

Department of Commerce and Consumer Affairs

CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that

THE WAHIAWA CENTER FOR COMMUNITY HEALTH

was incorporated under the laws of Hawaii on 01/25/2012 ; that it is an existing nonprofit corporation; and that, as far as the records of this Department reveal, has complied with all of the provisions of the Hawaii Nonprofit Corporations Act, regulating domestic nonprofit corporations.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: January 15, 2026

Director of Commerce and Consumer Affairs



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: THE WAHIAWA CENTER FOR COMMUNITY HEALTH

DBA/Trade Name: WAHIAWA HEALTH

Issue Date: 01/09/2026

Status: **Compliant**

Hawaii Tax#: [REDACTED]

New Hawaii Tax#:

FEIN/SSN#: [REDACTED]

UI#: XXXXXX0740

DCCA FILE#: 235150

Status of Compliance for this Vendor on issue date:

Form	Department(s)	Status
A-6	Hawaii Department of Taxation	Compliant
8821	Internal Revenue Service	Waived
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, Hawaii Revised Statutes:
 - a) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant is awarded;
 - b) Complies with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
 - c) Agrees not to use state funds for entertainment or lobbying activities; and
 - d) Allows the state agency to which funds for the grant were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and ensuring the proper expenditure of the grant.
- 2) If the applicant is an organization, the applicant meets the following requirements pursuant to Section 42F-103, Hawaii Revised Statutes:
 - a) Is incorporated under the laws of the State; and
 - b) Has bylaws or policies that describe the manner in which the activities or services for which a grant is awarded shall be conducted or provided; and
- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawaii Revised Statutes:
 - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
 - b) Has a governing board whose members have no material conflict of interest and serve without compensation.
- 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, Hawaii Revised Statutes, for grants used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant was awarded and disposes of the land in fee simple or by lease, the organization shall negotiate with the expending agency for a lump sum or installment repayment to the State of the amount of the grant used for the acquisition of the land.

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

The Wahiawa Center for Community Health

(Typed Name of Individual or Organization)


Rev Harbin (Jan 2 1, 2026 12:44:01 HST)

(Signature)

Beverly Harbin

(Typed Name)

01/21/2026

(Date)

CEO

(Title)



January 21, 2026

Wahiawa Health confirms and verifies that this grant application will be used for a public purpose.

A handwritten signature in black ink, appearing to read "B. Harbin", is positioned above a horizontal blue line.

Bev Harbin (Jan 21, 2026 12:44:01 HST)

Beverly Harbin, CEO
Wahiawa Health

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

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;

Wahiawā Health is a 501(c)(3) Federally Qualified Health Center Look-Alike (FQHC-LAL), established in 2012 as part of Senator Daniel K. Inouye's legacy project, and serves the medically underserved communities of Central O'ahu, including Wahiawā, Mililani, and Waialua—areas designated by HRSA as both a Medically Underserved Population (MUP) and a Health Professional Shortage Area (HPSA). As a safety-net provider meeting all federal FQHC standards without Section 330 grant funding. Wahiawā Health delivers a comprehensive, integrated continuum of medical, dental, behavioral health, and enabling services that address both clinical needs and social determinants of health, ensuring access regardless of ability to pay. Through multidisciplinary, culturally responsive care and innovative community-based programs—including school-based health services, mobile health and dental clinics, and outreach across Central O'ahu—Wahiawā Health has made a measurable impact by reducing barriers to care, improving health equity, and strengthening the long-term health

and well-being of children, families, and underserved populations in the Wahiawa, Waialua and Mililani.

2. The goals and objectives related to the request;

Located in Central O‘ahu, Wahiawā Health serves children and families from Wahiawā, Mililani, Waialua, and surrounding communities and functions as a primary access point for pediatric care across clinic-based, school-based, and mobile settings. As a unfunded Community Health Center serving communities with high rates of food insecurity and chronic disease disease, Wahiawā Health recognizes the urgent need to improve access to farm-fresh, whole foods as a foundational component of health and disease prevention. Addressing this need requires pediatric care models that integrate nutrition, behavioral health, and social support alongside medical services.

Wahiawā Health is intentionally redesigning pediatric care so that Food as Medicine is fully embedded into routine clinical practice. Through a multidisciplinary Pediatric Wellness Team—including pediatric providers, medical assistants, registered dietitians, a Nutrition Program Coordinator, licensed clinical social workers, community health workers, and care coordination staff—the health center delivers coordinated, whole-child care that addresses medical needs, behavioral and mental health, social determinants of health, and access to fresh, locally sourced foods. Wahiawā Health will collaborate with local farmers, food hubs, and community-based organizations to strengthen connections between pediatric care and nutritious food access for children and families.

This approach aligns with Hawai‘i Department of Health priorities and national pediatric prevention recommendations, including the 2025–2030 Dietary Guidelines for Americans, which emphasize early, family-centered nutrition intervention to prevent childhood obesity and nutrition-related chronic disease. Evidence shows that access to whole foods and nutrition education during early childhood is critical to establishing healthy dietary habits and improving health outcomes. Effectively addressing these needs requires integrated medical, behavioral health, social, and food-based interventions delivered within community-based pediatric health care settings.

