THE THIRTIETH LEGISLATURE APPLICATION FOR GRANTS

CHAPTER 42F, HAWAII REVISED STATUTES

Type o	f Grant Request:						
Operating	Сар	ital					
Legal Name of Requesting Organization or Individual Coing Home Hawai'i	lual: Dba:						
Amount of State Funds Re	aguested: \$126.513.	00					
Brief Description of Request (Please attach word docu Going Home Hawai'i is requesting funds for a pilot pro statistics from Dr. Frederick Nitta, M.D. (OB-GYN/PCP believes that the number is much higher now. Substar multitude of extremely costly and, often, lifelong proble Hawai'i can cost taxpayers as much as \$5 million durir ment. Hawai'i County is experiencing a massive drug	gram targeting pregnant), 44% of his pregnant nce-abusing pregnant w ms. As an example, a ng their lifetime in terms	t women using drugs a patients were using dru romen and their babies baby born with fetal ald of medical & behavion	and/or alcohol. Per ags in 2017 and he are at-risk for a cohol syndrome in al health treat-				
Amount of Other Funds Available:	Total amount o	f State Grants Recei	ved in the Past 5				
State: \$ ⁰	Fiscal Years:	_					
Federal: \$ ⁰	\$ <u>150,000.0</u>	0	····				
County: \$0							
Private/Other: \$	\$ <u>14,659.14</u>						
New Service (Presently Does Not Exist)	Existing Se	rvice (Presently in	Operation):				
Type of Business Entity:	Mailing Addre	ss:					
501(C)(3) Non Profit Corporation	80 Pauahi Str	eet, Suite 203					
Other Non Profit	City:	State:	Zip:				
Other	Hilo	н	96720				
Contact Person for Matters Involving this App	lication						
Name: Carol Matayoshi	Title: Chief Operatir	ng Officer					
Email: carol.goinghomehawaii@gmail.com	Phone: (808) 491-243	7					
Federal Tax ID#:	State Tax ID#						
	<u></u>	_					

Lester Estrella, Chief Executive Officer

January 17, 2019

Authorized Signature

Name and Title

Ve Date Signed

Application Submittal Checklist

The following items are required for submittal of the grant application. Please verify and check off that the items have been included in the application packet.

\boxtimes	1) Certificate of Good Standing (If the Applicant is an Organization)
\boxtimes	2) Declaration Statement
\boxtimes	3) Verify that grant shall be used for a public purpose
\boxtimes	4) Background and Summary
\boxtimes	5) Service Summary and Outcomes
	 6) Budget a) Budget request by source of funds (<u>Link</u>) b) Personnel salaries and wages (<u>Link</u>) c) Equipment and motor vehicles (<u>Link</u>) d) Capital project details (<u>Link</u>) e) Government contracts, grants, and grants in aid (<u>Link</u>)
\boxtimes	7) Experience and Capability
\boxtimes	8) Personnel: Project Organization and Staffing

AUTHORIZED SIGNATURE

LESTER ESTRELLA, CEO

1-17-19 DATE

PRINT NAME AND TITLE



STATE OF HAWAII STATE PROCUREMENT OFFICE

CERTIFICATE OF VENDOR COMPLIANCE

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

Vendor Name:

GOING HOME HAWAII

DBA/Trade Name:

46-3483417

Issue Date:

01/10/2019

Status:

Compliant

Hawaii Tax#:

04699406-01

New Hawaii Tax#:

GE122180608001

FEIN/SSN#:

XX-XXX3417

UI#:

XXXXXX4041

DCCA FILE#:

250581

Status of Compliance for this Vendor on Issue date:

Department(s)	Status
Hawaii Department of Taxation	Compliant
Internal Revenue Service (Compliant for Gov. Contract)	Compliant
Hawaii Department of Commerce & Consumer Affairs	Exempt
Hawaii Department of Labor & Industrial Relations	Compliant
_	Hawaii Department of Taxation Internal Revenue Service (Compliant for Gov. Contract) Hawaii Department of Commerce & Consumer Affairs

Status Legend:

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

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.

