

## Application Submittal Checklist

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

- 1) Hawaii Compliance Express Certificate (If the Applicant is an Organization)
- 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

LAURIE ARIAL TOCHIKI

PRINT NAME AND TITLE

1/17/2024

DATE





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:** EFFECTIVE PLANNING AND INNOVATIVE COMMUNICATION, INC.\* (EPIC)

**DBA/Trade Name:** EPIC `OHANA

**Issue Date:** 01/19/2024

**Status:** **Compliant**

Hawaii Tax#: [REDACTED]  
New Hawaii Tax#: [REDACTED]  
FEIN/SSN#: XX-XXX3370  
UI#: XXXXXX3264  
DCCA FILE#: 110858

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

## Application for Grants

*If any item is not applicable to the request, the applicant should enter “not applicable”.*

### **I. Certification – Please attach immediately after cover page**

#### **1. Hawaii Compliance Express Certificate (If the Applicant is an Organization)**

**If the applicant is an organization, the applicant shall submit one (1) copy of a Hawaii Compliance Express Certificate from the Comptroller of the Department of Accounting and General Services that is dated no earlier than December 1, 2023.**

Effective Planning and Innovative Communication, Inc., dba EPIC ‘Ohana, is an existing non-profit 501(c)3 corporation in the State of Hawai’i. Please see attached Hawaii Compliance Express Certificate.

#### **2. Declaration Statement**

**The applicant shall submit a declaration statement affirming its compliance with [Section 42F-103, Hawaii Revised Statutes](#).**

Effective Planning and Innovative Communication, Inc., dba EPIC ‘Ohana, hereby acknowledges and affirms that it is in compliance with the requirements, provisions, terms and conditions specified in [Section 42F-103, Hawaii Revised Statutes](#). Please see attached “Declaration of Applicants for Grants Pursuant to Chapter 42F, Hawai’i Revised Statutes”.

#### **3. Public Purpose**

**The applicant shall specify whether the grant will be used for a public purpose pursuant to Section 42F-102, Hawaii Revised Statutes.**

Pursuant to [Section 42F-102, Hawaii Revised Statutes](#), Effective Planning and Innovative Communication, Inc., dba EPIC ‘Ohana, will use this grant for the public purpose of providing peer support to mothers in the perinatal substance using (PSUD) population through the Makua Allies Program. The program utilizes a two-generation trauma reduction approach in that integrates an infant mental health peer support model into Child Welfare Service community-based service delivery and expands gender specific models of substance abuse treatment into the Department of Health Behavioral Health services.

### **II. Background and Summary**

**This section shall clearly and concisely summarize and highlight the contents of the request in such a way as to provide the State Legislature with a broad understanding of the request. Please include the following:**

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

Effective Planning and Innovative Communication, Inc., (EPIC 'Ohana or EPIC) is a nonprofit organization founded in 1998. Our mission is to strengthen 'ohana and enhance the welfare of children and youth through transformative processes that are respectful, collaborative and solution-oriented. Since 2015, EPIC 'Ohana has provided peer support through the Family Wrap Hawai'i program, in partnership with Families as Allies and then with Youth and Parent Partners. EPIC 'Ohana has Partnered with Child Welfare Services (CWS) to develop innovative and ground-breaking programs, our tradition for the past 21 years. Our services include 'Ohana Conferencing (Family Group Decision Making), Youth Circles, Family Finding, Family Wrap Hawai'i (Wraparound) and Youth Leadership (HI HOPES) and Makua Allies program.

EPIC 'Ohana is uniquely positioned to deliver the services required in this Demonstration Project. Since 1998, EPIC 'Ohana is honored to have developed and implemented several programs that bring the expertise of lived experience to the circle when serious family issues are present. In addition, EPIC 'Ohana serves as a convener and connector bringing together complex teams and groups of organizations and individuals to develop strengths-based, solution-focused and transformative solutions to systemic issues relating to children, youth and families.

In 2019, the Hawai'i Maternal and Infant Mental Health Collaborative of the Early Childhood Action Strategy (ECAS) formed a working group to address the unique needs of perinatal substance using (PSUD) women. The working group looked at alternative ways of expanding support and treatment to these moms and their babies. This effort resulted in the Makua Allies demonstration program. In partnership with The Association of Infant Mental Health (AIMH HI) EPIC 'Ohana is grateful to have participated in the development of the Makua Allies Program beginning before the commencement of the pilot project in 2021.

**2. The goals and objectives related to the request;**

The Makua Allies Program is designed to show the efficacy of a two-generation trauma reduction approach in order to integrate an infant mental health peer support model into Child Welfare Service community-based service delivery and to expand gender specific models of substance abuse treatment into the Department of Health Behavioral Health services. To this end we have been tracking initial outcomes of reduction of infant in entry foster care and parental attachment.

Our hypothesis, and hope, is that through the provision of peer-to-peer support and personalized support for infant attachment there will be an increase in women staying in substance abuse treatment and successfully completing their CWS service plan thus reducing the number of

infants placed in foster care. In addition, we hope to demonstrate that access to peer support at the time of birth decreases the trauma of birth removal for the mom and baby.

**3. The public purpose and need to be served;**

With funding support, we will be able to work collaboratively with the Department of Health and Human Services, ECAS, AIMH HI, CWS and other partners to establish the kind of collaborative system of care that will have a direct and positive impact on those babies and mothers affected by PSUD. By enhancing the health and wellbeing of both mother and baby, we can demonstrate positive outcomes such as stronger attachment for baby and mother, engagement in services and treatment for mother, and connection with both natural and formal supports.

Pregnant and recent mothers experiencing substance use disorder face a myriad of complicated challenges and obstacles to having a healthy parent-child relationship. Many families are unable to access critical health services, including mental health and substance use treatment, potentially increasing the risk of child welfare placement and prolonging the time their children spend in out-of-home care. Through intensive peer support and child development knowledge, Makua Allies seek to prevent the trauma of out of home placement by supporting sobriety and infant attachment.

This program builds upon the 2021 Makua Allies Pilot project in order to design and implement an effective peer support service for this unique population, and also to build the collaborative program and policy relationships that are necessary to address system fragmentation, as well as overlaps and gaps in the complex multi-agency system of care.

**4. Describe the target population to be served; and**

In Hawai'i, we have proximately 2000 substance exposed alcohol or illicit drugs infants born each year and less than 50 therapeutic beds where moms can stay with their infants during residential treatment. In addition, Hawai'i Child Welfare Services CWS data report substance use as the precipitating factor for 78% in the infants (n=189) placed in foster care in fiscal year 2018. The ECAS workgroup recognized that having so many infants in foster care without adequate treatment and support for their moms is a crisis that needs to be addressed. Many systems are involved in addressing perinatal substance use disorder: Family Court, Child Welfare Services (CWS), housing, corrections, domestic violence advocacy, and clinical care. These systems are highly fragmented and most do not have existing overlap to facilitate cross disciplinary case management.

**5. Describe the geographic coverage.**

Makua Allies Program is currently located in Hilo, Hawaii and Honolulu, Hawaii.

