

House District 29

Senate District 15

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):

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

1. APPLICANT INFORMATION:

Legal Name of Requesting Organization or Individual: KE OLA MAMO

Dbas:

Street Address: 1505 DILLINGHAM BLVD RM 205

Mailing Address: 1505 DILLINGHAM BLVD RM 205
HONOLULU HI 96817

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name JOELENE LONO

Title Executive Director

Phone # 848-8000, ext 231

Fax # 848-8001

E-mail jlon@keolamamo.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:

CREATING CULTURAL MODULES FOR THE KĀNE INITIATIVE

4. FEDERAL TAX ID #: [REDACTED]

5. STATE TAX ID #: [REDACTED]

7. AMOUNT OF STATE FUNDS REQUESTED:

FISCAL YEAR 2017: \$ 119,789

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 \$ 5.151

FEDERAL \$ _____

COUNTY \$ _____

PRIVATE/OTHER \$ _____

JOELENE LONO, EXECUTIVE DIRECTOR
NAME & TITLE

JANUARY 20, 2016
DATE SIGNED



Application for Grants

If any item is not applicable to the request, the applicant should enter "not applicable".

I. Background and Summary

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

Ke Ola Mamo (KOM) the Native Hawaiian Health Care System (NHHCS) serving the island of Oahu is a 501(c)3 nonprofit organization incorporated in 1992. KOM's mission is to empower, educate, and promote the health and well-being of the Native Hawaiian community through a system of culturally-appropriate services.

Programs and services are provided at four strategically placed Community District Offices, Primary Care Clinic, and facilities within the community. KOM programs and services focus on the health and well-being of the person and their family. The Primary Care Clinic provides care using the "patient centered care model," access to care, patient engagement in care, care coordination, and integration of a comprehensive health team. Outreach services are instrumental informing Native Hawaiians of the availability of health services. Services include client registration; referral to internal/external services/program, case management, financial counseling, and outreach to increase awareness on health.

KOM provides access to restorative dental care and oral health education. A network of community dentists provided dental restorative services to eligible clients. KOM also provides access to traditional practitioners and licensed massage therapists who provide lomilomi services.

No Ke Ola Pono o Nā Kāne, the Kāne Initiative, is a project currently affiliated with KOM. The Kāne Initiative was launched in 2005 by the Kāne Committee at the American Cancer Society to develop educational materials and programs for, and by kāne. The Kāne Committee was successful in developing a cancer brochure and educational tool with companion materials. In 2010, due to ACS corporate reorganization, the Kāne Initiative found a new home at KOM. Since then, the Kāne Initiative has been successful in continuing the project by training a cadre of kāne facilitators to conduct community kūkākūkā (discussion) sessions within the statewide community.

KOM, in partnership with the University of Hawai'i Cancer Center (UHCC), through an agreement for services, will provide support for No Ke Ola Pono o Nā Kāne. UHCC Center faculty and staff members provide resources and personnel to collaborate with planning, implementation, and evaluation of the Kāne Initiative. In addition KOM will work with each of the four (4) other NHHCS through an agreement for services.

2. The goals and objectives related to the request;

The overall goal of No Ke Ola Pono o Nā Kāne, the Kāne Initiative, is to perpetuate cultural traditions associated with the hale mua; strengthen the role of the kāne in planning and directing family activities, and build sustainability for strong and healthy Hawaiian communities. To achieve our overall goal, the goals and objectives related to this request are:

Goal 1: Revitalize and integrate cultural practices and knowledge into the lives of Native Hawaiian men that are critical to men's health.

Objective 1a: Identify kūpuna kāne who are willing to share their cultural knowledge.

Objective 1b: Kūpuna kāne share their mo'olelo (stories)/knowledge to inform the development of at least three (3) modules related to Native Hawaiian culture.

Objective 1c: Conduct one (1) train-the-trainer session for kāne facilitators.

Objective 1d: Integrate cultural knowledge/practice into health-related kāne kūkākūkā sessions reaching at least 100 kāne.

Goal 2: Build sustainability for the Kāne Initiative in communities statewide as a strategy to promote men's health.

Objective 2a: Increase the number of kāne facilitators by 50% (current baseline is 12).

Objective 2b: Identify at least 10 kūpuna kāne resources (experts/practitioners) in each county and/or community in the areas of culture, health, and/or social welfare.

Objective 2c: Train at least 20 kāne to conduct kūkākūkā sessions with the developed cultural modules.

Objective 2d: Integrate Kāne Initiative into the five (5) Native Hawaiian Health Care Systems

3. The public purpose and need to be served;

Health placed in the context of culture and the transmission of culture is critical to reducing chronic illnesses. High rates of chronic illnesses like cancer have resulted in poorer health outcomes for Native Hawaiians, when compared to other ethnic groups in the state (1). Hawaiians are at an increased risk of death from diabetes, heart disease, cancer and other preventable diseases. Health behaviors such as alcohol and tobacco use, eating habits and low levels of physical activity contribute to poor health and disproportionate chronic illness rates among Hawaiians, particularly Native Hawaiian men (2). These challenges will health have resulted from contention with the historic and systematic inequalities towards Hawaiians within the structure and institutions of society (1).

