PURPOSE: The purpose of this policy is to set standards for including agencies in the Hawaii Aging & Disability Resource Center (“ADRC”) database and in other publications, for use by the public, including those who need financial assistance as well as those who have personal resources to pay for services.

POLICY: Service providers that empower older adults, disabled adults, and/or family caregivers to make personal decisions, plans, and connections that allow them to live as independently and fully as possible are eligible to apply for inclusion in the ADRC resource database. Each Area Agency on Aging (“AAA”) shall evaluate applications for inclusion, and establish and maintain that portion of the resource database that relates to services in its planning and service area, according to the criteria and procedures on the following pages.

BACKGROUND: The ADRC is a one-stop source for long term care information and services for older adults, people with disabilities and caregivers who need help in caring for a family member or loved ones. The ADRC is a collaborative project funded in part by the U.S. Administration on Aging, the Centers of Medicare and Medicaid Services, the State of Hawai‘i and the Counties of Kaua‘i, Maui, Hawai‘i, and the City and County of Honolulu. The sponsoring agency for each county’s portion of the ADRC is its AAA:

- Hawai‘i County Office of Aging of the Big Island
- City and County of Honolulu Elder Affairs Division on O‘ahu
- Kaua‘i County Agency on Elderly Affairs, and
- Maui County Office on Aging (includes Molokai and Lanai)

Each county publishes an Information & Assistance Handbook (“Handbook”) and is in the process of developing its portion of a searchable, electronic resource database. The database will assist staff, consumers, caregivers, providers and others in the community in finding local long term care programs and services. Information for all four counties will be accessible on Hawai‘i’s new Aging & Disability Resource Center website (www.HawaiiADRC.org). Information in the database may be used by the AAAs to create printed materials, including Handbooks and other resource guides.

ADRC RESOURCE DATABASE INCLUSION/EXCLUSION CRITERIA

DISCLAIMER:
- Although this policy sets eligibility criteria for inclusion in the database, each AAA reserves the right to determine eligibility and to prioritize and limit entry;
- A listing in either a Handbook or in the online directory does not constitute an endorsement of a program or service, nor does omission indicate disapproval; an AAA assumes no liability for any acts or omissions of a listed agency in providing its services.
- An organization will be on probationary exclusion (inactive status) if they have not provided service for at least 6 months;
- Non-compliance with the inclusion process is grounds for exclusion;
- Each AAA reserves the right to edit information to meet format, guideline, space and taxonomy requirements;
- Each AAA will make every effort to provide complete and accurate information, but no AAA guarantees, or makes any representation as to, the accuracy or completeness of the information contained in its resource database. Any user of the database takes full responsibility for further researching the services and information listed in the resource directory and on the website.
INCLUSION: For the present, inclusion in the resource database is limited to services and programs that adequately address the needs of those 60 and older, the needs of those 18 and older with a physical disability and/or the needs of their caregivers. Over time, the goal is to expand content to include relevant long term care programs and services without regard to age, income or disability. Currently, the following entities that address the above needs are eligible to apply for inclusion:

1. Government and non-profit agencies and programs that provide assistance for the targeted populations (e.g., federal, state, city/county government, 501(c)(3) non-profits, crisis lines, help lines, etc). No attempt will be made to list all government agencies and departments.
2. Agencies that are certified, licensed, or accredited by the appropriate levels of government, as applicable (e.g., adult day care, nursing homes, assisted living facilities, home health services, hospitals, etc);
3. Agencies and programs that are tax-exempt or do not charge fees.
4. Self-help support groups that do not charge a fee or charge a nominal fee.
5. Senior and disability advocacy groups and community coalitions.
6. Agencies, including for-profit, proprietary and non-profit agencies that provide State, City or County contracted services for the targeted populations.

