

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, 2025.

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

Applicant Background

Hawai'i Behavioral Health Connection (HiBHC) is a Hawai'i-based 501(c)(3) nonprofit organization established in response to the 2023 Lāhainā, Kula-Olinda, and Kīhei wildfires. Originating as the Maui Strong Mental Health Response, HiBHC emerged to address urgent gaps in access to trauma-informed, culturally responsive behavioral health services during and after the disaster. HiBHC has since transitioned into a permanent nonprofit organization with a statewide mission to increase equitable access to clinically appropriate and culturally grounded mental health care for individuals, families, and communities across Hawai'i.

HiBHC operates as a community-based coordination and access organization. Core activities include operating a centralized referral and connection hub linking residents to vetted behavioral health providers; delivering training and continuing education for current and emerging providers; engaging in community education and stigma-reduction initiatives; and partnering with grassroots and statewide organizations to strengthen navigation, access, and trust in behavioral health systems.

In the most recent fiscal year, HiBHC demonstrated measurable statewide reach and operational effectiveness through the delivery of prevention-oriented training, workforce support, and rapid access coordination. HiBHC delivered 33 free continuing education trainings to strengthen provider and trainee capacity, reaching 1,606 total participants statewide and supporting 1,300+

continuing education hours earned by behavioral health providers and students. Training delivery included 35 virtual clinical trainings reaching 1,335 participants, 5 in-person cultural trainings with 116 participants, and 5 trauma-focused, evidence-based intensive trainings (hybrid and in-person) with 146 participants. HiBHC also expanded the availability of culturally responsive services by registering 175 behavioral health providers in its network and coordinated 27 referrals, each completed within 48 hours. In addition, HiBHC conducted community outreach and co-sponsored events statewide, including wildfire recovery efforts, youth and community wellness events, correctional facility outreach, and participation in major conferences.

HiBHC is governed by an independent Board of Directors and supported by licensed clinicians, public health professionals, and trained volunteers. The organization maintains financial controls, documentation standards, and oversight structures appropriate for the administration of public funds and compliance with Chapter 42F, Hawai'i Revised Statutes.

Summary of the Operating Request

HiBHC respectfully requests State of Hawai'i Grant-in-Aid (GIA) Operating funds to support the ongoing delivery and expansion of its community-based behavioral health access, education, and coordination services. HiBHC is currently completely grant-funded and provides these services for a clear public purpose, including no-cost trainings and educational activities offered to the community and the behavioral health workforce. When grant resources are limited, HiBHC relies substantially on trained volunteers to sustain core functions and maintain continuity of service. Requested operating funds will support personnel, program delivery, outreach, training, evaluation, and the administrative infrastructure necessary to sustain public-purpose services that are not reliably reimbursable through third-party payers.

The requested operating support will allow HiBHC to stabilize and scale its core services statewide—particularly for rural, disaster-impacted, and underserved populations—while maintaining audit-ready accountability, measurable outcomes, and the ability to adjust service levels proportionally if partial funding is awarded.

Goals and Objectives

Overall Goal

To improve equitable access to behavioral health services in Hawai'i by reducing stigma, strengthening community-based referral and coordination systems, and expanding culturally responsive education and provider capacity.

Objectives

1. Maintain and operate a centralized behavioral health referral and connection system serving residents statewide.
2. Increase access to culturally responsive behavioral health services for underserved and disaster-impacted populations.
3. Reduce barriers to help-seeking through community education, outreach, and stigma-reduction activities.

4. Strengthen the behavioral health workforce through training, continuing education, and support for current and emerging providers.
5. Ensure all services are delivered with fiscal accountability, measurable outcomes, and compliance with Chapter 42F requirements.

Public Purpose and Need

Public Purpose

This operating request serves a clear public purpose consistent with Chapter 42F, Hawai'i Revised Statutes, by supporting community-based activities that improve access to behavioral health services and strengthen statewide capacity for prevention, early intervention, and recovery. HiBHC's work is designed to benefit the public at large by reducing barriers that routinely prevent individuals and 'ohana from obtaining timely, appropriate behavioral health support—particularly in rural and underserved areas where access is constrained by workforce shortages, geographic isolation, and system navigation challenges.

