

GRANT AWARD AGREEMENT 16-0143-SP-16

THIS GRANT AWARD AGREEMENT (“Agreement”) is made and entered by and between Missouri Foundation for Health (“Foundation”) and Affinia Healthcare (“Grantee”).

WHEREAS, Grantee has submitted a proposal to Foundation received on June 20, 2016 (the “Proposal”) to fund the project described therein (the “Project”); and

WHEREAS, Foundation agrees to make a grant to Grantee for \$183,427 to fund the Project, subject to the terms and conditions set forth herein (the “Grant”).

NOW, THEREFORE, the parties agree as follows:

1. Scope of Project. Grantee shall perform the Project as set forth in the Proposal, a copy of which is provided as Attachment A and which is incorporated by this reference as if fully recited herein. Any variations in the Project or the use of Grant funds from that described in the Proposal requires the advance express written approval of Foundation.
2. Project Period. The Project has been approved for a period of 24 months beginning November 1, 2016 and ending on October 31, 2018 (the “Project Period”).

Should Grantee desire to extend the duration of the Project Period, Grantee shall submit a written request to Foundation no later than 60 days prior to the Project Period end date. If Foundation approves the extension, the parties shall execute an amendment to this Agreement. An extension of the Project Period will not result in an increase in funding.

3. Expenditures. All expenditures of Grant funds by Grantee must be spent within the Project Period and must be consistent with the project budget as set forth in the Proposal (the “Project Budget”) and as approved by Foundation, a copy of which is attached hereto as Attachment B.

Any deviation from the Project Budget, such as under-spending or over-spending Grant funds requires prior written approval of Foundation and may require an amendment to this Agreement, at the discretion of Foundation. Deviations from the Project Budget are not authorized retroactively.

4. Interim and Final Reports. Grantee agrees to deliver to Foundation both detailed Financial Reports and Project Status Reports in a format acceptable to Foundation on the dates specified in the following schedule:

<u>Due Date of Financial Reports And Project Status Reports</u>	<u>For Period</u>
05/15/2017	11/01/16 - 04/30/17
11/15/2017	05/01/17 - 10/31/17
05/15/2018	11/01/17 - 04/31/18
11/30/2018	entire grant period 11/01/16 - 10/31/18

Financial Reports shall be detailed and shall compare actual expenses to the approved Project Budget on a line item basis. All line item expenditures must be supported by a narrative explaining the expenditures.

Project Status Reports shall include a narrative account of accomplishments resulting from the expenditure of Grant funds, and a description of progress made toward achieving the Project's objectives as stated in Attachment C, including quantifiable measures of such progress.

In addition to the foregoing, the Final Financial Report shall include appropriate documentation for the entire project period to support expenses as outlined below:

<u>Expense Category</u>	<u>Appropriate Documentation</u>
Salary	Form W-2 or Payroll Register
Consulting/Contracted	Paid Invoice
Equipment	Paid Invoice
Travel	Paid Invoice (airfare & hotel only)
Other Direct	See Budget Narrative in Attachment B

5. Disbursement Schedule. Foundation will disburse Grant funds according to the following schedule, contingent on receipt and approval of Interim and Final Reports:

<u>Amount</u>	<u>On or About</u>
\$31,233	11/2016
\$60,368	06/2017
\$41,327	12/2017
\$41,328	06/2018
\$9,171	12/2018

This Disbursement Schedule provides for a disbursement of five percent (5%) of Grant funds upon receipt and acceptance by Foundation of the Final Financial and Final Project Status Report (see section 4.).

The Foundation, in its sole discretion, reserves the right to alter the above disbursement schedule at any time and to impose such conditions upon disbursements as it may, in its discretion, deem necessary.

6. Records. Although the Grant funds need not be segregated, Grant funds and records of receipts and expenditures must be shown separately on Grantee's books for ease of reference and verification. Such records as well as copies of reports submitted to Foundation shall be retained by Grantee for at least four years following completion of the Project Period.
7. Foundation Right to Review and Evaluate. Foundation may review and conduct an evaluation of the Project funded by this Grant, which may include one or more visits from Foundation personnel to observe the Project, discuss the Project with Grantee's personnel and review financial and other non-patient records and materials connected with the activities funded by this Grant. All financial and other non-patient records relating to the

Project shall be made available at Grantee's regular place of business for inspection by Foundation personnel, or its designated representative, at reasonable times. Grantee will receive notice of Foundation's review findings and shall, at the discretion of Foundation, be given an opportunity to correct any non-compliance issues. If Grantee fails to correct any non-compliance issues within the time period specified by Foundation, Foundation may exercise its rights as set forth in section 13 of this Agreement.

