

Application Submittal Checklist

The following items are required for submittal of the grant application. Please verify and check off that the items have been included in the application packet.

- 1) Certificate of Good Standing (If the Applicant is an Organization)
- 2) Declaration Statement
- 3) Verify that grant shall be used for a public purpose
- 4) Background and Summary
- 5) Service Summary and Outcomes
- 6) Budget
 - a. Budget request by source of funds ([Link](#))
 - b. Personnel salaries and wages ([Link](#))
 - c. Equipment and motor vehicles ([Link](#))
 - d. Capital project details ([Link](#))
 - e. Government contracts, grants, and grants in aid ([Link](#))
- 7) Experience and Capability
- 8) Personnel: Project Organization and Staffing

 '1/14/2019
AUTHORIZED SIGNATURE PRINT NAME AND TITLE DATE

January 13, 2019

Senate Committee on Ways and Means
State Capitol, Room 208
Honolulu, HI 96813
Attn: GIA

Aloha, Members of the Senate Committee on Ways and Means:

Lana'i Kina'ole, Inc. is submitting this application for operating support under the 2019 Legislature's Grants-in-Aid. After you have had an opportunity to review this application, please let us know if you have any questions or require any additional information.

There is a healthcare crisis on Lana'i. With over 20% of our population comprised of over-60 seniors, without Lāna'i Kina'ole, there would be no home health care. If, as most would prefer, we want our kupuna to age in place, unless there is a program like Lana'i Kina'ole that provides the appropriate services to enable that, our island's seniors would be forced to move to another island or to pay over \$21,000/month for a bed in the Lana'i Community Hospital.

Lana'i Kina'ole is not seeking longterm funding. This GIA would provide a bridge enabling us to provide needed services until we have achieved Medicare certification — anticipated to occur during 2021.

Lāna'i Kina'ole is a volunteer organization, formed by a group of Lāna'i residents who are health and business professionals, consumers, caregivers, and other community people with a shared passion for Lāna'i kupuna. Lāna'i Kina'ole's primary focus is to support the goal of ensuring that kupuna can "age in place" for as long as possible, while advocating to ensure that Lāna'i kupuna receive quality care.

We hope that you will clearly see how Lana'i Kina'ole's efforts support the Senate's commitment to the Sustainability Goals, particularly #3: "Good Health and Well Being." The goal of Lana'i Kina'ole and this State of Hawaii goal is the same — "...to guarantee good health and well-being by ensuring and improving access to quality health care ...". We are dedicated to assuring safe and professional healthcare for our kupuna, particularly for those in rural communities and/or on neighbor islands.

Not only will Lana'i Kina'ole work at helping seniors age in place, but it will simultaneously help diversify and grow Lana'i's economy by employing trained professional healthcare providers from our island.

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Lana'i Kina'ole Inc. appreciates the opportunity to submit this Grant-in-Aid application and welcomes any questions you may have.

Mahalo,

A handwritten signature in black ink, appearing to read "Valerie Janikowski RN". The signature is fluid and cursive, with the letters "V", "J", and "R" being particularly prominent.

Valerie Janikowski, RN

vjanikowski@lanaikinaole.org



Department of Commerce and Consumer Affairs

CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that

LANA'I KINA'OLE, INC.

was incorporated under the laws of Hawaii on 11/26/2018 ; that it is an existing nonprofit corporation; and that, as far as the records of this Department reveal, has complied with all of the provisions of the Hawaii Nonprofit Corporations Act, regulating domestic nonprofit corporations.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: November 30, 2018

Director of Commerce and Consumer Affairs



**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.

Valerie Janikowski, RN for Lana'i Kina'ole, Inc.

(Typed Name of Individual or Organization)

Valerie Janikowski RN

(Signature)

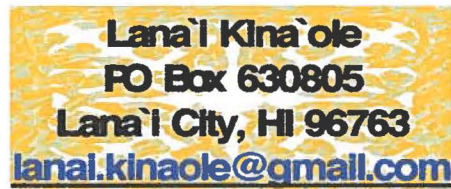
Valerie Janikowski, RN Program Administrator and RN

1/14/2019

(Date)

(Typed Name)

(Title)



January 14, 2019

This is to certify that the grant shall be used for a public purpose, as required by §42F-102 Applications for grants.

A handwritten signature in black ink that reads "Valerie Janikowski".

Valerie Janikowski, RN
Program Administrator and RN for Lana'i Kina'ole

GIA Application, 2019-2020	Lana'i Kina'ole Inc	List of Attachments
Number	Outline in Application Instructions	Title
1	IV.1.a	Budget request by source of funds
2	IV.1.b	Personnel salaries and wages
3	IV.1.c	Equipment and motor vehicles
4	IV.1.d	Capital project details
5	IV.1.e	Government contracts, grants and/or grants-in-aid
6	I.V.3	All other sources of funding sought for fy 2020
7	VI.1	Personnel Policies
8	VI.1	Resume for Valerie Janikowski, RN, BSN
9	VI.1	Resume for Carol Onuma, RN
10	VI.1	Anabel Raqueno certification
11	VI.1	Urbita Cappal certification
12	VI.2	Organization Chart
13	VII.2	License
14	Other	Letters of Support

II. BACKGROUND AND SUMMARY

1. A brief description of the applicant's background

Lānaʻi Kinaʻole, Inc., a community group formed to support healthcare providers in providing licensed home health and home care services, along with a focus on advocacy for kupuna care, was established in 2018.

Currently an all-volunteer organization, Lānaʻi Kinaʻole is composed of Lānaʻi residents who are health and business professionals, consumers, caregivers, and other community members who share a concern and passion for Lānaʻi kupuna. Lānaʻi Kinaʻole's primary focus is to support the goal of ensuring that kupuna can "age in place" for as long as possible, while advocating to ensure that Lānaʻi kupuna receive quality care.

Many of Lānaʻi Kinaʻole's members have been associated with providing kupuna care, either professionally as registered nurses (RN) or certified nurse aides CNAs, or through personal experiences with family caregiving.

2. The goals and objectives related to the request

Lānaʻi Kinaʻole's goal is to provide home and community-based services, home care and home health services, including ancillary services, to kupuna in the Lānaʻi community, focusing on homebound kupuna who have limited or no access to long-term care resources on island, and to enable them to "age in place" in their own homes for as long as it is feasibly possible with provision of needed and appropriate services.

3. The public purpose and need to be served

Providing long term and home care services (kupuna care) has always been a challenge in rural and remote areas, such as Lānaʻi; as part of Maui County, Lānaʻi is often dependent upon parent companies of off-island health and human services agencies that too often provide limited assistance and limited face-to-face visits with staff and clients on island. And when representatives of parent health and human services programs visit Lānaʻi from Maui or Oahu, it is often just a one-day visit. The challenges of air travel to and from Lānaʻi results in minimal time allotted to visiting kupuna. As a result, consultations regarding patient care is often communicated by phone, email, or postal service, while lacking a human connection and/or in-person visits.

Lāna'i Kina'ole's goal is to connect with the client/kupuna at home; this will truly facilitate kupuna to "age in place." Lāna'i Kina'ole promotes coordination of care through effective collaboration and communication, reporting, and evaluating client service requirements on-site. Information needed to implement and coordinate the care and an optimal Plan of Care (POC) is communicated and coordinated with the client, caregiver, family, and other health care providers, as indicated and agreed upon, by the client.

