

House District _____

Senate District _____

**THE TWENTY-EIGHTH LEGISLATURE
APPLICATION FOR GRANTS
CHAPTER 42F, HAWAII REVISED STATUTES**

Log No: _____

For Legislature's Use Only

Type of Grant Request

GRANT REQUEST - OPERATING

GRANT REQUEST - CAPITAL

"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.

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

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:
Hamakua Health Center, Inc.

Dba: Hamakua-Kohala Health

Street Address:
45-549 Plumeria St.
Honokaa, HI 96727

Mailing Address:
45-549 Plumeria St.
Honokaa, HI 96727

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name IRENE J. CARPENTER

Title CEO

Phone # 808-930-2762

Fax # _____

E-mail icarpenter@hamakua-health.org

3. TYPE OF BUSINESS ENTITY:

- NON PROFIT CORPORATION INCORPORATED IN HAWAII
- FOR PROFIT CORPORATION INCORPORATED IN HAWAII
- LIMITED LIABILITY COMPANY
- SOLE PROPRIETORSHIP/INDIVIDUAL
- OTHER

6. DESCRIPTIVE TITLE OF APPLICANT'S REQUEST:

MODULAR BUILDING ADDITION TO KOHALA CLINIC TO INCREASE ACCESS TO HEALTHCARE.

4. FEDERAL TAX ID #: _____

5. STATE TAX ID #: _____

7. AMOUNT OF STATE FUNDS REQUESTED:

FISCAL YEAR 2017: \$ 250,000.00

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 \$ 250,000.00
 FEDERAL \$ _____
 COUNTY \$ _____
 PRIVATE/OTHER \$ _____

TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE

IRENE J. CARPENTER CEO

NAME & TITLE

Jan 21, 2016

DATE SIGNED



RECEIVED

1/22/16

10/20

Application for Grants

If any item is not applicable to the request, the applicant should enter "not applicable".

I. Background and Summary

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

Hamakua Health Center, Inc. (HHC, Inc., DBA Hamakua-Kohala Health, HKH) is a 501(c)(3) Federally Qualified Community Health Center (FQHC), deemed in 2001 providing affordable, quality, culturally appropriate health care. Founded in 1966, five coastal plantation medical dispensaries formed the Hamakua Infirmary. In 1993, the Infirmary transitioned to Hamakua Health Center, Inc. (HHC, Inc.), a community owned and governed Rural Health Center, recently recognized as a Patient Centered Medical Home (PCMH) Level 2 facility. Presently Hamakua-Kohala Health (dba) operates two sites, one in Honoka'a and one in North Kohala along with a mobile dental health van serving a population of over 11,000 residents along rural and remote parts of the Big Island. Our patient base is approximately 8,000 people with 23,000 patient encounters annually.

In 2014 HKH employed over 60 equivalent (FTE) employees, including the following clinical staff at two North Hawaii Clinic Sites in Honokaa, District of Hamakua and Kapa'au, District of North Kohala.

2. The goals and objectives related to the request;

Hamakua-Kohala Health's (HKH) North Hawaii clinic operates in a leased old plantation cottage adjacent to a Critical Access Hospital (CAH) in Kapa'au. The structure has termite damage and no central air conditioning system and is much too small for the services that are being offered. HKH is proposing funding of \$250,000.00 to build a modular building to better serve the needs of the community. An ADA compliant handicap accessible, covered walkway will connect the modular unit to the existing structure. The approval of requested funds will perpetuate Hamakua Health Center's mission of providing quality healthcare that is responsive to our patients' and communities' needs by recruiting skilled and dedicated staff, which has increased access to health services in the community while creating job opportunities in this remote area. The Health Care Reform Act has increased the population of insured individuals enabling them access to services not previously afforded them. We seek the opportunity to increase our systems of care to respond to the needs of our community.

3. The public purpose and need to be served;

In the most recent annual community needs assessment, residents identified their priority concerns, barriers to care and gaps in services. The availability of primary care, dental care, mental health and specialty care consistently ranked in the top five concerns. Residents also identified the lack of insurance as a priority concern and significant barrier to care.

Community needs assessment results

Issue	Priority concern
Pressing concern	Access to specialists (54.8%)
	Access to primary care (51.3%)
	Mental health services (40.8%)
	Affordable health insurance (33.9%)
Barriers to care	Availability of needed services (60.8%)
	Transportation (46%)
	Lack of knowledge about available resources (42.6%)
	Cost of health care (38.2%)
	Being uninsured (27%)
Gaps in services	Availability of services/providers (59.1%)
	Dental care (38.2%)
	Mental health services (38.9%)
	Geriatric care (33%)
	Primary care 31.3%
Education and prevention services needed	Mental health and substance abuse (54.8%)
	Healthy lifestyles (45.2%)
	Obesity prevention (33.9%)
	Oral/dental health (32.2%)
	Disease specific information (30.4%)

Geographic location also impacts the healthcare workforce in the service area. Recruitment of qualified clinical staff at every level remains very challenging. It often takes 6 months or more to fill vacated clinical provider positions. In addition, HKH has had to hire staff with a higher level of qualifications, such as an LPN instead of a medical assistant, as no other qualified individuals were available. The service area is designated a Medically Underserved Area and Health Personnel Shortage Area (Primary Care 17; Dental 19; and Mental Health 19)¹ by the State Department of Health.

The lack of specialty care is an ongoing challenge. Patients are frequently required to travel to other islands to see specialists. Interisland airfare is \$250 - \$400, round trip.

¹ Health Personnel Shortage Area rankings for the service area as of June 23, 2014, Health Resources Services Administration, accessed on the web on October 28, 2014 at www.hrsa.gov/shortage.

4. Describe the target population to be served; and

A majority of residents live in small villages called "camps" along the coastline. These camps are connected to the main highways by former sugar plantation access roads and are not served by public transportation. The public bus service operates on a limited schedule in North Kohala, passing through the service area only once per day. An automobile is essential to get anywhere within the service area.

Healthcare utilization rates among residents are poor, attributed to a number of factors that include the lack of health insurance, transportation and knowledge of the importance of preventative care. Almost one in five residents do not have a primary care doctor, and over one in ten residents needed to see a doctor in the past year, but did not because they did not feel they could afford the cost of the visit and/or the copay.

Healthcare utilization indicators⁴

	State of Hawai'i	Hawai'i County	North Hawai'i Island
No health care coverage	8.2%	10.8%	10.4%
Do not have a personal doctor or health care provider	14.9%	16.3%	19.4%
Needed to see a doctor in past year but did not because of cost	8.6%	12.6%	11.0%
Last visit to doctor over 5 years ago for checkup	8.5%	10.4%	10.2%
Had a flu shot	46.4%	39.0%	41.4%
No flu shot in past year	53.6%	61.0%	58.6%
Never had a mammogram	5.4%	9.5%	
Had a pap smear over 3 years ago	74.0%	76.8%	

In addition, although health insurance companies are required to pay for specialty care when necessary, including airfare to the outer islands for consultation with specialists, many residents decline this service as they prefer not to leave the island.

The low rates of healthcare utilization and preventative care are reflected in the general health status of residents. Compared to statewide rates, more residents report poor health and have difficulty managing activities of daily living because of a health related condition. This is also due to the large population of elderly living in the service area.

General health and disability indicators⁴

	State of Hawai'i	Hawai'i	North Hawai'i Island
Physical and mental health not good in past 30 days	13.7%	14.9%	16.3%
General health fair to poor	13.8%	15.0%	17.1%
Have serious difficulty concentrating due to health condition(s)	7.8%	11.0%	12.3%
Limited in activities because of health problems	15.2%	18.7%	20.4%
Difficulty dressing or bathing	2.1%	3.0%	NA
Difficulty doing errand alone	5.4%	7.2%	NA
Limited because of arthritis or joint symptoms	37.8%	40.4%	
Arthritis or joint symptoms affect work	31.1%	38.4%	

Chronic disease indicators persistently exceed statewide rates in almost every measure. The Service area has high rates of diabetes, obesity, childhood asthma, respiratory conditions, cancer, high blood pressure and diseases of the heart.

