

**HealthConnect One
National Community-based Doula Network Quarterly Conference Call
Funding Opportunities and Challenges in a Treacherous Climate
August 9, 2011
11am-12:30 pm CST
NOTES**

Call Participant List

1. Linda Roberts, Great Lakes Inter-Tribal Council
2. Cynthia Salter, The Birth Circle
3. JC Cole, The Birth Circle
4. Naima Black, North Philly Breastfeeding Coordinator
5. Tia Demery, GCAPP
6. Hanifah Rios, Families First/GCAPP
7. Ellen Hamrick, BirthMatters, Spartanburg, SC
8. Molly Chappel-McPhail, Birth Matters ReGenesis
9. Christina Dobson, YWCA Greensboro
10. Marie Hogarty, Gateway Northwest MCH Network, Morristown, NJ
11. Benita Miller, Brooklyn Young Mothers Collective
12. Ashley Anderson, Teen Parent Connection, Glen Ellyn, IL
13. Eboni R. Pettus, Healthy Family Initiatives, Houston, TX
14. Marianne Ehrlich, Healthy Family Initiatives, Houston, TX
15. Tonya Daniel, NC Division of Public Health, Raleigh, NC
16. Myrtis Sullivan
17. Laurie Dean Vance, Alpha Women's Center, Grand Rapids, MI
18. Michelle Hoersch, U.S. Department of Health and Human Services Office on Women's Health Region V
19. Denise Bischof, Doula Foundation of Mid-America, Springfield, MO
20. Kistine Carolan, Maternity Care Coalition
21. Katherine Hensley, Mama Community Health Project
22. Ounce of Prevention
23. Bloomington Area Birth Services
24. Rae Davies, The Birth Company
25. Little Company of Mary Hospital
26. Illinois Chapter of the American Academy of Pediatrics
27. El Segundo, CA
28. Laura McAlpine, McAlpine Consulting for Growth
29. Jere McKinley, Health Connect One
30. Mac Grambauer, McAlpine Consulting for Growth
31. Melanie Garret, HealthConnect One
32. Wandy Hernandez, HealthConnect One
33. Rachel Abramson, HealthConnect One

Welcome/Introductions

11:00am CDT

- Jere McKinley welcomed people on the call, asked them to introduce themselves (see list above).
- Laura reviewed the agenda.

Update on Legislative activities of the 112th Congress

- FY12 SPRANS for Doula
 - U.S. Department of Health and Human Services (HHS), the Office on Women's Health (OWH), Home Visiting, are all supportive as health reform rolls out
 - Network members should keep talking about Community-based Doula (CB Doula) and make sure Legislators know how important the program is.
 - This is a time when Maternal and Child Health (MCH) issues need to be championed by those of us that do the work.
 - We've spent a number of years making sure people understand the power of the program, we've succeeded in getting the HRSA grantees, we have other connections now, and we need to keep advocating.
 - HC One is working to stay connected and gather the evidence base to demonstrate the power of the program.
 - Senator Durbin's Office, Congressman Jackson, Jr.'s Office and the HRSA office:
 - For FY12, everyone is still putting forth their support for the program through the SPRANS funding
 - Still in FY12 budgets and plans
 - This is good, means that at least right now, they're not looking at us as a way of cutting
- Debt ceiling and the FY12 Overall budget (Deficit reduction decisions)
 - AMCHP hosted a conference on August 8th to discuss the debt ceiling deal and its implications on Maternal and Child Health Programs. A recording of that call is available on the AMCHP website at www.amchp.org, but the main points were these:
 - The President authorized to increase the debt limit by at least \$2.1 trillion, eliminating the need for further increases until 2013.
 - The deal immediately enacts 10-year discretionary spending caps generating nearly \$1 trillion in deficit reduction; balanced between defense and non-defense spending. These spending caps will apply to the FY12 appropriations process which will be picked back up in the fall. Agencies will have discretion to make cuts. If the caps are exceeded, there will be automatic cuts, half from defense; half will be from domestic spending.
 - The deal also authorizes forming a "Super Committee"—a Bipartisan committee tasked with identifying an additional \$1.5 trillion in deficit reduction, including from entitlement and tax reform. The Committee is required to report its recommendations by Thanksgiving, to be voted on by December 23, 2011.
 - We don't know who will be on this committee yet. Party leaders are supposed to give their lists of recommended members by August 15th.
 - There is an enforcement mechanism established to force both parties to agree to a balanced deficit reduction. If the Committee fails, the enforcement mechanism will trigger spending reductions beginning in 2013 – split 50/50 between domestic and defense spending. However, Social Security, Medicare beneficiaries, and low-income programs would be protected from any cuts.
 - AMCHP strongly suggests reaching out to your Legislators this month while they are at home—make visits to their offices, make phone calls, etc. to advocate for Title V MCH funding. Because the FY12 appropriations process was delayed due to the debt ceiling debacle, we are in a unique position to advocate for our programs at home before funding is appropriated. In addition, AMCHP sent out an action alert yesterday afternoon, with three options for additional action:

- Write a letter to the editor about the importance of maternal and child health funding.
- Attend a Town Hall Meeting to speak up about the importance of the Title V MCH Block Grant.
- Check in with your State Health Agency Leadership. The Association of State and Territorial Health Officials (ASTHO) encourages state health agency leaders to invite Members of Congress to visit state health departments in August. AMCHP encourages you to check if your agency leadership is pursuing such meetings.
- There is a constellation of things coming together—SPRANS, Health Reform, and other opportunities we can take advantage of. We need to fight for Health Reform; we don't want congress to cut it to meet the debt ceiling caps.