Going Home Hawaii (Typed Name of Individual or Organization)		
Signature) Sstrella	/-/7- (Date)	19
Lester Estrella	Chief Executiv	ve Officer
(Typed Name) Rev 12/2/16	(Title) 5	Application for Grants

Application for Grants

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

I. Certification – Please attach immediately after cover page

1. Certificate of Good Standing Attached

2. Declaration Statement

Going Home Hawai'i is hereby affirming its compliance with Section 42F-103, Hawai'i Revised Statutes, regarding the standards for the award of grants.

3. Public Purpose

Going Home Hawai'i hereby confirms that this grant, if awarded, will be used for a public purpose pursuant to Section 42F-102, Hawai'i Revised Statutes. This purpose is explained under Section II. Background and Summary, 3. The public purpose and need to be served.

II. Background and Summary

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

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

"Going Home" is the name given to efforts on Hawai'i Island to reintegrate ex-offenders into the community and the workplace. The Hawai'i Island Going Home Consortium comprises more than 30 public and private entities and their representatives, with a network of over 200 local, state, and national partners. Our mission is to assist Hawai'i Island men, women, and youth released from correctional institutions with reintegration into community life through employment, training, and appropriate supportive services.

While we have been formally organized since 2004, we trace our initiative back to the late 1990's when the Hawai'i Island Corrections Advisory Commission was created to address severe prison overcrowding. Since the fall of 2004, Consortium members have met monthly, without fail, to address issues and challenges, coordinate services, and promote the need for assisting ex-offenders with their reentry and helping them to become law-abiding, self-sufficient, and productive community members.

In May of 2015, Going Home Hawai'i (GHH) received its nonprofit 501(c)(3) designation; GHH is the nonprofit branch and the governing fiscal body for the Hawai'i Island Going Home Consortium. The Consortium continues to meet monthly with an

average attendance of 25-30 individuals. Many of our members actively participate on committees which include the following: Career Pathways, Community Relations, Cultural Competency, Employer Relations, Faith-Based Organizations, Health and Wellness, Housing, Justice Partners, and the West Hawai'i Coalition.

Our membership includes other non-profit organizations, criminal justice agencies, mental health and substance abuse treatment providers, educational providers, employment specialists, housing specialists, and concerned community members from both East and West Hawai`i. Virtually every agency that works with criminal offenders on Hawai`i Island is a member of or is aligned with GHH. As such, GHH is <u>ideally</u> situated to address the multiple challenges of offender reintegration, including the complex issues involving chronic homelessness, mental illness, and substance abuse.

2. The goals and objectives related to the request:

Goal One: To identify women who are pregnant and using alcohol or illicit drugs.

Objectives:

- Inform community stakeholders of this project through networking, brochures, media, and community-wide public informational campaigns to elicit community support and referrals;
- Conduct aggressive outreach in the community in order to find and identify the target population;
- Work directly with Dr. Frederick Nitta, M.D. (OB-GYN/PCP) in testing and identifying women needing treatment.

Goal Two: Engage with and assist identified women to enter into prenatal care and to refrain from using alcohol or illicit drugs, preferably in their first trimester of pregnancy.

Objectives:

- Establish therapeutic rapport to obtain trust and respect;
- Use therapeutic rapport for the following purposes:
 - 1. To ask questions and look for patterns as an opportunity to gather
 - 2. information;
 - 3. To discuss options, with the understanding that some women may not want to continue the pregnancy;
 - 4. To address fears and concerns with regard to accessing prenatal and substance abuse treatment.
- Educate targeted women of the importance of early prenatal care and the risk factors associated with alcohol and/or drug use during pregnancy;
- Encourage targeted women to engage into prenatal care and substance abuse treatment;
- Provide transportation to care and treatment, if needed;
- Match targeted women with a trained volunteer mentor to provide encouragement and support;

 Provide access to substance abuse treatment for program participants, if needed.

Goal Three: Ensure that women continue with prenatal care and abstain from alcohol and/or drug use throughout their pregnancies.

