

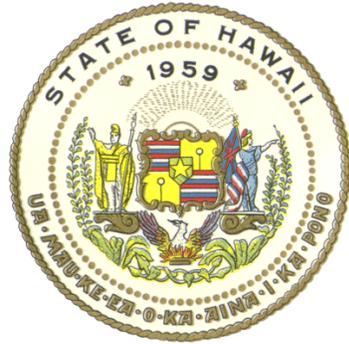
**REPORT TO THE TWENTY-FIFTH LEGISLATURE**  
**STATE OF HAWAII**  
**REGULAR SESSION OF 2010**

**PURSUANT TO SECTION 349-5(b)(2) HAWAII REVISED STATUTES REQUIRING  
THE EXECUTIVE OFFICE ON AGING TO PROVIDE AN ANNUAL  
EVALUATION REPORT ON ELDER PROGRAMS FOR THE GOVERNOR AND  
TO THE LEGISLATURE**

**Prepared by**  
**State of Hawaii**  
**Department of Health**  
**Executive Office on Aging**  
**December 2009**

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## A Message from the Director

*Aloha!* I am pleased to present the annual report of the Hawaii State Executive Office on Aging (EOA). The following is an overview of the efforts of EOA to make Hawaii the premier place for our *kupuna* to enjoy their golden years. We are deeply dedicated to Hawaii's older adults and take seriously its role in supporting meaningful activities and significant services for our *kupuna*. Supporting caregivers who are vital partners in helping assure that our senior citizens lives are filled with health, love, and aloha are essential to our mission. Our pledge is to the twin pillars of meaningful living which both add life to one's years and add years to one's life.

The EOA is steadfast in empowering older adults, their families, and consumers to make informed decisions about existing health and long-term care options. With *ohana* in mind, we believe in forming partnerships and nurturing the capacity of our local communities and families to lend a hand, as it were, so our *kupuna* may remain healthy and independent in their own homes and communities for as long as possible. The EOA recognizes that it is not only our obligation but also our privilege to do all we can as a State and as an *ohana* to help ensure that our elderly are respected, cherished, and honored.

We seek to equip our *kupuna* with the tools and opportunities to stay active, healthy, and safe through services and benefits. The EOA provides oversight for the distribution of millions of dollars from federal and state sources. These resources make viable to our seniors vital information about evidence-based prevention programs, health and medical care options, the aging and disability resource center (ADRC), guidance regarding home and community-based services, and programs to end abuse, neglect, and exploitation of Hawaii's *kupuna*.

Our Governor Linda Lingle and her Administration deserve a *mahalo* for their unwavering support of Hawaii's *kupuna*. I convey my sincere thanks to those devoted government agencies, private organizations, and individuals including family members, volunteers, and

paid caregivers whose steadfast commitment contributes to the joy and well-being of our *kupuna* in the sunset of their years.

“*E Loa Ke Ola*” – May Life Be Long!



Noemi Pendleton, MBA  
Director  
Executive Office on Aging



**The Location of the Executive Office on Aging**

No. 1 Capitol District  
250 South Hotel Street, Suite 406  
Honolulu, HI 96813

## EXECUTIVE SUMMARY

In accordance with §349-5(b) (2), Hawaii Revised Statutes, the Executive Office on Aging (EOA) is submitting an annual evaluation report on elder programs.

In SFY 2009, EOA received a total of \$13,562,934 in appropriations from Federal and State funds. EOA contracted with the County/Area Agencies on Aging to procure, manage, and coordinate the delivery of elder and caregiver support services in their respective Counties. In SFY 2009, services were provided to an estimated statewide total of 8,886 older adults and 1,287 family caregivers.

In SFY 2009, EOA continued to address the mandates of the Older Americans Act and the goals laid down in the Hawaii State Plan on Aging. These goals are:

- *Hawaii's communities have the necessary economic, workforce, and physical capacity for an aging society;*
- *Older adults and their caregivers have access to information and an integrated array of health and social supports;*
- *Older adults are active, healthy, and socially engaged;*
- *Families are supported in caring for their loved ones;*
- *Older adults have in-home and community-based long term care options; and*
- *Older adults are ensured of their rights and benefits and are protected from abuse, neglect, and exploitation*

## Part I. Background Information

### Statutory Basis, Mission, and Goals

The mission of Title III of the Older Americans Act (OAA) of 1965, as amended in 2006, is to promote the development and implementation of a State system of long-term care that is comprehensive and coordinated to enable older individuals to receive long-term care at home or in community-based settings. OAA prescribes the manner in which the system is to be developed, e.g., through collaboration, coordination, and implementation of services responsive to the needs and preferences of older individuals and their family caregivers.