HiBHC's operating activities are structured to ensure the State's support is used for public benefit rather than private benefit. Services are delivered through a community coordination model that expands access for residents who are least able to navigate the system independently, including individuals facing economic hardship, limited transportation, and limited availability of culturally responsive providers. HiBHC's prevention and access functions—such as referral coordination, public education, stigma reduction, and workforce training—are essential components of a functioning behavioral health ecosystem and are often not reimbursable through third-party payers, yet they directly support statewide outcomes by improving linkage to care and reducing reliance on crisis-driven systems.

HiBHC will maintain organized, auditable documentation of service delivery, expenditures, and outcomes, and will report measurable performance indicators to the expending agency. Activities supported by operating funds will be scalable, ensuring that—if partial funding is awarded—HiBHC can preserve core public-purpose functions while adjusting service volume proportionally.

Community Need

Hawai'i continues to face persistent behavioral health access challenges, including provider shortages, long wait times, geographic barriers across island communities, and stigma that discourages individuals and families from seeking help. Even when services exist, many residents experience practical barriers such as limited appointment availability, travel distance, lack of culturally responsive options, and uncertainty about how to identify an appropriate provider. These challenges contribute to delayed care, worsening symptoms, and increased risk of crisis escalation—placing added strain on emergency departments, inpatient psychiatric services, law enforcement, and other high-cost response systems.

Disparities in access are most pronounced among Native Hawaiian and Pacific Islander communities, rural and neighbor island residents, youth and young adults, LGBTQIA+

individuals, and households impacted by poverty and unstable housing. In these communities, stigma and fear of judgment can further suppress help-seeking, particularly when behavioral health is misunderstood or when prior experiences with systems have been perceived as culturally unsafe or inaccessible. The result is that many individuals do not engage in care until symptoms become severe, at which point intervention is more difficult and more costly.

The 2023 Maui wildfires further intensified these challenges by creating widespread trauma exposure, grief, displacement, and prolonged recovery stressors. Disaster-affected communities often require sustained behavioral health support well beyond the initial response period, and the demand for culturally grounded, trauma-informed care can exceed the capacity of traditional service systems—especially when workforce shortages already exist. In this context, community-based coordination, navigation support, and stigma-reduction efforts are critical to helping residents access appropriate services early and consistently, rather than cycling through crisis points without durable connection to care.

HiBHC addresses these gaps by operating upstream of crisis care. Through centralized referral coordination and provider network development, HiBHC reduces system friction and shortens the pathway from “I need help” to “I’m connected to care.” Through training and workforce support, HiBHC strengthens provider readiness and expands culturally responsive capacity. Through community education and stigma-reduction efforts, HiBHC increases awareness, normalizes help-seeking, and improves the likelihood that individuals will access services earlier—supporting long-term cost avoidance and improved community well-being.

Target Population

HiBHC serves individuals and families statewide, with priority focus on:

- Individuals and families impacted by the 2023 Maui wildfires
- Native Hawaiian and Pacific Islander communities
- Residents of rural and neighbor island communities
- Youth, young adults, and families experiencing barriers to care
- LGBTQIA+ individuals
- Low-income and underinsured populations

Services are designed to be inclusive, trauma-informed, and culturally responsive, with intentional outreach to populations historically underserved by behavioral health systems.

Geographic Coverage

HiBHC provides services statewide, with a strong operational presence on Maui and outreach extending across O‘ahu, Hawai‘i Island, Kaua‘i, and other neighbor islands. Services are delivered through a combination of centralized referral coordination, virtual platforms, and

community-based partnerships. If partial funding is awarded, geographic reach and service intensity will be scaled proportionally while maintaining core statewide access functions.

III. Service Summary and Outcomes

Operating funds will support the delivery and coordination of core public-purpose behavioral health access, education, and workforce-support services that improve navigation, reduce stigma, and strengthen community capacity across Hawai'i. All services are designed to be non-duplicative, scalable, and compliant with Chapter 42F, Hawai'i Revised Statutes. If partial funding is awarded, service levels will be adjusted proportionally while preserving essential access and accountability functions.

1. Referral and Care Coordination

HiBHC will operate a centralized referral and navigation function to assist individuals and families in accessing appropriate behavioral health services and supports. Operating funds will support staffing, systems, and workflows necessary to manage requests in a timely and organized manner. Activities include intake and documentation of requests; screening to clarify service needs and preferences; matching individuals to vetted providers or appropriate community resources; and follow-up to confirm connection or document barriers. When provider capacity is limited, HiBHC will connect individuals to alternative supports and provide guidance on next steps. Services will prioritize equity by reducing administrative and informational barriers for rural, disaster-impacted, and underserved populations.

