

## 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) Hawaii Compliance Express Certificate (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

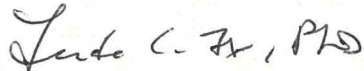
Linda C. Fox, Ph.D., Chief Program Officer  
PRINT NAME AND TITLE

01/17/2025  
DATE

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Linda C. Fox, Ph.D., Chief Program Officer  
PRINT NAME AND TITLE

01/17/2025  
DATE



STATE OF HAWAII  
STATE PROCUREMENT OFFICE

## CERTIFICATE OF VENDOR COMPLIANCE

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

**Vendor Name:** CHILD AND FAMILY SERVICE

**Issue Date:** 01/07/2025

**Status:** Compliant

Hawaii Tax#: 20270684-01  
New Hawaii Tax#: GE-1271666688-01  
FEIN/SSN#: XX-XXX3483  
UI#: XXXXXX0706  
DCCA FILE#: 3042

Status of Compliance for this Vendor on issue date:

Form	Department(s)	Status
A-6	Hawaii Department of Taxation	Compliant
8821	Internal Revenue Service	Compliant
COGS	Hawaii Department of Commerce & Consumer Affairs	Exempt
LIR27	Hawaii Department of Labor & Industrial Relations	Compliant

**Status Legend:**

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

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

The undersigned authorized representative of the applicant certifies the following:

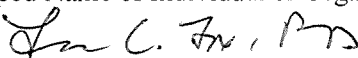
- 1) The applicant meets and will comply with all of the following standards for the award of grants pursuant to Section 42F-103, Hawai'i Revised Statutes:
  - a) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant is awarded;
  - b) Complies with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
  - c) Agrees not to use state funds for entertainment or lobbying activities; and
  - d) Allows the state agency to which funds for the grant were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and ensuring the proper expenditure of the grant.
- 2) If the applicant is an organization, the applicant meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
  - a) Is incorporated under the laws of the State; and
  - b) Has bylaws or policies that describe the manner in which the activities or services for which a grant is awarded shall be conducted or provided; and
- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
  - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
  - b) Has a governing board whose members have no material conflict of interest and serve without compensation.
- 4) The use of grant-in-aid funding complies with all provisions of the Constitution of the State of Hawaii (for example, pursuant to Article X, section 1, of the Constitution, the State cannot provide "... public funds ... for the support or benefit of any sectarian or nonsectarian private educational institution...").

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.

**Child and Family Service**

(Typed Name of Individual or Organization)



(Signature)

**Linda C. Fox, Ph.D.**

(Typed Name)

**01/17/2025**

(Date)

**Chief Program Officer**

(Title)

**PUBLIC PURPOSE  
PURSUANT TO SECTION 42F-102,  
HAWAII REVISED STATUTES**

The undersigned authorized representative of the applicant certifies the following:

- 1) The name of the requesting organization or individual:  
Child and Family Service  
91-1841 Ft. Weaver Rd., Ewa Beach 96706

**Project location: Child and Family Service  
91-1841 Ft. Weaver Rd.,  
Ewa Beach, HI 96706**

- 2) The public purpose for the grant:

The purpose of this grant is to ensure that Hawaii's 250,000 active-duty personnel, National Guard members, Reservists, veterans, and family members who want and need support are able to obtain access to high-quality short and medium-term outpatient mental health care that will help them to lead fulfilling and productive lives. This investment is focused on veterans who do not receive mental health care or are ineligible for care in the VHA system (e.g. due to discharge status, conditions that are not service connected), their family members, parents, siblings, spouses, children and others living in the veteran's household.

- 3) The services to be supported by the grant:

Services supported by this grant include:

- Emergency evaluation screens for at-risk participants
- Workshops for outreach and educational seminars, all offered free-of-charge to participants
- Individual, Family, Couples, and/or Groups treatment is available for a wide variety of mental health challenges including PTSD, depression, anxiety, adjustment issues, anger, grief and loss, family issues, transition challenges, relationship problems, substance abuse issues, and children's behavioral problems.
- Culturally specific activities that support military families' acculturation and assimilation into Hawai'i as well as culturally sensitive support for local military families, including veterans who have made Hawai'i their home and those members of the National Guard and Reserves.

- 4) The target group:

The target group we will serve with this grant are active-duty personnel, National Guard members, Reservists, veterans, and family members.

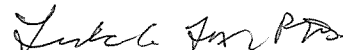
The cost of the grant and the budget

The budget requested in this proposal is \$372,000 to continue to support our military service members and families.

Further, the undersigned authorized representative certifies that this statement is true and correct to the best of the applicant's knowledge.

Child and Family Service

(Typed Name of Individual or Organization)



(Signature)

1/17/2025

(Date)

Linda C. Fox, Ph.D.

(Typed Name)

Chief Program Officer

(Title)



**THE THIRTIETH LEGISLATURE**  
**APPLICATION FOR GRANTS**  
**CHAPTER 42F, HAWAII REVISED STATUTES**

Type of Grant Request:



Operating



Capital

Legal Name of Requesting Organization or Individual: Db:

Child and Family Service

Amount of State Funds Requested: \$ 372,000

Brief Description of Request (Please attach word document to back of page if extra space is needed):

Hawaii is experiencing a mental health crisis, with mental health services at an all time all-time high and no immediate relief in sight. Hawaii residents are having challenges with securing mental health services within their network of care, resulting in higher out-of-pocket expenses. According to the National Alliance on Mental Illness, 187,000 adults in Hawaii have a mental health condition with 41,000 of them having a serious mental illness. 10,000 children ages 12-17 report feelings of depression with 68.9% of them not receiving any care in the last year. Adults in Hawaii are also struggling to get the help they need. Over a half million people in Hawaii live in a community that does not have enough mental health professionals.

CONTINUED ON NEXT PAGE

Amount of Other Funds Available:

State: \$ 0

Federal: \$ 0

County: \$ 0

Private/Other: \$ 0

Total amount of State Grants Received in the Past 5 Fiscal Years:

\$ 0

Unrestricted Assets:

\$ 0

New Service (Presently Does Not Exist): ☒ Existing Service (Presently in Operation): ☐

Type of Business Entity:



501(C)(3) Non Profit Corporation



Other Non Profit



Other

Mailing Address:

91-1841 Fort Weaver Road

City:

Ewa Beach

State:

HI

Zip:

96706

Contact Person for Matters Involving this Application

Name:

Linda C. Fox, Ph.D.

Title:

Chief Program Officer

Email:

cfscontracts@cfs-hawaii.org

Phone:

(808)748-3146



Authorized Signature

Linda C. Fox, Ph.D., Chief Program Officer

Name and Title

01/17/2025

Date Signed

## **GIA Cover Page:**

### **Brief Description of Request: ...continued...**

Mental health problems are also attributed to a variety of psycho-social issues. High school students are two times more likely to drop out than their peers and 7 of 10 youth in the juvenile system have a mental health condition. One in four people with serious mental illness have been arrested, and two in five adults in jail or prison have a history of mental illness. When left untreated, mental health problems tax our legal, educational, and social systems, and increase costs to the state and its counties. According to a report from Tufts Medical Center and One Mind at Work, depression alone is estimated to account for \$44 billion in losses to workplace productivity.