Under OAA, the U.S. Administration on Aging (AoA), Department of Health and Human Services, heads the aging network at the national level. Each State must designate a State Unit on Aging (SUA) to carry out the OAA mission at the state level. Chapter 349, Hawaii Revised Statutes, created the Executive Office on Aging (EOA) and authorized it to carry out the mission in the State of Hawaii.

Chapter 349, Hawaii Revised Statutes, also created the Policy Advisory Board on Elderly Affairs (PABEA), advisory to the Director of the EOA. In SFY 2009, PABEA contributed expertise and time, and accomplished the following under PABEA chair, Michael Sumja.

- Advocated policies and legislation that offered strategies to finance long-term care and protect the rights and health of elders in their homes.
- Raised funds and organized the annual recognition of Hawaii's outstanding older adults with a luncheon program on May 21, 2009. This year's honorees were: Sarah Togashi and Ah Vin Zane (Hawaii County); Janice Bond and Arnulfo Diaz, MD (Kauai County); June Kaaihue and Larry Carter, Ph.D. (Maui County); and Michiko Motooka and Charles Clark (City and County of Honolulu).



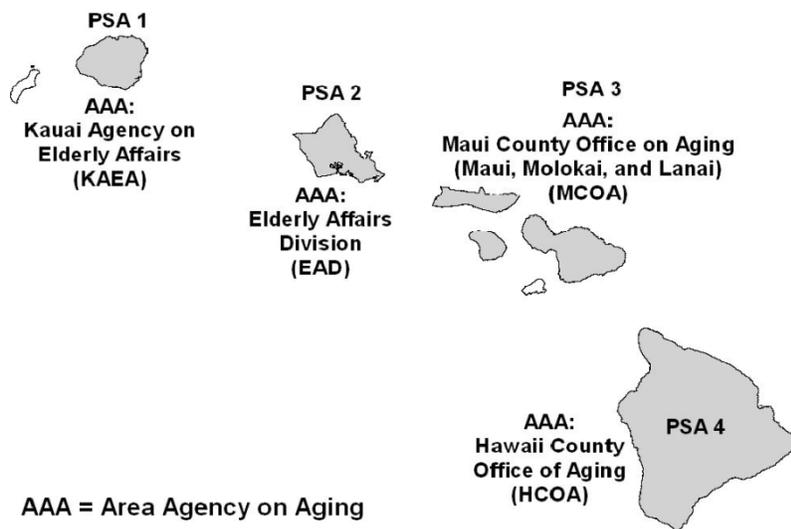
Front Row: June Kaaihue, Janice Bond, Sarah Togashi, Michiko Motooka;  
Back Row: Arnulfo Diaz, MD, Larry Carter, Ph.D., Vivian Aiona, Ah Vin Zane, and Charles Clark

## **The State Aging Network**

The OAA allowed states the option of creating sub-state entities, or Area Agencies on Aging (AAAs), to oversee elder and caregiver support services in communities. Under the OAA, the EOA divided the State into four planning and service areas (PSAs). PSAs correspond to county boundaries in the State, except in PSA 3 where Kalawao County is included with the County of Maui (Figure 1).

**Figure 1**

### **Planning and Service Areas (PSAs)**



## **State Plan on Aging**

In October 2007, the *Hawaii State Plan on Aging (2008-2011)* was approved, enabling Hawaii to receive a four-year grant from the U.S. Administration on Aging. The State plan includes programs and services administered by EOA and funded by both federal and state funds. EOA contracts with the Area Agencies on Aging to procure, manage, and coordinate the delivery of elder and caregiver support services.