2. Community Education and Stigma Reduction

HiBHC will deliver community-based education and outreach activities that promote understanding of mental health, reduce stigma, and encourage early help-seeking. Operating funds will support planning, outreach coordination, materials development, and participation in community events. Activities include development and dissemination of culturally grounded educational messaging; participation in or co-hosting of stigma-reduction events; and collaboration with community partners to ensure outreach is relevant, accessible, and respectful of local cultural contexts. Feedback from community members will be used to refine messaging and improve effectiveness over time.

3. Provider Training and Workforce Support

HiBHC will support the behavioral health workforce through training, consultation, and professional development activities that enhance capacity to serve Hawai'i's communities. Operating funds will support coordination and delivery of continuing education sessions, case consultation opportunities, and learning activities for licensed providers, trainees, and emerging professionals. Activities are designed to strengthen trauma-informed and culturally responsive practice, support workforce retention, and contribute to long-term system capacity, particularly in high-need and disaster-impacted areas.

4. Partnership Development

HiBHC will collaborate with community-based organizations, educational institutions, provider networks, and grassroots groups to expand reach and improve coordination across systems. Operating funds will support relationship-building, communication, and coordination activities that reduce duplication and improve service continuity. Activities include developing and

maintaining referral pathways, coordinating outreach and education efforts, and engaging partners in shared planning and feedback processes. Partnerships will be structured to leverage existing resources and enhance access without creating unnecessary overlap.

5. Program Administration and Evaluation

HiBHC will maintain the administrative and evaluation infrastructure required to deliver services responsibly and transparently. Operating funds will support program oversight, data collection, performance tracking, reporting, and compliance activities. This includes maintaining auditable records of services delivered, monitoring progress toward established measures of effectiveness, preparing required reports for the expending agency, and implementing continuous quality improvement processes. These functions ensure fiscal accountability, service quality, and alignment with the public purpose of the GIA award.

Annual Service Timeline

Services will be delivered continuously throughout the fiscal year, with quarterly planning, monitoring, and reporting cycles. Training and outreach activities will be scheduled monthly and quarterly based on community needs and partner availability.

Measures of Effectiveness

HiBHC will track and report quantifiable, auditable measures of effectiveness that reflect public-purpose service delivery, access improvement, and prevention-oriented outcomes. Measures will be documented through standardized logs, referral tracking records, registration/attendance records, and routine reporting files maintained in an organized, review-ready format suitable for expending agency monitoring and audit. Measures will be reported on a quarterly and annual basis (or as otherwise required by the expending agency), with clear definitions and supporting documentation retained for verification.

Measures of Effectiveness (Quantifiable and Auditable)

1. Access and Care Coordination Outputs

- **Unduplicated individuals assisted through referral and coordination services:** HiBHC will track the number of unique individuals who request assistance and receive navigation/referral support during the grant period. Documentation will include intake date, service category, service area/island, and disposition (e.g., provider match, resource connection, follow-up completed).
- **Volume of referral/coordination encounters:** HiBHC will track the total number of coordination actions completed (e.g., intake contacts, follow-ups, provider outreach, scheduling support), supporting an auditable count of service activity beyond unduplicated totals.
- **Referral outcomes and completion rates:** HiBHC will track the proportion of referral requests that result in (a) successful provider connection, (b) alternate resource connection when clinical services are unavailable, or (c) closed/withdrawn requests (with reason documented when available).

2. Timeliness and Efficiency Measures

- **Average time from referral request to provider connection:** HiBHC will calculate the average number of calendar days between (a) initial request received and (b) confirmed provider connection or documented resolution. Where appropriate, HiBHC will also report medians and ranges to reflect variability by island and service availability.
- **Timeliness benchmarks (where feasible):** HiBHC may also track the percentage of requests connected within defined timeframes (e.g., within 7 days, within 14 days), recognizing that shortages and external provider capacity may affect results. Measures will be reported transparently and conservatively, without overstating controllable factors.