Objectives:

and not a series

- Continue with case management for the following purposes:
 - 1. Prenatal anticipatory guidance and education;
 - 2. Monitoring women's general health status;
 - 3. Transportation to and from prenatal care and substance abuse treatment if needed:
 - 4. Refer participants to other community resources or partner agencies as needed:
 - 5. Continuity of care.
- Continue with mentoring as an integral component of culturally competent care.
 Mentors will continue to work with program participants to empower, encourage, inspire, and motivate them to maintain abstinence and follow up with their prenatal care throughout the pregnancy.

Goal Four: Assist with abstinence-based recovery.

Objectives:

- Provide self-care incentives for participants after each prenatal visit;
- Continue with case management and mentoring throughout pregnancy:
- · Provide small celebratory gifts for each new mother;
- Assist with scheduling postnatal and aftercare treatment.

3. The public purpose and need to be served:

The genesis of this project came from a man affectionately known as "Hilo's welfare doctor" for his commitment and dedication to aiding the underserved. Dr. Fredrick Nitta is an Obstetrician and Gynecologist as well as a Primary Care Physician who has been delivering babies in Hilo for over 25 years.

More than 90 percent of Dr. Nitta's patients are on Medicaid, Medicare, or Med-QUEST, and almost all of them are asked to take a drug test before the doctor sees them. Dr. Nitta requires the testing because the drug problem in Hawai`i County has grown to epidemic proportions. Per Dr. Nitta's statistics from 2017, 44 percent of his pregnant patients tested positive for drugs and he suspects that it is much higher now.

Substance abusing pregnant women and their babies are at risk for a multitude of costly and often life-long problems. Babies whose mothers used marijuana, cocaine, methamphetamine, or heroin during pregnancy may be born in a state of drug withdrawal. Drug-dependent infants have sensory and regulation challenges. They are often jittery, drowsy or irritable, and may have difficulty breathing, nursing or sleeping.

These babies may have birth defects, behavioral problems or cognitive disabilities that detract from their quality of life as they grow.

The Children's Research Triangle surveyed nearly 2,300 pregnant women islandwide from 2008 to 2010; 1,158 admitted to drinking alcohol or other substance abuse while pregnant. Data suggests that almost half of the island's 37,892 children under age 18 were exposed before birth to alcohol, tobacco and/or illicit drug use.

Findings from "The First 1,000 Women: Perinatal Substance Use on the Hawaii Island" (Chasnoff IJ, Williams S, Sasaki D.; Chicago, IL: Children's Research Triangle; 2010) indicated that of the 2,200 babies delivered on the island annually, almost 1,100 are born exposed and 600 are likely affected by Fetal Alcohol Spectrum Disorders (FASD).

Though these studies are eight years old, Hawai`i County's drug problem is worse than ever. Our network tells us that teenagers and young adults are dying every month from overdoses or suicide. A representative from Child Welfare Services (CWS) said that approximately 40-50 "drug babies" are taken each year from the hospital. Last year, three babies were found "in the bushes."

Children who are prenatally exposed to tobacco, alcohol, and illicit drugs commonly present with health and behavioral challenges that place them at high risk for child abuse and neglect. Furthermore, according to the research (per Dr. Ira Chasnoff, who conducted the Big Island study), 60 percent of prenatally exposed children will likely end up in jail.

Projecting effects of the screening data on Big Island children, Dr. Chasnoff says: "Providing intervention and treatment to even a small proportion of these children through the mental health, education, child welfare and juvenile justice systems may be a driving force in the escalating costs for children's behavioral health services that are being documented across the state."

While 100 percent preventable, alcohol-exposed pregnancy is the leading cause of miscarriage, stillbirth, birth defects and other disorders. Drinking during pregnancy can lead to the child developing FASD, a specific group of birth defects, including physical abnormalities, distinct facial features, stunted growth, memory problems, learning disabilities and even mental retardation in severe cases.

Smoking during pregnancy can increase risk of stillbirth, infant mortality, sudden infant death syndrome, preterm birth, respiratory problems, slowed fetal growth, and low birth weight.

Prenatal use of some drugs, including opioids, may cause a withdrawal syndrome in newborns called neonatal abstinence syndrome (NAS). Babies with NAS are at greater risk of seizures, respiratory problems, feeding difficulties, low birth weight, and even death.