The State plan covers 6 major goals: 1) Hawaii's communities have the necessary economic, workforce, and physical capacity for an aging society; 2) Older adults and their caregivers have access to information and an integrated array of health and social supports; 3) Older adults are active, healthy, and socially engaged; 4) Families are supported in caring for their loved ones; 5) Older adults have in-home and community-based long-term care options; and 6) Older adults are ensured of their right and benefits and protected from abuse, neglect, and exploitation.

## Part II. State and Federal Funding

In SFY 2009, EOA's total operating budget composed of state and federal funds was \$13,562,934. Table 1 shows a comparative breakdown of EOA funding for SFY 2008 and SFY 2009. Table 2 shows the distribution of state and federal funds to the Area Agencies on Aging in SFY 2009.

**Table 1 EOA's State and Federal Funding for SFY 2009**

<b>SOURCE</b>	<b>SFY 2008</b>	<b>PERCENT</b>	<b>SFY 2009</b>	<b>PERCENT</b>
State	\$6,370,552	46.12%	\$6,119,214	45.12%
Federal	\$7,443,720	53.88%	\$7,443,720	54.88%
<b>Total</b>	<b>\$13,814,272</b>	<b>100.00%</b>	<b>\$13,562,934</b>	<b>100.00%</b>

**Table 2. State and Federal Funds Allocated to Area Agencies for SFY 2009**

<b>AREA AGENCY</b>	<b>STATE FUNDS</b>	<b>FEDERAL FUNDS</b>	<b>TOTAL</b>
Kauai Agency on Elderly Affairs (KAEA)	\$633,095	\$653,588	\$1,286,683
Honolulu Elderly Affairs Division (EAD)	\$3,452,344	\$3,380,367	\$6,832,711
Maui County Office on Aging (MCOA)	\$741,810	\$929,854	\$1,671,664
Hawaii County Office on Aging (HCOA)	\$705,057	\$1,058,307	\$1,763,364
<b>Total</b>	<b>\$5,532,306</b>	<b>\$6,022,116</b>	<b>\$11,554,422</b>

## **Part III: Services, Programs, and Special Initiatives**

### **Services**

The following service utilization data were provided by the four area agencies. It should be noted that the data, where available, are estimates and are subject to the following limitations:

- Federally funded services, such as information and assistance and outreach, do not require registration of recipients. Many contacts occur anonymously through the telephone, making registration inappropriate. Without registration, it is not possible to have a reliable estimate of the number of individuals who have received the services.
- Multiple services provided to one person may lead to an overestimation in the total number of persons served. For example, while a person is counted only once for a service, a person who receives multiple services may be counted multiple times; thus, duplicated counts are produced in the total number of persons served across services.
- A service may be funded by multiple funds. For example, home-delivered meals are funded by the State, OAA, the County, private foundation or grants, and program income from participants. It is difficult to attribute service utilization data to a specific funding source or to distinguish which source of funds paid for which unit of service.
- The accuracy of any data is subject to the reliability of the data collection, tabulation, and inputting processes.

In SFY 2009, state and federal funds provided services to an estimated 8,886 older adults; 1,287 adult, informal family caregivers of older adults (age 60+); and 143 grandparents or older individuals, age 55 years and older, who were caregivers related to a child or children under age 18 or related individuals with a disability up to age 59.

**Family Caregiver Support Services** - The purpose of these services is to support and provide respite to family caregivers of older adults as well as to grandparents or older individuals, age 55 and over, who are caregivers to related children or to related individuals with a disability. These services include counseling, support groups, training, respite care, and supplemental services.

**Table 3 - Family Caregiver Support Services**  
Services and Persons Served

SERVICES	PERSONS SERVED	UNITS OF SERVICE
Counseling, Support Groups, Training	1,287	4,352 Sessions
Respite Care	197	20,785 Hours
Supplemental Services*	82	12,349 Requests

*\*Supplemental services include home modification, assistive technology, emergency response systems, incontinence supplies, legal assistance, transportation etc. not available through any other funding.*

**Table 4 - Grandparents or Relative Caregivers Age 55+ Support Services**  
Persons Served and Units of Service

SERVICES	PERSONS SERVED	UNITS OF SERVICE
Counseling, Support Groups, Training	143	1,222 Sessions
Respite Care	13	28 Hours
Supplemental Services	9	78 Requests

**Access Services** The purpose of access services is to provide information about resources and link older adults to resources or needed services in the community. These services include information and assistance (I&A), outreach, case management, and assisted transportation.

