

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.

- 1) Certificate of Good Standing (If the Applicant is an Organization)
- 2) Declaration Statement
- 3) Verify that grant shall be used for a public purpose
- 4) Background and Summary
- 5) Service Summary and Outcomes
- 6) Budget
 - 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](#))
- 7) Experience and Capability
- 8) Personnel: Project Organization and Staffing



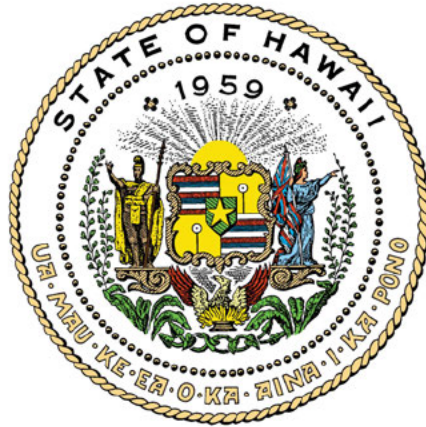
MARY FRANCES ONEHA, APRN, PHD, FAAN
CHIEF EXECUTIVE OFFICER

JANUARY 21, 2022

AUTHORIZED SIGNATURE

PRINT NAME AND TITLE

DATE



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

WAIMANALO HEALTH CENTER

was incorporated under the laws of Hawaii on 01/25/1989 ;
that it is an existing nonprofit corporation; and that,
as far as the records of this Department reveal, has complied
with all of the provisions of the Hawaii Nonprofit Corporations
Act, regulating domestic nonprofit corporations.



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

Dated: January 18, 2022

Director of Commerce and Consumer Affairs

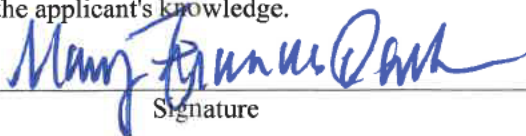
**DECLARATION STATEMENT OF
APPLICANTS FOR GRANTS PURSUANT TO
CHAPTER 42F, HAWAII REVISIED STATUTES**

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, Hawaii 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, Hawaii 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, Hawaii 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, Hawaii 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.


Signature

January 21, 2022

Date

Mary Frances Oneha, APRN, PhD, FAAN

Chief Executive Officer

Name

Title

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 (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, 2021.

2. Declaration Statement

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

3. Public Purpose

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

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;

The Waimānalo Health Center (WHC) is a community-based non-profit 501(c)3 corporation incorporated in 1989 and located in Waimānalo on the windward side of the island of O`ahu. As its mission states, “Waimānalo Health Center is rooted in Native Hawaiian values and devoted to improving the health and wellness of all people, regardless of ability to pay, by providing comprehensive primary and preventive health care services of the highest quality.” WHC became a Federally Qualified Health Center (FQHC) in 1994.

The Waimānalo Health Center offers a wide range of services:

- Medical care – Physicians and advanced practice nurse practitioners specializing in Family Practice and pediatrics provide patients with routine and preventive health care relating to chronic diseases, obstetrics and gynecology, to name a few.

- Dental care – Routine and preventive screening along with emergency dental care are provided by dentists and a dental hygienist.
- Behavioral health services – Through individualized therapy and group classes, licensed clinical psychologists assist patients with anxiety and depression, chronic pain, chronic disease management, smoking cessation, stress and anger management and recovering from trauma and abuse.
- Vision services – An optometrist provides comprehensive eye exams, optical dispensing, preventive vision care and treatment of eye diseases.
- Nutrition services – Medical nutrition therapy is provided by registered dietitians. Preventive health classes include cooking demonstrations, gardening, grocery store tours and weight management. WIC services are also available for families which include breastfeeding support and education.
- Native Hawaiian Healing – Through the Ma’iola department, lomilomi and lā’au lapa’au services are provided to patients in primary care. Plants for these services and a Hānai A Plant program are grown and harvested from the Māla Ho’ōla, a 6,905 square foot cultural healing garden with over 400 plants.
- Care coordination – Patients with the most complex health and socioeconomic needs are managed by care coordinators that provide individualized care planning.
- Outreach and Eligibility – Outreach and eligibility workers help reduce barriers to care and assist patients with health insurance eligibility, acquiring prescription medication and transportation.
- Pharmacy – Service expansion allowed WHC to offer pharmacy services starting in 2020. The pharmacy fills prescriptions, offers prescription mail services and provides over-the-counter medications, medication counseling and education, and immunizations.
- Youth Mentoring – Kū I Ka Mana, a youth mentoring program, provides an environment for youth to learn about themselves, build character, stay in school, graduate high schools, and move on to post secondary education. This team of health educators also assists with COVID testing/vaccinations in schools and provides supportive services to identified Tier 2 students and their families.
- Charman J. Akina Memorial Scholarship - Administered by the Hawai’i Community Foundation and established by WHC and the generosity of foundation donors in memory of Dr. Akina for his countless volunteer hours to help the Waimānalo community and for his impactful service to WHC. The scholarship is open to residents of Waimānalo with demonstrated financial need to attend an accredited two or four year, not for profit institution within the U.S. as an undergraduate, with a 2.7 GPA. Preference is given to KIKM program participants.

