

House District(s) 46\_\_  
Senate District(s) 22\_\_

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

Log No:

For Legislature's Use Only

Type of Grant Request:

GRANT REQUEST - OPERATING

GRANT REQUEST - CAPITAL

"Grant" means an award of state funds by the legislature, by an appropriation to a specified recipient, to support the activities of the recipient and permit the community to benefit from those activities.  
"Recipient" means any organization or person receiving a grant.

STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST (LEAVE BLANK IF UNKNOWN): \_\_\_\_\_

STATE PROGRAM I.D. NO. (LEAVE BLANK IF UNKNOWN): \_\_\_\_\_

1. APPLICANT INFORMATION:

Legal Name of Requesting Organization or Individual:  
The Wahiawā Center for Community Health

Db: Wahiawā Health

Street Address: 302 California Avenue, STE 106,  
Wahiawā, HI 96786

Mailing Address: 302 California Avenue, STE 106,  
Wahiawā, HI 96786

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name BEV HARBIN

Title Executive Director

Phone # 808-591-0000

Fax # 808-622-4833

E-mail bharbin@wahiawahealth.org

3. TYPE OF BUSINESS ENTITY:

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

6. DESCRIPTIVE TITLE OF APPLICANT'S REQUEST:

CAPITAL FUNDING FOR THE RENOVATION AND OUTFITTING OF SERVICE DELIVERY AT WAHIAWA HEALTH

4. FEDERAL TAX ID #: \_\_\_\_\_

5. STATE TAX ID #: \_\_\_\_\_

7. AMOUNT OF STATE FUNDS REQUESTED:

FISCAL YEAR 2019: \$1,425,685

8. STATUS OF SERVICE DESCRIBED IN THIS REQUEST:

- NEW SERVICE (PRESENTLY DOES NOT EXIST)  
 EXISTING SERVICE (PRESENTLY IN OPERATION)

SPECIFY THE AMOUNT BY SOURCES OF FUNDS AVAILABLE AT THE TIME OF THIS REQUEST:

STATE \$ 0  
FEDERAL \$ 0  
COUNTY \$ 0  
PRIVATE/OTHER \$ 0

Bev Harbin Exec Director  
NAME & TITLE

1/17/2018  
DATE SIGNED

JAN 18 2018 2:24 PM

## 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** (pages 1-7)

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;
2.  The goals and objectives related to the request;
3.  The public purpose and need to be served;
4.  Describe the target population to be served; and
5.  Describe the geographic coverage.

### **II. Service Summary and Outcomes** (pages 7-10)

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;
2.  Provide a projected annual timeline for accomplishing the results or outcomes of the service;
3.  Describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results; and
4.  List the measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency). The measure(s) will provide a standard and objective way for the State to assess the program's achievement or accomplishment. Please note that if the level of appropriation differs from the amount included in this application that the measure(s) of effectiveness will need to be updated and transmitted to the expending agency.

**III. Financial** (pages 10-11)

**Budget**

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](#))
  - b. Personnel salaries and wages ([Link](#))
  - c. Equipment and motor vehicles ([Link](#))
  - d. Capital project details ([Link](#))
  - e. Government contracts, grants, and grants in aid ([Link](#))
  
2.  The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2019.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$356,171.00	\$356,171.00	\$356,171.00	\$356,172.00	\$1,424,685

3.  The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2019.
  
4.  The applicant shall provide a listing of all state and federal tax credits it has been granted within the prior three years. Additionally, the applicant shall provide a listing of all state and federal tax credits they have applied for or anticipate applying for pertaining to any capital project, if applicable.
  
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.
  
6.  The applicant shall provide the balance of its unrestricted current assets as of December 31, 2017.

**IV. Experience and Capability** (pages 11-14)

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.

2.  **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.

**V. Personnel: Project Organization and Staffing** (pages 14-16)

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.

2.  **Organization Chart**

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

3.  **Compensation**

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

**VI. Other** (pages 16-18)

1.  **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.

2.  **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.

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 [Article X, Section 1, of the State Constitution](#) for the relevance of this question.

4.  **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.

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

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

6.  **Declaration Statement**

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

7.  **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](#))

**Attachments**

Attachment A: Budget Request by Source of Funds

Attachment B: Budget Justification – Personnel Salaries and Wages

Attachment C: Budget Justification – Equipment and Motor Vehicles

Attachment D: Budget Justification – Capital Project Details

Attachment E: Government Contracts, Grants, and/or Grants in Aid

Attachment F: DCCA – Certificate of Good Standing

Attachment G: Declaration Statement of Applicants for Grants Pursuant to Chapter 42F, Hawai'i Revised Statutes

## **I. BACKGROUND AND SUMMARY**

### **1. A brief description of the applicant's background**

In the spirit of Aloha and compassion, the Wahiawā Center for Community Health dba Wahiawā Health (WH) provides access to affordable, quality health care and wellness services, to promote a healthy community. WH is a non-profit, 501(c)(3) organization governed by a dedicated and compassionate Board of Directors, organized for the purpose of creating and sustaining a community health center based in Wahiawā. WH serves the communities of Wahiawā, Mililani, and Waialua. Incorporated in 2012, WH acquired two clinical offices, Suite 106 and Suite 208, within the Wahiawā Medical Building at 302 California Avenue and opened its doors to the public in August of 2016. On December 18, 2017, WH was designated a Federally Qualified Health Center (FQHC) program Look-Alike under Section 330 of the Public Health Services Act. Adhering to all requirements of the FQHC program administered by the Health Resources and Services Administration (HRSA), WH is now able to offer access to comprehensive primary care services for *all* individuals, *regardless* of their inability to pay. As an FQHC Look-Alike, WH offers patients living at or below 200% of Hawaii's Federal Poverty Guidelines (FPG), discounted services relative to their income and household size; therefore, WH's target population is composed of residents living on incomes at or below 200% of FPG within the service area of zip codes: 96786, 96789, and 96791 – Wahiawā, Mililani, and Waialua.

