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**COUNTY COUNCIL**  
COUNTY OF MAUI  
200 S. HIGH STREET  
WAILUKU, MAUI, HAWAII 96793  
[www.MauiCounty.us](http://www.MauiCounty.us)

April 2, 2025

Ms. Lori Tsuhako, Director  
Department of Human Concerns  
County of Maui  
Wailuku, Hawaii 96793

Dear Ms. Tsuhako:

SUBJECT: **FISCAL YEAR 2026 BUDGET** (BFED-1) (HC-02)

May I please request you be prepared to answer the following questions at the BFED Committee meeting on **April 10, 2025**.<sup>\*</sup> This will enable the Committee to comprehensively review the FY 2026 Budget.

May I further request that, after approval by the Office of the Mayor, you transmit your answer to [bfed.committee@mauicounty.us](mailto:bfed.committee@mauicounty.us) by the end of the day on **April 10, 2025**. *\*Date subject to change without notice.*

**Overall**

1. Relating to the Administration Program, Goal #3, item 1:
  - a. Why is the number of inter-agency/inter-departmental collaborations anticipated to decline from 56 in FY 2024 to 30 in FY 2026? (Page 418, Program Budget) (NUH)
2. Relating to the Human Concerns Program – Homeless Program, Goal #1:
  - a. For item 1, please provide a list of homeless service providers that have common clientele.
  - b. For item 2, why is the number of homeless individuals, whose homelessness was resolved by placement into permanent

housing anticipated to decline from 781 in FY 2024 to 700 in FY 2026? Please explain why a more effective program would result in less homeless individuals placed in permanent housing. (Page 449, Program Budget) (TK)

3. Relating to the Human Concerns Program – Senior Services, Goal #3, item 1:
  - a. For FY 2025, the Department estimated it would provide 12,000 one-way rides to seniors. Does the Department have a registry of seniors who require transportation during an emergency? If not, would the Department support the development of a medical needs registry to assist Maui County’s elderly and disabled during a disaster? (Page 455, Program Budget) (SS) (TP)
4. Does the Department have a status update on the mobile hygiene unit parked at Hale Makana O Waiale? If the unit is operable, please clarify whether it is in use. If not operable, what is the cost to restore it to working condition? (SS)
5. Following the ECONorthwest Report, entitled “Recommendations to Address Homelessness in Maui County,” what actions will the Department take to fulfill the Report’s recommendations. Will the Department take the lead in increasing coordination and collaboration between stakeholders so a strategic plan to address houselessness can be developed? (TP)
6. What steps are the Department taking to prepare elderly and disabled residents for unplanned evacuations? (TP)
7. Please explain how the Department’s FY 2026 proposed budget supports the three priorities identified in Mayor Bissen’s 2025 State of the County Address:
  - a. Kama‘āina Housing;
  - b. Recovery and Well-Being; and
  - c. Natural and Cultural Resources. (YLS)

**Salaries and Wages (Category “A”)**

1. Please explain the Department’s change of \$160,500 for Other Premium Pay from -\$102,735 in FY 2025 and the proposed \$57,765 in FY 2026. How will this decrease serve the Department and Maui County’s residents? (Page 416, Program Budget) (NUH)
2. Please explain why the following positions are under the Human Concerns’ Senior Services Division and not the Department of Parks and Recreation:
  - a. P-26007 Park Caretaker I;
  - b. P-26043 Park Caretaker II;
  - c. P-28518 Park Caretaker I;
  - d. P-28519 Park Caretaker I;
  - e. P-29300 Park Caretaker I (HT); and
  - f. P-29604 Park Caretaker I. (Pages 12-8 and 12-9, Budget Details) (SS)
3. Have the Homeless Program Coordinator and Homeless Program Specialists under the Homeless Program, Index Code 925074A, received trauma-informed and harm-reduction training? If not, will the Department mandate this training for all personnel who conduct outreach to the houseless community, as recommended by the ECONorthwest Report? (Page 12-10, Budget Details) (SS)

**Operations and Equipment (Category “B”)**

1. Please explain the \$1,902,110 decrease in the Department’s Other Costs and what impact this will have on the Department’s operations. (Page 416, Program Budget) (NUH)
2. How does the Department plan to manage potential shortfalls in outreach or services for grant line-items that have been reduced in the Human Concerns Program? Does the Department believe they

can still provide equitable services with the funding allocated for FY 2026? (Pages 427-441, Program Budget) (NUH)

3. Please provide a list of all grant applicants who applied for funding from the Department in FYs 2025 and 2026, including the organization's name, program name, amount requested, and amount recommended or approved by the Department. (GJ)
4. Does the Department restrict how County grant subsidy recipients use funds? If a recipient wants to use the funds for services that assist the houseless community, but may fall outside the established scope, can they apply for an exemption? (SS)
5. For the Meals Program, Index Code 925035B:
  - a. Will the \$47,000 being transferred out of the program impact the number of meals provided, seniors served, or the quality of food? (Page 12-15, Budget Details) (GJ)
6. Please justify the reduction in grant funding for the following:
  - a. Substance Abuse Programs, Index Code 925033B; and
  - b. Youth Programs, Index Code 925045B. (Pages 12-20, 12-27, and 12-28, Budget Details) (GJ)
7. For the Food, Shelter, and Safety Grants, Index Code 925031B: (Pages 427-428, Program Budget and Page 12-20, Budget Details)
  - a. Please explain how the Department will allocate the grants, and how much each entity will receive. (TP) (TK)
  - b. Please provide copies of all the program's grants and contracts for FY 2025. (GJ)
  - c. Will Aloha House, Inc. – Residential Substance Abuse Treatment receive a Food, Shelter, and Safety grant in FY 2026? (TK)
    - i. Please provide the number of people assisted, on average each FY, including those who successfully



completed treatment. Of those seeking treatment, approximately how many end up not completing treatment, or relapse and seek re-treatment? (TK)

8. For Maui AIDS Foundation, Inc., Index Code 925079B, please explain why they are not receiving a grant for FY 2026. (Page 427, Program Budget and Page 12-20, Budget Details) (TK) (NUH) (GJ)
9. For Malama Family Recovery Center, Index Code 925078B, please explain why they are not receiving a grant for FY 2026. (Page 427, Program Budget and Page 12-20, Budget Details) (NUH) (GJ)
10. For Grants and Disbursements for Early Childhood Programs: (Page 428, Program Budget)
  - a. Please explain how the Department will allocate the grants, and how much each entity will receive. (TP)
  - b. Please explain the asterisk beside the following grantees or programs on page 428 of the Program Budget:
    - i. Early Childhood Programs;
    - ii. Maui Economic Opportunity, Inc., for Head Start Afterschool & Summer Programs;
    - iii. Maui Family Support Services, Inc.; and
    - iv. Partners in Development Foundation. (TK)
11. For the Early Childhood Programs, Index Code 925041B:
  - a. Will the following programs be funded by Early Childhood Programs in FY 2026? If so, please provide how the funds will be allocated to each program:
    - i. Maui Family Support Services – Early Childhood Subsidy Program;
    - ii. Maui Family Support Services – Early Childhood Resource Center and Literacy Programs;

- iii. People Attentive to Children Early Childhood Workforce Recruitment and Continuous Quality Improvement Program;
  - iv. Imua Family Services – Infant and Early Childhood Services Program; and
  - v. Family Hui Hawaii – Hui for Hope. (Pages 428-429, Program Budget and Page 12-20, Budget Details) (TK)
12. For the Maui Family Support Services – Early Childhood Resource Center and Literacy Programs, Index Code 925064B, does the Commission on Children and Youth provide guidance on the distribution of these funds? (Pages 428, Program Budget and Page 12-21, Budget Details) (TP)
13. For Services to the Frail and Elderly, Index Code 925069B, does the Council on Aging provide guidance on the distribution of these funds? (Page 433, Program Budget and Page 12-24, Budget Details) (TP)
14. For Habitat for Humanity Maui, Index Code 925070B, please provide the number of “qualifying disabled and low-income older adults” that have received assistance under this program. (Page 432, Program Budget and Page 12-24, Budget Details) (TK)
15. Please outline the Department’s priority needs for budget increases for the following organizations:
- a. Houseless Programs;
  - b. Kohala Coast Urgent Care, LLC.;
  - c. Maui Food Bank, Inc.;
  - d. Mental Health Programs; and
  - e. Molokai Rural Health Association. (Pages 432-433, Program Budget) (NUH)
16. For Houseless Programs, Index Code 925059B: (Pages 432-434 and 448, Program Budget and Page 12-24, Budget Details)

- a. Please provide a breakdown of how the Department will allocate these funds and explain how the FY 2026 approach differs from previous fiscal years when the County funded programs, such as street medicine, that never materialized. (TP)
- b. Please explain how the funds will be allocated to the following agencies:
  - i. Family Life Center, Inc. – Case Management;
  - ii. Family Life Center, Inc. – Outreach;
  - iii. Family Life Center, Inc. – Molokai Homeless Assistance;
  - iv. Ka Hale A Ke Ola Homeless Resource Centers - Central Operations and Step Up Program;
  - v. Legal Aid Society of Hawaii – Holistic Legal Services for Maui County’s Most Vulnerable;
  - vi. Mental Health Kokua - Homeless Outreach for Mental Health Empowerment and Psychosocial Rehabilitation;
  - vii. Project Vision – Hele for Health & Homeless Outreach; and
  - viii. Arising needs as determined by the Department. (Pages 433-434, Program Budget) (SS)
- c. Please provide a current description of each vendor receiving funding under the program, including how they administer assistance to the houseless community on Maui. (SS)
- d. Please explain the Department’s plans for the proposed \$850,000 expansion for the Safe Parking Program, and whether these funds are sufficient to create and operate the program. (YLS)
- e. Please provide copies of all the program’s grants and contracts for FY 2025. (GJ)

- f. Please provide the nature of the 375 complaints and inquiries the program received in FY 2025 regarding houselessness. (SS)
  - g. When allocating funds under the program, does the Department consider which organizations are nonprofit and for-profit? Why or why not? (SS)
  - h. Is there an agency in Maui County that assists houseless individuals connect with family on the continent? If so, how many houseless individuals have received this assistance? (SS)
  - i. How does the program utilize the Maui County Coordinated Entry System with the Homeless Management Information System when there is no available shelter space in Maui County to offer the houseless community? (SS)
- 17. For Immigrant and Migrant Services, Index Code 925080B, given the shift in Federal policy on immigration, will the proposed \$400,000 in FY 2026 put the County at risk to lose Federal funding? (Page 432, Program Budget and Page 12-25, Budget Details) (TK)
- 18. For Aloha House, Inc. – Enhanced Coordination Care Program, Index Code 925028B, please provide the number of people Aloha House, Inc. has been able to successfully assist or treat under their Enhanced Coordination Care Program. (Page 430, Program Budget and Page 12-27, Budget Details) (TK)
- 19. Please explain how the proposed \$555,000 in FY 2026 will be allocated among the programs for Substance Abuse:
  - a. Aloha House, Inc. – Medically Monitored Detoxification Services;
  - b. Ka Hale Pomaika'i – Moloka'i Substance Use Disorder Treatment, Recovery and Support;
  - c. Maui Family Support Services, Inc. – Teen Voices Program;

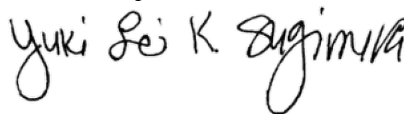
Ms. Lori Tsuhako  
April 2, 2025  
Page 9

- d. Maui Youth and Family Services – Substance Abuse Treatment for Adolescents; and
  - e. Arising needs as determined by the Department. (Page 431, Program Budget) (TK)
20. For Youth Programs, Index Code 925045B, please provide a list of work training programs funded by the grant and explain how the funds will be allocated. (Page 438, Program Budget and Page 12-28, Budget Details) (TP)
21. Does the Council on Aging and the Commission on Persons with Disabilities provide guidance on the distribution of the grants listed on pages 463 and 464 of the Program Budget? (Pages 463-464, Program Budget) (TP)

To ensure efficient processing, please duplicate the coding in the subject line above for easy reference.

Thank you for your attention to this request. Should you have any questions, please contact me or the Committee staff (Kirsten Szabo at ext. 7662, James Krueger at ext. 7761, Jarret Pascual at ext. 7141, Clarissa MacDonald at ext. 7135, or Pauline Martins at ext. 8039).

Sincerely,



YUKI LEI K. SUGIMURA, Chair  
Budget, Finance, and Economic  
Development Committee

bfed:2026bgt:250401ahc01:clm

cc: Mayor Richard T. Bissen, Jr.  
Budget Director  
Deputy Director of Human Concerns

## BFED Committee

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**From:** BFED Committee  
**Sent:** Thursday, April 3, 2025 11:36 AM  
**To:** loriann.tsuhako@co.maui.hi.us  
**Cc:** BFED Committee; 'Jessica C.'; kimberly.ferguson@co.maui.hi.us; 'Michelle Santos'; 'Zeke Kalua'; Lesley Milner; kristina.cabbat@co.maui.hi.us; tiare.p.horner@co.maui.hi.us; Janina Agapay  
**Subject:** FISCAL YEAR 2026 BUDGET (BFED-1) (HC-02); reply by 4/10/25  
**Attachments:** (HC-2) Correspondence to Human Concerns 04-02-2025.pdf

**RICHARD T. BISSEN, JR.**  
Mayor

**LORI TSUHAKE**  
Director

**JESSICA CROUSE**  
Deputy Director



**DEPARTMENT OF HUMAN CONCERNS**  
COUNTY OF MAUI  
2200 MAIN STREET, SUITE 546  
WAILUKU, MAUI, HAWAII 96793  
PHONE: (808) 270-7805

April 8, 2025

Ms. Lesley Milner  
Budget Director, County of Maui  
200 South High Street  
Wailuku, Hawaii 96793

Honorable Richard T. Bissen, Jr.  
Mayor, County of Maui  
200 South High Street  
Wailuku, Hawaii 96793

**APPROVED FOR TRANSMITTAL**

*Richard T. Bissen, Jr.* 4-9-25  
Mayor Date

For Transmittal to:

Honorable Yuki Lei K. Sugimura, Chair  
Budget, Finance, and Economic Development Committee  
Maui County Council  
200 South High Street  
Wailuku, Hawaii 96793

Dear Chair Sugimura:

**SUBJECT: FISCAL YEAR ("FY") 2026 BUDGET (BFED-1) (HC-02)**

Thank you for your correspondence of April 2, 2025. The information requested in your letter is listed below in bold and is followed by the Department's responses.

**Overall**

**1. Relating to the Administration Program, Goal #3, item 1:**

- a. **Why is the number of inter-agency/inter-departmental collaborations anticipated to decline from 56 in FY 2024 to 30 in FY 2026? (Page 418, Program Budget) (NUH)**

The decline is attributed to the bifurcation of the Department of Housing and Human Concerns in FY 2025.

**2. Relating to the Human Concerns Program – Homeless Program, Goal #1:**

- a. For item 1, please provide a list of homeless service providers that have common clientele.**

The Department is unable to provide a verifiable response to this inquiry. Due to confidentiality standards/restrictions, it is difficult to determine which of the local service providers might be working with the same houseless individual. There are also many service providers that do not utilize the Homeless Management Information System (HMIS). The system has individual records of those persons served and does not sort these individual records according to engagement with current service providers. Each of the individual records has historical data that may have been input by different service providers. Providers rely on self-report of their clients to identify other agencies who are working with the same individual, and once written consent is obtained, are able to work together to assist and avoid duplicative efforts.

- b. For item 2, why is the number of homeless individuals, whose homelessness was resolved by placement into permanent housing anticipated to decline from 781 in FY 2024 to 700 in FY 2026? Please explain why a more effective program would result in less homeless individuals placed in permanent housing. (Page 449, Program Budget) (TK)**

The rate of exit from homelessness to permanent housing has been severely impacted by the lack of affordable rental units available in the community. In addition, in order to enable stable, permanent housing as an end to someone's homelessness, efforts to increase that person's income have to be achieved.

**3. Relating to the Human Concerns Program – Senior Services, Goal #3, item 1:**

- a. For FY 2025, the Department estimated it would provide 12,000 one-way rides to seniors. Does the Department have a registry of seniors who require transportation during an emergency? If not, would the Department support the development of a medical needs registry to assist Maui County's elderly and disabled during a disaster? (Page 455, Program Budget) (SS) (TP)**

Kaunoa knows which senior participants in its programs might need transportation. In an emergency, staff in each program calls at-risk senior participants to make them aware of the danger and ensure that they have transportation and food in case of evacuation. Follow-up wellness calls are made post-emergency. Kaunoa is limited in the kinds of transportation that can be provided for those with special needs beyond the job descriptions and training of its staff.



4. **Does the Department have a status update on the mobile hygiene unit parked at Hale Makana O Waiale? If the unit is operable, please clarify whether it is in use. If not operable, what is the cost to restore it to working condition? (SS)**

The Department does not know the status and condition of the mobile hygiene unit at Hale Makana O Waiale as it was transferred to the Maui Police Department (MPD) at their request. The unit should be in MPD's inventory, and questions regarding the unit should be directed to that department.

5. **Following the ECONorthwest Report, entitled "Recommendations to Address Homelessness in Maui County," what actions will the Department take to fulfill the Report's recommendations. Will the Department take the lead in increasing coordination and collaboration between stakeholders so a strategic plan to address houselessness can be developed? (TP)**

The Department has already followed through on one recommendation made by the EcoNorthwest report by issuing a Request for Proposal for a pilot Homeless Parking program. We are awaiting proposals (due on May 16, 2025) and will follow through with all of the procurement requirements to initiate this program.

Additionally, the Department has already begun to plan for additional training for department staff on Trauma Informed Care and Harm Reduction. Our intention is to make these training opportunities available to the larger social service community as well. In addition to these actions, the Department has offered to conduct/facilitate trainings on topics such as HUD's Notice of Funding Opportunities (NOFO) issued for homeless services. We are hopeful that increasing our community's capacity to understand the larger landscape of federal, state, and County funding may lead to higher levels of collaboration and partnership.

Other opportunities to increase collaboration and coordination include our continued work with the Department of the Prosecuting Attorney to re-initiate the Community Court model.

6. **What steps are the Department taking to prepare elderly and disabled residents for unplanned evacuations? (TP)**

The Department understands that preparing elderly and disabled residents for unplanned evacuations requires a multi-faceted and collaborative approach that addresses individual, community, and system-level needs. Individual preparedness is key - empowering residents with the knowledge, tools, and resources to take action is the foundation of any effective emergency response.

To support this, the Department has implemented the following strategies:

1. **Empowering Individual Preparedness:** This includes guidance on creating personal evacuation plans, assembling emergency go-kits, understanding shelter options, and identifying support networks. Outreach is conducted through workshops, printed materials, and engagement at

community events or presentations to senior clubs and other community groups. We believe that informed and prepared individuals are more resilient during emergencies.

2. **Identification of High Risk Individuals:** MCOA maintains an “emergency preparedness” database of approximately 1,400 program participants receiving Kupuna Care or Title III services. This database is regularly updated through participant assessments, collecting vital information and reviewing this information annually with our participants. This information includes the following:

- Emergency contacts
- Designated evacuation locations
- Medical equipment needs (e.g., power-dependent devices)

This data has been shared with the Maui Emergency Management Agency (MEMA) during past emergency events to inform response efforts and identify needs during evacuations.

3. **Cross-Agency Collaboration:** We work with the Maui Emergency Management Agency and other local and state partners to ensure that the unique needs of seniors and persons with disabilities are integrated into all phases of emergency management—from planning and preparedness to response and recovery.
4. **Partnerships with Service Providers and other Organizations:** By coordinating with home- and community-based service providers which includes Meals on Wheels, we are able to identify individuals who may require additional support during evacuations and ensure service continuity before, during, and after a disaster.

The Maui County Office on Aging recently participated in meetings facilitated by AARP Hawaii to develop an emergency plan template for Independent Senior Housing properties. Meeting participants included the Area Agencies on Aging from all four counties, County Departments of Emergency Management, The State Fire Council, Hawaii Emergency Management Agency and the U.S. Department of Housing and Urban Development staff.

Once finalized, the template is intended to serve as a starting point for property managers and is designed to be customized for specific natural and manmade risks in their communities. Further community engagement efforts are being developed to support its implementation.

5. **Training and Simulation Exercises:** We participate in and promote community-based disaster drills and preparedness training facilitated by MEMA, which are essential to reinforcing evacuation protocols and identifying system gaps.
6. **Inclusive and Accessible Communication:** Our Department, through the commissions we staff, advocate that emergency-related materials and



alerts are developed with accessibility in mind, including large print formats, plain language versions, and translations in multiple languages, including American Sign Language, and use various formats such as texts and emails to ensure that information reaches as many people as possible, regardless of ability or background.

7. **Integration with New Technologies:** We are aware that MEMA will soon introduce an evacuation management system called Genasys, designed to send precise location-based alerts during emergencies or natural disasters. We intend to work closely with MEMA to understand how this new tool can be leveraged to effectively reach our elderly population and community members with disabilities.

Together, these efforts form a multi-faceted approach to emergency preparedness that balances individual responsibility/readiness with community coordination and systemic support. As we continue to recover from recent disasters such as the 2023 wildfires in Lahaina and Kula, we remain committed to improving our strategies and building resilience in our communities.

In furthering the Department's effort to educate and prepare kupuna on emergency situations, Kaunoha disperses evacuation and storm preparedness information from Maui Emergency Management or Maui County Office on Aging to senior participants via postings, phone calls, email, as well as delivery of printed information to homebound seniors. During an unplanned evacuation, Kaunoha staff identifies and calls senior participants in affected areas to alert them, give them evacuation info, assist with rides if necessary, and provide wellness checks post-emergency.

7. **Please explain how the Department's FY 2026 proposed budget supports the three priorities identified in Mayor Bissen's 2025 State of the County Address. (YLS)**

The Department of Human Concerns' FY 2026 proposed budget aligns with Mayor Bissen's priorities of kama'āina housing, recovery and well-being, and cultural and natural resources by providing both direct and indirect services to key populations, including seniors, immigrants, youth, and nonprofits.

For kama'āina housing, the budget supports access to resources and services for vulnerable groups, particularly seniors, through community-based programs and partnerships with local organizations that support our kupuna's ability to age in place and remain in their homes. The Department's launch of an RFP to administer a safe parking pilot program also strives to support more pathways to permanent housing for local residents. In the area of recovery and well-being, the budget allocates funding for mental health services, substance use recovery programs, and wellness initiatives targeting youth and senior populations, promoting overall well-being. Lastly, through the Department's Volunteer Center, the budget supports nonprofit volunteer efforts that foster the preservation of cultural traditions and natural resources, while providing greater opportunities for underserved communities to engage with and benefit from these spaces.

**Salaries and Wages (Category “A”)**

1. **Please explain the Department’s change of \$160,500 for Other Premium Pay from -\$102,735 in FY 2025 and the proposed \$57,765 in FY 2026. How will this decrease serve the Department and Maui County’s residents? (Page 416, Program Budget) (NUH)**

The increase is attributed to restoring the FY 2025 Council reductions noted as salary adjustments in the Human Concerns Program budget detail and is not expected to impact the Department’s ability to deliver essential services in FY 2026.

2. **Please explain why the following positions are under the Human Concerns’ Senior Services Division and not the Department of Parks and Recreation:**

- a. **P-26007 Park Caretaker I;**
- b. **P-26043 Park Caretaker II;**
- c. **P-28518 Park Caretaker I;**
- d. **P-28519 Park Caretaker I;**
- e. **P-29300 Park Caretaker I (HT); and**
- f. **P-29604 Park Caretaker I. (Pages 12-8 and 12-9, Budget Details) (SS)**

Kaunoa’s Park Caretakers (PC) are assigned to maintain its three properties – 2.5 PCs at the Spreckelsville campus, 2 PCs for West Maui, and 1 PC for the Lanai Senior Center. West Maui’s Park Caretakers are currently stationed at Spreckelsville but will be dispatched regularly to West Maui once a temporary location is established by the end of FY 2025. Park Caretakers specifically maintain the grounds, equipment, and buildings of Kaunoa’s centers. They also clean, set-up and re-set rooms between classes throughout the day and provide support to all Kaunoa’s programs.

3. **Have the Homeless Program Coordinator and Homeless Program Specialists under the Homeless Program, Index Code 925074A, received trauma-informed and harm-reduction training? If not, will the Department mandate this training for all personnel who conduct outreach to the houseless community, as recommended by the ECONorthwest Report? (Page 12-10, Budget Details) (SS)**

Currently the two Homeless Program Specialist positions are vacant and under recruitment. The Homeless Program Coordinator (and the Director) have received trauma informed and harm reduction training. A staff member from our Grants Management Division also participated in that training. Our contracted outreach workers have received similar training in the past. In May, the Maui Homeless Alliance is sponsoring a training by Mr. Iain DeJong, an internationally renowned



expert in homelessness. Trauma informed care and harm-reduction will be among the topics of that training. When staff are hired to fill the vacant Homeless Program positions, the Department is committed to providing trauma-informed care and harm reduction training for them.

**Operations and Equipment (Category “B”)**

1. **Please explain the \$1,902,110 decrease in the Department’s Other Costs and what impact this will have on the Department’s operations. (Page 416, Program Budget) (NUH)**

Most of the decrease is due to the transfer of the Animal Management Program grants from DHC to the Department of Agriculture in FY 2026, offset with expansion requests for various line-item grants, rental increases for office space and other miscellaneous costs.

2. **How does the Department plan to manage potential shortfalls in outreach or services for grant line-items that have been reduced in the Human Concerns Program? Does the Department believe they can still provide equitable services with the funding allocated for FY 2026? (Pages 427-441, Program Budget) (NUH)**

None of the grants proposed for funding under the FY 2026 budget are receiving a reduction from their FY 2025 award. Any appearance of funding reductions may be due to the consolidation of funding from multiple sources into one funding source.

3. **Please provide a list of all grant applicants who applied for funding from the Department in FYs 2025 and 2026, including the organization’s name, program name, amount requested, and amount recommended or approved by the Department. (GJ)**

Please see the attached table.

4. **Does the Department restrict how County grant subsidy recipients use funds? If a recipient wants to use the funds for services that assist the houseless community, but may fall outside the established scope, can they apply for an exemption? (SS)**

Grant budget guidelines and qualifying standards are provided as part of the grant application package and included in the DHC Grantee Handbook which is available on the Grants Management Division website. The budget guidelines and qualifying standards include any listed restrictions on the use of funds. Grantees that have already agreed to the terms of the qualifying standards and signed the terms of the grant agreement, but then want to change the scope of their program need prior approval before implementing any changes/deviations. The department does not restrict grantees from requesting changes but may be limited in its ability to agree to terms outside the approved scope and the grant agreement terms and conditions.

**5. For the Meals Program, Index Code 925035B:**

- a. Will the \$47,000 being transferred out of the program impact the number of meals provided, seniors served, or the quality of food? (Page 12-15, Budget Details) (GJ)**

There will be no negative impact to number of meals provided, seniors served or the quality of food. There was no reduction to the index code or the Nutrition Programs. Funds within the program were moved between sub-object codes based on projected costs for FY 2026. Kaunoa's Nutrition Program budget remains flat.

**6. Please justify the reduction in grant funding for the following:**

- a. Substance Abuse Programs, Index Code 925033B; and**

Funds were transferred from Substance Abuse Programs, (925033B) to Food, Shelter, and Safety, (925031B) to consolidate funding for grants funded in FY 2025 from both sources. None of the grants funded in FY 2025 from Substance Abuse Programs have been reduced in funding in FY 2026.

- b. Youth Programs, Index Code 925045B. (Pages 12-20, 12-27, and 12-28, Budget Details) (GJ)**

Funds were transferred from Youth Programs (925045B) to Suicide Prevention Molokai (925015B), Hana Youth Center (925018B), Kihei Youth Center (925019B), Lanai Youth Center (925047B), Big Brothers Big Sisters of Maui (925053B), and Maui Hui Malama (925056B) to consolidate funding for grants funded in FY 2025 from both sources. None of the grants funded in FY 2025 from Youth Programs have been reduced in funding in FY 2026.

**7. For the Food, Shelter, and Safety Grants, Index Code 925031B: (Pages 427-428, Program Budget and Page 12-20, Budget Details)**

- a. Please explain how the Department will allocate the grants, and how much each entity will receive. (TP) (TK)**

Please refer to the proposed allocations previously provided in DHC's response to (BFED-1 HC-01), question 12.a.

- b. Please provide copies of all the program's grants and contracts for FY 2025. (GJ)**

The request for these documents will be treated as UIPA request. A request for government records has been opened on the GovQA portal and will be responded to according to HRS 92F.

- c. Will Aloha House, Inc. – Residential Substance Abuse Treatment**



**receive a Food, Shelter, and Safety grant in FY 2026? (TK)**

- i. **Please provide the number of people assisted, on average each FY, including those who successfully completed treatment. Of those seeking treatment, approximately how many end up not completing treatment, or relapse and seek re-treatment? (TK)**

Aloha House's proposed FY 2026 award for Residential Substance Abuse Treatment program is \$175,000.

For FY 2024, Aloha House reported the following:

- 420 unduplicated persons served
- 192 participants successfully discharged

Specific data on individuals that leave without completing treatment and relapse is not currently reported.

8. **For Maui AIDS Foundation, Inc., Index Code 925079B, please explain why they are not receiving a grant for FY 2026. (Page 427, Program Budget and Page 12-20, Budget Details) (TK) (NUH) (GJ)**

Maui AIDS Foundation funding has been consolidated into Food, Shelter, and Safety general index code 925031B. There is no reduction in funding to the organization and the grants will receive the same amount of funding as awarded in FY 2025.

9. **For Malama Family Recovery Center, Index Code 925078B, please explain why they are not receiving a grant for FY 2026. (Page 427, Program Budget and Page 12-20, Budget Details) (NUH) (GJ)**

Malama Family Recover Center funding has been consolidated into Food, Shelter, and Safety general index code 925031B. There is no reduction in funding to the organization and the grant will receive the same amount of funding as awarded in FY 2025.

10. **For Grants and Disbursements for Early Childhood Programs: (Page 428, Program Budget)**

- a. **Please explain how the Department will allocate the grants, and how much each entity will receive. (TP)**

Please refer to the proposed allocations previously provided in DHC's response to (BFED-1 HC-01), question 12.a.

- b. **Please explain the asterisk beside the following grantees or programs on page 428 of the Program Budget:**

- i. **Early Childhood Programs;**
- ii. **Maui Economic Opportunity, Inc., for Head Start Afterschool & Summer Programs;**
- iii. **Maui Family Support Services, Inc.; and**
- iv. **Partners in Development Foundation. (TK)**

The Department apologizes for the oversight. The asterisk was used to signify internal review on the draft and was not deleted in the final program budget.

**11. For the Early Childhood Programs, Index Code 925041B:**

- a. **Will the following programs be funded by Early Childhood Programs in FY 2026? If so, please provide how the funds will be allocated to each program:**
  - i. **Maui Family Support Services – Early Childhood Subsidy Program;**
  - ii. **Maui Family Support Services – Early Childhood Resource Center and Literacy Programs;**
  - iii. **People Attentive to Children Early Childhood Workforce Recruitment and Continuous Quality Improvement Program;**
  - iv. **Imua Family Services – Infant and Early Childhood Services Program; and**
  - v. **Family Hui Hawaii – Hui for Hope. (Pages 428-429, Program Budget and Page 12-20, Budget Details) (TK)**

Please refer to the proposed allocations previously provided in DHC's response to (BFED-1 HC-01), question 12.a.

**12. For the Maui Family Support Services – Early Childhood Resource Center and Literacy Programs, Index Code 925064B, does the Commission on Children and Youth provide guidance on the distribution of these funds? (Pages 428, Program Budget and Page 12-21, Budget Details) (TP)**

No, the Commission does not currently provide input on funding allocations.

**13. For Services to the Frail and Elderly, Index Code 925069B, does the Council on Aging provide guidance on the distribution of these funds? (Page 433, Program Budget and Page 12-24, Budget Details) (TP)**



No, the Council on Aging (COA) does not specifically provide guidance on the distribution of funds under Index Code 925069B. However, the COA is kept informed of the services and providers that are awarded County funds. When quorum is met during COA meetings, members are encouraged to offer input and suggestions regarding these services and recommend any potential improvements. While they do not have a decision-making role in fund allocation, their insights contribute to the overall evaluation and planning of services for older adults in the community.

Grants for Services to the Frail and Elderly support the direct provision of critical in-home and community-based supports for frail elders. Community service providers are awarded contracts through a competitive Request for Proposals (RFP) process in accordance with State Procurement Law.

The amount awarded to each agency depends on several key factors:

1. The demonstrated need for each service awarded to the agency,
2. The agency's workforce capacity to deliver the services, and
3. Consumer choice among the agencies under contract with the County.

It should be noted that services are funded not only through County appropriations but also through State and Federal funding sources. Therefore, each agency may receive a combination of County, State, and Federal funds. However, to simplify the contracting process and maintain clear fiscal accountability, the Maui County Office on Aging (MCOA) generally seeks to avoid blending multiple funding sources within a single contract when possible.

