

**HANA ADVISORY COMMITTEE TO THE
MAUI PLANNING COMMISSION
REGULAR MEETING
MARCH 10, 2005**

A. CALL TO ORDER

The regular meeting of the Hana Advisory Committee (Committee) was called to order by Chairperson Nalani Shamblin at 4:15 p.m., Thursday, March 10, 2005, Helene Hall, Keawe Place, Hana Bay, Hana, Island of Maui.

A quorum of the Committee was present. (See Record of Attendance.)

Ms. Nalani Shamblin: I'd like to call this meeting of March 10, 2005 to order. We have an agenda that this Committee abides by and the first thing that is on our agenda is to make sure we have a quorum and seeing that we do, we'll continue. The next thing on our agenda is the Resolution Thanking Outgoing Member, myself.

B. RESOLUTION THANKING OUTGOING MEMBER - B. NALANI SHAMBLIN

Mr. Clayton Yoshida: Thank you, Madam Chair, members of the board. My name is Clayton Yoshida, I'm Administrator for the Current Planning Division with the Maui Planning Department, and it's with pleasure that we read the Resolution of the Hana Advisory Committee to the Maui Planning Commission thanking Nalani Shamblin.

Mr. Yoshida read the Resolution into the record.

Mr. Yoshida: I guess we can move to the next item, which is the approval of the minutes.

C. APPROVAL OF MINUTES OF THE JANUARY 13, 2005 MEETING

Ms. Shamblin: Okay, now we'll go to the Item C, Approval of Minutes of January 13, 2005 Meeting. Any discussion?

Ms. Fawn Sherie Helekahi-Burns: I make a motion to approve the minutes.

Ms. Shamblin: Second? Anybody second?

Ms. Kaui Kanakaole: I'll second.

There being no discussion, the motion was put to a vote.

It has been moved by Ms. Helekahi-Burns, seconded by Ms. Kanakaole, then unanimously

VOTED: to approve the minutes of the January 13, 2005 meeting

Mr. Yoshida: With that, Madam Chair, we have one public hearing item, which is the request from the Hana Community Health Center, Inc. for a State Land Use District Boundary Reclassification from State Agricultural District and Rural District to State Urban District, and also a Change in Zoning from the Interim District to the P-1 Public/Quasi-Public District for the Hana Community Health and Wellness Village at 4590 Hana Highway, TMK: 1-4-003:022 and 024, Hana, Island of Maui. We have, with us, from the County of Maui, your Deputy Corporation Counsel, James Giroux; your Secretary to Boards and Commissions, Suzie Esmeralda; and our Administrative Planning Officer, Joe Alueta, who will be presenting the Planning Department's Report.

Mr. James Giroux: Before we get started, I'd just like to announce that Ms. Shamblin will be recusing herself from this portion and we will be turning it over to her co-chair to rule on decisions of order in this proceeding.

D. PUBLIC HEARING (Action to be taken after public hearing)

- 1. HANA COMMUNITY HEALTH CENTER, INC. requesting a State Land Use District Boundary Reclassification from State Agricultural District and Rural District to State Urban District and a Change in Zoning from the Interim District to the P-1 Public/Quasi-Public District for the Hana Community Health and Wellness Village at 4590 Hana Highway, TMK: 1-4-003:022 and 024, Hana, Island of Maui. (DBA 2003/0003) (CIZ 2003/0004) (J. Alueta)**

Mr. Joe Alueta: Good afternoon, board members, my name is Joe Alueta, I'm with the Planning Department. I would note that this has been a very exciting project. We had quite a few testimonies, a lot of written testimonies, and petitions, both for and against the project. I will pass those out. We did not have an opportunity to copy them, they are pretty much a good size volume of letters as well as petitions, once again, for and against the project and the concept. So I guess I'll pass this down, Fawn.

The Department will, basically, do a summary of the staff report that we've transmitted to you that you should all have a copy. I'll make a reference to the pages as exhibits as I go through it and pretty much talk about the highlights, some of the low-lights of the project,

and I'll leave the overall operation of the facility to the applicant and their representatives with regards to its function.

Once again, we're dealing with both a district boundary amendment and a change in zoning for the project from both the state and county agricultural districts, state ag and rural districts to the urban district, as well as a change in zoning from county interim zoning to the P-1 public/quasi-public district. This is all consistent with the wishes that are -- and the community plan map that was adopted for the Hana Community Plan. If you turn to -- if you look at Exhibit 3 of the staff report that I presented, you will see how the property has been -- has -- both the parcels have both some ag and some rural on it. It is approximately 12 acres in area. So when this project went out, the project went out with the scope of what it was doing, as to whether it was consistent with the community plan, as well as impacts of changing this parcel into the urban districts and the standards that we reviewed, and so I'll --

As I said, the property is approximately 12.1 acres. It's located near the intersection of Hana Highway and Uakea Road on the mauka side of Hana Highway. There's two TMK's, for simplicity, say it's Parcels 22 and Parcel 24. Parcel 22 is approximately 10 acres while Parcel 24 is approximately 2 acres. If you look on this map here, the smaller parcel is located approximately in this area where your existing Hana Community Health Center is located. There's also the larger parcel, it's sort of like a small flag lot, it does front Hana Highway on this -- to the north side it kinda has an access on that side or it touches Hana Highway up to the north side of the existing Hana Community Center, and then it runs up behind it and goes all the way to the back end. On our U.S.G.S. maps there is what is identified as an aqueduct on the U.S.G.S. maps that runs, basically, from the north to the south and crosses this parcel and that waterline or duct runs all the way out past Hamoa Bay, but I'll come -- when I get to my staff report, I'll come back on that.

As I said, the property is currently both state ag and rural. The entire parcel is zoned county interim. It is on the Hana Community Plan as public/quasi-public, and the entire project is located outside of the SMA. Surrounding uses: to the north is rural and ag lands; east is above Hana Highway and more rural lands; south is rural and agricultural lands, and to the west is additional ag lands. As, you know, all of you should know, the subject site is partially developed with the existing Hana Community Health Center. The majority of the site is vacant and undeveloped. Typically, the site slopes in a mauka to makai direction toward Hana Highway with slopes ranging from three to five percent and, as I noted earlier, there is an aqueduct identified on the U.S.G.S. maps that cross the upper portion of the property. And that's, basically, reading from Page 7 of the staff report.

I'm going to skip ahead to, and I will skip the -- the description basically is for redevelopment for the entire parcel into the Hana Community Health Center. I'll leave the exact description, the size of the buildings, the number of units, and square footages, and

how the proposed Hana Community Health Center will operated for the applicant. They are -- I believe that they've held several meetings, public hearing meetings, here in the Hana community, so I won't try to be redundant in that area.

Page 10 through 11 shows you the agencies that have commented on this project. It did go out to various government agencies. Highlighting some of the -- for the most part, given the site location, given the rural nature of Hana and how infrastructural -- majority of the infrastructural facilities are located or nearby to this property, agency comments were very favorable, either had no comments or no objections to the project. Those that did have comments or of some concern that has to be mitigated in some way or in some kind of recommended conditions that we'll be presenting to you.

The Department of Public Works, they have met with the applicant as well as Department of Transportation with regards to, you know, requiring more detailed building plans, they also noticed that there is a consolidation of the two lots that I mentioned. Department of Water Supply notes that the project site does have two existing meters that service the site and that the applicant's estimates of 9,750 gallons per day is low cause of what they -- from their estimates are. OHA had no objections. The Department of Land and Natural Resources, State Historic Preservation Division did state that an acceptable inventory survey report was done and that no historic properties will be affected by the undertaking. I did -- and the reason I brought up the aqueduct that was on the U.S.G.S. map, I brought that up because that is -- they were not aware of that feature that was identified and this is located more on the -- I'm trying to get my directions correct -- western side of the property, on the mauka side, and, typically, because of the age of the U.S.G.S. map that I was looking at, more then likely the feature is more then 50 years old, so they would have to have some kind of a documentation with DLNR, and that can all be worked out with -- between the applicant and Department of Land and Natural Resources. DOT states that, you know, Hana Highway traffic volumes are relatively low. Increases from the expanded facility is not anticipated to deteriorate roadway levels of service. They do wish that the driveway be shifted as far west from Hana Highway-Uakea Road intersection, and that the adequate site distances be worked out. That pretty much summarizes the comments that came from various government agencies.

In looking at whether or not, for a district boundary amendment and the change in zoning from -- to an urban district, there's criteria, you know, and this is reading on Page 12 of the staff report under our land use analysis, as many of you know the community plan, I mean there's three levels of designations, which I mentioned earlier: there's your state designations, your county designations, and your community plan designations. Your community plan is almost your wish list or what the community wishes to see in the future. The community has already, as indicated in the community plan map as well as languages in the community plan, has already said that they want to have this as the Hana Community Center, as an urban or some type of public/quasi-public use, and they've designated that

on the map, that indicates that they're looking for or tells the state, it signals to the state as well as the county that they want to see this designated to an urban type of use, and that's what exactly because -- and that's what we're analyzing it on as to whether or not it meets the criteria. And one of those criteria is for whether or not land should be changed from ag and rural to urban is the community plan.

Urban uses shall be characterized as city-like concentration of people, structures, streets, and urban levels of service or other related service. As indicated earlier, the project site is the site of the existing Hana Community Health Center; it is in immediate proximity to the Maui Police Department's Hana Substation as well as the Hana Fire Station; there's also lands nearby that have been designated for single-family residential use. Second, the site should be taken into consideration proximity to centers of trade and employment, basic services, such as schools, parks, water systems, solid waste, drainage, water, and transportation systems, and sufficient reserve for foreseeable urban growth. The project site is located one mile north of the Hana Town Center; the property is surrounded by residential uses along Hana Highway as well as the Hana Police and Fire Stations. Basic infrastructure public services are found in proximity to the project. The proposed action is not anticipated to affect the reserve areas of the urban growth. It shall include lands with satisfactory topography, drainage, reasonable free from dangers of any floods, tsunami, unstable soil condition, other adverse environmental affects. As I indicated, the topography of the site in my site description indicated 3 to 15 percent. The site is well suited. The topography condition is acceptable and the site is not susceptible to dangers such as floods, tsunami, or unstable soil conditions, or other environmental affects, and this is looking at page -- on top of Page 13 that I was referring to. Five, it shall include lands that are appropriate locations for new urban concentration and shall give consideration to areas of urban growth that's shown in the State and General Plan. Basically, as I stated earlier, it is indicated on the community plan for that future use.

The department also reviewed the -- both the applications for district boundary amendment and change in zoning with related to the community plan, those are identified on Page 14 and 15, looking at both economic opportunities, government services, social infrastructure, and the urban design of the project. The department found that the project was compatible with and in compliance with the Hana Community Plan.

We would note that, with regards to urban design, the project site has been reviewed by the department as well as the applicant had a architect review it to be in compliance with the Hana Community Design Guidelines. They found that they did do a good job. There's also some language within the overall community plan which states the limit building heights to two stories at 35 feet, they have done that. I will note, as indicated, the project site is outside of the SMA area and, normally, under the SMA rules, we would have the project being reviewed by an Urban Design Review Board to ensure that compatibility. Secondly, the project is -- although the community plan has language that limits 35 feet,

there is currently a bill that's being proposed for public/quasi-public districts that would raise the height limit, therefore, when we get to the recommendations, you'll see that we'll add conditions in to ensure, even though it's outside of the SMA and would normally have gotten that review, we want to make sure that this project gets an additional review on its architectural design and also to limit itself to 35 feet, even though -- even if the council passes another bill later that allows for public/quasi-public to be -- to go up to 50 or taller, to allow for taller buildings, we do not feel that would be appropriate within the Hana area as indicated in your Hana Community Plan, so we would be adding conditions to that effect.

The applicant, like I said, is seeking a zoning to P-1 public/quasi-public. It is consistent with the Hana Community Plan. The project site, as far agricultural, it is located -- classified as D, many of you know that ag land is classified A through E; A being the best land; E being the worse land for farming; the land is Category D, so it's not really that great of land for farming. Although, all of you know, in Hana, everything grows no matter what kinda -- as long as it rains. But that is one of the criteria that we look at for changing the zoning.

Bottom of Page 16, we talk about archaeological, historic, and cultural resources. Department of Land and Natural Resources, State Historic Preservation Division, found that the project did not impact any significant or adverse impact to archaeological resources, however, the department is concerned of the aqueduct that is located and we'll be asking for a condition to be added to the change in zoning that the applicant work with DLNR on identifying this aqueduct and determining its historic nature.

Pages 17 through 20, to the top of 20, we outline in more detail agency comments to the project with regards to, one, drainage, but also water, and also traffic. The applicant did a TIR and, as indicated, DOT Highways Division as well as the Department of Public Works did not have any concerns with the project and its potential for increased traffic in the area. Drainage is more of a function of design. The applicant will probably cover that as how they plan to handle the increase runoff from their site. As you know, as you add more impervious surfaces to the area, there is going to be increased volumes in water. The department estimates water usage for the project site between 25 and 40,000 gallons per day. The applicant had indicated a low estimate of 9,000 so the applicant did respond and the applicant will probably go over that in more detail. The Police Department, as indicated, is right next door, basically, Police and Fire. It should be a pretty safe place. They did indicate their support for the area -- for the project.

Social economic impacts. I think that the applicant will talk more to this, but, from a common sense standpoint, you have an increase in capacity and facilities that will service the Hana community and, in fact, the entire East Maui region with improved medical facilities and support services, not just for emergency care facilities and urgent care facilities, but also for long-term health care for diabetes as well as heart disease, nutrition weight management and fitness programs, so, from a staff point and reviewing the project

as well as the community plan and their goals for improving those types of facilities within the region, we think the project is -- complies with the community plan and will be an asset to the community.

Environmental impacts. With any type of new construction, you are going to have short-term noise and air quality impacts during construction. Best management practices need to be incorporated during the construction of it; that's pretty much standard law with any building permit. Based on the agency comments that reviewed the project, staff is not anticipating an adverse impact to wetlands, flora, fauna, dune ecosystems, stream ecosystems, marine ecosystems, natural features, open space or any view corridors.

As indicated by the sheer volume of the letters on the testimony, I'm reading on the last, second to the last page of the staff report, on Page 21, we did receive, at the time of this staff report, we did receive one letter with regards from John Blumer-Buell. His letter primarily focused on the community block grant as well as the operations of the facility. This community block grant is not an issue for the district boundary amendment and the change in zoning. Mr. Buell's letter does raise concerns regarding the proposed guest cottages. The Planning Department also had those concerns as to how the function of these facilities match with the overall project and how it would be allowed under the zoning designation being sought and, if you look at Exhibit 31, the department, myself, as well as the head of the Zoning Administration Enforcement Division did meet with the applicant. Based on the meeting as well as the written description, that's attached on page -- as Exhibit 32, 32-A, these facilities they are proposing are an integral part of the whole overall facilities and will be allowed to be constructed within the P-1 public/quasi-public district should it be granted by council.

As many of you know, the Hana Advisory Committee is an advisory committee to the Maui Planning Commission. On district boundary amendments and change in zonings, the Maui Planning Commission is actually only a recommending body to the Maui County Council so -- but you play an important part of hearing the community's concerns and holding the public hearing on behalf of the Planning Commission, and for that, we're very grateful. The department has, on Page 22, list your alternatives of what you can do for tonight and that would be deferral, you can defer action to another meeting date in order to obtain additional information that will assist in the deliberation of the request; you can recommend approval with conditions; you can take action to recommend to the commission to recommend approval of the permit request without imposing any conditions; you can recommend approval with conditions, and staff does have a list of conditions that we would recommend; or you can recommend denial and that you can action to recommend the commission recommend denial of the permit request. That pretty much concludes my presentation. If you have any questions, I'll try to answer it.

Ms. Kanakaole: Committee, do you have any questions?

Ms. Mavis Oliveira-Medeiros: In the testimony part you read at the end, you said something about the Planning Department is concerned as to how the function with the overall project, you know, the cottage, guest cottage thing. What did you say about what the zoning will or won't allow? I missed that.

Mr. Alueta: Within the public/quasi-public -- I'll step back. When this project first came in, we looked at it, and it didn't quite pass the duck test as far as if it looks like a duck, quacks like a duck, it's a duck, and, to us, it sort of looked like a resort or hotel rooms and that was our main concern, was like, well, what is this? And that's -- and if you look back at our comments back two years ago when the project first came in under the EA, that was our main concern. We had to sit down and after sitting down with the applicant and their representative and finding out how does this -- how does this guest cottages work, we're comfortable that these facilities are part of, part and partial, to the overall function of the Hana Community Health Center and that it will be allowed to be constructed within the public/quasi-public district. You know as --

Ms. Oliveira-Medeiros: It wouldn't need to be changed?

Mr. Alueta: Yeah, they can -- the current zoning that they are requesting is public/quasi-public, okay. Under normal circumstances, if someone came in to build these guest cottages, we would say, no, you have to be hotel. You're coming in for the wrong zoning designation and we wouldn't support that, not on this location. However, based on the fact that they're not just building some guest cottages, those guest cottages serve a function of that it doesn't match, you have to have it with the rest of the facility, and I think the applicant will speak to that more as to how that works and, you know, it's not like you get off the plane at Hana Airport and say, "I need a place to stay," and you call up and say, "well, do you have a weight-loss program I can join cause I need a place to stay." I think that if you talk to them, it's a little different. It's a lot different, I should say so --

Ms. Kanakaole: You know when you talked about the aquifer that you guys found in -- up mauka side? Are you gonna -- you said you're going to recommend that they look into it, or can we not recommend, can we make sure that nothing happens to that aquifer?

Mr. Alueta: Correct. It's not an aquifer as in under the ground. What it is is it's a -- some people say it's a surface line, I haven't gone and looked at it yet, but it's called an aqueduct, and so some people say it's a cast iron pipe, it could be, you know, an old ditch, but it definitely shows up on an old U.S.G.S. map and it crosses the western portion, upper part of the property. And the applicant says that she's seen it and, you know, it's an old cast iron pipe and so, most likely, it could either be part of the old sugar plantation, it was put in then. And historic sites, believe it or not, you know, if it's more than 50 years old, it's considered a historic site, you know, so that's the criteria that the State Department of Land and Natural Resources uses and so we feel that it could be part of an old site. Also, from

my experience as a planner, a lot of times sugar plantations, they would put their waterlines along old wa'e or old historic Hawaiian taro patches along the ditches because it made common sense, you know, the Hawaiians figured out how to get the water from one end to another, why reinvent the wheel, just run the pipeline along the same area, and so that's the main -- that's the first thing that struck my -- struck me so that's what I would like them -- I'm going to be adding -- we've put down in our recommendations that we want, before they can proceed, that they would go to Department of Land and Natural Resources, reevaluate that area of the site. It only affects the very top part of the property so -- but that's our concern.

Ms. Kanakaole: I was just wondering just to make sure that no, you know, sewage system or cesspool or septic tank is near that aqueduct.

Mr. Alueta: Okay, yeah, like I said, it's an aqueduct, not an aquifer, whereas aquifers would be impacted by those kind of things.

Ms. Helekahi-Burns: I see that your report has also reported that it pretty much goes along with the community plan; however, I've read the community plan and I've seen over and over again prevention or preservation of the uniqueness of the Hana lifestyle. You know, you say that over and over and over again and I have a hard time to see, when I read in the proposal, that it says that it goes along with the community plan, however, in the community plan it states something else. I do want you to point out what part of the community plan that it's abiding by because I, like I said, I see it over and over again, you know, about the kind, the uniqueness of our lifestyle here in Hana.

Mr. Alueta: If you look on Page 14, it talks about the General Plan as well as -- the General Plan, there's two documents with regards to the General Plan. There's the overall General Plan, which is an individual document, okay. These -- that individual community plan is incorporated as part of the General Plan. So when people make reference to the General Plan, they're really talking about all the community plans together, okay. But as far as your concern as far as specifically both the urban design as well as on economic activities for the project site as well as the maps that are within, if you look at your Hana Community Plan, it shows this project site as being a designated site for public/quasi-public, and it talks about enhancing the health and wellness of the community, and this is part of that. So that's the main thrust and the justification is that this is the Hana community's, this has always been the Hana Community Health Center site and they would like to see that facility expand to meet the growing needs of Hana and its surrounding communities, and they want to have expanded facilities, and this is part it. They're expanding the facility to meet the growing needs of the Hana community and that's why they designated 12 acres for public/quasi-public on this area.

Ms. Helekahi-Burns: And that's the big concern that I have, you say community of Hana. Okay, clientele, visitors cottages, that's not the community of Hana, you know, and that is my big the kind, it was -- it's easy to be able to throw in cottages when it's trying to fit the whole picture of a wellness plan, however, community members they stay at their own house, they don't have to go to this cottages, and I would -- I'll consider the approval with the recommendations of what the Planning Commission had recommended, but that is a big -- a big the kind is that, eventually, the cottages won't fit into community health, you know, however, in the -- with the revenues that's generated from, I can see how we can benefit, however, in the cottages itself, is not directed for the, the kind, the appropriate population of the community of Hana.

Mr. Alueta: And I see your concerns and, once again, we raised those same concerns with the applicant as far as the functionality, and I think the applicant will explain that in better detail of how these cottages fit within this overall program, and, you know, if you still have concerns, that's part of your job to make the recommendations to the Maui Planning Commission and to voice those concerns and try to maybe -- try to help the commission come up with some kind of conditions that'll alleviate your concerns so --

Ms. Kanakaole: Anymore questions?

Ms. Oliveira-Medeiros: I have one. You mentioned something about this project being outside of the SMA area or something. Can you tell us what that means? Does that mean that they won't have to do certain things and exactly what things are they?

Mr. Alueta: Okay, yeah, good point. The SMA stands for the Special Management Area and many of you have seen -- the majority of the times that I come before this board to make a presentation for a project it's either because the project is located within the Special Management Area, alright, or they're coming in for a State Special Use Permit, okay. The Special Management Area is under Hawaii Revised Statutes 205A and it, basically, is an environmental document or environmental rules that requires that the county and the state and the county to look at projects and how those projects will impact the coastal zone or the ocean as well -- I mean the coastal environment, whether it be beaches, pollution along the coastline, how it affects the fisheries, all those things are taken into account. But also, the SMA has also been used to gather more regulatory review of projects with regards to urban design, you know, how or what color you paint your building, what kind roof you put on, and so in that sense, if this was in the SMA, this project would come back to the Planning Department and to this board for review of its architectural style, and also we use the Hana Community Plan as a guide, okay. We don't have that opportunity here, okay, so that's why I pointed it out in that we were incorporating some type of review within the conditions that we're proposing for the change in zoning so that our agency or our department has an opportunity to review the architectural design of this project to see that it's compatible with the community plan cause there are design criteria within the

community plan, I mentioned the 35-foot height limit that the Hana Community Plan talks about establishing for all of Hana, as well as there's also what we call the Country Town Design Guidelines for Hana, which this community spent a lot of time developing and, you know, the county spent a lot of money to hold those meetings here in Hana to develop those design guidelines, and so we don't wanna have just because this guy's outside the SMA, you know, he thumbs his nose at it and doesn't design it. We want to make sure that he builds a project that serves the community but also designs a project that is really compatible and looks nice in this community, and so that's where -- so we want to make sure we incorporate conditions into that.