In calendar year 2017, WH provided services to approximately 7,000 unique patients and over 18,000 encounters. At their time of service, 60% of patients were recipients of Medicaid, 5% beneficiaries of Medicare, 30% were privately insured, and 5% were uninsured, thereby demonstrating WH's role as a safety net provider to the uninsured and underinsured. Though WH has not been actively advertising, news that the center is open and accepting new patients has spread through the community like wildfire. Through late November of 2017, WH had been operating only three exam rooms, anxiously awaiting completion of renovation efforts in STE 106. During this time, WH was receiving close to 500 calls per day, which is over 10,000 calls per month, tying up the phone lines. Following renovation, WH now houses 21 exam rooms and three triage rooms, massively expanding capacity in STE 106. By the summer of 2018, WH anticipates three more providers will be onboarded (Two Advanced Nurse Practitioners and One Family Medicine Physician), thereby expanding capacity from the estimate 7,000 unique patients served in the calendar year to serve approximately 8,755 unique patients. WH is now booking an average of 70-100 patients per weekday and about 40 patients on weekends. WH will be expanding its operations from 25 to approximately 48 employees by the end of 2019 to meet the ever-increasing demand, contributing directly to the community's economic revitalization efforts.

WH is a major owner of suites within the Wahiawā Medical Building at 302 California Avenue. WH offers primary medical care, pediatrics, OB/GYN, nutrition, behavioral health and case management services. Within the Wahiawā Medical Building, WH has executed Memorandum of Understanding (MOU) with Diagnostic Lab Services for on-site lab processing, CVS Pharmacy for prescription filling, Wahiawā Family Dental Care for dental services, and North Shore Mental Health, Inc. for advanced mental health and substance abuse counseling services to supplement the clinical behavioral health services offered within WH. MOU contain assurances that all patients at or below 200% of FPG be offered services on WH's Sliding Fee Discount

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Program scale. Therefore, WH is able to provide all required services HRSA mandates FQHC's to provide, under one roof. However, the building – constructed in 1977 – is extremely outdated and in desperate need of renovations for purposes of safety and advancing upgrade. Since its construction, the building's primary owners had deferred needed maintenance for years as it wasn't a priority through difficult financial years with the lowering of insurance reimbursements to private medical practices.

WH's expansion to 21 exam rooms requires purchase of needed clinical equipment to facilitate the delivery of services at full capacity. Currently, administration is packed behind one counter utilizing an assortment of donated equipment and furniture. The expansion of staff coming in 2019 requires modular furniture purchases to set up a space for patient registration, call center operators, and administrative staff. The lobby, and many exam rooms, are outfitted with furniture dating to the late 1970s. STE 208, which was purchased and permitted for renovation, houses confidential space for behavioral health consultation. This suite was used for pediatric care and its accommodations are over 40 years old. The Wahiawā Medical Building requires many structural repairs to the windows, stairwells, concrete, railings, and wood beams that support it. The largest barrier to the building's safety is its need for an adequate fire alarm system. The Honolulu Fire Department has the building on a two year "must repair" watch list. In response to this, the building currently has 24/7 security to actively be on watch for any fire related hazards and to ensure the safety of all tenants. This "human fire watch" is costing \$2000.00 per month and will continue until the building can adequately be equipped with an upgraded fire alarm system. WH's requests will be described in further detail in the following narrative.

**2. The goals and objectives related to the request**

WH is requesting \$1,424,685 in funds for three activities: 1) needed repair and renovation to the Wahiawā Medical Building at 302 California Avenue; 2) equipment to outfit WH's clinical space for service delivery at full capacity, and; 3) planning of a new facility clinic/community center in the parking lot behind the Wahiawā Medical Building. \$400,000 is requested for planning the new facility, \$937,500 is requested for renovations to the Wahiawā Medical Building, and \$87,185 is requested in equipment.

	Goals	Request	\$	Objectives
1	Renovation of Wahiawā Medical Building	\$937,500	\$250,000	A STE 208 renovations (approved building permit completed)
			\$10,000	B Railing repairs
			\$10,000	C Stairway repairs
			\$30,000	D Window seal repairs
			\$225,000	E Wood repair
			\$112,500	F Lights for rear parking lot
			\$300,000	G Fire alarm system
2	Planning New Construction and Renovation	\$400,000	\$300,000	A Contract an architect/project manager to develop plans for the construction of a new facility for purposes of expanding clinical service delivery and providing space for a community center housing various enabling and social services specific to the needs of low-income families in the service area.
			\$100,000	B Pay legal fees necessary to facilitating the planning phase.
3	Equipment to Outfit WH	\$87,185	\$87,185	C

For Service Delivery			Purchase equipment necessary to outfit clinical space for service delivery at full clinical capacity
		\$1,424,685	

**GOAL 1: RENOVATION OF WAHIAWĀ MEDICAL BUILDING**

**Objective A:** STE 208 was purchased by WH for the delivery of behavioral health services, primarily mental health and substance abuse counseling services. The suite previously housed a pediatric practice with two exam rooms, an office, a lobby/reception area, a records room, and a restroom. The suite’s interior and fixed accommodations are over 40 years old. The suite needs new floors, painting, and the removal of an unused shower and toilet. The suite also requires an electrical and information technology update. This suite has already been permitted for renovation. \$250,000 is requested to complete renovation activities, thereby fully converting the space into three patient behavioral health consultation exam rooms, a provider office, reception, and lobby.



**Objective B & C:** The Wahiawā Medical Building courtyard houses a winding concrete staircase with wood railings, connecting the first floor to the second. The entrance on the southside also features a staircase (pictured). Wood railings also surround the entirety of the 2nd floor walkway. These railings and staircases have not been repaired for over 40 years. For issues of improving structural reliability and safety for WH patients and users of the building, WH requests \$20,000 in funds to repair the staircases and the railings.



**Objective D:** The windows are original to the building. Several seals are failing (pictured), and it rains often, leading to damage to the wood frame, and molding in the interior. \$30,000 is requested for window seal repair.

**Objective E:** There are several wood beams that support the structure of the building and lend to its aesthetics in the courtyard. The last inspection of these beams found that most of the exposed portion of the wood is rotted and needs to be repaired/replaced. Since the beams could be structural, a structural engineer is recommended to evaluate the integrity of the building. Evidence of termite infestation is found near the wooden columns. This maintenance will prolong the life of use for these beams. WH is requesting \$225,000 for wood repair/replacement.





per light, enough to sufficiently light the back lot.