- 14. For Habitat for Humanity Maui, Index Code 925070B, please provide the number of “qualifying disabled and low-income older adults” that have received assistance under this program. (Page 432, Program Budget and Page 12-24, Budget Details) (TK)**

The Maui County Office on Aging offers the following outcomes and outputs for Habitat for Humanity Maui in FY2024:

Outcome 1: 12 Low-income seniors and/or disabled citizens receive services that reduce safety concerns in their home.

Goal: 12      Year Total: 11

Output 1a: Habitat Maui will process 40 applications to the program.

Goal: 40      Year Total: 47

Output 1b: Safety-related repair or home modification work will be completed on 12 homes owned by low-income disabled and/or senior citizens per fiscal year.

Goal 12:      Year Total: 11

- 15. Please outline the Department’s priority needs for budget increases for the following organizations:**

The Department has identified two tiers of priority needs for the five programmatic budget increases listed below. The first priority tier includes Houseless Programs, Maui Food Bank, Inc., and Mental Health Programs and represents programs the Department is currently working with. The second priority tier includes Kohala Coast Urgent Care, LLC. and Molokai Rural Health Association and represents programs that the Department has not previously worked with but looks forward to working with in FY2026.

- a. **Houseless Programs;**  
\$850,000 in expansion funding for Houseless Programs is to fund a potential safe parking program.
- b. **Kohala Coast Urgent Care, LLC.;**  
In FY 2025, this organization was funded via the Office of Economic Development and is being transferred to DHC for FY 2026. The proposed program is designed to maintain medical clinic operations on Molokai.
- c. **Maui Food Bank, Inc.;**  
Maui Food Bank directly benefits low and moderate-income based residents of Maui County by providing food to help maintain healthy diets and eliminate hunger. The program was previously funded in FY 2024 at \$400,000 but reduced by County Council in FY 2025. The expansion funding in FY 2026 is to return funding to previous levels.
- d. **Mental Health Programs; and**  
\$250,000 in expansion funding for Mental Health Programs will be used for arising needs for community based mental health programs.
- e. **Molokai Rural Health Association. (Pages 432-433, Program Budget) (NUH)**  
In FY 2025, this organization was funded via the Office of Economic Development and is being transferred to DHC for FY 2026. The proposed program is designed to develop a diversified workforce on Molokai through certification and licensing, and care services to Kupuna.

**16. For Houseless Programs, Index Code 925059B: (Pages 432-434 and 448, Program Budget and Page 12-24, Budget Details)**

- a. **Please provide a breakdown of how the Department will allocate these funds and explain how the FY 2026 approach differs from previous fiscal years when the County funded programs, such as street medicine, that never materialized. (TP)**

Please refer to the proposed allocations previously provided in DHC's response to (BFED-1 HC-01), question 12.a.

There is no difference in approach for Houseless Programs funded by the Department in FY 2026 from previous years. There are many reasons as to why a grant may not materialize after being proposed for funding. In many cases, it has to do with the grant applicant being unable to clearly



describe their program services or activities, lack of response, and/or the inability to identify realistic and measurable program outcomes. The department strives to implement grants that have a potential measurable impact on our community and can be accountable for County funds.

**b. Please explain how the funds will be allocated to the following agencies:**

- i. **Family Life Center, Inc. – Case Management;**
- ii. **Family Life Center, Inc. – Outreach;**
- iii. **Family Life Center, Inc. – Molokai Homeless Assistance;**
- iv. **Ka Hale A Ke Ola Homeless Resource Centers - Central Operations and Step Up Program;**
- v. **Legal Aid Society of Hawaii – Holistic Legal Services for Maui County’s Most Vulnerable;**
- vi. **Mental Health Kokua - Homeless Outreach for Mental Health Empowerment and Psychosocial Rehabilitation;**
- vii. **Project Vision – Hele for Health & Homeless Outreach; and**
- viii. **Arising needs as determined by the Department. (Pages 433-434, Program Budget) (SS)**

Please refer to the proposed allocations previously provided in DHC’s response to (BFED-1 HC-01), question 12.a.

**c. Please provide a current description of each vendor receiving funding under the program, including how they administer assistance to the houseless community on Maui. (SS)**

*Family Life Center, Inc. – Case Management*

This program provides case management services to households enrolled in supportive housing programs and households that access emergency shelter services. Intake and assessments are completed. Participants are reintegrated into the community by moving from shelters into permanent housing and permanent supportive housing programs.

*Family Life Center, Inc. – Outreach*

This program provides outreach services to homeless individuals including benefit applications, budgeting, case management, advocacy, crisis management, employment assistance, food/meals, hygiene supplies, ID assistance, mail pickup and transportation. Connects participants to appropriate services with referrals for acute/urgent care, crisis intervention,

family planning, mental health, primary health services, substance use treatment, emergency shelter, clothing, employment, social security, transitional shelter, veterans' assistance, and permanent housing. Intake and assessments are conducted.

*Family Life Center, Inc. – Molokai Homeless Assistance*

This program provides housing assistance and rental supports for those who are homeless or at-risk of homelessness in Molokai. Participants complete an intake and assessment. Assistance is provided with developing a housing plan, becoming document ready including photo ID, social security card, birth certificate, taught money management, and ultimately assisted to move into permanent housing.

*Ka Hale A Ke Ola Homeless Resource Centers - Central Operations and Step Up Program*

This program provides access to emergency shelter and supportive housing services to homeless individuals and households with the goal of obtaining permanent housing. The agency completes participant intake and assessments, provides case management services, and assist participants to move into permanent housing. The Step-Up program builds capacity in participants for good tenant and good neighbor skills and responsibilities which make participants more attractive to prospective landlords. The Department is currently pursuing an amendment that would provide a safe space for sheltering the unsheltered during MEMA declared emergency situations.

*Legal Aid Society of Hawaii – Holistic Legal Services for Maui County's Most Vulnerable*

This program provides civil legal services to the County's most vulnerable population with a holistic approach focusing on income maintenance, maintaining shelter, ensuring personal safety, and stabilizing personal and family relationships. The organization will assist with legal clinics, coordinating services and referrals with State Dept of Human Services and other social service organizations, assisting with housing related legal issues for obtaining or retaining housing, obtaining vital documents, and assisting with family law issues such as restraining orders and custody orders.

*Mental Health Kokua - Homeless Outreach for Mental Health Empowerment and Psychosocial Rehabilitation*

This program engages homeless to reduce the number of homeless adults with mental illness on Maui by conducting in person services, engagement with police, and emergency shelter services. The organization conducts mental health evaluations to identify those with severe mental illness and signs consent documents to work with Ka Hale A Ke Ola's and Family Life Center's clients in emergency shelter. The program provides services such as psychosocial rehabilitation to stabilize individuals with severe mental illness, mental health supported housing and helping to improve personal and vocational skills.



*Project Vision – Hele for Health & Homeless Outreach*

The program proposes to increase access to care with street-level outreach, healthcare, drinking water, case management, harm reduction services, and benefits navigation to those experiencing homelessness with the purpose of encouraging employment, treatment, and housing.

*Arising Needs as Determined by the Department*

Funding available to the Department to address needs in houseless programs that arise during the course of the fiscal year. One proposed use of the funds would be a Safe Parking Program where those sleeping in their cars can park safely at night without disruption. Proposed program may include some wrap around services and referral programs to assist with connecting participants with other needed services.

- d. **Please explain the Department's plans for the proposed \$850,000 expansion for the Safe Parking Program, and whether these funds are sufficient to create and operate the program. (YLS)**

The proposed Safe Parking Pilot Program is intended for those who are employed but perhaps do not earn enough to pay for rent, and thus are resorting to sleeping in their cars. These folks would thus be able to park safely at night without disruption, receive support and services focused on permanent housing, and be able to maintain employment. The proposed program must include wrap around services and referral programs to assist with connecting participants with other needed services including housing resources. Current proposed funding will be for an initial pilot program. The assessment of program viability and future cost will be determined through program implementation.

- e. **Please provide copies of all the program's grants and contracts for FY 2025. (GJ)**

The request for these documents will be treated as UIPA request. A request for government records has been opened on the GovQA portal and will be responded to according to HRS 92F.

- f. **Please provide the nature of the 375 complaints and inquiries the program received in FY 2025 regarding houselessness. (SS)**

Upon consideration of the wide range of issues associated with the 375 complaints and inquiries received regarding houselessness, the majority of the issues can be summarized by the following themes:

- Public health and public safety concerns regarding encampments that limit access to public parks and beaches
- Illegal overnight habitation in vehicles
- Derelict /abandoned vehicles on County and State roadways

- Dangers related to roadside camps that encroach onto public rights of way, sidewalks, medians, easements, private property
- Public nudity, urination, defecation
- Concerns about mental health and substance abuse among the unsheltered, coupled with the challenges of treating these conditions
- Encampments on private lands owned by negligent owners. Whether the owners are foreign, US Nationals, or reside on the other islands, it has become increasingly difficult to deal with illegal encampments on private lands when the landowner does not have local property management/representation. This prolongs the process of addressing the public complaints
- Concerns about encampments on fallow areas and the threat of wildfires and the possible risk to the larger community
- Concerns about damage being caused to the environment, historical properties, and public spaces by activities associated with homeless encampments
- Safety concerns of parents, school administrators, and County and State employees when encampments form adjacent to or within school and park zones

**g. When allocating funds under the program, does the Department consider which organizations are nonprofit and for-profit? Why or why not? (SS)**

A for-profit/non-profit status of a grant applicant is considered during the review of applications. The goal of the grant is to provide necessary services to the community not to increase profits of a specific entity. Maui County Code Chapter 3.36 allows eligibility to both non-profit and for-profit entities. It is very rare that a for-profit entity would apply for grants from the Department of Human Concerns. Any for-profit entity awarded a grant will have clear social benefit for the community and the for-profit entity will need to abide by the same guidelines as a non-profit regarding program outcomes and accountability for County funds.

**h. Is there an agency in Maui County that assists houseless individuals connect with family on the continent? If so, how many houseless individuals have received this assistance? (SS)**

None of the grant funded programs include a specific service or covered expense for transporting houseless individuals from Maui County to the continent. If an organization does provide this service, it is not reported as part of their grant funding. However, the Department is aware that connecting the houseless to family and other supports, whether they be on the continent or on another island, is a standard intervention meant to help



stabilize and support the individuals we work with. There is never coercion to return individuals to the continent against their will, and in fact, when these family reunifications occur successfully, family members receiving the individual usually provide resources for the return. The State Legislature is contemplating making a “Return to Home” program a permanent program under the Governor’s Homeless Coordinator.

- i. **How does the program utilize the Maui County Coordinated Entry System with the Homeless Management Information System when there is no available shelter space in Maui County to offer the houseless community? (SS)**

The Coordinated Entry System (CES) and the Homeless Management Information System are utilized by homeless service providers to ensure that services provided to houseless individuals and households are consolidated into one system that allows for a coordinated continuum of services to access information about specific individuals. The CES specifically allows for prioritizing homeless clients based on needs and then enables service providers to know when a shelter opening becomes available, and the most vulnerable/needy person or household that should be prioritized and placed into available spaces. When there are no available shelter spaces it is important to maintain the Systems so that when space does become available it is clear how the continuum of service providers will respond to fill that space. When service providers do not use the systems or operate outside the established systems, they essentially remove their services and clients from the continuum of homeless services. This oftentimes creates greater hardship and frustration, both among the houseless, their advocates, and the service providers who are utilizing the CES as we are mandated to do.

17. **For Immigrant and Migrant Services, Index Code 925080B, given the shift in Federal policy on immigration, will the proposed \$400,000 in FY 2026 put the County at risk to lose Federal funding? (Page 432, Program Budget and Page 12-25, Budget Details) (TK)**

The proposed \$400,000 allocation in FY 2026 for Immigrant and Migrant Services, Index Code 925080B, is funded entirely by the County and does not rely on Federal funding. While there have been shifts in Federal immigration policy, this allocation is independent of Federal grants and will not put the County at risk of losing Federal funding.

18. **For Aloha House, Inc. – Enhanced Coordination Care Program, Index Code 925028B, please provide the number of people Aloha House, Inc. has been able to successfully assist or treat under their Enhanced Coordination Care Program. (Page 430, Program Budget and Page 12-27, Budget Details) (TK)**

For FY 2024 Aloha House reported the following:

- Admitted 22 new unsheltered clients to Aloha House through outreach to services providers and the unsheltered.
- 51 Aloha House clients with co-occurring disorder that self-identify as

homeless were provided mental health/psychiatric evaluations as a component of comprehensive care on campus.

19. **Please explain how the proposed \$555,000 in FY 2026 will be allocated among the programs for Substance Abuse:**
- a. **Aloha House, Inc. – Medically Monitored Detoxification Services;**
  - b. **Ka Hale Pomaika'i – Moloka'i Substance Use Disorder Treatment, Recovery and Support;**
  - c. **Maui Family Support Services, Inc. – Teen Voices Program;**
  - d. **Maui Youth and Family Services –Substance Abuse Treatment for Adolescents; and**
  - e. **Arising needs as determined by the Department. (Page 431, Program Budget) (TK)**

Please refer to the proposed allocations previously provided in DHC's response to (BFED-1 HC-01), question 12.a.

20. **For Youth Programs, Index Code 925045B, please provide a list of work training programs funded by the grant and explain how the funds will be allocated. (Page 438, Program Budget and Page 12-28, Budget Details) (TP)**

The only program funded on Youth Programs, Index Code 925045B, is the Teens On Call program via Lokahi Pacific as the fiscal sponsor. The program provides work readiness training by assigning work training projects to program participants overseen by an on-site job coach. This program aims to build self-confidence, positive attitude and improve work skills levels. It assists participants in connecting with full-time or part-time employment and/or post-secondary education.

21. **Does the Council on Aging and the Commission on Persons with Disabilities provide guidance on the distribution of the grants listed on pages 463 and 464 of the Program Budget? (Pages 463-464, Program Budget) (TP)**

No. As offered in response to question number 13, the Council on Aging and as well as the Commission on Persons with Disabilities do not specifically provide guidance on the distribution of funds under Index Code 925069B. However, both boards are kept informed of the services and providers that are awarded County funds. As stated previously, members are encouraged to offer input and suggestions regarding these services and recommend any potential improvements.

It's also important to note that the distribution of grants must adhere to established procedures and guidelines set forth by the County of Maui, including applicable State procurement and contracting requirements, and reduce potential conflicts of



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interest. While the Council on Aging and Commission on Persons with Disabilities play an advisory role, final funding decisions are made through formal County and State processes to maintain integrity and accountability. Federal reporting requirements also apply when Title III funds are used for services.

Thank you for the opportunity to provide this information. Should you have any questions, please feel free to contact me at Ext. 7805.

Sincerely,



LORI TSUHAKO, LSW, ACSW  
Director of Human Concerns

Attachment

**FISCAL YEAR 2026 BUDGET (BFED-1) (HC-02)**  
**Operations and Equipment (Category "B"): Question 3**

Organization Name	Program Title	FY25 Requested Amount	FY25 Approved Funding	FY26 Requested Amount	FY26 Approved Funding
Aloha House, Inc.	Residential Treatment for Adult Substance Use Disorder	\$ 175,000.00	\$ 175,000.00	\$ 175,000.00	\$ 175,000.00
Aloha House, Inc.	Enhanced Coordinated Care Program	\$ 323,000.00	\$ 323,000.00	\$ 323,000.00	\$ 323,000.00
Aloha House, Inc.	Medically Monitored Detoxification Services	\$ 145,000.00	\$ 145,000.00	\$ 145,000.00	\$ 145,000.00
Best Buddies International, Inc.	Maui County Inclusion Project	\$ 85,000.00	\$ 85,000.00	\$ 85,000.00	\$ 85,000.00
Big Brothers Big Sisters Hawaii, Inc.	Mentoring for Maui's Youth	\$ 245,068.00	\$ 245,068.00	\$ 250,805.00	\$ 245,068.00
Boys & Girls Clubs of Maui	Great Futures Molokai	\$ 288,400.00	\$ 140,000.00	\$ 297,052.00	\$ 280,000.00
Boys & Girls Clubs of Maui	Now More Than Ever	\$ 1,458,702.00	\$ 1,430,100.00	\$ 1,487,876.00	\$ 1,430,100.00
Family Hui Hawaii	Hui for Hope: Strengthening Maui Families	\$ 219,500.00	\$ 85,440.00	\$ 275,000.00	\$ 126,000.00
Family Life Center Inc	Molokai Homeless Assistance	\$ 200,000.00	\$ 200,000.00	\$ 200,000.00	\$ 200,000.00
Family Life Center Inc	Case Management	\$ 213,750.00	\$ 213,750.00	\$ 213,750.00	\$ 213,750.00
Family Life Center Inc	Outreach	\$ 215,000.00	\$ 215,000.00	\$ 215,000.00	\$ 215,000.00
Feed My Sheep	Healthy Diet for the Poor	\$ 150,000.00	\$ 125,000.00	\$ 150,000.00	\$ 125,000.00
Habitat for Humanity Maui, Inc.	Safety Repairs for Disabled/Elderly Low-Income Homeowners	\$ 250,000.00	\$ 250,000.00	\$ 250,000.00	\$ 250,000.00
Hale Mahaolu	Personal Care Subsidy Program	\$ 200,000.00	\$ 170,000.00	\$ 225,000.00	\$ 170,000.00
Hale Makua Health Services	Physicians Services	\$ 100,000.00	\$ 100,000.00	\$ 100,000.00	\$ 100,000.00
Hana Youth Center, Inc.	Hana Youth Center	\$ 154,393.00	\$ 225,000.00	\$ 154,393.00	\$ 225,000.00
Hawaiian Kamali'i, Inc. dba Hawaiian Canoe Club	Hawaiian Kamali'i Program	\$ 28,394.00	\$ 28,394.00	\$ 28,394.20	\$ 28,394.00
Hui Laulima O Hana	Hana Dialysis Home	\$ 130,073.00	\$ 130,073.00	\$ 130,073.00	\$ 130,073.00
Hui No'eau Visual Arts Center	Youth Family Art Outreach Program	n/a	n/a	n/a	\$ 75,000.00
Imua Family services	(IECS) Infant & Early Childhood Svc	\$ 90,000.00	\$ 73,000.00	\$ 95,000.00	\$ 73,000.00
Ka Hale A Ke Ola	Central Operations and Step Up Prog	\$ 1,279,900.00	\$ 771,000.00	\$ 1,279,900.00	\$ 771,000.00
Ka Hale Pomaika'i	Molokai SUD Treatment, Recovery, and Support	\$ 100,000.00	\$ 200,000.00	\$ 100,000.00	\$ 200,000.00
Kihei Youth Center	Kihei Youth Center	\$ 330,722.00	\$ 348,305.00	\$ 330,722.00	\$ 348,305.00



Organization Name	Program Title	FY25 Requested Amount	FY25 Approved Funding	FY26 Requested Amount	FY26 Approved Funding
Kohala Coast Urgent Care	Project Kokololio	\$ -	\$ -	\$ -	\$ 300,000.00
Lana'i Youth Center	Lanai Youth Center Program	\$ 354,421.00	\$ 354,421.00	\$ 363,573.00	\$ 354,421.00
Lanai Community Health Center	Integrated Behavior Health Direct Services	\$ 118,859.00	\$ 82,610.00	\$ 125,274.00	\$ 82,610.00
Lanai Community Health Center	Live Well Lanai	\$ 98,169.00	\$ 75,000.00	n/a	n/a
Lanai Kinaole	Our Lanai Home is Best	\$ 250,000.00	\$ 175,000.00	\$ 250,000.00	\$ 175,000.00
Legal Aid Society of Hawai'i	Maui County Civil Legal Services	\$ 70,000.00	\$ 70,000.00	\$ 70,000.00	\$ 70,000.00
Lokahi Pacific	Voices of Micronesians of Maui	\$ 60,000.00	\$ 25,000.00	\$ 60,000.00	\$ 25,000.00
Lokahi Pacific	Teens On Call	\$ 94,600.00	\$ 94,600.00	\$ 94,600.00	\$ 94,600.00
Lokahi Pacific	Grant Admin Services	\$ 100,000.00	\$ 100,000.00	\$ 100,000.00	\$ 100,000.00
Malama Na Makau A Keiki, Inc. dba Malama Family Recovery Center	Substance Use Disorder Treatment for Women	\$ 185,000.00	\$ 285,800.00	\$ 185,000.00	\$ 285,800.00
Maui A.I.D.S. Foundation	Maui HIV/HCV/STI Testing & Treatment Core Services + Free Clinic Expansion	\$ 172,000.00	\$ 291,000.00	\$ 172,000.00	\$ 291,000.00
Maui A.I.D.S. Foundation	Free Clinic Expansion	\$ 119,000.00	n/a	\$ 119,000.00	n/a
Maui A.I.D.S. Foundation	Prevention and Harm Reduction	\$ 70,000.00	\$ 70,000.00	\$ 70,000.00	\$ 70,000.00
Maui Adult Day Care	Adult Day Care Services and Hana Senior Center (Hale Hulu Mamo)	\$ 514,740.00	\$ 514,740.00	\$ 564,740.00	\$ 536,503.00
Maui County Veterans Council	Veterans events and activities	n/a	n/a	n/a	\$ 20,000.00
Maui Economic Opportunity	MEO Head Start & After School	\$ 490,572.00	\$ 473,205.00	\$ 507,805.00	\$ 473,205.00
Maui Economic Opportunity Inc	Enlace Hispano	\$ 112,231.00	\$ 107,532.00	\$ 116,225.00	\$ 107,532.00
Maui Economic Opportunity Inc	P&CC, Senior Coordinator Prog	\$ 92,828.00	\$ 89,465.00	\$ 96,222.00	\$ 89,465.00
Maui Economic Opportunity Inc	BEST	\$ 328,454.00	\$ 320,865.00	\$ 336,428.00	\$ 320,865.00
Maui Economic Opportunity, Inc.	Youth Suicide Prevention Program	\$ 50,987.00	\$ 50,987.00	\$ 52,006.00	\$ 50,987.00
Maui Economic Opportunity, Inc.	Project Graduation	\$ 47,741.00	\$ 47,741.00	\$ 47,741.00	\$ 47,741.00
Maui Economic Opportunity, Inc.	Youth Services and Under Age Drinking Prevention	\$ 440,441.00	\$ 407,664.00	\$ 455,651.00	\$ 407,664.00
Maui Family Support Services	Early Childhood subsidies	\$ 750,000.00	\$ 482,000.00	\$ 750,000.00	\$ 525,000.00
Maui Family Support Services	Early childhood Resource Center & Family Literacy	\$ 674,483.00	\$ 392,410.00	\$ 674,483.00	\$ 481,330.00
Maui Family Support Services	Early Head Start	\$ 100,000.00	\$ 70,000.00	\$ 100,000.00	\$ 70,000.00
Maui Family Support Services	Kane Connection	\$ 75,000.00	\$ 45,000.00	\$ 75,000.00	\$ 45,000.00
Maui Family Support Services	Early Head Start	\$ 100,000.00	\$ 70,000.00	\$ 100,000.00	\$ 75,000.00



Organization Name	Program Title	FY25 Requested Amount	FY25 Approved Funding	FY26 Requested Amount	FY26 Approved Funding
Maui Family Support Services, Inc.	Teen Voices/Teen Services	\$ 50,000.00	\$ 50,000.00	\$ 50,000.00	\$ 50,000.00
Maui Family YMCA	Needs Based Family Subsidies	n/a	n/a	n/a	\$ 250,000.00
Maui Food Bank	Hunger Relief	\$ 400,000.00	\$ 297,163.00	\$ 400,000.00	\$ 400,000.00
Maui Hui Malama	Breaking Barriers	\$ 324,593.00	\$ 324,593.00	\$ 324,592.96	\$ 324,593.00
Maui Youth & Family Services, Inc.	Substance Use Disorder Treatment for Adolescents	\$ 85,000.00	\$ 85,000.00	\$ 85,000.00	\$ 85,000.00
Mediation Services of Maui, Inc.	Mediation and Conflict Resolution Services & Education	\$ 180,000.00	\$ 135,000.00	\$ 180,000.00	\$ 135,000.00
Mental Health Association in Hawaii	Mental Health Education, Prevention and Support Program	\$ 120,000.00	\$ 110,000.00	\$ 120,000.00	\$ 110,000.00
Mental Health Kokua	HOME/PSR	\$ 100,184.00	\$ 95,000.00	\$ 101,184.00	\$ 95,000.00
Mental Health Kokua	Safe Haven	\$ 266,440.00	\$ 192,337.00	\$ 266,440.00	\$ 192,337.00
Molokai Child Abuse Prevention Pathways (MCAPP)	Prevention of Sexual Violence	\$ 99,609.00	\$ 99,609.00	\$ 99,609.00	\$ 99,609.00
Molokai Community Health Center	Dental Program Expansion	n/a	\$ 330,000.00	n/a	\$ 330,000.00
Molokai Rural Health Community Association, Inc.	Kupuna Services	n/a	n/a	n/a	\$ 570,000.00
Molokai Veterans Caring for Veterans	Support Molokai Veteran's Center	n/a	n/a	n/a	\$ 15,000.00
Pa`ia Youth Council, Inc.	Pa`ia Youth & Cultural Center and Malama Pono Project Venture	\$ 400,000.00	\$ 400,000.00	\$ 400,000.00	\$ 400,000.00
Pacific Gateway Center	Access To Legal Immigration Services	\$ 400,000.00	\$ 400,000.00	\$ 400,000.00	\$ 400,000.00
Parents and Children Together	Maui Family Peace Center	\$ 90,000.00	\$ 80,000.00	\$ 90,000.00	\$ 80,000.00
Partners In Development Foundation	Tutu & Me Traveling Preschool	\$ 78,281.00	\$ 43,697.00	\$ 80,432.00	\$ 43,697.00
PATCH - Parents Attentive to Children	Licensed Childcare Workforce & Quality Improvement Program	\$ 225,000.00	\$ 225,000.00	\$ 225,000.00	\$ 293,170.00
Project Vision Hawaii	Hele for Health-Homeless Outreach	\$ 309,420.00	\$ 188,550.00	\$ 317,535.00	\$ 188,550.00
Pulama Ka Heke	Improving Mental Health and Wellbeing on Molokai	\$ 250,000.00	\$ 100,000.00	\$ -	\$ 175,000.00
Spirit Horse Ranch	Trauma Informed Equine Assisted Services	\$ 125,416.00	\$ 75,000.00	\$ 124,514.00	\$ 75,000.00
St. Theresa Roman Catholic Church	Hale Kau Kau	\$ 105,250.00	\$ 105,250.00	\$ 100,000.00	\$ 100,000.00

Organization Name	Program Title	FY25 Requested Amount	FY25 Approved Funding	FY26 Requested Amount	FY26 Approved Funding
The Maui Farm	Family Strengthening Program	\$ 313,589.00	\$ 279,666.00	\$ 326,368.00	\$ 279,666.00
The Salvation Army	Homeless Outreach Program	\$ 245,000.00	\$ 245,000.00	\$ 245,000.00	\$ 245,000.00
West Maui Veterans Club, Inc.	Support Hanakoo Cemetery in Lahaina	n/a	n/a	n/a	\$ 5,000.00
Women Helping Women	Emergency Shelter, Hotline & Support Services	\$ 250,000.00	\$ 250,000.00	\$ 250,000.00	\$ 250,000.00

## BFED Committee

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**From:** Janina E. Agapay <Janina.E.Agapay@co.maui.hi.us>  
**Sent:** Wednesday, April 9, 2025 10:31 AM  
**To:** BFED Committee  
**Cc:** Lesley J. Milner; loriann.tsuhako@co.maui.hi.us; Jessica C. Crouse; kimberly.ferguson@co.maui.hi.us  
**Subject:** (BFED-1)(HC-02)  
**Attachments:** (BFED-1) (HC-02).pdf

Hello,

Please see attached correspondence (BFED-1)(HC-02/0).

Thank you,

***Janina Agapay***

County of Maui | Budget Office

Phone: (808) 270-7836

Email: Janina.E.Agapay@co.maui.hi.us



**RICHARD T. BISSEN, JR.**  
Mayor

**LORI TSUHAKE**  
Director

**JESSICA CROUSE**  
Deputy Director



**DEPARTMENT OF HUMAN CONCERNS**  
COUNTY OF MAUI  
2200 MAIN STREET, SUITE 546  
WAILUKU, MAUI, HAWAII 96793  
PHONE: (808) 270-7805

April 21, 2025

  
Ms. Lesley Milner  
Budget Director, County of Maui  
200 South High Street  
Wailuku, Hawaii 96793

Honorable Richard T. Bissen, Jr.  
Mayor, County of Maui  
200 South High Street  
Wailuku, Hawaii 96793

**APPROVED FOR TRANSMITTAL**

 4-22-25  
**Mayor** **Date**

For Transmittal to:

Honorable Yuki Lei K. Sugimura, Chair  
Budget, Finance, and Economic Development Committee  
Maui County Council  
200 South High Street  
Wailuku, Hawaii 96793

Dear Chair Sugimura:

**SUBJECT: FISCAL YEAR ("FY") 2026 BUDGET (BFED-1) (HC-02 Addendum)**

Thank you for your correspondence of April 2, 2025. The Department's response dated April 8, 2025 was previously submitted to the Committee. The Department is providing this addendum to respond in further detail to the original questions as noted below:

**Question 7: For the Food, Shelter, and Safety Grants, Index Code 925031B: (Pages 427-428, Program Budget and Page 12-20, Budget Details)**

**b. Please provide copies of all the program's grants and contracts for FY 2025 (GJ)**

**Question 16: For Houseless Programs, Index Code 925059B: (Pages 432-434 and 448, Program Budget and Page 12-24, Budget Details)**

**e. Please provide copies of all the program's grants and contracts for FY 2025 (GJ)**

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TO SUPPORT AND EMPOWER OUR COMMUNITY TO REACH ITS FULLEST  
POTENTIAL FOR PERSONAL WELL-BEING AND SELF-RELIANCE

Honorable Yuki Lei K. Sugimura, Chair  
Budget, Finance, and Economic Development Committee  
April 21, 2025  
Page 2 of 2

The Department's original response to the above questions noted that, in following our normal practice, these requests would be treated as a UIPA request. On April 21, 2025, the Department received clarification and a revised request from the requester that limits the grant agreements/contracts only to those held by Family Life Center. We have attached the redacted agreements to this addendum.

Thank you for the opportunity to provide this additional information. Should you have any questions, please feel free to contact me at Ext. 7805.

Sincerely,

A handwritten signature in blue ink, appearing to read "Lori Tsuhako", with a stylized flourish at the end.

LORI TSUHAKE, LSW, ACSW  
Director of Human Concerns

Attachments



## GRANT AGREEMENT CERTIFICATION

I, **MARCY MARTIN**, Director of Finance of the County of Maui, State of Hawaii,  
do certify that there is available appropriation or balance of an appropriation over and above all  
outstanding contracts, sufficient to cover the amount required by the foregoing contract, i.e.

<u>Appropriation Index</u>	<u>Title</u>	<u>Amount Required</u>
925059B ✓✓	HC HOUSELESS PROGRAM ✓	(6317) \$ 213,750.00 ✓

GRANT AGREEMENT      G 6186 ✓      FAMILY LIFE CENTER INC ✓

Dated this      3 day of OCTOBER 2024  
Grant Period:      July 1, 2024 to June 30, 2025 ✓

  
\_\_\_\_\_  
MARCY MARTIN  
Director of Finance

Case Management ✓  
for Department of Human Concerns (DHC)  
(1st of a 2-year contract)  
**ORDINANCE #5657 (FY2025)**

#5963

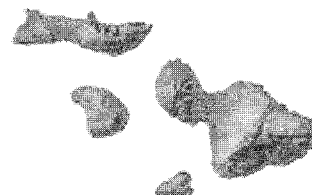
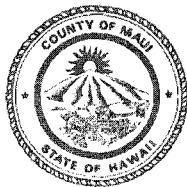
FY 2025

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10/10/24

**RICHARD T. BISSEN, JR.**  
Mayor

**MARCY MARTIN**  
Director



**DEPARTMENT OF FINANCE**  
**COUNTY OF MAUI**  
**200 SOUTH HIGH STREET**  
**WAILUKU, MAUI, HAWAII 96793**  
[www.mauicounty.gov](http://www.mauicounty.gov)

October 15, 2024

Family Life Center Inc.  
95 South Kane Street  
Kahului, HI 96732

**RE: CASE MANAGEMENT**  
**GRANT NO. G6186**

Dear Family Life Center, Inc.:

Transmitted is a copy of the fully executed grant agreement for your file.

Sincerely,

  
for **MARCY MARTIN**  
Director of Finance

MM:dda  
Enclosure

xc: Department of Human Concerns, Grants Management Division

GRANT AGREEMENT OF COUNTY FUNDS

(FY2025 & FY2026) DHC GRANT

G6186

Certification Requested from County: 925059B: \$ 213,750.00

THIS GRANT AGREEMENT ("Agreement") is made this 15<sup>th</sup> day of October, 2024, by and between FAMILY LIFE CENTER, INC., a Hawaii nonprofit corporation, whose local mailing address is 95 South Kane Street, Kahului, Maui, Hawaii, 96732, hereinafter referred to as the "GRANTEE", and the COUNTY OF MAUI, a political subdivision of the State of Hawaii, whose principal place of business is 200 South High Street, Wailuku, Maui, Hawaii 96793, hereinafter referred to as the "COUNTY". The GRANTEE and the COUNTY shall hereinafter be referred to collectively as the "Parties".