**Table 5 - Access Services**  
Persons Served and Units of Service

SERVICE	PERSONS SERVED	UNITS OF SERVICE
Information & Assistance	Not Available	24,019 contacts
Outreach	Not Available	41,002 contacts
Case Management	1,727	25,505 hours
Assisted Transportation	112	3,362 trips

**Home and Community-Based Services (HCBS)** - The purpose of HCBS services is to help older adults remain in their home for as long as possible. These services include personal care, homemaker, adult day care, and chore.

**Table 6 - HCBS Services**  
Persons Served and Units of Service

<b>SERVICES</b>	<b>PERSONS SERVED</b>	<b>UNITS OF SERVICE</b>
Personal Care	831	60,790 Hours
Homemaker	565	16,635 Hours
Adult Day Care	149	174,136 Hours
Chore	323	2,999 Hours

**Nutrition Services** - The purpose of nutrition services is to ensure elderly persons receive meals that are compliant with the nutrition requirements of AoA and to provide an opportunity to older adults to socialize, learn new things, enjoy recreational activities, receive nutrition education, and obtain access to other support services like shopping assistance and transportation.

**Table 7 - Nutrition Services**  
Persons Served and Units of Service

<b>SERVICE</b>	<b>PERSONS SERVED</b>	<b>UNITS OF SERVICE</b>
Home Delivered Meals	3,276	524,379 meals
Congregate Meals	4,006	242,163 meals

## **Elder Abuse Education and Elder Rights Programs**

Using state funds allocated for elder abuse, EOA has an ongoing project within each of the counties through the Area Agencies on Aging to respond to older adults, who are at risk of abuse, neglect and or exploitation. The coordinated system of services provides family caregivers and older adults with services to alleviate, resolve, or remedy an ongoing situation and mitigate the chances of abuse.

Services are tailored to the family needs that are assessed upon admission to the project. The services may include information and assistance, case management, counseling, money management, legal assistance, public education, in home care such as personal care, attendant care, and homemaker, and out of home care such as adult day care and emergency shelter.

In addition, EOA updates two resource brochures related to elder abuse. First, is the updated, “Be Akamai, Be Wise...Beware” (9/2008) resource guide for older adults that outlines organizations and people who can help seniors stay safe. Second, is the updated “What is Elder Abuse?” guide to identify, report and prevent abuse, neglect or exploitation which provides “do’s and “don’t” tips and signs of abuse and what to look for. These two brochures were provided to the Aging Network, DHS-Adult Protective Services, and are distributed in the community at fairs and other venues.



## **Elder Rights Programs**

The EOA administers three elder rights programs: Long-Term Care Ombudsman Program (LTCOP), Senior Medicare Patrol (SMP Hawaii), and Sage PLUS.



### Long-Term Care Ombudsman Program (LTCOP)

LTCOP started out in 1975 as a demonstration project under the Older Americans Act (OAA). As a result of the demonstration, the Legislature amended Chapter 349, HRS in 1979 to authorize the EOA to investigate and resolve long term care complaints. In 2007, the Legislature passed a bill to create the Office of the Long-Term Care Ombudsman within EOA, which was signed into law by Governor Linda Lingle on May 24, 2007.

In SFY 2009, LTCOP's major accomplishments:

- Opened 115 cases which totaled 202 complaints. All cases have been resolved except 25, which will carry over to the following reporting cycle.
- Provided consultation and assistance to 3,582 individuals and 187 consultations to facility staff, as well as other health care, legal and other professionals locally and across the country.
- Wrote articles regarding long term care for "Generations" magazine; worked closely with the media on several stories;
- Provided training on various long-term care topics:
  - Training on Residents Rights, "cultural change," and Hawaii's long term care system for new certified nurse aides working in adult residential care homes;
  - Provided training on all the Islands with State Ombudsman Robin Matsunaga on the "The Ombudsman Office: What Does it Do?" for the Judiciary's Center for Alternative Dispute Resolution and the Neighbor Island's Neighborhood Mediation Centers (First Circuit Court on Kauai, West Hawaii Mediation Center, Kuikahi Mediation Center, Maui's Cameron Center, Kapolei, Molokai);
  - Gave in-services on LTCOP to staff at Kahala Nui and Ponds at Punaluu;
- Guest speaker for the Waianae Senior Center, HPGS Conference; West Loc Senior Wing; West Loc Senior Living; Kokua Council Board of Directors and general membership; AARP Chapter 60; Kokua Council Community Forum; UH "Intro to Gerontology Nursing" graduate class; UH "Aging and Social Policy" MSW class;

