

House District 51

Senate District _____

THE TWENTY-FOURTH LEGISLATURE
HAWAI'I STATE LEGISLATURE
APPLICATION FOR GRANTS & SUBSIDIES
CHAPTER 42F, HAWAI'I REVISED STATUTES

Log No: 148-O

For Legislature's Use Only

Type of Grant or Subsidy Request:

GRANT REQUEST - OPERATING

GRANT REQUEST - CAPITAL

SUBSIDY REQUEST

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

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

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

STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST

AND PROGRAM I.D. NO. _____

1. APPLICANT INFORMATION:

Legal Name of Requesting Organization or Individual:
Ke Ola Mamo

DbA:

Street Address:
**1505 Dillingham Boulevard, Room 205
Honolulu HI 96817**

Mailing Address:
**1505 Dillingham Boulevard, Room 205
Honolulu, HI 96817**

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name JOELENE K. LONO

Title Executive Director

Phone # (808) 848-8000 ext. 231

Fax # (808) 848-8001

e-mail jlono1@aol.com

3. TYPE OF BUSINESS ENTITY:

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

7. DESCRIPTIVE TITLE OF APPLICANT'S REQUEST:

NATIVE HAWAIIAN HEALTH & WELLNESS

(Maximum 300 Characters)

4. FEDERAL TAX ID # _____

5. STATE TAX ID #: N/A

6. SSN (IF AN INDIVIDUAL): N/A

8. FISCAL YEARS AND AMOUNT OF STATE FUNDS REQUESTED:

FY 2007-2008 \$ 250,000

FY 2008-2009 \$ 250,000

9. STATUS OF SERVICE DESCRIBED IN THIS REQUEST:

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

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

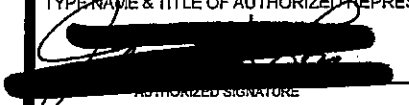
STATE \$ _____

FEDERAL \$ 2,392,994

COUNTY \$ _____

PRIVATE/OTHER \$ _____

TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE:



AUTHORIZED SIGNATURE

JOELENE K. LONO, EXECUTIVE DIRECTOR

NAME & TITLE

1/28/08

DATE SIGNED

Application for Grants and Subsidies

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

I. Background and Summary

Background

Ke Ola Mamo is the Native Hawaiian Health Care System on O`ahu. Established in 1992 under the Native Hawaiian Health Care Improvement Act, Ke Ola Mamo is committed to improving the life and health of Native Hawaiians through a system of culturally sensitive services, intervention, advocacy, outreach, education and early detection screenings. In 2006, Ke Ola Mamo provided services to patient care services to 3,180 individuals with 12,113 encounters.

Goals and Objectives

In order to address the needs of our community, Ke Ola Mamo has developed the following goal and objectives which are in line with Healthy People 2010.

1. Decrease health disparities of Native Hawaiians
 - a. Increase access to health care services
 - b. Increase overall health and wellness of Native Hawaiians

To address the goal and objectives, Ke Ola Mamo focuses health access and provision of services to all Native Hawaiians through our skilled team of Community Health Outreach Workers, Certified Fitness Trainers, Clinical Team, Primary Care Team, Case Managers, and Dental Services.

Ke Ola Mamo enrolls and assesses every client, develops a client-centered care plan and provides appropriate referrals as identified by the client. Ke Ola Mamo's approach to service delivery is to work with the client and develop an action plan. Each client is actively case managed by one or more members of our team.

Purpose

The purpose of this request is to address the declining health of the Native Hawaiian communities on the island of O`ahu. Our intent is to increase accessibility of health and wellness programs to underserved areas through the direct care, increase awareness of available health services, and provide health awareness opportunities. Ke Ola Mamo is requesting \$250,000 to support our current efforts.

Need

Native Hawaiians are a people at risk, falling below almost any measure of social, economic or physical well-being when compared with other ethnic groups in the state. Native Hawaiians continue to suffer disproportionately from morbidity and early mortality due preventable “lifestyle” diseases. Native Hawaiians continue to have the lowest life expectancy rate in the state compared to other ethnic groups and the highest mortality rate due to cardiovascular disease, cancer and diabetes.

