

House District 8,9,10,11,12,13
Senate District 5,6,7

THE TWENTY-EIGHTH LEGISLATURE
APPLICATION FOR GRANTS
CHAPTER 42F, HAWAII REVISED STATUTES

Log No:

For Legislature's Use Only

Type of Grant Request:

GRANT REQUEST - OPERATING

GRANT REQUEST - CAPITAL

"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.

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

STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST (LEAVE BLANK IF UNKNOWN): Department of Human Services

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

1. APPLICANT INFORMATION:

Legal Name of Requesting Organization or Individual:

HALE MAHAOLU

Dbn:

Street Address: 200 Hina Avenue

Mailing Address: Kahului, HI 96732

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name Kathy Louis

Title Personal Care Program Director

Phone # 808 873-0521

Fax # 888 501-6427

E-mail klouis@halemahaolu.org

3. TYPE OF BUSINESS ENTITY:

- NON PROFIT CORPORATION INCORPORATED IN HAWAII
 FOR PROFIT CORPORATION INCORPORATED IN HAWAII
 LIMITED LIABILITY COMPANY
 SOLE PROPRIETORSHIP/INDIVIDUAL
 OTHER

6. DESCRIPTIVE TITLE OF APPLICANT'S REQUEST:

Adult Personal Care Program provides subsidized personal care services for disabled/chronically ill adults 18 years and older and frail elderly living in Maui County. Personal care services (bathing, grooming, hygiene, toileting, feeding, etc) help them to maintain a safe, independent life style in their residence and prevent premature or unnecessary institutionalization.

4. FEDERAL TAX ID #: _____

5. STATE TAX ID #: _____

7. AMOUNT OF STATE FUNDS REQUESTED:

FISCAL YEAR 2017: \$ 250,000.00

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 \$ _____

TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE:

AUTHORIZED SIGNATURE

Roy K. Katsuda, Executive Director

NAME & TITLE

1/11/2016

DATE SIGNED



Application for Grants and Subsidies

I. Background and Summary

A. Background

Hale Mahaolu has served Maui's community since 1967 by providing affordable, safe, sanitary, independent rental units to seniors, disabled/chronically ill adults, and low income families. To further serve Hale Mahaolu residents and the community, Hale Mahaolu provides social service programs that include a Personal Care Program, Congregate Housing Services Program and a Meals Program.

Hale Mahaolu Personal Care Program has been serving the community since 1985, providing in-home personal care services to frail elderly, disabled and chronically ill adults (18 years of age and older), including cognitive and/or emotional problems, which impair the individual's ability to perform activities of daily living (ADLs) and/or instrumental activities of daily living (IADLs).

This program assists individuals living on the islands of Maui, Molokai and Lanai, in locating a suitable and affordable personal care attendant (PCA) through the program's registry of PCAs, and reimbursing part or the entire fee charged by the PCA to the individual client who meets the income guideline. Maui County residents looking for affordable in-home personal care services may also receive referrals through our registry. There is no referral fee to clients. For disabled adults, the need may be even greater, since there are fewer programs available to them than to the elderly. Services not covered by insurance may be too costly for many disabled adults on fixed/limited income.

B. Goals and Objectives

The goals of Hale Mahaolu Personal Care Program are to prevent premature or inappropriate institutionalization of frail elderly and disabled/chronically ill adults 18 years and older, to prevent or remedy abuse or neglect, to promote their self-sufficiency, dignity, and to help them achieve, restore, or maintain their quality of their independent life style and self-direction. These goals can be realized through the provision of in-home personal care when assisting clients with their activities of daily living, and assisting in coordinating other needed services to achieve their independence.

The objective of our request for a \$250,000 grant is to provide a minimum of 12,500 units (unit=hour) of personal care service to a minimum 25 unduplicated clients; to subsidize the hourly cost of personal care services for these clients; and to minimize our waitlist for services. Through our registry of personal care attendants, we will also provide referrals of personal care attendants to approximately 100 Maui County residents who are in need of affordable personal care services.

C. Public purpose and need to be served

Most of the clients we serve under this Program do not qualify for Medicaid Waiver services as they are not nursing home level clients. Many of our clients are in the “gap group” who do not qualify for Medicaid or Kupuna Care, but would have unmet needs were it not for our Program. These elderly and disabled clients require personal care services to help them remain safely at home. For disabled adults, the need may be even greater, since there are fewer programs available to them than to the elderly. Services not covered by insurance may be too costly for many disabled adults on fixed/limited income.

Caring for these clients in their own home will also help to prevent/reduce caregiver burn out, and reduce costs of long-term care for families, communities, and government.

D. Target population to be served

Hale Mahaolu Personal Care Program provides in-home personal care services to frail elderly and disabled adults (18 years of age and older) or who may have a chronic or acute condition(s), including cognitive and/or emotional problems, which impair the individual's ability to perform activities of daily living (ADLs) and/or instrumental activities of daily living (IADLs).

E. Geographic Coverage

Personal care services are provided to adult residents on the Islands of Maui, Molokai and Lanai.