For families, coping with their children's challenges can be devastating. For the community, the cost is high; a baby born with fetal alcohol syndrome in Hawaii can cost as much as \$5 million during their lifetime.

The incidence of infant mortality and drug- and alcohol-addicted babies is linked to the quality of prenatal care the mothers received. Birth defects, developmental problems, and behavioral problems occur in many children whose mothers have not received adequate prenatal care.

Prenatal health-care and substance abuse treatment programs for pregnant women using drugs and/or alcohol can also help prevent the occurrence of developmental problems that contribute to low academic achievement and the likelihood of delinquent behavior.

A key obstacle to successfully implementing prenatal health and treatment programs is getting information to women most in need, and convincing them to follow this urgent medical advice. Some women who have already used drugs or alcohol while pregnant may be reluctant to receive help because of shame or fear that their babies will be taken away. Others who need and want services require transportation and/or childcare support in order to access them. In addition, local programs have waitlists for services, and eligibility assessments are delayed due to staffing limitations.

Alcohol and/or drug use during pregnancy is a complex public-health problem and is a recognized factor in infant morbidity and mortality. Adverse effects for the mother and her developing child too often result in physiological and socio-behavioral disabilities that span a lifetime. The prevention of these problems relies on a system of care that is timely and appropriate in response, respectful and protective in nature, and fitting in the cultural context of the local community it serves.

This project will further benefit the community by reducing costs for prenatally exposed children's medical care, as well as costs for services including mental and behavioral health treatment, special education, and involvement with child welfare and juvenile justice systems.

In addition, by decreasing the likelihood of delinquent or criminal behavior caused by prenatally exposed children's developmental problems, the project will have a positive impact on public safety.

4. Describe the target population to be served:

This pilot project will serve a total of 40 pregnant women using drugs and/or alcohol in the East Hawai`i (Hilo/Puna) area. Its purpose is twofold—first, to find and identify these pregnant women using drugs and/or alcohol, and second, to engage them into treatment and prenatal care for the duration of their pregnancies.

5. Describe the geographic coverage:

The pilot project will cover the East Hawai'i area, including the Hilo and Puna districts.

III. 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:

In order to fulfill our goals and objectives, GHH will:

- A. Hire a full-time Outreach Worker/Case Manager to do the following:
 - Inform community stakeholders of this project through networking, brochures, media, and community-wide public informational campaigns to elicit community support and referrals;
 - Conduct aggressive outreach in the community in order to find/identify the target population and persuade them to engage in prenatal care with an OB/GYN of their choice and substance abuse treatment as needed;
 - Work directly with Dr. Frederick Nitta, M.D. and his staff by responding to calls for help and enabling Dr. Nitta and/or his staff to provide a "warm hand-off" for the women identified as potential program participants.
 - Establish therapeutic rapport with the women to obtain trust and respect, and use this rapport for the following purposes:
 - 1. To ask questions and look for patterns as an opportunity to gather information:
 - 2. To discuss options, with the understanding that some women may not want to continue the pregnancy;
 - 3. To address fears and concerns with regard to accessing prenatal and substance abuse treatment;
 - 4. To educate targeted women of the importance of early prenatal care and the risk factors associated with alcohol and/or drug use during pregnancy;
 - 5. To encourage targeted women to engage into prenatal care and substance abuse treatment;
 - 6. To provide transportation to care and treatment, if needed;
 - 7. To refer participants to other community resources or partner agencies as needed;
 - 8. To assist with scheduling postnatal and aftercare treatment;
 - 9. To provide small celebratory gifts for each new mother.
- B. Hire a full-time Mentor Coordinator to do the following:
 - Promote mentoring as an integral component of culturally competent care;
 - · Recruit and train volunteer mentors;
 - Work with Case Manager to match targeted women with a trained volunteer mentor to provide encouragement and support;

- Provide mentor incentives in the form of gas cards or restaurant certificates to enable mentors to spend quality time with their mentees;
- Oversee mentor/mentee relationships and provide conflict resolution as needed;
- Encourage mentors to empower, encourage, inspire, and motivate program
 participants to maintain abstinence and follow up with their prenatal care
 throughout the pregnancy;
- Provide small self-care incentives for program participants after each prenatal visit;
- Plan and implement celebratory events with mentors and mentees.