Waimānalo Health Center was awarded recognition by the National Committee for Quality Assurance as a Patient Centered Medical Home Level 3 (PCMH-3), the highest achievable recognition for a healthcare provider. WHC is the first community health center on O`ahu to be awarded this distinction. This PCMH-3 recognition acknowledges the quality work that WHC provides as WHC passed all elements of this achievement with 100% satisfaction.

2. The goals and objectives related to the request;

With support from the State of Hawai`i, WHC plans to support the Patient-Centered Health Care Home (PCHCH) approach to providing comprehensive health services to the underserved population of Waimānalo through services expansion. The proposed project would support increased access and enable WHC to enhance its provision of its comprehensive services.

The recent construction of WHC's expansion facility allows WHC to continue to meet the growing needs of the community. Further expansion will support WHC's efforts to continue to serve the underserved community of Waimānalo as well as individuals and families from the entire Ko`olaupoko coast.

The impact of this project will be felt not only in meeting projected community needs but also by adding to the community's ability to sustain, grow and strengthen itself.

3. The public purpose and need to be served;

Access to quality primary and preventive health care results in improved health status of a community and enhances the quality of life for its residents. There are a number of key factors that contribute to the health needs of the Waimānalo community:

- Shortage of Healthcare Providers

The Waimānalo community does not have any private medical practitioners and thus has received a federal designation as a Health Professions Shortage Area (HPSA). In addition, WHC is the only health provider in the Ko`olaupoko area with the FQHC designation, seeing all patients regardless of ability to pay. WHC accepts the uninsured and offers a Sliding Fee Discount for services to underinsured and uninsured patients. Because the Waimānalo community has no private medical practitioners, there is a high need in the community for primary health care. WHC's HPSA score for medical is 15. Likewise, WHC's HPSA score for dental is 20 which is the second highest in the county. At 21, WHC has the highest HPSA score for mental health in the county. WHC's HPSA scores are some of the highest in the County of Honolulu.

- Increased Demand for Services

In 2020, WHC saw 4,942 patients through 25,744 visits that included medical, dental and behavioral health services. Of Waimānalo Health Center patients, 48% identified

as being at or below the federal poverty level. Roughly 53% of WHC’s patients identified as Native Hawaiian. Historically, WHC experienced a 24% increase in patient visits over 10 years. In 2010, 31% of patients were uninsured and 64% were at or below 100% of the federal poverty level. In 2020, demographics have improved with 15% uninsured and 48% at or below 100% of the federal poverty level. WHC’s target population is quite complex with a plethora of social service and health needs.

- Vulnerable Populations Served

Due to its large proportion of Native Hawaiian residents, Waimānalo has a federal designation as a Medically Underserved Population. In addition to the socioeconomic challenges and barriers to health care prevalent with the population served, chronic diseases are overwhelmingly represented in the Native Hawaiian population. Specifically, Native Hawaiians have higher rates of diabetes and obesity than other ethnic groups in Hawai`i. Also, in comparison to other ethnic groups, Native Hawaiians have high rates of depression and substance abuse.

WHC’s Board of Directors and key leadership recognize that the most vulnerable populations will remain underserved if actions are not taken to expand WHC’s ability to provide quality care that optimizes health outcomes. Since 2010, the WHC strategic plan called for meeting increasing community needs by building expanded facilities, and accordingly, overall organizational capacity.

One of the major gaps in primary care services is oral health. The Hawai`i State Department of Health, in a report to the Legislature in December 2018, reported that Hawai`i has “a history of ranking among the worst states for dental health in the country for many groups including children and adults with complex medical problems and disabilities.” The report shares that these challenges are magnified in Hawai`i due to an uneven distribution of oral health resources, resources for sedation and anesthesia are concentrated on O`ahu, the community water supply in Hawai`i does not contain fluoride, and there are a limited number of dentists who accept Medicaid. Aside from WHC, another dentist in Waimānalo also accepts Medicaid.

WHC’s dental services has grown considerably since its inception in 2009. However, because of changes in the health care environment, the community oral health needs are not met due to the limitations in preventative adult dental care coverage. The communities in Ko`olaupoko reflect this challenge with 25.5% of adults with no dental visit and 39.4% of adults with permanent teeth removed. In addition, the oral health ER visit rate (per 10,000) was 10.3 and the overall hospitalization rate was 808.7, higher than the State (741.5) or County (739.6) rates.

4. Describe the target population to be served; and

Due to its large proportion of Native Hawaiian residents, Waimānalo has a federal designation as a Medically Underserved Population. In addition to the socioeconomic challenges and barriers to health care prevalent with the population served, chronic diseases are overwhelmingly represented in the Native Hawaiian population.

Specifically, Native Hawaiians have higher rates of diabetes and obesity than other ethnic groups in Hawai'i.

Specifically, Native Hawaiians have high rates of being overweight and obese (75.7%), second only to Other Pacific Islanders (81.5%). In addition, 43.2% of the adult population in Kailua/Waimānalo are overweight or obese, and 68.5% in Ka'a'awa/Kahalu'u/ Kāne'ohe, compared to the State rate of 58.1%. The prevalence of diabetes in Native Hawaiian adults is 12.8%, compared with 5% of Caucasians or 10% of Chinese, and 9.7% in the State. This reflects an increase from prior years, as in 2011, the prevalence was 9.8% for Native Hawaiians and 8.4% in the State.