Ms. Shamblin: Does the change of zoning affect the neighboring landowners around this facility and if it does, how so?

Mr. Alueta: No, the zoning is only going to be impacting these areas. And the other areas adjacent to this property or to the north of the property, they're not designated on the community plan to be changed so there's no -- the community plan has not said that we want this to be a certain -- I do know that on the community plan map to the south and mauka of Hana Highway, right, is an area that's designated for single-family; that's across from the Police Station, there's a big chunk of land, so -- but immediately, no, but it could -- I mean but it helps to have the infrastructure in place, you know.

Ms. Kanakaole: Mahalo. Should we have the applicant give his presentation?

Mr. Mich Hirano: Good afternoon, Madam Chair and Madam Vice-Chair, Committee members. My name is Mich Hirano, and I'm with Munekiyo and Hiraga. Our firm is assisting the Hana Community Health Center with the entitlement applications for a state district boundary amendment and a change in zoning for the proposed Hana Community Health and Wellness Village project. I would like to just give a brief background of the project; the proposed uses of the Hana Health and Wellness Village that is being proposed; I'd like to just as well discuss a bit about, a little bit about the project need; the proposed plans; summary of the community meeting that was held to review the Draft Environmental Assessment, some of the items that were -- questions that were raised during that meeting, responses to those questions; again, summarizing the land use entitlements that are being requested, and I would also like to address some comments that were raised with the presentation made by Joe Alueta regarding the concurrence with the community plan, and also with respect to criteria for the Special Management Area. So those are some of the items I would just like to discuss in my presentation.

In terms of the project background, and I know that this is pretty hard to see so if you don't mind, I'll just try and move this up a bit, we'll bring that here, I don't want to block out some of the audience, but the Hana Community Health Center is located on lands owned by the State of Hawaii, and it is identified by Tax Map Key Parcels 1-4-3: parcel 24, which is an

approximate two acres parcel where the current community health center is located. There's a ten-acre parcel surrounding the existing Hana Community Health Center that is kind of in a L-shape sort of size or an L-shape around the community health center and this is a 10.2 acre parcel and it is also currently leased by the State of Hawaii to the Hana Community Health Center.

The proposed project is to develop these lands into the Hana Community Health Center Wellness Village. There are plans -- Hana Highway is fronting the property. As you know, this is the current health center, currently, it's about 4,000 square feet. Plans are to expand the current health center and continue with the urgent care services, with the dental programs, the health center functions that are currently operating out of the health center will be as well expanded in the existing building.

Currently, the Hana Community Health Center provides a full range of primary health care, dental care, and mental health services to the residents of Hana as well as a 24-hour urgent care service. In addition, Hana Community Health Center has instituted a preventative health care program designed to address the region's unusually high occurrences of diabetes and heart disease through improved nutrition, weight management, and fitness programs. The Hana Community Health Center also provides a full range of support services for the region's senior citizens, including in-home health care, transportation services, diet programs, home delivered meals, exercise programs, and case management services. The Hana Community Health Center also provides basic in-home health care training for families with seniors living at home. As a result, the program allows many of the area's elderly residents to remain at home as part of the Hana community rather than having to be relocated to facilities in Central Maui or off-island.

In terms of the project need, the Federal government and the State of Hawaii have released data related to the medical services available to the approximate 1,867 residents of the Hana region, which is approximately 62 percent Native Hawaiian, and this is from the 2000 census. In general, the data indicates that the comprehensive health care services in the region need to be improved. Currently, there are only two full-time physicians and one dental, one full-time dentist at the Hana Community Health Center serving all the residents of the Hana area. The Hana area has been designated as a medically underserved population, a primary care health professional shortage area, a dental health professional shortage area, and a mental health professional shortage area. In addition, the State of Hawaii has indicated the following: the death rate for the Native Hawaiians with heart disease is 66 percent higher than the average for the general population of Hawaii; Native Hawaiians die from diabetes at a rate that is 222 percent higher than for all ethnicities in the United States; the percentage of pregnant women in Hana who receive no prenatal care in the first tri-semester of pregnancy is the highest in the State of Hawaii, 34.8 percent compared to the State of Hawaii average of 14.7 percent; and infant mortality in Hana is the highest in the State of Hawaii. I think the objective of the health and

wellness village proposal is to provide preventative health care services dealing with diabetes, weight management, healthy dietary choices, and with that, a number of facilities are proposed that will help facilitate these programs and the delivery of these services.

Just to give you the details of what is proposed, I'll start with the facilities at the highway and just move to the north and west. The existing health care center will be expanded and the current services will be expanded into new and larger facilities; it'll be expanded from approximately 4,000 square feet to 10,000 square feet on the same site. There will be a reception area as you come into the center. The new driveway for the center will be to the north of the existing driveway, and there will be a reception area; small gift shop is proposed for that area. There'll be a parking area behind the reception area. There'll be kupuna housing. There'll be five units for kupuna housing. There's an expansion area that was identified for kupuna housing to the east. Further north of the kupuna housing is the nutrition center. The nutrition training center will include a commercial kitchen and dining facility for the congregate meal program, home meal delivery program, and healthy cooking demonstrations. The nutrition center will also accommodate fitness programs, diet and weight management programs based on traditional Hawaiian diets, the facility will serve day and overnight facility users, and be available for the kupuna and the elderly who rely on the health care services of the health center.

This is the facility behind the kupuna housing. The -- this will be a technology training center and conference center. The conference and technology center will be approximately 8,000 square feet and will include restrooms, conference rooms, teleconference rooms, a business center, and control projection room. The facility will also be equipped to provide distance learning and job training opportunities for those who are participating in programs. This is what will be the administrative offices. The administrative offices will be approximately 5,500 square feet and will be -- and will include staff room, restrooms, a mail room, a small kitchen, and five administrative offices.

Right now, existing on the site are a number of trailers. There's a trailer for the executive director, there are tents that are used for the exercise programs, there are trailers that are used by the medical staff, so this area is already used for some of the functions that are proposed and I think the change in the zoning that is requested and the state boundary amendment are to bring compliance of the existing zoning, which is interim, in compliance with the community plan, which is public/quasi-public. The zoning that is requested is for public/quasi-public use, and as well the state boundary district amendment is for a change in the state boundary amendment from the rural, which is the existing community center or the community health center, and the leased lands that are in the agriculture district to the urban district, and it's, basically, to just allow the existing functions to function within the appropriate land use designations.

There's a traditional cultural healing center in this particular area that is proposed. The cultural healing center will be approximately 5,525 square feet and will include locker rooms, steam rooms, whirlpools, sauna, and ten treatment rooms for medicinal use and tubs. Traditional and alternative healing practices, which include lomi lomi therapy, chiropractic, and acupuncture treatment will be practiced in the cultural healing area.

In this upper area, to the west of the project site, is the physical therapy facilities. The physical therapy center will be used for physical therapy, there'll be a therapy pool in there for movement, and movement and practices that will be used in the pool.

The wellness cottages will be located on the northwestern portion of the site. They'll be wellness cottages that will be related to the in-house programs that are provided by the health and wellness center. These will be used by people who are in residence and need to be sort of intensively kind of contained for the programs that are administered by the health center. And then at the far-northwestern portion of the site, there will be maintenance facilities as well as residences for employees that will be working at the center.

This is just some elevations of the center. As you can see, this is the kupuna housing with the units inside. The architectural style is in the same style as the existing health center. There is a Hana Design Guidelines that the -- that Joe Alueta was referring to with respect to the urban style of buildings within Hana. It is worth noting that the existing community health center is noted in that Hana style book, design style as a feature of Hana's architectural style. The proposed buildings will be as well in the same style as the existing health center. I think as well the center will incorporate lots of openness, what we would look at as distinctive Hawaiian architectural features using natural light and natural ventilation. This is a elevation of the conference and technology center. This is a elevation of the building, the nutrition training center in terms of its look, in terms of how it will look from the elevation, from looking at the building. These buildings are single-story buildings. The height limit, the existing limit in the P-1 public/quasi-public district is 35 feet and these buildings will be one story and will be below 35 feet in height. This is the physical therapy fitness center. This is what the building is proposed to look like, and this is the traditional cultural healing center from the north elevation. Employee housing. These are the employee housing in terms of the north elevation. These will be two-stories. I think there are about 11 units proposed for employee housing, and the wellness cottages will be kind of in the plantation style architecture, small single-story units.

In terms of infrastructure, there is no community sewer system in Hana so each of the buildings will be serviced with an individual wastewater treatment plant or individual wastewater system. These systems will be approved by the Department of Health. They'll be -- all the wastewater systems are regulated by the Department of Health and so these

will have to be approved by the Department of Health and they will be designed according to the Department of Health regulations.

With respect to water, there's a 12-inch line under the Hana Highway right-of-way or within the Hana Highway right-of-way. There are two water meters servicing the Hana Community Health Center now. There's a 5-inch meter and a 2-inch meter. With respect to the forecast of water demand or water usage, Engineering Dynamics had done the engineering, the preliminary engineering report for the proposed plans and their estimate for the water demand, which was estimated at 9,750 gallons per day is based on the following formula: they estimate that approximately 70 staff members at the Hana Community Health and Wellness Center, at one particular time, so they estimated 70 staff members at 25 gallons a day in terms of water use; in terms of visitors and patients and people who are taking programs at the center, they estimated 200 people a day, and they estimated 10 gallons per person per day, and that's 2,000 gallons total; with respect to the wellness cottages, the kupuna housing, they estimated 60 individuals at a 100 gallons per day and came up with a total of 6,000 gallons for those particular uses, and added those up, and they came to an estimated total of 9,750 gallons a day.

A Draft Environmental Assessment was prepared for this proposed use because a trigger for a Environmental Assessment under Chapter 343, which is the Environmental Laws of Hawaii, any use of state or county lands or funds is a trigger for an Environmental Assessment. Since these lands are owned by the State of Hawaii, that was one trigger, and it's also proposed that, possibly, state funds or state funds are currently used to support programs at the health center and so that was as well a trigger for an Environmental Assessment. We prepared the Environmental Assessment. The Final Environmental Assessment was published in December of 2004. A meeting was held on August 30 at the Hana Community Health Center to review the Draft Environmental Assessment. Approximately 30 people were in attendance at that meeting, and I'd just like to summarize some of the comments that were made at that meeting.

I think there was concern that the urban designation would spur development around the surrounding properties; that was raised at that particular meeting. As Joe Alueta mentioned, the surrounding properties right now are designated; there's single-family lands to southwest of the property; agricultural designated lands to the west; rural designated lands to the north; and agricultural or, sorry, public/quasi-public lands, which is the community fire station, the County of Maui base yard and highways yard to the southwest; and, I believe, single-family and agricultural lands to the west. So it's compatible with the public/quasi-public uses of the county base yard and fire station and police station and that it is already a public/quasi-public use, it's already in that use right now, and it's perhaps consolidating the public functions, the public uses for Hana by being located in close proximity to the police station, the county base yard, and the fire station.

There was also a concern raised about Historic Site No. 3150 on the site plan. Site 3150, there was an archaeological inventory survey done for the -- on the lands and four features were identified, Site 3150 is in approximately this location, and it was an enclosure, it was an enclosed wall. Data recovery was taken on Archaeological Site 3150. No further archaeological recovery or work was recommended and the State Historic Preservation Division had indicated that no historic properties will be affected by the proposal.

A comment was made in terms of the kupuna housing. Would there be room to expand the kupuna housing, which is in this particular area, and as a result of that particular meeting, there was a -- an area that was identified to the north that could be used for expansion of those facilities if required. And the reason that, I guess, the question was, you know, why -- how did you come up with five for the kupuna housing, and the response at that time -- the response was that that number was based on the available funding criteria for supporting senior housing by the Federal government, so grants were available to support development of senior housing for health services and, I think, the minimum number of those units were five and that's why five was kind of identified.

There was concern expressed about the economic impact of a hundred employees on the community. I think the response to that is two-fold. First, that the development of the proposed health and wellness village will be phased over a number of years and the timing of the phasing will, to a large part, depend on available funding, government funding to support the uses and to build the facilities. So over a number of years, the employment will be developed, say, over a ten-year period, so it could be ten employees per year, which is a gradual increase in employment. Secondly, the objective of the plan is as well to hire as many Hana residences or residents as possible, and there will be training programs that are offered with the development of these facilities so that current under or unemployed residents of Hana can participate in the training programs to be trained for the future jobs that come, so it's not as though new people will be coming into the region, but people will be trained for skilled positions to take at the center.

There was concern expressed about having more community input on the project and information to the board of directors. I think that that as well was responded to that we had one public information meeting to provide and get comments on the Draft Environmental Assessment, as well, the board of the Hana Community Health Center have held meetings and have developed an outreach program to get more input into the board decision making, so I think that that is a board administrative matter that has -- has been kind of responded to and it was a bit of outside the scope of the Environmental Assessment except where input was received on the facilities that were proposed.

A question was where would the funds to develop the project come from, and as is the case with the current program and facilities, the Hana Community Health Board would be looking -- would be looking at public and private sources of funding, and applications to

funding agencies have been made for particular facilities, for example the nutrition training center will be -- there's great interest by the Community Development Block Grant that would look at funding portions of the training center, nutritional training center to run programs and to build the facilities. So there will be sort of a combination of public and private funds, as well as, you know, the public funds will be from all levels, County, State, and Federal.

What is the phasing of the project? And, again, I'd like to mention that phasing is really dependent on the availability of funds. This is a long-term plan that will be developed over a number of years, up to ten years. Phase 1 will be from 2005 to 2008 and would include the nutrition training center, without the kitchen and -- without the commercial kitchen and restaurant facilities, there will be a conference and technology center, and wellness cottages, those will be sort of scheduled for the Phase 1. Phase 2, from 2010 to 2012, would include the administration center, which is the 5,525 square foot facility there, the reception center, in that area, and the therapy fitness center and traditional cultural healing center, these two facilities in the western portion of the site. And Phase 3, which is anticipated to occur approximately around 2012 to 2015, will include the kupuna housing, maintenance building, and kitchen facilities.

There was also a question about how the market study was conducted and were people consulted, people in the community, were they consulted in the development of these plans, and the community was involved in the planning of the health and wellness village through participating in a number of focused groups that were established to look at needs, health needs in the community and how to respond to those health needs, and these were sponsored by the community health center. As well, there was a survey that was done with over half the households in Hana were contacted and they were asked a series of health questions to identify health services and needs in the community.

I'd just like to comment on two aspects of the analysis and that is, one, in terms of the Special Management Area, although this particular area is not located within the Special Management Area of Maui, we, in our assessment, Environmental Assessment, nevertheless, assessed the project in light of the criteria for the Coastal Zone Management for the State of Hawaii and the Special Management Area criteria of assessment. So although, as Joe Alueta mentioned, that, you know, the project is outside the Special Management Area, we, nevertheless, did the analysis and I'd like to just summarize some of those -- some of those findings, and this was pursuant to Chapter 205A of the Hawaii Revised Statutes, which evaluate coastal management, objectives, policies, and guidelines for the State of Hawaii and the County of Maui, and there were a number of criteria that are assessed. There are like recreational resources and the objective is to provide coastal recreational opportunities accessible to the public, and our response is that the proposed project is not anticipated to adversely impact shoreline recreational resources or coastal access. This is not a shore-fronting property. It will not have impact on the shoreline.

In terms of historical resources, the objective is to protect, preserve, and, where desirable, restore those natural and manmade historic and prehistoric resources. Our response is that an archaeological inventory survey was carried out to identify historical and cultural resources on the site and that the State Historic Preservation Division had issued a no-effect letter on the proposed development.

In terms of scenic and open space resources, the objective is to protect, preserve, and, where desirable, restore and improve the quality of coastal scenic and open space resources. The proposed project will not impact shoreline views or open space resources in the Hana region, and the proposed facility improvements will be designed in accordance with the Hana Community Design Guidelines.

Coastal ecosystems, the objective, protect valuable coastal ecosystems including reefs from disruption and minimize adverse impacts on all coastal ecosystems, and the response is the project site is located mauka of Hana Highway, nevertheless, appropriate best management practices will be utilized during construction and activities to limit potential adverse effects on surrounding properties and the environment.

And on that, I would just like to just briefly review and go over with the Committee the drainage plan. According to Maui County rules, all projects have to retain any increase in surface runoff caused by the development onsite so that the water or storm water runoff does not impact adjacent properties. The proposal with the drainage plan associated with the proposed improvements will be drain inlets, drains and gutters in the parking areas, and all the hard surfaces, which will be collected through the design of the slope of these areas and then they'll be transmitted into retention basins that will be developed within the landscaped areas and subsurface areas, and these retention basins will hold the storm water and then it will percolate into the ground so that adverse impacts to downstream properties will be avoided.

In terms of economic uses, again, returning to the coastline management objective criteria, provide public or private facilities and improvements important to the State economy in suitable locations, and our response to that is that the proposed project will have short-term beneficial impacts on the economy to the construction -- through the provision of construction employment, as well, they would have long-term beneficial economic impact by providing jobs for the residents of Hana; it would provide increased job opportunities as well as vocational training.

Coastal hazards, another objective of the Coastal Zone Management program is to reduce hazards to life and property from tsunami, storm waves, stream flooding, erosion, and pollution. And, based on the best management practices that will be utilized during construction as well as the drainage improvements, individual wastewater treatment systems for the wastewater, to handle wastewater, we conclude that the proposed

improvements are not anticipated to increase susceptibility to coastal hazards and they will be developed in accordance with the applicable flood zone requirements.

Moving on, beach protection. Again, we do not anticipate impacts to beach processes as a result of the proposed improvements or to marine resources.

So, although it's outside the SMA, we had carried out the assessment according to the criteria of the shoreline management and found that it will not adversely impact coastal areas.

Just to conclude then, the applicant is seeking a state district boundary amendment from the agricultural and rural district to the urban district. Again, this two-acre parcel, where the current community health center is located, is designated in the State Land Use map as rural, and the 10.2 acres is designated as agricultural. The request is to amend the district boundary maps of the State Land Use District to change these areas from the rural and agricultural designations to the urban classification. And the second entitlement requested is a change in zoning from the interim district to the public/quasi-public district. The reason for that is to bring consistency with the community plan, which is public/quasi-public. Zoning is requested to take this, which is called interim, and designate it for the public/quasi-public district.

So, with that, I conclude my presentation on the project and Richard Miyabara, the project architect from GYA Architects, is also in attendance with me today, as well as Cheryle Vasconcellos, from the Hana Community Health Center, and we are available to answer any questions that the Committee may have, so thank you for your time.

Ms. Kanakaole: Mahalo, Mr. Hirano. Are there any questions from the Committee?

Mr. John Romain: The way, as I'm trying to sort this out, I see there's a couple of dimensions on this project. One is to increase the health services provided to the community and, if I understand it correctly, the addition of the wellness cottages and conference center is as a means of generating additional income to support the medical center. Is this a simplistic but accurate understanding of what this is about?

Mr. Hirano: I think the, yes, the development is, the proposed development is to increase and provide quality health services to the residents of Hana. Identified as part of that component is a technology training center and the wellness cottages. They are seen to be able to produce revenue for the center but they -- all services of the health center, to some extent, produce revenue to sustain the health center services, and the community health center has developed a sliding scale of ability to pay for services, and all the facilities will be, I think, geared to that sliding scale. So people who are coming for residential treatment that have to stay in the wellness cottages will be paying according to their basis of need --

of ability to pay for the services on that scale and so, in some cases, it may not be a revenue producing feature but --

Mr. Romain: The reason too is that I understand in looking at the phases, the first phase brings in the wellness center cottages as well as the convention center and, yet, the kupuna housing doesn't come on board until Phase 3 and that, you say, is depended a lot on Federal funding, and the way that the Federal government is going right now, I don't know if we can really genuinely look ahead that many years to count on this as being a means of supporting it and, yet, this seems to me to be one of the more urgent aspects of it in the immediate future.

Mr. Hirano: And part of that as well, as I mentioned, the phasing will be based on availability of funding and policy decisions by the board. If that is considered a urgent need, the board will respond in a manner that would maybe bring that up to a higher priority, but, again, it will be based on the availability of funding.

Mr. Romain: Thank you.

Ms. Kanakaole: Anymore questions?

Ms. Helekahi-Burns: Just with the maintenance of this after it is all built, what is the life span of the structures that are going to be built? I mean what is the life span of -- before it has to be redone or re -- yeah, renovation?

Mr. Hirano: I'd like Richard Miyabara, the project architect, just speak on that, on buildings in general.

Mr. Richard Miyabara: My name is Richard Miyabara, from GYA Architects. To answer that question, it may be -- I can't put a number to that. It all depends like it depends on maybe how well you maintain the building, how much maintenance you do to it, and that will definitely increase the life of the building. Materials we pick, that would also be -- that will also influence as how much -- how long the life span of the building is going to be. It depends. I mean, you know, it's hard to say, like over here it's pretty like humid, wet area so we gotta be, as far picking the materials, it's gotta be the appropriate ones that can withstand the climatic conditions also and so many factors. You know, I've seen buildings where, in no time, yeah, it's deteriorating. You know, if there's a problem, they most have to re-roof it, we repaint it no time at all, you know, that's done -- State work, you see some new buildings that have to be maintained quite often and I've seen some buildings that maintain pretty well, even, you know, 30 years old. So it's hard to pinpoint a given number of how long, you know, each building can last.

Ms. Helekahi-Burns: Thank you.

Ms. Kanakaole: Anything else?

Ms. Oliveira-Medeiros: I was wondering about the lease, is it one of those long-term 99 year leases or is it a 5 year thing or when is it up, if you know, and like that?

Mr. Hirano: I have to ask Cheryle about that. It's a 55-year lease.

Ms. Oliveira-Medeiros: Do you know when it's over? When it's --

Mr. Hirano: 48 years left on the least.

Ms. Oliveira-Medeiros: And then my second question was the archaeological site that you guys found, you said it was an enclosure, what kind of enclosure was it?