II. Service Summary and Outcomes

A. Scope of work, tasks and responsibilities

Hale Mahaolu Personal Care Program provides in-home personal care services to frail elderly and disabled adults (18 years of age and older) or who may have a chronic or acute condition(s), including cognitive and/or emotional problems, which impair the individual's ability to perform activities of daily living (ADL) and/or instrumental activities of daily living (IADL). The individual served by this Program must require personal care services to remain safely at home, as determined by a physician, an osteopath, a chiropractic doctor, a public health nurse, or a discharge plan from an acute care, rehabilitation, or nursing facility.

This Program assists individuals living on the islands of Maui, Molokai and Lanai, in locating a suitable Personal Care Attendant (PCA) through the Program's registry of PCAs, and reimbursing part or the entire fee charged by the PCA to the individual client. There is no referral fee to clients.

Personal care services provided may include any of the following services in the client's individualized care plan:

- Personal hygiene and grooming, including bathing, skin care, oral hygiene, hair care, and dressing.
- Assistance with bowel and bladder care needs.
- Assistance with ambulation.
- Assistance with transfers.
- Assistance with medications that is ordinarily self-administered, when ordered by the client's physician.
- Assistance with wound care and respiratory care, by a PCA with specific training, satisfactory documented performance, and case manager's consent, when ordered by the client's physician.
- Assistance with feeding, nutrition, meal preparation, and other dietary activities.
- Assistance with exercise, positioning, and range of motion to maintain and/or strengthen muscle tone, and prevent contractures, decubitus ulcers, and/or deterioration.
- Taking and recording vital signs, including blood pressure.
- Maintain environment.
- Assistance with adaptive equipment and supplies, including care of such equipment and supplies.
- Observing and reporting changes in client behavior, functioning, condition, and/or self-care abilities, which may necessitate more or less service.
- When any of the above services are provided, the following activities may also be provided as part of personal care services:
 - Household services following personal care such as cleaning of utensils for meal service, cleaning of bathroom after bathing, cleaning and maintenance of adaptive equipment, bedding changes, etc.), when no other resources are available.

- Escort service to clinics, physician office visits, or other trips for the purpose of obtaining treatment or meeting needs established in the client's care plan, when no other resources are available.

1. For admission into the Program, applicants must:

- a. Be assessed as disabled/chronically ill and recommended for admission by a physician, osteopath, a chiropractic doctor, or a discharge plan from an acute care, rehabilitation, nursing facility, or home health agency. In the case of applicants aged 60 and over, the assessment may come from the Department of Health's Public Health Nursing Case Management Coordination Program (CMCP).
- b. Be at least 18 years of age.
- c. Be within the income brackets specified on the Program's sliding fee scale (see attachment).
- d. Be capable of contracting with, supervising, and dismissing the PCA, or be under the guardianship or supervision of a person capable of performing those duties on behalf of the applicant.
- e. Not be receiving duplicate services from another personal care agency or funding source.
- f. The intake process begins upon inquiry from a potential client or a referral from a physician, CMCP or other health care agency or provider. Each applicant must meet all admission criteria. Applicants who do not qualify are eligible for referrals to PCAs, but may not receive subsidy or reimbursement through this Program. All requests for service shall be logged along with referrals provided and, if applicable, reasons why services were not provided. This Program also refers applicants to other agencies whose services may meet the clients' needs.
- g. When funding allows, and a potential client meets the Program criteria, a home visit is conducted by the Program Director (registered nurse) within 48 hours of receiving a request for services. The Program Director completes the intake process by assessing the client's needs and assisting the client with completing an application form, reviews the Statement of Understanding (statement acknowledges the independent contractor status of the PCA and the responsibilities of client to contract with the PCA and to submit reimbursement requests to the Program), which must be signed by the client, guardian, or designated power of attorney before services can be provided. Hale Mahaolu confidentiality, grievance, and discharge

policies are also reviewed with the client and/or their representative.

Program staff verifies the applicant's income before determining clients' reimbursement rate according to the sliding fee scale (see attachment). DHS clients receive the maximum reimbursement per unit, based on the Program's recommended PCA fee, regardless of the client's income.

The Program refers to each client, PCAs whose skills (including languages spoken and special needs) are commensurate with the needs of the individual client. The client selects which PCA, if any, to contract with. Clients are responsible for paying their PCA and for submitting reimbursement requests to the Program. The Program subsidizes clients' PCA fees for up to 4 hours per day, 7 days per week. PCAs are available 24 hours a day and are scheduled based on clients' preference and need. In case of PCA illness, family emergency, etc., the Program staff shall make every effort to locate a suitable replacement.

- h. When funds for subsidies are not available, clients are waitlisted in the order in which they are received. When funds become available, the primary selection of clients on the waitlist to be served is on a first-come, first-serve basis. During the interim period, clients who are waitlisted for subsidies may receive PCA referrals to help meet their needs.
- i. A client is discharged from the Program when:
 - 1. The client no longer desires the Program's personal care services.
 - 2. The case manager or client's physician determines that personal care services are no longer necessary.
 - 3. The client is found to have misused or defrauded the Program.
 - 4. The health/safety of Hale Mahaolu staff and/or personal care attendant is threatened/at risk during the course of services being rendered.
 - 5. The client is placed with a care home or long-term care facility.
 - 6. The client expires.
 - 7. Funding is not available.

Except in the case of death or long-term placement, clients shall be notified at least two weeks (14 days) in writing of their discharge from the Program.

