

**DECLARATION STATEMENT
APPLICANTS FOR GRANTS AND SUBSIDIES
CHAPTER 42F, HAWAII REVISED STATUTES**

The undersigned authorized representative of the applicant acknowledges that said applicant meets and will comply with all of the following standards for the award of grants and subsidies pursuant to section 42F-103, Hawaii Revised Statutes:

- (1) 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 or subsidy is awarded;
- (2) Comply 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;
- (3) Agree not to use state funds for entertainment or lobbying activities; and
- (4) Allow the state agency to which funds for the grant or subsidy 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 or subsidy.

In addition, a grant or subsidy may be made to an organization only if the organization:

- (1) Is incorporated under the laws of the State; and
- (2) Has bylaws or policies that describe the manner in which the activities or services for which a grant or subsidy is awarded shall be conducted or provided.

Further, a grant or subsidy may be awarded to a non-profit organization only if the organization:

- (1) Has been determined and designated to be a non-profit organization by the Internal Revenue Service; and
- (2) Has a governing board whose members have no material conflict of interest and serve without compensation.

For a grant or subsidy used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant or subsidy 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 or subsidy 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.

PUNA COMMUNITY MEDICAL CENTER
(Typed Name of Individual or Organization)



(Signature)

1/28/14

(Date)

RENĒ SIRACUSA
(Typed Name)

BOARD PRESIDENT
(Title)

**THE TWENTY-SEVENTH LEGISLATURE
APPLICATION FOR GRANTS AND SUBSIDIES
CHAPTER 42F, HAWAII REVISED STATUTES**

Type of Grant or Subsidy Request:

GRANT REQUEST—OPERATING

GRANT REQUEST—CAPITAL

SUBSIDY REQUEST

"Grant" means an award of state funds by the legislature, by an appropriation to a specified recipient, to support the activities of the recipient and permit the community to benefit from those activities.

"Subsidy" means an award of state funds by the legislature, by an appropriation to a recipient specified in the appropriation, to reduce the costs incurred by the organization or individual in providing a service available to some or all members of the public.

"Recipient" means any organization or person receiving a grant or subsidy.

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

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

1. APPLICANT INFORMATION:

Legal Name of Requesting Organization or Individual: Puna Community Medical Center

Street Address: 15-2662 Pahoia Village Rd., Ste. 303, Pahoia, HI 96778

Mailing Address: 15-2662 Pahoia Village Rd., Ste 306, PMB 8741, Pahoia, HI 96778

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name: René Siracusa _____

Title Board President _____

Phone # 808 930-6001 _____

Fax # 808 930-6007 _____

e-mail renesiracusa@hotmail.com _____

3. TYPE OF BUSINESS ENTITY:

- NON PROFIT CORPORATION
- FOR PROFIT CORPORATION
- LIMITED LIABILITY COMPANY
- SOLE PROPRIETORSHIP/INDIVIDUAL

6. DESCRIPTIVE TITLE OF APPLICANT'S REQUEST:

FREE-STANDING EMERGENCY ROOM FOR PUNA MAKAI, ISLAND OF HAWAII

4. FEDERAL TAX ID #: _____

5. STATE TAX ID #: _____

7. AMOUNT OF STATE FUNDS REQUESTED:

FISCAL YEAR 2015: \$ 3,850,040 _____

8. STATUS OF SERVICE DESCRIBED IN THIS REQUEST:

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

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

STATE \$ 3,850,040
FEDERAL \$ _____
COUNTY \$ _____
PRIVATE/OTHER \$ 23,700

TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE:

