

House District \_\_\_\_\_

Senate District \_\_\_\_\_

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

Log No: \_\_\_\_\_

For Legislature's Use Only

Type of Grant or Subsidy Request:

GRANT REQUEST – OPERATING

GRANT REQUEST – CAPITAL

SUBSIDY REQUEST

"Grant" means an award of state funds by the legislature, by an appropriation to a specified recipient, to support the activities of the recipient and permit the community to benefit from those activities.

"Subsidy" means an award of state funds by the legislature, by an appropriation to a recipient specified in the appropriation, to reduce the costs incurred by the organization or individual in providing a service available to some or all members of the public.

"Recipient" means any organization or person receiving a grant or subsidy.

STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST (LEAVE BLANK IF UNKNOWN): \_\_\_\_\_

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

1. APPLICANT INFORMATION:

Legal Name of Requesting Organization or Individual:

The Wahiawa Center for Community Health

Dbas:

Street Address: 302 California Ave, Wahiawa HI 96786

Mailing Address: P.O. Box 30668  
Honolulu HI 96820

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name BEV HARBIN

Title Project Development Coordinator

Phone # 808-591-0000

Fax # 808-968-1295

e-mail bevharbin@808-591-0000.com

3. TYPE OF BUSINESS ENTITY:

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

6. DESCRIPTIVE TITLE OF APPLICANT'S REQUEST:

THE WAHIAWA MEDICAL BUILDING INTERIOR RENOVATION PROJECT

4. FEDERAL TAX ID #: \_\_\_\_\_

5. STATE TAX ID #: \_\_\_\_\_

7. AMOUNT OF STATE FUNDS REQUESTED:

FISCAL YEAR 2014: \$ 500,000

8. STATUS OF SERVICE DESCRIBED IN THIS REQUEST:

- NEW SERVICE (PRESENTLY DOES NOT EXIST)
- EXISTING SERVICE (PRESENTLY IN OPERATION)

SPECIFY THE AMOUNT BY SOURCES OF FUNDS AVAILABLE AT THE TIME OF THIS REQUEST:

STATE \$ \_\_\_\_\_ -

FEDERAL \$ \_\_\_\_\_ -

COUNTY \$ \_\_\_\_\_ -

PRIVATE/OTHER \$ \_\_\_\_\_ -

TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE:

MARY TALON, BOARD PRESIDENT  
NAME & TITLE

01/16/2013  
DATE SIGNED

## Application for Grants and Subsidies

*If any item is not applicable to the request, the applicant should enter “not applicable”.*

### I. Background and Summary

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

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

In September 2011, The Health Resources & Services Administration (HRSA) awarded a one-year planning grant to the Wahiawa community to determine if there was in fact an unaddressed need for a community health center in this underserved area. The results were staggering and in need of immediate action.

Founded on the 25<sup>th</sup> of January 2012, The Wahiawa Center for Community Health (WCCH), a 501(c)(3) nonprofit organization, was established by a consortium of concerned members of the Wahiawa community and health care professionals to provide medical health services, medical career training and to serve as a healthy lifestyle resource for the Wahiawa community and the surrounding areas. Community health centers provide medical, dental and mental health services to anyone regardless of one's ability to pay. Once completed and opened for service, the WCCH will serve a critical community need to the underserved of Wahiawa, helping community members address their health related concerns.

2. The goals and objectives related to the request;

The primary goal of this proposed capital improvement project is to open a Federally Qualified Health Center (FQHC) which provides access to comprehensive, culturally competent, quality primary health care services to the residents of Wahiawa and the surrounding underserved communities. It is the aim of the WCCH to break down the barriers to health care - the obstacles within the current health care system that prevents vulnerable patient populations from receiving needed health care, or that cause them to receive inferior health care compared to advantaged patient populations (American Medical Student Association).

The objectives related to this capital request are to –

- Repurpose the Wahiawa Medical Building and transform it into the home of the Wahiawa Center for Community Health;

- Address the shortage of physicians and other health care professionals treating patients in the Wahiawa community;
  - Address the inappropriate use of the Wahiawa General Hospital's emergency department;
  - Accurately capture and decipher health care indicators;
  - Address the needs of two of Wahiawa's most vulnerable populations, the children and the elderly; and,
  - Work to address and in time eliminate the existing barriers to health care within the Wahiawa community.
3. The public purpose and need to be served;

***Public Purpose***

The public purpose of WCCCH is to provide all members of Wahiawa with greater access to affordable comprehensive primary health care services, regardless of one's ability to pay.

***Public Need for Affordable Comprehensive Primary Health Care Services***

In March 2011, Faith in Action for Community Equity (FACE), a 501(c)(3) non-profit organization, was approached by the Hawai'i Primary Care Association at the request of the office of the late Senator Daniel K. Inouye to be the applicant for a HRSA planning grant for a community health center in Wahiawa. This planning grant was issued to assess the need in Wahiawa for a Federally Qualified Health Center. Upon receipt of the planning grant, FACE organized the Wahiawa community to assess its health care needs and the barriers to healthcare their residents regularly encounter. FACE completed individual surveys, focus groups, and held multiple public meetings. The grant was completed in August 2012 and the critical need for a community health center was proven for Wahiawa.

4. Describe the target population to be served; and

***Target Populations***

The most recent US Census shows Wahiawa is comprised of 36,877 residents. Of this total, a large number of residents are either in the early or late stages of life. 24.1% of residents are under the age of 18, nearly 7% under the age of 5 alone. Individuals older than age 65 comprise 17.1% of the population. Taken together, this classifies over 41% of the population as either a child or elderly individual. Children in this area have limited access to health care due to limited financial resources within their households. This can be inferred as all six elementary schools in Wahiawa are Title 1 schools and thus qualify for free or reduced lunches.

Cause for further concern can be found when examining the other defining characteristics of the Wahiawa population. 33.5% live below 200% of the federal poverty line. 14.1% are uninsured. Unemployment is at 5.3%. Only 19.2% of residents have completed an undergraduate education. All of these percentages are significantly lower than in the rest

of the state. A direct result of these figures is the impact it has on the community's earning capacity. Per capita income level is currently at \$24,118, 17.4% lower than the rest of the state. It is this lack of income that has identified Wahiawa as an area eligible for revitalization under the Neighborhood Revitalization Strategy Area (NRSA) initiative. The NRSA initiative was first implemented by the U.S. Department of Housing and Urban Development. It is an effort to recognize areas with a commitment by community stakeholders to revitalize neighborhoods by investing in infrastructure. To be considered, the majority of individuals within a given area must be deemed as having low- and moderate-income.