*Objective F:* A parking lot surrounds the Wahiawā Medical Building on three sides, the largest portion of the lot being on the north side of the complex. The back lot is unlit and represents a danger to patients and staff who utilize it after dark. As a medical facility, the lot should be well lit for patients, especially those who are disabled or requiring additional assistance, to get from their vehicles safely to the door. The building, prior to WH staffing a security guard within the courtyard for regular patrols and fire safety, was used by area homeless for drug use and temporary residence. The area is not uncommon for crime including vehicle theft, burglary, and assault. WH will be extending hours into the evening for working families that can't make it in during the week and to alleviate burden on Wahiawā General's Emergency Room for non-emergency use. WH is requesting \$112,500 in funds to purchase 15 lights at a cost of \$7,500

*Objective G:* The largest barrier to the safety of the Wahiawā Medical Building's staff and visitors is the lack of an up-to-code fire alarm system. The current system dates to 1984 and has reached its useful life. Also, the existing fire panels are no longer repairable as the company that installed them is no longer in business. To date, WH has implemented alternate safety measures addressed in NFPA 1 Section 16.4.4.3, including appointment of a fire watch. WH is requesting funds in the amount of \$300,000 to install a new fire alarm system for the building.

#### *GOAL II: PLANNING NEW CONSTRUCTION*

The parking lot behind the Wahiawā Medical building has already been zoned for commercial use and construction. WH would use GIA funds to contract an architect/project manager to develop plans for the construction of a new facility for purposes of expanding clinical service delivery and providing space for a community housing center with various social and support services specific to the needs of low-income families in the service area. The facility would also help kickstart a potential residency program between the John A. Burns School of Medicine, University of Hawai'i and Wahiawā Health, allowing for teaching space within this new facility. Becoming a teaching facility would provide potential pathways for other medical professional programs in the state such as nursing, nutrition, social work, medical technology, pharmacy and dental hygiene programs. This facility is not intended to replace the Wahiawā Medical Building but to complement its services via expansion. The two facilities would effectively create a primary care campus for area residents, interns and students. In short, the new building would be four stories at 17,000 square foot per each floor. The top three floors would be conditioned tenant spaces where each tenant would be responsible to build out their own space. Being that the facility is taking up a substantial portion of the existing parking lot to the existing Wahiawā Medical Building, the bottom floor of the new facility would consist of parking spaces and a core entrance lobby. In total, the building would house 68,100 square foot of space; total conditioned space amounting to 51,100 square feet. The total project cost to design, construct, and finish this new facility would amount to \$17.4 million.

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\$400,000 in GIA funds are requested for preliminary planning and design (\$300,000) and to cover necessary legal fees relating to planning and design (\$100,000). Award of these funds would transform the project from a concept to a reality and kickstart WH's capital campaign of securing future investors to contribute to construction of the new facility.

***GOAL III: EQUIPMENT TO OUTFIT WH FOR SERVICE DELIVERY***

Provided as Attachment C: *Equipment and Motor Vehicles* is an equipment list totaling \$87,185 in requested funding. Please consult this equipment list for details. In short, these purchases will help outfit the expansion from three to 21 exam rooms, nurse triage space, and administrative/reception space behind the counter of WH in STE 106 and space within STE 208. This list was compiled by WH's clinical and administrative staff and represents priority needs alone. Once clinical space is properly outfitted, all exam rooms will be at full capacity as the demand for services is currently outpacing WH's capacity, even following expansion.

**3. The public purpose and need to be served**

The City and County of Honolulu has designated Wahiawā as one of three U.S. Housing and Urban Development (HUD) NRSAs (Neighborhood Revitalization Strategy Areas) on O'ahu. This designation recognizes underserved and socio-economically disadvantaged populations, and provides flexibility, exemptions and consideration for funding for housing, economic development and revitalization initiatives. Wahiawā is also federally designated to harbor a Medically Underserved Population (MUP).

The geographic service area of Wahiawā Health is defined as zip codes 96786, 96789, and 96791 – Wahiawā, Mililani, and Waialua. The service area harbors 108,323 residents, 22.3% of whom live at or below 200% of Hawai'i's Federal Poverty Guidelines, establishing a target population of approximately 24,178 low-income residents. In 2016, the health center program served 2,007 patients in the service area, establishing 8.3% penetration of the low-income population, leaving 22,171 low-income residents unserved by their local community health center. The most outstanding barrier to low income residents is a lack of access to primary care. Physicians in the community have retired or left to pursue employment elsewhere. Before the opening of Wahiawā Health, there had been 5,900 residents per one primary care physician demonstrating the severity of need. Census tracts 91-94 capture populations of Wahiawā and Whitmore Village and holds a Medical Underservice Scoring of 64.1, the highest of all areas designated MUP on O'ahu. Population groups designated MUP demonstrate substantial socioeconomic barriers to health care access which inevitably produce higher rates of chronic disease. This lack of access to care has led residents to seek healthcare elsewhere, primarily in Honolulu, 22 miles south, a 40-minute drive in one direction. Many Wahiawā residents would neglect preventive care, waiting until their situation was emergent, utilizing the Wahiawā General Hospital (WGH) Emergency Department.

WH now provides service to approximately 5,000 unique patients. In December of 2017, WH was designated a Federally Qualified Health Center (FQHC) Look-Alike. As an FQHC Look-Alike, WH now has the ability to offer discounted services to patients who live on incomes at or below 200% of federal poverty guidelines via the patient's participation in WH's Sliding Fee Discount program.

WH employs 25 extremely compassionate, hard-working, and dedicated individuals who embody the mission of WH in their daily lives and practices. WH began with the acquisition of three long-established, primary care practices. These three physician led practices had seen many primary care outfits come and go through their years and were witness to the slow but steady revitalization of Wahiawā's business and agricultural community in the past decade. Wahiawā Community Based Development Organization (CBDO) is working on initiatives that improve the well-being of Wahiawā, including projects that will bring forth infrastructure for healthy food product development and disbursement. The CBDO is in complete support of diversified agriculture in Central O'ahu. Wahiawa CBDO believes that agriculture and agritourism can be drivers for improving economic opportunities for the local residents.

However, while small businesses and agriculture continue to grow and become more diversified in Wahiawā, primary care is still in crisis. The foundation to a thriving community and local economy are essential health services, of which primary and preventive care are its bedrock. When the Wahiawā Center for Community Health was organized as a non-profit in 2012, this group of volunteers was 100% committed to establishing a community health center in Wahiawā that would turn no one away and would offer comprehensive services under one roof. Now that WH has finally opened its doors, it is already being recognized as the area's preferred primary care provider.

