

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


AUTHORIZED SIGNATURE

Hannah Preston-Pita
PRINT NAME AND TITLE

01/10/2019
DATE

**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.

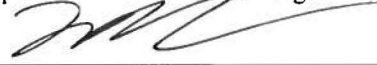
- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawaii Revised Statutes:
 - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
 - b) Has a governing board whose members have no material 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.

Big Island Substance Abuse Council

(Typed Name of Individual or Organization)



(Signature)

Hannah Preston-Pita

(Typed Name)

01/10/2019

(Date)

Chief Executive Officer

(Title)

§42F-102 Applications for grants. Requests for grants shall be submitted to the appropriate standing committees of the legislature at the start of each regular session of the legislature. Each request shall state:

- (1) The name of the requesting organization or individual;
- (2) The public purpose for the grant;
- (3) The services to be supported by the grant;
- (4) The target group; and
- (5) The cost of the grant and the budget. [L 1997, c 190, pt of §3; am L 2014, c 96, §6]

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Application for Grants

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

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 Big Island Substance Abuse Council (BISAC) is a 501(c) (3) non-profit organization which has been in operation since 1964. The Big Island Substance Abuse Council provides culturally appropriate, evidenced based behavioral health care treatment. For over 50 years of providing services, BISAC's positive reputation has been a long-standing influence in the community, providing a comprehensive continuum of substance abuse treatment services which include Day Treatment (DT), Intensive Outpatient (IOP), Outpatient Treatment (OP), Therapeutic Living Programs (TLP), Clean and Sober Housing and Mental Health Services for all Hawai'i County. Current adult outpatient sites are located on the Hawai'i Island (Hilo and Kona); adolescent outpatient sites on the islands of Hawai'i (Hilo); servicing over thirty-two (32) school based programs throughout the island of Hawai'i; mental health services (dba Hawai'i Island Health and Wellness Center) in Hilo; Three (3) Therapeutic Living Programs (Hilo); Two (1) clean and sober living programs (Hilo); Vocational Training Services, and Employee Assistance programs (dba Kokua EAP) on the island of Hawai'i. Current services continue to inspire and enrich lives by improving the lives of individuals, their families and as a result their communities. All federal and/or state funding are compliant and within budget.

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

BISAC plans for operation launch of a new facility, Malama Behavioral Health Campus (MBHC) to consolidate all programs in one location, expand treatment services and increase treatment capacity. The new campus will be in Kea'au, Hawaii and provide services to individuals and their families island-wide. MBHC is a multi-phase project which includes: First, (Phase I) planning, design, and permitting which is scheduled to begin in June 2019. Next, (Phase II) developing civil infrastructure and construction of buildings which is scheduled to begin January 2020 and completed by January 2022.

The goals and objected related to the request

- Expand BISAC's infrastructure and provide a more comprehensive treatment approach.
- Provide multiple health and human services in a single location

- Create a hub for integrated services
- Expand the treatment episode of care to support the needs in the community (e.g. residential treatment for both adults and adolescents, provider training programs and placement, and detox)

3. The public purpose and need to be served;

The island of Hawai'i is the largest of the United States Hawaiian archipelago located in the central Pacific. At roughly 4087 sq. miles, it is larger than all the other major islands combined and is a geographic wonder that boasts 11 of the 13 climate zones on the planet. In 2016 Hawai'i Island had the highest increase in residents specifically in Hilo and Puna. Current residents on Hawaii Island live below the 200% of the federal poverty level— Hilo is 18%, Puna 29% and Ka'u 27%. The highest ethnic concentration in these areas are as follows: Hilo's ethnic population consists of 32% Hawaiians, 33% Japanese; Puna consists of 32% Hawaiians and 24% Filipinos, and Ka'u consists of 28% Hawaiians 28% and Filipino 24%. Puna is ranked at the top for population below 100% of the federal poverty level with Ka'u in second. Ka'u has the second highest on the island with children in households receiving assistance with Puna and Hilo consecutively following. Puna has the highest rates of household receiving SNAP or Cash Public Assistance with Kau and Hilo consecutively following.

The island in its entirety is BISAC's target area and because BISAC offices are centrally located in Hilo, Keaau, and Kona as well as being present in several schools across the island, the agency has the means to assist those in need of overcoming some of the physical barriers to accessing much needed behavior health services. Some of the unique challenges which only exacerbate the current needs of the County of Hawai'i include:

- o Geography - isolated areas and mountains make it challenging to travel;
- o Poverty – higher unemployment rates, lack of insurance and inconsistent access to reliable transportation create barriers to accessing affordable mental health care;
- o Population – a retirement population that is growing faster than the work force (79.7% vs. 37.8%) limits how access to services and treatments;
- o Increase in Need – growing substance abuse, particularly among adolescents, creates a higher demand for programs, services and treatments; and
- o Shortage of Providers – the following have been federally designated as Mental Health Professional

Shortage Areas (MHPSA): District of Puna, and District of Ka'u. These challenges create silos of underserved populations in need of professional behavioral health services. BISAC can be instrumental in connecting rural populations with affordable, professional mental health services in one location. BISAC is committed to its island-wide service area and understands the needs of the pockets of low-income, rural, geographically isolated communities. The Malama Behavioral Health Campus' purpose is to expand BISAC's current infrastructure and provide a more comprehensive treatment approach by consolidating services. This project provides multiple health and human services in a

single location at an easily accessible location. The integrative care model involves substance abuse, mental health, medical services, etc. to improve quality and access of care. BISAC will continue to have its Kona Outpatient office and will serve as a feeder site for residential, TLP and CS programs. This project will:

- Effectively address the needs of the island's drug abuse epidemic and its residual effects;
- Decrease the barriers between behavioral and mental health care;
- Reducing the stigma that burdens those dealing with behavioral and mental health diagnosis;
- Reducing the wait time and exhausting wait-lists, allowing same day visits and care coordination,
- Focus on those that pose a higher risk due to living in rural and under-served areas; and
- Will provide an increase in bed space for those seeking in-house care which often time is reflective of our State's homelessness population.

This project will provide immediate respite and support to Hawaii Island and address the already fractured behavioral health system. Additionally, the MBHC will cut neighbor island travel costs to O'ahu where behavioral health services are more readily available to allow Hawai'i Island residents who seek behavioral health care to stay on island and near to their family and friends.

4. Describe the target population to be served; and

The Big Island Substance Abuse Council (BISAC) provides a continuum of care to both adolescents and adults who need behavioral health services.