HPU's "Policy Advocacy" for the MSW Program; HPU's "Forensic Nursing" for the RN Program; Catholic Charities Disability Committee; Long Term Care Social Workers Association of Hawaii quarterly meeting at Pearl City Nursing Home

The Long Term Care Ombudsman Representatives Program (LTCORP) is a component of the LTCOP. The LTCORP utilizes trained, certified volunteers under the guidelines of state policy (Chapter 90-2) and the OAA. The volunteers function as representatives of the LTCOP through weekly visits with adults who reside in state-wide licensed or certified long term care settings to improve their quality of life and quality of care. They also provide advocacy in regard to resident's rights and protection from abuse and/or neglect.

In SFY 2009, LTCORP's major accomplishments:

- Approximately 116 volunteers have been recruited, trained and certified from the formation of this program - including 23 this fiscal year to talk story, educate and advocate for residents of long term care settings state-wide.
- LTCO volunteers donated 1,163 volunteer hours of service to residents in long term care settings and provided 38 hours at senior fairs to give community education about the LTCOP, Resident's Rights in long term care settings, and how to maintain quality of care and life in the long term care setting;
- LTCO volunteers provided information and consultations to 3,386 individuals - which includes staff, residents, families and friends of residents on behalf of the LTCOP concerning resident's rights and other various topics on aging and services.
- LTCO volunteers attended 39 Family Councils with 122 family members in attendance and 58 Resident Councils with 619 residents in attendance to discuss the LTCOP and provide support, information and resources to protect the quality of life and care for residents in the long term care setting.
- LTCO volunteers have had over 81 hours of initial and ongoing monthly training to further their knowledge base and provide peer support.
- LTCO volunteers have made 385 facility visits with residents of 40 state-wide nursing homes, adult residential care home and assisted living facilities.
- LTCO volunteers have sat with, listened to, and had friendly visits with 3,370 residents state wide in an effort to improve the quality of their care and their lives.



## SMP Hawaii

SMP Hawaii is one of 54 Senior Medicare Patrol projects in a program established by the Administration on Aging in 1997 to recruit retired professionals as volunteers to educate seniors to detect and report Medicare and Medicaid fraud, abuse, and errors. During the federal fiscal year 2008, SMP Hawaii volunteers and staff gave 41 group presentations and participated in 26 community fairs, disseminating SMP informational materials to over 6,500 persons statewide. SMP Hawaii's media outreach activities—including news releases, newsletter articles, and TV airings—had 71 outlets.

In line with the Administration on Aging's objective to provide Medicare fraud information to hard-to-reach populations, SMP Hawaii provided financial support to Alu Like, Inc. to produce a radio public service announcement in Native Hawaiian and a brochure and PowerPoint slide show tailored to Native Hawaiian elders. SMP Hawaii collaborated with Kokua Kalihi Valley to translate SMP Hawaii's brochure into Ilokano and Samoan. Under its contract with SMP Hawaii, the College of Tropical Agriculture and Human Resources-UH Manoa produced two brochures about health care fraud for family caregivers. SMP Hawaii partnered with Pacific Gateway Center and Catholic Charities Hawaii to produce a bus poster in English and seven Asian and Pacific languages to encourage Medicare beneficiaries to guard their Medicare number. The bus poster ran on 525 buses in TheBus system for two months at no charge, reaching an estimated weekly ridership of 225,000 passengers.