By calendar year end of 2019, WH will employ close to 48 FTE, thereby contributing to the recruitment and retention of compassionate and qualified health professionals, many of whom are recent graduates of the local medical school or allied health profession programs. Early intervention of primary and preventive care will lessen the disproportionate burden of charity care on WGH and assist them in attaining financial stability. Construction of the new facility will provide shared-space for many community-minded, health-focused organizations, operating in partnership with Wahiawā Health. This new facility, paired with the Wahiawā Medical Building, will function as a campus, a one-stop-shop for the comprehensive primary care needs of area residents. Working in concert with the state's medical school and other allied health professional programs will lend to the recruitment and retention of physicians, nurses, dietitians, social workers, dental hygienists, behavioral health specialists and pharmacists serving rural, and impoverished communities and will incentivize medical professionals to remain in the area, thereby fostering meaningful relationships with patients and their families. Reliable, professional, patient centered primary care is the missing link to central O'ahu's economic revitalization efforts, and once fully realized, will provide the tools necessary to combat harmful health disparities afflicting our most vulnerable populations.

#### **4. Describe the target population to be served**

WH's geographic service area consists of three zip codes: 96786, 96789, and 96791 – Wahiawā, Mililani, and Waiialua. The service area harbors 108,323 residents, 22.3% of whom live at or below 200% of poverty, establishing a target population of 24,178 low-income residents. WH is a FQHC program Look-Alike. In calendar year 2016, FQHCs served just 2,007 residents within the service area, establishing just 8.3% penetration of the low-income target population, leaving 22,171 low-income residents unserved by their local community health center. This is the population WH intends to reach out to, as they are eligible to participate in WH's Sliding Fee

Discount Program for discounted services specific to their needs and relative to their ability to pay. WH markets services to uninsured and underinsured populations. The 2016 American Community Survey published by the Census Bureau estimates that 3.3% of the total population is uninsured, 11.5% are recipients of Hawaii Medicaid, 12.7% are beneficiaries of Medicare, and 12.4% are covered solely by TRICARE/military insurance. All would benefit from the patient-centered services offered by WH, as the nearest provider offering similar services is in Pearl City, a 40-minute bus ride.

Furthermore, WH also targets services to people experiencing homelessness and area veterans. Being that WH is near Schofield Barracks and Wheeler Army Air Force Base, WH serves many active duty members and veterans of the US military. The nearest VA clinic to WH is in Honolulu, located 17.7 miles SE in Honolulu, an hour and 50-minute bus ride from Wahiawā. When WH opened its doors, military families living in Schofield Barracks began accessing the clinic, especially young families. WH accepts TRICARE and is quickly becoming a preferred provider for military families, as the clinic on-base has limited hours and ability to schedule for the needs of such a large population. TRICARE insures 25% of the service area population. Wahiawā is home to a growing homeless population, as many homeless pushed out of the tourist areas of Honolulu have come north to settle in the bush outside Wahiawā. WH is federally designated under the FQHC program to serve healthcare needs of low-income populations *and the homeless*. The 2017 Point-In-Time Study estimates there to be at least 385 homeless persons living within the service area. This demonstrates a 74% increase from the prior year. This is a very conservative estimate, as many encampments in the bush outside Wahiawā are not counted and move frequently to avoid confrontation with local authorities. WH allies with ALEA Bridge, an area non-profit dedicated to reducing homelessness on O‘ahu, to identify homeless populations and connect them with the resources they need to achieve self-sufficiency through genuine compassion and innovative, community-based resources. In late January of 2018, WH will partner with Project Vision to hold the first-ever mobile personal hygiene van at WH. The van will offer shower and other hygiene services for area homeless. As a potential means of initial point of contact, WH will work with Project Vision to relationship-build and provide services for our area homeless.

The Wahiawā Medical Building has long been a squatting space for area homeless. When WH first occupied space in the building, the open-air courtyard was being used as a bathroom for area homeless and the covered hallways and entry ways as spaces to sleep. This detoured many area residents from walk-ins. A full-time security guard had to be hired and placed in the courtyard for the protection of visitors and to preserve cleanliness of the facility’s open-air space. As an FQHC, WH refuses service to no one and offers services specific to people experiencing homelessness. WH’s goal is to facilitate needed medical care and connect homeless patients to services and solutions that enable self-management.

## **5. Describe the geographic coverage**

WH’s geographic service area consists of three zip codes: 96786, 96789, and 96791 – Wahiawā, Mililani, and Waialua. These three zip codes contain the City of Wahiawā, Schofield Barracks, Wheeler Air Force Base, Whitmore Village, Mililani Mauka, the town of Mililani, Waipio Acres, Waialua, and Mokuleia. Wahiawā and Schofield Barracks harbor just over half (54%) of the

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area’s low-income populations, therefore WH’s location is central to the most impoverished communities of the service area. WH is located in the Wahiawā Medical Building at 302 California Avenue in Wahiawā, right off of HI-80. The Bus operates route 72 which drops off riders across the street from the Wahiawā Medical Building, providing ease of access for low-income populations who utilize public transportation.

**II. SERVICE SUMMARY AND OUTCOMES**

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

*Scope*

These funds are requested for capital purposes, not specific to the hiring of personnel and delivery of services. The scope of work is relative to the three goals outlined previous: a) renovation/construction; b) planning for a new facility, and; c) equipment purchases.

*Tasks*

	Goals	Objectives	Tasks
1	Renovation of Wahiawā Medical Building	A STE 208 renovations (approved building permit completed)	Construction
		B Railing repairs	Assessment, Scope of Work, Permit, Construction
		C Stairway repairs	Assessment, Scope of Work, Permit, Construction
		D Window seal repairs	Assessment, Scope of Work, Permit, Construction
		E Wood repair	Assessment, Scope of Work, Permit, Construction
		F Lights for rear parking lot	Design, Permit, Construct
		G Fire alarm system	Design, Permit, Construct
2	Planning New Construction	A Contract an architect/project manager to develop plans for the construction of a new facility for purposes of expanding clinical service delivery and providing space for a community center housing various enabling and social services specific to the needs of low-income families in the service area.	Engage architect, contract
		B Pay legal fees necessary to facilitating the planning phase.	Engage attorney, contract
3	Equipment to Outfit WH For Service Delivery	C Purchase equipment necessary to outfit clinical space for service delivery at full clinical capacity	Purchase

*Responsibilities*

Following award, WH’s Executive Director and management team will facilitate purchase of equipment and execution of contracts. WH will appoint Garry Neavitt, Registered Architect as the Project Manager for all activities previously outlined, including alteration/renovation/construction objectives, the planning of the new facility, and equipment

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purchase/installations. Garry has worked as an architect, project manager, and building code consultant for over 35 years, with a wide range of project experience including custom single family residential projects, condos, retail, restaurants, commercial, church, and educational projects. Professional experience has included a full range of design service from contract development and preliminary design through construction administration.

