House District <u>27</u>	THE TWENTY-SEVENTH LEG APPLICATION FOR GRANTS &		Log No:
Senate District13	CHAPTER 42F, HAWAII REVISED		
Type of Grant or Subsidy Request:			For Legislature's Use Only
GRANT REQUEST - OPERATING	☐ GRANT REQUEST – CAP	PITAL SUBS	SIDY REQUEST
"Grant" means an award of state funds by the le permit the community to benefit from those acti	egislature, by an appropriation to a speci- vities.	fied recipient, to support the activ	ities of the recipient and
"Subsidy" means an award of state funds by the incurred by the organization or individual in prov			on, to reduce the costs
"Recipient" means any organization or person re	eceiving a grant or subsidy.		
STATE DEPARTMENT OR AGENCY RELATED TO THI DEPT. OF HEALTH / EXECUTIVE OF STATE PROGRAM I.D. NO. (LEAVE BLANK IF UNKNO	FICE ON AGING		-
1. APPLICANT INFORMATION:	1	CT PERSON FOR MATTERS INVOLVIN	NG THIS
Legal Name of Requesting Organization or Indiv	vidual:	CATION: ANE M. TERADA	
Dba:		ivision Administrator	
Street Address: Clarence T. C. Ching Camp	pus Phone # (8	308) 527-4702	
1822 Ke`eaumoku Street Honolulu, Hl 96822	Fax # <u>(8</u>	08) 527-4709	···
Mailing Address:	e-mail <u>d</u>	iane.terada@catholiccharitieshaw	vaii.org
3. Type of business entity:	6. DESCRI	PTIVE TITLE OF APPLICANT'S REQU	EST:
NON PROFIT CORPORATION FOR PROFIT CORPORATION LIMITED LIABILITY COMPANY SOLE PROPRIETORSHIP/INDIVIDUAL	L	ANAKILA MULTI-PURPOSE SENIOR C	ENTER
		COPY	,
4. FEDERAL TAX ID #:	7. AMOUN	T OF STATE FUNDS REQUESTED:	
5. STATE TAX ID #:	FISCAL YEAR	R 2014: \$ <u>175,000</u>	
8. STATUS OF SERVICE DESCRIBED IN THIS REQUE NEW SERVICE (PRESENTLY DOES NOT EXIST) EXISTING SERVICE (PRESENTLY IN OPERATION)	SPECIFY THE AMOUNT BY SOU AT THE TIME OF THIS REQUES STATE FEDERA COUNT PRIVATI		PROCESS.
TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE:			
	STELLA M. Q. WONG, VICE PRESIDE	ENT OF PROGRAMS	1/31/13 DATE SIGNED

Application for Grants and Subsidies

I. Background and Summary

1. A brief description of the applicant's background;
Catholic Charities Hawai`i is a private, non-profit 501(c)(3) organization that has been providing services to the people of Hawai`i since 1947. Last year, nearly 40,000 people throughout the State of Hawai`i received services from Catholic Charities Hawai`i.

Catholic Charities Hawai'i's 250 staff members and hundreds of volunteers offer a comprehensive array of services to help individuals, families, groups, and communities meet basic needs, enhance social and emotional functioning, develop potential, and promote general well being. Clients receive services regardless of faith, age, gender, sexual orientation, religion, race, or ethnic origin.

Catholic Charities Hawai'i has been providing in-home and community-based services to elders since 1973. The agency serves approximately 5,000 elders each year including over 550 seniors per month at the Lanakila Multi-Purpose Senior Center (Lanakila).

Lanakila was established by the State of Hawai`i in 1969. Honolulu Community College ran the Center until the early 1980s. Catholic Charities Hawai`i took over operation in 1981 and has been operating Lanakila ever since. The Center remains a State-owned facility.

Throughout the year, Lanakila provides a range of educational, recreational and social activities including:

- Educational courses such as Basic English, 55 Alive Defensive Driving and Pedestrian Safety.
- Over 30 recreational classes such as karate, ukulele, sewing and mah jong.
- 7 clubs that perpetuate ethnic traditions and promote cultural sharing.
- Health promotion and screening activities such as blood pressure checks and health fairs.
- Special events such as Volunteer Appreciation Day, holiday celebrations, and Memorial Program.
- Onsite access to professional counseling and case management services.
- 2. The goals and objectives related to the request;

Goal: Lanakila Multi-Purpose Senior Center will provide health promoting services and activities for older adults, aged 60+, to help them remain independent and avoid or delay costly institutional placement.

Objectives/Outputs for fiscal year 2014:

- a. Provide <u>43</u> Education/Training sessions for <u>350</u> unduplicated older adults to help them acquire knowledge and skills for personal/social/vocational enrichment
- b. Provide <u>381</u> Exercise/Physical Fitness sessions for <u>380</u> older adults to maintain and improve physical functioning.
- c. Provide <u>36</u> Health Education and Promotion sessions to give <u>350</u> older adults tools and information to maintain good health and prevent illness.

- d. Provide <u>757</u> Health Screenings for <u>150</u> older adults to help them maintain independent living by detecting/preventing illness, assisting with monitoring chronic conditions.
- e. Provide <u>735</u> Recreation/Leisure sessions for <u>550</u> unduplicated older adults that foster good social and physical health and provide opportunities for meaningful and satisfying use of time.
- f. Provide <u>120</u> hours of Case Management for <u>100</u> unduplicated older adults to assist them in securing needed services to help them make the transition from independence to interdependence.

3. The public purpose and need to be served;

Elders, age 60 and older, represent the fastest growing segment of Hawai'i's population. The U.S. Census Bureau's 2010 American Community Survey estimates that there are 283,387 older adults in Hawai'i today. Hawai'i seniors have a longer life expectancy than those across the continental U.S. – 79.8 vs. 76.9 years² - with women in Hawai'i living longer than men, 82.5 years vs. 77.1 years. These longer life spans leads to more Hawai'i kupuna aging in place with multiple problems and few support systems.

Stroke remains the third leading cause of death in the United States.⁴ It is also the nation's leading cause of long term disability.⁵ It is estimated Americans will have paid about \$73.7 billion in 2010 for stroke-related medical care and disability.⁶ Today more than 70 million Americans ages 50 and older - four out of five older adults - suffer from at least one chronic condition, and 11 million live with five or more chronic conditions.⁷ According to the Bureau of Labor and Statistics survey, only 2% of adults aged 75 and older were involved in exercise or recreational activity. Fifty-four percent spent their time watching TV.⁸

An analysis of data of over 60,000 subjects determined that even moderate exercise on a regular basis can lower the risk of stroke. Studies have shown that exercise provides many health benefits and that older adults can gain a lot by staying physically active. Even moderate exercise and physical activity can improve the health of people who are frail or who have diseases that accompany aging. No matter the age, exercise can improve one's quality of life and people don't have to spend a lot of time doing it to see and feel improvements.

Exercise that comes in the form of recreational activities (e.g. hula, line dance, ethnic dance) can have the same beneficial effects. A study of 1,772 seniors showed that engagement in recreational activities lowered their risk of dementia by 38%. Older adults are more likely to self-refer themselves for exercise that comes in the form of a recreational activity (e.g. dance) and they are likely to continue at it for a longer period of

¹U.S. Census Bureau. 2010 American Community Survey 1-Year Estimates.

