Kūpuna Aging in Place
Funding Opportunity

Online Application Deadline: Friday, March 20, 2026, 4:00 p.m. HST

OVERVIEW
Theory of Change
The Kūpuna Aging in Place (KAP) Program supports organizations that provide a range of supportive services including community-based support services, adult day care & adult day health, and care partner support services for low- to moderate-income kūpuna (older adults) age 65 and older and their care partners so kūpuna in Hawaiʻi can age in place, for as long as it is in their best interest.

> **Focus:** To support organizations providing community-based support services, adult day care & adult day health, and care partner support for low- to moderate-income kūpuna age 65+ and their care partners, all with the goal that Hawaiʻi kūpuna can age in place.
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> **Grant Range:** Up to $80,000 per year for Community-Based Support Services or Tuition Assistance and up to $10,000 per year for Care Partner Support Services
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> **Grant Period:** July 2026 - June 2029

Background
Hawaiʻi's population is aging rapidly. There are an estimated 287,642 kūpuna over age 65 in Hawaiʻi, making up 21.5% of the total population in the state.[1] By 2035, one in four people in Hawaiʻi will be 65 or older, outpacing the national average.[2] Hawaiʻi continues to have the highest life expectancy in the nation at 80.7 years of age.[3]

Many kūpuna in Hawaiʻi rely on informal or family care partners. Nearly one quarter (23%) of Hawaiʻi adults are family care partners, representing 260,000 adults in Hawaiʻi who help loved ones live independently at home and in their communities. The value of this unpaid care totals $2.6 billion each year. About half of family care partners in Hawaiʻi and West Coast states report financial setbacks, 60% are juggling full- or part-time jobs, and 36% report moderate to high levels of emotional stress.[4]

The U.S. Centers for Disease Control and Prevention defines aging in place as "the ability to live in one's own home and community safely, independently, and comfortably, regardless of age, income, or ability level." Aging in place benefits kūpuna, their families, and entire communities. One of the key community characteristics that facilitates sustainable aging in place is "Community Supports & Services." These include the availability of health care, home and community-based support services for older adults and

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[1] Hawaiʻi Health Matters. 2025. "Demographics Dashboard."
https://www.hawaiihealthmatters.org/indicators/index/dashboard?alias=demographics.
[2] University of Hawaiʻi Economic Research Organization. 2024. "Aging and Hawaiʻi's Generational Economy."
https://files.hawaii.gov/dbedt/economic/reports/Hawaii_Generational_Economy_Dec2024.pdf.
[3] Hawaiʻi Department of Health Executive Office on Aging. 2023. "Hawaiʻi State Plan on Aging 2023-2027."
https://www.hawaiiship.org/blog/hawaii-state-plan-on-aging-2023-2027/.
[4] AARP. 2025. "Caregiving in the US 2025: Caring Across States."
https://www.aarp.org/content/dam/aarp/ppi/topics/ltss/family-caregiving/cgus-2025-caring-across-states/caregiving-in-the-us-2025-caring-across-states.doi.10.26419-2fppi.00383.001.pdf.

their care partners, healthy food, social integration, and participation in community life.[5] These services can empower kūpuna and maximize opportunities for them to live well and age in place safely, two overarching goals of Hawaiʻi's 2023-2027 State Plan on Aging.[6]

Hawaiʻi Community Foundation (HCF) has provided grants for elderly services for over 30 years through the Persons in Need (PIN) program, now known as the KAP program. Recognizing the rapid growth in the number of kūpuna and the dependence on care partners, in 2011, HCF adopted a focus for its aging grants to "strengthen the safety net of family and informal care giving services for older adults, with an emphasis on families and older adults of modest means."

Purpose

Through this Funding Opportunity, HCF seeks proposals from qualified 501(c)(3) organizations to provide:

1. **Community-based support services** for low- to moderate-income kūpuna age 65 or older provided in kūpuna's homes or at a center/facility.
2. **Tuition assistance** for low- to moderate-income kūpuna age 65 or older to attend licensed adult day care or adult day health programs.
3. **Care partner support services** including education, counseling, and support groups.

