

STATE OF HAWAII
GIA
FISCAL YEAR 2017

January 21, 2016

To: Senate Committee on Ways and Means
State Capitol, Rom. 207
Honolulu, HI 96813
Attention: GIA

Submitted by: Po'ailani Inc.
970 N. Kalaheo Ave. # A111
Kailua, HI 96734
Abby Paredes, CEO Phone: 808- 864-0020

COPY

House District 51
Senate District 25

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

XX 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:
Po'ailani Inc.
Dba:
Street Address:
970 N. Kalaheo Drive Suite # A 111 Kailua, HI 96734
Mailing Address:

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:
Name ABBY PAREDES
Title CEO
Phone # 808-864-0020
Fax # 808-254-3343
E-mail aparedes@poailani.org

3. TYPE OF BUSINESS ENTITY:
XX 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:
REQUEST FOR \$500,000.00 ONE TIME DOWN PAYMENT TO PURCHASE A COMMERCIAL PROPERTY FOR A DUAL DIAGNOSIS OUTPATIENT TREATMENT PROGRAM, ADMINISTRATIVE OFFICES, AND INTAKE OFFICE.

4. FEDERAL TAX ID #: _____
5. STATE TAX ID #: _____

7. AMOUNT OF STATE FUNDS REQUESTED:
FISCAL YEAR 2017: \$ \$500,000.00

8. STATUS OF SERVICE DESCRIBED IN THIS REQUEST:
 NEW SERVICE (PRESENTLY DOES NOT EXIST)
XX EXISTING SERVICE (PRESENTLY IN OPERATION)

SPECIFY THE AMOUNT BY SOURCES OF FUNDS AVAILABLE AT THE TIME OF THIS REQUEST:
STATE \$ 0
FEDERAL \$ 0
COUNTY \$ 0
PRIVATE/OTHER \$ 0

TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE:
[Redacted Signature]

ABBY PAREDES, CEO _____ 01/18/2015 _____
NAME & TITLE DATE SIGNED



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:

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

Po'ailani Inc. is a private not-for-profit organization with forty - (40) years of expertise, knowledge, skills, and abilities providing Specialized Residential and Outpatient services for individuals with serious and persistent mental illness plus substance use disorders which is considered a co-occurring disorder. In many cases these individuals additionally have a history of homelessness.

Po'ailani Inc. program services are a specially designed continuum of care delivered with an integrated approach to meet the individual needs of persons with co-occurring disorders that are at a higher risk of crisis, have a slower progression and often experience cyclical episodes of recurrence of their illness and/or relapse. Po'ailani Inc. helps to successfully transition these individuals from an institutional setting into the community or successfully maintain their place in the community.

The full ranges of services offered by Po'ailani Inc. are fully accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) and the Alcohol and Drug Abuse Division (ADAD). Po'ailani Inc. has contracts with the Adult Mental Health Division (AMHD), ADAD, Veteran's Affairs, Quest Insurances such as HMSA, Aloha Care, Kaiser, Community Care Services, United Health Care, and private payers. Services include the following:

Specialized Residential Treatment Program. Po'ailani Inc. offers two Specialized Residential Treatment Programs. In 1998, Po'ailani Inc. opened its first 16 bed site in Kailua, Oahu and was licensed as a Specialized Residential Treatment Facility (STF) by the Health Office of Health Care and Assurance (OHCA). Po'ailani Inc. expanded its services by opening another 16 bed licensed Specialized Residential Treatment Program in 2005.

These two sites include a planned regimen of professionally directed services provided 24 hours per day/7days per week. Services include 25 hours of group counseling sessions with the focus on monitoring, stabilization, mental health education, relapse prevention, medication management, skill building, culturally specific activities, recreational/spiritual

activities, and 12 step recovery meetings. An additional one hour per week of individual counseling is provided. Length of stay is approximately 55 days.

Outpatient Treatment Services. The Outpatient services is located in Kailua and consists of: Day Treatment; Intensive Outpatient; and Aftercare services that focus on continued stabilization, mental health education, relapse prevention and recovery with individualized interventions aimed at preparing the individual for reintegrated into the community while utilizing their newly developed interpersonal skills. Day treatment is fifteen hours per week, Intensive Outpatient is nine hours per week and Aftercare treatment is one hour per week. Each level of care provides one hour of individual treatment planning/counseling per week. The length of stay is approximately 71 days for Day treatment; 80 days for Intensive outpatient; and 76 days for Aftercare.

2. The goals and objectives related to the request:

Po'ailani Inc. is in need of this Capital Grant-In- Aid (GIA) for a \$500,000.00 down payment of the purchase of a commercial building that will house all of the Outpatient Programs, Intake Department and Administrative operations under one roof. Purchasing an office building is expected to reduce the overhead by 50% and allow Po'ailani Inc. to continue the desperately needed services within the community.