EXCLUSION: The AAA reserves the right to make the final determination to exclude any agency from the resource database. The following are not eligible for inclusion:

1. For-profit, commercial or private organizations other than government contractors, including private practitioners or group practices in the following areas: medical doctors, legal/paralegal providers, mental health practitioners, insurance agents, investment or banking lenders, nutritionists, physical therapists, chiropractors, dentists. The AAA may make case by case exceptions for-profit, commercial or private organizations, based on one or more of the following:
   o Uniqueness of the services provided (e.g., specially targeted services or services that are otherwise difficult to access);
   o Financial considerations (e.g., the agency also offers free service, scholarship, reduced fees, sliding fee scale or accepts Medicaid);
   o Lack of comparable services in the public, non-profit sector;
   o Demonstrated community need for services..
2. Any agency that knowingly or unknowingly discriminates or violates local, state or federal discrimination laws and regulations.
3. Any agency or person that misrepresents their services in any way or provides misleading or fraudulent information to the public.
4. Any agency that has been in existence less than one year, except for a government agency.
5. Any agency that does not respond in a timely manner when asked to update agency/program information.
6. Any agency or program regulated for service quality where the regulator maintains and makes available to the public current data (e.g., the Department of Health, Office of Health Care Assurance, maintains data and a vacancy list for adult residential care homes).
7. Elected government officials.
8. Churches and service groups (e.g., Rotary), unless the churches or service group offers services to the target populations.
Regarding Exclusion or Elimination from the Database

If an organization/agency submits an application and is determined to be ineligible, the AAA will respond with a letter of explanation.

- The AAA has the right to refuse or discontinue listing organizations that have had complaints filed with AAA, other aging and disability network programs, the Better Business Bureau or a regulatory entity.
- The AAA has the right to eliminate a program/organization for failing to update their record annually.
- The AAA has the right to eliminate a program/organization when it is determined that the program is not in compliance with federal, state, or local laws.
- Organizations wanting to be removed from the database or resource directory should contact their local AAA by phone or email. See contact information on page 3.
- An organization denied database inclusion for the following reasons, please do not reapply for admittance as we will not be able to include your program:
  - If your organization is denied database entry based on a severe complaint file with AAA/ADRC, a regulatory board, or the Better Business Bureau;
  - If your organization is involved in illegal practices;
  - Agencies that misrepresent their services in any way;
  - If your agency has been removed from the database for any of the “Not Eligible to be Included” reasons listed above.

PROCEDURES FOR PROSPECTIVE AGENCIES:

1. Organizations wanting to be included in the database shall submit an application and full documentation as requested (see Attachment 1: “ADRC Resource Database Application Form”)

2. Complete the application form and return it to the appropriate AAA by mail, fax or email:

<table>
<thead>
<tr>
<th>City &amp; County of Honolulu</th>
<th>Hawai‘i County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elderly Affairs Division</td>
<td>Hawaii County Office of Aging</td>
</tr>
<tr>
<td>Department of Community Services</td>
<td>Kahi Malama (A Place of Caring)</td>
</tr>
<tr>
<td>ATTN: Information &amp; Assistance Coordinator</td>
<td>1055 Kino’ole Street, Suite 101</td>
</tr>
<tr>
<td>715 South King St., Rm 200</td>
<td>Hilo, Hawaii 96720</td>
</tr>
<tr>
<td>Honolulu, Hawaii 96813</td>
<td>Phone: 808-961-8626</td>
</tr>
<tr>
<td>Fax: 808-768-7700</td>
<td>Fax: 808-961-8603</td>
</tr>
<tr>
<td>Email: <a href="mailto:elderlyaffairs@honolulu.gov">elderlyaffairs@honolulu.gov</a></td>
<td>Email: <a href="mailto:hcoa@hawaiiantel.net">hcoa@hawaiiantel.net</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Kaua‘i County</th>
<th>Maui County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kauai County Agency on Elderly Affairs</td>
<td>Maui County Office on Aging</td>
</tr>
<tr>
<td>4444 Rice Street, Suite 330</td>
<td>Department of Housing and Human Concerns</td>
</tr>
<tr>
<td>Lihue, Hawaii 96766</td>
<td>2200 Main Street, Suite 547</td>
</tr>
<tr>
<td>Phone: 808-241-4470</td>
<td>Wailuku, Hawaii 96793</td>
</tr>
<tr>
<td>Fax: 808-241-5113</td>
<td>Phone: 808-270-7774</td>
</tr>
<tr>
<td>Email: <a href="mailto:elderlyaffairs@kauai.gov">elderlyaffairs@kauai.gov</a></td>
<td>Fax: 808-270-7935</td>
</tr>
<tr>
<td></td>
<td>Email: <a href="mailto:aging@co.maui.hi.us">aging@co.maui.hi.us</a></td>
</tr>
</tbody>
</table>
3. Completed applications will be reviewed by AAA staff for accuracy, completeness and consistency with database taxonomy and other guidelines. Staff may request additional information or clarification of applicant agency.

