This ?	WENTY-NINTH LEGISLATURE	
HOUSE DISTRICTS)	PPLICATION FOR GRANTS	Log No:
	R 42F, HAWAII REVISED STATUTES	
		For Legislature's Use Only
Type of Grant Request:		
GRANT REQUEST - OPERATING	□G	RANT REQUEST – CAPITAL
"Grant" means an award of state funds by the legactivities of the recipient and permit the commun "Recipient" means any organization or person re-	ity to benefit from those activities.	pecified recipient, to support the
STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST (LI		
STATE DEPARTMENT ON AGENCY RELATED TO THIS REQUEST (LI	EAVE BLANK IF ONKNOWN):	
1. APPLICANT INFORMATION:		ATTERS INVOLVING THIS APPLICATION:
Legal Name of Requesting Organization or Indivi	the second section and the second section is	A STATE OF THE STA
Easter Seals Hawali	Name Ron Brandvol	<u>D</u>
Dba:	Title President & CEO	
Street Address: 710 Green Street	Phone # (808) 529-17	01
Mailing Address Handrill, HI 06912	Fax # (808) 536-3765	
Mailing Address: Honolulu, HI 96813	E-mail RBrandvold@e	eastersealshawaii.org
3. TYPE OF BUSINESS ENTITY:	6. DESCRIPTIVE TITLE OF A	H. M. W. S. H. B. W. S. L. & W. G. S. G. G. G. S. G. G. G. S. G.
NON PROFIT CORPORATION INCORPORATED IN FOR PROFIT CORPORATION INCORPORATED IN LIMITED LIABILITY COMPANY SOLE PROPRIETORSHIP/INDIVIDUAL OTHER	AND ADULTS WITH AUTISM SPE	D BEHAVIOR ANALYSIS SERVICE DELIVERY FOR KEIKI ICTRUM DISORDER THROUGH BOTH COMPREHENSIVE ND FOCUSED HOMES AND COMMUNITIES CARE FIRST THE STATE
4. FEDERAL TAX ID #:	7. AMOUNT OF STATE FUND FISCAL YEAR 2019: \$ 9	
8. STATUS OF SERVICE DESCRIBED IN THIS REQUEST: NEW SERVICE (PRESENTLY DOES NOT EXIST) EXISTING SERVICE (PRESENTLY IN OPERATION)	SPECIFY THE AMOUNT BY SO AT THE TIME OF THIS REQUES STATE \$	
	RON BRANDVOLD , PRESIDENT & CEO	1/19/2018 DATE SIGNED

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2019 GRANT IN AID THE TWENTY-NINTH LEGISLATURE CHAPTER 42F, HAWAII REVISED STATUTE

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- 3. DCCA Certificate of Good Standing dated January 16, 2018
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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. <u>Background and Summary</u>

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

A brief description of the applicant's background;

Easterseals Hawaii (ESH) Mission:

ESH provides exceptional, individualized, family-centered services to empower people with disabilities or special needs to achieve their goals and live independent, fulfilling lives.

Organization Overview and History:

ESH is part of a national organization that was the first of its kind when initially founded in 1918 as "The National Society for Crippled Children." In 1946, thanks to the vision and philanthropy of Edward and Olga Sultan and support from many prominent business leaders and parents committed to helping children with disabilities, "The Easter Seal Society for Crippled Children" was founded. Other charter members of the ESH Ohana included Governor John Burns, Judge Chuck Mau, Dorothy Devereux, Hilo Hattie, Duke Kahanamoku, Bayard Dillingham, and local businessman, Fred Ida, who was a 50-year board member for ESH and longtime member of the Easterseals National Board. Moreover, Fred was honored for his outstanding volunteerism and community service, so much so, that many national awards have been named in his honor.

As the organization's mission in the islands expanded to include serving adults with disabilities, ESH was born and prestigious statewide growth ensued. People now being served by ESH are living with conditions such as;

- Autism (aka Autism Spectrum Disorder or ASD)
- Cerebral Palsy
- Muscular Dystrophy
- · Spina Bifida
- Cognitive Impairments
- Down Syndrome
- Other intellectual disabilities and developmental disabilities or special needs.

By the 1990s, the growing emphasis of the Center for Medicare and Medicaid Services (CMS) was to provide services in the "natural environment," meaning within homes and communities. Combined with the effects of the Felix Decree, the closure of the Waimano Homes, and support of the community at the time for providing social services to individuals with disabilities and special needs, many opportunities to serve were created.

ESH responded to the call, growing its staff on the four major Hawaiian Islands from 50 to 460 employees, from a handful of facilities to 12 across the islands (six on Oahu, three on Kauai, two in Hilo and one on Maui), and the annual number of participants served from roughly 200 to over 2,000 with over 500,000 service hours delivered in 2017.

To ensure quality delivery of service, in 2006 ESH pursued and successfully achieved CARF accreditation (the Commission on Accreditation of Rehabilitation Facilities) and has maintained that national "gold standard" for service delivery ever since. This accreditation must be renewed every three years and will next be updated in 2019. Maintaining compliance assures that ESH remains informed of emerging trends and best practices, not just in program management, but in all aspects of administration, finance, human resources, development (including fundraising) and board governance for running a non-profit organization.

Service categories delivered by ESH would be briefly summarized, as follows:

Early Intervention

El service contracts are administered through the State of Hawaii, Department of Health (DOH), Early Intervention Section (EIS) and include physical therapy, occupational therapy, speech and hearing therapy, and special education to within six (6) geographical districts, including Central Honolulu, East Honolulu, Kailua, Kapolei, Hilo on Hawaii Island, and for the island of Kauai.

Adult Services

Waiver services contracts are administered through the DOH and Developmental Disability Division (DDD). Center-based Adult Day Health (ADH) services are offered from multiple statewide locations, including the ESH Green Street campus in Makiki; from within two modified homes in Ewa; from a large multipurpose service center in Kapolei (referred to as Napuakea); in Hilo on Hawaii Island; in both Kapaa and Waimea on the island of Kauai; and, in Kahului on the island of Maui. Community Learning Services (CLS) are among additional services required for each of these districts or islands along with personal assistance and habilitation services (PAB), that are initiated from within the homes of those we serve with more significant disabilities and extend into the community with one-on-one assistance to the extent possible.

