House District THE TWENTY-EIG	SHTH LEGISLATURE	Log No:		
APPLICATIO	AFFEIGATION FOR CITATIO			
CHAPTER 42F, HAW	All REVISED STATUTES	For Legislature's Use Only		
Type of Grant Request:	'			
Type of Citati Nequest.				
X GRANT REQUEST - OPERATING	GRANT REQUEST - CAPITAL			
"Grant" means an award of state funds by the legislature, by an appropriate the community to benefit from those activities.	on to a specified recipient, to support the activiti	es of the recipient and permit		
"Recipient" means any organization or person receiving a grant.				
STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST (LEAVE BLANK IF	unknown):			
DEPARTMENT OF _HEALTH_ STATE PROGRAM I.D. NO. (LEAVE BLANK IF UNKNOWN):	_			
1. APPLICANT INFORMATION:	2. CONTACT PERSON FOR MATTERS INVOLVING	THIS APPLICATION:		
Legal Name of Requesting Organization or Individual: PROJECT VISION HAWAII	Name Dr. Maryellen Markley	ŀ		
Dba: Project Vision Hawaii	Title Director of Development			
Street Address: 1221 Kapiolani Blvd, 3 rd floor, Honolulu, HI 96814	Phone # 808-561-8096			
Mailing Address: P. O. Box 23212, Honolulu, HI 96823	Fax#			
Mailing Address. F. C. Dox 232 (2, Holloidia, 111 95025	E-mail memarkley1@me.com			
3. TYPE OF BUSINESS ENTITY:	6. DESCRIPTIVE TITLE OF APPLICANT'S REQUES	Tr:		
X Non profit Corporation Incorporated in Hawaii For profit Corporation Incorporated in Hawaii Limited Liability Company OTHER Sole Proprietorship/Individual	EXPANDING STATEWIDE KEIKI AND ADULT HEA CORRECTION SERIVCES FOR POOR AND MEDICALLY	LTH SCREENING AND VISION		
4. FEDERAL TAX ID#:	7. AMOUNT OF STATE FUNDS REQUESTED:			
5. STATE TAX ID#: \	FISCAL YEAR 2016: \$155,770			
X EXISTING SERVICE (PRESENTLY IN OPERATION) AT THE TIME OF STAT FEDE COU				
TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE: ELIZABETH ANNIE VALENTI NAME & TITLE OF AUTHORIZED SIGNATURE	N, EXECUTIVE DIRECTOR 1/20	/201 <u>5</u>		
AUTHORIZED SIGNATURE NAME &	TITLE	TE SIGNED		



Applicant	 PROJEC'	T VISIO	N HAW	AII

Application for Grants

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. Please include the following:

A brief description of the applicant's background;

PROJECT VISION HAWAI'I is a non-profit 501(c)3 public charity. Our mission is to enhance the quality of life of Hawaii's people by protecting and improving vision, preventing blindness, and advancing medical knowledge through community based research. We focus on the under-served population of Hawai'i and the general public with access-to-care challenges, providing free vision retinal eye screenings and other health testing and education in our state-of-the-art Project Vision bus. Since beginning in 2007, Project Vision has provided free screenings to nearly 38,000 participants, detecting pathology in one or both eyes for over 40% of those screened inside of our mobile clinic .We have 4 programs that are summarized below.

- (1) The first is Project Vision Hawai'i's "Better Vision for the Keiki" project, where we examine children specifically with vision and school readiness screenings.
- (2) In our "Better Vision for a Better Life" eyeglasses for the underprivileged project, we provide comprehensive eye screening and prescription eyeglasses for the uninsured and underinsured individuals, especially those who are homeless and need improved eyesight for work or daily activities.
- (3) WE...a hui for Health is a wellness collaboration of many different health services nonprofits that is all coordinated to work together in joint and comprehensive health screening events under Project Vision Hawai'i. We provide our wellness screening events statewide, with community coordinators based on each island to provide services in rural or low-income areas of Hawaii with access-to-healthcare issues. We define this population as those who have trouble accessing health care because it is geographically difficult, costly, or not culturally acceptable.
- (4) Project Vision Hawai'i also has started a program working with community health centers and hospitals to provide more regular and comprehensive screening of diabetics in order to prevent vision and kidney damage, and circulatory problems that if left unchecked can result in amputations.

2. Goals And Objectives

In each year since we started, Project Vision Hawaii has not only met, but exceeded, our annual objectives and goals.