Recent interventions that have incorporated Hawaiian cultural values have shown effectiveness in reducing chronic disease risk for Hawaiians (3, 4). Hawaiian cultural values serve to strengthen social systems within the community that provide the communal support and resiliency needed to meet the challenges facing Hawaiians and ultimately reduce the risk for illness. Successful strategies that have built upon existing social networks have helped Hawaiians better manage their personal health and created healthier Hawaiian communities. Currently, being reintroduced is the Hawaiian traditional practice of the "hale mua" (men's house) statewide. The hale mua traditionally served to provide dialogue among Hawaiian men

about the methods used to sustain for families, the training needed for the initiation of young men into manhood, and to teach men traditions of culture and family (5).

Such practices are important to disease prevention. The Kāne Initiative has successfully used the hale mua concept to establish health-activated support groups statewide to disseminate health promotion information (i.e., importance of screening and early detection for cancer) to Hawaiian men. During Kāne Initiative's kūkākūkā sessions, kāne expressed a need to identify, compile, and proliferate dwindling sources of traditional knowledge and cultural practice. Our current proposal is to expand the scope of this statewide project and to apply hale mua to build capacity of Native Hawaiian men to learn, incorporate, and disseminate key cultural concepts and practices as part of overall well-being.

References:

1. Look MA, Trask-Batti MK, Agres R, Mau M, Kaholokula JK. *Assessment and Priorities for Health and Well-Being in Native Hawaiians & Other Pacific Peoples*. 2013 University of Hawaii, JABSOM Department of Native Hawaiian Health
2. CDC. Behavioral Risk Factor Surveillance System Summary of Results. [Data summary]. 2012; 12. Available at: http://health.hawaii.gov/brfss/files/2013/11/HBRFSS_2012resultsP.pdf.
3. Blaisdell RK. Historical and cultural aspects of native Hawaiian health 1989. p.1-21.
4. Blaisdell K. Culture and Cancer in Kanaka Maoli (Native Hawaiians). *Hawaii Medical Journal*. 1998;6(2).
5. Hughes CK. Factors Associated with Health-Seeking Behaviors of Native Hawaiian Men. *Pacific Health Dialogue*. 2004;11(2).

4. Describe the target population to be served

Our project population includes Native Hawaiian men ages 18-65. According the Hawai'i Department of Business Economic Development and Tourism's Hawai'i Data Book 2014, there are currently more than 165,000 Native Hawaiian men living in the state. Hawaiian men comprise more than 25% of Hawai'i's total male population. Sixty three percent of these men live in Honolulu county with 18% in Hawai'i county and 11% in Maui county and 6% in Kaua'i county. Health-related issues for these Hawaiian men vary by county with high smoking rates, low rates for cancer screening, and limited access to health care commonly found as the major health concerns in Native Hawaiian men across the state.

5. Describe the geographic coverage.

Our project will focus on adult Native Hawaiian men, ages 18-65, residing in each of Hawai'i's four counties of Kaua'i, Honolulu, Maui, and Hawai'i. Our partnership with the NHHCS within each Hawai'i county will serve to provide local access to these men.

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;

This request seeks to extend and enhance current accomplishments of No Ke Ola Pono o Nā Kāne, the Kāne Initiative. These accomplishments include developing curricula, training facilitators, and engaging over 300 kāne participants statewide. In addition, we plan to focus on enriching the cultural education aspect of the project, and plan to accomplish this by continuing to foster the hale mua model while revitalizing and integrating cultural values, knowledge, and practices into the daily lives of Native Hawaiian men.

In this request, we will hire a 0.40 FTE Community Health Educator (CHE)/Patient Navigator (PN) to coordinate this project, providing administrative and programmatic oversight of the project. The CHE/PN will oversee the development of at least three (3) additional educational modules which include topics such as leadership, chanting, cultural protocol, mo'olelo (storytelling), mentoring, and agriculture (i.e., how to grow kalo). The staff and faculty of the University of Hawai'i Cancer Center, who developed the cancer-related modules, will continue its partnership with the Kāne Initiative to develop the modules as well as work with the cultural consultant to collect the mo'olelo (stories) of kūpuna kāne.

In the past, the statewide Native Hawaiian Health Care Systems (NHHCS) outreach staff have been instrumental in recruiting kāne within their respective communities. The NHHCS improves the health status of Native Hawaiians by providing access to health education, health promotion, and disease prevention services statewide. The NHHCS receives appropriation through the US Department of Health and Human Services, Health Resources and Services Administration's (HRSA) Health Center Program to provide medical and enabling services to Native Hawaiians. The outreach staff will continue to recruit Native Hawaiian kāne to participate in the kūkākūkā sessions. In addition, they will identify kūpuna kāne, cultural experts/practitioners in their respective communities who are willing to share their stories/knowledge with other Hawaiian men. Each NHHCS will be able to contact kūpuna kāne in their respective communities. For the outreach and coordination efforts of the NHHCS, we would like to provide some financial support as indicated in this request.