### **III. Service Summary and Outcomes**

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

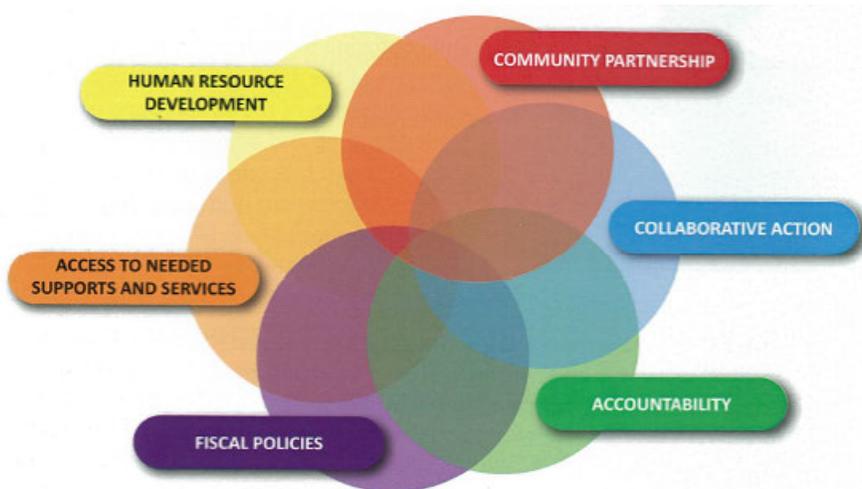
**1. Describe the scope of work, tasks and responsibilities;**

EPIC 'Ohana is committed to the development and implementation of a robust and effective Peer Support Program for PSUD mothers. We have seen the impact of this work in the short time that we have commenced the pilot project, and with the support of this contract, we will be able to work collaboratively with DOH, ECAS, AIMH HI, CWS and other partners to establish the kind of system transformation that will have a direct and positive impact on those babies and mothers affected by PSUD. By enhancing the health and wellbeing of both mother and baby, we can demonstrate positive outcomes such as stronger attachment for baby and mother, engagement in services and treatment for mother, and connection with both natural and formal supports.

This work involves two interconnected parts: Program and Policy Development, and Demonstration Project Implementation and Evaluation.

#### **Program and Policy Development Strategy**

Our Makua Allies Program is influenced by our work in high fidelity Wraparound. “The Wraparound Implementation Guide: A Handbook for Administrators and Managers” authored by Patricia Miles, Neil Brown and the National Wraparound Initiative Implementation Work Group in 2011, carefully outlines the themes of successful implementation strategy. This chart from page 14 of the Handbook illustrates the themes.



Specific Action steps and timeline in the strategy include:

1. Human Resource Development: EPIC 'Ohana partners with the Pū'ā Foundation in the development of Peer Support across systems. Pū'ā primarily works with formerly incarcerated peers, as well as those with SUD and/or mental health issues. Through a three-year grant from the Administration for Native Americans, 24 peers will receive a culturally based training, internships and certification through AMHD each year. This is a workforce development grant. EPIC's role is to convene a community of practice for employers of peer support including employers who work with formerly incarcerated individuals and individuals in the houseless community. Convenings will take place at least once a year including a large Mana Wāhine conference that is planned for January 2025, similar to the Mana Wāhine conference in January 2024 which more than 100 participants, more than 40 peers, organizations providing peer support in other states, state agencies, the judiciary, and employers.
2. Fiscal Policies: Engage with public and private health plans to develop protocols for coordinating peer support services with health plan case managers. EPIC will connect with other technical assistance providers who are researching and developing ways to integrate peer support services into health plan case management.
3. Collaborative Action: Meet with staff from Child Welfare Services (CWS) to identify requirements of child safety plans and identify potential role of PS in supporting child safety plans. EPIC Parent Partners are members of the CWS Lived Experience Advisory Group (LEAG) working on implementation of the Family First Prevention Services Plan. Developing and implementing the requirements of child safety plans is important for CWS to comply with federal law (CAPTA) and requires the collaborative work of CWS and health care providers, hospitals, and others. Makua Allies will convene and connect these partners, in collaboration with Makua Allies partners to develop and implement the plans and the role of PS in the implementation of the policy.
4. Accountability: MAP will coordinate with agency partners including ADAD, SUD providers, court, CWS and health plans and other community partners to develop shared key metrics for an evaluation plan.
  - a. MAP will utilize these shared key metrics to develop an evaluation plan, and seek the funding needed to complete a robust evaluation in years two and three, pending extension of this agreement.
  - b. MAP will continue to develop training materials for PS in alignment with needs of SUD treatment providers, courts and CWS staff. MAP will convene and connect discussions with key partners to provide presentations and trainings in the community.
  - c. MAP will develop a robust specialized training for Makua Allies including Infant Mental Health, Perinatal support, lactation support, domestic violence issues, mental health issues, motivational interviewing, Wellness Recovery Action Planning, and more.
5. Access to needed support and resources.

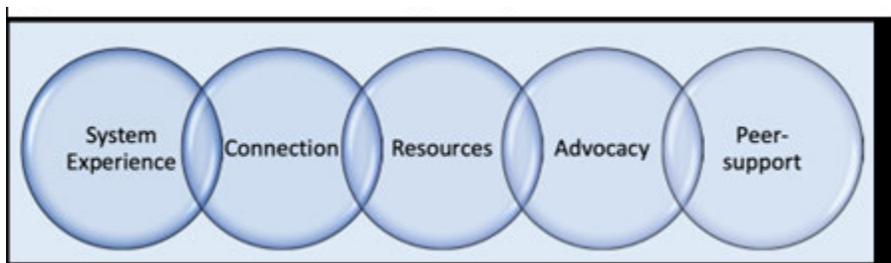
- a. PS actively work with EPIC staff, Wrap Navigators, and many community partners to build a network around each mother in order to provide the peer with the natural and concrete supports she needs. This includes housing, food, medical insurance, and other concrete supports. MAP will develop a services referral manual for PS to use with clients and begin to develop a web-based resource connecting resources and supports related to PSUD for the community.
- b. PS created a parent-to-parent guide to CWS called “Keep Showing Up” that is available in print and on the Parent Partner page of the EPIC 'Ohana website. PS will continue to distribute this resource guide and utilize the guide when making presentations. The video “Keep Showing Up” is available on the website, and also in CWS waiting rooms statewide. MAP will continue to use presentations and social media to distribute this resource and support.

### **Demonstration Project Implementation and Evaluation**

EPIC 'Ohana has developed a SCRAP model for peer support which is aligned with programs that have been designated as promising practices by the Child Welfare Clearinghouse. The SCRAP model, created by EPIC Parent Partner program, describes the element of peer support as: System Experience, Connection, Resources, Advocacy, and Peer Support. The Makua Allies provides one-on-one support, hope and inspiration, building positive connections and sharing their own lived experience when appropriate. One of our current Makua Allies describes her role as follows:

*“In my role I am able to use my experience in the system to relate and assist the parents I partner with them to navigate through it. I am able to connect with these parents, my peers, in a way that other providers usually aren't able to do. I have been without my children, homeless, addicted, incarcerated, and these common experiences, allow us to have a connection.”*

Peer Partner/Peer Support Specialist Role: SCRAP Model



What is SCRAP?