Hawai'i Island residents have been faced with monumental obstacles such as the Puna district's recent Kilauea eruption which displaced hundreds of residents. However, the communities on Hawai'i Island, working together have overcome major challenges and can do so again. In fact, the University of Hawaii's Center of the Family reports that 80% of Hawaii's people feel they can rely on other in the community for help. To this end, BISAC intends to be the help for the population of the island's community who seek behavioral health care and make a profound impact on the insurmountable challenges that substance abuse is having on the residents and families of Hawai'i County.

The adverse effects that stem from substance abuse is reflected in the two County of Hawai'i most poverty-stricken districts of Puna and Ka'u. The Pahoa area, with a population of 14,767 is a portion of the greater Puna district that has a total population count of 45,5171 and pre-Kilauea eruption was considered the State's fastest growing district. The area ranks third lowest per capita income and the has highest percentage State-wide of families who rely on food stamps (55%). The poverty rate of young children and elderly is second and third highest in the State. More than 25 % of the residents in the Pahoa area receive assistance from Temporary Assistance to Needy Families (TANF) compared to most other communities. In comparison to most other

communities, more adults of all ages are living with diabetes, few teachers and parents describe their schools as safe. The percentage of third graders with low SAT scores is among the highest in the State, and the percentage of high school seniors who gain acceptance into college is among the lowest. Similarly, the 5,751 population count of the Ka'u district deal with several socio-economic disparities. The unemployment rate of 16.1% is the worst in the State, per capita income is among the lowest State-wide. High proportions of the very young and very old live in poverty, and one-third of the families—more than double the State average. The Ka'u area has the State's the highest percentage of "idle-teens" (not working or attending school). Compared to other communities, school attendance and the percent of students graduating are low in the Ka'u area, where about 40% of third graders do poorly on the SAT reading test and more than 20% of adults are without a high school diploma. Almost 61% of the children are in special education programs. Parents report the second-lowest level of involvement in their children's schools.

BISAC understands the diverse effects of substance abuse and its detrimental impacts it can have on our island communities. The scenarios of the districts of Puna and Ka'u not isolated to their respective districts, BISAC can see that the substance abuse plaque is prevalent island-wide. The agency is well equipped with the specialized expertise, the necessary reach into the rural locations of the island and is qualified to tackle the behavioral health needs of the island. The MBHC is foreseen to be the mechanism that will enable BISAC to provide a higher level of behavioral and mental health care that will decrease the barriers between behavioral health and mental health care, reduce the stigma that burdens those dealing with behavioral and mental health diagnosis, reduce the wait time and exhausting wait-lists, allowing same day visits and care coordination, focusing on those that pose a higher risk due to the socio-economic determinates that come with living in a rural and underserved area, and provide an increase in bed space for those seeking in-house care which often times is reflective of our State's homelessness population; more so, in need due to the displacement resulting from the Puna Disaster.

5. Describe the geographic coverage.

The island in its entirety is BISAC's target area and because BISAC offices are centrally located in Hilo, Keaau, and Kona as well as being present in several schools across the island, the agency has the means to assist those in need of overcoming some of the physical barriers to accessing much needed behavior health services. The island of Hawai'i is the largest of the United States Hawaiian archipelago located in the Pacific. At roughly 4087 sq. miles, it is larger than all the other major islands combined and is a geographic wonder that boasts 11 of the 13 climate zones on the planet. In 2016 Hawai'i Island had the highest increase in residents specifically in Hilo and Puna. Current residents on Hawaii Island live below the 200% of the federal poverty level— Hilo is 18%, Puna 29% and Ka'u 27%. The highest ethnic concentration in these areas are as follows: Hilo's ethnic population consist of 32% Hawaiians, 33% Japanese; Puna consists of 32% Hawaiians and 24% Filipinos, and Ka'u consists of 28% Hawaiians 28% and Filipino 24%. Puna is ranked at the top for population below 100% of the federal

poverty level with Ka'u in second. Ka'u has the second highest on the island with children in households receiving assistance with Puna and Hilo consecutively following. Puna has the highest rates of household receiving SNAP or Cash Public Assistance with Kau and Hilo consecutively following.

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- Geography - isolated areas and mountains make it challenging to travel;
- Poverty – higher unemployment rates, lack of insurance and inconsistent access to reliable transportation create barriers to accessing affordable mental health care;
- Population – a retirement population that is growing faster than the work force (79.7% vs. 37.8%) limits how access to services and treatments;
- Increase in Need – growing substance abuse, particularly among adolescents, creates a higher demand for programs, services and treatments; and
- Shortage of Providers – the following have been federally designated as Mental Health Professional Shortage Areas (MHPSA): District of Puna, and District of Ka'u.

These challenges create silos of underserved populations in need of professional behavioral health services. BISAC can be instrumental in connecting rural populations with affordable, professional mental health services. BISAC is committed to its island-wide service area and understands the needs of the pockets of low-income, rural, geographically isolated communities.

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;

The Grant-In-Aid funds will be used to help with the multi-phase project to include Phase I) planning, design, and permitting and Phase II) developing civil infrastructure and construction of buildings. The Chief Executive Officer, Dr. Hannah Preston-Pita and Board of Directors will provide oversight of the project from planning and design to construction. Monthly Board meetings will include discussion of status of project, timelines updates, and budgetary action items.

Needs assessments on Hawaii Island have revealed major health challenges island-wide. The current data highlights the need to address major behavioral health challenges which are more concentrated in the below catchment areas:

- Hilo has the highest number of hospitalizations in the county (27,911);
- Hilo has the highest number of hospitalizations in the county due to Substance Related Disorder (2,255) with Puna (1,169) is third highest and Ka'u (1,030) is ranked fourth; and
- Hilo has the highest number of hospitalizations in the county due to mood, anxiety, delirium and schizophrenia.

On Hawaii Island, there are facilities that provide mental health services such as: Bay Clinic, Inc. that serves the districts of Puna and and Ka'u, the communities along Hamakua Coast as well as the residents of North Kohala and South Waikoloa the within the coverage area of the Hamakua Health Center who has the Hamakua Coast and North Kohala in its target area, and the West Hawai'i Community Health Center providing services for West Hawai'i Island residents. services the West Hawai'i communities from Kawaihae to Hawaiian Ocean View. These Federally Qualified Health Centers are inclusive of the few providers and agencies who may be providing mental health treatment programs and services on Hawai'i Island. The notion "may" mean that not all facilities have substance abuse and mental health services due to the challenging provider recruitment efforts or because of the lack of available funding

What sets BISAC apart from these providers and agencies is that BISAC specializes in behavioral health which includes substance abuse and mental health; it's what they do! Additionally, BISAC's has a long-standing reputation with 54 years of experience in the specific field of providing behavior health on Hawai'i Island. Furthermore, BISAC has the capacity to overcome some of the physical barriers to accessing needed services and can connect rural populations island-wide with affordable, professional services.