²Yuan, S., Karel, H., & Yuen, S. (2007). Hawai'i's Older Adults: Demographics Profile. Honolulu, HI, University of Hawai'i, Center of the Family, p.2.

³ibid.

⁴"Impact of Stroke", American Stroke Association, <u>www.strokeassociation.org</u>, 9/23/10. ⁵ibid.

⁶ibid.

⁷ A Call to Action in Health Reform", Agency for Healthcare Research and Quality (AHRQ). National Healthcare Disparities Report, 2006. Rockville, MD: U.S. Department of Health and Human Services.

⁸Gitlin, Laura N. Ph.D. "Importance of Activity: What the Research Shows in Support of Senior Center Programming"., 4/18/08 Presentation to Pennsylvania Association in Senior Centers. p. 12. Reference: Bureau of Labor Statistics, American Time Use Support

⁹Nano, Stephanie, "Fitness A 'Strong Predictor' Of Stroke Risk," Honolulu Advertiser, 2/23/08, page A5.

¹⁰Benefits of Exercise, NIH Senior Health, www.nihseniorhealth.gov

ˈˈibid.

¹²Waehner, Pat, "How to Live Better As You Age", About.com, Health's Disease and Condition 09-16-09

¹³Scarmeas N., Levy G., Tang MX, Manly J., Stern Y "Influence of Leisure Activity on the Incidence of Alzheimer's Disease". Neurology. 2001; 57:2236-2242.

time because it is enjoyable. Lanakila seniors who participate in dance groups also have the added incentive of performing monthly for frail elderly living in institutions which gives them a sense of purpose and usefulness that is essential to well-being.

Another critical component to maintaining health in older adults is social connectedness. Social connectedness is central to mental functioning, health and well-being. Loneliness has a negative impact on cognitive health and increases the risk of dementia.14 Researchers with the Rush Alzheimer's Disease Center discovered that patients with higher loneliness scores may be twice as likely to develop dementia. 15 In a study of seven senior centers in seven states, "over 90% indicate they have developed close friendships since coming to the senior center....86.9% of the respondents indicated that senior center friends provide them with emotional security."16

In general, the Center for Disease Control found that physically active people have a lower health care cost than inactive people do. ¹⁷ The average national median daily rate of a nursing home cost in the State of Hawai'i is between \$320 to \$345 per day. Institutional care is increasingly expensive, and it is the least desired living situation for older adults. Therefore, it is imperative for the community to support programs that will assist our growing elderly population to stay independent and to avoid premature institutionalization.

Senior centers are designated as community focal points that not only provide helpful resources to older adults, but serve the entire community with information on aging; support for family caregivers, training professionals and students; and developments of innovative approaches to aging issues. ¹⁹ The National Institute of Senior Centers found over 90% of senior center respondents reported their health improved or remained the same when compared to a year earlier. ²⁰ Additionally, they found a "positive relationship between the degree of social support and engaging in healthy behaviors."21 Seniors who participated in senior center activities made "positive behavior changes in lifestyle" and subsequently enjoyed "a more positive outlook on life". 22 Most Hawai i's elders will need some type of social service to remain independent. It is more cost effective to provide these services in the community when compared to the cost of institutionalization.

The City and County of Honolulu's Four Year Plan on Aging, October 1, 2011 -September 30, 2015, ("Plan") outlined five goals for the next few years. Based on its experience and standing. Lanakila can be an integral partner in three of the goals:

Goal 1 – empower older adults to stay healthy, active and socially engaged, using prevention and disease self-management strategies.

Goal 2 - enable older adults to remain in their own homes with a high quality of life for as long as possible through the provision of home and community-based services, including supports for family caregivers.

Goal 3 - Develop Oahu's Aging and Disability Resource Center (ADRC) to its fully functioning capacity to serve as a highly visible and trusted place where all persons

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¹⁴Wilson Ronald S, Krueger KR, Arnold SE, Schmeider JA, Kelly JF, Barnes LL, Tang Y, Bennett DA, "Loneliness and Risk of Alzheimer's Disease".

¹⁶ Aday, Ronald, "Identifying Important Linkages Between Successful Aging and Senior Center Participation", March 2003. ¹⁷Executive Summary: "A New Vision of Aging: Helping Older Adults Make Healthier Choices," Center for the Advancement of Health, Washington, DC, March 2006, p. 1.

¹⁸Cost of Care Survey," Home Care Providers, Adult Day Care Facilities, Assisted Living Facilities, and Nursing Homes, Genworth

<sup>2012.

19</sup> California Commission on Aging, Senior Center Literature Review, Teresa Dal Santo, Ph.D., 2009

²⁰Aday, Ronald, "Identifying Important Linkages Between Successful Aging and Senior Center Participation", March 2003. ²¹ibid.

²²ibid.

regardless of age, income and disability can find information of the full range of long-term support options.²³

The Plan also detailed the perspective of seniors and service providers on unmet needs and gaps in service. For seniors, the greatest unmet need was "senior center activities," 24 while "recreation" tied for greatest service need among service providers. 25

4. Describe the target population to be served; and

While the Center primarily serves elders who can independently manage Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs), frail elders who have "aged in place" will be able to maintain participation in the Center, due to strong social networks developed at the Center over the years and the availability of a Center social worker who provides onsite case management support.

The Center will give priority to serving those in greatest economic and social need, with special attention to low-income minority elders and elders with limited English proficiency. Currently, 30.81% of members identify themselves as low-income in comparison to the Oahu average (8.1%). And over 10% of members are identified as in Greatest Social Need. Lanakila has seven ethnic clubs that celebrate and promote knowledge of the following ethnic groups: Japanese, Chinese, Okinawan, Korean, Hawai'ian, Portuguese and Filipino. These clubs also provide information and support for seniors who have limited English proficiency.

5. Describe the geographic coverage.

The Center is targeted to serve elders who live within Census tracts 38-66 (Kakaako-Nuuanu / Punchbowl-Downtown-Liliha / Kapalama-Kalihi / Palama-Kalihi Valley-Moanalua). This is the State's defined geographic area for this State program.

Seniors who reside outside of the targeted geographic area are advised to visit senior centers, senior clubs or congregate meal sites in their communities. If these out-of-area individuals still wish to join the Center, they are asked to perform community service for the Center in exchange for membership.

This service requirement is waived for out-of-area older adults who are in greatest social need, are physically unable to do volunteer work, have language barriers that prevent them from being able to volunteer or have low-income, minority status.

²³City and County of Honolulu, Department of Community Services, Elderly Affairs Division, "Four-Year Area Plan on Aging: October 1, 2011 to September 30, 2015", p. 99.

²⁴ibid, p. 87. ²⁵ibid, p. 89.

II. Service Summary and Outcomes

The Service Summary shall include a detailed discussion of the applicant's approach to the request. The applicant shall clearly and concisely specify the results, outcomes, and measures of effectiveness from this request. The applicant shall:

1. Describe the scope of work, tasks and responsibilities;

GENERAL RECRUITMENT. The Center will recruit members by:

- Using media to provide information to the general public via press releases, articles, etc.
- Informing elderly housing management in the target area about Center services through direct contact, telephone, newsletters, flyers and email.
- Utilizing bilingual staff and members to communicate information to non-English speaking elders.
- Providing written and oral translations of materials whenever feasible; use other culturally sensitive communication means.
- Encouraging cultural activities and interactions that increase tolerance and understanding and promote diversity and acceptance.
- Having staff do outreach at public events attended by older adults
- Doing outreach to groups of retirees on the benefits of Center membership.
- Developing new activities to attract new members.