The kūpuna kāne will be identified by the Native Hawaiian Health Care Systems specific to a particular county or community. The role of the kūpuna kāne is to: 1) share their story/knowledge; 2) assist with the development of curriculum/module related to their expertise; 3) provide training related to their expertise/knowledge; and 4) deliver the cultural component during the kūkākūkā sessions. We will seek permission from each individual as we acknowledge that kūpuna kāne may not be comfortable with assuming all of the responsibilities. The project will be responsible for providing the materials (i.e., kalo plants, gourds, etc.) necessary to complete each training and kūkākūkā session.

The Kāne Committee is made up of individual kāne, kauka, and community organizations (Ahahui o nā Kauka, the Association of Native Hawaiian Physicians; UH Cancer Center; and American Cancer Society). The Kāne Committee will provide oversight of the project. The Committee conducts regular month meetings, and is involved with planning, implementing and evaluation of this statewide project.

We currently have a cadre of twelve (12) seasoned Hawaiian kāne, including physicians, who have led kūkākūkā sessions. Each kūkākūkā session is led by a team of facilitators including: 1) alaka'i (discussion group leader), 2) kōkua (scribe/notetaker), and kauka (physician to answer any clinical questions). We propose to strengthen the skills and knowledge of these existing facilitators by using the train-the-trainer model to provide at least one training on the cultural modules. In addition to building the capacity of the current facilitators, we will also expand the number of facilitators by at least 50%.

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

We request funds for this one (1) year project which will begin in July 2016 and end June 2017. See Attachment A for more details.

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

The cultural information of kūpuna kāne, who share their stories/knowledge and provide permission, will be integrated into kūkākūkā session modules. To ensure the quality of the information presented, each module includes scripted content, and is presented by the lead facilitator, alaka'i (guide) with the kōkua (helper) and kauka (physician) providing support. As we have done in the past with the cancer content modules, materials are developed for each module, including forms (i.e., evaluation and commitment forms). Each module will be presented to the Kāne Committee for feedback, followed by a pilot test with at least one (1) kāne kūkākūkā session. The kāne facilitators will be trained during a train-the-trainer session on the newly developed modules.

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.

The service outcomes to be completed by June 2017 from the proposed project are:

- At least three (3) educational modules related to Native Hawaiian men cultural practices will be developed.
- The mo'olelo (stories) and cultural information of at least five (5) Hawaiian kūpuna kāne will be integrated into kūkākūkā modules with consent and review.
- Twenty (20) kāne facilitators will be trained with the cultural modules to conduct at least eight (8) kūkākūkā sessions reaching at least 100 kāne statewide.
- An agreement of services to conduct the project with each of the four (4) Native Hawaiian Health Care Systems will be secured.

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 Request form.

2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2017.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$29,947	\$29,947	\$29,947	\$29,948	\$119,789

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2017.

- 1) Bureau of Primary Health Care/Health Resources and Services Administration
- 2) Department of Health and Human Services, Indian Health Services

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.

Not Applicable.

5. The applicant shall provide a listing of all federal, state, and county government contracts and grants it has been and will be receiving for program funding.

Bureau of Health Care/Health Resources and Services Administration – FY 1994-2016
 Department of Health and Human Services, Indian Health Services – FY 2008-2016

6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2015.

Unrestricted Current Assets Balance - \$501,587.13

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.

Our strengths are that we have: 1) strong communication mechanisms, 2) capacity to reach Native Hawaiian men across the Islands, 3) expertise in development educational modules, 4) a track-record of funding and strong partners, and 5) the skills to train facilitators to deliver the modules statewide.

The hale mua, where kāne met daily with other kāne, was a place to discuss the challenges and issues as well as to perpetuate cultural practices and share knowledge. We have successfully introduced this model to communities on six (6) of the major islands in our state to 1) assess the health needs of Native Hawaiian men, and 2) to educate kāne on the importance of early detection for cancer. To date, we have developed 5 educational modules: 1) What is a Healthy Hawaiian Kāne?; 2) Report to the Community; 3) Na‘au (colorectal) Health; 4) Lung Health; and 5) Po‘o & Pu‘u (oro/nasopharyngeal) Health. In the past the Kāne Initiative has been funded by the Office of Hawaiian Affairs. Within the last three years, the Kāne Initiative has been fortunate to have been funded by both the Department of Health’s Hawai‘i Comprehensive Cancer Control Program, and the Hawai‘i Medical Service Association (HMSA) Foundation (in collaboration with the UH Cancer Center). We were able to leverage these resources to complete 4 educational modules, train 20 facilitators and reach over 300 Hawaiian kāne statewide.

The following table is a list of funders and the outcomes of the Kāne Initiative.

