

OBJECTIVE

Seeking experience that will enhance my social work education, knowledge, and skills.

EDUCATION

Hawaii Pacific University
Bachelors of Social Work (BSW)
Graduation

Masters of Social Work (MSW)
In Progress - 24 hrs. completed.

The Community Colleges of the UH system
Pre-Nursing Courses
1/1999-12/2007

EMPLOYMENT EXPERIENCE

Department of Health Department of Human Services – Contract Monitoring and Compliance

1/16/2020-Current, Social Worker IV

Major Duties and Responsibilities:

1. Serves as the lead of a team that conducts on-site Inspection of Care Reviews in ICF-DD/ID facilities.
2. Reviews Department of Health (DOH), Office of Health Care Assurance (OHCA), annual findings report and plan of correction.
3. Collaborates with DOH in the decertification process (termination of an ICF-DD/ID facility provider) to assure safe and orderly transfer of residents.
4. Develops and maintains policies and procedures for the conduct of Inspection of Care reviews of all ICF-DD/ID facilities.

5. Arranges and coordinates federal audit of IOC reviews, studies federal report of findings, and prepares written response of any findings.
6. Receives and reviews DD/ID waiver application packet for Home and Community-Based Waiver Program.
7. Receives and reviews Incident Reports from all institutional nursing facilities including ICF-DD/ID.
8. Serves as a liaison with the State Ombudsman's Office, the Adult Protective and Community Services Branch, and the Medical Investigations Division on all matters involving the rights of facility residents.
9. Provides technical assistance as appropriate.
10. Receives and reviews monthly Medicaid ICF-DD/ID facility census reports.
11. Confirms Home and Community-Based Waiver admissions.
12. Acts as a consultant in providing support and technical assistance in the PASRR process regarding DD/ID individuals.
13. Serves as a team member that reviews, evaluates, and determines whether PASRR documents, resident's assessment's instruments, and psychosocial assessments are accurate and validates placement as necessary and appropriate, and demonstrates that resident's needs are met.
14. Receives and reviews DD/ID Facility application packet.
15. Receives and reviews re-evaluations for continued Home and Community-Based Waiver eligibility and Patient Evaluation for Re-admission to ICF-DD/ID Facility.
16. Consults with MQD Medical Director on any resident that does not meet or exceeds and ICF-DD/ID LOC and provides a copy of re-evaluation to DOH or facility as appropriate.
17. Participates and provides technical assistance with transitional care between State, (i.e. DOH) and State contracted entities, (i.e. ICF-DD/ID facilities and health plans).
18. Assists other HCSB staff on Community Integrated Services (CIS) and communicates with the Health Plans and other state agencies.
19. Assist the Electronic Visit Verification (EVV) requirement with other MQD internal staff, MCO Health Plans, and different provider types.

Department of Health Developmental Disabilities - Training Unit

2/25/2019-1/16/2020, Social Worker IV

Major Duties and Responsibilities:

1. Plans, organizes, and implements education training programs to meet the needs of DDD.
2. Plans, organizes, and implements training curriculums based on the needs and priorities of the division.
3. Ensure that training curriculum are designed to include the methodology and tools and materials required for the training.

4. Coordinate's scheduling of statewide training and orientation sessions.
5. Provides technical and consultative assistance for staff training and development, quality assurance, program effectiveness and efficiency.
6. Plan, organizes and implements ongoing education and training programs for DDD staff statewide, new employee orientation, and DD foster home caregivers.
7. Ensures educational opportunities are effectively communicated to DDD personnel.
8. Organizes and assists DD personnel with the development of learning opportunities for professional growth.
9. Develops and implements training curriculum for new employee orientations and annual trainings.
10. Develops and coordinates appropriate training for DD adult foster home caregivers and applicants in coordination with the certification unit.
11. Participates in public education and prevention activities through lectures, panel discussions, and conference participation on the topic of developmental disabilities and neurotrauma.
12. Participates in community informational sessions statewide on various topics pertinent to ID/DD.