WITNESSETH:

WHEREAS, the COUNTY desires to encourage and support the Case Management program; and

WHEREAS, the Department of Human Concerns ("DHC") has reviewed and approved the GRANTEE's application for a grant of COUNTY funds to provide services in furtherance of this goal.

NOW, THEREFORE, the COUNTY and GRANTEE in consideration of the mutual promises hereinafter set forth hereby agree as follows:

A. General Conditions. In consideration of a grant of COUNTY funds, the GRANTEE agrees to the following conditions in the use and administration of the COUNTY funds:

1. The GRANTEE shall provide all services and fulfill all terms and conditions of the grant, attached as Exhibits "A" through "C-2", which are incorporated by reference and made a part hereof.
2. Initial and final payment under this Agreement shall be subject to receipt by the COUNTY of original copies of State of Hawaii Tax Clearance Certificate(s) for the GRANTEE validated by the State of Hawaii Department of Taxation and the Internal Revenue Service ("IRS") or a Certificate of Vendor Compliance ("CVC") as required by COUNTY policy.
3. This Agreement is for two (2) grant performance periods (See: Section P below), which

are contingent upon the following:

- 1) The availability and appropriation of funds;
  - 2) GRANTEE's compliance with all DHC Grants Management Division ("GMD") mandates and instructions pursuant to the grant application, the terms and conditions of the grant, and fiscal policies and procedures; and
  - 3) GRANTEE's successful performance of all program and fiscal reporting requirements as specified in this Agreement.
4. Second year grant specifications are subject to change depending upon the availability of funds, programs and/or any other factors as determined by the COUNTY.

B. Project Budget. The COUNTY agrees to make available as a grant to the GRANTEE a sum not to exceed, for FY2025, TWO HUNDRED THIRTEEN THOUSAND SEVEN HUNDRED FIFTY AND NO/100 DOLLARS (\$213,750.00) in grant funds (Index code: 925059B; grants and disbursements for health, human services, and education); and a sum not to exceed, for FY2026, TWO HUNDRED THIRTEEN THOUSAND SEVEN HUNDRED FIFTY AND NO/100 DOLLARS (\$213,750.00) in grant funds for this two year Agreement. The GRANTEE agrees to use the grant funds solely for purposes specified in Exhibit "B" and shall allocate the COUNTY funds according to the budget attached as Exhibits "C-1" (an amount not to exceed \$213,750.00 for FY2025) and "C-2" (an amount not to exceed \$213,750.00 for FY2026).

GRANTEE shall comply with all standard policies and procedures pertaining to budget revisions and budget modifications as specified in the DHC GMD budget revision guidelines.

C. Method of Payment. For and in consideration of the agreements and undertakings of the GRANTEE pursuant to this Agreement, the COUNTY hereby agrees to pay the GRANTEE in five (5) allotments as follows:

1. A first payment (Advance) may be up to 25% of the fiscal year grant award. Disbursement will be made within twenty-one (21) days of the execution of this Agreement subject to the GRANTEE's satisfactory completion of required supporting documents.
2. The second payment may be up to 25% of the fiscal year grant award or an amount so that the cumulative grant payments do not exceed 50% of the fiscal year grant award.
3. The third payment may be up to 25% of the fiscal year grant award or an amount so



that the cumulative grant payments do not exceed 75% of the fiscal year grant award.

4. The fourth payment may be up to 15% of the fiscal year grant award or an amount so that the cumulative grant payments do not exceed 90% of the fiscal year grant award.
5. The fifth and final payment may be up to 10% of the fiscal year grant award or an amount so that the cumulative grant payments do not exceed 100% of the fiscal year grant award.

With the exception of the first (Advance) payment, all payments will be made no later than thirty (30) calendar days after the receipt of the GRANTEE's quarterly reports and allotment request, provided that the GRANTEE is in compliance with all terms and conditions of this Agreement.

- D. Reporting Requirements. The GRANTEE shall submit to the COUNTY a Quarterly Certification, Quarterly Allotment Request (QAR), a Quarterly Financial Report (QFR), a Quarterly Demographics Report (QDR), and a Quarterly Narrative Report (QNR), on forms prescribed by the DHC not later than three (3) weeks following the end of each quarter, as follows:

<u>1<sup>st</sup> Year (FY2025) Quarterly Reports</u>	<u>Due to the COUNTY No Later Than</u>
First Quarter (Jul-Sep 2024)	October 21, 2024
Second Quarter (Oct-Dec 2024)	January 21, 2025
Third Quarter (Jan-Mar 2025)	April 21, 2025
Fourth Quarter (Apr-Jun 2025)	July 21, 2025
<u>2<sup>nd</sup> Year (FY2026) Quarterly Reports</u>	<u>Due to the COUNTY No Later Than</u>
First Quarter (Jul-Sep 2025)	October 21, 2025
Second Quarter (Oct-Dec 2025)	January 21, 2026
Third Quarter (Jan-Mar 2026)	April 21, 2026
Fourth Quarter (Apr-Jun 2026)	July 21, 2026

The Quarterly Reports shall be submitted in a timely manner and authenticated as to its accuracy by the GRANTEE, verified by a designated COUNTY official and shall include a certification by the GRANTEE that the work was performed in accordance with the terms and conditions of this Agreement.

- E. Program Monitoring. The GRANTEE shall retain and permit the COUNTY or its duly

authorized agent free access to any and all GRANTEE programs, facilities, events or activities without advance or formal notification or appointment when such access is for the express purpose of monitoring, investigating, researching or formulating programs, services, or related policies and procedures or when the COUNTY is otherwise in the pursuit of any official business relative to any aspect of this Agreement.

**F. Documents and Files.**

1. Any information, data, report, record, summary, table, map or study given to or prepared or assembled by the GRANTEE under this Agreement that the COUNTY requests to be kept confidential shall not be made available to any individual or organization other than any subcontractor to which the material may relate, without prior written approval of the COUNTY.
2. The COUNTY shall have complete ownership of all material, both finished and unfinished, that is developed, prepared, assembled, or conceived by the GRANTEE pursuant to this Agreement, and all such materials shall be considered "works made for hire". All such material shall be delivered to the COUNTY upon expiration or termination of this Agreement. The COUNTY, in its sole discretion, shall have the exclusive right to copyright any product, concept, or material developed, prepared, assembled, or conceived by the GRANTEE pursuant to this Agreement.
3. The GRANTEE and any subcontractors shall maintain the books and records that relate to this Agreement, and any cost of pricing data for three (3) years from the date of the final payment under this Agreement. In the event of any litigation, claim, investigation, audit, or other action, the records shall be retained for three (3) years from the date of final payment, or from the date of the resolution of the action, whichever occurs later. During the period that records are retained under this section, the GRANTEE and any subcontractors shall allow the COUNTY free and unrestricted access to such records.

**G. Changes.** The COUNTY may from time to time require changes in the scope of services which the GRANTEE is to perform. Such changes, including any increases or decreases in the amount of the GRANTEE's grant funds, shall be incorporated by written amendment to this Agreement.

**H. Independent Contractor.** GRANTEE acknowledges that it is an independent contractor and

not an employee of the COUNTY.

- I. Indemnification. GRANTEE shall defend, indemnify and hold harmless the COUNTY, its officers, agents, and employees from and against any and all manner of actions and claims arising, either directly or indirectly, out of or resulting from the errors, omissions, or acts of GRANTEE, its officers, its employees, or its agents occurring during or in connection with the performance of the GRANTEE's services under this Agreement.
- J. Insurance. The GRANTEE shall obtain, pay for, and keep in force throughout the period of this Agreement comprehensive liability insurance issued by an insurance company (the "Carrier") authorized to do business in the State of Hawaii (an "Admitted Carrier"), or by a company not authorized to do business in the State of Hawaii (a "Non-Admitted Carrier") or its equivalent only through a general insurance agent or broker licensed in the State of Hawaii.

The Carrier shall be rated no less than "A-" as established by "AM Best" or "Standard & Poor" ratings. The insurance policy, as evidenced by issuance of a "Policy Endorsement", shall name the COUNTY, its officers, employees and agents as "Additional Insured", and shall include a duty to defend the COUNTY, its officers, employees and agents against any loss, liability, claims, and demands for injury or damage, including, but not limited to, claims for property damage, personal injury, or wrongful death, arising out of, or in connection with GRANTEE's actions and/or performance of this Agreement. Unless otherwise agreed to by the COUNTY, through the joint decision and discretion of the Director of the Department of Human Concerns and the Director of the Department of Finance, the insurance policy shall contain the following minimum requirements:

- 1) No less than a Combined Single Limit ("CSL") of liability coverage of \$1,000,000;
- 2) No erosion of limit by payment of defense costs; and
- 3) Minimum annual aggregate limit of \$2,000,000.

Prior to or upon the execution of this Agreement, GRANTEE shall furnish the COUNTY with a copy of the insurance policy certificate together with the required endorsements verifying such insurance coverage. If the scheduled expiration date of a current insurance policy is sooner than the specified termination date of this Agreement, the GRANTEE shall, upon renewal of the insurance policy, provide the COUNTY with a copy of the renewed insurance policy certificate together with the required endorsements. Unless waived by the COUNTY, the insurance policy shall expressly state that the coverage provided



under such policy shall not be cancelled or terminated, unless the Carrier has first given the COUNTY thirty (30) calendar days prior written notice of the intended cancellation or termination.

**K. Modification and Termination of Agreement.**

1. Any modification, alteration or change to this Agreement, including, but not limited to, modification of the services to be performed, extension of time of performance, or changes to the approved budget, shall be made only by written amendments to this Agreement executed by the Parties.
2. This Agreement may be terminated in whole or in part when the COUNTY determines that there has been a change in the conditions upon which the need for the services was based, that the GRANTEE has failed to provide services adequately or satisfactorily, that funding for this Agreement is not available or cannot be secured, or that other good cause for the whole or partial termination of this Agreement exist.
3. If the COUNTY determines, in its sole discretion, that it is necessary or convenient, this Agreement may be terminated in whole or in part at the option of the COUNTY. If the COUNTY elects to terminate under this section, the GRANTEE shall be entitled to reasonable payment as determined by the COUNTY for satisfactory services rendered under this Agreement up to the time of termination.
4. The GRANTEE may withdraw from this Agreement after obtaining the written consent of the COUNTY. The COUNTY, upon the GRANTEE's withdrawal, shall determine whether payment is due to the GRANTEE, and the amount that is due.
5. The COUNTY may offset against any monies or other obligations the COUNTY owes to the GRANTEE under this Agreement, any amounts owed to the COUNTY by the GRANTEE, including but not limited to the payment of any taxes or levies of any kind or nature. The COUNTY shall notify the GRANTEE in writing of any exercise of its right of offset and the nature and amount of such offset.

- L. County's Remedies.** GRANTEE understands that in the event that it fails to comply with any of the performance requirements, provisions, terms, or conditions set forth in this Agreement, the COUNTY may refuse to make further payments to GRANTEE of grant funds under this Agreement. The COUNTY will give a written notice to the GRANTEE of any stop payment action.

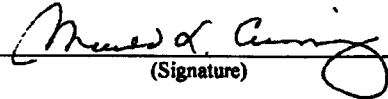
- M. Subcontracting. GRANTEE shall not procure or subcontract any part of the services under this Agreement without the prior written consent of the COUNTY which consent shall not be unreasonably withheld.
- N. Severability. Every provision of this Agreement is intended to be severable. If any term or provision hereof is illegal or invalid for any reason whatsoever, such illegality or invalidity shall not affect the validity of the remainder of this Agreement. If the entire Agreement is deemed illegal or invalid, the COUNTY may terminate this Agreement without liability except as provided herein.
- O. Headings. All headings of this Agreement are for convenience only and are not to be construed as limiting in any manner the content of any section or particular provision.
- P. Time of Performance. The first year performance period shall begin on July 1, 2024, and shall terminate on June 30, 2025. Subject to the terms and conditions specified herein, the second year performance period shall begin on July 1, 2025 and shall terminate on June 30, 2026.

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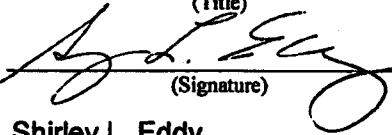
IN WITNESS WHEREOF, the parties hereto have executed this Agreement the day,  
month and year first above written.

GRANTEE:

FAMILY LIFE CENTER, INC.

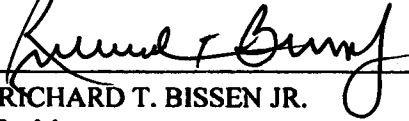
By:   
(Signature)  
Maude L. Cumming  
(Print Name)

Its Chief Executive Officer  
(Title)


By:   
(Signature)  
Shirley L. Eddy  
(Print Name)

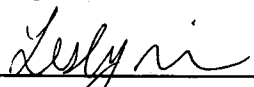
Its Secretary-Treasurer  
(Title)

COUNTY OF MAUI:


By:   
RICHARD T. BISSEN JR.  
Its Mayor

APPROVAL RECOMMENDED:

  
LORI TSUHAKO, Director  
Department of Human Concerns

  
LESLEY MILNER  
Budget Director

APPROVED AS TO FORM AND LEGALITY:

  
YUKARI MURAKAMI  
Deputy Corporation Counsel  
County of Maui



## **GENERAL TERMS AND CONDITIONS**

### **Department of Human Concerns ("DHC")**

In consideration of a grant of COUNTY funds, GRANTEE agrees to the following conditions in the use and administration of COUNTY funds. In the event the following conditions conflict with any term, provision, condition and/or covenant contained in the body of the Grant Agreement, the terms, provisions, conditions and/or covenants contained in said body shall prevail.

- 1) GRANTEE shall keep records and prepare reports, including detailed, separate financial records relating to ALL GRANT FUNDS. All accounts shall be prepared and maintained according to generally accepted accounting principles and as otherwise provided by law. GRANTEE shall maintain such accounts and documents as will serve to permit expeditious determination to be made at any time of the status of funds within the award, including the disposition of all monies received from the COUNTY and the nature and amount of all charges claimed to be against such funds.
- 2) GRANTEE shall provide the COUNTY written quarterly narrative progress reports regarding the Project and use of grant funds within three (3) weeks after the end of each quarter of the fiscal year. GRANTEE's narrative reports shall contain the following information: summary of the status in the relationship to outcomes, outputs and scheduled action steps outlined in the grant proposal; numbers and descriptions of people or businesses served including progress in meeting performance standards and economic self-sufficiency if appropriate. Within three (3) weeks after expiration of the time of performance, GRANTEE shall submit to the COUNTY a final project report in a form satisfactory to the COUNTY documenting GRANTEE's efforts toward meeting the requirements of this Agreement, an inventory of all equipment costing \$5,000.00 or more acquired with funds provided under this Agreement, and a list of expenditures incurred in the performance of this Agreement. GRANTEE's final project report shall contain the following information: summary of program status in relation to outcomes, outputs and scheduled action steps outlined in the grant proposal; numbers and descriptions of people or businesses served; financial status report of COUNTY funds used; and narrative report, including progress in meeting performance standards and economic self-sufficiency, if appropriate.

- 3) GRANTEE shall provide the COUNTY written quarterly allotment, financial and demographic reports on forms prescribed by the department.
- 4) GRANTEE shall not use grant funds to compensate its employees more than the prevailing wages in the State of Hawaii for employees with similar skills and abilities.
- 5) Unless otherwise required in the Grant Agreement or in related application submittals, GRANTEE shall supply the COUNTY with a copy of its audited financial statements, prepared by its Certified Public Accountant(s). GRANTEE shall, upon request of the COUNTY, provide the COUNTY full access to inspect or audit GRANTEE's records, report books, files, and other financial records and documents to allow the COUNTY to determine compliance with the terms of the Grant Agreement, measure program effectiveness, and assure proper expenditure. GRANTEE shall cooperate fully and assist the COUNTY in any such audit or inspection.
- 6) GRANTEE shall give the COUNTY and, if applicable, the State of Hawaii, appropriate recognition in all grant-funded programs and printed materials.
- 7) GRANTEE shall comply with its articles of incorporation and/or bylaws and all relevant COUNTY, State and/or Federal rules and regulations concerning its policies and operations.
- 8) GRANTEE shall not discriminate either in the hiring of staff, use of volunteers, use of facilities, or delivery of client services on the basis of sex, sexual orientation, national origin, age, race, color, religion or disability. GRANTEE shall comply with all applicable federal and state laws prohibiting discrimination.
- 9) GRANTEE shall not alter program plans which provided the justification for the grant without first obtaining the prior written consent of the COUNTY. GRANTEE shall inform the COUNTY of any proposed changes to the budget allocations or project description or schedule outlined herein.
- 10) GRANTEE shall comply with all requests of the County of Maui for information and reports regarding the Project and GRANTEE's operations.
- 11) GRANTEE shall comply with all applicable federal, state and COUNTY licensing requirements and with all applicable accreditation and other standards of quality generally accepted in the field of GRANTEE's activities. GRANTEE shall assure that any person or

entity GRANTEE may engage, retain or subcontract with to provide any service or perform any function under this grant complies with all applicable federal, state and COUNTY licensing requirements and with all applicable accreditation and other standards of quality generally accepted in said person's or entity's field.

- 12) GRANTEE shall not use any grant funds for purposes of providing entertainment, food and beverages, or perquisites to GRANTEE's employees or staff. For purposes of this Agreement, "perquisites" means a privilege provided or service rendered by GRANTEE to an employee, officer, director, or member of GRANTEE agency to reduce that individual's personal expenses.
- 13) GRANTEE shall not use any grant funds for payments into self-funded unemployment insurance benefit accounts. (H.R.S. Chapter 383-62)
- 14) As a nonprofit organization, GRANTEE shall establish and be governed by bylaws or policies which shall include provisions relating to nepotism and management of potential conflict-of-interest situations, as required by Section 3.36.040(c) of the Maui County Code.
- 15) GRANTEE shall not dispose of any real or personal property acquired with grant funds received under this Agreement without first receiving prior written consent of the COUNTY. Should GRANTEE cease to use any real or personal property acquired with grant funds for purposes described in this Agreement, GRANTEE shall either:
  - a) Pay the COUNTY the current fair market value of the asset; or
  - b) Transfer the control of the asset to the COUNTY.
- 16) Upon expiration or termination of this Agreement, the GRANTEE shall transfer to the COUNTY
  - a) Any COUNTY funds on hand at the time of termination;
  - b) Any account receivables attributed to the use of COUNTY funds; and
  - c) Any real and/or personal property acquired or improved in whole or in part with COUNTY funds.



17) **NONCOMPLIANCE, SUSPENSION AND TERMINATION:** GRANTEE's failure to faithfully perform any part of this Agreement or any of the Additional Conditions herein shall constitute noncompliance, and:

- a) Should the noncompliance continue for thirty (30) days after written notice thereof is delivered to GRANTEE or mailed to its last known address; or,
- b) If such noncompliance cannot be reasonably cured in thirty (30) days, and GRANTEE has failed to commence to cure such noncompliance and to continue to diligently use its best efforts to cure such noncompliance; or
- c) If GRANTEE shall become bankrupt; or,
- d) If GRANTEE fails to perform any of the terms of this Agreement, or abandons or substantially suspends any part of this Agreement's Scope of Work; then the COUNTY may, at its sole discretion, take any one or more of the following actions:
  - i) Withhold grant fund payments pending correction of the noncompliance by the GRANTEE;
  - ii) Disallow all or part of the cost/expense of the activity or action not in compliance;
  - iii) Suspend or terminate, wholly or partially, the current award of this Agreement with the GRANTEE;
  - iv) Withhold additional award(s) to the GRANTEE; and
  - v) Terminate this Agreement without service or notice or legal process and without prejudice to any other remedy or right of action for breach or contract

18) Upon termination of this Agreement, all finished or unfinished documents, data, studies, and reports purchased or prepared by the GRANTEE pursuant to this Agreement shall be transferred to the COUNTY.

19) **COST INCURRED DUE TO SUSPENSION OR TERMINATION:** Any costs incurred by the GRANTEE resulting from any obligations incurred by GRANTEE during suspension or after termination of this Agreement are not allowable unless the COUNTY authorizes such costs in the Notice of Suspension or Termination issued to the GRANTEE. The determination of eligible costs shall be made by the COUNTY in its sole discretion.

**20) FOR GRANTS INVOLVING USE OF COUNTY FUNDS FOR THE DESIGN AND/OR CONSTRUCTION OF IMPROVEMENTS TO REAL PROPERTY IN ADDITION TO THE ABOVE CONDITIONS, THE FOLLOWING CONDITIONS SHALL ALSO APPLY:**

**a) PERFORMANCE SCHEDULE**

- i) Within thirty (30) days from receipt of the COUNTY issued notice to proceed, GRANTEE shall provide the COUNTY with an implementation schedule specifically indicating the time frame and the expenditures required to complete each major phase of the Project. Quarterly, GRANTEE shall submit status reports to the COUNTY in a form acceptable to the COUNTY, detailing the Project's financial status and progress of the Scope of Work. Status reports shall be submitted within three (3) weeks after the end of the quarter of the fiscal year.
- ii) Within ninety days of the Project completion, a final report shall be furnished to the COUNTY. Additional reports required by the COUNTY shall be provided by the GRANTEE as requested.

**b) INSPECTIONS AND MONITORING:** During normal business hours, all of GRANTEE'S records relating to the Project will be available for examination by the COUNTY. On a semi-annual basis until the final report for the Project is accepted by the COUNTY, the COUNTY will make a determination as to whether the GRANTEE (a) has complied with the terms of this Agreement; and (b) has the continuing capacity to complete the Project in a timely manner. The COUNTY may withhold payments if it determines that the GRANTEE is unable to comply with these requirements.

**c) SUBCONTRACTING:** The GRANTEE shall not procure or subcontract any part of the services under this Agreement without the prior written consent of the COUNTY. All subcontracts entered into by the GRANTEE shall be in writing.

**d) PROCUREMENT:** If GRANTEE contracts for the design and/or construction of any structure, defined for purposes hereof as any construction involving a load-bearing wall, GRANTEE shall comply with the Hawaii Public Procurement Code, Chapter 103D, Hawaii Revised Statutes, and any COUNTY procurement policies for the procurement of contracts for design and/or construction of any structures as defined herein. GRANTEE

shall submit to the COUNTY copies of all plans, specifications, permits and other approval applications for review and approval by the COUNTY's designated departmental officer prior to soliciting construction bids and proposals from contractors for the construction. Additionally, GRANTEE shall ensure that all procurement transactions for construction of non-structures, as defined herein, and all procurement transactions for goods and services are conducted in a manner to provide, to the maximum extent practical, open and free competition.

- e) **PREVAILING WAGES:** GRANTEE shall ensure that all contractors and subcontractors shall comply with all applicable provisions of the prevailing wage schedule as required under Chapter 104, Hawaii Revised Statutes, and further, shall require all contractors and subcontractors to submit certified payroll records to the GRANTEE on a periodical basis for GRANTEE's and the COUNTY's review and files.
- f) **METHOD OF PAYMENT:** GRANTEE shall submit to the COUNTY written Request for Payment. Each request shall be authenticated as to accuracy by the GRANTEE, and verified by the designated COUNTY departmental officer. Each request shall include the following:
  - i) Certification by the GRANTEE that the work for which payment is requested was performed in accordance with the terms of this Agreement;
  - ii) Certified payroll records for the applicable time period or phase for which payment is being requested; and
  - iii) Copies of all contracts, bills, invoices and purchase orders which support the request shall:
    - (a) Be the original document, unless prior approval is obtained from the COUNTY's designated departmental officer to submit document copies.
    - (b) Be under the letterhead of the respective contractor or subcontractor requesting payment.
    - (c) Be signed by an authorized official of the GRANTEE.
    - (d) Identify the Project, the nature of the work or materials provided, and the specific Phase of the Project for which the work or materials were provided.



- 21) GRANTEE shall maintain in its files, at all times, documentation verifying that work described in any contract, bill, invoice, purchase order or Request for Payment sent to the COUNTY is correct, complete, and in accordance with the terms of this Agreement. Initial and final payment under this Agreement shall be subject to receipt by COUNTY of original tax clearance certificates for the GRANTEE from the State of Hawaii Department of Taxation and the Internal Revenue Service. A current Certificate of Vendor Compliance (CVC) is also acceptable in lieu of tax clearance certificates.
- 22) THE COUNTY MAY WITHHOLD ANY OR ALL PAYMENTS TO THE GRANTEE IF THE AMOUNT OF PAYMENT AS REQUESTED IS, IN THE COUNTY'S DETERMINATION, UNREASONABLE, OR DOES NOT COMPLY WITH THE TERMS OF THIS AGREEMENT.
- 23) PROSELYTIZATION PROHIBITED: Grant funds shall not be used to recruit or convert a person to a new faith, institution, or cause.

## ## ##

<Family Life Center Inc.>  
<Case Management>

Performance Period: <FY 25 July 1, 2024-June 30, 2025 & FY 26 July 1, 2025-June 30, 2026>

**Program Proposal**

**I. Executive Summary:**

This proposal requests annual funding of \$213,750 to provide *intensive case management services* for 100 clients who access FLC's emergency shelter and 80 individuals participating in the Permanent supportive housing program. The total request for FY 2025 & 2026 is \$427,500 to serve 180 clients annually in Maui County.

The *purpose* of the program is to provide the necessary case management support services to *achieve the goal* of securing and retaining permanent housing. Chronically homeless individuals (those with a disability and long-term lengths of homelessness) typically come directly from living unsheltered on the streets. These individuals require intense case management to successfully sustain housing.

Since 1999, Family Life Center has been a leader in Maui County in ending the cycle of homelessness by providing safe housing, compassionate support, and opportunities for self-sufficiency. Through outreach services, an emergency shelter, housing placement and rental assistance together with case management and other supportive services, FLC has helped to both prevent homelessness and move individuals out of homelessness. FLC fosters the belief that support services, coupled with emergency shelter and housing programs are vital steps to help individuals and families make the progression to a stable and independent lifestyle.

**II. Background:**

Homelessness is an issue in Maui County. According to the 2023 Point in Time Count conducted in January 2023, there were 740 homeless individuals on Maui. During the period from 7/1/2022 through 6/30/2023, FLC served 892 homeless individuals (data collected through the HMIS-Homeless Management Information System). FLC estimates that the total numbers of unsheltered individuals in Maui County are higher based on encounters with individuals who are not included in the 892 because they do not agree to share their identifying information.

The Maui community has expressed concerns about homeless individuals who populate the beaches and parks. The only real solution to homelessness is permanent housing. Our challenge is to engage all homeless individuals to provide services to assist in exiting out of homelessness.

**Target Population**

There are two target populations for this grant:

1. Homeless individuals who access Emergency shelter services at Family Life Center and are seeking permanent housing and

2. Those formerly homeless individuals who participate in the Permanent Supportive Housing program and need case management services to sustain housing.

#### **Past Agency Experience**

Since 1999, Family Life Center has been involved in delivering social services to the homeless including outreach/engagement, housing placement and rental assistance, emergency shelter services and permanent housing utilizing funding from the State of Hawaii, HUD, County of Maui, and other sources.

**Table 1 - Program Personnel**

Position Title and (Personnel's Name)	Positions' required qualifications	Brief description of main duties for this program	Funded in full/part of COM grant? (Yes or No)
Chief Finance Officer [REDACTED]	Min. AA or 5 yrs. equiv. experience.	Accounting support for housing payments.	Yes
Team Leader III [REDACTED]	Min. BA or 5 yrs. equiv. experience	Utilize client centered approach and motivational interviewing techniques to assist clients in both obtaining and sustaining permanent housing. Ms. Enos has her licensed practical nursing degree, and also her BLS.	Yes
Case Manager III [REDACTED]	Min. BA or 5 yrs. equiv. experience	Utilize client centered approach and motivational interviewing techniques to assist clients in both obtaining and sustaining permanent housing. Ms. Alvarez has a master's in psychology and Counseling and has over 30 years of experience as a Case Manager providing individual and group counseling, crisis intervention and conducting workshops on substance abuse prevention and treatment.	Yes
Case Manager III [REDACTED]	Min. BA or 5 yrs. equiv. experience	Utilize client centered approach and motivational interviewing techniques to assist clients in both obtaining and sustaining permanent housing. Ms. Miguel has BA in Psychology and is has previous experience as a Mental Health Case Manager.	Yes
Case Manager III (TBH)	Min. BA or 5 yrs. equiv. experience	Utilize client centered approach and motivational interviewing techniques to assist clients in both obtaining and sustaining permanent housing	Yes

#### **III. Program Description:**

The *purpose* of the program is to provide Case Management services that will help homeless individuals and families quickly exit homelessness and sustain permanent housing. Case management services are necessary to support disabled individuals with long lengths of homelessness.



**Housing Stabilization Case Management-** The Case Manager meets with the participant to initiate case management and develop a Housing Plan. Case management services will support the client in sustaining permanent housing. The case manager will:

- Complete a VI-SPDAT- a triage tool to determine risk and prioritization. The VI-SPDAT is composed of four domains: History of Housing and Homelessness, Risks, Socialization and Daily Function, and Wellness. The VI-SPDAT allows communities to assess clients' various health and social needs quickly, and then match them to the most appropriate housing interventions available.
- Assist with obtaining needed documents – ID, SS Card, Birth Certificate, Disability Documentation, and/or Length of Homelessness documentation.
- Identify health issues including mental health and substance abuse; identify health care provider, make contact if needed, refer, and assist in obtaining if needed.
- Engage individuals in a culturally sensitive and encouraging manner to promote strengths, abilities, and positive attitude for reaching goals.
- Ensure individuals are accessing relevant FLC programs (furniture, food, clothing, substance abuse treatment, rep payee services) in a timely manner.
- Ensure individuals are accessing mainstream services and other available resources.
- Assist participants in or increasing their own income through employment, where possible, or by enabling access to mainstream assistance programs such as Social Security.
- Identify any needs for basic hygiene items, clothing, food, and/or furniture.
- Assist in resolving personal issues that are, or may become, barriers to achieving housing stability.
- Commit to home visits to assess and monitor goal attainment progress, and supplement needs of the client to maintain stability.
- Case Manager will provide services to create long-term housing stability including Crisis intervention, Landlord intervention, Coordination with mental health case management, and/or referral and assistance in accessing other treatment needs. FLC practices a low barrier approach to housing which means that clients are encouraged to work through barriers **after** they are housed. Case managers assist clients in identifying barriers that can be addressed once the client is no longer facing the day-to-day challenges of being homeless. Clients are provided with these supports which allows them to focus on good tenancy skills such as paying their rent on time, housekeeping skills and upkeep of the unit, thereby enhancing their ability to sustain housing.
- Case notes will reflect contact attempts, services provided, including activities aimed at assisting tenants to meet their service plan goals, and efforts to help establish linkages to other service providers, community resources, and support from friends and family.

**Coordinated entry** – The Case manager is integral to the CES – Coordinated Entry System. The system allows for consistent and uniform access to housing resources, assessment, prioritization, and referral processes to determine the most appropriate response to each individual or family's immediate housing needs. This system of Coordinated Entry is not only mandated by HUD but is recognized nationally as a best practice, can improve efficiency, and can help serve more people efficiently with assistance targeted to address their housing needs. In

partnership with the County of Maui, Dept. of Housing and Human Concerns, FLC has taken a lead role in establishing the Coordinated Entry System for Maui County.

**Housing First and Housing Approach- Promoting participant choice** – The program is designed to support the choices made by persons experiencing homelessness. FLC has embraced the Housing First approach – a programmatic and systems approach that center on providing homeless individuals with housing quickly and providing services as needed using a low barrier approach that emphasizes community integration, stable tenancy, recovery and individual choice.

Case Managers will employ the following approach when working with individuals:

- Choice of where the household wants to live relative to the amount of money they have.
- Connection to mainstream and community support from day one in housing.
- Strong focus on employment whenever practical and possible from early on in housing.
- Objective-based interactions in each engagement.
- All goal setting is related back to housing stability.
- Structured, sequential, and documented planning.
- Crisis planning and risk assessment with each household after housed.
- Honest and realistic budgeting with an eye to when a subsidy ends.
- Rigorously following the five essential and sequential elements to housing stability.
  - Following the Housing First philosophy.
  - Focus on Housing Before Anything Else.
  - Create an Individualized Service Plan.
  - Increase Self Awareness.
  - Support Achievements in Self-Management.
  - Allow the Client to Reframe/Rebuild Their Life and Future.

**Assertive Engagement/Motivational Interviewing-** FLC utilizes Assertive Engagement and Motivational Interviewing - an intentional approach in the delivery of services. FLC staff use their interpersonal skills and creativity to effectively make the environments and circumstances that participants are encountered in more conducive to change than they might otherwise be.

FLC recognizes that:

- Participants who don't see the negative consequences of their actions or behaviors tend to resist change.
- Participants who have developed coping and survival strategies tend to resist change.
- Participants who feel apart from natural supports and mainstream systems tend to resist change.
- The role of the caseworker is not to coerce people to change but to create the conditions whereby people can make changes, when they are ready, confident, and recognize the importance of doing so.
- That Assertive Engagement is a dynamic approach. Caseworkers must be able to adapt to what is in front of them, continually monitoring their approach to ensure that it remains "just right." As participants begin to work towards change, the staff can start to scale back on intensity. If they start to disengage again, the worker must ramp up intensity to match the need.