Currently, Po'ailani Inc. is leasing two separate commercial properties in Kailua totaling \$19,800.00 per month. One commercial property which consists of two offices is used for Intake and Administration. The second commercial property is utilized for the Outpatient Treatment program and this lease will expire on August 31, 2016.

With the reality of no funding increases in the near future from the Department of Health or Quest Plans, Po'ailani Inc.'s Strategic Plan includes strategies to remain a viable and sustainable organization for the future. Po'ailani Inc. has decided not to renew the lease of the current Outpatient clinic due to the continued rise in costs and instead purchase property in order to combine the Administrative, Intake, and Outpatient offices. The main goal is to receive grants in order to assist in the purchase of the property and reduce the operational overhead costs.

The continuation of leasing commercial properties in today's rising real-estate market places Po'ailani Inc. in a vulnerable financial situation. Po'ailani Inc. believes that funding for the purchase of a commercial building in Kailua would lead to a decrease in operational overhead, while supporting continued services. The current program fee-for-service contracts (Quest, ADAD, AMHD, etc) only pay for treatment services and do not factor in the constant increasing variable costs.

Goal: To purchase a commercial building that reduces operational overhead costs in order to provide a continuation of established services within the community.

Objectives: To reduce operational overhead by 50% in order to continue needed services to the target population in Hawaii.

3. The public purpose and need to be served;

The population with a co-occurring diagnosis of mental illness and substance abuse in Hawaii is in need of treatment. The percentage of adults with a co-occurring diagnosis in Hawaii is 27% while the US average is 21.9% and the US median is 20.0%.¹ In Hawaii, between the years 2009-2014 only 30% of adults received treatment for their mental illness which is lower than the national average.² Up to 49.5% of adults identified having a co-occurring diagnosis while in treatment.³ The Substance Abuse and Mental Health Services Administration (2016), "supports integrated treatment for co-occurring disorders. With integrated treatment, you can address mental and substance use conditions at the same time, often lowering costs and creating better outcomes".⁴

4. Describe the target population to be served; and

The population served at Po'ailani, Inc. is (18) years and older; live in Hawaii; have severe and persistent mental illness, be in a state of crisis (short-term services), be victims of natural disaster and terrorism, or court ordered for treatment; have a confirmed diagnosis of a mental illness combined with a substance abuse diagnosis and 300% poverty level. The target population often faces homelessness and victims of crime. Priority is given to pregnant women and IV drug users.

5. Describe the geographic coverage.

Po'ailani Inc. provides treatment coverage in the Kailua and Kaneohe, Oahu community setting. Po'ailani Inc. accepts referrals from the entire State of Hawaii.

¹ Substance Abuse and Mental Health Services Administration. (2014). Hawaii 2014 Mental Health National Outcome Measures (NOMS): SAMHSA Uniform Reporting System. Retrieved from <http://www.samhsa.gov/data/sites/default/files/URSTables2014/Hawaii.pdf>

² Substance Abuse and Mental Health Services Administration. (2015). Behavioral Health Barometer - Hawaii 2014. Retrieved from http://www.samhsa.gov/data/sites/default/files/State_BHBarometers_2014_1/BHBarometer-HI.pdf

³ Substance Abuse and Mental Health Services Administration. (2015). Behavioral Health Barometer - Hawaii 2014. Retrieved from http://www.samhsa.gov/data/sites/default/files/State_BHBarometers_2014_1/BHBarometer-HI.pdf

⁴ Substance Abuse and Mental Health Services Administration. (2016). Co-Occurring disorders. Retrieved from <http://www.samhsa.gov/co-occurring>

II. Service Summary and Outcomes

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

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

Scope of Work	Tasks	Responsibilities
Meet with Po'ailani Inc. Board of Directors to vote on non-renewal of building leases.	Discussion of strategic plan to reduce costs by purchasing commercial property.	Abby Paredes, CEO and Board of Directors
Meet with First Hawaiian Bank to finance a purchase of a commercial property.	Provide First Hawaiian Bank with 2015 990 and financial statements of Po'ailani Inc. Determine equity of 2 existing properties purchased in 1998 & 2005.	Abby Paredes, CEO and Cathy Sendrey, CFO
Secure realtor to seek suitable commercial property	Put purchase offer for 39 Maluniu Avenue building to Carvill Sotheby's International Realty	Cathy Sendrey, CFO
Submit a Capital Grant In Aid (GIA) request to State of Hawaii for \$500,000.00 to offset set costs for Po'ailani Inc. non-profit organization.	Complete Capital GIA application and submit by January 21, 2016.	Corey Dillman, CCO, Abby Paredes, CEO, Cathy Sendrey, CFO.