The primary goal of this project is to renovate and expand Wahiawā Health’s pediatric clinic to create a modern, comprehensive Pediatric Wellness environment that supports this integrated model of care. The redesigned space will enable seamless collaboration among Pediatric Wellness Team members, improve patient flow and privacy, and create dedicated space for nutrition counseling and Food as Medicine workflows. By embedding nutrition services and food access into pediatric primary care, the renovated clinic will support early identification of nutrition risk, obesity prevention, and family-centered care, ultimately improving long-term health outcomes for children and families in Central O‘ahu.

Objectives

1. Remodel and Expand the Pediatric Clinic Interior

- a. Redesign and renovate the pediatric clinic to create dedicated, child-friendly spaces for pediatric care, nutrition counseling, and integrated wellness services.
- b. Develop collaborative workspaces that support coordination among pediatric providers, medical assistants, registered dietitians, behavioral health staff, community health workers, and care coordinators.
- c. Ensure the clinic is accessible, modern, and efficient, meeting the needs of patients, families, and staff while prioritizing privacy, comfort, and functionality.

2. Create a Dedicated Pediatric Nutrition and Wellness Area

- a. Establish a designated nutrition counseling and education space within the pediatric clinic to support individualized and family-based nutrition care.
- b. Furnish the space with appropriate pediatric and family seating to support counseling, education, care coordination, and Food as Medicine workflows.
- c. Design the area to support culturally responsive nutrition education aligned with the MyPlate framework and the Dietary Guidelines for Americans.

3. Support Whole-Child Wellness and Early Intervention

- a. Create a welcoming, calming environment that supports children's physical, emotional, and nutritional well-being.
- b. Facilitate early identification of nutrition risk, food insecurity, and related health concerns during routine pediatric visits.
- c. Support family-centered engagement by providing space for education, discussion, and shared care planning.

4. Integrate Food as Medicine into Pediatric Care

- a. Support the delivery of nutrition prescriptions and coordination of fresh, locally sourced farm food boxes through partnerships with local farmers, food hubs, and community-based organizations.
- b. Normalize nutrition care and food access as essential components of pediatric primary care, reducing stigma and increasing utilization.
- c. Ensure the clinic environment supports practical, actionable nutrition education that families can apply at home.

5. Enhance Care Coordination and Access

- a. Improve patient flow and coordination among pediatric, nutrition, behavioral health, and support services through intentional space design.
- b. Reduce barriers to care by offering multiple services in one location, minimizing transportation, scheduling, and access challenges for families.
- c. Strengthen continuity of care through integrated scheduling, follow-up, patient navigation, and coordination across clinic-based, school-based, and mobile services.

By achieving these objectives, the renovated pediatric clinic will provide a safe, supportive, and collaborative environment that enables the delivery of integrated nutrition and wellness services. The improved facility will support healthy growth, chronic disease prevention, and long-term well-being for children and families in Central O'ahu.

3. The public purpose and need to be served;

Nutrition and environmental conditions in early life play a significant role in children's physical development, metabolic health, emotional well-being, and academic success (Shonkoff et al., 2012; U.S. Department of Health and Human Services [HHS] & U.S. Department of Agriculture [USDA], 2020). Limited access to healthy foods, food insecurity, and lack of nutrition education are associated with increased risk of childhood obesity and chronic disease (Cook & Frank, 2008; Gundersen & Ziliak, 2015).

The public purpose of this project is to respond to the critical need for equitable, preventive pediatric health services that reduce childhood obesity and nutrition-related chronic disease among underserved communities in Central O'ahu. Children and families served by Wahiawā Health experience disproportionate challenges related to food insecurity, economic hardship, limited access to preventive care, and unaddressed social stressors that directly influence long-term health outcomes.

This project strengthens pediatric primary care infrastructure to support early intervention through integrated medical care, behavioral health services, social determinants of health support, and Food as Medicine strategies. Renovating and expanding Wahiawā Health's pediatric clinic enables the delivery of nutrition education and access to fresh, whole foods as part of routine pediatric care—improving prevention, reducing long-term health care costs, and promoting healthier outcomes for children and families in Central O'ahu.

4. Describe the target population to be served; and

The target population to be served by this project includes children and adolescents, along with their families, who reside within Wahiawā Health's service area and are at risk for childhood obesity, food insecurity, and nutrition-related chronic disease. These families often face economic instability, limited access to preventive health services, and social and environmental barriers that negatively impact nutrition, physical activity, and overall well-being.

Wahiawā Health serves a population that is predominantly low-income and medically underserved. Approximately 22.3% of residents in the service area live at or below 200% of the Federal Poverty Guidelines, and nearly half of Wahiawā Health's patients are Medicaid beneficiaries. Many families are uninsured or underinsured and experience challenges accessing consistent pediatric care, nutritious foods, and supportive services due to work schedules, transportation limitations, and rising living costs.

The service population includes multigenerational households, working-class families, agricultural and service workers, and families relying on gig or part-time employment.