WH's Executive Director and management team will meet regularly with Garry to ensure that tasks are meeting the specified expectations of executed contracts, pertaining to costs and timelines. Summary reports will be generated by Wahiawā Health and delivered to the Board of Directors, documented in minutes, to update the organization to the progress of related activities. WH's Board of Directors will be responsible for ensuring that activities do not interfere with the delivery of services or represent barriers to care for patients and their families.

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

	Goals	Objectives	Funds Expended	Objective Accomplished
1	Renovation of Wahiawā Medical Building	A STE 208 renovations (approved building permit completed)	9/2018	12/2018
		B Railing repairs	9/2018	12/2018
		C Stairway repairs	9/2018	12/2018
		D Window seal repairs	9/2018	12/2018
		E Wood repair	6/2019	06/2019
		F Lights for rear parking lot	6/2019	06/2019
		G Fire alarm system	6/2019	06/2019
2	Planning New Construction/ Renovation	A Contract an architect/project manager to develop plans for the construction of a new facility for purposes of expanding clinical service delivery and providing space for a community center housing various enabling and social services specific to the needs of low-income families in the service area. Coordination of current renovations.	7/2018	7/2020
		B Pay legal fees necessary to facilitating the planning phase.	7/2018	7/2020
3	Equipment to Outfit WH For Service Delivery	C Purchase equipment necessary to outfit clinical space for service delivery at full clinical capacity	07/2018	12/2018

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

WH is a designated Federally Qualified Health Center (FQHC) program Look-Alike, subject to 19 core program requirements of the health center program, administered by HRSA. As an FQHC, WH has implemented a comprehensive Quality Improvement/Quality Assurance and Risk Management (QI/QA/RM) program. WH's Board of Directors operates a Quality Improvement and Risk Management Committee (QIRMC) that meets bi-monthly, to evaluate the center's programs and activities. Of the committee's many responsibilities, the QIRMC charter explicitly states that two of the committee's primary objectives are to: "1) review organization

wide performance against the plan's quality and efficiency targets and report results to the Board; 2) review and approve safety related goals and objectives and report performance against targets to the Board." The QI/QA/RM program is designed to monitor services, programs, and special projects, inclusive of capital projects. The QIRMC was instrumental in monitoring recent expansion/renovation efforts in STE 106, that resulted in expansion of clinical capacity from three to 21 exam rooms.

WH's Executive Director will stay in close communication with the Project Manager, who will be responsible for the day-to-day monitoring of project activities. The Executive Director will relay to the Board of Directors, the status of the project by utilizing a project report developed specifically for health center capital improvement projects. The details of this report are summarized in the following narrative. The organization will utilize the Plan-Do-Study-Act (PDSA) methodology for routine assessment and planned improvement. Planned improvement strategies require the review and approval of all parties (Project Manager, WH management, WH Board of Directors) prior to their implementation and are designed not as a fast-track but as a further guarantee to accomplish the project specific to requirements outlined in executed contracts, in a timely and cost-efficient manner.

- 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.**

As previously stated, WH will utilize a project report developed specifically for health center capital improvement projects. The report will be generated bi-monthly or more frequent if deemed necessary. The report will be generated by the Project Manager in coordination with the Executive Director and will also include an appendix developed by the Finance Director, demonstrating the grant award, the amount drawn down, applicable expenses, and the remainder of the fund paired with budgeted expenses. This report will be presented to the Board of Directors for their review and approval. The report is subject to process-improvement, if deemed necessary following review by the Board. The objective will remain, to provide the state with a standard and objective way to assess the status and achievement of related goals, objectives, and tasks outlined herein. The report will evaluate the following: cost performance, schedule performance, safety performance, quality performance, and satisfaction.

### **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 (Attachment A)**
  - b. Personnel salaries and wages (Attachment B)**
  - c. Equipment and motor vehicles (Attachment C)**
  - d. Capital project details (Attachment D)**
  - e. Government contracts, grants, and grants in aid (Attachment E)**

**2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2019.**

Per the table below, all funds are requested in the first quarter and will be expended within the allotted timeframe of the project period (see Section II, Question 2).

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$356,171.00	\$356,171.00	\$356,171.00	\$356,172.00	\$1,424,685

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

WH is seeking grant funds for fiscal year 2019 from three potential sources:

- a) HRSA 330 operational grant funds – as possible New Access Point
- b) City and County GIA - requesting funds for an Outreach Van
- c) Community Based Development Organization – to see funds for additional clinic space within the Wahiawā Medical Building

**4. The applicant shall provide a listing of all state and federal tax credits it has been granted within the prior three years. Additionally, the applicant shall provide a listing of all state and federal tax credits they have applied for or anticipate applying for pertaining to any capital project, if applicable.**

This is not applicable as WH is a 501(c)(3) organization with no tax credits claimed.

**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.**

WH received the following grants in aid:

- a) 2015 State of Hawai'i Grant-in-Aid \$250,000.00
- b) 2016 State of Hawai'i Grant-in-Aid \$700,000.00

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

WH finished its calendar year of 2017 with about \$635,000.00 in unrestricted cash and cash equivalents.

#### **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.**

*Garry Neavitt, Project Director*

Garry has worked as an architect, project manager, and building code consultant for over 35 years, with a wide range of project experience including custom single family residential projects, condos, retail, restaurants, commercial, church, and educational projects. Garry's professional experience has included a full range of design service from contract development and preliminary design through construction administration. Garry is an ICC certified building plan reviewer and registered architect, certified by NCARB.

Garry graduated from Virginia Tech with a Bachelor of Architecture in 1979. In the 1980s and 1990s, Garry worked as a design architect and project manager for groups in Missouri, Michigan, New York, and North Carolina. This included the planning, design, and construction management of several restaurants, retail spaces, grocery stores, medical offices, homes, and shopping centers. In the early to mid-2000s, Garry worked in North Carolina helping design and build out university facilities, gyms, and managing project teams on various assignments. Garry has been working in Hawaii since 2005, for Peter Vincent Architects, Tower Third Party Review, and Visionary Concepts. Garry has worked on several structures within Honolulu including churches, restaurants, retail shops, single family residences, ocean front, and mountain view homes.