2. Provide a projected annual timeline for accomplishing the results or outcomes of the service;
 - Submit Capital GIA by January 21, 2016.
 - Secure a commercial building no later than May 30, 2016.
 - Relocate Intake, Administration and Outpatient programs to new location no later than August 2016.
3. Describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results; and
 - The Executive Leadership of Po'ailani Inc. will meet weekly to discuss the progress of the property acquisition.

- The CEO, CFO and Board of Directors President shall communicate weekly with First Hawaiian Bank and Central Pacific Bank loan officers to evaluate the progress of the purchase of the property.
 - The CFO shall communicate weekly with the realty firm to locate and secure an appropriate commercial property.
 - The CFO shall communicate and provide 2015- 990 and all financial statements as needed to all parties.
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.

The measure of effectiveness is the purchase of the commercial property.

Outcomes:

- Increase additional clinicians
- Increase control of service location
- Reduce annual overhead costs by \$100,000.00
- Increase effective and seamless services to the target population

III. Financial

Budget

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

Please see attached forms.

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
\$125,000	\$125,000	\$125,000	\$125,000	\$500,000

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

Please see attached form.

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.

Po'ailani, Inc. will not be applying for state and federal tax credits.

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.

Please see attached form.

Below is a list of providers that Po'ailani Inc. currently has memorandum of agreements with.

- Po'ailani Inc. is one of the first dual diagnosis treatment facility in the State of Hawaii that has achieved a conditional use permit (CUP2) allowing it to operate and maintain a (16) bed Special Treatment License- (STF) that is community based. Po'ailani Inc. has maintained its STF license with the Department of Health, Office of Health Care Assurance (OHCA) since its inception. The contact person for licensing at OHCA is Suzanne Turla (808) 692-7413.
- Po'ailani Inc. initiated its first contract with AMHD in 1978 adults with a co-occurring diagnosed population. In 1999, funding was further granted because of the U.S. Department of Justice Stipulation and Order to insure that community-based services were sufficient for individuals discharged and diverted from Hawaii State Hospital (HSH). During this time, Po'ailani Inc. developed a strong partnership with AMHD and the HSH to support and facilitate community-based treatment and outpatient continuum of care for the target population. Po'ailani Inc. continues to provide specialized residential treatment, day treatment, and outpatient treatment services. The current contract information is ASO LOG No. 10-212. The contact person is Steven Balcom. The contact number is (808) 586-8282.
- In 1986, Po'ailani Inc. began its first contract with ADAD to provide a continuum of care for the co-occurring target population to include residential treatment, day treatment, and intensive outpatient treatment and outpatient treatment services. Po'ailani Inc. continues to contract with ADAD. The contract is ASO LOG No. 14-078. The contact person is Terri Nakano at (808) 692-7506.
- Po'ailani Inc. works closely with The HOPE Program that was started by Hawaii State Judiciary First Circuit Court Judge Steven Alm in an effort to address the high rates of recidivism. We have had a successful collaboration of both programs since The HOPE Program inception in 2004. The contact person is Judge Alm-HOPE. The contact number is (808) 539-4909.

- Po'ailani Inc. contracts with Community Care Services (CCS) since 1995 and has provided community-based residential treatment services, day treatment services, outpatient treatment services and group housing. The contact person is Jeanne Long. The contact number is (808) 675-7651.
- Po'ailani Inc. contracts with Ohana Care Health Plan and has provided community-based residential treatment services, day treatment services, outpatient treatment services and group housing. The contact person is Jeanne Long. The contact number is (808) 675-7651.
- Po'ailani Inc. contracts with the Veteran's Administration (VA) to provide Specialized Residential and outpatient treatment services to the co-occurring population. VA contract 459-NC1020. The contact person is Richard Valesquez (808) 433-8277.
- Po'ailani Inc. contracts with Aloha Care to provide Specialized Residential and outpatient treatment services to the co-occurring population. Pat Kelly is the contact person. The contact phone number is (808) 973-2475.
- Po'ailani Inc. contracts with HMSA (Commercial and Quest plans) to provide Specialized Residential and outpatient treatment services to the co-occurring population. Jerry Mitchell is the contact person. The contact phone number is (808) 948-6330.
- Po'ailani Inc. contracts with Kaiser Commercial and Quest plans to provide Specialized Residential services to the dual diagnosed population. Shari Ilalaole is the contact person. The contact phone number is (808) 432-5777.
- Po'ailani Inc. contracts with United Health Care to provide Specialized Residential and outpatient treatment services to the co-occurring population. Tony Robbins is the contact person. The contact phone number is (888) 980-8728.
- Po'ailani Inc. has been successful in recruiting and retaining qualified staff. One of the strong successes of Po'ailani Inc. has been the consistent executive leadership that has been with Po'ailani Inc. for over nineteen – (19) years.
- Po'ailani Inc.'s Medical Director, a Psychiatrist (American Society of Addiction Medicine Certified) who provides ongoing consultation and training to all direct services staff. Additionally, the Medical Director meets with each individual that is newly admitted into the Specialized Residential Program to ensure clinical and pharmacological appropriateness to the level of care. The Medical Director has been employed with Po'ailani Inc. for almost 20 years.
- The Clinical Director is a licensed psychologist and is a certified substance abuse counselor (CSAC) who has been with Po'ailani Inc. for over seventeen – (17)

years which demonstrates a strong team commitment and consistency in the training and supervision of staff. This longevity of his knowledge, skills and abilities offers guidance to those entering into the co-occurring diagnosis field.