Budgeted staff members provide services and lines of supervision. The organization has a volunteer Board of Directors consisting of concerned community members from East and North Hawai'i. Client staff ratio is 1:15. The Chief Executive Officer (CEO) holds a Doctorate in Psychology and is a Hawai'i State Certified Substance Abuse Counselor and oversees all aspects of the agency including administration, fiscal and clinical components. Program Administrators provide program oversight of day to day programmatic operations. All medications, prescribed or over-the-counter, are cleared by BISAC's RN and Medical Director. The RN addresses all health issues and assists staff in determining when a client needs emergency services in order to ensure appropriate use of emergency hospital services. The RN also provides medical examinations in coordination with Dr. Harmeling to screen TLP clients for infectious diseases. The Chief Financial Officer (CFO) reports to the Chief Executive Officer and supervises the day-to-day operations of the fiscal department.

Our Administration is made up of highly qualified individuals who provide the leadership and guidance to support staff and help create systems which improve the overall quality of care for our clients. BISAC is committed to maintaining the highest quality of staff for all of the treatment services provided at every site island-wide. All staff meets or exceeds minimum qualifications, including necessary experience for staff assigned to this proposal. The proposed staff to client ratio is 1:15. The following are staffing for Adult and adolescent programs. Full job descriptions may be furnished upon request.

Program Administrators are qualified individuals of the senior management staff who are responsible for the day to day operations at designated sites. These individuals are responsible for the Programs, Facilities Management, Planning and Resource Development under the supervision of the CCO for sites (e.g. OP, TLPs, Clean and Sober, etc.). The Program Administrator is responsible for staff coverage, provides relief for overflow of direct service, co-facilitates clinical meetings, and co-facilitates in-service training for staff. Clinical Coordinators/Quality Assurance Managers provides clinical support and supervision in the core functions of a substance abuse counselor via observations, didactics, and clinical trainings and plans, coordinates, and implements the quality management and quality improvement programs for BISAC. In addition, Clinical Coordinators/Quality Assurance Managers monitors and aids with quality assurance and compliance functions, provides consultation and direction to ensure programs and services are implemented at the highest standards and patients receive the highest level of care. Furthermore, they ensure policies and procedures are monitored and updated to include regulatory changes.

The Assessment/Intake Counselor is a qualified staff member who is responsible for facilitating all screenings, assessments and orientation of clients for proper placement into Outpatient and Therapeutic Living programs. This position reports directly to the Program Administrator for day to day operations and Clinical Coordinator for clinical support and supervision. Substance Abuse Counselor II-IV will report directly to the Program Administrator for day to day programmatic operations and to Clinical Coordinator/Quality Assurance Manager for clinical supervision and development. The Substance Abuse Counselors are qualified staff member who is responsible for assisting and conducting in the collection of assessments, intakes and orientation of clients for proper admission into our programs. This staff member is also responsible for maintaining a case load.

The Office Manager is a qualified staff member with the ability to provide clerical support to the Program Administrator and/or its designee. The Office Manager is responsible for the ordering of office supplies, centralized scheduling, responsible for the site's direct service staff hours and filling open and/or no-show appointments, maintaining and coordinating appointments for daily waitlist, when necessary managing and screening calls and or disseminating messages from external resource agencies, and as necessary handling the overflow of form completion for the Intake Coordinator.

Addiction Care Coordinator is a qualified staff member who provides case management services that assesses client's needs; develops, implements and reviews wellness plans and goals; and works with community resources in meeting and achieving client's service needs. This position is the conduit between treatment and additional resources required to improve treatment outcomes and provide support following treatment. This individual formulates case plans that promote moving towards self-sufficiency. Therapeutic Living Program staff understands substance abuse related problems and behaviors and provides 24-hour care coordination. Case-management services will be geared towards the development of recovery related goals and objectives and will work closely with client's individual counselor and addiction care coordinator. Therapeutic support will be provided within the clean and sober living environment through a structured schedule that is implemented by the peer specialists. Therapeutic Living Program staff and Addiction Care Coordinator will also have the ability in assisting the clients through transitional and discharge planning services that include maintaining positive affiliations with continued education, volunteer, and employment resources. Land and Cultural Resource Manager is a qualified counselor who is responsible for facilitating and implementing therapeutic horticulture that supports land-based learning, social enterprise, and food self-sufficiency. This individual report directly to the Chief Clinical Officer and Chief Executive Officer.

Vocational Coordinator plans (VC), organizes, coordinates, manages and evaluates the Vocational Training Program (VTP) and reports directly to the Chief Clinical Officer, who reports to the CEO. This position ensures a high quality of program management that operates effectively and efficiently according to clients' vocational needs. Vocational Case Manager (VCM) reports directly to the VC. VCM collaborates closely with the VC and assists with gathering and inputting data as well as gathering follow-up data. VCM will assist with co-facilitating groups and individual meetings. VCM will provide case management services for clients and work collaboratively with VC on client's overall individual vocational plan. Vocational Supervisors (VS) will provide on job vocational training to clients following the completion of programmatic requirements. These individuals currently work for the program and will provide specialized on the job training in the following areas: culinary, maintenance, retail, and office. These individuals are current BISAC staff working within these specialized fields.

Mental Health Counselors (MHC) are members of the Hawaii Island Health and Wellness Center (HIHWC), a subsidiary of BISAC, that provide mental health support services for both current BISAC clients and or community clients. MHC are qualified staff members who are responsible for assisting and conducting psychological assessments, intake and orientation of clients. They address co-occurring and underlying issues to addiction.