Timeline/Key Dates

Description	Date
Application Release	January 28, 2026
Virtual Office Hours/Q&A* *Click on your preferred date(s) to register.*	February 13, 2026, 12:30 PM– 2:00 PM March 5, 2026, 11:00 AM – 12:30 PM
Application Deadline	March 20, 2026
Anticipated Notification Time Frame	Late May – Early June 2026
Grant Start Date	July 1, 2026

ELIGIBILITY & REQUIREMENTS

1. Applicants must be nonprofit organizations with tax-exempt 501(c)(3) status and provide services in the State of Hawaiʻi, or be fiscally sponsored by an eligible nonprofit organization.
2. Applicants are required to provide case management services and utilize and monitor individual care plans that have specific client-centered goals for kūpuna. Components of individual care plans may include functional ability and mobility, fall prevention, nutrition, and socialization, among others. The plans should be continually assessed to evaluate the effectiveness of the services to meet kūpuna's needs.
3. Organizations must be in good standing with HCF. Organizations currently funded by HCF with overdue final reports are not eligible to apply.

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[5] AARP. "The 8 Domains of Livability: An Introduction." https://www.aarp.org/livable-communities/network-age-friendly-communities/info-2016/8-domains-of-livability-introduction.html; Stanford Center on Longevity and MetLife Mature Market Institute. 2013. "Liveable Community Indicators for Sustainable Aging in Place."http://162.144.124.243/~longevl0/wp-content/uploads/2017/01/mmi-livable-communities-study.pdf.

[6] Hawaiʻi Department of Health Executive Office on Aging. 2023. "Hawaiʻi State Plan on Aging 2023-2027." https://www.hawaiiship.org/blog/hawaii-state-plan-on-aging-2023-2027/.

4. Adult day care & adult day health programs must have a current license issued by the Hawaiʻi State Department of Health. These programs will be required to maintain an active license throughout the grant period and must provide a copy of the license to HCF upon renewal each year.

Grant Award & Requirements

Applicants may apply for KAP grants up to $240,000 for three years (up to $80,000 per year) for activities within the FY2027, FY2028, and FY2029 grant period (July 1, 2026 to June 30, 2029). Larger grants may be considered for applicants that can demonstrate reaching a greater number of kūpuna through multiple sites.

Awarded programs will:
- Receive notification of awards by June 2026 with a grant start date of July 1, 2026. Year one grant payments will be mailed upon the execution of a Grant Terms and Conditions Agreement.
- Be required to submit annual progress reports (see Reporting Template attached) and financial expenditure reports, and may be asked to participate in annual talk story sessions with HCF staff. Second- and third-year grant payments are contingent on receipt and approval of prior year's progress and expenditure reports. A final narrative and expenditure report must be submitted one month after the grant term ends to HCF.
- Be required to attend training and networking opportunities including grantee gatherings and other events. Training topics at grantee gatherings and events will be informed by grantee feedback and may focus on building organizational and program capacity, improving volunteer management, achieving financial sustainability, etc.
- Receive a site visit by HCF staff at least once during the grant term.

Award Categories

Applicants may apply for a grant under Category 1 or 2. If an applicant is also requesting funding for Care Partner Support Services, this request will be included in the same application (see Additional Questions section of the application).

Category 1. Community-based support services for low- to moderate-income kūpuna age 65 or older provided in kūpuna's homes or at a center/facility.
Eligible community-based support services for Category 1 include but are not limited to: household chores, personal care, activities to support physical health and socialization, transportation assistance, home safety, meal preparation, and meal delivery services. The use of volunteer-based models of service delivery to increase the availability and quality of services is encouraged.

Category 2. Tuition assistance for low- to moderate-income kūpuna age 65 or older to attend licensed adult day care or adult day health programs.
Only applications from licensed adult day care and adult day health programs will be considered for Category 2. Applicants must submit a current copy of their license from the Hawaiʻi State Department of Health. Preference will be given to Category 2 applicants that can demonstrate programming that responds to kūpuna and care partner needs.

Care partner support services

Applicants may apply for additional funds (up to $10,000 per year per organization) to provide care partner support services. Through the provision of community-based support services and adult day care & adult day health for kūpuna, care partners receive respite. Care partner support services including training or education, counseling, support groups, and other supplemental support services can positively impact the wellbeing of care partners and improve their ability to support kūpuna. All care partners are eligible to benefit from these services.