High rates of tobacco use also contributes to the health disparities amongst Native Hawaiians. Native Hawaiians have high rates of tobacco use with 27% of current smokers, second only to Other Pacific Islanders at 27.4%, compared to 11.5% of Filipinos and 8.8% of Japanese. By community, current smokers comprise 9.5% in Kailua/Waimānalo and 17.4% in Ka'a'awa/Kahalu'u/Kāne'ohe.

In addition to the high prevalence of chronic diseases, substance abuse prevention and treatment is a need. In 2015, alcohol or marijuana use in high schools among Native Hawaiians was 40%, highest amongst all racial groups and higher than the State rate of 31.9%. This is a slight improvement from 10 years ago, in 2005, when the rate was 46.4%. Similarly, heroin and injection drug use among youth in Hawai'i in 2015 was 4.8%, higher than the State rate (3.3%) and all other racial groups.

The mental health needs for Native Hawaiians are also dire. Native Hawaiians adults have the highest rates of depressive disorder in Hawai'i at 15.8% compared to Caucasian at 15.5%, Chinese at 7.4%, and the State at 10.7%. While 31.2% of Native Hawaiian youth reported experiencing depression in the past 12 months, 19.6% had suicidal thoughts and 16.7% had a suicide plan. In addition, 14.1% of Native Hawaiian youth attempted suicide in the past year compared to 6.7% of Japanese and 8.2% of Filipino.

WHC's Board of Directors and key leadership recognize that the most vulnerable populations will remain underserved if actions are not taken to expand WHC's ability to provide quality care that optimizes health outcomes.

5. Describe the geographic coverage.

The Waimānalo Health Center (WHC) primarily serves the underserved geographic area of Waimānalo on the Windward side of the island of O'ahu, nestled between the Ko'olau Mountains to the south and the Pacific Ocean to the north, and along the only two-lane highway through the community. WHC's entire service area stretches along the northeastern coast of windward O'ahu, or Ko'olaupoko, from Makapu'u Point to Kualoa State Park. There are three man-made tunnels through the Ko'olau mountains that windward O'ahu residents use to access downtown Honolulu; otherwise, individuals would have to traverse around the mountain range via the southeast tip of Windward

O'ahu, or Makapu'u, or via the North Shore of the northern tip of Windward O'ahu through Ko'olauloa. The Ko'olaupoko area consists of many white sand beaches and several lush valleys that extend inland to the steep face of the Ko'olau pali, or cliff. The area includes the towns of Waimānalo (96795), Kailua (96734), and Kāne'ohe (96744), with an estimated population of 115,039.

Although WHC serves patients representing all areas of the island, community-based efforts focus on the large Native Hawaiian population of Waimānalo. This area includes 6,488 Waimānalo residents who are Native Hawaiian or part-Hawaiian, approximately 65% of the population of Waimānalo. Waimānalo represents one of the most concentrated areas of Hawaiians in the state. Although this number reflects individuals who reside in the area, many more who reside in neighboring communities consider Waimānalo their home and have special cultural and family ties to Waimānalo.

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;

With the support of the State of Hawai'i, Waimānalo Health Center plans to support the Patient-Centered Health Care Home (PCHCH) approach to providing comprehensive health services to the underserved population of Waimanalo through services expansion. The Waimānalo Health Center is requesting \$500,000 to significantly enhance its capacity to address the needs of the Waimanalo community through improved access to and quality of care through expansion and enhancement of services. The proposed funding will support construction of an expansion facility. The following services and programs will be housed in the new expansion facility:

- Oral Health Services
- Vision Services
- Health Promotion and Disease Prevention including Women, Infants and Children
- Eligibility services and other support services including transportation and outreach services

WHC has vacant space to expand its operation. With medical, behavioral health and most other services moving to the medical expansion building in 2019, WHC now has the opportunity to continue to expand services on its original site. Buildings on its original site are nearly 50 years old, inefficiently configured, and inadequately sized to accommodate the care provided to patients. With successful completion of its medical expansion facility, WHC can address additional facility needs that will better utilize existing space to serve the community, continue successful integration of services, improve efficiencies to address barriers to care, etc. The proposed project would allow