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

Month 1
By end of month 1
Month 2
By end of month 2
By end of month 2
By end of month 2
By end of month 2
Month 3
Beginning month 2
and continuing
throughout the
contract period
Month 3
Month 3 and
throughout contract
period

Provide outreach, case management, mentoring, health and prenatal educational services, as well as monitoring and tracking outcomes	Monthly beginning in month 2 and continuing throughout project period
14. Presentation of the project, including what we did, what we learned, what the outcomes were, and consideration for future funding if the project is deemed successful.	End of project period

- 3. Describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results:
- A. All GHH staff are required to report quality of care concerns using prescribed procedures and forms within 24 hours. Violent behaviors or assaults, physical and/or sexual misconduct, suicidal ideations or attempts, physical damage to property, or any occurrence that threatens the health, safety, or welfare of a program participant, staff member, visitor, volunteer, or student warrants an immediate 911 call.
- B. Client related documentation is maintained in accordance with State and Federal laws mandating storage times. These files are maintained in a locked storage area that ensures safety and confidentiality, but are quickly accessible for release to the proper authorities when needed.
- C. Documentation and Peer Reviews require all quality improvement committee members to have access to relevant client records for auditing purposes to the extent permitted by State and Federal law. This procedure provides administration with a process to review care of individuals and system-wide levels and quickly resolve either office or systemic problems expediently.
- D. GHH will utilize two (2) evaluation instruments to ensure the quality of our service delivery:
- 1. The quality of life inventory (QOLI) which is a brief assessment of 32-items that provide life satisfaction outcomes in a scoring format on 16 areas: health, self-esteem, goals/values, money, work, play, learning, creativity, helping, love, friends, children, relatives, home, neighborhood, and community. This instrument will be given at the beginning of program engagement, upon completion of the first 90-days, and at the time of discharge. It is extremely useful in mapping the clients' progression from dysfunctional patterns in the quality of their life and how they shift throughout their engagement in the program.

2. Program participants will also be asked to complete a simple Likert scale consumer satisfaction survey on a bi-monthly basis with a section for comments and suggestions for improvement.

The measurement of these outcomes is an integral aspect of program implementation whether by documented treatment efforts, referrals, memorandums of agreement with community agencies, attendance records and encounter forms kept by case managers, written evaluations, pre- and post-test surveys, staff observation, and participant feedback forms. The Program Directors are responsible for monitoring performance measures and presenting monthly reports to the Chief Operating Officer.

Once quarterly, Program Staff will convene an Advisory Committee meeting in collaboration with members of the Consortium's Health and Wellness Committee to monitor the project by assessing and evaluating its activities. The Committee will identify strengths, weaknesses, and areas of improvement. Appropriate adjustments will then be determined and implemented. Our evaluation methods will themselves be assessed as we learn how to best affect outcomes in our community.

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.

	Projected Outcomes	#	%
1.	Number of target population that entered into prenatal care through		
	outreach efforts	40	100%
2.	Number of target population that received case management services	40	100%
3.	Number of target population that received substance abuse treatment, including attending AA/NA meetings	36	90%
4.	Number of target population that received adequate prenatal care, based on the Kotelchuck Index (4 categories: 1. Inadequate (less than 50% of expected visits); 2. Intermediate (50% - 79%), Adequate (80%109%), Adequate Plus (110% or more), achieving a score of 80% or greater on the Kotelchuck Index.	32	80%
5.	Number of target population that abstained from drug and/or alcohol use for the duration of her pregnancy	32	80%
6.	Number of target population that <i>decreased</i> drug and/or alcohol use for the duration of her pregnancy	40	100%
7.	Number of babies born without any health problems related to prenatal drug or alcohol use	32	80%

IV. Financial

Budget

- 1. The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request. (ATTACHED)
 - a. Budget request by source of funds
 - b. Personnel salaries and wages
 - c. Equipment and motor vehicles
 - d. Capital project details
 - e. Government contracts, grants, and grants in aid
- 2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2020.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
			2.5	

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2020.