In an effort to expand services for veterans and their families, the Ohana Resiliency Center (ORC), will provide long-and short-term behavioral health services. The goal of this request is to expand mental health services for veterans and their family members with the intent to reduce the socio-economic problems that can arise when treatment is unavailable. The start-up costs for opening and operating a new clinic are high. Support from this GIA will offset staffing, occupancy, and infrastructure expenses and allow the clinic to focus on providing much-needed behavioral health services.

It is important to note that veterans and their families are a community concern and not just a military problem. Veterans are everywhere in our community. He or she can be your neighbor, your doctor, your babysitter, your family member, your child's teacher, a refuse collector, a firefighter, a police officer, and more. For their service and sacrifice for Hawaii and our country, veterans and their families deserve to be recognized, and offering quality behavioral health support targeting their specific needs and experiences is one way to thank them. We ask for your support to stand up this new clinic so that together, we can be a part of the solution in combating Hawaii's mental health crisis.

## Application for Grants

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

### **I. Certification – Please attach immediately after cover page**

#### **1. Hawaii Compliance Express Certificate (If the Applicant is an Organization)**

If the applicant is an organization, the applicant shall submit one (1) copy of a Hawaii Compliance Express Certificate from the Comptroller of the Department of Accounting and General Services that is dated no earlier than December 1, 2024.

#### **2. Declaration Statement**

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

#### **3. Public Purpose**

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



## **II. Background and Summary**

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

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

Child and Family Service (CFS) is a private nonprofit 501(c)(3) organization that has served Hawaii's families since 1899 and has been dedicated to serving our state through the lens of HOPE: humility, ownership, perseverance, and engagement. Our 400 employees and 100 volunteers help to achieve CFS's mission of "strengthening families and fostering the healthy development of children".

For over 125 years, CFS has remained committed to providing high-quality and caring services to Hawaii residents in need with over 50 statewide programs and services. CFS utilizes a trauma-informed care model to provide: domestic violence interventions, domestic abuse shelters and transitional housing for DV survivors as well as services for youth, which include programming to strengthen protective factors such as substance abuse treatment and relapse prevention services, educational and life skills support, violence prevention, and cultural programs. CFS also works with children and their families for school readiness and prevention; treatment of child abuse and neglect; and family, school and community-based counseling services.

To make support services accessible for all age groups, CFS' programs and services are culturally sensitive, relevant, cost-effective, and timely. Moreover, our services are designed around a goal-directed, strengths-based, responsive, and flexible outcomes model that incorporates evidence-based Best Practices interventions.

In Fiscal Year 2024, CFS provided direct family-centered, culturally sensitive services to 15,630 participants and their family members across the State. Participants included at-risk youth and adults with identified physical, cognitive and/or mental health barriers and experiencing domestic violence. CFS touched the lives of 116,000 individuals and 849 families through hotline calls, crisis responses, educational presentations, the provision of food/clothing resources, and program services. In addition, CFS was actively involved in the Maui Wildfires recovery efforts; providing a multitude of services to displaced Maui residents, including the resident veterans and the National Guardsmen who were activated to support the crisis.

CFS hires staff with lived experience, all are either veterans themselves or spouses of military veterans. Throughout the years, CFS has supported veterans through WW I and WW II by offering marriage and family counseling and helping displaced orphans after Pearl Harbor and has continued to support military families post-9/11. Currently, CFS offers services to over 1,000 local veterans and their families per year, with partner organization, such as the American Red Cross, Disabled American Veterans, Hawaii National Guard, and the Maui Veterans Administration Community Based Outpatient Clinic.

CFS currently operates the Ohana Resiliency Center (ORC) in Ewa Beach, which is expanding to include mental health and behavioral health services through the Hawaii Family Counseling Services and the Military & Veteran Family Services programs, which is comprised of a cache of services seeking to improve the quality of life for veterans, active- duty members, and their families through a robust case management program that assists with resources and referrals to needed services. However, due to contract funder restrictions, participants who require longer term care often need to be referred out to other agencies. The ORC Military & Veteran Family Services program will meet this care need by providing long-and-short-term behavioral health services.

Through ORC's long-term care services, CFS is able to seamlessly continue providing support to these participants while serving as a community referral source for participants needing specialized care. ORC is also able to support those who may not be viable for other existing CFS services, including those with higher acuity, substance use disorders, and chronic mental health diagnoses.

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

The goal of this request is to expand mental health services for veterans and their family members with the intent to offer a continuum of care and reduce the socio-economic problems that can arise when treatment is unavailable. The start-up costs for opening and operating a new clinic are high. Support from this GIA will offset these start-up costs and allow the clinic to focus on providing much-needed behavioral health services.

Hawaii is experiencing a mental health crisis, with a need for mental health services at an all-time high and no immediate relief in sight. According to the National Alliance on Mental Illness, 187,000 adults in Hawaii have a mental health condition with 41,000 of them having a serious mental illness. This is a state-wide issue and affects all groups and communities. This program aims to assist one of Hawaii's largest groups: active-duty personnel, National Guard members, Reservists, veterans, and their families. Supporting our military and veteran community with behavioral health services impacts their well-being and the communities of Hawaii. Mental health has a trickle-down effect; when one person experiences hardships, it affects the people they live with, work with, and socialize with.

Providers at the military treatment facilities (MTFs) in Hawai'i are overwhelmed and the need for behavioral health services is great. MTFs prioritize servicemember care and refer spouses and children in record numbers to network providers. CFS is one of three preferred organizations for referrals and as a Care in the Community Provider, we receive referrals from the Veterans Administration (VA) for the veterans they are unable to provide behavioral health care services at the VA's statewide clinics.

CFS's Military & Veteran Family Services provided within ORC is the welcoming center for providing quality behavioral health services for Hawaii's veteran community. Veterans are eligible for care regardless of length of service, discharge status or combat experience. These services also include both the veteran's entire family, with family members being identified as any person the veteran says is family, and children ages 5 and up.

We are seeking to bolster this program to provide care and services that will complement existing services. The program provides short to long-term out-patient mental health care needs and are focused on veterans who do not receive mental health care in the VHA system, are ineligible for care in the VHA system (e.g. due to discharge status, conditions that are not service-connected), or family members, parents, siblings, spouses, children and others living in the veteran's household.

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

Hawaii is facing a significant mental health crisis, with provider shortages leaving over 500,000 residents in communities with inadequate mental health services. Veterans and military families are disproportionately affected, often facing compounded challenges like PTSD, substance use, and suicide risk.

Hawaii is home to more than 250,000 military personnel and their families, the highest proportion of any state in the US. Every branch of service is represented within the state and includes active-duty service members, military dependents, veterans, National Guardsmen, Reservists, and Department of Defense employees (many who have served in the Armed Forces).