Indeed, there was no licensed home health care until Arcadia Home Health Services under the Arcadia Family of Companies enabled a licensed home health agency on Lāna'i through a Native Hawaiian Health Care program in July, 2015. The program's success was due in part to the commitment of Lāna'i staff that provided home health and the support from Arcadia; this partnership ended in August 2018.

Ancillary services, such as occupational, physical and speech-language therapies are almost non-existent on Lāna'i. There is a physical therapist-owned company on island, and kupuna have received services from this entity; however, all other therapies and related services are located off-island, requiring those least able to travel to leave to access care.¹ Although there are behavioral health services on island, there seems to be a lack of age-and-culturally-sensitive care in this area. Kupuna are often depressed but do not want to access the "western" style of therapy. The proposed program anticipates collaborating with a behavioral health residency program that focuses on rural areas and prioritizes culturally sensitive care to Native Hawaiians and others.

For healthy and ambulatory kupuna, there are community-based programs on Lanai, but there are often gaps, and services are fragmented. The County senior program (Kaunoa) and the Maui County Office on Aging provide limited services: the congregate lunchtime meal provided by Kaunoa Senior Program averages over 20 daily participants, with a few homebound residents receiving home-served meals. The State Department of Health's public health nurse and part-time aide are available to make limited in-home assessments and referrals to other appropriate agencies, when referrals are made. The Lāna'i Hospital has ten (10) long term care beds supported by Medicaid for eligible patients or, when available, at a monthly cost of \$21,210 to a private patient.

Under the auspices of a licensing arrangement with Arcadia, Lāna'i Kina'ole is the only licensed home health care agency operating on island.

¹ Acupuncture and lomilomi are available on island, and many kupuna have utilized this service with positive results; however, the island population could benefit if there were more practitioners on island.

It is well known that socioeconomics and situational stressors affect an individual's health, and the experience of Kina'ole team members has allowed an inside view of which determinants are impacting individual clients and their families. The nursing assistant, the nurse and the primary care provider (PCP) all communicate and collaborate on the clients' agreed-upon individual POC, which facilitates successful healing and aging in place.

Aside from socio-economics, different clients have different medical needs. For example, we may have an overweight diabetic client with diabetes-caused recurring foot ulcers. This kupuna will require complex care and close monitoring. The Kina'ole home health caregiver will monitor the client and manage wound care as indicated. In some cases, this may mean one (1) to two (2) skilled nursing home visits per day, seven (7) days a week. If that is what the client needs, that is what we have and will deliver.

Home health/home care services allows for optimal assessments yielding a clearer picture of a kupuna's overall needs while protecting kupuna privacy.

4. Describe the target population to be served

The 2013 State of Hawaii Data Book states that there were 3,514 residents on Lāna'i. The median age of 38.6 years is equal to the reported State average and reflects a slightly lower percentage of residents 20 to 64 years (19.3%) and a higher percentage of those ages 65 and over (15.5%). The U.S. Census Bureau reports there were about 1,089 seniors, age 50 and older, residing on Lāna'i in 2010; this number has almost surely increased.

Lāna'i Kina'ole's primary target population is the 21% of Lāna'i's 3,500+ residents aged 60 or more, along with the families and caregivers of those ~ 700 individuals.

In 2014, the median household income of Lāna'i City residents was \$53,684 with 9.6% living in poverty. Of those 200% or more below the federal poverty level, 25% were 65 years or older (versus the State average of 16%). Although many residents own their homes, bought before the pineapple plantation closed in 1992, housing, as elsewhere in Hawai'i, can be expensive. Ninety-eight percent of the island is now owned by Oracle's Larry Ellison, and the cost of living and home prices have drastically risen. For example, the median house now has a value of over \$371,000, and the median rent is \$1,051 per month. For many who do not own their own homes, the cost of rent is exorbitant.

Most kupuna live on social security based on their tenure as plantation workers. This explains the 25% of kupuna who register below the federal poverty level and who may

also live in multi-generational housing. With these challenges, health care issues, especially important at this age, often are not treated as a priority because of having to survive with minimal income and resources.

The proposed project will cover all of Lānaʻi, with the majority of the residents living in Lānaʻi City. There is a small Department of Hawaiian Homes Lands (DHHL) neighborhood that includes twenty-seven (27) homes for DHHL recipients.

5. **Describe the geographic coverage**

The island of Lānaʻi.

III. SERVICE SUMMARY AND OUTCOMES

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

The purpose of this project is to provide licensed home care and home health services, including relevant ancillary services, to all Lānaʻi community members, particularly those 60 years and above. Lānaʻi Kinaʻole pays focused attention on the homebound kupuna who have limited or no long-term care access or resources on island; to enable these kupuna to “age in place” in their own homes for as long as it is feasibly possible with the appropriate services.

Lānaʻi has just over 3,000 residents and nearly 21% of them are kupuna (over 60 years of age) — these are our primary clientele. However, home health and home care services are open to anyone in the community. We have cared for clients ranging from two months to 102 years. Committed to its mission statement, Lānaʻi Kinaʻole provides services, either directly or through contract, to address the physical, social, and functional needs of clients, to maximize independence within the limits of each patient’s circumstances.

Lānaʻi Kinaʻole will attempt to ensure that all appropriate home health resources are pursued for all clientele, as service providers are available, including but not limited to:

- skilled nursing;
- physical therapy (PT);
- occupational therapy (OT);
- medical social work (SW);
- speech therapy (SLP);
- interdisciplinary case management;
- nursing aides;
- nutritional counseling; and
- education.

These services will adhere to Hawaii State Regulated and evidence-based standards of Home Health practice for the respective disciplines.

Not all providers are continuously available on Lānaʻi or even available within the community. However, our goal will comply with Hawaii State Regulations, and skilled nursing services through registered nurse (RN) staff and certified nurse's aides (CNA) will — at a minimum — always be available.

An ongoing effort to partner with local and state specialists will provide quality interdisciplinary care and allow the client to heal and age in place. The primary goal of each client is to remain in his/her own home, out of an institution, for as long as possible, and our services are intended to assist in making that goal a reality.

Access to Lānaʻi Kinaʻole services is available 24 hours/day, 7 days/week within the agency's defined service area to clients in their residences who meet admission criteria for the services requested. On-call nursing services are available outside of routine business hours including weekends and holidays.

Each client will have, at a minimum, a nursing assessment, on a re-occurring basis no less than every sixty (60) days, but as frequently as indicated by the clients' care needs and/or as ordered by the client provider. Each client will be included in an interdisciplinary care approach with nurse aides assigned to meet specific needs, as often as determined by the nurse, or by the PCP. Other ancillary support, such as consultant services or collaborations with other agencies may also be provided on an as-needed basis.

With kupuna as the focus, an RN assessment will result in development and implementation of a comprehensive POC covering multiple facets of services and care, including medications and/or treatments indicated, functional limitations, educational needs as applicable, advance care planning, presentation of providers' order for life sustaining treatment (POLST) as indicated.

If hospitalization is unavoidable, the RN would attempt to ensure a smooth transition to a kupuna's home environment and attempt to avoid hospital re-admission. The interdisciplinary team will ensure the kupuna, caregiver and/or family needs are continually assessed and efforts are made to address those needs.