**IV. Collaboration in Providing Services:**

**Table 2.1 Projected Collaboration FY25**

<b>FY2025 Projected Collaboration in Providing Services,</b>			
<b>Agency, service, or community resource</b>	<b>Type of coordinated activities</b>	<b>Number of persons to be served</b>	<b>Outcomes to be supported by this collaboration</b>
<b>Veteran's Affairs</b>	<b>HUD/VASH program -FLC provides utility/security deposits for homeless veterans. HUD/VASH provides ongoing rental support</b>	Annual -10	Homeless veterans transitioned to permanent housing
<b>Mental Health Kokua Aloha House</b>	Mental health services: 1 - FLC coordinates and refers clients to Mental Health Kokua. MHK conducts mental health screenings and if appropriate, facilitates ongoing services 2 – Permanent supportive housing – FLC provides ongoing rental support that is matched with mental health case management provided by either Mental Health Kokua or Aloha House	Annual-36  Annual -35	Homeless individuals with mental health issues access mental health treatment services Homeless individuals with mental health issues achieve permanent housing with ongoing case management support
<b>County HUD Section 8 office</b>	FLC has a by name relationship with most of the HUD Section 8 staff. FLC has offered and hosted Section 8 briefings at its facilities. This has benefitted both potential HUD Section 8 recipients as well as the HUD office. On an ongoing basis, FLC and HUD staff will collaborate on timing of inspections and other processes	This number is dependent of HUD Section 8 vouchers available This past year – 30 households	Both homeless and at-risk of homeless individuals achieve permanent housing
<b>Ka Hale a ke Ola</b>	Outreach clients are referred to KHAKO for shelter services. KHAKO refers their clients to FLC for housing resources	Annual –75	Homeless individuals have access to shelter services/shelter clients have access to housing resources
<b>How collaborations will achieve program Outcomes and ensure non-duplication of services:</b> Homeless or at-risk of homeless individuals are engaged and connected to available resources through these collaborations. Each of these resources is designed to either address barriers that limit access to permanent housing or provide support to sustain housing. FLC serves the same population but does not provide the same services as the collaborating agencies. Services are supplementary or complementary.			

**Table 2.2 Projected Collaboration FY26**

<b>FY2026 Projected Collaboration in Providing Services,</b>			
<b>Agency, service, or community resource</b>	<b>Type of coordinated activities</b>	<b>Number of persons to be served</b>	<b>Outcomes to be supported by this collaboration</b>
<b>Veteran's Affairs</b>	<b>HUD/VASH program</b> -FLC provides utility/security deposits for homeless veterans. HUD/VASH provides ongoing rental support	Annual -10	Homeless veterans transitioned to permanent housing
<b>Mental Health Kokua Aloha House</b>	Mental health services: 1 - FLC coordinates and refers clients to Mental Health Kokua. MHK conducts mental health screenings and if appropriate, facilitates ongoing services 2 – Permanent supportive housing – FLC provides ongoing rental support that is matched with mental health case management provided by either Mental Health Kokua or Aloha House	Annual-36  Annual -35	Homeless individuals with mental health issues access mental health treatment services Homeless individuals with mental health issues achieve permanent housing with ongoing case management support
<b>County HUD Section 8 office</b>	FLC has a by name relationship with most of the HUD Section 8 staff. FLC has offered and hosted Section 8 briefings at its facilities. This has benefitted both potential HUD Section 8 recipients as well as the HUD office. On an ongoing basis, FLC and HUD staff will collaborate on timing of inspections and other processes	This number is dependent of HUD Section 8 vouchers available This past year – 30 households	Both homeless and at-risk of homeless individuals achieve permanent housing
<b>Ka Hale a ke Ola</b>	Outreach clients are referred to KHAKO for shelter services. KHAKO refers their clients to FLC for housing resources	Annual –75	Homeless individuals have access to shelter services/shelter clients have access to housing resources
<b>How collaborations will achieve program Outcomes and ensure non-duplication of services:</b> Homeless or at-risk of homeless individuals are engaged and connected to available resources through these collaborations. Each of these resources is designed to either address barriers that limit access to permanent housing or provide support to sustain housing. FLC serves the same population but does not provide the same services as the collaborating agencies. Services are supplementary or complementary.			



## **V. Cost Effectiveness**

Ninety-four percent of program costs are direct service. Most administrative costs are covered by Family Life Center thereby effectively leveraging County funds.

FLC utilizes several integrated approaches to address homelessness. By leveraging each of these programs, greater benefits can be achieved. Funding from State and Federal sources provide emergency shelter and rental support; however, case management is still lacking.

Permanent supportive housing has now proven to be a *successful and cost-effective solution* to the homelessness crisis. The supportive housing model combines affordable housing assistance with vital support services. **Case management** is the most widely used form of services in supportive housing. For a significant number of homeless with mental or physical impairments (often coupled with drug and/or alcohol use issues) long-term homelessness can only be ended by providing permanent housing coupled with intensive supportive services. The case manager does not provide every service a tenant needs but helps broker relationships between the tenant and the service providers. Case management can include new tenant orientation, assistance with accessing childcare, community building activities and transportation to help the tenant access services in the community. Supportive housing services are intended to help ensure housing stability and to maximize each tenant's ability to live independently. Numerous research studies have shown that permanent supportive housing costs less than other forms of emergency and institutional care. According to Sadowski, et al. (2009) in a study published by the Journal of the American Medical Association, a Chicago study showed:

- 29% fewer hospitalizations
- 24% fewer emergency room visits
- 24% fewer days in nursing homes.

\$6,307 per person annual average cost savings

## **VI. Other Funding Resources:**

FLC continues to search for other funding sources. FLC leverages other programs to maximize support for clients. These programs include multiple contracts with the State of Hawaii, DHS/BESSD – Homeless Programs Office, and HUD to provide services to the homeless population. The Executive Director will also attend HUD sponsored trainings to advocate for and increase access to changes in HUD policy that may include provisions for future homeless housing funding.

**VII. Program Evaluation:**

**Table 3.1 FY25 Program Evaluation**

<b>FY2025 Program Evaluation PSH and shelter</b>	<b>ANNUAL GOAL</b>	<b>Data Source (ex. Sign-in sheets, database, client log, survey, pre/post-test, etc.)</b>
<b>Total Unduplicated Persons Served:</b>	<b>180</b>	HMIS database
<b>Outcome 1:</b> 75 Shelter participants will have successfully exited shelters and reintegrated into the community via permanent or permanent supportive housing	<b>75</b>	HMIS database
<b>Output 1a:</b> 100 participants will be intake/assessed for Shelter/Case Management services - Number of participants includes carryovers from the previous grant period	<b>100</b>	HMIS database
<b>Output 1b:</b> 75 participants will be referred and assisted in accessing FLC Housing and Rental Assistance Programs	<b>75</b>	HMIS database
<b>Outcome 2:</b> 65 participants in the Permanent Supportive Housing Program will stabilize and retain housing for at least 9 months	<b>65</b>	HMIS database
<b>Output 2a:</b> 80 participants will be housed in the Permanent Supportive Housing Program	<b>80</b>	HMIS database

*NOTE: FLC enters all client data into the Homeless Management Information System (HMIS.) Information for the above Outcomes/Outputs are derived from reports generated through the HMIS System. FLC enters all data into the HMIS system within 72 hours of services provided.*

**Table 3.2 FY26 Program Evaluation**

<b>FY2026 Program Evaluation PSH and shelter</b>	<b>ANNUAL GOAL</b>	<b>Data Source (ex. Sign-in sheets, database, client log, survey, pre/post-test, etc.)</b>
<b>Total Unduplicated Persons Served:</b>	<b>180</b>	HMIS database
<b>Outcome 1:</b> 75 Shelter participants will have successfully exited shelters and reintegrated into the community via permanent or permanent supportive housing	<b>75</b>	HMIS database
<b>Output 1a:</b> 100 participants will be intake/assessed for Shelter/Case Management services - Number of participants includes carryovers from the previous grant period	<b>100</b>	HMIS database
<b>Output 1b:</b> 75 participants will be referred and assisted in accessing FLC Housing and Rental Assistance Programs	<b>75</b>	HMIS database
<b>Outcome 2:</b> 65 participants in the Permanent Supportive Housing Program will stabilize and retain housing for at least 9 months	<b>65</b>	HMIS database
<b>Output 2a:</b> 80 participants will be housed in the Permanent Supportive Housing Program	<b>80</b>	HMIS database

*NOTE: FLC enters all client data into the Homeless Management Information System (HMIS.) Information for the above Outcomes/Outputs are derived from reports generated through the HMIS System. FLC enters all data into the HMIS system within 72 hours of services provided.*

# PROGRAM BUDGET

Agency Name: Family Life Center

Program Title: Case Management

Period\*: 7/1/24-6/30/25

(\*Budget must be for only one year. A separate set of budget tables is required for each year)

EXPENSE CATEGORIES	(a) Amount Requested	(b) *Other Resources	(c) Total Budget
<b>A. Personnel</b>			
Salaries	135,520.74		135,520.74
<i>Personnel Total:</i>	<i>135,520.74</i>	<i>0.00</i>	<i>135,520.74</i>
<b>B. Payroll Taxes and Fringe Benefits</b>			
Payroll Taxes & Assessments	19,528.54		19,528.54
Fringe Benefits (Medical/Dental)	17,699.18		17,699.18
<i>Taxes and Fringe Total:</i>	<i>37,227.72</i>	<i>0.00</i>	<i>37,227.72</i>
<b>C. Equipment</b>			
Equipment/Automobile purchases	1,500.00		1,500.00
<i>Equipment Total:</i>	<i>1,500.00</i>	<i>0.00</i>	<i>1,500.00</i>
<b>D. Supplies</b>			
Office & printing supplies	2,700.00		2,700.00
Program Supplies	1,324.38		1,324.38
<i>Supplies Total:</i>	<i>4,024.38</i>	<i>0.00</i>	<i>4,024.38</i>
<b>E. Staff Training &amp; Travel</b>			
Airfare/ferry			-
Per diem w/lodging			-
Ground transport, gas purchase, parking			-
Registration fees			-
<i>Training and Travel Total:</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>
<b>F. Other Expenses</b>			
Occupancy/Rent			-
Utilities	2,400.00		2,400.00
Travel/mileage (client services)	1,500.00		1,500.00
Facilities R & M	2,400.00		2,400.00
Postage/freight	116.26		116.26
Leasing vehicle	4,800.00		4,800.00
Contract services (program)			-
Telephone	3,120.00		3,120.00
Equipment rental R & M	655.01		655.01
Insurance - Vehicle/Other	2,640.00		2,640.00
<i>Other Total:</i>	<i>17,631.27</i>	<i>0.00</i>	<i>17,631.27</i>
<b>G. Administrative Cost (12% maximum)</b>			
Audit	-		-
Incidental mileage (non-program services)			-
Professional fees			-
Insurance (General /Director & Officer liability)			-
Life Insurance & Pension			-
Public Relations			-
Membership Fees/Dues			-
Publications/Subscriptions			-
Staff Recruitment & Supervision			-
General Admin, Accounting & Payroll	13,945.89		13,945.89
Staff IT/Tech Support	3,900.00		3,900.00
<i>Admin Cost Total:</i>	<i>17,845.89</i>	<i>0.00</i>	<i>17,845.89</i>
<b>TOTAL EXPENSES</b>	<b>213,750.00</b>	<b>-</b>	<b>213,750.00</b>
List *Other funding sources to be applied to this specific program. Note: Total column (b). must match the total below.		List all other County of Maui grants and include the Department, Grant #, and full grant amount.	
Source(s)	\$ Amount(s)	County Dept. - Title - Grant no.	\$ Grant Amount
		Molokai Homeless Services	200,000.00
		Outreach	215,000.00
		Rental Assistance Program	810,000.00
<b>Total Other Resources</b>	<b>-</b>		

### A. PERSONNEL (Budget Justification)

Period: 7/1/24-6/30/25

Agency Name: Family Life Center

Program Title: Case Management

#	POSITION TITLE & STAFF NAME List ALL personnel for the proposed program and indicate if position is vacant. Must match the Program Personnel table from the narrative proposal.	FTE to Agency	Annual Salary (a)	% Time Budgeted to Program (b)	% Time Budgeted to Grant (c)	Total Salary Budgeted to Grant (a x b x c)
3	██████████ (Finance Manager)	1.00	88,420.80	10%	100%	8,842.08
6	██████████ (Team Leader III)	1.00	62,732.80	50%	100%	31,366.40
7	██████████ (Case Manager III)	0.80	51,717.12	40%	100%	20,686.85
8	██████████ (Case Manager III)	1.00	63,377.60	40%	100%	25,351.04
9	Vacant (Case Manager III)	1.00	55,993.60	88%	100%	49,274.37
10						
11						
12						
13						
14						
15						
16						
<b>TOTAL:</b>				2.28		135,520.74
<b>Justification/comments:</b>						



## B. PAYROLL TAXES & FRINGE BENEFITS (Budget justification)

Period: 7/1/24-6/30/25

Agency Name: Family Life Center

Program Title: Case Management

Payroll Taxes and Assessments	Rate (%) (a)	Salary Budgeted to Grant (b)	Amount Charged to Grant (a x b)
Social Security/Medicare (FICA)	7.65%	135,520.74	\$ 10,367.34
Unemployment Insurance (Federal)	Exempt	135,520.74	\$ -
Unemployment Insurance (State) *not self funded	1.40%	135,520.74	\$ 1,897.29
Worker's Compensation	4.63%	135,520.74	\$ 6,274.61
Temporary Disability Insurance	0.73%	135,520.74	\$ 989.30
	14.41%		\$ -
<b>Subtotal payroll taxes and assessments</b>			<b>\$ 19,528.54</b>
<b>Fringe Benefits</b>			
Medical			\$ 16,416.00
Dental			\$ 1,283.18
<b>Subtotal fringe benefits</b>			<b>\$ 17,699.18</b>
<b>Total payroll taxes and fringe benefits</b>			<b>\$ 37,227.72</b>
<b>Justification comments:</b> (E.g., Medical/dental premiums for x number of employees * 12 months * (% charged to COM) = \$ COM cost) <b>Medical premiums for 2.28 employees * 12 months * \$600 Dental premium for 2.28 employees * 12 months * \$46.90 = \$803.99</b>			

### C. EQUIPMENT (Budget Justification)

Period: 7/1/24-6/30/25

Agency Name: Family Life Center

Program Title: Case Management

EQUIPMENT PURCHASES	QTY	UNIT COST	TOTAL COST	AMOUNT requested from County
Computer/printer/scanner for staff usage	1	1,500.00	1,500.00	\$ 1,500.00
				\$ 1,500.00
<b>Justification/Comments: (include purpose of equipment purchase and how it will be use to achieve program goals)</b>				

### D. SUPPLIES (Budget justification)

Period: 7/1/24-6/30/25

Agency Name: Family Life Center

Program Title: Case Management

PROGRAM SUPPLIES	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Activity workbooks: \$2,000 x 30% to program x 100% to COM = \$600)
Office & printing supplies	2,700.00	General office supplies/printer ink/paper (printing intake & other forms specific tho this program/file folders Av. Supplies cost \$225/mo
Program Supplies	1,324.38	Supplies for clients to assist with stabilization in home (ex. Bedding/cleaning) Clients who are transitioning to permanent housing from homelessness. Avg cost \$110/mo
<b>Total:</b>	<b>4,024.38</b>	

### E. STAFF TRAINING/TRAVEL (Budget Justification)

Period: 7/1/24-6/30/25

Agency Name: Family Life Center

Program Title: Case Management

Name and Title of Employee	Conference/Training: Name, location, date	a Per Diem w/lodging	b Air fare	c Ground Transport	d Register Fees	e Other costs	(a+b+c+d+e) Total
							.
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							.
<b>TOTAL:</b>		.	.	.	.	.	.

**Justification/comments:** (Include purpose of trip and how it achieves or supports program goals.)



**F. OTHER COST (Budget justification)****Period:** 7/1/24-6/30/25

**Agency Name:** Family Life Center

**Program Title.: Case Management**

OTHER COST	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Rent: \$20,000 x 30% to program x 100% to COM = \$6000)
Utilities	2,400.00	Annual utilities 40,000 X 6% to program X 100% to COM=2400
Facilities R&M	2,400.00	Annual r&m 40,000 X 6% to program X 100% to COM = 2400
Postage, freight	116.26	Postage and post office box
Telephone	3,120.00	Annual telecommunications \$52,000X6% to program X 100% to COM
Equipment rental R&M	655.01	Upkeep of leased vehicle
Insurance-Vehicle/Other	2,640.00	Annual insurance \$44,000X6% to program X 100% to COM
Travel/Mileage Client Services	1,500.00	Gas for home client visits \$125/mo
Leasing vehicle for home visits	4,800.00	Leasing vehicle 400/mo
<b>Total:</b>	<b>17,631.27</b>	

### G. ADMINISTRATIVE COST (Budget justification)

Period: 7/1/24-6/30/25

Agency Name: Family Life Center

Program Title.: Case Management

ADMIN COST	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Audit: \$3000 x 30% to program x 100% to COM = \$900)
Audit		
██████ - CEO	9,586.02	Annual Salary \$153,878 + Taxes-14.41% + Med 1231/mo + Dental \$75.28 x 5% to program x 100% to COM = \$9,586.02
██████ - Finance manager	4,359.87	Annual Salary \$88,421 + Taxes-14.41% + Med 615.22/mo + Dental \$37.64 x 5% to program x 100% to COM = \$4,359.87
MIS Tech support	3,900.00	Annual \$65,000 X 6% to program X 100% to COM = \$3900
<b>Total:</b>	<b>\$ 17,845.89</b>	

## PROGRAM BUDGET

Agency Name: Family Life Center

Program Title: Case Management

Period\*: 7/1/25-6/30/26

(\*Budget must be for only one year. A separate set of budget tables is required for each year)

EXPENSE CATEGORIES	(a) Amount Requested	(b) *Other Resources	(c) Total Budget
<b>A. Personnel</b>			
Salaries	135,520.74		135,520.74
<i>Personnel Total:</i>	135,520.74	0.00	135,520.74
<b>B. Payroll Taxes and Fringe Benefits</b>			
Payroll Taxes & Assessments	19,528.54		19,528.54
Fringe Benefits (Medical/Dental)	17,699.18		17,699.18
<i>Taxes and Fringe Total:</i>	37,227.72	0.00	37,227.72
<b>C. Equipment</b>			
Equipment/Automobile purchases	1,500.00		1,500.00
<i>Equipment Total:</i>	1,500.00	0.00	1,500.00
<b>D. Supplies</b>			
Office & printing supplies	2,700.00		2,700.00
Program Supplies	1,324.38		1,324.38
<i>Supplies Total:</i>	4,024.38	0.00	4,024.38
<b>E. Staff Training &amp; Travel</b>			
Airfare/ferry			-
Per diem w/lodging			-
Ground transport, gas purchase, parking			-
Registration fees			-
<i>Training and Travel Total:</i>	0.00	0.00	0.00
<b>F. Other Expenses</b>			
Occupancy/Rent			-
Utilities	2,400.00		2,400.00
Travel/mileage (client services)	1,500.00		1,500.00
Facilities R & M	2,400.00		2,400.00
Postage/freight	116.26		116.26
Leasing vehicle	4,800.00		4,800.00
Contract services (program)			-
Telephone	3,120.00		3,120.00
Equipment rental R & M	655.01		655.01
Insurance - Vehicle/Other	2,640.00		2,640.00
<i>Other Total:</i>	17,631.27	0.00	17,631.27
<b>G. Administrative Cost (12% maximum)</b>			
Audit			-
Incidental mileage (non-program services)			-
Professional fees			-
Insurance (General /Director & Officer liability)			-
Life Insurance & Pension			-
Public Relations			-
Membership Fees/Dues			-
Publications/Subscriptions			-
Staff Recruitment & Supervision			-
General Admin, Accounting & Payroll	13,945.89		13,945.89
Staff IT/Tech Support	3,900.00		3,900.00
<i>Admin Cost Total:</i>	17,845.89	0.00	17,845.89
<b>TOTAL EXPENSES</b>	<b>213,750.00</b>	<b>-</b>	<b>213,750.00</b>
<b>List *Other funding sources</b> to be applied to this specific program. Note: Total column (b). must match the total below.		List all other County of Maui grants and include the Department, Grant #, and full grant amount	
<b>Source(s)</b>	<b>\$ Amount(s)</b>	<b>County Dept. - Title - Grant no.</b>	<b>\$ Grant Amount</b>
		Molokai Homeless Services	200,000.00
		Outreach	215,000.00
		Rental Assistance Program	810,000.00
<b>Total Other Resources</b>	<b>-</b>		

### A. PERSONNEL (Budget Justification)

Period: 7/1/25-6/30/26

Agency Name: Family Life Center

Program Title Case Management

#	POSITION TITLE & STAFF NAME List ALL personnel for the proposed program and indicate if position is vacant. Must match the Program Personnel table on the narrative proposal.	FTE to Agency	Annual Salary (a)	% Time Budgeted to Program (b)	% Time Budgeted to Grant (c)	Total Salary Budgeted to Grant (a x b x c)
3	██████████ (Finance Manager)	1.00	88,420.80	10%	100%	8,842.08
6	██████████ (Team Leader III)	1.00	62,732.80	50%	100%	31,366.40
7	██████████ (Case Manager III)	0.80	51,717.12	40%	100%	20,686.85
8	██████████ (Case Manager III)	1.00	63,377.60	40%	100%	25,351.04
9	Vacant (Case Manager III)	1.00	55,993.60	88%	100%	49,274.37
10						
11						
12						
13						
14						
15						
16						
<b>TOTAL:</b>				2.28		135,520.74
<b>Justification/comments:</b>						

**B. PAYROLL TAXES & FRINGE BENEFITS (Budget justification)**Period: 7/1/25-6/30/26Agency Name: Family Life CenterProgram Title: Case Management

<b>Payroll Taxes and Assessments</b>	<b>Rate (%) (a)</b>	<b>Salary Budgeted to Grant (b)</b>	<b>Amount Charged to Grant (a x b)</b>
Social Security/Medicare (FICA)	7.65%	135,520.74	\$ 10,367.34
Unemployment Insurance (Federal)	Exempt	135,520.74	\$ -
Unemployment Insurance (State) *not self funded	1.40%	135,520.74	\$ 1,897.29
Worker's Compensation	4.63%	135,520.74	\$ 6,274.61
Temporary Disability Insurance	0.73%	135,520.74	\$ 989.30
	14.41%		\$ -
<b>Subtotal payroll taxes and assessments</b>			<b>\$ 19,528.54</b>
<b>Fringe Benefits</b>			
Medical			\$ 16,416.00
Dental			\$ 1,283.18
<b>Subtotal fringe benefits</b>			<b>\$ 17,699.18</b>
<b>Total payroll taxes and fringe benefits</b>			<b>\$ 37,227.72</b>
<b>Justification comments:</b> (E.g., Medical/dental premiums for x number of employees * 12 months * (% charged to COM) = \$ COM cost) <b>Medical premiums for 2.28 employees * 12 months * \$600 Dental premium for 2.28 employees * 12 months * \$46.90 = \$803.99</b>			



### C. EQUIPMENT (Budget Justification)

Period: 7/1/25-6/30/26

Agency Name: Family Life Center

Program Title: Case Management

EQUIPMENT PURCHASES	QTY	UNIT COST	TOTAL COST	AMOUNT requested from County
Computer/printer/scanner for staff usage	1	1,500.00	1,500.00	\$ 1,500.00
				\$ 1,500.00

**Justification/Comments:** (include purpose of equipment purchase and how it will be use to achieve program goals)

### D. SUPPLIES (Budget justification)

Period: 7/1/25-6/30/26

Agency Name: Family Life Center

Program Title: Case Management

PROGRAM SUPPLIES	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Activity workbooks: \$2,000 x 30% to program x 100% to COM = \$600)
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<b>Total:</b>	<b>4,024.38</b>	

### E. STAFF TRAINING/TRAVEL (Budget Justification)

Period: 7/1/25-6/30/26

Agency Name: Family Life Center

Program Title: Case Management

Name and Title of Employee	Conference/Training: Name, location, date	a Per Diem w/lodging	b Air fare	c Ground Transport	d Register Fees	e Other costs	(a+b+c+d+e) Total
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<b>TOTAL:</b>		.	.	.	.	.	.

**Justification/comments:** (Include purpose of trip and how it achieves or supports program goals.)

**F. OTHER COST (Budget justification)****Period:** 7/1/25-6/30/26

**Agency Name:** Family Life Center

**Program Title.: Case Management**

OTHER COST	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Rent: \$20,000 x 30% to program x 100% to COM = \$6000)
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<b>Total:</b>	<b>17,631.27</b>	

**G. ADMINISTRATIVE COST (Budget justification)**

Period: 7/1/25-6/30/26

Agency Name: Family Life Center

Program Title.: Case Management

ADMIN COST	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Audit: \$3000 x 30% to program x 100% to COM = \$900)
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██████████ Finance manager	4,359.87	Annual Salary \$88,421 + Taxes-14.41% + Med 615.22/mo + Dental \$37.64 x 5% to program x 100% to COM = \$4,359.87
MIS Tech support	3,900.00	Annual \$65,000 X 6% to program X 100% to COM = \$3900
<b>Total:</b>	<b>\$ 17,845.89</b>	





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:** FAMILY LIFE CENTER INC

**DBA/Trade Name:** FAMILY LIFE CENTER INC

**Issue Date:** 09/11/2024

**Status:** Compliant

Hawaii Tax#: [REDACTED]  
New Hawaii Tax#: T [REDACTED]  
FEIN/SSN#: XX-XXX5042  
UI#: XXXXXX6409  
DCCA FILE#: 50149

Status of Compliance for this Vendor on issue date:

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

**Status Legend:**

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

# DCCA State of Hawaii

Downloaded on September 11, 2024.

The information provided below is not a certification of good standing and does not constitute any other certification by the State.

Website URL: <http://nbe.ehawaii.gov/documents>

## Business Information

MASTER NAME	FAMILY LIFE CENTER, INC.
BUSINESS TYPE	Domestic Nonprofit Corporation
FILE NUMBER	50149 D2
STATUS	Active
PURPOSE	TO ESTABLISH, OPERATE, AND MAINTAIN AN OUTREACH PROGRAM FOR THE AID OF MEN, WOMEN, AND CHILDREN IN NEED; (SEE AMRS FILED 7/22/2013)
ORGANIZED IN	Hawaii UNITED STATES
INCORPORATION DATE	Jan 20, 1982
MAILING ADDRESS	95 S KANE ST KAHULUI, Hawaii 96732 UNITED STATES
TERM	PER
AGENT NAME	SUE NAKAMA
AGENT ADDRESS	95 S KANE ST KAHULUI, Hawaii 96732 UNITED STATES

## Annual Filings

FILING YEAR	DATE RECEIVED	STATUS
2024	Jan 11, 2024	Processed
2023	Mar 15, 2023	Processed
2022	Jan 4, 2022	Processed
2021	Jan 5, 2021	Processed
2020	Apr 1, 2020	Processed
2019	Feb 2, 2019	Processed
2018	Jan 18, 2018	Processed
2017	Jan 18, 2017	Processed
2016	Jan 14, 2016	Processed
2015	Jan 21, 2015	Processed
2014	Jan 7, 2014	Processed
2013	Jan 8, 2013	Processed
2012	Jan 4, 2012	Processed
2011	Jan 25, 2011	Processed
2010	Jan 12, 2010	Processed
2009	Jan 12, 2009	Processed
2008	Jun 2, 2008	Processed
2007	Apr 3, 2007	Processed
2006	May 1, 2006	Processed
2005	Apr 13, 2005	Processed
2004	Aug 30, 2004	Processed

2003	Apr 3, 2003	Processed
2002		Not Required
2001	Mar 15, 2002	Processed
2000		Processed
1999		Processed

## Officers

NAME	OFFICE	DATE
MAROCCO, JAMES DWIGHT DR	P/D	Jan 1, 2014
MAROCCO, JOSHUA	V/D	Jan 1, 2020
EDDY, SHIRLEY	T/S/D	Jan 1, 2014
CUMMING, MAUDE L	CEO	Jan 1, 2023
OSTEMILLER, REGGIE	D	Jan 1, 2020
ARUDA, MANUEL	D	Jan 1, 2022
TORRES, CHARLOTTE	D	Jan 1, 2014

## Trade Names

NAME	TYPE	CATEGORY	REGISTRATION DATE	EXPIRATION DATE	STATUS
ALOHALIMA	Trade Name	NO CATEGORY SELECTED	Oct 23, 2001	Oct 22, 2002	Expired
ALOHALIMA	Trade Name	NO CATEGORY SELECTED	Feb 2, 2000	Feb 1, 2001	Expired
FAMILY LIFE COMMUNITY CENTER	Trade Name	NO CATEGORY SELECTED	Feb 3, 1997	Feb 2, 1998	Expired
HO'OLANANI	Trade Name	NO CATEGORY SELECTED	Feb 15, 2019	Feb 14, 2029	Active
HOUSE OF NEW LIFE	Trade Name	NO CATEGORY SELECTED	Feb 11, 2004	Feb 10, 2009	Cancelled
HO'OLANANI	Trade Name	NO CATEGORY SELECTED	Jun 2, 2008	Jun 1, 2018	Expired
MAUI RACQUETBALL CLUB & SPA	Trade Name	NO CATEGORY SELECTED	Feb 17, 1983	Feb 16, 1993	Expired
PEACE IN THE FAMILY PROGRAM	Trade Name	NO CATEGORY SELECTED	Apr 4, 1994	Apr 3, 2005	Expired

## GRANT AGREEMENT CERTIFICATION

I, **MARCY MARTIN**, Director of Finance of the County of Maui, State of Hawaii,  
do certify that there is available appropriation or balance of an appropriation over and above all  
outstanding contracts, sufficient to cover the amount required by the foregoing contract, i.e.

<u>Appropriation Index</u>	<u>Title</u>	<u>Amount Required</u>
925059B /✓	HC HOUSELESS PROGRAM /✓	(6317) /✓ \$ 215,000.00 /✓

GRANT AGREEMENT      G 6187 /      FAMILY LIFE CENTER INC./

Dated this      3 day of OCTOBER 2024  
Grant Period:      July 1, 2024 to June 30, 2025 /



MARCY MARTIN  
Director of Finance

Outreach  
for Department of Human Concerns (DHC)  
(1st of a 2-year contract)  
**ORDINANCE #5657 (FY2025)** /

#J937

FY 2025

ri

ms  
10/13/2024

**RICHARD T. BISSEN, JR.**  
Mayor

**MARCY MARTIN**  
Director



**DEPARTMENT OF FINANCE**  
COUNTY OF MAUI  
200 SOUTH HIGH STREET  
WAILUKU, MAUI, HAWAII 96793  
[www.mauicounty.gov](http://www.mauicounty.gov)

October 15, 2024

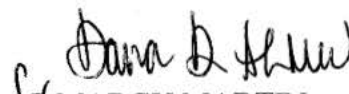
Family Life Center Inc.  
95 South Kane Street  
Kahului, HI 96732

**RE: OUTREACH**  
**GRANT NO. G6187**

Dear Family Life Center, Inc.:

Transmitted is a copy of the fully executed grant agreement for your file.

Sincerely,

  
for **MARCY MARTIN**  
Director of Finance

MM:dda  
Enclosure

xc: Department of Human Concerns, Grants Management Division



GRANT AGREEMENT OF COUNTY FUNDS

(FY2025 & FY2026) DHC GRANT

G6187

Certification Requested from County: 925059B: \$ 215,000.00

THIS GRANT AGREEMENT ("Agreement") is made this 15<sup>th</sup> day of October, 2024, by and between FAMILY LIFE CENTER, INC., a Hawaii nonprofit corporation, whose local mailing address is 95 South Kane Street, Kahului, Maui, Hawaii, 96732, hereinafter referred to as the "GRANTEE", and the COUNTY OF MAUI, a political subdivision of the State of Hawaii, whose principal place of business is 200 South High Street, Wailuku, Maui, Hawaii 96793, hereinafter referred to as the "COUNTY". The GRANTEE and the COUNTY shall hereinafter be referred to collectively as the "Parties".

WITNESSETH:

WHEREAS, the COUNTY desires to encourage and support the Outreach program; and

WHEREAS, the Department of Human Concerns ("DHC") has reviewed and approved the GRANTEE's application for a grant of COUNTY funds to provide services in furtherance of this goal.

