

## ALOHA MEDICAL MISSION

Bringing Hope and Changing the Lives of the People We Serve Overseas and in Hawai'i

#### BOARD OF DIRECTORS Bradley Wong, M.D. President

Christopher Letoto Senior Vice-President

Derek Ito V.P Administration

Lisa M. Grininger, M.D. V.P. Overseas Missions

Alfison Kawazoe, D.D.S. V.P. Hawaii Programs

**Jason Lazzerini** Treasurer

#### MEMBERS

Natalie Arrell Lolita Ching, R.N., M.S.N. Arthur Fine, J.D. Peter Hatford, M.D. Avelino J. Halagao, JD Elizabeth Ignacio, M.D. Kerry Ishihara, D.D.S. Garan Ito, M.B.A. Ramon Sy, M.D. Steve Teves, JD Craig Thomas, M.D. Sandra Yorong

EXECUTIVE DIRECTOR

OPERATIONS MANAGER Rachel Dye

#### **ADVISORY BOARD**

Mr. Walter A. Dods, Jr. Alexander & Baldwin, Inc.

Mr. Robert Hiam HMSA

Ms. Constance Lau Hawaiian Electric Industries

Ms. Patti J. Lyons

Colleen Minami, MSN Community Volunteer

Mr. Arthur Ushijima The Queen's Health Systems

Lynn M. Watanabe Community Volunteer

In Memoriam Honorable Daniel K. Inouye

Dr. Jorge Camara Past President January 21, 2016

Senator Jill Tokuda, Chair Senate Committee on Ways and Means State Capitol, Room 207 Honolulu, Hawaii 96813 ATTN: GIA

Dear Senator Jill Tokuda,

Aloha Medical Mission is submitting its application for Grants and Subsidies to support Hawaii's only free Dental Clinic. If there are any questions, please contact Colleen Minami, grant writer, at (808) 780-5793 or colleenminami@hotmail.com.

Thank you for your time and consideration.

Warmest Regards,

Bradley Wong, M. D. Senior Vice President Board of Directors

	House District THE TWENTY-EIGHTH LEGISLATURE				
Canada District 40	APPLICATION FOR GRANTS				
CHAPTER 42F, HAN	CHAPTER 42F, HAWAII REVISED STATUTES				
		For Legislature's Use Only			
Type of Grant Request:					
GRANT REQUEST - OPERATING	GRANT REQUEST - CAPITAL				
"Grant" means an award of state funds by the legislature, by an appropri	ation to a specified recipient, to support the activ	vities of the recipient and			
permit the community to benefit from those activities.					
"Recipient" means any organization or person receiving a grant.					
	× 1235-100				
STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST (LEAVE BLANK	IF UNKNOWN):				
STATE PROGRAM I.D. NO. (LEAVE BLANK IF UNKNOWN):	-				
1. APPLICANT INFORMATION:	2. CONTACT PERSON FOR MATTERS INVOLVING	G THIS APPLICATION:			
Legal Name of Requesting Organization or Individual:	Name Colleen Minami				
ALOHA MEDICAL MISSION	22/12/03/0620				
Dba: Same as above	Title Grant Writer				
Street Address: 810 N. Vineyard Blvd.	Phone # 808 780-5793	_			
Honolulu, Hawaii 96817	Fax # 808 847-3443				
Mailing Address: Same as above	E-mail colleenminami@hotmail.com				
	E man concernmentarile nouman.com				
3. TYPE OF BUSINESS ENTITY:	6. DESCRIPTIVE TITLE OF APPLICANT'S REQUE	ST:			
Non Profit Corporation Incorporated in Hawaii	ALOHA MEDICAL MISSION, HAWAII'S ONLY FREE D	ENTAL CUNIC PROVIDING BASIC			
LIMITED LIABILITY COMPANY	DENTAL SERVICES, SUCH AS EXAMINATION, X-RAY				
	CLEANING, AND EMERGENCY CARE.				
7					
	7. AMOUNT OF STATE FUNDS REQUESTED:				
4. FEDERAL TAX ID #:					
STATE TAX ID #:	-				
	FISCAL YEAR 2017: \$ 158,678,00				
8. STATUS OF SERVICE DESCRIBED IN THIS REQUEST:	I	A.4.			
NEW SERVICE (PRESENTLY DOES NOT EXIST) SPECIFY THE	AMOUNT BY SOURCES OF FUNDS AVAILABLE				
	DF THIS REQUEST: ATE \$ 0.00	10 L			
FE	DERAL \$ 0.00				
	DUNTY \$ 20,732.00				
TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE		100 C			
DR. B	RADLEY WONG, SENIOR VICE PRESIDENT JA	NUARY 22, 2016 Date signed			
	UNSTITUE OF LITTLE	Usie signed			
Rev 12/15/15					
		> Tratic W			
		11.001.00			

### **Application for Grants**

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. Please include the following:

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

Aloha Medical Mission (AMM) is a secular 501 (c) (3) non-profit organization founded in 1983 by a group of volunteer physicians who traveled to the Philippines to do cleft lip surgery on children of poor families. The mission expanded and has reached many countries and thousands of people in the last 33 years.

In 2002, AMM opened Hawaii's only free dental clinic in Honolulu bringing much needed services to our local community, targeting those with limited or no access to dental care. This clinic started out part time but in 2011 became full time with a full time dentist and dental staff of eight (8) due to investors who supported this concept of a free dental clinic. Unfortunately, operating costs escalated each year and in 2013 there was delay in major funding streams, which resulted in AMM having to dip into its reserves to sustain the clinic. In April 2014 the Board of Directors made the difficult decision to reduce operational hours, terminate all but two (2) of the dental staff, and to utilize only our volunteer dentists to provide services. The First Smile program, an interactive program designed for preschool and kindergarten students, was also curtailed. It taught children at an earlier age to develop good oral health habits, which would continue throughout their life time, and hopefully in turn, be passed onto their Ohana.