Native Hawaiians make up 20% (239,655) of the states population of which 63% (152,767) reside on the island of O’ahu (Office of Hawaiian Affairs Databook, 2006). Native Hawaiians have the poorest health outcomes, often seeking medical services late resulting in poor medical outcomes. Data from the Hawaii Department of Health, Office of Health Status Monitoring, Hawaii Health Survey (2005) indicates that Native Hawaiians have a higher diabetes and hypertension prevalence compared to Caucasians (Table 2). Furthermore 37.2% of Native Hawaiians rate their overall health status as “good” compared to 37.9% of Caucasians who rate their overall health status as “very good” (Hawaii Department of Health-Behavioral Risk Factors Surveillance System, 2004).

Table 1. Prevalence of Lifestyle diseases by ethnicity

	Hawaiian	Caucasian
Diabetes	46.5	30
Hypertension	111	110.2
High Blood Cholesterol	85.6	145.7

Native Hawaiian life expectancy is 6 years less than other ethnicities that have a life expectancy of 80 (Health Trends in Hawaii, 2006). In general, Native Hawaiians are a relative young population with 38% between the ages of 25-54 and 31% between the ages of 0-14 (U.S. Census Bureau, 2000). According to the Hawaii Department of Health, Vital Statistics Report (2004) 22% of Native Hawaiian deaths occurred between the ages of 50-79. Causes of death include cardiovascular diseases, cancers and complications related to diabetes.

Over the past 3 years, Ke Ola Mamo has actively engaged in assessing the needs of the community. In 2005, Ke Ola Mamo conducted a windshield survey of the Waianae Coast. The findings indicate that the Waianae coast has limited safe resources (i.e., fitness facilities, recreation centers, etc.). To further validate the windshield survey findings, focus groups and informant interviews were conducted and participants expressed that the community is not safe to walk in, sidewalks are have inadequate lighting and that community centers are run down.

In 2007, Ke Ola Mamo conducted an assessment of the Waimanalo Hawaiian Homes Community to assess cancer screening adherence. The findings indicate that those surveyed adhere to recommended guidelines; however tobacco usage is high and the community has limited access to health and wellness programs and facilities.

A similar observation can be made for the Ko`olauloa Community in which access to health and wellness programs are limited or non-existent.

In order to reverse the trend of early mortality related to cardiovascular disease, diabetes and cancer, Ke Ola Mamo is committed to proving Native Hawaiians with access to health care services including primary health care, inclusive of dental, medical and behavioral health; comprehensive case management; and health promotion/disease prevention through a 3-tier community-centered model that provides services at the community, group and individual level. The community level enables health awareness to occur at community health events. The group level provides health education to clients of Ke Ola Mamo in conjunction with one of our existing programs/services. The individual level encourages active follow up and case management on behalf of the client and is provided primarily by our outreach and fitness staff.

The adoption of the 3-tier model will allow Ke Ola Mamo to 1) Improve access to primary care services (i.e. medical, dental, behavioral health, etc.) and 2) Provide cultural health promotion/disease prevention programs (i.e. community awareness, group health education, access to traditional healing practitioners, lifestyle programs, etc.).

Target Population

According to the 2006 Native Hawaiian Databook (OHA, 2006) a total of 152,767 Native Hawaiians reside on the island of O`ahu. Approximately 53% of Native Hawaiians reside in Urban-Honolulu, primarily in the Ewa/Kapolei districts, followed by the Ko`olaupoko district, Waianae and Ko`olauloa (Table 2).

Table 2. Ke Ola Mamo Service Districts & Percent of Native Hawaiians¹

Ko`olauloa (Kaena Point to Kualoa Point not to include Wahiawa Town)	6%
Ko`olaupoko (Kualoa Point to Makapu`u Point)	23%
Urban Honolulu (Makapu`u Point to Kahe Point to include Wahiawa Town)	53%
Wai`anae (Kahe Point to Kaena Point)	18%

¹Office of Hawaiian Affairs, Native Hawaiian Databook, 2006

Ke Ola Mamo's target population continues to be the Native Hawaiians residing on the island of O`ahu. The communities we presently serve continue to suffer disproportionately in their health and well-being. The continued provisions of our current services will enable our teams to provide quality care.

