

ALOHA MEDICAL MISSION

January 18, 2018

Bringing Hope and Changing the Lives of the People We Serve Overseas and in Hawai'i

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Senator Donovan Dela Cruz, Chair Senate Ways and Means Committee State Capitol, Room 208 Honolulu, Hawaii 96813

ATTN: STATE GRANT-IN-AID APPLICATION

Dear Senator Donovan Dela Cruz:

Aloha Medical Mission is submitting its application for Grants and Subsidies to support Hawaii's only free Dental Clinic.

If there are any questions, please contact Colleen Minami, grant writer and manager, at (808) 780-5793 or colleenminami@hotmail.com.

Thank you for your time and consideration on this matter.

Warmest Regards,

Toni Muranaka, Executive Director

THE TWENTY-NINTH LEGISLATURE House District(s 28 Log No: APPLICATION FOR GRANTS **CHAPTER 42F, HAWAII REVISED STATUTES** Senate District(s) 13 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: 2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION: Legal Name of Requesting Organization or Individual: Name Colleen Minami ALOHA MEDICAL MISSION Title Grant writer and manager for this GIA Dba: Phone # (808) 780-5793 Street Address: 810 N. Vineyard Blvd. Fax # None Honolulu, Hawaii 96817 E-mail colleenminami@hotmail.com Mailing Address: Same as above 3. TYPE OF BUSINESS ENTITY: 6. DESCRIPTIVE TITLE OF APPLICANT'S REQUEST: Non Profit Corporation Incorporated in Hawaii For profit Corporation Incorporated in Hawaii ALOHA MEDICAL MISSION, HAWAII'S ONLY FREE DENTAL LIMITED LIABILITY COMPANY CLINIC, PROVIDING BASIC DENTAL SERVICES, SUCH AS Sole Proprietorship/Individual ORAL EXAMINATIONS, X-RAYS, CLEANINGS, FILLINGS, OTHER EXTRACTIONS, AND EMERGENCY CARE. 7. AMOUNT OF STATE FUNDS REQUESTED: 4. FEDERAL TAX ID #: 5. STATE TAX ID #: FISCAL YEAR 2019: \$ 151,762.00 8. STATUS OF SERVICE DESCRIBED IN THIS REQUEST: NEW SERVICE (PRESENTLY DOES NOT EXIST) SPECIFY THE AMOUNT BY SOURCES OF FUNDS AVAILABLE ☐ NEW SERVICE (PRESENTLY DOES NOT EXIST)

☐ EXISTING SERVICE (PRESENTLY IN OPERATION) AT THE TIME OF THIS REQUEST:

	STATE \$ 77,648.76
	FEDERAL \$ 0.00
	COUNTY \$ 31,250.50
	PRIVATE/OTHER \$ 179,025.00
er an	

Toni Muranaka, Executive Director

1.17.18 DATE SIGNED

Application for Grants

Please check the box when item/section has been completed. 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;

Aloha Medical Mission (AMM) is a secular 501 (c) (3) non-profit organization founded in 1983 by a group of volunteer physicians who traveled to the Philippines to do cleft lip surgery on children of poor families. The mission expanded and has reached many countries and thousands of people in the last 34 years. The mission expanded and has reached over 18 countries and thousands of people, has provided solar kits so that rural clinics can operate at night, and has provided many amputees with mechanical hands through the Ellen Meadows Foundation.

In 2002, AMM relocated Hawaii's only free dental clinic to Palama Settlement in Honolulu, bringing much needed services to our local community and targeting those with limited or no access to dental care. AMM free dental clinic provides exams, cleanings, fillings, extractions, emergency treatment and education to the poor and uninsured. There are thousands of Hawaii residents with limited or no access to dental care. AMM's local mission is to serve this marginalized group. We offer a specialized restorative dentistry program for women at high-risk for domestic violence or are transitioning out of prison and are looking for gainful employment. The First Smile program, an interactive program designed for preschool and kindergarten students, was restarted in 2016. It teaches children at an earlier age to develop good oral health habits, which would continue throughout their life time, and hopefully in turn, be passed onto their Ohana.

The stability of the clinic has been demonstrated in 2017 by the maintenance of paid dental staff; expansion of operational hours to 36 hours per week for 1,740 visits; increase in volunteer dentists from 11 to 17; continuation of the Welcome Smile program for 27 abused and incarcerated women; restart of First Smile, health program for 611 keikis; and the implementation of an outreach dental screening program.

 The goals and objectives related to the request;
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The goals are to:

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- Increase the number of poor and needy patients treated.
- Ensure clinic hours.
- Publicize awareness of the free dental clinic and its programs Welcome Smile and First Smile – through outreach efforts and community events.
- Increase awareness of oral health prevention in the community through First Smile presentations.
- Advance the clinic as a training facility for student interns interested in the dental field who will eventually become our future volunteers.

To reach these goals, the following objectives will be met within the grant period:

- Increase the number of dental visits by 12% (from 1800 to 2,016).
- Maintain the number of new Welcome Smile women treated at 30.
- Secure another clinic site before current lease ends.
- Participate in or conduct at least 10 outreach activities in the community, such as an outreach dental screening clinic, health fairs, conferences, etc.
- Reach at least 400 individuals (children and adults) through First Smile presentations.
- Train and mentor at least 20 students interested in the dental arena.
- Recruit at least 2 new volunteer dentists.

There are many public health implications for poor oral health. Poor oral health impacts a person's ability to eat, speak, work, communicate, and learn. The two most common oral diseases are tooth decay and gum disease. Health inequalities exist by race, age, geography, and income with most oral disease occurring among the low-income population. Access to quality care is critical to eliminating health disparities and improving the quality and years of healthy living for all persons in the United States. One of the key recommendations in the 2015 Hawaii Oral Health report was to expand access to underserved, high-risk populations. This is exactly the population that AMM currently serves.

AMM is in a position to offer basic preventive and treatment services to the underserved Medicaid and Medicare recipients and to those uninsured due to their immigration status, the working poor, and those lacking financial means. We know that oral disease remains a significant issue in our community with an estimation that 475,000 residents or 38% of Hawaii's population have limited or no access to dental care. Hawaii Dental Insurance (HDS) data indicates that at least 30% of the adult population in Hawaii do not have dental insurance. In addition, Hawaii lacks dentists who are willing to provide care for the uninsured, underinsured, and underserved. This group is invariably turned away from private dental providers when requesting an office visit. This is the group which inappropriately seeks acute care in hospital emergency rooms.