Chronic Health Conditions

Adult Morbidity Indicators, 2005-2010	State of Hawaii	Hawai'i County	North Kohala	Hamakua	Hilo
BRFSS 2005-2010³					
Obesity	21.9%	23.6%	18.4%	26.2%	24.6%
Diabetes	8.8%	8.8%	10.5%	11.0%	10.2%
BRFSS 2013^{2*}					
Adult Asthma	16.6%	17.7%	14.2%	14.2%	19.8%
Childhood Asthma	12.8%	16.7%	NA	NA	NA
COPD, emphysema, bronchitis	4.7%	5.1%	NA	NA	5.5%
Skin cancer	3.9%	5.4%	6.4%	6.4%	NA
Other cancer	4.3%	3.7%	5.6%	5.6%	2.9%
Arthritis	19.9%	21.4%	21.1%	21.1%	21.9%
High blood pressure	28.5%	28.9%	32.8%	32.8%	28.2%
Coronary heart disease	2.7%	3.9%	3.7%	3.7%	5.1%
Heart attack/myocardial infraction	3.2%	4.1%	NA	NA	NA

² 2013 Behavioral Risk Factor Surveillance System, Hawaii State Department of Health, accessed on October 27, 2014 at health.hawaii.gov/brfss. Note: Data for North Kohala and Hamakua combined in category for North Hawaii in 2013.

North Kohala, Hamakua have the 5th and 6th highest rates of diabetes of 27 communities in the state, and diabetes has been identified in community needs assessments as the most significant overall chronic health concern for the target population.

Mortality rates in the service area reflect the high rates of chronic disease:³

- Diabetes (as an underlying and non-underlying cause of mortality) - 73.2 per 100,000 (statewide 70.3);³
- Diseases of the heart – 169.3 per 100,000 in Hamakua (135.3 statewide);
- Cancer – 140.7 per 100,000 in Hamakua (134.7 statewide); and
- Stroke – 45.6 per 100,000 in North Kohala and 39.3 in Hamakua (38.2 statewide).

Among HKH patients in 2013: 813 (11.3%) have diabetes; 452 (6.3%) overweight/obese; 613 (8.5%) have asthma; 569 (7.9%) have heart disease; and 1,737 (24.2%) have hypertension.

Ethnicity. Caucasians, Native Hawaiians and Filipinos are the predominant ethnic groups in the community.

Race alone or in combination³

Race (alone or in combination), 2010	State of Hawaii	Hawai'i County	North Kohala	Hamakua	Hilo
White	41.5%	54.8%	56.1%	57.3%	41.5%
Native Hawaiian	21.3%	29.7%	36.1%	25.9%	32.5%
Filipino	25.1%	22.1%	32.8%	38.7%	22.1%
Japanese	23.0%	19.2%	16.4%	15.6%	33.8%
Chinese	14.6%	12.2%	16.3%	13.4%	14.7%

Native Hawaiians. Of all of the ethnic groups living in the service area, the Native Hawaiians have some of the poorest documented health statistics of all groups in Hawai'i, with the highest rates of chronic disease than any other ethnic group. More than half are overweight and, together with Filipinos, are the farthest from meeting the state's Healthy People 2010 objectives.⁴

³ Pobutsky, A, et al., Hawaii Diabetes Report 2010, Honolulu: Hawaii State Department of Health, Chronic Disease Management and Control Branch, Hawai'i State Diabetes Prevention and Control Program, page 19.

⁴ Hawaii Department of Health, "Recent Tracking of Hawaii's Progress Toward Healthy People 2010," Honolulu, October 2007.

Native Hawaiian Health Disparities⁵

Native Hawaiian - Health Disparities	Hawaii	Native Hawaiian
Diabetes	8.3%	11.4%
Diabetes - Gestational	0.9%	2.5%
Pre-diabetes	7.7%	8.0%
Asthma	17.6%	28.4%
Heart Attack	2.9%	4.0%
Stroke	2.5%	2.7%
Obesity	23.1%	43.7%
Smoking	14.5%	26.8%
Binge drinking (5+ men, 4+ women)	17.9%	28.3%
Heavy drinking (2+ men, 1+ women)	6.6%	11.8%
Mammogram (women, never had)	33.3%	39.4%
PSA test (men, never had)	41.8%	46.4%

Source: State of Hawaii, Hawai'i Department of Health, 2010 BRFSS

Elderly population. The service area has a large population of elderly. Approximately one third of the public housing units in the service area are senior housing complexes, and a majority of these elderly access services at HKH. Each year almost one in five HKH patients is elderly (age 65 and older), and a majority of them are retired agricultural workers that previously worked on the sugar plantations in the area. There are no geriatric physicians or psychiatrists in the service area. Elderly that require psychiatric consultation and other geriatric specialty services must travel to other islands for care.

Maternal and child health. Hawai'i County has a very high rate of teen births, and infant mortality rates in the service area are extremely high. North Kohala Community Hospital, the sole labor and delivery facility in the service area, reports servicing "drive by births" - women that are admitted to the hospital in labor, with no prior perinatal care. In North Kohala the rate of infant mortality is over twice the statewide rate (12.4 per 1,000 compared to 6.0 statewide).

More than half of mothers in the service area rely on state funded Medicaid/QUEST insurance for labor and delivery care, and almost 60% of mothers rely on WIC services during pregnancy. This is significantly higher than any other county in the state. The rate of WIC utilization in all other counties is less than 50%.

⁵ 2010 Behavioral Risk Factor Surveillance System, Hawai'i State Department of Health, accessed on October 27, 2014 at health.hawaii.gov/brfss.

Maternal Child Health Indicators

	State of Hawaii	Hawai'i County	North Kohala	Hamakua	Hilo
2005-2010 ³					
Crude Birth Rate per 1,000	13.9	13.2	9.4	12.2	13.6
Infant Mortality Rate per 1,000 (2001-10)	6.0	5.9	12.4	8.8	4.7
Less Than Adequate Prenatal Care	29.1%	34.0%	29.5%	25.0%	28.3%
Low Birth Weight	8.2%	8.0%	6.2%	7.1%	8.3%
Births Under 18 Years of Age	2.4%	3.5%	2.2%	3.0%	3.6%
Mothers with Pre-Existing Conditions	44.9%	34.1%	21.1%	25.0%	52.6%
Insurance status and government benefits ⁶					
Private insurance for labor and delivery	46.4%	39.7%	NA	NA	NA
Medicaid/QUEST for labor, delivery	36.8%	56.5%	NA	NA	NA
Insurance coverage for prenatal care	48.0%	43.3%	NA	NA	NA
Participation in WIC during pregnancy	45.3%	59.9%	NA	NA	NA

Oral health. Oral health among residents is very poor. Almost a third of residents have not gone to the dentist in the past year, and one in eight residents of Hamakua and North Kohala have not seen a dentist for five years or more. The rate of residents that have not had their teeth cleaned in the past year is 40% in North Kohala and 38% in Hamakua.

The low rate of oral healthcare utilization is due to a number of factors, including the lack of sufficient dental insurance for adults – Medicaid only provides emergency dental care so coverage is only provided after teeth have become infected and require extraction. There is also a belief attitude among residents that since the first set of “baby teeth” will eventually fall out, that children do not require dental care.

Adult oral health indicators, 2006, 2008, 2010

	State of Hawaii	Hawai'i County	North Kohala	Hamakua	Hilo
No Dental Visit past year ³	26.1%	32.7%	26.7%	35.0%	30.9%
No Teeth Cleaning past year ³	28.7%	38.0%	40.0%	38.0%	36.3%
Permanent Teeth Removed ³	39.9%	43.6%	37.5%	48.9%	42.3%
Last visit to a dentist 5+ years ago ⁷	7.9%	10.2%	12.3%	12.3%	6.9%

⁶ Pregnancy Risk Assessment Monitoring System, State of Hawaii Department of Health, Family Health Services Division, Maternal Child Health Branch, Report September 9, 2013, accessed on the web on October 25, 2014 at hhdw.org.

Hawaii Health Data Warehouse, Hawaii State Department of Health, accessed on October 25, 2014 at www.hhdw.org.