According to the Defense Manpower Data Center (DMDC), their 2022 report shows 44,390 active duty, 45,587 dependents (spouses and children), 107,000 veterans, and 18,051 retirees reside in Hawaii. There are over 5,000 local men and women serving as traditional reserve forces typically one weekend each month with two weeks of annual training. These men and women and their families live in Hawaii, and many have full-time jobs in other industries within the state. For CFS to expand behavioral health services for veterans and their family members is a substantial way of recognizing them for their service.

The increase in potential conflicts with China and North Korea position Hawaii to have an even greater role in the nation's defense, including the deployment of National Guard resources. Deployments of local residents on national missions result in numerous hardships for the soldiers and airmen deployed and their family members. These "citizen soldiers" and their families will need behavioral health services throughout the deployment cycle and more importantly, upon their return.

The opening of ORC positions CFS to support Hawaii's growing and anticipated needs of our veteran population. The Military Treatment Facilities (MTFs) and Veterans Administration (VA) do not have the bandwidth to support these high numbers of military personnel and their families, so they depend on civilian providers to stack hands to improve access to medical and behavioral health care through direct referrals for services. CFS and ORC are committed to supporting our military community in Hawaii and fill a service void.

This Grant-In-Aid request will support CFS's efforts to provide veteran and family member counseling services by contributing funding towards start-up costs which include staffing, occupancy and infrastructure expenses.

By reducing barriers like cost and transportation, ORC directly supports Hawaii's strategic goals of improving behavioral health outcomes and reducing strain on state-funded emergency services.

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

CFS's Military & Veteran Family Services provided within ORC is the welcoming center for providing quality behavioral health services for Hawaii's veteran community. Veterans are eligible for care regardless of length of service, discharge status or combat experience. These services also include both the veteran's entire family, with family members being identified as any person the veteran says is family, and children ages 5 and up. Funds from this GIA will supplement the revenue generated through insurance-based billing for therapeutic services provided by ORC therapists, enabling expanded support for Hawaii's 250,000 active-duty personnel, National Guard members, Reservists, veterans, and their families. This population spans all six major Hawaiian islands, with a significant presence in rural and underserved areas where mental health services are scarce.

ORC provides a full range of services and activities from prevention and early intervention to emergency evaluation and evidence-based treatments, all designed to save lives. The continuum of care offered at the centers includes immediate access for participants who are in crisis, suicidal, and in need of critical attention. To ensure the veteran community is offered the full range of counseling, suicide prevention and support services, ORC aims to serve as the community hub of activity centered around mental well-being through collaboration, communication, and coordination.

Core essential services include:

- Screens for at-risk participants by providing emergency evaluations for participants who are suicidal and in need of immediate attention to save a life.
- Individual, Family, Couples, and/or Groups treatment is available for a wide variety of mental health

challenges including PTSD, depression, anxiety, adjustment issues, anger, grief and loss, family issues, transition challenges, relationship problems, substance abuse issues, and children's behavioral problems.

- Workshops, and educational seminars, are offered free-of-charge to participants
- Culturally specific activities that support military families' acculturation and assimilation into Hawaii as well as culturally sensitive support for local military families, including veterans who have made Hawaii their home and those members of the National Guard and Reserves.

**5. Describe the geographic coverage.**

CFS operates over 50 program services on the 6 major Hawaiian Islands. ORC provides behavioral health and case management services via telehealth, and soon in-person, on the island of Oahu and on the neighbor islands. Our case management and outreach staff travel regularly to the neighbor islands to promote CFS's programs while assessing for need and ensuring veterans access to the high-quality services ORC provides.

### **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;**

There is a nationwide mental health crisis occurring and Hawaii is not immune to the impact. Mental health facilities and providers are overwhelmed with the demand for services. Clients are waiting months to be seen, and many times even longer for specialized behavioral health services. According to USA Today & World Report, the harms caused by this crisis result in costing the US economy \$2.8 billion each year, due to a multitude of factors including lost productivity due to missed work time, increases in domestic violence child abuse, substance use and abuse, and other crimes that tax the legal and social services systems. It is estimated that expanding the availability of mental health services would reduce mental illness costs by 3% and add more than 1% to the nation's economy in terms of spending.

CFS wants to be part of the solution by providing quality mental health services to veterans and their family members, with the goal of increasing availability for civilians at clinics that serve both military and civilian clients and providing care specific to the needs of veterans and their family members at ORC.

CFS has been providing brief short-term counseling for military families and veterans for the past five years with positive gains. In reviewing program enrollment at the end of 2024, CVN at CFS had an enrollment of 41% families and couples and 18% children and adolescents. Veterans, adult family members, and group members made up the remaining 41%. This varies from the network average, with our Cohen Clinic serving a much higher percentage of families and couples (network average 28%) and children and adolescents (network average 12%). We anticipate ORC will see similar numbers.

In 2024 we scheduled 8,024 sessions of which 28% were for children, 16% family members, 10% veterans and 31% active-duty service members. Note the active-duty service members include AGR National Guard and Reserves. Of the 8,024 scheduled sessions, 18% were child/youth appointments, 10% family appointments and 14% couples. The balance consisted of individual service members, veterans, and their adult family members.

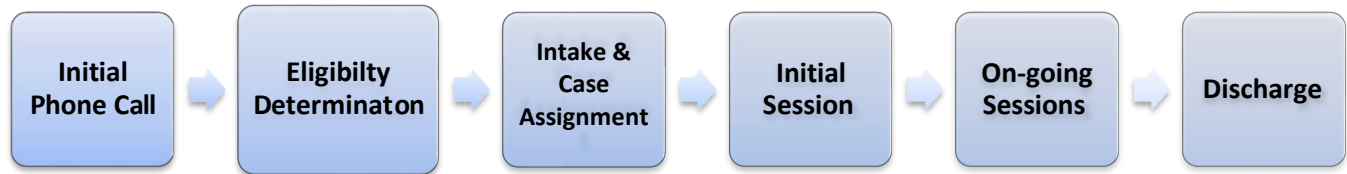
During these sessions and consultations, program staff displayed positive results. For PTSD, 74% of those clients

with this diagnosis report meaningful change and 44% with remission using the PCL-5 assessment. Based on the PHQ-9, 45% of clients with a depression diagnosis experienced meaningful change and 55% with remission. Clients diagnosed with anxiety showed a 55% meaningful change and 60% with remission based on the GAD7. Network averages for clinically significant changes: PCL-5, 77% with CSC, 48% remission; PHQ-9 47% CSC and 54% with remission; and GAD-7 with CSC of 45% and with remission 55%. With longer term counseling availability CFS expects to see even higher gains, having the ability to serve military members and their families longer term.

The utilization of the experience, knowledge, and rapport built with CFS' other programs are utilized to shape an effective work plan and will help to transform Military and Veteran Family Services into an insurance-based billing program that will benefit the communities of Hawaii.

The flowchart and timeline below details the service provision process provided to participants and families by the Military & Veteran Family Services of the 'Ohana Resiliency Center at CFS.