In 2016 the State of Hawaii Department of Health released data on emergency room visits from 2006 to 2012, showing that there was a 67% increase in such visits with 3,000 of them due to preventable dental problems, which added to the \$8.5 million cost of care. The average cost for a preventable oral health visit to the emergency room is about \$2,834. In addition, emergency

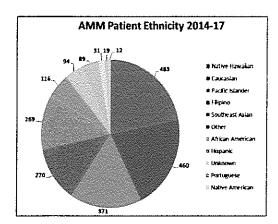
rooms are not equipped to treat dental problems and these dental patients are referred to dental clinics which many cannot afford. In addition, Medicaid for adults does not cover basic dental services, only extractions, and many Medicare recipients do not have dental coverage. Even with the Affordable Care Act, there are still many people without insurance for dental care.

The US Department of Labor, 2015, in Honolulu County, reported that the non-seasonally adjusted unemployment rate was 4.1%, a group not likely to have health insurance. Our homeless population continues to grow and there is an estimated 15,000-17,000 Micronesians who have relocated from their homeland, many of whom are not insured or are unable to pay for care. According to the Kaiser Foundation, Honolulu 2013 Community Health Needs Assessment, 9.6% of Honolulu's people live below the federal poverty level, including 12.3% of its children and 7.5% of people 65+ years or older. According to the Hawaii Appleseed Center for Law and Economic Justice, 20.8% of these residents are Native Hawaiians and other Pacific Islanders. Hawaii has the sixth highest rate of poverty nationally.

According to the 2017 ALICE (Assets Limited, Income Constrained, Employed) Report on financial hardships done by the United Ways in 16 states, including Hawaii, many employed households earn more than the Federal Poverty Level (FPL) but cannot meet the minimal costs of five basic necessities for survival which are housing, child care, food, transportation, and health care. In 2017, there were 165,013 or 37% ALICE households and another 47,066 or 11% living in poverty for a total of 48% of Hawaii households having difficulty paying for the basic necessities; thus, preventing them from becoming stable and self-sufficient. Of the senior (65 years and older) households, only 9% live in poverty, demonstrating that government benefits are effective in reducing poverty; however, 37% of them qualify for ALICE which in reality means these same benefits do not help seniors gain financial stability, especially in Hawaii where the cost of living is high forcing seniors to continue working to make ends meet. What this means is that the FPL is no longer a realistic measure of financial hardship in households in Hawaii.

Since Hawaii's State Division of oral health was eliminated in 2009, monitoring of oral diseases within our state population has been minimal. According to the Pew Report on States, 2012, Hawaii's report card on dental health is "F". We know that this remains a significant issue in our community.

4. Describe the target population to be served; and

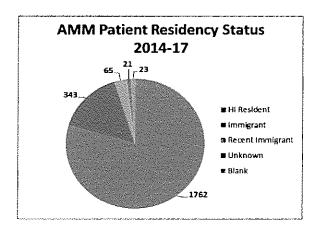


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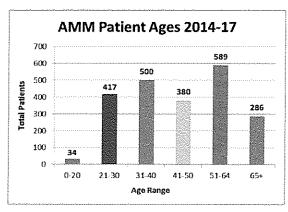
The ethnic composition of patients during this span of time was Southeast Asians, including Filipinos, 24%; Native Hawaiians, 21.8%; Pacific Islanders, 16.7%; Caucasians, 20.7%; and African Americans, 4%.

Dental care is not typically seen as a priority so many times it is excluded from health care plans. Less than 1% of all the health insurance plans on the exchange include adult dental as part of the package and often the out-of-pocket deductible for dental services is an amount that the low to moderate-income population, whom we serve, cannot afford. In future years, there will be fewer resources to care for this growing population of the underprivileged. Notably, women will excessively suffer because many with no insurance or ability to pay are reluctant to seek dental care, resulting in a host of adverse health consequences and higher medical and dental costs.

One of the specialized populations that we serve through our Welcome Smile program is women who have survived abuse or have been incarcerated. Women suffer disproportionately in violent relationships which include physical and emotional injury that puts them at risk for many health complications. They are often in a high-risk situation with great difficulty in affording services to address the impacts of years of neglect or physical abuse on their overall health and dental health in particular. Many have difficulty accessing not only basic care but also expensive restorative treatment. When women have major issues with their teeth, it significantly impacts their marketability while looking for a job and becomes a barrier to stable employment and even affects verbal and nonverbal communication.



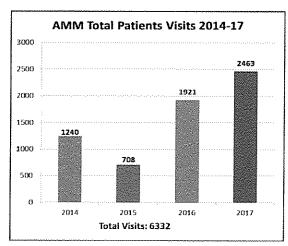
From 2014 to 2017 there were 2,214 patients who came to the clinic, and of that number 79.5% (1,762) were Hawaii residents and 18% (408) were immigrants.



The average age of our patients from

2014 to 2017 remained fairly consistent and are as follow: 51 to 64 years of age -- 26.6% (589); 31 to 40 years -- 22.6% (500); 21 to 30 years -- 18.9% (417); 41 to 50 years -- 17% (380) and over 65 years -- 12.9% (286).

Forty percent (844) of our patients were unemployed; 26.8% held jobs; 6.5% (138) were retired; 4% (91) were disabled; and 3% (70) were students. Those employed may have been part-time which meant that employers were not obligated to offer health insurance. Ninety-one percent (1,941) of our patients had incomes of \$25,000 and below and 64% (1,422) were uninsured. Of the 741 insured patients, 35.5% (277) had QUEST or Medicaid and 3.6% Medicare.



In 2015 individual patients numbered 268.

which was a 40% decrease from 2014 of 454 but in 2016 the numbers came back up for a 63.8% (741) increase and in 2017 a 7% (801) increase. Of the total patient visits (6,632) from 2014 to 2017, in 2016 there was a dramatic increase to 63.8% (741) and in 2017 another increase of 22% (2,463), which reflects the stability of clinic and the sustainability of services in the last 2 years.

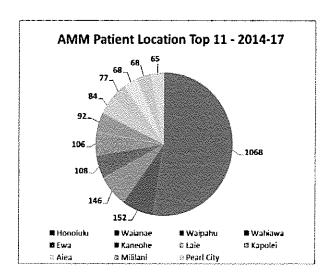
The ALICE population consists of the "working poor" whose income is above the FPL but below the ALICE Threshold. In 2015 housing accounted for 23% of the Household Survival Budget; child care, 20%; food, 17%; transportation, 9%; and health care 10%. In urban Honolulu, which includes Kalihi Palama, 45% of the households are below the ALICE Threshold and live in poverty. In addition, several demographic groups in Hawaii are more likely to fall into the ALICE population, such as women, those with disability, undocumented or unskilled immigrants, facing language barriers, and formerly incarcerated people. Families headed by

single women with children struggle financially and account for 17% of all Hawaii families with children.