BISAC's staff has extensive years of experience within the field and hold various degrees. BISAC continues to be in good standing with the Department of Commerce and Client Affairs. BISAC also requires annual online training via staff training that occurs weekly as well with clinical meetings where staff learn about interventions, problem solving, and

more. An online training called E-Learning is provided to our staff which educates them on basic skill sets such as customer service. BISAC is also a Commission on Accreditation of Rehabilitation Facilities (CARF) and are accredited for three years which is considered exemplary status as normally accreditation is on an annual basis. BISAC staff regularly attend a variety of internal and external training to enhance their professional development in various program areas. All staff members are expected to meet training standards including: A Licensed Clinical Social Psychologist, Doctorate in Psychology, licensed providers with degrees in Clinical Social Work, Marriage and Family Therapy, and Social Work, several demonstrate the ability to coordinate services with other agencies and resources in the community through monthly meetings, outreach, and other activities. BISAC's track record includes success in working with the substance abuse and mental health population. BISAC has an extensive history spanning over decades which showcase our ability to secure, manage, and successfully execute grant contracts. As further evidence of our history of verifiable experience in obtaining contracts, implementing them, reporting on them regularly and achieving outcome goals that result in recurrent funding.

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

The Big Island Substance Abuse Council is currently working on the conceptual design of the project with Advanced Architects LLC. The Grant-in-Aid will allow BISAC to move forward with phase I by July 1, 2019. The construction of the campus center will begin in January 2020 and will take approximately one year to complete.

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

Advanced Architects, LLC, BISAC's Chief Executive Officer and Board of Directors will monitor the project from design to construction. Continual progress and timelines will be monitored to ensure that the project in on time and quality outcomes are within budget.

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.

Continual collaboration between Advanced, Architects, LLC, Contractor, BISAC's CEO, and the Board of Directors will ensure that the project is meeting timelines and milestones.

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 2020.

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

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2020.
 BISAC will be seeking funds from USDA and CDBG to provide support for the construction of the campus. Additional funding will be sought from private philanthropic funders and other foundations. A capital campaign will assist with the remaining cost.

4. The applicant shall provide a listing of all state and federal tax credits it has been granted within the prior three years. Additionally, the applicant shall provide a listing of all state and federal tax credits they have applied for or anticipate applying for pertaining to any capital project, if applicable.
 This does not apply.

5. The applicant shall provide a listing of all federal, state, and county government contracts, grants, and grants in aid it has been granted within the prior three years and will be receiving for fiscal year 2020 for program funding.

Big Island Substance Abuse Current Contracts:

Alcohol and Drug Abuse Division

601 Kamokila Boulevard Room 360; Kapolei, HI 96707

ADAD RFP 2020-2022 - POSTED

Treatment, TLP Services, School Based Treatment, Dual Diagnosis, and Integrated Case Management:

ADAD – CONTRACT 18-090 (Sub 1) – Adult Substance Abuse 10/01/17 – 09/30/19

ADAD – CONTRACT 18-090 (Sub 2) – Pregnant Women and Women with Dependent Children (PPWDC) 10/01/17 - 09/30/19

ADAD – CONTRACT 18-109 (Sub 3) – Integrated Addiction Case Coordination and Substance Abuse Treatment Services 10/01/17 – 09/30/19

ADAD – CONTRACT 18-109 (Sub 4-SB) Adolescent School Base 10/01/17 – 09/30/19

ADAD – CONTRACT 18-109 (Sub 4-CB) Adolescent Community Base 10/01/17 – 09/30/19

ADAD – CONTRACT 18-109 (Sub 5) – Group Recovery Homes 10/01/17 – 09/30/19

Treatment, TLP Services, School Based Treatment, Dual Diagnosis, and Integrated Case Management:

BIG ISLAND DRUG COURT

81-940 Haleki'i Street; Kealahou, Hawai'i 96750

DRUG COURT RFP POSTED 1/2019

Treatment IOP, OP, AC:

o J16027 Adult July 1, 2015 – June 30, 2019

o J15068 Adolescent July 1, 2015 – June 30, 2017

BIG ISLAND VETERANS TREATMENT COURT

Contract J16318 – May 1, 2016 – September 30, 2017

HAWAII PAROLE AUTHORITY

Keoni Ana Building 1177 Alakea Street, First Floor Honolulu, HI 96813

Contract 62753 – Adult Treatment

o 01/01/17 – 05/30/18 - \$40,000

o 06/01/18 – 05/30/20 - \$50,000

Contract 62756 – Adult TLP

o 01/01/17 – 05/30/18 - \$20,000

o 06/01/18 – 05/30/20 - \$50,000

KOKUA EAP

Hapuna Beach Prince/Mauna Kea Beach Hotel 62-100 Mauna Kea Beach Drive, Kohala Coast, HI 96743

Kokua EAP Contract - No Limit

Program Performance Results: Developed an EAP process for individuals within the workplace.

HAWAII ISLAND UNITED WAY, INC. PO Box 745 Hilo, HI 96721-0745

Several grants 2012- Present

Program Performance Results: Gain the ability to provide more services for clients who were uninsured.

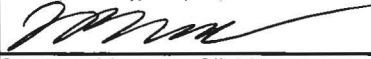
6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2018.

The balance of BISAC's net assets in its Unrestricted Fund as of December 31, 2018 is \$779,959

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2019 to June 30, 2020

App Big Island Substance Abuse Council

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				
0	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	\$ 500,000.00	\$ 500,000.00	\$ 50,000.00	
TOTAL (A+B+C+D+E)	\$ 500,000.00	\$ 500,000.00	\$ 50,000.00	
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	\$ 500,000.00	Hannah Preston-Pita 808-969-9994 ext. 827		
(b) Total Federal Funds Requested	\$ 500,000.00	Name (Please type or print) Phone		
(c) Total County Funds Requested				
(d) Total Private/Other Funds Requested	50,000	Signature of Authorized Official Date		
TOTAL BUDGET	1,050,000	Hannah Preston-Pita, Chief Executive Officer		
		Name and Title (Please type or print)		

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2019 to June 30, 2020

Big Island Substance Abuse Council

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:				

JUSTIFICATION/COMMENTS:

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2019 to June 30, 2020

Big Island Substance Abuse Council

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

JUSTIFICATION/COMMENTS:

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

JUSTIFICATION/COMMENTS:

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2019 to June 30, 2020

Applicant: _____

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: 2017-2018	FY: 2018-2019	FY:2019-2020	FY:2019-2020	FY:2020-2021	FY:2021-2022
PLANS	0	0	0	0	0	0
LAND ACQUISITION	0	0	0	0	0	0
DESIGN	0	0	0	0	0	0
CONSTRUCTION	0	0	\$ 500,000.00	\$ 500,000.00	\$ 500,000.00	\$ 500,000.00
EQUIPMENT	0	0	0	0	0	0
TOTAL:			\$ 500,000.00	\$ 500,000.00	\$ 500,000.00	\$ 500,000.00
JUSTIFICATION/COMMENTS:						
Once the State Grant-In-Aid funds are granted it will be used towards the operation's launch of the Malamalama Campus. Other funds collected wil						

GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID

App: **Big Island Substance Abuse Council** Contracts Total: **4,640,232**

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)	CONTRACT VALUE
1	Grant-In-Aid	FY 2019-2020	Hawaii State Legislature	State	500,000
2	USDA	FY 2019-2020	USDA	Federal	500,000
3	Kamehameha School Community Investment Grant	FY 2019-2020	Kamehameha Schools	Private	200,000
4	Drug Court	FY 2019-2022	Judicial - Drug Court	State	186,000
5	Alcohol Drug Abuse Division	FY 2019-2021	Department of Health	State	2,612,000
6	Community Grant	FY 2019-2021	Office of Hawaiian Affairs	State	500,000
7	Public Safety	FY 2019-2021	Public Safety	State	62,232
8	County Community Grants	FY2019-2021	Hawaii County	Hawaii	80,000
9					
10					
11					
12					
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14					
15					
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28					

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.

BISAC has successfully demonstrated its competent and highly qualified skillset, knowledge, and its high-quality behavioral health experience-base by delivering professionally driven and cultural-based services to the County of Hawai'i at all levels of behavioral health care. Behavioral Health includes substance abuse and co-occurring mental health issues that has adverse effects on an individual's and or families' overall wellbeing. A prime component that provides exemplary backing is the almost 20-year recognition of CARF highest 3-year accreditation designation. To expand on verifying BISAC's previous extensive and successful experience in providing substance abuse, mental health, and other relevant services. The following is a list of some of the agency's current contracts, contract compliance, and satisfactory delivery of services. The list demonstrates record of successfully implementing a continuum of care to meet the needs of Hawai'i Island communities. services are provided in partnership with various government agencies and organizations such as the Alcohol and Drug Division, Big Island Drug Court, Big Island Veterans Treatment Court, the Hawai'i Paroling Authority, and the Hawai'i Island United Way, Inc. For further details on any or all the mentioned contracted partnerships, documents will be made available upon request.

2. Facilities

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

All of BISAC's adult Outpatient (OP) facilities and Therapeutic Living Programs (TLP) are handicap accessible and either meet or have plans to meet ADA requirements and local/state building codes designated by fire and county agencies. Properties are zoned appropriately to meet the needs of TLP (Community Housing), IOP Treatment and OP Treatment services. The East Hawai'i (Hilo) TLPs are currently licensed by the Office of Healthcare Assurance. Random visits are conducted by Quality Assurance/Safety Manager and Facility Manager to ensure that all facilities meet state requirements. BISAC also participates in external trainings (OSHA, etc.) and internal proactive visits with HEMIC to ensure that all facilities comply with agency standards. Periodic inspections are conducted by an external party. Facility layouts may be furnished upon request. The following is a detail of each of BISAC's facilities used to serve the island of Hawai'i.

The Administrative and Fiscal offices of BISAC are located 3 miles away from the treatment facility and provide ample parking, which includes handicap parking. In addition to administrative duties being conducted at this site it is also a site that provides vocational training services and houses Hawaii Island Health and Wellness Center (HIHWC) which is a subsidiary of BISAC. HIHWC provides mental health services for the community and provides auxiliary services for BISAC clients who have additional needs. HIHWC has a waiting room, receptionist office, three therapy offices and an office for observation and training purposes (e.g. one-way window for observation). An additional multi-purpose classroom at the facility is used primarily for vocational training purposes. This room includes: 84-inch presentation station with Bose sound system; Xerox multi-function device; 8 computer training stations with web access; and guest wireless services. Current site is home to day treatment, intensive outpatient, mental health, vocational training and vocational tracks (e.g. retail store, food trailer, administrative, and maintenance/gardening).

The East Hawai'i Adult Substance Use Facilities and Hawaii Island Health and Wellness facility in Hilo, Hawaii is in a centralized business area, with easy access from surrounding areas. It is near the offices of referral sources and conveniently located near bus routes. The facility has a reception area, nine individual counselor offices, a reception office, a business center, two group rooms, a program support office, and a lunch/break area. There are two male and female restrooms centralized in building. All sites meet ADA requirements. All sites are IT equipped and available through remote access. All outpatient sites are within close proximity of bus routes. Transportation is provided for all clients in our Therapeutic Living Programs. Another HIHWC servicing site is in an adjacent building with one group room, two private therapy offices, and a reception area. The building has restrooms and is ADA accessible.

West Hawaii Outpatient Site located in Kona's Old Industrial area. This is a centralized site which is home to our dual diagnosis treatment facility. The site has 4 therapy offices, a reception area, and room which may be used for groups.

TLP and PPWC TLP (Therapeutic Living Program) and Clean and Sober Living Programs All current TLP, Clean and Sober Living Programs and PPWC TLP programs are in Hilo. BISAC presently operates three TLP homes at various locations around Hilo and one Clean and Sober homes at separate locations also in the Hilo area. All are near the East Hawaii Treatment Facility.

Kea'au Wellness Garden BISAC utilizes the garden area for cultural services for all clients. The garden is located on a two-acre parcel near the 16-179 Melekahiwa Street Administration office address in Kea'au.

III. Project Organization and Staffing

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.

BISAC has the appropriate structure within the organization's program and staffing patterns to reflect where each of the proposed programs fit into the overall organization and where each of the proposed, budgeted staff members provide services and lines of supervision. The organization has a volunteer Board of Directors (receiving no monetary compensation) consisting of concerned community members from East and North Hawai'i. Client staff ratio is 1:15.

The Chief Executive Officer (CEO) holds a Doctorate in Psychology and is a Hawai'i State Certified Substance Abuse Counselor. The CEO oversees all aspects of the agency including administration, fiscal and clinical operations. The Accountant reports to the Chief Executive Officer and provides monthly oversight of financial operations. The Accountant partners with the fiscal department who is responsible for the day to day operations. The Program Directors report directly to the CEO regarding day-to-day clinical program operations. Our Administration is made up of highly qualified individuals who provide the leadership and guidance to support staff and help create systems which improve the overall quality of care for our clients. BISAC's Medical Director, Dr. Stefan Harmeling provide medical oversight of BISAC's Therapeutic Living Programs.