Despite the reversion to a volunteer-only, part-time dental clinic, AMM continued to provide free, basic dental care, such as examinations, x-rays, fillings, extractions, cleaning, and emergency treatment, on a part time basis which meant fewer patients served. The clinic continued to take emergency walk-ins and to provide restorative dental treatment to women who had been abused or incarcerated through its Welcome Smile Program. In the last year, persistent and successful grant requests have given the clinic much more financial and operational stability

#### 2. The goals and objectives related to the request;

The goals are to:

- Increase the number of poor and needy patients treated
- Increase community awareness of free dental services for the uninsured
- Increase clinic hours in order to serve more patients
- Promote AMM dental programs, Welcome Smile and First Smile, for the underserved community
- Provide a training facility for student interns interested in the dental field who will eventually become our future volunteers

To reach these goals, the following objectives will be met within the grant period:

- Increase the number of dental visits by 50% (from 1200 to 1800)
- Of the 1800 dental visits, treat 30 new patients in the Welcome Smile program
- Increase clinic hours from 3 to 4 days per week for 3 to 4 hours per session to 5 days a week for 5 to 7 hours per day
- Conduct presentations to 5 community agencies and businesses regarding the services of the free Dental Clinic
- Train and mentor 48 students on oral health education and on dental care
- Provide First Smile presentations to 12 preschools and/or elementary schools

#### 3. The public purpose and need to be served;

According to the August Department of Health report "Hawaii Oral Health: Key Findings," many Hawaii residents are seeking care at hospital emergency departments for dental problems, although dental services are generally not available there. There were 3,000 ER visits due to preventable problems in 2012, which is a 67% increase from 2006 in ER visits due to preventable dental problems. These visits amounted to \$8.5 million in hospital charges in 2012. In addition, Medicaid dental services for adults are limited to coverage for "emergencies only" and don't include preventive treatment services. AMM is in a position to offer basic preventive and treatment services to Medicaid recipients as well as to those without dental insurance due to immigrant status or lack of financial resources. Hawaii's state division of oral health was eliminated in 2009, so there hasn't been a way to monitor oral disease within our state population. However, we know that this remains a significant issue in our community. It has been estimated that 475,000 residents or 38% of Hawaii's population has limited or no access to dental care in spite of the Affordable Care Act.

There are many adverse public health consequences from poor oral health. Poor oral health impacts a person's ability to eat, speak, work, communicate, and learn. The two most common oral diseases are tooth decay and gum disease. Health inequalities exist by race, age, geography, and income with the most oral disease occurring among the low income population. One of the key recommendations in the 2015 Hawaii Oral Health report was to expand access to underserved high-risk populations. This is exactly the population that AMM serves.

According to the US Department of Labor, 2015, in Honolulu County, April 2015 non-seasonally adjusted unemployment rate was 4.1% which is a group not likely to have health insurance. Our homeless population continues to grow and is estimated to be at 17,000 individuals. In Hawaii, there is an estimated 15,000-17,000 Micronesians who have relocated from their homeland, many of whom are not insured and not able to pay for dental care, which leads to a variety of health complications. Hawaii lacks dentists willing to provide care for the uninsured and underserved. As the only free dental clinic, AMM is a critical resource for this gap group.

#### 4. Describe the target population to be served; and

#### 5. Describe the geographic coverage.

[Both #4 and #5 descriptions identified in information below.]

There are a variety of risk factors in the community we serve. The Kalihi-Palama area has a federal designation as a medically underserved population, a lowincome population area, and a health professional shortage area for mental and dental health. AMM falls in the Palama Census Tract #55 where 67% of residents are low to moderate income (LMI). The majority of our patients come from the Kalihi area. However, the clinic serves the entire state if patients are willing to come to Oahu and are eligible. Our target population includes seniors, domestic violence victims, homeless individuals, underserved immigrants and individuals, who work but do not have health insurance or have been unable to secure dental insurance.

Even with the Affordable Care Act, there are still many people without insurance for dental care, including Medicare recipients. According to data published by Gallup, in Hawaii there is an estimated 7.1% of our population who are uninsured in 2013, with 6% uninsured in 2014. In Hawaii, people must re-enroll in November of 2015 to transition from the Hawaii Health Connector to the federal marketplace. Not all of the languages represented in our state are represented in the online transition service and many people are likely to miss out on enrollment. Even when people do enroll for medical coverage, it does not automatically link dental coverage. Less than 1% of all the health insurance plans on the exchange include adult dental as part of the package and often the out-of-pocket deductible for dental services is an amount that the LMI population, whom we serve, cannot afford.

Hawaii Dental Insurance (HDS) data indicates that at least 30% of the adult population in Hawaii do not have dental insurance. This group is invariably

turned away from private dental providers when requesting an office visit. This is the group which inappropriately seeks acute care in hospital emergency rooms.

This grant would help support restorative dental treatment for women who have survived domestic abuse or are transitioning out of prison. Women suffer disproportionately in violent relationships which include physical and emotional injury that puts them at risk for many health complications. They are often in a high risk situation with great difficulty in affording services to address the impacts of years of neglect or physical abuse on their overall health and dental health in particular.

Women transitioning out of prison frequently need extensive restorative dental treatment, which often includes temporary dentures. It is work that is performed by a dentist over multiple sessions. It is best done by maintaining continuity of care from the same dentist to complete the restorative work. When women are missing many teeth and have major issues with the teeth they do have, it significantly impacts their marketability while looking for a job. The severe dental issues become a barrier to stable employment and even affect their verbal and nonverbal communication since their clarity of speech and self-confidence suffers. Each of the Welcome Smile program partners, currently four (4), reports positive impacts in the emotional wellbeing of the women, in addition to an increased ability to obtain employment. We are considering expanding our partnerships to include referrals from the Office of Hawaiian Affairs and from Child and Family Service. The funding requested will secure paid dental staff for the free clinic to maintain and expand this worthwhile program, which other health care agencies do not provide *at no cost to the patient in need*.

