Senate District HAW APPLICATIO	VENTY-SIXTH LEGISLATURE AN STATE LEGISLATURE ON FOR GRANTS & SUBSIDIES 42F, HAWAN REVISED STATUTES	Log No: 105-O For Legislature's Use Only			
Type of Grant or Subsidy Request:		REC'D JAN 2 8 2011			
"Grant" means an award of state funds by the legislature, by ar permit the community to benefit from those activities. "Subsidy" means an award of state funds by the legislature, by incurred by the organization or individual in providing a service "Recipient" means any organization or person receiving a grant	an appropriation to a recipient specified in available to some or all members of the pu	the appropriation, to reduce the costs			
STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST (LEAV	VE BLANK IF UNKNOWN);				
STATE PROGRAM I.D. NO. (LEAVE BLANK IF UNKNOWN):					
1. APPLICANT INFORMATION: Legal Name of Requesting Organization or Individual: The Path Dba: Street Address: 845 22 nd Avenue; Honolulu, HI 96816 Mailing Address: The Path Clinic 845 22 nd Avenue Honolulu, HI 96816 3. Type of Business entity: X Non Profit Corporation For Profit Corporation Limited Liability Company Sole Proprietorship/Individual	Title Executive Director Phone # 808-734-2034 Fax # 808-734-2036 Email rschuetter@ucera.org				
	7. AMOUNT OF STATE FUNDS: FY 2011-2012: \$ 200,000 PECIFY THE AMOUNT BY SOURCES OF FUNDS ATTHE TIME OF THIS REQUEST: STATE \$				

STATE \$
FEDERAL \$
COUNTY \$
PRIVATE/OTHER \$ 13,000

State Capitol, Rm 215 Honolulu, HI 96813 Attn: Roderick Becker

Enclosed is the original of the an application for Grants-in-Aid for Fiscal Year 2011-2012 Budget/

Thank you for your consideration.

Jackie Berry President Board of Directors The Path Clinic

Application for Grants and Subsidies

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

I. Background and Summary

The only comprehensive perinatal addiction clinic in Hawaii, The Path Clinic provides prenatal and after delivery clinical OB/GYN services and also addresses substance use and social service needs of women. Designed to engage a difficult to reach, very high-risk pregnant population; this judgment-free outpatient clinic is dedicated to supporting each woman's unique journey from a troubled, addicted pregnancy to mother of a healthy infant that she is ready to capably parent.

The goals of The Path Clinic are to engage pregnant women with substance abuse issues in prenatal services; to improve the birth outcomes of women with substance abuse issues; and to facilitate women in becoming ready to capably parent their infants. Measures of success for a year are: (1) engaging 60 high-risk pregnant women in prenatal services at Path; (2) preterm birth rates, low birth-weight rates, and very low birth-weight rates that are as low as or lower than state and national averages according to March of Dimes Peristats; and (3) 95% of the women will maintain custody of their infants at 10 weeks.

The population of women served at The Path Clinic is considered to have 4-5 times the risk of preterm or low birth weight deliveries due to poverty (over 98% are Medicaid eligible and a third are homeless for a portion of their pregnancy); ethnicity (over 83% women of color, with 54% Native Hawaiian); substance use (85% methamphetamine, 7% opiates); tobacco use (81%); and high rates of co-occurring medical and mental illnesses. The majority of the women who receive services at Path have histories of interpersonal violence and 34% have been incarcerated. 57% have lost custody of previous children.

The Path Clinic was initially funded by an Act of the Hawaii State Legislature as a 3 year pilot project to address the poor birth outcomes of women who used methamphetamines during pregnancy. Pregnant women who used substances were known to avoid prenatal care due to fears of the criminal justice system, fears of losing custody of their infants, fears of the perceived negative perceptions of health care providers, and logistical problems such as lack of transportation or childcare. When they did receive prenatal care, the provider was unlikely to effectively assess for and address substance use. This lack of adequate prenatal care resulted in very high rates of preterm delivery and delivery of low birth-weight infants, as well as high rates of removal of infants from the custody of their mothers. Loss of custody led to a very high repeat pregnancy rate, creating a cycle of high-risk pregnancies and infant losses for many women. This heartbreaking cycle is also

very expensive as the average first year medical costs of a very low birth weight infant are over \$200,000.

The Path Clinic provides services to women who live or temporarily reside anywhere on the island of Oahu.