8. Maintaining Tax Status. Grantee shall maintain the Internal Revenue Code tax status it represented to Foundation that it had when submitting the Proposal throughout the duration of the Project Period unless otherwise approved by Foundation. Grantee shall remain in good standing with the State of Missouri.
9. Title to Property Acquired with Grant Funds. Title to all tangible personal property, fixtures or equipment purchased with Foundation funds ("Grant Funded Property"), shall be vested in Grantee. However, Foundation shall have a purchase money security interest in the Grant Funded Property until the Final Project Status Report has been accepted by Foundation. Grant Funded Property must be used for carrying out the Project as set forth in the Proposal.
10. Foundation's Right to Return of Funds or Property. Any Foundation funds not used by Grantee for the purposes of the Project as approved in the Project Budget remain the property of Foundation and shall be promptly returned to Foundation at the conclusion of the Project Period. If at any time during a Grant Funded Property's useful life, a Grantee fails to use the Grant Funded Property for the purposes set forth in the Proposal, Grantee shall repay to Foundation an amount equal to the value for the entire useful life of the item minus that portion of the useful life of the Grant Funded Property during which it was used for the purposes of the Grant, utilizing the straight-line method of depreciation. If Grantee fails to make timely repayment of the appropriate portion of the Grant, Foundation may take possession of the Grant Funded Property. For this purpose, the useful life of the Grant Funded Property shall be determined by Foundation at the time of the execution of this Agreement, as set forth in Attachment D and attached hereto, if applicable. Nothing contained in this paragraph shall limit or prevent Foundation from taking legal action to seek repayment of unexpended Grant funds or Grant funds which were not applied in accordance with the terms of this Agreement.
11. Publicity. Grantee agrees that Foundation may include information about the grant award for the Project, including the name of the Grantee, a description of the Project and the amount of the Grant on Foundation's website and in reports, news releases, tax returns and other public disclosures. Any use of the Foundation's name or logos by the Grantee or its agents must be consistent with the guidelines available on Foundation's website. All publicity associated with the Project must clearly identify Foundation as a funding source.
12. Use of Project Results. If Grantee desires to publish the results of this Project, Foundation shall have a minimum of 15 days to review and comment upon the document before submission for publication. Foundation shall have a perpetual, irrevocable, royalty-free, nonexclusive, worldwide license to make, use, reproduce, distribute, display or make derivative works of all or any portion of the project results by any and all means and in any medium or format, now known or later developed.

13. Termination of Grant by Foundation. The Foundation, in its sole discretion, may terminate this Agreement and permanently withhold the payment of all or a portion of the Grant funds if: (a) Grantee's federal income tax status changes; or (b) Grantee dissolves.

The Foundation may have based its decision to fund this Project on the qualifications of specific individuals named by Grantee as responsible for carrying out Project work outlined herein. In the event these named individuals are no longer involved in completing the work for any reason, Foundation reserves the sole right to terminate the Project if it believes replacement staff proposed by Grantee cannot complete the Project in a timely fashion or in an acceptable manner.

The Foundation, in its sole discretion, may terminate this Agreement and permanently withhold the payment of all or a portion of the Grant funds if, after notice to the Grantee and opportunity to cure as provided in this paragraph of section 13: (a) Foundation is not satisfied with the progress toward achieving the objectives of the Project; (b) Foundation determines that the Grantee is incapable of satisfactorily completing the Project; or (c) Grantee fails to meet the conditions set forth in this Agreement and the Proposal. Termination for any of the foregoing reasons shall become operative upon written notice from Foundation to Grantee specifying the reasons for Foundation's intention to terminate ("MFH Notice"). The Grantee shall have 60 days from the date of the MFH Notice to engage in action which in the sole discretion of Foundation is determined to remedy the issues and concerns that Foundation has specified as the basis for Foundation's intention to terminate. The Foundation may terminate the Grant 90 days from the date of the MFH Notice if Foundation is not satisfied with the efforts of the Grantee.

If the Grant is terminated prior to the end of the Project Period, Grantee shall: (a) provide Foundation with a full accounting of the receipt and disbursement of Grant funds for the Project through the effective date of termination, and (b) repay to Foundation within 30 days of the effective date of termination: (i) all Grant funds which were not expended on or prior to the effective date of termination; and (ii) all Grant funds which were expended prior to the date of termination of the Grant but which expenditures relate to a phase of the Project allocable to a time period after the effective date of termination, and (iii) an amount equal to the value of any Grant Funded Property less the value of that portion of the Grant Funded Property's useful life during which it was used for the purposes of the Grant. The Foundation in its sole discretion may consider waiving all or a portion of its right to repayment as provided in (ii) and (iii) of the preceding sentence; and in making any such determination may give consideration to written documentation provided by the Grantee of binding written agreements entered into with parties unaffiliated with Grantee and to the Grantee's activities towards achieving the goals of the Project.

Nothing contained in this section shall limit or prevent Foundation from taking legal action to seek repayment of Grant funds already expended by Grantee which were not applied in accordance with the conditions in this Agreement.

14. Relationship of Parties. Foundation and Grantee agree that this Grant does not create a principal-agent relationship of any type between the parties and that Grantee will not, by act

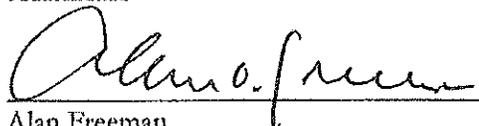
of omission or commission, foster any belief on the part of third parties that such relationship exists.

