

House District 27

Senate District 13

**THE TWENTY- FOURTH LEGISLATURE
HAWAII STATE LEGISLATURE
APPLICATION FOR GRANTS & SUBSIDIES
CHAPTER 42F, HAWAII REVISED STATUTES**

Log No: 219-0

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 (LEAVE BLANK IF UNKNOWN):

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

1. APPLICANT INFORMATION:

Legal Name of Requesting Organization or Individual:
St. Francis Healthcare System of Hawaii
Dbas:

Street Address: 2226 Liliha Street, Suite 227
Honolulu, Hawaii 96817

Mailing Address:
P.O. Box 29830, Honolulu, Hawaii 96820-1780

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name PAMELA WITTY-OAKLAND

Title Chief Administrator,

Phone # 678-7258

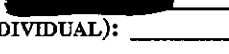
Fax # 678-7260

e-mail pamelaw@sfhs-hi.org

3. TYPE OF BUSINESS ENTITY:

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

4. FEDERAL TAX ID # 

5. STATE TAX ID 

6. SSN (IF AN INDIVIDUAL): _____

7. DESCRIPTIVE TITLE OF APPLICANT'S REQUEST:

FUND HEALTH CARE INITIATIVE TO PROVIDE CHRONIC KIDNEY DISEASE SCREENING, EDUCATION AND TRAINING TO REDUCE THE PROGRESSION LEADING UP TO STAGE FIVE HEMODIALYSIS TREATMENT WITH EMPHASIS ON OUTREACH TO RURAL COMMUNITIES.

8. FISCAL YEARS AND AMOUNT OF STATE FUNDS REQUESTED:

FY 2008-2009 \$ 1,531,000

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 \$ _____

COUNTY \$ _____

PRIVATE/OTHER \$ 2,058,200

TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE:



SISTER AGNELLE CHING, OSF, CEO
NAME & TITLE

1/31/08

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

This section shall clearly and concisely summarize and highlight the contents of the request in such a way as to provide the State Legislature with a broad understanding of the request. Include the following:

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

More than a century ago, Mother Marianne Cope and six Sisters of the Third Franciscan Order of Syracuse, New York, arrived in the islands in response to an urgent plea for their assistance in caring for the victims of Hansen's Disease. Mother Marianne and the Sisters began their service at the Branch Leper Hospital in Honolulu and five years later began serving in the Leper Settlement at Kalaupapa on Molokai.

Since 1883, the Sister's mission as advocates for the poor and disadvantaged continues through the work of St. Francis Healthcare System and its staff, fulfilling their historic role as visionaries and risk-takers. The St. Francis Healthcare System's history is steep with inventive methods for addressing health care needs, including organ transplants, hemodialysis, home care and hospice programs.

Today, the organization continues the ministry through development of programs to address the health needs of the underserved and marginalized, specifically the aging population of Hawaii and those of all ages afflicted with chronic disease.

2. The goals and objectives related to the request;

St. Francis Healthcare System is developing another innovative concept for the residents of Hawaii with "*Stay Healthy at Home*" – a program for Hawaii's expanding older adult population and patients of chronic diseases with services to allow both populations to stay at home for as long as possible. St. Francis is bringing health care to the people right where they live. The general concept of the program includes:

1. Ongoing training and educational sessions for chronic disease self-management that targets the appropriate population;

2. Wellness promotion by providing individuals with support services required at various levels of aging, such as medication management oversight by Pharmacist and Registered Nurse; and
3. Case management for specific health issues, such as chronic heart disease, diabetes, and kidney disease with referrals to community resources and support services.

Within the “Stay Healthy at Home” concept and consistent with promoting independent living, St. Francis Healthcare System (SFHS) is developing a major health care initiative in the area of chronic disease management to:

- A. address statewide issues for Chronic Kidney Disease patients with a focus on those have no access, limited access, and those who encounter hardship to gain access for health care services
 - B. increase the amount of available health screenings for CKD
 - C. develop an interconnectivity system between the labs, primary care physicians, St. Francis, NKFH and the University Of Hawaii John A. Burns School Of Medicine (JABSOM) through the use of an Electronic Medical Record
 - D. develop a research program for those afflicted with Chronic Kidney Disease (CKD) to develop best practice models aimed at slowing down the progression of the disease within each stage of the disease working with JABSOM
3. State the public purpose and need to be served;

Currently there are over 100,000 Hawaii residents who have CKD and another 100,000 who are predisposed to contract it. 2,300 of these patients are on some form of dialysis and 400 remain on the list for a kidney transplant.