Currently, GHH does not foresee pursuing other funding for this project. Our hope is that this pilot project will produce positive outcomes that can be reported to the State Department of Health, Alcohol and Drug Abuse Division (ADAD), for future funding opportunities. We may also seek future funding opportunities from the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA) if/when we are able to obtain positive performance data from this pilot project.

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.

NOT 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 2020 for program funding.

GHH has not received any federal, state, or county government contracts, grant, or grants in aid for this project.

6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2018: **\$14,659.14**

V. 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.

Chief Executive Officer Les Estrella has 17 years of experience working with the homeless, substance abuse disorders, mentally ill, justice involved offenders, inmates, reentry systems, community organizations, and clean and sober housing program development. From 2010-2012, he was the Program Manager for the Hawai`i Island Workforce and Economic Development Ohana (HIWEDO) when they were awarded a Mentoring Grant from the U.S. Department of Justice, Bureau of Justice Assistance's Second Chance Act.

Mr. Estrella is a certified mentor trainer in the mentoring curriculum called "Releasing Human Potential". This curriculum was developed by Dr. Joseph Pascarelli, Ed.D. for HIWEDO's Second Chance Mentoring Program to train mentors to facilitate reentry into the community for former offenders. This highly successful program offers mentees the emotional support and practical advice that they need to help them navigate everyday barriers and frustrations.

During the two-year grant period, HIWEDO served 40 mentees (matched with 40 community volunteer mentors). There were no new crimes committed during this time with a remarkable 0% recidivism rate demonstrating its effectiveness.

Chief Operating Officer Carol Matayoshi, MA/Forensic Psychology, has 25 years of experience working with the homeless and mentally ill population. In her former position as Homeless Programs Manager at HOPE Services Hawai'i, Ms. Matayoshi provided oversight of the operations for seven (7) contracts/programs island wide with a two million dollar budget. These programs included the DHS Homeless Outreach Program, the Department of Health, Adult Mental Health Division (AMHD) Homeless Outreach Program, SNAP Outreach, TANF Housing Placement Program, Homeless Prevention and Rapid Re-housing, HUD's Shelter Plus Care Kukui program & Shelter Plus Care New Directions program, and the AMHD Representative Payee program.

In June of 2015, Ms. Matayoshi attended the SOAR Leadership Academy in Chicago, Illinois, presented by the SAMHSA SOAR Technical Assistance (TA) Center as the Local Lead for this national initiative. The SOAR program helps eligible homeless individuals gain access to SSI and/or SSDI, allowing them to focus on their recovery by providing for their basic needs.

Ms. Matayoshi will provide general oversight for the program, including budget management, participation in community events and focus groups, and tracking outcomes.

GHH has been integral to reentry efforts in Hawai'i County, receiving recognition, awards and grants through its consortium efforts. The Consortium and its member organizations have years of experience working on issues of re-entry and have earned a great deal of respect within the criminal justice community. The Consortium can also point to numerous quantitative and qualitative stories of success. Most prominently, in 2009, recidivism in Hawai'i County was nearly 2 percent lower than the state average, even as overall recidivism in Hawai'i County had dropped approximately 10.9 percent since 2003. A partial list of some accomplishments includes the following:

- 2006: Collaboration with the Office of Social Ministry (Now: HOPE Services HI, Inc.) to open Ponahawaiola Community Reintegration Program
- 2007: Construction of the Hale Nani Educational Building with funding from the state legislature
- 2009: Developed a 5-year Strategic Plan
- 2010: Federal Second Chance Act Mentoring Grant
- 2015: Developed its second 5-year Strategic Plan
- 2015: Established non-profit 501(c)(3) status
- 2016: Implemented a pilot project, In-Reach and Reintegration, with \$15k received from three (3) County Council members' Contingency Relief Funds (\$5k each)
- 2017: Implemented a pilot Pu'uhonua project through a partnership with Blueprint for Change and its E Ho'okanaka (be a person of worth) project

Dr. Frederick Nitta, M.D. is a practicing OB-GYN/PCP in Hilo. He is affiliated with multiple hospitals in the area, including Hale Ho'ola Hamakua Hospital and Hilo Medical Center. He received his medical degree from the University of Hawai`i John A. Burns School of Medicine and has been in practice for almost 25 years. He is one of 7 doctors at Hale Ho'ola Hamakua Hospital and one of 9 at Hilo Medical Center who specialize in Obstetrics and Gynecology.