Service Delivery Flowchart



Service Activities	Specific Tasks	Title of Responsible Staff	Timeline
Initial Call	1. Participants who are interested in the 'Ohana Resiliency Center services will contact the program via phone. The call will be answered by the Billing Coordinator.	Billing Coordinator	Upon initial call.
	2. Billing Coordinator provides basic program information and obtains the following items: <ul style="list-style-type: none"> <li>a. Participant's insurance card information or self-payment information.</li> <li>b. Demographic information including call back number and email address.</li> </ul> 3. Upon receipt of the participant's email address, the Billing Coordinator will provide the Initial Intake Questionnaire via the Client Portal in Simple Practice.           4. The Billing Coordinator documents the initial phone call and encounter via the Administrative Note in Simple Practice.	Billing Coordinator          Billing Coordinator	Upon receipt of the participant's email address.



<b>Eligibility Determination</b>	<ol style="list-style-type: none"> <li>1. The Billing Coordinator to obtain the participant's insurance eligibility, limitations, and co-payment amounts.</li> <li>2. The Clinic Supervisor will review the appropriateness of the participant in the program per insurance eligibility, initial call information, and ORC - Initial Intake Questionnaire.</li> <li>3. The Clinic Supervisor will work with the Billing Coordinator to assign the case to an available Clinician.</li> </ol>	<p>Billing Coordinator</p> <p>Clinical Supervisor</p> <p>Clinic Supervisor</p>	<p>Within 3 business days or upon the participant's completion of the Initial Intake Questionnaire</p>
<b>Intake</b>	<ol style="list-style-type: none"> <li>1. Once eligibility is approved and prior to the initial session, the Billing Coordinator will send the participant all consent forms via the Client Portal in Simple Practice. Consent forms include:               <ol style="list-style-type: none"> <li>a. ORC - Notice of Privacy Practice (CFS)</li> <li>b. ORC - Consent for Telehealth Consultation (SP)</li> <li>c. ORC - Informed Consent for Psychotherapy (SP)</li> <li>d. ORC - Practice Policies (SP)</li> <li>e. ORC - In Case of Emergency (SP)</li> <li>f. ORC - Credit Card Authorization (SP)</li> <li>g. ORC - Payment Acknowledgement Form (CFS)</li> </ol> </li> <li>2. Set up billing and credit card information</li> <li>3. Clinic Supervisor, with the support of the Billing Coordinator, will assign a Clinician to the case.</li> </ol>	<p>Billing Coordinator</p> <p>Billing Coordinator Clinical Supervisor</p>	<p>Within 24 hours of eligibility determination and acceptance into program.</p>
<b>Upon Case Assignment</b>	<ol style="list-style-type: none"> <li>1. Case assignment shall be informed via email.</li> </ol>	<p>Clinical Supervisor</p>	<p>Upon case assignment</p>

	<ol style="list-style-type: none"> <li>Upon case assignment email, designated Clinician shall contact the participant within 48 hours to schedule initial session. <ol style="list-style-type: none"> <li>If no contact can be established within 14 days, assigned Clinician shall inform the Clinic Supervisor and Billing Coordinator for case to be dismissed.</li> </ol> </li> <li>Review case and communicate any missing documents to the Billing Coordinator.</li> </ol>	Assigned Clinician	and prior to initial session.
<b>Initial session</b>	<ol style="list-style-type: none"> <li>During the initial session, the Clinician shall verify and inquire of any changes to their demographic, credit card payment, and/or insurance coverage.</li> <li>The Clinician shall complete the ORC - Biopsychosocial Assessment, Mental Status Exam, Diagnosis and ORC - Treatment Plan.</li> <li>The Clinician will also complete and request for consent on the following forms, as applicable: <ol style="list-style-type: none"> <li>Authorization to Use and Disclose PHI (CFS)</li> </ol> </li> </ol>	Assigned Clinician	During the initial session.
<b>On-going Sessions</b>	<ol style="list-style-type: none"> <li>The assigned Clinician shall schedule all participant sessions by utilizing the calendar tool in Simple Practice.</li> <li>The assigned Clinician shall complete all documentation using the ORC - Progress Note in Simple Practice after each encounter.</li> <li>All active participant charts shall be reviewed for appropriateness of treatment and progress on a quarterly basis.</li> </ol>	Assigned Clinician  Assigned Clinician  Clinic Supervisor	Within 24 hours of session.  Quarterly.
<b>Discharge</b>	<ol style="list-style-type: none"> <li>Please refer to the identified discharge criteria outlined in program specific procedure ORC-07 Discharge.</li> <li>On the last day of session for the episode of care, the assigned Clinician shall complete an ORC- Progress Note for the encounter as well as the ORC - Discharge Summary in Simple Practice.</li> <li>The assigned Clinician shall email the Billing Coordinator and the Clinic Supervisor to inform of participant's discharge from the program.</li> <li>The Billing Coordinator shall ensure that all balance for the participant has been paid before the end of the month.</li> </ol>	Assigned  Clinician  Assigned Clinician  Billing Coordinator	Discharge summary and progress note shall be completed within 24 hours of last session.

5. Once all outstanding payments have been received, all clinical event documentation has been complete and insurance claims have been received, the Billing Coordinator will change the participant's file to inactive status in Simple Practice.

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

We are targeting opening ORC on June 1, 2025. Although we are optimistic we can begin services earlier, the driving force is the time it takes for the insurance companies to designate ORC as an in-network provider. We have submitted applications to Tri-West and Tri-Care and are in the process of submitting our application to HMSA. This process can take 90 to 120 days. Our plan is to submit in-network provider applications to most insurers in the state, including MedQuest and Medicare programs.

Happening concurrently is the hiring of clinicians and completing their credentialing. This too takes 90-120 days to complete. Fortunately, our Clinical Supervisor, Janet Covington, is credentialed with many insurance panels and is ready to see clients as soon as the in-network designation is approved.

Upon award, the Clinical Supervisor and Director of Social Enterprises will recruit and train Licensed Clinicians and recruit a billing coordinator within 90 days from the start of the contract. We have interested candidates who are prepared to onboard and who are also credentialed with the major insurance companies. These are experienced clinicians who we anticipate will require minimal training.

Policies and Procedures currently exist within other CFS programs that apply to ORC. These can be used as a template for this program; we are in the process of developing the P&Ps. CFS has been operating since 1899 and manages over 50 programs throughout the 6 major Hawaii Islands. We have the experience and expertise to successfully operate ORC.

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

CFS will produce monthly billing reports which show the total amount billed for clinical services and the amount reimbursed by insurance. CFS measures clinical outcomes and the effectiveness of treatment through our Measurement Based Care (MBC) program where clients are given specific behavioral health assessments to measure efficacy of treatment.

All programs are closely monitored and actively involved in the CFS Performance and Quality Improvement (PQI) process. A program specific PQI process is currently used for each program in CFS. The plan includes a comprehensive methodology, incorporating case reviews, outcome measurements, stakeholder feedback, participant feedback, and review of clinical related issues as needed with our Clinic Supervisor. Our Compliance Officer works closely with the program on an on-going basis to ensure program procedures and operations meet or exceed the requirements set forth by the State. All data is collected, analyzed, and used for future planning for the program with the Clinic Supervisor, Director of Social Enterprises, Chief Program Officer, and other key stakeholders.