BISAC is committed to maintaining the highest quality of staff for all the treatment services provided at every site island-wide. All staff meets or exceeds minimum qualifications, including necessary experience for staff assigned to this proposal. The proposed staff to client ratio is 1:15. The following are staffing for Adult Programs, Pregnant Women and Women with Dependent Children, and Integrated Addiction Case Coordination. *Full job descriptions may be furnished upon request.*

Program Administrators the Program Administrators are qualified individuals of the senior management staff who are responsible for the day to day operations at designated sites. These individuals are responsible for the Programs, Facilities Management, Planning and Resource Development under the supervision of the CEO for sites (e.g. OP, TLPs, Clean and Sober, etc.). The Program Administrator is responsible for staff coverage, provides relief for overflow of direct service, co-facilitates clinical meetings, and co-facilitates in-service training for staff.

Director of Substance Treatment Services the Director of Substance Treatment Services is a qualified individual of the senior management staff and is responsible for the operations of their designated island area. This individual is responsible for the Programs, Facilities Management, Planning and Resource Development under the supervision of the CEO for geographical sites (e.g. OP, TLPs, Clean and Sober, etc.). The Care Director of Substance Treatment Services is responsible for staff coverage, provides relief for overflow of direct service, conducting supervision and providing at least monthly in-service training for his staff. This administrative

position is also responsible for researching alternative funding sources, writing grants and proposals, the organizations monthly, quarterly and annual reporting system.

Clinical Coordinator/Quality Assurance Manager the Quality Assurance/Care Coordinator plans, coordinates, and implements the quality management and quality improvement programs for BISAC. Monitors and aids with quality assurance and compliance functions. Provides consultation and direction to ensure programs and services are implemented at the highest standards and patients receive the highest level of care. Ensures policies and procedures are monitored and updated to include regulatory changes. The Quality Assurance/Care Coordinator works closely with Safety Manager and Facilities Assistant on identifying hazardous workplace conditions and concerns, trains employees on CPI. The Quality Assurance/Care Coordinator provides case management services that assesses client's needs, develops, implements and reviews wellness plan and goals and work with community resources in meeting and achieving client's service needs. This position is the conduit between treatment and additional resources required to improve treatment outcomes and provide support for following treatment. This individual formulates case plans that promote moving towards self-sufficiency.

Assessment/Intake Counselor the Assessment/Intake Counselor is a qualified staff member who is responsible for facilitating all screenings, assessments and orientation of clients for proper placement into Outpatient and Therapeutic Living programs. This position reports directly to the Program Administrator for day to day operations and Clinical Coordinator for clinical support and supervision.

Substance Abuse Counselor II-IV the Substance Abuse Counselor will report directly to the Program Administrator for day to day programmatic operations and to Clinical Coordinator/Quality Assurance Manager for clinical supervision and development. The Substance Abuse Counselors are qualified staff member who is responsible for assisting and conducting in the collection of assessments, intakes and orientation of clients for proper admission into our programs. This staff member is also responsible for maintaining a case load.

Dual Diagnosis Therapist the Dual Diagnosis Therapist report directly to the CEO on day to day programmatic operations and to Clinical Coordinator/Quality Assurance Manager for clinical supervision and development. The therapist is a pre or post licensed therapist who is responsible for assisting and conducting in the collection of assessments, intakes and orientation, and providing individual therapy. This staff member is also responsible for maintaining a case load. This is unique to BISAC's West Hawaii staff and only provides specialty dual diagnosis care which is not the same as substance use services provided at our East Hawaii site.

Office Manager the Office Manager is a qualified staff member with the ability to provide clerical support to the Program Administrator and/or its designee. The Office Manager is responsible for the ordering of office supplies, centralized scheduling, responsible for the site's direct service staff hours and filling open and/or no-show appointments, maintaining and coordinating appointments for daily waitlist, when necessary managing the screening calls and/or messages from external resource agencies, and as necessary handling the overflow of form completion for the Intake Coordinator.

Land and Cultural Resource Manager the Land and Cultural Resource Manager is a qualified counselor who is responsible for facilitating and implementing therapeutic horticulture that supports land-based learning, social enterprise, and food self-sufficiency. These individual reports directly to the Chief Clinical Officer and Chief Executive Officer.

Vocational Coordinator the Vocational Coordinator plans, organizes, coordinates, manages and evaluates the Vocational Training Program and reports directly to the Chief Clinical Officer, who reports to the CEO. This position ensures a high quality of program management that operates effectively and efficiently according to clients' vocational needs.

Vocational Supervisors the Vocational Supervisors will provide on job vocational training to clients following the completion of programmatic requirements. These individuals currently work for the program and will provide specialized on the job training in the following areas: culinary, maintenance, retail, and office. These individuals are current BISAC staff working within these specialized fields.

Mental Health Counselors the Mental Health Counselors are members of the Hawaii Island Health and Wellness Center a subsidiary of BISAC that provides mental health support services for both current BISAC clients and/or community clients. MHC are qualified staff members who are responsible for assisting and conducting psychological assessments, intake and orientation of clients. They address co-occurring and underlying issues to addiction. These individuals provide services at the East Hawaii and Kea'au sites.

The existing organizational infrastructure provides a vast array of experience and expertise in operational, clinical, quality assurance and vocational services. The current Chief Executive Officer, Dr. Hannah Preston-Pita has over ten years of clinical experience, is a Licensed Clinical Psychologist and Certified Substance Abuse Counselor. BISAC's IT Administrator, Gary Schwiter has an extensive background in IT program and implementation with a specialty in electronic health records. BISAC's Quality Assurance Safety Manager, Kim Krell has many years' experience with licensing of facilities, quality assurance record review, community outreach and direct clinical services. The Facilities Manager has over 20 years of facilities management experience. The requirements of BISAC staff ensure the high quality of program delivery.

BISAC ensures and demonstrates that all applicants and employees have the knowledge, skills, and abilities to effectively deliver services and enhance the quality of care for our clients. A more thorough description of duties and qualifications may be furnished upon request.

The BISAC Board of Directors is the governing authority over the agency and oversees hiring the Chief Executive Officer. The Board of Directors ensures that the Chief Executive Officer has the education, experience and ability to carry out the agency's mission at the direction of the Board. The CEO provides supervision to all departments within the agency and oversees the organization. The CEO received her Doctorate in Clinical Psychology from an APA accredited institution and has led training programs recognized by ADAD for continuing education credits.

She also is a Licensed Clinical Psychologist and a certified substance abuse counselor in the State of Hawai'i. CEO is also currently working on her second doctorate in Education – Transformational Leadership.

