

Application Submittal Checklist

The following items are required for submittal of the grant application. Please verify and check off that the items have been included in the application packet.

- 1) Certificate of Good Standing (If the Applicant is an Organization)
- 2) Declaration Statement
- 3) Verify that grant shall be used for a public purpose
- 4) Background and Summary
- 5) Service Summary and Outcomes
- 6) Budget
 - a) Budget request by source of funds ([Link](#))
 - b) Personnel salaries and wages ([Link](#))
 - c) Equipment and motor vehicles ([Link](#))
 - d) Capital project details ([Link](#))
 - e) Government contracts, grants, and grants in aid ([Link](#))
- 7) Experience and Capability
- 8) Personnel: Project Organization and Staffing



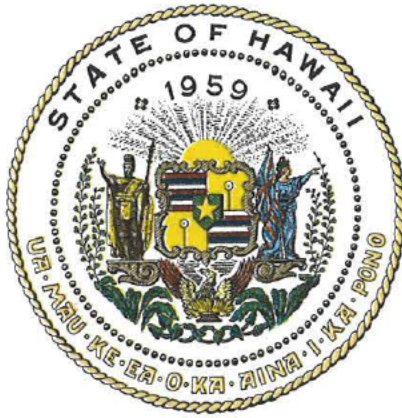
AUTHORIZED SIGNATURE

SUNNY CHEN, EXECUTIVE DIRECTOR

PRINT NAME AND TITLE

1/20/22

DATE



Department of Commerce and Consumer Affairs

CERTIFICATE OF GOOD STANDING

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

HEALTHY MOTHERS, HEALTHY BABIES COALITION OF HAWAII

was incorporated under the laws of Hawaii on 08/31/1992 ;
that it is an existing nonprofit corporation; and that,
as far as the records of this Department reveal, has complied
with all of the provisions of the Hawaii Nonprofit Corporations
Act, regulating domestic nonprofit corporations.

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

Dated: January 19, 2022

Director of Commerce and Consumer Affairs



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

The undersigned authorized representative of the applicant certifies the following:

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

- 2) If the applicant is an organization, the applicant meets the following requirements pursuant to Section 42F-103, Hawaii Revised Statutes:
 - a) Is incorporated under the laws of the State; and
 - b) Has bylaws or policies that describe the manner in which the activities or services for which a grant is awarded shall be conducted or provided.

- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawaii Revised Statutes:
 - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
 - b) Has a governing board whose members have no material conflict of interest and serve without compensation.

Pursuant to Section 42F-103, Hawaii Revised Statutes, for grants used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant was awarded and disposes of the land in fee simple or by lease, the organization shall negotiate with the expending agency for a lump sum or installment repayment to the State of the amount of the grant used for the acquisition of the land.

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

Healthy Mothers Healthy Babies Coalition of Hawaii

(Typed Name of Individual or Organization)


(Signature)

Sunny Chen

1/20/22
(Date)

Executive Director

(Typed Name)

(Title)

Application for Grants

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

I. Certification – Please attach immediately after cover page

1. Certificate of Good Standing (If the Applicant is an Organization)

Please see attached document from the Director of Consumer Affairs.

2. Declaration Statement

Healthy Mothers Healthy Babies Coalition of Hawaii affirms its compliance with Section 42F-103, Hawaii Revised Statutes.

3. Public Purpose

Healthy Mothers Healthy Babies Coalition of Hawaii (HMHB) will use this grant for a public purpose pursuant to Section 42F-102, Hawaii Revised Statutes.

II. Background and Summary

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

Healthy Mothers Healthy Babies Coalition of Hawaii (HMHB) was founded in 1992 and is a local nonprofit organization dedicated to improving Hawaii's maternal, child and family health through collaborative efforts in public education, advocacy and partner development. HMHB believes in a child's right to be born healthy and raised in a safe and nurturing environment. We strive to provide equal access to quality health care; eliminate health disparities; cultural competence and respect for diversity; and educate families to make healthy choices. HMHB's target population is socially high-risk pregnant and birthing people and newborns/infants with a focus on black, Native Hawaiian, indigenous, compact of free association (COFA) migrants and other people of color.

Over the past 29 years of service, HMHB has built strong partnerships with maternal and child health organizations, community leaders and stakeholders throughout the state, bolstering partnerships with providers, and establishing a reputation for quality programs and resources. HMHB actively collaborates with partners to convene the Perinatal Advocacy Network, Maternal Mortality Review and the Hawaii Maternal & Infant Health Collaborative, advocating for women's and reproductive health, and works with the Department of Health in distributing educational materials statewide to increase knowledge and quality of care. HMHB offers services statewide, with particular focus on increasing access to resources and information in low-income communities and other vulnerable populations.

HMHB is working towards improving the health and well-being of infants and pregnant/parenting people through a variety of initiatives to create timely interventions and access to health care. HMHB has an expert staff of an advanced family nurse practitioner, nurses, midwives, doulas, lactation consultants, a case manager and mental health therapists, who are certified to counsel on pregnancy, infant loss, birth trauma, perinatal mood disorders, anxiety, and depression.