The Pew Center on the States gave the State of Hawai'i a grade of "F" for meeting only one in eight policy benchmarks to improve oral health for children. Hawai'i lacks a school sealant program and has the lowest rate of fluoridated water in the county: only residents living on military bases receive fluoridated water. The State of Hawai'i Department of Health was forced to eliminate the dental hygiene branch in 2009 due to budget cuts, and no longer participates in the National Oral Health Surveillance System so no state or community level data is available. However, in a 2012 analysis by Delta Dental Plans Association, children in Hawaii were found at greatest risk of tooth decay.

Behavioral health. Almost every mental health indicator for the community far exceeds statewide rates. At hospital admission, the presence of mental health conditions is higher than statewide rates, and the service area has very high rates of depression and substance abuse.

Behavioral health indicators

	State of Hawaii	Hawai'i County	North Kohala	Hamakua	Hilo
Hospital admissions, 2006-2010³					
Substance related	8.9%	11.4%	10.1%	5.7%	10.0%
With mood disorder	6.1%	8.0%	4.5%	5.6%	9.1%
With delirium/dementia	8.4%	7.1%	5.3%	6.8%	9.0%
With anxiety	2.6%	3.3%	2.2%	1.9%	3.5%
With schizophrenia	2.3%	2.7%	1.4%	1.8%	3.5%
Mental health conditions⁴					
Depressive disorder	11.4%	16.5%	15.4%	15.4%	16.2%
Physically hurt by adult in childhood	8.7%	10.3%	10.5%	10.5%	10.0%
Current smokers	13.3%	17.6%	16.2%	16.2%	17.5%
Adults who are Heavy Drinkers	6.9%	8.5%	10.2%	8.6%	8.5%

Hawai'i ranks second in the nation for the prevalence of depression and ninth in the nation for the prevalence of suicide, and this rate is steadily increasing.⁸

Hawai'i County has the highest rate of mortality from suicide, and this rate is also increasing at a faster rate than any other county. Among HKH patients in 2013: 422 (5.9%) have depression or other mood disorders; 360 (5%) have anxiety, including PTSD.

⁸ *Ranking America's Mental Health: An Analysis of Depression Across the States*, Thompson Healthcare as prepared for Mental Health America, Washington, D.C., accessed on October 25, 2014 at www.nami.org.

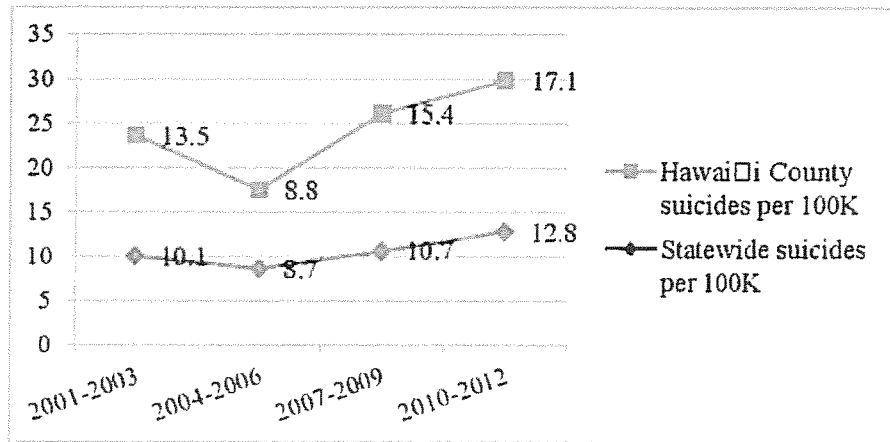


Figure 1 Suicide rate per 100,000⁹

Adolescents and young adults have the highest rate of mortality from suicide than any other age group, and this rate has doubled in the past five years.¹⁰ In Hawai'i County, 29.7% of teenagers report depression, 15.6% report suicidal thoughts, and 14.8% made plans for suicide.¹¹

Hawai'i has instituted taxes on tobacco and implemented strict laws on smoking in public places. This has contributed to a statewide decline in tobacco use from 26.3% in 2000 to 13.3% in 2013. However, smoking among low-income individuals is very high, up to 23.5% for those with an income less than \$15,000 annually, and remains very high in the service area despite to cost of over \$10 per package of cigarettes. Among HKH patients in 2013, 5,093 were screened for tobacco use, and 1,178 (over 23%) were smokers.

In addition to the high prevalence of tobacco use and depression, the HKH behavioral health provider reports a high prevalence of women subject to domestic violence. Although no reliable statistics exist, HKH has begun collecting data on this information for its patient population to better understand the scope of the problem, and also explore funding and collaborations to address the need to assist patients experiencing interpersonal violence.

⁹ Hawaii Health Data Warehouse, Hawaii State Department of Health, Office of Health Status Monitoring (OHSM) accessed on October 25, 2014 at www.hhdw.org.

¹⁰ Eagle, Nathan, *Hawaii Youth Suicide Rate Doubles*, Civil Beat, October 26, 2012, accessed on the web on October 25, 2014 at www.civilbeat.com.

¹¹ *2011-2013 Youth Risk Behavior Survey* Module, State of Hawaii, accessed on October 25, 2014 at www.hhdw.org.

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;

The existing single-story wood-framed HKH is a 2,060 health facility situated in the town of Kapaau, district of Kohala. The former plantation style sugar workers' infirmary is located within an irregular shaped 50,721 s.f. site, defined by Akoni Pule Highway to the south and Hospital Road to the west. Kohala Hospital is located at end of Hospital Road on the north side of the clinic at road's end, while the eastern edge of the clinic is undeveloped and in a natural "green" state. The clinic parking lot is located to the south; a small "back yard" and gazebo exists on the north end facing the hospital, with a cesspool likely located within this open space.

The proposed clinic addition is a 1,000 gsf structure that will include a waiting area, restroom, lab, provider's office and two exam rooms. The addition will be located on the highway side of the present health center, envisioned as a free-standing modular structure connected by a breezeway. This location may affect parking count but we are hopeful that there will be minimal impact on the parking count required by the County zoning code due to the modest floor area of the clinic. The new wing could have a roof design and material palette similar to or compatible with the architecture of the main clinic and Kohala region. The underlying zoning designation is C-1 Commercial and will have meet County zoning and building code requirements. It should relate to the scale of the surrounding neighborhood, which is residential and rural in nature. Because of its Commercial zoning designation, the setback and height restrictions may be less of an issue for the addition perhaps if it were situated within a residential zone. As a part of the development, we will be required to obtain a certificate of need from the State Department of Health.

Urban Works, Inc. (UW), a Honolulu-based architectural firm with experience in the design of health and community facilities, will design the addition, in collaboration with the Hamakua-Kohala Health stakeholders and executive committee. As Prime Consultant, Urban Works/UW will retain the services of subconsultants including an environmental engineer, surveyor, civil engineer, structural engineer, MEP engineer, cost estimator and specifications writer. Following fee negotiations a formal agreement for professional services with UW, HKH provide UW with a program/user needs assessment document and equipment list. UW will proceed with the design based on HKH's requirements and a mutually acceptable project schedule that will be developed, factoring in County approvals process and available funding. With respect to the overall

design and construction of the HKH, the project will consist of the following phases of work, as defined by the American Institute of Architects (AIA), considered to be standards of the industry and thus described in the AIA Standard Form of Agreement Between Owner (HKH) and Architect (Urban Works Inc.).

The phases are as follows:

- Schematic Design Phase
- Design Development Phase
- Contract Document Phase
- Bidding and Negotiations Phase
- Construction Phase

For all phases, Hamakua-Kohala Health (HKH) as Client will participate in major discussions involving functional and financial issues. During the design phases (SD, DD, CD), HKH may assign a Project Manager (PM) who is retained by HKH to represent our health center's interests, either a senior HKH staff person or outside consultant to be the single point of contact for the major parties (Owner, Architect and GC). At the outset of the Construction Phase, HKH may choose to retain the services of a Construction Manager (CM) to represent the interests of HKH and to be the point of contact with respect to interaction with UW and the GC. During construction UW will be the professional arbiter of the project requirements, with respect to the content and intent of the Contract Documents (drawings and specifications) to ensure technical requirements and level of quality are being met by the selected General Contractor/GC and its subcontractors. For Urban Works, there will be a Principal (managing principal, providing design direction/guidance/contract knowledge); Project Architect/Project Designer (day-to-day interaction with the Owner's representative and consultants); CAD production staff will be assigned to the project.