NOW, THEREFORE, the COUNTY and GRANTEE in consideration of the mutual promises hereinafter set forth hereby agree as follows:

A. General Conditions. In consideration of a grant of COUNTY funds, the GRANTEE agrees to the following conditions in the use and administration of the COUNTY funds:

1. The GRANTEE shall provide all services and fulfill all terms and conditions of the grant, attached as Exhibits "A" through "C-2", which are incorporated by reference and made a part hereof.
2. Initial and final payment under this Agreement shall be subject to receipt by the COUNTY of original copies of State of Hawaii Tax Clearance Certificate(s) for the GRANTEE validated by the State of Hawaii Department of Taxation and the Internal Revenue Service ("IRS") or a Certificate of Vendor Compliance ("CVC") as required by COUNTY policy.
3. This Agreement is for two (2) grant performance periods (See: Section P below), which are contingent upon the following:

- 1) The availability and appropriation of funds;
  - 2) GRANTEE's compliance with all DHC Grants Management Division ("GMD") mandates and instructions pursuant to the grant application, the terms and conditions of the grant, and fiscal policies and procedures; and
  - 3) GRANTEE's successful performance of all program and fiscal reporting requirements as specified in this Agreement.
4. Second year grant specifications are subject to change depending upon the availability of funds, programs and/or any other factors as determined by the COUNTY.
- B. Project Budget. The COUNTY agrees to make available as a grant to the GRANTEE a sum not to exceed, for FY2025, TWO HUNDRED FIFTEEN THOUSAND AND NO/100 DOLLARS (\$215,000.00) in grant funds (Index code: 925059B; grants and disbursements for health, human services, and education); and a sum not to exceed, for FY2026, TWO HUNDRED FIFTEEN THOUSAND AND NO/100 DOLLARS (\$215,000.00) in grant funds for this two year Agreement. The GRANTEE agrees to use the grant funds solely for purposes specified in Exhibit "B" and shall allocate the COUNTY funds according to the budget attached as Exhibits "C-1" (an amount not to exceed \$215,000.00 for FY2025) and "C-2" (an amount not to exceed \$215,000.00 for FY2026).

GRANTEE shall comply with all standard policies and procedures pertaining to budget revisions and budget modifications as specified in the DHC GMD budget revision guidelines.

- C. Method of Payment. For and in consideration of the agreements and undertakings of the GRANTEE pursuant to this Agreement, the COUNTY hereby agrees to pay the GRANTEE in five (5) allotments as follows:

1. A first payment (Advance) may be up to 25% of the fiscal year grant award. Disbursement will be made within twenty-one (21) days of the execution of this Agreement subject to the GRANTEE's satisfactory completion of required supporting documents.
2. The second payment may be up to 25% of the fiscal year grant award or an amount so that the cumulative grant payments do not exceed 50% of the fiscal year grant award.
3. The third payment may be up to 25% of the fiscal year grant award or an amount so that the cumulative grant payments do not exceed 75% of the fiscal year grant award.
4. The fourth payment may be up to 15% of the fiscal year grant award or an amount so

that the cumulative grant payments do not exceed 90% of the fiscal year grant award.

5. The fifth and final payment may be up to 10% of the fiscal year grant award or an amount so that the cumulative grant payments do not exceed 100% of the fiscal year grant award.

With the exception of the first (Advance) payment, all payments will be made no later than thirty (30) calendar days after the receipt of the GRANTEE's quarterly reports and allotment request, provided that the GRANTEE is in compliance with all terms and conditions of this Agreement.

- D. Reporting Requirements. The GRANTEE shall submit to the COUNTY a Quarterly Certification, Quarterly Allotment Request (QAR), a Quarterly Financial Report (QFR), a Quarterly Demographics Report (QDR), and a Quarterly Narrative Report (QNR), on forms prescribed by the DHC not later than three (3) weeks following the end of each quarter, as follows:

<u>1<sup>st</sup> Year (FY2025) Quarterly Reports</u>	<u>Due to the COUNTY No Later Than</u>
First Quarter (Jul-Sep 2024)	October 21, 2024
Second Quarter (Oct-Dec 2024)	January 21, 2025
Third Quarter (Jan-Mar 2025)	April 21, 2025
Fourth Quarter (Apr-Jun 2025)	July 21, 2025
<u>2<sup>nd</sup> Year (FY2026) Quarterly Reports</u>	<u>Due to the COUNTY No Later Than</u>
First Quarter (Jul-Sep 2025)	October 21, 2025
Second Quarter (Oct-Dec 2025)	January 21, 2026
Third Quarter (Jan-Mar 2026)	April 21, 2026
Fourth Quarter (Apr-Jun 2026)	July 21, 2026

The Quarterly Reports shall be submitted in a timely manner and authenticated as to its accuracy by the GRANTEE, verified by a designated COUNTY official and shall include a certification by the GRANTEE that the work was performed in accordance with the terms and conditions of this Agreement.

- E. Program Monitoring. The GRANTEE shall retain and permit the COUNTY or its duly authorized agent free access to any and all GRANTEE programs, facilities, events or activities without advance or formal notification or appointment when such access is for the express

purpose of monitoring, investigating, researching or formulating programs, services, or related policies and procedures or when the COUNTY is otherwise in the pursuit of any official business relative to any aspect of this Agreement.

**F. Documents and Files.**

1. Any information, data, report, record, summary, table, map or study given to or prepared or assembled by the GRANTEE under this Agreement that the COUNTY requests to be kept confidential shall not be made available to any individual or organization other than any subcontractor to which the material may relate, without prior written approval of the COUNTY.
2. The COUNTY shall have complete ownership of all material, both finished and unfinished, that is developed, prepared, assembled, or conceived by the GRANTEE pursuant to this Agreement, and all such materials shall be considered "works made for hire". All such material shall be delivered to the COUNTY upon expiration or termination of this Agreement. The COUNTY, in its sole discretion, shall have the exclusive right to copyright any product, concept, or material developed, prepared, assembled, or conceived by the GRANTEE pursuant to this Agreement.
3. The GRANTEE and any subcontractors shall maintain the books and records that relate to this Agreement, and any cost of pricing data for three (3) years from the date of the final payment under this Agreement. In the event of any litigation, claim, investigation, audit, or other action, the records shall be retained for three (3) years from the date of final payment, or from the date of the resolution of the action, whichever occurs later. During the period that records are retained under this section, the GRANTEE and any subcontractors shall allow the COUNTY free and unrestricted access to such records.

**G. Changes.** The COUNTY may from time to time require changes in the scope of services which the GRANTEE is to perform. Such changes, including any increases or decreases in the amount of the GRANTEE's grant funds, shall be incorporated by written amendment to this Agreement.

**H. Independent Contractor.** GRANTEE acknowledges that it is an independent contractor and not an employee of the COUNTY.

**I. Indemnification.** GRANTEE shall defend, indemnify and hold harmless the COUNTY, its

officers, agents, and employees from and against any and all manner of actions and claims arising, either directly or indirectly, out of or resulting from the errors, omissions, or acts of GRANTEE, its officers, its employees, or its agents occurring during or in connection with the performance of the GRANTEE's services under this Agreement.

- J. Insurance. The GRANTEE shall obtain, pay for, and keep in force throughout the period of this Agreement comprehensive liability insurance issued by an insurance company (the "Carrier") authorized to do business in the State of Hawaii (an "Admitted Carrier"), or by a company not authorized to do business in the State of Hawaii (a "Non-Admitted Carrier") or its equivalent only through a general insurance agent or broker licensed in the State of Hawaii.

The Carrier shall be rated no less than "A-" as established by "AM Best" or "Standard & Poor" ratings. The insurance policy, as evidenced by issuance of a "Policy Endorsement", shall name the COUNTY, its officers, employees and agents as "Additional Insured", and shall include a duty to defend the COUNTY, its officers, employees and agents against any loss, liability, claims, and demands for injury or damage, including, but not limited to, claims for property damage, personal injury, or wrongful death, arising out of, or in connection with GRANTEE's actions and/or performance of this Agreement. Unless otherwise agreed to by the COUNTY, through the joint decision and discretion of the Director of the Department of Human Concerns and the Director of the Department of Finance, the insurance policy shall contain the following minimum requirements:

- 1) No less than a Combined Single Limit ("CSL") of liability coverage of \$1,000,000;
- 2) No erosion of limit by payment of defense costs; and
- 3) Minimum annual aggregate limit of \$2,000,000.

Prior to or upon the execution of this Agreement, GRANTEE shall furnish the COUNTY with a copy of the insurance policy certificate together with the required endorsements verifying such insurance coverage. If the scheduled expiration date of a current insurance policy is sooner than the specified termination date of this Agreement, the GRANTEE shall, upon renewal of the insurance policy, provide the COUNTY with a copy of the renewed insurance policy certificate together with the required endorsements. Unless waived by the COUNTY, the insurance policy shall expressly state that the coverage provided under such policy shall not be cancelled or terminated, unless the Carrier has first given the COUNTY thirty (30) calendar days prior written notice of the intended cancellation or

termination.

**K. Modification and Termination of Agreement.**

1. Any modification, alteration or change to this Agreement, including, but not limited to, modification of the services to be performed, extension of time of performance, or changes to the approved budget, shall be made only by written amendments to this Agreement executed by the Parties.
2. This Agreement may be terminated in whole or in part when the COUNTY determines that there has been a change in the conditions upon which the need for the services was based, that the GRANTEE has failed to provide services adequately or satisfactorily, that funding for this Agreement is not available or cannot be secured, or that other good cause for the whole or partial termination of this Agreement exist.
3. If the COUNTY determines, in its sole discretion, that it is necessary or convenient, this Agreement may be terminated in whole or in part at the option of the COUNTY. If the COUNTY elects to terminate under this section, the GRANTEE shall be entitled to reasonable payment as determined by the COUNTY for satisfactory services rendered under this Agreement up to the time of termination.
4. The GRANTEE may withdraw from this Agreement after obtaining the written consent of the COUNTY. The COUNTY, upon the GRANTEE's withdrawal, shall determine whether payment is due to the GRANTEE, and the amount that is due.
5. The COUNTY may offset against any monies or other obligations the COUNTY owes to the GRANTEE under this Agreement, any amounts owed to the COUNTY by the GRANTEE, including but not limited to the payment of any taxes or levies of any kind or nature. The COUNTY shall notify the GRANTEE in writing of any exercise of its right of offset and the nature and amount of such offset.

**L. County's Remedies.** GRANTEE understands that in the event that it fails to comply with any of the performance requirements, provisions, terms, or conditions set forth in this Agreement, the COUNTY may refuse to make further payments to GRANTEE of grant funds under this Agreement. The COUNTY will give a written notice to the GRANTEE of any stop payment action.

**M. Subcontracting.** GRANTEE shall not procure or subcontract any part of the services under



this Agreement without the prior written consent of the COUNTY which consent shall not be unreasonably withheld.


- N. Severability. Every provision of this Agreement is intended to be severable. If any term or provision hereof is illegal or invalid for any reason whatsoever, such illegality or invalidity shall not affect the validity of the remainder of this Agreement. If the entire Agreement is deemed illegal or invalid, the COUNTY may terminate this Agreement without liability except as provided herein.
- O. Headings. All headings of this Agreement are for convenience only and are not to be construed as limiting in any manner the content of any section or particular provision.
- P. Time of Performance. The first year performance period shall begin on July 1, 2024, and shall terminate on June 30, 2025. Subject to the terms and conditions specified herein, the second year performance period shall begin on July 1, 2025 and shall terminate on June 30, 2026.

[THE REMAINDER OF THIS PAGE IS INTENTIONALLY LEFT BLANK]

IN WITNESS WHEREOF, the parties hereto have executed this Agreement the day,  
month and year first above written.

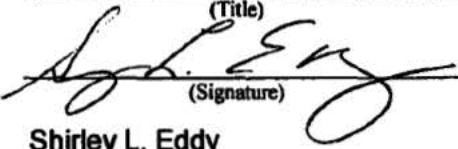
GRANTEE:

FAMILY LIFE CENTER, INC.

By:   
(Signature)

Maude L. Cumming  
(Print Name)

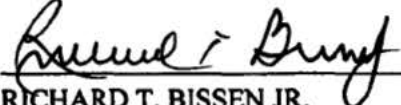
Its Chief Executive Officer  
(Title)

By:   
(Signature)

Shirley L. Eddy  
(Print Name)

Its Secretary-Treasurer  
(Title)

COUNTY OF MAUI:

By: 

RICHARD T. BISSEN JR.  
Its Mayor

APPROVAL RECOMMENDED:



LORI TSUHAKO, Director  
Department of Human Concerns



LESLEY MILNER  
Budget Director

APPROVED AS TO FORM AND LEGALITY:



YUKARI MURAKAMI  
Deputy Corporation Counsel  
County of Maui

## **GENERAL TERMS AND CONDITIONS**

### **Department of Human Concerns ("DHC")**

In consideration of a grant of COUNTY funds, GRANTEE agrees to the following conditions in the use and administration of COUNTY funds. In the event the following conditions conflict with any term, provision, condition and/or covenant contained in the body of the Grant Agreement, the terms, provisions, conditions and/or covenants contained in said body shall prevail.

- 1) GRANTEE shall keep records and prepare reports, including detailed, separate financial records relating to ALL GRANT FUNDS. All accounts shall be prepared and maintained according to generally accepted accounting principles and as otherwise provided by law. GRANTEE shall maintain such accounts and documents as will serve to permit expeditious determination to be made at any time of the status of funds within the award, including the disposition of all monies received from the COUNTY and the nature and amount of all charges claimed to be against such funds.
- 2) GRANTEE shall provide the COUNTY written quarterly narrative progress reports regarding the Project and use of grant funds within three (3) weeks after the end of each quarter of the fiscal year. GRANTEE's narrative reports shall contain the following information: summary of the status in the relationship to outcomes, outputs and scheduled action steps outlined in the grant proposal; numbers and descriptions of people or businesses served including progress in meeting performance standards and economic self-sufficiency if appropriate. Within three (3) weeks after expiration of the time of performance, GRANTEE shall submit to the COUNTY a final project report in a form satisfactory to the COUNTY documenting GRANTEE's efforts toward meeting the requirements of this Agreement, an inventory of all equipment costing \$5,000.00 or more acquired with funds provided under this Agreement, and a list of expenditures incurred in the performance of this Agreement. GRANTEE's final project report shall contain the following information: summary of program status in relation to outcomes, outputs and scheduled action steps outlined in the grant proposal; numbers and descriptions of people or businesses served; financial status report of COUNTY funds used; and narrative report, including progress in meeting performance standards and economic self-sufficiency, if appropriate.

- 3) GRANTEE shall provide the COUNTY written quarterly allotment, financial and demographic reports on forms prescribed by the department.
- 4) GRANTEE shall not use grant funds to compensate its employees more than the prevailing wages in the State of Hawaii for employees with similar skills and abilities.
- 5) Unless otherwise required in the Grant Agreement or in related application submittals, GRANTEE shall supply the COUNTY with a copy of its audited financial statements, prepared by its Certified Public Accountant(s). GRANTEE shall, upon request of the COUNTY, provide the COUNTY full access to inspect or audit GRANTEE's records, report books, files, and other financial records and documents to allow the COUNTY to determine compliance with the terms of the Grant Agreement, measure program effectiveness, and assure proper expenditure. GRANTEE shall cooperate fully and assist the COUNTY in any such audit or inspection.
- 6) GRANTEE shall give the COUNTY and, if applicable, the State of Hawaii, appropriate recognition in all grant-funded programs and printed materials.
- 7) GRANTEE shall comply with its articles of incorporation and/or bylaws and all relevant COUNTY, State and/or Federal rules and regulations concerning its policies and operations.
- 8) GRANTEE shall not discriminate either in the hiring of staff, use of volunteers, use of facilities, or delivery of client services on the basis of sex, sexual orientation, national origin, age, race, color, religion or disability. GRANTEE shall comply with all applicable federal and state laws prohibiting discrimination.
- 9) GRANTEE shall not alter program plans which provided the justification for the grant without first obtaining the prior written consent of the COUNTY. GRANTEE shall inform the COUNTY of any proposed changes to the budget allocations or project description or schedule outlined herein.
- 10) GRANTEE shall comply with all requests of the County of Maui for information and reports regarding the Project and GRANTEE's operations.
- 11) GRANTEE shall comply with all applicable federal, state and COUNTY licensing requirements and with all applicable accreditation and other standards of quality generally accepted in the field of GRANTEE's activities. GRANTEE shall assure that any person or

entity GRANTEE may engage, retain or subcontract with to provide any service or perform any function under this grant complies with all applicable federal, state and COUNTY licensing requirements and with all applicable accreditation and other standards of quality generally accepted in said person's or entity's field.

- 12) GRANTEE shall not use any grant funds for purposes of providing entertainment, food and beverages, or perquisites to GRANTEE's employees or staff. For purposes of this Agreement, "perquisites" means a privilege provided or service rendered by GRANTEE to an employee, officer, director, or member of GRANTEE agency to reduce that individual's personal expenses.
- 13) GRANTEE shall not use any grant funds for payments into self-funded unemployment insurance benefit accounts. (H.R.S. Chapter 383-62)
- 14) As a nonprofit organization, GRANTEE shall establish and be governed by bylaws or policies which shall include provisions relating to nepotism and management of potential conflict-of-interest situations, as required by Section 3.36.040(c) of the Maui County Code.
- 15) GRANTEE shall not dispose of any real or personal property acquired with grant funds received under this Agreement without first receiving prior written consent of the COUNTY. Should GRANTEE cease to use any real or personal property acquired with grant funds for purposes described in this Agreement, GRANTEE shall either:
  - a) Pay the COUNTY the current fair market value of the asset; or
  - b) Transfer the control of the asset to the COUNTY.
- 16) Upon expiration or termination of this Agreement, the GRANTEE shall transfer to the COUNTY
  - a) Any COUNTY funds on hand at the time of termination;
  - b) Any account receivables attributed to the use of COUNTY funds; and
  - c) Any real and/or personal property acquired or improved in whole or in part with COUNTY funds.

- 17) **NONCOMPLIANCE, SUSPENSION AND TERMINATION:** GRANTEE's failure to faithfully perform any part of this Agreement or any of the Additional Conditions herein shall constitute noncompliance, and:
- a) Should the noncompliance continue for thirty (30) days after written notice thereof is delivered to GRANTEE or mailed to its last known address; or,
  - b) If such noncompliance cannot be reasonably cured in thirty (30) days, and GRANTEE has failed to commence to cure such noncompliance and to continue to diligently use its best efforts to cure such noncompliance; or
  - c) If GRANTEE shall become bankrupt; or,
  - d) If GRANTEE fails to perform any of the terms of this Agreement, or abandons or substantially suspends any part of this Agreement's Scope of Work; then the COUNTY may, at its sole discretion, take any one or more of the following actions:
    - i) Withhold grant fund payments pending correction of the noncompliance by the GRANTEE;
    - ii) Disallow all or part of the cost/expense of the activity or action not in compliance;
    - iii) Suspend or terminate, wholly or partially, the current award of this Agreement with the GRANTEE;
    - iv) Withhold additional award(s) to the GRANTEE; and
    - v) Terminate this Agreement without service or notice or legal process and without prejudice to any other remedy or right of action for breach or contract
- 18) Upon termination of this Agreement, all finished or unfinished documents, data, studies, and reports purchased or prepared by the GRANTEE pursuant to this Agreement shall be transferred to the COUNTY.
- 19) **COST INCURRED DUE TO SUSPENSION OR TERMINATION:** Any costs incurred by the GRANTEE resulting from any obligations incurred by GRANTEE during suspension or after termination of this Agreement are not allowable unless the COUNTY authorizes such costs in the Notice of Suspension or Termination issued to the GRANTEE. The determination of eligible costs shall be made by the COUNTY in its sole discretion.



**20) FOR GRANTS INVOLVING USE OF COUNTY FUNDS FOR THE DESIGN AND/OR CONSTRUCTION OF IMPROVEMENTS TO REAL PROPERTY IN ADDITION TO THE ABOVE CONDITIONS, THE FOLLOWING CONDITIONS SHALL ALSO APPLY:**

**a) PERFORMANCE SCHEDULE**

- i) Within thirty (30) days from receipt of the COUNTY issued notice to proceed, GRANTEE shall provide the COUNTY with an implementation schedule specifically indicating the time frame and the expenditures required to complete each major phase of the Project. Quarterly, GRANTEE shall submit status reports to the COUNTY in a form acceptable to the COUNTY, detailing the Project's financial status and progress of the Scope of Work. Status reports shall be submitted within three (3) weeks after the end of the quarter of the fiscal year.
- ii) Within ninety days of the Project completion, a final report shall be furnished to the COUNTY. Additional reports required by the COUNTY shall be provided by the GRANTEE as requested.

**b) INSPECTIONS AND MONITORING:** During normal business hours, all of GRANTEE'S records relating to the Project will be available for examination by the COUNTY. On a semi-annual basis until the final report for the Project is accepted by the COUNTY, the COUNTY will make a determination as to whether the GRANTEE (a) has complied with the terms of this Agreement; and (b) has the continuing capacity to complete the Project in a timely manner. The COUNTY may withhold payments if it determines that the GRANTEE is unable to comply with these requirements.

**c) SUBCONTRACTING:** The GRANTEE shall not procure or subcontract any part of the services under this Agreement without the prior written consent of the COUNTY. All subcontracts entered into by the GRANTEE shall be in writing.

**d) PROCUREMENT:** If GRANTEE contracts for the design and/or construction of any structure, defined for purposes hereof as any construction involving a load-bearing wall, GRANTEE shall comply with the Hawaii Public Procurement Code, Chapter 103D, Hawaii Revised Statutes, and any COUNTY procurement policies for the procurement of contracts for design and/or construction of any structures as defined herein. GRANTEE

shall submit to the COUNTY copies of all plans, specifications, permits and other approval applications for review and approval by the COUNTY's designated departmental officer prior to soliciting construction bids and proposals from contractors for the construction. Additionally, GRANTEE shall ensure that all procurement transactions for construction of non-structures, as defined herein, and all procurement transactions for goods and services are conducted in a manner to provide, to the maximum extent practical, open and free competition.

- e) **PREVAILING WAGES:** GRANTEE shall ensure that all contractors and subcontractors shall comply with all applicable provisions of the prevailing wage schedule as required under Chapter 104, Hawaii Revised Statutes, and further, shall require all contractors and subcontractors to submit certified payroll records to the GRANTEE on a periodical basis for GRANTEE's and the COUNTY's review and files.
- f) **METHOD OF PAYMENT:** GRANTEE shall submit to the COUNTY written Request for Payment. Each request shall be authenticated as to accuracy by the GRANTEE, and verified by the designated COUNTY departmental officer. Each request shall include the following:
  - i) Certification by the GRANTEE that the work for which payment is requested was performed in accordance with the terms of this Agreement;
  - ii) Certified payroll records for the applicable time period or phase for which payment is being requested; and
  - iii) Copies of all contracts, bills, invoices and purchase orders which support the request shall:
    - (a) Be the original document, unless prior approval is obtained from the COUNTY's designated departmental officer to submit document copies.
    - (b) Be under the letterhead of the respective contractor or subcontractor requesting payment.
    - (c) Be signed by an authorized official of the GRANTEE.
    - (d) Identify the Project, the nature of the work or materials provided, and the specific Phase of the Project for which the work or materials were provided.

- 21) GRANTEE shall maintain in its files, at all times, documentation verifying that work described in any contract, bill, invoice, purchase order or Request for Payment sent to the COUNTY is correct, complete, and in accordance with the terms of this Agreement. Initial and final payment under this Agreement shall be subject to receipt by COUNTY of original tax clearance certificates for the GRANTEE from the State of Hawaii Department of Taxation and the Internal Revenue Service. A current Certificate of Vendor Compliance (CVC) is also acceptable in lieu of tax clearance certificates.
- 22) THE COUNTY MAY WITHHOLD ANY OR ALL PAYMENTS TO THE GRANTEE IF THE AMOUNT OF PAYMENT AS REQUESTED IS, IN THE COUNTY'S DETERMINATION, UNREASONABLE, OR DOES NOT COMPLY WITH THE TERMS OF THIS AGREEMENT.
- 23) PROSELYTIZATION PROHIBITED: Grant funds shall not be used to recruit or convert a person to a new faith, institution, or cause.

## ## ##

<Family Life Center, inc.>

<Outreach>

Performance Period: <FY 25 July 1, 2024-June 30, 2025 & FY 26 July 1, 2025-June 30, 2026>

## Program Proposal

### I. Executive Summary:

This proposal requests annual funding of **\$215,000** to provide ***Housing-Focused Outreach services to homeless individuals on the island of Maui***. The total request for FY 2025 and 2026 **\$430,000**. ***This funding will be leveraged with \$561,000 in annual funding from the State of Hawaii Department of Human Service/Homeless Program Office. Together the programs will serve approximately 800 individuals annually.***

The ***target populations*** are unsheltered homeless individuals and families. Outreach workers will frequent encampments, beaches, and other street locations known as meetings spots as well as collaborate with other organizations that provide services to the homeless.

For the longest time, outreach has focused on bringing basic services and supplies to clients. The follow-up needed to move people out of the experience of homelessness has often not been done directly on the streets. With the advent of the Housing First movement homelessness service agencies are moving away from the idea of outreach as a mechanism for serving clients ***on the streets*** to outreach as a tool for moving clients ***off the streets***. The new model of ***Housing-Focused Outreach*** works with a broad complement of partners to bring comprehensive housing and social services support directly to clients, thereby moving them as quickly as possible out of the experience of homelessness. Housing focused outreach is about ***ending homelessness*** through concerted and collaborative approaches.

The primary ***goal*** of the outreach program is to identify homeless individuals and connect them with housing and services. Outreach workers will focus primarily on getting individual's document ready to access permanent housing. Homeless individuals will be provided with information and referrals to available resources and connections to emergency/transitional shelter and permanent housing.

### II. Background:

According to the 2023 Point in Time Count conducted in January 2023, there were 704 homeless individuals on Maui. During the period from 7/1/2022 through 6/30/2023, FLC served 892 homeless individuals (data collected through the HMIS-Homeless Management Information System). FLC estimates that the total numbers of unsheltered individuals in Maui County are higher based on encounters with individuals who are not included in the 892 because they do not agree to share their identifying information.

Outreach involves moving outside the walls of the agency to engage people experiencing homelessness who may be disconnected and alienated not only from mainstream services and supports, but from the services targeting homeless persons as well. This work is designed to help

establish supportive relationships, give people advice and support, to enhance the possibility that they will access necessary services and support that will help them move off the streets.

Communities have expressed concerns about homeless individuals who populate the beaches and parks. Our challenge is to engage all homeless individuals to provide services to assist in exiting out of homelessness.

#### Target Population

The *target population* of the Outreach Program are unsheltered homeless individuals and families transitioning to permanent housing.

#### Past Agency Experience

Since 1999, Family Life Center has been involved in delivering social services including rental assistance to the needy on Maui. Over the last ten years, FLC has administered a housing placement/rental assistance program through contracts with the State of Hawaii, DHS-Homeless Programs Office, and the County of Maui Rental Assistance program.

The current rate of retention of clients sustaining housing for at least 6 months after receiving assistance is 85%. This high retention rate can be attributed largely to the support and intervention of case managers, as well as other support services offered by FLC (e.g., the provision of food and clothing). FLC continues to expand its base of support programs, which benefit clients and increase the likelihood that clients will be successful.

**Table 1 - Program Personnel**

Position Title and (Personnel's Name)	Positions' required qualifications	Brief description of main duties for this program	Funded in full/part of COM grant? (Yes or No)
Chief Operating Officer [REDACTED]	Min. BA or 5 yrs. equiv. experience	Direct supervision of staff including professional development, conflict management, coaching, risk mitigation, and safe working practices. Dr. Kelly has her Ed.D in Organizational Change and Leadership and over 15 years of leadership experience, mostly in the healthcare setting.	Yes
Program Director [REDACTED]	Min. BA or 5 yrs. equiv. experience	Utilize client centered approach and motivational interviewing techniques to assist clients in both obtaining and sustaining permanent housing. Ms. Kupau serves as the Program Director. She has a master's degree in social work, and also a Certified Health Navigator/Community Health Worker.	Yes

Position Title and (Personnel's Name)	Positions' required qualifications	Brief description of main duties for this program	Funded in full/part of COM grant? (Yes or No)
Program Manager [REDACTED]	Min. AA or 5 yrs. equiv. experience.	Team leader directing the activities of the Outreach team. Utilize client centered approach and motivational interviewing techniques to assist clients in both obtaining and sustaining permanent housing.	Yes
Outreach Worker [REDACTED]	Min. HS diploma and 2 yrs. equiv. experience	Focus on helping individuals access permanent housing as rapidly as possible and preventing returns to homelessness. Offer assistance and efforts to connect homeless persons to access community services and resources. Staff Resource/hygiene center	Yes
Outreach Worker [REDACTED]	Min. HS diploma and 2 yrs. equiv. experience	Focus on helping individuals access permanent housing as rapidly as possible and preventing returns to homelessness. Offer assistance and efforts to connect homeless persons to access community services and resources. Staff Resource/hygiene center	Yes
Outreach Worker [REDACTED]	Min. AA or 3 yrs. equiv. experience.	Focus on helping individual's access permanent housing as rapidly as possible and preventing returns to homelessness. Offer assistance and efforts to connect homeless persons to access community services and resources	Yes
Outreach Worker [REDACTED]	Min. AA or 3 yrs. equiv. experience.	Focus on helping individual's access permanent housing as rapidly as possible and preventing returns to homelessness. Offer assistance and efforts to connect homeless persons to access community services and resources	Yes
Program Assistant [REDACTED]	Min. HS diploma and 1 yr. equiv. experience	Provide daily support to the housing team and program participants. Provide timely and accurate data entry into HMIS and ensuring program supply requests are filled.	Yes
Program Assistant [REDACTED]	Min. HS diploma and 1 yr. equiv. experience	Provide daily support to the housing team and program participants. Provide timely and accurate data entry into HMIS and ensuring program supply requests are filled.	Yes
Program Assistant [REDACTED]	Min. HS diploma and 1 yr. equiv. experience	Provide daily support to the housing team and program participants. Provide timely and accurate data entry into HMIS and ensuring program supply requests are filled.	Yes



Position Title and (Personnel's Name)	Positions' required qualifications	Brief description of main duties for this program	Funded in full/part of COM grant? (Yes or No)
Program Assistant [REDACTED]	Min. HS diploma and 1 yr. equiv. experience	Provide daily support to the housing team and program participants. Provide timely and accurate data entry into HMIS and ensuring program supply requests are filled.	Yes

### III. Program Description:

In previous years, the Outreach Program was measured by the number of contacts made or the number of new people found and encountered. FLC has restructured its service delivery model to measure street outreach by the *impact it has in the community in ending homelessness*.

FLC understands that outreach is mobile housing work. It requires the outreach worker to have all the forms, data systems, and information necessary to move a person directly from living outdoors to living indoors and getting connected to the supports necessary to be successful in long-term in housing. Street outreach will provide an important *access point* into the homeless service delivery system for those people that do not use shelters. FLC outreach will have positive connections with police and paramedics. Outreach workers may deal with complex social situations that are not really an emergency warranting police or ambulance, thereby freeing up first responders to attend to other emergencies, while concurrently helping that individual start to get connected to the long-term solution to their homelessness and even connect into shelter if the person is willing to go.

Outreach will focus on the following metrics:

1. Of those document ready, how long is it taking to get these people into housing?
2. How many people move into housing?
3. Of all of those moved into housing, how many return to homelessness

The following table shows the progression of services. Clients will be entered into the *By Name list* in the Coordinated Entry system once they have moved from the Circle position to the Triangle position and are Document ready.

Table 1.2 Progression of Services

Type	Description	Do they want housing?	Goal	% of Outreach worker time spent
X	Identified, intake done, May be providing charity support resources	No	Continue to ask, "Can I help you with housing."	10%
●	Engaged. VI-SPDAT/Homeless Certification/HMIS Consent completed. Is working on document ready checklist	Yes	Document ready	40%
▲	Document ready. Working with housing department	Yes	Get housed	50%

At the point of expressing interest in the Homeless Outreach Program, potential Program Participants have the Homeless Outreach Program explained to them. Potential Program Participants shall consent to these program elements before proceeding with the intake and assessment and make an informed choice to participate in the program. A VI-SPDAT will be conducted only after the participant has agreed to proceed with intake.

Potential Program Participants must be homeless at the time of intake. Potential Program Participants shall be screened for issues and circumstances that may impact their ability to participate in the Homeless Outreach Program. This will include, but is not limited to, employment that requires them to leave the county for lengths of time that would make it impossible to deliver case management Programs; pending trial in the short-term which may result in incarceration; and/or, pending family reunification where the location and number of family members are unknown.

The Outreach worker will:

1. Effectively engage with homeless people on the streets, beaches, and other sites in building trust through a non-threatening, assertive, and culturally competent strategy.
2. Utilize the Housing First philosophy in offering immediate access to outreach services, shelter, and permanent housing without necessary prerequisites. Program has low barriers and does not require abstinence from substances, completion of or compliance with treatment, or participation in services.
3. Develop a housing plan to assist with quickly locating and accessing housing, obtaining necessary documents, accessing income and benefits, and connecting to community services and supports.
4. Focus on securing permanent housing for participants who have been homeless the longest and have the most intensive service needs by assessing the homeless person(s) using the VI-SPDAT. The VI-SPDAT is composed of four domains: History of Housing & Homelessness, Risks, Socialization & Daily Function, and Wellness. The VI-SPDAT allows communities to assess clients' various health and social needs quickly and match them to the most appropriate housing interventions available.
5. Addressing support needs - Support participants by making efforts to access recovery-based services designed to help participant's gain control of their own lives, define their personal values, preferences, visions for the future, establish meaningful individual short- and long-term goals, and build hope. Arrange for initial appointments with mental health workers or substance abuse services, and/or domestic violence services. Provide transportation as necessary. Participants will also be assisted in securing basic documents including identification and social security cards. These basic documents are helpful in accessing housing as landlords frequently require them and necessary for securing employment.
6. Referrals to other resources - Respond to client requests for assistance by assessing service needs and providing direct intervention, information, and referral services as appropriate. Refer to mainstream services such as DHS Financial Assistance, SNAP Benefits, Social Security, and HUD Section 8, as needed. Follow-up on referrals to assess outcomes and provide additional services as required.
7. Maintain close professional relationships and liaisons with local service organizations in the target area. Make presentations regarding the services of assigned program to ensure

that appropriate referrals are made to FLC programs, responding to inquiries concerning services homeless, and attend workshops and conferences as appropriate to maintain knowledge of issues facing the homeless population.