AUTHORIZING SIGNATURE

RENÉ SIRACUSA, BOARD PRESIDENT
NAME & TITLE

JAN. 26, 2014
DATE SIGNED

Application for Grants and Subsidies

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

I. Background and Summary

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

1. A brief description of the applicant's background: Puna Community Medical Center (PCMC) became a nonprofit on May 3, 2007 and opened the doors of its Urgent/Acute Care Clinic on February 1, 2009. To date it has served more than 12,000 patients over more than 24,000 visits. It's staff are all Puna residents, trained, certified, experienced and competent: MD, PA, RNS, Medical Assistant, Front desk, Office Manager and Bookkeeper. Once the Emergency Room (ER) is a reality, more experienced staff will be hired.
2. The goals and objectives related to the request: PCMC's goal is to increase access to quality medical care for this rural community by developing, in increments, a comprehensive medical center, beginning with an Emergency Room (ER).
3. State the public purpose and need to be served: The Puna District has a federal designation as a Medically Underserved Area (MUA) with a Primary Care Provider (PCP) shortage. It is also underserved for Dental and Mental Health Care. It has one of the worst socio-economic situations in the entire state of Hawaii. The closest ER is located in Hilo at the Hilo Medical Center and is as far away as 50 miles and more than an hour for some residents. Many residents don't have a car or must scrimp on gas and can't afford the ambulance ride to Hilo. Pahoa has only one ambulance to service the fastest growing district in the state (24.5% growth rate). The need for a "comprehensive medical center with trauma care" was recognized in the Puna Community Development Plan, which passed as an amendment to the County General Plan in August 2008.
4. Describe the target population to be served: The target population is all residents of and visitors to the Puna District - both sexes, all ages, with no one turned away regardless of income, insurance or lack thereof, race, ethnicity, religion, etc. Anyone who needs emergency medical care is part of the target population.
5. Describe the geographic coverage: Primarily the 2 Puna Districts (Council Districts 4 & 5).

II. Service Summary and Outcomes

The Service Summary shall include a detailed discussion of the applicant's approach to the request. The applicant shall clearly and concisely specify the results, outcomes, and measures of effectiveness from this request.

1. Describe the scope of work, tasks and responsibilities: Applicant has identified a 5 acre parcel of State-owned land fronting Hwy. 130, with access to County water, telephone, internet and water services. An application for a long-term lease was submitted to the Board of Land and Natural Resources (BLNR) and was granted an "Approval in Concept" pending an Environmental Assessment (EA) and Finding of No Significant Impact (FONSI). A local environmental nonprofit, Malama O Puna MOP), is doing the EA at cost. The Draft EA has already been completed, published in the OEQC Bulletin, and scoping meetings held. MOP is currently completing the Final EA, which will then be submitted to the BLNR. The expected outcome will be a 65-year renewable lease. At that point, there are required steps that must be taken: an architectural plan and engineering study, permits from the County Planning, Building and Environmental Management Departments and the State Department of Health, site preparation, wastewater treatment facility, construction of the building that will house the ER and its affiliated functions (clinical laboratory, x-ray facility, reception area, office, employee break room, etc.). Once the shell of the building is completed, and the parking lot and landscaping (County Planning Dept. Rule 17) installed, applicant will order and place the office equipment (including computer and phone systems, desks, chairs, file cabinets, tables, storage shelves and cabinets, etc.) and medical equipment (too long a list for this page, but added as an attachment). Only when all this is completed can applicant begin to hire personnel. The result and outcome will be a free-standing ER that can provide timely emergent care to the underserved district of Puna.
2. The applicant shall provide a projected annual timeline for accomplishing the results or outcomes of the service: The Final EA and Lease Approval will be completed no later than April, 2014 and MOP will be reimbursed for its costs upon receipt of G-I-A funding. At that time, the Architect and Engineer, having already been selected, will be given the go-ahead. It is expected that it will take no more than three (3) months and completed by September, 2014. Then the results of their work will be submitted to the relevant agencies, referred to above, for the permitting process; by November, 2014 we should be able to begin the Site Preparation phase. By January, 2015 applicant hopes to begin the physical construction of the building, septic system and driveway/parking area (including ambulance turnaround, handicapped parking, etc.). Rainy season is expected to slow down the exterior construction phase, which is projected to be completed by June 2015. Interior work, equipment installation and furnishings will be the next phase, followed by the stocking of medical supplies. If all goes according to

schedule, the ER should be able to hire its staff and start providing emergency services to the public by year end 2015.