- 2. Clients are provided with the Program's grievance policy upon admission to

the Program. Hale Mahaolu abides by the following procedure should a grievance occur:

- a. Complaints filed will be addressed immediately and documented in the client's file.
 - b. Program staff will work with client to resolve complaint to the client's satisfaction.
 - c. The client may address the grievance in writing with Hale Mahaolu Executive Director if dissatisfied with the handling of a complaint by Program staff.
 - d. The client may seek redress through the Hale Mahaolu Board of Directors and/or the appropriate government or judicial agencies should a grievance still remain unresolved after discussion with the Executive Director.
 - e. The Department of Human Services shall prevail in disputes between Hale Mahaolu and the Department's staff with regard to the performance of service activities within contracted specifications. Hale Mahaolu will work with Department staff to comply with contracted specifications and remedy any recommended corrective action.
3. Subsidies available to clients are income based. A sliding fee scale (see attached) established by Hale Mahaolu allows for reimbursement per unit, based on clients' income. DHS clients receive the maximum reimbursement per unit, based on the Program's recommended PCA fee, regardless of the client's income.
4. Establishing a care plan for each client ensures individualized service. Clients are encouraged to discuss any special needs or situations with Program staff. Every effort will be made to accommodate each individual's needs and/or wishes.

Services are provided in accordance with the client's care plan, which is developed based on information gathered from the client, family members, case manager, physician, and other coordinated services. The care plan is approved by the client and/or the person responsible for the client's care and physician, and acknowledged by case manager and personal care attendant. The care plan shall specify the types of duties to be performed and the number of hours required to perform those duties. Recommended services and/or hours of service may not be altered without the mutual consent of the client and the case manager. In the absence of a case manager, the Program shall assume responsibility for establishing a care plan in accordance with the client's needs and wishes and an initial face-to-face contact.

5. Program staff conducts home visits to each client at least semi-annually to monitor the delivery of personal care as well as any changes in the client's behavior and functioning which may necessitate a reassessment and/or revision of the client's care plan. Ongoing communication between clients and Program staff is encouraged upon admission and throughout the client's participation in the Program. Through regular home visits and telephone contact, clients are afforded the opportunity to express concerns or comments about the Program. Their concerns are addressed promptly and interventions documented in the client's file.
6. The Program carefully matches each client with a personal care attendant whose skills and compatibility are commensurate with the needs and interests of the client. The client has the right to accept or refuse an attendant. Services provided by the attendant are monitored and evaluated by a registered nurse during home visits with the clients to assure attendants skills and compatibility are commensurate with the client's needs. Concerns or suggestions are addressed promptly to insure quality care and client well-being and satisfaction. Observations and changes are noted in client and attendant files.
7. Independent contractors who are listed on this Program's PCA registry perform the personal care tasks under the supervision and monitoring of a registered nurse. For placement on the registry, PCAs must complete an information form listing past experience, references, and other pertinent information, and must sign a Statement of Understanding acknowledging the responsibilities of the PCA as described in this section. PCAs must provide evidence of a current professional license or certification, related work experience that is verified and deemed satisfactory, or training in areas that relate to the performance of personal care tasks listed in the client's care plan. PCAs must also have current tuberculin clearance and cardiopulmonary resuscitation (CPR) training. As independent contractors, PCAs are responsible for filing and paying taxes, obtaining a general excise tax license, and observing any other legal or ethical standards.

A registered nurse assesses the skills competency of attendants providing personal care services and provides training as needed to meet client needs. Training may also be provided to family/caregivers to meet client needs in absence of an attendant. Assessment and skills competency are noted in attendant's file.

8. In the event that a scheduled attendant is unable to make an assignment, Hale Mahaolu will contact the client to inform them of the situation, and attempt to find a suitable replacement. Hale Mahaolu will inform the client of the outcome of a search for replacement coverage as soon as possible.
9. Personal care service hours and activities may be adjusted based on client

need and/or funding availability. When adjustments are necessary, Program staff will discuss changes with the client and case manager and seek approval prior to change. Additional service hours or activities may be implemented immediately with approval and availability of funds. In the event that service hours are to be reduced due to funding availability, the client shall receive a minimum of two weeks (14 days) notice prior to change.

10. During the application process and follow-up home visits, clients are asked about any other services they are receiving to avoid duplication of services. The Program's participation in interdisciplinary team meetings and case management services also help to ensure non-duplication of services.
11. In case of abuse to a client, the Program shall provide a verbal report to the client's case manager within twenty-four (24) hours, regardless of cause of abuse/injury. The report shall include detailed accounts of all consequences and actions taken, all medication errors, and untoward reaction to drug or treatment. This shall be followed by the submission of a written report to DHS within 72 hours of the incident.
12. The Program maintains records on statistics such as number of personal care hours provided, number of clients served, length of client participation, documented home visits and telephone conversations with clients, caregivers, personal care attendants, incident reports, and complete client information such as date of birth, social security number, DHS client, etc. These statistics are accurate measures of outcomes. These outcomes will be compiled and reported to DHS in the quarterly report.
13. Hale Mahaolu maintains a log of requests for services and subsidies. When funding allows, and a potential client meets the Program criteria, a home visit is conducted by the Program Director (registered nurse) within 48 hours of receiving a request for services.

When funds for subsidies are not available, clients are waitlisted in the order in which they are received. When funds become available, the primary selection of clients on the waitlist to be served is on a first-come, first-serve basis. During the interim period, clients who are waitlisted for subsidies may receive PCA referrals to help meet their personal care needs.