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

Project Objective	Activity	Time Frame
Recruit clients, majority of which will be kupuna, to participate in proposed project to receive home care/home health services.	<ol style="list-style-type: none"> 1. Develop and disseminate flyers, information to community members with attention to our kupuna, preferably house-to-house. (Plan for deliver to all DHHL homesteaders) 2. Hold meetings in partnership with other agencies, such as Senior Center, medical and social agencies, other aging-related programs, and inform them of the program offerings and referral process. 	<p>Throughout the proposed grant.</p> <p>Initially, recruitment is planned for house-to-house once weekly, and meetings scheduled monthly and as needed, with other agencies.</p>
Meet with health care providers and agency resources, to establish seamless referral process.	<ol style="list-style-type: none"> 1. Establish an interdisciplinary health care team: RN, CNA, MD, ancillary providers, patient/caregiver. 2. Generate MOUs with providers, including fee schedule, in-kind MOUs, with appropriate professional licenses. 3. Schedule initial meeting before including kupuna and caregiver(s). 4. Establish roles, responsibilities, and schedules for ancillary providers. 	<p>First 2 months of grant period.</p>
Interview, assess, intake potential clients, majority kupuna.	<ol style="list-style-type: none"> 1. Receive referral from primary care provider (PCP) or specialist and set appointment with the client/kupuna and/or client caregiver(s), as indicated. 	<p>Upon referral, contact client or caregiver within first 2 days. Set appointment for initial interview and RN assessment.</p>
Assist and observe kupuna in home setting.	<ol style="list-style-type: none"> 1. Upon admittance of client to the Kupuna Care program, assist client and/or caregiver to set up addressing safety while minimizing risks i.e. falls, fire, wandering, etc, as applicable. 2. Inventory supplies on hand and have kupuna/caregiver get what is needed. 3. Lāna'i Kina'ole to supplement or loan supplies and/or equipment, if required and available. 	<p>Within 2 days of approval, or as soon as the schedule can be accommodated by the client and/or caregiver, the RN will assist client/kupuna to ensure home is safe and ready for home care and/or home health.</p>
Establish individual client driven mutually acceptable plan of care (POC).	<ol style="list-style-type: none"> 1. Establish goals with client/kupuna related to needs, function, and services provided.\ 2. Populate POC with functions or activities based on clients preferences, team recommendations as agreed upon by the client/kupuna and/or caregiver and provider's orders. 	<p>Within 1-2 week(s) of admittance to program.</p>

Continue to schedule and hold focus groups.	<ol style="list-style-type: none"> 1. Attempt one-on-one, face-to-face home visits to deliver information about service(s) provision. 2. Schedule initial focus group with DHHL homesteaders. 3. Hold focus group to get input on services of proposed program, including recommendations for home care/home health if any of beneficiaries received services. 4. Collate results and analyze with Process Improvement (PI) strategies. 	Within 1st 3 months.
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3. **Describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results**

The proposed Kupuna Care Project, "Enabling Lāna'i Kupuna to Age in Place," will measure its success both quantitatively and qualitatively. There will be at least two (2) surveys administered to affected kupuna and caregivers that will reflect how well they felt they were cared for in the home.

Also included in program evaluation will be focus groups; Hawaiian Homes Focus Group (meet with residents of the 27 DHHL homes); focused assessment on clinical metrics, such as analysis of vital signs, utilization of hospitals and/or urgent care, and immunization status; and other satisfaction surveys. For the focus groups, current and past clients/kupuna and their families will be invited to provide input regarding the home care and/or home health services they received and what improvements they would recommend and what they liked best about the program services and what was helpful.

Included in the assessment of clinical metrics would be an analysis of the patient's vital signs visualized through trends, graphs, and charts to reflect how kupuna has fared with these services; determining whether hospitalizations and/or urgent care visits decreased or ER visits/utilization decreased as well; what preventive measures were implemented as well as documenting any missed opportunities to avoid hospitalizations, urgent care, or ER visits. Using satisfaction surveys as an evaluation tool will enable us to evaluate any responses based on age and ethnicity.

Quantitative evaluation that includes clinical metrics, such as blood pressure and blood sugar results, vital signs, determination of wound care healing, oxygen usage and amount of oxygen needed and relief obtained, range of motion per prescription and improvement documented, will verify not only program success, but patient/kupuna improvement in health status. The results of clinical metrics will be shared with the kupuna's primary care provider/physician so that any treatment and/or medications could be modified to

address any changes. If for any reason the clinical metrics reveal any abnormality, the care provider will be contacted immediately and any recommendations implemented and documented.

Qualitative evaluation will be measured through the administration of kupuna and caregiver surveys. One survey, the Lāna'i Home Health and/or Home Care Satisfaction Survey, will focus on both the kupuna and caregiver, with the responses rating the kupuna's perception or opinion about the care received from the caregiver. While it would be ideal that the kupuna respond directly to the questions, responses can be recorded by other people, such as family members or friends. The other survey, Kupuna Aging in Place Program for Elderly Services, an annual survey administered to caregivers, focuses on responses by caregivers as well as responses to questions that ask whether the caregiver has ever received care from another person.

4. **List the measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency).**

See response to issue #3 above

IV. FINANCIAL (See attached budget pages)

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

- a. Budget request by source of funds [Attachment #1]
- b. Personnel salaries and wages [Attachment #2]
- c. Equipment and motor vehicles [Attachment #3]
- d. Capital project details [Attachment #4]
- e. Government contracts, grants, and grants in aid [Attachment #5]

2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2020.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$55,000	\$55,000	\$55,000	\$49,324	\$214,324

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2020. [see Attachment #6]

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, grants, and grants in aid it has been granted within the prior three years and will be receiving for fiscal year 2020 for program funding. [see Attachment # 5]

6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2018. **\$18,997.00**

V. EXPERIENCE AND CAPABILITY

1. Necessary Skills and Experience

Comment of Val Janikowski, Program Administrator and RN: my experience as a registered nurse (RN) began on Lāna'i in 2009. My initial task, listing available services, was a simple task, as they were and, in many ways, still are, extremely limited. As I began working within the Native Hawaiian Healthcare System, I recognized one major gap early on: there were no home health services. At that time, providers contracted by Maui County Office on Aging (MCOA), paid with Kupuna Care Funds, offered very limited home care.

The lack of home health care created – and still creates today - unnecessary hardships and financial burdens for clients and the healthcare system overall; this is a service that every community deserves to have available, especially as we age. Clients suffered through extended hospitalizations, many of which were easily avoidable if they could have been monitored closely, along with extended time off island away from their homes, family and support systems. If a client was able to return home after a higher level of care or hospitalization on Oahu or Maui and needed long term intravenous medications it would result in mis-utilization of the emergency room for outpatient nursing services that are managed ideally through a licensed Home Health agency. One client experience included a male in his mid-50s having to stay in a nursing home for 6-8 weeks on Oahu because he needed intravenous antibiotics for a wound infection.

For the past four years, members now serving the community through Lāna'i Kina'ole have been the only team providing licensed home health services to the community of Lāna'i. During that time, we served nearly 90 clients, approximately 20% of which were Native Hawaiian; this is an expected percentage considering the low percentage of Native Hawaiians within our community. We have been able to work collaboratively with providers, agencies, specialists, caregivers and clients to deliver critical services. One client credits us for saving his lower limbs, and for saving his life. We have saved lives, and beneficially impacted individuals and our community.

The initial proposed staffing pattern for the Lana'i Kina'ole Program includes two (2) registered nurses to provide the initial patient assessment and communication with the health care team, hands-on care, case management, and general supervision of the program and staff. There will be two (2) certified nurse aides (CNA) to assist in the home health care, with plans based on the projected number of additional patients to grow to four (4) CNAs.