**PQI Quarterly Program and Department Meetings:** Each quarter, programs meet as a team to review their Annual Program Plan goals, quality of service/operations, policies and procedure adherence, program participant

trends analysis, performance measures and indicators, areas for improvement, strengths, and other themes that arise pertaining to the PQI process. The goals of these team meetings are to evaluate the quality of services being provided based on predefined outcomes and to generate or review ongoing plans regarding quality improvements. To meet these goals, the programs analyze several variables in which data is gathered prior to the meeting. These variables include: Measurement of Community Satisfaction based on Participant Feedback, Referral Source Feedback, Feedback to Stakeholders, Program Participant performance measures and indicators, Program Participant Case Record Reviews, Program Participant Information, Training Reports, Participant Grievances, Incident Reports and Sentinel Events, and External Monitoring.

CFS departments, including Information Technology, Human Resources, Facilities, and Fiscal Department also complete a similar process quarterly. The purpose of these meetings is to improve processes that support programs. In these department meetings, department staff review the performance of the department based on goals for their specific department. This information is used for future planning and improvement of the department as well as reported to the Performance and Training Department for inclusion in the Quarterly PQI report reviewed by the PQI Committee.

**Internal Quality Monitoring:** Upon contract award a Contract Review and Implementation will be conducted to include all contract requirements. Program staff and department staff including staff from Grants, Performance and Training, Human Resources and Fiscal participate to ensure contract compliance. To maintain contract compliance and ensure program success, programs receive ongoing internal quality monitoring through a Program Review Summary process in which a team made up of the Chief Compliance Officer, Grants Director, Quality Assurance Specialist, and other Performance and Training Department staff conduct a program review to assess compliance with contract requirements and accreditation. The process includes a comprehensive methodology incorporating case reviews, performance measures, stakeholder feedback, participant feedback, and review of any clinical related documentation by the Clinic Supervisor. The Compliance Officer works closely with the program on an ongoing basis to ensure procedures and operations meet or exceed the requirements set forth by the contract. This process is designed to provide support and guidance to program management toward improved accreditation readiness and use of Best Practices. To complete the summary, the team reviews the program procedures, program participant charts, current staffing trends and challenges, trainings, supervision, performance measures, other documentation as needed, and interviews the program staff. Once the program review summary is completed, the Compliance Officer uses the information to write a narrative of findings, which includes strengths, areas in need of improvement, recommendations, and timelines. A meeting with the Clinic Supervisor is scheduled to discuss strengths and areas for improvement. A corrective action plan is generated which details deficient areas, tasks to be completed, and timelines to correct the deficiencies. The completed summary, narrative of findings, and a corrective action plan will be sent to the Clinic Supervisor of the specific program for review. The Compliance Officer will provide follow up on the program's corrective action plan to monitor task completion by the designated timeline. The Compliance Officer will complete a program review no more than quarterly and no less than every six months.

To further strengthen this process, the Compliance Officer, Grants Director and Director of Social Enterprises will implement program specific meetings. The purpose of these meetings is to promote the program's quality of service delivery by; providing timely follow up on projects assigned; reviewing compliance to contract and accreditation requirements; implementing revised CFS Administrative Policies and Procedures; identifying service gaps; and the efficiency of the use of the electronic record system. This process will further support the program and provide learning opportunities to provide the best services. These meetings will be held according to the needs and compliance status of the program, which can range from once a month, quarterly to every six months.

The Compliance Officer will also participate in the development, implementation and monitoring of the program's Quality Assurance and Improvement Plan (QAIP). This plan identifies areas of improvement utilizing the following

information: case record findings from peer reviews; chart review findings; productivity reports; external monitoring review reports; internal monitoring review reports; participant feedback surveys; outcome reports; and staff feedback.

The Director of Social Enterprises will review the QAIP quarterly with their staff, but also address any concerns during the monthly supervision and consultation meetings. The Compliance Officer provides technical assistance to the program to monitor completion of the QAIP.

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 GAD7, PHQ9, and PCL5 measure anxiety, depression, and symptoms of PTSD. We would expect those diagnosed with these problems would see a decrease in the severity of symptoms in a pre- and post-treatment evaluation. The Columbia Impairment Scale (CIS) is a measurement used for parents and children to complete to determine levels of distress. We would expect to see a decrease in the severity of symptoms reported when comparing pre- and post-treatment measures.

## 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 2026.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
68,154.00	101,282.00	101,282.00	101,282.00	372,000.00

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2026.
  - Bob Woodruff Foundation – Unsecured
  - SSG Gordon Parker Fox Suicide Prevention Grant-VA - Unsecured
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.

N/A

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 2026 for program funding.

N/A

6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2024.

\$17,372,218 - Estimated

## 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.

CFS is a non-profit 501(c)3 organization that has been operating in Hawaii since 1899. We have been champions for Hawaii's families for 125 years and is a Hawaii-born, impact-driven, community-based organization. We have a wealth of experience working with the Hawaii community, which includes veterans, service members and their families. We have since 2020 and have expanded services exponentially since opening. The clinic opened in the middle of the pandemic and we found the need was great; so great that it became evident the community needed a second clinic that would focus on supplementing CVN's target-treatment model of care with longer-term care.

The ORC leadership are experienced clinicians, managers, and administrators who have a wealth of knowledge working with the veteran community. We are who we serve and there's no one more qualified to provide services to this special group of people than those who have walked in their shoes.

#### Listing of Verifiable Experience

Service	Contact Information	Dates of Service
Bob Woodruff Foundation – Funding to support the Cohen Clinic by providing evidence-based mental health care to 229 children and providing 1,569 sessions.	Emily Krause – Senior Program Officer P: (646) 770-4057 E: emily.krause@bobwoodrufffoundation.org Bob Woodruff Foundation 1350 Broadway, Suite 925 New York, NY 10018	05/19/23 – 03/31/24
Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program - Enables VA to provide resources toward community-based suicide prevention efforts to meet the needs of Veterans and their families through outreach, suicide prevention services, and connection to VA and community resources.	Melissa J. Hall, LCSW – SSG Fox SPGP Grants Manager P: (315) 807-6923 E: Melissa.Hall5@va.gov Office of Mental Health and Suicide Prevention (11MHSP)	09/18/2022 - 09/30/2025

Cohen Veterans Network – Provide behavioral health, substance abuse, and psychosocial services to military veterans and their families.	Rebecca Moynihan - Vice President, Operations P: (203) 569-0288 E:Rebecca.Moynihan@CohenVeteransNetwork.org Cohen Veterans Network, Inc. 72 Cummings Point Road Stamford, Connecticut 06902	01/17/2020 – 05/31/2026
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## 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.