These circumstances contribute to higher rates of food insecurity, chronic stress, and inconsistent access to healthy foods, increasing children’s risk for obesity and related health conditions.

Wahiawā Health serves a culturally diverse community that includes Native Hawaiian, descendants of plantation-era families, Pacific Islander communities (including Chuukese, Pohnpeian, Marshallese, and Yapese), and other immigrant and multicultural populations. Many families benefit from culturally responsive, family-centered approaches to nutrition education and wellness support. By prioritizing children and families, this project focuses on early, preventive intervention during critical developmental periods. Integrating nutrition care and Food as Medicine strategies into pediatric services ensures families receive timely support that promotes healthy growth, development, and long-term well-being.

5. Describe the geographic coverage.

The geographic coverage of this project includes Wahiawā Health’s Central O’ahu service area, encompassing the communities of Wahiawā, Mililani, Mililani Mauka, Whitmore Village, Poamoho Village, Upper Kunia, Waialua, and Mokolē’ia. This region serves approximately 108,323 residents and includes both rural and suburban communities with documented health and socioeconomic disparities.

Wahiawā, the primary site of this project, is a historically rural Central O’ahu community that experiences elevated rates of poverty, food insecurity, and limited access to preventive health services. According to the U.S. Census Bureau’s 2019–2023 American Community Survey, approximately 17.2% of Wahiawā residents live below the federal poverty level. Wahiawā’s designation as a rural community under USDA Rural-Urban Commuting Area (RUCA) codes further highlights the need for accessible, community-based pediatric health services.

Wahiawā Health is federally designated as a Health Professional Shortage Area (HPSA) for primary care, behavioral health, and dental services, with HPSA scores of 20 for primary care, 22 for dental health, and 22 for mental health. The service area is also designated as a Medically Underserved Population (MUP) with a score of 64.1—the highest on O’ahu—reflecting significant barriers to health care access and higher rates of chronic disease.

The renovated pediatric clinic in Wahiawā will serve as the central hub for integrated Pediatric Wellness services, supporting clinic-based care while coordinating with school-based health services and mobile outreach across the service area. This geographic approach ensures that children and families throughout Central O’ahu can access consistent, coordinated pediatric nutrition and wellness care.

III. Service Summary and Outcomes

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

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

The scope of work for this project includes the renovation and expansion of Wahiawā Health’s existing pediatric clinic to create a modern, integrated Pediatric Wellness environment that supports pediatric primary care, nutrition services, behavioral health support, and social determinants of health (SDOH) coordination. The project will modernize aging infrastructure, improve patient flow, and create dedicated space for nutrition counseling and wellness services that are not currently supported by the existing clinic layout.

This capital project is essential to implementing Wahiawā Health’s Pediatric Wellness Team model by ensuring that appropriate, safe, and functional clinical and administrative space is available for multidisciplinary care delivery. The scope of work includes interior renovations, furniture and medical equipment purchases, health information technology (IT) infrastructure upgrades, and workflow integration to support expanded pediatric services and staffing.

Interior Pediatric Clinic Renovation

Scope of Work:

Renovate the existing pediatric clinic interior to create private, child-friendly spaces that support integrated pediatric, nutrition, behavioral health, and wellness services while improving overall clinic functionality and patient experience.

Tasks and Responsibilities:

Interior Design and Space Planning

- a. Collaborate with contractors, architects, and clinical leadership to redesign the pediatric clinic layout to accommodate expanded services, including nutrition counseling, behavioral health support, and care coordination.
- b. Ensure the design supports patient privacy, infection control, accessibility, HIPAA compliance, and efficient patient flow.
- c. Incorporate child-friendly and trauma-informed design elements that promote comfort, safety, and reduced anxiety for children and families.

Renovation and Construction Activities

- a. Remove outdated finishes, fixtures, and non-functional interior elements.
- b. Install new flooring, paint, lighting, and partitioning to create functional exam rooms, counseling spaces, and team work areas.
- c. Upgrade electrical, plumbing, and air conditioning systems to support modern clinical operations, expanded equipment needs, and patient comfort.

Dedicated Nutrition and Wellness Space Development

Scope of Work:

Develop a designated nutrition and wellness area within the pediatric clinic to support individualized and family-based nutrition counseling and Food as Medicine interventions.

Tasks and Responsibilities:

- a. Create a dedicated space for nutrition counseling, education, and care planning.
- b. Furnish the space with appropriate seating, tables, and clinical equipment to support education, counseling, and multidisciplinary coordination.
- c. Design the area to support culturally responsive education aligned with the MyPlate framework and the Dietary Guidelines for Americans.

Furniture, Medical Equipment, and Clinical Technology

Scope of Work:

Procure and install furniture, medical equipment, and clinical technology necessary to support expanded pediatric services and increased staffing capacity.

Tasks and Responsibilities:

- a. Purchase pediatric-appropriate exam tables, infant and pediatric scales, vital sign equipment, and clinical furnishings for exam and counseling rooms.
- b. Procure workstations, computers, and monitors to support pediatric providers, medical assistants, registered dietitians, behavioral health staff, community health workers, and care coordinators.
- c. Ensure all furniture and equipment meet standards for infection control, accessibility, durability, and child safety.
- d. Coordinate delivery, installation, and testing of equipment to align with renovation completion.