The Program also assists clients who do not meet eligibility criteria for subsidies, to find suitable PCAs through the Program's registry.

14. The Program actively participates in the Department of Health's Public Health Nursing Case Management Coordination Program (CMCP), as a member of CMCP's Inter-Disciplinary Team (IDT). Twenty-eight community organizations, health care providers, and government agencies, including representatives from the Department of Human Services, belong to CMCP.

At the IDT's monthly meetings, referrals, follow-up, and concerns regarding elderly clients are discussed. This Program receives numerous referrals through the IDT.

Because of the relationships developed with health care providers such as Maui Memorial Medical Center, Kaiser Permanente, Hospice Maui, Hale Makua, and the local DHS office, the Program also receives numerous referrals for clients aged 18 to 59, outside the scope of CMCP.

The Program utilizes case management services in order to ensure non-duplication and efficient delivery of services. If the client is not eligible for case management services by an established agency, the Program assumes responsibility for establishing a care plan in accordance with the client's wishes and an initial face-to-face contact. The Program works closely with CMCP and other agencies to ensure delivery of all needed services to the client.

15. Program staff is accessible in the office from 8:00 a.m. to 4:30 p.m., Monday through Friday, except Holidays, and accessible through an answering machine. Program staff is on-call after hours and weekends through call forwarding to cellular phone to handle emergencies that may arise.

B. Projected Annual Timeline

The Program will provide a minimum of 12,500 units (unit=hour) of personal care services from July 1, 2016-June 30, 2017

C. Quality Assurance and Evaluation

1. The Program maintains records on statistics such as number of personal care hours provided, number of clients served, length of client participation, documented home visits and telephone conversations with clients, caregivers, personal care attendants, incident reports, and complete client information such as date of birth, social security number, DHS client, etc. These statistics are accurate measures of outcomes. These outcomes will be compiled and reported quarterly to DHS.
2. Establishing a care plan for each client ensures individualized service. Clients are encouraged to discuss any special needs or situations with Program staff. Every effort will be made to accommodate each individual's needs and/or wishes, within reason.
3. Direct and frequent communication between clients and Program staff is encouraged upon admission and throughout the client's participation. Client concerns are addressed promptly and documented in the client's file.

4. Program staff conducts home visits to each client at least semi-annually to monitor the delivery of personal care as well as any changes in the client's behavior and functioning which may necessitate a reassessment and/or revision of the client's care plan.
5. Client satisfaction questionnaires are distributed annually. All input will be recorded and carefully considered. Viable suggestions for improvement will be implemented.

D. Service Outcomes:

1. A Minimum of 12,500 units (unit=hour) will serve elderly and disabled persons in need of personal care services in Maui County.
2. 90% of clients served will be satisfied with personal care services received.
3. Activities of Daily Living (ADL) for 90% of the number of clients receiving personal care services have stabilized or increased.
4. 90% of clients receiving personal care services have maintained the quality of an independent life style with dignity.
5. 100% of clients served remained free from harm during the period that personal care service was provided.
6. 100% of clients receiving personal care services will remain in contact with Program staff for ongoing quality assurance and evaluation.
7. 90% of clients served will participate in their cost share of the attendant's fee.
8. 90% of primary caregivers will express their satisfaction with respite they received during personal care service.

III. Financial

Budget

- A. Applicable Budget forms attached.

A Fixed-Rate/Fixed-Price methodology applicable at \$20.00 per unit.

Clients who meet the income eligibility may receive subsidies for the cost of personal care services. The client is responsible for paying their attendant and submitting a reimbursement form to Hale Mahaolu twice a month. Hale Mahaolu reimburses the client for the cost of the personal care attendant less the clients' cost share. The subsidy rate is based on an adjusted gross income using a sliding

fee scale (see page 20).

B. Quarterly Funding Requests for FY 2016-2017:

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$62,500	\$62,500	\$62,500	\$62,500	\$250,000

- C. An application has been submitted to Maui County for \$103,000 which may be granted only if State funds are not awarded. We are also looking at private foundations to supplement the gap in funding.
- D. State and Federal tax credits are not applicable to this Program.
- E. Maui County provides interim funding, pending the appropriation and release of State funds.
- F. Hale Mahaolu Personal Care Program has no unrestricted current assets as of December 31, 2015. Program funds are based on service units provided.

IV. Experience and Capability

A. Necessary Skills and Experience

Hale Mahaolu Personal Care Program has been serving Maui County disabled adults since 1985. The goals of Hale Mahaolu Personal Care Program are to prevent premature or inappropriate institutionalization of disabled adults 18 years and older, to prevent or remedy abuse or neglect, to promote their self-sufficiency, dignity, and to help them achieve, restore, or maintain their quality of their independent life style and self-direction. These goals can be realized through the provision of in-home personal care when assisting clients with their activities of daily living, and assisting in coordinating other needed services to achieve their independence. Caring for these clients in their own home will also help to prevent/reduce caregiver burn out, reduce costs of long-term care for families, communities, and government.