Employment Services

Employment services break into two categories; training for high school age kids and young individuals with disabilities or special needs to help them develop skills to succeed at job interviews; and the discovery process and matching candidates with available, gainful employment where the abilities of the individual are suitable to the requirements of the job. Services also include follow-up job coaching to ensure long-term success.

Autism Services

In 2013 ESH leadership recognized the tremendous growth of autism throughout the United States, including here in Hawaii, and acquired a small ABA service provider, the Pacific Autism Center, to create the beginnings of the ESH Autism Treatment Center. The facility was first moved into a 3,000 square-foot space within the Aloha United Way (AUW) building where the staff of six provided services to about four children diagnosed with ASD on the more severe end of the spectrum. In the 4 ½ years since, ESH has more than tripled the number of staff and participants served, principally continuing to focus on center-based services for individuals diagnosed with severe ASD.

ESH's business plan for 2018 and beyond involves expanding its capabilities to again double and potentially triple center-based services, while concurrently developing an initial team consisting of a behavior analyst and multiple technicians to provide home and community-based services to individuals diagnosed on the mild to moderate end of the spectrum. Access to ASD services is a problem throughout Hawaii, and ESH aims to be part of the solution by further developing the program, starting in Oahu with this grant request. For example, we recently partnered with numerous local corporations and foundations to invest more than \$200,000 in renovations and relocation of our AUW building, which has more than doubled the square footage available to support our ASD services. The essence of this business plan represents the focus of this GIA request and is addressed in greater detail throughout the body of this submission.

Assistive Technology

Individuals with disabilities or special needs often benefit greatly from creative initiatives involving the use of adaptive equipment to accommodate physical and/or developmental challenges. There is very little funding for this type of activity, but through fundraising and grant writing initiatives, and the efforts of incredibly gifted staff who are committed to the importance of our mission, ESH continues to provide assistive technology services across its adult programs.

Community Events and Fundraising

ESH has achieved favorable recognition and strong bonds within the community by virtue of its positive relationships with local leaders in government, businesses and foundations, as well as through sponsoring high profile, high quality activities, and fundraising events.

Matson Company stands out in particular for having sponsored an annual Christmas party (bringing Santa and providing funds for a decorated tree, gifts for the ESH EI keiki, refreshments, etc.) on Oahu for the past 64 consecutive years, and for funding similar parties for keiki in ESH EI programs in Hilo and on Kauai these past 17-years. The Harry and Jeanette Weinberg Foundation has been incredibly generous to ESH with respect to capital campaigns that have helped build or renovate facilities over the years.

The State of Hawaii and the City and County of Honolulu, along with many local foundations and corporations, have also generously supported ESH. This of course doesn't just happen, but is a reflection of the relationships between ESH board members and management with leaders at these various local institutions.

ESH events over the years would be recognized by many in Hawaii to include the Easter-seals Telethon in the 1980s and 1990s; the Taste of Honolulu, which ran for 15-years beginning in the early 1990s; the Gingerbread Festival, which ran for 10-years until 2014; Chef's du Jour, hosted by former ESH board member Chef Alan Wong and his celebrity chef friends; and, numerous other, smaller events that would always deliver quality outcomes, as a reflection of the careful planning and execution that built upon ESH's positive reputation for quality in everything we do.

Leadership

Currently, seventeen (17) local business leaders serve on the ESH Board of Directors. Together with President and CEO Ron Brandvold and his executive team, this group assures responsible governance and strategic leadership in all areas described above under the reference to CARF. ESH is also represented on industry work groups and advisory committees that address a broad range of issues impacting the intellectual and developmental disabilities community in Hawaii.

Recently, ESH further bolstered its leadership team by forming an affiliation with Easter-seals Bay Area (ESBA) in 2017. The affiliation is designed to deepen technological and administrative support, as well as programmatic capabilities to both organizations positioning, positioning each ESH and ESBA to better serve more individuals with disabilities and special needs. For example, ESH has a long-standing history in areas including adult and employment services, whereas ESBA has achieved remarkable success in serving a large contingency within the ASD community. As the northern California affiliate of Easter Seals, ESBA has embraced technological solutions to support service delivery on a level worthy of its location literally within the renowned Silicon Valley. This partnership will help both organizations expand service capabilities and support throughout the communities in which they operate.

The goals and objectives related to the request;

ESH is requesting \$950,978 to expand treatment of ASD on Oahu. Currently ESH has a center-based Applied Behavior Analysis (ABA) program serving 17 keiki with ASD. We intend to use the funds from this grant, plus additional funds from our organization, to expand our center-based program and add a home-based program. The expansion will increase the total number of keiki receiving treatment from ESH to about 60 by the end of 2018, as well as building momentum to create a more sustainable program, positioned for growth to better serve the broader Oahu community. Without growth and additional investment, the program is not in a position where growth is feasible.

With a combination of ESH funds and grant funding, we will:

- Hire and train 32 additional staff. The staff will be highly trained professionals with the capabilities to treat and assist families with ABA services in accordance with the standards dictated by the Behavior Analyst Certification Board (BACB).
- Implement technology (telecare and treatment program applications) to improve efficiency, productivity, and quality of care.
- Provide two modalities of ABA care: center-based comprehensive ABA for moreseverely disabled children and focused home-based ABA for mildly to moderately disabled children.
- Increase the number of children in treatment to 60 in 2018, and develop access to grow the program incrementally to meet additional demand in 2019 and beyond.

ESH's Contribution: Although the grant request of \$950,978 will help to create the capacity, training, and technology required to further support ABA efforts in Oahu, additional investment will be required to complete the initiative. ESH is prepared to contribute an additional \$659,488 to fund the initiative through further fund-raising and collaboration with ABA partners. This includes sharing in the hiring and retention of 26 registered behavioral therapists (RBT), implementation of CHART and other technology tools, technology support, and deployment of training and program management to support sustainable growth. Additionally, ESH will make use of its affiliate relationship with ESBA in California for training, technology, technical support, advisory support, and tools. Each of these aspects is described in more detail throughout the remainder of the document.

ASD is a developmental disorder that impacts communication, social, verbal, and motor skills and often leads to maladaptive behaviors that interfere with overall functioning. According to the Center for Disease Control (CDC), approximately 1% of the world has ASD, and within the United States, the figure is estimated at approximately 1 in 68 births. Furthermore, the prevalence of the ASD diagnosis rose by 119% between 2000 and 2010, and it has become the fastest-growing developmental disability, again according to the CDC. The diagnostic trends in Hawaii mirror those of the US.