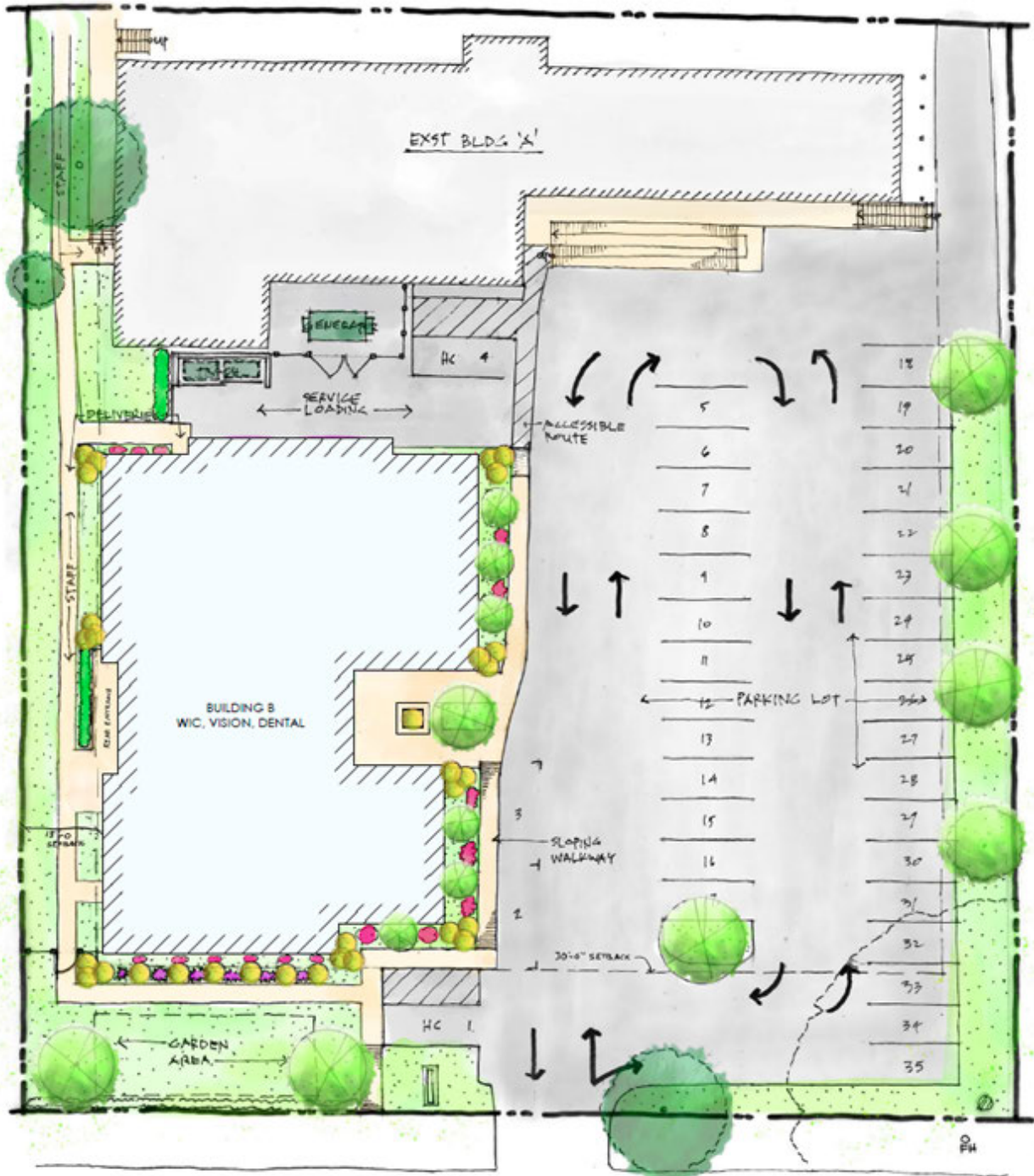
WHC to improve access to care with a PCHCH-designed expansion facility that will increase the number of patients served.

Construction of the expansion facility and additional patient parking space will allow WHC to relocate and expand clinical and programmatic services from existing, outdated trailers located at 41-1347 Kalaniana'ole Highway on State of Hawai'i Department of Land and Natural Resources (DLNR) property, Tax Map Key (TMK) 1-4-1-009:279. Construction will take place without disrupting clinical operations or creating barriers for patients to access health care services. The proposed construction site will require progressive demolition of 4 buildings.

The proposed project would allow WHC to address issues that impact WHC's ability to enhance its patient-centered medical home approach as well as increase its ability to expand its patient capacity. Highlighted below are areas that would result in improved service to the community:

- **Expansion of Dental Services:** The proposed project would expand existing oral health services in this population. With current dental services fragmented across the campus in response to the pandemic and pent up demand for dental services, WHC's proposes to relocate all dental services to one primary location. The proposed facility will be anchored by dental services which will comprise over 60% of the proposed square footage.
- **Full Integration of Services:** The project would enhance WHC's ability to reach its most vulnerable populations by overlapping of services in a single location. (e.g. – dental providers can work with WIC staff to provide early dental preventive care to its client base). The proposed workflow would provide full integration impacting WHC's ability to effectively utilize its team-based care approach.
- **Improved Efficiencies:** The newly constructed expansion facility will be able to address barriers that WHC faces with the current facility due to an inefficient configuration of portables. The proposed project would allow services to reduce space redundancies such as waiting areas. Security, patient privacy, electronic health records and technology advancement issues will be more efficiently addressed with the expansion facility.
- **Utilization of Outdoor Spaces:** The proposed project also utilizes outdoor spaces as waiting and gathering areas for patients and staff. Lessons learned from the pandemic has driven the use of outdoor spaces more effectively as well as integrating these spaces into operation.

Please see below for the layout and conceptual designs of the project:





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

Timeline for the proposed project will include:

Phase 1 – Due Diligence

WHC is in the process of completing its due diligence phase of the project.

The following activities have been conducted or have initiated in anticipation of the proposed project:

- Preliminary philanthropic assessment to determine the fundraising feasibility of the project
- Review of the Facilities Master Plan with key management staff and the project manager to determine site preparation, relocation of existing services, etc.
- Preliminary designs for the proposed created.
- Communicate with DLNR to review lease agreements and any necessary approvals to proceed with the project.

Phase 2 – Planning and Design

With approval to proceed from the WHC Board of Directors and with a 65-year permanent lease from DLNR in place, WHC initiated the bidding process in November 2021 to select a project manager to finalize the design and prepare for submittal for permitting.