Over the last 10 years, Dr. Nitta has been witness to an explosion of drug addiction on the Big Island. His own son and virtually all of his friends were addicted to narcotics. Because of this personal connection, Dr. Nitta has dedicated much of his time to address this issue but sees it continuing to worsen. He is devastated by the number of newborn babies that he has seen withdrawing from drugs and is requesting a call to action to save our children, our families, and our community.

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.

Going Home Hawai'i's office is currently located at 80 Pauahi Street, Suite 203, in Hilo, Hawai'i. It is a 1,079 square foot area with three (3) private office rooms and one (1) 15' X 10' private conference room.

Monthly Consortium meetings are held at the Office of Housing and Community Development's conference room at 1990 Kinoole Street, Suite 104. This conference room can comfortably seat approximately 40 people.

Dr. Nitta's office is located at 670 Ponahawai Street, Suite 200, in Hilo. He has a private office space for the Case Manager and/or Mentor Coordinator to meet with patients, if needed.

Most of the Case Manager's and Mentor Coordinator's time will be spent in the field.

VI. 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.

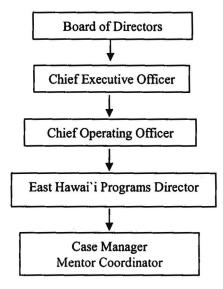
Chief Executive Officer Les Estrella has 17 years of experience working with the homeless, substance abuse disorders, mentally ill, justice involved offenders, inmates, reentry systems, community organizations and clean and sober housing program development. He will provide general oversight and direction for the program.

Chief Operating Officer Carol Matayoshi, MA/Forensic Psychology, has 25 years of experience working with homeless, mentally ill, and justice-involved populations. She will oversee the general operations of the program, including training and direct supervision of the East Hawai'i Programs Director.

East Hawai'i Programs Director, Kimi Palacio, has over 10 years of experience working with the homeless, mentally ill, and substance abuse populations. She was the Program Coordinator for the Second Chance Act Mentoring Program with HIWEDO and is a certified mentor trainer. She was also the Administrator of the Clean and Sober House for Lokahi Treatment Centers (a substance abuse treatment provider) as well as the Quality Assurance/Compliance and Grants/Contracts Manager. Ms. Palacio will oversee the daily operations of the program, facilitate the Advisory Committee meetings, and provide direct supervision of the Case Manager and the Mentor Coordinator.

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 an annual salary range paid by the applicant to the three highest paid officers, directors, or employees of the organization by position title, <u>not employee name</u>.

Chief Executive Officer: \$60,000
 Chief Operating Officer: \$52,000

3. East/West Hawai'l Programs Directors: \$48,000

VII. Other

1. Litigation: NOT APPLICABLE

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: NOT APPLICABLE

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: NOT APPLICABLE

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.

4. Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2019-20 the activity funded by the grant if the grant of this application is:

- (a) Received by the applicant for fiscal year 2019-20, but
- (b) Not received by the applicant thereafter.

With our 501(c)(3) status, GHH has a greater opportunity to pursue broader funding through state, county, and federal grants/contracts, including the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA) and the Hawai'i State Department of Health, Alcohol and Drug Abuse Division (ADAD).

Throughout this grant period, we will continue to seek funding with the Hawai'i Island Going Home Consortium and additional collaborators to keep the program funded. We will also actively promote awareness of the need for substance abuse services in Hawai'i County. Our fervent hope is that the community will see value in and support this program that will save countless lives and exorbitant amounts of money while promoting public safety and the welfare of our families and the community at large.