The Schematic Design (SD) Phase will take our approved Program/User Needs Assessment document to serve as the basis for our Architect's building and site design, that endeavors to balance site constraints and opportunities, building and zoning code requirements and preliminary order of magnitude budget help the design team to come up with SD level floor plans and site plan. The general appearance and character of the building will be depicted at SD stage, with an order-of-magnitude cost estimate performed by its estimator. During this phase, HKH may ask UW to assist us in providing documents for including in County Use Permit.

The Design Development (DD) and Contract Documents (CD) Phase will focus on increasingly technical design information for the Contractor to price out and build, once HCC has approved the SD package. These subsequent phases include the identification/investigation, development and refinement of interrelated building systems, including the structural foundation design, floor and roof

framing, cladding/wall/roof assemblies and details forming the basis of the proposed permitting and GC pricing/bidding documents. Technical specifications are also developed and formalized, to be included in the bid documents. A cost estimate is done at the end of the DD phase and start of the CD phase. At the end of the CD Phase, UW will submit permit plans to the County of Hawaii obtain a building permit. The GC will not be permitted to begin construction until a permit is secured. An NPDES permit is not required for the addition as the affected area will be less than an acre.

UW will assist HKH in the selection of a General Contractor (GC) depending on a project delivery type that is determined by HKH in consultation with UW. Possible delivery types include working with a specific GC during the Design phases in a Design-Assist capacity/arrangement in order to work with UW to confirm pricing and suitability of construction. Another form of project delivery is the traditional Design-Bid-Build project delivery method that could involve requesting formal bids from a pre-selected group of Big Island contractors. Because of the size of the project and general isolation, local builders will be sought out during the design phases. UW will assist HKH in describing the project to interested contractors.

UW and its consultant team will work the selected GC during construction to review shop drawings, respond to Contractor requests for information (RFIs), attending biweekly Owner-Architect-Contractor (OAC) and participating in a final Punch List Inspection. LEED certification will not be pursued.

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

(Attached: Attachment 1)

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

Under the direction of the CEO, the Director of Innovation and Transformation is responsible to coordinate, monitor, and support staff and providers in the implementation of the Quality Management and (QM), Risk Management (RM) programs.

Hamakua-Kohala Health's Quality Management Program is designed to be responsive to the national Healthy Peoples 2020 overarching goals:

- Attain high-quality, longer lives free of preventable disease, disability, injury, and premature death.
- Achieve health equity, eliminate disparities, and improve the health of all groups.
- Create social and physical environments that promote good health for all.
- Promote quality of life, healthy development, and healthy behaviors across all life stages.

Hamakua-Kohala Health 's Quality Management program involves physicians, nurses, allied health disciplines, community service agencies, administrators, managers, and staff that provide care to the uninsured or underinsured individuals of our community. The program focuses on improving key client and organizational functions with Hamakua-Kohala Health, and will at all times, remain consistent with the U.S. Bureau of Primary Health Care's (BPHC) Health Resources and Services Administration (HRSA), the NCQA Patient-Centered Medical Home standards, and appropriate guidelines of the Federal Tort Claims Act (FTCA). The key functions are assessed by collecting and analyzing data related to one or more dimensions of performance, which includes but may not be limited to efficacy, appropriateness, availability, timeliness, effectiveness, continuity, safety, efficiency, and respect and caring. The six key functional areas within the scope of Hamakua-Kohala Health's Quality Management Program are:

- *Care Management*- biological, social, and/or quality of life consequences of clinical and social evaluation and management of care and services in areas such as preventive health, acute or chronic conditions, behavioral health.
- *Safety*- capabilities to promote a safe environment for clients by evaluation in areas such as client and provider education, continuity and coordination of care
- *Financial and Administrative*- ability to efficiently and effectively manage the financial and administrative aspects of the organization
- *Network quality*- periodic peer review assessments of client records by physicians or by other licensed health professionals under the supervision of physicians of the appropriateness of the utilization of services; capabilities, satisfaction, accessibility, and availability of healthcare and human services, including monitoring and evaluation of quality care/quality service complaints, credentialing/recredentialing, and adverse occurrence tracking.
- *Client Satisfaction*- ability to meet the needs of Hamakua Health Center customers.
- *Customer Service*- capabilities, satisfaction, accessibility of the provision of customer service.

The Quality Management Plan includes performance measures established by HRSA to ensure that Hamakua-Kohala health consistently responds to the needs of its patients via a high-quality health delivery system:

HRSA Performance Indicators
Weight assessment and counseling for children (ages 2-17)
Adult weight screening and follow-up
Adult tobacco use assessment
Adult tobacco cessation counseling for tobacco users
Colorectal Screening (50-75)
Cervical Cancer Screening (ages 21-64)
Childhood Immunizations (by 2nd birthday)
Asthma treatment pharmacologic therapy (ages 5-40)
Coronary artery disease (CAD) and lipid-lowering therapy (adult)
Ischemic Vascular Disease (IVD) and aspirin or other antithrombotic therapy (adult)
Blood pressure control (adult hypertensive patients (HTN cont.) with blood pressure <140/90)
Diabetes control (diabetic patients ages 18-75 with HbA1c <=9%)
Diabetes control (diabetic patients ages 18-75 with HbA1c <= 7% (HMSA)
Chlamydia Screening (Women ages 16-24 yearly) (HMSA)
Percentage of Pregnant women beginning prenatal care in first trimester
Diabetes Eye Exam (ages 18-75 yearly) (HMSA)
Diabetes Nephropathy (one micro-albumin ages 18-75) (HMSA)
Percentage of non-malignant chronic pain patients who self-report functional improvement <=7 on a 10 point scale
Percentage of patients with comprehensive dental exams who received 2 cleanings in a 12-month period
Percentage of Clinically Significant Depression (CSD) patients on an antidepressant or in psychotherapy within one month of last New Episode PHQ

Authority and Accountability

Hamakua-Kohala Health's Board of Directors (BOD) has ultimate responsibility and accountability for the Quality Management Program. The BOD delegates authority and responsibility for all matters relative to the Quality Management Program to the Quality Management Committee. The Quality Management Committee delegates the operational responsibility of the Quality Management Program to the Chief Executive Officer. The Chief Executive Officer delegates the day to day functions of the Quality Management Program to the Director of Innovation and Transformation. The Director of Innovation and Transformation works collaboratively with the Medical Director and other Senior Management staff to establish and achieve high quality outcomes in the clinical and operational performance of Hamakua-Kohala Health.

III. Financial

Budget

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

(Attached)

2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2017.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$85,750.00	\$54,750.00	\$54,750.00	\$54,750.00	\$250,000.00

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2017.

NA

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.

NA

5. The applicant shall provide a listing of all federal, state, and county government contracts and grants it has been and will be receiving for program funding.

NA

6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2015.

(\$134,191)

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.

(See Attached: Attachment 2)

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.

(See Attached: Attachment 3)

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.

(Attached: Attachment 4)

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: Attachment 5)

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.

Title	Annual Salary
MD – Physician	\$170,000.00
FNP- Family Nurse Practitioner	\$160,000.00
CEO	\$130,000.00

VI. Other

A. Litigation

N/A

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.

N/A

C. Private Educational Institutions

N/A

D. Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2016-17 the activity funded by the grant if the grant of this application is:

- (1) Received by the applicant for fiscal year 2016-17, but
- (2) Not received by the applicant thereafter.

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

(See Attached: Attachment 6)

**DECLARATION STATEMENT OF
APPLICANTS FOR GRANTS 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 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 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, 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 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 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.