2. The goals and objectives related to the request;

This GIA will allow HMHB to conduct clinical care with Mana Mama with wraparound social services and address increasing access to care. We will:

- Conduct at least 1200 clinical encounters
- Provide services/virtual support to at least 100 Piko Pals participants / Mental Health Therapy clients
- Provide services to at least 100 Doula/Childbirth Education clients
- Offer at least 126 Substance abuse Intensive Outpatient Program group therapy classes for mothers and women (classes offered 3 days per week for 42 weeks)
- Provide 24-hr, 7 days/week telehealth access to all pregnant/parenting families with infants statewide
- Provide safe sleep education classes and distribute at least 300 pack-n-plays to families that are 185% below the federal poverty level

HMHB aims to increase access to care for pregnant and parenting people of Hawai'i by fulfilling the following overarching goals: To improve the quality of healthcare before, during and after birth, reduce spending on non-beneficial medical procedures and avoid complications before, during and after pregnancy, increase collaboration with OB/GYN(s), Midwives, Pediatricians and other care providers, connect pregnant and new parents of Hawaii with appropriate community resources, capacity building: expansion of current HMHB services, skills, resources, and sites.

With our clinical encounters, HMHB strives to improve the health of the perinatal community in Hawai'i through collaborative programs, education, and outreach efforts to increase overall wellness of the mother-baby dyad by bridging the gap between health care and social services. Our services will increase access to pre and interconception care, increase access to comprehensive reproductive health services, increase family planning counseling, education, and other options, and improve mental health of mothers and provide greater access to mental health services. We will also work to decrease the number of pregnant people and their family / household members who use tobacco, increase the number of people covered by health insurance, participants will have access to appropriate midwifery reproductive, pre and interconception care and wrap-around social services including lactation and doula support, as applicable, participants will be screened according to need (i.e. depression, alcohol, substance and STI, interpersonal violence, etc.), participants will have access to mental health support, participants will have access to tobacco cessation services, and uninsured or underinsured participants will be offered health insurance enrollment.

3. The public purpose and need to be served;

As we transition into Hawaii's next recovery phase for our families post-pandemic, we consider where we stand as a state in maternal infant health. Between 2015-2017, 23% of maternal deaths occurred in Native Hawaiian Pacific Islander (NHPI) women. Black women are 3% of Hawaii's population, yet they account for the most preterm births (24% higher) and premature babies out of any group. NHPI women have parallel birth outcomes. According to Hawai'i Health Matters, NHPI mothers who received late or no prenatal care have steadily increased from 15.5% in 2013 to 34.7% in 2018. More data suggests that the infant mortality rate for NHPI was 60% greater than non-Hispanic whites in 2017. In the postpartum period, women experience a broad range of maternal morbidities that persist long after birth. According to the 2021 March of Dimes report, Hawai'i has one of the worst disparity ratios in the country, grading our state with a C and Honolulu county as a D. Overall, 20% of pregnant people experience inadequate prenatal care. Maternal morbidity/mortality trends indicate that preterm birth rates and complications related to perinatal and infant health are getting worse. The breastfeeding rates also reflect disparities where the initiation rate in Hawaii (89.6%) is higher than the national average (70%), but researchers have found that breastfeeding initiation for women of Native Hawaiian ancestry to fall between 34% - 64%, well below state and national rates. The benefits of breastfeeding have long standing evidence of better health outcomes for the mother baby dyad, but inequity issues, poor health outcomes and social determinants of high risk pregnant and birthing people further exacerbate the ability for the families to successfully do so. Additionally, 1 in 7 women suffer from postpartum depression but up to 50% of them are never detected. In the population of the pregnant and parenting people we serve at HMHB, the statistic is closer to 1 in 5. Incidences of depression are higher in women who may be experiencing poverty or high stress. We must intentionally address the systematic bias' that over time has resulted in Hawaii having the worst perinatal outcomes in the country.

Mana means powerful and strength in Hawaiian and many Polynesian cultures. Mana Mama's purpose is to create a strong foundation for birthing people and their babies through a nurse and midwifery led community care program, delivering quality maternal and reproductive healthcare (in-person or via our 24 hour telehealth platform), while wrapping families in social services. Mana Mama was envisioned to center the communities that have gone unseen, unheard and neglected due to the remnants of colonization, systemic racism and inequity that is found in every institution including healthcare. Mana Mama includes health services provided by a multidisciplinary team and systems approach. HMHB's Family Nurse Practitioner (FNP), Licensed Certified Professional Midwives (CPMs), International Board Certified Lactation Consultants (IBCLCs) and community doulas. The team of healthcare professionals collaborate with OBGYNs, Pediatricians, Primary Care Providers, and Certified Nurse Midwives offering support to women and their families outside the hospital setting with hands-on care before and after birth, by the same provider. In addition to providing prenatal and postnatal care, the HMHB clinical team provides holistic, respectful well-women care, during the preconception/interconception period of a person's childbearing years. High

quality care and unbiased information is available for teens, at-risk youth, uninsured or underinsured clients, their partners and other individuals that may be referred to the HMHB clinical team by other organizations or health care providers. We have built strong partnerships with maternal and child health community leaders and stakeholders throughout Hawai'i and have been continuously growing. When our partner agencies and providers cannot get to their patients, HMHB is able to be their extension and go directly to them for health and social services.