The goals and objectives related to this grant request include the following:

- 100+ Wellness Events including vision and retinal screenings
- 30+ Collaborative partnerships with health-related non-profits, and provision of other health-related services to the public free of charge
- 2000+ Distributions of reading glasses to those in need, free of charge
- 3500+ Follow-up consultations including education, shared results and individualized guidance to needed follow-up care
- · Processing of critical evaluations and needs assessments
- 100+ Coordinated Community Wellness Screening Events in communities with recognized access-to-care challenges
- 3500+ Adult participants served with screenings
- 5000+ Keiki Screenings
- 3500+ Patient follow-up, data collection, education and counseling
- 7500+ Individuals receiving services and access to care
- 1400+ (40%) of patients all who are found to have significant pathology will be guided to care
- 2000+ pairs of reading glasses distributed to those in need
- 20+ communities across the State of Hawaii with access-to-care challenges reached, and provided with services

The public purpose and need to be served;

Better Vision for the Keiki: Vision Screenings and Family Wellness Days in Schools and Community Events

Statistics from the National Institute for Health (NIH) show that undetected and untreated eye disorders can result in delayed reading and poorer outcomes for children in school. The NIH reports that 25% of children age 5-17 years has a vision problem and that 35% of school-age children have never seen an eye care professional. We have seen that this percentage is even higher among low-income families in rural areas, having documented when our participants have seen an eye care professional. Research shows that people in rural areas of Hawaii are much less likely to have access to these screenings. Nationwide, only 22% of preschoolers receive some form of vision screening, and only 15% receive an eye exam. Studies have consistently indicated that as high as 40% of low-income children who fail their vision screenings do not receive the appropriate follow-up care. According to the American Journal for Preventative Medicine (JAMA), sensory screening for children is also an important public health function and according to JAMA, hearing screening is imperative to prevent developmental disorders

¹ Dobie, Robert, MD. "Hearing Loss Among Child Children." JAMA. 1998.

in children². The study entitled Educational and Community Based Programs in Rural Areas³ indicated that the majority of rural communities lack readiness, resources and expertise necessary to provide appropriate education and health promotion to children. Health People 2010 even showed the correlation between an increase of the "quality, availability, and effectiveness of community and education-based designed to prevent disease, and improved health and quality of life as a priority.⁴

Locally, the Hawai'i State School Readiness Assessment (HSSRA) conducted annually by 750 kindergarten teachers statewide has shown that only 7.3% of kindergarten classes in school year 2010 had 75% or more children consistently displaying characteristics necessary for success in school. This statistic demonstrates the urgency needed to find ways to prepare our children for school here in Hawai'i. Helping children reach scientifically recognized developmental milestones before entering kindergarten greatly enhances their chances of success in school and life⁵. To ensure Hawai'i's children enter kindergarten ready to learn, parents must have an understanding of, and appropriate expectations of their children's health and development, physical and social-emotional development, and hearing and vision problems. Our research has consistently shown that by providing an individualize screening that aligns with the tests provided to the children's parents allows them to gain a better understanding of the importance of follow up for their child. This concept of collectivism in Hawai'i families is further validated by research that shows that people often place the value their relationships higher in priority than their own health, and that they connect to health through these relationships.⁶

WE...a hui for health and Our Community Health Center Collaboration

Since inception, Project Vision Hawai'i has consistently worked with rural and low-income communities with access-to-care challenges. In allignment with the Hawaii Health Data Warehouse definition of "access to health care issues", we break this definition into the categories of issues with access to Affordability, Accessibility and Appropriateness. Our success in reaching some of the most at-risk populations comes largely because of three factors that set us apart from other providers:

- (1) we bring the services directly to these access-challenged communities,
- (2) services provided cost the participants nothing, and
- (3) we work with local community stakeholders to ensure our services are provided in the correct language and in a culturally appropriate manner

Over the past several years, the Native Hawaiian communities across the state have become one of our most-often served demographics. In 2010, a comprehensive Hawaiian health study sponsored by the Office of Hawaiian Affairs and the John A. Burns School of Medicine found that 9.5% of all Native Hawaiians have not had a routine checkup visit with a physician in over five years. Furthermore, greater than 17% of all Native

² Kempler, Alex, MD, et al. "Hearing and Vision Screening Program for School Aged Children." American Journal of Preventative Medicine. 2004.

³ dcsddcfd

[&]quot;Healthy People

⁵ (Jack P. Shonkoff, M.D., Director of the Center on the Developing Child and Professor at Harvard University).

Hawaiians rate their general health status as "fair" or "poor", which is worse than all other ethnicities in the state (HBRFSS, 2010). These numbers closely coincide with what Project Vision Hawai'i has consistently observed through our own outreach into Native Hawaiian communities. In a 2009 National Health Survey, more than 48% of Native Hawaiians were identified as obese, compared with 22.9% of the non-Hawaiian population in Hawai'i, and Native Hawaiians were over 5 times as likely to experience Type II diabetes between the ages of 19-35 (11% vs. 2%) compared to non-Hawaiians (Papa Ola Lokahi, N.D.).