The WCCH aims to directly serve the 36,877 residents of Wahiawa. The majority of individuals to be served by the WCCH are considered low- and moderate-income (LMI). Within NRSA designated areas, 60.1% meet the prescribed income requirements. Outside of NRSA designated areas, but still within Wahiawa, that number rises to 68.6%. Both of these figures are well above the requisite 51%. In addition, NRSA residents comprise 60.4% of the Wahiawa.

What this means is that the WCCH will not only directly benefit the NRSA population, it will also reach a large LMI segment of Wahiawa as well.

5. Describe the geographic coverage.

The service area of Wahiawa includes all of Wahiawa, Helemano, Poamoho, Whitmore, Wilikina and Schofield. The boundaries are the Wilson Bridge to the south, Waialua to the east and Hale'iwa to the north. Wahiawa is home to 36,877 residents representing almost 10,000 households. The WCCH aims to directly serve the 36,877 individuals residing in Wahiawa (zip code 96786). Refer to Attachment I for a map of the Geographic Service Area.

Given the community health center's centralized location on the island of O'ahu, members of adjacent communities such as Waialua, Hale'iwa, Waipi'o Acres, and Mililani by virtue of proximity will also gain greater access to primary health care services.

## **II. Service Summary and Outcomes**

The Service Summary shall include a detailed discussion of the applicant's approach to the request. The applicant shall clearly and concisely specify the results, outcomes, and measures of effectiveness from this request. The applicant shall:

1. Describe the scope of work, tasks and responsibilities;

**Scope of Work**

**Stage 1**

Stage 1 of this capital improvement project includes the build out of an initial clinic and administration office totaling approximately 2,200 sq. ft. The clinic will also be outfitted with up-to-date medical equipment necessary to provide health care services to the Wahiawa community. This initial phase will allow the WCCH to become operational by the end of the year, with consecutive stages occurring to meet the projected demand for its affordable health care services.

<b>Tasks</b>	<b>Responsibilities</b>	<b>Status/Timeline</b>
Environmental Assessment	Contractor	March 2013
Architect Selection Process	WCCH Board of Directors	February-March 2013
Design and Finalize Plans	Architectural Firm Selected	March-May 2013
Permitting – Construction	Architect & Expediter	May-June 2013
Contractor Bidding and Selection Process	WCCH Board of Directors	June 2013
Construction	General Contractor	July-October 2013
Final Walk Through with Contractor	WCCH Project Manager and General Contractor	October 2013
Installation of Equipment	WCCH Project Manager and Selected Vendors	October 2013
Opening of Stage 1	WCCH CEO	November 2013

**Overall Project**

By October 2014, the proposed project intends to revitalize a total of 7,900 sq. ft. in 3 separate units in the Wahiawa Medical Building (approximately 36% of the building).

2. Provide a projected annual timeline for accomplishing the results or outcomes of the service;

See Chart above (Section II)

3. Describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results; and

<b>WAHIAWA CENTER FOR COMMUNITY HEALTH, STAGE I QUALITY ASSURANCE AND EVALUATION PLAN</b>			
<b>Activity</b>	<b>Outcome(s)</b>	<b>Evaluation</b>	<b>Measurement(s)</b>
Stage 1 – Initial clinic and administration office	<ul style="list-style-type: none"> <li>• A newly renovated community health center available to the residents of</li> </ul>	<ul style="list-style-type: none"> <li>• Establish quality benchmarks for general contractor to meet</li> <li>• Measure</li> </ul>	1 newly renovated 2,200 sq. ft. clinical and administrative space available to residents of Wahiawa

	<p>Wahiawa</p> <ul style="list-style-type: none"> <li>• A newly renovated administration office</li> </ul>	<p>construction activity against a construction timeline plotted on a Gantt chart to evaluate progress</p> <ul style="list-style-type: none"> <li>• Meet regularly with general contractor to maintain a strong line of communication</li> </ul>	
Equipment Installation	Properly install all medical equipment, office equipment and the IT Infrastructure	<ul style="list-style-type: none"> <li>• Work with selected vendors to ensure that all equipment are installed properly and within product specification</li> </ul>	1 fully equipped clinical and administrative space ready to service the residents of Wahiawa

4. List the measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency). The measure(s) will provide a standard and objective way for the State to assess the program's achievement or accomplishment. Please note that if the level of appropriation differs from the amount included in this application that the measure(s) of effectiveness will need to be updated and transmitted to the expending agency.

***Measure(s) of Effectiveness***

- Establish one (1) Federally Qualified Health Center in the low – moderate-income district of Wahiawa
- Renovate the initial 2,200 sq. ft. of space within the current Wahiawa Medical Building by October 2013
- Renovate an additional 5,702 sq. ft. of space within the current Wahiawa Medical Building by August 2014
- Ensure that construction is within stated specifications
- The number of patients served in one year by demographics (gender, age, LMI, zip code, insurance)
  - Standard: Uniform Data System (UDS)
    - Year 1: Provide 2,300 patients care (65% LMI)
    - Year 2: Provide 5,300 patients care (65% LMI)
- The number of non-emergency visits redirected from Wahiawa General ER to WCCH

### III. Financial

#### Budget

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

See Attachment II for the completed budget forms and accompanying budget narrative.

See Attachment III for a five (5) year projected operating budget and narrative.

2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2014.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$200,000	\$250,000	\$50,000	\$0	\$500,000

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2014.

- Department of Housing and Urban Development, Community Development Block Grant Program (administered through the City and County of Honolulu)
- Health Center Program, New Access Point Grant
- Robert Wood Johnson Foundation
- The Kresge Foundation
- Pfizer Pharmaceuticals
- CVS Caremark Foundation
- Kaiser Family Foundation
- Wellcare Foundation
- Ford Foundation
- W.K. Kellogg Foundation
- The Cades Foundation
- The Joseph & Vera Long Foundation
- Thomas J. Long Foundation
- The William G. Irwin Charitable Foundation
- The Office of Hawaiian Affairs, Community Grants Program
- AlohaCare
- United Healthcare
- HMSA Foundation

4. The applicant shall provide a listing of all state and federal tax credits it has been granted within the prior three years. Additionally, the applicant shall provide a listing of all state and federal tax credits they have applied for or anticipate applying for pertaining to any capital project, if applicable.