Garry is well qualified to lead the design and implementation of renovation at the Wahiawā Medical Building and new construction of the facility in Wahiawā Medical Building's back lot.

*Bev Harbin, Executive Director*

Bev is born and raised in Honolulu, attended the University of Hawai'i at Hilo, where she accomplished a degree in Political Science and Women's Studies.

From 2000 to 2005, Bev acted as an independent contractor to the Chamber of Commerce of Hawai'i, responsible to develop, coordinate and support the small business council and chamber. Bev also reviewed pending legislation as it affects small business, drafted, coordinated and presented testimony to legislature. Bev developed educational forums for small business communities to understand issues that relate to their businesses. The specific areas of concern were health care (cost and benefits), workers' compensation, regulatory barriers, and tort reform. During this time, Bev participated in two working groups with the Hawai'i Uninsured Project, funded by the Robert Wood Johnson and the Federal Department of Health. Focus was to address the working uninsured such as the part-time employee and the independent contractors and the Prepaid Health Care Act.

In March of 2011, Bev coordinated the development and concept of a HRSA grant application to compete for a federal HRSA grant to study the feasibility of a community health center in Wahiawā. The grant was awarded to FACE in September of 2011. From 2011 to 2012, Bev coordinated efforts to develop community focus groups, needs assessments, and need surveys, assisting the community in developing the first annual Wellness Event, as part of the grant requirements for a public community health forum.

The Wahiawā Center for Community Health  
2019 GIA

During this time, Bev was responsible for all HRSA fund disbursements, acting as the Project Coordinator, and obtained additional private funds to expand public outreach.

From September of 2011 through August of 2016, Bev has been working diligently to make the Wahiawā Health a reality.

In August of 2016, the dedicated staff and Board of Directors, led by Bev's guidance, opened the doors of Wahiawā Health and began serving patients. In December of 2017, following a site visit by HRSA, Wahiawā Health was designated a FQHC Look-Alike. Through the 2016 year, Bev was responsible for managing several renovation/construction/alteration projects to expand capacity within STE 106 and outfit the clinic for the delivery of services.

Florante "Ian" Pumaras, Finance Director

Ian Pumaras joined Wahiawā Health immediately after a short stint and a few years in the alternative energy sector and the hospitality industry, respectively. He came with a wealth of experience and training in finance and accounting, as well as in sales and customer service. Ian completed his university education both at home and abroad, with an undergraduate degree in economics from the University of Hawai'i at Mānoa and a graduate degree in business from Yonsei University, Seoul, South Korea. He is a local resident of Wahiawā, and is a graduate of Waialua High and Intermediate School.

Prior to joining WH, Ian worked as a deputy CFO for Waikiki Beach Activities at the Hilton Hawaiian Village Waikiki Beach Resort, responsible for accounting, budgeting, strategic planning, equipment purchasing, hiring, training, and managing 80 to 100 staff at any given time. Since joining WH, Ian has served as controller, gradually increasing his responsibilities. Ian was instrumental to developing and maintaining financial accounting and reporting systems compliant with the HRSA 330 health center model. Through the renovation of STE 106, Ian managed all contracts, purchases, and expenses, developing reports for management and the Board, aiding them in project management and QI activities.

Related Projects Completed in the Prior Three Years by Wahiawā Health			
Project	Time Frame	Expenses	Outcomes
Purchase of real estate units	Nov 2016 -	1,600,000	Completed (USDA RD loan)
Planning, Permit and Renovation to Suite 106	March 2017 – Jan 2018	950,000	completed

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

The Wahiawā Medical Building is located at 302 California Avenue in Wahiawā. The building, constructed in 1977, occupies 75,000 square feet of space and houses 20 suites. Wahiawā Health currently occupies STEs 106 and 208, occupying a total of 5,535 square feet of an equivalent of 24.63% ownership within the complex. The new facility for which funds are requested for planning and design, would occupy the parking lot on the north side of the Wahiawā Health

Building. This facility would be four stories at 17,000 square foot per each floor. The top three floors would be conditioned tenant spaces where each tenant would be responsible to build out their own space. Being that the facility is taking up a substantial portion of the existing parking lot to the existing Wahiawā Health Building, the bottom floor of the new facility would consist of parking spaces and a core entrance lobby. In total, the building would house 68,100 square foot of space; total conditioned space amounting to 51,100 square feet. Architect will confirm space requirements with the owner. Program for building will be developed, building will be designed, approved by owner, permitted, bid out to contractors, contract awarded, and facility constructed.

## V. PERSONNEL: PROJECT ORGANIZATION AND STAFFING

- 1. Proposed Staffing, Staffing 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 only staff to mention are those previously outlined: Garry Neavitt, Project Director; Bev Harbin, Executive Director; Ian Pumaras, Finance Director. Garry Neavitt will work for WH on contract, paid for by funds within this request. Bev Harbin and Ian Pumaras are employees of WH, reporting to the organization's Board of Directors. Authority will follow the organizational chart outlined in the following question. Supervision and administrative direction will also follow the organizational chart outlined in the following question. This request is not inclusive of any training opportunities, as the staff already retain the desirable experience and qualifications needed to successfully manage the project from begin to end.

### Project Manager

Required Education: Bachelor of Architecture degree; successful completion of Architect Registration Exam for state licensure

Required Experience: experience and comfort leading multidisciplinary design teams and clients through development of new buildings and renovation designs; detailed understanding of construction techniques and development of final construction documents; experience leading meetings and design review meetings with architectural and staff and engineers; experience designing inpatient and outpatient healthcare spaces compliant to IBC and ISDH; demonstrated ability to solve problems proactively, follow-up commitments, and be willing to work at all levels to succeed.

### Executive Director

Required Education: Master's level or above in health administration or related field. Seven years of executive level experience, including five years of experience in the administration of a healthcare organization. Additional appropriate education may be substituted for four years of executive level experience.