Better Vision for a Better Life: Homeless Glasses Program

We also provided unique services to Hawaii's homeless populations. The degenerative effects of poverty and homelessness have been well documented. The homeless have been shown to be at substantially greater risk for infectious disease, dental problems, mental illness, COPD, and cardiovascular disease. Health disparities seen in the homeless vary from issues such as lack of mobility or financial means to access preventative healthcare, cultural or language barriers to following self-care instructions, and environmental conditions such as harsh weather, risk of trauma, and lack of secure storage for medications (8). Only three studies have specifically investigated ocular health in this vulnerable population (9,10, 11). All of these studies found significantly decreased visual acuity and a general increase of ocular morbidity in this population.

In one of these studies from November 2008, a total of 127 homeless participants received eye screenings at three homeless shelters on O'ahu (Kaka'ako, Barber's Point, and Wai'anae). The Project Vision Hawai'i RV, a mobile eye screening unit, was dispatched to each site. The Project Vision Van provided an ideal setting for providing ocular screenings for homeless populations. The free examinations and the ability to bring the screenings directly to the study population made it possible to screen a large number of participants over a short period of time. Screenings were performed on board the van by trained and physician-supervised medical students and an ophthalmology technician. A board-certified ophthalmologist (C.O.) was on hand to supervise and review all screening results for accuracy and follow up recommendations. Participants volunteered to complete a survey asking about subjective perceptions of eye health, knowledge about where to access eye care, and past ocular medical history.

Findings indicated significant issues in both self-reporting and understanding of clinical data. For instance, questions regarding self-reported access to ophthalmological care and individual perceptions of their ocular health revealed that the majority of individuals (60.5%) were displeased with their vision, had trouble seeing near objects (49.6%), far away objects (57.4%), and did not know where to go to seek eye care or corrective lenses (48.8% and 66.7% respectively). In terms of clinical data, there was significant correlation between homelessness and an increased prevalence of problems with visual acuity as well as pathology in both the anterior and posterior segments of the eye.

Ultimately this study found that poor knowledge of eye care services available for the homeless was a major barrier to routine eye examinations and potential treatment. The

study indicated that high dissatisfaction with vision in this population, often even despite adequate insurance coverage, suggested that an information campaign could help facilitate access to eye care and improve vision significantly. Mobile eye screenings, such as those provided by the Project Vision Van, have an enormous potential for improving health care in homeless populations. This study supports our research results that additional resources need to be mobilized on the local and national level to ensure that such vision screenings are available to our growing homeless population, which is why expansion of this program is so crucial. These findings also align with the incidence of pathology we find in our newer resultant program "Better Vision for a Better Life," where even on our first day of service we uncovered a retinal detachment is the eye of a man without an ID and without insurance. This individual has since acquired insurance. as well as received immediate treatment and surgery for his sight threatening condition. Project Vision Hawai'i has continued to track the data from our regular eye screenings for program improvement and site recognition which allows us to best maximize our outreach. In terms of homelessness in general, state statistics report that Hawaii had 15,848 homeless people in 2006, an increase of about 800 people over 2005. Approximately 10,081 were on Oahu, 2,446 on Hawaii Island, 2,526 on Maui, and 795 on Kauai. Another study indicated that of 907,883 persons in Honolulu in 2006, more than 64,000 were hidden homeless and about 170,000 were at risk of becoming unsheltered homeless. It has been estimated that the homeless represent 0.47% of Hawai'i's population, the 4th highest nationwide rate. We believe that these numbers provide a gross underestimation of the homeless population, as it does not take into account a substantial number of our homeless population that live outside the shelter system in parks, on beaches, etc. Understanding the depth of this problem and providing solutions for places like Hawai'i Island becomes even more complicated where much of this population anecdotally lives in the forest, the lava tubes and other naturally inaccessible areas.

The bottom line is that Project Vision Hawai'i offers a unique resource in that it allows us to address the eye care needs of the homeless, and do so more successfully and significantly less expensively than any other organization or entity we can find.

Describe the target population to be served;

Project Vision Hawai'i provides services to the following populations with an emphasis on Hawai'i's most vulnerable groups, specifically within the Native Hawaiian population:

- Low income Keiki to Kupuna.
- Patients with mental health challenges
- Homeless sheltered or unsheltered
- Elderly especially low and fixed income
- Within these groups we will identify known diabetics, pre-diabetics, or undiagnosed diabetics.
- Equal aggressive evaluation for evidence of hypertension.

4. Describe the geographic coverage.

Project Vision Hawaii provides services to medically challenged individuals and communities on every island, statewide, every year.