Mr. Hirano: I believe it was an agricultural enclosure, and I could just read from the report. It says, "Site 3150 is a complex of four features. There's a small rectangular enclosure, average height of the walls is 0.6 meters above the ground surface. There are two entrances to the enclosure: one is about 0.4 meters wide and is near the southeast corner of the eastern wall, there are upright, has boulders on both sides of this opening; the second opening is the center of the southern wall and there's a single similar upright on the eastern edge of the opening. Feature B is a large rectangular enclosure, about 12 meters southeast of Feature A. Feature C is an L-shaped enclosure associated terrace located about 20 meters southeast of Feature B." So that's what they say about those enclosures.

Ms. Oliveira-Medeiros: So they're buildings? Are they buildings or stonewalls or what are they?

Mr. Hirano: The walls that are about one foot high, so they're -- they're like -- they're walls, enclosures, and they think they're agriculturally related for animal enclosure.

Ms. Kanakaole: Anything else? Okay, before we start the public hearing, we're going to take a short break cause it seems that the public hearing will be long, so we'll take a short break and we'll come back in about three to five minutes.

(A recess was called at 5:50 p.m., and reconvened at 6:03 p.m.)

Ms. Kanakaole: Okay, I call this meeting back to order. We're going to open up for the public hearing section of our meeting. I will call your name, you have three minutes, and you will be timed. If you get close to three minutes, 30 seconds to finish your testimony and then if you wanna go longer, we'll ask you to come back at the end if you wanna continue. Okay, so the first person is Tony Angelin.

a. Public Hearing

Mr. Tony Angelini: Committee, just a couple of things, it won't even be three minutes. One of them is my -- I see all this and I understand it, I'm in work force development for Ohana Makamae as well, and we serve the community as well. My first question is actually in regards to the legality of the board of directors, period, and the project in itself, and who's there. That's number one. We haven't even established that yet. And number two is I'm concerned as to where they're going to get all these people to work in all of these buildings. The hotel can't even get the people to work there. Where are they going to get all these people? They say they're going to be from Hana? There aren't that many people in Hana looking for work that I know of, not that many, so are they going to come from the other side if they cannot find them? What happens if the project doesn't -- isn't successful in the health way? Are we then going to be asked to give up the reason for the health center and have it turn into a spa because it'll all be there already to do that? So those are my concerns in front of the board and that's it. Thank you.

Ms. Kit Gillette: Good afternoon. I'm a private mental health provider here in Hana. I've lived here for about four-and-a-half years now, and I'd like to say that I'm against the change in zoning because of a couple of -- for a couple of reasons. The primary one is what I consider to be the limited community cooperation, in particular, at the HCHC board meeting two months ago, I testified on behalf of Dr. Chad Meyer requesting that HCHC work in concert with Ohana Makamae, Hana's family resource center. The board replied that they had written a letter to Ohana Makamae inviting Ohana Makamae to submit a proposal as to how Ohana Makamae would like to work with HCHC. As a professional in mental health, for over 50 years, I was rather, you know, surprised at that. I've always enjoyed exchange of services between agencies by way of written consents for shared information between practitioners. And after the meeting was over, I did mention that to the board, and then after the meeting was over, I checked with Ohana Makamae and they had not received a request for a proposal to cooperate with HCHC, and so I really question is the board really interested in cooperation -- cooperating with other agencies, other non-profit agencies here in Hana and providing the best health care that the people of Hana deserve. Also, in regard to the staff housing at the health center, they say that this is going to be -- give jobs to people who live here in the community and if that is true, most of us who live here have a place to live and so we really don't need staff housing. We're already housed. So I'm afraid that what might happen is what seems to have happened in past and that is that professionals from other parts of Hawaii and the Mainland are brought in to be used here at the community health center. Thank you.

Mr. Heinz Karrer: I'm Heinz Karrer, I'm from Switzerland, and only a part-time resident of Hana during four months of the year. I'm a physician, retired, interested in nutrition. I'd like to say, with all these buildings and all these projects, you do not correct the malnutrition of the population of Hana and of the United States. You need education to improve your

meals, not a new kitchen, and education you could get from anybody who really knows what health ...(inaudible)... I'd suggest that you cut down your fat, cholesterol, that means no meat, no frying, no butter, no margarine which is the worst, and really cut down on all that and live as vegan, in vegan diets, and you will greatly improve your health, decrease your weight until you are underweight, as I am, and I'm 83 by the way, quite health, my blood pressure's 110, I have no blood sugar, my cholesterol is 150, and anybody could do that and you will not get heart disease, you will not get diabetes. I think you don't need a center to do that. It needs instruction and a little bit more attention to the basic nutritional facts of everyday life and you will greatly improve your health. I thank you for your attention and excuse my accent.

Ms. Viola Cashman: Good evening, Madam Chairman, Madam Vice-Chairman, the Committee, Advisory Committee, and the Hana community. I have a letter in your stack of letters, somewhere, and my letter, when you get to it, if you ever get to it, is really a letter written in support of the Hana Community Health and Wellness Village. My name is Viola Cashman. My family is from Maui, from Kaupo, and I have lived here since I was a little girl, and I have seen our Hana Health Community Center function as a full-service hospital, where I think I saw some of your little ones being born when I was in the hospital, and I've seen it dwindle, dwindle to a health center that does not provide, you know, the kinds of health care that our people need. I've been away for a while and I came back in 1995, and when I first came back in 1995, I started the Food Bank here in Hana. We started out in Keanae. And when we came to Hana, the first thing that people said was, "We need healthy food. We don't need to be eating cereal. We don't need to be eating high cholesterol food," like Dr. Heinz was talking about. And I absolutely agree with that. Since 1999, I have been a member of the Board of Directors for the Hana Community Health Center. And during that time, I have seen the culmination, the beginning, and the expanding of different programs for our people, open to all other peoples also, and these programs have been helpful, not only to our elder people, but our families and our youth in the school. And as a teacher at Hana High School, this is my concern that our children will be growing up and they need to grow up with a healthy styles and you know what? We as the community need to take the bull by the horn and teach our children these healthy lifestyles so that when they become the leaders of our community, we are not looking at them as people that we are hesitant to follow, but as people who have been living their healthy lifestyles all of their lives. I continue to live down in Hamoa and I will continue, and I am very proud to be a member of the Board of Directors for the Hana Health Community Center and true, true, there are many ways that we can come together and we can go ahead and collaborate with one another and be open to one another, but the fact is -- thank you. The fact is I want to thank you very much, Advisory Committee, and Hana health community, but we need to continue with the healthy lifestyles. Thank you.

Mr. Jackie Kahula: Aloha, Hana Advisory Committee members, Joe. I'm here in support of the HCHC wellness project. I'll start with saying that I use all the services that the HCHC

provides up to this day. I suffered three strokes within nine months and I just my hip replaced a month ago, so I'm a constant user of HCHC. And like critic mentioned that this wellness project will undermine our health services, this individual is not using the health center because he don't know what's going on up there, where the services are provided. The kupunas had to go under the tent and fight these elements when they have lunches, and the staff, inconvenience for them, but they try to make you as comfortable as they can even though it's under a tent. I use the lomi lomi service, it's in a trailer. And other services that I use, I have to go in one small office space like one closet, and that's they're using, and you're trying to -- this person's trying to tell that this place, this project will undermine the services? I don't think so. We have an awesome team of doctors right now, and nurses, and the support staff. I know because I use them and so does the rest of the kupunas. We might not remember things good, we might not see too good, we might not hear too good, but we sure know what the hell is going on up there. We know what kind of services that they're providing for us. I use their healthy meal services provided on wheels. There are awareness program and prevention programs, there are weight condition programs; all those things that help to better the kupunas lifestyle that we can live a better quality life, whatever our Akua is going to provide -- let us have, how many more years He will let us have that we would have a better lifestyle of living. So I support this project. The idea of this project is to be self-sustained and I remember Cheryle when, I think it was in 1997 or 1998, she had a community meeting at the Mother Alice Hall at the Mananaloa Church, and I asked her, at that time, what your vision is for the Hana health -- Hana Medical Center at that time. She said that her vision was to see it expand and be self-sustained, and I think she's on her way right now. I was listening to Joe and Mr. Hirano, all that palapala and all the work that they've done, they're not sitting on their okole - they're doing their work. It takes dedicated commitment, long hours of meetings to get this far.

Ms. Kanakaole: Uncle Jackie, mahalo. E kala mai ia`u but --

Mr. Kahula: Kala mai. Kala mai.

Ms. Kanakaole: The time is up.

Mr. Kahula: Okay, hang on here for little while more. Well, I no can sit down too long so as soon as I pau, I going hele on. So kala mai, please. I ask you to support the HCHC request for land use reclassification from ag, rural to urban because the only way our health service is going to improve is to improve our center where it's like a closet and they're talking about, you know, where we going get the people for work; we can get them from Hana. We don't have to go outside and look. Kids that are getting out of school, they no more work. They only get the work is they gotta go to the hotel or wait till somebody retire or die. So this is an added employment for our young people in Hana. And with the training program that they offer, I'm pretty sure we can. Okay, like I said, I support this

program and, like said, they, Cheryle and her board members are not sitting on their okole. They're doing their job to make this project, this organization a self-sustained one. Okay, my name is Jackie Kahula again and I support the wellness project. Aloha for listening to me and God bless.

Ms. Blair Toulouse: Hi everybody. Thanks for taking the time to listen to our mana`o. I appreciate that. I have mixed feelings and I'm excited about many of the aspects of what this project could offer our community. And, at the same time, I would like to ask you to disapprove of the project as it is now. I recently had a baby about year ago, and I only use HCHC, so I was surprised when I went there and asked for prenatal care and was declined. There's no prenatal care in Hana at all. And even after all these buildings are built, there will be no prenatal care in Hana. I can't have my baby in Hana with a doctor in the hospital. As Viola said, you used to be able to do that. And this project doesn't create anymore health care services. It does create an awesome atmosphere for preventative care and I support that. I take exercise classes whenever I can. I'm in the tent. I know how awful it can be when it's raining and you have bugs in your face when it's hot, and I would love a gym, I would love a pool, I'd love a massage. I buy the greens right now and I eat them. I get their food and enjoy it. But if I need dialyses, I'm still going to have to travel four hours in one day to go get it even after this project is finished, and that makes me sad because I wanna have my children here in Hana, and I wanna get my health care services here in Hana. I urge you to, if you want to approve a project for them, I urge you to urge them to address the hard core health issues that we have, not just prevention, and to try to get the health center back up to its stage where it was like a hospital, where it provided all those services so that we don't have to travel so far to get that health care that we need. Thank you.

Ms. Cecilia Kupau: Aloha mai. My name is Cecilia Kupau. I am a resident of Hana. I live in Pukuiloa. Listening to all the different testimonies, you know to reclassify an area, yeah, I question, and why I do this is because an incident occurred within my family. My sister is no longer here and she was in need of help, and I had taken her to the health center and she was denied for over an hour-and-a-half, that was my sister Emily. Her appointment was at 8:30 and they didn't call her until 9:30, then she was called in at quarter to ten, then Dr. Tim, Dr. Manning came out from the back room and said that he had bad news, that's exactly the words that came out of his mouth, I have bad news. We don't have the equipment to do her blood test, and I was told three days before by Jonathan, my cousin, that the health center has the equipment to do her blood test and that it could either be faxed in the result or phoned in. Now this was 10, on Saturday at 12:00, the Wailuku clinic would have been closed, so I was very upset, not saying the services that they given to our other Hana people is not important, but what happened to my sister, I was very hurt and it's still in me. So when I'm looking at this plan, how you have designed it, and to have it classified as urban from agriculture to rural, and what it will provide for our people, the whole focus is on economic development; that's what I'm seeing, and I'm also looking at

the kupuna, our na kupuna of Hana. They are the wealth of our Hana community and they are being looked upon as I'm looking at, they're the greatest assets because why? What they have to contribute to their families. If they're going to walk into that kupuna setting that you have provided for them, don't tell me it's going to be a ...(inaudible)... housing for them. Mahalo. Please consider this.

John Kahalehoe, Sr.: Good evening, Advisory Committee. Good evening, Madam Chairman and Madam Vice-Chairman. I'm John Kahalehoe, Senior, I have a testimony that I wanna read that I prepared and I'm almost sure that you all have a copy of it in that pile of -- stack that you have. Hana Community Health Center's proposed wellness cottages will facilitate and support the implementation of HCHC's health related programs and service. Health and wellness program will be based on scientifically tested, culturally sensitive lifestyle approach as designed to provide the tools and support necessary for participants to make the changes needed for healthy living. These programs are intensive in nature and will be developed to enhance the participant's understanding of the relationship between living habits and health. Participants will learn exactly how to take care of themselves to achieve positive results. These programs are designed to help the individual prolong or redeem life through an integrated and positive approach through wellness that includes lifestyle education, structure, exercise, and healthy eating. Residents of the Hana District are under-served by virtue of their isolation from the major population center, services, and facilities located on the other side of the island. Native Hawaiians continue to be the most seriously under-served population, especially in Hana, particularly, children, the elderly, and those at risk for chronic disease. This is no other financial viable alternative to developing our own infrastructure in order to meet the health and wellness needs of the Hana District. I am in favor and would like to see that the wellness center project be considered and move forward to its beginning phase. Thank you.

Mr. Keoni Keohuhu: Okay, my name is Keoni and I'm 16. I came with one speech prepared but listening to all the other testimonies, I wrote down some notes and I rather talk about that. Ms. Cashman talked about this lifestyle that can improve our lifestyles but within your own home, you can teach your kids how to eat healthy because it's you that buy the food and buy your home's food and teach your kids, supposedly. You don't need all these buildings for teach your kids how to live the way they should live. And she said that before it was a good running health center and stuff, why can't it be now without all this big expansion of the health center? Don't need all those buildings if it worked before. Some of the -- I see some of these facilities are worthwhile but some aren't. The size of this thing is so huge that it would make Hana not look like Hana really is, and, to me, because we the children of Hana and, no offense, but you guys is the adults, we going be here longer then you guys after this thing is developed so, to me, the children should be more involved and informed just as well as the adults because, like you said, 55 years from now, or somebody said I heard, we going be dead by then, or you guys going be dead by then, but, hopefully,

I not going be dead, and so that's why to me this is -- it should be more of the younger generations decisions on how because over on the map, there's nothing about a dialysis, and baby care, like she said, and so, I mean it wouldn't be as much of a big deal if had more worthwhile facilities then just one pool, one exercise room, or one massage room, I mean those, yeah, but I no see no -- nothing about the dialysis or for pregnant women and stuff so that really doesn't make sense, and whatever is decided should benefit our Hana -- should benefit our Hana community more than outsiders and, yeah, thank you.

Pastor John DeMello: Aloha everybody. Thank you, ladies and gentlemen, for hearing the testimony I'm about to give. Thank you for receiving my testimony in regards to the proposal being set forth by the Hana Community Health Center. It is no secret that this is controversial issue for our community. I would humbly ask those of the Committee and those in attendance to be open to the concerns of all parties and to show respect to all points of view, whether we may agree or not. I would like to attempt to present my position in the clearest way that I can. Because of the complex nature of the proposal, I'm going to try and keep my emotions in check as I examine the issues at hand. Firstly, I'm against any uncontrolled growth that would be for the self-interest of just a few individuals rather than the good of the majority. Therefore, the question in terms development or reclassification of land should be who will the beneficiaries be and will the long-term benefits be worth the necessary changes? I would like to see all our children have the opportunity to own homes and live here in the community that can provide career opportunities for generations to come. Needless to say, this kind of vision will involve uncomfortable changes, so to say that everything will always be exactly the same, would be an unrealistic view. We must approach all potential changes with caution and objectivity on a case-by-case basis. On that note, I have examined who the beneficiaries would be, if the proposed wellness village is approved and completed. I've spoken to the many individuals who currently are on the receiving end of the programs that HCHC provides. These individuals include kupuna, makua, and opio of our community. The Hana Community Health Center is a non-profit entity that seeks rezoning for future programs. Some of these programs are currently under tents and subject to weather conditions and cancellations. Currently, the food preparation department is doing an outstanding job in less than adequate conditions. Please remember that these are the meals that our own kupuna eat regularly. As to setting a precedent of uncontrolled development, I am under the impression that each request for zoning change must show good cause for the project. This project is for social and health programs that will benefit a cross-section of our community. If this request were coming from a typical commercial developer that was proposing a parking lot or a shopping mall, then I would voice my concerns. That does not seem to be the case here. Therefore, I'd like to voice my support of the Hana Community Health Center's request for the wellness village. I would like to thank the members of this Committee for taking the time to consider all the heartfelt testimonials. I applaud our community for taking the time to be actively involved in the destiny of our precious Hana. Regardless of the decisions arrived at, the true test of a great community is how we can

accept each other in our differences and continue to press forward to make Hana the best it can be for the good of us all. Aloha Ke Akua.

Ms. Pat Villiorimo Cockett: I'm afraid I don't have a written speech. I'm sitting here wondering, okay, this is supposed to support the health needs of the Hana community and I look back to what used to be the Hana Medical Center and, yes, it was limited in what it was available for; however, it's little tiny building at the bottom is kind of lost in this huge expansive plan and I'm really fearful that we're losing sight of what the true needs of our community are. We need a dialysis center. There is nothing on this. We need maternity services. There is nothing on this. We are spending a fortune, somebody's spending a fortune, I don't know who. Is this coming out of our HMSA? To make this happen. There are only five places for kupuna, with possibilities for expansion. What are the guest rooms for? What is the spa for? What are we doing here? This is more for people who can afford health services. This is more for people who can afford health services than those who cannot, and our community cannot afford these kinds of services. This isn't going to come to the community for free. Who's paying for it? And how much money has already been spent to make this whole plan be put in place? Did we spend all this money in exchange for a doctor? What is going on here? These are the questions I have. When you start changing zoning in any one area, you're opening a can of worms, you're opening major changes, and maybe, just for this site, but then the next person comes in, and the next person, and the next person. It makes it more difficult to say "no." Thank you.

Ms. Lehua Cosma: Aloha. Aloha, members of the Hana Advisory and Hana community. Mahalo for taking this time to listen to the concerns of the Hana community. I'm Lehua Cosma, a resident of Hana. I would like to express my aloha and mana`o towards the rezoning from agriculture, rural to urban for the development of the Hana health center's 26 million dollar project. I strongly support the programs currently at HCHC, and I appreciate the jobs currently in place for our keikis and families who work there, we have not been against people losing jobs, but I cannot support the rezoning for this development. I believe it is too extravagant, too commercialized, and materialistic for Hana. Most importantly, studying the map many times and doing a research on urban, I was sadden to find that rural areas, like Hana, who change their zoning to urban, has lost its culture, lost its value of the land, and people's property taxes went up because once it becomes urban, it opens the door to more development. In this research I found that what was once rural, is now cities. This is a wonderful project, but too large. We are only duplicating what services that already exist. We gotta take advantage of what we have now. Hana is so rich in its culture and resources. Our Helene Hall right here, it is a community hall that could hold the exercise classes, conferences, and so forth. Sena held her exercise classes here before. We have the old school cafeteria that could feed our kupunas the healthy meals with the community kitchen that's already there. It was utilized in the past and why not now? Swimming pool. The only swimming pool most of us grew up with that still exist is Hana Bay. This is where most of us learned how to swim. One of the nicest and safest

beaches in the state. Restaurant. We already have Tutu's. We have Hana Ranch Restaurant, Hotel Hana Maui; having another one would only be a competition and would take away jobs. Gift shops. How many more do we need? Kupuna houses, yes, because that was one of the first visions this community wanted to see happen. Our kupunas are important, they're precious, and I wonder why they are placed in Phase 3 instead of Phase 1 when they belong to be in Phase 1. Can I come back and continue? Thank you.

Ms. Suzette Cossey: Hello everyone and forgive me if I don't look up because I really have to speak quickly. Aloha and welcome, members of the Hana Advisory Committee to the Maui Planning Commission, and to my fellow Hana District friends and neighbors. My name is Suzette Cossey and I, along with my family, have been blessed to reside in Hana for the past 28 years. Other than the golf course issue a number of years ago, we have always been united as a community no matter the circumstances. With the proposal by HCHC of a state land use district boundary reclassification and change in zoning of their 26 million dollar project, we find ourselves again divided as a community. If the reclassification and zoning gets approved, we would have lost our voice and any say in future development plans that may occur at HCHC. If plans are allowed to move forward, the levels of impact will be great and varied. Following are several of the concerns that I have. Number one, with regards to the proposed community kitchen and plans to provide meals for not only our kupuna, which I wholeheartedly support and would like to see expanded, HCHC also plans to sell meals to the locals and visitors alike. There is presently an ongoing traffic problem at the base of the hill and near the entrance to the health center, oftentimes due to confusion by tourists not knowing where to go, and if HCHC has a restaurant on site, it has a potential of a traffic nightmare not to mention a serious hazard. The other matter would be the impact it would have on our residents who sole means of income is through food service. They are relatives, your friends, and neighbors, and are as follows: Sheri, Tutu's behind us; Carl and Linda up in Nahiku with their smoke fish stand; Uncle Bill's lunch wagon; Vinton and Lambert Castro, employees of Hana Ranch Restaurant, the restaurant as well as the take-out; Hotel Hana Maui, it's main dining room. To a lesser degree, you have Hana Store and Hasegawa General Store; Hana Gas, which sells food, snacks, and drinks. It is a very real possibility that family businesses could close and employees hours shortened if HCHC's restaurant opens for business. The proposed gift shop may affect the following, in the Town Center, we have the following family-run businesses, Lucinda's Forever Hana's Choice; Lono's Ohana Lei and Flower Shop; Cheryl's Hana Treasure Shop. Then there are Hana Store and Hasegawa Store with their souvenirs, etcetera, Hotel Hana Maui's Gift and Clothing Shop, and possibly the Hana Cultural Center to a lesser degree. The swimming pool. If there was a community pool, the ideal location should be at Hana High and Elementary School where, on a daily basis, it might be best utilized to incorporate some form of physical education for the children and also be accessible to the community where it would be put to greater use. Number four, Kupuna housing. There should be more than six planned living quarters for our kupuna, a combination of independent living, assisted living, and even hospice care facilities could

be implemented. Two-hundred and ninety stalls. Envision, if you will, the number of stalls that Hotel Hana Maui, Hasegawa and Hana Stores, the Post Office, Hana Bay, the Police and Fire Stations, Hana School, and Hana Airport, when you add all of the parking stalls in question, does the number even come close to 290? That is the number of stalls in the proposed HCHC plan. I'll come back, please. Thank you.