Geographic Coverage

Over the past 15 years Ke Ola Mamo has provided health and wellness services and programs to the Native Hawaiian community's on the island of O`ahu. Services are provided at one of our eight offices. Our Urban-Honolulu Service District is located at Dillingham Plaza, Waianae Service District is located at Pacific Shopping Mall, Ko`olauloa Service District is located at two locations, Kahuku Hospital, and Ko`olauloa Fitness Center in Hau`ula, Ko`olaupoko Service

District is located at two locations Ko'olaupoko Fitness Center at St. Matthew's Church, and Outreach Services Office in Waimanalo. In addition to our outreach and fitness centers, Ke Ola Mamo offers clinical services at Dillingham Plaza and Medical services at Kuakini Medical Plaza (Figure. 1). These offices are accessible by bus.

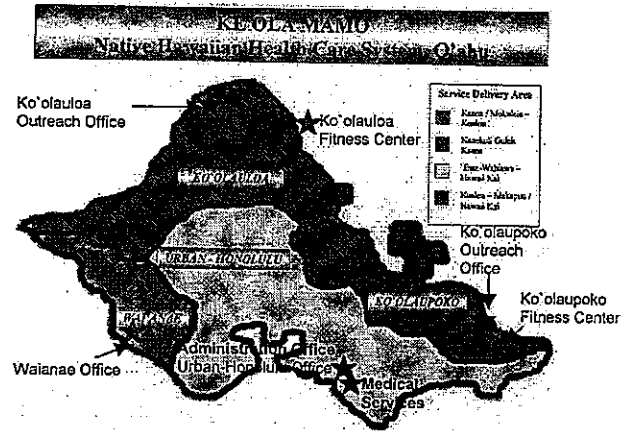


Figure 1. Ke Ola Mamo Service Districts

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.

1. Describe the scope of work, tasks and responsibilities;
2. The applicant shall provide a projected annual timeline for accomplishing the results or outcomes of the service;
3. The applicant shall describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results; and
4. The applicant shall 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.

Services

Ke Ola Mamo services include (1) Health Promotion; (2) Health Care Services; (3) Health Education. Health promotion services include outreach, traditional healing and Ho'oikaika

(Becoming Strong). Outreach services focus on access to health care, client advocacy, assistance with MedQuest and other social services, referrals to other agencies, and attendance at community health fairs. Traditional Healing services focus on lomilomi (Hawaiian massage). The Ho`oikaika Program is a health and wellness program which encourages healthy eating and regular exercise. Participants are provided with health screening, group or individual exercise program and access to our dietician and licensed social worker. Services are provided at our district offices.

Health care services include primary care, dental restoration, and access to our team of clinical providers. The primary care clinic is located at Kuakini Medical Plaza. The staff physician is a board certified in family practice. The dental restoration program collaborates with community dentists who provide dental restoration to eligible clients. Prior to treatment all clients are assessed by our dental case manager and Dental Consultant. The team of clinical providers includes licenses social workers, dietician, and community health nursing. These providers provide behavioral health counseling, nutrition counseling and disease management at each of our district offices.

The health education services include access to chronic disease health education materials, tobacco cessation services, and community health education speakers.

Services are provided by six Community Health Outreach Workers, six Certified Fitness Trainers, two Licensed Social Workers, one Community Health Nurse, one Registered Dietician, a Family Practice Physician, Medical Assistant and three Case Managers.

Ke Ola Mamo's scope of work will include the following:

(1) Increase access to health care services

Task	Responsibilities	Outcome
Inform Native Hawaiians on the island of O`ahu about Ke Ola Mamo services	Disseminate Ke Ola Mamo flyers, maintain website, press releases	10,000 Native Hawaiians will be provided with information about the agency
Ensure access to health care is provided to Native Hawaiians	Enroll individuals into Ke Ola Mamo, refer to appropriate services (internal and external), apply for state health insurance if applicable, case manage	250 Native Hawaiians will access health care services 65 will be referred to our medical clinic for services

(2) Increase overall health and wellness

Task	Responsibilities	Outcome
Ensure access to lifestyle program (Ho`oikaika, Traditional Healing, Clinical	Enroll individuals into program, provide referrals for counseling and health	175 Native Hawaiians will access Ke Ola Mamo's lifestyle program