8. Maintain files and records of individuals served, services provided, outreach activities conducted, surveys completed, and other general reporting as assigned.

**Alleviating Immediate Needs- Food, Clothing, Blankets, Towels, Hygiene items, and/or Transportation –**

- a) Food Bank – FLC has an onsite foodbank to provide food to homeless clients.
- b) Clothing bank – A clothing bank is maintained on-site. Individuals who are homeless may have as many items as they need. In addition, clients may visit the office or contact an outreach worker for clothing needs.
- c) Hygiene/basic shelter supplies – Outreach workers assess the needs of unsheltered individuals and distribute towels, blankets, sheets, soap, shampoo, conditioner, and other items that may be available such as diapers and feminine hygiene products.
- d) Resource/hygiene center – FLC has a shower/bathroom facility that is fully ADA compliant and is available at designated times for homeless individuals. Basic bathing supplies are provided as needed.

**IV. Collaboration in Providing Services:**

**Table 2.1 Projected Collaboration FY25**

<b>FY 2025 Projected Collaboration in Providing Services,</b>			
<b>Agency, service, or community resource</b>	<b>Type of coordinated activities</b>	<b>Number of persons to be served</b>	<b>Outcomes to be supported by this collaboration</b>
Veteran's Affairs	<b>HUD/VASH program</b> FLC provides utility/security deposits for homeless veterans. HUD/VASH provides ongoing rental support	Annual -10	Homeless veterans transitioned to permanent housing
Mental Health Service Provider: Mental Health Kokua Aloha House	<b>Mental health services:</b> 1 - FLC coordinates and refers clients to Mental Health Kokua. MHK conducts mental health screenings and if appropriate, facilitates ongoing services 2 – Permanent supportive housing/Shelter plus Care – FLC provides ongoing rental support that is matched with mental health case management provided by either Mental Health Kokua or Aloha House	Annual-36  Annual -35	Homeless individuals with mental health issues access mental health treatment services  Homeless individuals with mental health issues achieve permanent housing with ongoing case management support
County HUD Section 8 office	FLC has a by name relationship with all of the HUD Section 8 staff. In recent months FLC has offered and hosted Section 8 briefings at its facilities. This has benefitted both potential HUD Section 8 recipients as well as the HUD office. On an ongoing basis, FLC and HUD staff will collaborate on timing of inspections and other processes	This number is dependent of HUD Section 8 vouchers available This past year – 30 households	Both homeless and at-risk of homeless individuals achieve permanent housing
Ka Hale a ke Ola	Outreach clients are referred to KHAKO for shelter services. KHAKO refers their clients to FLC for housing resources.	Annual –75	Homeless individuals have access to shelter services/shelter clients have access to housing resources
<p><b>Explain how collaborations will achieve program Outcomes and ensure non-duplication of services.</b> Homeless or at-risk of homeless individuals are engaged and connected to available resources through these collaborations. Each of these resources is designed to either address barriers that limit access to permanent housing or provide support to sustain housing. FLC serves the same population but does not provide the same services as the collaborating agencies. Services are supplementary or complementary.</p>			

**Table 2.2 Projected Collaboration FY26**

<b>FY 2026 Projected Collaboration in Providing Services,</b>			
<b>Agency, service, or community resource</b>	<b>Type of coordinated activities</b>	<b>Number of persons to be served</b>	<b>Outcomes to be supported by this collaboration</b>
Veteran's Affairs	<b>HUD/VASH program</b> FLC provides utility/security deposits for homeless veterans. HUD/VASH provides ongoing rental support	Annual -10	Homeless veterans transitioned to permanent housing
Mental Health Service Provider: Mental Health Kokua Aloha House	Mental health services: 1 - FLC coordinates and refers clients to Mental Health Kokua. MHK conducts mental health screenings and if appropriate, facilitates ongoing services 2 - Permanent supportive housing/Shelter plus Care - FLC provides ongoing rental support that is matched with mental health case management provided by either Mental Health Kokua or Aloha House	Annual-36  Annual -35	Homeless individuals with mental health issues access mental health treatment services  Homeless individuals with mental health issues achieve permanent housing with ongoing case management support
County HUD Section 8 office	FLC has a by name relationship with all of the HUD Section 8 staff. In recent months FLC has offered and hosted Section 8 briefings at its facilities. This has benefitted both potential HUD Section 8 recipients as well as the HUD office. On an ongoing basis, FLC and HUD staff will collaborate on timing of inspections and other processes	This number is dependent of HUD Section 8 vouchers available This past year - 30 households	Both homeless and at-risk of homeless individuals achieve permanent housing
Ka Hale a ke Ola	Outreach clients are referred to KHAKO for shelter services. KHAKO refers their clients to FLC for housing resources.	Annual -75	Homeless individuals have access to shelter services/shelter clients have access to housing resources
<b>Explain how collaborations will achieve program Outcomes and ensure non-duplication of services.</b> Homeless or at-risk of homeless individuals are engaged and connected to available resources through these collaborations. Each of these resources is designed to either address barriers that limit access to permanent housing or provide support to sustain housing. FLC serves the same population but does not provide the same services as the collaborating agencies. Services are supplementary or complementary.			

#### **V. Cost Effectiveness**

Outreach is designed to be a cost-effective solution to reducing the length of time people experience homelessness, thereby minimizing the impact of homelessness on their lives, while facilitating access to resources in the community. The program is designed to provide just enough assistance to help people get back into housing, while being available to offer additional support or connections to other resources and programs if more help is needed.

#### **VI. Other Funding Resources:**

FLC continues to search for other funding sources. FLC leverages other programs to maximize support for clients. These programs include multiple contracts with the State of Hawaii, DHS/BESSD – Homeless Programs Office, and HUD to provide services to the homeless population. The Executive Director will also attend HUD sponsored trainings to advocate for and increase access to changes in HUD policy that may include provisions for future homeless housing funding.

#### **VII. Program Evaluation:**

**Table 3.1 Program Evaluation FY25**

<b>FY 2025 Annual Program Evaluation Projected Impacts (List appropriate measure – number of persons, activities, etc.)</b>	<b>ANNUAL GOAL</b>	<b>Data Source (ex. Sign-in sheets, database, client log, survey, pre/post-test, etc.)</b>
<b>Total Unduplicated Persons Served:</b>	<b>800</b>	HMIS database
<b>Outcome 1: During the grant period, 100 participants will exit to permanent housing</b>	<b>100</b>	HMIS database
<b>Outcome 2: During the grant period, 250 participants will exit to temporary housing</b>	<b>250</b>	HMIS database
<b>Output 1&amp;2a: During the grant period FLC will complete 800 participant intakes/assessments. (Equals the number of participants served this new fiscal year including carryovers from previous year)</b>	<b>800</b>	HMIS database
<b>Output 1&amp;2b: During the grant period, FLC will provide 4,500 outreach services (duplicated, every service event counted) – These services include: Benefits application, budgeting, case management, advocacy, crisis management, employment assistance, food/meals, hygiene supplies, id assistance, mail pickup, transportation</b>	<b>4500</b>	HMIS database
<b>Output 1&amp;2c: During the grant period, FLC will provide 450 Outreach Health Referrals (duplicated – every service event counted) – These referrals include referrals to - acute/urgent care, crisis intervention, family planning, mental health, other primary health services, substance use treatment, Tb screening</b>	<b>450</b>	HMIS database
<b>Output 1&amp;2d: During the grant period, FLC will provide 3,500 Social service referrals (Duplicated – Every service event counted) – These services include referrals for Clothing, emergency shelter, employment, food/meal, GATANF, ID assistance, medical benefits, permanent housing, social security, transitional shelter, transportation, veterans' assistance.</b>	<b>3500</b>	HMIS database



<b>FY 2025 Annual Program Evaluation</b> Projected Impacts (List appropriate measure – number of persons, activities, etc.)	<b>ANNUAL GOAL</b>	<b>Data Source</b> (ex. Sign-in sheets, database, client log, survey, pre/post-test, etc.)
<b>Outcome 3:</b> During the grant period, 75 participants who exit the program, will realize an increase in their total income.	75	HMIS database
<b>Output 3a:</b> During the grant period, 200 Total participants will be taught money management skills	200	HMIS database

*NOTE: FLC enters all client data into the Homeless Management Information System (HMIS.) Information for the above Outcomes/Outputs are derived from reports generated through the HMIS System. FLC enters all data into the HMIS system within 72 hours of services provided.*

**Table 3.2 Program Evaluation FY26**

<b>FY 2026 Annual Program Evaluation</b> Projected Impacts (List appropriate measure – number of persons, activities, etc.)	<b>ANNUAL GOAL</b>	<b>Data Source</b> (ex. Sign-in sheets, database, client log, survey, pre/post-test, etc.)
<b>Total Unduplicated Persons Served:</b>	800	HMIS database
<b>Outcome 1:</b> During the grant period, 100 participants will exit to permanent housing	100	HMIS database
<b>Outcome 2:</b> During the grant period, 250 participants will exit to temporary housing	250	HMIS database
<b>Output 1&amp;2a:</b> During the grant period FLC will complete 800 participant intakes/assessments. (Equals the number of participants served this new fiscal year including carryovers from previous year)	800	HMIS database
<b>Output 1&amp;2b:</b> During the grant period, FLC will provide 4,500 outreach services (duplicated, every service event counted) – These services include: Benefits application, budgeting, case management, advocacy, crisis management, employment assistance, food/meals, hygiene supplies, id assistance, mail pickup, transportation	4500	HMIS database
<b>Output 1&amp;2c:</b> During the grant period, FLC will provide 450 Outreach Health Referrals (duplicated – every service event counted) – These referrals include referrals to - acute/urgent care, crisis intervention, family planning, mental health, other primary health services, substance use treatment, Tb screening	450	HMIS database
<b>Output 1&amp;2d:</b> During the grant period, FLC will provide 3,500 Social service referrals (Duplicated – Every service event counted) – These services include referrals for Clothing, emergency shelter, employment, food/meal, GA/TANF, ID assistance, medical benefits, permanent housing, social security, transitional shelter, transportation, veterans' assistance.	3500	HMIS database
<b>Outcome 3:</b> During the grant period, 75 participants who exit the program, will realize an increase in their total income.	75	HMIS database
<b>Output 3a:</b> During the grant period, 200 Total participants will be taught money management skills	200	HMIS database

*NOTE: FLC enters all client data into the Homeless Management Information System (HMIS.) Information for the above Outcomes/Outputs are derived from reports generated through the HMIS System. FLC enters all data into the HMIS system within 72 hours of services provided.*

# PROGRAM BUDGET

Agency Name: Family Life Center, Inc.

Program Title: Outreach

Period\*: 7/1/24-6/30/25

(\*Budget must be for only one year. A separate set of budget tables is required for each year)

EXPENSE CATEGORIES	(a) Amount Requested	(b) *Other Resources	(c) Total Budget
<b>A. Personnel</b>			
Salaries	122,802.94		122,802.94
<i>Personnel Total:</i>	<i>122,802.94</i>	<i>0.00</i>	<i>122,802.94</i>
<b>B. Payroll Taxes and Fringe Benefits</b>			
Payroll Taxes & Assessments	17,695.90		17,695.90
Fringe Benefits (Medical/Dental)	20,804.30		20,804.30
<i>Taxes and Fringe Total:</i>	<i>38,500.20</i>	<i>0.00</i>	<i>38,500.20</i>
<b>C. Equipment</b>			
Equipment/Automobile purchases	1,600.00		1,600.00
<i>Equipment Total:</i>	<i>1,600.00</i>	<i>0.00</i>	<i>1,600.00</i>
<b>D. Supplies</b>			
Office & printing supplies	2,700.00		2,700.00
Program Supplies	3,089.04		3,089.04
<i>Supplies Total:</i>	<i>5,789.04</i>	<i>0.00</i>	<i>5,789.04</i>
<b>E. Staff Training &amp; Travel</b>			
Airfare/ferry			-
Per diem w/lodging			-
Ground transport, gas purchase, parking			-
Registration fees			-
<i>Training and Travel Total:</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>
<b>F. Other Expenses</b>			
Occupancy/Rent			-
Utilities	2,400.00		2,400.00
Travel/mileage (client services)	4,500.00		4,500.00
Facilities R & M	2,400.00		2,400.00
Postage/freight	99.47		99.47
Leasing Vehicle	4,800.00		4,800.00
Contract services (program)			-
Telephone	3,120.00		3,120.00
Equipment rental R & M	750.00		750.00
Insurance - Vehicle/Other	2,640.00		2,640.00
<i>Other Total:</i>	<i>20,709.47</i>	<i>0.00</i>	<i>20,709.47</i>
<b>G. Administrative Cost (12% maximum)</b>			
Audit			-
Incidental mileage (non-program services)			-
Professional fees			-
Insurance (General /Director & Officer liability)			-
Life Insurance & Pension			-
Public Relations			-
Membership Fees/Dues			-
Publications/Subscriptions			-
Staff Recruitment & Supervision			-
General Admin. Accounting & Payroll	21,373.35		21,373.35
Staff IT/Tech Support	4,225.00		4,225.00
<i>Admin Cost Total:</i>	<i>25,598.35</i>	<i>0.00</i>	<i>25,598.35</i>
<b>TOTAL EXPENSES</b>	<b>215,000.00</b>	<b>-</b>	<b>215,000.00</b>
List *Other funding sources to be applied to this specific program. Note: Total column (b). must match the total below.		List all other County of Maui grants and include the Department, Grant #, and full grant amount.	
Source(s)	\$ Amount(s)	County Dept. - Title - Grant no.	\$ Grant Amount
		Case Management	213,750.00
		Molokai Homeless Services	200,000.00
		Rental Assistance Program	810,000.00
Total Other Resources	-		

### A. PERSONNEL (Budget Justification)

Period: 7/1/24-6/30/25

Agency Name: Family Life Center, Inc.

Program Title Outreach

#	POSITION TITLE & STAFF NAME List ALL personnel for the proposed program and indicate if position is vacant. Must match the Program Personnel table from the narrative proposal	FTE to Agency	Annual Salary (a)	% Time Budgeted to Program (b)	% Time Budgeted to Grant (c)	Total Salary Budgeted to Grant (a x b x c)
1	██████████ (Chief Operating Officer)	1.00	141,821.68	4%	100%	5,672.87
	██████████ Program Director)	1.00	93,969.00	9%	100%	8,457.21
2	██████████ (Program Manager)	1.00	67,648.61	25%	100%	16,912.15
3	██████████ (Outreach Worker)	1.00	47,028.80	25%	100%	11,757.20
4	██████████ (Outreach Worker)	1.00	46,113.60	25%	100%	11,528.40
5	██████████ (Outreach Worker)	1.00	48,921.60	25%	100%	12,230.40
7	██████████ (Outreach Worker)	1.00	48,214.40	55%	100%	26,517.92
	██████████ (Program Assistant)	1.00	39,728.00	10%	100%	3,972.80
8	██████████ (Program Assistant)	0.40	14,465.36	25%	100%	3,616.34
9	██████████ (Program Assistant)	1.00	41,329.60	25%	100%	10,332.40
11	██████████ (Program Assistant)	1.00	29,513.12	40%	100%	11,805.25
12						
13						
14						
15						
16						
<b>TOTAL:</b>				2.68		122,802.94
<b>Justification/comments:</b>						

## B. PAYROLL TAXES & FRINGE BENEFITS (Budget justification)

Period: 7/1/24-6/30/25

Agency Name: Family Life Center, Inc.

Program Title: Outreach

Payroll Taxes and Assessments	Rate (%) (a)	Salary Budgeted to Grant (b)	Amount Charged to Grant (a x b)
Social Security/Medicare (FICA)	7.65%	122,802.94	\$ 9,394.42
Unemployment Insurance (Federal)	Exempt	122,802.94	\$ -
Unemployment Insurance (State) *not self funded	1.40%	122,802.94	\$ 1,719.24
Worker's Compensation	4.63%	122,802.94	\$ 5,685.78
Temporary Disability Insurance	0.73%	122,802.94	\$ 896.46
			\$ -
<b>Subtotal payroll taxes and assessments</b>			<b>\$ 17,695.90</b>
<b>Fringe Benefits</b>			
Medical			\$ 19,296.00
Dental			\$ 1,508.30
<b>Subtotal fringe benefits</b>			<b>\$ 20,804.30</b>
<b>Total payroll taxes and fringe benefits</b>			<b>\$ 38,500.20</b>
<b>Justification comments:</b> (E.g., Medical/dental premiums for x number of employees * 12 months * (% charged to COM) = \$ COM cost) <b>Medical premiums for 2.68 employees * 12 months * \$600    Dental premium for 2.68 employees * 12 months * \$46.90</b>			

### C. EQUIPMENT (Budget Justification)

Period: 7/1/24-6/30/25

Agency Name: Family Life Center, Inc.

Program Title: Outreach

EQUIPMENT PURCHASES	QTY	UNIT COST	TOTAL COST	AMOUNT requested from County
Laptop for outreach field work	1	1,600.00	1,600.00	\$ 1,600.00
				\$ 1,600.00
<b>Justification/Comments: (include purpose of equipment purchase and how it will be use to achieve program goals)</b>				

#### **D. SUPPLIES (Budget justification)**

Period: 7/1/24-6/30/25

Agency Name: Family Life Center, Inc.

Program Title: Outreach

PROGRAM SUPPLIES	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Activity workbooks: \$2,000 x 30% to program x 100% to COM = \$600)
Office & printing supplies	2,700.00	General office supplies/printer ink/paper (printing intake & other forms specific to this program/file folders Av. Supplies cost \$225/mo
Program Supplies	3,089.04	Bus passes, hygiene supplies, food, other supplies for clients living unsheltered
<b>Total:</b>	<b>5,789.04</b>	



### E. STAFF TRAINING/TRAVEL (Budget Justification)

Period: 7/1/24-6/30/25

Agency Name: Family Life Center, Inc.

Program Title: Outreach

Name and Title of Employee	Conference/Training: Name, location, date	a Per Diem w/lodging	b Air fare	c Ground Transport	d Register Fees	e Other costs	(a+b+c+d+e) Total
							.
							.
							.
							.
							.
							.
							.
							.
<b>TOTAL:</b>		.	.	.	.	.	.

**Justification/comments:** (Include purpose of trip and how it achieves or supports program goals.)

**F. OTHER COST (Budget justification)**

Period: 7/1/24-6/30/25

**Agency Name:** Family Life Center, Inc.

**Program Title.: Outreach**

OTHER COST	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Rent: \$20,000 x 30% to program x 100% to COM = \$6000)
Utilities	2,400.00	Annual utilities 40,000 X 6% to program X 100% to COM=2400
Facilities R&M	2,400.00	Annual r&m 40,000 X 6% to program X 100% to COM = 2400
Postage, freight	99.47	Postage and post office box
Telephone	3,120.00	Annual telecommunications \$52,000X6% to program X 100% to COM
Equipment rental R&M	750.00	Upkeep of leased vehicle
Insurance-Vehicle/Other	2,640.00	Annual insurance \$44,000X6% to program X 100% to COM
Travel/Mileage Client Services	4,500.00	Gas/Vehicle upkeep
Leasing vehicle for outreach visits	4,800.00	Leasing vehicle 400/mo
<b>Total:</b>	<b>20,709.47</b>	

**G. ADMINISTRATIVE COST (Budget justification)**

Period: 7/1/24-6/30/25

Agency Name: Family Life Center, Inc.

Program Title: Outreach

ADMIN COST	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Audit: \$3000 x 30% to program x 100% to COM = \$900)
██████ - CEO	9,583.02	Annual Salary \$153,878 + Taxes-14.41% + Med 1231/mo + Dental \$75.28 x 5% to program x 100% to COM = \$9,583.02
██████ - COO	7,430.46	Annual Salary \$141,822 + Taxes-14.41% + Med 1845/mo + Dental \$112.92 x 4% to program x 100% to COM= \$7,430.46
██████ Finance manager	4,359.87	Annual Salary \$88,421 + Taxes-14.41% + Med 615.22/mo + Dental \$37.64 x 4% to program x 100% to COM = \$4,359.87
MIS Tech support	4,225.00	Annual \$65,000 X 6.5% to program X 100% to COM
<b>Total:</b>	<b>\$ 25,598.35</b>	

# PROGRAM BUDGET

Agency Name: Family Life Center, Inc.

Program Title: Outreach

Period: 7/1/25-6/30/26

(\*Budget must be for only one year. A separate set of budget tables is required for each year)

EXPENSE CATEGORIES	(a) Amount Requested	(b) *Other Resources	(c) Total Budget
<b>A. Personnel</b>			
Salaries	122,802.94		122,802.94
<i>Personnel Total:</i>	<i>122,802.94</i>	<i>0.00</i>	<i>122,802.94</i>
<b>B. Payroll Taxes and Fringe Benefits</b>			
Payroll Taxes & Assessments	17,695.90		17,695.90
Fringe Benefits (Medical/Dental)	20,804.30		20,804.30
<i>Taxes and Fringe Total:</i>	<i>38,500.20</i>	<i>0.00</i>	<i>38,500.20</i>
<b>C. Equipment</b>			
Equipment/Automobile purchases	1,600.00		1,600.00
<i>Equipment Total:</i>	<i>1,600.00</i>	<i>0.00</i>	<i>1,600.00</i>
<b>D. Supplies</b>			
Office & printing supplies	2,700.00		2,700.00
Program Supplies	3,089.04		3,089.04
<i>Supplies Total:</i>	<i>5,789.04</i>	<i>0.00</i>	<i>5,789.04</i>
<b>E. Staff Training &amp; Travel</b>			
Airfare/ferry			-
Per diem w/lodging			-
Ground transport, gas purchase, parking			-
Registration fees			-
<i>Training and Travel Total:</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>
<b>F. Other Expenses</b>			
Occupancy/Rent			-
Utilities	2,400.00		2,400.00
Travel/mileage (client services)	4,500.00		4,500.00
Facilities R & M	2,400.00		2,400.00
Postage/freight	99.47		99.47
Leasing Vehicle	4,800.00		4,800.00
Contract services (program)			-
Telephone	3,120.00		3,120.00
Equipment rental R & M	750.00		750.00
Insurance - Vehicle/Other	2,640.00		2,640.00
<i>Other Total:</i>	<i>20,709.47</i>	<i>0.00</i>	<i>20,709.47</i>
<b>G. Administrative Cost (12% maximum)</b>			
Audit			-
Incidental mileage (non-program services)			-
Professional fees			-
Insurance (General/Director & Officer liability)			-
Life Insurance & Pension			-
Public Relations			-
Membership Fees/Dues			-
Publications/Subscriptions			-
Staff Recruitment & Supervision			-
General Admin. Accounting & Payroll	21,373.35		21,373.35
Staff IT/Tech Support	4,225.00		4,225.00
<i>Admin Cost Total:</i>	<i>25,598.35</i>	<i>0.00</i>	<i>25,598.35</i>
<b>TOTAL EXPENSES</b>	<b>215,000.00</b>	<b>-</b>	<b>215,000.00</b>
List *Other funding sources to be applied to this specific program. Note: Total column (b). must match the total below.		List all other County of Maui grants and include the Department, Grant #, and full grant amount.	
Source(s)	\$ Amount(s)	County Dept. - Title - Grant no.	\$ Grant Amount
		Case Management	213,750.00
		Molokai Homeless Services	200,000.00
		Rental Assistance Program	810,000.00
<b>Total Other Resources</b>	<b>-</b>		

### A. PERSONNEL (Budget Justification)

Period: 7/1/25-6/30/26

Agency Name: Family Life Center, Inc.

Program Title Outreach

#	POSITION TITLE & STAFF NAME List ALL personnel for the proposed program and indicate if position is vacant. Must match the Program Personnel table from the narrative proposal.	FTE to Agency	Annual Salary (a)	% Time Budgeted to Program (b)	% Time Budgeted to Grant (c)	Total Salary Budgeted to Grant (a x b x c)
1	██████████ (Chief Operating Officer)	1.00	141,821.68	4%	100%	5,672.87
	██████████ (Program Director)	1.00	93,969.00	9%	100%	8,457.21
2	██████████ (Program Manager)	1.00	67,648.61	25%	100%	16,912.15
3	██████████ (Outreach Worker)	1.00	47,028.80	25%	100%	11,757.20
4	██████████ (Outreach Worker)	1.00	46,113.60	25%	100%	11,528.40
5	██████████ Outreach Worker)	1.00	48,921.60	25%	100%	12,230.40
7	██████████ (Outreach Worker)	1.00	48,214.40	55%	100%	26,517.92
	██████████ (Program Assistant)	1.00	39,728.00	10%	100%	3,972.80
8	██████████ (Program Assistant)	0.40	14,465.36	25%	100%	3,616.34
9	██████████ (Program Assistant)	1.00	41,329.60	25%	100%	10,332.40
11	██████████ (Program Assistant)	1.00	29,513.12	40%	100%	11,805.25
12						
13						
14						
15						
16						
<b>TOTAL:</b>				2.68		122,802.94
<b>Justification/comments:</b>						

**B. PAYROLL TAXES & FRINGE BENEFITS (Budget justification)**Period: 7/1/25-6/30/26Agency Name: Family Life Center, Inc.Program Title: Outreach

Payroll Taxes and Assessments	Rate (%) (a)	Salary Budgeted to Grant (b)	Amount Charged to Grant (a x b)
Social Security/Medicare (FICA)	7.65%	122,802.94	\$ 9,394.42
Unemployment Insurance (Federal)	Exempt	122,802.94	\$ -
Unemployment Insurance (State) *not self funded	1.40%	122,802.94	\$ 1,719.24
Worker's Compensation	4.63%	122,802.94	\$ 5,685.78
Temporary Disability Insurance	0.73%	122,802.94	\$ 896.46
			\$ -
<b>Subtotal payroll taxes and assessments</b>			<b>\$ 17,695.90</b>
<b>Fringe Benefits</b>			
Medical			\$ 19,296.00
Dental			\$ 1,508.30
<b>Subtotal fringe benefits</b>			<b>\$ 20,804.30</b>
<b>Total payroll taxes and fringe benefits</b>			<b>\$ 38,500.20</b>
<b>Justification comments:</b> (E.g., Medical/dental premiums for x number of employees * 12 months * (% charged to COM) = \$ COM cost) <b>Medical premiums for 2.68 employees * 12 months * \$600      Dental premium for 2.68 employees * 12 months * \$46.90</b>			

### C. EQUIPMENT (Budget Justification)

Period: 7/1/25-6/30/26

Agency Name: Family Life Center, Inc.

Program Title: Outreach

EQUIPMENT PURCHASES	QTY	UNIT COST	TOTAL COST	AMOUNT requested from County
Laptop for outreach field work	1	1,600.00	1,600.00	\$ 1,600.00
				\$ 1,600.00
<b>Justification/Comments:</b> (include purpose of equipment purchase and how it will be use to achieve program goals)				



**D. SUPPLIES (Budget justification)**

Period: 7/1/25-6/30/26

**Agency Name: Family Life Center, Inc.**

Program Title: Outreach

PROGRAM SUPPLIES	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Activity workbooks: \$2,000 x 30% to program x 100% to COM = \$600)
Office & printing supplies	2,700.00	General office supplies/printer ink/paper (printing intake & other forms specific to this program/file folders Av. Supplies cost \$225/mo
Program Supplies	3,089.04	Bus passes, hygiene supplies, food, other supplies for clients living unsheltered
<b>Total:</b>	<b>5,789.04</b>	

### E. STAFF TRAINING/TRAVEL (Budget Justification)

Period: 7/1/25-6/30/26

Agency Name: Family Life Center, Inc.

Program Title: Outreach

Name and Title of Employee	Conference/Training: Name, location, date	a Per Diem w/lodging	b Air fare	c Ground Transport	d Register Fees	e Other costs	(a+b+c+d+e) Total
							.
							.
							.
							.
							.
							.
							.
							.
<b>TOTAL:</b>		.	.	.	.	.	.

Justification/comments: (Include purpose of trip and how it achieves or supports program goals.)

**F. OTHER COST (Budget justification)**

Period: 7/1/25-6/30/26

Agency Name: Family Life Center, Inc.

Program Title: Outreach

OTHER COST	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Rent: \$20,000 x 30% to program x 100% to COM = \$6000)
Utilities	2,400.00	Annual utilities 40,000 X 6% to program X 100% to COM=2400
Facilities R&M	2,400.00	Annual r&m 40,000 X 6% to program X 100% to COM = 2400
Postage, freight	99.47	Postage and post office box
Telephone	3,120.00	Annual telecommunications \$52,000X6% to program X 100% to COM
Equipment rental R&M	750.00	Upkeep of leased vehicle
Insurance-Vehicle/Other	2,640.00	Annual insurance \$44,000X6% to program X 100% to COM
Travel/Mileage Client Services	4,500.00	Gas/Vehicle upkeep
Leasing vehicle for outreach visits	4,800.00	Leasing vehicle 400/mo
<b>Total:</b>	<b>20,709.47</b>	

**G. ADMINISTRATIVE COST (Budget justification)**

Period: 7/1/25-6/30/26

Agency Name: **Family Life Center, Inc.**

**Program Title:** Outreach

ADMIN COST	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Audit: \$3000 x 30% to program x 100% to COM = \$900)
██████ - CEO	9,583.02	Annual Salary \$153,878 + Taxes-14.41% + Med 1231/mo + Dental \$75.28 x 5% to program x 100% to COM = \$9,583.02
██████ - COO	7,430.46	Annual Salary \$141,822 + Taxes-14.41% + Med 1845/mo + Dental \$112.92 x 4% to program x 100% to COM= \$7,430.46
██████ - Finance manager	4,359.87	Annual Salary \$88,421 + Taxes-14.41% + Med 615.22/mo + Dental \$37.64 x 4% to program x 100% to COM = \$4,359.87
MIS Tech support	4,225.00	Annual \$65,000 X 6.5% to program X 100% to COM
<b>Total:</b>	<b>\$ 25,598.35</b>	

# DCCA State of Hawaii

Downloaded on September 11, 2024.

The information provided below is not a certification of good standing and does not constitute any other certification by the State.

Website URL: <http://hbe.ehawaii.gov/documents>

## Business Information

MASTER NAME	FAMILY LIFE CENTER, INC.
BUSINESS TYPE	Domestic Nonprofit Corporation
FILE NUMBER	50149 D2
STATUS	Active
PURPOSE	TO ESTABLISH, OPERATE, AND MAINTAIN AN OUTREACH PROGRAM FOR THE AID OF MEN, WOMEN, AND CHILDREN IN NEED; (SEE AMRS FILED 7/22/2013)
ORGANIZED IN	Hawaii UNITED STATES
INCORPORATION DATE	Jan 20, 1982
MAILING ADDRESS	95 S KANE ST KAHULUI, Hawaii 96732 UNITED STATES
TERM	PER
AGENT NAME	SUE NAKAMA
AGENT ADDRESS	95 S KANE ST KAHULUI, Hawaii 96732 UNITED STATES

## Annual Filings

FILING YEAR	DATE RECEIVED	STATUS
2024	Jan 11, 2024	Processed
2023	Mar 15, 2023	Processed
2022	Jan 4, 2022	Processed
2021	Jan 5, 2021	Processed
2020	Apr 1, 2020	Processed
2019	Feb 2, 2019	Processed
2018	Jan 18, 2018	Processed
2017	Jan 18, 2017	Processed
2016	Jan 14, 2016	Processed
2015	Jan 21, 2015	Processed
2014	Jan 7, 2014	Processed
2013	Jan 8, 2013	Processed
2012	Jan 4, 2012	Processed
2011	Jan 25, 2011	Processed
2010	Jan 12, 2010	Processed
2009	Jan 12, 2009	Processed
2008	Jun 2, 2008	Processed
2007	Apr 3, 2007	Processed
2006	May 1, 2006	Processed
2005	Apr 13, 2005	Processed
2004	Aug 30, 2004	Processed

2003	Apr 3, 2003	Processed
2002		Not Required
2001	Mar 15, 2002	Processed
2000		Processed
1999		Processed

## Officers

NAME	OFFICE	DATE
MAROCCO, JAMES DWIGHT DR	P/D	Jan 1, 2014
MAROCCO, JOSHUA	V/D	Jan 1, 2020
EDDY, SHIRLEY	T/S/D	Jan 1, 2014
CUMMING, MAUDE L	CEO	Jan 1, 2023
OSTEMILLER, REGGIE	D	Jan 1, 2020
ARUDA, MANUEL	D	Jan 1, 2022
TORRES, CHARLOTTE	D	Jan 1, 2014

## Trade Names

NAME	TYPE	CATEGORY	REGISTRATION DATE	EXPIRATION DATE	STATUS
ALOHALIMA	Trade Name	NO CATEGORY SELECTED	Oct 23, 2001	Oct 22, 2002	Expired
ALOHALIMA	Trade Name	NO CATEGORY SELECTED	Feb 2, 2000	Feb 1, 2001	Expired
FAMILY LIFE COMMUNITY CENTER	Trade Name	NO CATEGORY SELECTED	Feb 3, 1997	Feb 2, 1998	Expired
HO'OLANANI	Trade Name	NO CATEGORY SELECTED	Feb 15, 2019	Feb 14, 2029	Active
HOUSE OF NEW LIFE	Trade Name	NO CATEGORY SELECTED	Feb 11, 2004	Feb 10, 2009	Cancelled
HO'OLANANI	Trade Name	NO CATEGORY SELECTED	Jun 2, 2008	Jun 1, 2018	Expired
MAUI RACQUETBALL CLUB & SPA	Trade Name	NO CATEGORY SELECTED	Feb 17, 1983	Feb 16, 1993	Expired
PEACE IN THE FAMILY PROGRAM	Trade Name	NO CATEGORY SELECTED	Apr 4, 1994	Apr 3, 2005	Expired



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:** FAMILY LIFE CENTER INC

**DBA/Trade Name:** FAMILY LIFE CENTER INC

**Issue Date:** 09/11/2024

**Status:** Compliant

Hawaii Tax#: [REDACTED]  
New Hawaii Tax#: T-[REDACTED]  
FEIN/SSN#: XX-XXX5042  
UI#: XXXXXX6409  
DCCA FILE#: 50149

Status of Compliance for this Vendor on issue date:

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

**Status Legend:**

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



## GRANT AGREEMENT CERTIFICATION

I, **MARCY MARTIN**, Director of Finance of the County of Maui, State of Hawaii,  
do certify that there is available appropriation or balance of an appropriation over and above all  
outstanding contracts, sufficient to cover the amount required by the foregoing contract, i.e.