Ms. Terry Lee Poaipuni: Good evening everybody. I come here not as a Hui No Ke Ola Pono worker, but as a person that was born and raised here in Hana, been here for over 50 years with a few years being away to school, but I wanted to say I think the scary thing about it is having the word "urban" come up. We have fantastic doctors at the medical center. Dr. Manion just helped my mom, my mom is now in Hale Makua. But the whole point about this whole thing is that we're afraid of what will happen and the unspoken words sometimes that we don't hear. We hear your words about quasi-public and public-quasi, for us, some of us here, we don't even know what that means, so for us it's scary. It's outside is coming in telling us what and what we need to know and not knowing the full picture. For me, it's very scary. Bottom line, you're right, all this healthy eating, it takes place at home. If mom and dad is out working for how many hours, how can they teach their children. We've been trying to help the community but, again, they back, you know, they back -- and they need to get the help to continue; they cannot, it seem, continue to do it. We're just humans. We just do this. But the bottom line is we need to work together to somehow come to a place that the community can all agree that, you know what? We need this, we need what, you know, what you're offering, but we also need to come together and be able to share our mana`o, and I think we and you are the future of this community. You are the young people. You are our nieces. You need to make that choice and represent everybody as a whole. And for me, I see all the organizations as a plus, not I am better than you; you are better because of the funding source. It's all about us as ohana. Come on, we gotta get together. We talk about it, good words, but sometimes I feel like, you know what? Hana Community Health Clinic staff feel intimidated or maybe we're just too much for them. It's not the case. I represent the Konohia family that has been here forever. My mom is 91 years old and I'm grateful to Dr. Manion. Thank you, Dr. Manion, to Dr. Mabutas, thank you, but you know, we need you folks, but we need to work together. And as health advocates, we need, as Hawaiians, and I speak to you as a Native Hawaiian, hundred percent, we need to teach our kids. We can't depend on other people to teach them so that we can be the advocates for our families. You're right, doctor, you're right. Thank you.

Mr. Frank Leonowitz: Well, thank you for the opportunity to speak. I've been into holistic health for 35 years so I realize this is a very good thing to do but that stuff is free. You can choose the right food by yourself; you can do exercise by yourself; you can take a swim by yourself. I guess nobody noticed that we're surrounded by an ocean when they're talking about the swimming pool. So that part is free. The part about these condo, whatever these things over here on this part of the drawing, I mean like we're going to bring people in from

the outside to teach them how to do what? I thought this was like for Hawaiians. Hawaiians know how to heal themselves. So this is a bunch of bullshit. Sorry. But I guess I got -- how much more time do I have? So I think the focus should be on improving the basic medical facilities in Hana. You know, if somebody has a heart attack, let's like be able to take care of that, you know; somebody need the dialysis thing, you know, I don't have that problem, but if somebody has that problem, they should be able to do that in Hana, I would think, before we do this. You know, you bring in these white boys and they wanna do this stupid ass shit, you know. I'm sorry once again. I hope there's no children in the crowd. So I guess that's my opinion that I highly -- I highly praise the development of a better medical center in Hana but I think it should really cater to the basic needs of the people of the town and not to somebody's highfalutin ideas of what healing is all about because you don't know what it's all about man. I've been into this stuff for a long time and you don't know. You're just trying to make a bunch money off this town; that's what I think. Aloha. Aloha.

Mr. Ikaika Shamblin: No mind me, I kinda shame. I'm Ikaika Shamblin, born and raised here in Hana, but I support this wellness center because I think there will be a lot of jobs for our kids that going be all grown up and our grand-kids that going be grown up, and I think it would be real good for the kupunas cause I see them everyday, they come to the facility, and they come all healthy food that Sanoe them provide them. And for the lomi lomi, Uncle Jonathan, he give one good lomi lomi cause he went make my back more better. And that's all I get for say.

Mr. Kepa Lind: Aloha. My name is Kepa Lind, born and raised in Hana, and I'm here for support the HCHC and also support the people in this town too cause I think that the HCHC is doing a good job at doing it right now, and I had, about 15 minutes ago, I had a lot of things for say but, right now, I stay little bit choked up, get too much family members in here, I might hurt them too if I going say some other things. But I just -- I support the HCHC and the wellness village right now and, you know, I think it's a good thing for our town and, you know, for help the kupunas and for provide jobs for the young people that is coming up too and so I just support them. Thank you.

Ms. Loly Bergau: Aloha and thank you for coming, and aloha and excuse my back. Let's see, I too had a lot of things to say and now I'm in front of the microphone, anyways, I'm against this and the reason I'm against it is it's because it's setting a presence for changing zoning too quickly for the future. We just don't -- we -- what's being presented here is not, in my opinion, what the community needs. We need a health center. The health center that we have there is a good center and it's providing good services and it has been in need of expansion for years. I worked there ten years ago and it was in need of an expansion, and I don't see anywhere where the community center is growing at all. There's all -- there's ten acres worth of stuff to support a teeny little medical center. I would like to see a democratic input by the community to create a real medical center, a place where

services, health services can continue, prenatal services, birthing rooms, dialysis, and preventative services. I'm the first one to ride the flag on prevention. We need it. Now as far as our kupuna, I'm grateful that they're being served, they should be, and it's the Hawaiian protocol that they are first, and to see them in the third phase when possibly there isn't going to be any money to, at that time, have five homes, that does not seem right to me and I cannot support that, and the gentleman here who made the plan said that somewhere on the side, perhaps if there's funds, that they could add some more; that is just putting the kupuna way to the back and I can't go along with this. I have seen the numbers of the services that are having been provided at the medical center, and from going back to what they were eight years ago, it has decreased by 2000, and that's just a darn shame that people are traveling outside. Let's bring them home. Let's bring this community together again. Let's provide something. There's a communication breakdown where people aren't having enough input to what's going on in there that they are choosing to not use the services. Let's service the people. This is what that health center is there for. So I do not want to set precedent for this changing of zoning and -- or changing community plans that have not been established just by having a meeting and having things changed. Who knows who's next and what they want to put there. So I thank you for your time and let's make a better medical center.

Mr. John Blumer-Buell: I'm John Blumer-Buell from Muolea and I wanna thank Pastor John and Viola and Sam and others that this should be a hooponopono for the community, everybody's view is welcome, I don't agree with people, but we should be ohana. We need to get together, this community. Now, I'd like to, I'm sorry to say this, but I submitted 200 pages of background information to the Hana Advisory Committee and the Planning Department, and you don't have it, you haven't had the chance to read it, and they didn't do their homework. So, at the very least, you should defer this meeting till you have a chance to go through 200 pages of evidence that go back to 1993 when we started this. The other real disservice that the Planning Department has done is they're talking about this being in concurrence with the Hana Community Plan; that is not true. The -- I have a letter dated 1995 from the Hana Affordable Housing and Community Development Corporation reiterating the purpose of the redesignation of the Hana Community Plan to its current designation, it was for three acres for kupuna housing, three acres, and seven acres for expansion of medical services. This is Exhibit 4 out 15 Exhibits. The Planning Department has not bothered to answer any questions and they should be ashamed of themselves. This plan is not in concurrence. We've had two other major misrepresentations in the past by the Planning Department. The first was George and Mary Pino's old place, Guy Aina and family live there now, used to be owned by the Purdy's. We had a big fight over that back in the 1970's. There was an MF designation, it wasn't -- and the Planning Department came back saying, "Oh, you can build 104 units." Everybody opposed it. And it wasn't till we got clarification on the intent of the plan that it was changed and we recognized and grandfathered in the existing use. The other one is an affordable housing project proposed near on the old Howard Cooper's old place. The

Planning Department did not remember that that was redesignated during the community plan as an affordable housing project. It was designated rural, but the intent was for affordable housing. It's because I came forward with the evidence that that is now going to be affordable housing. I think the hearing on that is next Tuesday in Hana, so if you support it, show up. But there is a complete misrepresentation of the intent of the Hana Community Plan, and this is Exhibit 4, this proves it. This is from the Chair of the Hana Advisory Committee when they redid the plan, Mr. Bill Furman, and you've also been completely misrepresented. This is not a Hana community project. And I'm going to come back and tell you why this plan does not represent the community. Thank you.

Mr. Terry Lynch: Aloha. Praise God. I'm very happy to be here today and I thank you for your service and for the Planning Staff risking their lives coming out on the road today. I'm sure the conditions were dangerous. I wanna say first, there's an old Chinese saying, "You don't remove a fly from a friend's head with a hatchet." This project is a mess. We're talking 290 stalls? I just can't believe it. I don't think there's that many at Maui Memorial. And I'm really sad to say that I do not consider the Hana community the applicant. This medical center belongs to the Hana community. It doesn't belong to a couple individuals and it doesn't belong to a closed circuit administration. Where is the meeting where we could vote on this map and say, "You know, I like that. Let's all do it." Instead, the cart has been put in front of the horse, and now the project is being pushed down people's throats. That's not the way to do it in Hana. It's inappropriate. Wrong. I wish that this hospital could be back like it was under Doctor Howell, where real medical personnel were in charge, real medical personnel. I appreciate the program. I attend the hospital. I am a diabetic and I love the doctors there and I want to see more medical people in charge and that way this kind of plan will not be boiling out and causing all of this trouble for everybody and all this huhu. So I hope you will vote against this project. I come from urban areas. I have seen them turn like this, one by one, and every reason to destroy the land, and Hana is a very special place. Please consider these programs will continue for the kupuna and they are wonderful programs. Thank you. Cheryle, keep writing grants, get them going, but this is truly a size 14 foot trying to fit into a size 4 shoe. It looks like a foot in fact. That's my last footnote. I thank you so much. Please do not consider this as okay.

Ms. Kathleen Street: Aloha and thank you for allowing the people of Hana to speak to you and give their opinions. I'd like to do a little numbers game with you so if you're ready to write, you can write down some of these. If you don't wanna write them down, you can come see me and I'll give you the numbers again. In 1995, I testified before the Hana community about changing ambulance service from basing it inside Hana Medical Center to having the EMS people, thank you very much, coming out here to Hana. At that time, Hana had 9,642 patient visits a year. In 1997, after Hana Community Health Center took over, there were 6,214 patient visits a year. In 2003-2004, there 5,452 patient visits a year. This is a decrease of 762 patients per year. In 1997-98, 2,300 patients were served; 2003-2004, 1,757 patients were served. Where do I get my numbers? From the annual reports

put out by Hana Community Health Center. This is a decrease in 543 patients having files at Hana Community Health Center. In three years, an average loss of a 109 patient visits a year, we are going to lose a medical facility. It will not be feasible to operate a medical facility in this town. I urge you, if you give permission for this plan to go ahead, that you start from now to figure out who is going to deliver medical care to the people of Hana. I also want you to know that more and more people seek medical care outside of Hana. The number of people who have Kaiser insurance, who have HMSA insurance, who have HMA insurance, who seek medical care outside of Hana grows every year. Who is going to provide our medical care of us here in Hana? I would also like to argue the health morbidities statistics that were presented. I can clarify some of the numbers. People who deliver in Hana who have a zip code of 96708 all the way up to mile marker 29 are included in Haiku's statistics. And if you're going to approve, I suggest you plan for two traffic lights at the intersection of the entrance to the present Hana Community Health Center. Thank you.

Mr. Lorrin Pang: Hi. Thank you. I'm the District Health Officer for Maui County. I live on the Kahakaloa side. Let me just make a couple comments. I have seen the plan and the written part and I was very surprised that they weren't going to submit to a certificate of need. Most people doing health things do submit for that. If you don't know what that is, tell me what it is and -- I'm on the review board. That certificate of need reviews all things for the state. There's 11 points. Some of those points will ask, "What is the original mission of this HCHC?" They will also ask, "Is there a change of mission?" They will ask, "What is the service to the community? Can you prove that you will serve the community as you say it is?" They ask for proof. They ask, "Are you duplicating services that the community already has? And when you change missions, are you leaving a hole or a gap?" Some of these things have been raised. The next thing I wanna talk about is there was a comment that we did involve the needs of the community. We sent out a questionnaire about the needs. You asked them about the needs but did you ask them about this model? Do you like this model? Is this the right mix of education, prevention, and treatment? Obviously, some people want more treatment. The final thing I wanna say is I'm not for or against the plan. There's some aspects that are quite interesting that I'm for, and there's some things that are a little odd. Some things in the plan they try to make the thing economically feasible, put your thing in the black, get money from guests, fund the clinic. Some things put your clinic very much in the red. That's fine. We review hospitals for Ka'u to Molokai to Lanai to Kahuku. Hospitals and facilities are always in the red. But what do you want? You want to invest a dollar and get two dollars? You want to be in the black? Or do you want to invest a dollar and get nothing? But prevent 50 dollars for a visit to Wailuku or a visit outside. That's called, the second one is called cost diversion. You spend a dollar you prevent 50 from being spent, instead of spend a dollar and get two back. The health guys always know this. That's why we don't mind when facilities are in the red, we try to keep you less in the red, but when you try to keep it in the black, it is better to avert cost, then try to make profit, even if you plan to spend it on your

red side. If you say that doesn't make sense, I could make two bucks and I could fund the red side. That's not true. The leaders would actually say, "I spent a dollar, I prevented 50 from being spent for prenatal care." Don't you think you should put back 10 into the system which saved 50? That is where our leadership you all need are lacking. We are not taking the seed cost, driving it back, and instead poor Harry has to try to make a model in the black or spawned it some kind of profit. These things we can talk about later, but I really ask you to consider submitting for the certificate of need. Thank you.

Ms. Sheila Agnitsch: Aloha . . . and I no like be filmed. First of all, I just wanna say that I support HCHC's programs that they have right at this time. I take my children there. And I also support my bothers and sisters that work at HCHC. But what I cannot support is the passing of changing agriculture, rural to urban zoning. I cannot, as a kanaka maoli, I cannot grow taro or grow things out of a parking lot and, for me, I cannot -- I guess I wasn't one that got called when they took that survey, I wasn't one that was chosen when they sent out the palapala so that you could kind of be part of this planning, and so I cannot support all of it. There's a lot of really good stuff that is happening. I like the way the buildings are something that is Hana, you know, kinda look plantation. I like -- I like the kupuna housing, that is something that we always want for our kupuna, you know, there's so many of our kupuna that had to move away, you know, right now, you know, Aunty Elizabeth at Hale Makua, you know. I support anything for our kupuna, especially for that kind of things, but they should be in Phase I, you know, they are our kupuna, not Phase 3. I've, you know, a lot of people already said what I wanted to say, they covered that, you know. A lot of things are duplicated, you know. His talking, Dr. Pang talking about that certificate of need; that's very important. Something like that didn't happen with us. So I never have a say in this -- this village wellness but I know that there's a lot of stuff that -- things that already take place in Hana and, you know, I heard Aunty Terry about let's all work together as a community, you know, we all, we all ohana, you know, when I look out there, you know. I support the board. My Uncle Johnnie is on the board. I support my Cousin Lehua and my Aunty Sissy, they fighting for dialysis for Hana; that's very important; that's not on this. I would like to have people be able to say that my daughter, my son was born in Hana. I never have that option. I had to go Kahului and live out there with family for two weeks so that I could have my child out there, but I would have love to have been able to give birth in Hana. You know, from the medical center time with Doctor Howell, I don't really see progress, in some ways I do see a lot of progress, and in some ways it's regress, you know. No more. You cannot hanau in Hana, yeah. You know, I loved how Doctor Howell was your you go and see this doctor, okay, and, you know, he is the one that does your surgery when you go on the other side, you know, I loved that, you know, I would like to see something like that happen, not just diagnose, you go, you get one different doctor, you know, or you gotta go to a stranger, I loved that about Doctor Howell, and that was so unique to Hana, and I think my 30 seconds is up, but I just want to say that -- I wanna say so many things, I no like come back though. I just wanna say that I support Hana and I support ohana, working together, and I think a lot more of collaboration should

happen, you know, Hui No Ke Ola Pono had a wonderful food program, you know. Work together, you know. How can we go back to that? Or how can we work together? That's my big thing is let's work together and let's not forget that we all, we all family, we're all children of God, and I don't like that we somehow get divided, we somehow get -- we have to choose sides. It's not about sides because if we gotta choose sides, then we gotta be on the side of Akua, our aina, and us as kanaka, and that's the side you wanna be on, and thank you, mahalo, aloha, good night.

Ms. Malia Henderson: Aloha everybody. I do wanna say that I think you guys have a really difficult job with everything that you have to hear but I really see a lot of hope tonight in being able to hear all of the advice and all of the things that can make this happen. I'm like Sheila, I'm like a lot of people of what they've said as far as I truly support Hana Community Health Center in what the services that they offer for our kupuna. We have an outreach assistant who the only service that she can offer, thus far, here in Hana for our kupuna, is our meals on wheels. Meals on wheels is only given once a week. When we ...(inaudible)... then we have to refer people and we stop and think about it, community health center delivers and provide these meals Monday, Wednesday, Friday, and they deliver it. When you look at it, what choice are you going to give to them? The three meals a week or the one meal? And it's a really difficult thing. And what they're doing with our kupuna has been services that are so vital. I sit on a long-term care partnership. On this long-term care partnership, we identified a few things in Hana that needed to be done, that needed to address on how we can allow our kupuna to be able to age in place, and this is a big issue. This is one right here. This kupuna housing. I love that part of the plan, the kupuna housing, because that will allow our kupuna to be able to age in place. The other things, the main thing is right here, is our medical needs, that needs to be addressed. And I've had a few incidences where we've had some real close calls with my mother and I've seen so many close calls with our kupuna and some have not made it, like what Auntie Sissy talks about, and I just feel that we need to really truly look at these things. I would like to pose the question on -- with -- to you folks in regards to looking at all of this and what we can do to make it work, get with the agencies because I've heard a lot of voices from agencies tonight. We were never contacted on what we could contribute in this plan, you know, and how can we help as an agency. I know my mother was one person, she was paid 50 dollars to be able to get her input, and when I wanted to go with her, I could not attend with my mother, and my kupuna wanted me to come with me and sit in this whole planning thing, but I was told that I could not. Why could I not? And these are the things. Were they just selected people that were asked these things and I think that so many people was left out of the loop, and we would not be having this problem tonight if these people were not left out of the loop, and this input needs to be vital and be given by people. The only great thing I see on here is this, everything else we have as agencies that we offer. We have a wellness center in Hana with the hotel. Our kupuna utilize their pool for aquacize three times a week, it's a wonderful program, and we have the hui who provides health meals. We have chiropractors so I don't see why there's a need here. We

have these things within our community and we need to utilize them and we need to make it work that's Hana, that's for Hana, that fits our needs here in this community. You did a great job in your planning, beautiful, wonderful things, but is it for Hana? Does it fit our community? And that's all I want you folks to be sure that you really, really look at, make sure it's going to be right. I'm against the urban change. Thank you so much.

Mr. Peter Heinemann: Hi. I'm Peter Heinemann. I'm the managing partner over at -- for the ownership group of the Hotel Hana Maui. I really do not envy the position that all of you that on the Hana Advisory Committee have. This thing really tears my heart apart. I'm really conflicted about this plan. I'm very supportive of the Hana Community Health Center in terms of providing health care services to the Hana community. Hana desperately needs health care, but that's not what we're here about tonight. What we're here about is land use planning. One of the unique opportunities that this Hana Advisory Committee has tonight is to actually develop consensus here. You have land use powers. You have the ability to impose conditions upon a development. One of the things that was said at the outset of this meeting was you have the opportunity to defer your decision, to hold further hearings, to determine what kinds of conditions do you want to impose on this development. If it's for health care, we're very supportive of it. I think this whole community is very supportive of health care services being provided on this site, but let's take a look at this plan. Let's talk about the elephant in the room that nobody's talking about. This thing has more than 80,000 square feet on 12 acres. Think about it. The existing health center building is 4,000 square feet. This development is the equivalent of a 20-story building being built on that site. Think about it. At the Hotel Hana Maui, on 70 acres, we have less square footage than is what is on this site, okay. That's spread out over 70 acres. Now, again, you want health care services here. You can begin to use your powers, right, to develop consensus to figure out what kinds of buildings you want to have, for what purposes do you want them to have, to make sure that any development that occurs on this site is consistent with public/quasi-public providing health care services for this community. This is a zoning issue, right, and it's within your power to help this community develop a consensus because I think everybody in this community wants more health care for the community. Thank you.

Ms. Noe Lecker: Aloha, community of Hana and Advisory Committee. I'm a resident, born and raised here in Hana. I have been working at the health center for the past three years but I am not here speaking as a staff. I believe that my years as being a resident of Hana speak more loudly than being a staff of just three years. I wanted to state some issues regarding Hana Community Health Center and not being a center that works with other agencies. We have. August of 2004, we hosted our first keiki health fair, which a lot of the non-profit organizations in Hana did participate and it was for the benefit of our keiki. When you look at a project like this, you are looking at something over a period of time. You are looking at something that my 13 year old daughter now, my 10 year old son now, when graduating and furthers their education and decides to move back to Hana, live and raise

their family in Hana, that's the project that you're looking at. You're looking at my grandchildren and my children raising up their children in living a healthy lifestyle. You're talking about my children and grandchildren having a choice to go to a restaurant that provides healthy Hawaiian traditional meals. When you talk about duplicate service, Tutu's does not provide sweet potato, ulu, taro, poi, pohole salad, steamed fish, chicken. Ranch Restaurant and along with Hana Store, they do not promote healthy traditional Hawaiian meals, but, yet, almost -- we're going to be making five years where our kupuna nutrition program has provided meals, healthy traditional meals for the community through our fitness program, through our smoke free management, weight management program. This is what we're talking about. Health and wellness of the future of our kids. There was another issue about self-help housing and it's not needed. Right now, there is three generation living in one household. I don't want my grandchildren or children living with me, honestly. I would like them to be able to work in a facility that would provide self-help housing for them so that they can raise their children and their children in their own household. The other issue was brought up about duplicates of service regarding the hotel. The hotel does not service community people. I cannot take my grandchildren and say, "Can I teach them how to swim in the pool?" I cannot have someone who is diagnosed with arthritis say, "Can they use your swimming pool for therapy?" We cannot use the hotel unless you are a paying customer. You cannot use the spa facility. The Hana Community Health Center, over the years, have provided meals, lomi lomi, lomi lomi services, transportation at no cost, no cost to the community, but, yet, the hotel does. You have to be a paying customer to use their facility. So I would like to just thank all of you for giving us an opportunity and just keep in mind, this is something over 10 to 12 years that will be developed, this is something that will benefit our kids and grand-kids, and when I'm 65, I wanna know that if I have a chronic disease that needs 24-hour care, I wanna know that I will be able to use that kupuna housing. Thank you very much.