GENERAL INTAKE OF CLIENTS.

Any adult, age 60 and over, who lives in census tracts 38-66 is eligible to join the Center. Center members are entitled to participate in any Center-sponsored club, class or special event. Seniors outside this census tract area are also allowed to join if there are no available and comparable services in their community.

Interested older adults are required to visit the Center at least twice prior to registering for membership. They are welcome to observe any club or class activities of interest to them.

Individuals must complete a membership application. The Membership Specialist reviews the applications with all individuals. If there is a question regarding a client's ability to participate safely at the Center, the Membership Specialist will consult with the Program Coordinator.

Basic requirements for participation are: has the ability to independently manage ADLs (Activities of Daily Living) and IADLs (Instrumental Activities of Daily Living), as needed on the premises; does not require supervision for wandering, and is able to participate in activities without interfering with the rights and safety of other clients.

A frail client who does not meet the above criteria is still eligible to join the Center if s/he is accompanied by a caregiver who will provide the necessary assistance and supervision.

Clients who are deemed inappropriate for Center participation are referred to other programs, including adult day care.

During intake, the Membership Specialist will give clients information on other services and benefits for which they may be eligible or need. Clients who need transportation to the Center will receive referral to Handivan or CCH's Transportation Services Program.

Upon completion of the membership application and intake by the Membership Specialist, new members are required to attend a New Member Orientation that is held monthly. At the orientation, clients receive the following: 1) new member handbook, 2) written grievance procedure, 3) project income letter, and 4) membership card.

GENERAL TERMINATION OF CLIENTS. Termination of clients will be conducted as follows:

REASON	PROCEDURE
Death	Volunteers verify death via obituaries or via contact with family / significant others. Sympathy card sent to family. Records terminated.
Illness or moved out-of-area	Refer for transportation services as needed. Refer to other needed services if too frail to participate. Records terminated.
Moved off island	Verify verbally or in writing that client will not return. Records terminated.
Not interested	Reason is noted and forwarded to Program Coordinator. Information is discussed in monthly meetings with Membership Specialist and Program Specialist for purposes of quality improvement. Records terminated.
Unable to contact	Make several attempts to contact via last known phone number. Termination letter sent to last known address. Records terminated.

HEALTH SCREENINGS

The majority of Health Screenings will be offered on a short term or weekly basis throughout the year.

The Program Coordinator will be responsible to implement this service, with assistance from the Program Specialist.

Screenings will include blood pressure, hearing testing and medication management.

Screenings will be conducted by individuals who have the appropriate training and skill to provide these activities.

Professionals in the community, on a voluntary basis, will conduct special screenings.

Center meetings, memos, posters, and newsletters will be used to inform members of available screenings.

Members will register for screenings via sign up at the Reception Desk.

Volunteers or screening leaders will maintain screening records for statistical reporting.

EXERCISE/PHYSICAL FITNESS

The majority of the Exercise/Physical Fitness activities will be offered on a short term or weekly basis throughout the year.

The Program Coordinator will be responsible to implement this service, with assistance from the Program Specialist.

Activities will include classes such as Tai Chi, Stretch and Tone and Exercise with Karate.

Instructors for classes will be solicited through various means. Both volunteer and paid instructors will be utilized. Instructors will be screened to ensure that they have the appropriate training and skill to provide these activities.

Professionals in the community, on a voluntary basis, will conduct Exercise/Physical Fitness demonstrations.

Center meetings, memos, posters, and newsletters will be used to inform members of available classes and workshops.

Class registration is conducted quarterly at the Center. At the time of registration, students will have the opportunity to donate toward the cost of each class.

Members will register for other short-term workshops/classes via sign up at the Reception Desk.

Students will pay for needed class supplies.

Instructors or volunteers will maintain attendance records for statistical reporting.

The Center will provide training for instructors annually to review attendance procedures, purpose for Center classes and other needed topics.

HEALTH EDUCATION AND PROMOTION

The majority of the Health Education and Promotion activities will be activities that are offered on a short term basis throughout the year.

The Program Coordinator will be responsible to implement this service, with assistance from the Program Specialist.

Health Education and Promotion topics include healthy diet information, early warning signs of, ways to manage and to prevent disease. Other Health Education and Promotion topics will be identified in the same manner as Education/Training topics.

Instructors for classes will be solicited through various means. Both volunteer and paid instructors will be utilized.

Professionals in the community, on a voluntary basis, will conduct short-term workshops and seminars.

Center meetings, memos, posters, and newsletters will be used to inform members of available classes and workshops.

Members will register via sign up at the Reception Desk.

Students will pay for needed activity supplies.

Volunteers will maintain attendance records for statistical reporting.

RECREATION/LEISURE

The majority of Recreation/Leisure activities will be classes offered on a weekly basis throughout the year. In addition, the Center will offer special short-term or one-time workshops and training.

The Program Coordinator is responsible to implement this service, with assistance from the Program Specialist.

Recreation/Leisure topics include Beginning Ukulele, Hula and Tap Dancing. Other Recreation/Leisure topics will be identified through the following means:

- Requests from members for particular recreation topics for classes or lectures/seminars.
- 2. Suggestions from the Center's Program Committee, which is comprised of Center members who represent various clubs and classes.
- 3. Specific suggestions to clubs and classes to encourage them to provide recreation activities for their individual groups.

The Center will recruit instructors for classes through various means. Both volunteer and paid instructors will be utilized.

Professionals in the community, on a voluntary basis, will conduct short-term workshops and seminars.

Center meetings, memos, posters, and newsletters will be used to inform members of available classes and workshops.

Class registration is conducted quarterly at the Center. At the time of registration, students will have the opportunity to donate toward the cost of each class.

Members will register for other short-term workshops/classes via sign up at the Reception Desk.

Students will pay for needed class supplies.

Instructors or volunteers will maintain attendance records for statistical reporting.

The Center will provide training for instructors annually to review attendance procedures, purpose for Center classes and other needed topics.

EDUCATION/TRAINING

The majority of Education/Training activities will be classes offered on a weekly basis throughout the year. In addition, the Center will offer special short-term or one-time workshops and training.

The Program Coordinator has primary responsibility to implement this service, with assistance from the Program Specialist.

Education/Training topics include Pedestrian Safety, and Defensive Driving for the Older Adult. Other Education/Training topics will be identified through the following means:

1. Requests from members for particular educational topics for classes or lectures/seminars.

- 2. Suggestions from the Center's Program Committee, which is comprised of Center members who represent various clubs and classes.
- 3. Additional input on possible topics from other community agencies, such as the Executive Office on Aging and the Elderly Affairs Division.
- 4. Specific suggestions to clubs and classes to encourage them to provide education/training workshops for their individual groups.

The Center will recruit instructors for classes through various resources. Both volunteer and paid instructors will be utilized.

Professionals in the community, on a voluntary basis, will conduct short-term workshops and seminars.

Center meetings, memos, posters, and newsletters will be used to inform members of available classes and workshops. The media and flyers will be used to inform the general community of new classes and programs.

Class registration is conducted quarterly at the Center. At the time of registration, students will have the opportunity to donate toward the cost of each class.

Members will register for other short-term workshops/classes via sign up at the Reception Desk.

Students will pay for needed class fees and supplies.

Instructors or volunteers will maintain attendance records for statistical reporting.

