentiality practices, HIPAA, Safety and all other policies and procedures. To assist consumers with enrollment for substance abuse treatment program and ensure adequate insurance coverage. The majority of services will be rendered on site at Helping Hands Hawaii.

ESSENTIAL DUTIES AND RESPONSIBILITIES:

1. Provides access, expertise, and support to ensure all consumers and staff have the necessary documents, and links to services, i.e. forms, consents, etc.
2. Provides detailed and timely tracking, processing, and follow up of service authorizations and program billing information for programs. Coordinates with Accounting Department to ensure timely billing and collections. Conducts research as required.
3. Track UM authorizations and advise on when to apply for renewal and increased units.
4. Receives, screens and routes incoming telephone calls, takes and routes message(s) to appropriate persons.
5. Provides routine information to callers and or visitors and directs caller(s) visitor to appropriate source.
6. Provides appropriate client information to various agencies in accordance with confidentiality laws and practices.
7. Maintains clinical and organizational filing systems, client documentation(s) report(s) and memos.
8. Enrolls and discharges in paper or electronic medical record system.
9. Maintains accurate worker/consumer records in paper or electronic medical record system.
10. Maintains paper charts for consumers records, as requested.
11. Coordinates timely compliance reporting with the Quality Assurance Department.
12. Maintain schedules of appointments, operations, and calendars.

13. Ensure all consumers acquire and maintain insurance coverage, throughout their authorization with the program, by maintaining a tracking log and verifying insurance coverage daily, or as requested.
14. Follows up on billing discrepancies
15. Schedules appointments, groups, and treatment programs, as requested.
16. Attends and participates in program meeting and trainings.
17. Compose correspondence, as requested.
18. Maintains tracking system for consumer health benefits and advises appropriate staff prior to expiration of benefits along with maintaining information in the electronic medical record for each consumer.
19. Participate in programs on-going Quality Assurance monitoring, tracking, and trending of outcomes; CARF Accreditation surveying and AMHD audit processes.

SUPERVISORY RESPONSIBILITIES:

N/A

REPORTING REQUIREMENTS:

1. Prepare weekly, monthly, quarterly, and yearly statistical reports in a timely manner, as required.
2. Collect, track and trend program outcomes, as defined by the Team Leader, Program Coordinator, or Clinical Director.

OTHER DUTIES:

1. Assumes additional related responsibilities as assigned by Team Leader, Program Coordinator, or Clinical Director.

Note: The Company reserves the right to assign additional duties and to add, delete or modify any essential or marginal job functions.

WORKING CONDITIONS:

Indoors, office setting, occasionally outdoors; may travel to see employee, other program sites, meeting sites, etc. as required by the job.

WORKING HOURS:

Primarily Monday thru Friday, 8:00 a.m. To 4:30 p.m. Additional hours may be required to meet business needs.

EQUIPMENT USE:

Personal computer, standard office equipments and tools

MENTAL & PHYSICAL DEMANDS:

1. Duties require the use of considerable initiative and judgment.
2. Work under minimal supervision and direction.
3. Requires working under deadlines and pressure.
4. Requires dealing with difficult people or situations.
5. Establishes and maintains cooperative and productive work relationships.
6. Requires sitting or an extended period of time.
7. Requires traveling to various business locations as required by the job.

COMMUNICATION DEMANDS:

Requires communicating effectively both orally and in writing in the English language; giving instructions or directions to others and seeking information from a variety of sources.

MINIMUM QUALIFICATIONS:

1. Two years office/business experience, and one (1) year working experience in Behavioral Health, preferred.
2. Knowledge of State and Federal benefits resources and processes helpful.
3. Knowledge of Windows computer programs including spreadsheet programs.
4. Ability to type 50 wpm
5. Capable of working under pressure and with a variety of people.
6. Valid Driver's license and willingness to use properly insured vehicle, preferred.

COMPANY RIGHTS:

The above information has been designated to indicate the general nature and level of work performed for this position. It is not to be interpreted as a comprehensive inventory of all duties, responsibilities, and qualifications of the employee assigned to this job. This job description does not constitute an employment contract. Reasonable accommodations will be made to enable qualified individuals with disabilities to perform the essential functions.