3. The applicant shall describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results: PCMC will be dealing with professionals with experience in designing and building medical facilities. Freeman-White, for instance, is an architectural firm that specializes in medical facilities and has built more than 40 large projects throughout the country. In Hawaii they built the ER at Waianae Coast Comprehensive on O'ahu and are therefore knowledgeable about local geography, weather, terrain, regulations and other considerations. Further, they interview medical staff and compile demographic data, including operational parameters and space needs, design detail, demand model, long term growth opportunities, flowchart diagrams to identify possible process bottlenecks, redundancies and inefficiencies, current technology applications, workflow patterns, staffing roles and responsibilities, etc. The project engineers will address any concerns raised by the Department of Water Supply (that maintains a potable water pumping station on an adjacent lot) and the State Department of Health, especially regarding sewage treatment, site drainage patterns, and any other issues related to engineering. The engineering plan will be vetted by HDOH prior to submittal of application to the Hawaii County Planning Department for a Special Use Permit and Plan Approval Process. All State and County agencies have already had occasion to provide suggestions, and that partnership will continue throughout the process. Finally, of course, applicants for medical staff positions will be intensely screened, references checked, and must all be certified prior to hire. Most likely they will initially be hired on a three-month provisional basis to ensure that they have the on-the-ground expertise and can work well with others.

4. The applicant shall 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 following are the milestone that are the measures of effectiveness:
 - Completion of Final EA, declaration of FONSI, and approval of lease by BLNR.
 - Selection of Architectural Firm and Engineering Firm.
 - Completion of Architectural and Engineering Reports.
 - Submittal of above to County Planning Department for Special Permit, with copies to HDOH, Department of Water Supply, Dept. of Public Works - Building Division, Dept. of Environmental Management, et al.
 - Hearing and determination before the Windward Planning Commission.
 - Receipt of Special Permit and Plan Approval.
 - Put out RFP for contractors.

- Site preparation
- Installation of Septic System
- Layout of Driveway and Parking Area
- Building Construction - Exterior
- Building Construction - Interior
- Landscaping & signage
- Interior furnishings: office and medical equipment
- Stocking of medical supplies
- Advertising for staff, interviewing, hiring, insurance coverage
- GRAND OPENING

III. Financial

Budget

1. The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.
2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2012-2013.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$962,510	\$962,510	\$982,510	\$982,510	3,850,040

3. The applicant shall provide a listing of all other sources of funding that they are trying to obtain for fiscal year 2013-2015.
 Once applicant has site control, i.e., the lease, applicant will begin submitting grant proposals to HMSA Foundation, Weinberg Foundation, Atherton Foundation, National Institutes of Health, and other private and federal funding sources. PCMC will provide staff training, cover moving expenses, and supplement the balance of the cost of the EA. Malama O Puna is donating some of the cost of the EA and will be donating native and medicinal plants for the landscaping, as well as planning and executing the landscaping as a donation. Land clearing has already been volunteered as an in-kind donation by a local contractor. There have been offers from electricians, the Carpenter's Union, and others to help out, and these favors will be called in on an as-needed basis.

Once the ER is running, it is expected that insurance reimbursements will provide the bulk of its income. This will be supplemented by donations and fundraising events. PCMC is also considering the possibility of subletting part of the property, with BLNR approval of course, to a medical facility such as a dental clinic, mental health consultant or birthing center, so that the rent will help to defray its

expenses and provide needed services sooner than PCMC would be able to provide on its own otherwise.

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

N/A

IV. Experience and Capability

A. 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.

Applicant's board of directors includes, realtors, carpenters, environmentalists, educators and other skilled professionals. It's advisory group includes an MD, an attorney, a licensed acupuncturist, a dental hygienist, and an EMT/PA. All of these have not only their own skills and the experience gained from their involvement with PCMC for many years, but they have contacts with professionals at Hilo Medical Center (CEO Howard Ainsley), Waianae Coast Comprehensive and other medical facilities and organizations who have been (and will continue to) provide advise, suggestions and other relevant input as part of their support for this project. PCMC has already been providing medical services to the Puna District since 2009, and many of its staff worked at the Pahoia Family Health Center for many years prior to that. Although applicant has not built an ER before, the architectural and engineering firms that it will select will have such experience and qualifications.