Hamakua Health Center, Inc.
(Typed Name of Individual or Organization)



Jan 21, 2016
(Date)

Helen J. Carpenter, CEO
(Typed Name)

(Title)

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2016 to June 30, 2017

App Hamakua Health Center, Inc. - Kohala-Hamakua Health

BUDGET CATEGORIES	Total State Funds Requested (a)	Total Federal Funds Requested (b)	Total County Funds Requested (c)	Total Private/Other Funds Requested (d)
A. PERSONNEL COST				
1. Salaries				
2. Payroll Taxes & Assessments				
3. Fringe Benefits				
TOTAL PERSONNEL COST				
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island				
2. Insurance				
3. Lease/Rental of Equipment				
4. Lease/Rental of Space				
5. Staff Training				
6. Supplies				
7. Telecommunication				
8. Utilities				
9. Contracted Architectual Fees	17,500			
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
TOTAL OTHER CURRENT EXPENSES	17,500			
C. EQUIPMENT PURCHASES	13,500			
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL	219,000			
TOTAL (A+B+C+D+E)	250,000			
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	250,000	Jeff Zingg	808-775-7204	
(b) Total Federal Funds Requested	0	Name	Phone	
(c) Total County Funds Requested	0	[REDACTED]	1/22/2016	
(d) Total Private/Other Funds Requested	0		Date	
TOTAL BUDGET	250,000	Name and Title (Please type or print)		
	250,000			

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2016 to June 30, 2017

Applicant: Hamakua Health Center, Inc. - Hamakua-Kohala Health

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
NA				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
TOTAL:				\$ -
JUSTIFICATION/COMMENTS:				

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2016 to June 30, 2017

Applicant: Hamakua Health Center, Inc. - Hamakua-Kohala Health

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
Table Base	2.00	\$1,670.10	\$ 3,340.20	
Upholstery	2.00	\$495.00	\$ 990.00	
Wall Transformer	2.00	\$425.00	\$ 850.00	
Macroview Otoscope	2.00	\$195.00	\$ 390.00	
Ophthalmoscope	2.00	\$225.00	\$ 450.00	
Aneroid Wall Unit	2.00	\$174.00	\$ 348.00	
Flexiport Cuff	2.00	\$25.95	\$ 51.90	
Physician Scale	2.00	\$389.95	\$ 779.90	
Fire Extinguisher	2.00	\$150.00	\$ 300.00	
Emergency Lights	2.00	\$300.00	\$ 600.00	
Exit Lights	2.00	\$50.00	\$ 100.00	
Computer	4.00	\$800.00	\$ 3,200.00	
Wireless Hub & Installation	1.00	\$500.00	\$ 500.00	
Phone System & Installation	4.00	\$400.00	\$ 1,600.00	
		\$	-	
TOTAL:	31		\$ 13,500.00	

JUSTIFICATION/COMMENTS:

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2016 to June 30, 2017

N/A		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
TOTAL:		\$ -

JUSTIFICATION/COMMENTS:

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2016 to June 30, 2017

Applicant: Hamakua Health Center, Inc. - Hamakua-Kohala Health

FUNDING AMOUNT REQUESTED							
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS		
	FY: 2014-2015	FY: 2015-2016	FY: 2016-2017	FY: 2016-2017	FY: 2017-2018	FY: 2018-2019	
PLANS	0	0	0	0	0	0	0
LAND ACQUISITION	0	0	0	0	0	0	0
DESIGN	0	0	\$ 17,500.00	\$ 17,500.00			
CONSTRUCTION	0	0	\$ 219,000.00	\$ 219,000.00			
EQUIPMENT	0	0	\$ 13,500.00	\$ 13,500.00			
TOTAL:	0	0	\$ 250,000.00	\$ 250,000.00			
JUSTIFICATION/COMMENTS:							

CURRENTLY MANAGED GOVERNMENT CONTRACTS AND / OR GRANTS

Apf Hamakua Health Center, Inc. - Kohala-Hamakua Health

Contracts Total: -

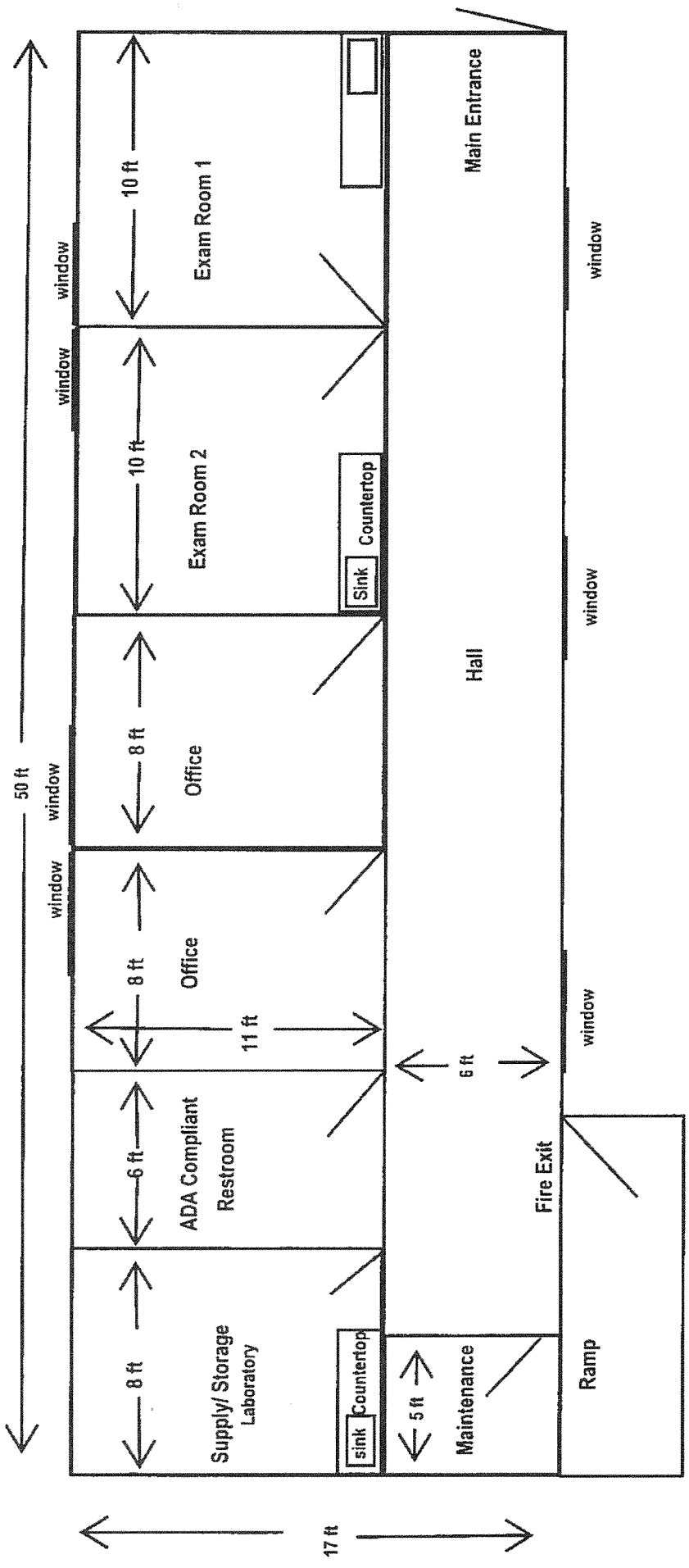
	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)	CONTRACT VALUE
1	NA				
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					

Hamakua-Kohala Health

Timeline	Month												
	1	2	3	4	5	6	7	8	9	10	11	12	
Competitive bid process for architect, proj manager													
Develop plans and specification													
Competitive bid process for general contractor													
Bldg permits (construction, grading, bonding)													
Demolition of existing structure													
Sitework, grading, asphalt, concrete													
Construction of modular													
Purchase and install equipment													
Construction complete, ready for operation													

Attachment #1

Attachment #3



CURRENTLY MANAGED GOVERNMENT CONTRACTS AND / OR GRANTS

Apr Hamakua Health Center, Inc. - Kohala-Hamakua Health

Contracts Total: 1,957,965

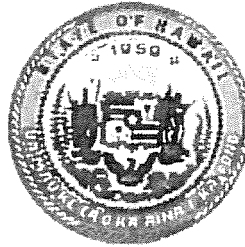
	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)	CONTRACT VALUE
1	BCCCP	7/1/2015	6/30/216		10,000
2	Family Planning Clinical & Education	7/1/2015	6/30/2016		188,492
3	HRSA	3/1/2015	2/29/2016		809,333
4	HRSA QI Supplemental	8/1/2015	7/31/2016		61,905
5	HRSA PCMH Incentive	3/1/2015	2/29/2016		57,110
6	HRSA Expanded Services Supplemental	9/1/2015	8/31/2016		253,245
7	HPCA 1422	8/24/2015	6/29/2017		114,000
8	Hi'iola Hawaii Health Connector	12/1/2015	6/30/2016		361,370
9	HCF- Smoking Cessation	1/1/2016	6/30/2016		27,150
10	SOH Primary Care Uninsured/Underinsured	7/1/2015	6/30/2019		\$95/PP
11	HMSA Foundation	7/1/2015	6/30/2016		75,360
12					
13					
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21					
22					
23					
24					
25					
26					
27					
28					
29					
30					