4. Describe the target population to be served; and

This project takes place in multiple underserved and marginalized areas including underserved and marginalized communities, such as Waianae, Waipahu, and Kalihi. HMHB's focus population and current clientele identify as (a majority identify as mixed race):

- Native Hawaiian (32.3%)
- Filipino (23.7%)
- Chinese (14.5%)
- Micronesian (5.2%)
- Marshallese (2.5%)
- Chuukese (6.4%)
- White (non hispanic) (28.9%)
- Hispanic or Latino (7.9%)
- Japanese (12.7%)
- Samoan (5.2%)
- American Indian (2.5%)
- Black (4.3%)

Native Hawaiians, the indigenous people of Hawai'i, and Pacific Islanders suffer from a number of poor health outcomes due to lack of access to health care, cultural stigmas, poor education, lack of transportation, and much more. Our programs are a direct response to structural and systemic factors exacerbating the inequities in the health of moms and babies. HMHB assists in ensuring that uninsured, underinsured and low-income women and their families have reliable access to health and social services. During the pandemic, many families struggled more than ever with inadequate reproductive/prenatal/postpartum care, faced insecurities with basic provisions such as food and housing, and now more than ever need all of the parenting, substance abuse and mental health support services they can get.

HMHB also assists to ensure that uninsured/underinsured/low-income women of childbearing age and their families have reliable access to not only health but also social services. Mana Mama answers the call to the challenges that we face in our maternal and infant health crisis: Access to care, continuity of care, and addresses social determinants of health. Barriers are addressed by providing affordable, evidence-based midwifery, doula and lactation services. During the pandemic, families struggled with getting adequate perinatal care, faced insecurities with basic provisions such as food and housing, and now more than ever need all of the parenting, substance abuse and mental health support services they can get.

5. Describe the geographic coverage.

Our services are available to serve anybody statewide through many of our services to include our Mana Mama 24-Hour Telehealth Access Platform via a computer, mobile phone and portable device. Our Mana Mama mobile clinic can provide home visits or go directly to the client anywhere on the island of Oahu or visits can also be conducted at our office located in downtown Honolulu.

HMHB collaborates with a number of other MCH organizations in Hawai'i that provide coordinated services to this population, while reducing duplication of efforts whenever possible. Our services act as an extension of our partner agencies who refer to us for additional services. We have statewide partners who we have memorandum of agreements with, who refer to HMHB for services. Some key partners include:

- AlohaCare
- Waianae Coast Comprehensive Health Center
- Waimanalo Health Center
- Catholic Charities Hawaii
- Parents and Children Together
- INPEACE
- Maui Family Support Services
- Hilo Bay Clinic
- Aloha Diaper Bank
- Leadership in Disabilities and Achievement of Hawaii
- Aloha United Way
- Pharmacare
- Residential Youth Services & Empowerment
- Kapiolani Medical Center
- Women, Infants, and Children Offices
- Gino Behavioral Health
- Family Promise of Hawaii
- Lanakila Pacific
- Kauai District Health Office
- Wilcox Medical Center

III. Service Summary and Outcomes

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

HMHB will provide reproductive health care clinical services that will maximize access, coordination, and provision of reproductive health services in a seamless continuum of care for pregnant and parenting families. Through community leadership and consultation, HMHB's clinical team provides services that include comprehensive family planning services such as contraception services, pregnancy testing and counseling, basic infertility services, preconception and interconception health care and sexually transmitted disease services. HMHB also offers prenatal care and education for pregnancy, labor, birth, postpartum, lactation, and well-baby care for the newborn. Additionally, primary care for the entire family is available. Monitoring, individualized

education and shared decision-making are based on evidence-based practices and informed choice. Our clinical care is complemented by our many social perinatal services and referrals to additional resources. By increasing client education while reducing barriers to accessing care, Mana Mama will not only reduce mortality, it will decrease morbidities related to preterm birth rates, reduce perinatal issues while addressing racially biased care, increase access to clinical care, improve perinatal mood disorder screenings, and increase breastfeeding rates.

The expected outcome of this product is to reduce racial/class health disparities and maternal morbidity/mortality in Hawaii by offering culturally appropriate and respectful care. HMHB offers broad support to women in at-risk and underserved communities. Such programs offer services tailored to the specific needs of the community at no or very low cost to women. We make prenatal, postpartum, reproductive health, and primary care home visits with clients. Other wrap-around services include lactation consults, safe sleep education, doula care and mental health support. Research shows that peer support improves well-being. Our evidence based peer-to-peer support groups include: Piko Pals New Parent Support Program, Intensive Outpatient Therapy, and Childbirth Education. All of our services initiate perinatal medical homes for clients, where we will be able to work with our partners and payers on innovative payment models that encompass social determinants to improve maternal-infant health. Mana Mama offers flexible scheduling, 24-hour access to telehealth that works in tandem with the mobile clinic and to further reduce barriers to accessing care. Especially during this time of need, having unlimited access to speak to a healthcare provider to meet the needs of parenting families and infants is critical. With the onset of the pandemic and explosion of better access to telehealth, it is imperative that we take steps toward addressing the significant telehealth disparities that have come to exist. Coupled with additional clinical care provided by our mobile team along with social services, HMHB is able to truly address access to care and service issues in the most vulnerable populations. Our goal is to be able to provide nurturing support, supply evidence based knowledge when applicable, increasing access to healthcare resources and decreasing overall healthcare costs to pregnant people, women and babies at any time of day.