4. Prospective agencies will receive notification regarding the status of their application within 7-10 business days.

5. Following review and acceptance, the agency and program information will be added to the database in accordance with internal guidelines.

6. Agencies that do not meet the criteria for inclusion and wish to challenge the decision should follow the Complaint/Grievance Procedure outlined below.

7. Organizations with incomplete applications will not be considered – all applications and any necessary addendum forms must be complete; all required documentation must be submitted to each AAA.

8. All applicants must meet the criteria of being in operation and providing the listed service for at least one year prior to being added to the database.

9. Services that are subject to licensure or regulation must provide appropriate documentation of compliance. (i.e. professional license number and type of license, etc.)

10. The AAA staff reserves the right to request for a site visit at the agency’s place of business or additional documentation or records of business compliance status (i.e. Certificate of Good Standing with the Hawaii Department of Commerce and Consumer Affairs, proof of 501 (c) 3 status, etc.).

COMPLAINT/GRIEVANCE PROCEDURE:

1. Contact the AAA by phone to clarify concerns. Refer to contact information on page 3.

2. If concerns are not resolved by step one, submit a written statement to the appropriate sponsoring agency.

3. The ADRC Coordinator, I&A Coordinator, County Executive on Aging and/or other staff as necessary will review the appeal and make a final decision.

4. The appealing organization will be informed in writing within 30 calendar days.

QUALITY CONTROL: In order to provide the community with accurate and useful information, the AAA will follow a systematic and timely process for maintaining and updating the resource listings and will review the Inclusion/Exclusion Policy on an annual basis. AAA/staff will collect, verify and update information about providers through a variety of methods, including existing resource guides, handbooks and databases as well as surveys, phone calls, email and other communication. Survey updates will be performed annually, at a minimum, and may be performed in increments on a revolving basis.

UPDATING AGENCY/PROGRAM INFORMATION:

Each AAA will update their respective database information on an on-going basis. Agencies will be asked to respond to a formal agency update survey at least once a year. Unresponsive service providers risk being excluded or dropped from the database. Agencies are relied upon to keep each AAA site informed of any new programs or if they are getting inappropriate referrals. Please use the contact information on page 3 to notify the appropriate AAA of any changes, updates or inappropriate referrals. Eventually agencies will be able to update their information online. A description of this process will be included in this document once the feature is made available.
COMMENCEMENT DATE
The implementation of the specified policies and procedures will begin January 3, 2010. Each AAA will review the Resource Database Policies and Procedures on an annual basis and modify as necessary.
ATTACHMENTS
1. ADRC Resource Database Application Form
2. Resource Database Inclusion Criteria Checklist (internal)
Attachment 1: ADRC Resource Database Application Form

Thank you for your interest in the Hawaii ADRC Resource Database. If you have not read the Inclusion/Exclusion Policy, we strongly suggest you do so before proceeding.