WCCH has not been granted any state or federal tax credits at the time of this proposal submission. Additionally, WCCH does not anticipate that its board of directors will apply for either state or federal tax credits for this capital project. Amended pages of this proposal will be issued to both the House Committee on Finance and the Senate Committee on Ways and Means (in accordance with the GIA submission instructions) in the case that a decision is made to apply for tax credits following the submission of this proposal.

## IV. Experience and Capability

### A. Necessary Skills and Experience

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

Related to this capital improvement project, WCCH has engaged the necessary subject matter experts to ensure that this capital project is successfully completed.

#### **The Project Development Team consists of:**

- **Project Development Coordinator** – Bev Harbin has extensive experience in new business start-up, negotiations, and community organizing.
- **Chief Financial Officer/Chief Operations Officer** - Monique van der Aa has extensive experience in managing community health centers, health center building renovations, implementing IT infrastructure and systems, budget development and compliance with the stringent Federally Qualified Health Center requirements. Monique has managed similar low-income community revitalization projects during her tenure at Kalihi-Palama Health Center (KPHC).
- **Board Member and Chair of the Project Development Committee** - Mark Frey is Project Director of Island Palm Communities LLC, a partnership between developer Lend Lease and the US Army established to manage, develop and construct one of the largest privatized military housing communities that is located in the Wahiawa NRSA community of Schofield. Mark Frey will have oversight of the lease negotiations or potential purchase option agreements.
- **Director of Real Estate Development** - Marian Gushiken. At Hui Kauhale, Inc. (HKI), Ms. Gushiken oversees all development projects in Hawai'i including



acquiring new projects and obtaining financing. HKI is a non-profit organization in Hawai'i and a developer of affordable For the purposes of this application, Marian Gushiken will oversee all project requirements, certification, financing and facilitate all day-to-day operations in coordination with WCCH. HKI has been involved in low to moderate-income projects across the State of Hawai'i. HKI's mission is *to assist in the relief of the poor and distressed, in combatting community deterioration, and in lessening neighborhood tensions by promoting the preservation of decent housing that is affordable to very low, low, and moderate-income families in the State of Hawai'i, and by developing, owning and managing safe, quality permanently affordable housing for a growing segment of the population which can no longer afford a home in the State of Hawai'i.*

- **See Attachment IV for resumes**

## **B. Facilities**

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

**Site Location:** 302 California Avenue  
Wahiawa, HI 96786  
Tax Map Key: 7-3-004:036

**Securing Facility:** The current Wahiawa Medical Building, located on 302 California Avenue in Wahiawa Town, is the targeted site for the new community health center. Hawai'i Commercial Real Estate, LLC, is actively listing office spaces within the Medical Building. WCCH has taken the preliminary steps to sign long-term lease agreements for a combined 7,902 sq. ft. of space within the Wahiawa Medical Building, which is approximately 36% of the total building capacity. WCCH has solicited and received letters of intent to either lease and/or purchase the fee simple condominium interest from:

- Dr. Salvador B. Cecilio, Owner, 2,200 sq. ft. medical office
- Dr. Manual A. Abundo, Owner, 4,700 sq. ft. medical office
- Dr. Carver G. Wilcox, Owner, 1,000 sq. ft. medical office

The current Wahiawa Medical Building is ADA compliant but with the planned renovations, additional ADA compliant features will be incorporated.

## **V. Personnel: Project Organization and Staffing**

### **A. Proposed Staffing, Staff Qualifications, Supervision and Training**

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

Related to this capital improvement project, WCCH has engaged the necessary subject matter experts to ensure that this project is successfully completed.

- **Project Development Coordinator** – Bev Harbin has extensive experience in new business start-up, negotiations, and community organizing.
- **Chief Financial Officer/Chief Operations Officer** - Monique van der Aa has extensive experience in managing community health centers, health center building renovations, implementing IT infrastructure and systems, budget development and compliance with the stringent Federally Qualified Health Center requirements.
- **Board Member and Chair of the Project Development Committee** - Mark Frey is Project Director of Island Palm Communities LLC, a partnership between developer Lend Lease and the US Army established to manage, develop and construct one of the largest privatized military housing communities that is located in the Wahiawa NRSA community of Schofield. Mark Frey will have oversight of the lease negotiations or potential purchase option agreements.
- **Director of Real Estate Development** - Marian Gushiken. AT Hui Kauhale, Inc. Ms. Gushiken oversees all development projects in Hawai‘i including acquiring new projects and obtaining financing. For the purposes of this application, Marian Gushiken will oversee all project requirements, certification, financing and facilitate all day-to-day operations in coordination with WCCH.
- **Construction Advisor** – DMA Builders, LLC. David Hogan is the principal of DMA Builders, LLC, a domestic limited liability company duly licensed in the State of Hawai‘i (license number CT-30865). DMA has operated in as a building contractor in the State of Hawai‘i since July 2010. Most recently, DMA Builders completed 2,500 new family homes on Schofield Barracks for military dependents under Davis-Bacon and Federal rules. DMA Builders, LLC provided the initial cost estimates for budget projection purposes.

## **B. Organization Chart**

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

See Attachment V for the Organization Chart.

## **VI. Other**

### **A. Litigation**

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

The WCCH has no pending litigation against it.

### **B. Licensure or Accreditation**

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

WCCH has initiated the process to secure all necessary construction permits and will have all of the necessary permits in place by June 2013.

**DECLARATION STATEMENT OF  
APPLICANTS FOR GRANTS AND SUBSIDIES PURSUANT TO  
CHAPTER 42F, HAWAII REVISIED STATUTES**

The undersigned authorized representative of the applicant certifies the following:

- 1) The applicant meets and will comply with all of the following standards for the award of grants and subsidies pursuant to Section 42F-103, Hawaii Revised Statutes:
  - a) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant or subsidy is awarded;
  - b) Complies with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
  - c) Agrees not to use state funds for entertainment or lobbying activities; and
  - d) Allows the state agency to which funds for the grant or subsidy were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and ensuring the proper expenditure of the grant or subsidy.
- 2) The applicant meets the following requirements pursuant to Section 42F-103, Hawaii Revised Statutes:
  - a) Is incorporated under the laws of the State; and
  - b) Has bylaws or policies that describe the manner in which the activities or services for which a grant or subsidy is awarded shall be conducted or provided.
- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawaii Revised Statutes:
  - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
  - b) Has a governing board whose members have no material conflict of interest and serve without compensation.