Screening for eye disease via retinal fundus photography has proven an effective intervention if accessible. Unfortunately, this is not always the case. Many populations nationally and locally lack access to retinal screening for a variety of reasons including: costs - eye exams are not always covered by insurance and some people don't have insurance; geography - a specialty ophthalmologist are not always accessible to populations in rural areas; and appropriateness - follow up needs are not always communicated in the appropriate language or are not culturally humble.

At a national level, "access to health care" services are one of the twelve Leading Health Indicator (LHI) topics as stated by Healthy People 2020. Most indications are that having access to health care services may lead to greater primary prevention of disease and disability, detection of illnesses, and improved monitoring of quality of life.

At the local level, the 2010 Hawai'i Behavioral Risk Factor Surveillance System indicates a significant range of access issues in Hawai'i depending on geographic location. For instance, while only 1.6 % of the population in the Ala Moana area of Honolulu reported not visiting a doctor due to medical costs, on Lana 'i's this number was as high as 15% of the population, (HBRFSS, 2010). On Moloka'i and Lana'i there is not a consistent ophthalmologist on island. There is also a cost issue for much of Hawai'i's populations with a prevalence of individuals without health care coverage. Between the ages of 18-64, the percent of the population that lacked insurance ranged from 18.3% in Waianae and Nanakuli, to as low as 3% without insurance in Hawai'i Kai. These numbers not only convey the significance of geography and socioeconomic status as it pertains to access to care, but implies the importance of location for screenings to be effective on given target populations.

A medically underserved area, or "MUA", is defined by the Health Services and Resource Administrations (HRSA) as an area in which residents have a shortage of personal health services (HRSA, 2013). These areas can range from an entire country to a specified region that is designated by the Secretary of Health and Human services as medically underserved. The criteria involved with designation of a MUA is from the Index of Medical Underservice [IMU] and has four variables:

- (1) ratio of primary medical care physicians per 1,000 population,
- (2) infant mortality rate,
- (3) percentage of the population with incomes below the poverty level, and
- (4) percentage of the population age 65 or over.

These values are weighted and scored for a total IMU score. A Medically Underserved Population[MUP] is also a value that HRSA uses to designate areas with access to care issues. MUP criteria similarly is directed by the IMI and includes economic barriers

(low-income or Medicaid-eligible populations), or cultural and/or linguistic access barriers to primary medical care services. The data points involved with defining a MUP differ from a MUA in that it is now defined as a population within a requested group, or within the area, rather than within the total resident civilian population of the area. According to HRSA, all of Hawai'i is defined MUA and a MUP.

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:

- Describe the scope of work, tasks and responsibilities;
 - 1. For Project Vision Hawai'i's "Better Vision for the Keiki" project, we target children specifically with vision and school readiness screenings. Project Vision Hawai'i is taking this initiative statewide. Working with the Learning Disabilities Association of Hawai'i, we also travel to parent conferences and the Local Lions Club meetings, and work closely together to coordinate access opportunities.
 - 2. For our "Better Vision for a Better Life" eyeglasses for the underprivileged project, we are moving forward to provide more of our services on the Big Island of Hawai'i. We are also implementing an exciting new project that assists us to actually schedule donated eye surgery with one of Hawaii's top eye surgeons for those who are unable to acquire insurance or afford site-restoring surgery out of pocket.
 - 3. For WE...a hui for Health, our collaboration project coordinated under Project Vision Hawai'i, we continue to schedule and provide communities with our wellness screening events statewide. Working with community coordinators based on each island, we coordinate wellness screenings, and involve multiple community stakeholders to provide an array of health services to communities that need it most.
 - 4. Project Vision Hawai'i also has started a very successful program working with community health centers and hospitals to screen diabetics. This is a billable activity, so it contributes a small amount of fee-for-service income that helps support Project Vision Hawai'i's other programs. It also is beneficial for the insurers through the HEDIS system, and to Community Health Centers through quality metrics. There are, however, challenges in this system due to the high rates of uninsured diabetics seen through the community health clinics. Those unable to acquire insurance at this time are often uninsured immigrants with more frequent than normal health issues.
- Provide a projected annual timeline for accomplishing the results or outcomes of the service;

See attached.

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

With a combination of events from the programs mentioned above, Project Vision Hawai'i will complete a minimum of the following services:

- 100+ Wellness Events including vision and retinal screenings
- 30+ Collaborative partnerships with health-related non-profits, and other health-related direct screening services provided to the public free of charge
- 2,000+ Distribution of eyeglasses to those in need, free of charge
- 3,500+ Follow-up consultations including education, shared results and guidance to care
- · Processing of critical evaluations and needs assessment

Outputs:

From the activities listed above, Project Vision Hawai'i will ensure the following outputs:

- 100+ Coordinated Community Wellness Screening Events in communities with recognized access-to-care challenges
- 3,500+ participants served with screenings
- 3,500+ follow-up data collection, education and counseling
- 7,500+ individuals receiving services and access to care
- 1,400+ (40%) of patients with significant pathology will be guided to care
- 2,000+ reading glasses distributed to those in need
- 50+ unduplicated communities with access-to-care reached, and provided with services

Outcomes:

Given the activities and outputs accomplished during this grant period, expected outcomes are:

- 1) A reduction in the risk of blindness in populations who lack access to health care services
- 2) An increase in the number of Native Hawai'i residents that are screened and evaluated for vision pathologies and diabetes-related health challenges
- 3) Development and implementation of more avenues for counseling, education, and access to free services as needed for the most vulnerable populations.