Task	Responsibilities	Outcome
Services, health education, etc.)	education	
Provide health screenings in conjunction with Ho`oikaika	Screen individuals enrolled in Ho`oikaika for cardiovascular and diabetes, weight, body mass index and physical endurance Provide post screenings at 12 and 24 weeks after baseline	80 Native Hawaiians will participate in a health screening
Provide health education	Provide individual and group health education Provide nutrition education, disease management education, tobacco cessation and stress management	175 individuals will receive individual health education 300 individuals will receive group health education

Timeline

Services will be provided throughout the 12-month period. Services will be evaluated quarterly to assess service delivery, adherence to the scope of work and client satisfaction with services received.

Table 3. Timeline

	1	2	3	4	5	6	7	8	9	10	11	12
Provide scope of work	x	x	x	x	x	x	x	x	x	x	x	x
Evaluate services			x			x			x			x
Satisfaction surveys			x			x			x			x

Quality Assurance / Evaluation Plan

Ke Ola Mamo maintains internal control of their operations at all levels. Ke Ola Mamo adheres to established policies and procedures. On a quarterly basis, Ke Ola Mamo compiles data usage reports and conduct satisfaction surveys. In addition, Ke Ola Mamo monitors website usage, dissemination of agency flyers, and health education materials.

Ke Ola Mamo evaluates their programs based on process, impact and outcome measures. In addition Ke Ola Mamo conducts quarterly satisfaction surveys; monthly and annual frequency reports (i.e. Uniform Data Set, internal reports, etc.) and reviews clinical measures for client outcomes. Furthermore, Ke Ola Mamo utilizes these data sets to inform the decision making process related to program refinement. Evaluation is the responsibility of the members of the Administration Team and will be conducted throughout the year according to each methods frequency.

As an indicator for health improvement, Ke Ola Mamo monitors, client's service utilization

III. Financial

Budget

1. The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.
2. The applicant shall provide its anticipated quarterly funding requirements for the fiscal year 2008-2009.

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

Budget

Personnel Request

- Percent time is being requested for core members of our service team. These individuals are listed on the Personnel – Salaries and Wages worksheet.

Other current expenses

- Airfare, inter-island – no request
- Insurance – to cover a portion of the cost for our professional liability insurance
- Lease/Rental of Equipment – see “budget justification – equipment and motor vehicles”
- Lease/Rental of space – service is provided at each of our location
- Staff Training – training for new and continuing employees in counseling techniques, safety, and continuing education courses. Staff training enables employees to increase their knowledge base.
- Supplies – standard consumable office supplies (i.e. paper, pens, toner, etc.)
- Utilities – includes costs such as electricity, water, sewer, garbage
- Mileage reimbursement – reimbursement of program related mileage.

Requested funds will be used towards the provision of services to clients. These funds will be used towards the expense of facility costs, staff training, and supplies.

IV. Experience and Capability

A. Necessary Skills and Experience

Ke Ola Mamo has provided health programs and services for the past 15 years to the residents of O`ahu. Ke Ola Mamo employs qualified individuals within each department of the agency. All of the Fitness Trainers are certified; the Community Health Outreach Workers have extensive on the job training, life experience and/or completion of a Community Health Outreach Worker course. The professional staff possess the minimum degree in their respective field along

with State licensure in their area. The Case Managers have greater than 5 years of experience in the area of health and human services and demonstrates working knowledge of community resources.

As an agency, Ke Ola Mamo has worked collaboratively with various agencies, institutions and providers to ensure access to health care and health and wellness programs. These agencies include: 1) State of Hawaii Department of Health Programs; 2) Office of Hawaiian Affairs; 3) University of Hawaii at Manoa, John A. Burns School of Medicine 4) Community-based organizations (i.e. Alu Like, American Heart Association and American Diabetes Association); 5) Community Health Centers island wide; and 6) Private healthcare providers.