II. Service Summary and Outcomes

The activities of The Path Clinic are designed to locate and engage in services the targeted population, with the goal of improving birth outcomes and parenting ability of this population. Service activities to be provided shall, at a minimum, address National (Healthy People 2010) and State Title V, Maternal and Child Health ("Title V MCH") objectives and performance measures to:

- a. Improve access to care in the first trimester;
- b. Reduce low and very low birth weight;
- c. Promote abstinence from alcohol, cigarette smoking, and illicit drug use;
- d. Increase breastfeeding:
- e. Increase screening and referral form domestic violence and depression;
- f. Improve use of contraception to prevent unintended pregnancy; and
- g. Increase preventive education and screening on oral health care and sexually transmitted infections.
- 1. The Path Clinic shall provide the following core services:
 - a thorough biospychosocial assessment performed by a social worker;
 - case management with linkage to appropriate social services and medical providers;
 - goal setting with ongoing motivational interviewing sessions to support achievement of goals;
 - d. childcare during clinic appointments and groups/classes;
 - e. transportation assistance for clinic appointments and groups/classes;
 - f. individual and group psychoeducation in the areas of substance abuse, self-care during pregnancy and post-partum, healthy relationships, cigarette smoking cessation, and infant care (including breastfeeding).
 - g. an evidence-based motivational incentive program to promote achievement of healthy goals;
 - substance abuse assessment, pretreatment education, and referrals to appropriate treatment programs and behavioral health providers;
 - i. on-site OB/GYN services.
- The Path Clinic shall ensure personnel who perform core services are qualified by educational degree and experience.
- The Path Clinic shall submit to MCHB quarterly and annual reports that include:

- a. Data elements to measure all outcomes; and
- b. The fourth quarter report incorporated into the annual report.
- The Path Clinic shall Measure Outcomes that include the following:
 - a. Number of women referred to services;
 - b. Number of women provided outreach services;
 - c. Number of women engaged in services at Path;
 - d. Number of first trimester women engaged in services at Path;
 - e. Number of women who delivered with Path:
 - f. Number of women who delivered low birth-weight infants;
 - g. Number of women who delivered very low birth-weight infants;
 - h. Number of women who delivered preterm infants;
 - Number of women who significantly reduced or stopped using alcohol and/or illicit drugs during service period;
 - Number of women who significantly reduced or quit tobacco use during service period;
 - Number of women who maintained custody of infant at 10 weeks:
 - Number of women screened and/or referred for domestic violence;
 - m. Number of women screened and/or referred for depression;
 - Number of women who received family planning education, oral health screening and education, and sexually transmitted disease screening and education.
 - o. Number of women who breastfed during first two weeks
 - p. Number of women who breastfed for 3 months.
 - g. Number of women who exclusively breastfed for 3 months.
- 5. The Path Clinic shall submit results of a client satisfaction survey quarterly and annually.

III. Financial

Budget

- The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.
- The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2011-2012.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$50,000	\$50,000	\$50,000	\$50,000	\$200,000

The applicant shall provide a listing of all other sources of funding that they
are trying to obtain for fiscal year 2011-2012.

IV. Experience and Capability

The clinic has demonstrated success in its ability to effectively work with high-risk pregnant women to improve health outcomes. Have served over 200 high risk pregnant women, with 120 deliveries, it has a proven track record of engaging difficult-to-reach women in prenatal services; of excellent birth outcomes for a population predicted to have 4-5 times the usual risk for poor outcomes; and provding the needed services to facilitate readiness to parent.

Some of the success of the clinic can undoubtedly be attributed to the experience and commitment level of the staff of The Path Clinic. The founder and medical director of the clinic is Tricia Wright, MD, a member of the John A. Burns School of Medicine faculty who specializes in the treatment of pregnancy and substance abuse (see Attachment L for resume). Noting a gap in perinatal addiction services on Oahu in 2005, she gathered a small group to create a comprehensive perinatal addiction clinic modeled after the Milagro Clinic in Albuquerque, New Mexico. While she has excellent credentials as an academic OB/GYN clinician and researcher, it is her commitment to reproductive justice for all women that has motivated her to develop excellent motivational interviewing skills and a nonjudgmental acceptance of all women. Pregnant women consistently report feeling comfortable discussing their concerns openly with her. The excellent birth outcomes of the Path Clinic in spite of the high risk level of the population speaks to the quality of the care she provides. Dr. Wright participates in a multidisciplinary weekly treatment planning meeting and extends her understanding of the issues of pregnancy and addiction to women who receive clinical care by other OB/GYN care providers by serving as a resource to the Path Clinic staff. She also trains OB/GYN residents and medical students at the Path Clinic in the treatment of substance abuse and pregnancy. The residents as well as the students of medicine, nursing, psychology, and social work that serve at the clinic all receive training in motivational interviewing and in the gender specific needs of the substance abusing pregnant woman.