Progress on Sustainability for Community-based Doula Programs

- **Overview of current public funding opportunities at the federal and state level**
 - Laura summarized HC One activities related to:
 - HRSA funding – meeting with Administrator Mary Wakefield, Karen Hench, Jim Macrea, and Terry Adirim
 - Hanifah Rios, GCAPP was there, as well as a few other site representatives
 - Administrator Wakefield's response: the outcomes from CB Doula match different programs in HRSA for meeting MCH objectives. She is encouraging us to continue to have meetings to demonstrate how CB Doula links with other programs. She is continuing to think of possible avenues of integration with other health programs, and in the context of the life sequence.
 - HRSA and ACA funding via Homevisiting – meeting with Joan Lombardi, Deputy Assistant Secretary and Inter-Departmental Liaison for Early Childhood Development/Administration for Children and Families
 - Started to have a better understanding of CB Doula and where it can fit within the 7 approved Home Visiting programs
 - Power of stories was really important in the meeting
 - Both meetings were excellent, and provided a way to share with HRSA the CB Doula work being done, the outcomes we're seeing—and they were very impressed. They were truly engaged in the conversations, and were thinking of other ways to make connections. It was very helpful.
 - Health Reform – CDC funding through Community Transformation Grants (CTG): CHW and breastfeeding
 - Seven counties in the Chicago area where health departments and non-profits came together to apply for grants
 - Task forces have come together and put out recommendations in support of breastfeeding
 - Institute of Medicine put out recommendations to HHS in response to the Affordable Care Act re: breastfeeding support and equipment for women. By August of next year, insurance companies need to cover those services.
 - Most money coming out of obesity work right now
 - Watching to see where more money will be coming

- We suggest that in your states you contact your health department and find out if they submitted for the CTG grants, and if so if they're looking for funding for breastfeeding or CHW at all.
 - We'll watch what happens with the funding in IL and will share with the network.
- Jere asked sites to give examples of how their program is dealing with a particular aspect of federal funding.
 - Birth Circle (Pittsburgh): has incorporated an insurance reimbursement program through a relationship with health care providers: UPMC for YOU Medicaid plan.
 - We've had a CB Doula program since 2005, in a Federally Qualified Health Center (FQHC)
 - The contract for our funding arrangement with a medical assistance provider went into effect in 2006, and has changed a lot over the years.
 - Policy and Research Institute was looking at health issues, including those related to MCH, and our director was on that collaborative. Managed care organizations (MCO) were all at the table, and were wondering what was working; we started the program for the center patients, and they were seeing improved outcomes. A leader of one of the MCOs really got the cost savings, that if they funded the program for a year, it saved NICU admissions, etc.
 - The program is capped at \$100k a year and they will pay for members of their medical assistance program that they refer to us.
 - Their expectations are different than ours, they look at a much more medical model.
 - We reach a lot of women, have connections with health care practices; it's done a lot for our growth, and helped us to reach women all over the city.
 - Unresolved current challenge: information sharing—in order to receive payments, which are part of a special project fund, given at the discretion of the company President—they require us to input information into their system, which is very cumbersome.
 - Getting in touch with clients, getting the correct information, and getting information from some providers. Reporting is the most problematic.
 - They were funding us piece by piece—that was challenge. Now we have a package deal modeled on a private birth doula agency: a flat payment for 2 prenatal, 2 post partum and the birth.
 - GCAPP (Atlanta): we've had the ability to find funding in a number of different ways.
 - Jane Fonda is our Board Chair, and she funded the doula project as a whole at the beginning. Then we went after foundations, agency grants, community partners have grants we have applied for, and DCFS grants.
 - Five funding cycles funded the program last year. We also do fundraising, which supplements some funding. Families First, who we

partner with, began applying for different grants, they were able to pull in some money and fund a doula we couldn't fund anymore.

- The biggest challenge is having multiple deadlines and requirements for reporting.
 - We have a development grant writer that seeks smaller grants that can supplement funding.
 - We applied for the Promoting Safe and Stable Families grant; we partner with DCFS, which administers the grant to provide safe homes for children. Through the doula program, we provide early prevention of child abuse—we're in the home early to provide the doula services, referred by DCFS.
- Questions
 - Grand Rapids: is anyone available to share expertise on grant writing—what grants look like, etc.?
 - Go to the HC One website for funding opportunities; Google 'grant writing'; when proposals come out, call the agency that issues them, and ask when they are going to have an RFP open, who is going to be the program officer, let them know you need help, and start building that relationship.
 - Think of the focus of fundraising being about relationship building—success and failure with requests has more to do with the relationship with funders/collaborators and clarity of vision of the program.

Network Updates

- Jere announced the winners of the HC One breastfeeding photo contest:
 - 1st place: Angelica Martinez "Nicole rain"
 - 2nd place: group submission, "AJWS Milk Mamas for Global Justice"
 - 3rd place: Kate Neville, "Snack Time at Oz Park"
- Jere asked people to share updates on their sites:
 - Ellen Hamrick, BirthMatters: through the HRSA grant, we've gotten 3 CB Doulas in place. The first doula has been on 2 months and has 12 moms, the second doula started last week and has 5 moms, and the third doula started yesterday and has 2 moms.
 - Marie Hogarty, Gateway Northwest MCH Network: can talk to Laurie about grant writing, Jere will facilitate exchanging contact information.
 - Tia Demery, GCAPP: we loved the breastfeeding photos from the contest and the voting was a lot of fun.
- HC One is developing a conference call for doulas to network, CEUs will be involved—this will be launched soon. People can talk to Jere or Wandy for details.
- Jere made closing remarks and announced the next Network call, **Tuesday, November 8, 2011: 11:00am-12:30pm CST.**

Adjourn

12:30pm CST