- The Clinical Supervisor and clinicians that provide comprehensive assessments and integrated treatment are licensed and have masters degrees in the behavioral health field and many are certified substance counselors (CSAC) or are working towards. Po'ailani Inc. has currently been successful in recruiting appropriate qualified clinicians however there continues to be barriers due to many clinicians' challenges working with the co-occurring population. The counselors that we currently employ are very dedicated to the target population.
 - A Registered Dietician who has been employed by Po'ailani Inc. for over eighteen – (18) years provides a detailed menu plan as well as oversight of special diet orders for the individuals residing in the Specialized Residential Program. Additionally the Registered Dietician provides nutritional education to all individuals one time per month for one hour and provides staff training and education on following STF requirements under Title 11 Chapter 98 and the Office of Health Care and Assurance under the State of Hawaii Department of Health.
 - All other support staff has at least five to twenty years of experience working with the target population and receives extensive cross training by the Clinical Director and Medical Director. Staff also receives daily supervision by a Qualified Mental Health Provider who is a license Advance Practice Registered Nurse.
6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2015.

Unrestricted Current Assets as of December 31, 2015 is \$1,048,338.31

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.

B. Experience and Capability

Po'ailani Inc. has in-depth experience providing Specialized Residential Treatments services and Outpatient Treatment services to the co-occurring population in Hawaii. Since 1986, Po'ailani Inc. has historically demonstrated full compliance with all regulatory agencies to include full quality management and business/fiscal compliance with the State Department of Health's various agencies such as AMHD, ADAD, and

OHCA; as well as annual independent audits in which no material findings have ever been found. A good indicator of Po'ailani Inc.'s experience and capability is reflected in the high scores received from four separate agencies who audit the program throughout the year. These agencies are CARF, OHCA, ADAD, and the AMHD.

The results of these audits are described below:

Commission on Accreditation of Rehabilitation Facilities (CARF)

CARF-accredited programs ensure the highest industry standards possible, providing risk reduction and accountability. CARF surveyed Po'ailani Inc. in February 2013. Po'ailani Inc. was awarded another full three year accreditation for all sites to March 2016. This is the fifth 3-year accreditation that Po'ailani Inc. has received.

Office of Health Care Assurance (OHCA)

Po'ailani Inc. Specialized Residential Treatment program is licensed as a Specialized Treatment Facility (STF) under the guidelines of HRS Chapter 98. OHCA performed its annual inspection in May 2014. OHCA favorably noted seven items: General Maintenance; Personnel; Disaster Preparedness and Fire; Orientation and Training; Dietary Services; Resident Records; Medications Policy and Procedures. The Nutritionist audited Po'ailani Inc. food, meal, storage, and dietary practices and did not find any deficiencies for dietary services. OHCA favorably noted and accepted the Po'ailani Inc.'s Emergency Plan of Action to be used during any natural or man-made disaster. Po'ailani Inc. was awarded another year of licensure by OHCA for the Kailua location which is valid until August 31, 2016 and the Kaneohe location which is valid until 11/30/2016. OHCA notified Po'ailani Inc. that since it has consistently done well on its audits, they would audit Po'ailani Inc. in 2016.

Alcohol and Drug Abuse Division (ADAD)

ADAD monitored Po'ailani Inc. on 10/30/14, 2015 and scored 100%. The monitoring was for accreditation and licensure purposes. Po'ailani Inc. was awarded Full Accreditation for the period until 11/30/2016 for both Specialized Residential Treatment Facilities. ADAD notified OCHA, Department of Human Services/Food Stamps; and the Food and Nutrition Services/Honolulu Office of their findings. Po'ailani Inc. was audited on 06/23/2014, 11/18/2014, 01/09/2015 and 10/29/2015 and scored 100%.

Adult Mental Health (AMHD)

AMHD monitored Po'ailani Inc. on 05/19/2014 for the Annual Business Compliance for Fiscal Year 2013-2014 and received a score of 100%. AMHD did not complete an Annual Business Compliance for the fiscal year 2014-2015. On 11/24/2014 and 11/19/2015 Po'ailani Inc. was audited by AMHD using the General Review Tool and as well as the Performance Management Monitoring Tool-Service Review Tool for Specialized Residential Services, and Dual Diagnosis Day Treatment services all of which received a score of 100%.