First Smile will target preschool and kindergarten students in our underserved community to help them become knowledgeable about good oral health practices and habits which they will carry on throughout their lifetime. It is anticipated that young children will take these habits home and in turn help educate their families.

### II. Service Summary and Outcomes

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

#### 1. Describe the scope of work, tasks and responsibilities;

The Clinic's free basic dental procedures include examinations, x-rays, fillings, extractions, emergency treatment and health education. Within the last month AMM has hired a part-time dentist and dental hygienist which will help reduce the two (2) month waitlist. These positions will join our seven (7) volunteer dentists and our part time dental assistant/receptionist staff to allow increased stability and

expansion of our currently limited clinic services. We will be able to increase clinic hours to 5 days per week for about 5 to 7 hours per day; thus increasing the availability of appointments within 3 weeks. We plan to hire another part-time dental assistant to distribute the work load between 3 dental assistants and 8 dentists. This grant activity will help us to sustain the professional dental services of the dentist, dental assistants/receptionist, and dental hygienist, who will in turn benefit the uninsured and underserved in the community.

AMM will perform the following tasks and responsibilities:

1) Increase the number of dental visits by 50% (from 1200 to 1800):

In 2014 clinic operated full time from January to April 2014 and after that part time for 3 to 4 times per week for about 3 to 4 hours per session, utilizing 7 volunteer dentists and 2 paid part-time dental assistants/receptionist. In 2014 the dental visit numbered 1,068 with 25 women enrolled in Welcome Smile and 34 students at the training facility. Community outreach to increase awareness of the clinic services ceased along with oral health education to the underserved community. Our dental assistants continued one-to-one oral health education with patients being treated. In 2015 there was a two (2) month wait list due to the limited number of appointments available monthly. There were 669 dental visits, of which eighteen (18) were new patients in Welcome Smile. Thirty (30) students, volunteering at the training facility, received training on oral health education and were mentored by the dentists and dental staff.

With the hiring of a part-time dentist and part time dental hygienist, we are able to schedule clinics to 5 days per week for about 5 to 7 hours per session and decrease the wait list. Currently, there are about 200 patients in need of dental cleaning since some of our volunteer dentists would prefer to treat patients for more serious dental procedures other than cleaning. With the increase in staffing and the pending addition of another dental assistant this will allow for further stability of the clinic operations, expansion of our services and reduction of the wait list.

To ensure that AMM's resources are truly dedicated to uninsured and low to moderate income residents, we will certify each patient with documentation including proof of income (most recent tax return, EBT card, QUEST card, lowincome housing residence, etc.). We will give priority scheduling to patient referrals from our partner social service programs, which serve especially high need groups.

 Of the 1800 visits, 30 will be new patients enrolled in the Welcome Smile program.

We will enroll at least three (3) new women each month under Welcome Smile, who have survived domestic violence or are transitioning out of prison and looking for stable employment, by providing restorative dental treatment, such as temporary dentures. In the past we have been able to enroll at least one (1) new woman per month because it is a program that depends on having a stable dentist who can provide more intensive treatment than those provided to general patients and who is willing to follow up with multiple visits. Some of our volunteer dentists have also voiced their preference at not treating these women. Therefore, with the hiring of our part-time dentist, who was a retired prosthodontist, the clinic will be able to treat more women and offer them continuity of care.

In 2014 and 2015 we restored the smiles of 25 and 18 women respectively with many still in treatment. We continue to maintain our partnerships with our original four (4) community agencies that refer women who have survived abuse or are transitioning out of incarceration. AMM helps to rebuild the self-esteem of these women and increase the likelihood that they will find employment; in turn, decreasing the chances of returning to prison or to dangerous situations. Welcome Smile not only helps our program participants and their families, but also helps surrounding businesses as they seek new employees. We have recently partnered with another community agency, the Office of Hawaiian Affairs, and will be outreaching to others in the community serving this clientele.

 Increase clinic hours from 3 to 4 days per week for 3 to 4 hours per session to 5 days a week for 5 to 7 hours per day.

By securing additional professional dental staff, such as the part time dentist, a dental hygienist, and another dental assistant, we can grow our capacity and schedule clinic every day of the work week for about 5 to 7 hours per day. Currently, our part-time dentist will fill in the gaps to the clinic schedule when there is no volunteer dentist available. Because of his flexibility, he may even cover if one of our volunteer dentists is unable to come in. Therefore, we can operate 5 days per week, increasing dental visits and the number of women enrolled in the Welcome Smile program. We would like to increase the hours of the new dentist and dental assistant from 50% to 75% within the next year.

We have had a steady flow of patients, being the only free dental clinic in the State of Hawaii. We have positive relationships with our referral sources and with some further work and communication; we can quickly scale up the number of referrals to our clinic. If our target population can access dental care before reaching the point of seeking acute pain relief in an emergency room, then we are positively impacting our clients and the health care system. If we can provide women who have experienced traumatic life events with restorative dental care, then we can improve their chances at being a healthy, confident, and employed member of society.

4) Conduct presentations to 5 community agencies and/or businesses regarding the services of the free Dental Clinic.

We will continue our outreach and relationship with the community health centers which have an overflow of patients, meeting our criteria, and other referral sources in the community such as shelters on Oahu. We will also increase our media outreach to clarify who we are and who we can serve. The demand is always present and can easily increase with further outreach; however, we are always struggling to meet the demand with enough capacity from dental staff. With our paid professional dental staff in place, we will be able to expand hours and services to our target population.

AMM will continue to partner with low-income housing areas, schools, community centers, and other support agencies. By better targeting referral sources, we will refresh our referral process to ensure the easiest possible process for an agency to refer a patient for dental services. We will continue to keep track of the ethnic groups accessing the clinic and the geographic areas they come from and work with those agencies that cater to their needs.

5) Train and mentor 48 students on oral health education and in the clinic. Our partnerships with the following educational institutions, the University of Hawaii Dental Hygiene Program, Kapiolani Community College (KCC) Dental Assisting Program, the Lutheran Medical Center (LMC) Pediatric Dental Residency Program, and Heald Business College ended due to limited scheduled clinic sessions each week and a dentist available on-site. The Farrington High School Health Academy (FHA) senior students have continued to volunteer at the dental clinic to meet their community service requirements, which has benefited both parties.