15. Indemnification. Foundation is a funding source only and does not participate in or direct any of the activities or services of Grantee. Accordingly, Grantee understands and agrees that Foundation, its directors, officers, employees and agents will not be liable for any of Grantee's contracts, torts, or other acts or omissions, or those by Grantee's directors, officers, members, employees or funded-activity participants. Grantee understands and agrees that Foundation's insurance policies or self-insurance plans do not extend to or protect Grantee nor Grantee's directors, officers, members, staff or funded-activity participants. Grantee understands and agrees that Foundation will not provide any legal defense for Grantee or any such person in the event of any claim against any or all of them. Unless prohibited by law, Grantee shall hold Foundation harmless from all liability, including but not limited to costs of defense, from the contracts, torts or other acts or omissions of the Grantee, its employees, directors, officers, employees or funded activity participants in any way connected with any activity of Grantee including but not limited to the funded activity.
16. Authority and Validity. Each individual executing this Agreement on behalf of Grantee warrants that he has full power and authority to execute this Agreement on behalf of such organization. Further, Grantee warrants that the board of directors of Grantee has taken all action required by law, Grantee's Articles of Incorporation and Bylaws or otherwise to authorize the execution and delivery of this Agreement and the consummation of the transactions contemplated herein. Grantee further warrants that this Agreement constitutes the valid and binding obligation of Grantee, enforceable in accordance with its terms.
17. Nondiscrimination. Grantee agrees that in providing services under the Project, Grantee will not discriminate on the basis of race, color, sex, national origin, religion, age, disability, sexual orientation, or veteran status either in its employment practices or in its policies and procedures concerning access to services, except in instances when the criteria is a stated condition of admission to the Project and is so disclosed in the Proposal.
18. No Guarantee of Future Funding. Provision of this Grant does not imply any future funding commitment by Foundation.
19. Lobbying. By accepting this grant, Grantee agrees that these funds will be used exclusively for exempt purposes described in Section 501(c)(3) and will not be used to carry on propaganda, or otherwise attempting to influence legislation (except as permitted under Section 501), or to participate in any political campaign on behalf of any candidate for office.
20. Entire Agreement. This Grant Award Agreement and all Attachments constitute the entire Agreement between the parties regarding the Project and supersede all previous related understandings or written or oral agreements between the parties.
21. Amendment. Unless otherwise permitted herein, any alteration in the terms of this Agreement must be in written form and must be signed by an authorized representative of both Foundation and Grantee.

22. Applicable Laws. The provisions of this Agreement shall be construed and enforced according to the laws of the State of Missouri. Any lawsuit, action or proceeding resulting from, or related to this Agreement, shall be commenced in a court of competent jurisdiction located in the City of St. Louis, Missouri or St. Louis County, Missouri.
23. Gender and Number. Masculine pronouns include the feminine as well as the neuter genders, and the singular shall include the plural, unless indicated otherwise by the context.
24. Headings. The paragraph headings contained herein are for convenience of reference only, and shall not be construed as defining or limiting the matter contained thereunder.
25. Preservation of Rights and Remedies. No right or remedy herein conferred upon or reserved to Foundation is intended to be exclusive of any other right or remedy, and every right and remedy shall, to the extent permitted by law, be cumulative and in addition to every other right and remedy given hereunder or now or hereafter existing at law or in equity. The assertion of any right or remedy by Foundation shall not prevent the concurrent assertion or employment of any other appropriate right or remedy. Foundation's waiver of any of its rights or remedies shall not operate to waive use of such right or remedy at a future time and shall not operate to waive use of any other rights or remedies available to Foundation.
26. Effective Date. This Agreement will become effective when signed by both parties. The date this Agreement is signed by the last party (as indicated by the date stated opposite that party's signature) will be deemed the date of this Agreement.

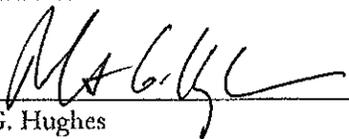
IN WITNESS WHEREOF, we have hereby executed this Agreement.

Affinia Healthcare

By: 
Alan Freeman
President and Chief Executive Officer

09/28/2016
Date

Missouri Foundation for Health

By: 
Robert G. Hughes
President and Chief Executive Officer

10/7/16
Date

Attachments to Agreement:

- A. Project Proposal
- B. Project Budget
- C. Project Plan
- D. Grant Funded Property (only if applicable)

Attachment A.

Project Proposal

Project Proposal follows this page.



Missouri Foundation
for Health
a catalyst for change

Proposal Cover Sheet

Date Received: 6/20/2016

Reference Number: 16-0143-SP

Organization Name:		Legal Name:	
Affinia Healthcare		Affinia Healthcare	
Address:		City:	State:
1717 Biddle		Saint Louis	MO
Zip:		63106-3454	
Phone:	Fax:	Website:	
(314) 814-8698	(314) 814-8720	http://affiniahealthcare.org/	
Application Primary Contact:	Title:	Telephone:	E-mail Address:
Mr. Michael Murphy	Grants Coordinator	(314) 814-8717	mmurphy@affiniahealthcare.org
Location of Applicant (county(ies)):		Geographic Area Served (county(ies)):	
Saint Louis Metropolitan Region\St. Louis City		Saint Louis Metropolitan Region\St. Louis City	
Project Title:			Project Duration (months):
Trauma-Informed Care Training			24

ONLINE APPLICATION ACKNOWLEDGEMENT

The Missouri Foundation for Health (Foundation) requires this form be completed and attached to your online application in order for the application to be processed.

Please indicate your awareness and acknowledgment of the online application being submitted to the Foundation by providing the information requested below.

Applicant Organization: Affinia Healthcare

Fiscal Agent Organization: N/A
(if different from applicant organization)

Project Title: Trauma-Informed Care Training

Applicant Organization:

Name and title of applicant organization's Authorized Signatory for Grant Award Agreement (if proposal is approved):

Veronica J. Richardson, Vice-President Corporate Compliance/Quality Improvement
(Print Name) (Title)

Name, title, and email address of the individual authorized to receive email notification when disbursements are made (if project is approved):

Janet Voss, Chief Financial Officer Janetv@affiniahealthcare.org
(Print Name) (Title) (email address)

Acknowledged by applicant organization's President/CEO or Executive Director:

Alan O. Freeman, President/Chief Executive Officer

Alan O. Freeman (Print Name) (Signature) (Title) (Date) 06/20/2016

Fiscal Agent Organization (if different from applicant organization):

Name and title of fiscal agent organization's Authorized Signatory for Grant Award Agreement (if proposal is approved):

(Print Name) (Title)

Name, title, and email address of the individual authorized to receive email notification when disbursements are made (if project is approved):

(Print Name) (Title) (email address)

Acknowledged by fiscal agent organization's President/CEO or Executive Director:

(Print Name) (Title)

(Signature) (Date)

A handwritten or electronic signature of the CEO or equivalent is required.