The Hawaii State Hospital and Kahi Mohala utilize Po'ailani Inc.'s services and refer individuals to the Specialized Residential Treatment and Outpatient Treatments programs. In addition, Po'ailani Inc. has been a vital partner to the Mental Health

Centers state-wide, Health Care providers, and the Criminal Justice System. Po'ailani Inc. has been awarded multiple contracts from various Department of Health funding to provide Specialized Residential Treatment, Day Treatment and After Care services statewide for the target population.

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.

In the event that Po'ailani Inc. is awarded the \$500,000.00 GIA, Po'ailani Inc. shall use this money as a down payment on a commercial property located at 39 Maluniu Avenue, Kailua Hawaii. The fee simple BMX-3 property listed price is \$2,725, 000.00. The land is 7,012 square feet with total building space of 5,340 square feet. The tenure is fee simple. Po'ailani Inc. has placed an offer with Carvill Sotheby's International Realty and waiting to see if the offer has been accepted.

The Executive Leadership of Po'ailani Inc. has conducted a walkthrough of this commercial building. There is ample room to accommodate the entire Intake Department that consists of (4-full time employees), the Administrative Department (11- full time employees), and the Outpatient Department (8-full time employees). Combining the Intake, Administration and Outpatient Departments within one building will accomplish two benefits of purchasing a property. One, the purchase of the property will result in a more effective, efficient and smoother admissions and transitions of individuals into the program. Secondly, Po'ailani Inc. will reduce costs by purchasing the building and no longer be dependent on rising commercial leases.

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.

Not applicable. This GIA is specifically for down payment funds to purchase a commercial property.

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.

The governance and leadership of Po'ailani provides effective and ethical leadership, resources and stability for the organization to achieve its stated mission. The governance and management functions have a shared responsibility for establishing policies and procedures in order to maintain high standards of business and clinical operations. The efficiency and effectiveness of the organizational structure is planned and maintained in response to the needs of the service delivery and contractual requirements.

See attached Organizational charts.

1. Agency-Wide
2. Program-Wide

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.

Chief Executive Officer	\$124,295.81
Chief Operating Officer	\$111,826.54
Chief Compliance Officer	\$103,334.40

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.

Po'ailani Inc. is not party to any litigation.

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.

Po'ailani Inc.'s Specialized Residential Treatment program located at 553 Kawainui Street, Kailua, 45-567 Pahia Road Kaneohe, and the Outpatient Program are currently CARF and ADAD accredited. Both of the Specialized Residential Treatment facilities are licensed by OHCA.

C. 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.

This grant will not be used to support or benefit a sectarian or non-sectarian private educational institution.

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
 - Continue providing outpatient treatment services
 - Continue providing intake assessments and placements
 - Continue administrative operations
 - Cost saving of approximately \$100,000.00 annually with the purchase of the commercial property as compared to leasing property.

- (2) Not received by the applicant thereafter.
 - Seek support from First Hawaiian Bank to apply for a loan using the existing equity from two properties already purchased.
 - Seek other grant opportunities.
 - Seek affordable commercial property to lease on the windward side of the Island of Oahu.

E. 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 Individual Affairs that is dated no earlier than December 1, 2015.

See attached a current Certificate of Good Standing.

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2016 to June 30, 2017

Applicant: Po'ailani, Inc.

BUDGET CATEGORIES	Total Annual Program Cost	Total AMHD/State Funds Requested (b)	Total ADAD/State/Federal Funds Requested (c)	Total Managed Care Funds Requested (d)
A. PERSONNEL COST				
1. Salaries	467,360	182,270	4,674	280,416
2. Payroll Taxes & Assessments	43,000	16,770	430	25,800
3. Fringe Benefits	70,000	27,300	700	42,000
TOTAL PERSONNEL COST	580,360	226,340	5,804	348,216
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island				
2. Insurance	25,000	9,750	250	15,000
3. Lease/Rental of Equipment	7,639	3,003	76	4,560
4. Lease/Rental of Space	133,000	51,870	1,330	79,800
5. Staff Training	1,000	390	10	600
6. Supplies	1,600	624	16	960
7. Telecommunication	15,000	5,850	150	9,000
8. Utilities	15,000	5,850	150	9,000
9. Repairs/Maintenance	15,000	5,850	150	9,000
10. Professional Fees	18,000	7,020	180	10,800
11. Licenses/Permits	2,500	975	25	1,500
12. Office Expense	8,000	3,120	80	4,800
13. Automobile Expense	1,500	585	15	900
14. Advertising Expense	1,000	390	10	600
15. Real Property Tax	300	117	3	180
16. Dues and Subscription	300	117	3	180
17. Postage and Freight	500	195	5	300
18. Outside Services	2,500	975	25	1,500
19				
20				
TOTAL OTHER CURRENT EXPENSES	247,839	96,681	2,478	148,680
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
TOTAL (A+B+C+D+E)	828,199	323,021	8,282	496,896
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total Program Funds Requested		Cathy Sendrey (808) 263-3500		
(b) Total AMHD/State Funds Requested	323,021	Phone		
(c) Total ADAD/State/Fed Funds Requested	8,282	1/19/16		
(d) Total Managed Care Funds Requested	496,896	Date		
TOTAL BUDGET	828,199	Janet R. Paredes Name and Title (Please type or print)		

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2016 to June 30, 2017

Applicant: Po'ailani, Inc.