Funder	Outcomes
Office of Hawaiian Affairs (2011-2012)	<ul style="list-style-type: none"> • Developed educational module: What is a Healthy Hawaiian Kāne? • Conducted 14 kūkākūkā sessions • Reached 145 Native Hawaiian men statewide • Trained 10 kāne facilitators • Kauka (physicians) conducted 88 follow-up phone calls to participants
DoH HCCCP (2014-2015)	<ul style="list-style-type: none"> • Developed 2 educational modules: 1) Lung Health and 2) Po‘o (head) and Pu‘u (throat) Health • Recruited kāne participants to participate in Stanford’s Chronic Disease Self-Management Program; 4 kāne completed the six week program
HMSA Foundation (2014-2015) This is a UHCC grant.	<ul style="list-style-type: none"> • Developed 2 educational modules: 1) Report to the Community and 2) Na‘au (colorectal) Health • Trained 20 kāne facilitators • Conducted 20 sessions reaching over 300 men statewide • Provided Fecal Immunochemical Test (FIT) kits to 33 kāne participants; 25 kāne were age 50 and over • 10 kāne completed FITs; test results were negative

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.

Ke Ola Mamo (KOM), Native Hawaiian Health Care System (NHHCS) is a 501(c)3 nonprofit organization incorporated on O‘ahu in 1992 with a mission to empower, educate, and promote the health and well-being of the Native Hawaiian community through a system of culturally appropriate services. The Ke Ola Mamo operates from four strategically placed locations on O‘ahu that include the Community District Offices, Primary Care Clinic, and facilities within the community. The Project Space. Ke Ola Mamo has office space at its Honolulu Service District and Administrative Offices located at 1505 Dillingham Blvd., Honolulu, HI to support the project. In addition, meeting space and storage are accessible at this location and used by Kane Committee member to hold their monthly planning meetings. Project Equipment and Software. Desktop computers are available for use at the Honolulu office. Also accessible are Microsoft Office, Microsoft Word, PowerPoint, and Excel to help manage program content and any data collected. Adobe Acrobat is available to convert PDF files. Project Personnel. The Executive Director of Ke Ola Mamo, Ms. Lono will provide workspace and oversight for the Community Health Educator /Patient Navigator who will serve a lead educator for the project and the Fiscal Assistant who will manage the project’s funding allocations.

University of Hawai‘i Cancer Center’s Cancer (UHCC) Prevention and Control Program’s Study Resources:

The UHCC will provide additional space, equipment, software, professional expertise, and interns to support the development of the curriculum for this project.

Project Space. UHCC has office space to support conduct the project including a health communications lab that will allow us to develop and pilot test content of the training materials. In addition, meeting space and storage are accessible on the 4th floor of the UHCC for community members to use should they want to meet or to work on aspects of the project.

Project Equipment and Software. Desktop computers can be used onsite and 2 laptop computers are available to be used in the field. Also accessible is Microsoft Office to develop the content of the program in Microsoft Word, PowerPoint, and Excel to help manage any data collected. Adobe Acrobat is available to convert PDF files.

Project Personnel. UHCC has the staff expertise to manage and provide oversight for the project. Project Manager, Ms. Higuchi will directly oversee all aspects of the project, and will be responsible for maintaining communications with the community partners and the funder. Ms. Higuchi was instrumental in developing the initial ACS Kāne Project, and will provide overall project management including oversight of a Community Health Educator/Patient Navigator (CHE/PN) (TBD). Drs. Fagan and Cassel will provide support for the overall data collection, management, analysis evaluation and reporting of project findings. Through Drs. Cassel and Fagan, the UHCC Cancer has a volunteer program for students and has space for undergraduate interns to help develop the training curriculum. These interns are available to support the Kāne Initiative at no cost.

Native Hawaiian Health Care Systems (NHHCS) each of the other four (4) NHHCS (Ho‘ola Lahui Hawai‘i, Hui No Ke Ola Pono, Hui Mālama Ola Nā ‘Ōiwi, and Na Pu‘uwai), through an agreement for services, will provide office space and personnel to support the Kāne Initiative. The common resources that each NHHCS office will provide include the following facilities. Project Space. Each of the 4 NHHCS sites has office space to support local delivery of the Kane Initiative. Office locations are listed below and include meeting rooms where kāne and community members can meet in support of the project’s objectives. Project Equipment and Software. Each of the 4 NHHCS sites has desktop and laptop computers with access to Microsoft Office, Microsoft Word, PowerPoint, and Excel. Adobe Acrobat is available to convert PDF files. Additionally, each office has a projector and screens to support group delivery of PowerPoint presentations or videos that enhance the educational components of the project. Project Personnel. The Executive Director of each NHHCS will provide workspace and oversight of the staff who will execute the project and manage project funds.

Ho‘ola Lahui Hawai‘i (HLH)

HLH is the Native Hawaiian Health Care System, serving Kaua‘i. The main facility is located at 4491 Rice St. Lihue, HI. HLH has a specific focus on serving the needs of Native Hawaiians and their families. HLH provides services in primary health care, dental care, behavioral health counseling, substance abuse counseling, health promotion, health education, chronic disease management, nutritional counseling, fitness classes, outreach services, pharmacy services and case management services.