CFS's main campus is located at 91-1841 Fort Weaver Road in the heart of Ewa Beach. The welcoming environment houses administrative office as well as a multitude of programs for individuals and families. This location provides spaces shared by programs which includes a reception area, kitchen area, open and private meeting spaces for staff meetings and participant engagement. The facility is ADA compliant with two ADA parking spaces, a ramped entrance, ADA compliant bathrooms, and an elevator.

CFS has offices on Maui, Kauai and in Hilo and Kona on the Big Island of Hawaii. We also have an active footprint on the island of Molokai.

**Secure Telehealth Services:** CFS utilizes ZOOM Enterprise for a HIPAA compliant telehealth communication platform to conduct services for sessions with participants. CFS's network has the infrastructure needed to support staff with a secure network with cybersecurity protection. CFS has a signed BAA agreement from Zoom for HIPAA compliance video conferencing.

Our agency computers are protected and secure when connected to the internet and sufficiently equipped to support clear audio and video connection. Zoom is capable of full-screen bi-directional and CFS staffs are provided with Web camera capable of High Definition (HD) quality. Zoom meeting sessions are encrypted using 256-bit Advance Encryption Standard (AES). Staff are trained on the technology and platform as needed by the supervisor or staff from the Information Technology Department upon hire.

CFS has committed significant resources toward the development and maintenance of its information systems and communications network. Staff members are mostly on laptop computers. The CFS Information Technology Department provides appropriate network security and authorization to CFS employees for access to data. Data on the CFS network and the Microsoft Office 365 cloud-based data is backed-up daily. All staff are assigned their own personal login credentials (username and password) for the CFS network, and all access requires multi-factor authentication (PIN code) such as use of cell phone. CFS provides access to SharePoint Online shared folders where electronic documentation is confidentially stored. Staff access this information by utilizing CFS issued computers. Prior to accessing program information, all staff are required to sign an acknowledgement form for appropriate computer usage. Staff who are not familiar with using a computer or applications used within their program will be provided training by their manager. In addition to accessing program documents, staff are able to send and receive secured and encrypted email and schedule meetings utilizing Microsoft Office 365 Outlook. Having the ability to provide electronic information systems access to all staff allows for a higher level of collaboration and efficiency in the program.

**Electronic Health Record System:** CFS utilizes an electronic health record system through [www.bonterra.com](http://www.bonterra.com) (formerly Social Solutions), called Efforts to Outcomes (ETO). This impact data management system provides CFS with a high-quality data management system that helps to measure the incremental progress of our program participants, understand the effectiveness of our programs, and demonstrate impact to funders and key stakeholders both quickly and easily. Participant referral information received is entered into the CFS electronic health record system ETO for case management. ETO allows staff to input participant demographics, obtain electronically signed consent forms, conduct assessments, monitor participant goals and outcomes, to name a few. Outcomes achievement is then evaluated by management and program staff quarterly as part of the Performance and Quality Improvement process, and commitment to service excellence in our community, and our promise to funders. Information can be shared across programs, when necessary, to provide comprehensive high-quality service.

## **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.

This proposal requests support to start up CFS's Military & Veteran Family Services, which is just one portion of CFS's overarching ORC.

ORC will be directly overseen by Gary Norman, Director of Social Enterprises at CFS. He is responsible for the management and operation of the Social Enterprises initiatives of CFS including the behavioral health and mental health services provided through third party billing in its Military & Veteran Family Services programs and Hawaii Family Counseling Center, as well as Worklife Hawaii. Gary Norman is a Licensed Clinical Social Worker in Hawaii and Minnesota and Certified Clinical Supervisor with 20 years of senior leadership in the field of behavioral health, driving quality and revenue. He has 15 years of university teaching experience in the field of social work. Gary was instrumental in growing a behavioral health company from \$4 million to over \$10 million over the course of two years by maximizing revenue and expanding services. He drove productivity standards in outpatient therapy clinics to a standard of 70% productive time and developed incentive plans to support the company in achieving its revenue and productivity goals. He reduced wait times, increased access and reduced staff turnover rates. He has served as a behavioral health consultant for Hawaii Behavioral Health, Chief Operating Officer for Twin Cities Health Services in Minneapolis, MN, and Vice President of Operations for People Incorporated Mental Health Services in St. Paul, MN. He has a wealth of clinical, administrative, and executive-level leadership skills and a successful track record of growing viable and sustainable behavioral health clinics.

Working closely with Gary is Janet Covington, Clinical Supervisor for ORC's Military & Veteran Family Services. She is responsible for overseeing the day-to-day operations of ORC and supervising the clinicians and clinic staff. Janet is a Licensed Marriage & Family Therapist, Licensed Mental Health Counselor and AAMFT Approved Supervisor with over 25 years of administrative experience and 15 years of providing direct clinical services. She was the Clinic Director at CVN for 4 years before being promoted to head CFS's new Military & Veteran Family Services division. She worked as a contractor for the Hawaii National Guard as their crisis and outreach therapist, as an MFLC for active duty, National Guard, and Reserve forces, and was a behavioral health specialist with the Hawaii Department of Education. She has operational and managerial experience working with non-profit and for-profit organizations and is the child of a career soldier and spouse of a Vietnam era airman. She is passionate about serving those who have served our country.

The staff positions, FTE, and minimum qualifications budgeted to this proposal includes the following:

Clinical Supervisor: 0.25 FTE (incumbent)

- Master's Degree in behavioral health discipline from a school accredited by a recognized accrediting agency, in Psychology, Social Work, Marriage & Family Therapy, Mental Health Counseling; or Doctoral Degree in Psychology (PhD, PsyD).
- Current, active Hawaii state licensure in good standing. Note: for MHC applicants, the ability to be TRICARE certified clinical mental health counselor (CCMHC) required.
- 3+ years of clinical experience
- Experience providing clinical supervision and oversight of clinical staff is required.



Licensed Clinician 3 @ 0.50 FTE (estimated to begin 3 months from start of the contract notice to proceed)

- Master's Degree from school accredited by a recognized accrediting agency.
- Licensed Psychologist (PhD, PsyD), Licensed Clinical Social Worker (LCSW), Licensed Marriage and Family Therapist (LMFT) or Licensed Mental Health Counselor (LMHC) with CCMHC designation
- Current, active Hawaii state licensure in good standing. Note: for MHC applicants, the ability to be TRICARE certified clinical mental health counselor (CCMHC) required.
- Over two years, up to and including four years of experience.

Billing Coordinator 0.25 FTE (estimated to begin 3 months from the start of the contract notice to proceed)

- High school plus additional training equal to 2 years of college, which requires knowledge of a specialized field or may lead to licensing/certification (medical billing, data processing, accounting, human services), or formalized apprenticeship program and
- Over two years experience.

Positions not funded by this request are the Chief Program Officer and Director of Social Enterprises who oversee and monitor the performance of this program and the receptionist who provides support to the Clinical Supervisor in the day-to-day operations.

## 2. Organization Chart

The applicant shall illustrate the position of each staff and line of responsibility/supervision. If the request is part of a large, multi-purpose organization, include an organization chart that illustrates the placement of this request.