Application Narrative

A. Project Description

Project Summary: Affinia Healthcare proposes to reduce the detrimental health effects of toxic stress and trauma on patients and staff by teaching staff and selected community leaders how to recognize toxic stress and provide timely trauma-informed care. A Train the Trainer approach will be used with experts providing trauma-informed training to designated staff who become master trainers to teach remaining staff and community leaders. Training will be updated periodically; ensuring trauma-informed care becomes an ongoing organization-wide practice.

Identified Problem: Affinia Healthcare staff is ill-equipped to address stress/trauma in their own lives and therefore have difficulties in handling toxic stress/trauma faced by the majority of the patients they serve. This lack of training has meant many Affinia Healthcare patients with toxic stress or trauma are not being identified and/or treated in a timely manner. Toxic stress and trauma are recognized nationally as root causes to many chronic health problems and are especially prevalent in poor communities such as those served by Affinia Healthcare. According to a 2014 study on Toxic Stress from Harvard University, toxic stress is defined as, “strong, frequent, and/or prolonged adversity—such as physical or emotional abuse, chronic neglect, caregiver substance abuse or mental illness, exposure to violence, and/or the accumulated burdens of family economic hardship—without adequate adult support. This kind of prolonged activation of the stress response systems can disrupt the development of brain architecture and other organ systems, and increase the risk for stress-related disease and cognitive impairment, well into the adult years.” http://developingchild.harvard.edu/key_concepts/toxic_stress_response/ Locally, the St. Louis Regional Health Commission (RHC) has recognized toxic stress as being so pervasive in St. Louis that they started a program in 2014 called Alive and Well STL (St. Louis) to address the problem. On its web site, Alive and Well STL is described as “a community-wide effort focused on reducing the impact of toxic stress and trauma on our health and well-being”. The RHC

through its Alive and Well STL program provides trauma-related trainings in the community including supporting programs to help local health providers and schools adopt trauma-informed practices. The RHC will provide training for Affinia Healthcare in this project. The RHC has also been recruiting a group of ambassadors to serve as experts to the community to further communicate its message including providing information about Mental Health First Aid training as behavioral health problems are often a result of toxic stress and trauma. Alive and Well STL cites research from the Adverse Childhood Experiences (ACE) study that shows adverse events in childhood often lead to chronic conditions such as diabetes, heart disease, some types of cancer, depression, alcoholism and drug abuse in later life. The ACE study shows leading contributors to toxic stress and trauma include: poverty, violence, abuse and neglect, homelessness, parental abandonment, a parent with mental illness, a parent with an addiction, and a parent in prison. (<http://www.cdc.gov/violenceprevention/acestudy/index.html>). Affinia Healthcare is fully supportive of Alive and Well STL and recently signed on as a full member of its Health Learning Collaborative which among other things identifies trauma-informed care as a priority. This proposed project aligns perfectly with the Alive and Well model which states on their website: “To become Alive and Well, we need informed, supportive communities; service providers who have adopted trauma-informed practices; and trauma-informed mental health services. As we become trauma informed, we will become increasingly emotionally and physically well, enabling us to be Alive and Well in St. Louis.” Although it is impossible to determine the exact number of patients suffering from toxic stress and trauma, Affinia Healthcare knows from the demographics of its patient population that the majority patients are at least at risk. Last year Affinia Healthcare served 43,340 patients and over 92% of these patients had incomes at or below 100% of the federal poverty rate. The ACE study states poverty is not necessarily a determining factor for toxic stress but is considered a major risk factor that can exacerbate the effects of toxic stress. Many Affinia Healthcare patients not only live in poverty but face high crime; and violence is another leading contributor to toxic stress and trauma. According to the St. Louis City Department of Health’s *Public Health: Understanding Our Needs 2012 update*, nearly the entire service area of Affinia Healthcare was rated as being in the highest or mid-high rate of crimes against persons.

Contributors to toxic stress and trauma are most prevalent among African Americans in St. Louis City and over 70% of Affinia Healthcare's patient population identifies as African American. The For Sake of All Report, a joint project by Washington University and St. Louis University that was published in 2014, details the health and well-being of African Americans in St. Louis City and St. Louis County and compares data between whites and blacks. This report shows significantly higher rates of: chronic diseases, sexually transmitted diseases, poverty, unemployment and crime for blacks including a glaring disparity in homicide rates. The report shows whites in St. Louis City having a homicide rate of 3 per 100,000 people while blacks had a homicide rate of 36 per 100,000. As an organization Affinia Healthcare has committed to adopting trauma-informed care practices for all of its patients who may need it. This process can only begin, however, if staff is adequately trained.