The other program under the Dental Clinic is First Smile, which targets another one of our special population, preschool and kindergarten students, in underserved communities to help them become knowledgeable about good oral health practices and habits, which they will carry on throughout their lifetime. It is also anticipated that young children will take these habits home and in turn educate their own families about dental health prevention.

Our target population includes seniors, domestic violence victims, homeless individuals, students, underserved immigrants and the "working poor", individuals who work but do not have health insurance or have been unable to secure dental insurance. As the only free dental clinic, AMM is the safety net for this gap group.

5. Describe the geographic coverage.



Since 2002 AMM dental services have reached all across Honolulu county. From 2014 to 2017 out of 2,182 patients served, 23.6% (481) of our patients came from Leeward Oahu, including Waianae; 15% (309) from Central Oahu, including Wahiawa; and 8.6% (176) from Windward Oahu, including Laie but the largest majority 52.5% (1,068) came from Honolulu, which includes the Kalihi Palama area because of the easy accessibility of the clinic to the surrounding community, including public housing. Hawaii residents numbered 79.5% (1,762) and immigrants 18%.

There are a variety of risk factors in the community we serve, which points to a reason for AMM to provide services via a free dental clinic. The Kalihi-Palama district has a federal designation as a medically underserved population, a low-income population area and a health professional shortage area for mental and dental health. AMM falls in the Palama Census Tract #55 where 67% of residents are low to moderate income (LMI) and about 50% of our patients reside in the

Kalihi area. However, the clinic serves the entire state if patients are willing to come to Oahu and are eligible.

The funding requested will help to secure paid dental staff to expand the operation of the free clinic to all of Oahu, to provide free basic, dental care to our target population, and to continue the dental programs -- Welcome Smile and First Smile.

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 Clinic's free basic dental procedures include examinations, x-rays, fillings, extractions, emergency treatment and health education. Within the last year AMM hired a dentist/dental director, 2 dental hygienists, and another dental assistant for a total of 3. These positions working with our seventeen (17) volunteer dentists will allow greater stability of operations and expansion of our clinic services. We will be able to sustain clinic hours to 5 days per week for about 36 hours per week; thus, increasing the availability of appointments. We have also implemented a "walk-in" policy to help reduce the no-show rate and the wait list. We plan to hire another part-time dental assistant to cover when our regular employees are on leave, which will help to distribute the work load with the remaining staff. This grant activity will help us to sustain the professional dental services of the dentist, dental assistants/receptionist, and dental hygienist and volunteer dentists, which will in turn benefit the uninsured and underserved in the community.

AMM will perform the following tasks and responsibilities:

Increase the number of dental visits by 12% (from 1800 to 2016).
 Our services are interim and basic and are meant to complement the low-cost clinics without duplicating services, thereby, leveraging our resources more efficiently. We also ensure that our patients are referred to the low-cost clinics for ongoing comprehensive dental care.

Since 2016 AMM has been able to sustain and stabilize clinic operations to 5 days per week, utilizing all of our volunteer dentists and clinic staff. In 2017 there was a 22% increase in dental visits from 1,921 to 2,463 and a 7% increase in Welcome Smile women treated from 25 to 27. Unexpectedly, the dental hygienist and one of the dental assistants both resigned; however, we were able to hire another dental hygienist and another dental assistant fairly quickly thanks to continued funding from the State GIA, which prevented disruption to clinic services.

By securing additional dental staff, such as another dental assistant, we can grow our capacity, schedule clinic every day of the work week, and have coverage when our regular staff is on leave. The dental assistants will continue one-to-one oral health education with patients being treated

while the dental hygienist will conduct First Smile presentations to children in preschools and elementary schools and parents. As of November 2017, there were 14 student presentations to 7 schools, reaching 265 children and 19 parents.

The dental hygienist will not only provide dental cleaning and conduct First Smile presentations but also do outreach into the community through dental screenings. She has already started at the Leeward District Center under the Honolulu Community Action Program by training the student nurses with the Hawaii Pacific University program on dental screening. She will also be going out with the John A. Burns School of Medicine (JABSOM) Project HOME, a van providing medical services to the homeless. She will also expand her reach of First Smile by conducting "Train the Trainer" sessions with Farrington High School Health Academy (FHA) students and another possibility will be Waipahu High School. These students in turn will go out as volunteers under AMM doing First Smile presentations in the community. Another dental hygienist, hired in 2017, will continue to provide dental cleaning one day a week in order to avoid any wait list.

We have had a steady flow of patients, being the only free dental clinic on Oahu. We have positive relationships with our referral sources and with some further work and communication; we can quickly scale up the number of referrals to our clinic. If our target population can access dental care before reaching the point of seeking acute pain relief in an emergency room, then we are positively impacting our clients and the health care system. We will give priority scheduling to patient referrals from our partner social service programs, which serve especially high need groups and encourage walk-ins.

2) Maintain the number of new Welcome Smile women treated at 30. We will enroll at least 2 to 3 new women per month under Welcome Smile, who have survived domestic violence or are transitioning out of prison and looking for stable employment, by providing restorative dental treatment. Funding from the State GIA will greatly assist in the maintenance of this program but other funding sources also need to be sought because the cost per woman is estimated to be \$2,500.

Our current referral partners for Welcome Smile include YWCA Fern Hurst, a transitional housing for women leaving prison, Pu'a Foundation, Domestic Violence Action Center (DVAC), Parents and Children Together (PACT), Salvation Army Pathway of Hope, Kokua Services, Alea Bridge, and Ke Ola Mamo. Each of them reports positive impacts in the emotional well-being of the 27 women treated, in addition to an increased ability to obtain employment. We plan to increase our outreach into this community by securing other agencies who deal with the same marginalized population in order to ensure that eligible women are referred to our program.

3) Secure another clinic site before current lease ends.
We have maintained a good relationship with Palama Settlement, our landlord, over the last 16 years and continue to maintain the interior of the facility as well as the exterior of the building.
In 3 years our current lease will end; therefore, we have established an ad hoc committee to explore potential sites for relocation because we anticipate that the current building we are in may not be maintained.