Kohala

Bus Ops Mgr (Kohala)

MA1 (.5)	MA1 (1.0)	Pediatrician (.5)	Provider (1.0)	Provider (1.0)	BH	FO (1.0)	FO (1.0)
		MA2 (1.0)	LPN (1.0)	LPN (1.0)	Psychologist (.5)		
					CSAC (.5)		

Attachment #6



STATE OF HAWAII
STATE PROCUREMENT OFFICE

CERTIFICATE OF VENDOR COMPLIANCE

This document presents the compliance status of the vendor identified below on the issue date with respect to certificates required from the Hawaii Department of Taxation (DOTAX), the Internal Revenue Service, the Hawaii Department of Labor and Industrial Relations (DLIR), and the Hawaii Department of Commerce and Consumer Affairs (DCCA).

Vendor Name: **Hamakua Health Center, Inc.**

DBA/Trade Name: **Hamakua Health Center, Inc.**

Issue Date: **01/15/2016**

Status: **Compliant**

Hawaii Tax#: [Redacted]
FEIN/SSN#: [Redacted]
UI#: [Redacted]
DCCA FILE#: [Redacted]

Status of Compliance for this Vendor on Issue date:

Form	Department(s)	Status
A-6	Hawaii Department of Taxation	Compliant
	Internal Revenue Service	Compliant
COGS	Hawaii Department of Commerce & Consumer Affairs	Compliant
LIR27	Hawaii Department of Labor & Industrial Relations	Compliant

Status Legend:

Status	Description
Exempt	The entity is exempt from this requirement
Compliant	The entity is compliant with this requirement or the entity is in agreement with agency and actively working towards compliance
Pending	The entity is compliant with DLIR requirement
Submitted	The entity has applied for the certificate but it is awaiting approval
Not Compliant	The entity is not in compliance with the requirement and should contact the issuing agency for more information

Date: **January 21, 2016**
 Project Number: **1601**
 Project Name: **Honokaa Health Center**

PROJECT INFO

TMK	(3) 4-5-010:089
Lot Area	31,304 sf
Location	Honokaa, Hawai'i
Currently Zoned	A-5a
Proposed Building	~15,000 sf
Required Parking	50 Stalls (10% Accessible)
Required Loading	2 Stalls

HAWAII COUNTY CODE REVIEW

PARKING REQUIREMENTS (Section 2-4-51)

Commercial Uses	1/300 sf (@ 15,000 sf = 50 stalls)
Offices (in RCX, CN, CV, CG, MCX, V, RA, FA, A, I)	
Accessible Parking	10% of required stalls for Medical use (@5 stalls = 5 Accessible)
Bicycle Parking	For every 5 bicycle stall reduce parking stalls by 1
Parking Stall dimensions	18' x 8'-6" / parallel 22' x 8'-6" / 24' aisle width
Yard Setbacks	Parking may extend into yard setbacks

LOADING REQUIREMENTS

Hospitals or similar institutions		
5,000 – 10,000 sf	1	12' x 50' x 14'H
10,000 - 50,00 sf	2	12' x 50' x 14'H (x1); 10' x 22' x 14' H (x1)

ZONING INFO

A-5a	Agricultural District / minimum building site: 5 acres	(Proposed site)
	Note: Proposed Site is located within the neighborhood block of Honokaa Park	
A-40a	Agricultural District / minimum building site: 40 acres	(Existing Adjacent tenant site)
A-1a	Agricultural District / minimum building site: 1 acre	(Adjacent Sites)
RS-10	Single-Family Residential District / min building site: 10,000 sf	(Adjacent Sites)

PROPOSED ZONING (Based on existing/expired use permit)

A Districts	Section 25-5-70	Article 5, Division 7. A. Agricultural Districts
--------------------	-----------------	--

Permitted Uses:	(a)(16) Uses, other than those listed specifically in this section, which meet the standards for special permit under chapter 205, Hawaii Revised Statutes (b)(5) Hospitals, sanitariums, old age, convalescent, nursing, rest Buildings considered accessory to the above uses shall be permitted
Height Limit:	35 ft for residential structure; 45 ft for all other structures [*same as FA] <i>Note: 2 stories is preferable for community support</i>
Minimum Site Area	5 acres [*1 acre FA]
Minimum Site Width	200 ft [*120 ft FA]
Yards	Front 35 ft; Rear 35ft; Side Yards 25 ft [* same as FA] Fences to 6 ft tall, "See-through" fences to 8 ft tall Eaves, sunshades, etc. may extend 6 ft into yard; Porte-cocheres are exempt from yard setback requirements
Other Regulations	<i>*If any legal building site in the A district has an area of less than five acres, then the yard, minimum building site average width and height requirements for the building site shall be the same as the yard and height requirements in the FA district.</i>
Landscaping	CN Districts Front yards must be landscaped except for necessary drives & walkways *Use Permit USE 07-000007 condition No. 2: Landscaping fronting Lehua Street shall conform to the front yard landscaping requirements for a CN zone in Rule No. 17. Side Yards: Where any required side or rear yard in the CN district adjoins a building site in an RS, RD, RM or RCX district, the side or rear yard shall be landscaped with a screening hedge not less than forty-two inches in height, within five feet of the property line, except for necessary drives and walkways *Use Permit USE 07-000007 condition No. 2: Landscaping shall comply with buffer yard standard for separation of a CN zone adjoining an RS zone in Rule No. 17.

CONDITIONAL USE PERMIT

EXISTING USE PERMIT

Use Permit Application	USE 07-000007
Date Approved	May 18, 2007
Date Expired	May 18, 2012
Applicant	Hamakua Health Center, Inc
Request	Health Care Facility

A new Conditional Use Permit Application is being proposed for the expanded scope of work for the new health center. Although the general scope of work between the existing and proposed Use Permits is similar in nature there are significant increases in building area, height, parking count, and the type of care the clinic provides. The proposal and its parameters are based on the existing approved Use Permit. A full list of conditions is included in the attached Use Permit from the County of Hawaii Dated May 18th, 2007.

	APPROVED	PROPOSED
Existing Structure	Remove and replace	Remove and replace
Building Area	6,180 sf	~15,000 sf
Building Height	1 story	2 story
Parking Count	25 stalls	50 stalls
Building Use	Behavioral Health Services	Comprehensive Health Services

ATTACHMENTS

Program Study

1. Existing Honokaa Health Center + Expanded Program

Existing Use Permit

Feasibility_Graphics_11x17.pdf

1. Site Plan and Diagrammatic Massing
2. Diagrammatic Elevations
3. Aerial View of Site
4. Haina-Honokaa Zone Map, Section 25-8-17
5. TMK & Plat
6. Site + Area Photos

Honokaa_Health_Center.pdf

1. Development Budget – Phase 1 Funding Request
2. Development Schedule
3. Application for Grants

Kohala_Health_Center.pdf

1. Development Budget – Phase 1 Funding Request
2. Development Schedule
3. Application for Grants

HONOKAA HEALTH CENTER

Date 1/21/2016
 Project Number #1601
 Lot Area 31,304 SF

	EXISTING	PROPOSED	△
Administration / Office			
Main Reception/Patient Accounting	616	750	134
Medical Records	460	500	40
Work Room 1	62	100	38
Work Room 2	62	100	38
Admin Office 1	144	144	0
Admin Office 2	96	100	4
Admin Office 3	94	100	6
Transcription	45	50	5
Classroom		200	200
Conference Room/Classroom	163	250	87
SUBTOTAL	1,742	2,294	552