I, (print name) _____, hereby acknowledge and accept all responsibilities as a Program Assistant

Signature: _____ Date: _____

Helping Hands Hawaii Job Description

Position: Psychiatric RN
Reports To: Team Leader/Clinical Director
Division: Behavioral Health
Department: Community Based Case Management (CBCM)
Community Based Care Coordination (CBCC)
Psychosocial Rehabilitation (PSR)
Intensive Outpatient (IOP)
Specialized Residential Service Program (SRSP)
Type: Full Time
FLSA Status: Exempt
EEO Code : 2-Professional
Location: 2100 N. Nimitz Hwy Honolulu, HI 96819

OBJECTIVES:

The Psychiatric RN is a member the multi-professional team across an array of HHH Behavioral Health programs and is responsible for conducting psychiatric and medical assessments, basic health care education, coordination of medical needs; including but not limited to the coordination of appointments/referrals with community physicians, manage, and monitor psychotropic medication administration under the supervision/order of the psychiatrist. The Psychiatric RN has an active role in the provision of case management, group facilitation and psychosocial rehabilitation Services. The Psychiatric RN works with the consumer and their formal and informal support systems in the management of psychiatric and substance use disorders, including the development of wellness responses to co-morbid conditions, and development of CM team skills to manage complex health conditions, under the direct supervision of the CBCM Team Leader, CBCC Program Coordinator, PSR/IOP Coordinator, SRSP Coordinator and/or CBCM Psychiatrist/APRN Rx. To comply with company code of ethics, confidentiality practices, HIPAA, safety and all other policies and procedures.

ESSENTIAL DUTIES & RESPONSIBILITIES:

1. Demonstrates a warm and welcoming, empathic and integrated approach towards all consumers on the teams.
2. Provides consumers with psycho-education regarding mental illness and other co-occurring illnesses.
3. Under the direction of the team psychiatrist and in collaboration with other registered nurses on the team, develop, revise, maintain, and supervise team psychopharmacologic and medical treatment including transcribing, administering, evaluating, and recording psychotropic medications prescribed by the team psychiatrist/APRN Rx. The RN will evaluate and chart psychotropic medication effectiveness, complications, and side effects; and arrange for required lab work according to medication protocol and physician order.
4. Provide symptom management efforts directed to help each consumer identify/target symptoms and the occurrence of patterns to his or her mental illness and develop internal, behavioral, or adaptive methods to help lessen the symptoms. Develop step-wise case management Recovery Plan for co-occurring medical conditions.
5. Arrange for medication administration in a natural and safe environment, including intramuscular medications order by the psychiatrist, in a natural and safe environment.
6. Conduct a face-to-face comprehensive assessment of psychiatric history, mental status, and Axis 3 diagnosis; including physical/dental health; use of drugs or alcohol; education/employment; social development and functioning; activities of daily living; and family structure and relationships. The

assessment is completed upon admission, as well as, re-assessed upon any change in status, using Helping Hands Hawaii Nursing Assessment form.

7. Documentation of face-to-face actual time providing symptom and medication management, as well as, administration, will be documented in the consumer record within two (2) business days of the interaction.
8. Documentation of actual time engaging in collateral and telephonic contacts with community agencies, families, and consumers will be charted in the consumer record within two (2) business days of the interaction.
9. Brief and subsequent monthly face-to-face nursing visits should be documented on a progress note within two (2) business days of the interaction.
10. Collateral contact with CBCM co-workers and CBCM psychiatrist, and pharmacies is documented in a non-billable note.
11. When a physician order (verbal or written) is given to the RN it will be transcribed on the Medication Record (MAR), phoned, and filled by the consumers pharmacy of choice, documentation of the medications ordered and pharmacy name and number will be documented within the consumers record.
12. Order, manage and inventory all medical supplies using R. Weinstein, after approval from CFO or Clinical Director
13. Monitor and inventory all medication samples that are dispensed, stored, and disposed of, in accordance with State and Federal laws. Medication sample can only be dispensed or administered with a written or verbal order by the team Psychiatrist or APRN Rx.
14. Assist, coordinate, schedule and attend medical appointments in the community with PCP or specialists for physical examination, as needed.
15. Assist with obtaining medical insurance, Quest, Medicaid, Medicare, SSDI, 1147 Level of Care, etc... as well as, pre-authorization for medications and specialty procedures, as required.
16. Provide case management for an assigned group of clients including coordinating and monitoring the activities within the case management team.
17. Provide individual and group supportive therapy, medication and symptom management, actively participating in changes that are made in the Recovery plans.
18. Educate and support clients' families, and advocate regarding consumer rights and preferences.
19. Acts as liaison and consults with community agencies and families to maintain coordinate the treatment process.
20. Be available for clinical support outside regular business hours, Twenty-four (24) hours a day, seven days (7) a week.
21. Attend/participates in weekly team meetings and Recovery Planning review meetings, as required.
22. Attends/participates in Clinical Supervision with Team Leader and/or Psychiatrist/APRN Rx, as required.
23. RN in collaboration with the Psychiatrist will ensure each consumer is provided with informed consent for all psychotropic medications related to risks and benefits.