<table>
<thead>
<tr>
<th>AGENCY/PROGRAM INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please fill out one application per agency/program. Make copies as needed.</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>AGENCY NAME (Legal):</th>
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<table>
<thead>
<tr>
<th>AKA (Also Known As):</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>AGENCY STREET ADDRESS (Physical Location):</th>
</tr>
</thead>
<tbody>
<tr>
<td>CITY/TOWN:</td>
</tr>
<tr>
<td>COUNTY:</td>
</tr>
<tr>
<td>STATE:</td>
</tr>
<tr>
<td>ZIP:</td>
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</tbody>
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<table>
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<tr>
<th>Is the physical address confidential? __Yes __No</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>MAILING ADDRESS (if different from above):</th>
</tr>
</thead>
<tbody>
<tr>
<td>CITY/TOWN:</td>
</tr>
<tr>
<td>COUNTY:</td>
</tr>
<tr>
<td>STATE:</td>
</tr>
<tr>
<td>ZIP:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AGENCY PHONE NUMBERS (main, fax, administration, TTY, other):</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>WEBSITE URL:</th>
</tr>
</thead>
</table>

| PRIMARY CONTACT NAME: |
| PHONE NUMBER: |
| EMAIL: |

| SECONDARY CONTACT NAME: |
| PHONE NUMBER: |
| EMAIL: |

<table>
<thead>
<tr>
<th>AGENCY TYPE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>_ Nonprofit. If yes, are you a 501(c)(3)? _ YES _ NO</td>
</tr>
<tr>
<td>_ Government/Public _ For Profit/Proprietary</td>
</tr>
<tr>
<td>_ Other. Please specify _____________________________</td>
</tr>
</tbody>
</table>
**AGING AND DISABILITY RESOURCE CENTER HAWAII**
**RESOURCE DATABASE POLICIES AND PROCEDURES**

**BRIEF AGENCY/PROGRAM DESCRIPTION** (use language that the general public would understand):


**WHAT TYPE OF SERVICE(S) DO YOU OFFER? CHECK ALL THAT APPLY.**

- Health/Medical Care  
- Social Service  
- Financial Assistance  
- Legal Assistance  
- Housing Assistance  
- Recreation  
- Advocacy  
- Care/Case Management  
- Employment  
- Assisted Transportation  
- Food/Nutrition/Meals  
- Caregiver Support/Respite  
- Volunteer Opportunities  
- Homemaker/Chore  
- Personal Care  
- Disaster/Emergency  
- Advocacy  
- Counseling  
- Education  
- Mental Health  
- Other: ______________________

**WHAT POPULATION DOES YOUR PROGRAM SERVE? CHECK ALL THAT APPLY.**

- Elderly. Specify age group, if applicable (e.g., 55 & older, 60+, 62+, 65+) ________________
- Caregivers. Specify age restrictions, if applicable ________________________________
- Clients with a Physical Disability. Specify age group, if applicable (e.g., all ages, 18+)_____
- Clients with a Developmental Disability. Specify age group, if applicable _______________
- Clients with Multiple Disabilities. Specify age group, if applicable _________________
- Clients with a Mental Illness. Specify age group, if applicable _______________________
- Other. Please specify ________________________________

**SERVICE AREA COVERED** (island wide, by zip code, city/town, etc):


Last updated 02/02/2010
| PROGRAM FEES. | Please list hourly rates, minimum hours required and any other relevant fee information (e.g., sliding scale, fee-for-service, fixed, membership, no fees, donation requested): |
| ELIGIBILITY REQUIREMENTS. | Please specify any requirements clients must fulfill to receive services from your program (e.g., age, low income, Medicare/Medicaid eligible, etc): |
| HOURS OF OPERATION (day/hours): |
| LANGUAGES SPOKEN OTHER THAN ENGLISH: |
| INSURANCE ACCEPTED | yes no |
| If yes, please indicate: __Medicaid __Medicare __Private __Military __other: ________________________________ |
| ACCESSIBILITY INFORMATION (e.g., ramp, wheelchair lift, elevator, interpreter, translator, etc): |
| HAS YOUR AGENCY EXISTED IN HAWAII FOR AT LEAST ONE YEAR? | Yes No |
| IS YOUR AGENCY LICENSED OR CERTIFIED BY THE STATE OR ANOTHER REGULATING BODY? If yes, identify type of license and license # if applicable. | |
| __Yes License # Type of License Regulating Agency Name: | |
| __No |
| Is your agency part of a community collaboration, coalition, task force or professional association related to the oversight or provision of your service(s)? If yes, please state: | |
| __ Yes Name of Organization/Affiliation(s): | |
| __ No |
### ADDITIONAL INFORMATION
Include any additional information you wish to make known about your organization.