According to the NKF, Hawaii has a 50% higher prevalence rate of the last stage of this disease...End Stage Renal Disease (ESRD) than the rest of the nation with 1,502 per million afflicted versus 1,040 per million nationwide. The number of patients in Hawaii increases an average of 5% annually. The cost of care and the physical toll treatment takes on these patients and their families are extremely high.

- The current cost of care for ESRD patients in Hawaii is \$125 million
- By 2011, based on the current cost of care and the NKF projections, costs of care for ESRD patients in Hawaii will increase to approximately \$145 million

The focus of the project is to promote education, detection, prevention, medical management and treatment for those afflicted with chronic disease through community outreach programs. Using this model, patients in the various stages of chronic disease would be able to seek supportive care through case management from a single source to receive the preventive care they need. Aside from treatment, the program will focus on stabilizing and slowing down the progression of disease.

As cholesterol screening alerts us to warnings signs of heart disease; as pap smears alert us to signs of cervical cancer, so will the screening for kidney disease warn patients of the need to modify lifestyles to prevent the development of chronic kidney disease. In conjunction with the goals to promote wellness and prevention, the Stay Healthy at Home program will educate and screen remote populations for early signs of kidney disease.

4. Describe the target population to be served; and

The target population will be those who either have no access, limited access, and those who encounter hardship to gain access for health care services.

5. Describe the geographic coverage.

This will be a statewide project with an emphasis on areas where there is limited access to healthcare.

6. Describe how the request will, in the case of a grant, permit the community to benefit from those activities; or for a subsidy, reduce the costs incurred by the organization or individual in providing a service available to some or all members of the public.

The community will have health care brought to them within their locale. The outreach program will offer screening, assessment, education, and chronic disease self-management training. Funding will:

- a. Provide and underwrite community health screenings;
- b. Establish an information technology infrastructure and data base that will collect and distribute information for chronic disease research and patient monitoring;
- c. Establish and develop a chronic disease research program with the NKF and University of Hawaii John A. Burns School of Medicine (JABSOM) to develop best practices protocol for earlier stages of the disease.

A future outcome will be to improve quality of life issues for chronic disease and their families/caregivers. Another anticipated result will be to stabilize and slow the progression of disease. Lastly, assistance is needed to provide resources for the accumulation of data for chronic disease research. Currently, only a limited amount of unique data exists in research data bases reflecting the Hawaiian, Asian and Pacific Islander population.

If we are able to achieve a 1% reduction in the progression leading up to Stage 5 ESRD, over a 10 year period of time the healthcare cost savings would equal \$71,000,000.

II. Experience and Capability

A. Necessary Skills and Experience

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

Much like its mission to help patients with Hansen's disease in Kalaupapa, this demonstration project is a continuation of St. Francis taking the lead to address the needs of a major chronic disease for patients located in remote areas of Hawaii and serves as an important component of the "*Stay Healthy at Home*" program addressing Hawaii's aging population and its needs.

As the major transplant center of the Pacific, St. Francis had been performing kidney transplants since 1969. It served as the only medical facility in Hawaii to perform kidney, bone and heart transplants. It has long been the mission of the Sisters of St. Francis to look at not only serving the poor and indigent through reactive medical care, but also to educate the community on the need for preventative health.

St. Francis' Renal Institute of the Pacific was formally established in 1971 providing dialysis treatment to CKD patients. Since then, program services were extended throughout the Hawaiian Islands to improve accessibility and enhance community education. As of 2006, the Renal Institute of the Pacific was the largest hospital-based dialysis facility in the nation. Renal Institute of the Pacific consisted of thirteen facilities statewide serving an active patient population of over 1,000 patients. While these assets were sold to Liberty Dialysis – Hawaii, LLC in 2006, St. Francis still maintains a seat on the Board to ensure that the mission Sister Marianne Cope started in the 1800's is perpetuated.

B. Quality Assurance and Evaluation

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.

St. Francis is working with the University of Hawaii John A. Burns School of Medicine's Department of Native Hawaiian Health to develop the appropriate protocols necessary to monitor and evaluate the efficacies this project.