According to the United States Department of Education, of the 303,904 keiki under age 18 in Hawaii, 1,820 of them, including those with ASD, are currently receiving special education services. With this representing less than half of the roughly 4,500 keiki likely affected with ASD, the need for greater access to services will surely continue to rise in the years ahead.

Notwithstanding that, ABA therapy is designed to support keiki and adults with ASD. Specifically, ABA therapy is defined as the design, implementation, and evaluation of environmental modifications using behavioral stimuli and consequences to produce socially significant improvement in behavior and address challenging behavior problems for individuals with ASD who are otherwise unable to participate in common social activities or traditional educational settings. ABA services include direct observation, measurement, and functional analysis of the relationship between the individual's environment and behavior. According to the Autism Society, costs of lifelong care can be reduced by 66% with an early ASD diagnosis and appropriate treatment, as deployed within ABA. This is the goal and aspiration of ESH in delivering the service.

The challenge however is that Oahu is experiencing a lack of viable service options and access for children with ASD. Although 13 ABA service providers exist on Oahu, many have long and growing waiting lists, including ESH. Maintaining a waiting list is a culture ESH wishes to change, and ESH aims to provide the support needed for families otherwise unable to receive timely or consistent treatment and do so with adequate capacity.

To address the wide spectrum of needs that children with ASD have across severity levels, access to the two board-recognized levels of services is essential. The two BACB levels of ABA treatment are:

- Comprehensive ABA Treatment: This level is generally for more-severely disabled children, with treatment plans that provide 30–40 hours per week of treatment.
- Focused ABA Treatment: This level is generally for mildly to moderately disabled children, with treatment plans that provide 10-25 hours per week of treatment. The benefit of focused home-based treatment is the ability to provide treatment in the child's own community, with no requirement that a family live close to the center.

As noted previously, ESH currently has a comprehensive program serving 17 children in Honolulu. At the present time, we have a waiting list of about 20 families for this program, and many others have dropped from the list or sought other options. This grant will allow us to expand our comprehensive program considerably. In addition to the comprehensive program expansion, ESH intends to add a focused ABA home-based program, which will allow us to provide treatment for children who have mild to moderate disability, including children living outside of Honolulu.

http://www.autism-society.org/what-is/facts-and-statistics/

4. Describe the target population to be served; and

ESH's ASD services are intended to serve the 1 in 68 children diagnosed with ASD. Children with ASD exhibit:

- a. Persistent difficulties with social, verbal, and nonverbal communication.
- b. Deficits that limit function in the areas of communication, social participation, and relationship and occupational performance.
- c. Restricted, repetitive patterns of behavior, interests, or activities, often with stereotyped or repetitive motor movements, use of objects, or speech.
- d. Self-injurious behaviors.

The symptoms of ASD restrict overall functioning and independence. For a child with ASD, the simple communication task of telling their parent when they are hungry or in pain can be a big hurdle. Early treatment with ABA improves functioning and independence by increasing the ability to communicate both verbally and nonverbally, understand social situations, behave in a socially appropriate manner, and develop relationships. ABA is also very helpful in decreasing self-injurious behaviors such as head banging or biting.

ESH is prepared to further serve the community and families in need of ABA treatment. To support growth in the program, ESH recently invested over \$200,000 in renovations to its new space that will allow for significant program growth and expansion in 2018 and beyond. ESH's current staffing and technology infrastructure, as well as limited financial resources, however, have been barriers to ESH's ability to expand its reach and to provide services to additional members of our community. This would include offering continuity to keiki with ASD after they age out from our EI programs. Each year, children in each of the three ESH EI programs on Oahu are diagnosed with ASD, typically between the ages of 2.5-3 years. ESH would like to have the ability to offer these keiki and their families the services they need by expanding its ABA program to include focused, homebased services thereby enabling ESH to provide a seamless care path from EI to homebased ABA. This represents an opportunity to expand our reach throughout the Oahu community while also meeting needs for those families currently on waiting lists.

With the additional staff and resources requested in this proposal and by using technology to provide remote supervision and support of home providers, we will be able to provide treatment for 43 additional children ages three and up by the end of Hawaii's fiscal year 2018. We intend to use this as a springboard into 2019, when we hope to continue to expand our ability to serve the Oahu community.

Describe the geographic coverage.

Our goal is to support the greater Honolulu area with comprehensive center-based care and the island of Oahu with focused home-based care.

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;

ESH will expand the number of keiki we serve in our center-based comprehensive program and add home-based and integrated home- and center-based ABA services for keiki with ASD. Currently, ESH provides center-based ABA on a relatively limited scale and is unable to provide home-based ABA, which is a common and BACB-recognized and promoted treatment modality. The term home-based includes all naturalistic environments (e.g., grandmother's house, parks). We plan an expansion of our program to serve an additional 43 children through:

- Expanding our comprehensive center program to serve a minimum of 8 additional keiki from our current waiting list.
- Providing home-based ABA for approximately 35 keiki with ASD over the age of three in their natural environment (home/family settings) on Oahu.
- Providing integrated home- and center-based ABA for keiki over five years of age
 with ASD who live in the Honolulu area. This treatment option gives a child the opportunity to receive care in the center as well as their home to allow for interaction
 with peers to be an element of their treatment program.

Scope of ABA: Certified and directed by the BACB, ABA is a systematic approach for changing behavior. ABA treatment plans make use of behavior change techniques using naturalistic stimuli/environments to address deficits and resolve problem behaviors. The impact of ABA is an improvement in independence and functioning, allowing keiki with ASD to gain fuller access to their lives.

Two Treatment Modalities: There are two board-recognized modalities of ABA (twoand three-tier models), with important distinctions. ESH uses a two-tier model within the current comprehensive program, which is best practice. Center-based programs with comprehensive needs are better operated under a two-tier model, given the high touch and treatment planning needed to drive results.

ESH will use the grant to expand this two-tier program, but also institute the three-tier model.

Figures 1 and 2 provide overviews of the two models and their benefits.

BOARD CERTIFIED BEHAVIOR ANALYST provides clinical direction, super-and case management REGISTERED REGISTERED REGISTERED REGISTERED BEHAVIOR BEHAVIOR BEHAVIOR BEHAVIOR TECHNICIAN A TECHNICIAN B TECHNICIAN C TECHNICIAN D delivers treatment delivers treatment delivers treatment elivers treatment

Figure 1: Two-Tier Model (supported by the BACB)

ESH will continue to use the two-tier model for our center-based program. The model works effectively and supports children requiring a comprehensive program well.