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2019 to June 30, 2020

Applicant: Going Home Hawai'i

BUDGET CATEGORIES	Fu	Total State nds Requested (a)	Total Federal Funds Requested (b)	Total County Funds Requested (c)	Total Private/Other Funds Requested (d)	
A. PERSONNEL COST						
1. Salaries	\$	84,400.00				
2. Payroll Taxes & Assessments	\$	13,673.00				
3. Fringe Benefits	\$	19,200.00				
TOTAL PERSONNEL COST	\$	117,273.00				
B. OTHER CURRENT EXPENSES			5.00°	T MANY MA PROMISE MANAGEMENT OF THE PROMISE OF THE		
1. Airfare, Inter-Island						
2. Insurance	\$	1,500.00			1909-1909-1909	
Lease/Rental of Equipment						
4. Lease/Rental of Space						
5. Staff Training						
6. Program Supplies	\$	2,400.00				
7. Telecommunication						
8. Utilities					170	
9. Mentor Incentives	\$	3,600.00				
10. Mileage @ .58/3000 miles	\$	1,740.00				
11	<u> </u>			· · · · · · · · · · · · · · · · · · ·		
12						
13	_					
14	_					
15	_		5 (C			
16	_					
17	_					
18						
19	_					
20						
TOTAL OTHER CURRENT EXPENSES	\$	9,240.00				
C. EQUIPMENT PURCHASES						
D. MOTOR VEHICLE PURCHASES						
E. CAPITAL						
TOTAL (A+B+C+D+E)	\$	126,513.00		21-01	7-10-2-5-7-0	
			Budget Prepared By:			
SOURCES OF FUNDING						
(a) Total State Funds Requested	2	126 513 00	Carol Matayoshi		(808) 491-2437	
	-	120,010.00	Name (Please type or print)		Phone	
(c) Total County Funds Requested	\$	-	Tester Estalla 1-17-19			
(d) Total Private/Other Funds Requested	\$	-	Signature of Authorized Office	alal	Date	
			Lester Estrella, Chie	of Executive Officer		
TOTAL BUDGET	\$	126,513.00	Name and Title (Please type			

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2019 to June 30, 2020

Applicant: Going Home Hawai'i

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Chief Executive Officer	1.0	\$60,000.00	5.00%	\$ 3,000.00
Chief Operating Officer	1.0	\$52,000.00	5.00%	\$ 2,600.00
East Hawai`i Programs Director	1.0	\$48,000.00	10.00%	\$ 4,800.00
Case Manager	1.0	\$38,000.00	100.00%	\$ 38,000.00
Mentor Coordinator	1.0	\$36,000.00	100.00%	\$ 36,000.00
				\$
				\$ -
				\$ -
				\$ -
				\$
				\$
				\$
				\$ -
				\$ -
TOTAL:				84,400.00

JUSTIFICATION/COMMENTS: 1) The CEO will provide general oversight, direction, and promotion of the program. 2) The COO will provide budget and general operational oversight for the program, and direct supervision of the East Hawai`i Programs Director. 3) The East Hawai`i Programs Director will provide daily oversight of the program, direct supervision and training of the Case Manager and Mentor Coordinator, and facilitate the Advisory Committee meetings.

4) The Case Manager will provide case management and outreach services for the program participants. 5) The Mentor Coordinator will provide supervision and monitoring of the Volunteer Mentors, as well as conflict resolution (mentor/mentee) when needed.

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2019 to June 30, 2020

Applicant: Going Home Hawai'i

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

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

JUSTIFICATION/COMMENTS:

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2019 to June 30, 2020

Applicant: Going Home Hawai'i

TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OTHER SOURCES OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2017-2018	FY: 2018-2019	FY:2019-2020	FY:2019-2020	FY:2020-2021	FY:2021-2022
PLANS						
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT	g obe					
TOTAL:						

GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID

Applicant: Going Home Hawai'i Contracts Total:

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)	CONTRACT VALUE
1	NOT APPLICABLE				- Line
2					
3	A Company of the Comp				
4					
5					
6 7					
8	10 VM 40 VM 20 VM 20 VM 20 VM				
9	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				TYPE MANAGEMENT AND ADDRESS OF THE PARTY OF
10					
11					
12					
13					· · · · · · · · · · · · · · · · · · ·
14				4.5	
15					
16					
17					
18					
19					77110-0-71-1
20					7 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1
21					
22 23					
24					
25					
26	- UNITED TO THE PARTY OF THE PA				
27					
28					
29					
30					