SMP Hawaii provided primary funding and partnered with the Executive Office on Aging and the Elderly Affairs Division-City and County of Honolulu to implement PROTECT DETECT REPORT—Hawaii Anti-Fraud Conference on April 25, 2009 at the Hawaii Convention Center. The conference provided 15 sessions about fraud, including health care fraud, investment schemes, mortgage fraud, financial exploitation of seniors, and identity theft. Representatives from law enforcement, government regulatory agencies, and consumer protection advocates shared their expertise.



## Sage PLUS

Sage PLUS, federally known as the Hawaii SHIP (State Health Insurance Assistance Program), is 100% funded by the Centers for Medicare and Medicaid Services. Sage PLUS uses its statewide volunteer network to provide counseling services to help members with Medicare, their families, caregivers, and professionals understand Medicare health insurance benefits. There are approximately 193,500 individuals with Medicare in Hawaii; approximately 88% of those individuals are over 65 years of age. Information is provided regarding Medicare (Part A, B, C, and D), Medigap, Medicare Advantage, Medicaid, available prescription drug assistance, long-term care insurance and financing, and advance health care directives. The volunteers also assist the clients in comparing health and drug plans, in enrollment, in writing appeals for denied services, and in referrals to other agencies when appropriate. Upon request, the volunteers do presentations to community organizations and other interested groups of individuals.

In SFY 2009, Sage PLUS's major accomplishments:

- Conducted 14 educational trainings for professional members in both rural and urban areas, and 15 community presentations statewide.
- Assisted approximately 3,800 individuals via the Sage PLUS hotline, in Hawaii, Alaska, the continental U.S. and American Samoa. The total time of counseling was over 1,477 hours.
- Participated in 51 health fairs and outreach events in both rural and urban areas, including Molokai and Lanai; provided SHIP information at 5 Statewide conferences.
- Participated in 3 cable and television and radio shows potentially reaching 37,000 people statewide.
- Provided 60 update training (for a total of 4,896 hours) to 48 volunteers Statewide and completed annual review and certification of the volunteers. Trained six new volunteers for various roles with the program.

- Ensured that monthly counseling was available in each county through partnership with Social Security, the Veterans Outreach program and the Area Agencies on Aging.
- Continue to represent SHIP programs in CMS Region 9 & 10 on the National Steering Committee (Alaska, Washington, Idaho, Oregon, California, Nevada, Arizona, Guam and Hawaii).
- Provided access and training through a dedicated website for the Sage PLUS Program ([www.hawaiiiship.org](http://www.hawaiiiship.org)).

## Special Initiatives - Community Partnerships

### Caregiver's Resource Initiative Project (CRI)

In 2001, EOA executed a contract with the University of Hawaii-Center on Aging (UH-COA) in response to the OAA 2000 Amendments, which authorized the National Family Caregiver Support Program (NFCSP). UH-COA would provide CRI staff to meet the new demands placed on EOA by the federal government to develop support systems, services, and products for informal (unpaid) caregivers. Thus, CRI supports family caregivers by promoting and fostering a statewide, coordinated approach in addressing the needs of caregivers.

In SFY 2009, CRI's major accomplishments:

- Co-sponsored, in partnership with the Hawaii Family Caregiver Coalition, the 5<sup>th</sup> Annual Holo Imua Kakou (Moving Forward Together) Legislative Reception and Ice Cream Social in January 2009. The focus was on raising awareness of caregiver issues to Legislators and showcasing personal care giving stories.
- Reported the results of 4 studies commissioned in 2008:
  1. *Respite Care in the State of Hawaii.*
  2. *Report on the Feasibility of Providing Consumer Directed Services for Non-Medicaid Eligible Older Adults and Persons with Disabilities in the State of Hawaii.*
  3. *Report on Respite Services for Grandparents Raising Grandchildren in Hawaii.*
  4. *Grandparents Raising Grandchildren Needs Assessment in Hawaii's Public Schools.*
- Conducted, in partnership with the Hawaii Family Caregiver Coalition, Family Caregiver's Day at the Capitol in March 2009. Caregiver Day consisted of over 40 exhibit tables, a legislative luncheon, scheduled meetings with legislators, and the publication of the 2009 Aging Issues Booklet.
- Participated on the advisory committee for KHON's Elderhood Project and for KGMB's Genius of Aging Campaign.
- Coordinated, in partnership with the Hawaii Family Caregiver Coalition and KHON2's Elderhood Project, the 2008 Family Caregiver Awards Program and the Grandparents Raising Grandchildren Awards Program.