B. 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. Also describe how the facilities meet ADA requirements, as applicable.

Although applicant currently operates an Acute/Urgent Care Clinic in Pahoia, it is crammed into 800 square feet. The ER and future elements will be sited on 5 acres of State land just outside of Pahoia on Hwy 130. As mentioned above, a Final EA is in the process of preparation as a prerequisite to securing a long term renewable lease from the BLNR. This grant request will cover the remaining

costs of the FEA, planning and permitting expenses, site preparation, construction of the ER structure, equipping the facility and stocking it with medical supplies. In other words, everything needed to open the doors and operate, except for the hiring of staff. The architectural firm applicant hires will ensure that the facility meets ADA requirements as part of its design and planning.

V. Personnel: Project Organization and Staffing

A. 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.

Applicant will initially operate two shifts, per suggestion of Hilo Medical Center. Each shift will employ an MD, a PA or APRN, a lab assistant, a technician to operate the x-ray and other diagnostic equipment, and associated office staff. Staff qualifications will be met by the standard educational level and certifications that are common to all medical facilities. Supervision will be by a qualified CEO with experience in running this type of facility. A certified accountant and a bookkeeper will also keep the financials on track. PCMC will provide for any additional needed training for staff, including periodic workshops and seminars. The ER will have a 7 bed capacity for more serious cases, but will be able to treat up to 30 patients/day. The current clinic operated by PCMC sees up to 30 patients daily and is thus aware of staff needs, busiest days and times, and other flow pattern information that it will provide to the architect and engineer.

B. 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 organizational chart that illustrates the placement of this request.