The RNs will perform the initial kupuna/client assessment and interview with the caregiver(s) if a kupuna is unable to respond to all of the questions that will be part of the individual POC. The RN will also meet with the referring health care provider, usually the personal care physician (PCP) to get all medical orders, including any medications to be filled, therapies to provide, clinical metrics to perform, activities of daily living (ADL) to perform, and any other specific orders for each kupuna. The RN will have the CNA perform many of the tasks listed above as appropriate and will supervise the CNA and provide the clinical oversight while the CNA is providing care. All of the current RNs and CNAs projected to continue in Lan'ai Kina'ole are qualified to provide home care and home health care and have cared for and worked with kupuna in various settings over the years.

The ancillary health care providers will be contractors and will include the following positions:

Social worker: This position requires a Masters of Social Work (MSW) and he/she would be part of the team to determine the recruitment, intake and assessment processes. The social worker would be responsible for assisting the kupuna, family members, and/or caregiver(s) in coping with problems they're facing to improve the patient's care and quality of life. There would be an initial team meeting with the primary care provider, the registered nurse and certified nurse aide, and if appropriate, the kupuna and caregiver(s). Recommendations for an individual service plan would be included along with clinical recommendations. Since the emphasis of the medical-social team is to focus on and

include the kupuna and caregiver(s), a subsequent meeting to discuss and approve the individual service plan would have all the necessary providers and family present.

Occupational Therapist (OT): This position requires a Masters in Occupational Therapy. An OT focuses on improving a client's ability to perform activities of daily living (ADL). The OT helps kupuna improve their ability to perform tasks in their daily living and working environments. They work with individuals who have conditions that are mentally, physically, developmentally, socially or emotionally disabling. If the individual service plan requires OT, this professional would be contracted to provide services for the recommended period of time.

Physical Therapist (PT): A Master's degree is also required. The PT will help the kupuna reduce pain and improve or restore mobility, and in many cases without expensive surgery which can often reduce the need for long-term use of prescription medications and avoid ensuing side effects. The PT will provide services that help restore function, improve mobility, relieve pain, and prevent or limit permanent physical disabilities in patients with injury or disease. They all assist the kupuna to restore, maintain, and promote overall fitness and health. This position would also be part of the individual service plan if PT is recommended.

Speech Language Therapist (SLP): This position also requires a Master's degree. This person would provide the speech and language therapy, any assessment on swallowing difficulties due to conditions, such as stroke and complications of dementia, and further therapies and recommendations as indicated for the patient.

Acupuncture/Lomilomi: If recommended and approved by the kupuna and caregiver(s), lomilomi would be a major part of a kupuna's care plan. Lomilomi promotes relaxation, improves circulation, addresses muscle pain and other physical ailments, and provides spiritual and emotional benefits, including relief from fear, anxiety, and other negative emotions. Decreasing stress has a positive impact on many health conditions.

Acupuncture can also be an important component of a kupuna's individual POC, if prescribed. Acupuncture is a system of complementary medicine that involves pricking the skin or tissues with needles, used to alleviate pain and to treat various physical, mental, and emotional conditions. Originating in ancient China, acupuncture is now widely practiced in the West. Performed correctly, there are very few side effects and may benefit a kupuna who is approved to have acupuncture. Acupuncture can be effectively combined with other treatments, can control some types of pain and may help the kupuna for whom pain medications are not suitable.

Behavioral health specialist (Clinical psychologist): There is a behavioral health residency program located on Oahu that focuses on placing practicum students, interns, and residents in behavioral health in rural areas with a focus on Native Hawaiians. Currently, this program, I Ola Lahui, has participated in the Native Hawaiian Health Care programs on both Molokai and Lāna'i, as well as programs in Waianae and on Hawaii Island. They have been well received and many have benefitted from their culturally-appropriate approach to mental health.

Also included would be an Information Technology (IT) Specialist who would be responsible for the electronic components, such as supporting implementation of an electronic health record (EHR), internet issues, any web-based platforms for videoconferencing capabilities for medical consultation, educational opportunities, and patient-provider communication.

2. Facilities

Centrally located right off Lāna'i City's town center, Lāna'i Kina'ole's office setting is approximately 1,200 square feet, has a large common entry area for reception, waiting area, and patient family lounge for counseling. Group classes, i.e., caregiver support groups, can be held in this area as well. There are three separate rooms, which can provide privacy as needed. One will be an administrative office, one for supply and medical record storage, and the third a clinical/provider service exam room. It is quite spacious, which will allow for program specific tools i.e., exam table, monitors, massage table, etc., for each provider to be readily available.

Additionally, a triage and monitoring station will be set up to allow community members access to vital signs' assessment, as requested, as part of the home and community-based service portion of our programs, and in collaboration with the client's PCP. The building also has a laundry room with a washing machine and a dryer to allow Lāna'i Kina'ole to support clients with this small chore, as many do not have the equipment available in their homes.

In general, most of the home care and home health services will be provided in the client's residence, which is the primary goal, but the office will be utilized as a base station and as above or various offerings open to the community.

VI. PERSONNEL; PROJECT ORGANIZATION AND STAFFING

1. Proposed Staffing, Staff Qualifications, Supervision and Training

Each client will have a minimum of an initial nursing assessment, by an RN, on a reoccurring basis no less than every sixty (60) days, but as frequently as indicated by the clients care needs and/or as ordered by the client provider, and on an ongoing basis. The RN works within their scope of practice as licensed by the state of Hawaii, Board of Nursing (BON). Also, the RN works under approved policies and evidence-based protocols, per regulation per HI state Home Health licensing agency and interventions may be ordered by a primary care provider or a client's healthcare specialist. Each client will be included in an interdisciplinary care approach with nurse aides/certified nursing assistant (CNA), under the direction and observation of the RN. Other ancillary support consultants may accommodate referrals as requested.

An assessment and specialty services will be provided. For example, many clients qualify for services through Maui County Office on Aging (MCOA), therefore our agency providers and theirs may be delivering services mutually in collaboration. For most clients a consultation with a pharmacist and completion of medication reconciliation is facilitated to ensure there are no risks or contraindications with order or over the counter medications the client may be consuming. Other support services that may be called up or with agreement by the client and the provider might include physical therapy (PT), Occupational Therapy (OT), Speech and Language Therapy (SLP), Social Work (SW), Registered Dietician (RD) or nutritionist, acupuncturist, massage therapy, etc. The Lana'i Kina'ole team, the client's preferred provider with the interdisciplinary team, as applicable will review and agree on the clients Plan of Care (POC)

All staff are required to maintain necessary credentials i.e. RN license, CNA certification, and required special certifications i.e. CPR/First Aid evaluated for competency, ongoing in services are required and new hire and probationary requirements shall be met per policy – Attachment #7

Current and Proposed Staff include:

Valerie Janikowski, RN, BSN [Attachment #8]

Carol Onuma, RN [Attachment #x]

Anabel Raqueno, CNA [Attachment #10]

Uribita Cappal, CNA [Attachment #11]

2. Organization Chart Attachment #12

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.

3. Compensation

The applicant shall provide an annual salary range paid by the applicant to the three highest paid officers, directors, or employees of the organization by position title, not employee name. [Attachment #2]

VII. Other

1. 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.

Lanaʻi Kinaʻole is not a party to any litigation.

2. 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. See everyone's credentials and the Home Health license attached.