Department of Health Developmental Disabilities – Case Manager

2/10/2014-2/25/2019, Social Worker IV

Major Duties and Responsibilities:

1. Case Assessment involves face-to-face contact with the individual with developmental disabilities/mental retardation and may involve family members and other interest persons as appropriate. It is a comprehensive assessment which identifies the individual's abilities, deficits, needs and wants.
2. Case Planning includes the facilitation of the collaborative development of an individual service plan in writing and addressing the needs of the recipient.
3. Ongoing Monitoring and Service Coordination
4. Coordinates, facilitates and attends meetings and conferences on behalf of the recipient. These meetings may include the individual and/or guardian, care and service providers, public and private agencies, etc.
5. Documents and bills for targeted case management activities following the rules and regulations of Hawaii Administrative Rules, Title 17, Chapter 1738.
6. performs other case management activities as person centered advocacy, outreach, public education, and advocacy for research development
7. performs other duties as assigned: attends and participates in meetings, conferences, and training as required; provides information/complies reports to administration regarding systemic problems and concerns; prepares correspondence, reports, and records as

necessary; completes necessary forms and progress reports to ensure proper documentation of quality standards of service.

Ann Pearl Nursing Facility

11/12/2012-2/10/2014, Social Worker

Essential Functions:

1. Identifies and assesses upon admission the resident's psychosocial, emotional, environmental, spiritual and support needs in order to assist in developing a plan of care designed to meet that patient's needs. Involves the resident and/or family in the plan of care. Reassessment as needed.
2. Provide psychosocial counseling and crisis intervention to facilitate effective coping/problem solving strategies in relation to illness/disability, death, and/or emotional and relationship problems. Monitors and develops care plans to manage residents with difficult behaviors.
3. Will meet with all residents on perspective case load every month. Maintains a complaint/issues log. Prepares a monthly report for the Administrator from the log including all follow-up to issues.
4. Manages PASSAR (Pre-Admission Screening and Resident Review) process by assuring that all residents have valid and accurate PASSAR in a timely manner. Assures all level II PASSAR's are obtained in a timely manner. Participates and prepares all documents for state agency upon request for review.
5. Participates in tracking level of care changes as needed.
6. Ensures completion of admission agreement with new residents and their families. Assists in orientation to the facility. Produces information necessary for resident's face sheet prior to admission.
7. Completes or ensures completion of the RAI (Resident Assessment Instrument) process for social services to include initial assessments, state/federal timed assessments, CAA's (Care Area Assessment) and care plans. Completes or ensures the completion of initial social services screening assessment and requires screening tools, i.e. geriatric depression and mini-mental assessments as needed.
8. Makes daily rounds. Meets with residents providing social service interventions daily and/or according to the plan of care.
9. Provided feedback to staff on issues that are psychosocially significant to assist the team in understanding the various behaviors that patients and families may exhibit; enhancing the care plan process through feedback.
10. Documents services and resident care activities according to established policy and procedures to assure timely and accurate completion of records. Oversees accuracy and timeliness of documentation by social services staff.

11. Involves resident and family in the discharge planning process. Evaluates patient/resident and family home, social situation and financial ability to provide what is necessary for continuity of care. Works with SSD (Social Service Designee) to ensure the coordination of appropriate community resources which support the resident's discharge goal. Performs discharge planning and completes discharge summaries/documentation or ensures they are completed for all residents.
12. Maintains abuse protocol and investigates all allegations of abuse. Informs the Administrator of the report of abuse as soon as reported.
13. Works with SSD and IDT (Inter-Disciplinary Team) to ensure Care Plan meetings occur. Attends Care Plan meetings & attends additional Family Meetings as needed.
14. Works with SSD to ensure family & resident meetings occur. Attends Family and Resident Meetings. Plans and distributes an approved agenda, produces meeting minutes and distributes within days of the meeting.
15. Working with SSD, investigates grievances, coordinates and attends family and resident conferences for grievances as necessary.
16. Recommends for selection, trains, orients and assigns department staff and manages. Performs performance evaluation and performance activities as appropriate.
17. Identifies training needs of department & facility and conducts/facilitates a minimum of two in-service trainings annually. May obtain appropriate resources to provide trainings.
18. Develops, revises and maintains all current forms and department policies and procedures in accordance with facility procedures.
19. Attends IDT, PI (Performance improvement), Safety, Management Team and staff meetings and all others as directed by Administrator. Appropriately provides input and makes recommendations regarding issues and resident care as appropriate.
20. Oversees management of lost and found items.
21. Participates in the survey process according to the procedures established by the facility.
22. Processes invoices for purchases in department. Is accountable for maintaining department performance within established budget. Provides input into budget process.
23. Develops tools, processes and standards to improve efficiency and effectiveness of department and facility. Make recommendations to ensure "best practice" in department.
24. Complies with all applicable statues, rules, regulations, policies and procedures.
25. Enhances own professional growth and development through participation in educational programs, current literature, in-service meetings and workshops. Attends all mandatory meetings.
26. Maintains confidentiality of resident information and the business of APNF.
27. Practices effective communication and interpersonal skills to enhance positive teamwork and relationships both internally and externally.
28. Answers resident call bells and alarms within scope of authority.
29. Willingly performs other duties as assigned or requested.