We are looking for a site close to the bus line; in the Kalihi Palama area; with a reasonable monthly rate, utilities included; adequate parking; and ready-to-move in. We have had several interesting propositions from St. Francis Kupuna Village, Kukui Health Center, and recently from Aloha United Way. If the site selected is viable but not set up for a dental clinic, then we will raise the necessary funds for renovations and occupancy costs through charitable foundations supporting capital improvements, including the State Grant- In-Aid Capital Request. AMM will continue to do fundraising events throughout the year, send out appeals letters, and secure donors to support the renovation and maintenance of the free dental clinic at its new site.

4) Participate in at least 10 outreach activities in the community, such as an outreach dental screening clinic, health fairs, conferences, etc.

We will continue our outreach and relationship with the community health centers and other referral sources in the community. We plan to increase our media outreach through community events and televised programs to increase awareness of who we are, what we provide, and who we can serve which will also help to expand the number of individuals treated and visits made. An outreach dental screening is being planned with Project HOME operated by the John A. Burns School of Medicine (JABSOM) at a River Street location. This will also help to advance awareness of the dental clinic, potentially increase the number of eligible patients treated, and grow our community partnerships.

As of 2017 we have participated in 8 community events and have had 3 televised programs air. In 2018 dental staff will be attending the Hawaii Dental Association Convention which will promote awareness, potentially recruit new volunteer dentists, and provide the dental staff with training opportunities. There are also 3 community events planned by the dental hygienist. The demand for presentations in the community is always present and can easily increase with further outreach efforts; however, we struggle to find additional funding to augment staff hours, and in turn, clinic hours.

A meeting with emergency rooms will be scheduled by our VISTA member, who has been placed at the clinic, to discuss integrating our referral process into discharge planning because dental treatment is not provided. The goal is to prevent poor health outcomes for the at-risk population, reduce emergency room visits, maintain this safety net, and provide linkages to community health centers. AMM will reach out to low-income housing areas, schools, community centers, and other support agencies. The Farrington Health Academy, KCC Dental Assisting Program, Hawaii Dental Assisting Academy, Honolulu Community Action Program, Hawaii Pacific University, University of Hawaii-Hilo, University of Hawaii-Manoa, Koolauloa Community Health Center, and Waianae Coast Community Health Center are current partners that will help us with volunteers, outreach dental screening and referrals to clinic services and the First Smile program. We are planning to obtain a memorandum of understanding with each of our partners as well as letters of support.

5) Reach at least 400 individuals (children and adults) through First Smile presentations. The key to good oral health is prevention. This prevention program targets pre-school and kindergarten keikis because it is important to reach children at an early age to prevent dental complications as adults. A demonstration on proper brushing and flossing is done, using dental props with a return demonstration expected from each child. Children are also given an activity

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bag, which include simple instructions on how to brush properly, activity sheets on dental care, a child's toothbrush and toothpaste, an adult toothbrush and clinic information for the parents. It is hoped that each child will share what they have learned with their Ohana.

In 2017 there were 14 presentations to 7 schools for a total of 265 children and 19 parents. The dental props enhance the interaction among the children and engage them to listen to what was being taught. Many of the children enjoyed playing with the dental props, which helped reinforce information given.

The dental hygienist also plans to conduct "Train the Trainer" classes to Farrington High School students and possibly Waipahu High School, which will increase the number of volunteers doing First Smile. The dental hygienist will also adapt the First Smile curriculum to be used at the Leeward District Center Kupuna Life series under the Honolulu Community Action Program (HCAP). All of these activities will help to expand our outreach into the community, educating children and adults and reaching those in need of dental care.

6) Train and mentor at least 20 students interested in the dental field. Our partnerships with the educational institutions, listed previously, have continued. Students from educational institutions gain experience working in a dental facility because for some it is their first exposure to the inner workings of a clinic and help them to determine their interest in pursuing a career in dentistry. The Farrington High School Health Academy (FHA) senior students have continued to volunteer at the dental clinic to meet their community service requirements, which has benefited both parties.

Students in dental hygiene may independently treat patients with mentoring from the dentist to help mold them into ethical, responsible, capable clinicians. Other students will be working as part of the dental team by providing chairside assistance to the dentists. They gain work experience and the clinic functions more efficiently with these additional volunteers. While volunteering these students may perform selected clinical duties, such as sterilizing instruments, setting up and breaking down the dental units, etc., shadow one of the dental staff, or fulfill administrative duties.

By re-establishing our partnership with the University of Hawaii Dental Hygiene Program in 2018, we hope to increase our volunteer pool for cleaning, thereby, increasing the availability of appointments. This would also serve as a training facility for their students and hopefully nurture new health professionals in giving back to their community. Our former clinic manager began as a FHA student volunteer and then was trained to become our dental assistant. Due to this clinic experience, this former employee has graduated from the UH Dental Hygiene Program and is currently working for the clinic one day a week.

7) Recruit at least 2 new volunteer dentists.

By attending the Hawaii Dental Association Convention in January 2018, we hope to not only promote awareness of our services but also to recruit dentists who might be interested in giving back to their community. We have also been fortunate to have recruited 9 volunteer dentists in 2017 who are professional colleagues of our clinic dentist. Many dentists in Hawaii belong to

"study groups" and hopefully we can encourage our current volunteers to approach their colleagues in their study groups to consider volunteering.

We have also received inquiries from dentists in other states and even in other countries interested in volunteering at the clinic while they are on vacation or attending a training session. However, these dentists must have a valid Hawaii license in order to practice as a dentist even at the free clinic. We are even asking our Board of Directors to publicize through their network our need for volunteer dentists to help us expand operations and increase the availability of appointments.

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

Projected Timeline for the grant period:

- Continue with our current staffing pattern of 6 paid dental staff (ongoing).
- Hire a dental assistant to cover staff extended leave (December 2018).
- Provide 2,016 dental visits and treat 30 Welcome Smile women (June 2019).
- Retain our partnerships with our 18 community partners, including community agencies and educational institutions (ongoing).
- Obtain a memorandum of understanding from all of them and secure letters of support (June 2019).
- Partner with the University of Hawaii Dental Hygiene Program (June 2019).
- Train and mentor at least 20 students interested in the dental field (June 2019).
- Participate in at least 10 outreach activities, including health fairs, speaking engagements, dental screening clinics on Oahu, etc. (June 2019)
- Utilize our 17 volunteer dentists to complement, cover, and expand clinic hours (ongoing).
- Recruit at least 2 more volunteer dentists (June 2019).
- Integrate AMM referral into ER discharge process (June 2019).
- Maintain our relationship with Palama Settlement as a good tenant and a partner (ongoing).
- Explore potential relocation sites for the clinic (December 2018).
- Secure relocation site (June 2019).
 - 3. Describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results; and