<u>Appropriation Index</u>	<u>Title</u>	<u>Amount Required</u>
<u>925059B ✓✓</u>	<u>HC HOUSELESS PROGRAM ✓</u>	<u>(6317) ✓ \$ 200,000.00 ✓</u>

GRANT AGREEMENT      G 6188 ✓      FAMILY LIFE CENTER INC ✓

Dated this      3 day of OCTOBER 2024  
Grant Period:      July 1, 2024 to June 30, 2025 ✓


  
\_\_\_\_\_  
MARCY MARTIN  
Director of Finance

Molokai Homeless Services ✓  
for Department of Human Concerns (DHC)  
(1st of a 2-year contract)  
**ORDINANCE #5657 (FY2025)**

#JAN

FY 2025

ri

  
10/23/24

**RICHARD T. BISSEN, JR.**  
Mayor

**MARCY MARTIN**  
Director



**DEPARTMENT OF FINANCE**  
**COUNTY OF MAUI**  
**200 SOUTH HIGH STREET**  
**WAILUKU, MAUI, HAWAII 96793**  
[www.mauicounty.gov](http://www.mauicounty.gov)

October 15, 2024


Family Life Center Inc.  
95 South Kane Street  
Kahului, HI 96732

**RE: MOLOKAI HOMELESS SERVICES**  
**GRANT NO. G6188**

Dear Family Life Center, Inc.:

Transmitted is a copy of the fully executed grant agreement for your file.

Sincerely,

  
MARCY MARTIN  
Director of Finance

MM:dda  
Enclosure

xc: Department of Human Concerns, Grants Management Division

GRANT AGREEMENT OF COUNTY FUNDS

(FY2025 & FY2026) DHC GRANT

G6188

Certification Requested from County: 925059B: \$ 200,000.00

THIS GRANT AGREEMENT ("Agreement") is made this 15<sup>th</sup> day of October, 2024, by and between FAMILY LIFE CENTER, INC., a Hawaii nonprofit corporation, whose local mailing address is 95 South Kane Street, Kahului, Maui, Hawaii, 96732, hereinafter referred to as the "GRANTEE", and the COUNTY OF MAUI, a political subdivision of the State of Hawaii, whose principal place of business is 200 South High Street, Wailuku, Maui, Hawaii 96793, hereinafter referred to as the "COUNTY". The GRANTEE and the COUNTY shall hereinafter be referred to collectively as the "Parties".

W I T N E S S E T H:

WHEREAS, the COUNTY desires to encourage and support the Molokai Homeless Services program; and

WHEREAS, the Department of Human Concerns ("DHC") has reviewed and approved the GRANTEE's application for a grant of COUNTY funds to provide services in furtherance of this goal.

NOW, THEREFORE, the COUNTY and GRANTEE in consideration of the mutual promises hereinafter set forth hereby agree as follows:

A. General Conditions. In consideration of a grant of COUNTY funds, the GRANTEE agrees to the following conditions in the use and administration of the COUNTY funds:

1. The GRANTEE shall provide all services and fulfill all terms and conditions of the grant, attached as Exhibits "A" through "C-2", which are incorporated by reference and made a part hereof.
2. Initial and final payment under this Agreement shall be subject to receipt by the COUNTY of original copies of State of Hawaii Tax Clearance Certificate(s) for the GRANTEE validated by the State of Hawaii Department of Taxation and the Internal Revenue Service ("IRS") or a Certificate of Vendor Compliance ("CVC") as required by COUNTY policy.
3. This Agreement is for two (2) grant performance periods (See: Section P below), which

are contingent upon the following:

- 1) The availability and appropriation of funds;
  - 2) GRANTEE's compliance with all DHC Grants Management Division ("GMD") mandates and instructions pursuant to the grant application, the terms and conditions of the grant, and fiscal policies and procedures; and
  - 3) GRANTEE's successful performance of all program and fiscal reporting requirements as specified in this Agreement.
4. Second year grant specifications are subject to change depending upon the availability of funds, programs and/or any other factors as determined by the COUNTY.

B. Project Budget. The COUNTY agrees to make available as a grant to the GRANTEE a sum not to exceed, for FY2025, TWO HUNDRED THOUSAND AND NO/100 DOLLARS (\$200,000.00) in grant funds (Index code: 925059B; grants and disbursements for health, human services, and education); and a sum not to exceed, for FY2026, TWO HUNDRED THOUSAND AND NO/100 DOLLARS (\$200,000.00) in grant funds for this two year Agreement. The GRANTEE agrees to use the grant funds solely for purposes specified in Exhibit "B" and shall allocate the COUNTY funds according to the budget attached as Exhibits "C-1" (an amount not to exceed \$200,000.00 for FY2025) and "C-2" (an amount not to exceed \$200,000.00 for FY2026).

GRANTEE shall comply with all standard policies and procedures pertaining to budget revisions and budget modifications as specified in the DHC GMD budget revision guidelines.

C. Method of Payment. For and in consideration of the agreements and undertakings of the GRANTEE pursuant to this Agreement, the COUNTY hereby agrees to pay the GRANTEE in five (5) allotments as follows:

1. A first payment (Advance) may be up to 25% of the fiscal year grant award. Disbursement will be made within twenty-one (21) days of the execution of this Agreement subject to the GRANTEE's satisfactory completion of required supporting documents.
2. The second payment may be up to 25% of the fiscal year grant award or an amount so that the cumulative grant payments do not exceed 50% of the fiscal year grant award.
3. The third payment may be up to 25% of the fiscal year grant award or an amount so that the cumulative grant payments do not exceed 75% of the fiscal year grant award.

4. The fourth payment may be up to 15% of the fiscal year grant award or an amount so that the cumulative grant payments do not exceed 90% of the fiscal year grant award.
5. The fifth and final payment may be up to 10% of the fiscal year grant award or an amount so that the cumulative grant payments do not exceed 100% of the fiscal year grant award.

With the exception of the first (Advance) payment, all payments will be made no later than thirty (30) calendar days after the receipt of the GRANTEE's quarterly reports and allotment request, provided that the GRANTEE is in compliance with all terms and conditions of this Agreement.

- D. Reporting Requirements. The GRANTEE shall submit to the COUNTY a Quarterly Certification, Quarterly Allotment Request (QAR), a Quarterly Financial Report (QFR), a Quarterly Demographics Report (QDR), and a Quarterly Narrative Report (QNR), on forms prescribed by the DHC not later than three (3) weeks following the end of each quarter, as follows:

<u>1<sup>st</sup> Year (FY2025) Quarterly Reports</u>	<u>Due to the COUNTY No Later Than</u>
First Quarter (Jul-Sep 2024)	October 21, 2024
Second Quarter (Oct-Dec 2024)	January 21, 2025
Third Quarter (Jan-Mar 2025)	April 21, 2025
Fourth Quarter (Apr-Jun 2025)	July 21, 2025
<u>2<sup>nd</sup> Year (FY2026) Quarterly Reports</u>	<u>Due to the COUNTY No Later Than</u>
First Quarter (Jul-Sep 2025)	October 21, 2025
Second Quarter (Oct-Dec 2025)	January 21, 2026
Third Quarter (Jan-Mar 2026)	April 21, 2026
Fourth Quarter (Apr-Jun 2026)	July 21, 2026

The Quarterly Reports shall be submitted in a timely manner and authenticated as to its accuracy by the GRANTEE, verified by a designated COUNTY official and shall include a certification by the GRANTEE that the work was performed in accordance with the terms and conditions of this Agreement.

- E. Program Monitoring. The GRANTEE shall retain and permit the COUNTY or its duly authorized agent free access to any and all GRANTEE programs, facilities, events or activities

without advance or formal notification or appointment when such access is for the express purpose of monitoring, investigating, researching or formulating programs, services, or related policies and procedures or when the COUNTY is otherwise in the pursuit of any official business relative to any aspect of this Agreement.

F. Documents and Files.

1. Any information, data, report, record, summary, table, map or study given to or prepared or assembled by the GRANTEE under this Agreement that the COUNTY requests to be kept confidential shall not be made available to any individual or organization other than any subcontractor to which the material may relate, without prior written approval of the COUNTY.
2. The COUNTY shall have complete ownership of all material, both finished and unfinished, that is developed, prepared, assembled, or conceived by the GRANTEE pursuant to this Agreement, and all such materials shall be considered "works made for hire". All such material shall be delivered to the COUNTY upon expiration or termination of this Agreement. The COUNTY, in its sole discretion, shall have the exclusive right to copyright any product, concept, or material developed, prepared, assembled, or conceived by the GRANTEE pursuant to this Agreement.
3. The GRANTEE and any subcontractors shall maintain the books and records that relate to this Agreement, and any cost of pricing data for three (3) years from the date of the final payment under this Agreement. In the event of any litigation, claim, investigation, audit, or other action, the records shall be retained for three (3) years from the date of final payment, or from the date of the resolution of the action, whichever occurs later. During the period that records are retained under this section, the GRANTEE and any subcontractors shall allow the COUNTY free and unrestricted access to such records.

G. Changes. The COUNTY may from time to time require changes in the scope of services which the GRANTEE is to perform. Such changes, including any increases or decreases in the amount of the GRANTEE's grant funds, shall be incorporated by written amendment to this Agreement.

H. Independent Contractor. GRANTEE acknowledges that it is an independent contractor and not an employee of the COUNTY.

- I. Indemnification. GRANTEE shall defend, indemnify and hold harmless the COUNTY, its officers, agents, and employees from and against any and all manner of actions and claims arising, either directly or indirectly, out of or resulting from the errors, omissions, or acts of GRANTEE, its officers, its employees, or its agents occurring during or in connection with the performance of the GRANTEE's services under this Agreement.
- J. Insurance. The GRANTEE shall obtain, pay for, and keep in force throughout the period of this Agreement comprehensive liability insurance issued by an insurance company (the "Carrier") authorized to do business in the State of Hawaii (an "Admitted Carrier"), or by a company not authorized to do business in the State of Hawaii (a "Non-Admitted Carrier") or its equivalent only through a general insurance agent or broker licensed in the State of Hawaii.

The Carrier shall be rated no less than "A-" as established by "AM Best" or "Standard & Poor" ratings. The insurance policy, as evidenced by issuance of a "Policy Endorsement", shall name the COUNTY, its officers, employees and agents as "Additional Insured", and shall include a duty to defend the COUNTY, its officers, employees and agents against any loss, liability, claims, and demands for injury or damage, including, but not limited to, claims for property damage, personal injury, or wrongful death, arising out of, or in connection with GRANTEE's actions and/or performance of this Agreement. Unless otherwise agreed to by the COUNTY, through the joint decision and discretion of the Director of the Department of Human Concerns and the Director of the Department of Finance, the insurance policy shall contain the following minimum requirements:

- 1) No less than a Combined Single Limit ("CSL") of liability coverage of \$1,000,000;
- 2) No erosion of limit by payment of defense costs; and
- 3) Minimum annual aggregate limit of \$2,000,000.

Prior to or upon the execution of this Agreement, GRANTEE shall furnish the COUNTY with a copy of the insurance policy certificate together with the required endorsements verifying such insurance coverage. If the scheduled expiration date of a current insurance policy is sooner than the specified termination date of this Agreement, the GRANTEE shall, upon renewal of the insurance policy, provide the COUNTY with a copy of the renewed insurance policy certificate together with the required endorsements. Unless waived by the COUNTY, the insurance policy shall expressly state that the coverage provided under such policy shall not be cancelled or terminated, unless the Carrier has first given the



COUNTY thirty (30) calendar days prior written notice of the intended cancellation or termination.

**K. Modification and Termination of Agreement.**

1. Any modification, alteration or change to this Agreement, including, but not limited to, modification of the services to be performed, extension of time of performance, or changes to the approved budget, shall be made only by written amendments to this Agreement executed by the Parties.
2. This Agreement may be terminated in whole or in part when the COUNTY determines that there has been a change in the conditions upon which the need for the services was based, that the GRANTEE has failed to provide services adequately or satisfactorily, that funding for this Agreement is not available or cannot be secured, or that other good cause for the whole or partial termination of this Agreement exist.
3. If the COUNTY determines, in its sole discretion, that it is necessary or convenient, this Agreement may be terminated in whole or in part at the option of the COUNTY. If the COUNTY elects to terminate under this section, the GRANTEE shall be entitled to reasonable payment as determined by the COUNTY for satisfactory services rendered under this Agreement up to the time of termination.
4. The GRANTEE may withdraw from this Agreement after obtaining the written consent of the COUNTY. The COUNTY, upon the GRANTEE's withdrawal, shall determine whether payment is due to the GRANTEE, and the amount that is due.
5. The COUNTY may offset against any monies or other obligations the COUNTY owes to the GRANTEE under this Agreement, any amounts owed to the COUNTY by the GRANTEE, including but not limited to the payment of any taxes or levies of any kind or nature. The COUNTY shall notify the GRANTEE in writing of any exercise of its right of offset and the nature and amount of such offset.

- L. County's Remedies.** GRANTEE understands that in the event that it fails to comply with any of the performance requirements, provisions, terms, or conditions set forth in this Agreement, the COUNTY may refuse to make further payments to GRANTEE of grant funds under this Agreement. The COUNTY will give a written notice to the GRANTEE of any stop payment action.

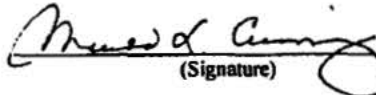
- M. Subcontracting. GRANTEE shall not procure or subcontract any part of the services under this Agreement without the prior written consent of the COUNTY which consent shall not be unreasonably withheld.
- N. Severability. Every provision of this Agreement is intended to be severable. If any term or provision hereof is illegal or invalid for any reason whatsoever, such illegality or invalidity shall not affect the validity of the remainder of this Agreement. If the entire Agreement is deemed illegal or invalid, the COUNTY may terminate this Agreement without liability except as provided herein.
- O. Headings. All headings of this Agreement are for convenience only and are not to be construed as limiting in any manner the content of any section or particular provision.
- P. Time of Performance. The first year performance period shall begin on July 1, 2024, and shall terminate on June 30, 2025. Subject to the terms and conditions specified herein, the second year performance period shall begin on July 1, 2025 and shall terminate on June 30, 2026.

[THE REMAINDER OF THIS PAGE IS INTENTIONALLY LEFT BLANK]

IN WITNESS WHEREOF, the parties hereto have executed this Agreement the day,  
month and year first above written.

GRANTEE:

FAMILY LIFE CENTER, INC.

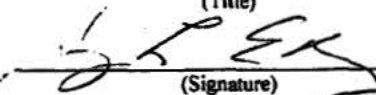
By:   
(Signature)

Maude L. Cumming

(Print Name)

Its Chief Executive Officer

(Title)

By:   
(Signature)

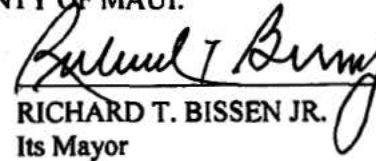
Shirley L. Eddy

(Print Name)


Its Secretary-Treasurer


(Title)

COUNTY OF MAUI:


By:   
RICHARD T. BISSEN JR.  
Its Mayor

APPROVAL RECOMMENDED:

  
LORI TSUHAKE, Director  
Department of Human Concerns

  
LESLEY MILNER  
Budget Director

APPROVED AS TO FORM AND LEGALITY:

  
YUKARI MURAKAMI  
Deputy Corporation Counsel  
County of Maui

## **GENERAL TERMS AND CONDITIONS**

### **Department of Human Concerns ("DHC")**

In consideration of a grant of COUNTY funds, GRANTEE agrees to the following conditions in the use and administration of COUNTY funds. In the event the following conditions conflict with any term, provision, condition and/or covenant contained in the body of the Grant Agreement, the terms, provisions, conditions and/or covenants contained in said body shall prevail.

- 1) GRANTEE shall keep records and prepare reports, including detailed, separate financial records relating to ALL GRANT FUNDS. All accounts shall be prepared and maintained according to generally accepted accounting principles and as otherwise provided by law. GRANTEE shall maintain such accounts and documents as will serve to permit expeditious determination to be made at any time of the status of funds within the award, including the disposition of all monies received from the COUNTY and the nature and amount of all charges claimed to be against such funds.
- 2) GRANTEE shall provide the COUNTY written quarterly narrative progress reports regarding the Project and use of grant funds within three (3) weeks after the end of each quarter of the fiscal year. GRANTEE's narrative reports shall contain the following information: summary of the status in the relationship to outcomes, outputs and scheduled action steps outlined in the grant proposal; numbers and descriptions of people or businesses served including progress in meeting performance standards and economic self-sufficiency if appropriate. Within three (3) weeks after expiration of the time of performance, GRANTEE shall submit to the COUNTY a final project report in a form satisfactory to the COUNTY documenting GRANTEE's efforts toward meeting the requirements of this Agreement, an inventory of all equipment costing \$5,000.00 or more acquired with funds provided under this Agreement, and a list of expenditures incurred in the performance of this Agreement. GRANTEE's final project report shall contain the following information: summary of program status in relation to outcomes, outputs and scheduled action steps outlined in the grant proposal; numbers and descriptions of people or businesses served; financial status report of COUNTY funds used; and narrative report, including progress in meeting performance standards and economic self-sufficiency, if appropriate.

- 3) GRANTEE shall provide the COUNTY written quarterly allotment, financial and demographic reports on forms prescribed by the department.
- 4) GRANTEE shall not use grant funds to compensate its employees more than the prevailing wages in the State of Hawaii for employees with similar skills and abilities.
- 5) Unless otherwise required in the Grant Agreement or in related application submittals, GRANTEE shall supply the COUNTY with a copy of its audited financial statements, prepared by its Certified Public Accountant(s). GRANTEE shall, upon request of the COUNTY, provide the COUNTY full access to inspect or audit GRANTEE's records, report books, files, and other financial records and documents to allow the COUNTY to determine compliance with the terms of the Grant Agreement, measure program effectiveness, and assure proper expenditure. GRANTEE shall cooperate fully and assist the COUNTY in any such audit or inspection.
- 6) GRANTEE shall give the COUNTY and, if applicable, the State of Hawaii, appropriate recognition in all grant-funded programs and printed materials.
- 7) GRANTEE shall comply with its articles of incorporation and/or bylaws and all relevant COUNTY, State and/or Federal rules and regulations concerning its policies and operations.
- 8) GRANTEE shall not discriminate either in the hiring of staff, use of volunteers, use of facilities, or delivery of client services on the basis of sex, sexual orientation, national origin, age, race, color, religion or disability. GRANTEE shall comply with all applicable federal and state laws prohibiting discrimination.
- 9) GRANTEE shall not alter program plans which provided the justification for the grant without first obtaining the prior written consent of the COUNTY. GRANTEE shall inform the COUNTY of any proposed changes to the budget allocations or project description or schedule outlined herein.
- 10) GRANTEE shall comply with all requests of the County of Maui for information and reports regarding the Project and GRANTEE's operations.
- 11) GRANTEE shall comply with all applicable federal, state and COUNTY licensing requirements and with all applicable accreditation and other standards of quality generally accepted in the field of GRANTEE's activities. GRANTEE shall assure that any person or

entity GRANTEE may engage, retain or subcontract with to provide any service or perform any function under this grant complies with all applicable federal, state and COUNTY licensing requirements and with all applicable accreditation and other standards of quality generally accepted in said person's or entity's field.

- 12) GRANTEE shall not use any grant funds for purposes of providing entertainment, food and beverages, or perquisites to GRANTEE's employees or staff. For purposes of this Agreement, "perquisites" means a privilege provided or service rendered by GRANTEE to an employee, officer, director, or member of GRANTEE agency to reduce that individual's personal expenses.
- 13) GRANTEE shall not use any grant funds for payments into self-funded unemployment insurance benefit accounts. (H.R.S. Chapter 383-62)
- 14) As a nonprofit organization, GRANTEE shall establish and be governed by bylaws or policies which shall include provisions relating to nepotism and management of potential conflict-of-interest situations, as required by Section 3.36.040(c) of the Maui County Code.
- 15) GRANTEE shall not dispose of any real or personal property acquired with grant funds received under this Agreement without first receiving prior written consent of the COUNTY. Should GRANTEE cease to use any real or personal property acquired with grant funds for purposes described in this Agreement, GRANTEE shall either:
  - a) Pay the COUNTY the current fair market value of the asset; or
  - b) Transfer the control of the asset to the COUNTY.
- 16) Upon expiration or termination of this Agreement, the GRANTEE shall transfer to the COUNTY
  - a) Any COUNTY funds on hand at the time of termination;
  - b) Any account receivables attributed to the use of COUNTY funds; and
  - c) Any real and/or personal property acquired or improved in whole or in part with COUNTY funds.

- 17) **NONCOMPLIANCE, SUSPENSION AND TERMINATION:** GRANTEE's failure to faithfully perform any part of this Agreement or any of the Additional Conditions herein shall constitute noncompliance, and:
- a) Should the noncompliance continue for thirty (30) days after written notice thereof is delivered to GRANTEE or mailed to its last known address; or,
  - b) If such noncompliance cannot be reasonably cured in thirty (30) days, and GRANTEE has failed to commence to cure such noncompliance and to continue to diligently use its best efforts to cure such noncompliance; or
  - c) If GRANTEE shall become bankrupt; or,
  - d) If GRANTEE fails to perform any of the terms of this Agreement, or abandons or substantially suspends any part of this Agreement's Scope of Work; then the COUNTY may, at its sole discretion, take any one or more of the following actions:
    - i) Withhold grant fund payments pending correction of the noncompliance by the GRANTEE;
    - ii) Disallow all or part of the cost/expense of the activity or action not in compliance;
    - iii) Suspend or terminate, wholly or partially, the current award of this Agreement with the GRANTEE;
    - iv) Withhold additional award(s) to the GRANTEE; and
    - v) Terminate this Agreement without service or notice or legal process and without prejudice to any other remedy or right of action for breach or contract
- 18) Upon termination of this Agreement, all finished or unfinished documents, data, studies, and reports purchased or prepared by the GRANTEE pursuant to this Agreement shall be transferred to the COUNTY.
- 19) **COST INCURRED DUE TO SUSPENSION OR TERMINATION:** Any costs incurred by the GRANTEE resulting from any obligations incurred by GRANTEE during suspension or after termination of this Agreement are not allowable unless the COUNTY authorizes such costs in the Notice of Suspension or Termination issued to the GRANTEE. The determination of eligible costs shall be made by the COUNTY in its sole discretion.



**20) FOR GRANTS INVOLVING USE OF COUNTY FUNDS FOR THE DESIGN AND/OR CONSTRUCTION OF IMPROVEMENTS TO REAL PROPERTY IN ADDITION TO THE ABOVE CONDITIONS, THE FOLLOWING CONDITIONS SHALL ALSO APPLY:**

**a) PERFORMANCE SCHEDULE**

- i) Within thirty (30) days from receipt of the COUNTY issued notice to proceed, GRANTEE shall provide the COUNTY with an implementation schedule specifically indicating the time frame and the expenditures required to complete each major phase of the Project. Quarterly, GRANTEE shall submit status reports to the COUNTY in a form acceptable to the COUNTY, detailing the Project's financial status and progress of the Scope of Work. Status reports shall be submitted within three (3) weeks after the end of the quarter of the fiscal year.**
- ii) Within ninety days of the Project completion, a final report shall be furnished to the COUNTY. Additional reports required by the COUNTY shall be provided by the GRANTEE as requested.**

**b) INSPECTIONS AND MONITORING:** During normal business hours, all of GRANTEE'S records relating to the Project will be available for examination by the COUNTY. On a semi-annual basis until the final report for the Project is accepted by the COUNTY, the COUNTY will make a determination as to whether the GRANTEE (a) has complied with the terms of this Agreement; and (b) has the continuing capacity to complete the Project in a timely manner. The COUNTY may withhold payments if it determines that the GRANTEE is unable to comply with these requirements.

**c) SUBCONTRACTING:** The GRANTEE shall not procure or subcontract any part of the services under this Agreement without the prior written consent of the COUNTY. All subcontracts entered into by the GRANTEE shall be in writing.

**d) PROCUREMENT:** If GRANTEE contracts for the design and/or construction of any structure, defined for purposes hereof as any construction involving a load-bearing wall, GRANTEE shall comply with the Hawaii Public Procurement Code, Chapter 103D, Hawaii Revised Statutes, and any COUNTY procurement policies for the procurement of contracts for design and/or construction of any structures as defined herein. GRANTEE

shall submit to the COUNTY copies of all plans, specifications, permits and other approval applications for review and approval by the COUNTY's designated departmental officer prior to soliciting construction bids and proposals from contractors for the construction. Additionally, GRANTEE shall ensure that all procurement transactions for construction of non-structures, as defined herein, and all procurement transactions for goods and services are conducted in a manner to provide, to the maximum extent practical, open and free competition.

- e) **PREVAILING WAGES:** GRANTEE shall ensure that all contractors and subcontractors shall comply with all applicable provisions of the prevailing wage schedule as required under Chapter 104, Hawaii Revised Statutes, and further, shall require all contractors and subcontractors to submit certified payroll records to the GRANTEE on a periodical basis for GRANTEE's and the COUNTY's review and files.
- f) **METHOD OF PAYMENT:** GRANTEE shall submit to the COUNTY written Request for Payment. Each request shall be authenticated as to accuracy by the GRANTEE, and verified by the designated COUNTY departmental officer. Each request shall include the following:
  - i) Certification by the GRANTEE that the work for which payment is requested was performed in accordance with the terms of this Agreement;
  - ii) Certified payroll records for the applicable time period or phase for which payment is being requested; and
  - iii) Copies of all contracts, bills, invoices and purchase orders which support the request shall:
    - (a) Be the original document, unless prior approval is obtained from the COUNTY's designated departmental officer to submit document copies.
    - (b) Be under the letterhead of the respective contractor or subcontractor requesting payment.
    - (c) Be signed by an authorized official of the GRANTEE.
    - (d) Identify the Project, the nature of the work or materials provided, and the specific Phase of the Project for which the work or materials were provided.

- 21) GRANTEE shall maintain in its files, at all times, documentation verifying that work described in any contract, bill, invoice, purchase order or Request for Payment sent to the COUNTY is correct, complete, and in accordance with the terms of this Agreement. Initial and final payment under this Agreement shall be subject to receipt by COUNTY of original tax clearance certificates for the GRANTEE from the State of Hawaii Department of Taxation and the Internal Revenue Service. A current Certificate of Vendor Compliance (CVC) is also acceptable in lieu of tax clearance certificates.
- 22) THE COUNTY MAY WITHHOLD ANY OR ALL PAYMENTS TO THE GRANTEE IF THE AMOUNT OF PAYMENT AS REQUESTED IS, IN THE COUNTY'S DETERMINATION, UNREASONABLE, OR DOES NOT COMPLY WITH THE TERMS OF THIS AGREEMENT.
- 23) PROSELYTIZATION PROHIBITED: Grant funds shall not be used to recruit or convert a person to a new faith, institution, or cause.

## ## ##

<Family Life Center, inc.>  
<Molokai Homeless Assistance>

Performance Period: < FY25, July 1, 2024-June 30, 2025, FY26 or July 1, 2025-June 30, 2026>

Program Proposal

**I. Executive Summary:**

This proposal requests annual funding of \$200,000 to provide *Housing-Focused services to homeless individuals on the island of Molokai*. The total request for FY 2025 & 2026 is \$400,000. *The program will serve approximately 25 households annually.*

The *target populations* are unsheltered homeless individuals and families. We have tailored our operations to provide a full continuum of services to meet the needs of the homeless population: Outreach, Shelter, and Housing (Including Permanent Supportive Housing).

**II. Background:**

FLC estimates that the total numbers of unsheltered individuals on Molokai vary between 15-35 individuals at any point in time.

Outreach involves moving outside the walls of the agency to engage people experiencing homelessness who may be disconnected and alienated not only from mainstream services and support, but from the services targeting homeless persons as well. This work is designed to help establish supportive relationships, give people advice and support, to enhance the possibility that they will access necessary services and support that will help them move off the streets.

The community has expressed concerns about homeless individuals who populate the beaches and parks and other areas not meant for human habitation. Our challenge is to engage all homeless individuals to provide services to assist in exiting out of homelessness.

As part of the continuum of stabilization services, FLC has increased programmatic options through the recent purchase of three homes that will serve as an emergency shelter. We will provide 4 beds for single females and 4 beds for single males. As the needs shift and fluctuate on the island we can redesignate one or both homes for either families or couples, depending on the need.

Finally, the continuum of services should end in housing. To this goal, Family Life Center has acquired a home which will be divided into two units to provide permanent units to two households. This purchase will supplement the rental unit inventory on the island. We will also work with local landlords to cultivate relationships.

**Target Population**

The *target population* of the Molokai Program would be unsheltered homeless individuals and families transitioning to permanent housing on the island of Molokai.

**Past Agency Experience**

Since 1999, Family Life Center has been involved in delivering services to the homeless and marginalized populations. Over the last ten years, FLC has administered housing programs

concentrating on the island of Maui, eventually expanding to the islands of Kauai, and Molokai. FLC has contracts with the State of Hawaii, the County of Maui, and HUD.

The current rate of retention of clients sustaining housing for at least 6 months after receiving assistance is 85%. This high retention rate can be attributed largely to the support and intervention of case managers, as well as other support services offered by FLC (e.g., the provision of food and clothing). FLC continues to expand its base of support programs, which benefit clients and increase the likelihood that clients will be successful.

**Table 1 - Program Personnel (Position Title and Personnel Name must match the Personnel Budget table)**

Position Title and (Personnel's Name)	Positions' required qualifications	Brief description of main duties for this program	Funded in full/part of COM grant? (Yes or No)
Program Manager [REDACTED]	Min. AA or 5 yrs. equiv. experience.	Program Manager directing the outreach team, overseeing the shelter operations, and providing case management for PSH clients.	Yes
Outreach Case Manager [REDACTED]	Min. AA or 3 yrs. equiv. experience.	Focus on helping individuals access permanent housing as rapidly as possible and preventing returns to homelessness. Offer assistance and efforts to connect homeless persons to access community services and resources. Serves as a back-up monitor to the shelter for vacation and sick coverage.	Yes
Outreach Case Manager [REDACTED]	Min. AA or 3 yrs. equiv. experience.	Focus on helping individuals access permanent housing as rapidly as possible and preventing returns to homelessness. Offer assistance and efforts to connect homeless persons to access community services and resources. Serves as a back-up monitor to the shelter for vacation and sick coverage.	Yes
Live-in Shelter Monitor (Vacant)	HS Diploma	Ensure the safety and security of the shelter by responding to complaints, attending property needs, and monitoring participant's attendance.	Yes

### **III. Program Description:**

The following is a description of the continuum of services that FLC proposes to deliver on the island of Molokai:

**Outreach:** Outreach workers will frequent encampments, beaches, and other street locations known as meetings spots as well as collaborate with other organizations that provide services to the homeless. The primary *goal* of the Outreach program is to identify homeless individuals, focus on getting households document ready to access permanent housing. Homeless individuals will also be provided with information and referrals to available resources and connections to permanent housing. *Housing-Focused Outreach* is about *ending homelessness* through concerted and collaborative approaches.