**Hawai'i Healthy Aging Partnership**  
*"Improving the health status of older adults"*



### **Healthy Aging Partnership - Empowering Elders (HAPEE)**

In 2003, EOA called upon the four area agencies, the Department Of Health Community Health Division, UH Center on Aging, and service providers to build the aging network's evidence-based programming capacity. HAPEE is a result of this initiative.

EOA was awarded a three year grant of \$750,000 from the U.S. Administration on Aging beginning on September 30, 2006 through July 31, 2009. Under the grant, EOA is obligated to:

- Develop the infrastructure and partnership for evidence-based intervention.
- Follow the Stanford University Chronic Disease Self-Management Program (CDSMP) and the University of Washington and Senior Services EnhanceFitness (EF) models.
- Develop and implement a plan for the continuation of the programs after the conclusion of the grant period.

At the start of this grant, HAPEE established evidence-based programs developed on the national level: the Enhanced Fitness (EF) Program and the Chronic Disease Self-Management Program (CDSMP). EF is an exercise program consisting of stretching, flexibility development, balancing, low impact aerobics, and strength building. The program was developed by the University of Washington and runs 1-hour class sessions three times a week. CDSMP trains people to be confident in controlling their chronic symptoms. It is a six-week training program, consisting of one session of 2 ½ hours a week. The program was developed at Stanford University and focuses on building skills, sharing experiences, and group support.

In August 2008, HAPEE partners received training to begin implementing the Arthritis Self-Management Program (ASMP) and Diabetes Self-Management Program (DSMP). These programs have the same approach and format as the CDSMP but provide disease-specific information and support for individuals with arthritis and diabetes.

HAPEE has the following accomplishments with implementing and replicating the EnhanceFitness program:

- Tripled the original number of EnhanceFitness sites on Kauai from 2 to 6 sites.
- Engaged seniors in EnhanceFitness classes on Kauai.

- Analyzed pre- and post-intervention data from program participants, assessing their physical functioning, upper- and lower-body strength, number of falls, confidence to continue exercising and exercise regularly, number of days spent exercising per week, and overall satisfaction with the program.

HAPEE has the following accomplishments with regard to implementation and replication of CDSMP:

- Expanded CDSMP program delivery statewide
- Facilitated 16 different CDSMP workshops serving 163 individuals
- Supported the training of 2 local CDSMP T-Trainers (Super-Trainers with the ability to Train Master Trainers), building Hawaii's capacity to ensure the availability of future Master Trainer Training. In the future, HAPEE will not need to pay for Stanford University's T-Trainers to travel to Hawaii to provide Master Trainer training.
- Trained an additional 27 Master Trainers (Train-the-Trainers) to offer the CDSMP program
- Conducted Lay Leader trainings on Kauai and Oahu to increase the number of leaders, statewide.
- Collected and analyzed preliminary 6-month follow-up data from program participants on their health status, disease self-management skills, time spent exercising, and health care utilization.

HAPEE has the following accomplishments with implementing ASMP:

- Trained 22 ASMP Master Trainers (Train-the-Trainers) to offer the ASMP program
- Offered 2 ASMP workshops
- Provided ASMP to 24 individuals

HAPEE has the following accomplishments with implementing DSMP:

- Trained 24 DSMP Master Trainers (Train-the-Trainers) to offer the DSMP program
- Offered 5 DSMP workshops
- Provided DSMP to 51 individuals

In addition, HAPEE has:

- Conducted Strategic Planning for Sustainability of Evidence-Based Programs, identifying key strategic goals and objectives for the Partnership to pursue in order to strengthen the long-term sustainability of Hawaii's Evidence-Based Health Promotion and Disease Prevention Programs.

- Continued to provide quality assurance and fidelity monitoring of the Evidence-Based Programs provided.
- Contracted with Dr. Kathryn Braun and Michiyo Tomioka from the University of Hawaii to provide evaluation support to ensure that the programs are implemented with fidelity, e.g., true to the original program design and outcomes. They are working closely with the National Council on Aging and staff with the EF and CDSMP programs.
- Contracted with ALU LIKE to provide statewide coordination of CDSMP to coordinate the statewide program implementation, providing HAPEE partners with technical assistance and support as they implement the program with fidelity and promoting program expansion to major population centers.