Evaluation Criteria

The strongest proposals are those that demonstrate the following criteria:

1. Demonstrates it has the experience to provide services and the capacity (staff, volunteers, board, etc.) to fulfill its service commitments and reporting requirements.
2. Understands the needs of the community it serves and provides services that are attuned to the needs of both kūpuna and their care partners within its community.
3. Clearly explains how the services contribute to the goal of aging in place.
4. Clearly articulates a well-defined procedure for client intake and determining financial eligibility.
5. Demonstrates it has a high-quality individual care plan and regularly revisits the care plans to ensure kūpuna's goals are met.
6. Partners with other organizations to ensure kūpuna receive a continuum of services.
7. Program budget is reasonable and appropriate and details other sources of funding.

APPLICATION PROCESS

Online Application

This application is available for online submission through the Hawaiʻi Community Foundation's Grants Portal. New users may register for an account here https://hawaiicf.smartsimple.com/s_Login.jsp. Registered users may log in to their account to submit an application. Please give yourself adequate time before the submission deadline to access the system and familiarize yourself with the application process and requirements. Please reference our Applicant User Guide for further instructions.

Instructions

- Only complete and timely applications will be accepted.
- The online application has fillable boxes with character limits. The character counts in MS Word may not match the character counts in the application. If you cut and paste your work into the application, please be sure your text fits the space provided.

ORGANIZATION PROFILE

As part of the online application your organization profile must be certified prior to submission of grant applications and must be certified every 6 months. Information needed to complete your organization's profile includes, but is not limited to, the following:

- IRS 501(c)(3) determination letter (not required if previously applied to the Foundation or if applying through a fiscal sponsor)
- Number of full-time, part-time, or regular volunteer staff
- Organization Mission
- Service Location(s)

- Types of services provided (including age, gender, and target populations served)
- Financial Statements
  - Annual Operating budget for current year
  - Income statement (or profit/loss statement) for the <u>most recently completed fiscal year</u>
  - Balance sheet for the <u>most recently completed fiscal year</u>
  - Audited financial statements are preferred but not required
  - Local units of national organizations must submit local unit financial information
- Board of Directors List
- If you are using a fiscal sponsor, please be sure that they complete their organization profile including the certification requirement prior to the Funding Opportunity Application Deadline.

APPLICATION

The application consists of four tabs. Information needed to complete your application includes, but is not limited to, the following:

- **Program Overview**:
  - Provide general information and characteristics about the program including program title, duration, program location(s), ages and genders served, and the CHANGE sector(s) your program most closely aligns with.
  - For more information about the CHANGE framework, please visit our website https://www.hawaiicommunityfoundation.org/change.
  - If you have a fiscal sponsor, you will be asked to identify your fiscal sponsor. Please note, your fiscal sponsor must first be registered in the Grants Portal prior to submitting your application.

- **Program Information**:
  - **Organization Description:** Describe the history and mission of the organization/program. Share about the organization's experience implementing this program, including staff/volunteer expertise. Share how you screen staff and volunteers to safeguard kūpuna. If applying under Category 2, provide the total number of participants the organization is licensed to serve and the current number of enrolled participants (by site if more than one site will be served). *(Maximum 2,500 characters = ¾ page)*
  - **Problem or Opportunity:** Provide data and information (with sources, to the extent possible) to describe the needs of kūpuna in the community/island your program serves. This may include, but is not limited to: number of kūpuna 65+ within your service area; percentage of those kūpuna who are low- to moderate-income; past program intake, utilization, or survey data; availability (or lack thereof) of other kūpuna services in the community, etc. *(Maximum 3,000 characters = ¾ page)*
  - **Program Activities:** Describe the program and how the provided services will meet the needs of kūpuna and contribute towards the goal of aging in place. Where will services be provided? Share how the program leverages volunteers (if applicable). Describe the formal intake process for kūpuna who are applying for KAP-funded services. Describe the process for determining "low- to moderate-income" status for clients (i.e., clearly explain what documentation is used to determine financial need). Explain how the program uses an individual care plan for kūpuna and how often the care plan is revisited. Describe how your program collaborates with other organizations to ensure kūpuna receive a continuum of services. If applying under Category 2, describe your strategy for how

tuition assistance is shared amongst eligible kūpuna. *(Maximum 3,500 characters = 1 page)*