Ke Ola Mamo has received annual support from the Bureau of Primary Health Care, grant # HICCS00016. Over the past 15 years, Ke Ola Mamo has received additional support from various entities including: foundation grants (Campbell Foundation, Hawaii Community Foundation), research grants from Substance Abuse/Mental Health Service Agency (Integrated Substance Abuse and HIV Prevention for Asian and Pacific Islander Transgender and Men who have sex with Men from Grant # 5 H79 SP10147-03-2), and contracts with the John A Burns School of Medicine, Department of Pediatrics (Family Perspectives on Asthma) and Department of Native Hawaiian Health (PILI Ohana Project) and Papa Ola Lokahi. The funds received are used primarily to implement services to communities and develop new initiatives.

B. Facilities

Ke Ola Mamo has eight facilities throughout the island of O`ahu. Our Administration Office, located at Dillingham Plaza, is located on the second floor and has elevator access. In addition to housing our Administrative Team, the office houses our Clinical Team, Dental Service Department and case managers.

The Urban-Honolulu Office is located on the third floor of Dillingham Plaza. This office houses our Certified Fitness Trainer, Community Health Outreach Worker, and Traditional Healing Case Manager. This office has elevator access.

The medical clinic is located at Kuakini Medical Plaza in suite 807. This office houses our physician, front office clerk and Medical Director. This office has elevator access.

Our remaining facilities are located in our communities. The Waianae Office is located at Pacific Shopping Mall, Nanakuli. This facility houses our Certified Fitness Trainer and Community Health Outreach Worker. The office is located on the ground floor. The Ko`olaupoko district has two facilities. The Outreach Services Office is located in Waimanalo town on Kalaniana`ole Highway. This office is located on the ground floor. The Fitness Center is located at St. Matthew's Church on Ehukai Street. This office is located on the ground floor. The Ko`olauloa district has two facilities. The Outreach Services Office is located in the Plantation Wing of the Kahuku Hospital. The Fitness Center is located on Kawaipuna Street in Hau`ula.

Ke Ola Mamo services are provided at each of the above mentioned facilities. In addition, Ke Ola Mamo provides services within the community at community recreation facilities or other public venues.

V. Personnel: Project Organization and Staffing

A. Proposed Staffing, Staff Qualifications, Supervision and Training

Ke Ola Mamo employs a total of 25 employees. Direct service providers include: six Community Health Outreach Workers, six Certified Fitness Trainers, three Case Managers/Coordinators, two Licensed Social Workers, Registered Dietician, Registered Nurse, Physician, and Medical Assistant.

Administrators

The Executive Director is responsible for the overall decisions related to planning, organizing, budgeting, staffing, operating, controlling, evaluating, supervising, and negotiates contracts with the federal, public and private sector; works with the Board in areas of implementation and organization policies. This individual supervises members of the Administrative Team (Fiscal Officer, Operations Administrator, Programs Administrator, and Executive Administrative Assistant). The Executive Director's qualifications include a Master's in Social Work from an accredited University; five years of demonstrative responsibility in the field of administrative and coordination of program services; substantial experience in working with the Native Hawaiian community as related to the health and human services needs of the intended population; and ability to effectively work with the Board of Directors.

The Operations Administrator is responsible for agency coordination and implementation of day-to-day activities toward achieving the objectives of the project. This individual oversees the facilitation of the site operations which includes but is not limited to: (1) Supervision of program staff (community health outreach workers and fitness trainers) and provide any necessary training or guidance; (2) Completion of monthly, quarterly and annual district site reports; (3) Attend community health and human service meetings and trainings; (4) Monitor documentations relating to client/program records; (5) Process required forms and documents relating to internal operations. The Operations Administrator's qualifications include 3 years of college education in related field; 8 years of administrative experience in a human resources department with exposure to or experience with human resource and personnel policies; experience in a health care, health education, or human service position; demonstrates working knowledge of communities served; knowledge of Native Hawaiian cultural values and practices in the delivery of health care services; demonstrates ability to plan and implement strategies to meet program objectives/outcomes.