On December 21, 2018, Arcadia Home Health Services informed Lānaʻi Kinaʻole that it would extend its license to Lānaʻi Kinaʻole for 5-6 months to continue provision of services through late spring 2019. New and independent licensure is being sought by Lānaʻi Kinaʻole to continue its work to serve Lānaʻi, and an application to become state licensed as a home care and home health agency has been submitted to the State Department of Health. It is anticipated that Lānaʻi Kinaʻole will receive its independent state license to provide home care and home health on Lānaʻi before the expiration of its licensure under Arcadia.

[Attachment #13]

3. 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.

No part of this grant will be used to support or benefit a sectarian or non-sectarian private educational institution.

4. Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2019-20 the activity funded by the grant if the grant of this application is:

- (a) Received by the applicant for fiscal year 2019-20, but
- (b) Not received by the applicant thereafter.

2019-2020 Program Sustainability - Efforts will be made to secure contracts with individual private insurance companies and agencies for reimbursement for services. Potentially initiate process for Medicare Certification Readiness Analysis through consultants. Fee for services expected

2020-2021 Program Sustainability - Efforts will be made to pursue Medicare Certification for the Home Care and Home Health Services, to allow for full reimbursement for services delivered.

If full requested grant were not awarded, alternate staffing plan would be made, yielding part-time status rather than the requested full time.

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2019 to June 30, 2020

Applicant: Lana`i Kina`ole Inc.

Attachment #1

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	167,900			58,280
2. Payroll Taxes & Assessments 7.65%	12,844			
3. Fringe Benefits 20%	33,580			6,660
TOTAL PERSONNEL COST	214,324			64,940
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island			1,250	500
2. Insurance				3,030
3. Lease/Rental of Equipment	NA			
4. Lease/Rental of Space				6,000
5. Staff Training				
6. Supplies			61,850	3,000
7. Telecommunication	NA		11,500	
8. Utilities				3,600
9 Contractual Services for Ancillary Services				15,000
10 Publications/Promotions				1,000
11 Postage				500
12 Mileage Reimbursement				325
13				
14				
15				
16				
17				
18				
19				
20				
TOTAL OTHER CURRENT EXPENSES			74,600	32,955
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
TOTAL (A+B+C+D+E)	214,324	NA	74,600	97,895
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	214,324	Valerie Janikowski (760)362-2750/(808)565-780		
(b) Total Federal Funds Requested	NA	Name (Please type or print) Phone		
(c) Total County Funds Requested	74,600	Signature of Authorized Official Date		
(d) Total Private/Other Funds Requested	97,895			
TOTAL BUDGET	386,819	Name and Title (Please type or print)		

Period: July 1, 2019 to June 30, 2020

Lana'i Kina'ole, Inc.

Personnel Salaries and Wages

Attachment #2

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Program Administrator/Clinical Director/Supervising RN	1	\$58,400.00	100.00%	\$ 58,400.00
Staff Registered Nurse/Case Manager	1	\$35,000.00	100.00%	\$ 35,000.00
Lead Certified Nursing Assistant (CNA)	1	\$39,500.00	100.00%	\$ 39,500.00
Staff Certified Nursing Assistant (CNA)	1	\$35,000.00	100.00%	\$ 35,000.00
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
TOTAL:				167,900.00
JUSTIFICATION/COMMENTS:				

Applicant: Lana'i Kina'ole Inc.

Attachment #3

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

JUSTIFICATION/COMMENTS:

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

JUSTIFICATION/COMMENTS:

Period: July 1, 2019 to June 30, 2020

Applicant: Lana`i Kina`ole Inc. Attachment #4

FUNDING AMOUNT REQUESTED

TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OTHER SOURCES OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2017-2018	FY: 2018-2019	FY:2019-2020	FY:2019-2020	FY:2020-2021	FY:2021-2022
PLANS			NA	NA	NA	NA
LAND ACQUISITION			NA	NA	NA	NA
DESIGN			NA	NA	NA	NA
CONSTRUCTION			NA	NA	NA	NA
EQUIPMENT			NA	NA	NA	NA
TOTAL:			NA	NA	NA	NA

JUSTIFICATION/COMMENTS:

GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID

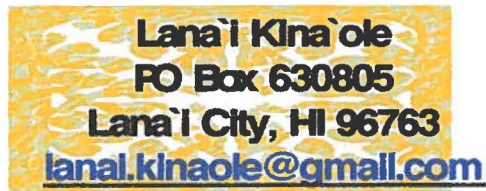
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Lana`i Kina`ole Inc.

Contracts Total: Estimated all TBD \$120,600.00 **Attachment #5**

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)	CONTRACT VALUE
1	Fee for Client Service	TBD	Aloha Care	State	Est. \$3,000.00
2	Fee for Client Service per Kupuna Care	TBD	MCOA Office on Aging	Maui	Est. \$97,500.00
3	Fee for Client Service	TBD	Veterans Affairs	US	Est. \$17,100.00
4	Fee for Client Service	TBD	Ohana	State	Est. \$3,000.00
5					
6					
7					
8					
9					

Funds being sought for FY 2020			
Maui County Council	\$74,600	Pending	Requesting 3-year support to be line item with demonstration of self-sustainability for years 3-4.
RFP Title 3 Kupuna Care Federal Funds	TBD/Fee for service	Pending	Plan to pursue award as a provider to receive fee for services through MCOA Kupuna Care Funds for services referred for & accepted with partnership.
Office of Hawaiian Affairs (OHA)	\$86,265	Pending	Grant for Kupuna Care Project submitted 1/2019 - pending.
TOTAL INCOME TBD:	\$160,865		



Attachment #7

Personnel Requirements Policy

Policy

Lana'i Kina'ole has established requirements for all personnel. As required by regulation, the agency considers volunteers as employees without required compensation and such are subject to all the same policies as an employee.

Purpose

To define the minimum requirements of personnel hired by the agency.

Responsibility

The Program Administrator and all staff, employees and/or contractors are responsible for maintaining and implementing this policy.

Procedure

1. The employee will have completed an application, reference checks, skills list, criminal disclosure, conflict of interest form (if applicable), permission for the criminal background check, and supplied the necessary information to validate that the applicant is eligible to legally work in the United States.
2. Licensure, certification, or registration verification is completed for all appropriate agency personnel. All licenses are validated to be in good standing.
3. All home health aide services must meet the following requirements;
 - a. Have completed a training and competency evaluation program with classroom and supervised practical training of at least seventy-five (75) hours or observation and written or oral exam.
 - b. A nurse aide training and competency evaluation programs approved by the state
 - c. If there has been a twenty-four (24) hour month lapse in furnishings services for compensation, the individual must complete another state approved program before providing services.
4. All personnel applying for a field positions will complete a competency skills checklist for their position. All skills validated through the licensure or certification process will be accepted as verified. All required competencies will be performed and documented.
5. Three (3) references are contacted with at least two (2) positive references required.
6. If required, current cardiopulmonary resuscitation (CPR) training per agency policy.
 - a. CPR is required for direct services providers, employees but not volunteers or consultants.
7. The agency shall require health assessments performed from six (6) months prior to employment to within fifteen (15) days of assuming employment as a prerequisite of employment and maintain

Kina'ole: Doing the right thing, in the right way, at the right time, in the right place, for the right individual, for the right reason, with the right feeling the first time. AKA – "Flawlessness"