Role Definitions within Current Model:

Board-Certified Behavior Analyst (BCBA): The BCBA is a master's-level clinician, licensed in Hawaii, who completes the treatment assessment and develops the treatment plan. The BCBA is responsible for all aspects of the treatment plan and overall management of the team.

Registered Behavior Technician (RBT): The RBT is a paraprofessional who usually lives in the same community as the child/family receiving services and who has had training in implementing an ABA treatment plan. The RBT provides the treatment interventions under the BCBA.

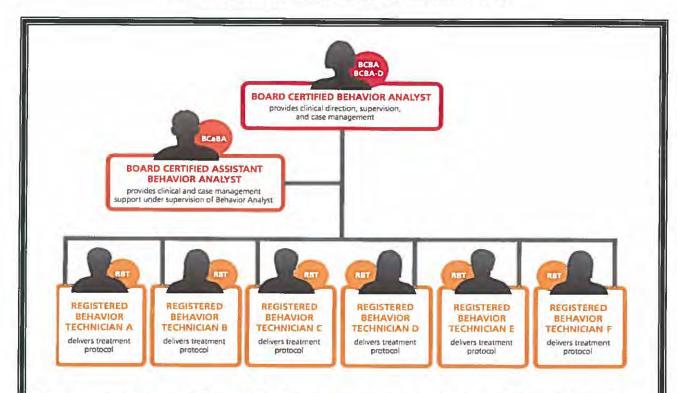


Figure 2: Three-Tier Model (supported by the BACB):

For our expansion into the focused ABA treatment program, we intend to develop a three-tier model. The three-tier model is the model most commonly used in home-based programs, as it allows for more economical and nimble ABA support. To facilitate the needed program development, and given our ability to train and develop RBTs and board-certified assistant behavior analysts (BCaBAs), we intend to hire community members who want to work with children with disabilities and support their growth as medical professionals.

Rationale for a three-tier model for focused ABA:

- Scope: ABA treatment plans are very specific, with precise instructions that can be carried out by a trained paraprofessional (RBT). ESH has an established program to train RBTs.
- Community: Using RBTs and BCaBAs who live in the same community as the child increases communication with families and an understanding of the child's natural environment.
- Cost: RBTs are a cost-effective way to provide ABA.
- Development Opportunities: RBTs who have college degrees can be trained to midlevel (BCaBAs).
- Remote Supervision: The BCBA can supervise remotely by video, increasing the cost effectiveness of the program.

Role Definitions:

BCBA: The BCBA is a master's-level clinician, licensed in Hawaii, who does treatment assessment and develops the treatment plan. The BCBA is responsible for all aspects of the treatment plan and overall management of the team.

BCaBA: This midlevel provider is a bachelor's- or master's-level clinician who manages the RBT and provides case management.

RBT: The RBT is a paraprofessional who usually lives in the same community as the child/family receiving services and who has had training in implementing an ABA treatment plan. The RBT provides the treatment interventions under the BCaBA and BCBA.

Improving Efficiencies, Standardization, and Data Collection with Technology:

In addition to developing the focused ABA program, ESH will look to invest in clinical efficiencies to ensure the program is sustainable in Hawaii's fiscal year 2018 and beyond. To assist and guide the development, ESH will partner with ESBA, which has grown the largest ASD program in Northern California.

Given the common affiliation through Easterseals, the partnership allows ESH to take advantage of the ABA technology, thought leadership, and training ESBA has developed at significantly reduced costs. For example, through the affiliation, ESH will be able to use an industry-leading application to collect real-time session data which required significant resources to build and implement. The application, which runs on an iPad, gives RBTs detailed treatment protocols and allows BCaBAs and BCBA to monitor adherence to the treatment plans and make treatment plan modifications as needed. This access and agility is critical in actively overseeing ABA treatment. Additionally, the application allows for specific outcome measures to be monitored by the BCBA and provides families with feedback on how their child is doing.

The application is a cost-effective and industry recognized tool to increase direct treatment time and improve productivity considerably. Moreover, the application collects data and supports treatment planning to ensure the child's plan is evolving as needs change. The application supports the clinical team by guiding treatment planning and sessions through the use of industry best practices.

As an overarching theme, and certainly true throughout healthcare, investing in technology is paramount to ensure compliance with healthcare regulations and standards, as well as to ensure that efficiencies are promoted throughout the care cycle.

Table 1 below outlines the advantages and efficiencies ESH anticipates by gaining access to the tools and applications developed by industry leaders within ABA (ESBA and other ABA providers respected within the industry). The tools proposed to drive efficiency include the following:

- athenaHealth Electronic Health Record: Industry-leading tool to manage a patient's
 medical history, facilitate work flows in accordance with industry standards, and
 track/manage clinical data, progress notes, and treatment plans.
- SalesForce Case Management System: Capabilities developed and deployed by industry-leaders to manage patient cases. Case management is critical within ASD treatment to ensure continuity of care, appropriate case escalation, and proper clinical record transparency.
- Confluence Administrative Management System: Proven tools to promote collaboration, training, and process documentation.
- Deployment Devices and Applications (i.e. properly supported iPad): Given the frequency
 of treatment and necessity to seamlessly engage a patient within the home or ESH center,
 devices offering flexibility are needed to access the systems above (athenaHealth, SalesForce,
 and Confluence).

Table 1: Technology Advantages

	Improved Efficiency:
RBTs	 Reduces the time RBTs spend on administrative tasks Increases the time RBTs have directly interacting with the child (reduces paperwork time by about 15 minutes per treatment session)
BCaBAs/BCBAs	Decreases time for treatment plan development and treatment plan updates by giving BCaBAs/BCBAs quick access to data about how the treatment plan is progressing
BCBAs	Assists in treatment plan assessments
Reduced Risks/ Quality Improvement: RBTs	 Reduces data errors Allows real-time or near-real-time supervision of RBTs

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

We project 12 months to hire, train staff, and start treatment for 43 children and/or adults. Table 2 outlines the activities and timing, including investments in technology, training, and staffing.