We plan to reach out to the UH Dental Hygiene Program and KCC Dental Assisting Program in the coming year, offering an additional training facility site in the community, now that we are able to schedule clinic 5 days a week with a dentist on-site. New volunteers, new patients, and even staff members have been recruited through these programs. Our former clinic manager began as a FHA student volunteer, was mentored to become our first full-time dental assistant, and was later promoted. Due to this clinic experience, this former employee is now in the UH Dental Hygiene Program and will one day give back to the community.

Students from educational institutions gain experience working in a dental facility, for some it is their first exposure to the inner workings of a clinic. Students in dental hygiene may independently treat patients with mentoring from the dentist to help mold them into ethical, responsible, capable clinicians. Other students will be working as part of the dental team by providing chairside assistance to the dentists. They gain work experience and the clinic functions more efficiently. Farrington Academy students get a glimpse of what it is like to work in a dental clinic so that they can determine if they would like to pursue a career in the dental arena. While volunteering these students may perform selected clinical duties, such as sterilizing instruments, setting up and breaking down the dental units, etc., shadow one of the dental staff, and fulfill administrative duties.

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

#### Timeline – 2016

- Increase and maintain clinic hours to 5 days a week for 5 to 7 hours (July 2016)
- Update and print clinic brochures for distribution into the community (August 2016)
- Recruit 2 additional educational institutions in the community to use the Dental Clinic as a training facility (August 2016)
- Increase the hours of the part-time dentist and dental assistant to 75% (September 2016)
- Send information of dental services to community health centers, service organizations, Department of Health, educational institutions, and emergency rooms (September 2016, January and April 2017)
- Establish one new Welcome Smile referring agency (October 2016)
- Conduct First Smile presentations for 12 preschools and elementary schools (July 2016 – June 2017)
- Treat up to 3 new Welcome Smile women per month (Ongoing/monthly)
- Track monthly patient demographics, including age, ethnicity, gender, walkin, pain-related emergency, geographic area, dental procedures provided, etc. (Ongoing/monthly)
- Participate in health fairs, speaking engagements, and other community events to create awareness of the dental clinic and to increase the number of patients using the free dental clinic (Ongoing)

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

#### **Quality Assurance:**

The Dental Clinic currently has a Quality Assurance (QA) Program in place to ensure the delivery of high quality services are provided to each and every one of our patients treated. The QA Program also serves to evaluate that the clinic functions (i.e. administrative, personnel, and clinical) effectively and efficiently to maximize protection of clients, staff, volunteers, and the clinic as a whole. The QA Program is one of the most important aspects of AMM's Risk Management Plan. Other components currently in place are:

- Health Care Practitioner Credentialing and Privileging Process (an important part of the Redeeming Application for the Federal Torts Claims Act [FTCA] which provides malpractice coverage for our clinic volunteers)
- Patient Care Protocols
- Employee Handbook
- Volunteer Policies and Procedures
- Peer Review Process

- Clinic Guidelines
- Compliance with Health Information Portability Accountability Act (HIPAA)
- Compliance with Occupational Safety and Health Administration (OSHA) requirements and annual training
- Annual CPR certification
- Emergency Preparedness Manual

#### **Evaluation Plan**

AMM has been able to maintain a free dental clinic since 2002, despite fluctuating funding and staffing situations. The leadership of our Board and Advisory Board is a major resource for the well-being of the organization. We have experience with recruiting and maintaining volunteers, including dentists, dental hygienist, dental assistants, and students. Five of the key staff and volunteers who are currently running the clinic have been with AMM for at least seven years and bring a high level of experience and patient-centered commitment to service. Our longstanding presence in the community has brought a positive reputation and familiarity with who we are and what we do.

We are upgrading our Dentrix program, the electronic dental record system, which will help us track the number of patients treated by each dentist, the dental procedures provided and the cost, along with other basic demographics (age, gender, ethnicity, etc.) on a monthly basis. Comparison of numbers from previous years will let us determine if we were able to increase the number of visits by 50% and increase the number of Welcome Smile women treated. We will also be able to determine the in-kind cost of the dental procedures provided and estimate the cost per woman in the Welcome Smile program. We will also assess the number of patients directly informed about our services through outreach presentations, health fairs and community events, and use of flyers and our revised brochures given out.

The success of the Welcome Smile Program will be evaluated by monitoring the number of women we have treated each month and by determining the cost per woman. We will be consulting with our referring partner agencies to assess the impact Welcome Smile has had on these women and their families. We will also be following up with each woman through a short survey sent within three (3) months following completion of treatment.

For the First Smile program, the curriculum developed 2 years ago will be assessed and revised as needed. A former elementary school teacher will be consulted on the development of appropriate teaching activities for preschool and kindergarten students to be used as part of the curriculum. A verbal pre- and post-test will be given to the children present to assess their knowledge of the information provided. The teacher will be surveyed to assess the appropriateness and value of the information given and a survey will also be sent home with each child to obtain the parents evaluation of the program. We will continue to nurture our relationship with the Farrington Health Academy and look toward accommodating additional students. We will also reach out to two (2) of our former educational institutions, UH Dental Hygiene Program and KCC Dental Assisting Program, informing them of our ability to now provide a training facility for their students. We hope to recruit more volunteer dentists in the community through networking at seminars, community presentations, and face to face encounters by our dentist at various dental functions. By getting the word out, we are not only increasing awareness of the services that our clinic provides *free of charge* but also solidifying the importance of our cause in helping the gap group population.

The dentist, Executive Director and the grant manager will monitor progress on deliverables to ensure that we are on track, and keep track of grant funds expended. Along with the dentist, the evaluation team will also include the Hawaii Programs Committee chair and its health professional members, who will be responsible for ongoing peer review, review and revision of patient protocols and clinic guidelines, credentialing and privileging, and the risk management of the clinic.