Attachment #7

health records for employees with direct patient contact. The assessment is to be performed and evaluated by a licensed and legally authorized practitioner within his or her scope of practice. The written health assessment report shall:

- a. Be signed by the person who performed the assessment.
 - b. Verify that the employee is free from health conditions that would interfere with the employee's ability to perform assigned duties.
 - c. Contain verification that the employee is free from signs or symptoms of infectious disease.
 - d. Maintained for at least three (3) years in a safe, protected location.
8. Verification of current tuberculosis (TB) screening test for all direct-service personnel.
 9. Federal I-9 Naturalization and Immigration forms are completed and filed separately.
 10. All direct-service personnel who have not already been vaccinated will be encouraged to obtain the Hepatitis B vaccine paid for by the agency. Personnel rejecting inoculation will document their choice.
 11. All personnel will receive appropriate orientation to policies and procedures prior to providing patient service or starting an assignment. Direct-service personnel will be given disposable gloves, disposable CPR mask, and name badge to be used while on assignment for the agency.
 12. All personnel receive a formal written evaluation after three (3) months and annually thereafter. The employee's supervisor completes the written evaluations and provides a face-to-face conference with the employee. Each employee receives a copy of his or her evaluation and the original is placed in the employee's file. Evaluations are based on, but not limited to:
 - a. Observations through supervisory in-home visits
 - b. Adherence to agency policies and procedures
 - c. Patients' satisfaction or complaints
 - d. Performance relevant to adherence to job tasks and services plan requirements
 - e. Record of attendance and adherence to patient schedules

Created – 11/2018

Approved By: Valerie Janikowski

Reference(s): CMS 42 CFR –484.100; 484.115 (d-n), ACHC PD4-1A-PD4-2D, CHAP CI.5d, CII.1a; CII.1f; CII.7b, HRM.3.1, HRM.4.1, TJC HR.01.02.05; LD 04.03.09 EP2-10; HR.01.02.07, EP1-2, 5

Valerie Janikowski, RN, BSN [Attachment #8]
P.O. Box 631732
Lana`i City, HI 96763
Phone: Home (808)565-7805, Cell (760)362-2750
janikowskis@gmail.com

Objectives: To continue my career as a Registered Nurse in a diverse and challenging environment, while enhancing my skills and abilities as a professional and providing quality care for every client.

Personal Statement: Having worked in a remote rural setting, the experience has allowed me to provide clinical and administrative nursing care to the overall community, in many nursing specialties to some degree. These opportunities have allowed for a broad nursing experience, as well as, professional and personal enrichment which I desire to continue to pursue.

Professional Experience:

- 7/16/18-Present Contracted Registered Nurse, Arcadia Home Health Lana`i
Provide case management, home care, or home health services for all patients of Lana`i community as needed, as directed by organization leadership, and/or community healthcare providers. Direct and supervise certified nursing assistants. Oversee administrative and clinical activities under the direction of Home and Community Based Services Director and organization leadership. Advocate for service support and ongoing long-term care needs for the community. Assist with grant writing, as needed.
- 1/1/18-7/15/18 Associate Director, Na Pu`uwai/Ke Ola Hou O Lana`i
Provide clinical and organizational expertise as a member of the Executive Team. Responsible as the Chair of the Continuous Quality Improvement (CQI) strategy efforts. Identified to act on behalf of the Executive Director as needed. Continue with Clinical & Program Director for all clinical programs and direct leadership for Lana`i services.
- 10/09-12/17 Nurse Case Manager/Clinical & Program Director, Na Pu`uwai/Ke Ola Hou O Lana`i
Provide case management, home care, or home health services for all patients of Lana`i community as needed or directed by Na Pu`uwai Medical Director, organization leadership, and/or community healthcare providers. Direct and supervise certified nursing assistants/community health workers. Oversee administrative and clinical activities under the direction of Na Pu`uwai leadership and the Medical Director.
- 12/08-4/09 Nursing Supervisor, Kwajalein Hospital
Act as a consultant and resource to the Nurse Manger/Director of Nursing and Primary Resource Nurse. Provide orientation, guidance, and/or direction to the Nurse Manager, Resource Nurses, Chief Medical Officer, and Hospital Administrator for the overall nursing functions for Kwajalein Hospital. Assist with recruitment of nursing staff members. Provide administrative and clinical support to the Hospital Administrator and Chief Medical Officer on projects as assigned, to include but not limited to policy and procedure completion, review and revision, child and youth services inspection completion and oversight, QI/Six Sigma mapping and process improvement analysis, and coordination and oversight of bimonthly Diabetic Clinics. Assist with pre-natal care for obstetrical patients as required. Function and assume

Valerie Janikowski, RN, BSN
P.O. Box 631732
Lana'i City, HI 96763
Phone: Home (808)565-7805, Cell (760)362-2750
janikowskis@gmail.com

call as circulating or scrub nurse as required. Function as primary care nurse of obstetrical patients during all stages of labor as required. Function as primary care nurse for patients of all specialty needs from Medical Surgical to ICU as required.

7/05-12/08

Nurse Manager/Director of Nursing, Kwajalein Hospital

Directly reported to the Hospital Administrator and the Chief Medical Officer. Responsibilities: Direct, supervise and participate with overall flow of patient care for the nursing department. Direct and supervisor medical reception and medical records department functions and personnel. Recruit and retain department personnel, facilitate required employment reviews and evaluations including commendations and disciplinary actions as required. Assist Hospital Administrator with budgetary management for all departments as assigned. Participate as an active chairperson and member of multiple committees; nursing and multi-disciplinary. Ensure compliance with JCI regulations; facilitate and oversee quality assurance adherence and process improvement activities for nursing, medical records, and reception. Interface with ancillary departments, EMS, US Army personnel, and RMI medical staff to assist with coordination of various administrative and clinical needs. Facilitate staff, patient, and community education including but not limited to coordination and oversight of bimonthly Diabetic Clinics, coordination of staff development/education, and coordination of health training to school services staff. Initiate and assist with pre-natal care for all obstetrical patients. Function and assume call as circulating or scrub nurse as required. Function as primary care nurse of obstetrical patients during all stages of labor as required. Function as primary care nurse for patients of all specialty needs as required.

7/00-7/05

Outpatient Department Nurse Manager, Kwajalein Hospital

Responsibilities: Direct, supervise and participate with the flow of patient care within the outpatient department to include but not limited to the emergency room and medical reception. Direct, supervise and participate with school nursing requirements. Function as direct supervisor for the staff employed within the department, facilitate annual employee review and evaluations. Initiate and assist with pre-natal care for all obstetrical patients. Function as primary care nurse of obstetrical patients during all stages of labor as assigned. Schedule and coordinate surgical and outpatient procedures. Function and assume call as circulating or scrub nurse as assigned. Active participant and member of multiple committees; nursing and multi-disciplinary. Interface with ancillary departments, EMS and RMI medical staff to assist with coordination of various issues. Provide coverage for Occupational Health Nurse as needed. Assume Director of Nursing responsibilities as assigned.

1/00-7/00

Staff Nurse, Kwajalein Hospital

Responsibilities: Primary care giver for patient care assignments as designated. Provide direct patient care within the scope of practice for a Registered Nurse.

4/99-1/00

Charge Nurse/Clinical RN Supervisor, Western Arizona Regional Medical Center

Valerie Janikowski, RN, BSN
P.O. Box 631732
Lana`i City, HI 96763
Phone: Home (808)565-7805, Cell (760)362-2750
janikowskis@gmail.com

Responsibilities: Direct and participate in the care of all patients, of all ages on the assigned unit. Act as designee of the unit manager as assigned. Assist physicians and floor nurses when necessary. Staffed unit appropriately for daily assignments. Completed unit staff schedule.