<b><u>S</u>ystem experience</b>	<ul style="list-style-type: none"> <li>➤ Lived-experience</li> <li>➤ Providing hope and inspiration</li> </ul>
<b><u>C</u>onnection</b>	<ul style="list-style-type: none"> <li>➤ Connect w/parent(s) through shared experience</li> <li>➤ Empathetic rapport</li> <li>➤ Facilitating connection between parents and providers</li> <li>➤ Connecting w/ team to optimally support family</li> <li>➤ Encouraging parent connection to natural supports</li> <li>➤ Connecting the dots (make sense of the why?)</li> </ul>
<b><u>R</u>esources</b>	<ul style="list-style-type: none"> <li>➤ Provides information and referrals to community services and resources</li> <li>➤ Work w/ team to support family in accessing resources</li> <li>➤ Be a resource (personal wealth of knowledge)</li> <li>➤ Help parent(s) prepare for and attend meetings that affect their</li> </ul>
<b><u>A</u>dvocacy</b>	<ul style="list-style-type: none"> <li>➤ Ensure parent (family) voice is heard, respected, and included in process of services</li> <li>➤ Helps parents navigate the system(s) and identify and articulate/ advocate what they need from services and providers</li> <li>➤ Can participate in special events, conferences, trainings, and workshops related to relevant Systems of Care (i.e., DOH/CAMHD; DHS/CWS; Juvenile Justice; trauma-informed care w/in systems; etc.)</li> <li>➤ Can provide information, training, and education on the parent perspective to outside organizations and government agencies</li> <li>➤ Final goal: The parent will become equipped and empowered to advocate for themselves</li> </ul>
<b><u>P</u>eer support</b>	<ul style="list-style-type: none"> <li>➤ Share insight and understanding about personal experience that could help parents be successful and help their efforts in supporting their child(ren)</li> <li>➤ Act as peer supporter for parents receiving who are involved with Child Welfare Services Family Wrap</li> <li>➤ Work intensively w/ parents to promote engagement and strengths-based problem solving</li> <li>➤ Support parents as peers with common background and history</li> <li>➤ Connect with parents via in-person, video chat, phone contact/visits</li> <li>➤ Build positive rapport with parents</li> <li>➤ Provide individual support for parents</li> <li>➤ Active listening</li> <li>➤ Encourage, motivate and support the parent(s) in recovery/receiving services</li> <li>➤ Encourage social inclusion, building community, and social capital</li> <li>➤ Follow up, follow up, follow up</li> </ul>

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

<b>Timeline of Activities</b>	
<b>First quarter</b>	
<b>Q1 Program and Policy Implementation</b>	<ul style="list-style-type: none"> <li>• Finalize program manual, policies, procedures and training manual, including referral, case closure, language access, supervision, etc.</li> <li>• Identify additional client recruitment locations, and build relationships with client recruitment sources</li> <li>• Develop MOUs with new recruitment locations</li> <li>• Establish referral sources, implement with MOUs and referral forms</li> <li>• Complete WRAP (Wellness Recovery Action Plan) training for participants for PS and select participants for train the trainer</li> <li>• Finalize additional outcome measurements and begin data collection</li> <li>• Finalize resource manual</li> <li>• Organize and host community of practice meetings</li> <li>• Maintain outreach to community partners, specialty courts and agency partners</li> </ul>
<b>Q1 Implementation Expansion</b>	<ul style="list-style-type: none"> <li>• Makua Allies provide services, recruit PS as necessary</li> <li>• Provide ongoing training and supervision for all PS</li> <li>• Provide ongoing reflective consultation and child development consultation regarding Infant Mental Health</li> <li>• Provide ongoing feedback and modification of program and training manual and resource manual, based upon lessons learned, and new resources established</li> <li>• Collect data collection and monitor outcomes</li> <li>• Build, maintain and supplement resource manual and partner relationships</li> </ul>

<p><b>Q1 Direct Service Activities</b></p>	<ul style="list-style-type: none"> <li>• Maintain average case load of up to 12 clients per MAP PS (targeting approximately 30/year)</li> <li>• Receive and process referrals</li> <li>• Conduct initial meetings and outreach, obtain consent and begin engagement</li> <li>• Accept and assign new cases</li> <li>• Assess needs of peers for resources such as housing, insurance eligibility, and other support issues</li> <li>• Identify partner agencies/resources and build networks of support for each peer</li> <li>• Start to build a circle of support around client</li> <li>• Set up plan for engagement, and establish regular communication and meetings</li> <li>• Provide crisis and emergency support including connection to resources for concrete supports</li> <li>• Work to stabilize prenatal needs of client</li> <li>• Assist with communication and connections during labor and delivery, and NICU or hospital stay</li> <li>• Establish safety plan for mother and infant</li> <li>• Connect mother with resources to support recovery</li> <li>• Assist with supporting parent infant attachment and infant mental health</li> </ul>
<p><b>Q2 Program and Policy Implementation</b></p>	<ul style="list-style-type: none"> <li>• Review program manual, policies, procedures and training Manual, including referral, case closure, language access, supervision, etc. in quarterly staff meeting to make additions, corrections and revisions</li> <li>• Strengthen relationships with client recruitment sources</li> <li>• Establish MOUs with new recruitment locations as needed</li> <li>• Continue WRAP (Wellness Recovery Action Plan) training for participants for PS and select participants for train the trainer</li> <li>• Conduct one Better Together training on O'ahu or another island</li> <li>• Review, update resource manual on a regular basis</li> <li>• Organize and host community of practice meetings</li> <li>• Maintain outreach to community partners, specialty courts and agency partners</li> </ul>

<p><b>Q2 Implementation Expansion</b></p>	<ul style="list-style-type: none"> <li>• Develop case closure and “tiered” service provision based upon engagement in treatment, incarceration, or case closure with child welfare services.</li> <li>• Recruit PS as necessary</li> <li>• Provide ongoing training and supervision for all PS</li> <li>• Provide ongoing reflective consultation and child development consultation regarding Infant Mental Health</li> <li>• Provide ongoing feedback and modification of program and training manual and resource manual, based upon lessons learned, and new resources established</li> <li>• Collect data collection and monitor outcomes</li> <li>• Assess needs of peers for resources such as housing, insurance eligibility, and other life support issues, provide resources and build networks of support for each peer and build, maintain and supplement resource manual</li> <li>• Participate in Reflective consultation and train the trainer with AIMH HI leading to a minimum of one IMH Endorsed<sup>®</sup> peer on staff at EPIC</li> </ul>
<p><b>Q2 Direct Service Activities</b></p>	<ul style="list-style-type: none"> <li>• Maintain average case load of up to 12 clients per MAP PS (targeting approximately 30/year)</li> <li>• Receive and process referrals</li> <li>• Conduct initial meetings and outreach, obtain consent and begin engagement</li> <li>• Accept and assign new cases</li> <li>• Assess needs of peers for resources such as housing, insurance eligibility, and other support issues</li> <li>• Identify partner agencies/resources and build networks of support for each peer</li> <li>• Start to build a circle of support around client</li> <li>• Set up plan for engagement, and establish regular communication and meetings</li> <li>• Provide crisis and emergency support including connection to resources for concrete supports</li> <li>• Work to stabilize prenatal needs of client</li> <li>• Assist with communication and connections during labor and delivery, and NICU or hospital stay</li> <li>• Establish safety plan for mother and infant</li> <li>• Connect mother with resources to support recovery</li> <li>• Assist with supporting parent infant attachment and infant mental health</li> </ul>

<p><b>Q3 Program and Policy Implementation</b></p>	<ul style="list-style-type: none"> <li>• Participate in the Mana Wāhine conference</li> <li>• Review program manual, policies, procedures and training Manual, including referral, case closure, language access, supervision, etc. in quarterly staff meeting to make additions, corrections and revisions</li> <li>• Continue Initial Infant Mental Health competency training</li> <li>• Strengthen relationships with client recruitment sources</li> <li>• Establish MOUs with new recruitment locations as needed</li> <li>• Continue WRAP (Wellness Recovery Action Plan) training for participants for PS and select participants for train the trainer</li> <li>• Conduct one Better Together training on O’ahu or another island</li> <li>• Review, update resource manual on a regular basis</li> <li>• Organize and host community of practice meetings</li> <li>• Maintain outreach to community partners, specialty courts and agency partners</li> </ul>
<p><b>Q3 Implementation Expansion</b></p>	<ul style="list-style-type: none"> <li>• Develop case closure and “tiered” service provision based upon engagement in treatment, incarceration, or case closure with child welfare services.</li> <li>• Recruit PS as necessary</li> <li>• Provide ongoing training and supervision for all PS</li> <li>• Provide ongoing reflective consultation and child development consultation regarding Infant Mental Health</li> <li>• Provide ongoing feedback and modification of program and training manual and resource manual, based upon lessons learned, and new resources established</li> <li>• Collect data collection and monitor outcomes</li> <li>• Assess needs of peers for resources such as housing, insurance eligibility, and other life support issues, provide resources and build networks of support for each peer and build, maintain and supplement resource manual.</li> <li>• Participate in Reflective consultation and train the trainer with AIMH HI leading to a minimum of one IMH Endorsed® peer on staff at EPIC</li> </ul>