ALU LIKE, Inc

1/10/2012-4/1/2013, Program Specialist III

Duties and Responsibilities:

1. Interviews, orients and conducts intake activities or participants.
2. Maintains recruitment of participants.
3. Acts as a coach or facilitator for each participant; acts as a trusted intermediate for participants.
4. Assists participants in setting up their goals; reviews progress made monthly and calls any participant who has failed to make that month's meeting to discuss whatever situation(s) has prevented progress and/or makes the appropriate referral back to the originating agency.
5. Collects participant data electronically at the time of intake and records their observations and participant outcomes during subsequent follow-up and counseling.
6. Provides counseling and/or referral and/or direct assistance.
7. Acts as the point of contact for participants on matters relating to assistance to solve a host of personal, relationship, parenting, and other issues that arise in participants lives, regardless of relevance.
8. Balances their assistance/counseling with responses that empowers the participant to take charge, make their own decisions, and solve their problems through their own efforts.
9. Directs participants needing more in-depth counseling, treatment, legal advice, etc. to other services.
10. Helps participants through crisis that arise.
11. Participates in crisis management through proper recruitment procedures and case management.
12. Participates in staff training activities (data collection, account structure, reporting guidelines, and evaluation).
13. Networks with welfare agencies, non-profits and internal direct services staff for participant referrals.
14. Conducts outreach activities.
15. Conducts on-going participant follow-up activities.
16. Coordinates Financial Literacy Classes for participants and the public.
17. Monitors the completion of each training session by the participant.
18. Maintains a community-based information and referral service network which enables Native Hawaiians to access and obtain no cost or low-cost social services.
19. Provides networking information to beneficiaries on Hawaiian activities, general application processes, and eligibility information using various resources.
20. Facilitates referrals with telephone contacts to agencies and follow-ups with beneficiaries.

21. Recognizes "at risk" individuals/families and works directly with the individual/families in the development of a self-improvement plan with short-and long-term objectives with measurable outcomes.
22. Assesses the "at risk" individual's/family's service needs and guides the family back to the point of self-sufficiency with follow-up support. Networks with external agencies on to establish and implement processes for self-sufficiency.
23. Provides support for the individual/family participation in the implementation of the service and follow-up discreetly with services providers to assure service delivery.
24. Tracks and monitors beneficiary service needs and submits timely monthly reports on services received, gaps in service ability.
25. Provides general logistical support and information to ALU LIKE programs in coordinating and disseminating ALU LIKE's service information to individuals and groups.
26. Participates in community meetings and events to support the interfacing of local resources with ALU LIKE programs/projects.
27. Represents ALU LIKE at island meetings of public and private sectors to maintain organizational visibility and provide information to ALU LIKE.