The project team has engaged with the project manager to update the timeline for the building, assess any anticipated permitting issues, conduct an analysis of programmatic needs for the building, develop conceptual drawings, oversee executing the design team contract, etc. This process is ongoing.

Phase 3 – Permitting

During Phase 3, WHC will submit 100% of its construction documents to the Department of Planning and Permitting and to await issuance of the building permits.

Phase 4 – Construction of the Expanded Facility

Request for Proposals will be issued for the construction of the expanded facility with contractor bids occurring in February 2023. An integrated approach to the construction requiring coordination with DOT, HECO, BWS and other utilities will be undertaken to minimize construction time and disruptions to the community. Construction will be comprised of the site improvements, parking lot and landscaping along with the standalone structure.

Construction will commence once a general contractor has been selected in accordance with WHC's procurement process. Construction is slated to begin 2023.

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

WHC has implemented a number of capital projects and these projects were successfully executed as a result of:

- Project management and responsibility at the executive leadership level
- Board of Directors oversight and engagement of the Facilities Committee of the Board of Directors
- Procurement review process by the Finance Committee of the Board of Directors
- Engagement of qualified consultants and contractors of architects and engineers who are licensed and well versed in the necessary planning and permitting requirements
- Early engagement and discussions with DLNR on future expansion
- Communication to the neighborhood board concerning the Facility Master Plan and need for expanded health care facility to serve the community.
- Staff involvement in the grant application process, fulfilling grant reporting requirements and project implementation
- Detailed accounting system for tracking of project costs

For a detailed list of construction projects, please see below.

4. List the measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency). The measure(s) will provide a standard and objective way for the State to assess the program's achievement or accomplishment. Please note that if the level of appropriation differs from the amount included in this application that the measure(s) of effectiveness will need to be updated and transmitted to the expending agency.

The measures of effectiveness that will be reported to the State agency include the following:

Facilities Measure

1. Begin construction of the project by the end of CY2023 (or within granting period upon release of funds).

Operational Measure

1. Increase in the number of patients served and visits by 3% in CY 2023 compared to CY 2021.

IV. Financial

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 2023.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$0	\$0	\$0	\$500,000	\$500,000

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2023.

Requests for funding for this project will commence in the upcoming year. Some institutions WHC will seek additional capital funding for this project include:

- Harry & Jeannette Weinberg Foundation
- HDS Foundation
- McInerny Foundation
- Atherton Family Foundation
- City and County of Honolulu Grants-In-Aid
- Other Private Foundations and Individual Donors

WHC has already secured \$500,000 in federal funding and has pledged \$1,500,000 as its internal contribution.

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.

WHC has not been granted any state or federal tax credits within the past three years and does not anticipate applying for any for this capital project.

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 2023 for program funding.

The Waimānalo Health Center has received numerous government contracts and grants for operational program funding during the last fiscal year. These funds will not support this specific budget request. Please see the document entitled “Government Contracts and/or Grants” in the Attachments.

6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2021.

Waimānalo Health Center's unrestricted current assets as of December 31, 2021 are \$5,071,269. This amount is from all cash accounts and receivables less an allowance for bad debt.

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.

WHC possesses the expertise to successfully plan and complete the proposed projects. Below are some related capital projects WHC has successfully executed:

- 2017-2019 – Hale Ola `Alua Medical Expansion Building - \$13,000,000 – In May 2019, WHC opened its 19,542 square foot expansion facility with \$1,000,000 grant award from HRSA and numerous other contributions from government agencies, foundations and private donors. Although construction for this project started in 2017, planning started in 2013 with the creation of a facilities master plan, philanthropic market assessment and a fundraising infrastructure assessment.
- 2013 – WIC Renovations – \$324,795 - Through funding from the US Department of Agriculture and the State of Hawaii WIC program, WHC renovated an existing Head Start preschool site to WIC services. The renovations included the creation of two private offices and a breastfeeding/education room; installation of new flooring, doors and windows; installation of air conditioning units; renovations to the deck areas; creation of two family restrooms; etc...
- 2013 – Vision Services Expansion - \$143,207 – WHC's vision services expansion included the purchase and installation of major vision equipment totalling over \$89,000. This expansion was funded by WHC and a National Association of Community Health Center Covidien Challenge Grant.
- 2009 – Dental Health Services Expansion - \$442,083 – In March 2009, WHC completed an expansion to oral health services which included renovations along with major dental equipment purchases and installation. The first dental patients were seen in April 2009.

Service expansion is a major WHC strategic initiative with full support of the WHC Board of Directors and will follow similar structure for leadership engagement and careful monitoring of the budget, timelines and results.

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.

Waimānalo Health Center will provide services at two campuses which are located in close proximity to each other. The original campus at 41-1347 Kalaniana`ole Highway is referred to Hale Ola `Akahi and Hale Ola `Alua located at 41-1295 Kalaniana`ole Highway is the medical facility that opened in 2019. Hale Ola `Alua is a 2-story facility houses most patient services including medical services, behavioral health services, community services, integrated cultural healing services, to name a few. Hale Ola `Akahi includes oral health services, WIC, health promotions and diseases prevention, youth mentoring services, etc. Both properties are on the bus line and across from Waimānalo Elementary and Intermediate School.