Ms. Mary Hanchett: Good evening everyone. My name is Mary Hanchett. I was born and raised in Hana and I've worked at the health center for almost two years now, and I use the services for me, my husband, and my children, and I currently participate in the fitness program that's taught Pake Tolentino, also a Hana resident. I attend the fitness classes four days a week, three times in the morning and once in the afternoon, and with those fitness classes, healthy meals are also provided for you and it's only a two dollar donation. I don't know where you can go and get that anywhere on this island. And I also participate in the yoga classes taught by Kim Kiho on Thursday mornings, and, currently, the facility we use, excuse me, that we use for the fitness program is under a tent and if the -- if it rains or if it's -- it's just terrible. It like floods out and you're not able to work out. So I support the Hana Community Health Center Health and Wellness Village so we will be able to have a covered facility where we would be able to workout, take our children with us, there also would be a swimming pool, which is not currently available in Hana. We have one at the Hotel Hana Maui but you're not able to use it, just as Noe said, and also a gentleman earlier said that you can exercise anywhere you want at home, but the point is, are you

really going to. The point of the fitness class is so that you can go and people will motivate you, it's for the company as well. And I believe that Cheryle is doing an awesome job. It is not an easy job maintaining the grants and everything she does to run the health center and I'm very privileged to work there and serve for the people of my community. Thank you very much.

Mr. Harry Hasegawa: Hana Advisory Committee members, you got a tough job, but thank you for being here, thank you for taking that responsibility. I am a Hana resident that was born here, my father was born here, and I think I'll die here too. And so I've seen what Viola saw where we went from a plantation hospital to a time when we had no doctor. There was only a nurse here and once a week we had a doctor fly in, to a great Doctor Howell, and to what we have now. It's -- we broke away from the State because we thought that this is the way that Hana could take care of itself and, truly, that's what we have to do. A lot of the State hospitals are not making money so their services are in jeopardy. Hana was a tail-end of the Maui Memorial Hospital and services were in jeopardy, so now we have the Hana Community Health Center and it's made out of Hana people, Hana board members. And we've gone through a lot of issues of they provided services and at times we thought it was way, way down where we didn't have money to do the thing, but we borrowed money so we could provide the services, and we finally got out of the hole there. And through the great, I think a big good job that our executive director has been doing, we have ample funds now and we can take the next step forward. Providing reactive health is good, you need it, but you gotta take the next step, which is proactive health and that means preventive health, that means as our good doctor there said, it's education. People gotta know what to eat, how to eat, and as one young gentleman said, they can learn it at home, but then another gal said, you know, will they do it. Chances are they won't; that's why they might be a little bit chubby like me. So they have classes there, they're under real tough conditions, I think some of you go there, you know how tough it is. Well, all I think we're looking at is, like one guy said it in some movie, he says, build a field and they shall come. Well, we have them here already. All we gotta do is get a building, get things going so more can come. Thank you.

Ms. Armine Medeiros: Aloha everybody. I would like to move to the map and explain to the people in the back, my back. In 1980, I moved back to Hana and I started working here in this, in here, and there was birthing, prenatal, pretty good x-ray, and everything, and a very good Doctor Howell. And since I was pushed out of there in 1997, there's no birthing, no prenatal, and I think the x-ray became minute, and doctors, every time you go to visit and every big problem, you get sent out. So don't you think that we should take this two point plus million dollars and upgrade our small little medical center instead of doing this whatever? Thank you.

Ms. Sanoë Cabral: Aloha. Thank for being here giving me the opportunity. I'm Sanoë Cabral and I was born and raised here in Hana, and I'll be a lifetime resident of Hana, and

I'm employed at the Hana Community Health Center also. I work with the kupuna program nutrition meals. I work with the kupuna five days a week. We provide them with transportation, healthy meals. We have -- I'm in support of the wellness village because the kupuna need a permanent facility for them to come and enjoy and have our -- have lunch there and receive the programs that they receive now. When it's storming like this, we gotta call them and cancel our programs. They cannot come. Our tent floods out, like tomorrow we might have to cancel it because they don't have a permanent structure. Our kupuna deserve to be in a nice facility, like the one we have planned here. So I really support the wellness village, and also our keiki will have jobs when they graduate from Hana. Also I wanna say that we have an awesome staff that works there, from our doctors, nurses, all the way from us in the back, our gardeners, we all work hard every day to support this community and support all the programs and the services that we, as staff, provide for our community every day, and I'm proud, I'm proud to work there, and I'm proud of the services that us, at the Hana Community Health Center, provides to our community. As far as them saying we're duplicating services regarding meals, regarding Tutu's and all the other restaurants in Hana, we're not cause we serve healthy meals, like Noe said, the foods that we serve, traditional Hawaiian meals, it's not going to be in competition with them. We going be serving healthy meals to better our health, our kid's health, and the health of our kupuna so, in the long run, we not going have diabetes and hypertension, and all the chronic disease that a lot of our Hawaiian people have today, so that's why this wellness village is big on prevention, so we no need be on dialysis when we reach kupuna age or before that. So mahalo for your time and I'm a big supporter of the wellness village. Mahalo.

Ms. Sue Cuff: Hi. Thank you for coming out and thanks for listening to our concerns. I've been in Hana for over 30 years and I was at the Hana Community Health Center, actually Hana Medical Center when they privatized from the State facility in 1997, and my concern here is mainly overkill as far as what we're trying to provide here. The medical center is kind of lost in this plan and I don't see how a gift shop, all these parking stalls, a convention center, and all this facility is going to be anything other than a development that will create some kind of a self-supporting, really a wellness village, a village onto itself. I don't see any inclusion for housing for offices for any supporting agencies. It's almost like the efforts that are put out with non-profits otherwise funded by the public domain are ignored here and it bothers me that this community health center, from the inception, was supposed to be a community health center for the people by the people. And I'm pretty well informed and even though I work outside at Maui Memorial a couple days a week, I was shocked when I first saw this plan because what was sent out in the mail was a letter saying that the kupuna housing and the kupuna services and the existing dietary exercise programs would be slashed and discontinued if the Hana community didn't get together and demand that they back the funding, and that actually the notice said that funding was not provided by the state for the existing medical services as were here, and that wasn't true. And I'm also concerned that, in the last couple of days, I've gotten phone calls from people that I love

that, oh, you gotta write a letter for me to support the wellness village or my husband will lose his job or my brother will lose his job and that's not -- that's really not the way we should be doing this, I mean this medical center and these plans should have been something that we all should have had input with. I really don't, and I like Cheryle, I love some of the programs I've seen, but I really don't see the Hana medical center and the health center as someone -- as an agency or an entity that's working with the community with the existing programs, and I hate seeing this diversion here. I hate seeing that families and people that I know and kids that I gave their baby shots to up here in tears seeming to be pleading for their jobs, so I think there should be more input. If we change the agricultural zoning and if we open up this door, we're going to lose it all. There has been no control by the community over the existing activities at the medical center and I see no control in the future once we allow this to happen, so it's overkill. I'm against this development.

Ms. Kanakaole: Before we ask the three people to come back and continue their speech, I wanna see if there are any other people who hadn't had a chance to come up to give their testimony. You can just state your name before you give your testimonies.

Mr. Sam Kalalau: I come before you because you guys are a very important Committee of this community. I am a past member of the Maui County Planning Commission and I know how important this job is. What we have here is a land issue being -- it's not about who's better than the other guy, or what this guy should build, or what those guys should build. As members of this Committee right here, your guys job is not that difficult. You guys were presented with all the facts and the evidence and you guys been presented with all the -- all the materials that you guys need to make your guys decisions. Just listening to everybody tonight, their main interest was the kupuna. As a Hawaiian, I respect my kupunas and I hope the same from you guys because if you guys do not support this proposal before you guys, our kupunas will never enjoy it. That's important. It's like taking away the rights from the Hawaiians. Many of the people testified here this morning that is against the project, po'e haole. Po'e haole. We got many new people living down here in this -- in our town that are newcomers and a lot them were negative about this project. This land use issue is very important as far as zone change because we have other projects that will be coming up in this community that will be coming before you guys for zone change. You know, it's scary to hear the word "urban" but urban is going to be changed to public quasi, and because it's designed only for health use, they cannot do nothing else with the property, and if they gotta do anything else with the property, they gotta come through the process again. So I ask you to respect our kupunas, the people who has laid our path for us, the people who have gave us the guidance to reach this far, and if you read your packets over there, there's a lot of our kupunas from this community, from Keanae to Kaupo, is in major support of this project. People talk about parking lots, it's a County regulation. We don't want all that parking lots, but if you build something in that capacity, they're saying that you need all these parking stalls. Yes, things can

negotiated, can be changed, but if you guys take long and if you guys decide that you guys are not gonna support this project, then feel bad about our kupunas. It's like taking another right away from the Hawaiians. The facts and the figures are there on your guys table tonight. Thank you. Maybe what you guys should do is, the county is in support of this project with reservations or recommendations, I would feel that with the palapala that you folks have in the front of you, with all the facts and figures, you guys would think the same way as the county is. Thank you.

Ms. Nita Hasegawa: My name is Nita Hasegawa, I have never worked for the community -- Hana Community Health Center nor do I work for them now. When I first got here in -- that was about 43 years ago, my first son was born in the old wooden building, I don't know how many of you have had their babies in that old wooden building, maybe Audrey, that's all I can see right now. The rest of you, I don't know. My last baby was born in the new facility that we have now with Doctor Howell. People ask, "How come we don't have birth -- how come you cannot give birth in Hana anymore? We gotta drive all the way. We're having babies on the road or people wait till the last minutes to have their baby and they expect the health center to deliver their babies." Somebody should do a survey on malpractice insurance. Do they know what malpractice insurance is? Do they know how much it cost? And during those years, Doctor Howell made house calls. Nobody sue each other for every little thing. We had the public health nurse come once a month. She stayed overnight. She visited everybody who had a baby, from here to Kaupo, and she covered everybody. You ask Violet Motooka because she would stay with Violet Motooka. Now when you talk about, oh, things were before, you know there's a lot things that's changing. We're getting more disease, more sickness, more fat, and, you know, I go to the kupuna program, okay, I sit there and I watch them. Some of them cannot come out other than if the bus picks them up. Helen Perry would be housebound, right now she's sick, but they pick her up and this is her social life. She has lunch there, she has -- they play games, they play puzzles, they try improve their minds. We go to exercise. We need a facility. Fawn; Mavis; Blumer-Buell, your wife; we all underneath there exercising. If we could do it at home, we wouldn't be -- I watch the exercise programs at home, everyone of them, lying in bed. My kids come in and they tell me, "What you doing?" I said, "Watching exercise." "You're not supposed to only watch, you're supposed to do." "I tired." That's the kind of excuse you have at home so with all this, hey, you go over there, you know, they give you encouragement. Now, when the meal come, the first time I look at the meal, where the protein? Get only little bit stuff on top there. I going open a can of sausage but I not going tell them I went eat one can sausage. I'm going to tell them I ate tuna instead; that's more healthy. But let me tell you, you can say, "Oh, you can do it at home." Yeah, but you cannot do it lying down. Yeah, you can eat healthy meals at home. Me, I love Vienna sausage with tomato and onion. When Adam comes to work for us, no brown rice, white rice with tomato, onion, and Vienna sausage or corned beef hash. So, you know, it's hard to change your ways if you're raised on a certain way unless you have the self-discipline, which most people don't have, they need support. They need somebody like Fawn, I look

at Fawn, I feel weak already. You know, these guys are really good at it and I tell you, they are wonderful. They are very inspiring and we need, we need a center because I don't wanna give it up. I don't wanna even miss one day because one day of rain will set me back in bed exercising again. So I tell you we need this center. Maybe you don't -- not in favor of everything, but let me tell you, the kupunas really appreciate and they really need it, and you should come and visit them, they're inspiring. You may not think I'm that old, but I was Sam's fifth grade teacher, so -- so -- and you should come and exercise with us cause it's very inspiring, and I just joined the exercise class, so let me tell you, support this center, you may not like everything they do, but it's a start, it's a plan. You gotta have a plan. You cannot go here, there, oh, any kind way. You gotta get a plan. Sometimes you'll need it, maybe you have the money, maybe no more the money, but rezone it; that's the first step, otherwise, what we going do? Sit down underneath the tent again, you know, eh, give us a break.

Ms. Kanakaole: I'm sorry, Mrs. Hasegawa, your time is up.

Ms. Hasegawa: Thank you.

Ms. Aileen Kaiwi Cravalho: Good evening. Good evening, all of you. I'm a long time resident of Hana, I'm not going to tell you how many years, but I was born and raised here along with 16 other brothers and sisters.

Ms. Kanakaole: Can you state your name please?

Ms. Cravalho: Aileen Cravalho, Kaiwi Cravalho. I am also employed at the Hana Community Health Center. I'm here as a staff member, I'm here as a Hana resident, and I'm here as a daughter of a kupuna that is with our program, meals on wheels, and my dad is Adam Kaiwi. Before I came to the Hana Community Health Center, I was employed at the DOE and, you know, working there I needed a change so I was then asked to come and work at the Hana community center, and I'm happy. I never worked with or having a boss, really, I work in the farm and I do sales of produce on a daily basis, Monday through Friday, 7 to 4:30, but on a rainy day like this, couple months ago, it was pouring on rain and our staff had some crisis, somebody had an emergency on Oahu. I went to Cheryle Vasconcellos and I said, "You know, Cheryle, I needed produce for the Hana Hotel, Hana Ranch Store, and Hasegawa General Store and, you know something? I cannot do it by myself." So she got out of her busy office, she's there every day of the week working, and she got out of there, she came with her rubber slippers, it was pouring on rain, and we harvest, we harvest from 7:00 to about 11:00, meaning vegetables, papayas, bananas. I never had boss like that that work with a staff and I've been to like five different jobs and, well, by the end of the day, I think she had to be hosed down because she was covered with mud, papayas, she was -- I was there with the stick knocking papayas to get to our kupunas, I was with the stick and she was catching; couple time, it hit her on the head, but

she never stopped; that's the kind of boss that I work for and I'm proud. Also, like my dad, my mom passed away like about 12 years ago and I have a sister that have grandchildren so she cannot always be there to make his meals. My father is 78 years old, and retired from the Hana Ranch as a mechanic, now working at Hasegawa General Store, so thank God for Hana Community Health Center, the meals, because you know something? Before he used to just eat, when he come home, open the sardine with the hot rice and eat it. Oh, that's okay, I'm going to make it real fast. But now he's eating healthy meals, healthy, I mean healthy, unless he go down to Nita Hasegawa's house and, you know, he's pigging out down there, but whatever. I'm in full support of this wellness village and, yes, I'm there from 7 to 4:30 and I see our kupunas, not my father, but all our kupuna, our Hana people, sitting under the tent where it's cold, water running under the feet, but, you know, they still have a smile on their face because they're happy, they go up there eat a healthy meal, talk story, just sit down wala`au, and then Sena does her aerobics, which they enjoy. So it did, you know, it brings a smile on our face. I say I'm very proud of the hard work that is put into this project. You know, I have a son that is in Ashland, Oregon, who's attending college, and he called me today and said, "Go for it, mom. Go down there and just tell it, you know, because one day I'd like to come home and I'd like to work over here. I cannot afford living in Honolulu, you know." Like Noe was sharing, this is for our kids, our grandchildren, our great grandchildren; that is what it's all about. Thank you.

Mr. Makahino Cockett: Aloha everybody and to the board here. My name is Makahino Cockett. I was born and raised on Maui and my mother, if anybody knows my mother, she was born and raised in Hana. My mother's maiden last name is Pu. My grandmother is Lizzy Helekahi. My grandpa, I never met them, yeah, is Paul Kua Pu. And I've been listening to what time I had, as I came here earlier, I spent time with my daughter. I was the guy walking on the beach in the rain with the umbrella with my daughter. You know, we're talking about health, we're talking about issues that really matters a lot to us guys, you know. I don't mean to be mean or maybe say anything out of context, you know. First of all, I like make myself right with everybody. If I did anything wrong to anybody, I apologize, yeah, and if I may say something that may offend anybody even this evening, then, again, I stand responsible for that, you know. We talk about kupunas, I have the greatest respect for kupunas cause I hope to be one kupuna one day, yeah. My birthday in couple weeks, I going be 49, I thank God for everyday of my birthday. I not kupuna yet maybe, but to my daughter, you know, who's seven years old, I gotta be more accurate, seven-and-a-half years old, yeah, she reminds me all the time, yeah. When I heard the little testimony about a travel, I experience, I don't know if it was good thing or a bad thing, but when my wife was about to expect our child, my first child, okay, my only child, her name is Puili, yeah, was pouring rain, it was raining harder then tonight, yeah, and safe journey for those who travel far, yeah. I went drive the road in pouring rain, that's how her name is Puilileakaua, of the rain, joyful embrace of the rain. I went drive this road with my wife, from my first time, the experience was I was so scared, yeah, and the only thing the health center gave me was one box, yeah, and in the box I told them, "I hope you guys get

one cassette tape inside there because that's the only thing I get in my car in case I need instructions, you know, on how to --" yeah, honest, you can laugh because it is funny and it was scared, spooky all the way into -- I was able to be there to witness the birth of my first child. So whether a health complex as such as with all this many variables inside, I think there's a lot great thinking, a lot of good opportunities. Now whether we can afford these things, according to what may be available, if we gotta go seek Federal funding or whatever kind of funding, now if the thing does not work and the thing come back and kick us guys in the butt, yeah, be responsible for your kuleana for what you stand up for. So for or against, yeah, whatever works for us guys. We have only one life to live, that's the only like I can know. I no mean to change nobody else's thinking, yeah. Okay, mahalo. I get three more minutes or my three minutes pau? Hawaiian. Hawaiian. Thinking on feet. Okay, so I going let you know, all my kupunas, mahalo, aloha. I love you guys. I get one deep respect for you guys. Okay, no, I no pau yet, yeah, but nobody went talk about the children, yeah. I work with 170 something children per week, in one week's time, and you know what? I no more even one degree. I just went show up. I no was scared and I went do. I went do. Get plenty organizations that get plenty means for go and stand up and this seems like a great opportunity to generate funds so you can continue your non-profit entity and perhaps provide jobs for the future, but there's no guarantee that there's a job out there. You know what the only guarantee? If anybody know a Hawaiian deep inside, hala, yeah, hala. You know when you hiamoe? The hala is inevitable. So as we stand up today, we stand up for what we speak for and I respect everybody's mana`o. Aloha.

Ms. Kanakaole: I wanna call a little three-minute break and reconvene back in three minutes and finish up the testimony before we go into a discussion.

(A recess was called at 8:00 p.m., and reconvened at 8:15 p.m.)

Ms. Kanakaole: I call the meeting back to order. Are there anymore people who want to testify? We'll take the last couple people who wanted to testify and then we have I think three who are coming back to finish up their testimony.

Ms. Stacey Lynch: Good evening. I realize it's been a long evening but I just wanted to state that I spoke once before in front of the Governor's advisory to the -- the Hana advisory to the Governor. Stacey Lynch. And I just wanted to say that I understand that this property was bought by Keola and given for the medical center and to expand the medical center services and for three acres of kupuna housing, and that I can't understand why the kupuna housing would be put at the end when this land was purchased with that very important item to be in there and I'm not opposed to the kupuna housing. I am very concerned that there is no -- appears to be no expansion of the medical center itself, and the medical center services, and that our services have dwindled in that area, which being way out away -- far away from any other medical services, we need a medical center. We really need doctors, nurses, and, as I said before, we used to have five nurses. We had

a nurse around the clock that you could talk to someone. We had x-rays. We had a pharmacy. We had, well, as everyone stated, the other services that are not there any longer. I do feel we have great doctors and we have an excellent nurse, I understand we have another nurse that's come on, and -- but we definitely need our medical facility. I do not support the rest of this project and thank you very much.

Ms. Pomai Konohia: Aloha. I'll be short. My name is Pomai Konohia and, unfortunately, I wasn't born here but my dad, his brothers and sisters, his parents, his grandparents, and so forth were all born here, so my hear is here. I love that Mrs. Hasegawa discussed earlier and she said malpractice insurance, we should do a survey on that. I would be interested in finding out how much it cost. Does anybody else in here would wanna find out how the malpractice or liability insurance for giving birth in Hana really is? Can the health center do that? I wouldn't mind finding out about that. I don't think there's any question about how well Cheryle writes her grants to get the funding to keep all our ohana and community employed. I don't think there's any question about the awesome programs being put out by all you folks. Good job. When you guys talked about how the, excuse me if I may sound like a broken record but I came like the last part of the meeting so I apologize, but was there discussion about how much the increase in land taxes will be? Was that figure brought out? I'd like to know that. Will Aunty Leimamo them continue to live where they currently live if the zoning is changed to urban? I heard discussion about keeping our families here. I just noticed there was employee housing. I guess I didn't -- I missed that one looking through the planning. Wow, I wouldn't mind working there if I was guaranteed a house, but our surrounding community and families that live around the health center, like Aunty Francine and Shannon them, living right down below the Police Station, who else? I think Moani them, you know, just bought land right below the medical center. I see uncle clearing out some land. Will they continue to live here in Hana with the -- if there's any affect of this zone changing? That's my biggest concern. Will it affect them? If not, then, wow, right on. If our ohana will continue -- can afford, you know, to live here and pay their land taxes and not be affected by this awesome project that you guys have -- look like you spent a lot of time in putting together, then right on, go ahead, employ our community, give them houses. When our families come back 10 years, 20 years down the line, please still be running, don't lose funds, and, again, don't let the zoning affect our surrounding families who've been there long time. It just tears me up to stand up here again, for bringing this up again, and just arguing. It seems, you know, like a constant battle, and I'm sure all our kupuna in here are all on the same line, but as long as we can be a part of this planning, as long as we find out, you know, how much this zone changes will affect us, if you can write, you know, list of pros and cons to the zone changes cause I'm sure with every good, there's a bad. I guess just keeping us informed is awesome so like, you know, another meeting tonight, this is great, nice to see everybody out here, and mahalo.

Mr. Jonathan Tolentino: Hi. My name is Jonathan Tolentino and I have something to tell the members of the board here. Whenever you do your voting for this project, you should try put yourself way back, put yourself way back where it started from. You know, a lot of people mentioned Doctor Howell. I knew Doctor Howell. I worked with him, for nine years I worked with him, and when he retired, I still was working there, and then the state shut down everything, okay, so everybody else had to move to keep their status in the state, you know, like the nurses and the gardeners and all that. But, anyway, when you take yourself way back, way back like when Doctor Howell was here, the building is still there, the building is still there, but if you look around the building, if you look around the building, some of the buildings that used to be there is not there because the old hospital used to be a big hospital where they had their own kitchen, where they had wards for men only, 40 beds for men, and 40 for the ladies, and in the center of the building, was the emergency room and the delivery room. So, at that time, right now, what you're looking at is a small thing, but I'm for this project right here because what I see, with the health -- with the building, the main building that they have for their health nutrition program, which was there before. It was there before. It was taken away. Everything went down to this small building right here. And so the Hana people loss all that because the population disappeared. There was no population. Hana was one highly populated town before, all the way from Kaupo all the way to Keanae, and so they needed one big hospital to give medical attention to the people of Hana. And I support this program it's because I see what the -- I see the vision of where this program is going, how, you know, how it's going to go because, right now, in the clinic alone, why people is not using it, I don't know why. It's there. It's all up to them to go there and use it and all the facilities is -- I mean the programs is there and if the program is not used, they're going to lose it. They're going to lose it and then where we're going to be again? With nothing? Okay, so when you guys do your guys voting, just remember where it started from because this program, I think, will be great for Hana. Thank you.