3. Workforce Development and Training Outputs

- **Number of training and education events delivered:** HiBHC will track the total number of provider-facing and trainee-facing educational sessions conducted (e.g., continuing education sessions, case consultation meetings, workshops, campus-based trainings). Documentation will include date, topic, modality (in-person/virtual/hybrid), and duration.
- **Number of providers and trainees participating in training activities:** HiBHC will track participation counts and unduplicated participants when feasible. Documentation will include registration lists, attendance logs, and completion verification (as applicable).
- **Training reach and capacity-building indicators:** HiBHC will track indicators such as: number of partner training programs engaged (e.g., universities, allied professional programs), number of disciplines represented, and number of continuing education hours offered (if applicable).

4. Community Outreach and Stigma-Reduction Activities

- **Number of community outreach activities conducted:** HiBHC will track events and outreach actions such as community presentations, stigma-reduction educational events, tabling/resource fairs, partner meetings, and culturally grounded community engagements. Documentation will include event details, partner organization (if applicable), estimated attendance, and materials distributed.
- **Outreach reach (where measurable):** HiBHC will track outputs such as number of educational materials distributed, number of outreach touchpoints completed, and digital engagement metrics where applicable (e.g., impressions, clicks, downloads), recognizing that digital metrics reflect exposure rather than clinical outcomes.

5. Service Quality, Satisfaction, and Continuous Improvement

- **Participant satisfaction and feedback measures:** HiBHC will collect brief satisfaction feedback from service recipients and training participants using short surveys or

structured feedback tools. Measures will include ratings of accessibility, clarity of navigation support, cultural responsiveness, and overall satisfaction. Open-ended feedback will be summarized for quality improvement purposes.

- **Quality assurance indicators:** HiBHC will track operational quality measures such as documentation completeness, follow-up attempts completed, and internal review of referral workflows. Findings will be used for continuous quality improvement and reported in aggregate where appropriate.

Documentation and Audit Readiness

For each measure, HiBHC will maintain organized, auditable records such as: referral intake logs, de-identified tracking spreadsheets or database exports, provider connection confirmation records, training registration and attendance lists, event sign-in sheets, survey summaries, and quarterly performance reports. Records will be retained consistent with expending agency requirements and applicable nonprofit record retention practices.

Scalability With Partial Funding

If partial GIA funding is awarded, HiBHC will scale outputs proportionally while preserving core public-purpose functions. Priority will be given to maintaining the centralized access/referral and coordination infrastructure. Training frequency, outreach volume, and evaluation scope will be adjusted based on available resources, and revised targets will be documented and submitted to the expending agency as needed to ensure continued accountability and alignment with the approved scope of services.

IV. Financial

Budget

1. See attachments for the following:
 - a. Budget request by source of funds
 - b. Personnel salaries and wages
 - c. Equipment and motor vehicles
 - d. Government contracts, grants, and grants in aid
2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2027.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$135,000.00	\$145,000.00	\$160,000.00	\$160,000.00	\$600,000.00

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2027: None at this time other than this proposal.
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: Not applicable.

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 2027 for program funding:

DOH SERG Project Year 1 and 2 Funding HiBHC Bridging the Gap:
Connecting the Community of Behavioral Health Providers (\$200,000)

2024 Hawai'i Community Foundation Maui Strong Fund
HiBHC Maui Connections: Community-Driven Referral Coordination (\$100,000)

6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2025.

V. Experience and Capability

1. Necessary Skills and Experience

Hawai'i Behavioral Health Connection (HiBHC) possesses the skills, knowledge, and experience required to deliver the services proposed in this application through a combination of organizational history, demonstrated service outputs, and established community trust. HiBHC's mission is rooted in strengthening behavioral health access across Hawai'i by building bridges between individuals, families, and the providers who serve them, with a strong emphasis on clinical integrity, cultural humility, and community-centered practice.

HiBHC's leadership and operational model are grounded in behavioral health coordination and workforce support. The organization began as a grassroots mental health response following the 2023 Maui wildfires and has grown into a statewide nonprofit with direct experience facilitating timely, ethical, and culturally responsive connections to licensed behavioral health care resources. HiBHC's team includes professionals with clinical, public health, and community engagement experience, supported by volunteer clinicians and trainees who contribute expertise in intake, referral navigation, and professional development.

HiBHC designs and implements a range of training and education initiatives that serve both providers and the broader community. These include expert-led clinical trainings, culturally grounded professional development workshops, and provider "hui" support spaces that foster connection, skills transfer, and resilience among practitioners across the islands. HiBHC actively encourages local clinicians and community experts to contribute content and share best practices, demonstrating the organization's commitment to workforce growth and peer-driven education.