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 for this program are the objectives identified earlier in this proposal.

- Increase the number of dental visits by 50% (from 1200 to 1800)
- Of the 1800 visits, treat 30 new patients in the Welcome Smile program
- Increase clinic hours from 3 to 4 days per week for 3 to 4 hours per session to 5 days a week for 5 to 7 hours per day
- Conduct presentations to 5 community agencies and businesses regarding the services of the free Dental Clinic
- Train and mentor 48 students on oral health education and in the clinic
- Provide First Smile presentations to 12 preschools and/or elementary schools in our community

### III. Financial

#### Budget

1. The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.

See attached Budget.

The requested funds will be dedicated to pay for a part time dentist, dental hygienist, and 3 dental assistants, who can be relied on to meet the continual demand for free dental services to the low income and at risk population in our community. If we have the ability to pay professional level staff, it provides increased stability and dependability for clinic hours and availability of appointments than relying solely on volunteers. Without reliable funding it is very difficult to engage enough professional hours to meet the demand and the numbers of patients we would like to serve. We intend to continually search for grant funding to cover the cost of the free Dental Clinic, of which the State GIA would be of incredible support to these efforts.

2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2017.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$39,669.50	\$39,669.50	\$39,669.50	\$39,669.50	\$158,678.00

# 3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2017.

List of funds received or pending during fiscal year 2015:

- Hawaii Dental Service (HDS) Foundation -- \$75,240 received
- Hawaii Medical Association Service (HMSA) Foundation -- \$25,000 received for dentist and new dental assistant only
- Strong Foundation -- \$10,000 over a 3 year period (2015 to 2018 for Welcome Smile and dental supplies)
- City Grant in Aid (GIA) \$42,978 (1/1/16 TO 12/31/16 -- Status pending)
- McInerny Foundation -- \$5,000 (3/15 to 2/16 for Dentrix upgrade and training and Welcome Smile)
- G.N. Wilcox Foundation -- \$2,300 (7/15 to 6/16 for facility repair and maintenance)
- Hawaii Women's Legal Foundation -- \$3,000 (5/15 to 4/16 Welcome Smile)
- Hawaiian Electric Industries Foundation -- \$10,000 received for operating expenses
- AUW Application pending

- · Friends of Hawaii Charities Application to be submitted
- Alexander and Baldwin Application to be submitted
- Clarence T.C. Ching Foundation Application to be submitted
- 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.

#### None Applicable

5. The applicant shall provide a listing of all federal, state, and county government contracts and grants it has been and will be receiving for program funding.

City and County of Honolulu Grant in Aid (GIA)

- January 1, 2014 to June 30, 2016 for \$56,084.86
- July 1, 2015 to November 30, 2015 for \$23,948
- January 1, 2016 to December 31, 2016 for \$42,978 (pending contract approval and Notice To Proceed)
- 6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2015.

It is estimated that the unrestricted current assets amount to \$153,554.33, which include cash, investments, receivables, and prepaid expenses.

#### **IV.** Experience and Cap ability

#### 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.

AMM has been providing healthcare across the world since 1983. Recognizing the importance of giving back to our own local community, the Board of Directors have supported this concept of a free Dental Clinic for the uninsured and underserved in Hawaii for the last 13 years. The leadership of our Board and Advisory Board is a major resource for the well-being of the organization. They have continued to sustain the clinic in spite of funding delays in 2013 by using AMM reserves until such time as new funds and donations were received. We are also fortunate to continue to have staunch investors for the clinic, such as Hawaii Dental Service Foundation, Hawaii Medical Service Association Foundation, Strong Foundation, Queen's Medical Center, Hawaiian Electric Industries Foundation, etc. We are proud to partner with these organizations to provide free dental services for those who would otherwise not have access to dental care.

We have experience with recruiting and maintaining volunteers for our clinic and on all our overseas missions. Nine (9) of the key staff and volunteers who are currently involved with the clinic have been with AMM for at least seven years and bring a high level of experience and patient-centered commitment to service. They are the ones who will ensure that the clinic operates efficiently and effectively and meet the objectives identified in this proposal. Our long-standing presence in the community has brought a positive reputation and familiarity with who we are and what we do. We have relationships with the low-cost clinics on Oahu whereby their overflow of uninsured patients can be referred to our free clinic and we, in turn, will refer to them for comprehensive care once the immediate dental problems are resolved.

Since the relocation of the AMM Dental Clinic in 2002, it has provided more than \$5.5 million in free basic dental care for more than 24,400 uninsured patients or about 2,000 patients per year. However, in April 2014 when the clinic had to significantly reduce staff and operational hours, the number of patients and dental visits decreased to about 50 to 80 per month due to limited availability of the volunteer dentists. In 2014 when the clinic operated full time in the first quarter and then part time for the rest of the year, we served 456 patients (many of whom required multiple visits) for a total of 1,068 visits and treated 25 new Welcome Smile women. In 2015 with the clinic being fully part-time, operating 3 to 4 times per week for about 3 to 4 hours per session, dental visits numbered 669 and we treated 18 new Welcome Smile women—women who had experienced domestic violence or incarceration. Although the visits decreased in 2014 and 2015, our patients still ranged from 2 to 82 years of age with Native Hawaiian, Filipino and Micronesian still being among the top 10 cultural groups served.

We continue in a rebuilding period with the expectation that our partnerships with community agencies will strengthen and expand our services further. With funding received in 2015 for a part-time dentist, a part-time dental hygienist, and another part-time dental assistant, as of January 1, 2016 we are now able to offer more reliable clinic hours, 5 days a week for about 5 to 7 hours per day. Our part-time dentist is also a retired prosthodontist, who is capable of providing continuous care to our Welcome Smile women. Therefore, we intend to increase the number of new women treated this year.

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.