Target Group: The target group in this project is the 399 employees (as of May 19, 2016) of Affinia Healthcare as well as at least 10 selected community leaders in the Affinia Healthcare service area (roughly the eastern half of St. Louis City) who will receive trauma-informed care training. Affinia Healthcare staff not only needs this training to better serve the patients but also need it to better cope with toxic stress and trauma in their own lives. Many of the Affinia Healthcare staff is at risk of toxic stress and trauma. Many live in high crime areas and 62% identify as African-American which according to the For Sake of All Report shows African American in St. Louis City are 2-4 times more likely than whites to have major contributors to toxic stress (such as poverty, violence, unemployment). In addition, many Affinia Healthcare staff often transfer the stress of patients they encounter to themselves. Once trained, Affinia Healthcare staff will be better equipped to identify and serve patients suffering from toxic stress.

Intervention: The intervention that will be used to address and reduce toxic stress and trauma occurring among patients served by Affinia Healthcare is a comprehensive training program for Affinia Healthcare staff as well as a few selected leaders in the community. A train the trainer approach will be used in which selected Affinia Healthcare staff become master trainers and in turn teach other staff and community leaders about the various components of trauma-informed care. The training used for this

intervention is the *Missouri Model: A Developmental Framework for Trauma-informed* that was developed by the Missouri Department of Mental Health and Partners in 2014. The Missouri Model will move staff through four different stages or “continuum of trauma” with an end result of the organization becoming Trauma-Informed. Staff will start out becoming Trauma Aware (learn what trauma is and how prevalent it is); move to become Trauma Sensitive (learn the principles of trauma-informed care such as safety, choice, collaboration, trustworthiness, and empowerment); become Trauma Responsive (begin changing practices and organizational culture to highlight the role of trauma); and finally become Trauma-Informed (making trauma responsive practices the organizational norm). Leading the effort in this project will be a Trauma-Informed Team made up of five Affinia Healthcare staff members. This team will receive three day training from RHC’s Alive and Well STL experts in the summer of 2016 before the start of the grant. This team will also receive a four hour, train the trainer instructional class by RHC and will be ready to go as master trainers when the project is ready to begin in October 2016. This team will also have input in the selection of a Project Coordinator who will be hired and trained within the first two months of the project. The Project Coordinator will be provide oversight of this proposed project, organize and schedule trauma-informed trainings, track and record data, prepare program reports, and become part of the Trauma-Informed Team including being a master trainer. By the end of the first six months of the project, the number of master trainers trained will be increased from five to 1-15 trainers. The additional master trainers will include a cross-section of staff from all Affinia Healthcare locations. Representation will include employees from: front-line staff, Human Resources, mid-management, security, behavioral health staff, and senior team members. There will also be representation from the community including patients and Affinia Healthcare board members. RHC experts will provide training for the additional master trainers and will be available for consultation throughout the project via the Health Learning Collaborative. Once trained, the master trainers will begin training of the rest of Affinia Healthcare staff and a few key community leaders. Training for the rest of the staff and key community leaders will be conducted over a period of one year beginning no later than the sixth month of the project and ending 18 months into the project. Trauma-Informed training will be

done during new employee orientation beginning in the second year of the project. Trainings will be provided at meetings and other venues with updates provided by master trainers. Community forums will be scheduled as needed by the Project Coordinator for master trainers to teach community leaders

Desired Results: All Affinia Healthcare staff (399 employees) and at least ten (10) selected community leaders will receive training to enable them to understand toxic stress and ways to incorporate trauma informed care in the daily care of patients. Initial training will be completed for all staff within 18 months of the project start with subsequent updates being done as needed. Staff will be assessed on their ability to recognize symptoms of toxic stress and trauma and become sensitive to patient concerns. The trauma-informed staff would become sensitive enough to know what key questions to ask in a non-judgmental manner to determine if toxic stress could be a contributing factor to unhealthy or disruptive behaviors by patients. The staff would be trauma responsive enough to know when and where to refer patients who may need additional services to help them better cope with their problems. Staff will complete resilience questionnaires to measure their capacity to adapt positively to toxic stress and trauma in their own lives. Staff will assess concerns of patients that will be documented in electronic medical records (EMR). Patients can bring up issues they experience at the various health centers that they feel are contributing to their stress levels. Examples could include: long waits for services, safety concerns, quality of care received, customer service, or financial issues such as co-payments. A referral and assistance process will be established for patients and staff who suffer from toxic stress and trauma within the first six months of the grant. As they are trained, staff will be instructed to funnel referrals through the Affinia behavioral health (BH) staff who will determine what type of service is needed. Referrals could result in consultation and counseling by BH, assignment to the internal substance abuse or other programs, enrollment in group sessions/classes, and scheduled appointments with outside agencies. BH staff will provide data on referrals to the Project coordinator who will record and track this data. Data on these incidents will be provided to the Project Coordinator for tracking. As result of this project it is expected that referrals made by staff to address toxic stress/trauma will increase by 20% over current referrals.

Another desired result of this project is the enhancement of internal services that would benefit patients suffering from toxic stress/trauma. This would include the establishment of safe areas at all Affinia health centers by the end of the project. It would also include an expansion of the Mind Body skills groups. Mind Body Skills is an evidenced based training that helps individuals cope with stress and trauma in their lives. Affinia Healthcare currently has two staff members trained by the Center for Mind Body Medicine to implement this training. By the end of the project, it is expected that at least 50 patients with toxic stress will have been enrolled and completed these group sessions each year.