PRACTICUM EXPERIENCE

Pali Momi Medical Center

June 2011-May 2012, MSW Practicum Student

Duties:

1. Psychosocial Assessments of assigned patients
2. Referral of patients to various agencies and support groups
3. Attending interdisciplinary meetings
4. Patient advocacy/patient rights
5. Shadowing of preceptor
6. Counseling/education of patient/family members
7. Death and dying issues
8. Advance directive education of patient/family members
9. Assist patient/family with various agency forms/applications for services
10. Crisis intervention

Lighthouse Outreach Center, Emergency Homeless Shelter

January 2010-August 2011, BSW Practicum Student

Duties:

1. Intake and Assessment

2. Case Management
3. Social Service planning
4. Monthly Budget Planning
5. Utilizing Community Resources
6. Utilization of generalist problem solving skills to help clients become independent functional members of our community
7. Resource Referral and Development Liaison
8. Orientation and Training of incoming Case Managers
9. Beginning Supervision Skills

VOLUNTEER EXPERIENCE

Institute for Human Services

February 2009-December 2009, Children's Center Volunteer

Responsibilities: Oversee homeless resident children ages 5-17 in The Children's Center, conducting craft and performance activities, help with reading comprehension and computer skills

Medical Reserve Corps, Oahu

June 2020-Current

PRE-SOCIAL WORK EMPLOYMENT HISTORY

Straub Clinic and Hospital

1/1999-1/2/2012, Clinical Assistant/CNA

Duties:

1. Filing and maintaining electronic medical records.
2. Performing computer skills in patient scheduling
3. Communication skills using appropriate medical terminology.
4. Monitoring Vital Signs including temperature, pulse, respiration and blood pressure.
5. Obtaining EKG tests and reports
6. Obtaining CBG tests and reports
7. Following appropriate legal and ethical professional conduct.
8. Assist Physicians and Registered Nurses with procedures
9. Direct Patient Care

University of Hawaii Student Health Service

11/2003-10/2008, Para-Medical Assistant II

Duties:

10. Front desk reception.
11. Answering phones and scheduling appointments.
12. Greet patients, completion of registration forms, and give instructions.
13. Filing and maintaining medical records.
14. Preparing and typing correspondence.
15. Processing, coding, and completing insurance claim forms.
16. Performing computer skills in patient scheduling,
17. Arranging for hospital admissions and outside referrals for the physician.
18. Obtaining Pre-Authorizations from Insurance Companies for Procedures
19. Calling prescriptions to the pharmacy for the physician.
20. Pregnancy and STI Counseling and Referral.
21. Communication skills using appropriate medical terminology.
22. Monitoring Vital Signs including temperature, pulse, respiration and blood pressure.
23. Obtaining EKG tests and reports
24. Following appropriate legal and ethical professional conduct.
25. Assist Physicians and Registered Nurses with procedures

Rehabilitation Hospital of the Pacific

6/2000-10/2003, Rehabilitation Nurse Aide

Duties:

1. Filing and maintaining medical records.
2. Performing computer skills in patient Activities of Daily Living (ADLS)
3. Communication skills using appropriate medical terminology.
4. Monitoring Vital Signs including temperature, pulse, respiration and blood pressure.
5. Following appropriate legal and ethical professional conduct.
6. Assist Physicians and Registered Nurses with procedures.
7. Direct Patient Care.

Home Care on Call

6/1998-1/1999, Home Care Nurses Aide

Duties:

1. Direct Patient Care.
2. Performing computer skills in patient Activities of Daily Living (ADLS).
3. Monitoring Vital Signs including temperature, pulse, respiration and blood pressure.
4. Performing minimal household chores.

Prior Experience:

Temporary employment was held while seeking professional work promoting skills in retail sales and customer service.

ADDITIONAL INFORMATION

- Phi Alpha National Honor Society Member Fall 2010
- Alpha Sigma Lambda National Honor Society Member Fall 2010
- HPU Dean's List Fall 2009, Spring 2010, Fall 2010
- Treasurer, Social Work Club at HPU 2010-2011
- NASW Member Fall 2010
- Certified member of the Oahu Civil Defense Civilian Emergency Response Team Feb 14, 2007
- State of Hawaii Certified Nurse's Aide
- Healthcare Provider CPR Certified
- Bloodborne Pathogen Trained
- Health Insurance Portability and Accountability Act (HIPPA) Trained
- Completed Transfer Training for Caregivers Class
- Completed Rehabilitation CNA Course
- DOH-UH Contact Tracing Training for Clinical Healthcare Professionals 6/2020

REFERENCES

Will be provided upon request.