HiBHC's referral and care coordination infrastructure reflects established experience connecting residents with vetted, licensed behavioral health providers through a compassionate and personalized process. The organization's publicly accessible referral system supports residents

regardless of insurance status or ability to pay and utilizes structured intake and navigation to maximize match quality and timeliness.

Verifiable Experience – Pertinent Projects/Services (Most Recent Three Years)

HiBHC's operational experience over the past three years includes:

- Statewide referral and care coordination services connecting Hawai'i residents with licensed behavioral health providers, including culturally responsive matching and navigation support regardless of insurance status.
- Delivery of continuing education and clinical training events designed to support professional development across the behavioral health workforce, including evidence-based, culturally relevant topic areas.
- Cultivation of a provider network and professional "hui" that fosters ongoing connection, shared learning, and peer support among clinicians statewide.
- Community outreach and stigma-reduction engagement, including collaboration with local partners and participation in community events to increase awareness of behavioral health resources.
- Organizational expansion from a disaster-response initiative to a permanent statewide nonprofit, including program development, data-informed planning, and partnerships with local organizations to sustain coordinated access efforts.

Together, these activities demonstrate HiBHC's capacity to manage complex behavioral health access functions, provide measurable outputs, and maintain relationships with a broad spectrum of stakeholders in Hawai'i's behavioral health environment. The organization's experience aligns directly with the services proposed in this application, and HiBHC has established workflows, documentation practices, and community credibility necessary to deliver on the public-purpose outcomes supported by the requested operating funds.

2. Facilities

Hawai'i Behavioral Health Connection (HiBHC) does not currently operate a dedicated, standalone physical facility. Instead, HiBHC utilizes a distributed, partnership-based service model that is appropriate and adequate for the scope of services proposed in this operating request.

HiBHC delivers services through a combination of virtual platforms and shared-use community spaces secured through partnerships with community-based organizations, educational institutions, and allied service providers across Hawai'i. This approach allows HiBHC to bring trainings, education, and workforce-support activities directly into communities where providers are already working, reducing geographic and logistical barriers while maximizing reach and cost efficiency.

For in-person trainings and community education activities, HiBHC partners with host organizations that provide suitable meeting and training spaces (e.g., classrooms, conference rooms, community centers, or partner facilities). These spaces are selected based on accessibility, safety, and appropriateness for professional and community use. When needed, HiBHC secures short-term or event-specific space through partner agreements or low-cost venue arrangements, rather than maintaining a fixed facility with ongoing overhead costs.

This flexible model supports scalability and fiscal stewardship by allowing HiBHC to adapt service delivery based on community need, geographic demand, and available funding. If operating funds are awarded, HiBHC will continue to rely on partnerships and shared-use spaces while maintaining the option to formalize additional space agreements as needed to support program delivery. This approach ensures that State funds are directed toward service delivery and access, rather than unnecessary fixed facility expenses, while remaining fully adequate to meet the objectives of this application.

VI. Personnel: Project Organization and Staffing

1. Proposed Staffing, Staff Qualifications, Supervision and Training

HiBHC operates with a combination of paid staff, contracted professionals, and trained volunteers. All staff operate under defined supervision and documentation protocols. Salary ranges by position will be disclosed in accordance with Chapter 42F requirements. No funds will be used for excessive compensation or private benefit.

Executive Director 0.30 \$60,000.00 100.00% \$60,000.00 Provides overall leadership and accountability for HiBHC's statewide behavioral health coordination and training mission; oversees contracts, partner relationships, compliance, budgeting decisions, and ensures services remain aligned with public purpose and Chapter 42F requirements.

Program Director 0.25 \$25,000.00 100.00% \$25,000.00 Leads program implementation and service coordination across outreach, events, and workforce support activities; ensures consistent delivery of community-facing commitments and trainee development opportunities statewide.

Clinical Director / Workforce Lead (oversight, training quality, consultation) 0.20 \$40,000.00 100.00% \$40,000.00 Ensures clinical quality and workforce development integrity across training and referral activities; provides consultation, training oversight, and quality assurance to support appropriate, ethical, culturally responsive service delivery and trainee learning.

Training & Continuing Education Coordinator 0.30 \$30,000.00 100.00% \$30,000.00 Plans and coordinates continuing education (CE) events and professional development programming, including speaker logistics, participant communication, documentation, and trainee access support to strengthen the behavioral health workforce pipeline.