Evaluation: A learning assessment process will be established for the staff and selected community members to identify organizational involvement along the trauma-informed continuum. The learning assessments will assess staff knowledge of toxic stress and trauma that is faced by the patients they serve as well as stress/trauma in their own lives. It is expected by the end of the first 18 months of the project all Affinia Healthcare staff and at least 10 community leaders will have completed trauma-informed training and will be evaluated on their progress through the continuum of trauma-informed care knowledge. In early 2015, Affinia Healthcare employees received a survey to measure staff knowledge about trauma and toxic stress and to determine where they were on the continuum of trauma. The survey found that the majority of staff was not even at the level of being trauma aware. By the end of this project, at least 80% of staff will have achieved trauma-informed status. The assessment process for this grant will measure the movement of staff along the continuum of trauma as training progresses. By the end of the project period, Trauma-informed care will become an established practice of Affinia Healthcare. Knowledge of staff and selected community leaders will be measured by pre and post tests with remediation provided as needed by master trainers. Trauma informed care training will also become part of Affinia Healthcare employee annual training requirements. For Affinia Healthcare staff who deals directly with patients, trauma-informed care will become a component of their annual evaluations starting the second year of the project. Medical providers will be required to document in the EMR that they asked additional questions of patients to determine if patient was suffering from toxic stress and if so document what was done (such as referrals to behavioral health) to address patient toxic stress and

trauma. Referrals will be increased and a staff assistance program will be created that includes establishing safe areas at each health center site by the end of the project period.

Partners:

Partner Organization Name	Role, Key Skills & Resources
Regional Health Commission (RHC)	Will provide initial trauma-informed care training and then ongoing consultation and updates to Affinia Master Trainers through its Alive and Well STL program utilizing the Missouri Model. The trainers provided by the RHC are all experts in the implementation of the Missouri Model for Trauma-Informed Care training.
Local law enforcement, politicians, civic leaders, leaders of social service agencies, church leaders, leadership from area schools and housing developments, and other community leaders	Will be the recipients of trauma-informed training provided by Affinia Healthcare Master Trainers. These collaborative partners are stakeholders in the Affinia Healthcare service area which roughly encompasses the eastern half of St. Louis City. These stakeholders will also provide input regarding trauma and toxic stress that they have encountered in the community.

B. Organizational Profile

Affinia Healthcare is the best organization to lead this project because of its experience, expertise, and past performance in providing integrated health services to an indigent population that is at greatest risk for developing toxic stress and trauma. The integrated health services at Affinia Healthcare include providing primary health care and prevention for medical, dental, and behavioral health needs. Affinia Healthcare has a vibrant behavioral health program and this year expanded its substance abuse component by adding staff to fight drug and alcohol addictions which are often a result of toxic stress and trauma.

The mission of Affinia Healthcare is *“to provide high quality health care and exceptional service, while promoting healthy lifestyles”*. Affinia Healthcare’s vision is: *“Affinia Healthcare is the patient-centered health home of choice in St. Louis, and is recognized locally and nationally as a dynamic and transformative leader among community health systems.”* The proposed project idea aligns perfectly with the above mission and vision statements in that it would ensure its staff receives the comprehensive training so that they can more readily understand the stresses and trauma of the patients they care for. Affinia Healthcare provides comprehensive primary and preventive care including special programs such as: Urgent care, the Children’s Developmental Center (for kids with emotional and developmental health issues), and mobile medical and dental vans that travel to school and day care centers throughout St. Louis to deliver health screenings. Because of the patients population served, Affinia Healthcare staff deals with ramifications of toxic stress on a daily basis. The proposed training will help them make the connection between toxic stress/trauma and health conditions as well as compliance to medical regimens. Key people responsible for managing this project include the project coordinator, master trainers, as well as selected: behavioral health staff, senior staff, and managers. Many of the staff designated to be master trainers will be among those selected staff. There is no pending or secured funding for this project other than a commitment by the organization for its staff to be trauma-informed. Once staff is trained, trauma-informed care will be implemented and become an organization-wide practice. In-kind services provided by Affinia Healthcare to this project include behavioral health services from program referrals such as those made for substance abuse. Other in-kind contributions to this project include: the training provided by master trainers who are donating their time to training other staff including providing ongoing annual updates, and the initial training provided through new employee orientation that ensures sustainability after project funding ends. Affinia Healthcare has made becoming a trauma-informed organization a part of its new Strategic Initiative and recently became a full member of the Alive and Well STL Trauma-Informed Health Learning Collaborative. This collaborative began in June 2016 and includes a partnership between Alive and Well STL and the Missouri Department of Mental Health. It is structured as an 18 month project for health entities in the St. Louis Region.



**Health Learning Collaborative
Full Member Commitment Form**

As a full member of the Alive and Well STL Health Learning Collaborative, I commit Affinia Healthcare will fully participate in the objectives of the learning collaborative and will fulfill the obligations identified below. In addition to fulfilling the obligations listed below, Affinia commits to ensuring the values, vision and mission of the Affinia align with the core values of trauma-informed care:

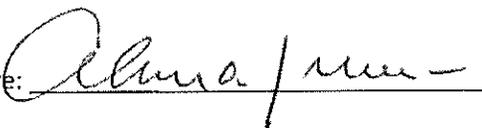
- Safety
- Trustworthiness
- Collaboration
- Choice and Empowerment
- Responsiveness
- Cultural Humility

Leadership Commitment

- Identify trauma-informed care as a priority for the organization and include principles in strategic planning efforts.
- Designate a key staff member to lead the change process.
- Support an organizational assessment, and the development and implementation of an action plan.
- Support and encourage policy and procedure changes that align with trauma-informed practices, principles and knowledge.
- Participate in the planning sessions, trainings and other meetings, as needed.