The Director of Social Enterprises directly supervises the budgeted Clinical Supervisor. The Clinical Supervisor directly oversees the Licensed Clinicians and Billing Coordinator. Please see CFS's Hawaii Military Family Counseling Services Program organization chart including position title, minimum education level required, FTE to the program and organization, and lines of authority

Also attached is the CFS statewide organizational chart, which demonstrates the Program's position among all CFS Programs and Administrative Departments and their lines of authority. The Hawaii Military Family Counseling Services Program will be supported by the Chief Program Officer and by the organization's Performance and Training, Fiscal, Human Resources, Grants, and Facilities departments under our administrative expense line item. For example, our assigned Fiscal Department Management Analyst works in coordination with the Director of Social Enterprises and Clinical Supervisor for budget development and ensuring fiscal requirements are met. For this proposal, a budget matrix was developed to identify the precise staffing pattern needed for a 12-month startup timeframe. The Performance & Training Department and Grants Department will support the program with contract implementation and quality programming and compliance.

## 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.

Position	Pay Range
President and Chief Executive Officer	\$170,000 - \$370,000
Chief Strategy Officer	\$143,702 - \$252,747
Chief Advancement Officer	\$150,000 - \$200,000

## **VII. Other**

### **1. Litigation**

The applicant shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgement. If applicable, please explain.

CFS is currently not involved in any litigation or lawsuits.

### **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.

CFS has been accredited by the Council on Accreditation (COA) since 1980. Every four years COA conducts an extensive reaccreditation site visit and reviews all CFS programs, quality assurance and risk management systems, administrative areas, and board functioning. In the last three reviews, COA did not have any program related findings requiring a response. CFS is very proud of these results, and it serves as a validation of the importance CFS places on being a high-quality organization with high-quality programs. CFS is currently accredited through December 31, 2025.

### **3. Private Educational Institutions**

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

Not Applicable

### **4. Future Sustainability Plan**

The applicant shall provide a plan for sustaining after fiscal year 2026 the activity funded by the grant if the grant of this application is:

- (a) Received by the applicant for fiscal year 2026, but
- (b) Not received by the applicant thereafter.

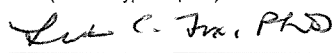
Our sustainability plan includes continued outreach efforts to referring sources such as the VA, MTFs, Hawaii National Guard, and Reserves. We will focus on maintaining a 70% utilization rate for all clinicians to maximize insurance reimbursement potential. CFS consistently searches for state and federal grant opportunities as well as build relationships for philanthropic support. CFS will also expand telehealth options and coordinate in-person sessions to reduce operational costs and increase participant reach. CFS will research all options for sustainability. Revenue diversification may also include the implementation of a sliding fee scale to accommodate participants with varying income levels.

Our Director of Social Enterprises will work closely with CFS's Executive Leadership to review metrics and ensure the continued financial growth of ORC.

## BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2025 to June 30, 2026

Applicant: Child & Family Service

BUDGET CATEGORIES	Total State Funds Requested (a)	Total Federal Funds Requested (b)	Total County Funds Requested (c)	Total Private/Other Funds Requested (d)
A. PERSONNEL COST				
1. Salaries	159,220			
2. Payroll Taxes & Assessments	15,246			
3. Fringe Benefits	22,805			
TOTAL PERSONNEL COST	197,271			
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island				
2. Insurance	2,563			
3. Lease/Rental of Equipment				
4. Lease/Rental of Space	90,000			
5. Staff Training				
6. Supplies	20,000			
7. Telecommunication	4,080			
8. Utilities	600			
9. Printing & Publication	1,200			
10. Postage	300			
11. Audit	641			
12. Administrative Support	48,545			
13				
14				
15				
16				
17				
18				
19				
20				
TOTAL OTHER CURRENT EXPENSES	167,929			
C. EQUIPMENT PURCHASES	6,800			
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
<b>TOTAL (A+B+C+D+E)</b>	<b>372,000</b>			
<b>SOURCES OF FUNDING</b>		Budget Prepared By:		
(a) Total State Funds Requested	372,000	Megan Afaga (808) 681-1542		
(b) Total Federal Funds Requested		Name (Please type or print) Phone		
(c) Total County Funds Requested		 01/17/2025		
(d) Total Private/Other Funds Requested		Signature of Authorized Official Date		
<b>TOTAL BUDGET</b>	<b>372,000</b>	Linda C. Fox, Ph.D., Chief Program Officer		
		Name and Title (Please type or print)		

## BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2025 to June 30, 2026

Applicant: Child & Family Service

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Clinical Supervisor	1	\$128,750	25.00%	\$ 32,188
Billing Coordinator	1	\$60,289	25.00%	\$ 15,072
Licensed Clinician	1	\$92,255	40.45%	\$ 37,320
Licensed Clinician	1	\$92,255	40.45%	\$ 37,320
Licensed Clinician	1	\$92,255	40.45%	\$ 37,320
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
<b>TOTAL:</b>				\$ 159,220
<b>JUSTIFICATION/COMMENTS:</b>				

## BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2025 to June 30, 2026

Applicant: Child & Family Service

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
Microsoft Surface Laptop	4.00	\$1,700.00	\$ 6,800.00	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:	4		\$ 6,800.00	

**JUSTIFICATION/COMMENTS:**

Laptops are necessary to access/maintain electronic health records, billing systems, and web apps used for telehealth services.

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

**JUSTIFICATION/COMMENTS:**

## BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2025 to June 30, 2026

Applicant: Child and Family Service

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:2023-2024	FY:2024-2025	FY:2025-2026	FY:2025-2026	FY:2026-2027	FY:2027-2028
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	0	0	0	0
EQUIPMENT	0	0	0	0	0	0
<b>TOTAL:</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
JUSTIFICATION/COMMENTS:						

# GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID

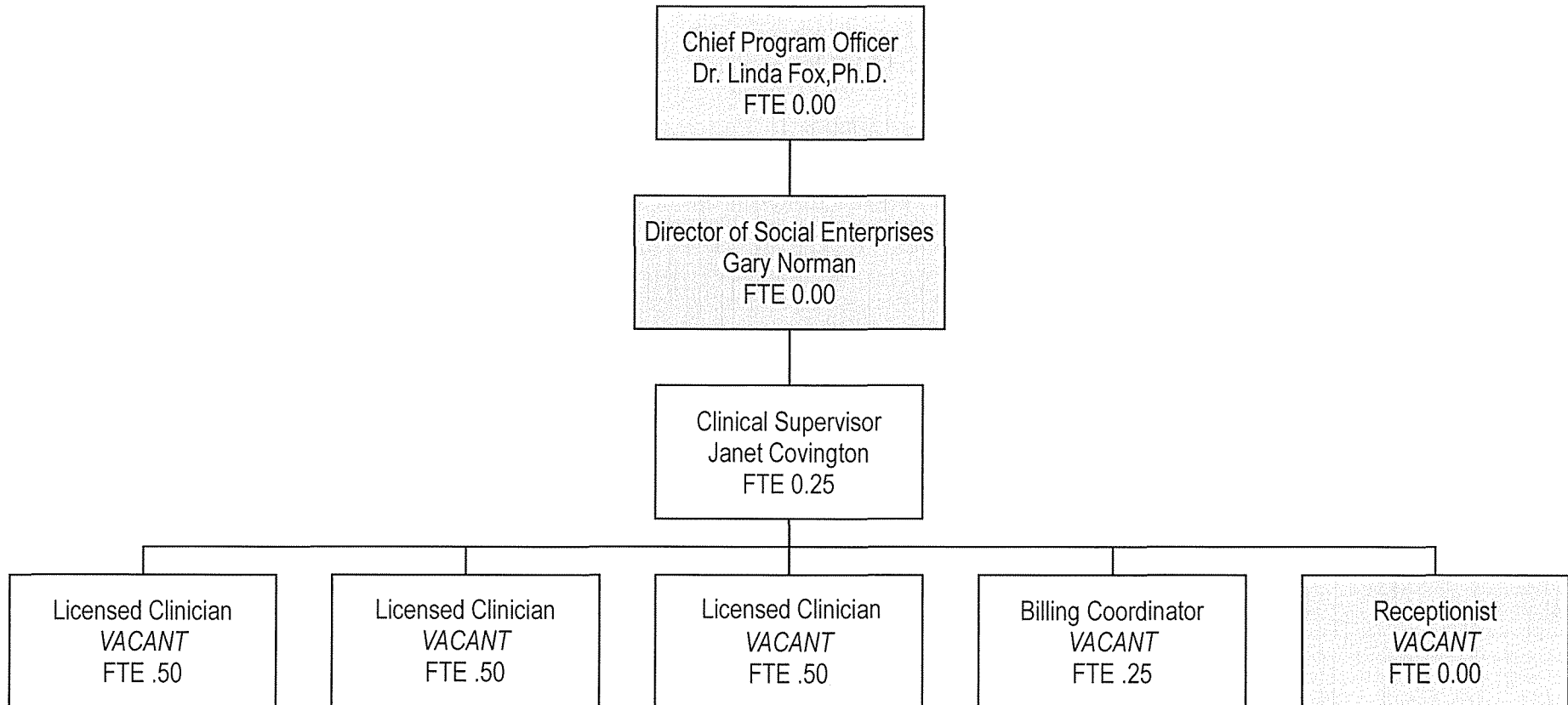
Applicant: Child and Family Service

Contracts Total: 2,250,000

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S./State/Hawaii/ Honolulu/ Kauai/ Maui County)	CONTRACT VALUE
1	Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program (SSG Fox SPGP) enables VA to provide resources toward community-based suicide prevention efforts to meet the needs of Veterans and their families through outreach, suicide prevention services, and connection to VA and community resources. (This contract does not support 'Ohana Resiliency Center's clinical services requested in this project.	10/1/2022-9/30/2025	U.S. Department of Veterans Affairs	U.S.	2,250,000
2					
3					
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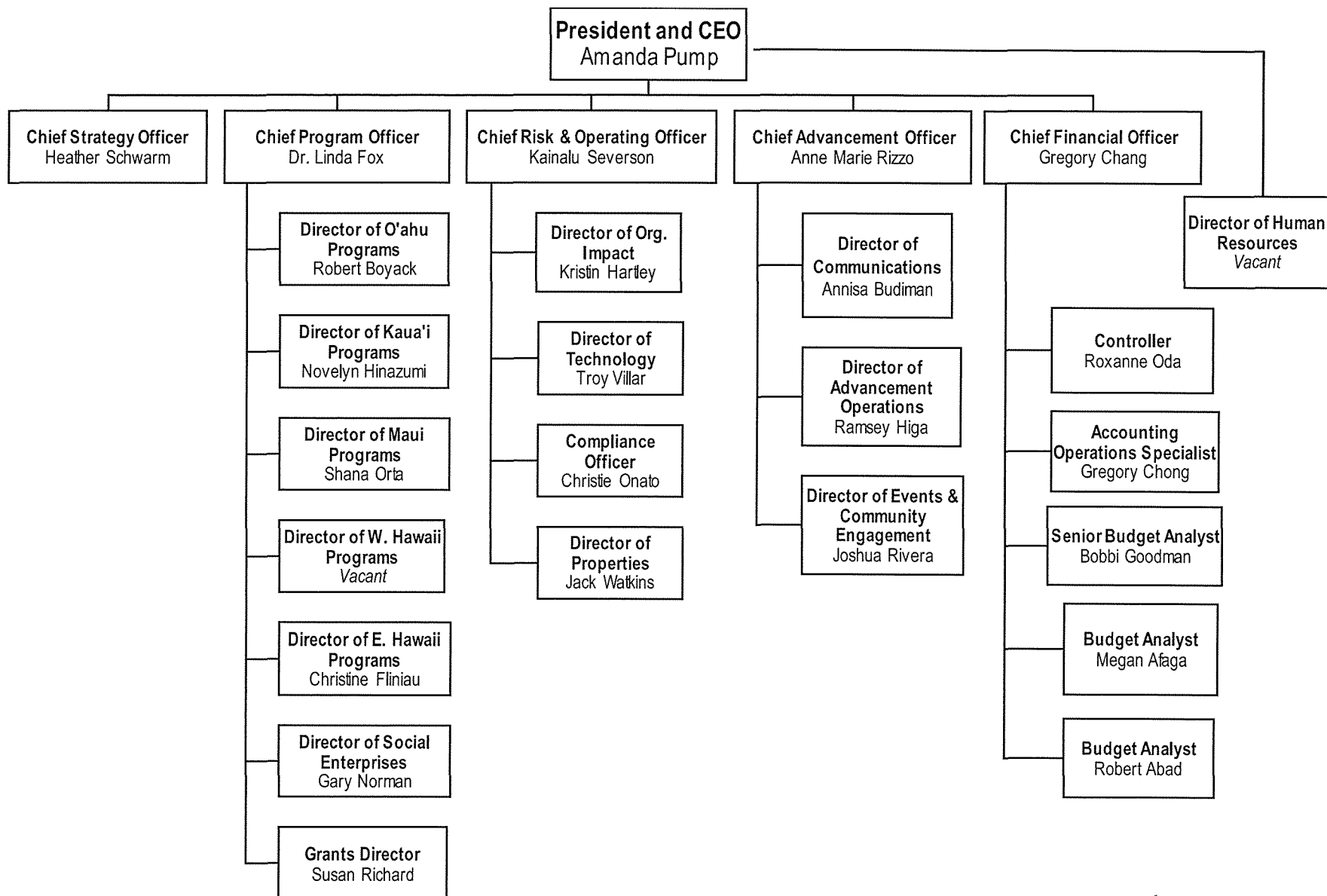


**‘Ohana Resiliency Center  
Military & Veteran Family Services  
Organizational Chart**



\*Shaded boxes are not funded by this proposal.

# Child & Family Service Organization Chart



## Child & Family Service Organization Chart