Pursuant to Section 42F-103, Hawaii Revised Statutes, for grants or subsidies used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant or subsidy was awarded and disposes of the land in fee simple or by lease, the organization shall negotiate with the expending agency for a lump sum or installment repayment to the State of the amount of the grant or subsidy used for the acquisition of the land.

Further, the undersigned authorized representative certifies that this statement is true and correct to the best of the applicant's knowledge.

The Wahiawa Center for Community Health  
(Typed Name of Individual or Organization)



01/16/2013  
(Date)

Mary Talon  
(Typed Name)

Board President  
(Title)



Attachment II – Project Budget

Budget Forms

Budget Narrative

## BUDGET REQUEST BY SOURCE OF FUNDS

(Period: July 1, 2013 to June 30, 2014)

Applicant: The Wahiawa Center for Community Health

BUDGET CATEGORIES	Total State Funds Requested (a)	(b)	(c)	(d)
<b>A. PERSONNEL COST</b>				
1. Salaries				
2. Payroll Taxes & Assessments				
3. Fringe Benefits				
<b>TOTAL PERSONNEL COST</b>				
<b>B. OTHER CURRENT EXPENSES</b>				
1. Airfare, Inter-Island				
2. Insurance				
3. Lease/Rental of Equipment				
4. Lease/Rental of Space	273,000			
5. Staff Training				
6. Supplies				
7. Telecommunication				
8. Utilities				
9. Contractual Services	195,000			
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
<b>TOTAL OTHER CURRENT EXPENSES</b>	<b>468,000</b>			
<b>C. EQUIPMENT PURCHASES</b>				
<b>D. MOTOR VEHICLE PURCHASES</b>				
<b>E. CAPITAL</b>	<b>2,972,000</b>			
<b>TOTAL (A+B+C+D+E)</b>	<b>3,440,000</b>			
<b>SOURCES OF FUNDING</b>		Budget Prepared By:		
(a) Total State Funds Requested	500,000	Monique van der Aa	791-7837	
(b) CDBG	1,900,000	Name (Please type or print)	Phone	
(c) Foundations	1,040,000	<div style="background-color: black; width: 100px; height: 15px;"></div>	1/16/2013	
(d)		Signature of Authorized Official	Date	
<b>TOTAL BUDGET</b>	<b>3,440,000</b>	Mary Talon, Board President		
		Name and Title (Please type or print)		





## BUDGET JUSTIFICATION - OTHER OPERATING COSTS

Applicant: The Wahiawa Center for Community Health

Period: July 1, 2013 to June 30, 2014

DESCRIPTION	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
Lease/Rental of space				
6,074 sq ft @ \$2.50 per sq ft per month for 18 months (Tiple Net Lease: rent, CAM, property taxes, Insurance)			273,000	\$ 273,000
Contractual Services				
EAH / HKI Fiscal Sponsor	1.00	145,000	145,000	\$ 145,000
Contract Monitoring (includes Davis Bacon compliance)	1.00	50,000	50,000	\$ 50,000
<b>TOTAL:</b>			<b>468,000</b>	<b>\$ 468,000</b>
<b>JUSTIFICATION/COMMENTS:</b>				

## BUDGET JUSTIFICATION - EQUIPMENT

Applicant: The Wahiawa Center for Community Health

Period: July 1, 2013 to June 30, 2014

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
Medical Equipment:			-	\$ -
Exam Room (exam table, spot vital signs, sharps, chairs)	17.00	14,000	238,000	\$ 238,000
Patient Check-in (scales & thermoscan)	17.00	1,000	17,000	\$ 17,000
Laboratory (sterilization, centrifuge, hemocue, fridge)	2.00	5,000	10,000	\$ 10,000
Procedures Room (hand pieces)	2.00	3,000	6,000	\$ 6,000
Ultrasound Machine	1.00	5,000	5,000	\$ 5,000
EKG Machine	1.00	10,000	10,000	\$ 10,000
Furniture for Clinic & Administration (per room: desk, CHAIRS, filing cabinets, bookshelf)	31.00	3,500	108,500	\$ 108,500
IT Infrastructure & Systems:			-	\$ -
LAN (Local Area Network)	1.00	120,000	120,000	\$ 120,000
Phone System & Connectivity	1.00	95,000	95,000	\$ 95,000
Electronic Practice Management / EHR (30 licenses & implementation support)	1.00	275,000	275,000	\$ 275,000
Accounting System	1.00	13,000	13,000	\$ 13,000
Payroll / Human Resources System	1.00	12,500	12,500	\$ 12,500
PC's & related software	40.00	1,500	60,000	\$ 60,000
Photocopier/printer/scanner	2.00	15,000	30,000	\$ 30,000
<b>TOTAL:</b>			<b>1,000,000</b>	<b>\$ 1,000,000</b>
<b>JUSTIFICATION/COMMENTS:</b>				

## BUDGET JUSTIFICATION - MOTOR VEHICLE

Applicant: The Wahiawa Center for Community Health

Period: July 1, 2013 to June 30, 2014

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

## BUDGET JUSTIFICATION CAPITAL PROJECT DETAILS

Applicant: The Wahiawa Center for Community Health

Period: July 1, 2013 to June 30, 2014

FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OTHER SOURCES OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2011-2012	FY: 2012-2013	FY:2013-2014	FY:2013-2014	FY:2014-2015	FY:2015-2016
PLANS				170,000		
LAND ACQUISITION						
DESIGN						
CONSTRUCTION			500,000	1,302,000		
EQUIPMENT				1,000,000		
TOTAL:			500,000	2,472,000		
JUSTIFICATION/COMMENTS:						

### **The Wahiawa Center for Community Health Project Budget Narrative**

The Wahiawa Medical Building was built in 1977 and the majority of the units are used by Providers. The interior of the units are currently built out as clinic space however the infrastructure, equipment and fixtures have seen their useful life and the interior desperately needs revitalization. The State Capital Grant funds will be used to demolish the interior and re-design the layout in keeping with current clinical practice models, specifically the Patient Centered Health Care Home. The goal is to create a welcoming environment that the residents of Wahiawa are proud to call theirs. The health center will be equipped with the latest in medical equipment, IT technologies and energy efficient appliances.