Our new Mana Mama mobile clinic (MMMC) allows us to provide clinical services outside of a hospital or office setting. Anchored in our social services programs with long standing relationships within the community, HMHB is able to establish trust with clients and are able to serve them at home and in their community, eliminating any barriers to accessing services such as transportation, time, or childcare issues. It allows for our team to safely and properly assess social issues such as domestic violence which was greatly exacerbated during the pandemic. The MMMC is filling gaps in the community when maybe other community health center partners are unable to reach their clients. Not only are we able to support mother and baby, but we are able to extend those services to the entire family. HMHB is aware of the ever-changing situation amidst the COVID-19 pandemic and has been able to pivot services to provide the state with assistance in COVID-19 vaccines and testing rollouts, as well as flu vaccinations and other pediatric vaccinations, wherever the help is needed.

In addition to clinical care, we provide education, outreach, and our usual wrap-around social services: Hawaii Cribs for Kids, Piko Pals, Community Based Doula Program (CBDP), Mental Health Support & Substance Use Intensive Outpatient Program (IOP), Māna 'ai Food Distribution, and the ROSE Study, which most are part of national evidence-based prevention models.

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

Goals	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12
Conduct Clinical Encounters	100	100	100	100	100	100	100	100	100	100	100	100
Provide services/virtual support (Piko Pals/Mental Health Therapy)	8	8	8	8	8	8	8	8	9	9	9	9
Provide Substance Abuse IOP group therapy classes	10	10	10	10	10	10	11	11	11	11	11	11
Provide 24-Hr, 7 days/week telehealth access	Ongoing	Ongoing	Ongoing	Ongoing	Ongoing	Ongoing	Ongoing	Ongoing	Ongoing	Ongoing	Ongoing	Ongoing
Provide safe sleep education classes and distribute pack-n-plays to families that are income eligible	25	25	25	25	25	25	25	25	25	25	25	25

Month 13

- Final report on grant outcomes, successes, and areas and plans for improvement
- Continue services within long-term sustainability plans

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

Quality assurance, program supervision and monitoring is maintained at both the programmatic and agency levels, and HMHB staff is supported by the ED as the primary supervisor, as well as other leadership in their performance of duties. HMHB

will ensure that all employees working on this grant are fully qualified to perform their duties, and that they are supervised by an ED with a master's degree and relevant perinatal expertise. HMHB will also ensure that all applicable licensing and operating requirements specified in this proposal, and as required under federal, state and/or county laws, in addition to other generally accepted quality standards are complied within the course of this grant operation.

To assure the activities implemented meet project objectives, HMHB will produce evaluation updates using performance measures in each quarterly report. HMHB uses a HIPAA compliant secure platform called Apricot through Social Solutions to track clients' needs and follow-up on activity, referrals, and enrollment activities. To determine the effectiveness of specific programs, for example, C4K participants are surveyed at different stages over the course of a year covering knowledge of safe sleeping practices, retention and utilization of this information. Participants receive follow-up phone calls at three-months and between nine and twelve months and are asked about their safe sleep practices in order to measure knowledge retention and identify if the class was successful in creating behavioral changes (if caregivers continued to follow safe sleep practices). At three months and one year old, the health status of the baby is monitored to track the SUID/SIDS rates among participants and used to measure the effectiveness of the program in prevention efforts.

For Mana Mama clinical services, performance markers will follow the number of clients referred by the Community Health Centers and the number of clients retained by HMHB after coming into care. Breastfeeding initiation rates will be documented by our clinical team, community-based doula team and lactation consultants. Additional data is collected by our program staff on outcomes such as: Prevalence of cesarean section rates, infant prematurity rates, infant birth weights greater than 5lbs 8oz, and if there were any complications or interventions in labor.

To monitor postpartum depression, HMHB is part of the ROSE (Reach Out, Stay Strong, Essentials for mothers and newborns) Study, an evidence-based program for reducing cases of PPD among low-income and racially and ethnically diverse women. Participants remain in the project for a 2.5 year period and continue to receive training activities, surveys, and other research procedures. Performance indicators are reviewed by a team of academics and shared with partner organizations.

Perhaps the biggest impacts identified will be through our new partnerships established with local health plans. We have recently established a data sharing agreement with AlohaCare to directly track referrals of pregnant mothers with smoking/substance abuse, lack of prenatal and/or postpartum care compliance and perinatal mood and anxiety disorder screenings. The health and financial benefits will be calculated based on pregnancy and postpartum outcomes we track under each subcategory of health/social services provided to the clients. AlohaCare will internally track how our direct referral services have helped them meet their MEDQUEST pay for performance and HEDIS measures. Getting insurance plans to acknowledge the importance of addressing social determinants of health is key for making positive change. By

wrapping around our social services and utilizing a team-based approach to clinical care, Mana Mama can fill the gaps in care that our community is experiencing during the pandemic and beyond.

The pandemic has shone a light on the cracks in our maternal health care system. BIPOC communities were already experiencing health disparities and inequities due to systemic racism and implicit bias embedded in our healthcare system. The pandemic has exacerbated the impact on those who were already marginalized and vulnerable. Mana Mama aims to ensure that no one falls through the cracks of our already broken system by meeting the community where they are at and tending to their social and clinical needs. Our ethnically diverse, multi-talented team of providers and staff are from the communities we serve and truly embody the saying “for us, by us”.