Health Information Technology (IT) and Data Security Infrastructure

Scope of Work:

Upgrade health information technology infrastructure to support expanded clinical operations, increased staff capacity, and secure management of electronic health information.

Tasks and Responsibilities:

- a. Expand network infrastructure, including servers, cabling, and wireless access, to support additional workstations and clinical devices.
- b. Procure and install secure servers, firewalls, and network security tools to protect patient information and maintain HIPAA compliance.
- c. Implement enhanced cybersecurity measures, including data encryption, access controls, and system monitoring, to safeguard electronic health records and patient data.
- d. Coordinate with IT vendors and internal leadership to ensure systems are operational, secure, and integrated with Wahiawā Health’s electronic health record (EHR) platform.

Workflow Integration and Operational Readiness

Scope of Work:

Ensure the renovated space and upgraded infrastructure support effective implementation of the Pediatric Wellness Team model.

Tasks and Responsibilities:

- a. Coordinate with pediatric providers, medical assistants, nutrition staff, behavioral health professionals, and administrative leadership to align clinical workflows with the new space design.
- b. Adjust scheduling, room utilization, staffing workflows, and patient flow to maximize efficiency, privacy, and continuity of care.
- c. Prepare the clinic for full operational use through staff orientation, equipment testing, and final readiness assessments following renovation completion.

Project Management and Oversight

Scope of Work:

Provide oversight to ensure the project is completed on time, within budget, and in compliance with all applicable regulatory, safety, and funding requirements.

Tasks and Responsibilities:

- a. The Chief Executive Officer (CEO) and Chief Operations Officer (COO) will oversee project implementation, contractor coordination, and milestone completion. Leadership will ensure compliance with local, State, and Federal regulations, including building codes, safety standards, and data security requirements.
- b. The Finance Team will manage procurement, contract review, budget monitoring, and financial tracking in accordance with grant requirements.

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

Renovation activities, equipment procurement, and health information technology (IT) upgrades are anticipated to begin in **July 2026**, with full project completion targeted by **June 2027**, contingent upon the release of State grant funds.

Phase 1 – Planning, Design, and Project Preparation (July–September 2026)

- Finalize pediatric clinic renovation plans, construction drawings, and project schedule.
- Confirm specifications for furniture, medical equipment (exam tables, scales, workstations), and IT infrastructure.
- Coordinate renovation phasing with clinical operations to minimize service disruption.

- Engage contractors, architects, and IT vendors to support construction and technology planning.

Phase 2 – Procurement and Pre-Construction (October–December 2026)

- Procure construction materials, furniture, medical equipment, computers, servers, and network components.
- Finalize contractor and vendor agreements.
- Prepare clinic spaces for phased renovation, including temporary workflow adjustments to maintain patient services.
- Initiate installation planning for IT infrastructure, network upgrades, and security systems.

Phase 3 – Renovation, Installation, and Systems Integration (January–April 2027)

- Complete interior renovations, including flooring, walls, lighting, and mechanical system upgrades.
- Install furniture, fixtures, medical equipment, workstations, and clinical technology.
- Implement IT infrastructure upgrades, including servers, firewalls, network security systems, and workstation connectivity.
- Conduct required inspections, systems testing, and final walkthroughs to ensure safety, functionality, and compliance.

Phase 4 – Operational Transition and Full Implementation (May–June 2027)

- Transition Pediatric Wellness Team services into the renovated clinic space.
- Activate and optimize clinical workflows, IT systems, and security protocols.
- Monitor patient flow, space utilization, and staff workflows.
- Address any minor adjustments needed to achieve full operational readiness and program launch.

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

Wahiawā Health will implement a structured quality assurance and evaluation process to ensure the successful completion of the capital project and the effective use of the renovated space to support pediatric wellness services.

Key quality assurance elements include:

- **Executive Oversight:** The CEO will maintain direct oversight of project implementation, contractor performance, and timeline adherence.
- **Financial Controls:** A rigorous procurement and accounting process will be used to track project costs, ensure compliance with grant requirements, and prevent cost overruns.
- **Operational Review:** Clinical leadership will assess how well the renovated space supports service delivery, patient flow, and staff collaboration.
- **Continuous Improvement:** Feedback from staff and patients will be used to identify opportunities for workflow or space adjustments following project completion.

Evaluation findings will be documented and used to inform ongoing facility planning and service integration efforts.

- 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 following measures of effectiveness will be reported to the State agency through which grant funds are appropriated. These measures provide objective indicators of project progress and achievement.

Facilities Measures

1. Construction Initiation:

- Initiate pediatric clinic renovation activities no later than December 31, 2026, or within the granting period following the release of State funds.

2. Project Completion:

- Complete the pediatric clinic renovation, including installation of all furniture, fixtures, and equipment, by June 30, 2027.

Operational Measures

1. Clinic Readiness:

- Percentage of renovated pediatric clinic space fully operational and in use for pediatric wellness services.