Hui No Ke Ola Pono (HNKOP)

HNKOP is a private, not for profit community-based health enhancement, disease prevention and health care center. The main facility is located at the Walter Cameron Center, 95 Mahalani St. Wailuku, HI. HNKOP provides programs on nutrition, health management and health care referrals for the community of Maui in a culturally caring manner. The staff works within a standard of conduct which reflects Hawaiian values. HNKOP’s mission is to improve the health status of Native Hawaiians by empowering the present and future generations to be their own health advocates. HNKOP serves as a “bridge” to the Native Hawaiian community by integrating medical care with traditional Hawaiian values, beliefs and practices.

Hui Mālama Ola Nā ‘Ōiwi (Hui Mālama)

Hui Mālama is a private, non-profit organization whose basic trust is to provide access to quality health services on Hawai‘i Island – home to one of the largest populations of Native Hawaiians (second only to O‘ahu). The main facility is located at 69 Railroad Ave. Hilo, HI. Hui Mālama’s goal is to empower their clients through education to make the right choices about health to improve well-being and quality of life. Hui Mālama provides intake and outreach services to clients in need of special or individualized assistance. Outreach Case Managers may provide assistance in client’s homes, or at a Hui Mālama Ola Nā ‘Ōiwi facility.

Na Pu‘uwai

Na Pu‘uwai’s mission is to improve the health conditions of Native Hawaiians on Moloka‘i and Lana‘i by maximizing their capacity to access and influence the establishment of a health care system responsive to and respectful of their cultural beliefs and practices. The main facility is located at the Kulana 'Oiwī Center, 604 Maunaloa Highway, Kaunakakai, HI. We charge our system of health care delivery to access as many Native Hawaiians as possible into the present health care provided by trained medical professionals who also take into account traditional ‘ohana (extended family) values, spiritual beliefs, and mana (personal power) equal to and complimentary to contemporary medicine.

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.

1. Ke Ola Mamo

Ke Ola Mamo will be the primary organizational locus for the Kāne Initiative. Ke Ola Mamo will house the Community Health Educator/Patient Navigator (CHE/PN), a new position. KOM will provide the location for the regular monthly meetings of the Kāne Committee. The CHE/PN will be directly supervised by the Ke Ola Mamo Executive Director (Ms. Lono), however management oversight for the Kāne Initiative will be provided by the Kāne Initiative Leader (Dr. Hughes) and Manager (Ms. Higuchi). This management structure was found to be successful during the pilot and current implementation of Kāne Initiative projects. The University of Hawai‘i Cancer Center (UHCC) will also provide an alternate location for the coordination of project activities. UHCC has the capacity to support the development of curricula materials, management of project databases and access to interns and students to provide low-cost personnel support.

Joelene K. Lono, M.S.W., Executive Director Ke Ola Mamo - 0.05 FTE

Ms. Lono is responsible for the overall decisions related to planning, organizing, budgeting, staffing, operating, controlling, evaluating, supervising, and negotiates the contracts with the federal, public and private sector. She ensures that the mission and goals of KOM are accomplished through the effective and efficient use of resources. She also develops and implements organizational and business strategies, new business initiatives and related objectives. Ms. Lono is a skilled executive and has over 20 years of experience in supervising and providing oversight for community-based health promotion programs. She will provide direct oversight of both the Community Health Educator/Patient Navigator and Fiscal Assistant whose allocated percentage of effort will be directed to support the goals and objectives of the Kāne Initiative.

TBN. Community Health Educator/Patient Navigator, Kāne Initiative Staff - 0.40 FTE

The Community Health Educator/Patient Navigator (CHE/PN) is expected to have a background in health or social work, with a working knowledge of local Native Hawaiian communities and aspects of cultural practices. The CHE/PN will be responsible for the statewide coordinator of Kāne Initiative activities including train-the-trainer sessions, and recording and compiling of expert narratives planned in collaboration with each of the four NHHCS offices. The CHE/PN will work with the project evaluators to collect and manage data resulting from the implementation of the project. The CHE/PN will be an employee of Ke Ola Mamo, who will provide oversight in conjunction with Kāne Initiative Leader and Manager. This person will have experience in training, data management and project implementation.

TBN. Fiscal Assistant, Kāne Initiative Staff - 0.10 FTE

The services of a Financial Assistant from Ke Ola Mamo will be encumbered to allocate and track resources used for the project. The Assistant will be responsible for rectifying accounts associated with the project and facilitating timely reimbursement to project vendors for services provided. The Fiscal Assistant will provide the required reconciliations and other related deliverables to the funding agency. This person will have at least 3 years' experience in fiscal management.

2. Native Hawaiian Health Care Systems (NHHCS) A subcontracted amount of \$10,000 as part of an agreement for services with Ke Ola Mamo will be provided to each of the 4 NHHCS (Ho'ola Lahui Hawai'i, Hui No Ke Ola Pono, Hui Mālama Ola Nā 'Ōiwi, and Na Pu'uwai) to support the Kāne Initiative. This allocation will support the cost for a Community Health Educator/Patient Navigator at each of the NHHCS offices as well as provide funding for the local fiscal management and oversight of the project.