- 4. List the measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency). The measure(s) will provide a standard and objective way for the State to assess the program's achievement or accomplishment. Please note that if the level of appropriation differs from the amount included in this application that the measure(s) of effectiveness will need to be updated and transmitted to the expending agency.**

HMHB has become increasingly more outcome-based and continues to build evaluation elements into its current strategic planning process, which establishes a Quality Assurance Plan for service delivery. Specific requirements include: Related changes to services, evaluations of training/improvements to service delivery, data collection and ensuring information is current with professional standards and guidelines. Evaluations, process discussions, and forms are integrated into all HMHB's various programs and are used to plan for and assess future events and initiatives. HMHB constantly looks at data (e.g. unintended pregnancies, preterm births and low birth weight, substance use during pregnancy, teen births and prenatal care during pregnancy) provided by Hawaii's Department of Health (DOH) and other state and federal agencies to obtain baseline information to help measure the need and potential impact on perinatal health. HMHB strives not only to gather and understand this data, but also to share it with other Perinatal Support Service providers to develop strategies to collaborate to address these complex issues. This data allows us to evaluate our impact on Maternal and Child Health outcomes in Hawaii while meeting the objectives outlined by Healthy People 2030.

In terms of assuring that the activities that are implemented meet output measures in the scope of services, HMHB will closely track the activities and process outcomes, and will include process evaluation updates using the performance measures in each quarterly report. HMHB uses a HIPAA compliant secure platform to clinically track clients. The system tracks clients' needs, follow up activity, referrals, and enrollment activities for non-insured clients. HMHB agrees to submit a summary of activities conducted and data collected as specified by the state, within the determined format. For our Mana Mama 24-hour

telehealth platform, HMHB will be able to track the number of clients that contact us and how many telehealth visits or calls are completed.

IV. Financial

Budget

- 1. The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.**
 - a. Budget request by source of funds (attached)
 - b. Personnel salaries and wages (attached)
 - c. Equipment and motor vehicles (attached)
 - d. Capital project details (attached)
 - e. Government contracts, grants, and grants in aid (attached)

- 2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2023.**

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$89,335	\$89,335	\$89,335	\$89,337	\$357,347

- 3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2023.**

Secured Funding Sources - \$657,238

- Department of Health - \$24,900
- Joseph & Vera Long Foundation - \$49,950
- Stupski Foundation - \$25,000
- Women’s Fund of Hawaii: Relief, Recovery, and Reimagining - \$23,000
- Direct Relief: Fund for Health Equity - \$250,000
- Office of Hawaiian Affairs: COVID-19 Response Grant - \$149,999
- AlohaCare: Early Recognition of Postpartum Depression Program - \$25,000
- AlohaCare: Access to Care Grant - \$74,279
- Aloha United Way: Safety Net Grant - \$35,000

Pending Funding Sources - \$10,000

- Women’s Fund of Hawaii Fall Grant - \$5,000
- Friends of Hawaii Charities - \$5,000

Anticipated Funding/Donations/Insurance Reimbursement \$204,920

- Anticipated Insurance Reimbursement - \$150,000
- Anticipated Donors/Board Contributions - \$10,000
- Anticipated Fundraising - \$44,920

4. **The applicant shall provide a listing of all state and federal tax credits it has been granted within the prior three years. Additionally, the applicant shall provide a listing of all state and federal tax credits they have applied for or anticipate applying for pertaining to any capital project, if applicable.**

Not Applicable

5. **The applicant shall provide a listing of all federal, state, and county government contracts, grants, and grants in aid it has been granted within the prior three years and will be receiving for fiscal year 2023 for program funding.**

Federal

- FY 2020: Mana'ai Food Distribution, \$463,467

Hawaii Department of Health Contracts

- FY 2021: Safe Sleep Education & Cribs Distribution, \$95,458
- FY 2021: Coordinator for Pregnancy and STD Prevention, \$29,913
- FY 2021: Statewide One Key Question Certification Training Coordinator, \$48,953
- FY 2021: Safe Sleep Education and Cribs, \$49,476
- FY 2020: Lead Poisoning Pregnancy Campaign, \$4,956
- FY 2020: Maternal Mortality Review Activities Manager, \$38,282
- FY 2020: Maternal and Child Health Partnerships Coordinator, \$48,685
- FY 2019: Maternal Mortality Review Activities Coordinator, \$45,250
- FY 2019: Women's Health One Key Question Coordinator, \$49,000
- FY 2019: Safe Sleep Education, \$14,500

City & County of Honolulu, Grant-In-Aid

- FY 2020-2021: Hawaii Cribs for Kids, \$104,762- Awarded but later CANCELED
- FY 2018-2019: Piko Pals New Parent Support, \$55,509

Hawaii State Grant-In-Aid

- FY 2019-2020: Hawaii Cribs for Kids, \$100,000

6. **The applicant shall provide the balance of its unrestricted current assets as of December 31, 2021.**

\$308,375.13

V. Experience and Capability

1. Necessary Skills and Experience

Operations are led by Executive Director, Sunny Chen, MBA, RN, IBCLC and the Mana Mama Clinical Director, Kari Wheeling, RN, MPH, MSN-FNP. Staff have relevant university degrees/experience in public health. Combined expertise includes: Certified FNPs, CPMs, Licensed Clinical Social Worker, Clinical Psychologist, Registered Nurse, IBCLCs, Certified Case Manager, and International Childbirth Educators.