2. Service Integration:

- Number of pediatric visits utilizing the renovated space for nutrition counseling and wellness services.

Preventive and Nutrition Care Measures

Baseline Data to Be Collected (Pre-Renovation)

Baseline data will be collected for **200 pediatric patients annually** receiving care through Wahiawā Health's pediatric services prior to completion of the pediatric clinic renovation.

1. Preventive Nutrition and Food Insecurity Screening

- Number of pediatric patients receiving standardized nutrition risk and food insecurity screening during routine pediatric visits: **200 pediatric patients annually**.

2. Nutrition Counseling Services

- Number of pediatric patients receiving individualized or family-based nutrition counseling services delivered by a Registered Dietitian or Pediatric Wellness Team member: **200 pediatric patients annually**.

Post-Implementation Measures (After Renovation)

1. Increase in Preventive Nutrition and Food Insecurity Screening

- Achieve at least a **25% increase** in the number of pediatric patients screened for nutrition risk and food insecurity during routine pediatric visits following clinic renovation and workflow integration.
- *Target measure:* Increase from **200 to at least 250 pediatric patients screened annually**.

2. Increase in Nutrition Counseling and Education Utilization

- Achieve at least a **30% increase** in the number of pediatric patients receiving nutrition counseling, education, or Food as Medicine-related services delivered by the Pediatric Wellness Team.
- *Target measure:* Increase from **200 to at least 260 pediatric patients receiving nutrition counseling annually**.

3. Expansion of Food as Medicine Interventions

- Track the number of pediatric patients and families receiving nutrition prescriptions and connections to fresh, locally sourced farm food boxes through Food as Medicine partnerships following clinic renovation.
- *Target measure:* At least **150 pediatric patients or families annually** connected to farm-fresh food access as part of clinical care.

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 2027.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$137,500.00	\$137,500.00	\$137,500.00	\$137,500.00	550,000.00

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
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 2027 for program funding.
Wahiawā Health has successfully secured a range of government contracts, grants, and grants-in-aid to support its operational programs over the past three years. For further details, please refer to the attached document titled "Government Contracts, Grants, and Grants-in-Aid."
6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2025.
Wahiawā Health's unrestricted current assets as of December 31, 2025, are \$2,323,167.86

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.

Chief Executive Officer: Bev Harbin

Bev Harbin serves as Chief Executive Officer (CEO) of Wahiawā Health and founded the health center in 2012, securing the foundational grant funding, facilities, and infrastructure necessary to establish Wahiawā Health as a community-based safety-net provider. Her leadership is central to the organization's capacity to manage capital projects, oversee renovations, and implement grant-funded services.

Under her direction, Wahiawā Health has successfully planned, financed, and completed renovations of four medical suites, transforming previously underutilized or aging spaces into fully operational clinical environments supporting medical, behavioral health and pharmacy services. These renovations were completed through competitive state and federal grants and required coordination of contractors, compliance with regulatory requirements, and integration into ongoing clinical operations—all while maintaining uninterrupted patient care.

Mrs. Harbin brings extensive experience in grant acquisition, grant compliance, and long-term sustainability planning. She holds a Bachelor of Arts in Political Science and Women's Studies, which informs her leadership approach grounded in health equity, community engagement, and systems-level solutions. As CEO, she is responsible for strategic planning, decisions, executive oversight of all grants and contracts, supervision of senior leadership, and Board engagement.

Her proven ability to translate grant funding into functional, sustainable clinical infrastructure demonstrates Wahiawā Health's readiness and appropriateness to manage the proposed pediatric clinic renovation and expansion.

Verifiable Experience of Related Projects (Past Three Years)

Wahiawā Health has successfully completed and managed the following relevant grant-funded projects and capital improvements within the past three years:

1. Renovation and Expansion of Medical Suites (Multiple Phases)

- Renovation of four medical suites to support integrated medical, behavioral health, pharmacy, and pediatric services.
- Included interior demolition, reconfiguration, HVAC upgrades, furniture procurement, and workflow redesign

2. Establishment of Fixed-Site School-Based Health Care Clinic

- Planning, renovation, and launch of a permanent school-based health clinic at Ka'ala Elementary School
- Coordination with Department of Education, contractors, and grant funders

3. Mobile Medical and Behavioral Health Unit Expansion

- Grant-funded outfitting and deployment of mobile health services supporting pediatric, behavioral health, and preventive care

These projects demonstrate Wahiawā Health's capacity to manage capital improvements, comply with grant requirements, and translate funding into sustainable service delivery infrastructure.

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.

Wahiawā Health has expanded and strengthened its service delivery infrastructure to support comprehensive, school-based, mobile, and community-based care across Central O'ahu. Wahiawā Health's main headquarters and primary clinical site is located at 302 California Avenue, Suites 105, 106, 107, 208, 214, 216 and 217, which serves as the central hub for pediatric, primary care, behavioral health, specialty services. This site is currently being enhanced through a grant-supported pediatric clinic renovation designed to support integrated pediatric and behavioral health services within a family-centered, trauma-informed care environment.