3. University of Hawai'i Cancer Center

University of Hawai'i Cancer Center (UHCC) will be an alternate location supporting Kāne Initiative activities. UHCC will provide personnel support for the project through a subcontracted agreement for services with Ke Ola Mamo including a total \$20,000 allocation made to UHCC. In addition to providing for a portion of UHCC faculty and staff time allotted to the project, this subcontracted allocation will include costs for the stipend for the Kāne Initiative Leader and Cultural Consultant (Dr. Hughes). The subcontracted allocation amount to UHCC will not include the additional in-kind support provided by UHCC in the form of value-added staff time, the technical and material resources provided by UHCC to support the project at no-cost (see UHCC facilities). UHCC staff and faculty supporting the project will include the Project Manager (Ms. Higuchi) and the project evaluation team (Drs. Cassel and Fagan). Only a portion of the allocation to the UHCC is requested to justify their time in support of this project. UHCC staff and faculty involved with this project will donate an additional 5% their time to support the work of the Kāne Initiative, at a value of \$20,000/year. This organizational and management structure has been proven to be successful in conducting the recent pilot and implementation phases of the Kāne Initiative. Part of the salary for Ms. Higuchi, Dr. Cassel, and Dr. Fagan is paid by the UHCC. This level of support from UHCC was instrumental in the current project's success in providing health education to Hawaiian men statewide

Claire Hughes, Dr. P.H., R.D., Kāne Initiative Leader & Cultural Consultant at UHCC - \$10,000 annual stipend

Dr. Hughes is the project leader responsible for the project's oversight and review of the program's cultural content. This includes the resources pertaining to use of Hawaiian language and other relevant cultural norms. Dr. Hughes will provide expert guidance on conducting interviews and collecting their mo'olelo (stories) with cultural experts, and the tracking of cultural resources statewide. Dr. Hughes will guide the development and dissemination of the cultural training resources created by staff. Dr. Hughes will serve as the lead for the communications and collaborations with key community partners including the funding agency. Dr. Hughes is public health professional with years of experience working in Hawai'i with Hawaiian communities. She is an expert on Hawaiian culture, created and crafted components of the original kāne project, and has produced a column on health in the Office of Hawaiian Affairs newspaper for over 20 years.

Paula Higuchi, M.S.W., L.S.W., Kāne Project Manager at UHCC - \$6,000 annual allocation to be applied to existing salary support

Ms. Higuchi is a licensed social worker and the Education Coordinator at the University of Hawai'i Cancer Center. In collaboration with Drs. Hughes and Cassel she will guide conduct of interviews with cultural experts statewide that will inform the development of cultural training resources by staff. Ms. Higuchi will manage the development, implementation and evaluation of the cultural train-the-trainer materials. She will provide oversight on the creation of a statewide compendium of cultural experts and resources. She will provide direct oversight and coordinate the activities of the CHE/PN. Ms. Higuchi created and crafted components of the original kāne project. She will assist with maintaining communications and collaborations with key community partners. Ms. Higuchi has over 20 years of experience as an educator and has extensive experience in managing projects.

Kevin D. Cassel, Dr. P.H., Kāne Initiative Evaluator at UHCC - \$2,000 annual allocation to be applied to existing salary support

Dr. Cassel is an Assistant Professor in the Cancer Prevention and Control Program at the University of Hawai'i Cancer Center. He will provide leadership in the project's train-the-trainer implementation and evaluation. He will provide the technical expertise for conducting and recording the interviews with cultural experts and the creation of resources to support delivery of the train the trainer curricula. Dr. Cassel will manage the creation of electronic databases and other resources to support the statewide compendium of cultural experts. He will lead the overall evaluation of the program and assist project staff with the creation of resources to support sustainability. Dr. Cassel is a certified television producer. He is also has over 10 years of experience with qualitative and quantitative research and evaluation methods including the use of photovoice and other research methods using media. He also has extensive experience in managing staff for community projects.

Pebbles Fagan, Ph.D., M.P.H., Kāne Initiative Evaluator at UHCC - \$2,000 annual allocation to be applied to existing salary support

Dr. Fagan is an Associate Professor, and the former Director of the Cancer Prevention and Control Program at the University of Hawai'i Cancer Center. Dr. Fagan, also has a master's

degree in health education and communications, and a bachelor's degree in rhetoric and communications. She will review the train-the-train curriculum components, support the creation of potential evaluation instruments and guide the use of photo voice by the CN to create a compendium of cultural expertise. She has over 20 years of experience in managing students and staff for other community projects.

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 organization chart that illustrates the placement of this request.