The Center will provide training for instructors annually to review attendance procedures, purpose for Center classes and other needed topics.

PROFESSIONAL COUNSELING and CASE MANAGEMENT

This service will be performed by a licensed Social Worker (MSW/LSW). Supervision will be provided by the Catholic Charities Hawai'i's Case Management Program (CMP) Supervisor and all CMP Standard Operational Procedures on performance of these services will be followed.

Clients will be referred to the Social Worker by other Center staff or by self-referral. Eligible clients are elders, age 60+, who are potential or current Center members, or who are care recipients of current Center members.

Social Worker will perform an assessment of each counseling/case management client. A service plan will be developed by the Social Worker with input from the client and caregiver(s). This care plan specifies type of assistance to be provided and frequency of service.

The service plan is reviewed with the client and caregiver(s). The service plan must be signed by the client, indicating agreement to comply with the plan. In addition, the following forms are also reviewed with the client before the client signs them: 1) CCH Client Rights and Responsibilities, 2) CCH Grievance Procedure, 3) CCH Consent to Release.

The Social Worker coordinates necessary services and provides supportive counseling, as indicated in the service plan. Adjustments and monitoring to level of service is made as needed and no less than annually.

Counseling and Case Management services will be terminated when:

- 1. Client is no longer in need of assistance.
- 2. Client is placed in an institutional setting.
- 3. Client refuses service.
- 4. Client is non-compliant with service agreement.
- 5. There are health and safety risks.
- 6. Client moves out of the service area (off island).
- 7. Client is deceased.

As applicable, clients are verbally informed of closure and a termination letter is sent.

Clients will complete an evaluation annually or upon case closure.

2. Provide a projected annual timeline for accomplishing the results or outcomes of the service;

ACTION	RESPONSIBLE STAFF	EREQUENCY
Conduct meetings with Program Committee	WEST OF THE STATE	STANDOUGHOUS
comprised of representatives of all ethnic clubs and a cross-section of classes to work on program planning and center issues.	Program Coordinator & Program Specialist	Monthly
Meet with Program Specialist to evaluate activities, review benchmarks, and work on development of new instructors and programs.	Program Coordinator	Monthly
Publication of Center Newsletter and flyers to advertise activities and encourage participation.	Program Coordinator	Monthly
Registration for Center-Funded classes	Program Specialist	Quarterly
Leadership training for officers that covers membership development, financial planning and overview of social work/community services & resources.	Program Coordinator	Every January
Training for volunteers that cover best practices for their area of volunteer service and overview of social work/community services & resources.	Program Specialist & Membership Specialist	Every January
CCH Volunteer Recognition Program to appreciate and encourage continued service of Center's volunteers.	Program Coordinator	Every April
Selection and special recognition of one outstanding senior volunteer.	Program Coordinator	Every December
Meet with Membership Specialist to review membership issues, review benchmarks, to develop new outreach activities and address barriers.	Program Coordinator	Monthly
Coordination with AARP for Volunteer Tax Preparation Services	Membership Specialist	January through April
Coordination with AARP for Defensive Driving Safety class open to the public	Program Specialist	Four times a year
Coordination with Hawai`i Pacific Health Services for health seminar	Program Coordinator	Every June or July
Coordination with other community agencies and business to secure speakers and arrange excursions.	Program Specialist	Monthly

ACTION	RESPONSIBLE STAFF	FREQUENCY
Member donation drive	Program Coordinator	Annually
Show & Sell Craft, Food & White Elephant Bazaar Fundraiser for Clubs and Classes. Evaluation of net profits, concerns and discussion of improvement for next event.	Program Specialist & Program Coordinator	Quarterly
Conduct meetings with Participant Advisory Board comprised of community, club and class representatives to evaluate center policies, funding, challenges and direction.	Program Coordinator	Six times a year
Submit program evaluation to Elderly Affairs Division	Program Coordinator	Annually
Participate in intensive evaluation of policies and practices in line with Council of Accreditation standards.	Program Coordinator	Every three years
Provide Professional Counseling and Case management services for elders who are potential or existing Center members or who are care recipients of existing Center members.	Social Worker	Ongoing

3. Describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results; and

Catholic Charities Hawai'i (CCH) is a nationally accredited non-profit organization that provides health and human services to 40,000 individuals on an annual basis throughout the State of Hawai'i. With a commitment to excellence and a goal to meet and/or exceed best practice standards, the following Quality Assurance (QA) Plan was developed and is implemented throughout Catholic Charities Hawai'i.

The Plan details the following fundamental activities that support CCH continued deliverance of quality services and desired outcomes:

(1)	Training:	Timely communication & orientation of performance expectations
(2)	Supervision:	Enforcement of performance standards, development and monitoring of improvement plans (as needed), and facilitation of professional development
(3)	Quarterly Peer Review:	Independent review of case records to ensure timely case supervision
(4)	Outcomes Measurement:	Indicator of progress or delay in achieving proposed goals/objectives
(5)	Stakeholder Feedback:	Measurement of the degree of consumer satisfaction or dissatisfaction
(6)	Corrective Action:	A formal or informal plan used to transform a weakness into a strength

TRAINING. Quality assurance begins with the timely training and orientation of employees to all applicable state, federal, local, contractual, licensing requirements, and accreditation standards. CCH maintains a comprehensive training program that begins upon hire and progressively builds upon the position's function.

<u>SUPERVISION / PROGRAM OVERSIGHT</u>. Regular and timely supervision of employees and case records is essential to quality assurance. The full Quality Assurance Plan details the frequency and intensity of supervision within CCH programs.

QUARTERLY PEER REVIEW. In addition to the individual employee and unit/department meetings, CCH conducts quarterly peer review sessions through which a random sample of open and closed case records is reviewed by teams that are comprised of professionals who are not directly involved in the specific program. In accordance with best practice standards, CCH targets a 95% confidence level and .01 confidence interval in its sampling selection.

Upon the completion of each peer review session, the following activities are performed:

- 1. The individual results of each case record are entered into an agency-wide peer review database;
- 2. The original review forms are routed to the respective program directors via the division administrators;
- 3. A summary analysis report of the peer review session is written by each Program Director and submitted to the Quality Director via the Division Administrator:
- 4. Corrective action forms are completed for each record that has been given a non-compliant rating and routed to the Quality Director via the Division Administrator:
- 5. A summary report of the peer session (statistics, trends, and recommendations for improvement) is prepared by the Quality Director and submitted to the VP-Programs and Division Administrators.
- 6. The peer review summary report is concurrently shared with the Catholic Charities Hawai'i's Quality Improvement Committee and Program Board for their review.

On an annual basis, consolidated peer review report is prepared and included in the Annual Quality Assurance Report.

OUTCOMES MEASUREMENT. Building upon the Agency's investment in training, supervision, and case reviews, CCH monitors the overall strength and quality of its programs through outcomes measurement systems. All programs currently have measurement systems in place that evaluate the overall effectiveness of the program. CCH monitors accomplishment of program outcomes specific to the Lanakila Multi-Purpose Senior Center program.

A summary description of the specific tools and process used in measuring the effectiveness of the program outcomes is as follows:

- 1. Satisfaction Surveys feedback from external and internal stakeholders
- 2. Tracking Logs to monitor and analyze rates of completion, timeliness, and goal attainment
- 3. Supervision informal method of monitoring performance and compliance with procedures

The Quality Director coordinates the agency-wide effort to develop individual outcomes measure systems. On a semi-annual basis, each program reports the progress and/or delays in attaining the proposed program goals and objectives, along with variance explanations to the Division Administrator. Collaboratively, the Division Administrator and the Program Coordinator develop strategies and/or corrective action plans to improve identified weak areas.