Hale Mahaolu Personal Care Program will attain its goal by providing Maui County's (including Lanai, and Molokai) disabled individuals, 18 years of age and older with a reliable, qualified and compatible personal care attendant through the Program's registry of trained personal care attendants who meet the individual's needs in maintaining an independent lifestyle. These attendants may engage in stand-by assistance, supervision or cues, companionship, assist clients in activities of daily living such as bathing, grooming, hygiene, toileting, feeding, range of motion, and other services necessary to assure and maintain and/or improve the client's quality of life, while maintaining the client's dignity and privacy, when

caring for them in the comfort and privacy of their own home.

Hale Mahaolu carefully matches each client with an attendant, however, the client has the right to accept or refuse the attendant. Hale Mahaolu believes in promoting the client's independence, dignity, and maintaining as much control of their situation as possible by respecting their right to choose.

Hale Mahaolu is currently providing personal care services pending the release of State funds appropriated by the Twenty-Eighth Legislature for FY16. Other contracts with the State of Hawaii include DHS-15-POS-2163, DHS-14-POS-930, and DHS-11-POS-434. The County of Maui has provided intermittent funds for fiscal years 16/G4190, 13/G3486 as well as 2009-2010 and 2010-2011. Previous Adult Personal Care contracts with the Department of Human Services go back to 1987-2009.

B. Facilities

Services are provided at each client's home, therefore the only facility required to operate this Program is an office for Program staff. The Program office is located within Hale Mahaolu Elima Senior Housing site. It is accessible to clients with physical disabilities. Hale Mahaolu provides the office space on an in-kind basis (market value \$15,000) and the necessary equipment (computer, fax, phone, etc.) to administer the Program.

V. Personnel: Project Organization and Staffing

A. Proposed Staffing, Staff Qualifications, Supervision and Training

Program staff consists of one full-time Program Director and one part-time (.50 FTE) Program Assistant.

Program Director:

The Personal Care Program Director, under the general supervision of the Executive Director, administers the Personal Care Program. The Program Director has been administering the Program since 1994.

Specific Duties and Responsibilities:

1. Interview and assess potential clients, establish individualized care plan based on client needs and available resources. Prepare and maintain case folders on each client. Obtain necessary information and signed Statement of Understanding between Client and Hale Mahaolu. Obtain physician's recommendations and approval of care plan. Monitor client's progress during home visits and telephone follow-ups. Amend care plan as needed. Re-certify clients annually.

2. Register potential Personal Care Attendants (PCAs). Maintain registry and refer Personal Care Attendants to Clients. Obtain completed information form and signed Statement of Understanding between Personal Care Attendant and Hale Mahaolu. Complete reference and criminal history checks on PCAs. Monitor and observe skills, tasks completed, client interaction, and observance of cultural respect and knowledge of individual case.
3. Maintain registry and refer Personal Care Attendants to Clients and caseworkers as necessary. Keep records of all referrals made, comments and/or complaints about Personal Care Attendants, and reasons for refusal of referrals.
4. Answer calls and respond to inquiries from public, other agencies, and/or participants about Program. Make referrals to appropriate agencies.
5. Compile and maintain data from Program statistics: # of participants, hours serviced, PCA contracted by client, funds expended, etc.
6. Administer budget for both administrative expenses and subsidy payments. Assist in ongoing efforts to obtain funding for Program, including preparation and delivery of funding proposals and testimony.
7. Maintain correspondence for Program, including but not limited to letters, forms, flyers, and proposals.
8. Make home visits as often as necessary (but at least semi-annually) to Clients and follow-up phone calls.
9. Collect client subsidy request forms and distribute bi-monthly subsidy checks.
10. Compute client subsidy request forms and submit to accounting office for reimbursement.
11. Attend Case Management Coordination Program (CMCP), Interdisciplinary Team (IDT) meetings once a month. Maintain communication with PHN/CMCP regarding client's status. Participate in health related community activities and long term care issues.
12. Prepare quarterly and annual reports to appropriate government agencies.
13. Attend seminars, workshops, conferences, hearings, etc. pertinent to personal care and related issues. Attendance may include overnight off-island trips.
14. Verify/update Clients' income information and cost share annually.

15. Direct and supervise Program Assistant in daily duties.
16. Skills check of personal care attendants.
17. Monitor and supervise personal care services provided by personal care attendants.
18. Other duties as deemed necessary to maintain or enhance the quality of the Personal Care Program.

Qualifications

1. Registered nurse with current Hawaii State license, current cardiopulmonary resuscitation certification, and tuberculosis clearance.
2. Minimum of two years supervisory experience.
3. Word processing and spread sheet experience.
4. Must be able to communicate effectively by telephone, by written correspondence, and in person.
5. Must be patient and compassionate in dealing with elderly, disabled, and/or confused people from various cultural backgrounds.
6. Must be able to understand and work within Program budget.
7. Knowledge of or willing and able to learn about long-term care in general and current changes affecting adult and elderly clients, and government regulations.
8. Must be able to prepare and submit detailed requests for funding from government and/or private sources.
9. Must be able to perform public relations duties, including advocating for clients at the State Legislature, speaking before interested groups, etc.
10. Continues ongoing training to meet the needs of adult and elderly care issues.

Personal Care Program Specialist:

The Program Assistant works under the supervision of, and assists the Program Director in administering the Personal Care Program and performs in the absence of the director. The Program Specialist has been assisting the Program since 2012.