No Ke Ola Pono o Nā Kāne, the Kāne Initiative, is a project of Ke Ola Mamo (KOM). Joelene Lono, KOM Executive Director (ED), is responsible for contractual and fiscal matters, and has direct supervision over the Community Health Educator/Patient Navigator (CHE/PN) and Fiscal Assistant. No Ke Ola Pono o Nā Kāne, the Kāne Initiative is governed by the Kāne Committee, responsible for programmatic decisions for the project. As a member of the Kāne Committee, and the cultural consultant and lead for the project, Dr. Claire Hughes is responsible for meeting the outcomes of the project. Dr. Hughes and Ms. Higuchi, project manager, are responsible for planning, implementation, and evaluation of the project. They will work in partnership with the KOM's ED and CHE/PN, and UHCC's Drs. Cassel and Fagan to successfully implement and evaluate the project.

See Attachments B & C.

C. Compensation

The applicant shall provide the annual salaries paid by the applicant to the three highest paid officers, directors, or employees of the organization by position.

Executive Director - \$96,000
Chief Financial Officer - \$88,000
Programs Manager - \$80,000

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.

Not Applicable.

B. Licensure or Accreditation

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

Not Applicable.

C. Private Educational Institutions

The applicant shall specify whether the grant will be used to support or benefit a sectarian or non-sectarian private educational institution. Please see Article X, Section 1, of the State Constitution for the relevance of this question.

Not Applicable.

D. Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2016-17 the activity funded by the grant if the grant of this application is:

- (1) Received by the applicant for fiscal year 2016-17, but
- (2) Not received by the applicant thereafter.

No Ke Ola Pono o Nā Kāne, the Kāne Initiative, has several features that lend to the sustainability of the project beyond the fiscal year 2016 through 2017. Our current goal and objectives for the project are to expand available resources to support hale mua by developing three (3) additional modules on Hawaiian culture, from our project's current 4 modules. We expect to expand the number of trained facilitators available statewide from 12 to 20, and identify at least 10 locally-based experts on aspects of Hawaiian culture. Finally, we intend to embed the project with the five (5) Native Hawaiian Health Care Systems offices located statewide by supporting a small portion of staff time at each system office to deliver the project. We will work with each of the four (4) Systems individually to secure an agreement for services.

It is expected that our creation of a menu of project resources for kāne and the establishment of a cadre of facilitators and experts statewide can serve to drive local demand for the project within Hawaiian communities. Our strategy to embed the project within the NHHCS is expected to enhance local accessibility to project resources. Finally, our project is designed to be delivered with minimal training and for use in low resource settings. During the fiscal year 2016-17, we will work with the participating Hawaiian men focusing on the materials, methods, and strategies needed for continued dissemination. We will focus efforts to support the local facilitators' training of peers to enhance community dissemination and durability, as well as the availability of during subsequent years after the initial implementation.

E. Certificate of Good Standing (If the Applicant is an Organization)

If the applicant is an organization, the applicant shall submit one (1) copy of a certificate of good standing from the Director of Commerce and Consumer Affairs that is dated no earlier than December 1, 2015.

See Attached.

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2016 to June 30, 2017

Applicant: _____ Ke Ola Mamo

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	19,992			
2. Payroll Taxes & Assessments	600			
3. Fringe Benefits	6,197			
TOTAL PERSONNEL COST	26,789			
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island	10,000			
2. Insurance				
3. Lease/Rental of Equipment				
4. Lease/Rental of Space	4,000			
5. Staff Training				
6. Supplies	10,000			
7. Telecommunication				
8. Utilities				
9. UHCC: Allocations & Cultural Consultation	20,000			
10. NHHCS - Kauai	10,000			
11. NHHCS - Maui	10,000			
12. NHHCS - Molokai	10,000			
13. NHHCS - Hawaii	10,000			
14. Incentives for Cultural Experts	6,000			
15. Printing Postage, Graphics, Video, Other	3,000			
16				
17				
18				
19				
TOTAL OTHER CURRENT EXPENSES	93,000			
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
TOTAL (A+B+C+D+E)	119,789			
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	119,789	Kevin D. Cassel 808 564-5916		
(b) Total Federal Funds Requested		[Redacted] Phone		
(c) Total County Funds Requested		1/22/16 Date		
(d) Total Private/Other Funds Requested		Signature of Authorized Official		
TOTAL BUDGET	119,789	Joelene Lono, Executive Director Name and Title (Please type or print)		

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2016 to June 30, 2017

Applicant: Ke Ola Mamo

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Executive Director	1	\$96,000.00	5.00%	\$ 4,800.00
Community Health Educator / Patient Navigator	1	\$33,300.00	40.00%	\$ 13,320.00
Fiscal Assistant	1	\$18,720.00	10.00%	\$ 1,872.00
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TOTAL:				19,992.00
JUSTIFICATION/COMMENTS:				

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2016 to June 30, 2017

Applicant: Ke Ola Mamo: Not Applicable

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:

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2016 to June 30, 2017

Applicant: Ke Ola Mamo: Not Applicable

FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2014-2015	FY: 2015-2016	FY:2016-2017	FY:2016-2017	FY:2017-2018	FY:2018-2019
PLANS						
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT						
TOTAL:						
JUSTIFICATION/COMMENTS:						

GOVERNMENT CONTRACTS AND / OR GRANTS

Apj

Ke Ola Mamo

Contracts Total: 2,576,866

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)	CONTRACT VALUE
1	Native Hawaiian Health Care Systems	8/1/15-7/31/16	Ke Ola Mamo	U.S. Govt.	2,387,221
2	DHHS- Indian Health Services	4/1/15-3/31/16	Ke Ola Mamo	U.S. Govt.	189,645
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**DECLARATION STATEMENT OF
APPLICANTS FOR GRANTS PURSUANT TO
CHAPTER 42F, HAWAII REVISIED 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, Hawaii 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, Hawaii 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, Hawaii 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, Hawaii 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.