The year-end results of each program's goals and objectives are reported in the agency's annual Quality Assurance Report.

STAKEHOLDER/CONSUMER FEEDBACK. Catholic Charities administers consumer satisfaction surveys to its program participants twice a year, exceeding the best practice standard's annual requirement. The survey tool was designed in accordance with Council on Accreditation requirements and the results are used to identify program and agency strengths and opportunities for improvement. The satisfaction survey tool is comprised of six sections that focus on the following:

- 1. Demographics (age, ethnicity, & gender)
- 2. Effectiveness of Service
- 3. Timeliness of Service
- 4. Cultural Sensitivity
- 5. Accessibility to Service/Program
- 6. Follow Up

The results of the satisfaction surveys are entered into a database and semi-annual reports are generated through the Quality Office. The year-end results of all the surveys are summarized and reported in the agency's annual Quality Assurance Report.

CORRECTIVE ACTION. Within each quality assurance activity described above there are planned opportunities to identify areas for improvement and corresponding opportunities to develop improvement plans. Currently, CCH utilizes both formal and informal plans/strategies to improve identified weakness. Formal plans are written and include specific goals and objectives and are typically used for material and/or repeat findings. Informal plans are loosely written or in verbal form and are typically used to address a minor, initial finding. Each Program Director and Division Administrator monitors the implementation of applicable program/divisional specific corrective/improvement plans.

QUALITY ASSURANCE OVERSIGHT. Quality assurance is a shared responsibility that begins at the point of service delivery (micro-level) and is monitored successively through the Clinical Supervisor, Division Administrator, Quality Director, VP of Programs, Senior Management Team/QI Committee, CCH Program Board, and ends with the CCH Corporate Board (macro-level).

<u>SUMMARY OF ANNUAL QUALITY ASSURANCE REPORT</u>. On an annual basis, Catholic Charities Hawai'i prepares an Annual Quality Assurance Report that minimally contains the following:

- 1. Executive Summary
- 2. Summary Report on Peer Review Sessions
- 3. Summary Report on Client and Employee Incidents, Accidents and Sentinel Events
- 4. Summary Report on Client and Employee Grievances
- 5. Summary Report on Program Monitoring Reports
- 6. Program Outcome Trends
- 7. Status Report on Prior Year's QA Report Recommendations
- 8. QA Goals and Objectives for Next Year

The Quality Assurance Report is reviewed by the Catholic Charities Hawai'i Program Board and subsequently approved by the agency's Corporate Board.

4. List the measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency). The measure(s) will provide a standard and objective way for the State to assess the program's achievement or accomplishment. Please note that if the level of appropriation differs from the amount included in this application that the measure(s) of effectiveness will need to be updated and transmitted to the expending agency.

Effectiveness of Program and Services will be measured through two surveys of the general membership conducted twice a year:

- 1. Client Impact Survey
- 2. Client Satisfaction Survey

Outcomes:

- 1. 90% of participants will learn/improve in one skill area.
- 2. 90% of participants will expand their social networks.
- 3. 60% of participants will make improvement in one health habit.
- 4. Average client satisfaction score will be at least 3.5 (out of 4.0)

III. Financial

Budget

1. The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.

See attached budget forms.

2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2014.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
43,750	43,750	43,750	43,750	175,000

- 3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2014.
 - a. City & County RFP Process Catholic Charities Hawai`i is responding to the Request for Proposals (RFP) that has been issued for Senior Centers. CCH has been the provider for senior centers in the targeted geographic area since the early 1980's. However, this funding source provides less than half of the funding necessary to operate the Center program safely.
 - b. Voluntary Contribution Method

All clients are provided a copy of the Agency's donation policy. The Center annually conducts a donation drive. Donations letters are hand-delivered and mailed to all active members. Additionally, donations are welcomed on an ongoing basis and the Center's seven clubs also make monthly and annual donations to support the Center.

The Center also tries to inform the public of its programs, services and needs through its monthly newsletter that is available via hard-copy by mail, at the Front Desk, posted electronically on the Catholic Charities Hawai'i web-site, and sent via an email to 175 stakeholders. The newsletter and media coverage of special events frequently results in donations from the public. These are acknowledged with a thank you letter. Donations are used to cover program expenses.

- c. Additional fundraising that is primarily client driven:
 - 1. Thrift Shop The Center continues to solicit donations of used items which it resells through its Thrift Shop.
 - Show & Sell Fundraiser Bazaars Quarterly event.
- d. In-House Agency Resources
 - The Development Office of Catholic Charities Hawai'i is responsible for generating additional revenue from donor individuals, corporations and foundations to supplement available funding for the agency's

- programs. The Development Office conducts major fundraising events to support program and administrative costs.
- 2. The Agency also receives support from the Aloha United Way (AUW) and the Combined Federal Campaign.
- 3. The Agency has recently established its first fee-based program, Premium Senior Services, as a means to provide in-home and community-based services for elders who can afford to pay. The goal is to generate revenue to support the agency's other programs.
- 4. The applicant shall provide a listing of all state and federal tax credits it has been granted within the prior three years. Additionally, the applicant shall provide a listing of all state and federal tax credits they have applied for or anticipate applying for pertaining to any capital project, if applicable.

Catholic Charities Hawai'i has not received nor does it expect to apply for any State or Federal Tax Credits

IV. Experience and Capability

A. Necessary Skills and Experience

The applicant shall demonstrate that it has the necessary skills, abilities, knowledge of, and experience relating to the request. State your experience and appropriateness for providing the service proposed in this application. The applicant shall also provide a listing of verifiable experience of related projects or contracts for the most recent three years that are pertinent to the request.

Each year, Catholic Charities Hawai'i serves approximately 5,000 elders through a range of services, including:

- Case Management Program provides professional counseling and case management in designated affordable housing projects and senior centers.
- Service Unit provides in-home and access services with para-professional staff and volunteers. These services include para-professional counseling and escort.
- Housing Assistance Program provides housing placement and counseling for elders who are homeless or at risk of homelessness, with the goal of securing stable, affordable rental housing.
- Medication Management for Seniors provides education on medication management and one-to-one medication screenings for seniors.
- Respite Connection provides support for family caregivers of elders through linkages to private hire providers and other resources.
- Transportation Services Program door to door transportation for elders who cannot use public transportation.
- Project HOPE (Helping Others, Promoting Employment) a Medicaid Waiver employment training program for individuals with Developmental Disabilities to learn skills to become competitively employed as chore workers for frail elders in the community.
- Premium Senior Services a fee based program for elders who need in-home and community-based services (case management, personal home assistance, and transportation) and can afford to pay.