The Programs Administrator is responsible for coordinated, individualized, goal-oriented services leading to desired client outcomes. This individual directs, coordinates and monitors all program services and activities to ensure compliance with internal and contractual requirements inclusive of Quality Assurance, Commission on Accreditation for Rehabilitation Facilities

((CARF) and Health Insurance Portability and Accountability Act (HIPAA) compliance and Information Data System; serves as HIPAA Privacy and Security Officer; supervises Health Services Staff (Case Managers, Dietician, Information Technology Specialist, Nurse, Patient Support Staff, and Research Assistants). The Programs Administrator's qualifications include a Bachelor's and Master's of Science in Nursing with an emphasis on program development; 2 ½ years professional experience in a hospital including administrative/supervisory experience; knowledge of Native Hawaiian cultural values and practices in the delivery of health; demonstrates ability to plan, implement and evaluate program objectives/outcomes.

Ke Ola Mamo supervisors attend the Hawaii Employers Council Supervisor's Training. In addition, each supervisor works closely with new employees to train and mentor them.

Services Team

(The Community Health Outreach Worker is responsible for community outreach, health education, case finding, and case management. Case management includes client identification, enrollment and assessment; establishment of client service plan; identification of client health needs and service requirements; identification of client psychosocial barriers to accessing health care; arranging / conducting client transportation for medical needs; assisting with health promotion/education activities; referral to appropriate services; client follow-up and evaluation; maintains documentation according to established policies and procedures. Outreach workers provide services within the communities from 4 designated sites. Qualifications include diploma from an accredited high school or equivalent with one year training experience from a community, technical school or other demonstrated course work afforded through staff development workshops, training or development. Experience in a health care, health education, or human service position; demonstrated working knowledge of communities served; knowledge of Native Hawaiian Cultural values and practices in the delivery of service; demonstrates ability to plan and implement strategies to meet clients' needs and program objectives/outcomes.

The Certified Fitness Trainer is responsible to coordinate and implement day-to-day activities toward achievement of fitness objectives and outcomes. Conduct fitness assessment including strength, body fat, and endurance; develop individual client service plan; and provides case management. Responsible for health education on exercise and nutrition, conducts individual and group exercise classes; maintains documentation according to established policies and procedures; records and reports assessment results. Qualifications include Bachelor of Arts/Science degree in related field and/or personal training and group exercise instructor certification (American Council on Exercise (ACE) certification preferred). Experience in health care, health education, or human service position that involves individual and group fitness training; demonstrates working knowledge of communities served; knowledge of Native Hawaiian cultural values and practices in the delivery of health care services; demonstrates ability to plan and implement strategies to meet clients' needs and program objectives/outcomes.

(Case Manager is responsible to coordinate client care to achieve established client service plan. Provide health education to promote the adoption of a healthy lifestyle; maintains documentation according to established policies and procedures; responsible for agency coordination and

implementation of day-to-day activities toward achieving the objectives of the project. Qualifications include diploma from an accredited high school with one year training experience from a community, technical school or other demonstrated course work afforded through staff development workshops, training or development. Experience in a health care, health education, or human service position; demonstrates working knowledge of communities served; knowledge of Native Hawaiian cultural values and practices in the delivery of health care services; demonstrates ability to plan and implement strategies to meet clients' needs and program objective/outcomes.

Licensed Social Work is responsible for client case management including behavioral health assessment, education, and counseling to individuals who have mental health/substance abuse problems. Conducts group and individual counseling sessions as well as workshops on stress reduction, anger management, communication; family relationships; and substance use issues; maintains documentation according to established policies and procedures. Qualifications include Licensed Social Worker in the State of Hawaii and completion of a Master's in Social Work from an accredited university. Experience with the intended population; knowledge of Native Hawaiian cultural values and practices in the delivery of health care services; demonstrates ability to plan and implement strategies to meet clients' behavioral needs and program objectives / outcomes.

Registered Dietician is responsible for client case management to individuals who have health needs or problems; established client service plan; conducts client nutritional assessment. Provide counseling on nutritional practices to prevent disease and promote good; maintains documentation according to established policies and procedures. Qualifications include Registered Dietitian credentials/ licensure by the American Dietetic Association and completion of a Bachelor's degree program approved by ADA's Commission on Accreditation for Dietetics Education (CADE). Experience with the intended population; knowledge of Native Hawaiian cultural values and practices in the delivery of health care services; demonstrates ability to plan and implement strategies to meet clients' nutritional needs and program objectives / outcomes.