#### Units to be revitalized:

202 & 203:	2,200 sq ft	Initial Clinic/Administration	State Grant - Capital
106:	4,700 sq ft	Main Clinic	CDBG Funds
102:	<u>1,000 sq ft</u>	Patient Education Training Room	CDBG Funds
Total:	7,900 sq ft		

#### Project Timeline:

Current Year (Development Phase)	Oct 2012 – Sept 2013	Stage 1	Initial Clinic /Administration renovated (2,200 sq ft)
Year 1	Oct 2013 – Sept 2014	Stage 2	Main Clinic (4,700 sq ft) & Patient Education Training Room (1,000 sq ft) renovated Initial Clinic / Administration operational
Year 2	Oct 2014 – Sept 2015		Main clinic & patient education training room operational. The clinicians will be relocated from administration to the main clinic.
Year 3	Oct 2015 – Sept 2016		Main clinic and patient education training room fully operational.
Year 4	Oct 2016 – Sept 2017		Main clinic and patient education training room fully operational.

The Environmental Assessment will be completed before the start of construction. A proposal for these services has already been obtained.

The cost estimates for planning, engineering and construction were provided by David E. Hogan of DMA Builders, LLC. David Hogan is the principal of DMA Builders, LLC a domestic limited liability company duly licensed in the State of Hawaii, license number CT-30865. DMA Builders has operated as a building contractor in the State of Hawaii since July 2010. Most recently they completed 2,500 new family homes at the Schofield Base for military dependents under the Davis-Bacon and Federal rules. Costs estimates were prepared using prevailing market rates for contractors and materials in a similar industry.

Administrative costs include a fee for the fiscal sponsor, Hui Kauhale, Inc., contract and Davis-Bacon monitoring and the lease rent for 18 months during construction and completion of the project.

Proposals for budgeting purposes were obtained from prospective local vendors for Medical Equipment and IT Infrastructure and related systems. These items will be installed in the initial clinic/administration as part of stage 1 and in the main clinic in stage 2.

The IT Infrastructure includes: the local area network, phone system, PC's and operating software, accounting system, electronic practice management/electronic health records and photocopiers/scanners.

Specifications given to vendors included growth in the future for up to 200 staff. All systems have the capacity to expand easily and this is reflected in the up front pricing. The goal of doing this is to minimize expansion costs in the future.

The chosen electronic practice management system will be one with Community Health Center enhancements. These enhancements specifically enable the collection of very specific patient demographic data which includes but is not limited to: family income, number of members in the household, sex, race, ethnicity and zip code. From this data various reports will be available to show the demographics of who is using services at the health center and where they come from.

#### Sources of Funds:

Grants and donations in the amount of \$50,000 to \$100,000 will be sought from the following local and national foundations:

- Robert Wood Johnson Foundation
- The Kresge Foundation
- Pfizer Pharmaceuticals
- CVS Caremark Foundation
- Kaiser Family Foundation
- Wellcare Foundation
- Ford Foundation
- Kellog Foundation
- Cades Foundation
- Joseph & Vera Long Foundation
- Thomas J Long Foundation
- The William G. Irwin Charitable Foundation
- The Office of Hawaiian Affairs, Community Grants Program
- AlohaCare
- United Healthcare
- HMSA Foundation

A Community Development Block Grant was submitted to the City & County in the amount of \$1,900,000 on behalf of The Wahiawa Center for Community Health. If awarded, such funds will be used to for Stage 2 or the renovation of 5,700 square feet to become the Main Clinical Space.

Attachment III- Operating Costs Projections & Operating Budget Narrative

5 Year Operating Budget

Operating Budget Narrative

**The Wahiawa Center for Community Health  
Projected Operating Budget  
Five Years**

<b>REVENUE:</b>	<u>Development</u>			<u>Year 1</u>	<u>Year 2</u>	<u>Year 3</u>	<u>Year 4</u>		
PATIENT SERVICE INCOME (Program Income)				708,000	2,565,500	2,577,250	2,575,500		
STATE GRANTS & CONTRACTS				242,000	384,500	422,750	474,500		
LOCAL GRANTS & CONTRACTS	350,000			125,000	200,000	400,000	450,000		
OTHER SUPPORT/FUNDRAISING				45,000	-	50,000	50,000		
FEDERAL BPHC 330 GRANT				650,000	650,000	650,000	650,000		
<b>TOTAL: REVENUE</b>	<b>350,000</b>			<b>1,770,000</b>	<b>3,800,000</b>	<b>4,100,000</b>	<b>4,200,000</b>		
<b>EXPENSES:</b>	<u>Development</u>			<u>Year 1</u>			<u>Year 3</u>	<u>Year 4</u>	
<b>PERSONNEL:</b>		<u>FTE</u>		<u>Salary</u>	<u>FTE</u>		<u>Salary</u>	<u>FTE</u>	<u>Salary</u>
<b>Total Personnel</b>	-	13.0		900,000	31.9		2,073,000	33.9	2,243,000
				31.9			33.9		2,310,000
<b>FRINGE BENEFITS:</b>									
Payroll Taxes and Assessments:	12%								
Employee Benefits:	11%								
<b>Subtotal: Fringe Benefits</b>	<b>23%</b>	<b>-</b>		<b>207,000</b>			<b>477,000</b>		<b>516,000</b>
							<b>516,000</b>		<b>531,300</b>
<b>TOTAL: PERSONNEL &amp; FRINGE</b>		<b>-</b>		<b>1,107,000</b>			<b>2,550,000</b>		<b>2,759,000</b>
							<b>2,759,000</b>		<b>2,841,300</b>
<b>EQUIPMENT:</b>									
Medical Equipment									
Office Equipment	3,000								
Electronic Medical Records									
IT Infrastructure									
<b>TOTAL: EQUIPMENT</b>	<b>3,000</b>			<b>0</b>					
<b>TRAVEL:</b>									
Travel to NACHC (4 attendees (CEO, CMO, CFO, Board )									
Airfare	1,500								
Hotel	1,000								
Per Diem	200								
	<u>2,700</u>	15,000	x 4	10,800	10,800		10,800		10,800
Local Travel (5,000 miles @ \$.56 mileage rate)				2,800	2,800		2,800		2,800
Patient Travel				1,000	2,000		2,000		2,000
<b>TOTAL: TRAVEL</b>		<b>15,000</b>		<b>14,600</b>	<b>15,600</b>		<b>15,600</b>		<b>15,600</b>
<b>SUPPLIES:</b>		<i>No. of Encounters</i>		<i>7,000</i>	<i>23,100</i>	<i>26,100</i>	<i>26,100</i>		<i>26,100</i>
Office and Printing Supplies (\$1.35 per encounter)	500			9,500	31,200	35,200	35,200		35,200
Medical Educational Supplies (\$.15 per encounter)				1,000	3,500	3,900	3,900		3,900
Medical Supplies (\$5.00 per encounter)				35,000	115,500	130,500	130,500		130,500
Pharmacy Supplies: contracted 340B drug program (\$1.30 per script)				-	10,000	10,000	10,000		10,000
<b>TOTAL: SUPPLIES</b>	<b>500</b>			<b>45,500</b>	<b>160,200</b>	<b>179,600</b>	<b>179,600</b>		<b>179,600</b>