This project is also subject to the policies and guidelines of the University of Hawaii's Institutional Review Board (IRB). As such, the IRB serves as an objective third party, an oversight committee, governed by Federal Regulations (45CFR46, 20CFR50, 21CFR56) with the purpose of protecting and managing risk to human participants involved in research. Although these regulations specifically apply only to federally funded research, the policy of the University of Hawaii is that all research conducted under its banner should meet the same standard. Following is a short list of specific aims of the IRB:

- To promote the safety and well being of human participants
- To ensure adherence to the ethical values and principles underlying research
- To ensure that only ethical and scientifically valid research is implemented
- To allay concerns by the general public about the responsible conduct of research

Using the results of the research and working with the NKF of Hawaii, St. Francis seeks to create best practice protocols that will have an impact on stabilizing or slowing the progression of chronic disease.

C. Facilities

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

St. Francis Healthcare System's administrative office is located on the island of Oahu at 2226 Liliha Street, Honolulu, Hawaii. This office will be responsible for the outreach program administration and oversight. It will also work to build the necessary information technology infrastructure needed to support this project.

The remote sites in the rural areas will be identified through collaboration with local community organizations. The sites will serve as a screening, assessment, education, and chronic disease self-management training center.

III. Personnel: Project Organization and Staffing

A. Proposed Staffing, Staff Qualifications, Supervision and Training

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

The Program will be run by an Administrator appointed by the St. Francis Healthcare System. The Administrator will work with qualified stakeholders to accomplish specific tasks as illustrated in the organizational chart. Because of the research content of the program, oversight will be in the form of the University of Hawaii (IRB).

B. Organization Chart

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

See attachment A and B.

IV. 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 or outcomes from this request.

- A. Describe the scope of work, tasks and responsibilities.

Advisory Board

To provide guidance and direction for the short, mid and long term vision of the project.

Administration (St. Francis Healthcare System)

The Administrator sets and implements the overall program and its policies. Other responsibilities include coordination with stakeholders as well as fund audit and disbursement.

Screening (National Kidney Foundation of Hawaii)

The NKF of Hawaii will provide the following screening services with appropriate annual follow-up for detection, surveillance and monitoring:

KEEP – Kidney Early Evaluation Program: Most comprehensive screening program for early detection and intervention. Services provided include blood pressure checks, blood testing for blood sugar, cholesterol, blood cell count, bone health and kidney function and urine testing for protein and blood.

KEDS – Kidney Education Detection Screening: Modified/Shortened version of KEEP without the blood testing and costs associated with lab work

KAPP – Group sessions to help individuals at the early stages of kidney disease develop skills to address kidney disease, diabetes and hypertension through diet, exercise and medical management.

Research (University of Hawaii John A. Burns School of Medicine)

The principal investigator for the project will be responsible for establishing protocols and developing guidelines in accordance with the IRB. This will be done in coordination with the NKF of Hawaii.

- B. The applicant shall provide a projected annual timeline for accomplishing the results or outcomes of the service.

Project Phases:

Phase 1 (December 2008)

Establishment of Program Administration through St. Francis Healthcare System
Start Research Fund Development with State, Federal and private institutions

Phase 2 (July 2009)

Set-up System Infrastructure
Health Screenings

Phase 3 (January 2010)

Develop avenues of Sustainability
Research with the University of Hawaii and JABSOM
Monitoring and Surveillance

Phase 4 (December 2010)

Inclusion of other Chronic Disease Management Programs

V. Financial

Budget

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

See attached forms.