Ke Ola Mamo

 zation)

(Signature)
Joelene K. Lono

January 19, 2016
(Date)
Executive Director

(Typed Name)

(Title)



**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: KE OLA MAMO*

DBA/Trade Name: KE OLA MAMO*

Issue Date: 01/20/2016

Status: Compliant

Hawaii Tax#: [REDACTED]

FEIN/SSN#: [REDACTED]

U#: No record

DCCA FILE#: 81513

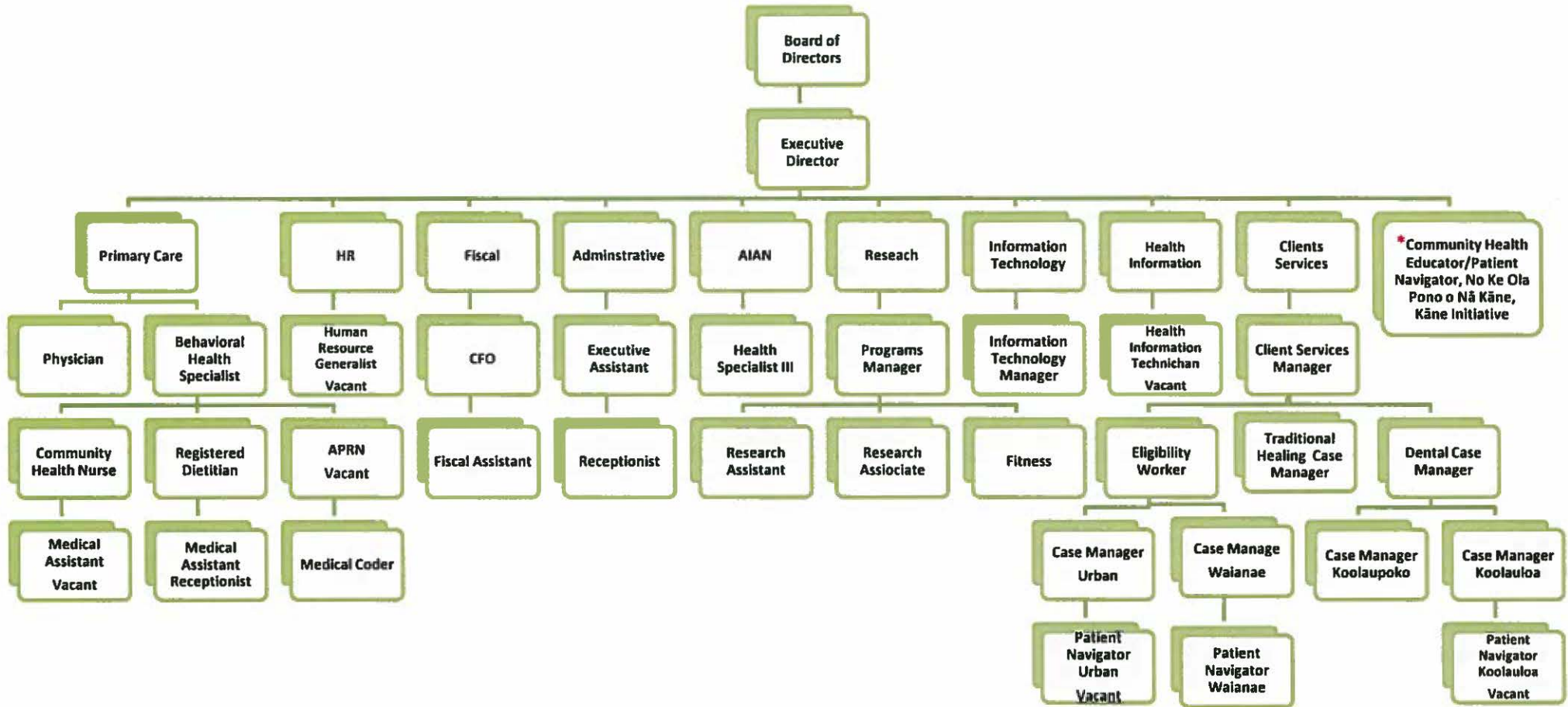
Status of Compliance for this Vendor on issue date:

Form	Department(s)	Status
A-6	Hawaii Department of Taxation	Compliant
	Internal Revenue Service	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

Attachment B Ke Ola Mamo Organization Chart



Attachment C

*No Ke Ola Pono o Nā Kāne, Kāne Initiative Organization Chart