HMHB has been known for facilitating community MCH workshops and extensive awareness of local resources and social services. Today, HMHB has evolved to provide direct clinical care in addition to supportive services. HMHB's grassroots outreach has benefited many individuals and families, especially during the onset of the pandemic. Our 2020 COVID-19 response focused on food insecurities and filling gaps in the perinatal community. We provided 35,574+ meals, 200 safe sleep classes and crib deliveries, 8000+ diapers, 3000+ PPE to birth workers, 700+ case management services, providing new parent support and tobacco cessation to 50+ families, 73 lactation consults, supported 68 clients with doula services, and in partnership with Catholic Charities Hawaii we assisted 250+ families with rental assistance. We understand that while experiencing a crisis, basic needs need to be met first. Now, HMHB is able to provide the necessities and provide direct healthcare as well, in order to help the household return to stability.

In addition to clinical care, we provide education, outreach and empower individuals to make informed perinatal decisions. In addition to Mana Mama clinical services, our core wrap-around social services include:

- **Hawaii Cribs for Kids (C4K):** Part of a national program, the first and only program of its kind in Hawaii, serving families, at 12 partner sites, on six islands since 2013. C4K is a safe sleep education course that provides education on the risk factors, how to create a safe sleep environment, and tracks the baby's health throughout its first year of life. The Period of PURPLE Crying®, a child abuse prevention program developed by the National Center on Shaken Baby Syndrome was also added into the program.
- **Piko Pals:** Affiliated with a nationally accredited 12-week new parent education & support program specifically designed for parents with babies 0-4 months old; serving families on Oahu since 2017. Parents learn skills and child development information, all while building social/emotional support and decreasing social isolation.
- **Community Based Doula Program (CBDP):** Having a doula can help you have a more positive birth experience and transition into parenthood. Our CBDP makes doula support accessible, designed to specifically help decrease disparities and improve outcomes for our communities of color in Hawaii.
- **Maternal Mental Health Support:** Serves as a referral source to onsite clinicians who specialize in maternal/women's mental health counseling for perinatal depression and anxiety, sexual trauma, loss, and grief support.

- **Māna 'ai:** Our food distribution program assists in ensuring low-income women in underserved communities continue to have reliable access to local nutritional food.
- **ROSE Study:** The ROSE Program (Reach Out, Stay Strong, Essentials for mothers of newborns) is an empirically-validated prevention intervention for postpartum depression. The ROSE Program has been cited in the new U.S. Preventive Services Task Force recommendation regarding the prevention of perinatal depression.
- **Substance Use Intensive Outpatient Program (IOP):** The Substance Abuse and Mental Health Service Administration (SAMHSA) states ~22.5 million Americans meet the criteria for addiction treatment. Everyone has their own set of unique care needs, to include an alternative to inpatient treatment. HMHB utilizes community partners to provide a trauma-informed outpatient option for women and mothers struggling with substance use. We ensure that barriers like childcare, rental assistance, basic provisions, case management and healthcare are addressed at the same time in one place.
- **Rent and Utility Relief Program (Oahu) and Maui Emergency Rent Assistance (Maui):** From 2020 to present, in partnership with Catholic Charities Hawaii, we continue to provide the community on the islands of Oahu and Maui to help households that are struggling because of the COVID-19 pandemic to pay their rent, utility bills, or both.

2. Facilities

HMHB leases two office spaces within the Kukui Center (located at 245 N. Kukui St. Suite 102A & 203 Honolulu, HI 96817) with a combined square footage of 2,855 sq feet which accommodates staff offices, food pantry/hot & cold meal storage, lounge/children's playroom, conference rooms for classes/group counseling sessions, client meetings, private offices for individual therapy sessions, medication/supply closet to restock our mobile clinic, and storage for approximately 200 cribs, diapers and breastfeeding/perinatal supplies and donations. Our Mana Mama Mobile Clinic (MMMC), is a 2017 Ford Transit extra long, extra tall vehicle that is completely retrofitted as a clinic on wheels, providing home visits and can go directly to the client anywhere on the island of Oahu if visits cannot be done via telehealth or in the office downtown.

The MMMC is air-conditioned and powered with two 175-watt solar panels on the roof that stores power within three 100-amp hour lithium ion batteries, with a 3000-watt inverter and battery isolator that charges the car while driving to provide off-grid power. The clinic features two separate client areas separated by a door, dry flush toilet for urine specimens, hand washing station with a 7-gallon tank for running water, vaccine refrigerator, ultrasound capabilities, infant scale, CPR/AED machine and all other necessary clinic supplies.

Prior to the pandemic we also hosted perinatal/safe sleep/new parent support group classes at well-established partner sites on each island.

VI. Personnel: Project Organization and Staffing

1. Proposed Staffing, Staff Qualifications, Supervision and Training

HMHB has ten full-time, two part-time staff members, one contracted licensed clinical social worker, eight involved board members and an army of volunteers (120 volunteers engaged last year) with ample maternal and child health experience and leadership skills, knowledge, skills and abilities necessary to successfully provide maternal and reproductive health outreach.

HMHB's volunteer Board of Directors governs/sets policies and takes responsibility for strategic planning and goals for the organization. The BOD supervises the executive director and ensures support for mission readiness and ensures long term sustainability.

The staff and board of HMHB reflects the incredible diversity of Hawaii in race, ethnicity and professional experience. All staff members have a relevant university degree and/or experience in public health including leadership skills, knowledge, and abilities necessary to successfully provide maternal and reproductive health outreach.