Registered Nurse is responsible for client case management to individuals who have health needs/problems. Identify client health care service requirements; referral to appropriate services; follow-up and evaluation. Conducts home assessments; conducts nursing assessment; provides client/group health education; performs clinical activities as required for assessment and screenings; maintains documentation according to established policies and procedures; review client records for completeness, accuracy and closure in conjunction with the case management team. Qualifications include Licensed as a Registered Nurse in the State of Hawaii and completion of a Bachelor of Science in Nursing from an accredited college or university. Experience with the intended population; knowledge of Native Hawaiian cultural values and practices in the delivery of health care services; demonstrated ability to plan and implement strategies to meet clients' health needs and program objectives / outcomes.

Physician is responsible for diagnosing and providing non-surgical treatment of diseases and injuries of internal organ systems. Provide medical oversight for all of Ke Ola Mamo's programs, directing credentialing process for all medical staff, reviewing quarterly outcome

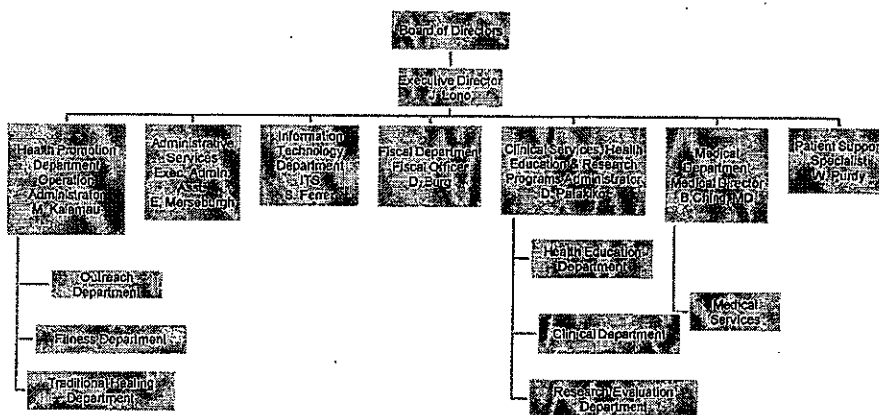
reports, and providing direction for staff as needed in the quality improvement process. Provide care to individuals and families in the Native Hawaiian consistent with goals and objectives; maintains proper documentation according to established policies and procedures. Qualifications include Licensed in the State of Hawaii as a Medical Doctor and graduate of a medical school accredited by the Liaison Committee of Medical Education (LCME). Experience one year paid professional experience with the intended population with one year of previous administrative experience; knowledge of Native Hawaiian cultural values and practices in the delivery of health care services; ability to evaluate and stabilize crisis situations.

Medical Assistant is responsible for assisting physician with client care including taking and recording vital signs and reason for visit, prepare client for examination, blood draws and administering medications as directed. Additional administrative responsibilities include scheduling appointments, maintaining medical records, billing, and coding for insurance purposes; maintains documentation according to the established policies and procedures. Qualifications include diploma from an accredited high school of equivalent; completion of a Medical Assistant Program, preferred certification as a Medical Assistant. Experience in health care and provision of basic health education; demonstrates working knowledge of communities served; knowledge of Native Hawaiian cultural values and practices in the delivery of health care services.

B. Organization Chart

Ke Ola Mamo is governed by a 12-member Board of Directors. The day to day oversight of the agency is the responsibility of the Executive Director who oversees the department administrators. Administrators are responsible for working with their respective teams and ensuring implementation of programs and services throughout our communities.

Ke Ola Mamo Organization Chart



VI. Other

A. Litigation

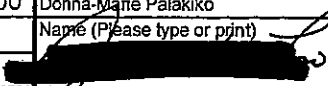

Not Applicable

B. Licensure or Accreditation

Ke Ola Mamo received a three-year re-accreditation from the Commission of Accreditation for Rehabilitation Facilities (CARF). This accreditation is effective November 2006 to November 2009 and is Ke Ola Mamo's third three-year accreditation. The accreditation is for services provided as health enhancement programs and includes all of Ke Ola Mamo's present services excluding medical services.