<p><b>Q3 Direct Service Activities</b></p>	<ul style="list-style-type: none"> <li>• Maintain average case load of up to 12 clients per MAP PS (targeting approximately 30/year)</li> <li>• Receive and process referrals</li> <li>• Conduct initial meetings and outreach, obtain consent and begin engagement</li> <li>• Accept and assign new cases</li> <li>• Assess needs of peers for resources such as housing, insurance eligibility, and other support issues</li> <li>• Identify partner agencies/resources and build networks of support for each peer</li> <li>• Start to build a circle of support around client</li> <li>• Set up plan for engagement, and establish regular communication and meetings</li> <li>• Provide crisis and emergency support including connection to resources for concrete supports</li> <li>• Work to stabilize prenatal needs of client</li> <li>• Assist with communication and connections during labor and delivery, and NICU or hospital stay</li> <li>• Establish safety plan for mother and infant</li> <li>• Connect mother with resources to support recovery</li> <li>• Assist with supporting parent infant attachment and infant mental health</li> </ul>
<p><b>Q4 Program and Policy Implementation</b></p>	<ul style="list-style-type: none"> <li>• Final Revised Project and Training manual completed</li> <li>• Referral manual completed with plans beginning for web-based platform for referral sources.</li> <li>• Continue Initial Infant Mental Health competency training</li> <li>• Strengthen relationships with client recruitment sources</li> <li>• Establish MOUs with new recruitment locations as needed</li> <li>• Continue WRAP (Wellness Recovery Action Plan) training for participants for PS and select participants for train the trainer</li> <li>• Conduct one Better Together training on O'ahu or another island</li> <li>• Review, update resource manual on a regular basis</li> <li>• Organize and host community of practice meetings</li> <li>• Maintain outreach to community partners, specialty courts and agency partners</li> </ul>

<p><b>Q4 Implementation Expansion</b></p>	<ul style="list-style-type: none"> <li>• Refine case closure and “tiered” service provision based upon engagement in treatment, incarceration, or case closure with child welfare services, so that the target number of clients served in a year is approached.</li> <li>• Recruit PS as necessary</li> <li>• Provide ongoing training and supervision for all PS</li> <li>• Provide ongoing reflective consultation and child development consultation regarding Infant Mental Health</li> <li>• Provide ongoing feedback and modification of program and training manual and resource manual, based upon lessons learned, and new resources established</li> <li>• Collect data and monitor outcomes</li> <li>• Assess needs of peers for resources such as housing, insurance eligibility, and other life support issues, provide resources and build networks of support for each peer and build, maintain and supplement resource manual.</li> <li>• Participate in Reflective consultation and train the trainer with AIMH HI leading to a minimum of one IMH Endorsed<sup>®</sup> peer on staff at EPIC</li> </ul>
<p><b>Q4 Direct Service Activities</b></p>	<ul style="list-style-type: none"> <li>• Maintain average case load of up to 12 clients per MAP PS (targeting approximately 30/year)</li> <li>• Receive and process referrals</li> <li>• Conduct initial meetings and outreach, obtain consent and begin engagement</li> <li>• Accept and assign new cases</li> <li>• Assess needs of peers for resources such as housing, insurance eligibility, and other support issues</li> <li>• Identify partner agencies/resources and build networks of support for each peer</li> <li>• Start to build a circle of support around client</li> <li>• Set up plan for engagement, and establish regular communication and meetings</li> <li>• Provide crisis and emergency support including connection to resources for concrete supports</li> <li>• Work to stabilize prenatal needs of client</li> <li>• Assist with communication and connections during labor and delivery, and NICU or hospital stay</li> <li>• Establish safety plan for mother and infant</li> <li>• Connect mother with resources to support recovery</li> <li>• Assist with supporting parent infant attachment and infant mental health</li> </ul>

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

We have the capacity to provide quality assurance, evaluation, and monitoring of project activities, objectives, and fiscal administration to ensure compliance with all contract requirements.

EPIC staff are thoroughly trained so that they can immediately begin to provide the highest quality of service to meet project goals. Ongoing and continual supervision and training are an integral part of the organization and culture of EPIC 'Ohana.

When an employee is hired, he or she participates in a two-week orientation process. Each employee is given a copy of the EPIC 'Ohana Employee Handbook. New employees spend time observing all programs so that they understand all of the parts of the organization. Each employee also receives initial training on the database and network computer system. The handbook contains our requirements as a drug free work environment, etc.

The training process is intensive, organized, and complete. Professional development and evaluation is a continual process at EPIC. Work quality and effectiveness are reviewed weekly, monthly, and annually. When deficiencies are found, corrective action will be taken and progress monitored.

The training for Parent Peer Support/Makua Allies is specialized, intensive and ongoing. In addition to the training in IMH Competencies, Reflective Consultation, and Peer Support certification training provided through Pū'ā and AMHD, we will provide Wellness Recovery Action Plan training.

EPIC is deeply rooted in a work ethic that fosters streamlined service delivery, heartfelt engagement, and outcome-oriented planning. In every interaction with its partners, EPIC 'Ohana firmly believes respectful communication and innovative collaboration are essential components, and EPIC 'Ohana applies the same values of engagement with our staff as we do with families, youth, and partners.

EPIC strives to manage each facet of the process with the highest integrity, for the greater good of the families and the young people we work with, but also to put for the our very best efforts so we can create an inviting venue for partnership and the articulation of shared goals.

EPIC's Leadership Team includes a well-rounded representation that includes Executive Managers, Program Managers, Supervisors, and designated administrative staff. This team works to ensure fluid operational functionality through fair allocation of resources, diversifying projects through collaboration, and focusing on quality improvements across the organization.

As a means to strive for the above performance excellence, EPIC's programs adhere to structured regimens of supervision, training, and mentoring. Self-appraisals are also incorporated at varying levels — between staff and supervisor, and between supervisor and management team. Aligned with the principles that encompasses 'Ohana Conferences, EPIC practices a strengths-based, solution-focused approach to nurture an organizational culture of creative collaboration, unified direction, shared successes, as well as workplace satisfaction.

EPIC 'Ohana's financial systems are managed by EPIC's financial manager and controller, under the supervision of the Executive Director and advice of the Board of Directors and the Treasurer of the Board of Directors. EPIC's fiscal policies and procedures provide sound management and reporting. We utilize MIP's accounting software system. All of our practices follow Generally Accepted Account Principles (GAAP). EPIC is subject to an audit each year, and has been found to utilize sound accounting practices.

- 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.**

EPIC will implement peer support services for a target of 30 clients annually. Currently each FTE holds an active case load of up to 12 clients at any time. During the initial pilot, and as we are developing the program, most clients stayed in the program for a full year or more. We are developing “tiers” of active and inactive clients in order to better manage the case load. For instance, if a client is in active residential SUD treatment, they would be placed in an “inactive” clients category because the day-to-day contact with the PS will be decreased. MAP assist in transitioning mothers with child welfare involvement into other EPIC programs. Another “tier” of service includes clients who do not need full support and can be assisted with a Safe Family Plan and the provision of resources.

We have learned that our PS work best when at least 10 hours of their time each week is spent on supervision, training, and outreach. PS often face their own issues of recovery and trauma, thus the need for supportive supervision throughout. Our PS have significant ability to impact systems and collaboration through their stories and their lived expertise.