The Dental Clinic is located at the historic Palama Settlement, former home of the Strong-Carter Dental Clinic, which served the same population that we serve today. The clinic had the support of the former Senator Daniel K. Inouye, who personally attended our ten (10) year celebration in 2012. It is housed on the first floor of the former Corbett House and was renovated in 2001 through a grant from the Harry and Jeanette Weinberg Foundation. The facility, which measures 3,245 square feet, has a 20-year lease with the current rent being only \$600 per month and will increase to \$50 more per month in 2017.

In 2011 with a grant from the Clarence T.C. Ching Foundation, the clinic facility was expanded from 2 dental treatment rooms to 4. It has x-ray machines available in each of the units, which are licensed by the Department of Health. We are able to accommodate two (2) dentists at one time or one dentist and a dental hygienist, if there is ever a need for such an arrangement. The clinic consists of a waiting room, where videos on good oral hygiene are played while patients are waiting, a reception area where the patient records are maintained in a secured, locked filing cabinet, and a sterilization and supply area. There is a computer in every dental unit so the dentists and dental assistants are able to access the Dentrix system while treating patients.

The facility also houses a small administrative office for the Executive Director and the office manager, a small office for the staff dentist, and a small conference room which some time serves as a limited storage area. The facility is also ADA compliant with a ramp for wheelchairs and handicap parking space in the back of the building and a handicap accessible bathroom. Currently, it more than meets the needs of the Dental Clinic and the administrative needs of AMM.

#### 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.

Patria Weston-Lee served as the Executive Director (ED) in November 2015; however, due to personal circumstances, she resigned as of December 29, 2015. Currently there is a search committee to recruit qualified applicants, interview them and make recommendations for hiring. We also lost our office manager in September 2015 because she found a higher paying job with the State. Recruitment efforts were made and it was left to the new ED to review the applications and set up interview for this position, which she did not have time to do.

In the meantime, one of the nine (9) key staff and volunteers mentioned earlier is the new President of AMM, Christopher Letoto, who is a volunteer and very knowledgeable regarding the operations of this non-profit organization because of his involvement during our time of crisis. He has a new treasurer, Jason Lazzerini, who is a regional manager for American Savings Bank and will be responsible for the 2016 budget as well as the finances of the organization and the Dental Clinic. There is also Dr. Bradley Wong, former President, who now serves as the Senior Vice President, with the authority given by the Board to sign and execute contracts, checks, grant proposals, and notarization documents. This helps to lessen the burden on the President. At this time the Vice President of the Administration Committee, Derek Ito, who is the Human Resource Director for Shriner's Hospital, has posted the office manager position again. The search committee will be going through the applications and interviewing potential candidates, and anticipates hiring someone by the end of February 2015.

Our accountant, Wendy Kuwahara of Arthur K. Kuwahara firm, has been a contractor for AMM since 2014. We are fortunate because she has experience working with non-profits and, especially, those with City and State grants and contracts. She has been a valuable resource to AMM with the City GIA and the reconciliation of our books for 2013 to 2014. She does the monthly financial statements for AMM and sends them to the treasurer and the President. She also works with our volunteer grant writer on the budget, helps her manage grant expenditures, and has been available to her whenever the need arises.

The volunteer grant writer and manager, Colleen Minami, former Board member and now Advisory Board member for AMM, has been responsible for the clinic grants since 2014, ensuring that the clinic had funds to sustain its operations. She not only researches possible charitable foundations and other funding opportunities but also writes for new grants, reapplies to grants previously funded, and manages the grants received. She is responsible for tracking expenditures of grants and for any reports that are due, such as the monthly reports for the City GIA. She will continue in this effort until the Executive Director and office manager are hired and can eventually take over these tasks.

AMM hired a part-time staff dentist, Dr. Andrew Alamar, who retired from the US Navy Dental Corp, in December 2015. He comes to the dental clinic with 20 years of experience doing dentistry in the Navy. He attended the National Naval School of Dentistry, completing a 2 year residency in prosthodontics and received his Doctor of Dental Surgery from Temple University Dental School. His final

position in the military was the Director of Prosthodontics at Camp Pendleton and he has also performed general dentistry in the Navy.

We also have two (2) dental assistants, Miki Topinio-Suenaga and Kiana Imperial. Miki not only assists the dentists but has also offered to perform selected administrative duties, such as depositing checks, inputting expenditures into Quick Books, cutting checks to pay vendors, and sending in the time cards for payroll until an office manager is hired. She works closely with our accountant on QuickBooks in entering expenditures correctly and accurately. She also works with our Board President and the Senior Vice President on authorization and signing of checks, contracts, and payroll submissions. Miki also serves as the clinic receptionist, greeting and checking patients in, giving appointments, answering the phones, scheduling appointments, and maintaining patient records.

Our other dental assistant, Kiana Imperial, has been with the Dental Clinic for over ten (10) years and has been the constant through all of the changes occurring with the clinic. She will work with our 7 volunteer dentists once the 3<sup>rd</sup> part-time dental assistant is hired. Kiana is also responsible for ordering dental supplies and needed dental equipment for the clinic and checking that we have received them before payment is authorized. Both she and Miki have the most contact with our patients, answering questions, providing oral health education, giving directions, giving out and collecting the patient surveys, and ensuring our patients are comfortable and aware of what to expect with their care. They both help to keep the facility clean and tidy and helped "kick off" First Smile in December 2015.

We will also be hiring a part-time dental hygienist and another part-time dental assistant by the end of January to complete the dental staff needed. The dental hygienist will try to reduce the wait list of 200 patients for dental cleaning and ensure the progress of First Smile. The 3<sup>rd</sup> dental assistant will worked with our staff dentist until such time as she becomes familiar with the clinic set up, equipment, and protocols. With both of these positions in place it is anticipated that the number of patients and dental visits will increase as well as the number of new Welcome Smile women treated. We will be able to accommodate more students in our training facility and to reach out to the preschools and elementary schools in our community.

#### **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 organization chart that illustrates the placement of this request.

Please see the attached organizational chart for AMM.