Quality Assurance:

The Dental Clinic currently has a Quality Assurance (QA) Program in place to ensure the delivery of high quality services to all of our patients. The QA Program also serves to evaluate that the clinic functions (i.e. administrative, personnel, and clinical) effectively and efficiently and to maximize protection of clients, staff, volunteers, and the clinic as a whole. The QA Program is one of the most important aspects of AMM's Risk Management Plan. Other components currently in place are:

 Health Care Practitioner Credentialing and Privileging Process, an important part of the Redeeming Application for the Federal Torts Claims Act (FTCA), which provides

- malpractice coverage for our clinic volunteers) free of charge a credentialing and privileging process is conducted on all volunteer dentists.
- Patient Care Protocols reviewed annually by the dental director and revised as needed.
- Employee Handbook reviewed by the Executive Director and revised in accordance with Hawaii's best practices in human resources.
- Volunteer Policies and Procedures—reviewed annually and revised as needed.
- Peer Review Process—conducted annually on all volunteer dentists by the clinic director
 and on the clinic dentist by the chair of the Hawaii Programs Committee to ensure
 protocols are being followed, federal and state requirements are being met, and patient
 care provided are according to best practices in dentistry.
- Clinic Guidelines reviewed as needed.
- Compliance with Health Information Portability Accountability Act (HIPAA) revised according to federal regulations.
- Compliance with Occupational Safety and Health Administration (OSHA) requirements annual training of staff conducted.
- Annual CPR certification as required.
- Emergency Preparedness Manual reviewed annually by dental director to ensure that the latest in emergency and disaster protocols are available to staff, volunteers and students.

Evaluation Plan

AMM has been able to sustain a free dental clinic since 2002, due to the leadership of the AMM Board and Advisory Board, which have demonstrated to be major resources for the well-being of the organization. The dental staff and our volunteers, one of whom has been with us since 2002, bring a high level of experience and patient-centered commitment to services provided. Our longstanding presence in the community has brought a positive reputation and familiarity with who we are and what we do.

The upgraded Dentrix program, the electronic dental record system, will continue to help us with appointments and appointment reminders, tracking the number of patients treated by each dentist, the dental procedures provided and the cost, along with other basic demographics, such as age, gender, ethnicity, occupation, and residency, on a monthly basis. Comparison of numbers from previous years have demonstrated that the clinic has been able to increase dental visits and patients treated, including Welcome Smile women. The system will continue to help us determine if we have reached our goal to increase visits by 12% and maintain the number of Welcome Smile women treated to 30. We will also be able to determine the in-kind cost of the dental procedures provided and better estimate annually the cost per patient served. We will also assess if participation in community activities, implementation of the outreach dental screening project and the emergency room referral system, presentation of First Smile have all helped to increase the number of dental visits provided and individuals reached and treated.

We will also continue to obtain feedback from our patients, including Welcome Smile women, through the Patient Satisfaction Survey to help us evaluate the services provided, treatment by dental staff, how the services have made a difference in their lives, and any improvements for us to consider. The success of the Welcome Smile Program will be evaluated by monitoring the number of women we have treated each month and by better estimating the cost per woman. We

will be consulting with our referring partner agencies to assess the impact Welcome Smile has had on these women and their families.

For the First Smile program, the curriculum developed 2 years ago will be assessed and revised as needed and adapted to different age groups, such as kupunas. A verbal pre- and post-test will still be given to the children present to assess their knowledge of the information provided. The teacher will be surveyed to assess the appropriateness and value of the information given and a survey will also be sent home with each child to obtain the parents evaluation of the program. We will also assess whether or not the "Train the Trainer" project is a worthwhile venture to expand our reach into the community and to increase our presentations to preschools and elementary schools on Oahu.

We will continue to nurture our relationship with educational institutions listed previously in order to accommodate additional students. We plan to recruit more volunteer dentists in the community through networking at seminars, community presentations, and face to face encounters by our dentist at various dental functions. By getting the word out, we are not only increasing awareness of the services that our clinic provides *free of charge* but also solidifying the importance of our cause in helping the gap group population.

The dental director, Executive Director, the grant manager, and our accountant will monitor progress on deliverables to ensure that we are on track and keep track of grant funds expended. The evaluation team will include the Hawaii Programs Committee chair and its professional members and the dental director and will be responsible to review quality assurance components currently in place.

The Executive Director will be responsible for the upkeep of the Employee Handbook, consulting with the Board chair of the Administration Committee, to ensure that it is in keeping with state and federal requirements.

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 measures of effectiveness that will be reported for this program are the objectives identified earlier in this proposal.

- Increase the number of dental visits by 12% (from 1800 to 2016).
- Maintain the treatment of 30 new Welcome Smile women.
- Secure another clinic site before current lease ends.
- Participate in or conduct at least 10 outreach activities in the community, such as an outreach dental screening clinic, health fairs, conferences, etc.
- Reach at least 400 individuals (children and adults) through First Smile presentations.
- Train and mentor at least 20 students interested in the dental arena.

Recruit at least 2 new volunteer dentists.

III. Financial

Budget

- - a. Budget request by source of funds (Link) ATTACHMENT page 5
 - b. Personnel salaries and wages (Link) ATTACHMENT page 6
 - c. Equipment and motor vehicles (Link) ATTACHMENT page 7
 - d. Capital project details (Link) ATTACHMENT page 8
 - e. Government contracts, grants, and grants in aid (Link) ATTACHMENT page 9

The requested funds will fund a part time dentist, 2 dental hygienists, and 3 dental assistants, who can be relied on to meet the continual demand for free dental services to low income and atrisk population in our community. If we have the ability to pay professional level staff, it provides increased stability and dependability, safeguarding that the clinic will be accessible 5 days a week. We intend to continually search for grant funding to cover our administrative expenses, other operational expenses, and necessary dental supplies.

The budget is simple in that we are requesting funds to cover the dental staff time which will be exclusively dedicated to treating patients, general and Welcome Smile women, so 100% of the budget will cover direct patient care services. We will also use the funds to cover our monthly rent so that we can ensure that the clinic will be open to our target population during regular business hours; thereby, reducing visits to the emergency room.

Without reliable funding it is very difficult to engage enough professional hours to meet the demand and the numbers of patients we would like to serve. We intend to continually search for grant funding to cover the cost of the free Dental Clinic, of which the State GIA would be of incredible support to these efforts.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$ 37,940.50	\$ 37,940.50	\$ 37,940.50	\$ 37,940.50	\$ 151,762.00

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2019.