See Attached

VI. Other

A. 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.

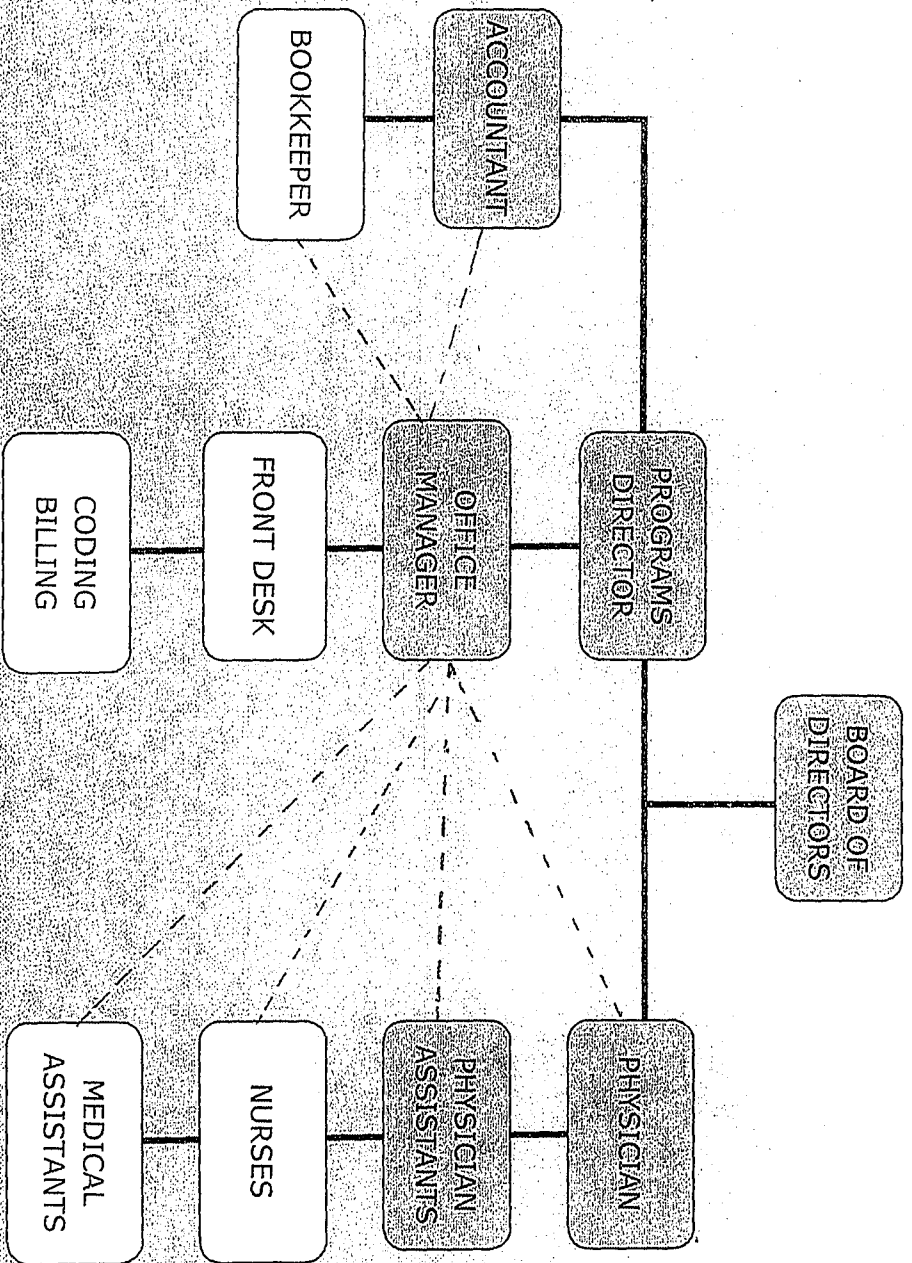
N/A

B. Licensure or Accreditation

Specify any special qualifications, including but not limited to licensure or accreditation that applicant possesses relevant to this request.


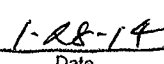
Applicant and it's staff have all the standard qualifications required to operate a medical facility, as referred to above. The doctor on duty will have an MD and all clinical staff will have specialization and experience in Emergency Medicine. The CEO will have appropriate education, training and experience in running an Emergency Department. The bookkeeper will have the standard training and experience and work directly under the supervision of a CPA. All medical staff are required to have current certification for the specific facility in which they work. With medical facilities such as this, there are standard licenses and accreditation that are standardized and required by law, and PCMC will ensure that these are met before the grand opening.

PCMC Organization Chart



BUDGET REQUEST BY SOURCE OF FUNDS
(Period: July 1, 2012 to June 30, 2013)

Applicant: PCMC

BUDGET CATEGORIES	Total State Funds Requested (a)	PCMC (b)	DONATION (c)	(d)
A. PERSONNEL COST				
1. Salaries				
2. Payroll Taxes & Assessments				
3. Fringe Benefits				
TOTAL PERSONNEL COST				
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island	500		200	700
2. Insurance	10,540			10,540
LAND CLEARING	20,000		3,000	23,000
4. Lease/Rental of Space	500			500
5. Staff Training		4,000		4,000
6. Supplies	28,000			28,000
7. Telecommunication	30,000			30,000
8. Utilities	75,000			75,000
ARCHITECT PLANS	78,000			78,000
ENGINEERING PLANS & SEWAGE PLAN	500,000			500,000
FINAL ENVIRONMENTAL ASSESSMENT	7,500	7,500	5,000	20,000
CONSTRUCTION	2,000,000			2,000,000
LANDSCAPING	10,000		2,000	12,000
MOVING EXPENSES		1,500	500	2,000
MEDICAL EQUIPMENT	1,000,000			1,000,000
OFFICE EQPT. & FURNISHINGS	80,000			80,000
PERMITS & FEES	10,000			10,000
18				
19				
20				
TOTAL OTHER CURRENT EXPENSES	3,850,040	13,000	10,700	3,873,740
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
TOTAL (A+B+C+D+E)	3,850,040	13,000	10,700	3,873,740
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	3,850,040	René Siracusa	808 965-2000	
Puna Community Medical Center	13,000	Name (Please type or print)	Phone	
Malama O Puna	5,000			
Other donors	5,700	Signature of Authorized Official	Date	
TOTAL BUDGET	3,873,740	René Siracusa	President, board of directors	
		Name and Title (Please type or print)		

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

PUNA COMMUNITY MEDICAL CENTER

Period: July 1, 2014 to June 30, 2015

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
See attached list of medical equipment & supplies			\$ 1,108,000.00	1108000
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:			\$ 1,108,000.00	1,108,000

JUSTIFICATION/COMMENTS:

Some items are needed in multiples, as indicated in list.