Building on this foundation, Wahiawā Health has added the Waialua Community Clinic, located at 67-292 Goodale Avenue, Suites which has been recently acquired and is in the process of being renovated. The Waialua Clinic will provide family medicine, primary care, women's health, mental health services, case management, and care coordination, expanding access to fixed-site services for students and families in Waialua and surrounding communities.

To support outreach and school-based service delivery, Wahiawā Health operates a two-operatory mobile medical and mental health bus and a two-operatory mobile dental clinic bus, allowing services to be delivered directly on school campuses and within the community. Wahiawā Health provides a hybrid model of care designed to meet the diverse needs of the community, with services delivered through face-to-face clinic

visits, telehealth appointments, on-campus school-based services, and mobile outreach. An outreach van is utilized for school-based visits, community health fairs, outreach to individuals experiencing homelessness and encampments, and home visits, extending care beyond traditional clinic walls.

In addition, Wahiawā Health has established a dedicated on-campus clinical space at Ka‘ala Elementary School, where medical, behavioral health, and social services are provided in a private and accessible setting. This integrated infrastructure enables Wahiawā Health to deliver timely, coordinated care across clinic, school-based, and mobile settings while maintaining flexibility, accessibility, and continuity for students and families.

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.

Wahiawā Health has the staffing capacity, leadership experience, and administrative infrastructure necessary to successfully implement and sustain the proposed pediatric clinic renovation and integrated Pediatric Wellness model. The project will be supported by an established multidisciplinary team that combines executive leadership, clinical expertise, and operational oversight to ensure effective implementation, compliance, and long-term viability.

Project Leadership and Oversight

Project Director: Bev Harbin, Chief Executive Officer

Bev Harbin serves as Chief Executive Officer (CEO) of Wahiawā Health and founded the health center in 2012, securing the foundational grant funding, facilities, and infrastructure necessary to establish Wahiawā Health as a community-based safety-net provider. She will serve as the Project Director for this request and is responsible for overall project leadership, capital oversight, and grant accountability.

Under her direction, Wahiawā Health has successfully planned, financed, and completed renovations of four medical suites, transforming previously underutilized or aging spaces into fully operational clinical environments supporting medical, behavioral health, and pharmacy services. These projects were funded through competitive state and federal grants and required coordination with contractors, architects, and regulatory agencies, while maintaining uninterrupted clinical operations.

Ms. Harbin brings extensive experience in grant acquisition, capital project management, regulatory compliance, and sustainability planning. She holds a Bachelor of Arts in Political Science and Women's Studies, which informs her leadership approach grounded in health equity, community engagement, and systems-level solutions. As CEO, she provides executive oversight of all grants and contracts, supervises senior leadership, ensures Board engagement and accountability, and guides strategic planning and resource allocation. Her proven track record demonstrates Wahiawā Health's readiness and appropriateness to manage the proposed pediatric clinic renovation and expansion.

Proposed Pediatric Wellness Staffing Pattern and Service Capacity

The renovated pediatric clinic will support a **Pediatric Wellness Team** model that integrates medical, nutrition, behavioral health, and social determinants of health services within pediatric primary care. Staffing will include:

- **Pediatric Providers (Physicians / Nurse Practitioners):** Deliver pediatric primary care, preventive services, and referrals.
- **Medical Assistants:** Support patient intake, screening (BMI, nutrition risk, food insecurity), care coordination, and clinic flow.
- **Registered Dietitian:** Provide individualized and family-based nutrition counseling aligned with the Dietary Guidelines for Americans and MyPlate framework.
- **Licensed Clinical Social Worker (LCSW):** Address behavioral health needs, psychosocial stressors, and provide SDOH navigation related to food insecurity, housing, and family support.
- **Community Health Workers (CHWs):** Conduct outreach, patient education, follow-up, and navigation to community resources and Food as Medicine supports.
- **Nutrition Program Coordinator:** Coordinate Food as Medicine partnerships, manage fresh farm food distribution logistics, and support program tracking and reporting.
- **Administrative and Care Coordination Staff:** Support scheduling, referrals, data tracking, and continuity of care.

This staffing pattern is appropriate to support expanded service capacity enabled by the renovated clinic, including increased pediatric visits, nutrition counseling encounters, behavioral health services, and Food as Medicine interventions.

Supervision, Training, and Administrative Direction

Wahiawā Health maintains clear supervisory structures and established training protocols to support staff performance, quality assurance, and compliance. Clinical staff are supervised by the Chief Medical Officer and Director of Clinical Operations, while

programmatic and operational staff receive oversight from executive leadership, including the CEO and Chief Operations Officer.

Training and supervision will include:

- Orientation to renovated clinic workflows and space utilization
- Ongoing training on nutrition screening, Food as Medicine protocols, and culturally responsive care
- Behavioral health and trauma-informed care training for pediatric teams
- Compliance training related to HIPAA, data security, and patient confidentiality
- Regular multidisciplinary team meetings to support care coordination and continuous quality improvement

Administrative direction for the project will be provided by the CEO, COO and grants management team in collaboration with senior leadership, ensuring alignment with grant requirements, budget oversight, reporting obligations, and long-term sustainability planning.

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.

Please see attached Wahiawa Health's organization chart.