Ms. Kanakaole: Any last testimony? Okay, we'd like to call back Lehua Cosma, and you still have three minutes.

Ms. Cosma: Thank you. I'd like to continue with that I'd really like to encourage all of you, in my -- in this community, who's for it, those who are not for it, please, go do a research on urban, find out what it has done to other places that used to be country, used to be green, find out first because we can say we can support something like this that's not even here yet. And I kinda see this project, not too much for the wellness and well-being of our Hana people, but for outsiders because its main focus is to be sustainable, and to be sustainable requires catering to those with money, like the rich tourist who will fill those guest accommodation cottages, employees hired on the outside who are most qualifying, they will come and fill those employee housing. Visitors who will come to Hana, not one by one, but by busloads to fill those 290 plus parking stalls. I have spoken with an ex-board of director of HCHC who was involved with this planning and designing and asked why is

our existing medical facility so tiny and she said because there was not enough funding and this project would bring money generate here. I speak for not just myself or my family, but for the many loved ones in this community who utilizes the only health center in Hana when they are sick. What becomes then when its priority and focus is taken away because we are too busy trying to make money? I want my mo`opunas to grow up in Hana like how we all did, and not Kihei or Lahaina. Where in this world today you can find our children on the road, down the beach, at the park all by themselves playing freely, no more the parents with them? Unless we prevent something like this and stop all the people from coming into Hana, all that not going happen, going pau. You going start locking your house door, your kids cannot go play around anymore, so -- in closing, I would like to turn over this Hana Advisory Board, from the Hui Laulima Organization that I'm involved with, petition from Hana residents, including kupunas from Hana, in support of keeping Hana, Hana. And I thank you. And some of the kupunas here, we have Aunty Leimamo Lee, Aunty Daisy Lee, and so forth, and it's just 200, but there's still more to come, and I thank you for your time tonight to listening to all the people and aloha.

Ms. Cossey: If we go over three minutes, can we come back a third time? Before I continue with my testimony that I left off at, I would personally like to clarify a very important matter. I know that I speak for others that came before me tonight and to make this a racially motivated issue because we are not in support of the project is not only offensive but disrespectful. The kupuna and others that were mentioned in our testimonies that we're fighting for are of Hawaiian ancestry, who we consider dear friends and some as part of our ohana. Do not judge a book by its cover. I may not have a drop of Hawaiian blood but I am Hawaiian at heart, which is just as important. My husband is of Hawaiian ancestry, and his Hawaiian blood flows through my children, therefore, I speak tonight on behalf of my Hawaiian family. Now that I've clarified that matter, I would like to continue with my areas of concern. Item number six, this after the 290 plus parking stalls, would be the visitors cottage which they are now being called wellness cottages. Along with Hotel Hana Maui, we already have a number of bed and breakfast, vacation rentals, etcetera, to accommodate any visitors and guests to the community. The land in question would be better served if it was earmarked or affordable housing or a senior living center because with only five kupuna cottages being designated, I need to put my name on wait-list now so that maybe in 30 years, there will be a vacancy for me. There are aspects of HCHC which I strongly support and would like to see expanded in a larger capacity. Pake's fitness program and the wonderful work she does along with the nutrition programs, the kupuna meal service, which I would like to see provided on a daily basis, the cultivating and selling of the fresh produce, and to expand and enhance the essential medical services vital to our community and its people, including a dialysis facility because after all, there are 125 medically diagnosed diabetics in our community. Let us not lose focus of what is important here tonight. Future land issues in Hana may be at stake and a precedent set here tonight. Family-run businesses may be in jeopardy. We stand to lose the ability to have a voice in decisions that will forever impact the community because if the land reclassification and

zoning occurs, we will have none. We have a wealth of human service organizations that are not being tapped to its full potential that could work in collaboration with HCHC. Instead of a community divided, imagine how powerful we could be and the great things we could accomplish, if as one, we fight for the needs of our community instead of the wants of a few. Thank you.

Mr. Blumer-Buell: Thanks again, everybody, for your mana`o. My wife Crystal and I both signed this Hui Lailima petition and I urge you to adopt it, and if you don't adopt this, I urge you to defer this meeting to another date so you can look at the 200 pages of homework and see if the -- if the county really did misrepresent the whole community plan map. I believe they did and it's Exhibit 4. More than 200 people have signed this to deny the request of the Hana Community Health Center reclassify this whole area to urban for a 26 million dollar health and wellness center that I don't know who's going to pay for it, and to recommend that the -- we're asking you to recommend that the Hana Community Health Center Board of Directors reestablish the community membership and a community membership elected board of directors immediately to fulfill the need and promise for the democratic community participation in planning the future of the Hana Community Health Center. And the Exhibit No. 11, which is the report that the community unanimously adopted in 1995, signed by Harry Hasegawa, I agree with it all, everything anybody's brought up constructively tonight as an improvement that could be done, it was all in our community vision; dialysis, community housing, collaboration; it is all in here, you need a chance to read this. What happened after that? Let me just read one of the requirements: "The board of directors of the non-profit organization would be elected by the residents of the Hana District." We had 300 members that were in the community to elect the board and they -- the board of directors illegally, and I'm saying against the law, abolished the membership and privatized it, that's why the community no longer has input and why we haven't had a constructive community meeting. Now Crystal and I signed this petition because we think it says what, denial means time out. Can we have a time out and get everybody to hooponopono? Can we get -- can you request Doctor Pang's request for a needs assessment? I mean he's our medical officer. I respected his request. A needs assessment for this. And, finally, I think it's time to reinstate the membership and have a community elected board. Harry was, Harry Hasegawa, was quoted in the newspaper saying, "We were afraid they were going to come and take us over." Well, we empowered the health center board and they took it away from the community; that's why there's all these problems. So I'm urging a time out and to get the community together and move forward together. I think until the community is truly involved with the membership again, this is going to continue, and there are so many questions that haven't been answered tonight, including who's going to pay for it. I asked for all the financials. They refuse to give any of the financials, so you don't even know if it's going to work. They don't have financial plans and the ones they do, they will not reveal, they say their proprietary, not for public consumption. Every taxpayer in Maui County, the State of Hawaii, and the United States is being asked to pay for this in the name of the Hana community and it's not really

a community health center. We've been -- I've been excluded because they took away my membership and against the law. Corporation Counsel has yet to respond to all the legal questions in here regarding --

Ms. Kanakaole: I'm sorry, Mr. Blumer-Buell.

Mr. Blumer-Buell: No, thanks, Kauai, and mahalo to the Committee.

Ms. Cockett: First, before I start, I would like to ask that anyone who I personally hurt to please forgive me, but what I am about to say, I need to say, I need to address the issue that the point of po`e haole has been brought forward and I really, truly resent it. I spoke here as a mother. I spoke here as a resident of Hana. I am a mother of seven Hawaiian children. I think that should count for something and I think it has been ignored that there were a number of Hawaiians up here speaking as well as the po`e haole. I gave birth to four of my children here in Hana. All of them can trace their heritage back to families in Hana, this was done by my third son. He went all the way back to papa ...(inaudible)... I'm very proud of his ability to do genealogy. He has roots and I am proud of that. I gave them a home. I went and moved from 17 different places before I was 18. I at least gave my children one home so they could live here, and now my mo`opuna are here in Hana being raised. By the way I'm the mother that took that child, had to take that long two-hour drive in the middle of the rain, my youngest, Puilileakoua, I would not wish that on any of our new mothers, it was a nightmare. I did not think I was going to make it. And the only thing I could I promise, Susie was there, she remembers, I was told that I could stop in Keanae in case we had an emergency, the dog lady could deliver, this is what I was promised. It was very frightening, and I had already had six children, and I would have stayed to deliver had I thought that the doctor that was there in residents knew what he was doing. He didn't. This is a very fearful thing. We talk about kupuna housing. What kind of kupuna care are we getting? Is this all being done just to get numbers to get grant money? Because I have a kupuna on the Mainland in elderly housing and I go there to visit her, and I fear for her, but there's not a whole lot I can do because her son is the one that places her there, not me. And the fact is are we losing sight of what the reality is? The people that were speaking up here are people in the community. I really question about how many spoke up for this project. How many of them were truly speaking up for the project or for their jobs. Many of them are tied very closely to the health center, or the board of directors, or the executive director. Thank you very much.

Ms. Kanakaole: Thank you. Public testimony is now closed. Joe, can you give us the recommendations?

b. Action

Mr. Alueta: Once again, I'll reiterate, that the Hana Advisory Committee is making a recommendation to the Maui Planning Commission, the Maui Planning Commission will then make a recommendation to the County Council, to then decide on the matter of the district boundary amendment as well as the change in zoning, and the Planning Department is just making a recommendation to you, so we're fourth down the line. We did find, based on the conclusions of law and the analysis presented in the report, that pursuant to Section 205-3.1 and Chapter 15-15-18, Hawaii Revised Statutes, the proposed request meets the criteria for a Land Use Commission Urban District Boundary Amendment. The application also complies with the applicable standards for a change in zoning, and there are five criteria that are listed on Pages 2 and the top of 3. Pursuant to 19.510.50, Conditional zoning, the Maui County Council may impose conditions upon the applicant's use of the property. The conditions shall be imposed if the Council finds them necessary to prevent circumstances that maybe adverse to public health, safety, and welfare. The conditions shall be reasonably conceived and to mitigate the impacts emanating from the proposed land and shall meet the following criteria: 1. That the public shall be protected from potential deleterious effects of the proposed use; and the need of public services created by the proposed use shall be fulfilled. The department is therefore recommending approval, that you recommend approval to the Maui Planning Commission for the district boundary amendment from ag, from ag and rural to state urban district. Further, the department recommends that the Hana Advisory recommend approval of the change in zoning from county interim district to P-1 public/quasi-public district to the Maui Planning Commission and that pursuant to 19.510.050, Conditional zoning, be applied: 1. That the applicant shall participate in a required infrastructure improvements for water, sewer, drainage, and roadway/traffic as determined by the appropriate county agencies to mitigate impacts resulting from proposed development; 2. That all future buildings on the site shall be reviewed and approved by the Urban Design Review Board as conforming to the character of the community as noted in the Hana Community Design Guidelines; 3. That as presented, the proposed guest cottages shall be used for exclusively for patients participating in medical programs that require onsite housing as part of treatment; 4. That the applicant shall confirm in writing the significance of the aqueduct located on the property with Department of Land and Natural Resources State Historic Preservation and perform any mitigative measures required by the Department of Land and Natural Resources State Historic Preservation Division; 5. That all buildings shall be limited to a maximum of two stories 35 feet in height. The department also recommends that the -- that you adopt our recommendations report or recommend that the Planning Commission adopt our recommendation report and memorandum prepared for the March 10, 2005 meeting as its findings of facts, conclusions of law, and proposed decision and order and further, to authorize the Director of Planning to transmit said recommendations to the Maui Planning Commission on behalf of the Hana Advisory Committee. Do you have any questions at this time?

Ms. Kanakaole: Are there any questions?

Ms. Oliveira-Medeiros: They already made up their minds before ...(inaudible)...

Mr. Alueta: Pardon me? I can't hear the question.

Ms. Oliveira-Medeiros: I said they had already made up their mind before even listening to the community, which kinda tells me that they don't really care what the community thinks.

Mr. Alueta: Public testimony was -- or this project was noticed, we tried to take into consideration all written testimonies, including Mr. John Blumer-Buell's analysis, and so --

Mr. Blumer-Buell: That is not true. Don't lie, Joe ...(inaudible)...

Ms. Kanakaole: Excuse me. Excuse me.

Mr. Alueta: We have a disagreement on the interpretation of the community plan. We are just a recommending body to this body, who then makes a recommendation to the Maui Planning Commission, who then is another recommending body to the Maui County Council, okay. We're just at the beginning of the process so --

Ms. Oliveira-Medeiros: Okay, thank you.

Mr. Giroux: I'd just like to add that, you know, in order for this change to occur, this is going to have to passed through ordinance, that means it has to go through the Council, not only through a first reading, but then -- or committee, but then through a first reading and then a second, so we are at the very, very baby stage of this, and we are at the beginning of getting the community input, so this is the very beginning and this is not even the beginning because there were other community meetings even before this meeting, but, for this process, this is the beginning. So I'd just like the community to know that, and we are going to begin discussion about this and this is not -- the community was allowed to speak, and now this Committee has the burden of discussing, and we're not going to tolerate interruptions because we have to -- or these people have to come up with decisions and then it goes on, so we'd appreciate that. We gave everybody due respect, and this is recorded, it is in -- it's going to be writing, and the Council will also get all of this input, and everything that was turned in by everybody, that goes into record, and that record also passes on to the Council. So we do appreciate everybody coming but it is time for this Committee to take on the responsibility of making decisions.

Ms. Shamblin: Joe, I have a question for you. Can you elaborate what urban means and what P-1 public/quasi-public district means?

Mr. Alueta: Okay the state designates lands in the State of Hawaii conservation, agriculture, rural, and urban. Urban designations are reserved for urban settings within the core towns. Within the urban designation of the state, the county has exclusive authority to zone, okay, so we can zone -- the county can only zone urban lands, okay. P-1 public/quasi-public is a zoning category that's under -- falls under 19 -- Title 19, it is Chapter 19.31, it is attached as Exhibit 31 on your -- in your staff report. So the uses that are proposed or allowed within 19.31 are listed here. With regards to some of the concerns that the public had about the urban designation affecting the surrounding properties, the real property tax is not taken into account, they're concern with what's happening on your particular property. Land values go up regardless of whether or not you're urban or ag. In Wailuku, they're selling two-acre ag lots for 650,000, so let's -- so it doesn't matter what you are, if you're urban or ag, prices on Maui have gone up and they tax you based on also your use, so if you're using the property for single-family, they're going to tax you at single-family.

Ms. Kanakaole: Are there other questions?

Mr. Romain: Is this a all or nothing situation where we have to accept the proposed plan ...(inaudible)... can we accept parts of it?

Mr. Alueta: In the sense that what you see on there, on that map, right, is their conceptual plan, okay. What you see here, on Exhibit 31, is the reality. What you see in our recommendations as far as conditions, is what we're proposing, okay. It's going to fall between what you see on Exhibit 31 and what our proposed recommendations as far to mitigate. We are not dealing with -- we are dealing with a land designation, so if you gave them, right, urban -- I mean you give them the urban designation and you give them the public/quasi-public, they're limited to this, what's on Exhibit 31 and what's in Chapter 19.31. So if they, theoretically, worse case scenario, Hana Community Health Center disappears, you have no medical facility, which -- I mean I don't know whether that's a reality or not, and someone decides to put a church on it, they would come in and get a building permit and they'll build a church on it because that's what's permitted in Title 19.31 and that's what you're zoning. This is not about approving a building, okay, this is about approving a land zoning. So if you wanted to make a request or if you wanted to be, you know, concerned that you wanted to make it -- you would say we're approving the zoning one and the only permitted use is E., hospitals, because that's what you want, so you could do that. You could make that recommendations; that might not be a bad idea if that's all you -- if the intent of the community plan was for -- and you only gave for public/quasi-public, right, and you wanted to hold these people to the fire and say, well, the only thing I'm going to allow is hospitals, then you can make that recommendation, and I'm sure it's going to come up at the Planning Commission, they may add it, but that's food for thought.

Mr. Romain: Would the wellness housing and such, would that fall under hospital use if it was incorporated into that plan, I mean --

Mr. Alueta: If they could show that it was, yeah, if they could show that it was an integral part, so if you -- if I get sick and I go to the hospital, am I staying at a vacation rental or am I staying at the hospital? I mean, I'm there at the hospital bed, it's more convenient for me to stay at the hospital room to receive treatment, okay, and that's sort of the way they've proposed it, and the way they've described it, and I can only tell you what they've described to us and they may wanna try to describe it further for you later, but it's like they're problem right now is, in their description, their one description, was weight loss program eating habits, they don't have a facility in which to, basically, lock 12 people up in a room or house them in which they can try to reeducate them into eating habits because, as you heard from the testimony, they go home. They get their education and then they go home to mom, dad, and sister, and bother who are eating spam and rice and shoyu, okay, for dinner, and that's not what -- I mean, hey, I can do it all the time, but that's not healthy. They're trying to reeducate them and they need to be able to have them in an environment to try to train them and to show them and give them the courage to say, no, that's not what I'm going to eat. When you have drug treatment programs, you don't send the drug addict back out to his house, to the crack house, you try to keep them locked up or keep them confined to give them the support, and I think that's -- that's the description they gave me, and if that's how the operation was, is going to run, and that's the purpose of this housing, then based on that description, the Planning Department Zoning Administration has said that's permitted.

Mr. Romain: I think my interpretation of a lot of the major concerns, beside just the change in zoning to begin with, is the use of this, if the facility is in fact a hospital and it's for in-patients that are there for whatever reason, is one thing, but if it's used as a wellness center, somewhat like what the hotel is doing as far as encouraging people from the outside to come to stay there to supplement, that's a huge difference of usage, and I think that's one of the core issues of divide here, and how can we hold it to this that it would be used specifically for hospital use, primarily for local residents. Is there any way we can put those kinds of restrictions on?

Mr. Alueta: I'm going to defer that to Corp. Counsel.

Mr. Giroux: As Joe mentioned, that one of the beauties of zoning is the art of conditional zoning and, basically, as far as you can do, the best you can do is the conditions that you can put on, and as long as those conditions are related to public health, safety, and welfare, then they become, you know, defensible conditions. But, at this level, I would say that we're at a brainstorming level so, for this body, I would say, you know, try to formulate conditions that you think would protect the health, safety, welfare of the community because of this change, and if we incorporate it into these conditions and we send it on

and, you know, we look further, and, you know, if it looks like it's too far out there or it's just not going to be a defensible condition, then, you know, we would probably have to go back and say, well, you know, this one condition might not make it, but this is something that, as we reiterated, is it's going to go in front of the Planning Commission, and it's also going to go in front of the Land Use Committee, and it's also going to go in front of Council, Full Council, so these conditions would be, you know, formulated, looked at.

Mr. Romain: I agree that there's going to be plenty of opportunity to stop it or modify it down the way, but we, as members of this community, have got to start off on the right foot and, another thing, must we put together our findings tonight? There's a lot to digest here. I would like to have time to have further consultations, perhaps when we're all fresher. This is -- I just think it's way too important to try and slap out a lot of things, I mean I'll try if we have to, yeah, okay, apparently, I guess, we can defer if we want. What happens if we defer? Do we reconvene or what happens on that?

Mr. Giroux: We would have to chose another time to reconvene and it would have to be an agendaed item.

Mr. Romain: Thank you.

Ms. Oliveira-Medeiros: I always hear people say that the land value doesn't change when you change zoning, but, in actuality, doesn't -- the ag zoning isn't it like so many dollars per square foot and then when you go up to urban, it goes up to much more dollars per square footage or something like that?

Mr. Alueta: I didn't say that if you change it to urban, the value wouldn't go up. I said that the value wouldn't go up for the surrounding properties.

Ms. Oliveira-Medeiros: Okay, but you're saying that the value of the this property will go up?

Mr. Alueta: I would -- yeah.

Ms. Oliveira-Medeiros: And probably the land taxes too?

Mr. Alueta: Most likely.

Ms. Oliveira-Medeiros: Okay. I just -- okay, thank you.

Mr. Alueta: I think the value, just to clarify, but I believe the value probably went up once the community plan was designated to public/quasi-public but --

Ms. Oliveira-Medeiros: But can you promise that it wouldn't affect the outside properties or you're just saying it probably won't?

Mr. Alueta: To the best of my knowledge, but I can't say, I'm not in the tax department so I don't do the assessments.

Ms. Oliveira-Medeiros: What was the other thing. I just wanted to say that we, in Hana, everybody likes to work together to try to make the best decisions and, you know, everybody try to consult with each other to come up with the best thing for the community, and I really feel like I've been hearing from a lot of people that that hasn't really been done, that there needs to be more communication. I love what the health center does, and I use it, I do about three programs over there, my daughter goes there, everybody goes there, but I'm just saying that whatever I recommend tonight, it'll probably be contingent on something else happening because there seems to be a need for a lot more collaboration, negotiations, and stuff like that within the community itself, like working together with the hotel, and working with the restaurants, and, you know, working with everybody who this thing is affecting, job wise or not. And then there's this thing somebody was talking about a certificate of need, I took an appraisal class once on the Mainland, and I think they called it a feasibility study, was something like that done for this project? It's not the thing where you call up people, a survey and see what the people say, it's more to do with demographics, like would a community like Hana be able to support something this big, like do people here make enough money to actually use the facility, and all of that, all the demographics, was that kind of study done?

Mr. Alueta: Sadly to say, that type of information, right, is normally not provided when -- I mean it can be or it has been provided for district boundary amendments at the State Land Use level when it's more than 15 acres when the State Land Use, they have asked for that kind of information. The Planning Department or the Planning Commission has not, necessarily, asked for that at this level.

Ms. Oliveira-Medeiros: Can we see that?

Mr. Alueta: Well, I'm not sure if they've been done. If the applicant has done it, they would tell you. The applicant is indicating that they have, so if that's a request, we can tell the applicant that they need to provide it.

Ms. Oliveira-Medeiros: I think this is important enough that we should study everything possible before making a decision. And then I just wanted to say to everybody that this building right here, I'm guessing, is about 1000 square feet and what they're talking about would be probably about 20 times this size, right? 20,000 square feet? No? 80,000, so it would be 80 times this size that this is what I wanna try to tell people is you guys know that that's how big this project is? Okay, that's it for me for now.

Ms. Kanakaole: Joe, when you told us -- clarified about what urban zoning is, you said that when it's changed to urban, the county can --

Mr. Alueta: Zone it.

Ms. Kanakaole: Can change --

Mr. Alueta: Right, we can change it to one of our zoning categories.

Ms. Kanakaole: Oh, it has to be under Chapter 19?

Mr. Alueta: Correct.

Ms. Kanakaole: Any one of those?

Mr. Alueta: It would be, yeah, well, any zoning category that's existing under Chapter 19, yeah.

Ms. Kanakaole: So urban and public/quasi-public is the same thing?

Mr. Alueta: Urban is urban in the State Land Use District designation.

Ms. Kanakaole: Oh, State.