VI. Other

A. Litigation

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

N/A

B. Licensure or Accreditation

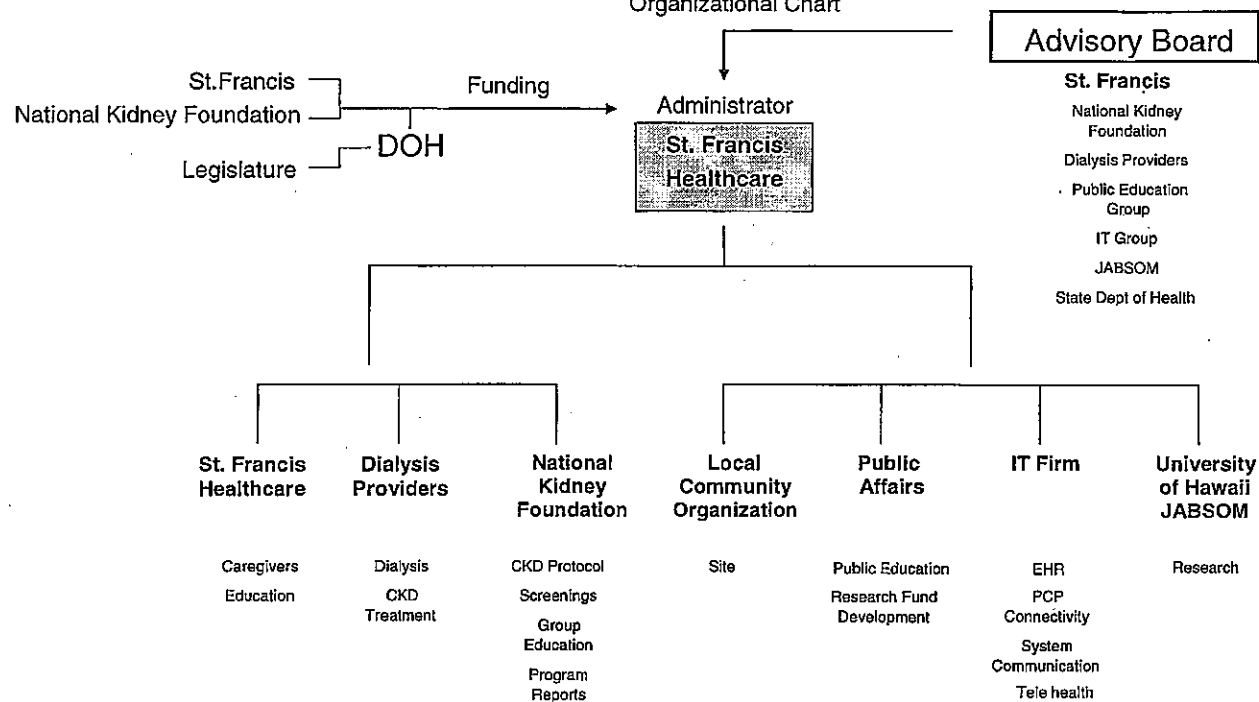
Specify any special qualifications, including but not limited to licensure or accreditation that applicant possesses relevant to this request.

The St. Francis Stay Health at Home program is staffed with a full time program director who is a registered nurse with ten year of experience in the local community providing home health skilled nursing level of care.