24. RN will inform all consumers that Helping Hands Hawaii is a drug free environment.
25. Provide assistance with nutritional education, and medical transportation coordination, as required.
26. Identifies wellness issues for consumers and provide training and groups on risk and implement of a wellness program to assist in teaching independent monitoring skills.
27. Provides referral or coordinates with the appropriate community resource for medical or social supports.
28. Participate in programs on-going Quality Assurance monitoring, tracking, and trending of outcomes; CARF Accreditation surveying and AMHD audit processes.
29. Performs other related duties/responsibilities as assigned.

SUPERVISORY RESPONSIBILITIES:

N/A

REPORTING REQUIREMENTS:

1. Writes evaluations and other reports.
2. Keeps statistical data as required.

OTHER DUTIES:

1. Develop linkages and necessary working agreements with community programs that come in contact with CBCM consumers.
2. Identifies wellness issues for consumer base and provides appropriate training.
3. Provides training to other team members regarding medical or psychiatric issues to promote enhanced recovery planning.
4. Provides public information and education about the availability of CBCM team services.
5. Coordinates and monitors the implementation of therapeutic activities including individual, group, family and recreation/diversion activities congruent with individual consumer recovery plan.
6. Attends and participates in staffing meetings, case conferences, and other meetings pertaining to the CBCM team.
7. Willingly performs other duties/responsibilities, as requested
8. Participates in continuing education and training as required or needed.

Note: The Company reserves the right to assign additional duties and to add, delete or modify any essential or marginal job functions.

WORKING CONDITIONS:

Indoors, office setting, occasionally outdoors, may travel to see consumers, other program sites, meeting sites, training sites etc. as required by the job.

WORKING HOURS:

Primarily Monday – Friday, 8:00 a.m. to 4:30 p.m.; With on-call availability twenty-four (24) hours a day, seven (7) days a week, including holidays, based on consumer needs, or as assigned based

EQUIPMENT USE:

Personal computer, standard office equipment, and tools

MENTAL & PHYSICAL DEMANDS:

1. Duties require the use of considerable initiative and judgment.
2. Work under minimal supervision and direction.
3. Requires working under deadlines and pressure.
4. Requires dealing with difficult people or situations.
5. Establishes and maintains cooperative and productive work relationships.
6. Requires sitting for an extended period of time.
7. Requires traveling to various business locations as required by the job.

COMMUNICATION DEMANDS:

Requires communicating effectively, both orally and in writing in the English language; giving instructions or directions to others; and seeking information from a variety of sources.

MINIMUM QUALIFICATIONS:

1. Must be a Registered Nurse in the State of Hawaii, Masters degree preferred, may have a Bachelors degree or Associates degree in nursing with required experience
2. Must have a minimum of two (2) years experience in mental health; interest a knowledge of current trends and new developments in the mental health field for the adult target population. Inpatient/outpatient psychiatric nursing preferred.
3. Clear pre-employment check (criminal and sex offender) within the past ten (10) years, clear driver's abstract, properly insured vehicle, annual TB Clearance, CPR and First Aid (within 30 days of hire), pre-employment physical.
4. Proficient in the assessment and evaluation of: Substance abuse, Mental illness, and suicidal ideation.
5. Thorough foundation in clinical psychology or nursing or social work principle and knowledge of the social and public health aspects of mental illness.
6. The ability to collect, evaluates, and interprets facts.
7. Analyze situations and people accurately and adopt an effective course of action.
8. Deal with people in a manner that will gain their confidence and cooperation.
9. Maintain an objective and emotionally stable attitude in meeting distressing situations presented by individuals and/or families.
10. Comprehensive knowledge of the characteristics of the mentally ill including psychosis, neurosis, personality disorders and other mental illnesses.
11. Comprehensive knowledge of the characteristics of alcohol and other substances of abuse. Knowledge of the principles of emotional growth and development.
12. Comprehensive knowledge of the various therapeutic techniques and interventions. General knowledge of trends in the field of mental health.
13. Ability to plan and organize.
14. Thorough working knowledge of crisis intervention theory, systems theory and community mental health principles of intervention.
15. Thorough working knowledge of suicide assessment and prevention.
16. Knowledge of the cultural factors affecting people's perception and responses to social and psychological factors.
17. Valid Driver's license and willingness to use properly insured car.