Indicators:

Both the completion of a process evaluation and an outcome evaluation throughout the grant period will consistently document Project Vision Hawai'i's successes.

Process Evaluation

The purpose of the process evaluation is to examine the fidelity and extent of the delivery of Project Vision Hawai'i services. The questions asked of participants will determine:

- 1) If trainings for the volunteers and staff were effective. This will be assessed by anonymous surveys sent out to volunteers and staff via Survey Monkey.
- 2) If events were scheduled and executed as often as planned (quantity). The Board of Directors will review the number of events and participants reached at each event formally.
- 3) If services were adequately implemented and included concepts such as clarity of instructions and explanation of results, correct processes and amble participation (quality-fidelity). This will be determined by asking participants to rate Project Vision Hawai'i services at the time of the initial screening.

Outcome evaluation (plus needs assessment).

The outcome evaluation questions address if Project Vision Hawai'i's services:

- 1) Effectively screened participants
- 2) Achieved the predicted number of reading glasses and protective sunglasses distributed
 - 3) If pathology was found and properly addressed
 - 4) If proper avenues of follow-up are provided and explained
 - 5) Participant satisfaction with total services
 - 6) If other health and screening needs were met or exceeded (needs assessment)

Further, community needs will be assessed by interviewing key community members, health providers, and county council members. Outcome evaluation processes will be approved prior to the administration of surveys by the appropriate IRB. A follow-up survey will be emailed or mailed to participants with results from their retina screening. A small incentive for participation will be provided. Information collected will include, but may not be limited to the following:

- Demographics. Variables to be assessed include gender, age, height, weight, general health, and background/ethnicity (expanded categories used in the Hawai'i BRFSS, collapsible to the NIH categories).
- 2. Ethnicity identification. An 8-item cultural identity questionnaire (degree of acculturation) designed by the Native Hawaiian Health Research Project (NHHRP)

for multiethnic samples will be included to capture degree of identification and affiliation with the participants' ethnic culture and heritage (4 items) and with the American mainstream culture (4 items). ENREF 22

- 3. At appropriate events, height, weight and body mass index (BMI) will be assessed. Height and weight will be measured using a calibrated scale and stadiometer in participants. Participants will be classified based on the calculated BMI percentile adjusted for age and sex, with normal weight, overweight and obese classified as 50-85 percentile, 85-95 percentile and >95 percentile, respectively.
- 4. Near vision evaluation: results from hand held eye chart testing
- 5. Far vision: results from far vision chart
- 6. Retina health: Results identified from a thorough computerized in-camera examination, and captured in the PV database
- Other health concerns/comorbid conditions (e.g., heart conditions, diabetes, etc.) will be evaluated
- 8. Satisfaction with services: degree of satisfaction with overall services on a scale of 1 to 7 with 1 being "dissatisfied" and 7 being "very satisfied.
- Other screening services needed: open ended response to capture the needs of specific communities and demographics

Data analysis and final reporting:

The data will be managed in SPSS data files. Descriptive analysis will characterize our participants. Chi-squared tests will be used to compare results of satisfaction and needs among different demographics and communities, and other analyses will be conducted as needed.

Results can be provided to the legislature in a publishable format with clearly defined outcomes and variables. Final outcomes will be used to determine the effectiveness of Project Vision Hawai'i services, provide recommendations for future events, and identify needed expansion of other services offered.

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.

Data analysis and final reporting:

The data will be managed in SPSS data files. Descriptive analysis will characterize our participants. Chi-squared tests will be used to compare results of satisfaction and needs

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among different demographics and communities, and other analyses will be conducted as needed.

Results will be provided to State agency in a publishable, and easily usable format with clearly defined outcomes and variables. Final outcomes will be used to determine the effectiveness of Project Vision Hawai'i services and provide recommendations for future events and identify needed expansion of other services offered.

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 Attached Page 5]
- 2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2016.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$40,000	\$38,590	\$38,590	\$38,590	\$ 155,770

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2016.