Specific Duties and Responsibilities

1. Interview potential clients, prepare and maintain case folders on each case. Obtain necessary information and signed Statement of Understanding between Client and Hale Mahaolu.
2. Register potential personal care attendants. Maintain registry and refer PCAs to Clients. Obtain completed information form and signed Statement of Understanding between PCA and Hale Mahaolu.
3. Answer calls and respond to inquiries from public, other agencies, and/or participants about Program. Make referrals to appropriate agencies.
4. Assist in maintaining correspondence for Program, including but not limited to letters, forms, flyers, and proposals.
5. Make home visits as necessary to clients in absence of director.
6. Collect client subsidy request forms and distribute bi-monthly subsidy checks.
7. Attend CMCP/IDT meetings in absence of Program Director. Maintain communication with PHN/CMCP regarding clients.
8. Attend seminars, workshops, conferences, Legislative hearings, etc., as directed by the Program Director or the Executive Director. Attendance may include overnight off-island trips.
9. Assist Program Director in annual verification/update of clients' income information.
10. Other duties as deemed necessary by Hale Mahaolu.

Qualifications

1. Minimum of one-year experience in health care field.
2. Current cardiopulmonary resuscitation certification and tuberculosis clearance.
3. Word processing and spreadsheet experience.
4. Must be able to do simple math (addition, multiplication, etc.) on client application and subsidy forms.
5. Must be able to communicate effectively by telephone, by written correspondence, and in person.

6. Must be patient and compassionate in dealing with elderly, disabled, and/or confused people from various cultural backgrounds.
7. Must be willing and able to learn about long-term care in general (rudimentary medical knowledge, government regulations, etc.).

Personal Care Attendants:

Hale Mahaolu maintains a registry consisting of personal care attendants, nurse aides, and certified nurse aides. These attendants are independent contractors who contract directly with a client and/or the client's family to provide quality personal care to the client. Personal Care Attendants:

1. Are certified in cardiopulmonary resuscitation and have a tuberculosis clearance, and have been trained for care of disabled adult and elderly clients.
2. Are experienced with in-home injury prevention, clients' safety and privacy, universal precautions for infection control, transfers, range of motion, and personal care skills such as:
 - Bathing, hygiene, grooming, skin care, oral hygiene, hair care, and dressing.
 - Assistance with bowel and bladder care needs.
 - Assistance with ambulation and transfers.
 - Assistance with medications that is ordinarily self-administered, when ordered by the client's physician.
 - Assistance with wound care and respiratory care, by a PCA with specific training, satisfactory documented performance, and case manager's consent, when ordered by the client's physician.
 - Assistance with feeding, nutrition, meal preparation, and other dietary activities.
 - Assistance with exercise, positioning, and range of motion to maintain and/or strengthen muscle tone, and to prevent contractures, decubitus ulcers, and/or deterioration.
 - Taking and recording vital signs, including blood pressure.
 - Maintain environment.
 - Assistance with adaptive equipment and supplies, including care of such equipment and supplies.

- Observing and reporting changes in client behavior, functioning, condition, and/or self-care abilities, which may necessitate more or less service.
 - Household services following personal care such as cleaning of utensils for meal service, cleaning of bathroom after bathing, cleaning and maintenance of adaptive equipment, bedding changes, etc.), when no other resources are available.
 - Escort service to clinics, physician office visits, or other trips for the purpose of obtaining treatment or meeting needs established in the client's care plan, when no other resources are available.
3. Are patient and compassionate in dealing with adults and elderly clients who are disabled, and/or confused persons from various cultural backgrounds.
 4. Communicate effectively by telephone, by written correspondence, and in person.

For placement on the registry, personal care attendants must complete an information form listing qualifications, three non-family references, and other pertinent information. References are contacted and their responses documented in the attendant's file. Attendants are placed on the registry if references are favorable and attendants meet qualification standards. Skills are monitored by Program Director to assure each client has an attendant whose skills are commensurate with their needs.