<b>EXPENSES:</b>	<b><u>Development</u></b>	<b><u>Year 1</u></b>	<b><u>Year 2</u></b>	<b><u>Year 3</u></b>	<b><u>Year 4</u></b>
<b>CONTRACTUAL:</b>					
"Patient Care Contract"					
Diagnostic Labs (10 labs per month @ avg cost \$65)		7,800	7,800	7,800	7,800
Outside Referral to Specialist (10 pats per mth @ avg cost \$200)		24,000	24,000	24,000	24,000
Outside X-ray (\$450 per month)		5,400	5,400	5,400	5,400
Pharmacy: contracted 340B drug program (\$0.50 per script)		-	3,500	3,500	3,500
<b>Subtotal: Patient Care Contracts</b>		<b>37,200</b>	<b>40,700</b>	<b>40,700</b>	<b>40,700</b>
"Non-Patient Contracts"					
Development Team	317,000				
Grant Writer		30,000	30,000	30,000	30,000
Housekeeping Services		7,800	20,400	28,800	28,800
Office Machinery & Equipment Maintenance Contract		6,000	12,000	12,000	12,000
PM/EHR Annual Maintenance, Hosting & Support		23,000	65,000	65,000	65,000
Payroll/Human Resources (\$100 per FTE per month)		15,600	39,000	40,700	40,700
Sanitation & Disposal		1,800	3,600	3,600	3,600
Security Service/ Alarm System		70,200	73,200	76,200	76,200
<b>Subtotal: Non-Patient Contracts</b>	<b>317,000</b>	<b>154,400</b>	<b>243,200</b>	<b>256,300</b>	<b>256,300</b>
<b>TOTAL: CONTRACTUAL</b>	<b>317,000</b>	<b>191,600</b>	<b>283,900</b>	<b>297,000</b>	<b>297,000</b>
<b>OTHER:</b>					
Audit Services		5,000	5,000	5,000	5,000
Bad Debts (1%)		8,700	29,500	31,000	37,500
Insurance (D&O, GL, Vehicle)	500	15,000	15,000	15,000	15,000
Interest					
Legal Fees		10,000	10,000	10,000	10,000
Marketing & Outreach (2 events)	10,000	10,000	10,000	10,000	10,000
Meeting and Conferences	3,000	6,000	6,000	6,000	6,000
Membership Dues (Licensing & CME)		6,900	20,600	20,600	20,600
NACHC Dues		5,000	5,000	5,000	5,000
Postage, freight & Shipping		2,000	3,000	3,000	3,000
Printing & Publications	1,000	1,000	1,000	1,000	1,000
Recruitment		5,000	5,000	2,500	2,500
Rent @ \$2.50 per sq ft		66,000	207,000	246,000	246,000
Repairs and Maintenance		1,000	6,000	6,000	7,200
Staff Morale		500	1,000	1,500	1,500
Telephone & Communications Service (@ \$850/month)		10,200	10,200	10,200	10,200
Utilities (@ \$1,000/month)		6,000	12,000	12,000	12,000
Vehicle expenses		3,000	4,000	4,000	4,000
<b>TOTAL: OTHER</b>	<b>14,500</b>	<b>161,300</b>	<b>350,300</b>	<b>388,800</b>	<b>396,500</b>
<b>TOTAL: ALL BUDGET</b>	<b>\$350,000</b>	<b>\$1,520,000</b>	<b>\$3,360,000</b>	<b>\$3,640,000</b>	<b>\$3,730,000</b>
<b>NET PROFIT/LOSS</b>	<b>-</b>	<b>250,000</b>	<b>440,000</b>	<b>460,000</b>	<b>470,000</b>

**The Wahiawa Center for Community Health  
Operating Budget Narrative**

## Sources of Revenue:

## ➤ Third Party Payers

Program service income or program fees will be generated by the provision of care at the site. The majority of this income will be generated through Medicaid / QUEST / QExA billing. Additional income will also be obtained from the Medicare and commercially insured populations.

Uninsured patients will have their fees discounted per the Sliding Fee Discount Program as outlined by Federal Regulations.

All program income was estimated using the following patient and visit projections:

Year 1	2,300 patients	7,000 visits
Year 2	5,300 patients	23,100 visits
Year 3	5,500 patients	26,100 visits
Year 4	5,500 patients	26,100 visits

## ➤ State

The major source of state funds to The Wahiawa Center for Community Health will be derived from the Department of Health for primary care services to uninsured patients. Also included is the State Medicaid Meaningful Use program, which is projected to be operational in 2013.

The community health center intends to fully maximize this opportunity through the implementation of an Electronic Health Record (EHR) system upon opening. In addition, full training will be provided to all providers and support staff to ensure optimal use.

## ➤ Local

This encompasses all funding not derived from the state, including those passed through non-profit organizations. This will extend to grants from AlohaCare, the HMSA Foundation, Kaiser Family Foundation, and United Healthcare for quality initiatives. The Hawaii Community Foundation will be approached for grants to assist with capacity building and EMR Implementation.

Additionally, funds are available through the Hawaii Primary Care Association to fund a Patient Navigator Program to assist uninsured patients with enrollment into Medicaid and other subsidy programs.

Also, there will soon be funds available through the state exchange for navigators to help patients enroll in the exchange, Medicaid, Basic Health Plan, etc.

- Other support includes anticipated contributions through fundraising and donations from the general public.
- It is anticipated that The Wahiawa Center for Community Health will be successful in both its application to HRSA for New Access Point funding and designation as a Federally Qualified Health Center.

Expenses:

- Current Year

The Wahiawa Center for Community Health is currently in its Development Phase. A development team has been created to assist with developing a business plan, gathering projections for the renovation and build out of the clinic, and addressing all relevant details in opening in a Federally Qualified Health Center. In addition, the Development Team is responsible for seeking and responding to all funding opportunities.

The costs of the Development team are included under Contractual – Non-patient contracts.