Mr. Alueta: And then, so, like I said, you had conservation, which is like way up in the mountain; ag lands, which is majority of the outside areas, below the conservation line and outside, those are normally ag, where you have farms; and then you have rural, which is half-acres, like Hana house lots, that's all half-acre rural; and then you have lands that are designated as urban, and those are normally in your -- they represent about five percent of Maui, or maybe less than that, five percent of Maui County -- all land in Maui County is zoned or designated urban, and only that five percent or that urban land can the County then go in and say that's going to be R-1 residential or R-2 residential, like you have outside of just on the makai side of Hana Highway as you drive in toward the hotel, all that, those single-family houses, those are all R-1 residential, and the churches are zoned public/quasi-public, that's public/quasi-public, and that's what these guys -- and that's what you see listed here in 19.31 is public/quasi-public and that's what they're asking for.

Ms. Kanakaole: Thank you. The Urban Design Review Board, who are they? Who are those people?

Mr. Alueta: The Urban Design Review Board is made up of normally design professionals, you have an architect -- you have architects, engineers, and a few other lay people may

be on it, and they review urban design, like such as color schemes, signage, roof material, and, you know, facades, windows, and when a person comes in for a project within, normally, within the SMA, we require it to be reviewed for urban design to find out whether or not the project's design and architectural style is in keeping with the area or the surrounding area, or if there's a cohesive plan. In the case of Hana, there is a Hana Design Guidelines and those are the design guidelines that the architect has already looked at when he came up with this, but we would then review it to make sure that, you know, once you, like I said, you're only zoning, you're only changing the color on the map, okay, per se, and what they're showing here is not what -- you're not zoning that, you're not approving that, you're approving just the change in the zoning. So if they come in tomorrow for another plan, they could change the plans, but we want to make sure we get to see what those plans are and that's what that condition says is that we want to see it and we'll make sure it's designed and is in keeping with the Hana Design Guidelines.

Ms. Kanakaole: Thank you. Are there other comments, questions for Joe?

Ms. Francine Tolentino: Joe, I have a question, but this question is going to pertain to John Blumer-Buell and maybe somebody on the advisory committee for the Hana Community Health Center, that -- that 1995 issue there that you said Harry Hasegawa signed, right, does that still pertain to what's happening with the Hana Community Health Center now? Yeah, I'm asking you that question. One minute will do.

Mr. Blumer-Buell: Thank you for cutting me off.

Ms. Tolentino: You're welcome.

Mr. Blumer-Buell: I think it does pertain, it's Exhibit No. 11 in the 200 pages you got and you haven't had a chance to read it. It's absolutely relevant because it's the document on which the State of Hawaii Legislature transferred the health center, I mean the medical center to the community. It's also the document on which the Hana Maui Trust raised hundreds of thousands of dollars or tried to raised hundreds of thousands of dollars in the name of the community, that's in the file too under the IRS papers. It's also -- it's absolutely relevant and I have raised the question, I know my minute's about up, about whether the board is even legal. I have given the law and verse of why the health center board illegally abolished the membership. Thank you.

Ms. Tolentino: Okay, thank you. Now, what I'm hearing is what you said about that, but along the line, from 1995 to 2005, that's 10 years, right, calculation, right, John?

Mr. Blumer-Buell: Yes.

Ms. Tolentino: Somewhere along the line, the membership was dropped, right, supposedly illegally? Now when the membership drops, you got a new -- you got a new health center committee, am I correct? Who do I ask that question? Can I pertain it to you, Cheryle? Okay, the beginning was 1995, now we're in 2005, that committee back then, is it still automatically is not in existence today, right? Thank you, Cheryle, sorry about that.

Mss. Cheryle Vasconcellos: The board of directors was within their legal rights to change the corporate by-laws, which is what they chose to do.

Ms. Tolentino: Okay, so you're saying, on one hand, it's legal, and then the corporation has the right to do that, so there's the pilikia right there.

Ms. Vasconcellos: Well, not really because --

Ms. Tolentino: Not really. On your part, right, not really.

Ms. Vasconcellos: Well --

Ms. Tolentino: So you're still in --

Mr. Blumer-Buell: I'm still claiming there should be a community membership ...(inaudible)...

Ms. Tolentino: Okay, okay, so now, you know what? In order -- how I'm looking at it, from my perspective, is that along the lines there was pilikia, you know that, automatically, okay, the issue has to be brought up between you guys and the community. The community has a big impact on this. Look what's happening. They're dividing all these entities and we're trying to get them together because we got good services going on. Am I correct, as of today? I, you know, I'm part of getting that services but in order for all of us to come together as one, everybody has their own way of thinking, you know, and that's the right given to us, but for the board here, we're not going to do it tonight, that's for sure. I mean I rest my case. Right. Thank you.

Ms. Kanankaole: Okay, so that leaves us to making a motion. We need somebody to make a motion, one of the Committee members. We need to make a motion on the recommendations that were made. We need to make a motion, somebody needs to second it, then we need to discuss it, and when we second it, it doesn't mean that it's final, it means we can discuss it.

Mr. Giroux: As stated earlier, you've got about four alternatives, you're not stuck to that, but as a guideline, that's a starting point to start discussion on where -- what kind of action you ultimately wanna get done tonight and, like Joe stated, basically, this is the early stages

and if this does go on, it seems to be the Department's position that they have conditions that they've suggested and you're not limited to that, and through motions, seconds, discussions, you can also start to formulate your own conditions to see if that would be something that would help to move this forward, and, you know, like I said, there's about four alternatives: to defer; to accept with conditions; to deny; or to just accept without adding conditions so -- and, like I said, those are the minimum or the starting points, but there's other motions that you can also formulate along the way.

Mr. Romain: I would like to make a motion that we defer a decision on this until we have a chance to all study the materials and reconvene and talk it amongst ourselves again.

Ms. Kanakaole: Is there a second?

Ms. Oliveira-Medeiros: I'll second that.

Ms. Kanakaole: Discussion?

Ms. Helekahi-Burns: Could the proper documents be copied for all of us so we can review them all before the next meeting?

Ms. Kanakaole: What are those proper documents that she wants?

Mr. Alueta: All the documents that we circulated to you, we did not have time, based on the volume that was coming in, so what we'll do is we'll collect them all from you, the ones that have been passed around in that binder, and then we'll make copies of it, and mail them out to you. Is there anything else that you wanted to review as part of your, you know --

Ms. Oliveira-Medeiros: I guess we have to say specifically what exactly what we want to review. Is that what you're saying?

Mr. Alueta: Right, one is you want to review the documents that was presented because you wanted to have more time to look at them.

Ms. Oliveira-Medeiros: I wanna review the feasibility study, and I wanna review the 200-page document that John Blumer-Buell has.

Mr. Alueta: Yeah, that's in that packet.

Ms. Oliveira-Medeiros: Oh, okay, that's it for me.

Ms. Kanakaole: I don't think it's so much of a review, really, I mean of the documents. I sort of looked through the stuff and then, I didn't look through the 200-page document, but it's hard to make a decision on changing something so huge when the baby steps of the baby step is so, what's the word? You know, there's so much hakaka in that, you know, in the beginning and to make this -- this big, it's not even a decision, it's a recommendation, who we're going to recommend to somebody who's going to recommend to recommend, but it's, you know, it's a big kuleana and I don't wanna make a wrong decision when, you know, our community really needs to communicate, but if this happened way back in 1995, and this is 2005, and we still didn't talk about it, and we still haven't, you know, come to some kind conclusion about this pilikia that happened so long ago, what will couple months do? I mean how can all of that, what you guys have been, you know, testifying about, for the past couple hours, you know, how can that be solved in a couple months? You know, if we defer this, that means we're going to meet again in a couple months or something. You know, so it's a hard, for me personally, it's hard because I can see why we need to defer but even if we do defer, I don't see myself coming back in a couple months with clarity from the community, you know, with a unified community decision because we've spent so long, you know, kinda butting heads, and I don't what else to say. Is there anymore discussion before we vote on the deferral?

Mr. Romain: I just have a question, and this may be way out of line, but is there any way that we could encourage a community committee to be in discussion with the health center because it seems to me that a lot of the resistance has to do with other than land use issues but with the history with it, and if that could, you know, if we could get the health center back into a respectable dialogue with a committee of some in here where we could -- I don't know, maybe this is just not a procedural possibility, but it would certainly help us if we could find a little more common vision on this.

Mr. Alueta: You can try but, like I said, I think you hit right on the head that it's issues other than land use and I would tell you that the issues, you're not required to discuss them or care about them when you do your land use, that's just the cold hard fact, okay, that's -- you're here -- okay, yeah, but that's the -- I mean that's the reality is is that the issue of this whole matter is being clouded by outside issues that are not related to this and, yeah, we'd like to everybody, you know, sit down, talk story, be everybody's friend, but sometimes it ain't going to happen and we think that you can -- I mean I don't have a problem and if you feel that you want to defer, and then we can get you the information that you've requested. All we would ask is that you need to set a date tonight so that we find it or at least come up with a couple dates that my boss here can kinda figure out when we can get back out here.

Mr. Yoshida: We would also note that on April 1, you'll get a new member. In order for the new member to participate, they have to review the record. When we come back again, public testimony will be allowed under the Sunshine Law.

Mr. Romain: The new member could just read the minutes of this meeting? Okay.

Mr. Yoshida: I guess they have to review the record, which is the staff report; the recommendation; the minutes; everything that you've reviewed. Well, I guess, you know, discussion on how long the board needs to review, if we circulate the documents to you, make copies, circulate it to you, how long does the board need to review those documents?

Ms. Kanakaole: How long do you guys need?

Ms. Helekahi-Burns: If it's based just upon the land use, you know, and not clouded by what he said about the concerns of those who approve it and those who do not support it, you know, we -- I, personally, can make a decision right now, just based on land use, not considering what everybody had said tonight. What everybody had said tonight and the services that's needed and all of these concerns is not of no concern to us because, what, if it clouds it -- because it's not -- to me, that's how it sounded like, it was like, you know, your main concern was land use, was the changing of the zoning, you know, and if the changing of zoning is what we're here for, I think I can make a motion to take a vote on them tonight. I won't support the deferral.

Mr. Alueta: I want to make sure that I'm clear on what I said and what I meant to say is that the criteria that we use for change in zonings are, you know, you can see them on chapter -- on Page 3 through 5 of the staff report, okay, you do take into consideration public testimony. What I'm saying is the arguments, a lot of the arguments that you heard was how --

Ms. Kanakaole: Didn't have to do with land use.

Mr. Alueta: Had to do with how the organization and the structure of the Hana Community Health Center, how that is structured or how they went about changing their bylaws or changing the directors back in '95 was not -- is not the concern of this board, that's not part of the discussion. The issues of whether or not this project and whether or not the zoning of this project will provide increased health facilities and health services to this community, our staff report says, yes, it will. Does it comply with the community plan and the map and also the language within the community plan? The staff is saying, yes, it does, and that's what we're recommending.

Ms. Helekahi-Burns: So, again, board, Advisory Board, I think we should make a decision tonight because to have to review this whole thing over with the new member will be even more lengthy than now, and then looking at the new -- I mean having another public hearing, you know, is a lot more lengthy than it will be tonight; it'll probably be a rewind situation. I just make a motion for us to just make a -- to do a vote tonight if it's possible.

Mr. Giroux: That means we just have to take care of the motion that has already been put on the table and if it fails, then we would go on with further motions.

Ms. Kanakaole: Anymore discussion? Okay, I call a vote to defer the decision -- decision making on the recommendations made by the Maui Planning Department in order to get to review the information that was presented tonight.

There being no further discussion, the motion was put to a vote.

It has been moved by Mr. Romain, seconded by Ms. Oliveira-Medeiros, then

**VOTED: to defer a decision on this until we have a chance to study all the materials that were presented and requested by the Committee.
(Assenting: J. Romain; M. Oliveira-Medeiros)
(Dissenting: F. S. Helekahi-Burns; F. Tolentino; K. Kanakaole)
(Abstain: B. N. Shamblin)**

Ms. Kanakaole: **There was no action on that motion.** So do we have another motion from the Committee?

Ms. Helekahi-Burns: I make a motion to vote on the decision of the passing of the land use from agriculture to urban. Is that right?

Mr. Giroux: Let me just clarify. If you want to take care of the State Land Use issue first, because it doesn't look like there's any conditions on it, you can take that up first and then get that, you know, behind us. If we can't get that behind us, then there's no way we're going to go forward anyway. So let's see if we can take care of the State land -- and the motion was the motion to adopt the recommendations of the Planning Department. Is that -- and the result would be that the recommendation would go to the Planning Commission as a recommendation to grant the adoption to the Council.

Mr. Alueta: Once again, the recommendations deal with two issues: one is the state zoning, and one is the county zoning to establish a county zoning. So you have to make -- I mean either you combine the two in one motion to approve, or you can approve one, either the state and then come back and do the county zoning, so it's --

Ms. Kanakaole: So can you clarify your motion? Is your motion to make a decision on the state zone changing, or the county zone changing, or both?

Mr. Giroux: The state district boundary would amend agriculture and rural to urban. If that passes, then it would -- you would be free to go on and zone that property to public/quasi-

public; right now it's zoned interim district. So, as I said before, if you wanna take up the state issue first, that will clarify where everybody is really because then the next step would take care of the zoning, the county zoning, which is -- would turn the interim to public/quasi-public, but the, yeah, the first motion would take care of changing the state district from agricultural and rural to urban, the state. The difference again is that the state has different land classifications and one of those is agriculture, one is rural, and one is urban, and so this property originally is in the district of agriculture and rural, and that would -- your action, if it would pass, would change it to urban.

Ms. Helekahi-Burns: ...(inaudible)... restate my motion, a motion to vote on the state land use change.

Mr. Giroux: Yeah, and my understanding was that you wanted to vote to recommend the Planning Department's --

Ms. Helekahi-Burns: No.

Mr. Giroux: No?

Ms. Helekahi-Burns: That's not what I said.

Mr. Giroux: Okay, okay, no, good thing I clarified that, okay, but you can start with that and then formulate your motion from there.

Ms. Helekahi-Burns: Okay, I just make a motion for us to vote on whether to accept the recommendations for the state zoning. Is that right? Okay. Right? We want to vote on whether or not we want to change the land zoning? That's the biggy.

Mr. Giroux: I just need to clarify if you want to make a motion to vote in the affirmative to recommend or to deny the recommendation; that's what I'm having the trouble with.

Ms. Oliveira-Medeiros: Can we just do one at a time and go down the line?

Ms. Tolentino: I make a motion to do the first part, the state, and the recommendation with the planning, right? No. I'm not agreement, you know what? No, no, no, I never say that. Hold on. I'm making a motion to do the state first, you know, kala mai, you know, we're learning here too, so we want to do something which is good, so I make a motion for the state first, right? But, can we do our own recommendations?

Mr. Giroux: Yeah, just state the action you want to take on ...(inaudible)...

Ms. Tolentino: Action is the Committee make their own recommendations. Anybody going second?

Ms. Helekahi-Fawn: I no understand that one.

Ms. Tolentino: Me too. Wait, wait. No, you folks no like the Planning -- I wanna make our own recommendations, okay, that's my mana`o. So we gotta do the state first, right? Okay, that's what you said. Okay, so I'm making a motion to do the state zoning first with our recommendation. Anybody going second me?

Ms. Kanakaole: You have to say I make a motion to approve or to -- approve or deny.

Ms. Tolentino: Approve our own recommendation. No, we gotta go with -- oh, and include our recommendation, sorry.

Mr. Giroux: You gotta tell the body what your recommendations --

Ms. Tolentino: Oh now? Oh, okay. My recommendation along with the Planning Committee is to get a feasible amount, when you turn to urban with the state, to get a feasible amount for the tax because I'm not only concerned about the Hana Community Health Center, about the surrounding area where people live, if they can afford it. You know what I'm saying? That's what I'm saying is that I wanna know what the tax, how much of a hike, if you can do that. That's my recommendation. And if you gotta go get the information, I'm asking that they do go get that information, please.

Mr. Giroux: That sounds like a motion to defer and we already acted on a motion to defer and it failed, so if we could --

Ms. Helekahi-Burns: Okay, I gettum now. I make a motion to deny the recommendations of the Maui Planning Commission for the changing of the land zoning from ag, rural to urban.

Ms. Kanakaole: We need a second.

Ms. Tolentino: I second. Can I second? I second.

Ms. Kanakaole: Open for discussion.

Ms. Helekahi-Burns: Thanks for Joe that he made my job so much more easier. From all the discussion and testimonies that we had tonight, our main kuleana is to think about the zoning change and that is the reason why I feel that it should be denied because what is the zoning change? The changing of Hana and that is a big, big concern of mine, so I

make a motion for us to vote to deny the recommendations of the Maui Planning on the zone change.

Ms. Kanakaole: Any other discussion?

Ms. Tolentino: My statement in this matter is because the issue in regards to taxes, I'm looking at a lot of people surrounding the area, like for instance Aunty Leimamo Lee and Uncle Pohaku, you know, they're kupunas, and I don't, you know, they're old and I don't know what their impact, their financial needs. Not only them, we have other families living there. One of them is a cousin and my son live in that area, he doesn't -- his rent will probably go up if the taxes go up, and so that's my main concern, what, you know, what impact the taxes will have on our people living in that surrounding area. But, you know, like I said, you know, on one hand, I'm for the health center, don't get me wrong, because it's the need, you know, we need to move on, we cannot stay back, you know, we need to move, but I'm looking at how much, you know, people can afford, if they'll be able to live there. You know, if the taxes go up, some people can't make it just on what, you know, so that's my main concern right now.

Ms. Kanakaole: Other discussion?

Mr. Romain: If we're going to be having to make the decision tonight, I'm going to have to, based on what the testimonies and the letters that we've seen, I think in good consciousness, I would have to vote to respect this or to deny it; however, I think that there's some very good issues involved and even if we do deny this, I certainly hope that the health center will come back with perhaps a more scaled back plan or one that maybe addresses some of these other issues because I think it's vitally important that we have this center and that they are going to need to move forward in a better way. So if I am forced to make it one way or the other, it would only be to vote to reject it but with reservations.

Ms. Oliveira-Medeiros: Same here. There's just too many unanswered questions in my mind that's stuff that I really need to know before making a solid decision, so if we are being forced to do it tonight and, I'm sorry if I offend anybody here, I will go against it -- what were the words?

Ms. Kanakaole: Okay, we pretty much know the vote.

Ms. Oliveira-Medeiros: Deny the change.

Ms. Kanakaole: But I guess I wanna just say something about the -- discuss before we vote. Based on what Joe had said and looking at taking my notes during the testimony on the concerns that most people have had, I would have to say that I would vote for the recommendation because most of the concerns weren't about the fear of really changing

the land -- the zoning, there was changing in zoning, there was one, there was actually maybe two changing in zoning would make development, which would mean loss of culture, that was was one. The rest were about the actual facilities, like there's no prenatal care in the facilities, there's no dialysis, the restaurant, you know, what kind of -- you know, there's going to be competition, so it wasn't really about changing the zoning, it was, most people, in my opinion, weren't totally against having a facility, but the kind of facility, and so I would have to say I would vote for to recommend. Okay, anymore discussion? Okay, let's vote.

There being no further discussion, the motion was put to a vote.

It has been moved by Ms. Helekahi-Burns, seconded by Ms. Tolentino,

VOTED: to deny the recommendation of the Maui Planning Department to approve the district boundary amendment agriculture and rural to urban.

(Assenting: J. Romain; M. Oliveira-Medeiros; F. S. Helekahi-Burns)

(Dissenting: K. Kanakaole; F. Tolentino)

(Abstain: B. N. Shamblin)

Ms. Kanakaole: Okay.

Mr. Alueta: You got three-two, so the motion -- so you either can try do another motion --

Ms. Kanakaole: It carried.

Mr. Alueta: There's no action.

Ms. Kanakaole: There was no action?

Mr. Alueta: You need four to --

Mr. Giroux: We need four votes to take action in the affirmative so the motion to deny the recommendation, basically, we had no action because we have three for the denial and two --

Mr. Romain: Can we try another, perhaps, an approval motion but with some serious conditions?

Mr. Giroux: As you notice how the state, the answer is, yes, but you notice how the department -- you are allowed to make recommendations on the district boundary, but to make a clearer ordinance, a lot of times it's easier to do the conditions on the zoning, the county zoning.

Mr. Romain: Vote on the county zoning first?

Mr. Giroux: That's fine. I mean we can try that.

Mr. Alueta: You can. I mean since you're just a recommending body, I don't see a problem with it because we'll try to clean it up later if we get any problems later, but it's normally like first you deal with the state issue, you get the designation for the state, and then you go for the -- knowing that you're going to put the conditions on the zoning during the county period. You can -- what you could try to do is try to -- it may make it more confusing but you'll do is you'll combine the two, your discussions would be and all your conditions will be attached to the county zoning, and then someone -- if that satisfies all of your concerns, you'd make a motion to approve the state and to approve the county zoning with conditions, so you just say, I'm going to approve the state and I'm going to approve the county with conditions, and then you get -- you'd get it all done at one crack. So I mean that way you get all your conditions attached to the county.

Mr. Romain: I'd like to make a motion that we vote for approval of both county and state zoning changes with conditions that we can add on during our discussions.

Ms. Tolentino: I second.

Ms. Kanakaole: Okay, discussion. What are the --

Mr. Romain: I would like to see a condition that the -- that they reconsider the phases of construction and put the kupuna facilities as well as the health center general facilities in Phase 1 rather than Phase 3. And that I would also recommend that a community committee be formed to dialogue or that the -- that the health center, in getting approval, would agree to have a -- an interface with the community committee to help further make this something that we all wanna get behind.

Mr. Giroux: Just to get consensus, as far as the recommended conditions, can we get a motion to see if those are good and then we can deal with added conditions? Since you're the maker of the motion you can --

Mr. Romain: Make it with or without the conditions, so just the motion that we add the conditions, and we pass that, and then we pass the conditions. Is that what you mean?

Mr. Giroux: Yeah, you could do either or. You could do a motion to add a condition --

Mr. Romain: Okay.

Mr. Giroux: And we should take it to vote and see if the body is okay with that condition.

Mr. Romain: Can I do two additions in one? The ones that I just made.

Mr. Giroux: Let's keep it simple.

Mr. Romain: Okay, I'll do one. The first condition that I would like to add is that the project re-prioritize and do the kupuna facilities and any needed improvements to the health center itself in Phase 1.

Ms. Helekahi-Burns: I'll second.

Ms. Kanakaole: Discussion?

Ms. Helekahi-Burns: If that's the case, then what would be in Phase 2? Cause I feel that with those conditions that we should also help with the time line of this whole thing since we're changing the whole phase, you know, Phase 1, our kupunas, let's malama them first, it's been many times mentioned by a lot of people that are kupunas are definitely our pride and joy, so definitely them being in the first phase. And number two, that the second phase include the current programs that are going on now at this point, which is the fitness center, the kitchen to make sure our kupunas they are able to get home delivered meals, and maybe administration building, and really leave the last phase, actually, the cottages of the wellness village.