Marketing Director 0.25 \$15,000.00 100.00% \$15,000.00 Supports statewide community engagement and training participation through outreach and dissemination of educational opportunities; increases access for trainees and underserved communities by improving visibility, clarity, and reach of programming.

Communications Director 0.15 \$15,000.00 100.00% \$15,000.00 Oversees communications strategy and messaging to maintain consistent community presence, strengthen trust, and support stigma-reduction and workforce development outreach; ensures clear communication for trainees, partners, and community members.

Referrals Director 0.10 \$9,000.00 100.00% \$9,000.00 Directs referral coordination workflows to connect residents with appropriate behavioral health resources; ensures referral processes remain timely, organized, and responsive to community needs.

Administrative Director 0.20 \$24,000.00 100.00% \$24,000.00 Oversees operational administration, contractor coordination, documentation workflows, and internal systems that support continuity of programming, trainee supports, and reliable community commitments year-round.

Fiscal Director 0.05 \$12,000.00 100.00% \$12,000.00 Provides fiscal oversight, accounting support, and financial documentation to maintain audit-ready compliance, timely reimbursements, and responsible stewardship of public funds.

Evaluations/Data/Reporting 0.15 \$15,000.00 100.00% \$15,000.00 Maintains data tracking, performance monitoring, and required reporting documentation; supports measurable outcomes and continuous quality improvement for training participation, outreach reach, referral activity, and trainee development efforts.

Referrals Support 0.15 \$9,000.00 100.00% \$9,000.00 Provides direct operational support for intake, follow-up, tracking, and documentation of referral coordination; strengthens capacity to respond to requests efficiently and support community access.

Executive Support 0.30 \$18,000.00 100.00% \$18,000.00 Provides administrative scheduling, communications support, and logistical coordination that keeps training events, community engagement activities, and operational deliverables consistent across the year.

Training Support 0.15 \$9,000.00 100.00% \$9,000.00 Supports training operations including registration support, attendance tracking, CE documentation, participant follow-up, and trainee support logistics to ensure trainings are accessible and properly documented.

Program Support 0.15 \$9,000.00 100.00% \$9,000.00 Assists with program implementation tasks including partner coordination, event planning support, materials preparation, and logistics that enable sustained community presence and trainee-facing programming.

Outreach Support 0.15 \$9,000.00 100.00% \$9,000.00 Supports community outreach activities, event staffing, and partnership engagement to sustain HiBHC's ongoing commitment to prevention-oriented education and stigma reduction statewide.

Clinical Trainee X3 (combined) 0.45 \$24,000.00 100.00% \$24,000.00 Provides paid, structured professional development opportunities for emerging behavioral health professionals; increases workforce pipeline capacity while supporting training delivery, community engagement activities, and mission-aligned service support under supervision.

2. Organization Chart

Board:

President Victoria Liou Johnson

Secretary Kapua Beyer

Treasurer Ray Folen

Contractors:

Executive Director

+Oversees Admin Director

++Oversees Executive Support

++Oversees Marketing Director

++Oversees Communications Director

+++Oversees Communications Support

Executive Director

+Oversees Program & Community Director

++Oversees Program Outreach Support

++Oversees Community Outreach Support

Executive Director

+Oversees Referrals Director

++Oversees Referrals Support

Executive Director

+Oversees Training Director

+Oversees Clinical Director

++Oversees Clinical Trainees X 3

3. Compensation

Executive Director / Program Director: \$130,000

Clinical Director / Workforce Lead: \$55,000

Training and Continuing Education Coordinator: \$45,000

VII. Other

1. Litigation

HiBHC is not a party to any pending litigation and has no outstanding judgments.

2. Licensure or Accreditation

Behavioral health services are provided through licensed professionals and partner organizations operating in compliance with Hawai'i State law.

3. Private Educational Institutions

This grant will not support any sectarian or non-sectarian private educational institution.

4. Future Sustainability Plan

HiBHC's sustainability strategy is designed to maintain and strengthen public-purpose services beyond the State's GIA grant period by stabilizing core operations, diversifying revenue sources, and improving cost effectiveness over time. HiBHC will use GIA operating support to reinforce the infrastructure required for accountable service delivery—particularly for functions that are essential to public access and cost avoidance but are not reliably reimbursed through third-party payers (e.g., referral coordination, community education, stigma-reduction outreach, provider training support, and evaluation/reporting).