The Agency's many years of experience in working with the elderly population makes it ideally suited to understand and meet the needs of elderly clients and their caregivers. In addition, staff also has access to other resources within Catholic Charities Hawai'i that help to complement and enhance the services currently provided to elderly clients and their caregivers. For example:

- Cultural Diversity and Competency The Agency is experienced in working with
 diverse ethnic populations and cultures. Within the agency, there is access to 43
 bilingual/trilingual staff who speak 16 languages other than English. CCH has
 well-established policies and procedures pertaining to the delivery of services to
 Limited English Proficient populations. Agency staff is annually required to review
 the Limited English Proficiency Plan, including the procedures to engage
 interpreters/translators. In addition, cultural competency training is an annual
 requirement for all staff to ensure that staff continue to learn and increase their
 awareness of the impact of culture on the delivery of services to people in need.
- Strengthening Families Catholic Charities Hawai'i has many services that seek
 to strengthen the functioning of families, both naturally occurring families and
 foster families. Intergenerational issues cross over programs for seniors and

- youth and program staff work together to seek the best methods and resources to support the needs of the entire family.
- Special Population Needs In addition to its work with elders, the Agency has a reputation for serving special need populations in the areas of domestic violence, abuse and neglect, homelessness and immigration.

Catholic Charities Hawai'i has an Administrative Services Department to assist and support the agency's programs in the areas of Marketing, Communications, Continuous Quality Improvement, Quality Assurance, Development, Special Events, Finance, Human Resources, Information Technology, Parish Relations, and Social Policy.

Catholic Charities Hawai`i currently manages a budget of over \$26 million that supports numerous programs. The agency has experience successfully implementing programs for the needy under federal, state and private grants from Federal Department of Health and Human Services, State Department of Labor and Industrial Relations, State Department of Human Services, State Department of Health, State Judiciary, Hawai`i Public Housing Authority, City & County of Honolulu, County of Hawai`i, Aloha United Way, Combined Federal Campaign, and various private foundations.

Catholic Charities Hawai'i follows accounting principles generally accepted in the United States of America (i.e., GAAP). The financial accounting system of Catholic Charities utilizes Sage MIP Fund Accounting System based in Austin Texas., which is software widely used by other nonprofit organizations. Separate funds are established for the major categories so that costs can be recorded accordingly.

The basic foundation of the internal control for Catholic Charities Hawai`i's financial reporting structure is a system of checks and balances through the separation of duties. The system is separate from the operational end of the organization. Information provided by the operations personnel is used as a basis for revenue billings and disbursement of funds. Requests for payment are generated by the program staff and approval by an authorized individual is required for all transactions.

CCH's financial management practices involve monthly reporting to all department & program managers, senior and executive management. Bi-monthly financial reports are provided to CCH's Board Executive and Finance & Audit Committees, as well as the full Board of Directors.

Catholic Charities also completes the required annual audit with its auditors C.W. Associates, a Hawai'i certified public accounting corporation. As required, the audit is conducted in compliance with the U.S. Office of Management and Budget Circular A-133. The independent auditor reports its findings and opinion of the agency's financial statements to the Board Finance & Audit Committee.

CCH has its most recent audited financial statements for the agency's last fiscal year (September 1, 2011 to August 31, 2012) with an accompanying management letter in which the auditors were able to issue an unqualified opinion and found no material weaknesses or reportable conditions. This audited financial statement can be provided upon request.

CCH provides regular reports to the Aloha United Way, City and County of Honolulu, the County of Hawai`i, various State departments, Catholic Charities USA, and various foundations. An accountant who is assigned to the project works regularly with CCH administrative staff, supervisor of the Center, and Community & Senior Services Division Administrator to review budgets and expenditures to avoid large variances.

CCH's procurement policies require that staff obtain the best value for their funds. Much like the procurement system imposed upon all government entities, prior to making expenditures, CCH solicits quotes from vendors to ensure that the organization is getting the best value out of every expenditure.

An accountant who is assigned to the project works regularly with CCH administrative staff and the Program Coordinator of the Lanakila Multi-Purpose Senior Center to review budgets and expenditures to avoid large variances.

The Procurement Rules of Chapter 103D of the Hawai'i Revised Status (HRS) and the terms of this contract shall be followed. OMB and Chapter 103F HRS cost principles will be used to determine allowable costs and method of allocation. Any costs that the contract defines as unallowable will not be charged as a contract expense.

List of related projects or contracts for the most recent three years is attached.

B. Facilities

The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the request. If facilities are not presently available, describe plans to secure facilities. The applicant shall also describe how the facilities meet ADA requirements, as applicable.

The Lanakila Multi-Purpose Senior Center is located at 1640 Lanakila Avenue, Honolulu, Hawai`i. The facility is a State-owned one that is maintained by the State Department of Accounting and General Services. As the program operator, Catholic Charities Hawai`i handles routine maintenance and janitorial services. This State-owned facility, as well as all of CCH senior services offices, are accessible to individuals with physical disabilities, near convenient bus lines, and have available parking facilities.

V. Personnel: Project Organization and Staffing

A. Proposed Staffing, Staff Qualifications, Supervision and Training

The applicant shall describe the proposed staffing pattern and proposed service capacity appropriate for the viability of the request. The applicant shall provide the qualifications and experience of personnel for the request and shall describe its ability to supervise, train and provide administrative direction relative to the request.

The existing Center staff has many years of combined service with CCH, reflecting the stability and experience that is available to the Center and its members. The following are the specific qualifications and job responsibilities. Full Time Equivalency (FTE) represent the allocation requested via this Grant In Aid application.

Program Coordinator (.50 FTE): Responsible for overall coordination and implementation of the Center's programs, services and operations.

Program Specialist (.50 FTE): Responsible for assisting with program planning and to provide clerical support for educational and recreational programming at the Center, including special events; handles registration for all classes, logistics for clubs.

Membership Specialist (.50 FTE): Responsible to provide paraprofessional counseling and clerical assistance in the areas of membership and volunteer service; conducts screening of potential members; coordinates other special services (tax, meals, etc.).

Social Worker (.40 FTE): Responsible for assessment, counseling, case management, advocacy and service linkages.

Custodian (.50 FTE): Responsible to maintain a clean and safe facility. Duties relate to interior and exterior of the facility.

Administrative Support Assistant (.25 FTE): Oversees timesheets for Older American Community Services Employment Program (OACSEP) workers assigned to Center; handles counting of Program Income donations; ordering of janitorial and office supplies; and other related clerical duties.

Division Administrative Services: Oversight of all aspects of program operations, advocacy and contract support, and other support services are provided by the Division Administrative staff, including the Division Administrator and Administrative Liaison. See budget for percentages of time.

Volunteers: The Center has 300+ volunteers who provide an array of services through volunteer positions such as Instructor, Telephone Receptionist, Greeter/Hostess, Club Officers, Entertainer/Performers, Data Entry, Counting Statistics, Meal Site Servers and more. In addition, volunteers provide bilingual assistance to ensure that non-English speaking members are able to participate fully in the Center activities and receive vital information on needed services and resources.

<u>SUPERVISION AND TRAINING</u>. Catholic Charities Hawai'i devotes a significant amount of time orienting and training new employees in order to ensure that quality services are provided consistently and effectively.