Existing facilities are inefficiently configured and inadequately sized based on standards for patient care. The repair and maintenance of old facilities continues to escalate, which adversely impacts the delivery of much-needed services. These retrofitted portables which were constructed over 40 years ago do not adequately address the current patient privacy, security and electronic health record needs of providing quality health care.

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.

Since 2010, the WHC strategic plan called for meeting increasing community needs by building expanded facilities, and accordingly, overall organizational capacity. WHC's Board of Directors and key leadership recognize that the most vulnerable populations will remain underserved if actions are not taken to expand WHC's ability to provide quality care that optimizes health outcomes.

WHC's executive leadership have the management skills and expertise to oversee the construction project while still administering quality health care for the community of Waimānalo and the rest of Koolaupoko. Listed below are the members of the Project Team responsible for the proposed project:

- Chief Executive Officer: Mary Frances Oneha, APRN, PhD accepted the CEO position at Waimanalo Health Center in 2012. Dr. Oneha lead the construction of the 19,000 square foot medical expansion facility which opened in 2019.
- Project Manager: Fred Erskine, AIA, is the principal of Erskine Architects which he founded in 2001. Mr. Erskine has worked on previous projects

with the Waimānalo Health Center including design for the WIC renovation, development of the organization's facility environmental assessment and Facility Master Plan as well as WHC’s medical expansion facility which opened in 2019.

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 Waimānalo Health Center is governed by a Board of Directors, 51% of which must be users of the facility and many of which come from the Waimānalo community. The Chief Executive Officer oversees all functions of the organization and is ultimately responsible for all consultants and contractors of the facility. Please see the Waimānalo Health Center’s organizational chart located in the Attachments.

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, not employee name.

The annual salary ranges for the highest paid employees are as follows:

- Chief Medical Officer \$200,000 – 250,000
- Chief Executive Officer \$190,000 – 230,000
- Dental Director \$180,000 – 220,000

VII. 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.

Not applicable. No pending litigation or outstanding judgments.

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.

The Waimānalo Health Center does not possess any licensure or accreditation relevant to this request. However, WHC is a Federally Qualified Health Center, non-profit 501(c)(3) incorporated in the State of Hawai`i and registered with the State of Hawai`i Department of Commerce and Consumer Affairs.

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.

Not applicable. The proposed funding will not support or benefit a sectarian or non-sectarian private educational institution.

4. Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2022-23 the activity funded by the grant if the grant of this application is:

- (a) Received by the applicant for fiscal year 2022-23, but

Funding from the State of Hawai`i is instrumental in successfully executing the proposed expansion of services. WHC's total annual operating expense budget is expected to increase as a result of the expansion of services. WHC is demonstrating growth currently and will continue to grow in its new facility. Within the existing site, the improved access to care particularly through dental services, will result in additional revenue. In 2014, with Medicaid expansion, WHC reduced the number of uninsured patients by 44% resulting in an increase in paid visits in addition to improving health outcomes of these patients. In addition, with the completion of the new medical building, WHC's PPS reimbursement rate for Medicaid Patient Visits will also increase.

As a result of additional fund development efforts, fundraising efforts have been enhanced because of increased infrastructure capacity in the development department and relationships sustained as a result of the previous capital campaign. The increase in communication and first time contributions for the campaign will begin lifelong relationships with individuals, corporations and businesses.

- (b) Not received by the applicant thereafter.

Funding from the State of Hawai`i is instrumental in successfully executing the proposed facility expansion. If the State of Hawai`i does not support the proposed project, WHC will continue with its plan to strategically secure resources for the project both from the public and private sector.

Without support from the State of Hawai`i, the proposed project will be delayed until private sources of funding are secured. Support from the legislature would trigger the release of other funding sources which require threshold in order to apply for support.

In addition to delaying the project, WHC may also determine if plans may need to be scaled back resulting in loss of expanded services for patients.

Ultimately, without legislative support WHC would not be able to provide its quality services to the underserved community of Waimānalo and the Ko`olaupoko corridor. Particularly, WHC would not be able to meet increased demand for services nor would WHC be able to expand services to the Ko`olaupoko areas including Kāne`ohe and Kahalu`u. The increased capacity and revenue from the expansion facility would contribute to WHC's expansion in these areas.

BOARD OF DIRECTORS
 President Kathy Conner, Vice President Keoni Aylett, 2nd Vice President Justin Lam, Treasurer Jim Wood, Secretary Deborah Smith
 Directors: Shannon Alivado, Russ Awakuni, Jeff Gilbreath, Andrew Jamila, Jr., Renee Kama, Sandra Maenani McAulton, Julie Mijo, Catherine Sato, Bill Spencer

