

Exploring Clinics that Serve the Uninsured

**Learning from the Successful Clinics as to
What Works, What Doesn't, and What
We as Medical Students Can Do to Help**

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Introduction

Approximately 45 million people in the United States do not have health insurance. Think for a moment just how big of a number 45,000,000 really is.

45,000,000

To put this astronomical number into perspective, consider the following:

- If all uninsured people joined together to form a state, it would be the most populous in the United States. California, with a population of 36.5 million people, would rank number 2.
- The entire U.S. population is estimated to be 301,000,000. Therefore, approximately 13% of the United States' population does not have health insurance.
- If we were to take a moment to recognize every person without health insurance each year, we would need to do so at a rate faster than one per second.
- If every uninsured person in America were to lay down in a line, at an average height of 1.78 meters, the line would travel around the circumference of the world nearly two complete times.

That such a large number of people can be uninsured in the most prosperous country on this planet is shocking, especially a land where the government promises each citizen the right to “life, liberty, and the pursuit of happiness.” Not having health insurance seemingly jeopardizes one's right to life, and it certainly compromises one's ability to pursue happiness.

But this is not a problem for the uninsured. Instead, it is a problem for the insured and for society as a whole. For when the uninsured have an illness that progresses beyond what is bearable, they go to the emergency room to get treatment, the point at which it is most costly to treat, receiving services which are ultimately paid for by those who have health insurance and by taxes. This also results in long wait times for the insured and uninsured alike. Rather than being able to have more minor illnesses treated by primary care physicians early on, the uninsured, who cannot afford to go to such

primary care physicians without having health insurance, instead let such conditions go untreated. Society as a whole loses, as when illnesses progress people are unable to work or search for employment and their productivity declines.

No, not having insurance is not a problem for the uninsured – for them it is an absolute disaster. Imagine having a major, chronic illness and knowing that you cannot go anywhere to receive care. Imagine breaking a leg, knowing that going to the hospital to have it treated would result in a mountain of debt that would cripple you financially. Then visualize your alternative, which is to not go in at all, to suffer the horrendous pain, while knowing that not receiving treatment could cripple you physically. What do you do?

“If you are trying to help a clinic, make sure that you are working WITH them, assessing their needs and constantly checking in to see how things are going. Some clinics will need money but have plenty of medical supplies from pharmaceutical representatives. Some will need a few extra hands, while others will find this burdensome. Sit down with the clinic director and really figure out what their needs are and how you can best help.”

– Jessica Sedley
Second Year Medical Student
University of Michigan

Thank goodness, then, for public goodwill and for those who run, work and volunteer at medical clinics that serve the un- and underinsured. These saviors are truly amazing people – they realize the need their community faces and selflessly fulfill that role by helping such clinics stay open so that the un- and underinsured can receive the medical care they so desperately need. While it is true that no hospital can turn someone away for not having health insurance, so is it also true that when you go to the ER you are not in a very good spot – it is much better to treat the condition early on with a primary care physician than with a defibrillator at the point of no return, or worse, by settling the score with the mortuary.

As medical students, we have a lot of energy and are perhaps at the most altruistic point of our careers. We recognize this great problem that exists and needs addressing, and we want to help. All we need to help is a little information and a little inertia to get us started.

This report is designed to provide my fellow medical students with that inertia, and a direction in which to channel altruistic energies by exploring how clinics that serve the un- and underinsured operate. By learning how clinics receive funding, get supplies, and pay their bills, it is my hope that medical students will look into nearby clinics in their area, and discover ways in which they can help. I have collected this information from such clinics around the country and from a medical student who has already traveled down the path of providing assistance to a clinic that serves the uninsured. It is my hope to make a reference item that students can refer to for tips and tricks when they wish to help such clinics, and that this be a collective effort. But note that while I offer my suggestions as to what students can do to help, it is of course **extremely important to confirm everything you want to do with the clinic you wish you help before actually starting, as each clinic's needs are vastly different!**

Finally, it is my hope that this living report serves as an introduction to clinics that serve the un- and underinsured, and that it will continue to be modified by fellow medical students as more people report back as to what works for them and the clinic they are assisting. If you would like to contribute to this report, please feel free to do so! Email me at aheling@umich.edu with significant contributions and I will add your name to the list of authors.

Outline of Report

This report is designed to present basic information about how clinics that serve the uninsured are run, including finances (fundraising, grants, and donations), administration, medicine and supplies, and staff. In addition, I also offer suggestions as to what medical students can do to help. Jessica Sedley, a second year medical student at the University of Michigan, spent a year working with such a clinic by relentlessly raising funds, establishing a volunteer system, creating an intern position for undergraduate students, and helping connect the clinic to other resources in the many schools within the university. Her work has included raising tens of thousands of dollars for a clinic, saving it from going under in a time of crisis, as well as having the clinic featured in newspaper articles and on television. I have included her insights and experiences throughout this report as well.