All new employees are required to attend an all-day CCH New Employee Orientation. This provides general background on the organization, its history, mission, values and strategic goals. In addition, the Community and Senior

Program supervisors are responsible to see that all new employees are also oriented and trained to carry out their specific job duties. Basic areas of orientation and training shall include:

- Review of CCH Code of Conduct policies, including conflict of interest and gratuities. There are stringent procedures defining the handling of money by employees in the course of service provision. In addition, staff are not allowed to accept any type of gratuity, including tips, gifts or other items offered by clients. In situations where it is unavoidable to refuse a monetary gratuity, staff are instructed to inform clients that all gratuities will be turned over to the Agency as a client donation. Food and other non-monetary gratuities will also be turned over to the supervisor for disposition. All employees are required to sign an acknowledgement that they have read the Employee Handbook and agree to abide by the enclosed policies, including the Code of Conduct. Violations of the Code of Conduct policies will result in disciplinary action up to and including involuntary termination. All employees are also required to sign a Conflict of Interest Disclosure Statement.
- Information and techniques on working with elders and their caregivers will be provided. Other topics of instruction will include: proper and safe handling of assistive devices, tips on working with functionally and cognitively impaired elders, and general communication tips.
- Cultural competency training will be provided to ensure that personnel are culturally sensitive to diverse ethnic populations. Information on Agency procedures for language access by elders or caregivers who do not speak (or have limited proficiency in) English will also be shared.
- Information on handling of emergency situations will be provided. All staff are trained in CPR/First Aid. In addition, program supervisors also review disaster procedures with all employees.
- Health Insurance Portability Assurance Act (HIPAA) training as it applies to client confidentiality.
- Policies and procedures regarding how services are to be provided are also reviewed.
 New personnel often "shadow" experienced workers and the program supervisor, as appropriate.

Ongoing training of personnel is key to ensuring that quality services are provided to elderly clients. The agency wide Staff Training Committee is responsible to coordinate training activities that are required for all personnel on a regular basis. This includes but is not limited to: CPR/First Aid, de-escalation, cultural competency, and more.

Training and information specific to the elderly population and the provision of contracted services are regular in-service training topics at bi-monthly Division General Staff Meetings and monthly program/unit meetings.

Supervisors meet with each direct report staff on a monthly basis to review case records, discuss client issues and address staff progress toward identified professional goals and training needs.

The program supervisor also conducts a formal, written evaluation of each employee at the end of the six-month observation period and annually thereafter to promote continued growth and improvement.

The Community & Senior Services Division Administrator provides supervision of the program supervisor through monthly supervision meetings. The program supervisor also consults with the Division Administrator on an ongoing basis regarding questions, problems, or other needs.

All program supervisors meet together monthly with the Division Administrator. These supervisory team meetings allow for information sharing between programs and problem solving on issues relevant to all programs.

<u>VOLUNTEER MANAGEMENT</u>. The Program is responsible to screen, orient, train and supervise volunteer personnel similar to its procedures for paid personnel. Program supervisors interview individual volunteers to determine appropriate assignment to the available tasks of the program/unit. The Program conducts reference checks on all volunteers who are being considered for duties that involve access to clients or confidential client information. Volunteer staff are included in all New Employee Orientation conducted by the Agency and the Division. In addition, volunteers are partnered with experienced staff to gain on-the-job training and regular supervision is provided by the program supervisor or designated line staff in order to ensure the level of quality of services provided.

B. Organization Chart

The applicant shall illustrate the position of each staff and line of responsibility/supervision. If the request is part of a large, multi-purpose organization, include an organizational chart that illustrates the placement of this request.

Organization charts are attached.

VI. Other

A. Litigation

The applicant shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgement. If applicable, please explain.

Catholic Charities Hawai'i is not involved as a party in any pending litigation and there are no outstanding judgments against it.

B. Licensure or Accreditation

The applicant shall specify any special qualifications, including but not limited to licensure or accreditation that applicant possesses relevant to this request.

CCH is accredited by the National Council on Accreditation for Children and Family Services. To attain and maintain accreditation, CCH implements a formal written quality assurance program and is required to complete rigorous reviews and audits annually. The Council on Accreditation (COA) is an international, independent, non-profit child and family service and behavioral healthcare organization. Founded by the Child Welfare League of Family Services America, COA promotes service standards, champions for quality services for children, youth and families; and advocates for the value of accreditation.

Lanakila Multi-Purpose Senior Center, meets the COA service standard of Counseling, Support and Education Services. The purpose of this service standard is to ensure that "individuals and families who participate in counseling, support and education services identify and build on strengths, develop skills to manage situational change, and improve functioning in daily activities at home, at work, and in the community." CCH's accreditation is effective through December 31, 2015.

In addition:

- Catholic Charities Hawai`i has a Hawai`i State General Excise License
- The Center's Social Workers are licensed as social workers in the State of Hawai'i

ATTACHMENTS

- LIST OF EXPERIENCE OF RELATED PROJECTS OR CONTRACTS FOR THE MOST RECENT THREE YEARS
- ORGANIZATIONAL CHARTS (2)
 - 1. Agency-Wide
 - 2. Program
- BUDGET FORMS
- DECLARATION STATEMENT

Catholic Charities Hawai'i

List of Experience of Related Projects or Contracts for the Most Recent Three Years

Notes:

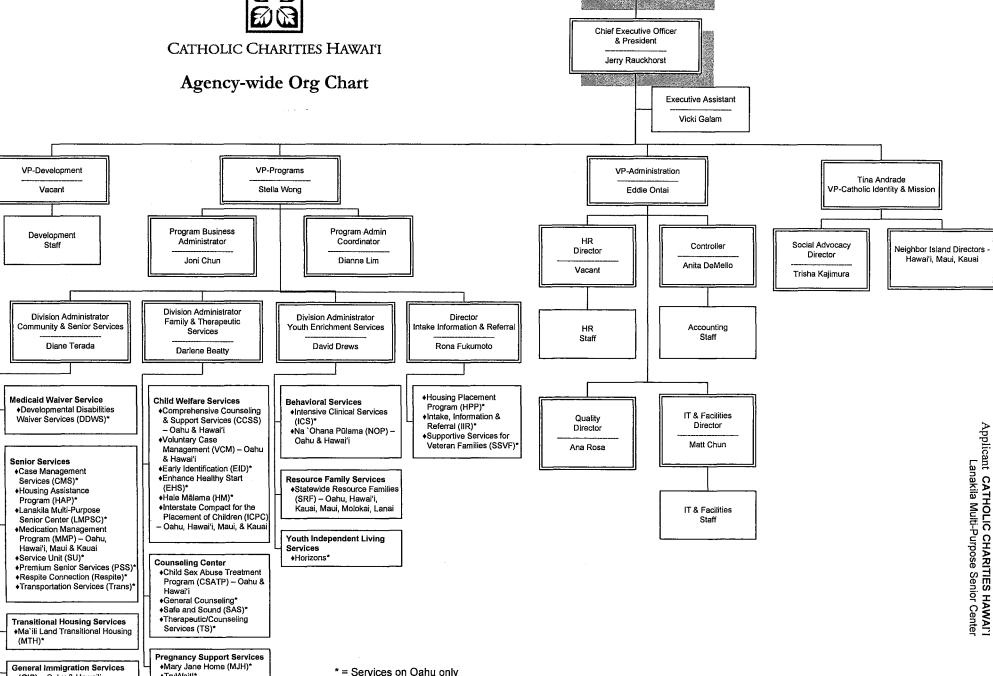
- This list includes related projects/contracts for all of Catholic Charities Hawai'i's senior services
- Only one contract (with the C&C Elderly Affairs Division) specifically pertains to Lanakila Multi-Purpose Senior Center.
- This list does not include any of the Federal, State, County or private contracts for other, non-senior specific services that are provided by Catholic Charities Hawai`i.
- All contracts listed are current unless otherwise indicated.