Program Administrators provide clinical supervision and direction in conjunction with contracted employees: Medical Director; Registered Nurse. Advanced degree personnel and Hawai'i State Certified Substance Abuse Counselors (CSAC's) provide clinical direction for counselors, paraprofessionals, and volunteers/interns who are not certified but provide direct services under the supervision of personnel who are certified or who hold advanced degrees in behavioral health. The agency's CFO has extensive experience in accounting and oversees the fiscal and budgeting matters and reports directly to the Chief Executive Officer. His responsibilities include supervision of the fiscal staff and coordination of financial audits with our independent auditing firm. Fiscal staff attends training programs related to their specific duties and responsibilities.

The Big Island Substance Abuse Council has very liberal policies regarding staff development and training. BISAC considers staff training to be a priority and recognizes that there has been an increase in training opportunities on the Island of Hawai'i. BISAC provides access to E-training programs developed to meet the training needs of staff. Continual internal training is provided to all staff at least bi-monthly via all staff meetings, clinical meetings, and supervision.

Upon hire and at the time of their annual employee evaluation, each staff member completes a Staff Training. This plan is completed in coordination with the staff member and their immediate supervisor. The purpose of this plan is to assist the staff member by identifying and accomplishing their training and career goals through in-service trainings, continuing education and other opportunities inside and outside the agency.

BISAC allocates approximately one percent (1%) of our annual budget towards staff training and/or support materials (including technology) in order to empower BISAC's staff. In addition to off island training opportunities, credentialed professionals are invited to BISAC, to participate in specialized training topics. All clinical staff is oriented to clinical training. In addition, all attendees complete a Staff Training form following the training that indicates their personal critique of the training and their understanding of the material. These forms are submitted to the staff member's immediate supervisor for review to ensure that the intended purpose of the training was met and are considered when completing the semi-annual Staff Training Plan. Additional training opportunities are provided following weekly Clinical Meetings.

Clinical supervision is an important aspect of the Training and Quality Assurance Plan. These valuable sessions ensure that standards are well maintained and are required. Clinical supervision is available daily and is based on staff training plan & goals and the objectives set as well as developing an individual learning plan to improve staff competencies in the twelve core functions. Clinical supervision includes direct observation of staff providing services. Frequency is based on skill level and staff plan that is agreed upon between supervisor and supervisee. Each plan is subject to revision as mastery of skills is achieved and additional needs are requested by

the staff member or have been identified by the supervisor. All Clinical supervisors are provided with internal training on Clinical Training and Supervision. The purpose of this training is to implement training which is aligned with the agencies mission and accreditation standards, and overall provided supervisor training which follows the (12) twelve core functions.

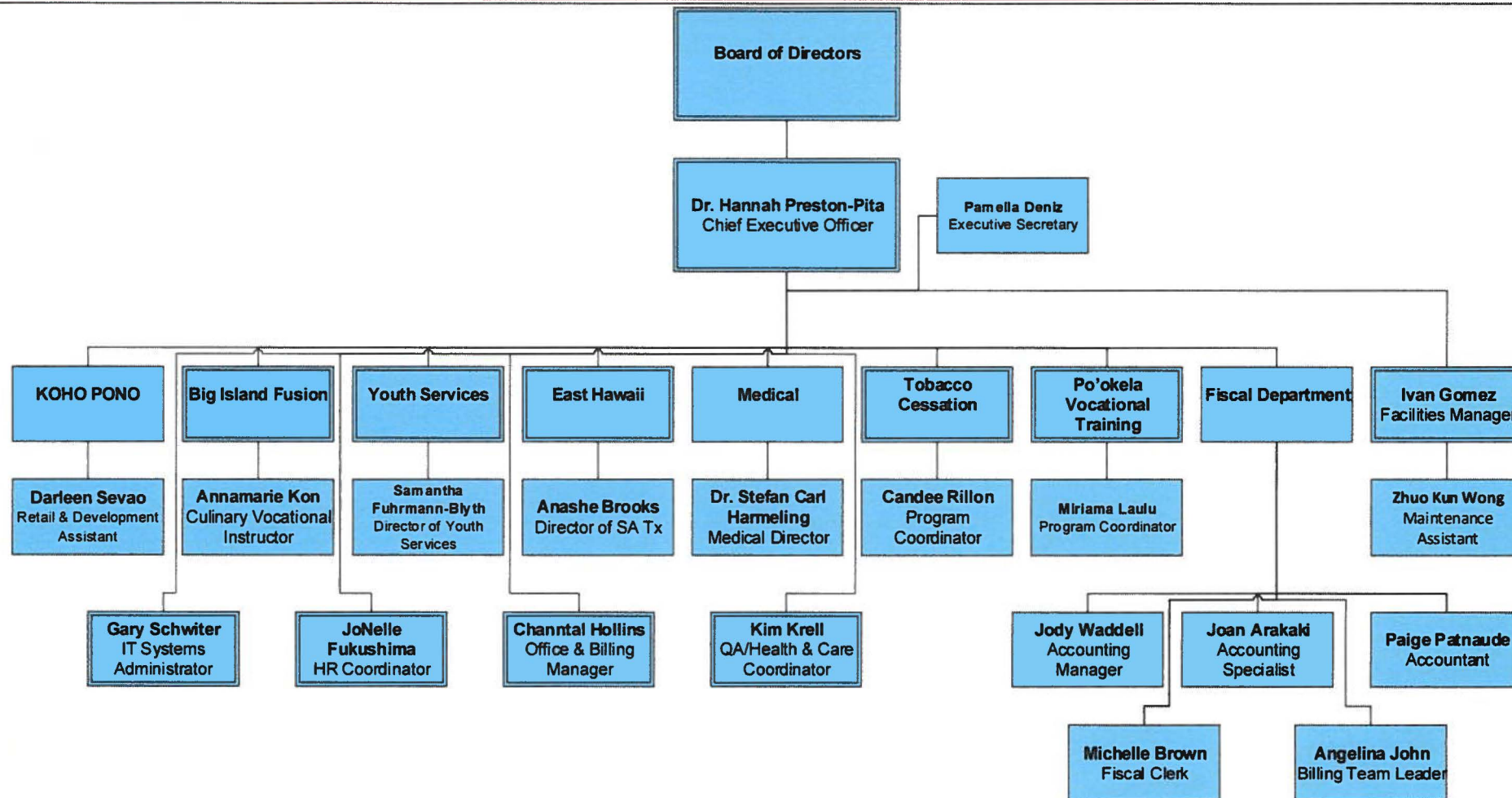
Supervision sessions not only focus on helping the staff member in improving skills and effectiveness, it ensures clinical standards. More specifically, the focus of the supervision session is on case management and the therapeutic process for the counselor. Supervision is a time when the supervisor and the staff member can discuss issues that may arise in the course of each client's treatment (i.e. client progress or lack of progress) including strategies and/or techniques the counselor can implement to best influence change. Direct supervision is provided in a variety of settings, including Clinical Team Case Review and/or individualized supervision. The Supervisory model demonstrates how to obtain an assessment, work with the counselor to complete a treatment plan, and/or observe a counseling or group therapy session. Supervision also includes the quality of the clinician's work through records or assessment reviews.