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Primary Counselor	1	\$47,840.00	100.00%	\$ 47,840.00
Primary Counselor	1	\$54,080.00	100.00%	\$ 54,080.00
Primary Counselor	1	\$45,760.00	100.00%	\$ 45,760.00
Primary Counselor	1	\$45,760.00	100.00%	\$ 45,760.00
Primary Counselor	1	\$45,760.00	100.00%	\$ 45,760.00
Outpatient Administrative Assistant	1	\$35,360.00	100.00%	\$ 35,360.00
Intake Assistant	0.5	\$31,200.00	50.00%	\$ 15,600.00
Intake Assistant	0.5	\$31,200.00	50.00%	\$ 15,600.00
Intake Specialist	0.5	\$41,600.00	50.00%	\$ 20,800.00
Intake Specialist	0.5	\$41,600.00	50.00%	\$ 20,800.00
Accounts Receivable Specialist	0.5	\$41,600.00	50.00%	\$ 20,800.00
Accounts Receivable Specialist	0.5	\$41,600.00	50.00%	\$ 20,800.00
Accounts Payable Specialist	0.5	\$41,600.00	50.00%	\$ 20,800.00
Clinical Director	1	\$57,600.00	100.00%	\$ 57,600.00
TOTAL:				467,360.00
JUSTIFICATION/COMMENTS:				

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2016 to June 30, 2017

Applicant: Po'ailani, Inc.

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
N/A			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:			\$ -	
JUSTIFICATION/COMMENTS:				

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

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2016 to June 30, 2017

Applicant: Po'ailani, Inc.

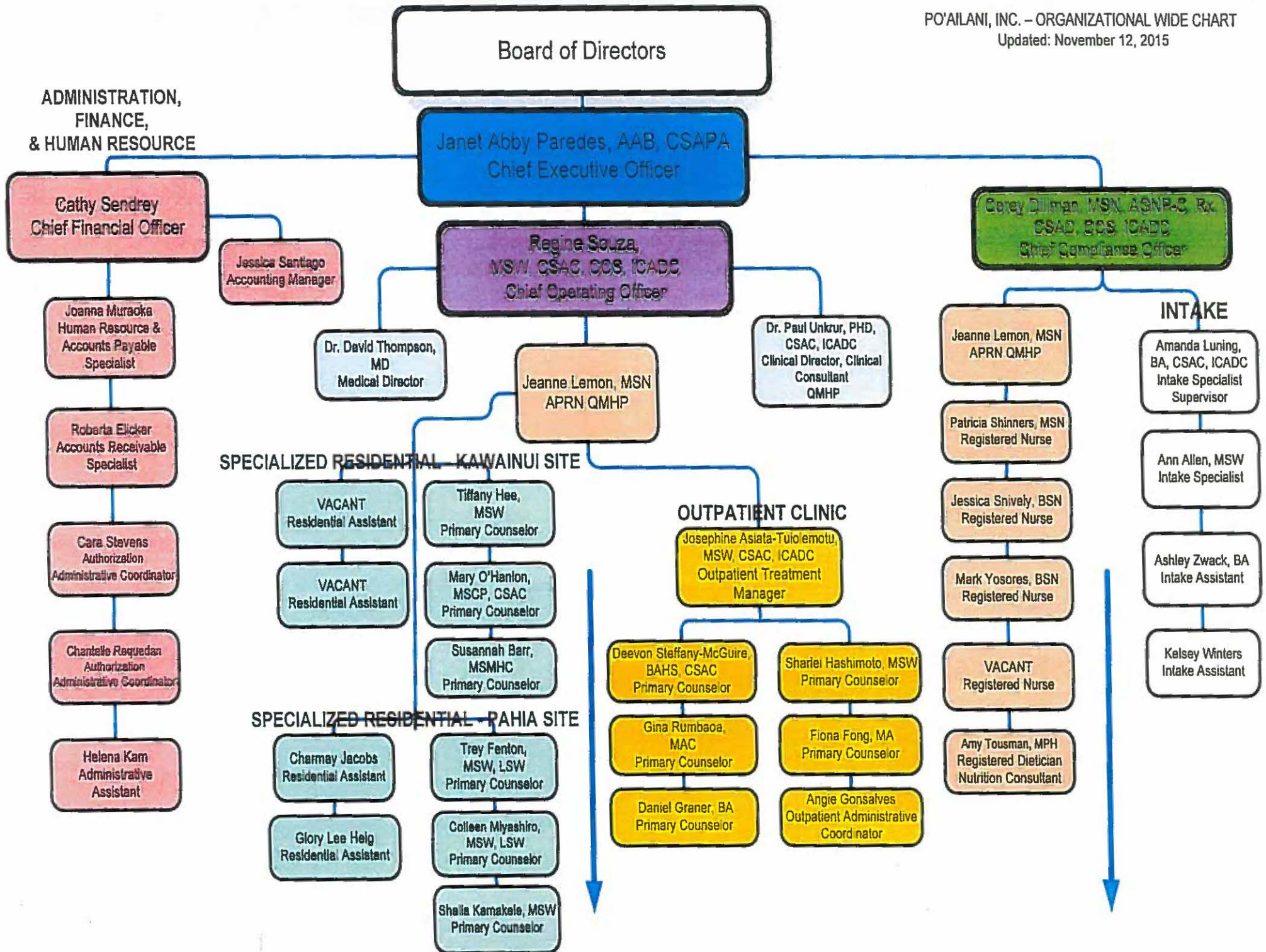
FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2014-2015	FY: 2015-2016	FY:2016-2017	FY:2016-2017	FY:2017-2018	FY:2018-2019
PLANS	N/A					
LAND ACQUISITION	N/A					
DESIGN	N/A					
CONSTRUCTION	N/A					
EQUIPMENT	N/A					
TOTAL:	N/A					
JUSTIFICATION/COMMENTS:						