Attachment A

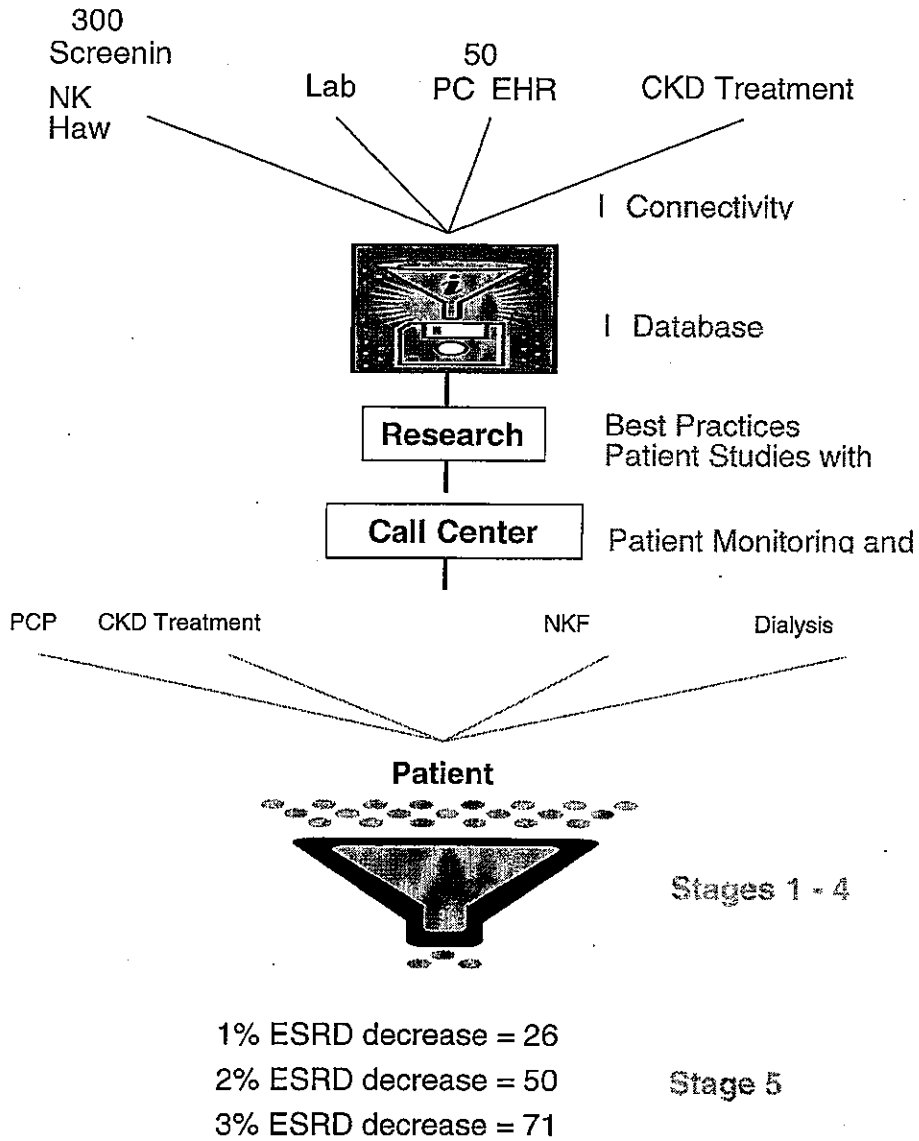
Chronic Disease Project

Organizational Chart



Attachment B

Inter-Connectivity Model for Screenings, Electronic Health Record, Call Center and Research for Chronic Kidney Disease




Proposed 2 year Budget

	YEAR 1	YEAR 2
Screenings (1500 @ avg cost of \$237 per)	355,500	355,500
Patient and Physician Education	110,000	110,000
IT Gateways (secure)	150,000	150,000
IT Server (secure)	100,000	0
IT Programming	250,000	50,000
IT Maintenance	50,000	75,000
IT Telehealth	100,000	100,000
JABSOM Research	175,000	200,000
Call Center	50,000	50,000
Total Screenings, IT and Research	\$1,340,500	\$1,090,500
Project Administration	286,000	192,200
Public Affairs Education	250,000	250,000
Research Fund Development	90,000	90,000
Total Administrative Costs	626,000	532,200
Total Project Cost	1,966,500	1,622,700

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

Applicant: St. Francis Healthcare System

BUDGET CATEGORIES	Total State Funds Requested	St. Francis Healthcare System	National Kidney Foundation of Hawaii	
	(a)	(b)	(c)	(d)
A. PERSONNEL COST				
1. Salaries				
2. Payroll Taxes & Assessments				
3. Fringe Benefits				
TOTAL PERSONNEL COST				
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island				
2. Insurance				
3. Lease/Rental of Equipment				
4. Lease/Rental of Space				
5. Staff Training				
6. Supplies				
7. IT programming & maintenance		425,000		
8. Utilities				
9. Screenings (1500 @ \$237 per)	711,000			
10. Patient & Physician Education	220,000			
11. JABSOM Research			375,000	
12. Call Center		100,000		
13. Project Administration		193,200	285,000	
14. Public Affairs Education		250,000	250,000	
15. Research Fund Development		90,000	90,000	
16				
17				
18				
19				
20				
TOTAL OTHER CURRENT EXPENSES	931,000	1,058,200	1,000,000	
C. EQUIPMENT PURCHASES	600,000			
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
TOTAL (A+B+C+D+E)	1,531,000	1,058,200	1,000,000	
SOURCES OF FUNDING	(a) Total State Funds Requested	1,531,000	Budget Prepared By:	
	(b)	1,058,200	Pamela Witty-Oakland	678-7258
	(c)	1,000,000	Name (Please type or print)	Phone
	(d)	0		1/31/08
TOTAL REVENUE	3,589,200	Signature of Authorized Official Date		
		Pamela Witty-Oakland, Administrator		
		Name and Title (Please type or print)		

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Applicant: St. Francis Healthcare System

Period: July 1, 2008 to June 30, 2009

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
IT Gateway server (secure)	2	\$150,000.00	\$ 300,000.00	
IT Server (secure)	1	\$100,000.00	\$ 100,000.00	
IT Telehealth	2	\$100,000.00	\$ 200,000.00	
		\$ -		
		\$ -		
TOTAL:	5		\$ 600,000.00	

JUSTIFICATION/COMMENTS:

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

JUSTIFICATION/COMMENTS:

**BUDGET JUSTIFICATION
CAPITAL PROJECT DETAILS**

Applicant: St. Francis Healthcare System

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						
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT						
TOTAL:				N/A		
JUSTIFICATION/COMMENTS:						

**DECLARATION STATEMENT
APPLICANTS FOR GRANTS AND SUBSIDIES
CHAPTER 42F, HAWAII REVISED 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, Hawai'i 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.

St. Francis Healthcare System of Hawaii
(Typed Name of Individual or Organization)



(Signature)

January 31, 2008
(Date)

Sister Agnelle Ching, OSF,
(Typed Name)

Chief Executive Officer
(Title)