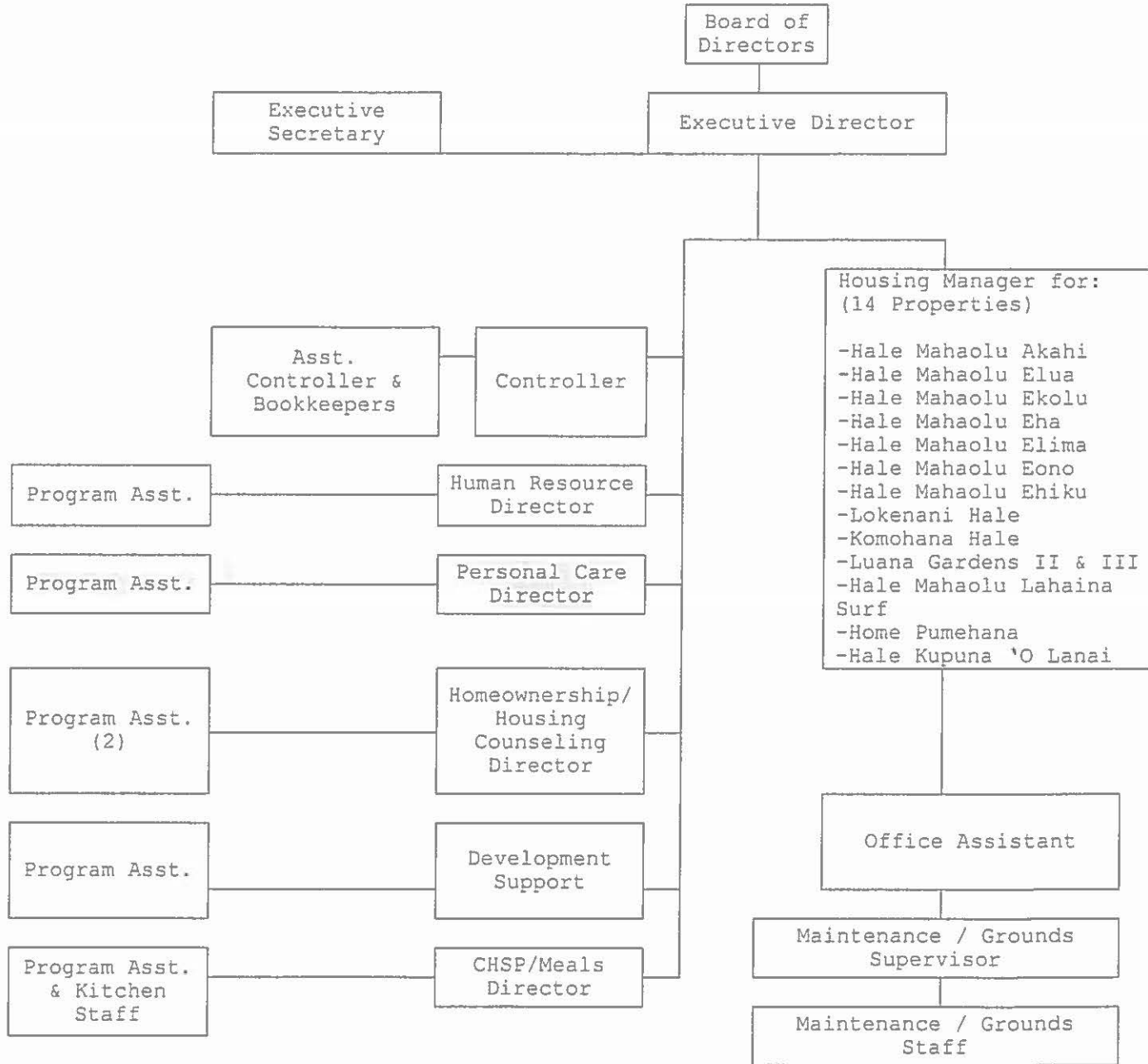
Hale Mahaolu complies with standards established by DHS Social Services Division for criminal conviction record checks and protective services registry checks on Program staff and personal care attendants. Hale Mahaolu also obtains a driver's record check on Program staff and personal care attendants, and maintains a copy of their driver's license and no-fault automobile insurance on file. Information received from these reports is considered prior to employment and/or placement on the registry.

Training

The Program Director and Program Specialist attend training workshops and seminars whenever available and appropriate to the Program's goals. These include sessions on in-home care, ethics, ethnic issues, abuse/neglect, medical, legal, and social problems common to the adult and elderly population, and supervisory courses sponsored by the Hawaii Employers Council.

The Program also offers in-service training for staff and for PCAs on the registry, including individual training to meet specific client needs.

B. Organizational Flow Chart



C. Compensation

Funds received for this Program are strictly for Program staff, operations and direct services. Program funds have never been and are **not** allocated to any of the positions listed here:

1. Executive Director: \$170,000
2. Meals Director \$105,000
3. Controller: \$105,000

VI. Other

A. Litigation

Not applicable; none presently

B. Licensure or Accreditation

Not applicable

C. Federal and County Grants

Hale Mahaolu has not received any federal grants. Maui County has provided an interim grant for \$103,000 for FY16, pending the release of \$200,000 State funds appropriated for this Adult Personal Care Program. We are currently waiting for State funds for FY16 to be released.

D. Private Educational Institutions

Grant funds will not be used to support or benefit a sectarian or non-sectarian private educational institution.

E. Future Sustainability Plan

Hale Mahaolu has been pursuing a Purchase of Service grant from the State of Hawaii since the termination of our contract in 2009 due to the economic downturn. Prior to this termination, Hale Mahaolu was contracted by the Department of Human Services since 1987 to provide quality, cost effective personal care services. The future of this Adult Personal Care Program is uncertain without the support of the State of Hawaii. The clients served by this Program would not have any other resource to meet their needs.

F. Certificate of Good Standing

See Attached.

HALE MAHAOLU PERSONAL CARE PROGRAM
Sliding Fee Scale

<u>Adjusted Gross</u>		<u>Client's Share</u>	<u>Hale Mahaolu's Share</u>
\$ 0. -	3,599.	Donation	14.00 *
3,600. -	4,199.	\$ 2.10	11.35
4,200. -	4,799.	2.40	11.00
4,800. -	5,399.	2.70	10.50
5,400. -	5,999.	3.00	10.15
6,000. -	6,599.	3.30	9.80
6,600. -	7,199.	3.60	9.45
7,200. -	7,799.	3.90	9.05
7,800. -	8,399.	4.20	8.65
8,400. -	8,999.	4.50	8.30
9,000. -	9,599.	4.80	7.90
9,600. -	10,199.	5.10	7.55
10,200. -	10,799.	5.40	7.15
10,800. -	11,399.	5.70	6.80
11,400. -	11,999.	6.00	6.35
12,000. -	12,599.	6.30	6.00
12,600. -	13,199.	6.60	5.60
13,200. -	13,799.	6.90	5.25
13,800. -	14,399.	7.20	4.85
14,400. -	14,999.	7.50	4.45
15,000. -	15,599.	7.80	4.10
15,600. -	16,199.	8.10	3.70
16,200. -	16,799.	8.40	3.35
16,800. -	17,399.	8.70	2.90
17,400. -	17,999.	9.00	2.55
18,000. -	18,599.	9.30	2.00
18,600. -	19,199.	9.60	1.65
19,200. -	19,799.	9.90	1.30
19,800. -	20,399.	10.20	.95
20,400. -	20,999.	10.50	.60
21,000. -	21,599.	10.80	.25