CHIEF EXECUTIVE OFFICER
 Mary Frances Oneha, APRN, PhD

HUMAN RESOURCES DIRECTOR
 Malulani Eccleshall, SCP, SPHR

ALTRES HR*

EXECUTIVE SECRETARY/
 ANALYST

CHIEF PERFORMANCE & COMPLIANCE OFFICER
 Ashton Ho

CHIEF INFORMATION OFFICER
 Robert Slike, MS

CHIEF FINANCIAL OFFICER
 Joseph Adriano

CHIEF MEDICAL OFFICER
 Christina Lee, MD

DIRECTOR OF QUALITY IMPROVEMENT
 Nadine Owen

FACILITIES DIRECTOR
 Guy Bowker

DIRECTOR OF SCHOOL HEALTH SERVICES

DEVELOPMENT DIRECTOR
 Pi'ilani Kai, MSW

IT PROJECT MANAGER

DIRECTOR OF COMMUNITY SERVICES
 Veronica Tomooka, MBA

CONTROLLER
 Sefa Kaumaitotoya

LAPA'AU LOEA
 Leina'ala Bright

DIR OF CLINICAL OPERATIONS
 Leigh Ziegler, APRN-RX BC, MSN, RD, CLC

ASSOCIATE MEDICAL DIRECTOR
 Joshua Evans, MD

DIR OF HLTH PROMOTION & DISEASE PREVENTION
 Jadie Karratti-Abordo, MPH

DIR OF BEHAVIORAL HEALTH
 Sid Hermosura, PsyD

DENTAL DIRECTOR
 Anthony Kim, DMD

QUALITY DATA ANALYST

QUALITY PROGRAM SPECIALIST

COMPLIANCE SPECIALIST

SECURITY

FACILITIES COORDINATOR

FACILITIES TECHNICIAN

MAINTENANCE*
 HOUSEKEEPING*
 GROUNDS*

HEALTH EDUCATORS

COMMUNITY RELATIONS SPECIALIST

MEDICAL RECORDS TECHNICIAN

MEDICAL RECORDS ASSISTANT

SYSTEM ENGINEER

SENIOR EPM/EHR ADMINISTRATORS

IT SPECIALIST

TELEMEDICINE SITE COORDINATOR

OSIS SUPPORT

COMMUNITY SERVICES SUPERVISOR

COMMUNITY OUTREACH & EDUCATION WORKERS

TRANSPORTATION DRIVER

LEAD PATIENT SERVICE REPRESENTATIVE

PATIENT SERVICE REPRESENTATIVES

PATIENT ACCESS GREETERS

ACCOUNTANTS

BILLING LEAD SUPERVISOR

REVENUE SPECIALIST

CULTURAL HEALTH KĀKO'O

CULTURAL HEALTH LOMILOMI KĀKO'O

REGISTERED NURSES

CLINIC SUPPORT STAFF SUPERVISOR

MEDICAL ASSISTANTS

CLINICAL ASSISTANT

OPTOMETRY ASSISTANT

PROVIDERS

OPTOMETRIST

DIRECTOR OF PHARMACY

PHARMACIST

CLINICAL ADMINISTRATIVE ASSISTANT

REGISTERED DIETITIAN

CARE COORDINATOR

WIC SUPERVISOR

WIC COMPETENT PROFESSIONAL AUTHORITY

BREASTFEEDING PEER COUNSELOR

WIC CLERK

LICENSED CLINICAL PSYCHOLOGISTS

BEHAVIORAL HEALTH CARE COORDINATOR

DENTIST

DENTAL HYGIENIST

DENTAL ASSISTANTS

DENTAL BUSINESS OPERATIONS MANAGER

PATIENT SERVICES REPRESENTATIVE I & II

DENTAL BILLER

LEADERSHIP TEAM MEMBERS (18)

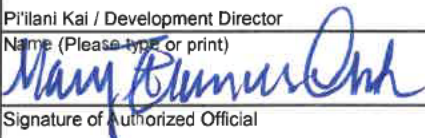
Contractor/
 Consultants

To Be
 Determined

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2022 to June 30, 2023

Applicant: Waimanalo Health Center

BUDGET CATEGORIES	Total State Funds Requested (a)	Total Federal Funds Requested (b)	Total County Funds Requested (c)	Total Private/Other Funds Requested (d)
A. PERSONNEL COST				
1. Salaries	0	0	0	0
2. Payroll Taxes & Assessments	0	0	0	0
3. Fringe Benefits	0	0	0	0
TOTAL PERSONNEL COST	0	0	0	0
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island	0	0	0	0
2. Insurance	0	0	0	0
3. Lease/Rental of Equipment	0	0	0	0
4. Lease/Rental of Space	0	0	0	0
5. Staff Training	0	0	0	0
6. Supplies	0	0	0	0
7. Telecommunication	0	0	0	0
8. Utilities	0	0	0	0
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
TOTAL OTHER CURRENT EXPENSES	0	0	0	0
C. EQUIPMENT PURCHASES	0	0	0	0
D. MOTOR VEHICLE PURCHASES	0	0	0	0
E. CAPITAL	500,000	553,911	200,000	5,743,089
TOTAL (A+B+C+D+E)	500,000	553,911	200,000	5,743,089
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	500,000	Pi'ilani Kai / Development Director (808) 954-7120		
(b) Total Federal Funds Requested	553,911	Name (Please type or print) Phone		
(c) Total County Funds Requested	200,000			
(d) Total Private/Other Funds Requested	5,746,089			
TOTAL BUDGET	7,000,000	Mary Frances Oneha, APRN, PhD, FAAN / Chief Executive Officer Name and Title (Please type or print)		

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2022 to June 30, 2023

Applicant: Waimanalo Health Center

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Not Applicable				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
TOTAL:				0.00
JUSTIFICATION/COMMENTS:				

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2022 to June 30, 2023

Applicant: Waimanalo Health Center

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
Not Applicable			\$ -	0
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:			\$ -	0

JUSTIFICATION/COMMENTS:

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
Not Applicable			\$ -	0
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:			\$ -	0

JUSTIFICATION/COMMENTS:

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2022 to June 30, 2023

Applicant: Waimanalo Health Center

FUNDING AMOUNT REQUESTED						
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: 2020-2021	FY: 2021-2022	FY:2022-2023	FY:2022-2023	FY:2023-2024	FY:2024-2025
PLANS	\$ -	\$ -	\$ -	\$ 1,317,877	\$ -	\$ -
LAND ACQUISITION	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
DESIGN	\$ -	\$ -	\$ -	\$ 371,728	\$ -	\$ -
CONSTRUCTION	\$ -	\$ -	\$ 500,000	\$ -	\$ 4,810,395	\$ -
EQUIPMENT	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL:	\$ -	\$ -	\$ 500,000	\$ 1,689,605	\$ 4,810,395	\$ -
JUSTIFICATION/COMMENTS:						

GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID

Applicant: Waimanalo Health Center

Contracts Total: 15,613,775

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)	CONTRACT VALUE
1	330e Consolidated Health Centers - Base and Expansions	03/01/2017-02/28/2018	Department of Health and Human Services	U.S.	2,136,072
2	330e Consolidated Health Centers - Base and Expansions	03/01/2018-02/28/2019	Department of Health and Human Services	U.S.	2,506,188
3	330e Consolidated Health Centers - Base and Expansions	03/01/2019-02/28/2020	Department of Health and Human Services	U.S.	2,031,688
4	330e Consolidated Health Centers - Base and Expansions-33	03/01/2021-02/28/2022	Department of Health and Human Services	U.S.	2,143,938
5	330e Consolidated Health Centers - Health Center Infrastructure-3R	09/15/2021-09/ 14/2024	Department of Health and Human Services	U.S.	553,911
6	330e Consolidated Health Centers - American Rescue Plan Act Funding for Health Centers-3Q	04/01/2021-03/31/2023	Department of Health and Human Services	U.S.	1,229,875
7	HRSA Health Infrastructure Improvement Award	9/30/2017 - 9/30/2018	Department of Health and Human Services	U.S.	242,279
8	HRSA Health Infrastructure Improvement Award	9/30/2018 - 3/31/2019	Department of Health and Human Services	U.S.	757,721
9	State of Hawaii: Contract for Goods, Services, Design and Contruction	05/01/2021 - 04/30/2022	Department of Community Services	State	250,000
10	Breast and Cervical Cancer Early Detection Programs	06/30/2017-06/29/2018	Department of Health	State	40,000
11	Breast and Cervical Cancer Early Detection Programs	06/30/2018-06/29/2019	Department of Health	State	50,000
12	Breast and Cervical Cancer Early Detection Programs	06/30/2021-06/29/2022	Department of Health	State	45,000
13	Breast and Cervical Cancer Early Detection Programs	06/30/2019-06/29/2020	Department of Health	State	50,000
14	Special Supplemental Nutrition Program for Women, Infants and Children (WIC)	10/01/2021-09/30/2022	Department of Health	State	146,700
15	Special Supplemental Nutrition Program for Women, Infants and Children (WIC)	10/01/2017-09/30/2018	Department of Health	State	183,000

16	Special Supplemental Nutrition Program for Women, Infants and Children (WIC)	10/01/2018-09/30/2019	Department of Health	State	183,000
17	Special Supplemental Nutrition Program for Women, Infants and Children (WIC)	10/01/2019-09/30/2020	Department of Health	State	183,000
18	Comprehensive Primary Care Services	07/01/2017-06/30/2018	Department of Health	State	191,900
19	Comprehensive Primary Care Services	07/01/2018-06/30/2019	Department of Health	State	200,000
20	Comprehensive Primary Care Services	07/01/2019-06/30/2020	Department of Health	State	200,000
21	Med-QUEST Eligibility	07/01/2017-06/30/2018	Department of Health	State	26,310
22	Med-QUEST Eligibility	07/01/2018-06/30/2019	Department of Health	State	26,310
23	Med-QUEST Eligibility	07/01/2019-06/30/2020	Department of Health	State	26,310
24	Med-QUEST Eligibility	07/01/2020-06/30/2021	Department of Health	State	26,310
25	Med-QUEST Eligibility	07/01/2021-06/30/2022	Department of Health	State	26,310
26	Perinatal Support Services	07/01/2017-06/30/2018	Department of Health	State	40,000
27	Perinatal Support Services	07/01/2018-06/30/2019	Department of Health	State	40,000
28	Perinatal Support Services	07/01/2019-06/30/2020	Department of Health	State	40,000
29	Grants-In-Aid Capital Project	02/15/2017-06/30/2022	Department of Health	State	500,000
30	Grants-In-Aid Capital Project	03/09/2018-6/30/2022	Department of Health	State	1,000,000
31	Office of Youth Services	12/1/2017-12/1/2018	Department of Human Svs	State	50,000
32	Office of Youth Services	12/1/2017-12/1/2018	Department of Human Svs	State	50,000
33	Grants-In-Aid - Patient Centered Health Care Home Expansion	01/01/2017-1/31/2018		City and County of Honolulu	125,000
34	Grants-In-Aid - Patient Centered Health Care Home Expanded Facility Elevator	12/01/2017-5/31/2019		City and County of Honolulu	125,000

35	Grants-In-Aid-Farmers Market	10/01/2021-09/30/22	Department of Community Services	City and County of Honolulu	187,953
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