- o **Expected Results:** Describe the impact your organization is seeking to achieve. Provide the projected number of kūpuna to be served by program year (FY2027, FY2028, and FY2029). Describe how you plan to evaluate your services and how this information will impact program improvement, including gathering feedback from kūpuna and care partners. *(Maximum 3,500 characters = 1 page)*
- o **Additional Questions**
    - ▪ **Care Partner Support Services (if applicable):** Describe the process for determining care partners' need for support. What are the major elements of the care partner support program? Provide the projected number of care partners to be served by program year (FY2027, FY2028, and FY2029). Describe how care partner feedback will be gathered to inform program improvement. *(Maximum 3,000 characters = ¾ page)*
    - ▪ **Kūpuna in Active Recovery (if applicable):** Does your program support kūpuna and/or care partners in active recovery from a disaster (e.g., Maui wildfires)? If so, please: 1) describe any special programming for kūpuna and/or care partners in active recovery; 2) provide an estimate of how many, and what percentage, of your clients have been directly impacted by the 2023 Maui wildfires; 3) and provide a list of partner organizations and describe how disaster-affected clients are referred to your organization. *(Maximum 2,500 characters = ¾ page)*

- **Budget**: Provide your total program budget and amount requested through this application. Upload the **KAP Program Budget Form**, including program expenses by Fiscal Year and income for Year 1.
    - o The KAP Program Budget Form is available in the Grants Portal Resources > Additional Documents and Templates section. This form must be completed and uploaded in PDF format. The program budget includes separate budgets for kūpuna services and care partner support services (if applicable).

    > **Note**: For adult day care & adult day health programs, while the funds will support tuition assistance, the program budget should include the organization's expenses that the grant funding will support (e.g., staff salaries, fringe benefits, supplies, transportation costs, etc.).

- **Supporting Documents & Certification**: Please upload these additional required documents as PDFs. If you are using a fiscal sponsor, please be sure that they certify your application prior to submission.
    - o **Individual Care Plan -** Template of your Individual Care Plan for kūpuna.
    - o **License -** Adult day care & Adult day health programs must upload the current license issued by the Hawaiʻi State Department of Health.

FISCAL SPONSORS
Please reference our External User Guide for more information regarding fiscal sponsorship.
- Fiscal sponsors must have an account in the portal. Their profile must include their IRS 501(c)(3) determination letter and up-to-date financial documents.

- Required Documentation to be uploaded to the application:
  - Resolution by fiscal sponsor's board of directors authorizing fiscal sponsorship
  - Fiscal sponsor's agreement form

  Both forms can be found at: http://www.hawaiicommunityfoundation.org/grants/fiscal-sponsor-materials
- Starting July 28, 2025, fiscal sponsors will be required to certify the application before it can be submitted by the applicant. To do so, the applicant must invite the fiscal sponsor to collaborate on the draft application. Please reference this video and our External User Guide on how to invite collaborators. The fiscal sponsor as a collaborator can then check the Fiscal Sponsor certification box under Supporting Documents & Certification.

CONTACT INFORMATION

If you have questions about this funding opportunity, please contact Malia Maier at mmaier@hcf-hawaii.org or phone at (808) 566-5588.

For technical assistance with the Grants Portal, please submit a support ticket.

Kūpuna Aging in Place 2026-2029
Reporting Template

Instructions: Please complete the two sections below and upload to the HCF Grants Portal.

Organization Name: _____

Outcome	Total Kūpuna	Total Projected	Total Served	Total Aging in Place*
	# of kūpuna served by the entire program during the year.	*Projected # of kūpuna to be served during the year (as provided in the grant application).*	*Actual # of kūpuna served during the year who were supported by the KAP program.*	*# of kūpuna supported by KAP who remained in their home at the end of the year.*
Year 1 (FY 2027)				
Year 2 (FY 2028)				
Year 3 (FY 2029)				

*Defined as "the ability to live in one's own home and community safely, independently, and comfortably, regardless of age, income, or ability level." (U.S. Centers for Disease Control and Prevention)

Testimonial/Story of Impact:

Qualitative stories provide insight into participant experiences that numbers alone cannot capture, and play an important role in communicating your program's value. Please provide either a story of impact or participant testimonial from the past grant year. If preferred, you may upload a video recording in lieu of a written story.