Table 2: Investment Timeline

	Q1	Q2	Q3	Q4
Investments				
Technology				
athenahealth	1			
Salesforce	1			
Confluence	1			
Devices (iPad, other tools)	1	1	4	1
Training	✓	1	1	1
Staffing				
Program director	1			
Clinical case manager	1			
Managers	1	1	1	1
RBTs	1	V	1	1

In fairly equal increments, we will onboard 10-12 children/adults for ASD treatment. The pace of growth is exprected to be realitively steady throughout the annual (Q1-Q4) plan.

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

ESH follows a robust quality assurance and improvement system, as described in Table 3. ESH believes in continuous self-assessment and improvement to guide performance toward achieving our mission. The quality system promotes (through appropriate controls) quality services, provided to our clients and families, to ensure that the needs of our funders and other stakeholders are consistently met. The quality system is designed to objectively, systematically, and measurably monitor and evaluate the quality, appropriateness, and outcome of care and the processes by which services are delivered. All aspects of services, including delivery of care and business systems, are evaluated as part of this model.

Table 3: Quality Assurance and Improvement System

Quality Assurance	Quality Improvement
Quality assurance efforts include ensuring that all ESH ABA treatment plans meet stated ABA quality standards. The quality assurance function will also monitor treatment plan adherence through periodic chart reviews. All chart review results are analyzed, trended, and evaluated as part of the quality improvement (QI) model.	The QI model's goal is to enhance performance and increase the probability of desired client and family outcomes, including client and family satisfaction, effectiveness, accessibility, diversity, and the client's attainment of their highest potential. The QI model ensures that all work, including service delivery, is conducted in a way that promotes a level of performance that conforms to applicable and currently recognized standards in the field of ABA. A QI committee meets regularly to evaluate

established metrics and benchmarks to identify areas for improvement and facilitate performance improvement activities within the organization.

The quality assurance and improvement system described above will ensure that measures of quality and effectiveness will be reported to the appropriate state agency.

The following will be reported:

- Number of children treated in each program (comprehensive and focused programs)
- Average number of treatment hours for each program by age group (3–5 years; 5– 10 years; over 10 years)
- Geographic areas reached
- Number of staff hired and trained

We use a biyearly progress map to measure effectiveness of treatment:

- Development (Vineland-III)
- Goals and objectives met
- Improvement in problem behaviors (e.g., biting, head banging)
- Parental distress (Parenting Stress Index)
- Hours ratio (hours recommended versus hours given)

The outcomes dashboard shown in Figure 3 will be reported by program and age group.

Figure 3: Outcomes Dashboard

Outcomes Dashboard: ABA Feedback-Informed Care

- Outcomes introduced at intake and reviewed with the beneficiary/ family at least every six months
- Assessment tools like Vineland, PSI, VB-MAPP barriers, or MBI given at six-month intervals
- · Case manager updates dashboard
- Dashboard used as a quality indicator
- Informs hours authorized versus deployed

Developmental Functioning (Vineland-3)

Family Distress (PSI)

Standardized Tool Used for Goals and Objectives Progress on Goals and Objectives

Problem Behaviors

Hours Authorized versus Deployed

III. Financial

- 1. The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.
 - a. Budget request by source of funds (Link)

See attached "Budget Request By Source Of Funds" document.

b. Personnel salaries and wages (Link)

See attached "Budget Justification-Personnel Salaries And Wages."

c. Equipment and motor vehicles (Link)

See attached "Budget Justification - Equipment And Motor Vehicles" form.

d. Capital project details (Link)

N/A

e. Government contracts, grants, and grants in aid (Link)

For the sake of full transparency, applicant attaches an extensive 2-page list of contracts with state and local government for statewide delivery of non-ABA services, **HOWEVER**, none of these services overlap with the request outlined in this submission.

2. Table 4 shows anticipated quarterly funding requests for fiscal year 2019.

Table 4: Anticipated 2019 Funding Requests

Quarter One	Quarter Two	Quarter Three	Quarter Four	Total Grant
\$282,060	\$249,619	\$243,133	\$176,166	\$950,978

3. No other funding is being sought for fiscal year 2019.

N/A

4. 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.

As a 501 (c) 3 nonprofit organization, ESH has no access to state and federal tax credits.

5. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2017.

\$3,374,795 consisting of current cash on hand, receivables, and prepaid expenses.

6. 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.

N/A

7. 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.

Again, for the sake of transparency, Easter Seals Hawaii has received one award in the past three years; however, it was a \$400,000 GIA in 2015 for employment services on Neighbor Islands that lasted one-year and does not overlap with ABA funding we are requesting for fiscal year 2019. What it does do, however, is reflect very positively upon how an investment made by the state helped ESH build infrastructure and thereby establish a program that continues to sustain and shows significant potential for greater future success, similar to what is intended here with ABA services.

Applicant also has insurance contracts to provide other ABA/ASD services that are not proposed in this application with;

HMSA Kaiser TriCare State of Hawaii MedQuest State of Hawaii Department of Education

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.

- Experienced Professionals: ESH has been providing center-based ABA for children with ASD for more than five years. Furthermore, ESH will be supported by ESBA, which has been providing home-based treatment for many years and oversees the care of 4,000+children receiving ASD services, by further developing training programs, monitoring the expansion of the ABA program, and allocating leadership resources experienced in scaling ABA operations. Together, ESH and ESBA have a large number of experienced BCBAs, including two doctoral-level BCBAs and a neuropsychologist with experience in treating children with ASD. ESH plans to take advantage of the combined ABA experience of these professionals for training and program development to support its expansion.
- RBT Training: ESH and ESBA have established RBT training programs that meet or
 exceed the BACB's training criteria. Both use the same well-regarded online training
 program as well as supervised hours. In addition, in 2017 ESBA developed a training protocol to integrate training for the ABA treatment application with RBT training. ESBA
 will share this training protocol with ESH.
- BCaBA and BCBA Development: Both ESH and ESBA have development and training
 structures in place to support RBTs who are committed to a career in ABA and want to
 advance to the level of a BCaBA or BCBA. Over the last 5 years ESH has produced 4
 BCBAs from the RTB career path. Continuing to invest in these capabilities and supporting members of the ESH team to further clinical competencies is core to the organization's mission and will continue to be emphasized as the ABA program grows.
- Training and Experience for Standardization of Care: ESBA developed an algorithm tool, called CHART, for treatment plan assessments, which is designed to standardize treatment hour needs based on ASD symptoms and family stress. CHART is an economical and effective tool to guide ABA treatment and ensure that treatment goals are appropriate for the child's age and level of disability. CHART was accepted by the Association for Behavior Analysis International to be presented at their 2018 conference. CHART is being shared with ESH free of cost as a component of these ABA expansion efforts, and CHART training for ESH staff will begin in early 2018.
- Clinical Case Management: ABA clinical case managers are social workers who have specific knowledge or experience working with individuals with ASD. The clinical case manager provides support to members of the family and assists in overseeing the case (i.e. identifies family resources, collaborates to define/manage treatment plans, objectively

evaluates progress and next steps). The support provided by the clinical case manager improves the success of a child's ABA treatment plan by ensuring the family has access to the appropriate resources, is appropriately engaged, and is supported through treatment. Eliminating stressors and supporting the family is an important component and determinant of effective ABA treatment.