### HOW DID YOU LEARN ABOUT THE AGING & DISABILITY RESOURCE CENTER (ADRC)?
ATTACHMENT 2: Resource Database Inclusion Criteria Checklist

Name of Applicant Organization ________________________________________________

Date of Application Review _______________ Reviewed by (print)______________________

Check all descriptions that apply.

1. Inclusion category (agency type) – To allow inclusion, one or more of these must apply
   This applicant is a:
   ☐ Non-profit organization (501(c)(3) which provides, coordinates and/or advocates for a
     health or human service
   ☐ Government health or human service program offered by
     ☐ State
     ☐ County
     ☐ Federal
   ☐ For-profit company offering support services to older and/or disabled adults that are
     scarce or not easily accessible in the public or non-profit sectors
     List the scarce service: ________________________________________
   ☐ Self-help support group of interest to older and/or disabled adults or family caregivers
   ☐ Agency based outside of Hawaii that meets a critical need for older adults and/or
     disabled adults in Hawaii. (List the need ___________________________________)  
     ☐ and is the local chapter for a national organization
   ☐ Professional organization in the health and human service field that provide a public
     service
   ☐ Social or fraternal organization of interest to the target population, which serves non-
     members
   ☐ Professional regulatory agency in a health or human service industry
   ☐ Information and referral service
   ☐ Licensed adult day care program
   ☐ Licensed and regulated nursing home, care home, assisted living facility, home health
     service, or hospital

2. Inclusion category (population served) – To allow inclusion, one or more of these must apply
   This applicant serves:
     ☐ older adults (60+)
     ☐ disabled adults (18+)
AGING AND DISABILITY RESOURCE CENTER HAWAII
RESOURCE DATABASE POLICIES AND PROCEDURES

☐ family caregivers of older and/or disabled adults
☐ the general public including older and/or disabled adults

3. Not Eligible Category – exclude if any one of these apply
   This applicant is a:
   ☐ Organization that offers a service to their members only (e.g. some churches or social clubs)
   ☐ Employment agency that charges a fee to applicants
   ☐ Private lawyer, or insurance agent, or investment or banking firm, or lender, or building or home repair company, or doctor, or medical group, or private therapist, or other entity offering services which do not meet the specific inclusion criteria listed in 1 and 2 above.

4. Compliance – to be included, the agency must meet a; and if b applies, must also meet c.
   This applicant:
   ☐ a. has been in existence in Hawaii for at least one year.
   ☐ b. is subject to licensure or regulation by ____________________(regulating entity)
     ☐ c. and has provided documentation of current licensure or regulatory compliance (i.e. license number and type of license)

5. Background check (look up on both websites):
   This applicant’s name:
   ☐ has been located through the BBB website http://hawaii.bbb.org and its status is
     [Exclude and print out the report if BBB status is “complaint not settled” or “unable to pursue complaint” or “does not meet standard” or “unable to verify standards.” Read the report as posted on the website to identify specific problems.]
   ☐ has been checked through the RICO database at http://pahoehoe.ehawaii.gov/cms/app and
     ☐ a. there is no match (i.e., no complaints on file)
     ☐ b. there is a complaint on file that has not been adjudicated, or has been adjudicated with no finding against this applicant (attach print-out of record on the RICO website)
     ☐ c. there is a complaint on file that has been adjudicated with a sanction or other adverse action against this applicant (attach print-out of record on the RICO website) [Exclude if c applies]

6. Determination
   ☐ This applicant meets the criteria for inclusion in the ADRC Resource Database
   ☐ This applicant does not meet the criteria for inclusion because
     ________________________________ (list exclusion)

Signature/Title of the Reviewer __________________________________________________

☐ The determination letter was sent to this applicant on ________________________ (date)