Assess client needs and provide peer support on issues such as SUD treatment options, meeting court requirements, meeting CWS requirements, housing, insurance eligibility, and other needs, for each client.

For each client, EPIC will assess needs and provide peer support on issues such as SUD treatment options, meeting court requirements, meeting CWS requirements, housing, insurance

eligibility, and other needs. Working with our Family Wrap Hawai'i program, Makua Allies will connect mothers with housing, treatment, and other formal and informal supports.

The Makua Allies will connect with clients from our target population - pregnant and parenting women with SUD, including those who have completed SUD treatment and who are still in treatment - via partner organizations outreach and referral. The Role of the Makua Allies is described in EPIC 'Ohana's SCRAP model, emphasizing: System experience, Connection, Resources, Advocacy, and Peer support. The Makua Allies provide one-on-one support, hope and inspiration, building positive connections and sharing their own lived experience when appropriate.

EPIC in partnership with ADAD produced a video and related written materials called "Keep Showing Up" to provide parent view of navigating the child welfare services. The video is now streaming in every Child Welfare Services waiting room including offices in Hilo and Kona. The brochure will be shared with all clients.

The Makua Allies will work to connect each parent with formal and informal supports so that a network of support is built around the client. Funding for concrete supports and Flex funds to provide welcome kits, food, and other assistance will come from private funding. Assistance with transportation and child care is also important and can make a difference in encouraging and sustaining engagement.

*Our Hilo Makua Ally said the most important part of being a Makua Ally is "to use my story to help ather woman who has similar experiences so she won't feel so alone. I*

Connecting families to resources in the community is paramount to continued self-efficacy and day-to-day healthy living. Makua Allies play a key role in modeling for the family creative ways to identify resources, to connect with providers, and stay engaged with services. This often includes accompanying parent(s) to gather applications, helping them ask necessary questions, and walking them through the process of applying. Makua Allies also assist by modeling and teaching families what it means to advocate for self with aloha and respectful determination, to be unafraid to inquire and ask questions. This supports self-sufficiency well beyond the Makua Allies timeframe of service. All EPIC team members are constantly looking out for new resources and strive to stay updated with the changes that affect community resources.

Through our work at EPIC, we are building strong partnerships with community agencies who, when they are able, are open to fostering fast-tracked services and added supports that complement the needs of the family. Some examples of the many partnerships that Makua Allies have been able to forge include: Kapi'olani Medical Center for Women and Children, Waikīkī Health's PATH Clinic, Project Vision, Hilo's Big Island Substance Abuse Council services (BISAC), housing agencies Partners in Care and Bridging the Gap, Hawai'i Foodbank, court specialty programs such as Drug Court and Zero to Three, and so much more.

The focus of Makua Allies community connections are centered in the following areas of support:

- Prenatal Medical Support
- Transportation to and from perinatal visits and other services
- Substance Use Treatment
- Navigating Clinic/Hospital
- New Parent Support Group
- Lactation Support
- Post-natal Medical Support
- Domestic Violence Support
- Navigating CWS
- Recovery Support
- Childcare support
- Other Community Resources

Natural Supports, identified as anyone parents can call on for long-term support beyond the timeline of their formal services, albeit friend, family, neighbors, members of the community, etc. For many families, identifying one or more natural supports can be challenging as it means opening up about their struggles and asking others for help. Important transformations occur when natural supports become part of the parent's journey. It often demonstrates a movement past initial shame and the discomfort of being vulnerable. It shines light on the trust being built and the idea that asking for and accepting help is an incredible strength to be honored.

Makua Allies strive to identify at least one Natural Support for each family. This identified support may change over time, however, it provides a much needed, healthy support that is important in the family's ability to thrive.

Immediately upon commencement of engagement with a peer, the Makua Ally begins to weave together the network of individuals, services, and resources the peer needs.

Collect data and monitor outcomes for SUD treatment participation, CSW plan completion, and child removal/return. Submit quarterly reports on progress and a final report with lessons learned and recommendations for PS projects for PPW

EPIC will collect data and monitor outcomes for substance use disorder treatment participation, child welfare services plan completion and child removal and/or return. We will measure and track the following outcomes for mothers engage in the Makua Allies program:

- Connection to community resources both formal and informal
- Connection to parenting support
- Connection to behavioral health support, in need
- CWS case avoidance or closure
- If CWS case continues, connection to the EPIC services
- Sustained recovery

Reports, Data, and Evaluation Requirements

EPIC will submit quarterly reports as well as a final report with lessons learned and recommendations for PS projects. Each report will detail the number of clients, categorize the general needs and referrals provided, and track outcomes for SUD treatment participation, CSW plan completion, and child removal/return.

**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.** Please see attached pg. 6 “Budget Request by Source of Funds.”
  - b. **Personnel salaries and wages.** Please see attached pg. 7 “Salaries and Wages.”
  - c. **Equipment and motor vehicles.** Not Applicable
  - d. **Capital project details.** Not Applicable
  - e. **Government contracts, grants, and grants in aid.** Please see attached pg. 10 “Government contracts, grants, and grants in aid.”
2. **The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2025.**

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$90,560	\$90,560	\$90,560	\$90,565	\$362,245

3. **The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2025.**

We are seeking continued funding from Liliuokalani Trust and Association for Infant Mental Health Hawaii.

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.**

We received Federal tax credits allowed by the Families First Coronavirus Response Act (FFRCRA) and the Coronavirus Aid, Relief and Economic Security Act (CARES) and the

American Rescue Plan Act (ARPA). The credit is a combined amount for employee paid sick leave, paid family leave, employer medical and social security tax, health plan expenses, qualified wage retention and cobra premiums. The credits totaling \$6,606.65 were received through payroll which was processed by ADP, the payroll service vendor from June to September 2021.

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 2025 for program funding.**

Please see attached.

6. **The applicant shall provide the balance of its unrestricted current assets as of December 31, 2023.**

The balance of unrestricted current assets for the Makua Allies program is zero.

## **V. Experience and Capability**

1. **Necessary Skills and Experience.**

**The applicant shall demonstrate that it has the necessary skills, abilities, knowledge of, and experience relating to the request. State your experience and appropriateness for providing the service proposed in this application. The applicant shall also provide a listing of verifiable experience of related projects or contracts for the most recent three years that are pertinent to the request.**

### **A. Skills.**

We have a thorough understanding of the purpose and scope of peer support for Pregnant and Parenting Women (PPW), as well as the necessary knowledge, skills, abilities, and experience relating to the delivery of the proposed services.

EPIC 'Ohana is grateful to have participated in the development of the Makua Allies Program beginning before the commencement of the pilot project in 2021. EPIC has been providing peer support through the Family Wrap Hawai'i program since 2015, first in partnership with Families as Allies and then with Youth and Parent Partners on EPIC staff. Partnering with CWS to develop innovating and ground-breaking programs has been our tradition for the past 21 years. Together with the Department of Human Services, EPIC 'Ohana has piloted, developed and refined 'Ohana Conferencing, Youth Circles, Family Finding, and 'Ohana Connections and Family Wrap Hawai'i.

EPIC 'Ohana has carefully constructed an infrastructure of people, systems, and processes that provide the state with high quality family and youth engagement. On their behalf, we will be working with all MAP participants in a way that supports not “DHS children” or “DOE children” or “DOH children” but OUR children.

Effective Planning and Innovative Communication, Inc. (EPIC 'Ohana or EPIC) is a nonprofit organization founded in 1998. Our services include 'Ohana Conferencing (family group decision making), Youth Circles, Family Finding, Family Wrap Hawai'i (Wraparound) and youth leadership (HI HOPES Youth Leadership Board). Our mission statement is as follows: EPIC 'Ohana works to strengthen 'ohana and enhance the welfare of children and youth through transformative processes that are respectful, collaborative and solution-oriented.