Federal health grants	\$132,400
Honolulu County	\$103,400
Hawaii County	\$ 65,000
Individual Donors	\$ 13,800
Freeman Foundation - HCF	\$ 20,000
Ohana Health Plan	\$ 30,000
Kaiser Permanente Foundation	\$ 15,000
HMSA Foundation	\$ 15,000
Total	\$394,600

- 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. [Answer: None granted or applied for.]
- 5. The applicant shall provide a listing of all government contracts and grants it has been and will be receiving for program funding. [See Attached Page 9]

5. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2014.

Project Vision Hawaii's balance of unrestricted current assets = \$61,711 as of December 31, 2014

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.

We are the only mobile health screening unit in the State of Hawaii specifically providing services in communities state-wide which have significant access-to-care issues related to income, lack of insurance, geographical challenges, and cultural concerns. Since 2007, we have provided free and often advanced medical screening services to over 38,000 patients across the state, including a high population of seniors, children from low-income families, immigrants, and both children and adults with disabilities.

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 two Project Vision Buses are comprehensive mobile testing facilities that travel around the state to all the event locations. Due to the structure of the bus, it is not completely ADA accessible. However, we have a written policy for and collaboration with physician service providers who do have ADA-compliant offices, and have agreed to provide duplicate services when needed for our disabled community at no charge.

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.

A. <u>Proposed Staffing, Staff Qualifications, Supervision and Training</u> Executive Director -

- Plan all Project Vision Events including logistical detail such as transportation of PV Bus to outer island locations
- Coordinate participation with all community partners in each screening location, IHS, Waikiki Health Center, or other partners within our "WE ...a hui for Health" group.
- Fund development activities including grant writing, public presentations, and personal interactions with private donors
- Recruitment and coordination of activities for over 500 community volunteers who support Project Vision Hawaii throughout the year.

Operations and Community Care Coordinators -

- The Community Coordinator (CC) works one on one with the WE staff, other non-profit partners and the public.
- The CC is responsible for being a good communicator with the ability to work with WE partners and staff, community leaders, and culturally diverse groups, and for positive communication and support between WE partners and participants.
- The community coordinator utilizes his/her writing skills to aid in preparation and submission of grants, press releases, and informative newsletters.
- The CC is responsible for emailing members, press release tasks, and event coordination to include actual event set-up and breakdown on all islands in the state of Hawaii.
- The CC is responsible for taking meeting minutes and disseminating minutes to partners and ensuring that WE staff and partners complete all meetings' specific action items.
- The CC is responsible for updating members' list, mailing contact lists, and all calendars.

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 organization chart that illustrates the placement of this request.

See Attached

C. Compensation

The applicant shall provide the annual salaries paid by the applicant to the three highest paid officers, directors, or employees of the organization by position.

Executive Director - \$60,000/annually

Director of Statewide Outreach- \$37,000

Director of Statewide Operations- \$40,000

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.

None

B. Licensure or Accreditation

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

Not Applicable

C. Federal and County Grants

The applicant shall separately specify the amount of federal and county grants awarded since July 1, 2014.

See attached - page 9

D. Private Educational Institutions

The applicant shall specify whether the grant will be used to support or benefit a sectarian or non-sectarian private educational institution. Please see Article X, Section 1, of the State Constitution for the relevance of this question.

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The grant WILL NOT be used to support or benefit a sectarian or non-sectarian private educational institution.

E. Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2015-16 the activity funded by the grant if the grant of this application is:

- (1) Received by the applicant for fiscal year 2015-16, but
- (2) Not received by the applicant thereafter.

Project Vision Hawaii is developing fee-for-service income through both private insurer and state contracts to provide screening services at community health clinics and public schools throughout Hawaii – programs PVH has consistently shown can be accomplished through outsourcing to PVH for a fraction of the cost formerly incurred to do these same screenings inhouse or through government facilities.

F. Certificate of Good Standing (If the Applicant is an Organization)

If the applicant is an organization, the applicant shall submit one (1) copy of a certificate of good standing from the Director of Commerce and Consumer Affairs that is dated no earlier than December 1, 2014.

See attached

DECLARATION STATEMENT OF APPLICANTS FOR GRANTS PURSUANT TO CHAPTER 42F, HAWAI'I REVISED 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 pursuant to Section 42F-103, Hawai'i 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 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 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.
- 2) If the applicant is an organization, the applicant meets the following requirements pursuant to Section 42F-103, Hawai'i 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 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, Hawai'i 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, Hawai'i Revised Statutes, for grants used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant 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 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.