* DHS clients receive maximum subsidy of \$14.00 per unit (hour).

Effective July 1, 2011

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2016 to June 30, 2017

Applicant: HALE MAHAOLU (ADULT PERSONAL CARE PROGRAM)

BUDGET CATEGORIES	Total State Funds Requested (a)	Total Federal Funds Requested (b)	Total County Funds Requested (c)	Total Private/Other Funds Requested (d)
A. PERSONNEL COST				
1. Salaries	22,518			
2. Payroll Taxes & Assessments	2,333			
3. Fringe Benefits	2,990			
TOTAL PERSONNEL COST	27,841			
B. OTHER CURRENT EXPENSES				
1. Subsidies to Clients	209,209			
2. Staff Training	1,500			
3. Insurance	2,350			
4. Independent Audit	1,000			
5. Contractual Services	6,000			
6. Telecommunication	720			
7. Postage	400			
8. Mileage	200			
9. Air Fare, Inter-Island	400			
10. Subsistence/Per Diem	80			
11. Taxi/Bus Fare/Rent-a-Car	300			
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
TOTAL OTHER CURRENT EXPENSES	222,159			
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
TOTAL (A+B+C+D+E)	250,000			
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	250,000	Kathy Louis 808 873-0521		
(b) Total Federal Funds Requested		Name (Please type or print) Phone		
(c) Total County Funds Requested		1/11/2016		
(d) Total Private/Other Funds Requested		Signature of Authorized Official Date		
TOTAL BUDGET	250,000	Roy K. Katsuda, Executive Director Name and Title (Please type or print)		

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2016 to June 30, 2017

Applicant: HALE MAHAOLU (Adult Personal Care Program)

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Program Director	100	\$70,000.00	25.00%	\$ 17,500.00
Program Assistant	0.5	\$20,072.00	25.00%	\$ 5,018.00
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
TOTAL:				22,518.00
JUSTIFICATION/COMMENTS:				
Program Director administers Program admits new clients, follow-up home visits, recertifications, supervision of personal care attendants, etc.				
Program Assistant provides clerical support, assists clients and personal care attendants in Director's absence.				

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2016 to June 30, 2017

Applicant: HALE MAHAOLU (Adult Personal Care)

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				
JUSTIFICATION/COMMENTS:				

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				
JUSTIFICATION/COMMENTS: NOT APPLICABLE TO THIS PROGRAM				

GOVERNMENT CONTRACTS AND / OR GRANTS

Applicant: HALE MAHAOLU (Adult Personal Care Program)

Contracts Total: -

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)	CONTRACT VALUE
1	Adult Personal Care	7/1/15-6/30/16	Dept. of Human Services	State of Hawaii	200,000 GIA Pending Release
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
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STATE OF HAWAII
STATE PROCUREMENT OFFICE

CERTIFICATE OF VENDOR COMPLIANCE

This document presents the compliance status of the vendor identified below on the issue date with respect to certificates required from the Hawaii Department of Taxation (DOTAX) the Internal Revenue Service the Hawaii Department of Labor and Industrial Relations (DLIR) and the Hawaii Department of Commerce and Consumer Affairs (DCCA).

Vendor Name: **HALE MAHAOLU**

DBA/Trade Name: **HALE MAHAOLU (Attn: Roy Katsuda)**

Issue Date: **12/21/2015**

Status: **Compliant**

Hawaii Tax# [REDACTED]
FEIN/SSN# [REDACTED]
UI# XXXXX5516
DCCA FILE# 15181

Status of Compliance for this Vendor on issue date:

Form	Department(s)	Status
A-6	Hawaii Department of Taxation Internal Revenue Service	Compliant Compliant
COGS	Hawaii Department of Commerce & Consumer Affairs	Exempt
LIR27	Hawaii Department of Labor & Industrial Relations	Compliant

Status Legend:

Status	Description
Exempt	The entity is exempt from this requirement
Compliant	The entity is compliant with this requirement or the entity is in agreement with agency and actively working towards compliance
Pending	The entity is compliant with DLIR requirement
Submitted	The entity has applied for the certificate but it is awaiting approval
Not Compliant	The entity is not in compliance with the requirement and should contact the issuing agency for more information

**DECLARATION STATEMENT OF
APPLICANTS FOR GRANTS 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 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 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 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.
- 2) If the applicant is an organization, 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 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 used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant 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 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.

HALE MAHAOLU

(Typed Name of Individual or Organization)

1/11/2016

(Signature)

Roy K. Katsuda

(Date)

Executive Director

(Typed Name)

(Title)