GOVERNMENT CONTRACTS AND / OR GRANTS

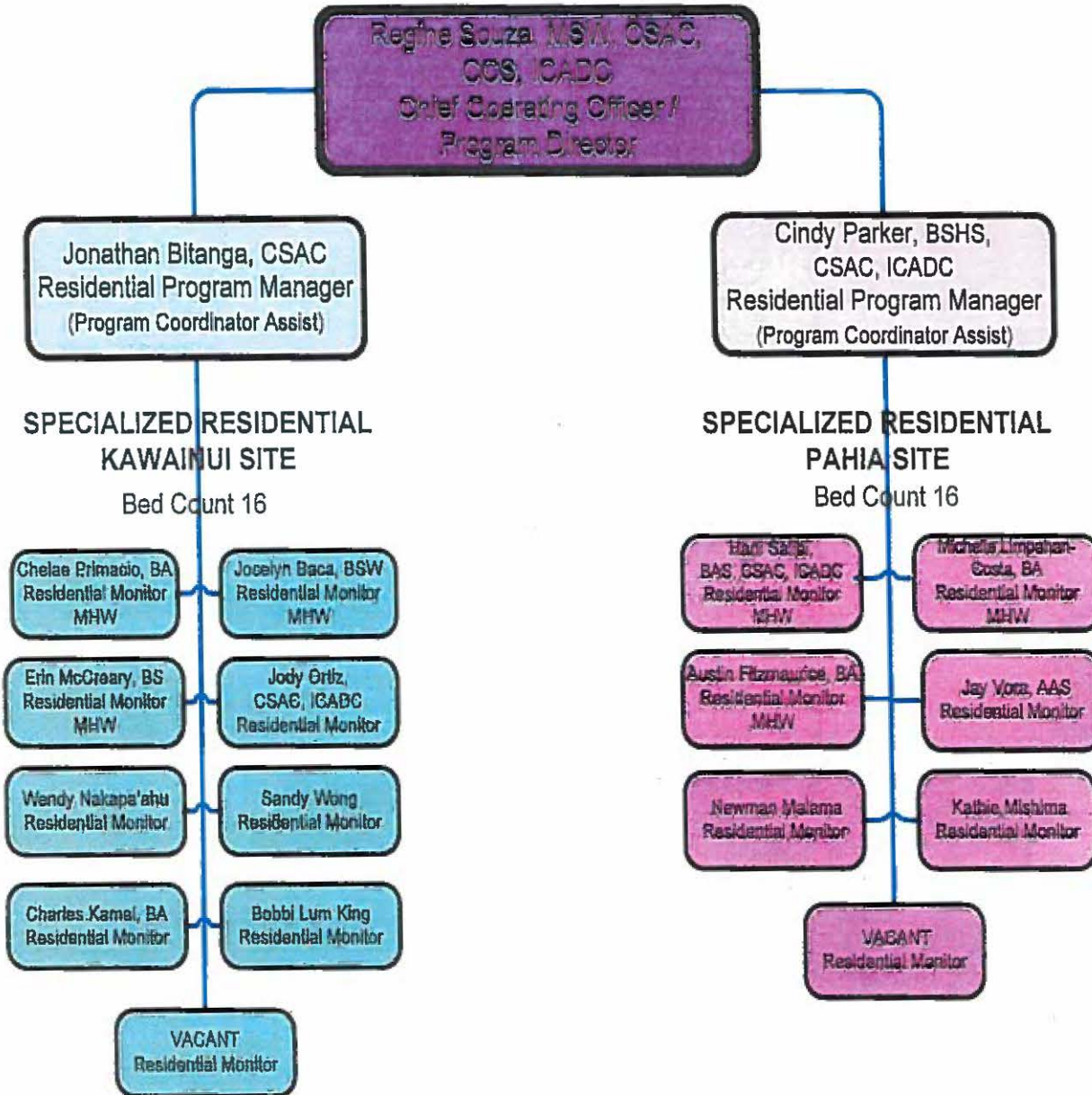
Applicant: Po'ailani, Inc.