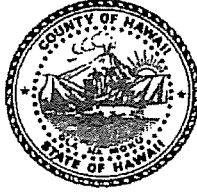
	EXISTING	PROPOSED	△
Support			
Public Restroom Women	60	120	60
Public Restroom Men	60	120	60
Patient Restroom (Unisex/Family)	36	64	28
Patient Restroom Women	57	60	3
Patient Restroom Men	57	60	3
Staff Restroom (Unisex)	44		(44)
Staff Restroom Women		60	60
Staff Restroom Men		60	60
Staff Lounge + Lockers	144	250	106
Janitor	30	60	30
Mechanical Room	154	200	46
Electrical room	131	200	69
Small Storage	109		(109)
Large Storage		400	400
IT - Comp Room	57	100	43
SUBTOTAL	939	1,754	815

	EXISTING	PROPOSED	△
Patient Services			
Entry	165	300	135
Lobby, Waiting (Main)	500	500	0
Waiting (Clinic)	0	300	300
Directors Office		144	144
Travelling Doctor Suite (w/ Restroom)		275	275
Practitioner Office 1	94	100	6
Exam Room 1a	105	100	(5)
Exam Room 1b	105	100	(5)
Practitioner Office 2	104	100	(4)
Exam Room 2a	110	100	(10)
Exam Room 2b	110	100	(10)
Practitioner Office 3	100	100	0

Exam Room 3a	105	100	(5)
Exam Room 3b	105	100	(5)
Practitioner Office 4	100	100	0
Exam Room 4a	105	100	(5)
Exam Room 4b	105	100	(5)
Practitioner Office 5	104	100	(4)
Exam Room 5a	110	100	(10)
Exam Room 5b	110	100	(10)
Practitioner Office 6 (Pediatrics)	66	100	34
Exam Room 6a (w/ Restroom)		150	150
Exam Room 6b		100	100
Practitioner Office 7 (OBGYN)		100	100
Exam Room 7a (w/ Restroom)		200	200
Exam Room 7b		100	100
Dental Office 8		100	100
Dental Exam Room 8a		100	100
Dental Exam Room 8b		100	100
Dental Exam Room 8c		100	100
EKG	124	150	26
Nurse Station (x2)	104	280	176
Nurse Station (x2)		280	280
Endoscopic Room	179		(179)
Minor Procedure	171		(171)
Minor Procedure / Endo Combined		300	300
Recovery Lounge		100	100
Behavioral Health	128	144	16
Lab (Blood taking/testing)	91	144	53
Medications	77	100	23
Triage (Sick)	132	200	68
Dialysis		300	300
Sleep Rooms		200	200
Cure Management		200	200
SUBTOTAL	3,309	6,567	3,258

	EXISTING	PROPOSED	△
Circulation			
Entry Corridor	93		
Corridor 1	169		
Corridor 2	93		
Corridor 3	260		
Corridor 4	540		
Corridor 5	246		
Vertical Circulation			
Stair 1		180	
Stair 2		180	
Elevator 1		80	
Elevator 2		48	
SUBTOTAL	1,401	488	0

Area Totals			
SUBTOTAL (SF)	7,391	11,103	4,625
Existing Circulation (x18%)	1,401		
New Circulation Multiplier (x35%)	1.35	3,886	
TOTAL (SF)	7,391	14,989.05	7,598



County of Hawai'i

PLANNING COMMISSION

Aupuni Center • 101 Pauahi Street, Suite 3 • Hilo, Hawai'i 96720
Phone (808) 961-8288 • Fax (808) 961-8742

May 18, 2007

Mr. Gregory R. Mooers
P.O. Box 1101
Kamuela, HI 96743

Dear Mr. Mooers:

Use Permit Application (USE 07-000007)
Applicant: Hamakua Health Center, Inc.
Request: Healthcare Facility
Tax Map Key: 4-5-10:89

The Planning Commission at its duly held public hearing on May 4, 2007, voted to approve the above-referenced application to allow the development of a healthcare facility to replace an existing health care structure on approximately 31,304 square feet of land situated within the Agricultural 5-acre (A-5a) zoned district. The property is located off Lehua Street, north of Honokaa Park and east of the Hale Ho Ola Hamakua Critical Access Hospital in Honokaa, Hamakua, Hawaii.

Approval of this request is based on the following:

The applicant is requesting a Use Permit to allow the establishment of a health care facility on 31,304 square feet of land to replace the existing health care structure, which is deteriorating. The applicant is proposing to demolish the existing structure and construct a single-story 6,180-square foot structure that will house the Behavioral Health Services program for the screening and treatment of mental health and substance abuse. The project will also include therapy offices and meeting space, executive and administrative offices, a kitchen, restrooms, storage space and 25 parking stalls.

The proposed health center will provide relief to the Hamakua Health Center's main clinic, which is operating at maximum capacity with demand for services continuing to grow. There is no room for expansion of existing programs to meet the community's growing needs for primary care and behavioral health services. This new facility will be used to house an expanded outpatient behavioral health department and the executive and administrative offices.

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In considering a Use Permit for any proposed use, Rule 7 of the Planning Commission relating to Use Permits requires that such action conform to the following guidelines:

- A. The granting of the proposed use shall be consistent with the general purpose of the zoned district, the intent and purpose of the Zoning Code and the County General Plan;
- B. The granting of the proposed use shall not be materially detrimental to the public welfare nor cause substantial adverse impact to the community's character or to surrounding properties; and
- C. The granting of the proposed use shall not unreasonably burden public agencies to provide roads and streets, sewers, water, drainage, school improvements, police and fire protection and other related infrastructure.

The proposed health center meets the guidelines for approval of a Use Permit, for the reasons outlined below:

The granting of the proposed use shall be consistent with the general purpose of the zoning district, the intent and purpose of the Zoning Code, and the County General Plan. The intent and purpose of the Zoning Code is to promote health, safety, morals or the general welfare of the community through regulations and restrictions relative to the location and use of buildings, off-street parking, the percentage of lots that may be occupied, the density of population and land for trade, industry, residence or other purposes. The proposed use is situated within the State Land Use Urban district and County's Agricultural (A-5a) zoned district. According to the Zoning Code, hospitals, sanitariums, old age, convalescent, nursing and rest homes can be allowed through the granting of a Use Permit. The Use Permit process provides an avenue to review and analyze a proposed project on a case-by-case basis relative to infrastructure and impacts on surrounding properties and existing uses as well as the goals and policies of the General Plan.

A condition of approval will require the applicant to secure Final Plan Approval for the proposed development from the Planning Director. Plan Approval provides a method of allowing closer inspection of the proposed development in order to ensure conformance with the General Plan, to assure that the intent and purpose of the Zoning Code as described above are carried out, and to ensure that any pertinent conditions of previous approvals related to the development have been implemented. Based on this information, the proposed request is consistent with the general purpose of the zoning district and the intent and purpose of the Zoning Code.

The County of Hawaii's General Plan is the policy document for the long range comprehensive development of the island of Hawaii. One of the purposes of the General Plan is to guide the pattern of future development in this County based on long-term goals. The General Plan Land Use Pattern Allocation Guide (LUPAG) Map designates the property as Medium Density Urban, which includes village and neighborhood commercial and single family and multiple family residential and related functions (multiple family residential - up to 35 units per acre).

The proposed health center will complement the following goals, policies and standards of the Economic, Public Facilities and Land Use elements of the General Plan:

Economic Element

- Economic development and improvements shall be in balance with the physical, social and cultural environments of the island of Hawaii.
- Provide an economic environment that allows new, expanded, or improved economic opportunities that are compatible with the County's cultural, natural and social environment.
- Encourage the health/wellness industry.

Public Facilities: Health

- Encourage the establishment or expansion of community health centers and rural health clinics.

Land Use Element

- Designate and allocate land uses in appropriate proportions and mix and in keeping with the social, cultural, and physical environments of the County.
- Promote and encourage the rehabilitation and use of urban areas that are serviced by basic community facilities and utilities
- Encourage the development and maintenance of communities meeting the needs of its residents in balance with the physical and social environment.

Based on the above information, the proposed health center is consistent with the General Plan designation and is in keeping with the goals, policies and standards of the General Plan.