HMHB Executive Director (ED): The ED has a Master's degree in Business Administration and is a Registered Nurse as well as an International Board Certified Lactation Consultant, whose accountability objective is to provide oversight and management to the various programs of HMHB as it relates to the utilization of programs and quality improvement. The ED provides strategic planning, operational oversight, and financial/clinical integration to support and advance organizational goals and outcomes. The ED also establishes criteria to assure clients receive the most appropriate care in the most cost-effective setting. The ED will also ensure that all applicable licensing and operating requirements, required under federal, state and/or county laws, as well as other generally accepted quality standards are complied with in the course of this grant operation.

Director of Clinical Services: The Director of Clinical Services is a board certified licensed Family Nurse Practitioner. The director's primary objective is to provide guidance in the development and implementation of HMHB's utilization management (UM), and case management (CM) programs as the clinical arm of HMHB. This position provides overall leadership and oversight to the HMHB's clinical programs. This position strives to foster and maintain relationships with key community groups as well as state and federal entities to advance organizational initiatives, to improve the health and well-being of our clients. Kari is highly suitable to oversee the organization's community outreach endeavors as she has held HMHB leadership positions for almost 20 years as a Project Coordinator, Interim Executive Director and past Board President. Her drive, dedication and experience in maternal child health has been instrumental in the evolution of HMHB from a manager of public health programs to becoming the head of a clinical team providing direct healthcare services to people of Hawai'i.

Certified Professional Midwives (CPM): CPMs are Hawai'i licensed midwives whose accountability objective is to ensure coordinated delivery of high quality, cost-effective and integrated health care, as well as safe transitions of care to all HMHB clients;

facilitating oversight of delegated clinical utilization functions; and assures client and provider satisfaction with healthcare.

Certified Case Manager (CCM): CCM is a board certified case manager whose responsibilities include developing operational and administrative policies, procedures, standards and objectives for care management. In addition, this position acts as an interdepartmental liaison to ensure prompt resolution of healthcare management and utilization management, and social issues.

Program Managers: The Program Managers have the primary accountability objective to serve as the departmental resource for social services. They conduct quality improvement monitoring while acting as a liaison to ensure prompt resolution of internal programmatic processes and issues. The Program Manager conducts appropriate medical and utilization management to optimize client outcomes.

Licensed Clinical Social Worker (LCSW): The Licensed Clinical Social Workers' responsibilities include developing operational and administrative policies, procedures, standards and objectives for care management. In addition, this position acts as an interdepartmental liaison to ensure prompt resolution of behavioral health care to HMHB clients.

2. Organization Chart

Please see attached.

3. Compensation

Executive Director: \$85,000
Clinical Services Director: \$85,000
Program Director: \$75,000.00

VII. Other

1. Litigation

Healthy Mothers Healthy Babies Coalition of Hawaii affirms there is no pending litigation or any outstanding judgment to which we are a party.

2. Licensure or Accreditation

The following licenses/accreditations are held by HMHB and staff:

Combined expertise/licensure of staff members include: Board Certified Family Nurse Practitioner (FNP), Board Certified Professional Midwife, Licensed Clinical Social Worker (LCSW), Clinical Psychologist, Registered Nurse (RN), Board Certified

Lactation Consultant (IBCLC), Certified Case Manager (CCM), DONA Certified Doula, and International Childbirth Education Association (ICEA).

HMHB carries a Class II Clinical Laboratory Permit and is a certified Clinical Laboratory Improvements Amendment (CLIA) waived with a certificate for provider-performed microscopy procedures.

HMHB participates in the Vaccines for Children (VFC) Program and is accredited to be a vaccine provider for COVID-19 vaccines with the DOH Health Immunization Branch.

3. Private Educational Institutions

HMHB will not use this funding to support or benefit a sectarian or non-sectarian private educational institution.

4. Future Sustainability Plan

This past year with the launch of our MMMC, HMHB has secured new revenue generating sources by becoming credentialed providers and contracting with Hawaii's insurance payors such as AlohaCare, HMSA, HMAA, UHC, UHA, Ohana, and MEDQUEST; this allows many clinical encounters to be billed directly. In the future, as we secure our seat at the forefront of health equity, we aim to negotiate higher reimbursement rates for mid-level providers and uplift the next generation of midwives, lactation consultants, and doulas. Seeking reimbursement from health insurance companies by moving away from a fee for service model, but rather moving towards a managed care model that encompasses clinical care in addition to addressing the social determinants of health, is the key to sustainability for organizations like HMHB. We also anticipate that Hawai'i will soon follow many other states to work towards reimbursement of imperative community based services that we provide such as doula and lactation services. Billing insurance gives us the ability to increase our revenues to support our programs, but philanthropic support will always be necessary in order to truly address the social determinants in maternal and infant health issues. In a fee for service model, we cannot provide the level of care and services needed to the most highest need families of Hawaii.

We have also secured new philanthropic grants from major businesses such as Kaiser Foundation and HMSA Foundation. This program emerged at a critical time when Hawaii was experiencing the devastating impact of COVID-19 and pandemic related economic issues. HMHB is a model community-based organization quickly pivoting to prioritize the needs of the community and maximizing resources and partnerships. We will continue to pursue these new avenues in the future and be ready to pivot during the ever-changing landscape of our non-profit sector.