PROJECT VISION HAWAII

(Typed Name of Individual or Organization)	
	01/20/2015	
(Signature)	(Date)	
Elizabeth "Annie Valentin	Executive Director	
(Typed Name)	(Title)	

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2015 to June 30, 2016

App

Project Vision Hawai'i

F	BUDGET	Total State	Total Federal	Total County	Total Private/Other
	ATEGORIES	Funds Requested	Funds Requested	Funds Requested	Funds Requested
	0 10 10 10 10 20 20 20 10 00 10 00 00 00 00 00 00 00 00 00 00	(a)	(b)	(c)	(d)
A.	PERSONNEL COST				
ı	1. Salaries	100,000	100,000	100,000	
ı	2 Payroll Taxes & Assessments	8,070	7,500	7,500	
ı	3 Fringe Benefits	18,900	18,900	18,900	
	TOTAL PERSONNEL COST	126,970	126,400	126,400	
B.	OTHER CURRENT EXPENSES				
	Airfare, Inter-Island, on-island travel	3,300	3,000	3,700	4,000
	2. Insurance				15,000
	Lease/Rental of Equipment			18,700	15,000
	Lease/Rental of Space			9,600	
	5. Staff Training				30,000
	6. Supplies	2,000	3,000		3,000
	7. Telecommunication	1,800			1,800
	8. Utilities				
	9 Bus Maintenance	8,000			15,000
	10				
	11				
	13				
	14				
	15				
	16				
	17				
	18				
	19				
	20				
	TOTAL OTHER CURRENT EXPENSES	15,100	6,000	32,000	83,800
_	EQUIPMENT PURCHASES		0,000	10,000	
C.		13,700		10,000	10,000
D.	MOTOR VEHICLE PURCHASES				
E.	CAPITAL		400 400	100 100	
10	TAL (A+B+C+D+E)	155,770	132,400	168,400	93,800
			Budget Prepared B	y:	
SO	URCES OF FUNDING				
	(a) Total State Funds Requested	155.770	Elizabeth Hiller, MPH		
	(b) Total Federal Funds Requested		Name (Prease type or pri	nt)	Phone
	(c) Total County Funds Requested	168,400	Signature of Authorized C		.19.15 Date
	(d) Total Private/Other Funds Requested	93,800	Carratule of Authorized C	rmuldi	Date
			Executive Director		
TO	TAL BUDGET	550,370	Name and Title (Please ty	rpe or print)	
		~			
_					

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2015 to June 30, 2016

Applicant: Project Vision Hawai'i

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Executive Director	1	\$60,000.00	75.00%	\$ 45,000.00
Director of Outreach	1	\$37,000.00	75.00%	\$ 27,750.00
Director of Operations	1	\$40,000.00	60.00%	\$ 24,000.00
Director of Research	1	\$35,000.00	50.00%	\$ 17,500.00
CPA and Contract Management	0.15	\$3,600.00	20.00%	\$ 720.00
Strategic Planning Liason	0.15	\$24,000.00	50.00%	\$ 12,000.00
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
TOTAL:				126,970.0

JUSTIFICATION/COMMENTS:

Encompasses direct program services and management statewide under the grant.

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2015 to June 30, 2016

Applicant: Project Vision Hawai'i

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER	TOTAL COST	TOTAL BUDGETED
Retinal Camera for ID of Medical Conditions	1.00	\$21,000.00	\$ 21,000.00	21000
EyeCare Tonometer for Glaucoma Screening	1	\$3,700.00	\$ 3,700.00	3700
Phoropter for Refractions - for eyeglasses RX	1	\$2,000.00	\$ 2,000.00	2000
Plus Optix Spot Screener for Testing children	1	\$7,000.00	\$ 7,000.00	7000
			\$ -	
TOTAL:	4			33,700

JUSTIFICATION/COMMENTS:

Specific medical equipment needed to expand testing and screening programs. Total cost split, with State GIA portion request at \$13,700

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
Motor Vehicle Maintence on two screening buses	2.00	\$4,000.00	\$ 8,000.00	8000
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				8,000

JUSTIFICATION/COMMENTS:

Motor vehicle maintenance includes monthly servicing costs, tires, etc for 30,000 milies + each year.

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2015 to June 30, 2016

Applicant: Project Vision Hawai'i

TOTAL PROJECT COST		ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		OTHER SOURCES OF	FUNDING REQUIRED IN SUCCEEDING YEARS		
	FY: 2013-2014	FY: 2014-2015	FY:2015-2016	FY:2015-2016	FY:2016-2017	FY:2017-2018	
PLANS							
LAND ACQUISITION		,					
DESIGN							
CONSTRUCTION							
EQUIPMENT							
TOTAL:			Ì				

GOVERNMENT CONTRACTS AND/OR GRANTS

Applicant: Project Vision Hawaii

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau))	CONTRACT VALUE		
1.	Molokai Based Services	1/28/14 - 1/29/15	ОНА	State	\$7,400		
2.	Oahu Based Services	1/30/15 - 1/31/16	Honolulu County	County	\$85,900		
3.	Hawaii Health Connector Outreach	8/1/13 - 8/1/14	US Dept. of Health	Federal	\$50,000		
4.	Hawaii Health Connector Outreach	8/2/14 - 2/28/15	US Dept. of Health	Federal	\$78,823		
5.	State of Hawaii	7/1/14 - 6/30/15	HI Dept. of Health	State	\$79,214.22		
6.				10-101 10-101	 		
7.							
8.							
9.							
10.							
				TOTAL	301,337.22		



Department of Commerce and Consumer Affairs

CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that

PROJECT VISION HAWAII

was incorporated under the laws of Hawaii on 06/17/2010; that it is an existing nonprofit corporation; and that, as far as the records of this Department reveal, has complied with all of the provisions of the Hawaii Nonprofit Corporations Act, regulating domestic nonprofit corporations.