Other major expenditures include the ongoing training and development of the Board of Directors and holding two Community events to keep the Wahiawa residents engaged and informed about the project.

- Year 1

Thirteen staff personnel will be hired to operate the initial clinic/administrative office in Stage 1.

Clinical staff will consist of:

- Physician/Medical Director
- Nurse Practitioner
- 2 Medical Assistants
- Patient Navigator
- Care Coordinator
- Front Desk
- Clinical Operations Officer

Administrative staff will consist of:

- Chief Executive Officer
- Chief Financial Officer
- IT Specialist/EHR Manager
- Accounting
- Billing

All equipment has been included in the capital budget.

Travel allows for the continued investment into the development and training of the Staff and Board.

Supplies include medical supplies estimated at \$5.00 per encounter, patient education materials and general office supplies. It is anticipated that an arrangement will be made with Longs (CVS Pharmacy) to run a 340B drug program in Year 2. Pharmaceutical drugs are also included.

Contractual: Patient Care includes an amount set aside to assist those uninsured or underinsured with the costs of diagnostic laboratory tests, radiology and medically necessary referrals to specialists.

Contractual: Non-patient care includes housekeeping services, disposal of biohazard waste, security services, annual maintenance for the alarm system, practice management & EHR, medical equipment, office equipment and the hosting services for payroll/human resources.

Membership Dues covers the licensing of all Medical Providers as well as continuing education. It also includes the annual membership to the National Association for Community Health Centers (NACHC).

Rent includes lease rent and common area maintenance, covering grounds maintenance, building insurance and the property management fee.

➤ Year 2

Staffing will increase to 32 full time equivalents (FTE's) upon opening of the Main Clinic.

The clinical team will expand to include:

- 2 Physicians
- 1.3 Nurse Practitioners
- 1 Triage Nurse
- 2.6 Medical Assistants
- 1 Care Coordinator
- 1 Patient Navigator
- 1 Referral Specialist
- 1 Psychiatrist
- 1 Substance Abuse Counselor
- 1 Social Worker
- 2 Front Desk Staff

Administrative staff will add an Executive Assistant.

The operating costs increase in relation to the additional space rented and the increase in the services provided to patients.

➤ Years 3 & 4

The clinical team will add a Dietician and Native Hawaiian Healer in Year 3.

The above projections were prepared by Monique van der Aa, currently working at the Hawaii Primary Care Association. Monique has 14 years of experience working with Federally Qualified Health Centers with 11 of those serving as the Chief Financial Officer at Kalihi-Palama Health Center. Monique is very familiar with the business model of running an FQHC and has used current market rates for estimations of revenues and expenses.

Attachment IV – Resumes

**The Wahiawa Center for Community Health**

Bev Harbin, Project Development Coordinator

Monique van der Aa, Contracted CFO/COO & Project Manager

**Hui Kauhale, Inc. / EAH Housing**

Marian Gushiken, Director of Real Estate Development, Hawaii

**BEVERLY WOLFF HARBIN**  
**PROFESSIONAL CREDENTIALS**

**HRSA Grant Application and Implementation. The Wahiawa Center for Community Health. Present.** Coordinated the development and concept of a HRSA grant application to compete for a federal HRSA grant to study the feasibility of a Community Health Center in Wahiawa. Coordinated with a grant writer and submitted final report. Responsible for all HRSA fund disbursements for grant period as the Project Coordinator. Obtained additional private funds to expand public outreach.

**FACE (Faith Action for Community Equity).** 2007 – Present. FACE State-wide Healthcare Coordinator. Worked to create a collaborative relationship with the network of Community Health Centers Hawaii, the inter-faith community, other community organizations and public housing to provide social justice in health care, affordable/workforce housing, and foreclosures.

**Community Organizer, OH-NO (Ohana Housing Network, Oahu).** 2007 to 2011. Community organizer of existing City and County affordable housing Projects in preparation of recent sale.

**Tenant Organizer, Kahuku Elderly Housing.** 2007 to 2011. Successfully coordinated and assisted in protecting the HUD Section 8 based funding for a 64 elderly/disabled project in Kahuku Hawaii in 2008.

**FACE (Faith Action for Community Equity).** Independent contractor to FACE on issues of Affordable Housing and Healthcare in the State of Hawaii. Wrote legislative bills and coordinated testimony and passage of bills to protect healthcare in Hawaii.

**Prepaid Health Care Council.** Appointed to the State Department of Labor and Industrial Relations Department (DLIR), Prepaid Health Care Council. Responsibilities to review and approve prepaid health care policy changes and make approval/disapproval recommendations to the Director of DLIR

**William S. Richardson School of Law, University of Hawaii at Manoa.** Independent contractor to the Hawaii Procurement Institute (HPI) located at the School of Law to develop the HPI as a one-of-a-kind program providing instruction and programs to assist our local small business in procurement procedures.

**Hawaii Independent Physicians Association (HIPA):** Assist 800 small business, independent physicians state wide with issues relating to the business of the delivery of health care, relations with health plans, patient involvement with health plans and other aspects of doing business in the State of Hawaii. Developed and coordinated an in depth survey of physicians regarding reimbursement, government affairs, and impacts of doing business in the State of Hawaii.

**The Chamber of Commerce of Hawaii.** An Independent contractor to the Chamber of Commerce of Hawaii from August 2000 – August 2005. Responsibilities included developing, coordinating and support the Small Business Council of the Chamber. Participated on two working groups with the Hawaii Uninsured Project, funded by Robert Wood Johnson and the Federal Department of Health. Focus was to address the working uninsured such as the part-time employee and the independent contractors and the Prepaid Health Care Act.

**PROJECT JOBS (Join Our Business Success):** Created and managed the Business Retention and Expansion Program, (PROJECT JOBS).

**Established and managed Hon/Hawaii Auto Repairs in Aiea and Kakaako.**  
Hon/Hawaii was the largest independent auto repair facility in the State of Hawaii from 1990 to June, 2001.

**Past President & Board Member, Kaka’ako Improvement Association (KIA).**

**Past President, Hawaii Auto Repair & Gasoline Dealers Association (HARGD).**

**First Vice-President & Membership Committee Chair, The Outdoor Circle.**

## **PAST LEGAL EXPERIENCES**

**Law office of Ronald Endrizal**

## **PERSONAL INFORMATION**

Born and raised in Honolulu. Graduated from Kalani High and attended the University of Hawaii. Degree in Political Science and Women’s Studies.