Ms. Kanakaole: Oh, any other discussion? John?

Mr. Romain: So we're, basically, recommending that they do the -- they switch the kupuna center, which was coming in in Phase 3, that goes into Phase 1; and the wellness cottages from Phase 1 that would go in last, in Phase 3; and everything else would remain pretty much the same; and the nutritional program would still be first, and the -- well, I don't know. I don't know how much we really have the right to plan everything for them but these just seem to me some of the things that I thought were more important for --

Ms. Helekahi-Burns: ...(inaudible)... since you're changing them, John Romain, I figure I add on to it, let's change them, let's change the whole thing.

Mr. Alueta: I can, if I may, Vice-Chair, is to, and Commissioner Romain, is that maybe you could put a condition, as part of your condition would be that the project be developed as

presented, so you're kinda tying in this plan that you're seeing, since it seems to me I can't separate -- you're not going to be able to separate these construction cause you wanna see this constructed, so you say that you approve the plan as presented with the exception that kupuna housing from Phase 3 be constructed concurrently with Phase 1. And in talking with the applicant, they're agreeable to that. They said that they can move that up to the Phase 1.

Mr. Romain: Alright, let's simplify it then and I modify my recommendation to just that, that we recommend that the kupuna housing be included in the Phase 1 of the project --

Mr. Alueta: As presented.

Mr. Romain: As presented to us today.

Mr. Alueta: Yeah, and I think that would also alleviate maybe some of the, you know as I stated, some of the food for thought the concern about having the public/quasi-public be limited to hospitals or whatever, this at least you're now tying your zoning to an actual project because that seems to be what people want to make sure.

Ms. Kanakaole: Do we have a second to amend John Romain's condition about the kupuna housing moving to Phase 1, right?

Ms. Helekahi-Burns: Okay, I approve -- I second the amendment of kupuna first.

Ms. Kanakaole: Any discussion? No discussion about that condition? Okay, so we're going to vote on the condition that John Romain brought up to move the kupuna building from Phase 3 to Phase 1. Oh, I'm sorry, yes, this is adding the condition on from changing the kupuna building from Phase 3 to Phase 1.

Ms. Oliveira-Medeiros: You're talking about the housing --

Ms. Kanakaole: Yes.

Ms. Oliveira-Medeiros: Or the covered building they need so their feet don't get wet?

Ms. Kanakaole: The housing, right, John?

Mr. Romain: Well, I said originally the kupuna housing as well as whatever immediate facilities that the current medical center needs, so that, obviously, would include that. I mean if the kupuna are in tents right now, it seems to me that would be the immediate need.

Mr. Alueta: Right, Commissioner Romain, I tried to -- I mean I'm not sure -- I was trying to say that it would be cleaner if you say that, you know, you're amending the project to approve the project as presented, right, so that includes, as they're saying, the first one, two, three phases, with the exception of moving the kupuna houses to Phase 1; that way you're grounding your change in zoning, right, to this construction, as they presented, with the -- so that would include all the other buildings.

Mr. Romain: Well, when I first suggested, I had two additional conditions, and you said, let's do them one at a time, so if I make the whole motion to include this one condition, we may be leaving out another that I'm interested in and other people may want too, so maybe if we can just do these conditions one at a time and then --

Ms. Kanakaole: That one that we voted already, right?

Mr. Alueta: You want to make it clear that you're just voting on this is one motion, just one condition.

Ms. Kanakaole: Oh, that wasn't clear? Oh, okay.

Mr. Romain: But it's not the only -- we can add more conditions as well.

Ms. Kanakaole: That's just one.

Mr. Romain: Okay, condition one, oh, okay.

Ms. Kanakaole: We shall vote again. Okay, we're voting on the kupuna housing, this condition, one condition, of the kupuna housing building from Phase 3 moved up to Phase 1.

There being no further discussion, the motion was put to a vote.

It has been moved by Mr. Romain, seconded by Ms. Helekahi-Burns, then

VOTED: that a condition be added that the kupuna housing be moved from Phase 3 to Phase 1.
(Assenting: J. Romain; F. S. Helekahi-Burns; F. Tolentino; M. Oliveira-Medeiros)
(Abstain: B. N. Shamblin)

Ms. Kanakaole: The motion was carried.

Mr. Giroux: ...(inaudible)... we're just coming up with conditions that will added, will be part of the list, so if somebody has another condition they know that they want to be added to the list.

Ms. Kanakaole: I just want to caution that, you know, we don't get into the specifics of, you know, the building of the thing because that's not what we're here for, we're here for the land zoning, so I mean it's a good condition, but I just don't want to get into all the nitty-gritties of this building first or that building second or, okay, that's my mana`o.

Ms. Oliveira-Medeiros: I almost feel like we're being pushed to do this thing tonight and I don't feel real comfortable with that and may I say a couple reasons why? This whole project thing that you guys sent us in the mail, I received it on Monday night; Tuesday, I had to go to work and then I had a class after work; Wednesday, I had a meeting in Wailuku all day long, I came back, it was like 9:00 p.m., bathe, eat, whatever; today is Thursday, I haven't even had a chance to read this whole thing yet, so I feel like it's kind of being shoved down our throats without having time to go over it. There's some things in here that you didn't read that, I don't know for what reason, but maybe I can go over some of them because does the community see this thing? They don't, yeah, so okay. One of the things in here, pardon me? Oh, okay, well I didn't have enough time to look at it, but one of the things I did see tonight is it says, "The proposed facility expansion is consistent with the surrounding land uses which provide public services to the Hana region," in one paragraph; two paragraphs later, it says, "The property is surrounded by residential uses along Hana Highway." I think those two statements kinda conflict each other and I didn't hear you mention that. "The land is contiguous with existing urban areas." The only other urban area I saw on the map was the county garage area, so it's not really contiguous with -- okay. "The project site is appropriate for urban land use given the Hana region's need for increased medical services." I know there's an increased need but not that much; that is my problem, just not that much. And the last one I saw is the General Plan, it says, "One of the things listed is to protect Maui County's ag lands and rural identity." How does this protect the ag lands and rural identity?

Mr. Alueta: In reviewing the criteria for change to urban district, we try to look at what's the best lands, okay, do you change --

Ms. Oliveira-Medeiros: This is the analysis then?

Mr. Alueta: This is the analysis, okay, in one of criteria is that you don't try to change A land, which is the highest and best use, you try to change your worse viable ag land, this is on the bottom -- this is not prime ag, it's not identified as prime ag, but the state ...(inaudible)... map it's not identified as prime ag on anybody's map. It's not the sole criteria. We've -- the state and the county has changed -- the state has change prime ag land into urban designations because the location of those prime ag lands are well suited

for some type of urban use, much of Wailuku is in that case. I didn't designate this site for public/quasi-public use, the community did in its 1994 update of the community plan, I mean I was on staff but I wasn't on the staff that helped the Hana community come up with this plan. You chose that this was the best location. You chose it because this was in the urban -- what passes for an urban core in Hana. Hana is a rural community; that's a given, you got --

Ms. Oliveira-Medeiros: Meaning it was interim, right?

Mr. Alueta: Huh?

Ms. Oliveira-Medeiros: You're talking about the interim?

Mr. Alueta: No, this is -- I mean you're looking at it's in the urban core of what is Hana, per se. You have the Hana -- you have the fire station, the police station, you have -- and you have an existing Hana Community Health Center; that's the best as far as this town is going to do as far as an urban core, and it's not appropriate for this facility to be maybe out toward on either direction, this is the area that this community decided. I mean it would be kinda ridiculous if I came in and said, "no, this is a shitty location," when the community told me -- everyone else said they want it in this location.

Ms. Kanakaole: Anymore discussion?

Mr. Alueta: I just want to point out that you can put another motion to defer, you're not tied, so I don't -- you had a motion that failed, you can always try again, if that's the wish of this board, okay.

Ms. Kanakaole: Members, is there a motion out there?

Ms. Oliveira-Medeiros: I still cannot vote tonight based on the information that I still wanna see which, for me, is really crucial, the feasibility study, so if we're going to be forced to vote, then I'm going to recommend denial.

Ms. Kanakaole: Do you wanna propose another motion to defer?

Ms. Oliveira-Medeiros: Didn't we do that already?

Ms. Kanakaole: Yes, and it failed, but we can do it again.

Mr. Romain: I'd like to add a second condition if we're going to go back to that vote.

Ms. Kanakaole: We're still on that vote, yeah.

Mr. Romain: Okay.

Ms. Kanakaole: I mean we didn't vote on --

Mr. Romain: But we did pass the one condition, right?

Ms. Kanakaole: Yes.

Mr. Romain: Alright, I'd like to add a second condition and that is, if approval is granted, that the community health center engage in a meaningful dialogue with a representative committee from the community for input throughout this process.

Ms. Kanakaole: Is there a second? No second?

Ms. Oliveira-Medeiros: I'll second that.

Ms. Kanakaole: Mavis seconds it. Discussion on that motion. No discussion? Oh, can you restate the motion, John?

Mr. Romain: Yes, that the -- the condition is that the community health center will engage in a meaningful dialogue with a committee of community representatives for input throughout this process.

Ms. Kanakaole: Discussion?

Ms. Helekahi-Burns: And what community committee will that be?

Mr. Romain: Yeah, that's a tough one.

Ms. Helekahi-Burns: That's a hard thing because --

Mr. Romain: It seems like that the crux of the whole problem right now is that there just isn't dialogue between the health center and the community at large, and if there was, we probably wouldn't be at this spot that we're in right now.

Ms. Kanakaole: It is the crux of the whole problem but it seems kind of strange to add that as a condition to the rezoning of the land. I don't know.

Mr. Romain: I withdraw the condition.

Mr. Giroux: Okay, yeah, I'm just going to comment on that because I think the record's going to be pretty clear that there is some disjoint within the community, and, again, this

is a record so it goes to the Commission, the Commission is going to see that this is a concern of this Committee, and also it's sent over to Council before they take it up in their committee and they're going to wonder has this happened before they take action. So, you know, I don't think it's a valid condition to put on, but I think it's good that it's in the record.

Mr. Romain: Okay, that's good enough for me.

Mr. Giroux: Withdraw, your motion is withdrawn?

Mr. Romain: Yeah.

Ms. Oliveira-Medeiros: I wanted to add another condition that this board sees and approves the feasibility study before passing. Anybody second?

Ms. Kanakaole: I think we would have to -- we wouldn't be able to do that, right? Because if we add that as a condition, and then we pass it, we passed it.

Mr. Giroux: I think what you can do is, as a recommendation of approval, that before it passes the Planning Commission, that they receive a feasibility study. I don't think it's going to be a condition of zoning, but I think that you can include it in your recommendations that that's a communication that's sent to the Planning Commission that you don't want to see this passed through the Planning Commission without a feasibility study.

Ms. Oliveira-Medeiros: Without them looking at one you mean?

Mr. Giroux: Yeah, without that review, and maybe -- is that something that's actually doable?

Mr. Alueta: It could be Planning Commission or it could be Council sees it, receives it.

Ms. Oliveira-Medeiros: Why wasn't it sent to us with this information here? The feasibility study?

Mr. Alueta: It wasn't a requirement of our department to see a feasibility study for the change in zoning or the district boundary amendment. We -- that's all.

Ms. Oliveira-Medeiros: I think it's really, really important to see that.

Mr. Alueta: Like I said, some people require it, we didn't feel it was necessary. It's an existing operation, although it is a major expansion, it is being proposed in phases so -- but

it can be -- I don't know. I mean if you want it, bring it to you guys, or you want it -- you said to the Commission or to Council.

Ms. Oliveira-Medeiros: I was hoping that we could see it cause we have the interest of the people at heart more than they do.

Mr. Alueta: Okay.

Ms. Kanakaole: Is there anymore discussion? Okay then we need to vote on accepting the recommendations from the Maui Planning Department on the state land change from ag and rural to urban, and the county zoning change from, what was it before? Interim to public/quasi-public with the five recommendations and the additional recommendation and that we approved. The additional recommendation made by John about the kupuna hale building.

Mr. Alueta: I'm sorry, Chairperson Kauai, but what happened to the feasibility study, how did you -- was there a motion that did not get seconded? No second. Okay, thank you. I just -- it's getting late for me too.

Ms. Kanakaole: Yes.

Mr. Giroux: Why don't you restate, Kauai, I think you made a motion. Why don't you restate it and see if you get a second and then we can vote on that.

Ms. Kanakaole: Okay, I thought that I was voting on it because John, can you double-check on this, did John make a motion to approve both of the recommendations with his condition?

Mr. Romain: I made the motion that we included the change for the kupuna housing that that be attached as a condition to approval, but I did not make a motion for approval, only that attachment, so we need another motion.

Ms. Kanakaole: Okay, okay, and I just did that. Okay. Okay, so my motion is to approve the Maui Planning Department recommendations to change the zoning of the state land from ag and rural to urban, and to change the county zoning from interim to public/quasi-public with the five conditions that they stated and the one condition that John brought up about the kupuna housing. Do we have a second?

Mr. Romain: I second.

Ms. Kanakaole: Discussion about that motion to approve? Okay, let's vote.

There being no further discussion, the motion was put to a vote.

It has been moved by Ms. Kanakaole, seconded by Mr. Romain, then

VOTED: to accept the recommendation from the Maui Planning Department on the State land change from ag and rural to urban, and the County zoning change from interim to public/quasi-public with the five recommendations and the additional recommendation that was approved.
(Assenting: J. Romain; K. Kanakaole; F. Tolentino)
(Dissenting: F. S. Helekahi-Burns; M. Oliveira-Medeiros)
(Abstain: B. N. Shamblin)

Ms. Kanakaole: **The motion did not carry.** The motion did not carry. Okay, so we are in the same place as we were. So we need a motion to do something so we can go home. We have other options. We can defer. We can recommend to deny. We already tried to recommend to approve with conditions.

Mr. Giroux: I was just asking what about the feasibility study and I said that that's probably something that can be included in the deferral.

Ms. Kanakaole: I put a motion out there to defer any decision making to a further meeting, to the next meeting. Is there a second?

Ms. Oliveira-Medeiros: I'll second.

Ms. Kanakaole: Discussion?

Ms. Helekahi-Burns: And by that time if the necessary documents, since we are deferring, the feasibility report, these documents that haven't been copied for all of us, be ready for then and if -- I don't know, is the feasibility report the same as the need, the certification of need? Is that the same? No?

Mr. Alueta: No it's not.

Ms. Helekahi-Burns: Okay, so I would like to know what that is, the certification of need because it was recommended by Doctor Pang, you know, and he tends to know a lot.

Mr. Alueta: You want them, okay, you want to know what the criteria is for a certificate of need?

Ms. Helekahi-Burns: Yeah.

Mr. Alueta: You just want to know what is the criteria?

Ms. Helekahi-Burns: Yeah, what is it? Why you don't know now? Oh, I just asking or we just going wait?

Mr. Alueta: I could guess, but I'm not going to at this point, and so I would suggest that we just get a list from the State Department of Health for their list of what they consider for a certificate of need.

Ms. Helekahi-Burns: We have a state certified nurse or a state nurse. Kathy, if you can, let us know about that, at least it would just be one document that they don't have to get to us and then we can ponder about it before we the kind.

Ms. Street: A certificate of need application is needed before improving or increasing or decreasing medical facilities. If you are going to make no change in the medical facility that exist, you do not need a certificate of need. So if nothing is going to be done with medical facility that is there right now where the dental office is, the exam rooms, where the cardiac monitors are, the ...(inaudible)... anything like that, if nothing is going to be done to that, you do not need a certificate of need. If something gets done to that building, you need to a certificate of need. If you wanted to build a dialysis center, you need a certificate of need.

Ms. Kanakaole: And that wasn't done?

Ms. Helekahi-Burns: The present health center will be changed.

Ms. Street: A certificate of need for a dialysis center is ...(inaudible)...

Ms. Kanakaole: Oh, yeah, right, right.

Ms. Street: Whatever gets built here, it would have to be done.

Mr. Alueta: We'll get it for you in writing from the Department of Health, that would make it easier for you to read it all to find out what exactly their criteria are.

Ms. Helekahi-Burns: I do have a question about that though. In order for a dialysis center to be done in Hana, will a certificate of need have to come from the health center?

Ms. Street: No.

Ms. Helekahi-Burns: No, okay.

Ms. Street: It would come ...(inaudible)...

Mr. Yoshida: You need to speak into the mike ...(inaudible)...

Ms. Helekahi-Burns: Okay. Okay, thank you.

Ms. Street: Oh, okay, I'll have to repeat myself. A certificate of need application comes from the State Health Planning and Development Agency, SHPDA. On Maui, the Tri-Isle SAC is the committee that is composed of people from grassroots areas that sit on this committee, we meet once a month, and I'm your representative from Hana. We hear certificate of need applications for Maui County, for example, when Maui Memorial Hospital wanted to improve and enlarge the facility, we heard that certificate of need application based on the specific criteria that are given to us. We are also trained when we sit on that board, we get an annual training. So if any medical or any medical services here affecting the building are going to be changed, improved, deleted, then that would have to come before -- a certificate of need application would have to be submitted and that request would have to come before SHPDA or the Tri-Isle SAC would hear that. On the Big Island, there's two entities, Oahu has I think three, and Kauai has one, so there's a place for medical needs to be considered. So medical needs have not been, you know, medical certificate of need application has not been submitted to the State Health Planning and Development Agency, I know that for a fact, so if medical improvements are going to be made, then they have to go through a CON process, that's what Doctor Pang was referring to, and --

Ms. Kanakaole: And it hasn't?

Ms. Street: No.

Ms. Kanakaole: And there's no plan, oh, you don't know if there's a plan that it would go through anyway.

Ms. Street: At the last meeting I was at, there was no application on the table.

Ms. Helekahi-Burns: Do they need it in order to go on with their project? Do they need to make a certification of need?

Ms. Street: That would have to depend on what medical improvements would be delivered to the community. If medical improvements were going to be made, then they would have to be submitted to the state.

Ms. Kanakaole: But aren't medical improvements being made in this thing?

Ms. Street: Medical? No.

Ms. Kanakaole: No. Okay. So only --

Mr. Romain: How long is the process for acquiring a certificate ...(inaudible)...

Ms. Street: It all depends how good your report is and how well you answer the questions. If you wanna see the questions, I can bring them to you, they're based on --

Mr. Romain: No, I'm just curious if perhaps that's something that would still be forthcoming, you know, in other words, they're doing the bigger, larger projection and that would be a ...(inaudible)...

Ms. Street: I would say about a year if you really had it all together, yeah.

Ms. Helekahi-Burns: I make a motion to defer our the kind --

Ms. Kanakaole: ...(inaudible)... and we got a second, we were in discussion, so now we gotta vote. Anymore discussion?

Mr. Tolentino: I just got one question for the applicant. Is there a possibility in this project, a possibility, along down the road, for a dialysis coming, you guys getting together with, you know, getting a dialysis program going with the health center?

Ms. Vasconcellos: The State Health Planning and Development Agency is waiting for response from the Federal government, the Medicare Administration, to see if it would be possible to do dialysis without following all of the Federal regulations attached to it, so that response has not come forward yet and it's real questionable about whether that's going to happen.

Ms. Kanakaole: Any other discussion?

Ms. Helekahi-Burns: Yeah, for Cheryle before she leaves. Is there a possibility that in the future of the health center that a dialysis machine might become available?

Ms. Vasconcellos: It's not really a question of the dialysis machine, it's really a huge program. We've done two separate feasibility studies on providing services in Hana that meet the current Federal regulations and it is financially not feasible. You would need to have a minimum of 16 to 40 people in order for the program to be able to sustain itself. So that's the big issue which is why the state is looking at is there a way to sort of circumvent all of the Federal regulations, do a sort of quasi-official dialysis center that's more home-

based, and that response has not come forward yet, so, at this point in time, it's not possible.

Ms. Helekahi-Burns: Mahalo.

Ms. Tolentino: Excuse me, Cheryle, did you have anything more to elaborate, you know, I mean we were thanking you, but if you have anything more to -- one minute, please.

Ms. Vasconcellos: Well, just with regards to certificate of need, if we're at the point where we would be looking to do improvements to the actual medical facility, we would need to look at a certificate of need process. There's also an administrative review, which doesn't require all of the hearings and can be -- that could actually happen in 30 days depending on how well you put your program together, but that would only apply to improvements to the medical facility, not to the rest of the project.

Ms. Tolentino: Thank you.

Ms. Kanakaole: Okay, anymore discussion? Let's vote on deferring the decision making to the next meeting.

There being no further discussion, the motion was put to a vote.

It has been moved by Ms. Kanakaole, seconded by Ms. Oliveira-Medeiros, then

VOTED: to defer the decision making to the next meeting.
(Assenting: J. Romain; M. Oliveira-Medeiros; F. Tolentino;
F. Helekahi-Burns)
(Abstain: B. N. Shamblin)

Ms. Kanakaole: Okay, so we're closing the meeting? The next -- there's the Director's Report on the agenda.

E. DIRECTOR'S REPORT

Mr. Yoshida: Madam Chair, I guess since the board meets on an ad hoc basis, you wanna decide on the date of the next meeting.

Ms. Kanakaole: Okay.

Mr. Yoshida: We would suggest April 21, it's a Thursday.

Ms. Kanakaole: April 21 is a suggestion for our next meeting. Is that enough time? That's a Thursday. Okay, we need consensus on that date because if everybody's not here, then we're going to end up deferring it again. Is everybody -- can everybody come? Fawn, can April 21? Okay.

Mr. Yoshida: Okay, I'll be very brief because the hour is late. On behalf of the department, we want to thank all of you for your time spent in discussing, hearing public testimony, and deliberating on this matter. I believe this is probably the longest meeting we've had in five years. And, again, we'd like to thank the Chair Shamblin for her five years of service on this board and wish her the best in the future, and that's all we have to report.

Ms. Kanakaole: Mahalo. The meeting is adjourned.

F. ADJOURNMENT

There being no further business brought before the Committee, the meeting was adjourned at 10:30 a.m.

Respectfully submitted by,

SUZETTE L. ESMERALDA
Secretary to Boards and Commissions I

RECORD OF ATTENDANCE

Present

B. Nalani Shamblin, Chairperson
Kauai Kanakaole, Vice-Chairperson
Fawn Sherie Helekahi-Burns
Francine Tolentino
Mavis Oliveira-Medeiros
John Romain

Others

Clayton Yoshida, Planning Staff
Joseph Alueta, Planning Staff
James Giroux, Deputy Corporation Counsel