List of funds received or pending during fiscal year 2018:

• City Grant in Aid (GIA) -- \$125,000 (10/1/2018 - 9/30/2019 -- Status pending)

- Hawaii Women's Legal Foundation -- \$5,000 (11/2018 11/2019) for Welcome Smile
- Friends of Hawaii Charities Application to be submitted
- Clarence T.C. Ching Foundation Application to be submitted
- Hawaii Dental Service (HDS) Foundation Application to be submitted
- 5. The applicant shall provide a listing of all federal, state, and county government contracts, grants, and grants in aid it has been granted within the prior three years and will be receiving for fiscal year 2019 for program funding.
 - City and County of Honolulu Grant in Aid (GIA) -- \$56,084.86 (1/1/2014 6/30/15)
 - City and County of Honolulu Grant in Aid (GIA) -- \$23,948 (7/1/15 11/30/15)
 - City and County of Honolulu Grant in Aid (GIA) \$42,978 1/1/16 12/31/16)
 - City and County of Honolulu Grant in Aid (GIA) \$31,250 (10/1/17 9/30/2018)
 - State of Hawaii Grant in Aid (GIA) -- \$150,744 (8/5/16 6/30/18)
 - City & County of Honolulu Grant in Aid (GIA) -- \$93,750 (10/1/18 9/30/19)
 PENDING
- 6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2017.

TOTAL UNRESTRICTED CURRENT ASSETS	\$119,878.26
Omit Endowment	(72,808.65)
Omit Temp Restricted	(139,502.31)
Total Current Assets Per Draft Balance Sheet	\$ 332,189.22

^{**} Current Assets Include Cash, Savings, Investments Convertible to Cash, Receivables, Prepaid Exp

IV. Experience and Capability

1. 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.

Publicized as the only "free dental clinic" in Honolulu, the dental clinic has provided more than \$5.3 million in free basic dental care for more than 23,000 uninsured medical and dental patients. The Board of Directors and key volunteers, currently involved with the clinic, have been with the organization for at least seven to over twenty years and bring a high level of experience, historical knowledge, and commitment. The varied expertise and skills of the Board of Directors in marketing, finances, human resources, the law, and dentistry will ensure the sustainability and well-being of the organization. Their commitment and the leadership demonstrated during funding challengers have led to the survival of Aloha Medical Mission and its programs. They have continued to guide the executive director, assuring that plans identified will be carried out successfully.

We have an executive director who has demonstrated her ability to network with other community agencies; supervise personnel; manage the resources; attract new partners; and establish for the last 2 years a volunteer recognition dinner for our volunteer dentists. Our contracted accountant has helped us keep track of revenues and expenditures. She is a great resource to the executive director and office manager, to the clinic and to those involved with obtaining funds for clinic operations. She is involved with the current State GIA contract for AMM; and is therefore, very proficient in doing the required documentation for the State and for the last 3 years for the City GIA.

The volunteer grant writer and manager, who is a former Board member and now Advisory Board member for AMM, has been responsible for the clinic grants since 2014, ensuring that the clinic had funds to sustain its operations. She has not only researched possible charitable foundations and other funding opportunities but also assists the Executive Director in applying for new grants or reapplying for grants previously funded. She assists the Executive Director in tracking expenditures of grants received and for any reports that are due, such as the monthly reports for the City GIA and quarterly reports for the State GIA. She will continue in this effort until the Executive Director can eventually take over these tasks.

Our clinic staff has the skills to assist the dentists in providing treatment, to do dental cleanings, oral health education, and dentistry and has demonstrated their commitment and dedication to our patients by ensuring that the clinic remains open in spite of occasional staff shortage. We have 34 years of experience with recruiting and managing volunteers for the free clinic and the annual overseas missions because Aloha Medical Mission began as a volunteer organization. We recruited 9 additional volunteer dentists in 2017 for a total of 17, who help expand our hours of service. AMM has also continued to mentor students in a health care field, providing a stimulating environment for learning, which also enhanced our volunteer pool.

Our longstanding presence in the community has brought a positive reputation and familiarity with who we are and what we do. We have relationships with the low-cost clinics on Oahu, other community agencies and educational institutions. The VISTA member, who is deployed to AMM, has initiated discussion with emergency rooms in order to reduce emergency room visits for dental problems. We have implemented an outreach dental screening project in Waianae. All of these activities will help to boost our patient count and spread awareness of the free clinic.

In 2017 AMM conducted a major fundraising effort, "Aloha on a Mission", which told the story of Aloha Medical Mission. It was very successful in raising sponsors, who will potentially increase our donor base. We have staunch investors, such as the Hawaii Dental Service (HDS) Foundation, Hawaii Medical Services Association (HMSA) Foundation, Queen's Medical Center, Clarence T.C. Ching Foundation, Friends of Hawaii Charities, Hawaiian Electric Industries Foundation, and Hawaii Women's Legal Foundation, who have supported AMM for the last 16 years. We have also been able to recruit new supporters, such as the Chamber of Commerce Public Health Fund, and Women's Fund of Hawaii, in the last 2 years. They believe in the concept of a free clinic for the poor and needy because Hawaii is in need of such a safety net. As challenges for increase funding arise, we have been able to find opportunities to sustain clinic operations, such as the State GIA and the City & County of Honolulu GIA.

The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the request. If facilities are not presently available, describe plans to secure facilities.

The Dental Clinic is located at the historic Palama Settlement, former home of the Strong-Carter Dental Clinic, which served the same population that we serve today. The clinic had the support of the former Senator Daniel K. Inouye, who personally attended our ten (10) year celebration in 2012. It is housed on the first floor of the former Corbett House, which was renovated in 2001 through a grant from the Harry and Jeanette Weinberg Foundation. The facility, which measures 3,245 square feet, has a 20-year lease which will end in 3 years and a current rent of only \$650 per month.

The clinic facility was expanded from 2 dental treatment rooms to 4 in 2011. It has x-ray machines available in each of the units, which are licensed by the Department of Health. We are able to accommodate two (2) dentists at one time or one dentist and a dental hygienist. The clinic consists of a waiting room, where videos on good oral hygiene are played while patients are waiting, a reception area where hard copies of patient records are secured in locked filing cabinets, and a sterilization and supply area. There is a computer in every dental unit so the dentists and dental assistants are able to access the Dentrix system while treating patients. Our dental facility has up-to-date equipment, including a donated panorex machine, and an upgraded electronic patient chart system (Dentrix).