Overview of Clinics

Overview of Methods and Data

My initial goal was to obtain information from about twenty clinics that serve the un- and underinsured. I sent a survey out to numerous such clinics, asking for information about the administration, finances, services offered, and patient demographics, among other items, and I also retrieved available information from clinic websites. I received responses from nine wonderful clinics, and included online information from two others.

For the most part in this report, I elected not to present specific information from each and every clinic. Instead, I have grouped clinics based on the size of the city they serve, and have averaged their information as groups. I chose to present the information in this manner because each clinic is so different – the objectives, services offered, patients, healthcare providers, and administration are all unique to each clinic, and comparing them directly could be comparing apples to oranges. As such, I did not want to unintentionally diminish any clinics’ hard work and effort by directly or indirectly pointing out differences, when the goals and capabilities of each clinic are so vastly different. My goal instead was to point out what works and what does not for clinics in general.

On the other hand, I wanted a means to provide some form of comparison, as there are unique difficulties facing clinics located in both large cities and rural areas. I also wanted to highlight strengths of certain clinics for others to see, as each clinic that responded really excelled in certain categories. In all, I tried striking a balance in my wanting to share information but not wanting to single any clinic out.

Basic Information About the Participating Clinics

The clinics that participated in this report represent a realistic sample. There are clinics from all regions of the U.S., from the largest city in the country to some of the more rural areas. Some clinics are independently run, while others are run by medical students, some are closely affiliated with universities and hospitals and others with churches. Some charge patients on a sliding scale if they qualify, others do not charge at all – some see tens of thousands of patients a year, others see hundreds. Some budgets are in the millions, while others are in the tens of thousands. It just goes to show that there are caring and devoted people all around the country, and that people “make it work” by whatever means they can!

Below is a chart with some basic information from each participating clinic – I’ll go into more detail later in this report:

Name (# of Clinics), Location	Website	Average # of Patients Seen per Clinic per Year	Common Purposes for Visit
<i>Clinics Located in Small Cities (<50,000 people)</i>			
HealthLink Medical Center (1) Southampton PA	http://www.healthlinkmedical.org/	4,000 per clinic (Range: 1,500-6,500 per year)	Diabetes, hypertension, cardiac disease, general medical care, edema, reproductive health care, mental health
The Corner Health Center (1) Ypsilanti, MI	http://www.cornerhealth.org/		
Viola Startzman Free Clinic (1) Wooster, OH	http://www.startzmanfreeclinic.org		
Whitmore Lake Health Clinic (1) Whitmore Lake, MI	N/A		
<i>Clinics Located in Medium Cities (50,000-500,000 people)</i>			
Health Access Washoe County (3) Reno, NV	http://www.hawcinc.org/	10,000 per clinic (Range: 500-16,000 per clinic per year)	Diabetes, hypertension, asthma, COPD, general medical care, serious and persistent mental illness, depression, cardiac disease, dental disease
Mission Medical Clinic (1) Colorado Springs, CO	http://missionmedicalclinic.org/		
Shelter Association of Washtenaw County (1) Ann Arbor, MI	http://www.annarborshelter.org/index.cfm		
<i>Clinics Located in Large Cities (>500,000 people)</i>			
Christ Community Health Services (4) Memphis, TN	http://www.christcommunityhealth.org/home.htm	8,000 per clinic (Range: 1,200-24,000 per clinic per year)	Diabetes, hypertension, asthma, COPD, HIV/AIDS, urinary tract infections, upper respiratory infections, preventive care, vaccines, nutrition
NYC Free Clinic (1) New York City, NY	http://www.med.nyu.edu/nycfreeclinic/		
San Francisco Free Clinic (1) San Francisco, CA	http://www.sffc.org/		
Volunteers in Medicine, Jacksonville (1) Jacksonville, FL	http://www.vim-jax.org/		

All of the participating clinics are 501(c)(3) non-profit organizations. This of course makes sense: serving the uninsured is not a profitable business! Being a non-profit allows for tax exemptions, the ability to receive funds from government and private foundations, and personal liability protection. A few clinics are also Federally Qualified Health Centers (FQHCs), allowing for increased reimbursement from government insurance policies like Medicare and Medicaid and allowing clinics to receive government grant money for the uninsured.

Clinics vary in the number of patients they see each year. Rural clinics that participated tend to see a lot fewer patients, while more urban areas see more. There is

quite a bit of variability in each population category, again showing that there is great variability into the capabilities, communities served, and resources generated by each unique clinic. The winner of the numbers game is Christ Community Health Services, which sees approximately 24,000 patients per each of its four clinics per year – a truly amazing number of patients served.