Project/Contract	Contracting Agency/Organization
Medication Management Program	State of Hawai`i, Dept of Health Alcohol and Drug Abuse Division (ADAD)
Lanakila Multi-Purpose Senior Center Housing Assistance Program Transportation Services – Regular and Kupuna Care Respite Connection Para-Professional Services	City & County of Honolulu, Dept of Community Services Elderly Affairs Division (EAD)
Case Management (contracts for specific sites)	Prudential Locations Bob Tanaka, Inc. Cambridge Management Catholic Diocese of Honolulu St John Vianney/St. Anthony Waikiki Community Center
Housing Assistance Program (HAP)	Subrecipient to Catholic Charities USA for Federal HUD Housing Counseling grant (ended 2010)
Project HOPE	Federal DHHS/Administration on Aging (ended 2012)
Transportation Services	St. Francis Residential Care Community (ended 2011)
Travel Training	Paratransit Inc., dba Innovative Paradigms
Developmental Disabilities (Medicaid Waiver Provider)	State of Hawai`i, Dept of Human Services MedQuest

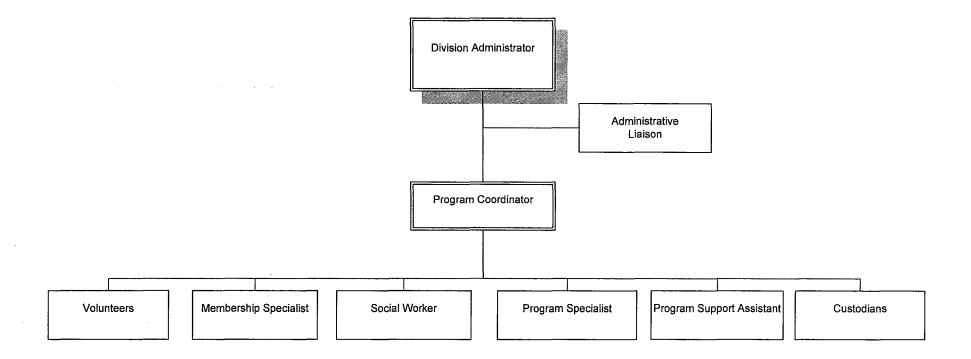


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(GIS) - Oahu & Hawai'i



Board of Directors



BUDGET REQUEST BY SOURCE OF FUNDS

(Period: July 1, 2013 to June 30, 2014)

Applicant: Catholic Charities Hawai`i (for Lanakila Multi-Purpose Senior Center)

	UDGET ATEGORIES	Total GIA Funds Requested (a)	Other Funds (b)	(c)	(d)
Α.	PERSONNEL COST				
i	1. Salaries	109,379	98,276		
	2. Payroll Taxes & Assessments	13,990	12,569		
	3. Fringe Benefits	39,141	35,168		
	TOTAL PERSONNEL COST	162,510	146,013		
B.	OTHER CURRENT EXPENSES				
	Security Expense	0	1,121		
	2. Insurance	1,560	2,340		
	3. Recruitment Ads		500		
	4. License & Fees Expense		11		
	5. Supplies	563	4,515		
	6. Telecommunication	1,149	3,448		
	7. Postage		369		
	8. Utilities	4,218	10,417		
	Refuse Expense		3,643		
	10. Lease/Rental of Equipment		2,630		
	11. Equipment Maintenance		349		
	12. Subscriptions & Publications		1,036		
	13. Mileage Reimbursement		455		
	14. Staff Training & Development		869		
	15. Depreciation Expense		1,480		
	16. Corp Mgmt Fee (33.7% of Direct Labor	5,000	64,980		· · · ·
	17				
	18				
	19				
	20				<u> </u>
	21				
	22				
	23				
	24				
	TOTAL OTHER CURRENT EXPENSES	12,490	98,163		
_		12,490	30,103		
C.	EQUIPMENT PURCHASES				
D.	MOTOR VEHICLE PURCHASES				
E.	CAPITAL				
ТО	TAL (A+B+C+D+E)	175,000	244,176		
			Budget Prepared B	sy:	
so	URCES OF FUNDING		- ·		
	(a) Total GIA Funds Requested	175,000	Diane M. Terada		527-4702
	(b) Other Funds		DIGITE IVI. TETAUA		021-7102
		244,176			
	(c)		Oissature of Aut	200-1-1	/ Deta
	(d)		Signature of Authorized (JMICIAI	Date
то	TAL BUDGET	419,176	Stella M.Q. Wong, Vice F Name and Title (Please t		

BUDGET JUSTIFICATION PERSONNEL - SALARIES AND WAGES

Applicant: Catholic Charities Hawai'i (for Lanakila Multi-Purpose

Period: July 1, 2013 to June 30, 2014

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Program Coordinator	1.00	53,368.00	50.00%	\$ 26,684.00
Program Specialist	1.00	40,010.00	50.00%	\$ 20,005.00
Membership Specialist	1.00	40,010.00	50.00%	\$ 20,005.00
Program Assistant	1.00	29,650.00	25.00%	\$ 7,413.00
Custodian	0.50	11,268.00	50.00%	\$ 5,634.00
Custodian	0.50	11,268.00	50.00%	\$ 5,634.00
Administrative Liaison	1.00	53,368.00	8.00%	\$ 4,270.00
Division Administrator	1.00	75,892.00	6.50%	\$ 4,933.00
Social Worker	1.00	46,253.18	32.00%	\$ 14,801.00
				\$ -
				\$
				\$
				\$ -
				\$ -
TOTAL:				109,379.00

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Applicant: Catholic Charities Hawai`i (for Lanakila Multi-Purpose Senior Center)

Period: July 1, 2013 to June 30, 2014

TOTAL:			\$ -	
			\$ - \$ -	
			\$ - \$ -	
DESCRIPTION EQUIPMENT	NO. OF	COST PER ITEM	TOTAL COST	TOTAL BUDGETED

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				

JUSTIFICATION/COMMENTS:

BUDGET JUSTIFICATION CAPITAL PROJECT DETAILS

Applicant: Catholic Charities Hawai`i (for Lanakila Multi-Purpose Senior Center)

Period: July 1, 2013 to June 30, 2014

TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2011-2012	FY: 2012-2013	FY:2013-2014	FY:2013-2014	FY:2014-2015	FY:2015-2016
PLANS						
LAND ACQUISITION	Not	Appl	icah			
DESIGN	1401	Abbi	icab	C		
CONSTRUCTION						<u> </u>
EQUIPMENT						
TOTAL:						

DECLARATION STATEMENT OF APPLICANTS FOR GRANTS AND SUBSIDIES PURSUANT TO CHAPTER 42F, HAWAI'I REVISED STATUTES

The undersigned authorized representative of the applicant certifies the following:

- 1) The applicant meets and will comply with all of the following standards for the award of grants and subsidies pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) 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;
 - b) Complies 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;
 - c) Agrees not to use state funds for entertainment or lobbying activities; and
 - d) Allows 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.
- 2) The applicant meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is incorporated under the laws of the State; and
 - b) 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.
- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
 - b) Has a governing board whose members have no material conflict of interest and serve without compensation.

Pursuant to Section 42F-103, Hawai'i Revised Statutes, for grants or subsidies 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.

<u>CATHOLIC CHARITIES OF HAWAI'I</u>	
(Typed Name of Individual or Organization)	
	1/31/13
(Signature)	(Date)
1	
Stella M. Q. Wong	Vice President of Programs
(Typed Name)	(Title)