The facility also houses a small administrative office for the Executive Director and the office manager and a small conference room which serves as the break room and as a limited storage area for overseas mission supplies. The facility is also ADA compliant with a ramp for wheelchairs and handicap parking space in the back of the building and a handicap accessible bathroom. Currently, it more than meets the needs of the Dental Clinic and the administrative needs of AMM. However, we plan to secure another clinic site by 2019 with a space of at least 1200 square feet for 3 to 4 dental units with x-ray machines and computers available in each unit and a utility room to clean and sterilize equipment and store dental supplies.

V. Personnel: Project Organization and Staffing

1. 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.

The consumer experience has been significantly improved, having a dedicated dental staff to guarantee a particular level of capacity and reliability. The dental assistants provide assistance to the dentists; take care of the reception area; triage as needed; educate patients on good oral health practices as they are being treated; order and receive dental supplies; take care of the cleaning of equipment; and are responsible for the maintenance of dental equipment and facility. One of our dental assistant has been with the clinic for over 12 years and has been the constant throughout the changes occurring with the clinic.

The dental hygienists are responsible to provide dental cleanings as well as First Smile presentations and the outreach dental screening project in the community. Both the dental assistants and dental hygienist participate in health fairs in the community and at the Hawaii Dental Association Convention. The clinic dentist not only provides dental treatment to patients but also is the dental director, who ensures quality assurance in the clinic, risk management protocols are followed, the supervision of dental volunteers and clinic staff. Our volunteer dentists help to increase the number of patients being treated. The dental director has recruited many of his colleagues to volunteer, which has greatly enhanced our services. He also identifies training opportunities for the dental staff and volunteer dentists. All of the dental staff ensures the efficient and smooth operation of the clinic.

The executive director has been charged with securing funds to meet the projected budget annually. She has increased partnerships and collaboration with community agencies to leverage our resources wisely. She has also found community service groups, such as the Exchange Club, to provide needed repairs to our facility. She has taken on some of the grant writing activities as well as selected final reports for some of the grants currently in place. She is responsible for the overall supervision of all AMM personnel and overall management of the organization. Having a contracted accountant, who is knowledgeable and experienced in working with City grants, has helped us to carry out the above plan and get reimbursed for services provided.

The contracted accountant is proficient in helping the executive director track grant expenses and in accounting for their use at the clinic. She helps the executive director and grant writer with drafting proposed budgets not only for grants but also for the organization. She is able to answer questions posed by the City and State on the GIA expenditures. The volunteer grant writer and manager has worked collaboratively with AMM's executive directors since 2014 and will continue to assist with the current grants, such as doing monthly reports or annual reports, research potential funding opportunities, apply for grants in keeping with the mission of Aloha Medical Mission, and assist with exploring additional staffing needs and funding.

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 ATTACHMENT**

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.

The annual salaries of the following highest paid employees are: Executive Director -- \$80,000, Dental Hygienist -- \$73,840, and Clinic Dentist -- \$62,400. Officers and Directors of AMM are volunteers as is the grant writer and manager.

VI. Other

1. \(\sum \) 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. NOT APPLICABLE

2. \(\sum \) 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.

- Radiation Facility License
- CPR/AED Certification
- DEA (Drug Enforcement Administration) Registration/License
- Malpractice Insurance Protection through the Federal Torts Claims Act (FTCA) under HRSA for volunteer dentists and Board of Directors and Officers
- Current State of Hawaii Dental and Dental Hygiene Licenses
- Annual OSHA and HIPAA Certification

3. 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 <u>Article X, Section 1, of the State Constitution</u> for the relevance of this question. **NOT APPLICABLE**

4. X Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2018-19 the activity funded by the grant if the grant of this application is:

(a) Received by the applicant for fiscal year 2018-19, but

(b) Not received by the applicant thereafter.

In November 2017 AMM put on its first major fundraising event in 5 years called "Aloha on a Mission" to support the organization and its programs and met it net goal. In addition, AMM plans to sustain the clinic through direct mail solicitations twice a year, Board donations, individual donors, and new high- end donors cultivated through innovative events. The remainder of the funding will be raised through corporations, foundations, government, and solicited sponsorships, such as participation in Aloha United Way, and Foodland Give Aloha Program.

We have been successful in obtaining grants and donations for the clinic for the last 16 years. We have been able to retain staunch supporters, such as HDS Foundation, HMSA Foundation, and Queen's Medical Center, who support our mission and have been successful in soliciting small grants from foundations that support women's health, such as the Women's Fund of Hawaii and the Hawaii Women's League Foundation.

As long as we actively pursue funding and continue to coordinate our volunteers and professional dental staff, we will be able to sustain our clinic operations to 5 days per week. We are committed to continue our fundraising and donor plans beyond the grant period to sustain this free service to the community and as long as it is assessed to be needed by the uninsured and underserved within the community.

If the applicant is an organization, the applicant shall submit one (1) copy of a certificate of good standing from the Director of Commerce and Consumer Affairs that is dated no earlier than December 1, 2017. **SEE ATTACHMENT**

6. Declaration Statement

The applicant shall submit a declaration statement affirming its compliance with Section 42F-103, Hawaii Revised Statutes. (Link) SEE ATTACHMENT page 10

The applicant shall specify whether the grant will be used for a public purpose pursuant to Section 42F-102, Hawaii Revised Statutes. (Link)

2018 STATE GIA will be used for a public purpose – to provide basic dental care on an interim basis *free of charge* to the uninsured, underserved, and those with no financial means of paying for dental services.

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2018 to June 30, 2019

Applicant: ALOHA MEDICAL MISSION - Dental Clinic

	UDGET ATEGORIES	Total State Funds Requested	Total Federal Funds Requested	Total County Funds Requested	Total Private/Other Funds Requested
_		(a)	(b)	(c)	(d)
A.	PERSONNEL COST				
1	1. Salaries	129,142		110,708	39,188
	2. Payroll Taxes & Assessments	15,472		13,262	4,694
	Fringe Benefits	4,748		1,030	9,859
	TOTAL PERSONNEL COST	149,362		125,000	53,741
В.	OTHER CURRENT EXPENSES				
	Airfare, Inter-Island				
	2. Airfare, Out-of-State				
	3. Audit Services				4,117
1	4. Contractual Services - Administrative				17,564
	5. Contractual Services - Subcontracts		70.00		
1	6. Insurance				2,213
	7. Lease / Rental of Equipment				2,700
1	8. Lease / Rental of Motor Vehicle				
	9. Lease / Rental of Space	2,400			8,738
1	10. Mileage				1,284
ł	11. Postage, Freight & Delivery				863
1	12. Publication & Printing				200
	13. Repair & Maintenance			, , , , , , , , , , , , , , , , , , ,	12,134
1	14. Staff Training				1,300
1	15. Subsistence / Per Diem				
	16. Supplies				68,725
	17. Telecommunication				2,674
	18. Transportation				
1	19. Utilities				
	20. Miscellaneous -				2,772
	TOTAL OTHER CURRENT EXPENSES	2,400			125,284
C.	EQUIPMENT PURCHASES				
D.	MOTOR VEHICLE PURCHASES				
E.	CAPITAL				
то	TAL (A+B+C+D+E)	151,762		125,000	179,025
			Budget Prepared I		
so	URCES OF FUNDING			•	
	(a) Total State Funds Requested	151,762	Callega Minami		000 700 E703
			FOURTH FAIR CONT.		808 780-5793 Phone
	(b) Total Federal Funds Requested	0			1.17.18
	(c) Total County Funds Requested	125,000			' ' ' ' '
<u></u>	(d) Total Private/Other Funds Pending	179,025		W. (210P08)	Date
			Toni Muranaka, Executi	ve Director	
ТО	TAL BUDGET		Name and Title (Please		