#### C. Compensation

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

The annual salaries of the former Executive Director was \$82,000, the former operations manager \$63,974, and the new staff dentist, \$52,000. Officers and Directors of AMM are volunteers as is the grant writer and manager.

#### 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.

Not applicable

#### B. 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.

Radiation Facility License CPR/AED Certification DEA (Drug Enforcement Administration) Registration/License Malpractice Insurance Protection through the Federal Torts Claims Act (FTCA) under HRSA for volunteer dentists and Board of Directors and Officers Current State of Hawaii Dental and Dental Hygiene Licenses Dental Assistant certification Annual OSHA and HIPAA Certification

C. 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

#### D. Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2016-17 the activity funded by the grant if the grant of this application is:

(1) Received by the applicant for fiscal year 2016-17, but

(2) Not received by the applicant thereafter.

AMM plans to sustain the free Dental Clinic through fundraising events, direct mail solicitations two times per year, Board donations, solicited sponsorships and charitable foundations, and individual donors. We will continue to create new community partnerships and cultivate high end donors through innovative events. AMM plans to actively research and identify new funding opportunities, while continuing to partner with our long standing investors, such as HDS Foundation, HMSA Foundation, the Queen's Medical Center, Hawaiian Electric Industries Foundation, Friend of Hawaii Charities, Hawaii Women Legal Foundation, etc. New funding opportunities would include government grants. The additional funding will also be raised through partnerships, such as Aloha United Way and the Combined Federal Campaign. Organizations have also conducted fundraising on our behalf, such as the Foodland Give Aloha Program and third party events, which all help to further our cause.

As long as we actively pursue funding and continue to coordinate our volunteers and professional dental staff, we will be able to operate 5 days a week for at least 5 to 7 hours per day. The consumer experience is significantly improved with the addition of a paid dental staff that can guarantee a particular level of capacity and reliability. We are committed to continue our fundraising and donor plans beyond the grant period to sustain this free service to the community and as long as it is assessed to be needed by the uninsured and underserved within the community.

#### E. 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, 2015.

Please see attached document.

## **BUDGET REQUEST BY SOURCE OF FUNDS**

Period: July 1, 2016 to June 30, 2017

Applicant: ALOHA MEDICAL MISSION - Dental Clinic

		Funds Requested		
	(a)	(b)	(c)	(d)
PERSONNEL COST				
1. Salaries	130,260		18,062	34,702
2. Payroll Taxes & Assessments	17,168		2,220	4,734
3. Fringe Benefits	11,250		450	2,700
TOTAL PERSONNEL COST	158,678		20,732	42,136
OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island				
2. Insurance				3,833
3. Lease/Rental of Equipment				2,333
				4,800
				1,423
				38,334
				3,333
				38,000
1 10 10				7,667
				1,000
				2,833
		i		1,467
				1,000
and the second s				
20				
TOTAL OTHER CURRENT EXPENSES				106,023
EQUIPMENT PURCHASES				
MOTOR VEHICLE PURCHASES				
CAPITAL			2	
AL (A+B+C+D+E)	158,678		20,732	148,159
		Budget Prepared i	By:	
JRCES OF FUNDING			25.	
	158.678			
		Name (Please type or p	rint)	Phone
		Signature of Authorized	Official	Date
uy Total Filvale/Other Funds Requested	140,109	englimiter of Freeholder		Duig
AL BUDGET	327,569	Name and Title (Please	type or print)	
	2. Payroll Taxes & Assessments     3. Fringe Benefits     TOTAL PERSONNEL COST     OTHER CURRENT EXPENSES     1. Airfare, Inter-Island     2. Insurance     3. Lease/Rental of Equipment     4. Lease/Rental of Space     5. Staff Training     6. Supplies     7. Telecommunication     8. Utilities     9. Audit & Accounting     10. IT Services / Internet     11. Printing     12. Repairs & Maintenance     13. Payroll services     14. Other     15     16     17     18     19     20     TOTAL OTHER CURRENT EXPENSES EQUIPMENT PURCHASES MOTOR VEHICLE PURCHASES CAPITAL TAL (A+B+C+D+E)  JRCES OF FUNDING     (a) Total State Funds Requested	2. Payroll Taxes & Assessments       17,168         3. Fringe Benefits       11,250         TOTAL PERSONNEL COST       158,678         OTHER CURRENT EXPENSES       1         1. Airfare, Inter-Island       2         2. Insurance       3         3. Lease/Rental of Equipment       4         4. Lease/Rental of Space       5         5. Staff Training       6         6. Supplies       7         7. Telecommunication       8         9. Audit & Accounting       10         10. IT Services / Internet       11         11. Printing       12         12. Repairs & Maintenance       13         13. Payroll services       14         14. Other       15         15       16         17       18         19       20         TOTAL OTHER CURRENT EXPENSES       EQUIPMENT PURCHASES         GAPITAL       15         16       17         18       19         20       20         TOTAL OTHER CURRENT EXPENSES       EQUIPMENT PURCHASES         GAPITAL       158,678         MOTOR VEHICLE PURCHASES       158,678         JRCES OF FUNDING       158,67	2. Payroll Taxes & Assessments       17,168         3. Fringe Benefits       11,250         TOTAL PERSONNEL COST       158,678         OTHER CURRENT EXPENSES	2. Payroll Taxes & Assessments       17,168       2,220         3. Fringe Benefits       11,250       450         TOTAL PERSONNEL COST       158,678       20,732         OTHER CURRENT EXPENSES       1       20,732         I. Airfare, Inter-Island       1       1         2. Insurance       1       1         3. Lease/Rental of Equipment       1       1         4. Lease/Rental of Space       1       1         5. Staff Training       1       1         6. Supplies       1       1         7. Telecommunication       1       1         8. Utilities       1       1         9. Audit & Accounting       1       1         10. IT Services / Internet       11       1         11. Printing       1       1         12. Repairs & Maintenance       1       1         13. Payroll services       1       1         14. Other       1       1       1         15       1       1       1         16       1       1       1       1         17       1       1       1       1         18       1       1       1       1