COMPANY RIGHTS:

The above information has been designated to indicate the general nature and level of work performed for this position. It is not to be interpreted as a comprehensive inventory of all duties, responsibilities, and qualifications of the employee assigned to this job. This job description does not constitute an employment contract. Reasonable accommodations will be made to enable qualified individuals with disabilities to perform the essential functions.

I, (print name) _____, hereby acknowledge and accept all responsibilities as a Psychiatric RN

Signature: _____ Date: _____

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Helping Hands Hawaii Job Description

Position: Administrative Manager
Reports To: Clinical Director
Division: Behavioral Health
Department: Community Based Care Coordination (CBCC)
Psychosocial Rehabilitation (PSR)
Intensive Outpatient (IOP)
Specialized Residential Service Program (SRSP)
Community Based Case Management (CBCM)
Type: Full Time
FLSA Status: Exempt
EEO Code: 1.2 – First/Mid-Level Officials and Managers
Location: 2100 N. Nimitz Hwy, Honolulu, HI 96819

OBJECTIVES:

To provide administrative oversight and support of the Community Based Care Coordination (CBCC), Psychosocial Rehabilitation (PSR), Intensive Outpatient (IOP), Specialized Residential Service Program (SRSP), and Community Based Case Management (CBCM) program. Must comply with company code of ethics, confidentiality practices, HIPAA, safety and all other policies and procedures

ESSENTIAL DUTIES & RESPONSIBILITIES:

1. Responsible for supervising and developing the administrative/program staff, including the administrative tasks of other support staff.
2. Provides detailed and timely tracking, processing, and follow up of service authorizations and program billing information for programs. Coordinates with Accounting Department to ensure timely billing and collections. Conducts research as required.
3. Follows up on billing discrepancies (current and non-current) with the Department of Health.
4. Provides direction, oversight, and training in administrative filing systems (including computer systems and database records), reports, and memos in accordance with program requirements and monitoring.
5. Assists in developing and implementing written administrative procedures (including forms and training) to increase operational efficiency.
6. Coordinates timely compliance reporting with the Quality Assurance Specialist.
7. Maintain schedules of appointments, operations, personnel and calendars.
8. Participates in team meetings as needed and works with the Team Leaders and Clinical Director to increase operational efficiency.
9. Represents Behavioral Health program safety meetings, conducts training and provides reports as required.
10. Oversees and maintains the electronic medical record system.

SUPERVISORY RESPONSIBILITIES:

1. Supervises administrative/program assistants and clerk(s)

REPORTING REQUIREMENTS:

1. Prepares weekly, monthly, quarterly and yearly statistical reports in a timely manner as required.

OTHER DUTIES:

1. Other duties as assigned by the Clinical Director.

Note: The Company reserves the right to assign additional duties and to add, delete or modify any essential or marginal job functions.

WORKING CONDITIONS:

Indoors, office setting, occasionally outdoors; may travel to see employees, other program sites, meeting sites, etc. as required by the job.

WORKING HOURS:

Primarily Monday – Friday, 8:00 a.m. to 4:30 p.m. Additional hours may be required to meet business needs.

EQUIPMENT USE:

Personal computer, standard office equipments and tools.

MENTAL & PHYSICAL DEMANDS:

1. Duties require the use of considerable initiative and judgment.
2. Work under minimal supervision and direction.
3. Requires working under deadlines and pressure.
4. Requires dealing with difficult people or situations.
5. Establishes and maintains cooperative and productive work relationships.
6. Requires sitting for an extended period of time.
7. Requires traveling to various business locations as required by the job.

COMMUNICATION DEMANDS:

Requires communicating effectively both orally and in writing in the English language; giving instructions or directions to others; and seeking information from a variety of sources.

MINIMUM QUALIFICATIONS:

1. H.S. Diploma or equivalent. BA preferred.
2. Supervisory experience and accounting/business operational experience.
3. Knowledge of Windows computer programs.
4. Capable of working under pressure and with a variety of people.
5. Valid Driver's license and willingness to use properly insured car.