The granting of the proposed use shall not be materially detrimental to the public welfare nor cause substantial, adverse impact to the community's character or to surrounding properties. The property has continually housed health care facilities for over forty years. It was used as the Hamakua Plantation Infirmary from 1966 until 1995. From 1995 until the present, the property has been used for the Hamakua Health Center for health education and office space. Presently, there is an existing structure that is proposed to be demolished because of its deteriorated condition and contamination by lead based paints and asbestos. The applicant is proposing to construct a single-story, 6,180 square foot structure for the new health center. Surrounding properties consist of the Honokaa Hospital and other structures used by the Hamakua Health Center across Lehua Street to the west, the Honokaa Park on the adjacent property to the north and east, and several residences across Akia Street to the north. Additionally, due to the noise and traffic inherent to the activities already established in the area, it is not anticipated that noise and traffic associated with the proposed use will adversely impact surrounding properties. Therefore, the desired use will not be materially detrimental to the public welfare nor cause substantial adverse impact to the community's character or surrounding properties as the property has been utilized as a health care facility for over a forty-year period.

The granting of the proposed use shall not unreasonably burden public agencies to provide roads and streets, sewers, water, drainage, school improvements, police and fire protection and other related infrastructure. Access to the property is from Lehua Street, which is a County owned and maintained roadway with a 24-foot pavement width within a 50-foot right-of-way. County water is available to the property. A condition of approval will require the applicant to connect the proposed project to the Honokaa Hospital sewer system as recommended by the State Department of Health. Any impacts from soil erosion and runoff during site preparation and construction phases can be adequately mitigated through compliance with existing County erosion and sedimentation control regulations as well as standard construction practices and additional conditions proposed in this permit. All other utilities are available to the site. Police and fire stations are in close proximity to the property. Based on this information, the proposed use will not unreasonably burden public agencies to provide roads and streets, sewers, water, drainage, school improvements, police and fire protection and other related infrastructure.

The subject request is not contrary to Chapter 205A, Hawaii Revised Statutes, relating to Coastal Zone Management Area. The property is not located in the Special Management Area. There are no identified recreational resources, historic resources, public access to the shoreline or mountain areas, scenic and open space preserves, coastal ecosystems, marine resources or other natural and environmental resources in the area. Thus, the proposed request and use of the property will not adversely impact those resources.

There is no record of a designated public access to the shoreline or mountain areas that traverses the property. According to the Flood Insurance Rate Map (FIRM), the property is located in Zone "X", area outside of the 500-year flood plain. The entire site has been completely graded and in urban use for over forty (40) years. As such, there are no valued cultural, historical or natural resources on the property and no evidence of any traditional and customary Native Hawaiian rights being practiced on the site. Thus, it is not anticipated that the proposed request will have any adverse impact on cultural or historical resources in the area.

The proposed request will not have a significant adverse impact to traditional and customary Hawaiian Rights. In view of the recent Hawaii State Supreme Court's "PASH" and "*Ka Pa'akai O Ka'Aina*" decisions, the issue relative to native Hawaiian gathering and fishing rights must be addressed in terms of the cultural, historical, and natural resources and the associated traditional and customary practices of the site:

Investigation of valued resources: No formal archaeological reconnaissance survey, oral history of kamaaina accounts of the area, historical survey of documentary records, botanical and/or fauna study was submitted.

The valuable cultural, historical, and natural resources found in the project area: The property is not adjacent and/or proximate to the shoreline. As such, gathering of marine life and coastal access is not an issue. There are no known established valued cultural rights being exercised on the property. The likelihood of any rare or endangered species, habitat of flora or fauna or any archaeological features is remote in this area based on urbanization and the development that has occurred. The applicant has submitted a request for a "no-effect" letter from the Department of Land and Natural Resources-State Historic Preservation Division.

Possible adverse effect or impairment of valued resources: As the entire site has been completely graded and in urban use for over forty (40) years, it is not anticipated that there will be any adverse effect or impairment of valued resources.

Feasible actions to protect native Hawaiian rights: To the extent to which traditional and customary native Hawaiian rights are exercised, the proposed action will not affect traditional Hawaiian rights and no action is necessary to protect these rights. A condition of approval will be included to require the applicant to notify the DLNR-SHPD should any unidentified sites or remains be encountered, and proceed only upon an archaeological clearance form the DLNR-SHPD.

Based on the above, the request to allow the development of a health care facility on approximately 31,304 square feet of land is approved by the Planning Commission. Approval of this request is subject to the following conditions:

1. The applicant, its successor or assigns shall be responsible for complying with all stated conditions of approval.
2. Construction of the proposed development shall be completed within five (5) years from the effective date of this permit. Prior to construction, the applicant, successors or assigns shall secure Final Plan Approval for the proposed development from the Planning Director in accordance with Section 25-2-70, Chapter 25 (Zoning Code), Hawaii County Code. Plans shall identify all existing and/or proposed structures, paved driveway accesses and parking stalls associated with the proposed development. Landscaping shall be included on the plans to mitigate any potential adverse noise or visual impacts to adjacent properties in accordance with the Planning Department's Rule No. 17 (Landscaping Requirements). Landscaping shall comply with the buffer yard standard for separation of a CN (Neighborhood Commercial) zone adjoining a RS (Single-Family Residential) zone in Rule No. 17. The landscaping fronting Lehua Street shall conform to the front yard landscaping requirements for a CN (Neighborhood Commercial) zone in Rule No. 17.
3. All driveway connections to Lehua Street shall conform to Chapter 22, County Streets, of the Hawaii County Code.
4. A drainage study shall be prepared by a licensed civil engineer and submitted to the Department of Public Works prior to the issuance of a construction permit. Drainage improvements, if required, shall be constructed, meeting with the approval of the Department of Public Works prior to receipt of a Certificate of Occupancy.
5. All development-generated runoff shall be disposed of on-site and shall not be directed toward any adjacent properties.
6. The applicant shall connect the proposed project to the County's planned sewer collection system for Honokaa. Should the sewer system not be available at the time the project is developed, the applicant will construct an on-site wastewater treatment system meeting the requirements of the State Department of Health. Once the sewer system is available, the applicant will connect to the County system at that time.
7. A Solid Waste Management Plan shall be submitted to the Department of Environmental Management for review and approval prior to the issuance of a Certificate of Occupancy.
8. Should any unidentified sites or remains such as artifacts, shell, bone, or charcoal deposits, human burials, rock or coral alignments, pavings or walls be encountered, work in the immediate area shall cease and the Department of Land and Natural Resources-Historic Preservation Division (DLNR-HPD) shall be immediately notified. Subsequent work shall proceed upon an archaeological clearance from the DLNR-HPD when it finds that sufficient mitigative measures have been taken.

Mr. Gregory R. Mooers

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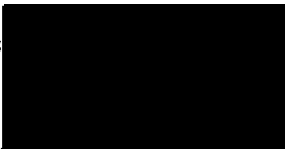
9. The applicant shall comply with all applicable County, State and Federal laws, rules, regulations and requirements.
10. An initial extension of time for the performance of conditions within the permit may be granted by the Planning Director upon the following circumstances:
 - A. The non-performance is the result of conditions that could not have been foreseen or are beyond the control of the applicant, successors or assigns, and that are not the result of their fault or negligence.
 - B. Granting of the time extension would not be contrary to the General Plan or Zoning Code.
 - C. Granting of the time extension would not be contrary to the original reasons for the granting of the permit.
 - D. The time extension granted shall be for a period not to exceed the period originally granted for performance (i.e., a condition to be performed within one year may be extended for up to one additional year).

Should any of the conditions not be met or substantially complied with in a timely fashion, the Planning Director may initiate the revocation of the Use Permit.

This approval does not, however, sanction the specific plans submitted with the application as they may be subject to change given specific code and regulatory requirements of the affected agencies.

Should you have any questions, please contact Norman Hayashi of the Planning Department at 961-8288.

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William Graham, Chairman
Planning Commission

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cc: Department of Public Works
Department of Water Supply
County Real Property Tax Division
DOT-Highways, Honolulu
Ms. Susan Hunt, Executive Director/Hamakua Health Center, Inc.