Bernadette Scanlan-Hodges is the Certified Medical Assistant of the Path Clinic. She is trained in motivational interviewing and like the rest of the staff is always working on improving her skills using this valuable, but challenging technique. She is also trained in the use of Brief Interventions for smoking cessation and plans to take the University of Massachusettes on-line smoking cessation course this spring with the entire Path Clinic team. As the mother of eight, she has excellent multitasking skills. Bernadette speaks Samoan fluently and has done volunteer work at Kalihi Palama. Because the mother of Bernadette's adopted foster children struggles with addiction, she finds this work even more rewarding. "I see how hard these women struggle – how hard they try to be better for their children. Children give us hope."

Rachel Dorr, MSW, likes how the Path Clinic creatively accommodates the needs of the women it serves. "It's flexible enough to meet women where they are and facilitate their forward motion. Prior to joining The Path Clinic staff, Rachel's work experiences involved supporting women struggling with substance abuse, mental health problems, environmental issues like domestic violence. "Everything in my background led me to this work at the clinic".

Renee Schuetter, RN, M.Ed. feels very fortunate to have been a part of The Path Clinic from its beginnings. She believes that her decades of experiences as a nurse, counselor and nurse manger have prepared her to design and manage a clinic and programs that are unusually flexible in responding to the needs of the women it serves. During her career, she has managed acute inpatient medical-surgical units and acute inpatient behavioral health units. She has supervised community health nurses and ambulatory clinics and has also coordinated quality assurance programs. She has provided and supervised telephonic case management of behavioral health and high risk pregnancy clients and has taught childbirth and parenting classes. She has found that her five years as a nurse manager of acute inpatient behavioral health units at the Queen's Medical Center has been particularly helpful in her current role as over half of the patients struggled with substance abuse in addition to psychiatric illness. She managed a multidisciplinary staff of 75-90 people and a multimillion dollar budget and led award-winning quality improvement efforts - one to decrease the use of seclusion and restraint and another to provide effective programs for schizophrenic individuals. Perhaps most importantly she successfully provided education, practices and policies that supported a diverse multidisciplinary

team in providing respectful, safe and therapeutic care to a very vulnerable population with very good outcomes.

The Board of Directors of the Path Clinic (see Attachment O for contact information) are a tremendous resource to the clinic. William Haning, MD, an expert in the field of Addiction Medicine generously shares his time and knowledge. As the Director of the John A. Burns School of Medicine Fellowship Program in Addiction Medicine, he supervises physicians providing substance abuse assessments and consultations at Path . Ted Sakai contributes criminal justice and management consulting expertise. Jackie Berry, currently the Executive Director of Healthy Mothers/Healthy Babies shares her considerable experience as an administrator of nonprofits involved in health services. Jeanne Ohta brings extensive knowledge in the area of drug policies and is a Certified Public Accountant. Jill Peterson brings fundraising experience and a youthful perspective. Tricia Wright, MD brings a great deal of knowledge, experience, commitment, and vision to the Path Clinic Board of Directors. Finally, Linda Rich, the Executive Director of Salvation Army Family Treatment Services, contributes a long commitment and a valuable foundation of experience and knowledge in the area of genderspecific substance abuse treatment. Salvation Army's Women's Way closely collaborates with the Path Clinic in a manner that has served many women very effectively. It is not unusual for Path to begin working with a pregnant woman with severe chronic methamphetamine addiction who requires a great deal of support and patience as she makes the decision to accept residential treatment and follows through with the process, which offers her the only realistic hope for becoming clean during her pregnancy. In other cases, when a client may be ready to enter treatment, but a residential bed may not be available yet, the Path Clinic provides a place where a woman can spend time away from a living situation full of triggers and begin her path to recovery. Finally, as Dr. Wright provides OB/GYN care to the Women's Way clients, the Path Clinic weaves a safety net that catches and supports a woman who, unable to tolerate residential treatment, can stay clean with the supportive social services provided by Path.