Education:

8/07-8/09 Bachelor of Science in Nursing, Florida Hospital College of Health Sciences

1/93-5/97 Associates Degree in Science-Nursing, Mohave Community College

Licenses: Licensed as a Registered Nurse in Hawaii

Affiliations:

Council on Aging (COA) Board Member for Maui County - Lana`i Seat
Lana`i Hawaii Community Benefit Fund Advisory - Board Member
Lana`i Aging Network Council (LANC) - Committee Member

References: Available upon request

CAROL J. ONUMA
P.O. Box 630242
250 Kooloaula Place
Lanai, Hawaii 96763
(808) 565-6379
onuma@aloha.net

Appendix #9

Objective: R.N. in Mother Baby Care Unit

Qualifications: Experience caring for women in first 2 hours post partum
Certified Childbirth Educator
Assist in WIC program on Lanai

Professional Experience:

12/02-Present Lanai Community Hospital
Lanai, HI
Staff nurse long term care, acute & limited ER coverage

9/00-7/01 Lanai Community Dialysis
Lanai, HI
Staff and Charge Hemodialysis Unit

10/99-11/04
&
12/91-05/97 Castle & Cooke Resorts
Lanai, HI
Massage Therapist at resort hotel

09/96-10/99 Lanai Family Health Center
Lanai, HI
Clinic nurse and clinic staff educator

03/92-09/96 Maui AIDS Foundation
Wailuku, HI
Certified AIDS educator on Lanai

09/83-11/87 Kapiolani Women and Children's Medical Center
Honolulu, HI
Staff and relief charge nurse in Recovery Room and Surgicenter

01/83-05/83 St. Francis Medical Center
Honolulu, HI
Staff nurse in Hemodialysis

Hawaii
Department of Commerce & Consumer Affairs
Nurse Aide Certification Program

<i>Original Certification Date</i>	<i>Expiration Date</i>	<i>Certification #</i>
6/24/2014	6/30/2020	HI000006838

Issue this certification to:
ANABEL R RAQUENO


 Signature of Nurse Aide



Appendix #10


Your name is listed as active on the Hawaii State Nurse Aide Registry. To remain active on the Registry, you must work at least 8 hours of paid employment during the last 24 months prior to your certificate expiration date. If you qualify for renewal, your renewal period will be for two years from your last reported date of employment. Your nurse aide state certification must be renewed upon expiration.

ANABEL R RAQUENO
 PO BOX 631649
 LANAI CITY, HI 96763

HAWAII
DEPARTMENT OF COMMERCE & CONSUMER AFFAIRS
 CERTIFIES THAT
ANABEL R RAQUENO

has successfully completed the requirements for State Certification as a certified nurse aide.

CERTIFICATION NUMBER	ISSUE DATE	EXPIRATION DATE
HI000006838	6/24/2014	6/30/2020



VOID IF ALTERED NON-TRANSFERABLE

Attachment #11

CNA TRAINING INTERNATIONAL (CTI)

Certificate of Professional Achievement
is awarded to



Uribita L. Cappal

In Completion of 150 Hours of the

Hawaii State Certified

Nursing Assistant Training Course

(CNA - Certified Nursing Assistant)

DATES: June 17, 2008 TO July 24, 2008

Aiea, Hawaii
Place



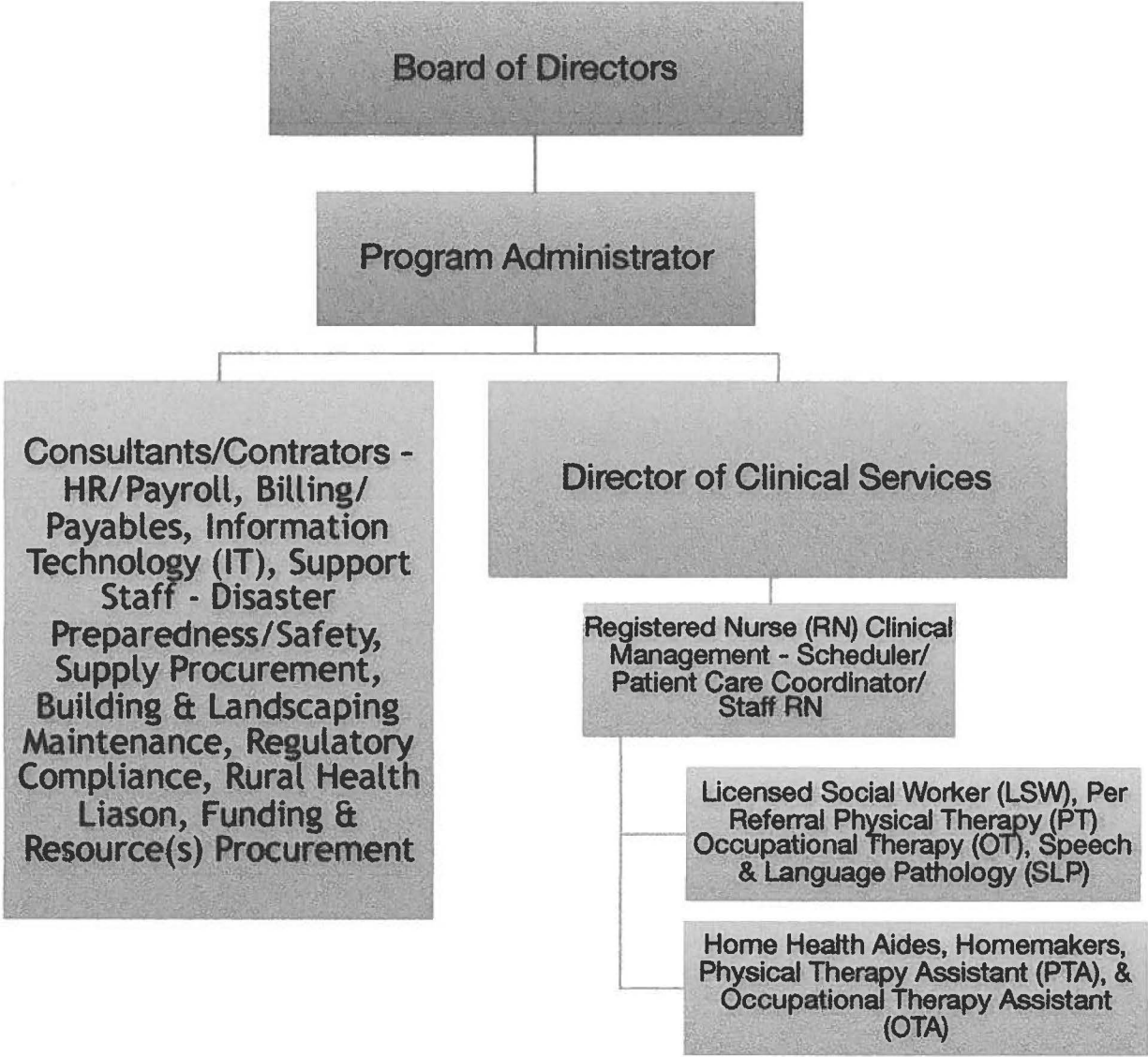
Digna A. Ray

Digna A. Ray, BSN, BSEd,
PCT, CNA
CEO/President/Founder
Director/Instructor

Rosalia Crisostomo
Rosalia Crisostomo, RN
Supervising Nurse/Instructor

Marylou Ancheta
Marylou Ancheta, RN
Supervising Nurse/Instructor

Lana'i Kina'ole Organizational Chart





STATE OF HAWAII
DEPARTMENT OF HEALTH

LICENSE

ARCADIA HOME HEALTH SERVICES LANAI

is hereby granted a license to operate a

Home Health Agency


at 730 Lanai Avenue, Suite 120/122, Lanai City, Hawaii 96763

with a capacity of N/A *beds. This license is valid for* Six Months

ending June 30, 2019 *unless revoked for just cause.*

This license is granted in accordance with provisions of the State Public Health laws and regulations.