Organization Commitment

- Designate a Steering Oversight Committee that meets monthly and includes staff from all levels and patients.
- Commit to having ALL staff trained in trauma awareness.
- Attend quarterly roundtable learning events offered by Alive and Well STL.
- Participate in all offered consultation.
- Identify evaluation metrics to track and share outcomes with Alive and Well STL.
- Share best practices, as requested.
- Maintain open communication with Alive and Well STL.

Signature: 

Printed Name: Alan O. Freeman

Title: CEO/President

Date: May 23, 2016

Attachment B.

Project Budget

Project Budget follows this page.

Organization:	Affinia Healthcare							
Project Title:	Trauma-Informed Care Training							
Reference #:	16-0143-SP							
		TOTAL PROJECT BUDGET			FUNDING REQUESTED FROM FOUNDATION			
	Year 1	Year 2	Total	Year 1	Year 2	Total		
Net Revenue								
Enter Type of Revenue	0	0	0	0	0	0		
Total Net Revenue	0	0	0	0	0	0		
Expense								
Salary	165,000	166,200	331,200	60,000	61,200	121,200		
Benefits & Payroll Taxes	41,250	41,550	82,800	15,000	15,300	30,300		
Total Compensation	206,250	207,750	414,000	75,000	76,500	151,500		
Consulting/Contract Services	0	0	0	0	0	0		
Equipment	1,500	0	1,500	1,500	0	1,500		
Travel	2,500	2,500	5,000	2,126	2,126	4,252		
Other Direct Expense	1,500	1,500	3,000	1,725	1,725	3,450		
Sub-total	211,750	211,750	423,500	80,351	80,351	160,702		
Indirect Expense	30,938	31,163	62,101	11,250	11,475	22,725		
Total Expense	242,688	242,913	485,601	91,601	91,826	183,427		
Net Project Cost	-242,688	-242,913	-485,601	-91,601	-91,826	-183,427		

Affinia Healthcare
Budget Narrative and Spreadsheet
16-0143-SP

Expense

Salary:

Position	Annual Salary	FTE	Year 1	Year 2	Total
Project Coordinator	\$ 60,000	1.00	\$ 60,000	\$ 61,200	\$ 121,200
Total Budget	\$ 60,000		\$ 60,000	\$ 61,200	\$ 121,200

Budget Justification:

Affinia is requiring a licensed professional such as an RN or LCSW to collect and coordinate data as well become a Master Trainer for the project. The Project Coordinator will be responsible for providing oversight of the proposed project. The Project Coordinator will become a Master Trainer trained in trauma-informed practices by Alive and Well STL and will join five other Affinia Healthcare staff to become part of the organization's Trauma-Informed Team. The Project Coordinator will be responsible for scheduling the training of staff at various Affinia Healthcare locations and prioritizing those trainings in consultation with other Team members. The Project Coordinator will also organize and schedule trainings of community leaders and act as the point person for communication between Affinia Healthcare and community organizations. Duties will include identifying and contacting potential leaders for training and working with the Team to determine which community leaders will be trained. The Project Coordinator will monitor and track both staff and community leader patient participation in training classes and administer/ track pre and post tests to measure knowledge of trauma-informed care practices. The Project Coordinator will be responsible for providing Affinia Human Resources with results of staff training results and track staff results including the number and sites trained in the aggregate on a monthly basis. The Project Coordinator will also track the number of trainings in the community and the number of community leaders trained and be responsible for preparing reports of any community trainings. The Project Coordinator will also keep a bank of stories to show the efficacy of trauma informed care to be embedded in the health care system and to be shared with the community.

Benefits and Payroll Taxes:

Position	Annual Salary	FTE	Rate	Year 1	Year 2	Total
Project Coordinator	\$ 60,000	1.0	0.2500	\$ 15,000	\$ 15,300	\$30,300
Total Budget	\$ 60,000	\$ 1	\$ 0	\$ 15,000	\$ 15,300	\$30,300

Equipment:

Equipment	Quantity	Unit Cost	Year 1	Year 2	Total
Laptop	1	\$ 1,500	\$ 1,500	\$ -	\$ 1,500
Total			\$ 1,500	\$ -	\$ 1,500

Budget Justification:

This request includes the cost of a laptop for the Project Coordinator. The laptop will be used to enter and track data collected for the program, and serve a communication tool.

Travel:Local Travel:

340 miles per year x \$0.54 per mile = \$184

Total: \$184 (Year 1 & 2)

Conference-Children's Institute Trauma-Informed Care Conference:

Registration: \$125 per person x 3 staff = \$ 375

Lodging: \$159 per night x 1 night x 3 staff= \$475

Airfare: \$300 per roundtrip x 1 trip x 3 staff= \$900

Per Diem: \$64 per day x 1 day x 3 staff = \$192

Total: \$1,942 (Year 1 & 2)

Travel	Year 1	Year 2	Total
Local Travel	\$ 184	\$ 184	\$ 368
Conference	\$ 1,942	\$ 1,942	\$ 3,884
Total	\$ 2,126	\$ 2,126	\$ 4,252

Budget Justification:

Local Travel mileage being requested is for the Project Coordinator to travel to Affina Healthcare Sites to conduct staff trainings, attend Alive and Well STL trainings, and to conduct at least two community trainings per year.