BUDGET REQUEST BY SOURCE OF FUNDS
(Period: July 1, 2008 to June 30, 2009)

Applicant: Ke Ola Mamo

BUDGET CATEGORIES	Total State Funds Requested (a)	(b)	(c)	(d)
A. PERSONNEL COST				
1. Salaries	124,750			
2. Payroll Taxes & Assessments	24,950			
3. Fringe Benefits	18,750			
TOTAL PERSONNEL COST	168,450			
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island	0			
2. Insurance	5,000			
3. Lease/Rental of Equipment	7,000			
4. Lease/Rental of Space	33,500			
5. Staff Training	1,150			
6. Supplies	25,000			
7. Telecommunication	1,400			
8. Utilities	6,000			
9. Mileage reimbursement	2,500			
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
TOTAL OTHER CURRENT EXPENSES	81,550			
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
TOTAL (A+B+C+D+E)	250,000			
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	250,000	Donna-Marie Palakiko 848-8000 ext. 227		
(b)		Name (Please type or print)  Phone		
(c)		 1/28/08		
(d)		Signature of Authorized Official Date		
TOTAL REVENUE	250,000	Joelene K. Lono, Executive Director Name and Title (Please type or print)		

BUDGET JUSTIFICATION PERSONNEL - SALARIES AND WAGES

Applicant: Ke Ola Mamo

Period: July 1, 2008 to June 30, 2009

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME BUDGETED TO REQUEST B	TOTAL SALARY BUDGETED IN REQUEST A x B
Certified Fitness Trainer	1	\$50,000.00	60.00%	\$ 30,000.00
Community Health Outreach Worker	1	\$35,000.00	30.00%	\$ 10,500.00
Registered Dietician (RD)	1	\$60,000.00	20.00%	\$ 12,000.00
Community Health Nurse (RN)	1	\$60,000.00	20.00%	\$ 12,000.00
Licensed Social Worker (LSW)	1	\$60,000.00	40.00%	\$ 24,000.00
Case Manager	1	\$50,000.00	30.00%	\$ 15,000.00
Physician	1	\$90,000.00	5.00%	\$ 4,500.00
Medical Assistant	1	\$35,000.00	5.00%	\$ 1,750.00
Programs Administrator	1	\$75,000.00	10.00%	\$ 7,500.00
Operations Administrator	1	\$75,000.00	10.00%	\$ 7,500.00
				\$ -
				\$ -
				\$ -
				\$ -
TOTAL:				\$ 124,750.00

JUSTIFICATION/COMMENTS:
 The requested position with the exception of the Administrators are direct service providers working with clients in the community or at the medical facility.
 A portion of the Administrator's salaries are requested as they oversee and monitor the implementation of services.

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Applicant: Ke Oia Mamo

Period: July 1, 2008 to June 30, 2009

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
Copy machine	1.00	\$7,000.00	\$ 7,000.00	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:	1		\$ 7,000.00	
JUSTIFICATION/COMMENTS:				
Lease of copier. Copier will be used to reproduce forms and health education materials.				

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
n/a			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:			\$ -	
JUSTIFICATION/COMMENTS:				

**BUDGET JUSTIFICATION
CAPITAL PROJECT DETAILS**

Applicant: Ke Ola Mamo

Period: July 1, 2008 to June 30, 2009

FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ANY OTHER SOURCE OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED		FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2005-2006	FY: 2006-2007	FY:2007-2008	FY:2008-2009	FY:2009-2010	FY:2010-2011
PLANS	0	0	0	0	0	0
LAND ACQUISITION	0	0	0	0	0	0
DESIGN	0	0	0	0	0	0
CONSTRUCTION	0	0	0	0	0	0
EQUIPMENT	0	0	0	0	0	0
TOTAL:	0	0	0	0	0	0
JUSTIFICATION/COMMENTS:						

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

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

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

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

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

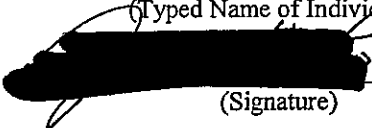
Further, a grant or subsidy may be awarded to a non-profit organization only if the organization:

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

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

Ke Ola Mamo

(Typed Name of Individual or Organization)


(Signature)

Joelene K. Lono, MSW

(Typed Name)

1/28/18
(Date)

Executive Director

(Title)