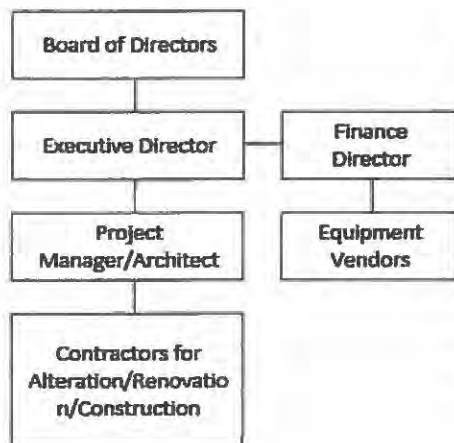
**Required Experience:** Knowledge of and sensitivity to the cultures and lifestyles of the communities served; knowledge of the principles and practices of health planning and management of health system sufficient to direct and oversee WH operations; leadership skills to exercise a high level of initiative, judgment, discretion and decision making; skill in analyzing situations accurately and taking effective action; skill in establishing and maintaining effective working relationships with the board, community, patients, employees, government and private representatives and the general public; ability to assume responsibility and authority over professional and support staff; ability to manage change and direct the problem-solving process; ability to analyze, develop and implement services, programs and activities; ability to analyze and prepare comprehensive reports; ability to communicate and collaborate with the board, staff, government and private representatives, the community and the general public.

***Finance Director***

**Required Education:** Bachelor’s degree in Accounting, Finance, business or Master’s degree in Business from an accredited college or university or equivalent experience.

**Required Experience:** Strong knowledge of health care industry trends, state and federal regulations and payment systems; physician practice finance experience required; demonstrated ability to provide leadership in a way that reinforces the organization’s mission, visions and values; capable of providing leadership, display a positive attitude, and participate in problem solving; ability to communicate effectively through written and verbal presentations; demonstrates analytical, problem solving, and negotiation skills; knowledge of and sensitivity of cultures served.

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



The chart to the left establishes the chain of command for the project and related objectives. In short, the Project Director manages alteration/renovation/construction projects and related staff, reporting to the Executive Director. The Executive Director and Finance Director work together to manage project expenses. The Executive Director reports to the Board, to keep them in the loop to project oversight and quality assurance reporting. The Finance Director will be responsible for coordinating with equipment vendors to purchase clinical and office equipment noted in this request.

- 3. Compensation:** the applicant shall provide the annual salaries paid by the applicant to the three highest paid officers, directors, or employees of the organization by position.

The Wahiawā Center for Community Health  
2019 GIA

	Name	Position	FTE	Salary
1	Bev Harbin	Executive Director	1.0	\$150,000
2	Lucio Pascua, MD	Medical Director	1.0	\$144,000
3	Cynthia Endrizal, PhD, RDN	Chief Quality Improvement Officer and Community Nutritionist	1.0	\$125,000

**VI. OTHER**

- 1. 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.**

This is not applicable. There is no pending litigation or disclosure of any outstanding judgment to specify here applicable to The Wahiawā Center for Community Health.

- 2. 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.**

This is not applicable to WH's request.

- 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 Article X, Section 1, of the State Constitution for the relevance of this question.**

This is not applicable to WH's request. WH is not using this grant specific to supporting or benefiting sectarian or non-sectarian private educational institutions.

- 4. 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.**

Being that this is a capital funds request, if proposed objectives are funded, the project will commence and close with the full expenditure of funds and outcomes fully realized. There are no ongoing expenses associated with this project, such as personnel or service item. Funding specific to alteration/renovation/construction at the Wahiawā Medical building represents a partial request. The list of repairs at this facility is rather lengthy therefore expenses of absolute priority were outlined in this request. Should WH pursue GIA funding in future years, it will undoubtedly be a request for unknown or additional repair/restoration of the Wahiawā Medical building or to help construct the newly designed and permitted medical complex previously described. WH has begun a capital campaign focused on fund raising for the new facility. This campaign will begin following planning and design of the new facility.

- 5. Certificate of Good Standing (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.**

This certificate is provided as Attachment F to this grant application.

- 6. Declaration Statement: the applicant shall submit a declaration statement affirming its compliance with Section 42F-103, Hawaii Revised Statutes.**

The declaration statement is provided in closing to this application, as Attachment G.

- 7. Public Purpose: the applicant shall specify whether the grant will be used for public purpose pursuant to Section 42F-102, Hawaii Revised Statutes.**

This grant request is pursuant to public purpose. The requirements of appropriate standing committees of the legislature are provided the following detail, as specified in §42F-102

- a. The name of the requesting organization or individual;**

The Wahiawā Center for Community Health

- b. The public purpose for the grant;**

To improve the safety and functionality of facilities at 302 California Avenue. To create space for community purposes, to facilitate cooperation among area healthcare providers, social services, charities, and community advocates in eliminating health disparities among Central O'ahu's most vulnerable populations. Also, to create ongoing economic stimulation and to support economic diversification in Wahiawā and throughout Central O'ahu

- c. The services to be supported by the grant;**

All required and additional primary care services mandated for a designated Federally Qualified Health Center Program Look-Alike under Section 330 of the Public Health Services Act, administered by the Health Resources and Services Administration under the Bureau of Primary Health Care.

- d. The target group; and**

All low-income persons and families living at or below 200% of Federal Poverty Guidelines (per Section 330(e)) within the boundaries of 96786, 96789, and 96791 – Wahiawā, Mililani, and Waialua. Additionally, the Wahiawā Center for Community Health is designated under the FQHC program to serve (per Section 330(h)) the needs of people experiencing homelessness. The Wahiawā Center for Community Health serves all, regardless ability to pay, therefore the target population can be described in general as low-income, uninsured, and underinsured residents of the service area.

**e. The cost of the grant and the budget**

The organization is requesting \$1,424,685 in grant funding. The grant request represents 100% of projected expenses.