Married to Earl C. Harbin.



## **Monique van der Aa, ACA (CPA equivalent)**

**1707 Bertram Street**

**Honolulu HI 96816**

**Telephone: 735-4396 (H), 294-2561 (W)**

**moniquevanderaa@yahoo.com**

### **EDUCATION:**

- Bachelor of Commerce, University of Canterbury, New Zealand 1983-1985  
Major Subject: Accountancy
- Diploma in Sport (Management), Massey University, New Zealand 1994-1995

### **CONTINUING EDUCATION:**

- Western CFO Network Conference (Phoenix-April 2000, Honolulu-June 2002)
- Health Center Financial & Operations Management Seminar, San Francisco, June 2000
- NACHC Annual conference, Sept. 1999, Aug. 2000, Aug. 2001, Sept. 2002, Mar. 2003, Sept. 2004, Sept 2005, Aug 2007, Aug 2009, Sept 2010
- NACHC Financial, Operations Management & IT, Nov. 2012
- Excellence In Leadership, Oct. 2002 – Sept. 2003
- GE Crystal Reports March 2010
- GE Healthcare Certification Course April – June 2010
- Centricity Healthcare Users Group, April 2010, April 2011, April 2012
- Visual Form Editor Course April 2010 & April 2011
- GE CCC Text File Editor April 2012

### **WORK EXPERIENCE:**

#### **Hawaii Primary Care Association**

**HCCN Project Director** (January 2010 – present)

GE Certified EMR Application Specialist

- EMR Implementation & support to 5 Community Health Centers

CFO Support

- Lanai Community Health Center (11/11)
- Koolauloa Community Health & Wellness Center (1/12 – 03/12)
- Bay Clinic, Inc. (12/10, 05/12-06/12)

#### **Kalihi-Palama Health Center, Honolulu**

**Chief Financial Officer** (March 1999 – December 2009)

- Areas of responsibility:
  - financial affairs of the organization
  - daily operation of fiscal/billing/IT/purchasing departments
  - monitoring and evaluation of continued viability of programs/departments
  - control of cash flows and maximizes returns on available cash and investment income
  - evaluation and recommendation of pricing and fee structure related to costs of service
  - coordination of all fiscal/budgetary materials pertinent to submission of proposals
  - preparation and integration of departmental goals into the agency budget
  - participation in Finance Committee and Board meetings
  - regular review and modification of policies & procedures
- Experience:
  - 23 years in non-profits
  - 14 years in Community Health Centers & healthcare
  - project management – see accomplishments
  - State & federal grant applications & reporting (grants.gov, eHB, federal reporting.gov)
  - Medicare Cost Reports
  - Uniform Data System (UDS)

- Accomplishments:
  - project manager for build out and furnishing of new satellite clinic (7,500 sq. ft.)
  - implementation of new practice management system (GE Centricity)
  - project manager for renovation of an existing building (5,000 sq ft)
  - development of IT department and Human Resources department
  - timely distribution and monitoring of financial reports to Program Directors
  - implementation of financial systems responsive to the changing needs of KPHC
  - development of analytical reports for the Board of Directors
  - facilitated improved communication and processes in fiscal and billing departments
  - coordination of LAN and agency wide phone system installation

**Child & Family Service, Honolulu**

**Controller** (February 1998 – February 1999)

**Accounting Manager** (May 1996 – February 1998)

- Areas of responsibility:
  - control of 9 person department directly reporting to the President
  - financial presentation to the Board of Directors
  - liaison / consultation with the finance committee
  - internal monitoring and financial analysis
  - preparation of agency wide budget (expenditure \$15m)
  - development of unit cost based budgets
  - oversight and coordination of information services
- Accomplishments:
  - development & implementation of practice management database
  - coordination of network systems upgrade statewide
  - development of a cohesive, efficient, cross-trained fiscal department
  - production of a comprehensive field guide (procedures manual for staff)

*New Caledonia*

**South Pacific Commission, Noumea**

**Assistant Finance Manager** (December 1990 – November 1994)

A 170-staff international non-profit organization that conducts technical and scientific activities in 22 Pacific Island countries.

- preparation & monitoring of annual budget (expenditure US\$ 30m)
- adherence with the Financial Regulations, Staff Regulations, Staff Rules, Administrative Directives and Generally Accepted Accounting Principles
- oversight and coordination of 5 person department
- all financial internal and external reporting
- international cash management

*Australia*

**Compass Mining Services Pty Limited, Perth**

**Accountant** (January 1990 – December 1990)

A group of companies in the mining exploration, investment and tourism industry. (5 public listed companies, 3 public unlisted companies)

*New Zealand*

**Ernst & Young, Christchurch**

**Staff Accountant – Audit division** (January 1986 – November 1989)

*Canada*

- **Clarkson Gordon, Toronto** (A member of Ernst & Young International)  
January 1989 – March 1989 (3 month transfer)

**COMPUTER SKILLS:**

- spreadsheets, word processing, accounting software, Microsoft products, GE Centricity



## **Marian Gushiken**

### **Director of Real Estate Development Hawaii**

### **EAH Housing**

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Marian joined EAH Housing in October 2007 as the Director of Real Estate Development – Hawaii. In this capacity, she oversees all development activities for EAH in the State of Hawaii.

Prior to joining EAH, Marian worked for over nine years at Eden Housing in Hayward, California, first as a Project Manager, and then the Associate Director of Real Estate Development. As the Associate Director she oversaw the development of over 1,200 units of rental housing, with primary project management responsibility for over 400 units developed. She also provided management support to project developers, and participated in staff development, corporate strategy, and development of corporate goals.

Marian worked for the City of Hayward for seven years as their Housing Development Specialist working on affordable housing programs and policies, before her tenure with Eden Housing. In this capacity, she provided technical assistance to nonprofits, and was responsible for development of policy related documents and reports to ensure compliance with federal and state requirements. She created and managed the city's first loan assistance program targeting first-time homebuyers, and created and managed the city's Homeownership Coordinator position.

Marian also worked for three years at the Mid-Peninsula Housing Coalition, another regional nonprofit housing provider, based on the Peninsula in the San Francisco Bay Area. Here she was responsible for initial project feasibility and worked on a variety of new construction projects utilizing various federal, state and local subsidy programs.

Marian holds a Bachelor's degree in Social Policy and Urban Affairs from the University of the Pacific, and a Master of City Planning from the University of California at Berkeley.

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**The Wahiawa Center for Community Health**

**Organization Chart**