3. Compensation

The applicant shall provide an annual salary range paid by the applicant to the three highest paid officers, directors, or employees of the organization by position title, not employee name.

Chief Executive Officer: \$228,000

Chief Operating Officer and Director of Pharmacy: \$240,000

Physician: \$355,000

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.

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.

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.

4. Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2027 the activity funded by the grant if the grant of this application is:

- (a) Received by the applicant for fiscal year 2027, but
- (b) Not received by the applicant thereafter.

Wahiawā Health operates under established payer contracts and reimbursement structures, including Med-QUEST (Medicaid), Medicare, and commercial insurance. Pediatric services delivered within the renovated clinic—as well as through school-based health care sites and mobile health units—are billable for allowable encounters, including preventive well-child visits, BMI screening, nutrition counseling, behavioral health services, chronic disease risk assessment, and primary care visits. These reimbursement mechanisms provide a stable and ongoing revenue stream that supports staffing, care coordination, and service delivery in the renovated pediatric space beyond the grant period.

The organization is actively advancing its care delivery model toward quality-based reimbursement and value-based care. The renovated clinic supports this transition by improving patient flow, care coordination, and the co-location of services necessary to meet performance measures related to preventive care, nutrition screening, behavioral health integration, chronic disease prevention, and reductions in avoidable emergency department utilization. The Pediatric Wellness Team model—enabled by the renovated space—directly supports these value-based objectives by emphasizing early intervention, family-centered care, and continuity across clinical, school-based, and mobile settings.

In addition to fee-for-service and value-based reimbursement, Wahiawā Health will continue to leverage diversified funding sources, including federal and state grants, private foundation funding, and strategic community partnerships, to support program enhancements, workforce development, and innovation. Grant funding is used strategically to support capital improvements, pilot evidence-based interventions such as Food as Medicine, and strengthen care coordination infrastructure, while ongoing clinical services delivered in the renovated pediatric clinic are sustained through payer reimbursement.

The integration of pediatric wellness services across Wahiawā Health’s fixed-site clinics—including the newly renovated pediatric clinic—school-based health care sites, mobile medical and mental health units, and the Waialua Clinic further strengthens sustainability by promoting efficient use of staff, shared infrastructure, and seamless continuity of care. The renovated pediatric clinic serves as a long-term asset that supports system-wide pediatric wellness services and long-term patient engagement. Through this one-time capital investment, established reimbursement pathways, continued movement toward value-based care, strong payer and community partnerships, and full integration within Wahiawā Health’s comprehensive safety-net pediatric care model, Wahiawā Health is well positioned to sustain the Pediatric Wellness Team and its impact on childhood obesity prevention and nutrition-related chronic disease risk well beyond the grant period.

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2026 to June 30, 2027

Applicant: The Wahiawa Center for Community Health

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				
2. Payroll Taxes & Assessments				
3. Fringe Benefits				
TOTAL PERSONNEL COST				
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				
7. Telecommunication				
8. Utilities				
9.				
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TOTAL OTHER CURRENT EXPENSES				
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL	550,000			
TOTAL (A+B+C+D+E)				
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested		Shekinah Tolentino	808-622-1618	
(b) Total Federal Funds Requested		Name (Please type or print)	Phone	
(c) Total County Funds Requested			Jan 21, 2026	
(d) Total Private/Other Funds Requested		Signature of Authorized Official	Date	
TOTAL BUDGET		Beverly Harbin, CEO		
		Name and Title (Please type or print)		

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2026 to June 30, 2027

Applicant: _____

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				
JUSTIFICATION/COMMENTS:				

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, 2026 to June 30, 2027

Applicant: The Wahiawa Center for Community Health

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						
LAND ACQUISITION						
DESIGN						
CONSTRUCTION		\$400,000.00	\$450,000.00			
EQUIPMENT			\$100,000.00			
TOTAL:		\$400,000.00	\$550,000.00			
JUSTIFICATION/COMMENT	The renovation and expansion costs are necessary to modernize an aging pediatric clinic so it can safely and effectively support integrated pediatric, nutrition, behavioral health, and Food as Medicine services. The existing space cannot accommodate multidisciplinary care, expanded staffing, modern medical equipment, or the secure IT infrastructure required to protect patient information. These one-time capital improvements will strengthen preventive care delivery and support long-term health outcomes for children and families in Central O'ahu.					

GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID

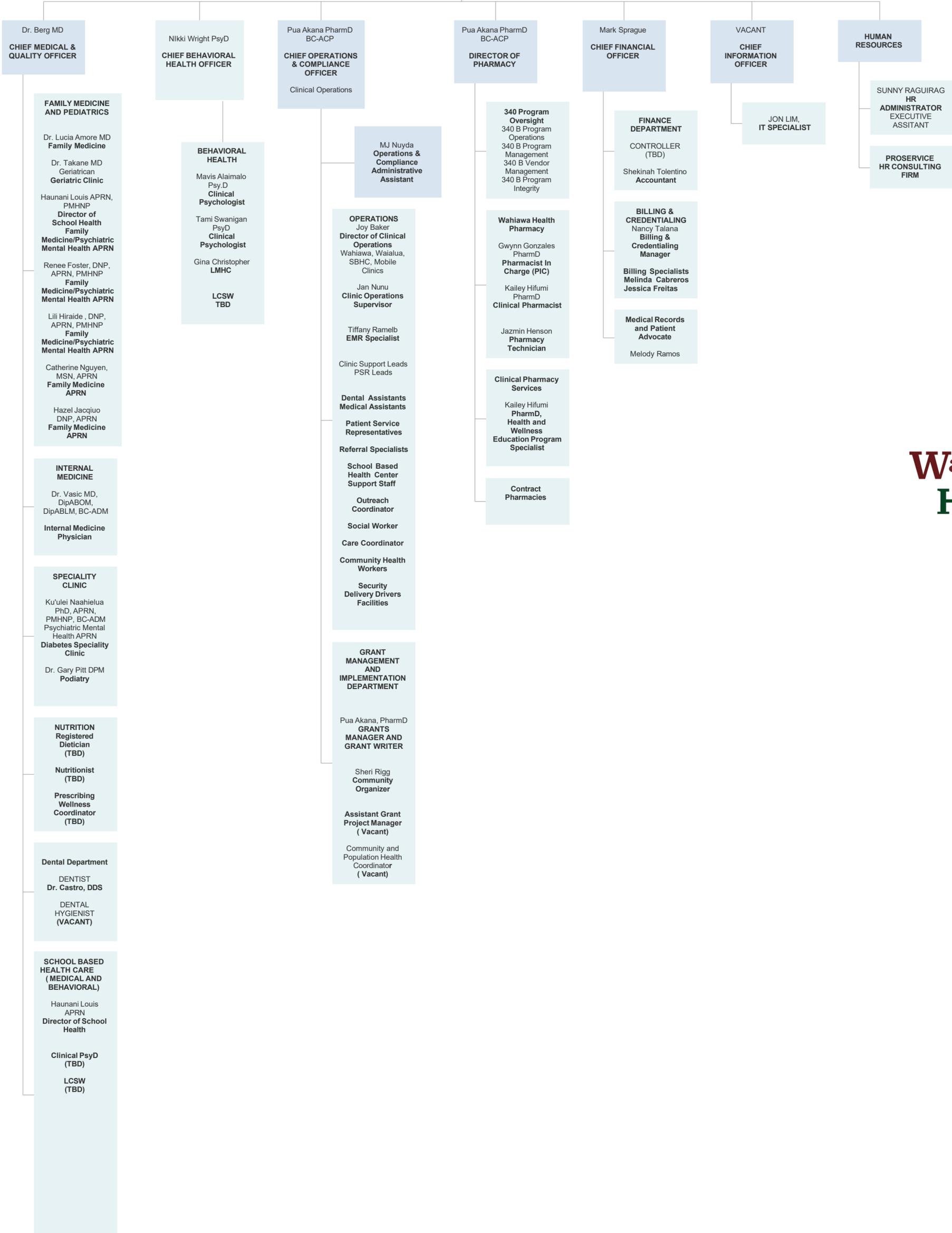
Applicant: The Wahiawa Center for Community Health

Contracts Total: 3,349,984

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S./State/Hawaii/ Honolulu/ Kauai/ Maui County)	CONTRACT VALUE
1	City and County Grants-in-Aid (GIA)	10/01/2022 - 03/31/2024	City & County of Honolulu	Honolulu County	199,984
2	State Grants-in-Aid: Cost Related to Covid-19 Programs in Wahiawa/Mililani/Wailua Complex	04/01/2023 - 03/31/2024	Department of Labor and Industrial Relations	State	400,000
3	State Grants-in-Aid (GIA) 2023-2024 School Health Partnership Program Expansion	07/01/2023 - 06/30/2025	Department of Health	State	500,000
4	State Grants-in-Aid (GIA) 2025-2026	TBA	Department of Health	State	200,000
5	State Grants-in-Aid (GIA) 2025-2026 Capital Improvement project (Pediatric Renovation)	TBA	Department of Accounting and General Services	State	400,000
6	City and County Grants-in-Aid (GIA): Waialua Mental Health and Substance Use Disorder Services	11/01/2025 - 10/31/2026	City & County of Honolulu	Honolulu County	150,000
7	State Grants-in-Aid (GIA) 2024-2025 Community Partnership Model of Care Expansion	07/01/2024 - 06/30/2026	Department of Health	State	250,000
8	ACT 310 Aloha United Way	12/01/2025 - 11/30/2025	Hawaii State Legislature	State	1,250,000
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Board of Directors

BEV HARBIN
CHIEF EXECUTIVE OFFICER



WahiawaCenterforCommunityHealth, The__CIP

Final Audit Report

2026-01-21

Created:	2026-01-21
By:	Shekinah Tolentino (stolentino@wahiawahealth.org)
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-  Document emailed to Bev Harbin (bharbin@wahiawahealth.com) for signature
2026-01-21 - 10:32:01 PM GMT
-  Email viewed by Bev Harbin (bharbin@wahiawahealth.com)
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