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2018 to June 30, 2019

Applicant: ALOHA MEDICAL MISSION - Dental Clinic

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
DENTIST	0.50	\$62,400.00	50.00%	\$ 31,200.00
DENTAL HYGIENIST	1.00	\$73,840.00	50.00%	\$ 36,920.00
DENTAL HYGIENIST	0.20	\$14,560.00	50.00%	\$ 7,280.00
DENTAL SPECIALIST	0.725	\$26,390.00	55.00%	\$ 14,514.50
DENTAL SPECIALIST	1.00	\$34,320.00	60.00%	\$ 20,592.00
DENTAL SPECIALIST	0.80	\$24,128.00	55.00%	\$ 13,270.40
EXECUTIVE DIRECTOR	1.00	\$80,000.00	5.00%	\$ 4,000.00
OFFICE MANAGER	0.625	\$27,300.00	5.00%	\$ 1,365.00
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TOTAL:				129,141.90
JUSTIFICATION/COMMENTS:				

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2018 to June 30, 2019

Applicant: ALOHA MEDICAL MISSION

DESCRIPTION EQUIPMENT	NO. OF	COST PER	TOTAL COST	TOTAL BUDGETED
NOT APPLICABLE			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				
JUSTIFICATION/COMMENTS:				

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
NOT APPLICABLE			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				

JUSTIFICATION/COMMENTS:

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2018 to June 30, 2019

Applicant: ALOHA MEDICAL MISSION - N/A

TOTAL PROJECT COST ALL SOURCES OF FI RECEIVED IN PRIOR			STATE FUNDS REQUESTED	OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2016-2017	FY: 2017-2018	FY:2018-2019	FY:2018-2019	FY:2019-2020	FY:2020-2021
PLANS						
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT						350,000
TOTAL:						

GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID

Applicant: ALOHA MEDICAL MISSION - Dental Clinic Contracts Total: 125,000

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)	CONTRACT VALUE
***********	Dental clinic	10/1/17 - 9/30/18	Dept of Community Services	C&C - Honolulu	31,250
2	Dental clinic - pending	10/1/18 - 9/30/19	Dept of Community Services	C&C - Honolulu	93,750
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DECLARATION STATEMENT OF APPLICANTS FOR GRANTS PURSUANT TO CHAPTER 42F, HAWAI'I REVISED STATUTES

The undersigned authorized representative of the applicant certifies the following:

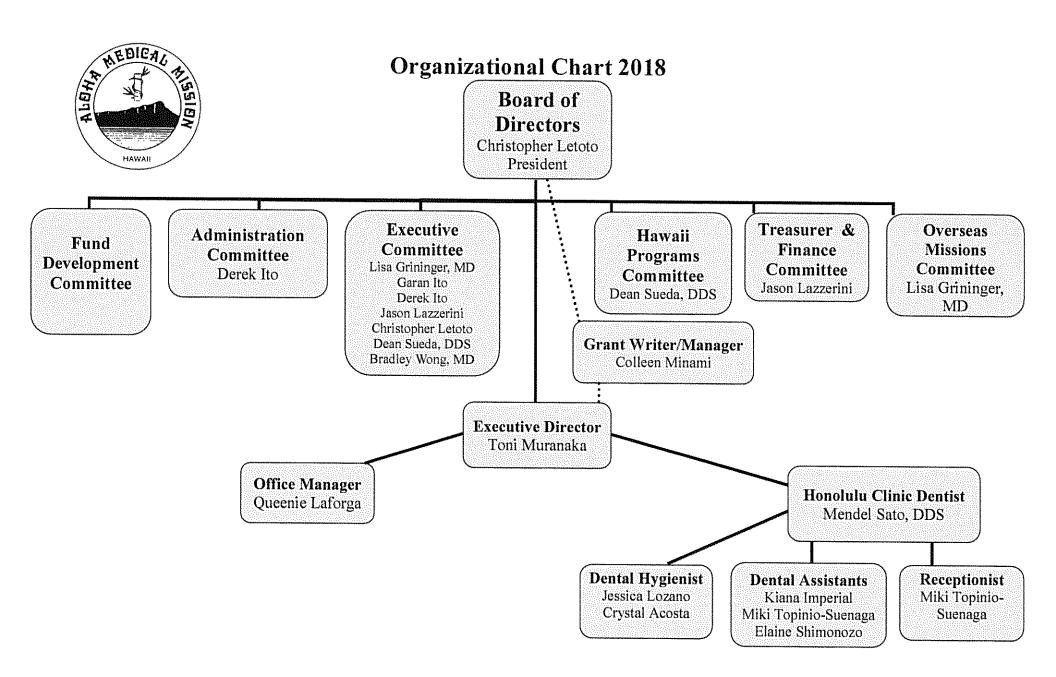
- 1) The applicant meets and will comply with all of the following standards for the award of grants pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide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

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

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

Aloha Medical Mission	
(Timed Name of Individual or Organi	
(.	(Date)
Toni Muranaka,	Executive Director
(Typed Name)	(Title)

Rev 12/2/16 10 Application for Grants





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

ALOHA MEDICAL MISSION

was incorporated under the laws of Hawaii on 03/10/1983; that it is an existing nonprofit corporation; and that, as far as the records of this Department reveal, has complied with all of the provisions of the Hawaii Nonprofit Corporations Act, regulating domestic nonprofit corporations.

COMMENCE AND CONSUMER AFEA

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 09, 2018

Cathing awal: Calm

Director of Commerce and Consumer Affairs