**Attachment A: BUDGET REQUEST BY SOURCE OF FUNDS**

Period: July 1, 2018 to June 30, 2019

Applicant: The Wahiawa Center for Community Health

<b>BUDGET CATEGORIES</b>	<b>Total State Funds Requested (a)</b>	<b>Total Federal Funds Requested (b)</b>	<b>Total County Funds Requested (c)</b>	<b>Total Private/Other Funds Requested (d)</b>
<b>A. PERSONNEL COST</b>				
1. Salaries	\$ -	\$ -	\$ -	\$ -
2. Payroll Taxes & Assessments	\$ -	\$ -	\$ -	\$ -
3. Fringe Benefits	\$ -	\$ -	\$ -	\$ -
<b>TOTAL PERSONNEL COST</b>	\$ -	\$ -	\$ -	\$ -
<b>B. OTHER CURRENT EXPENSES</b>				
1. Airfare, Inter-Island	\$ -	\$ -	\$ -	\$ -
2. Insurance	\$ -	\$ -	\$ -	\$ -
3. Lease/Rental of Equipment	\$ -	\$ -	\$ -	\$ -
4. Lease/Rental of Space	\$ -	\$ -	\$ -	\$ -
5. Staff Training	\$ -	\$ -	\$ -	\$ -
6. Supplies	\$ -	\$ -	\$ -	\$ -
7. Telecommunication	\$ -	\$ -	\$ -	\$ -
8. Utilities	\$ -	\$ -	\$ -	\$ -
<b>TOTAL OTHER CURRENT EXPENSES</b>	\$ -	\$ -	\$ -	\$ -
<b>C. EQUIPMENT PURCHASES</b>	\$ 87,185	\$ -	\$ -	\$ -
<b>D. MOTOR VEHICLE PURCHASES</b>	\$ -	\$ -	\$ -	\$ -
<b>E. CAPITAL</b>	\$ 1,337,500	\$ -	\$ -	\$ -
<b>TOTAL (A+B+C+D+E)</b>	\$ 1,424,685	\$ -	\$ -	\$ -
<b>SOURCES OF FUNDING</b>		Budget Prepared By:		
(a) Total State Funds Requested	\$ 1,424,685	Bev Harbin		808-591-0000
(b) Total Federal Funds Requested	\$ -			Phone
(c) Total County Funds Requested	\$ -			1/15/2018
(d) Total Private/Other Funds Requested	\$ -			Date
<b>TOTAL BUDGET</b>	\$ 1,424,685	Bev Harbin, Executive Director Name and Title (Please type or print)		



**BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES**

Period: July 1, 2018 to June 30, 2019

Applicant: The Wahiawa Center for Community Health

POSITION TITLE		FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
None		0	\$0.00	0.00%	\$ -
<b>TOTAL:</b>					\$ -
<b>JUSTIFICATION/COMMENTS:</b>					

**BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES**

Period: July 1, 2018 to June 30, 2019

Applicant: The Wahiawa Center for Community Health

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
OB Ultrasound Machine	1	\$ 28,696	\$ 28,696	\$ 28,696
Pediatrics Exam Table	2	\$ 1,995	\$ 3,990	\$ 3,990
Pediatrics Exam Table w/ Digital Scale	1	\$ 2,995	\$ 2,995	\$ 2,995
Ritter Power OB Exam Table	1	\$ 4,995	\$ 4,995	\$ 4,995
Wheelchair Dual-Ramp Scale	1	\$ 2,567	\$ 2,567	\$ 2,567
Adult Weight Scale (60 lb+)	1	\$ 595	\$ 595	\$ 595
Under-Counter Pharmacy Refridgerator	1	\$ 2,100	\$ 2,100	\$ 2,100
Otoscope/Ophthalmoscope	2	\$ 795	\$ 1,590	\$ 1,590
Rechargable Otoscope/Ophthalmoscope Handle	2	\$ 120	\$ 240	\$ 240
Otoscope/Ophthalmoscope Replacement Bulb	2	\$ 15	\$ 30	\$ 30
Doppler for OB	1	\$ 675	\$ 675	\$ 675
Hemoglobin A1c Testers	6	\$ 260	\$ 1,560	\$ 1,560
Triple Glove Box Holders for Exam Rooms/Stations	25	\$ 45	\$ 1,125	\$ 1,125
Desk Chairs for Provider Stations	10	\$ 185	\$ 1,850	\$ 1,850
Desk Chairs for Receptionists/Call Center Staff	12	\$ 224	\$ 2,688	\$ 2,688
Waiting Room Chairs for Patients	40	\$ 115	\$ 4,600	\$ 4,600
Modular Furniture to outfit a 10 person work-station used by reception, call center, and office staff	1	\$ 26,889	\$ 26,889	\$ 26,889
<b>TOTAL:</b>	<b>109</b>		<b>\$ 87,185</b>	<b>\$ 87,185</b>
<b>JUSTIFICATION/COMMENTS:</b>				

Attachment C:

## BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2018 to June 30, 2019

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
None	\$ -	\$ -	\$ -	\$ -
TOTAL:				\$ -
JUSTIFICATION/COMMENTS:				

## BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2018 to June 30, 2019

Applicant: The Wahiawa Center for Community

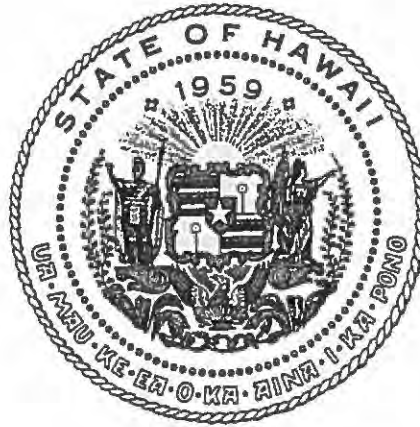
FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2016-2017	FY: 2017-2018	FY:2018-2019	FY:2018-2019	FY:2018-2020	FY:2020-2021
PLANS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
LAND ACQUISITION	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
DESIGN	\$ 400,000	\$ -	\$ -	\$ -	\$ -	\$ -
CONSTRUCTION	\$ 937,500	\$ -	\$ -	\$ -	\$ -	\$ -
EQUIPMENT	\$ 87,185	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL:</b>	<b>\$ 1,424,685</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>JUSTIFICATION/COMMENTS:</b>						
See narrative for breakout.						

Attachment E: **GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID**

Applicant: The Wahiawa Center for Community Health

Contracts Total: -

	<b>CONTRACT DESCRIPTION</b>	<b>EFFECTIVE DATES</b>	<b>AGENCY</b>	<b>GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)</b>	<b>CONTRACT VALUE</b>
1	None	NA	NA	NA	\$ -



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

THE WAHIAWA CENTER FOR COMMUNITY HEALTH

was incorporated under the laws of Hawaii on 01/25/2012 ; 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 02, 2018

*Catherine P. Awai-Cole*

Director of Commerce and Consumer Affairs

**Attachment G:                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.

The Wahiawa Center for Community Health

[Redacted Signature]

1/15/2018

(Signature)

(Date)

Bev Harbin  
(Typed Name)

Executive Director  
(Title)