Since 2015 our Wraparound program has included peer support for youth and parents. Since 2020 we have employed parent peer support as staff, bringing the voice of lived experience not only to our families, but also to the professionals and leaders in the child welfare system. EPIC 'Ohana is the backbone organization of a network called Nā Kama a Hāloa which aims to provide strong relational permanency for all native Hawaiian children touched by the child welfare system. One of the hui of the network is the Hui Makua which has led an initiative to provide peer support and parent voice. EPIC is a member of the Perinatal Substance Use Workgroup (PSUD WG) which is a part of the Early Childhood Action Strategy (ECAS) and aims to improve systems of care and support for perinatal women with substance use disorder (SUD). These relationships and this work serve as a solid foundation for this proposal.

We work very hard to ensure that our services are culturally and linguistically appropriate, and we strive to be culturally humble in all of our relationships with families; honoring each family's culture and also being cognizant that historical trauma may be a part of their family's story and wounding. We also strive to be open and welcoming to everyone regardless of gender or sexual orientation, and recruit and retain staff members that reflect the rich diversity of our community. Within EPIC 'Ohana, we are committed to maintaining a culture of understanding and acceptance.

Parent voice is supported by the provision of an interpreter whenever an interpreter is needed. It is EPIC 'Ohana's policy to provide interpreter service in all phone calls and meetings. We have learned through our 'Ohana Conferencing experience that a family will say they understand English well enough to proceed, only to find that the issues are so complex that a higher level of language skill is needed.

## **B. Experience**

The following list sets forth EPIC 'Ohana's experience in providing peer support for women with SUD and/or children involved with CWS.

- 2011 - Wraparound pilot, parent peer support provided in partnership with Hawai'i Families as Allies
- 2014 - Family Wrap Hawai'i Youth Peer Support provided through EPIC staff, parent support in partnership with Hawai'i Families as Allies.
  - Parents in Family Wrap Hawai'i include some parents with PSUD, but not all Wrap parents are PSUD parents.
- 2018 - Youth Support with EPIC staff through the Kaeru project. Youth Peer support trained and certified through Department of Health Adult Mental Health Division (AMHD). We continue to provide Youth Peer Support through Child and Adolescent Mental Health Division (CAMHD) Data 2 Wisdom and currently have 7 Youth Partners certified by AMHD.
- 2020 - Family Wrap Hawai'i Parent Peer Support provided through EPIC staff, parent partners receive certification through AMHD in partnership with the Pū'ā Foundation culturally based training and the Administration for Native Americans Workforce Development grant beginning 2022. We currently have 6 Parent Partners certified through AMHD.
- 2021 - Makua Allies program begins for PSUD moms.

## **2. Facilities.**

**The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the request. If facilities are not presently available, describe plans to secure facilities.**

EPIC 'Ohana offices has two offices. One is located at the Nimitz Center in Honolulu and the other is located at The Hilo Lagoon Center in Hilo. These two locations are more than adequate to accommodate the work of the Makua Allies Program. Makua Allies meet their clients where they are at. This could be at the clinic, at a hearing, at their residence, or at the park. Expansion to Maui and Kauai may require additional facilities depending on the nature of partnerships with community providers. Makua Allies provide outreach and respond to referrals from clinics and hospitals. For example, a Makua Ally works out of the PATH clinic to connect with clients from the target population – pregnant and parenting women with SUD, including those who have completed SUD treatment and who are still in treatment.

## **VI. Personnel: Project Organization and Staffing**

### **1. Proposed Staffing, Staff Qualifications, Supervision and Training**

**The applicant shall describe the proposed staffing pattern and proposed service capacity appropriate for the viability of the request. The applicant shall provide the qualifications and experience of personnel for the request and shall describe its ability to supervise, train and provide administrative direction relative to the request.**

Our proposal funds 3.5 FTE Makua Allies. This project will have 4.5 FTE Makua Allies with 1.0 FTE funded by other contracts and grants. Upon award of the contract, EPIC will assign 2.0 FTE Makua Allies to deliver peer support services on O’ahu and 1.0 FTE in Hilo Hawai’i. EPIC will seek to fill the 0.5 FTE position upon this contract award.

Currently on staff as Parent Partners are four peer support specialists with PSUD lived experience on O’ahu and one in Hilo, Hawai’i. We have the ability to deliver the expected services and the following tasks at the commencement of the contract. Makua Allies will be supported by the Family Wrap Hawai’i manager, a Parent Partner Supervisor, and a program coordinator.

On O’ahu, EPIC parent peer support specialists currently on staff provide peer support for MAP and for other programs including Ka Pili 'Ohana with Lili'uokalani Trust, and Family Wrap Hawai’i.

EPIC partnered with Pū’ā Foundation to receive an Administration for Native Americans grant for 3 years to train 24 native Hawaiian peer support specialists with lived experience with child welfare, incarceration, or youth incarceration. The training is culturally based and after 160 internship hours leads to certification from Adult Mental Health Service, Department of Health. All four Parent Peer Support Specialists on O’ahu have already received the training, completed the internship, and have been certified as Peer Specialists with AMHD. Our partnership with the Pū’ā Foundation serves as a recruitment source. For instance, we are hosting 2 peer support specialist interns.

On O’ahu, the Makua Allies Demonstration Project again starts at the PATH Clinic and provides one Makua Ally that will connect with clients from our target population – pregnant and parenting women with SUD, including those who have completed SUD treatment and who are still in treatment – via partner organization outreach and referral. Outreach is ongoing with other hospitals and clinics, in addition to homeless populations on O’ahu.

#### **a. Proposed Staffing and Qualifications**

Our staff includes individuals with academic degrees in public health, social service related fields or public policy/administration.

The program management and staff of the MAP are professional, well-trained individuals who embrace the values, mission, and goals of EPIC 'Ohana. Our staff are highly knowledgeable of CWS programs, services, rules and procedures. They are also familiar with the families served and the issues -- such as domestic violence, substance use disorder, mental health challenges, and child abuse and neglect -- that the families face in their lives. Makua Allies are individuals with lived PSUD experience and experience as a birth parent in the child welfare system. These individuals have lived expertise unique and essential to their position. The specific position

titles, requirements and responsibilities are summarized in the table below. MAP is part of the Family Wrap Hawai'i Department of EPIC 'Ohana. Note that not all positions are funded directly by this Demonstration Project, some positions and some aspects of our program are funded by other grants.

<b>JOB TITLES</b>	<b>EDUCATION AND EXPERIENCE REQUIRED (CURRENT STAFF MEMBER)</b>
Family Wrap Hawai'i Manager	Advanced Degree or equivalent experience, 3-5 years Management Experience (Kristina Shibata, Masters in Marriage and Family Therapy)
Program Development Manager	Advanced Degree + 3-5 years Experience (Lise Vaughan-Sekona, Juris Doctor, Masters in Business Administration, LLM in Indigenous Law)
Parent Partner Supervisor	Advanced Degree or equivalent experience (Deanna Gonda – Masters in Marriage and Family Therapy)
Senior or Lead Makua Ally	High School Diploma + Life experience + 2 years experience as a Parent Partner
Makua Allies (Parent Partner)	High School Diploma + life experience
Network Administrator	Bachelor's Degree + 3-5 years
Administrative Assistant	High School Diploma
Quality Assurance Manager	Advanced Degree or equivalent experience (Chassidy Shino – Masters in Public Administration)
MAP Coordinator	Advanced Degree or equivalent experience (currently vacant)
Executive Director	Advanced Degree and Management experience (Laurie Arial Tochiki, Masters in Public Administration, Juris Doctor, Ph.D. Education Policy)

## **b. Supervision and Training**

We have a thorough understanding of the purpose and scope of peer support for reflective function training and supervision for PPW, as well as the necessary knowledge, skills, abilities and experience relating to the delivery of the proposed services.