2. X 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.

Our center-based ABA program is housed in a 6,300-square-foot space within the AUW building that has recently undergone \$200,000 in modifications to support the ABA program described in this request. The facility includes 24 treatment rooms, a training center, and significant common area space to accommodate clinical needs. The center as it exists today will support the growth outlined for 2018–2019 as well as future growth as the program continues to expand its impact within the Oahu community.

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.

Staffing for the Proposed Focused ABA Program: Between the two ABA programs, we plan to hire 32 professional and paraprofessional staff.

- BCBA: The BCBA is a master's-level clinician, licensed in Hawaii, who does
 treatment assessment and develops the treatment plan. The BCBA is responsible
 for all aspects of the treatment plan and overall management of the team.
- BCaBA: This midlevel provider is a bachelor's- or master's-level clinician who
 manages the RBT and provides case management.
- RBT: The RBT is a paraprofessional who usually lives in the same community as
 the child/family receiving services and who has had training in implementing an
 ABA treatment plan. The RBT provides the treatment interventions under the
 BCaBA and BCBA.
- Clinical Case Manager: Social worker with experience working with children with ASD and their families.

Expansion of Center-Based Program: Hire and train 10 RBTs. These RBTs will be supervised by the five BCBAs who currently work for ESH as well as an ESH BCaBA who

will be licensed as a BCBA early in 2018. The promoted BCBA keeps us within the BACB's ratio range for RBT supervision in a two-tier model.

Home-Based ABA Three-Tier Model: Hire a licensed BCBA and four BCaBAs. Hire and train 16 RBTs to be supervised as shown in figure 4.

BCaBA 4 RBT FTES

BCBA ARBT FTES

Figure 4: Home-Based Model

- Each RBT-BCaBA pair will provide care for eight children.
- The average number of direct treatment hours from an RBT is expected to be 12.5 per month for each child.
- Each RBT will direct treatment 25 hours a week.
- The remaining 15 hours include drive time and training (each RBT must be trained when a child has a new treatment plan or there is a change in treatment plans).

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

See attached.

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.

Employee	Role	Salary
Ron Brandvold	President & CEO	\$175,985
JoAnn Lumsden	CFO	\$120,000
Peter Bressler	Controller	\$85,000

VI. Other

1. \(\sum \) Litigation

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

ESH has one pending litigation action. A former employee of one of ESH's non-ABA programs filed a wrongful termination lawsuit. This employee, who worked for ESH for only three months, lost an EEOC compliant against ESH. ESH is insured by RSUI for this kind of lawsuit.

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.

As stated within, ESH has licensed BCBAs who are qualified to oversee ABA treatment programs and supervise RBTs.

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.

N/A.

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.

ESH intends to use the GIA funds requested to complete the investments in technology and recruiting, hiring, and training of clinical professionals outlined in this document. These investments will provide the tools and capabilities to scale the ABA program to a point where the services are sustainable through insurance funding. Without these investments in expertise and efficiency, the current program will not meet community needs and will not be able to operate. In future years, additional investments and growth will be funded through the program and will not require additional GIA grants or support.

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 attached.

6. Declaration Statement

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

See attached signed "Declaration Statement of Applicant's For Grants Pursuant To Chapter 42F, Hawaii Revised Statutes."

7. National Public Purpose

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

- (1) The name of the requesting organization or individual; Easter Seals Hawaii
- (2) The public purpose for the grant;
 We intend to use the funds from this grant, plus additional fund from our organization, to expand our center-based program and add a home-based program.
- (3) The services to be supported by the grant; Expansion will increase the total number of keiki receiving treatment by ESH to about 60 by the end of 2018, as well as help build momentum to create a more sustainable program, positioned for growth to better serve the broader Oahu community.
- (4) The target group;
 Individuals diagnosed with autism spectrum disorder.

And

(5) The cost of the grant and the budget. ESH is requesting \$950,978 to expand treatment of ASD on Oahu.



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

EASTER SEALS HAWAII

was incorporated under the laws of Hawaii on 07/18/1947; 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.