### **Aging and Disability Resource Center (ADRC)**

In 2005, EOA received an \$800,000 federal grant from the U.S. Administration on Aging (AoA) and the Centers of Medicare and Medicaid Services (CMS) to develop ADRC in Hawaii over a three year period. EOA was given an extension into year four. The project is part of a national effort to establish single entry or no wrong door access points to long-term care resources, inclusive of the Medicaid program.

Currently the Hawaii ADRC network consists of ADRC sites at the following AAA: Hawaii County Office of Aging (HCOA) in Hilo on the island of Hawaii and the Honolulu Elderly Affairs Division (EAD) on the island of Oahu.

- The physical site in Hilo is in a newly renovated building that co-locates public and private agencies including HCOA, the senior employment program, the local Medicaid service center, the Hawaii Center for Independent Living, several community providers of Home and Community Based Services (HCBS), the Alzheimer's Association, and the University of Hawaii's College of Pharmacy interns who provide medication management.
- The Oahu site is under development and consists of a virtual website, with planned web access, a call center, and face-to-face service at several planned Honolulu satellite locations. The State intends to reorganize the AAAs' ongoing information and assistance services into the ADRC model in the remaining AAAs of Kauai and Maui Counties.

In SFY 2009, ADRC's major accomplishments:

- Hilo ADRC celebrated its grand opening on November 14, 2008.
- At the end of SFY 2009, EOA was awarded the Hospital Discharge Planning Grant with a portion of the award to be for ADRC expansion. The ADRC will be used to assist in the persons and their families through the discharge planning process.

## Part IV. Contact Information for the Hawaii State Aging Network

For information and assistance from the Long-Term Care Ombudsman, SMP Hawaii, and Sage PLUS programs, please refer to the contact information for the Executive Office on Aging. For information and assistance on elder and caregiver services in your local area, please refer to the contact information for the Area Agencies on Aging. All contact information for the Executive Office on Aging and the Area Agencies on Aging are listed below.

### **Executive Office on Aging**

No. 1 Capitol District  
250 So. Hotel Street, Suite 406  
Honolulu, HI 96783-2831  
Ph: (808) 586-0100

Email: [eoah@doh.hawaii.gov](mailto:eoah@doh.hawaii.gov)  
Website: [www.hawaii.gov/health/eoa/](http://www.hawaii.gov/health/eoa/)

**LTCO** Ph: (808) 586-0100

**Sage PLUS** Ph: (808) 586-7299  
Toll Free: 1- 888-875-9229

**SMP HAWAII** (808) 586-7281  
Toll Free: 1-800-296-9422



### **Kauai Agency on Elderly Affairs**

4444 Rice Street, Suite 330  
Lihue, Hawaii 96766  
Ph: (808) 241-4470

Email: [elderlyaffairs@kauai.gov](mailto:elderlyaffairs@kauai.gov)  
Website: [www.kauai.gov](http://www.kauai.gov)



### **Honolulu Elderly Affairs Division**

715 So. King Street, Suite 200  
Honolulu, HI 96813  
Ph: (808) 768-7700

Email: [information@elderlyaffairs.com](mailto:information@elderlyaffairs.com)  
Website: [www.elderlyaffairs.com](http://www.elderlyaffairs.com)



### **Maui County Office on Aging**

2200 Main Street, Suite 547  
Wailuku, Maui 96793  
Ph: (808) 270-7774

Email: [aging@mauicounty.gov](mailto:aging@mauicounty.gov)  
Website: [www.mauicounty.gov](http://www.mauicounty.gov)



### **Hawaii County Office of Aging**

101 Aupuni Street, #342  
Hilo, Hawaii 96720  
Ph: (808) 961-8600

Email: [hcoa@hawaiiintel.net](mailto:hcoa@hawaiiintel.net)

**KONA**  
75-5706 Kuakini Highway, #106  
Kailua-Kona, HI 96740  
Ph: (808) 327-3597

Website: [www.hcoahawaii.org](http://www.hcoahawaii.org)