COMMENCE AND COASUMER AFFA

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: January 14, 2015

Catan. P. Owal Calo

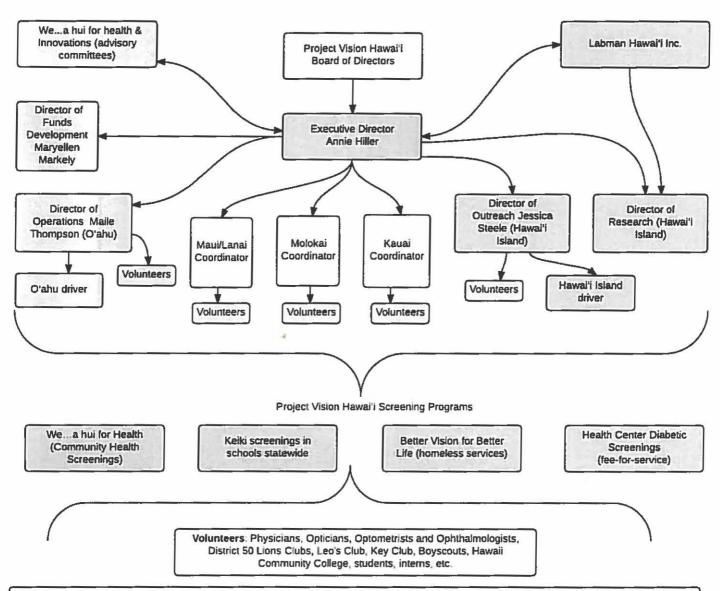
Interim Director of Commerce and Consumer Affairs

Timeline for Project Vision Hawai'i Activities July 1st 2015 - June 30th 2016

	month	2015					2016						
		July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
			9	creen	ing e	vents	*						
Oʻahu ^a		х	х	х	Х	х	х	х	х	х	х	х	х
Hawai'i Island ^a		х	х	Х	Х	х	Х	Х	х	Х	Х	Х	х
Lāna'i ^b			Х										
Mauʻi ^c											Х		
Kauaʻi ^d												х	
Moloka'i°									х				
			Pr	ogran	n Eva	luatio	n						
Evaluation Data													
Collection	ļ	Х	X	Х	Х	Х	Х	Х	X	Х	Х	X	X
Data Entry		х	х	х	Х	х	х	х	х	х	Х	х	X
Analysis	ļ										n.	x	Х
Evaluation Report													Х

- a. screening events scheduled on O'ahu and Hawai'l Island: At least 4 events/month for each program
- b. screenings on Lăna'i: about 6 events in Aug 2015
- c. screenings on Mau'i: at least 6 events in Apr 2016
- d. screenings on Kaua'i: about 6 events in May 2016
- e. screenings on Moloka'i: about 5 events in Feb 2016
- *for Lāna'i, Mau'i, Kaua'i, Moloka'i the mixture of Keiki, WE, homeless and general or diabetic screenings we have will be guided by the community, for O'ahu and Hawai'i there will be at least 1 Keiki, 1 homeless, 1 We..a hui for health, 1 general outreach/diabetic per month

Project Vision Hawai'i Organizational Chart



Collaborative Partners and support for coordination and advertising of screening events: District 50 Lions Clubs, First Vitals, Hawaii Health Connector, American Heart Association, American Diabetes Association, American Lung Association, Sage Plus, Native Hawaiian Health Systems, Children's Healthy Living Program, Hawaii Let's Go 5210, University School of Public Health, John A. Burns School of Medicine, Department of Health, Department of Education, Hepititis Support Network, University of Hawaii School of, Susan G. Komen, The Queen's Health Center, National Kidney Foundation of Hawaii, State of Hawaii Department of Commerce & Consumer Affairs, Community Alliance for Mental Health, Executive Office on Aging, Legacy of Life Hawaii, Hawaiia Familles As Allies, 'Ohana Health Plan/Pharmacist, Senior Medicare Patrol (SMP Hawaii), The Caregiver Foundation, Child & Family Services, Hawaii Island HIV Foundation, UH Hilo College of Pharmacy, American Federation of the Blind, etc.