Additionally, through the MMMC, we have secured new partnerships to diversify our revenue sources. We were one of two organizations in the state of Hawai'i to secure the initial round of the Health Equity Fund from the philanthropist MacKenzie Scott in

partnership with Direct Relief International. We will continue to pursue new partnerships outside of the state and bring Hawai'i to the forefront of perinatal health in the country. We have also increased individual philanthropic contributions/fundraising efforts this past giving season by 300% which we intend to focus on growing in the future. We have also increased income through more state contracts with the DOH and anticipate more contract opportunities these next three years, due to our expansion into the clinical space.

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2022 to June 30, 2023

Applicant: Healthy Mothers Healthy Babies Coalition of Hawaii

BUDGET CATEGORIES	Total State Funds Requested (a)	Total Federal Funds Requested (b)	Total County Funds Requested (c)	Total Private/Other Funds Requested (d)
A. PERSONNEL COST				
1. Salaries	180,000	0	108,435	431,565
2. Payroll Taxes & Assessments	10,980	0	8,295	24,645
3. Fringe Benefits	34,560	0	13,999	89,681
TOTAL PERSONNEL COST	225,540	0	130,729	545,891
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island	0	0	0	0
2. Insurance	5,221	0	3,062	12,601
3. Lease/Rental of Equipment	0	0	0	0
4. Lease/Rental of Space	14,184	0	9,011	33,541
5. Staff Training	1,250	0	734	3,016
6. Supplies - Non-Clinical	1,500	0	294	4,206
7. Telecommunication	3,470	0	3,000	7,411
8. Utilities	0	0	0	0
9. Supplies - Clinical	36,868	0	28,199	82,404
10. Audit Services/Financial Review	1,750	0	1,026	4,224
11. Contractual Services - Administrative	6,480	0	4,000	15,440
12. Contractual Services - Subcontracts	5,419	0	4,000	12,256
13. Mileage	4,032	0	3,000	9,096
14. Postage, Freight & Delivery	500	0	300	1,200
15. Publication & Printing	2,000	0	2,000	4,000
16. Repair & Maintenance	500	0	400	1,100
17. Scheduling Software	25	0	20	55
18. Telehealth Platform/Database	1,500	0	1,000	3,500
19. Federally Approved Indirect Cost (10%)	31,024	0	9,096	83,976
20. Hawaii GET Tax (4.712%)	16,080	0	0	48,241
TOTAL OTHER CURRENT EXPENSES	131,803		69,142	326,267
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
TOTAL (A+B+C+D+E)	357,343	0	199,871	872,158
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	357,343	Vivian Choy (808) 452-1432		
(b) Total Federal Funds Requested	0	Name (Please type or print) Phone		
(c) Total County Funds Requested	199,871	 1/20/22		
(d) Total Private/Other Funds Requested	872,158	Signature of Authorized Official Date		
TOTAL BUDGET	1,429,371	Sunny Chen, Executive Director Name and Title (Please type or print)		

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2022 to June 30, 2023

Applicant: Healthy Mothers Healthy Babies Coalition of Hawaii

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Executive Director, RN, IBCLC	1	\$85,000.00	25.00%	\$ 21,250.00
Clinical Services Director, FNP	1	\$85,000.00	25.00%	\$ 21,250.00
Program Director, Certified Professional Midwife, IBCLC	1	\$75,000.00	25.00%	\$ 18,750.00
Program Director, Certified Professional Midwife	1	\$75,000.00	25.00%	\$ 18,750.00
Policy Director & Community Based Doula Coordinator, Midwife	1	\$75,000.00	25.00%	\$ 18,750.00
Director of Development & Telehealth, RN	1	\$75,000.00	25.00%	\$ 18,750.00
Community Nurse, RN	1	\$75,000.00	25.00%	\$ 18,750.00
Program Manager, CCM	1	\$50,000.00	25.00%	\$ 12,500.00
Program Manager	1	\$50,000.00	25.00%	\$ 12,500.00
Lactation Consultant, IBCLC	1	\$75,000.00	25.00%	\$ 18,750.00
Program Assistant	0.5	\$32,000.00	0.00%	\$ -
Program Assistant	0.5	\$32,000.00	0.00%	\$ -
				\$ -
				\$ -
TOTAL:				180,000.00
JUSTIFICATION/COMMENTS:				

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2022 to June 30, 2023

Applicant: Healthy Mothers Healthy Babies

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
NOT APPLICABLE			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				
JUSTIFICATION/COMMENTS:				

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

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2022 to June 30, 2023

Applicant: Healthy Mothers Healthy Babies Coalition of Hawaii

NOT APPLICABLE

FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OTHER SOURCES OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2020-2021	FY: 2021-2022	FY:2022-2023	FY:2022-2023	FY:2023-2024	FY:2024-2025
PLANS						
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT						
TOTAL:						
JUSTIFICATION/COMMENTS:						

GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID

Applicant: Healthy Mothers Healthy Babies Coalition of Hawaii

Contracts Total: 120,358

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S./State/Hawaii/ Honolulu/ Kauai/ Maui County)	CONTRACT VALUE
1	Hawaii Cribs for Kids	CANCELLED (FY20-21)	City & County	Honolulu	-
2	Safe Sleep Education & Cribs Distribution Grant	7/1/21-6/30/22	Department of Health	Hawaii	95,458
3	Reproductive & Family Planning Services for - under and uninsured clients on Oahu	7/1/21-6/30/22	Department of Health	Hawaii	24,900
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Healthy Mothers Healthy Babies Coalition of Hawaii

Organizational Chart 2022-2023