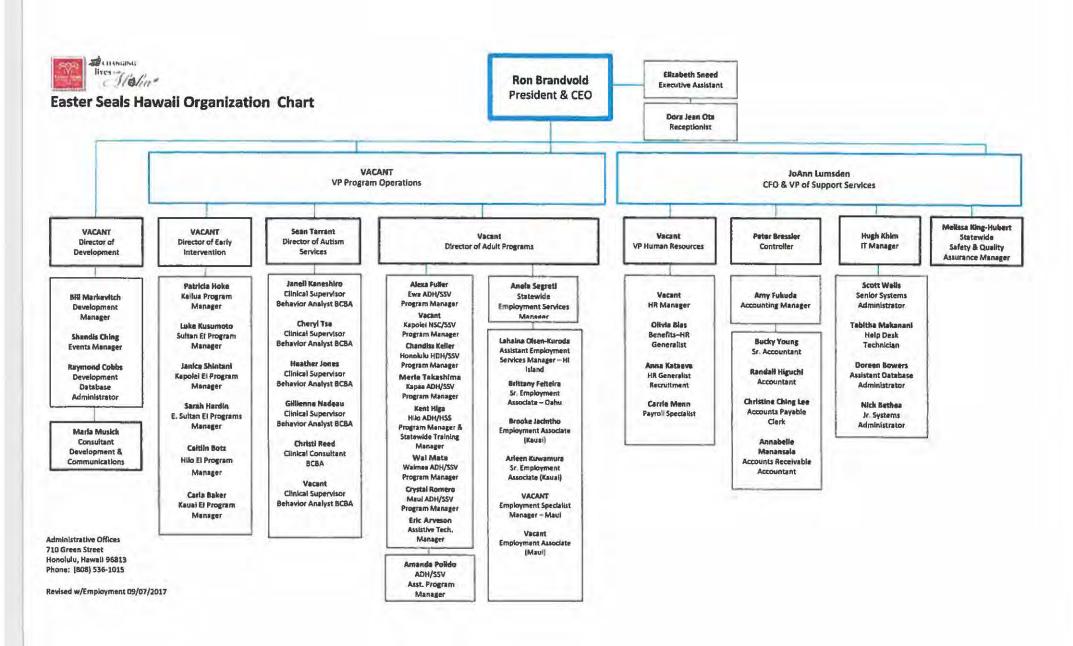


IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: January 16, 2018

Catan. P. awat Color

Director of Commerce and Consumer Affairs



BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2018 to June 30, 2019

Applicant: Easterseals Hawaii

BUDGE	ORIES	Total State Funds Requested (a)	Total Federal Funds Requested (b)	Total County Funds Requested (c)	Total Private/Other Funds Requested (d)
	INEL COST	Total State			
1. Salar		567,230	0	0	
	oll Taxes & Assessments	0	0	0	0
	e Benefits	141,808	0	0	0
TOTAL P	ERSONNEL COST	709,038	. 0	0	
and the second	CURRENT EXPENSES	1000			
	e, Inter-Island	18,400	0	0	0
2. Insur		0	0	0	0
	e/Rental of Equipment	0	0	0	
_	e/Rental of Space	0	0	0	0
5. Staff		18,400	0	0	
6. Supp		0	0	0	0
	ommunication	0	0	0	
8. Utilitie		0	. 0	0	0
9 Softw	are	125,140			
10					
11					
12					
13					
15					
16					
17					
18					
19					
20		P			
7.65	OTHER CURRENT EXPENSES	161,940	0	0	0
C. EQUIPME		80,000	0	0	0
	VEHICLE PURCHASES	0,000	0	a	0
E. CAPITAL		0	0	0	0
	+B+C+D+E)	950,978	0	0	0
TOTAL IN	2.0.2.2	200,070	Budget Prepared By:		
SOURCES OF FUNDING (a) Total State Funds Requested		950,978			850-930-0777
	al Federal Funds Requested		Nama (Please time of n		Phone
	al County Funds Requested	0			1/19/2018
	Private/Other Funds Requested	0	5		Date
		1 1 1 1 1 1	Ron Brandvold Presider	nt & CEO	
TOTAL BUI	DGET	222 222 8	Name and Title (Please		

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2018 to June 30, 2019

Applicant: Easterseals Hawaii

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER	TOTAL COST	TOTAL BUDGETED
Pad Devices	50.00	\$1,000.00	\$ 50,000.00	
Pad Service (per month of \$50)	50	\$600.00	\$ 30,000.00	
			\$ -	
			\$	
			\$ 	
TOTAL:	100		\$ 80,000.00	

JUSTIFICATION/COMMENTS:

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	1	OTAL	TOTAL BUDGETED
			\$	-	
			\$	•	
			\$	-	
			\$	-	
			\$	-	
TOTAL:					

JUSTIFICATION/COMMENTS:

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2018 to June 30, 2019

Applicant: Easter Seals Hawaii

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A × B)
rogram Director	1	\$125,000.00	100.00%	\$ 125,000.00
linical Case Manager	1	\$87,500.00	100.00%	\$ 87,500.00
lanagers	4	\$80,600.00	50.00%	\$ 161,200.00
ВТ	26	\$57,200.00	100.00%	\$ 1,487,200.00
				\$ *
				\$
**************************************				\$
				\$
				\$
				\$
				\$ -
				\$
		W-C		\$ 34.
	ener annungananan managangan a		STATES THE STATES OF THE STATE	\$ -
	Prince Prince Prince			1,860,900.00

GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID

Applicant - Easter Seals Hawaii

Contracts Total:

25,399,363

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)	CONTRACT VALUE
1	DHS-14-VR-1018 Supplemental Conract #1	7/1/14 - 6/30/15	DHS/Voc Rehab	State of Hawaii	\$ 90,000.00
2	DHS-14-VR-1018 Supplemental Conract #1	7/1/15 - 6/30/16	DHS/Voc Rehab	State of Hawaii	\$ 90,000.00
3	DHS-17-VR-4035	7/1/16 - 6/30/18	DHS/Voc Rehab	State of Hawaii	\$ 180,000.00
4	DHS-17-VR-4040	7/1/16 - 6/30/18	DHS/Voc Rehab	State of Hawaii	\$ 90,000.00
5	DHS-15-VR-2036	7/1/14 - 6/30/15	DHS/Voc Rehab	State of Hawaii	\$ 50,000.00
6	DHS-15-VR-2036	7/1/15 - 6/30/16	DHS/Voc Rehab	State of Hawaii	\$ 50,000.00
7	DHS-17-VR-4042	7/1/16 - 6/30/18	DHS/Voc Rehab	State of Hawaii	\$ 100,000.00
8	DHS-17-VR-4032	7/1/16 - 6/30/18	DHS/Voc Rehab	State of Hawaii	\$ 100,000.00
9	DHS-17-VR-4033	7/1/16 - 6/30/18	DHS/Voc Rehab	State of Hawaii	\$ 150,000.00
10	DHS-17-VR-4041	7/1/16 - 6/30/18	DHS/Voc Rehab	State of Hawaii	\$ 60,000.00
11	DHS-16-VR-3033	7/1/15 - 6/30/16	DHS/Voc Rehab	State of Hawaii	\$ 80,000.00
12	DHS-16-VR-3033	7/1/16 - 6/30/17	DHS/Voc Rehab	State of Hawaii	\$ 80,000.00
13	DHS-16-VR-3033 Supplemental Contract #1	7/1/17 - 9/30/17	DHS/Voc Rehab	State of Hawaii	3-month extension
14	DHS-16-VR-3031	7/1/15 - 6/30/16	DHS/Voc Rehab	State of Hawaii	\$ 63,250.00
15	DHS-16-VR-3031	7/1/16 - 6/30/17	DHS/Voc Rehab	State of Hawaii	\$ 63,250.00
16	DHS-16-VR-3032	7/1/15 - 6/30/16	DHS/Voc Rehab	State of Hawaii	\$ 50,000.00
17	DHS-16-VR-3032	7/1/16 - 6/30/17	DHS/Voc Rehab	State of Hawaii	\$ 80,000.00
18	DHS-16-VR-3032 Supplemental Contract #1	7/1/17 - 9/30/17	DHS/Voc Rehab	State of Hawaii	3-month extension
19	DHS-16-VR-3030	7/1/15 - 6/30/16	DHS/Voc Rehab	State of Hawaii	\$ 50,000.00
20	DHS-16-VR-3030	7/1/16 - 6/30/17	DHS/Voc Rehab	State of Hawaii	\$ 50,000.00
21	DHS-16-VR-5061	7/1/17 - 6/30/19	DHS/Voc Rehab	State of Hawaii	\$ 80,000.00
22	DHS-18-VR-4185	7/1/17 - 6/30/18	DHS/Voc Rehab	State of Hawaii	\$ 30,000.00
23	DHS-18-VR-4185	7/1/18 - 6/30/19	DHS/Voc Rehab	State of Hawaii	\$ 40,000.00
24	ASO Log No. 13-066, Modification 1	7/1/14 - 6/30/15	DOH/EIS	State of Hawaii	\$ 1,290,570.00
25	ASO Log No. 13-066, Modification 2	7/1/15 - 6/30/16	DOH/EIS	State of Hawaii	\$ 841,944.00
26	ASO Log No. 13-066, Modification 3	7/1/16 - 6/30/17	DOH/EIS	State of Hawaii	\$ 869,933.00
27	ASO Log No. 13-067, Modification 1	7/1/14 - 6/30/15	DOH/EIS	State of Hawaii	\$ 1,296,017.00
28	ASO Log No. 13-067, Modification 2	7/1/15 - 6/30/16	DOH/EIS	State of Hawaii	\$ 815,595.00
29	ASO Log No. 13-067, Modification 3	7/1/16 - 6/30/17	DOH/EIS	State of Hawaii	\$ 865,912.00