Other Direct Expense:Education/Training Expense:

Supplies (pens, paper, training packets, etc.): 210 people x \$7.50 per person = \$1,575

Refreshments (10 community events): 15 people x \$10 per person = \$150

Total: \$1,725 (Year 1 & 2)

Other Direct	Year 1	Year 2	Total
Education/Training Expense	\$ 1,725	\$ 1,725	\$ 3,450
Total	\$ 1,725	\$ 1,725	\$ 3,450

Indirect Expense:

Indirect Expense		Indirect Rate	Year 1	Year 2	Total
Compensation Year 1	\$ 75,000	0.15	\$ 11,250		\$ 11,250
Compensation Year 2	\$ 76,500	0.15		\$ 11,475	\$ 11,475
Total			\$ 11,250	\$ 11,475	\$ 22,725

Attachment C.

Project Plan

Project Plan follows this page

Project Plan

Applicant Name and Project Title: Affinia Healthcare: Trauma-Informed Care Training

Goal # 1: Affinia Healthcare will become a trauma-informed organization with trauma-informed care becoming an ongoing and established organization-wide practice.

Participant Outcome Objective # 1: By the end of the two year project period, all current Affinia Healthcare staff will have completed the Missouri Model of trauma-informed training.

Agency Activity	Key Indicators of Participant Success	Responsibility	Timeline
A special trauma-informed care team comprised of five (5) selected Affinia Healthcare staff will become master trainers.	The trauma team will be trained by Alive and Well STL experts in the Missouri model enabling them to become master trainers to teach other Affinia staff and community leaders how to become trauma informed.	Alive and Well STL experts	Summer of 2016 before the start of the grant
The trauma team will train 5-10 Affinia staff to become additional master trainers	Within six months of the start of the project, 5-10 additional staff will become master trainers and begin training line staff in the Missouri model of trauma-informed care.	Trauma Team in consultation with Alive and Well STL experts.	Beginning the second quarter of the project and being completed within the first six months of the project
Remainder of the Affinia Healthcare staff (399 as of May 2016) will be trained.	Training of Affinia staff will begin approximately six months after the start of the project with about 30 staff being trained each month until all staff is trained. Updates will be provided thereafter as needed.	Master Trainers in consultation with Alive and Well STL experts.	Training will begin within the first six months of the project and be completed within 18 months of the start of the project

Participant Outcome Objective # 2: By the end of the project period, at least 10 community leaders will have completed trauma-informed training.

Agency Activity	Key Indicators of Participant Success	Responsibility	Timeline
Community leaders from the eastern half of St. Louis city will be recruited to become trained in trauma-informed care. These leaders will be recruited from law enforcement, social service agencies, civic and political organizations, area schools, etc.	Project Coordinator will begin recruiting 10 community leaders the last 3 months of the first year of the project and schedule monthly community forums in year 2 of the project until all recruited community leaders complete the trauma-informed care training.	Project Coordinator will recruit, schedule and track community members to be trained through a series of community forums with master trainers assigned	Will be completed during the second year of the project. Evaluation of the project will be completed in the last month of the project.

		to complete the trainings.	
<p>Participant Outcome Objective # 3: By the end of the project period, a comprehensive referral system will in place at all four Affinia Health care sites to address toxic stress and trauma. This system will be established through the Affinia Behavioral Health Program with the number of referrals made for toxic stress/trauma increasing by at least 20 percent over the previous year.</p>			
<p>Agency Activity</p> <p>Each of the four (4) Affinia behavioral health specialists will receive training on how to identify toxic stress/trauma within six months of the start of the project.</p>	<p>Key Indicators of Participant Success</p> <p>Each of the four Affinia behavioral health specialists will show through pre and post tests thorough understanding of trauma informed care and will be able to identify toxic stress and trauma in their patients.</p>	<p>Responsibility</p> <p>Project Coordinator will coordinate trainings with the Affinia Director of Mental Health Services.</p>	<p>Timeline</p> <p>Within six months of the start of the project.</p>
<p>Referral criteria to identify patients with toxic stress/trauma will be established by the Affinia behavioral health staff for other staff to make such referrals.</p>	<p>Referrals to behavioral health staff for patients with toxic stress/trauma will begin no later than the start of the second year of the project and continue to be tracked monthly thereafter.</p>	<p>Medical and dental staff will make referrals to behavioral health staff that will be responsible for tracking such referrals.</p>	<p>Beginning no later than the start of the second year of the project.</p>
<p>Participant Outcome Objective # 4: By the end of the project period, safe areas will be established at each of the Affinia Healthcare four health center sites.</p>			
<p>Agency Activity</p> <p>Affinia senior staff (8 vice-presidents) will approve the establishment of safe rooms at each of the Affinia Healthcare four health center sites.</p>	<p>Key Indicators of Participant Success</p> <p>Affinia senior staff will meet quarterly with the Affinia Director of Facilities and health center managers of each Affinia site to discuss locations for safe areas at each of the four health center sites and continue meeting until sites are chosen.</p>	<p>Responsibility</p> <p>Affinia Healthcare senior staff in conjunction with the Affinia Director of Facilities and health center managers of each site.</p>	<p>Timeline</p> <p>Quarterly meetings beginning the second quarter of the project period until safe rooms are established at each health center.</p>

Participant Outcome Objective # 5: By the end of the project period, at least 50 patients will be enrolled into Mind Body Skills groups annually.

Agency Activity	Key Indicators of Participant Success	Responsibility	Timeline
Patients will be enrolled into Mind Body Medicine skills groups based on recommendations of the Affinia Health Care Behavioral Health staff.	At least 80% of patients will demonstrate knowledge and skills of Mind Body Medicine through pre and post test evaluations and other tests	Two Affinia Healthcare staff that are certified by the Center for Mind Body Medicine	12-13 Affinia patients will receive Mind Body training each quarter. 50 patients annually.