**Shelter:** Family Life Center proposes the introduction of a new program on Molokai Emergency Shelter Program – Ho’olanani Molokai – meaning “a precious place that brings life.” Ho’olanani Molokai will operate using a Housing First approach to provide safe, appropriate, and immediate temporary low-barrier shelter for people who have no viable alternatives, serving as a first step to being quickly and permanently re-housed. Shelter services will focus on helping people access permanent housing as rapidly as possible by removing barriers to program entry, assisting with quickly locating and accessing housing options, assisting to access income and benefits, and connecting to community services and supports to promote stability and prevent evictions and returns to homelessness. Ho’olanani will serve as an access point to the Coordinated Entry System (CES.)

#### **Housing:**

**Permanent Housing-** This grant funding will continue to pay for time limited rental payments once housing has been identified and secured. Case managers will continue working with the household to either increase income or secure other rental support such as HUD Section 8 or access affordable housing for long term sustainability and to prevent returns to homelessness.

**Permanent Supportive Housing-** Family Life Center seeks to also introduce a new program- Permanent Supportive Housing (PSH) in Molokai. PSH provides assistance to serve chronically homeless persons who have a qualifying disability to achieve housing stability. Family Life Center commits to applying the Housing First model to the program. This programmatic and systems approach centers on providing homeless individuals with housing quickly and then providing services as needed using a low barrier approach that emphasizes community integration, stable tenancy, recovery, and individual choice leveraging hands-on regular case management.

The following table shows the progression of services. Clients will be entered into the *By Name list* in the Coordinated Entry system once they have moved from the Circle position to the Triangle position and are Document ready.



**Table 1.2 Progression of Services**

<b>Type</b>	<b>Description</b>	<b>Do they want housing?</b>	<b>Goal</b>	<b>% of Outreach worker time spent</b>
<b>X</b>	Identified, intake done, May be providing charity support resources	No	Continue to ask. "Can I help you with housing."	10%
<b>●</b>	Engaged. VI-SPDAT/Homeless Certification/HMIS Consent completed. Is working on document ready checklist	Yes	Document ready	40%
<b>▲</b>	Document ready. Working with housing department	Yes	Get housed	50%

**IV. Collaboration in Providing Services:**

**Table 2.1 Projected Collaboration FY25**

<b>FY2025 Projected Collaboration in Providing Services,</b>			
<b>Agency, service, or community resource</b>	<b>Type of coordinated activities</b>	<b>Number of persons to be served</b>	<b>Outcomes to be supported by this collaboration</b>
<b>Veteran's Affairs</b>	<b>HUD/VASH program</b> -FLC provides utility/security deposits for homeless veterans. HUD/VASH provides ongoing rental support	Annual -10	Homeless veterans transitioned to permanent housing
<b>Mental Health Kokua</b> <b>Aloha House</b>	Mental health services: 1 - FLC coordinates and refers clients to Mental Health Kokua. MHK conducts mental health screenings and if appropriate, facilitates ongoing services 2 – Permanent supportive housing – FLC provides ongoing rental support that is matched with mental health case management provided by either Mental Health Kokua or Aloha House	Annual-36  Annual -35	Homeless individuals with mental health issues access mental health treatment services Homeless individuals with mental health issues achieve permanent housing with ongoing case management support
<b>County HUD Section 8 office</b>	FLC has a by name relationship with most of the HUD Section 8 staff. FLC has offered and hosted Section 8 briefings at its facilities. This has benefitted both potential HUD Section 8 recipients as well as the HUD office. On an ongoing basis, FLC and HUD staff will collaborate on timing of inspections and other processes	This number is dependent of HUD Section 8 vouchers available This past year – 30 households	Both homeless and at-risk of homeless individuals achieve permanent housing
<b>How collaborations will achieve program Outcomes and ensure non-duplication of services:</b> Homeless or at-risk of homeless individuals are engaged and connected to available resources through these collaborations. Each of these resources is designed to either address barriers that limit access to permanent housing or provide support to sustain housing. FLC serves the same population but does not provide the same services as the collaborating agencies. Services are supplementary or complementary.			

**Table 2.2 Projected Collaboration FY26**

<b>FY2026 Projected Collaboration in Providing Services,</b>			
<b>Agency, service, or community resource</b>	<b>Type of coordinated activities</b>	<b>Number of persons to be served</b>	<b>Outcomes to be supported by this collaboration</b>
<b>Veteran's Affairs</b>	<b>HUD/VASH program -FLC provides utility/security deposits for homeless veterans. HUD/VASH provides ongoing rental support</b>	<b>Annual -10</b>	<b>Homeless veterans transitioned to permanent housing</b>
<b>Mental Health Kokua Aloha House</b>	<b>Mental health services: 1 - FLC coordinates and refers clients to Mental Health Kokua. MHK conducts mental health screenings and if appropriate, facilitates ongoing services 2 – Permanent supportive housing – FLC provides ongoing rental support that is matched with mental health case management provided by either Mental Health Kokua or Aloha House</b>	<b>Annual-36  Annual -35</b>	<b>Homeless individuals with mental health issues access mental health treatment services Homeless individuals with mental health issues achieve permanent housing with ongoing case management support</b>
<b>County HUD Section 8 office</b>	<b>FLC has a by name relationship with most of the HUD Section 8 staff. FLC has offered and hosted Section 8 briefings at its facilities. This has benefitted both potential HUD Section 8 recipients as well as the HUD office. On an ongoing basis, FLC and HUD staff will collaborate on timing of inspections and other processes</b>	<b>This number is dependent of HUD Section 8 vouchers available This past year – 30 households</b>	<b>Both homeless and at-risk of homeless individuals achieve permanent housing</b>
<b>How collaborations will achieve program Outcomes and ensure non-duplication of services:</b> Homeless or at-risk of homeless individuals are engaged and connected to available resources through these collaborations. Each of these resources is designed to either address barriers that limit access to permanent housing or provide support to sustain housing. FLC serves the same population but does not provide the same services as the collaborating agencies. Services are supplementary or complementary.			

**V. Cost Effectiveness**

The programs are designed to provide just enough assistance to help people stabilize into housing, while being available to offer additional support or connections to other resources and programs if more help is needed. Family Life Center has resourced our own funding for facility acquisition. This grant funding will provide support for our operations. However, we continue to seek new funding sources and ways that we can provide better or the same services for reduced cost by implementing performance improvement methods. There are currently no other housing-focused service providers servicing the homeless population on the island of Molokai.

**VI. Other Funding Resources:**

FLC continues to search for other funding sources. FLC leverages other programs to maximize support for clients. These programs include contracts with the State of Hawaii, and HUD. We have also leveraged private dollars to support the startup of operations such as the Bezos Day One Families Fund.

**VII. Program Evaluation:**

**Table 3.1 Program Evaluation FY25**

<b>FY25 Program Evaluation</b>	<b>ANNUAL GOAL</b>	<b>Data Source (ex. Sign-in sheets, database, client log, survey, pre/post-test, etc.)</b>
<b>Total Unduplicated Persons Served:</b>	<b>25</b>	HMIS database
<b>Outcome 1:</b> During the grant period, 15 participants with a housing plan developed will exit to permanent housing	<b>15</b>	HMIS database
<b>Output 1a:</b> During the grant period, 20 participants will develop a housing plan.	<b>20</b>	HMIS database
<b>Output 1b:</b> During the grant period FLC will complete 25 participant intakes/assessments. (Equals the number of participants served this new fiscal year including carryovers from previous year)	<b>25</b>	HMIS database
<b>Output 1c:</b> During the grant period, 15 participants will complete a VI-SPDAT	<b>15</b>	HMIS database
<b>Output 1d:</b> During the grant period, 15 Participants will achieve "document ready" status for housing or homeless program placement (e.g., have a photo ID, SS card, and birth certificate)	<b>15</b>	HMIS database
<b>Outcome 2:</b> During the grant period, 5 participants with a completed housing plan, who	<b>5</b>	HMIS database

<b>FY25 Program Evaluation</b>	<b>ANNUAL GOAL</b>	<b>Data Source</b> (ex. Sign-in sheets, database, client log, survey, pre/post-test, etc.)
exit the program, will realize an increase in their total income.		
<b>Output 2a:</b> During the grant period, 15 Total participants will be taught money management skills	15	HMIS database

*NOTE: FLC enters all client data into the Homeless Management Information System (HMIS.) Information for the following Outcomes/Outputs are derived from reports generated through the HMIS System. FLC enters all data into the HMIS system within 72 hours of services provided.*

**Table 3.2 Program Evaluation FY26**

<b>FY26 Program Evaluation</b>	<b>ANNUAL GOAL</b>	<b>Data Source</b> (ex. Sign-in sheets, database, client log, survey, pre/post-test, etc.)
<b>Total Unduplicated Persons Served:</b>	25	HMIS database
<b>Outcome 1:</b> During the grant period, 15 participants with a housing plan developed will exit to permanent housing	15	HMIS database
<b>Output 1a:</b> During the grant period, 20 participants will develop a housing plan.	20	HMIS database
<b>Output 1b:</b> During the grant period FLC will complete 25 participant intakes/assessments. (Equals the number of participants served this new fiscal year including carryovers from previous year)	25	HMIS database
<b>Output 1c:</b> During the grant period, 15 participants will complete a VI-SPDAT	15	HMIS database
<b>Output 1d:</b> During the grant period, 15 Participants will achieve "document ready" status for housing or homeless program placement (e.g., have a photo ID, SS card, and birth certificate)	15	HMIS database
<b>Outcome 2:</b> During the grant period, 5 participants with a completed housing plan, who exit the program, will realize an increase in their total income.	5	HMIS database
<b>Output 2a:</b> During the grant period, 15 Total participants will be taught money management skills	15	HMIS database

*NOTE: FLC enters all client data into the Homeless Management Information System (HMIS.) Information for the following Outcomes/Outputs are derived from reports generated through the HMIS System. FLC enters all data into the HMIS system within 72 hours of services provided.*

# PROGRAM BUDGET

Agency Name: Family Life Center

Program Title: Molokai Homeless Assistance

Period\*: 7/1/24-6/30/25

(\*Budget must be for only one year. A separate set of budget tables is required for each year)

EXPENSE CATEGORIES	(a) Amount Requested	(b) *Other Resources	(c) Total Budget
<b>A. Personnel</b>			
Salaries	95,361.60		95,361.60
<i>Personnel Total:</i>	95,361.60	0.00	95,361.60
<b>B. Payroll Taxes and Fringe Benefits</b>			
Payroll Taxes & Assessments	13,741.60		13,741.60
Fringe Benefits (Medical/Dental)	13,514.11		13,514.11
<i>Taxes and Fringe Total:</i>	27,255.71	0.00	27,255.71
<b>C. Equipment</b>			
Equipment/Automobile purchases	2,200.00		2,200.00
<i>Equipment Total:</i>	2,200.00	0.00	2,200.00
<b>D. Supplies</b>			
Program supplies	6,000.00		6,000.00
Office supplies	1,311.34		1,311.34
<i>Supplies Total:</i>	7,311.34	0.00	7,311.34
<b>E. Staff Training &amp; Travel</b>			
Airfare/ferry	1,800.00		1,800.00
Per diem w/lodging			-
Ground transport, gas purchase, parking			-
Registration fees			-
<i>Training and Travel Total:</i>	1,800.00	0.00	1,800.00
<b>F. Other Expenses</b>			
Client assistance	4,800.00		4,800.00
Utilities	12,000.00		12,000.00
Travel/mileage (client services)	600.00		600.00
Facilities R & M	20,400.00		20,400.00
Postage/freight	100.00		100.00
Leasing vehicle			-
Contract services (program)			-
Telephone	3,000.00		3,000.00
Equipment rental R & M			-
Insurance - Vehicle/Other	1,980.00		1,980.00
<i>Other Total:</i>	42,880.00	0.00	42,880.00
<b>G. Administrative Cost (12% maximum)</b>			
Audit	2,000.00		2,000.00
Incidental mileage (non-program services)			-
Professional fees			-
Insurance (General /Director & Officer liability)			-
Life Insurance & Pension			-
Public Relations			-
Membership Fees/Dues			-
Publications/Subscriptions			-
Staff Recruitment & Supervision			-
General Admin. Accounting & Payroll	15,591.35		15,591.35
Staff IT/Tech Support	5,600.00		5,600.00
<i>Admin Cost Total:</i>	23,191.35	0.00	23,191.35
<b>TOTAL EXPENSES</b>	<b>200,000.00</b>	<b>-</b>	<b>200,000.00</b>
List *Other funding sources to be applied to this specific program. Note: Total column (b). must match the total below.		List all other County of Maui grants and include the Department, Grant #, and full grant amount.	
Source(s)	\$ Amount(s)	County Dept. - Title - Grant no.	\$ Grant Amount
		Case Management	213,750.00
		Outreach	215,000.00
		Rental Assistance Program	810,000.00
Total Other Resources	-		

### A. PERSONNEL (Budget Justification)

Period: 7/1/24-6/30/25

Agency Name: Family Life Center

Program Title: Molokai Homeless Assistance

#	POSITION TITLE & STAFF NAME List ALL personnel for the proposed program and indicate if position is vacant. *Must match the Program Personnel table from the narrative proposal.	FTE to Agency	Annual Salary (a)	% Time Budgeted to Program (b)	% Time Budgeted to Grant (c)	Total Salary Budgeted to Grant (a x b x c)
1	Program Manager - [REDACTED]	1.00	70,761.60	100%	100%	70,761.60
2						
3						
4	Live in Shelter Monitor (vacant projected to be filled Nov 24)	1.00	41,000.00	60%	100%	24,600.00
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
<b>TOTAL:</b>				1.60		95,361.60

**Justification/comments:**



**B. PAYROLL TAXES & FRINGE BENEFITS (Budget justification)**Period: 7/1/24-6/30/25Agency Name: Family Life CenterProgram Title: Molokai Homeless Assistance

Payroll Taxes and Assessments	Rate (%) (a)	Salary Budgeted to Grant (b)	Amount Charged to Grant (a x b)
Social Security/Medicare (FICA)	7.65%	95,361.60	\$ 7,295.16
Unemployment Insurance (Federal)	Exempt	95,361.60	\$ -
Unemployment Insurance (State) *not self funded	1.40%	95,361.60	\$ 1,335.06
Worker's Compensation	4.63%	95,361.60	\$ 4,415.24
Temporary Disability Insurance	0.73%	95,361.60	\$ 696.14
	14.41%		\$ -
<b>Subtotal payroll taxes and assessments</b>			<b>\$ 13,741.60</b>
<b>Fringe Benefits</b>			
Medical			\$ 12,791.42
Dental			\$ 722.69
<b>Subtotal fringe benefits</b>			<b>\$ 13,514.11</b>
<b>Total payroll taxes and fringe benefits</b>			<b>\$ - 27,255.71</b>
<b>Justification comments:</b> (E.g., Medical/dental premiums for x number of employees * 12 months * (% charged to COM) = \$ COM cost) <b>Medical premiums for 1.6 employees * 12 months * \$666.22 = \$12791.42 Dental premium for 1.6 employees * 12 months * \$37.64 = \$722.69</b>			

### C. EQUIPMENT (Budget Justification)

Period: 7/1/24-6/30/25

Agency Name: **Family Life Center**

**Program Title:** Molokai Homeless Assistance

EQUIPMENT PURCHASES	QTY	UNIT COST	TOTAL COST	AMOUNT requested from County
Computer/printer/scanner for staff usage	1	2,200.00	2,200.00	\$ 2,200.00
				\$ 2,200.00

**Justification/Comments:** (include purpose of equipment purchase and how it will be use to achieve program goals)

### D. SUPPLIES (Budget justification)

Period: 7/1/24-6/30/25

Agency Name: Family Life Center

Program Title: Molokai Homeless Assistance

PROGRAM SUPPLIES	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Activity workbooks: \$2,000 x 30% to program x 100% to COM = \$600)
Office & printing supplies	1,311.34	General office supplies/printer ink/paper (printing intake & other forms specific to this program/file folders Av. Supplies cost \$110/mo
Program Supplies	6,000.00	hygiene supplies, toilet paper, other supplies for clients living in shelter. Avg cost 500/mo
Total:	7,311.34	

**E. STAFF TRAINING/TRAVEL (Budget Justification)**

Period: 7/1/24-6/30/25

**Agency Name:** Family Life Center

**Program Title:** Molokai Homeless Assistance

Name and Title of Employee	Conference/Training: Name, location, date	a Per Diem w/lodging	b Air fare	c Ground Transport	d Register Fees	e Other costs	(a+b+c+d+e) Total
[REDACTED]	Molokai to Big Island for training (Qtr 1)		450.00				450.00
[REDACTED]	Molokai to Maui for training (Qtr 2)		225.00				225.00
[REDACTED]	Molokai to Maui for training (Qtr 3)		225.00				225.00
							-
[REDACTED]	Maui to Molokai to train staff (Qtr 1)		225.00				225.00
[REDACTED]	Maui to Molokai to train staff (Qtr 2)		225.00				225.00
[REDACTED]	Maui to Molokai to train staff (Qtr 3)		225.00				225.00
[REDACTED]	Maui to Molokai to train staff (Qtr 4)		225.00				225.00
<b>TOTAL:</b>		-	1,800.00	-	-	-	1,800.00

**Justification/comments:** (Include purpose of trip and how it achieves or supports program goals.)

# F. OTHER COST (Budget justification)

Period: 7/1/24-6/30/25

Agency Name: Family Life Center

Program Title: Molokai Homeless Assistance

OTHER COST	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Rent: \$20,000 x 30% to program x 100% to COM = \$6000)
Utilities	12,000.00	Avg \$1000/mo
Facilities R&M	20,400.00	Avg \$1700/mo
Postage, freight	100.00	Postage and post office box
Telephone	3,000.00	Phone \$250/mo X 12
Insurance-Vehicle/Other	1,980.00	Avg \$165/mo X 12 months
Travel/Mileage Client Services	600.00	Mileage/gas to conduct outreach visits, transport clients/\$50 month
Client Assistance	4,800.00	Payments made on behalf of clients for housing security deposits, rental assistance subsidy, utilities deposit, utilities, or unit repairs.
<b>Total:</b>	<b>42,880.00</b>	

### G. ADMINISTRATIVE COST (Budget justification)

Period: 7/1/24-6/30/25

Agency Name: Family Life Center

Program Title: Molokai Homeless Assistance

ADMIN COST	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Audit: \$3000 x 30% to program x 100% to COM = \$900)
Audit	2,000.00	Pro rata share of audit cost 1X/every 2 years
██████ - CEO	9,647.22	5% of Annual Sal 153878 Taxes-14.41% Med 1332/mo Dental \$75.28
██████ COO	3,751.95	2% of Annual Sal 141822 Taxes-14.41% Med 1999/mo Dental \$112.92
██████ - Finance manager	2,192.18	2% of Annual Sal 88421 Taxes-14.41% Med 666.22/mo Dental \$37.64
MIS Tech support	5,600.00	Annual \$140,000 X 4% to program X 100% to COM
<b>Total:</b>	<b>\$ 23,191.35</b>	

## PROGRAM BUDGET

Agency Name: Family Life Center

Program Title: Molokai Homeless Assistance

Period: 7/1/25-6/30/26

(\* Budget must be for only one year. A separate set of budget tables is required for each year)

EXPENSE CATEGORIES	(a) Amount Requested	(b) Other Resources	(c) Total Budget
<b>A. Personnel</b>			
Salaries	101,961.60		101,961.60
<i>Personnel Total:</i>	101,961.60	0.00	101,961.60
<b>B. Payroll Taxes and Fringe Benefits</b>			
Payroll Taxes & Assessments	14,692.66		14,692.66
Fringe Benefits (Medical/Dental)	15,525.60		15,525.60
<i>Taxes and Fringe Total:</i>	30,218.26	0.00	30,218.26
<b>C. Equipment</b>			
Equipment/Automobile purchases	2,000.00		2,000.00
<i>Equipment Total:</i>	2,000.00	0.00	2,000.00
<b>D. Supplies</b>			
Office & printing supplies	1,200.00		1,200.00
Program Supplies	6,000.00		6,000.00
<i>Supplies Total:</i>	7,200.00	0.00	7,200.00
<b>E. Staff Training &amp; Travel</b>			
Airfare/ferry	2,700.00		2,700.00
Per diem w/lodging			-
Ground transport, gas purchase, parking			-
Registration fees			-
<i>Training and Travel Total:</i>	2,700.00	0.00	2,700.00
<b>F. Other Expenses</b>			
Client assistance	6,954.48		6,954.48
Utilities	24,000.00		24,000.00
Travel/mileage (client services)	701.40		701.40
Facilities R & M	8,400.00		8,400.00
Postage/freight	96.08		96.08
Leasing vehicle			-
Contract services (program)			-
Telephone	1,800.00		1,800.00
Equipment rental R & M			-
Insurance - Vehicle/Other	1,980.00		1,980.00
<i>Other Total:</i>	43,931.96	0.00	43,931.96
<b>G. Administrative Cost (12% maximum)</b>			
Audit			-
Incidental mileage (non-program services)			-
Professional fees			-
Insurance (General/Director & Officer liability)			-
Life Insurance & Pension			-
Public Relations			-
Membership Fees/Dues			-
Publications/Subscriptions			-
Staff Recruitment & Supervision			-
General Admin, Accounting & Payroll	10,688.18		10,688.18
Staff IT/Tech Support	1,300.00		1,300.00
<i>Admin Cost Total:</i>	11,988.18	0.00	11,988.18
<b>TOTAL EXPENSES</b>	<b>200,000.00</b>		<b>200,000.00</b>
List Other funding sources to be applied to this specific program. Note: Total column (b), must match the total below.		List all other County of Maui grants and include the Department, Grant #, and full grant amount.	
Source(s)	\$ Amount(s)	County Dept. - Title - Grant no.	\$ Grant Amount
		Case Management	213,750.00
		Outreach	215,000.00
		Rental Assistance Program	810,000.00
Total Other Resources			



**A. PERSONNEL (Budget Justification)**

Period: 7/1/25-6/30/26

Agency Name: Family Life Center

Program Title	Molokai Homeless Assistance
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#	POSITION TITLE & STAFF NAME List ALL personnel for the proposed program and indicate if position is vacant. <small>Must match the Program Personnel table from the narrative proposal.</small>	FTE to Agency	Annual Salary (a)	% Time Budgeted to Program (b)	% Time Budgeted to Grant (c)	Total Salary Budgeted to Grant (a x b x c)
1	Program Manager [REDACTED]	1.00	70,761.60	100%	100%	70,761.60
4	Live in Shelter Monitor (vacant)	1.00	31,200.00	100%	100%	31,200.00
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
TOTAL:				2.00		101,961.60

**Justification/comments:**

## B. PAYROLL TAXES & FRINGE BENEFITS (Budget justification)

Period: 7/1/25-6/30/26

Agency Name: Family Life Center

Program Title: Molokai Homeless Assistance

Payroll Taxes and Assessments	Rate (%) (a)	Salary Budgeted to Grant (b)	Amount Charged to Grant (a x b)
Social Security/Medicare (FICA)	7.65%	101,961.60	\$ 7,800.06
Unemployment Insurance (Federal)	Exempt	101,961.60	\$ -
Unemployment Insurance (State) *not self funded	1.40%	101,961.60	\$ 1,427.46
Worker's Compensation	4.63%	101,961.60	\$ 4,720.82
Temporary Disability Insurance	0.73%	101,961.60	\$ 744.32
	14.41%		\$ -
<b>Subtotal payroll taxes and assessments</b>			<b>\$ 14,692.66</b>
<b>Fringe Benefits</b>			
Medical			\$ 14,400.00
Dental			\$ 1,125.60
<b>Subtotal fringe benefits</b>			<b>\$ 15,525.60</b>
<b>Total payroll taxes and fringe benefits</b>			<b>\$ 30,218.26</b>
<b>Justification comments:</b> (E.g., Medical/dental premiums for x number of employees * 12 months * (% charged to COM) = \$ COM cost) <b>Medical premium \$600/month x 12 months x 2 employees x 100% charged to COM= \$14,400</b> <b>Dental premium \$46.90/month x 12 months x 2 employees x 100% charged to COM= \$1,125.60</b>			

### C. EQUIPMENT (Budget Justification)

Period: 7/1/25-6/30/26

Agency Name: Family Life Center

Program Title: Molokai Homeless Assistance

EQUIPMENT PURCHASES	QTY	UNIT COST	TOTAL COST	AMOUNT requested from County
Computer/printer/scanner for staff usage	1	2,000.00	2,000.00	\$ 2,000.00
				\$ 2,000.00

**Justification/Comments:** (include purpose of equipment purchase and how it will be use to achieve program goals)

### D. SUPPLIES (Budget justification)

Period: 7/1/25-6/30/26

Agency Name: Family Life Center

Program Title: Molokai Homeless Assistance

PROGRAM SUPPLIES	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Activity workbooks: \$2,000 x 30% to program x 100% to COM = \$600)
Office & printing supplies	1,200.00	General office supplies/printer ink/paper (printing intake & other forms specific to this program/file folders Av. Supplies cost \$100/mo
Program Supplies	6,000.00	hygiene supplies, toilet paper, other supplies for clients living in shelter. Avg cost 500/mo
Total:	7,200.00	

### E. STAFF TRAINING/TRAVEL (Budget Justification)

Period: 7/1/25-6/30/26

Agency Name: Family Life Center

Program Title: Molokai Homeless Assistance

Name and Title of Employee	Conference/Training: Name, location, date	a Per Diem w/lodging	b Air fare	c Ground Transport	d Register Fees	e Other costs	(a+b+c+d+e) Total
	Molokai to Maui for training (Qtr 1)		225.00				225.00
	Molokai to Maui for training (Qtr 2)		225.00				225.00
	Maui to Molokai to train staff (Qtr 1)		225.00				225.00
	Maui to Molokai to train staff (Qtr 2)		225.00				225.00
	Maui to Molokai to train staff (Qtr 3)		225.00				225.00
	Maui to Molokai to train staff (Qtr 1)		225.00				225.00
	Maui to Molokai to train staff (Qtr 2)		225.00				225.00
	Maui to Molokai to train staff (Qtr 3)		225.00				225.00
	Molokai to Maui for training (Qtr 1)		225.00				225.00
	Molokai to Maui for training (Qtr 3)		225.00				225.00
	Molokai to Maui for training (Qtr 1)		225.00				225.00
	Molokai to Maui for training (Qtr 3)		225.00				225.00
		-	2,700.00	-	-	-	2,700.00

**TOTAL:**

Justification/comments: (Include purpose of trip and how it achieves or supports program goals.)

### F. OTHER COST (Budget justification)

Period: 7/1/25-6/30/26

Agency Name: Family Life Center

Program Title: Molokai Homeless Assistance

OTHER COST	AMOUNT	JUSTIFICATION/COMMENTS (E.g., Rent: \$20,000 x 30% to program x 100% to COM = \$6000)
Utilities	24,000.00	Avg \$500 month per unit X 4 units
Facilities R&M	8,400.00	Avg \$700/month X 12
Postage, freight	96.08	Postage and post office box
Telephone	1,800.00	Cell phone \$150/mo X 12
Insurance-Vehicle/Other	1,980.00	Avg \$165/mo X 12 months
Travel/Mileage Client Services	701.40	Mileage/gas to conduct outreach visits, transport clients/\$60 month
Client Assistance	6,954.48	Payments made on behalf of clients for housing security deposits, rental assistance subsidy, utilities deposit, utilities, or unit repairs.
<b>Total:</b>	<b>43,931.96</b>	

**G. ADMINISTRATIVE COST (Budget justification)**

Period: 7/1/25-6/30/26

Agency Name: Family Life Center

**Program Title:** Molokai Homeless Assistance

ADMIN COST	AMOUNT	JUSTIFICATION/COMMENTS (E.g... Audit: \$3000 x 30% to program x 100% to COM = \$900)
██████ - CEO	4,793.01	Annual Salary \$153,878 + Taxes-14.41% + Med 1231/mo + Dental \$75.28 x 2.5% to program x 100% to COM = \$4793.01
██████ COO	3,715.23	Annual Salary \$141,822 + Taxes-14.41% + Med 1845/mo + Dental \$112.92 x 2% to program x 100% to COM= \$3715.23
██████ - Finance manager	2,179.94	Annual Salary \$88,421 + Taxes-14.41% + Med 615.22/mo + Dental \$37.64 x 5% to program x 100% to COM = \$2,179.94
MIS Tech support	1,300.00	Annual \$65,000 X 2% to program X 100% to COM
<b>Total:</b>	<b>\$ 11,988.18</b>	

# DCCA State of Hawaii

Downloaded on September 11, 2024.

The information provided below is not a certification of good standing and does not constitute any other certification by the State.

Website URL: <http://hbe.ehawaii.gov/documents>

## Business Information

MASTER NAME	FAMILY LIFE CENTER, INC.
BUSINESS TYPE	Domestic Nonprofit Corporation
FILE NUMBER	50149 D2
STATUS	Active
PURPOSE	TO ESTABLISH, OPERATE, AND MAINTAIN AN OUTREACH PROGRAM FOR THE AID OF MEN, WOMEN, AND CHILDREN IN NEED; (SEE AMRS FILED 7/22/2013)
ORGANIZED IN	Hawaii UNITED STATES
INCORPORATION DATE	Jan 20, 1982
MAILING ADDRESS	95 S KANE ST KAHULUI, Hawaii 96732 UNITED STATES
TERM	PER
AGENT NAME	SUE NAKAMA
AGENT ADDRESS	95 S KANE ST KAHULUI, Hawaii 96732 UNITED STATES

## Annual Filings

FILING YEAR	DATE RECEIVED	STATUS
2024	Jan 11, 2024	Processed
2023	Mar 15, 2023	Processed
2022	Jan 4, 2022	Processed
2021	Jan 5, 2021	Processed
2020	Apr 1, 2020	Processed
2019	Feb 2, 2019	Processed
2018	Jan 18, 2018	Processed
2017	Jan 18, 2017	Processed
2016	Jan 14, 2016	Processed
2015	Jan 21, 2015	Processed
2014	Jan 7, 2014	Processed
2013	Jan 8, 2013	Processed
2012	Jan 4, 2012	Processed
2011	Jan 25, 2011	Processed
2010	Jan 12, 2010	Processed
2009	Jan 12, 2009	Processed
2008	Jun 2, 2008	Processed
2007	Apr 3, 2007	Processed
2006	May 1, 2006	Processed
2005	Apr 13, 2005	Processed
2004	Aug 30, 2004	Processed



2003	Apr 3, 2003	Processed
2002		Not Required
2001	Mar 15, 2002	Processed
2000		Processed
1999		Processed

## Officers

NAME	OFFICE	DATE
MAROCCO JAMES DWIGHT DR	P/D	Jan 1, 2014
MAROCCO JOSHUA	V/D	Jan 1, 2020
EDDY SHIRLEY	T/S/D	Jan 1, 2014
CUMMING, MAUDE L	CEO	Jan 1, 2023
OSTEMILLER, REGGIE	D	Jan 1, 2020
ARUDA, MANUEL	D	Jan 1, 2022
TORRES, CHARLOTTE	D	Jan 1, 2014

## Trade Names

NAME	TYPE	CATEGORY	REGISTRATION DATE	EXPIRATION DATE	STATUS
ALOHALIMA	Trade Name	NO CATEGORY SELECTED	Oct 23, 2001	Oct 22, 2002	Expired
ALOHALIMA	Trade Name	NO CATEGORY SELECTED	Feb 2, 2000	Feb 1, 2001	Expired
FAMILY LIFE COMMUNITY CENTER	Trade Name	NO CATEGORY SELECTED	Feb 3, 1997	Feb 2, 1998	Expired
HO'OLANANI	Trade Name	NO CATEGORY SELECTED	Feb 15, 2019	Feb 14, 2029	Active
HOUSE OF NEW LIFE	Trade Name	NO CATEGORY SELECTED	Feb 11, 2004	Feb 10, 2009	Cancelled
HO'OLANANI	Trade Name	NO CATEGORY SELECTED	Jun 2, 2008	Jun 1, 2018	Expired
MAUI RACQUETBALL CLUB & SPA	Trade Name	NO CATEGORY SELECTED	Feb 17, 1983	Feb 16, 1993	Expired
PEACE IN THE FAMILY PROGRAM	Trade Name	NO CATEGORY SELECTED	Apr 4, 1994	Apr 3, 2005	Expired



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:** FAMILY LIFE CENTER INC

**DBA/Trade Name:** FAMILY LIFE CENTER INC

**Issue Date:** 09/11/2024

**Status:** Compliant

Hawaii Tax#: [REDACTED]  
New Hawaii Tax#: T-[REDACTED]  
FEIN/SSN#: XX-XXX5042  
UI#: XXXXXX6409  
DCCA FILE#: 50149

Status of Compliance for this Vendor on issue date:

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

**Status Legend:**

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

## BFED Committee

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**From:** Janina E. Agapay <Janina.E.Agapay@co.maui.hi.us>  
**Sent:** Tuesday, April 22, 2025 11:02 AM  
**To:** BFED Committee  
**Cc:** Lesley J. Milner; loriann.tsuhako@co.maui.hi.us; Jessica C. Crouse; kimberly.ferguson@co.maui.hi.us  
**Subject:** (BFED-1)(HC-02 Addendum)  
**Attachments:** (BFED-1)(HC-02 Addendum).pdf

Hello,

Please see attached correspondence.

Thank you,

***Janina Agapay***

County of Maui | Budget Office

Phone: (808) 270-7836

Email: Janina.E.Agapay@co.maui.hi.us