30	ASO Log No. 13-065, Modification 1	7/1/14 - 6/30/15	DOH/EIS	State of Hawaii	\$	1,244,940.00
31	ASO Log No. 13-065, Modification 2	7/1/15 - 6/30/16	DOH/EIS	State of Hawaii	\$	877,975.00
32	ASO Log No. 13-065, Modification 3	7/1/16 - 6/30/17	DOH/EIS	State of Hawaii	\$	870,144.00
33	ASO Log No. 13-070, Modification 1	7/1/14 - 6/30/15	DOH/EIS	State of Hawaii	\$	1,488,630.00
34	ASO Log No. 13-070, Modification 2	7/1/15 - 6/30/16	DOH/EIS	State of Hawaii	\$	1,050,759.00
35	ASO Log No. 13-070, Modification 3	7/1/16 - 6/30/17	DOH/EIS	State of Hawaii	\$	995,994.00
36	ASO Log No. 13-068, Modification 1	7/1/14 - 6/30/15	DOH/EIS	State of Hawaii	\$	1,018,086.00
37	ASO Log No. 13-068, Modification 2	7/1/15 - 6/30/16	DOH/EIS	State of Hawaii	1\$	721,400.00
38	ASO Log No. 13-068, Modification 3	7/1/16 - 6/30/17	DOH/EIS	State of Hawaii	\$	703,100.00
39	ASO Log No. 13-069, Modification 1	7/1/14 - 6/30/15	DOH/EIS	State of Hawaii	\$	1,180,830.00
10	ASO Log No. 13-069, Modification 2	7/1/15 - 6/30/16	DOH/EIS	State of Hawaii	\$	912,984.00
11	ASO Log No. 13-069, Modification 3	7/1/16 - 6/30/17	DOH/EIS	State of Hawaii	\$	823,800.00
12	ASO Log No. 18-075	7/1/17 - 6/30/18	DOH/EIS	State of Hawaii	\$	926,979.00
13	ASO Log No. 18-075	7/1/18 - 6/30/22	DOH/EIS	State of Hawaii	option	to extend
14	ASO Log No. 18-076	7/1/17 - 6/30/18	DOH/EIS	State of Hawaii	\$	843,237.00
15	ASO Log No. 18-076	7/1/18 - 6/30/22	DOH/EIS	State of Hawaii	option	to extend
16	ASO Log No. 18-077	7/1/17 - 6/30/18	DOH/EIS	State of Hawaii	\$	878,871.00
17	ASO Log No. 18-077	7/1/18 - 6/30/22	DOH/EIS	State of Hawaii	option	to extend
18	ASO Log No. 18-078	7/1/17 - 6/30/18	DOH/EIS	State of Hawaii	\$	964,624.00
19	ASO Log No. 18-078	7/1/18 - 6/30/22	DOH/EIS	State of Hawaii	option	n to extend
50	ASO Log No. 18-080	7/1/17 - 6/30/18	DOH/EIS	State of Hawaii	\$	630,541.00
51	ASO Log No. 18-080	7/1/18 - 6/30/22	DOH/EIS	State of Hawaii	option	n to extend
52	ASO Log No. 18-079	7/1/17 - 6/30/18	DOH/EIS	State of Hawaii	\$	967,688.00
53	ASO Log No. 18-079	7/1/18 - 6/30/22	DOH/EIS	State of Hawaii	option	to extend
54	CT-DCS-1500024	10/1/14 - 9/30/15	City & County of Honolulu	ССНН	\$	187,800.00
55	CT-DCS-1500024 Amendment #2	10/1/15 - 3/31/16	City & County of Honolulu	ССНН	6-moi	nth extension
56	CT-DCS-1600056	4/1/16 - 3/31/17	City & County of Honolulu	ССНН	\$	127,982.00
57	OCS-GIA-16-05	3/1/16 - 2/28/17	SOH - GIA	State of Hawaii	\$	376,528.00

DECLARATION STATEMENT OF APPLICANTS FOR GRANTS PURSUANT TO CHAPTER 42F, HAWAI'I REVISED STATUTES

The undersigned authorized representative of the applicant certifies the following:

- 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;
 - 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.
- 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
 - 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.

Easter Seals	Hawaii
(Typed Name of Individual or Organization	
	1/19/2018
(Signature)	(Date)
Bon Brandvold	President & CED
(Typed Name)	(Title)

Rev 12/2/16