Infant Mental Health Specialists and Peer Supports (peer specialist, peer workers, peer mentors) are creating a new type of support within the behavioral health field as a whole and has been found to be an especially effective intervention in the substance use disorder sector. Studies have shown that peer support used with people struggling with SUD reduces relapse rates, increases treatment retention, improves relationships with treatment providers and social supports, and increases satisfaction with the overall treatment experience (Reif et al., 2014, 853).

Peer support workers that are trained in infant mental health (IMH) and ultimately become Endorsed ® are more likely to work from a two-generation lens. Connecting and implementing reflective and relationship-based practice with pregnant women is a twofold intervention. If a pregnant mother feels supported by her peer supporter with lived experience and is provided an opportunity to explore and reflect on her role as a parent and as the architect of her child's mental health, then we are serving both the mom and her infant, while decreasing the likelihood of adverse childhood experiences and increasing resiliency factors for both mom and infant. Avoiding the trauma of separation of infant and mom at birth due to substance use impacts the mental health of both mom and infant positively by reducing adverse childhood experiences for the infant and reducing separation stressors for the mom.

AIMH HI will train local potential partners in effects of in utero substance exposure on child development, infant attachment, basic IECMH Competencies and the value Reflective Supervision Consultation (RSC). Ongoing RSC support will be provided by an Endorsed ® AIMH HI clinical specialist. Our partner AIMH HI also has a Certified Substance Abuse Counselor on staff that is available to the Makua Allies.

- MAP staff will provide training and partner development for full system integration,
- Infant and Early Childhood Mental Health Training for Resource Caregivers and Birth Parents, and assistance with co-parenting (birth parent & RCG),
- Training on Infant and Early Childhood Mental Health Integration into Child Welfare Service (CSW DHS staff and contractors),
- Training on Infant and Early Childhood Mental Health in Family Court systems including Zero to Three Court, and
- Use of peer specialists with Child Welfare Services clients in the PSUD population.

IECMH Reflective Supervision Consultation has been consistently associated with increased quality of infant mental health services by reducing vicarious trauma, staff turnover, and bias

while increasing practitioner knowledge and improved practice, job satisfaction, efficacy, and responsiveness. *This has led to a general consensus in the multidisciplinary field of infant mental health that RSC is inextricably both a best practice and an essential component for those providing relationship-focused prevention, intervention, and treatment*

*SAMSHA's research findings show positive correlations between the use of peer support workers and improved relationships with treatment providers, increased treatment retention, increased satisfaction with treatment experience, improved access to social supports, reduced substance use, greater housing stability and more.*

*Substance Abuse and Mental Health Services Administration, 2017*

Our hope, based on the indicators we are tracking, is that through the provision of peer-to-peer support and personalized support for infant attachment there will be an increase in women staying in substance abuse treatment and successfully completing their CWS service plan thus reducing the number of infants placed in foster care. It is also hoped to demonstrate a decrease in the trauma of birth removal for the mom and baby with access to peer support at the time of birth.

The two-year demonstration period beginning in 2023 is designed to show efficacy of two generation trauma reduction approach in order to integrate an infant mental health peer support model into Child Welfare Service community-based service delivery and to expand gender specific models of substance abuse treatment into the Department of Health Behavioral Health services. To this end we have been tracking initial outcomes of reduction of infant entry into foster care and increased parental attachment.

## **2. Organization Chart**

**The applicant shall illustrate the position of each staff and line of responsibility/ supervision. If the request is part of a large, multi-purpose organization, include an organization chart that illustrates the placement of this request.**

Please see attached organizational chart.

## **3. Compensation**

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

Executive Director — \$120,000 - \$135,000

Program Statewide Initiative Manager — \$75,000 - \$90,000

Financial Manager — \$70,000 - \$85,000

## **VII. Other**

- 1. Litigation. The applicant shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgement. If applicable, please explain.**

*Archie John McCoy and “AA” vs, State of Hawai’i, et. al.*

On March 29, 2021, EPIC was served with a complaint in the matter of *Archie John McCoy and “AA” vs. State of Hawai’i, et. al.*, Civil No. 1:21-cv-00063-LEK-RT.

EPIC 'Ohana and Kathy Shimabukuro are named defendants relating to Family Finding services to CWS. Plaintiff is a father whose parental rights were legally terminated and claiming that he is entitled to damages. EPIC 'Ohana has tendered the lawsuit to our insurance carrier for legal defense. EPIC 'Ohana has timely responded to the Complaint through our insurance carrier. Attorneys for the insurance company are currently preparing motions for summary judgment on our behalf, which shall be filed at the appropriate time.

- 2. Licensure or Accreditation**

**The applicant shall specify any special qualifications, including but not limited to licensure or accreditation that the applicant possesses relevant to this request.**

EPIC partnered with Pū'ā Foundation to receive an Administration for Native Americans grant for 3 years to train 24 native Hawaiian peer support specialists with lived experience with child welfare, incarceration, or youth incarceration. The training is culturally based and after 160 internship hours leads to certification from Adult Mental Health Service, Department of Health. All four Parent Peer Support Specialists on O'ahu have already received the training, completed the internship, and have been certified as Peer Specialists with AMHD. The current PS in Hilo for the MAP program has completed the 40-hour training and is now completing her internship hours for certification. Our partnership with the Pū'ā Foundation serves as a recruitment source as we host peer support specialist interns, with the hopes of future employment by EPIC.

- 3. Private Educational Institutions**

**The applicant shall specify whether the grant will be used to support or benefit a sectarian or non-sectarian private educational institution. Please see [Article X, Section 1, of the State Constitution](#) for the relevance of this question.**

Not applicable.

#### **4. Future Sustainability Plan**

**The applicant shall provide a plan for sustaining after fiscal year 2024-25 the activity funded by the grant if the grant of this application is:**

- (a) Received by the applicant for fiscal year 2024-25, but**
- (b) Not received by the applicant thereafter.**

The importance of peer support to our perinatal substance using (PSUD) community cannot be understated. The efficacy of this work has been shown throughout the pilot project and into year 1 of the demonstration project. It is our hope that the state's support of this community and peer support work becomes the standard of care. We continue to seek private and foundation support to continue this work.

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

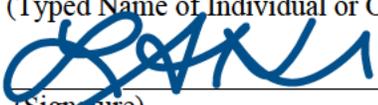
The undersigned authorized representative of the applicant certifies the following:

- 1) The applicant meets and will comply with all of the following standards for the award of grants pursuant to Section 42F-103, Hawai'i Revised Statutes:
  - a) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant is awarded;
  - b) Complies with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
  - c) Agrees not to use state funds for entertainment or lobbying activities; and
  - d) Allows the state agency to which funds for the grant were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and ensuring the proper expenditure of the grant.
- 2) If the applicant is an organization, the applicant meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
  - a) Is incorporated under the laws of the State; and
  - b) Has bylaws or policies that describe the manner in which the activities or services for which a grant is awarded shall be conducted or provided; and
- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
  - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
  - b) Has a governing board whose members have no material conflict of interest and serve without compensation.
- 4) The use of grant-in-aid funding complies with all provisions of the Constitution of the State of Hawaii (for example, pursuant to Article X, section 1, of the Constitution, the State cannot provide "... public funds ... for the support or benefit of any sectarian or nonsectarian private educational institution...").