HiBHC will pursue a diversified sustainability approach that does not rely on an assumption of future State funding. Instead, HiBHC will use the grant period to (1) demonstrate measurable outcomes, (2) strengthen operational systems and documentation, and (3) position the organization to compete effectively for other sources of support aligned with statewide behavioral health priorities.

Key sustainability components include:

1. Diversified Revenue Strategy (Non-State Sources)

HiBHC will pursue a balanced mix of funding streams that support public-purpose behavioral health access and prevention activities, including competitive grants, private philanthropy, and mission-aligned institutional support. HiBHC will prioritize opportunities that fund community-based coordination, behavioral health access navigation, workforce development, disaster recovery, and stigma-reduction education. The organization will maintain a grant calendar, standardized application materials, and outcome reporting templates to support efficient and repeatable fundraising efforts.

2. Strategic Partnerships and Shared-Value Collaboration

HiBHC will strengthen partnerships with community-based organizations, educational institutions, provider networks, and allied agencies to expand reach, reduce duplicative efforts, and leverage shared resources. When appropriate, HiBHC will pursue cost-sharing arrangements and co-hosted programming that reduces operational burden while maintaining public access and service quality. Partnerships will be documented through MOUs or written agreements as applicable to support continuity and clarity of roles.

3. Operational Stabilization and Financial Controls

HiBHC will continue to operate with board oversight, internal controls, and prudent financial management to ensure fiscal accountability and long-term viability. This includes routine budget-to-actual monitoring, procurement documentation, segregation of duties where feasible, and maintenance of auditable records. HiBHC will maintain conservative budgeting assumptions and will adjust staffing and service intensity based on secured revenue, consistent with responsible stewardship.

4. Evidence and Outcomes to Support Long-Term Funding

HiBHC will strengthen evaluation capacity during the GIA period to produce credible, auditable performance data suitable for legislative review and for future funders. Outcome reporting will focus on measurable access and prevention indicators (e.g., unduplicated residents served, time-to-connection metrics, referral completion rates, outreach reach, training participation, and satisfaction measures). These data will be used to demonstrate public return on investment, support cost-avoidance framing, and inform continuous quality improvement.

5. Scalability and Continuity Planning

Because partial funding is common in GIA appropriations, HiBHC will maintain a scalable operating model. If funding levels fluctuate, HiBHC will prioritize core public-purpose functions—such as centralized access/navigation and essential coordination—while scaling training and outreach activities proportionally. HiBHC will use phased implementation, cross-training, and standardized workflows to sustain continuity of services even under constrained funding conditions.

6. Cost Avoidance and Public Return on Investment

HiBHC's sustainability approach is aligned with long-term cost containment for the State by maintaining accessible, community-based pathways to care that reduce reliance on high-cost crisis systems. By improving navigation, decreasing barriers to help-seeking, and strengthening provider capacity, HiBHC supports earlier engagement and appropriate referral to services, which is expected to reduce avoidable emergency department utilization, inpatient psychiatric admissions, and other crisis-driven interventions over time.

Through these strategies, HiBHC will sustain operations beyond the GIA grant period without presuming continued State support, while continuing to demonstrate measurable public benefit and responsible stewardship of public funds.

**DECLARATION STATEMENT OF
APPLICANTS FOR GRANTS PURSUANT TO
CHAPTER 42F, HAWAI'I REVISED STATUTES**

The undersigned authorized representative of the applicant certifies the following:

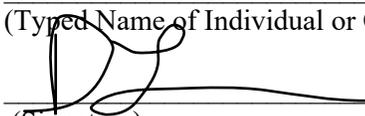
- 1) The applicant meets and will comply with all of the following standards for the award of grants pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant is awarded;
 - b) Complies with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
 - c) Agrees not to use state funds for entertainment or lobbying activities; and
 - d) Allows the state agency to which funds for the grant were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and ensuring the proper expenditure of the grant.
- 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.