#### **BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES**

Period: July 1, 2016 to June 30, 2017

Applicant: ALOHA MEDICAL MISSION

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL ATE FUNDS EQUESTED (A x B)
ntist	0.50	\$78,000.00	65.00%	\$ 50,700.00
ntal Hygienist	0.50	\$41,600.00	80.00%	\$ 33,280.00
ntal Assistant	0.75	\$26,520.00	65.00%	\$ 17,238.00
ntal Assistant / Clinic Receptionist	0.75	\$24,060.00	78.00%	\$ 18,766.80
ental Assistant	0.48	\$12,844.00	80.00%	\$ 10,275.20
				\$ 
				\$ -
				\$
				\$ -
TOTAL:				 130,260.00

## **BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES**

Period: July 1, 2016 to June 30, 2017

Applicant: ALOHA MEDICAL MISSION

NOT APPLICABLE         \$         -           \$         -         \$         -           \$         -         \$         -           \$         -         \$         -           \$         -         \$         -           \$         -         \$         -           \$         -         \$         -           \$         -         \$         -			and the second se	ITEMS	EQUIPMENT	
\$ - \$ -		-	\$			NOT APPLICABLE
\$ -	-	-	\$			
		-	\$			
\$ -		-	\$			
		-	\$			
TOTAL:					TOTAL:	

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE		OTAL OST	TOTAL BUDGETED
DT APPLICABLE			\$	-	
			\$	-	
			\$	-	
			\$	-	
			\$	-	
TOTAL:					
STIFICATION/COMMENTS:			en ang ang ang ang ang ang ang ang ang an		

## **BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS**

Period: July 1, 2016 to June 30, 2017

Applicant: ALOHA MEDICAL MISSION

NOT APPLICABLE

TOTAL PROJECT COST	ALL SOURCE RECEIVED IN	S OF FUNDS PRIOR YEARS	STATE FUNDS REQUESTED	OF FUNDS REQUESTED		EQUIRED IN
	FY: 2014-2015	FY: 2015-2016	FY:2016-2017	FY:2016-2017	FY:2017-2018	FY:2018-2019
PLANS						
DESIGN				:		
CONSTRUCTION						
EQUIPMENT						
TOTAL:						

#### **GOVERNMENT CONTRACTS AND / OR GRANTS**

Applicant: ALOHA MEDICAL MISSION

Contracts Total:

42,978

GOVERNMENT EFFECTIVE CONTRACT ENTITY CONTRACT DESCRIPTION AGENCY DATES VALUE (U.S. / State / Haw / Hon / Kau / Mau) Hawaii's only free dental clinic providing free basic dental 1/1/16 - 12/31/16 Dept. of Community Service: 1 42,978 City & County of care, education and emergency care for the poor and Honolulu uninsured 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28

#### 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.
- If the applicant is an organization, the applicant meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
  - a) Is incorporated under the laws of the State: and
  - b) Has bylaws or policies that describe the manner in which the activities or services for which a grant is awarded shall be conducted or provided.
- If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
  - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
  - 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.

Aloha Medical Mission (Typed Name of Individual or Organization)		
	1/20/2016	
(Signature)	(Dute)	
Bradley D. Wong	Senior Vice President	
(Typed Name)	(Tític)	
Rev 12/15/15	10	Application for Grants

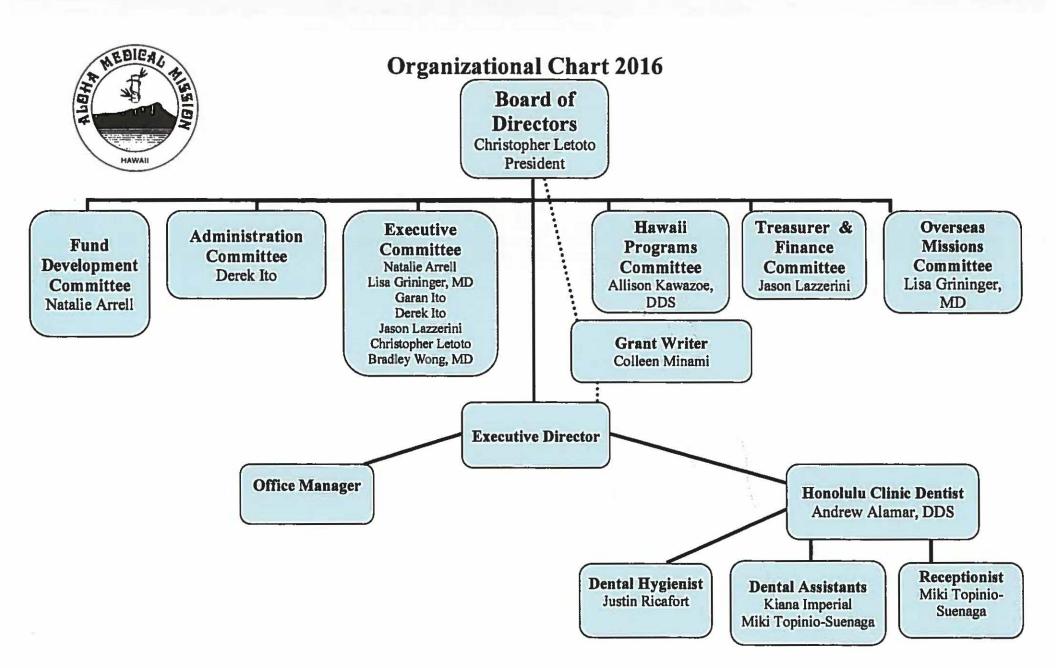


Aloha Medical Mission Application for Grants

2016 STATE GRANT-IN-AID January 22, 2016

### ATTACHMENTS

- 1. Aloha Medical Mission Organizational Chart
- 2. Certificate of Good Standing January 19, 2016





## **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

ALOHA MEDICAL MISSION

was incorporated under the laws of Hawaii on 03/10/1983 ; 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 19, 2016



**Director of Commerce and Consumer Affairs**