COMPANY RIGHTS:

The above information has been designated to indicate the general nature and level of work performed for this position. It is not to be interpreted as a comprehensive inventory of all duties, responsibilities, and qualifications of the employee assigned to this job. This job description does not constitute an employment contract. Reasonable accommodations will be made to enable qualified individuals with disabilities to perform the essential functions.

I, (print name) _____, hereby acknowledge and accept all responsibilities as an Administrative Manager.

Signature: _____

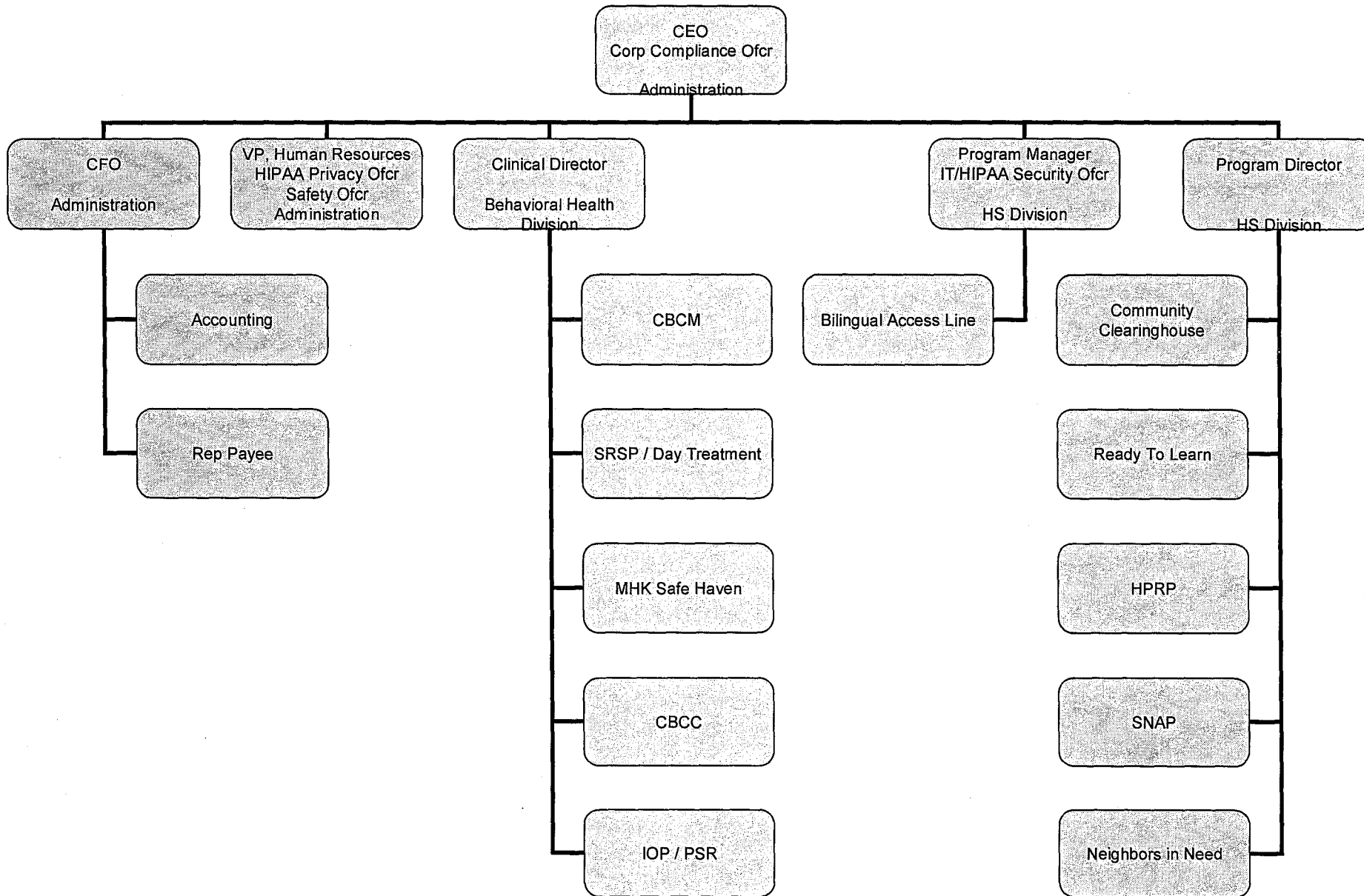
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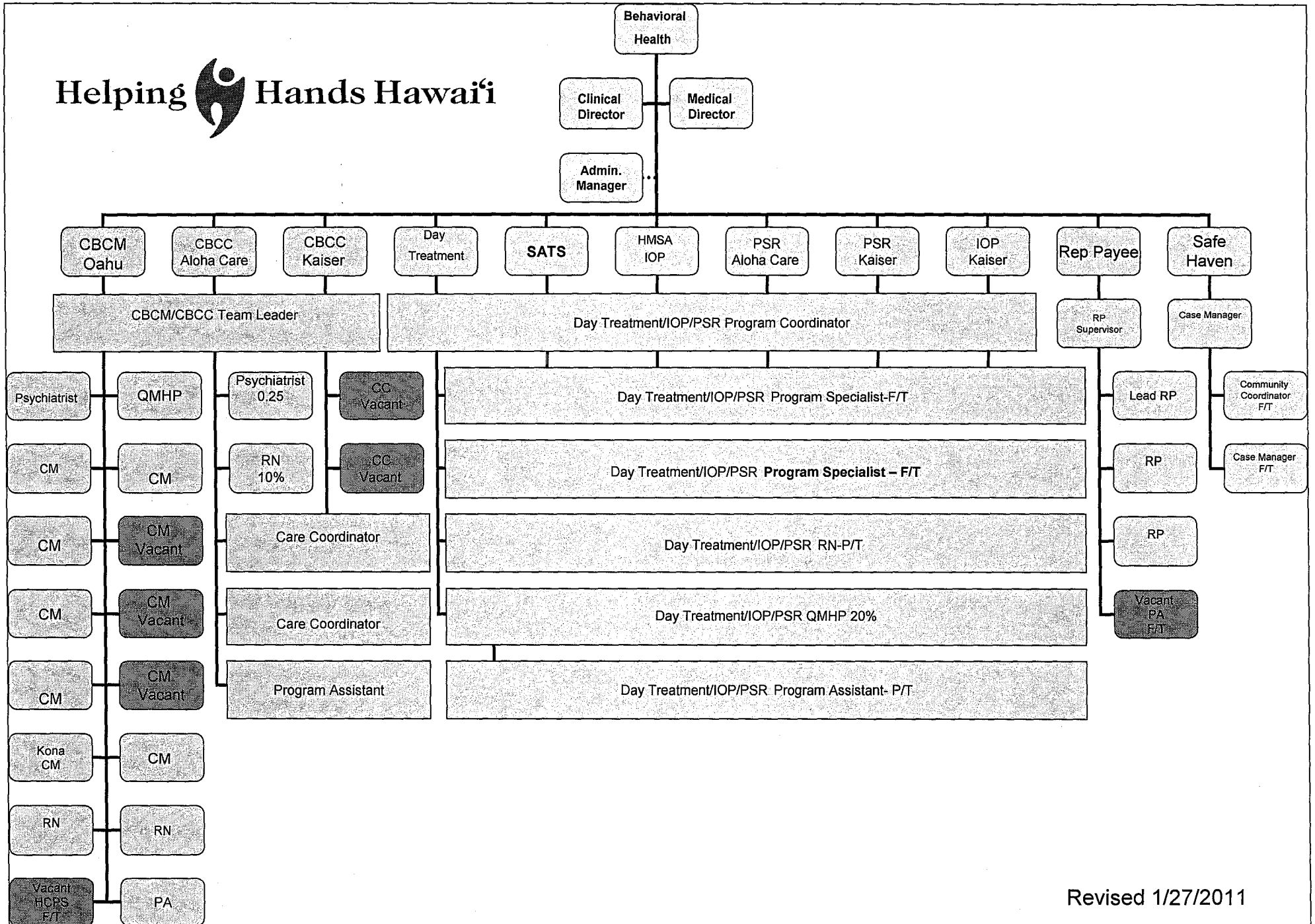
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Attachment C
Organizational Charts

Helping Hands Hawaii

Agency Wide Organization Chart as of 1/27/2011





Attachment D
CARF Certification

carf INTERNATIONAL

A Three-Year Accreditation is awarded to

Helping Hands Hawai'i

for the following identified program:

*Case Management/Services Coordination: Mental Health
(Adults)*

*This accreditation is valid through
August 2012*

*The accreditation seals in place below signify that the organization has met annual
conformance requirements for quality standards that enhance the lives of persons served.*



This accreditation certificate is granted by authority of:

Cathy Ellis P.T.

Cathy Ellis, PT
Chair
CARF International Board of Directors

Brian J. Boon Ph.D.

Brian J. Boon, Ph.D.
President/CEO
CARF International

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