Diane Logan

(Typed Name of Individual or Organization)



(Signature)

1/23/26

(Date)

Diane Logan

(Typed Name)

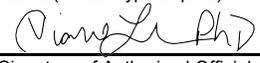
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(Title)

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2026 to June 30, 2027

App Hawaii Behavioral Health Connection

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	323,000			
2. Payroll Taxes & Assessments	0			
3. Fringe Benefits	0			
TOTAL PERSONNEL COST	323,000			
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island				
2. Insurance				
3. Lease/Rental of Equipment				
4. Lease/Rental of Space				
5. Staff Training				
6. Supplies	25,000			
7. Telecommunication				
8. Utilities				
9. Events / Training / Professional Development	200,000			
10. Administrative (accounting support, computer)	52,000			
11.				
12.				
13.				
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20.				
TOTAL OTHER CURRENT EXPENSES	0			
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES	0			
E. CAPITAL	0			
TOTAL (A+B+C+D+E)	600,000			
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	600,000	Diane Logan (808) 437-7447		
(b) Total Federal Funds Requested		Name (Please type or print) Phone		
(c) Total County Funds Requested				
(d) Total Private/Other Funds Requested		Signature of Authorized Official Date		
TOTAL BUDGET	600,000	Diane Logan, Executive Director Name and Title (Please type or print)		

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2026 to June 30, 2027

Applicant: Hawaii Behavioral Health Connection

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Executive Director	0.3	\$60,000.00	100.00%	\$ 60,000.00
Program Director	0.25	\$25,000.00	100.00%	\$ 25,000.00
Clinical Director / Workforce Lead	0.2	\$40,000.00	100.00%	\$ 40,000.00
Training & Continuing Education Coordinator	0.3	\$30,000.00	100.00%	\$ 30,000.00
Marketing Director	0.25	\$15,000.00	100.00%	\$ 15,000.00
Communications Director	0.15	\$15,000.00	100.00%	\$ 15,000.00
Referrals Director	0.1	\$9,000.00	100.00%	\$ 9,000.00
Administrative Director	0.2	\$24,000.00	100.00%	\$ 24,000.00
Fiscal Director	0.05	\$12,000.00	100.00%	\$ 12,000.00
Evaluations/Data/Reporting	0.15	\$15,000.00	100.00%	\$ 15,000.00
Referrals Support	0.15	\$9,000.00	100.00%	\$ 9,000.00
Executive Support	0.3	\$18,000.00	100.00%	\$ 18,000.00
Training Support	0.15	\$9,000.00	100.00%	\$ 9,000.00
Program Support	0.15	\$9,000.00	100.00%	\$ 9,000.00
Outreach Support	0.15	\$9,000.00	100.00%	\$ 9,000.00
Clinical Trainee X3	0.45	\$24,000.00	100.00%	\$ 24,000.00
TOTAL:				323,000.00

JUSTIFICATION/COMMENTS: All staff are contracted.

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2026 to June 30, 2027

Applicant: Hawaii Behavioral Health Connection

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
Events/Training/Professional Development			\$ 200,000.00	
Admin/Supplies/Systems/Evaluation			\$ 52,000.00	
Supplies			\$ 25,000.00	
TOTAL:			\$ 277,000.00	
JUSTIFICATION/COMMENTS:				

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

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2026 to June 30, 2027

Applicant: Hawaii Behavioral Health Connection

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:2024-2025	FY:2025-2026	FY:2026-2027	FY:2026-2027	FY:2027-2028	FY:2028-2029
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
TOTAL:	0	0	0	0	0	0
JUSTIFICATION/COMMENTS:						

GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID

App: Hawaii Behavioral Health Connection

Contracts Total: 300,000

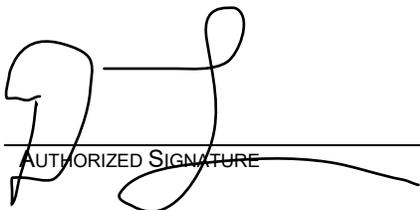
	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S./State/Hawaii/ Honolulu/ Kauai/ Maui County)	CONTRACT VALUE
1	SERG Project Year 1 and 2 Funding HiBHC Bridging the Gap: Connecting the Community of Behavioral Health Providers	2023-2025	DOH SERG	State: Hawaii	200,000
2	Hawai'i Community Foundation Maui Strong Fund HiBHC Maui Connections: Community-Driven Referral Coordination	2024-2025	HCF Maui Strong Fund	State: Hawaii	100,000
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27		10			Application for Grants

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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) **Certificate requested and pending**
- 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

Diane Logan, PhD | Executive Director

PRINT NAME AND TITLE

01/23/2026

DATE