The Path Clinic team believes that building a foundation of high quality care requires clear standards of care that guide effective practice, prioritizing, and problem solving. While the Executive Director is responsible for the Quality Assurance Plan, all members of the team participate in the effort which includes both concurrent and retrospective components. Checklists of activities that are expected to occur in a timely manner are maintained in patient records to make it clear when they have or if they haven't yet been completed. For example, it is a standard that a newly referred woman will meet with the social worker within 48 hours. The time of the initial referral is documented on the checklist, as is the time of the first social worker meeting and whether or not it meets the standard. If it does not meet the standard, the reason is provided on the checklist. This keeps the standard of care "alive" for the team so that when a standard is not met, it will be discussed with the supervisor or treatment team. It also provides a record for gathering performance data and measuring our ability to meet standards of care retrospectively.

A Path documentation standard requires every client contact, participation in program activities, or interaction with a collaborative partner to be documented. The Path Clinic patients are asked to complete Patient Satisfaction Surveys when their babies are 2-3 months of age. The clinic has a patient complaint process and an incident reporting process in place.

Each employee has a file and checklists are used to organize and document staff orientation and ongoing training. Supervisory notes and evaluations are maintained in employee files. A procedure will be developed to ensure completion of data entry and billing forms and their submission to the Maternal and Child Health Branch for timely processing. The Path Clinic is open to a site and monitoring visit by MCHB staff at any time and will structure and schedule this in a manner that best meets the needs of MCHB. It will also include this site visit into the Quality Assurance Plan.

B. Facilities

The Path Clinic leases a free standing 1439 square feet ADA accessible house on the beautiful campus of the Salvation Army Family Treatment Services in Kaimuki. It has a large bright room set up to provide childcare and to contain exercise and craft groups, a comfortable living room in which women gather and socialize, a large private office in which 8 women can gather for

groups, two private consultation rooms that are also used as physician examination rooms (the medical furnishings are hidden behind screens when the rooms are used for nonmedical meetings), a private room shared by staff as an office, two bathrooms (one ADA accessible), a kitchen, and a small utility/laundry room. There are two outdoor gathering places for women – one is a covered lanai and the other is a patio under a large mango tree. The clinic is surrounded by a La'au Lapa'au garden, a shady playground, and an organic fruit and vegetable garden. Parking is plentiful and free. The clinic is located on a Honolulu bus line. UCERA OB/GYN subcontracts 327 square feet (23%) for medical use; and 582 square feet (40%) for shared use. 530 square feet (37%) remains for exclusive social service use.

The Path Clinic space is organized and furnished with the primary purpose of making a pregnant substance-abusing woman feel as welcome and comfortable as possible while at the same time serving a place in which a new mother feels comfortable spending several hours with her 3 day old infant. The clinic staff is frequently told by the clients how much they appreciate the pleasant homelike environment and believes that the respectful manner in which the women care for the furnishings reflects their gratitude.

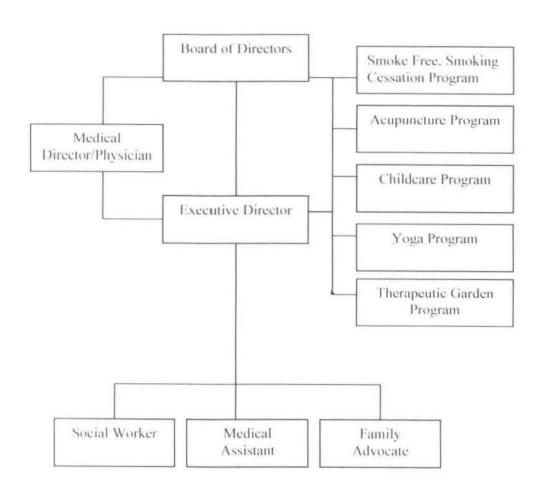
V. Personnel: Project Organization and Staffing Proposed Staffing, Staff Qualifications, Supervision and Training

The Executive Director of The Path Clinic (0.9 FTE) also administers The Path Clinic Comprehensive Perinatal Smoking Cessation Program which is funded by the Hawaii Tobacco Trust Fund through Hawaii Community Foundation, which involves 0.1 FTE. The position requires a Master's Degree in a field of human service and at least 5 years experience managing programs. Reporting to the Executive Director is a full-time social worker with an MSW and substance- abuse counseling experience. The Path Clinic Medical Assistant is a key position at the clinic, requiring certification as a medical assistant as well excellent therapeutic communication and organization skills. The medical assistant position is funded by UCERA.

B. 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 organizational chart that illustrates the placement of this request.

The Path Clinic Organization Structure, 2010



VI. Other

A. Litigation

The Path Clinic has no known pending litigation.

B. Licensure or Accreditation

None applicable.