Contracts Total: 3,420,785

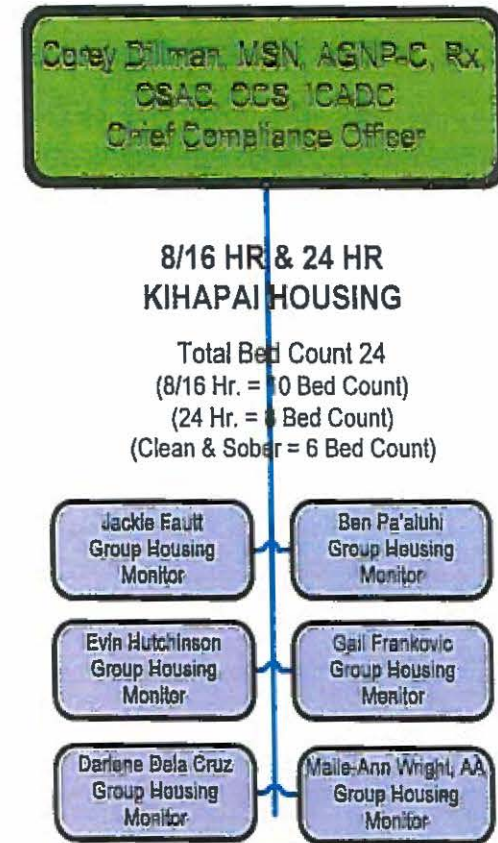
	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)	CONTRACT VALUE
1	Adult Mental Health Division	4/1/15-3/31/16	Department of Health	State	\$ 475,200.00
2	Adult Mental Health Division	5/1/15-4/30/16	Department of Health	State	\$ 2,720,332.80
3	Alcohol and Drug Abuse Division	7/1/15-6/30/16	Department of Health	State	\$ 195,252.00
4	EC Impact AUW Grant	1/1/15-12/31/17	Aloha United Way	Federal	\$ 30,000.00
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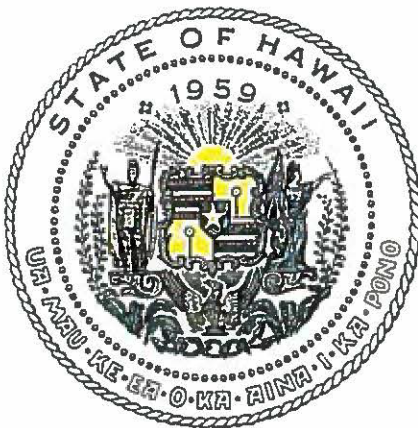


SPECIALIZED RESIDENTIAL



COMMUNITY HOUSING





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

PO'AILANI, INC.

was incorporated under the laws of Hawaii on 10/31/1978 ; 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.



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 18, 2016



Director of Commerce and Consumer Affairs



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: **PO'AILANI, INC.**

DBA/Trade Name: **Poailani, Inc.**

Issue Date: **01/13/2016**

Status: **Compliant**

Hawaii Tax#: [REDACTED]
 FEIN/SSN#: [REDACTED]
 UI#: XXXXXX1494
 DCCA FILE#: 37900

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	Exempt
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
	The entity is not in compliance with the requirement and should contact the issuing agency for more information

Not
Compliant

Carvill

Sotheby's

INTERNATIONAL REALTY

39 Maluniu Avenue



Property Location

Rarely available fee simple BMX-3 property available in thriving Kailua town. This family owned property has hosted a number of shops in the past from Aarons Dive shop to Agape Christian Book store. The downstairs retail space is currently empty and the upstairs tenants are on a month to month contract.

Property Summary

Land:	7,012 square feet
Total Bldg:	5,340 square feet
Tenure:	Fee Simple
Annual Tax:	\$13,068.36
Zoning:	BMX-3

List Price

\$2,725,000

39 Maluniu Avenue
Kailua, HI. 96734



Contact:

Scott Carvill (R)
Cell 808.216.0089
scott@carvillsir.com

connect with us



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Kailua, Hawaii 96734