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. Agency-wide Organizational Chart is attached.

Big Island Substance Abuse Council

As of 01/03/2019



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.

Chief Executive Officer – \$92,000.00

IT Administrator - \$83,000.00

Program Director - \$55,000.00

GIA Funds will not be used to pay salaries.

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.

No current litigations.

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.

BISAC is licensed through the Hawaii Department of Health and is accredited through CARF.

3. Private Educational Institutions

The applicant shall specify whether the grant will be used to support or benefit a sectarian or non-sectarian private educational institution. Please see [Article X, Section 1, of the State Constitution](#) for the relevance of this question.

This does not apply

4. Future Sustainability Plan

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

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

BISAC will raise subsequent funds to complete the project via USDA, CDBG, private foundations and philanthropic sources. Once the project is completed it will be maintained via grants, fees, etc. BISAC will establish a maintenance endowment fund through organization fund, private donations, annual fundraisers, and retail sales via its Po`okela Vocational Training Program.

Kea'au
Administrative Office
16-179 Melekauiwa Street
Kea'au, Hawai'i 96749
P. (808) 969-9994
F. (808) 969-7570

1/11/2019
State Capitol. Rm 208
Honolulu, HI 96813
Attn: GIA

Hilo
Outpatient Treatment
297 Waianuenue Avenue
Hilo, Hawai'i 96720
P. (808) 935-4927
F. (808) 969-7570

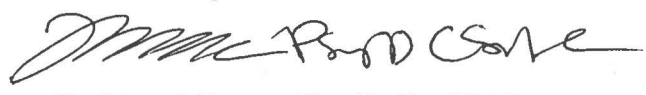
Re: **Grant In Aid application 2019**

Aloha,
Enclosed you will find the Grant In Aid application 2019 application.

Kealahou
Outpatient Treatment
74-5555 Kaiwi Street, F4
Kailua-Kona, HI 96740
P. (808) 322-3100
F. (808) 333-0548

If there are any questions and or concerns, please feel free to contact either myself or Pam at 969-9994 extension 827.

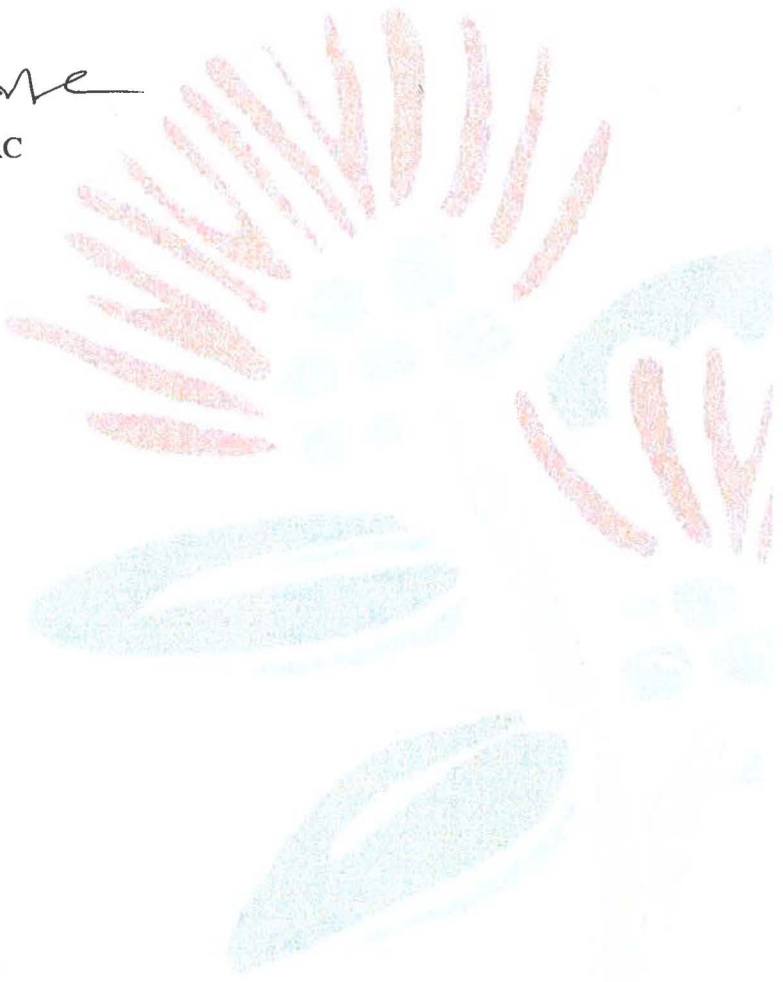
Me ke aloha pumehana,

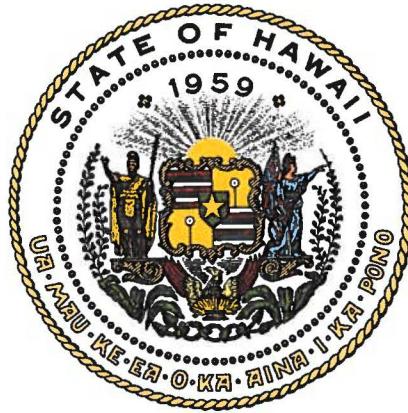


Dr. Hannah Preston-Pita, PsyD., CSAC
Chief Executive Officer

Board Members

- Pat Engelhard
President
- David Bishaw
Vice President
- Richard Henderson
Finance Chair
- Ricky Ryken
Secretary
- Catherine Kamau
- Danny Paleka
- Judith Steinman
- Kim Sasaki
- David De Luz Jr.
- Emeritus**
- William Walter
- Jane Webb





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

BIG ISLAND SUBSTANCE ABUSE COUNCIL

was incorporated under the laws of Hawaii on 05/27/1964 ; 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 10, 2019

Director of Commerce and Consumer Affairs