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

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

Effective Planning and Innovative Communication, Inc., dba EPIC 'Ohana  
(Typed Name of Individual or Organization)

 \_\_\_\_\_  
(Signature) 1/17/2024  
(Date)

Laurie Arial Tochiki Executive Director  
(Typed Name) (Title)

## BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2024 to June 30, 2025

Applicant: Effective Planning & Innovative Communication, Inc.

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	219,133			
2. Payroll Taxes & Assessments	28,450			
3. Fringe Benefits	32,662			
TOTAL PERSONNEL COST	<b>280,245</b>			
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island	10,200			
2. Insurance	2,000			
3. Lease/Rental of Equipment				
4. Lease/Rental of Space				
5. Staff Training	47,000			
6. Supplies	5,000			
7. Telecommunication	5,000			
8. Utilities				
9. Airfare, Out-of-State	4,800			
10. Mileage	3,000			
11. Transportation	5,000			
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
TOTAL OTHER CURRENT EXPENSES	<b>82,000</b>			
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
<b>TOTAL (A+B+C+D+E)</b>	<b>362,245</b>			
<b>SOURCES OF FUNDING</b>		Budget Prepared By:		
(a) Total State Funds Requested		Lise Vaughn-Sekona	808-838-7752	
(b) Total Federal Funds Requested		Name (Please type or print)	Phone	
(c) Total County Funds Requested			01/17/24	
(d) Total Private/Other Funds Requested		Signature of Authorized Official	Date	
<b>TOTAL BUDGET</b>		Laurie Arial Tochiki, Executive Director		
		Name and Title (Please type or print)		

## BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2024 to June 30, 2025

Applicant: Effective Planning & Innovative Communication, Inc.

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Parent Partner Lead (Makua Allies)	1	\$43,680.00	100.00%	\$ 43,680.00
Parent Partner (Makua Allies)	1	\$37,440.00	100.00%	\$ 37,440.00
Parent Partner (Makua Allies)	1	\$37,440.00	100.00%	\$ 37,440.00
Parent Partner (Makua Allies)	1	\$37,440.00	50.00%	\$ 18,720.00
Parent Partner Supervisor	1	\$53,024.40	50.00%	\$ 26,512.20
Coordinator	1	\$47,008.00	75.00%	\$ 35,256.00
Program Manager	1	\$80,340.00	25.00%	\$ 20,085.00
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
<b>TOTAL:</b>				<b>219,133.20</b>
<b>JUSTIFICATION/COMMENTS:</b>				

## BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2024 to June 30, 2025

Applicant: Effective Planning & Innovative Comm

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
Not Applicable.			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
<b>TOTAL:</b>				<b>0</b>
JUSTIFICATION/COMMENTS:				

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
Not Applicable.			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
<b>TOTAL:</b>				<b>0</b>
JUSTIFICATION/COMMENTS:				

## BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2024 to June 30, 2025

Applicant: Effective Planning & Innovative Communication, Inc.

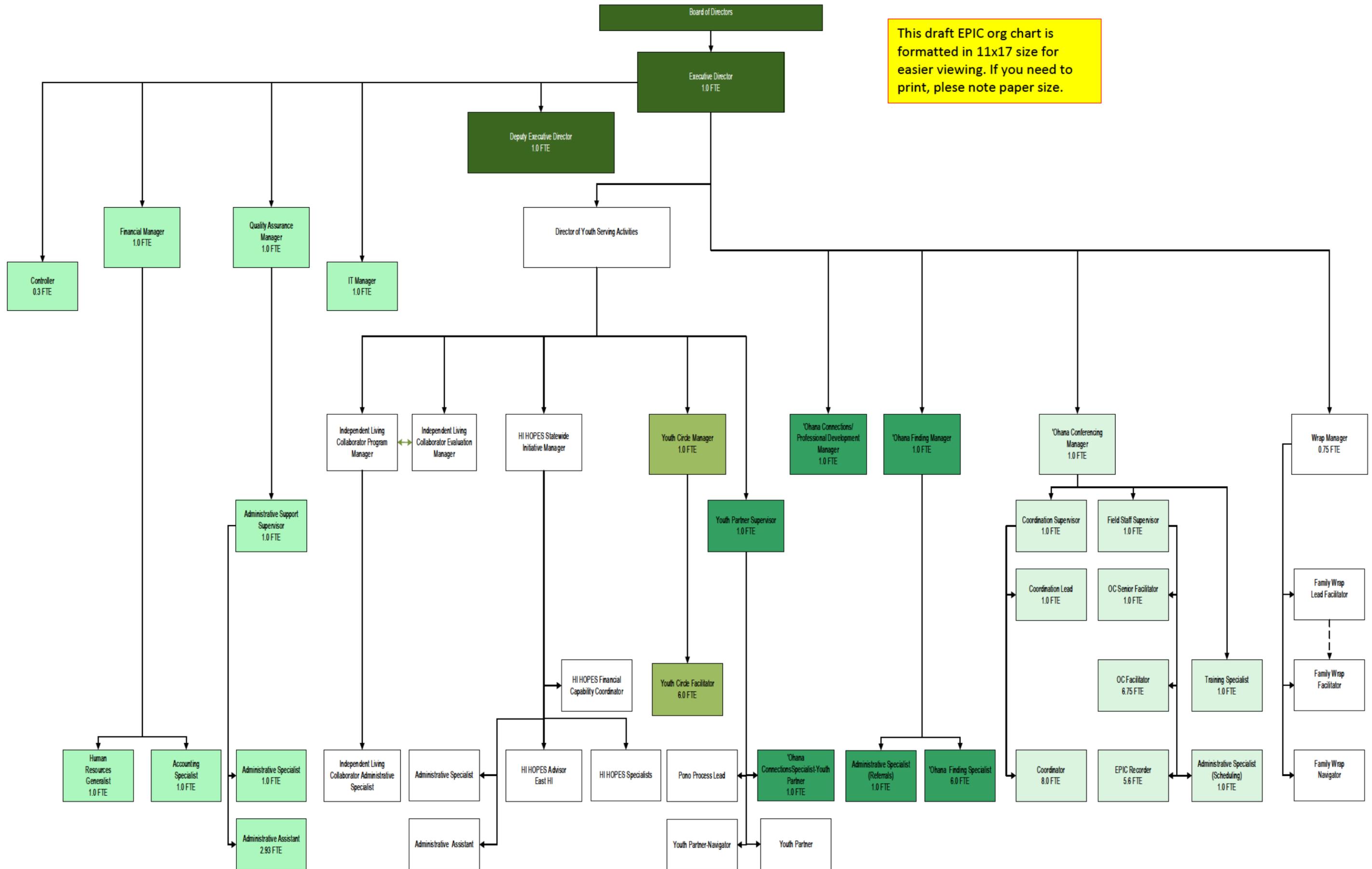
FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OTHER SOURCES OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2022-2023	FY: 2023-2024	FY:2024-2025	FY:2024-2025	FY:2025-2026	FY:2026-2027
PLANS						
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT						
<b>TOTAL:</b>	0	0	0	0	0	0
JUSTIFICATION/COMMENT Not Applicable.						

**GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID**

Applicant: Effective Planning & Innovative Communication, Inc.

Contracts Total: 389,600

	<b>CONTRACT DESCRIPTION</b>	<b>EFFECTIVE DATES</b>	<b>AGENCY</b>	<b>GOVERNMENT ENTITY (U.S./State/Hawaii/ Honolulu/ Kauai/ Maui County)</b>	<b>CONTRACT VALUE</b>
1	Peer Support for Pregnant/Parenting Women	07/17/23 - 06/30/24	Department of Health	State	340,600
2	Pilot Peer Support for Pregnant/Parenting Wome	08/31/22 - 06/30/23	Department of Health	State	49,000
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					



This draft EPIC org chart is formatted in 11x17 size for easier viewing. If you need to print, please note paper size.