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
N/A			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				

JUSTIFICATION/COMMENTS:

ER MEDICAL EQUIPMENT LIST COMPILED BY HART MILLER, M.D.

<u>Item</u>	<u>number</u>	
Electrocardiogram		Surgical tools:
Defibrillator		bandages, scissors, hemostat, needle dr., forceps
Oxygen tanks, trolley, attachments	5	Crutches 5
Gurneys	7	Cast cutter and cast spreader
Electronic scale		Casting fiberglass
Temperature & Blood Pressure	5	Suture, multiple: size 4-0, 5-0, 6-0 natural polypropyl vinyl
Spirometer		Ball valve ventilator & mask (peds & adult)
Biohazard & Sharps Dispensers	10	IV fluids: Non. saline, Lactated Ringos, Dextrose
CT Scanner		IV tubing
Ultrasound		IV infusion pump
MRI		Blood warmer
X-ray		Suction tubing pump and cannisters
Stethoscopes	9	Nasogastric tubing
Examination Tables	7	Gastric lavage tubing
Microscope		Bite blocks
Refrigerator	2	Urinary catheters
Autoclave		Eye chart
IV poles	7	Ear irrigator
Cardiac monitors	7	Telemetry monitor
Drug dispensing "Pixis" machine		Floor lamps 7
Hospital gowns, gloves, face masks	multiples	Lumbar puncture kits (adult & peds)
Nebulizer machines	2	

Blanket warmer		Pulse oximeter
Tonometer		End tital CO2 monitor
Slit lamp		Central venous catheter kits
Wheel chairs	5	Intraosseous needles
Weight scales: adult, infant		External pacemaker, temporary
Vascular Dopple		Obstetric delivery kit
Anoscope		Spiral cervical collar
Code "crash" carts		Long & short spiral boards
Tape measures		Warming/cooling blanket
Radio communication with ambulance		Vaginal specula
Linens		Rape/sex assault kits
Eye irrigation contacts		Blood gas machine
Arm & leg restraints		Fetal monitor (non stress test)
Seating for staff: chairs, stools		Test for mono, flu, pregnancy, urinalysis
Ophthalmoscope/Otoscope	7	
Nasal and face mask oxygen mask/tubing		
Blood pressure cuffs		
Cricothyroidotomy instruments		
Laryngoscope & mirrors		
Laryngeal mask airway		
Endotracheal tubing		
Tracheostomy supplies		
Chest tube and drainage device		
Bi Pap ventilation system		

**BUDGET JUSTIFICATION
CAPITAL PROJECT DETAILS**

Applicant: PCMC

Period: July 1, 2014 to June 30, 2015

FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2010-2011	FY: 2011-2012	FY: 2014-2015	FY: 2014-2015	FY: 2015-2016	FY: 2016-2017
PLANS & PERMITTING			96000	12700		
OTHER			144040	6000		
DESIGN & CONSTRUCTION SEWAGE TREATMENT			500000			
CONSTRUCTION, SITE PREP, LANDSCAPING			2030000	5000		
MEDICAL & OFFICE EQUIPMENT			1080000			
TOTAL:			3,850,040	23,700		
JUSTIFICATION/COMMENT THE OTHER CATEGORY INCLUDES INSURANCE \$10,540, MEDICAL & OFFICE SUPPLIES \$28,000						
TELCOM \$30,000, UTILITIES INCL. SOLAR ELECTRIC/HOT WATER \$75,000, 1 YR RENT \$500,						