Effective Date: January 1, 2019

By  *Dire*

Date Issued: December 12, 2018

Office of Health Care Assurance

OHCA # HHA-62

License is not transferable.

Attachment #14

January 3, 2019

To Whom it May Concern;

Please accept this as written support advocating for Lana`i Kina`ole Home and Community-Based Services (HCBS) in particular licensed Home Health and Home Care services, for Lana`i residents.

A team of nurses and certified nursing assistants have been providing Home Care and Home Health through a Hawaii state approved Home Health license, in partnership with Arcadia, since July 2015. The Home Health Services will be provided by many of the same providers while working under a new business Lana`i Kina`ole Inc as The Home Team.

Until we are able to acquire adequate funding Lana`i Kina`ole Inc. is contracting one (1) full time registered nurse (RN), one (1) part time RN, and pursuing employment for two (2) part time nursing assistants to continue with the existing case load. Unfortunately, our staffing level limitations will impact the number of clients who will be able to be served, as well. However, everyone involved in this project is working relentlessly to secure funding through grants, donations, foundations, etc. at which time we hope to be able to increase our staffing and increase the amount of clients we can admit to our services.

Your support and advocacy are required and the Lana`i community support is essential to pursue funding to implement these critical healthcare services. Consider a signature on this letter as promoting and expressing full cooperation, for future services HCBS with Home Health and Home Care services, on Lana`i.

Sincerely,

Supporters of Lana`i Kina`ole & HCBS with Home Health Services, on Lana`i

Elsie Morita
Carol Onuma
Rose Jane Ancheta
Chrystle Morita
Raina Mirafuentes
John Janikowski
Uribita Cabatu
Anabel Raqueno
Jessica Montana
Wallace Hanog Sr.
Judy Ulch
Irene Graham
Joe David

Letter of Support for Home Health Services for Lanai/Lana'i Kina'ole Inc.

Personal Testimony

Our family had the need to have Home Health Services come to our home and service my husband twice in a year. He had a total knee replacement surgery to his right knee done on May 2016. A few months passed in his recovery, when he started a staph infection in that knee that required him to be started on IV Antibiotic treatments. He needed to have a procedure done to insert a pic line for his infusion treatment. Then it wasn't necessary for him to be hospitalized to do his treatments, but for him to be discharged to come home to Lana'i, our community needed to have a Home Health Agency to assist him with Nursing needs, like blood draw for labs, weekly dressing changes to his pic line, be available to adjust his dosage when it was needed and to check our supplies. If Home Health Services didn't exist, we wouldn't be able to come home. We would be more of a hardship staying in Oahu for the full 8 weeks treatment. We are very fortunate to have medical coverage for Home Health Services so we were able to come home to have him heal better.

He was very fortunate that he recovered from the staph infection while he was at home with the help of the Home Health Nurses and staff. Unfortunately, after a couple of months, he again needed another knee replacement surgery in the same knee.

This time the doctor needed to change the prosthetics. After surgery, he was admitted to the Rehab of the Pacific Hospital to get intensive therapies to heal correctly. This was during 2017 Thanksgiving holiday. About a month later, right before Christmas, he was air lifted by air ambulance to Oahu because he had complications again. Surgery was done again because he had encountered another staph infection. But the doctor was unable to change the prosthetic, he only could clean and change what was removable.

For the second time, he was started on IV antibiotics for another 8 weeks. Two days after the New Year celebration, we returned home because Lanai Home Health Services were called in his care again. Which we were very grateful because we could return home again knowing the Home Health Services were available to assist him and I could go back to work knowing that the Nurses are right there

Lana'i needs Home Health Services so those that require Home Health Services after Hospitalization can come home to recuperate. This service will help alleviate hardships for families with financial difficulties, sheltering because they don't have family to stay with, transportation needs to go to and from treatments and meals.

Having Home Health Services in our Community makes a whole lot of difference for all of us that live on Lana'i.

Respectfully submitted,
Gloria J. Alonzo
P.O Box 630175
Lanai City, Hi 96763
Cell: 563-1334
gjalonzo@gmail.com

Attachment #14

To Whom it May Concern,

As a Kanaka Maoli I feel the need for Home Health Care is extremely valuable because I am aging and disabled. Among other medical concerns I have recurring diabetic foot ulcers that need care from the Lana`i Kina`ole RN every day. Previously, I received this care from the same nurses who originally worked at KOHOL. I also require regular monitoring on the status of my other medical conditions.

I know I am one of many who required professional care and supportive services on Lana`i. This is a small island and yet, especially with our older population, this type of nursing care is a must. For me I was forced to spend an extra 4 days in the hospital because there were questions about the care being in jeopardy, on Lana`i. My conditions are so many and so serious that I would need to live on another island, to receive the care required if professional services are not available. I want to remain on Lana`i, living in my home as long as I can, and Lana`i Kina`ole will allow this to happen. Lana`i is a small island with limited resources, but now that Lana`i Kina`ole has been formed we need to support this program. It will allow the people of Lana`i to receive professional and supportive care by RNs and nursing assistants, as needed.

In conclusion, Lana`i NEEDS a grant for the services and staff to ensure Lana`i Kina`ole Inc. can guarantee to provide.

Sincerely,

A handwritten signature in black ink that reads "Wallace Hanog". The signature is written in a cursive style with a long, sweeping tail on the letter "g".

Wallace Hanog

Attachment #14

Letter of Support for Lana'i Kina'ole

HOME CARE NEEDED ON LANA'I

The air is humid and thick and the plane is late as usual at the small airport on the Rural community of Lana'i in Hawaii.

Within 2 Days of my Dad Gene arriving on Lana'i from Las Vegas after a stroke and financial difficulty, it was crisis mode for me and my family, which lasted for Ten years. The family on the mainland close to him would not help.

If there had been a Health Care Agency or Home Health on Lana'i this would not have been as stressful. We had no medical experience. With each procedure from toe removal from diabetes, vein bypasses in legs, 2 mechanical heart valves, pacemaker, and an ostomy due to colon cancer, it was a continual struggle. The Home Health would have been a blessing and he would not have had to stay in a care home in Oahu for wound care not to mention the expense of flights to Honolulu, hotel and car rentals to be with him. We reached out to every agency on Lana'i that would help: public health, MEO, Straub clinic (the doctor was fantastic with Gene)

We had tried to have Gene in Maui at assisted living, and the first month there he got food poisoning and the second month he had blood poisoning not to mention Maui Doctors did not accept new patients with Medicaid or Aloha Care.

With that, we moved him back on Lana'i and relied heavily on friends to help us, so we could honor his wish to age in place. We need support for these critical services on Lana'i.

Mahalo
Sherry Menze
Lāna'i Resident