BUDGET REQUEST BY SOURCE OF FUNDS

(Period: July 1, 2011 to June 30, 2012)

The Path Clinic

	BUDGET ATEGORIES	Total State Funds Requested (a)	(b)	(c)	(d)
۹.	PERSONNEL COST				
	1. Salaries	101,600			
	2. Payroll Taxes & Assessments				
	Fringe Benefits	25,400			
	TOTAL PERSONNEL COST	127,000			
3.	OTHER CURRENT EXPENSES				
	1. Airfare, Inter-Island	0			
	2. Insurance	4,000			
	3. Lease/Rental of Equipment	0			
	Lease/Rental of Space	12,000			
	5. Staff Training	1,280			
	6. Supplies	6,960			
	7. Telecommunication	2,760			
	8. Utilities	0			
	9 Therapeutic Gardener	4,000			
	10 Family Advocate	12,000			
	11 Client transportation	30,000			
	12				
	13				
	14				
	15				
	16				
	17				
	18				
	19				
	20				
	TOTAL OTHER CURRENT EXPENSES	73,000			
	EQUIPMENT PURCHASES				
),	MOTOR VEHICLE PURCHASES				
	CAPITAL				
ГО	TAL (A+B+C+D+E)	200,000			
30	OURCES OF FUNDING		Budget Prepared	Ву:	
	(a) Total State Funds Requested		Name (Please type or p	rint\	Dhone
	(b)		rease type or p	minty	Phone
	(c)				
	(d)		Signature of Authorized	Official	Date
го	TAL BUDGET		Name and Title (Please	type or print)	

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

The Path Clinic

Period: July 1, 2011 to June 30, 2012

DESCRIPTION EQUIPMENT	NO. OF	COST PER	TOTAL	TOTAL BUDGETED
EQUIFMENT	TIEMS	TTEM		BODGETED
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				(
JSTIFICATION/COMMENTS:				
DESCRIPTION	NO. OF	COST PER	TOTAL	TOTAL
OF MOTOR VEHICLE	VEHICLES	VEHICLE	COST	BUDGETED
			\$ -	
			.75	

TOTAL:

O

JUSTIFICATION/COMMENTS:

\$

BUDGET JUSTIFICATION PERSONNEL - SALARIES AND WAGES

The Path Clinic

Period: July 1, 2011 to June 30, 2012

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	ST	TOTAL ATE FUNDS EQUESTED (A x B)
Executive Director	0.9 FTE	\$64,000.00	90.00%	\$	57,600.00
Social Worker	1.0 FTE	\$44,000.00	100.00%	\$	44,000.0
-				\$	
				\$	
				\$	
				\$	
				\$	-
				\$	-
				\$	
				\$	
				\$	
				\$	w
				\$	
				\$	-
TOTAL:					101,600.0

BUDGET JUSTIFICATION CAPITAL PROJECT DETAILS

The Path Clinic

Period: July 1, 2011 to June 30, 2012

TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2009-2010	FY: 2010-2011	FY:2011-2012	FY:2011-2012	FY:2012-2013	FY:2013-2014
PLANS						
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT						
TOTAL:						

DECLARATION STATEMENT APPLICANTS FOR GRANTS AND SUBSIDIES CHAPTER 42F, HAWAI'I REVISED STATUTES

The undersigned authorized representative of the applicant acknowledges that said applicant meets and will comply with all of the following standards for the award of grants and subsidies pursuant to section 42F-103, Hawai'i Revised Statutes:

- 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 or subsidy is awarded;
- (2) Comply 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;
- (3) Agree not to use state funds for entertainment or lobbying activities; and
- (4) Allow the state agency to which funds for the grant or subsidy 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 or subsidy.

In addition, a grant or subsidy may be made to an organization only if the organization:

- Is incorporated under the laws of the State; and
- (2) Has bylaws or policies that describe the manner in which the activities or services for which a grant or subsidy is awarded shall be conducted or provided.

Further, a grant or subsidy may be awarded to a non-profit organization only if the organization:

- Has been determined and designated to be a non-profit organization by the Internal Revenue Service;
 and
- (2) Has a governing board whose members have no material conflict of interest and serve without compensation.

For a grant or subsidy used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant or subsidy 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 or subsidy used for the acquisition of the land.

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

The Path Clinic

(Typed N	ame of Individual or Organia	zation)
Jackie/Berry	(Signature)	(Date) President, Board of Directors
	(Typed Name)	(Title)

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The Path Clinic

(Tuned Name o	f Individual or Organiz	ration)
Jackie Berry		(Date) President, Board of Directors
(*	Гуреd Name)	(Title)