The annual budget for each clinic is also highly variable. Some clinics have budgets in the millions, while others can get away with only spending in the tens of thousands of dollars. Services offered, the number of patients seen, the percentage and number of physicians and staff who volunteer rather than who are paid, funding sources, and costs related to building fees and supplies all play their part. This will be explored in greater detail in a section dealing with finances, and I will offer suggestions as to how students may be able to help increase income and lower expenses.

What Students Can Do to Help

The medical clinic that you are working with is no doubt is already a certified 501(c)(3) non-profit organization. But if you are helping a clinic start from the ground up, making the clinic a non-profit organization is the first place to start. For questions about how to become certified, and what the benefits are, head to the International Revenue Service's (IRS) website:

Help your clinic be properly designated by:

- Ensuring it is a 501(c)(3) non-profit organization
- Seeing if it is eligible to be a FQHC-designated clinic

IRS:

<http://www.irs.gov/charities/charitable/index.html>

The Foundation Group also offers a webpage that answers many questions related to non-profit organizations:

Foundation Group:

<http://www.foundationgroup.com/faqs.html>

But did you know there is a way to increase government reimbursement for insurance payments? If your clinic is located in a non-urbanized area (as defined by the U.S. Census Bureau), provides primary healthcare to residents, serves underserved populations, operates on a sliding fee scale, and meets a few other standards, it can qualify to become a Federally Qualified Health Center (FQHC), allowing for higher government reimbursements of insurance such as Medicare and Medicaid and allowing for grant money for the uninsured. In addition, becoming a FQHC eliminates malpractice premiums for practicing physicians (but does not cover student volunteers!), helping to

lower costs further. For more information on how to become an FQHC, and what the requirements are, go to these websites:

Centers for Medicare and Medicaid Services (CMS):

<http://www.cms.hhs.gov/center/fqhc.asp>

Rural Assistance Center:

http://www.raonline.org/info_guides/clinics/fqhc.php

Money, Money, Money

At the end of the day, all hospitals and private clinics need to balance their budgets, and it is no exception for clinics that work with the un- and underinsured. Profit is not the driving factor that keeps these clinics running, so money can be harder to come by. Unlike most health clinics, patients who utilize clinic services, and who pay out of pocket or through their health insurance, comprise less of the clinics' income. Instead, fundraisers and donations and grants by individuals, corporations, non-profits, and the government play bigger roles.

While there is an extremely generous spirit in the American public to donate to worthy causes, raising money is by no means easy. It is a time consuming process researching and applying for grants, holding fundraisers, and seeking donations – time that is already spent by administrators running the clinic itself. In addition, funding sources are anything but constant, as grants must be renewed year by year. The government, corporations, non-profits, and individuals may not be as willing, or are unable, to contribute from one year to the next. There is therefore large variability in yearly clinic funding. It is no wonder, then, that receiving constant funding is one of the greatest challenges that such clinics face, and provides an excellent opportunity for students to provide assistance.

Below is a table showing some basic financial information for the participating clinics. Different clinics require different funding, of course, based on the number of staff who are employed, services offered, how their medicine and supplies are obtained, and whether the building they use is greatly subsidized or not. Some clinics find fundraising to be a lucrative adventure, helping to raise as much as 16% of total income, while others do not hold any. Some clinics are grant writing machines, some excel at receiving money from corporations, and others are adept at soliciting money from individuals. This variability offers good news: it means there are multiple avenues in which clinics can receive funding, and that each clinic chooses the path it feels most comfortable or skilled at.

Expenses fluctuate widely for each clinic, depending on variables such as how many staff members volunteer versus are employed, whether the clinic building is owned

or rented, the amount of supplies purchased, etc. But for many clinics, employee salaries and benefits are the number one expense, adding up to approximately 75% of total expenses. Medicines and supplies are generally much less costly, typically costing clinics only a quarter or less the amount of salaries and benefits.

Name of Clinic	Average Yearly Operating Budget & Major Expenses	% Raised by Patient Payments, incl. Insurance	% Raised by Grants	% Raised by Fund-raisers	% Raised by Donations
Clinics Located in a Small City (<50,000 people)					
HealthLink Medical Center	\$1,300,000 (Range: \$900,000 - 2,000,000) <i>Major expense: Employee salaries / benefits</i>	0-90%	0-33%	5-16%	5-16%
The Corner Health Clinic					
Viola Startzman Free Clinic					
Whitmore Lake Health Clinic					
Clinics Located in a Medium City (50,000-500,000 people)					
Health Access Washoe County	>\$2,000,000 (Range: \$2,000,000 - 7,000,000) <i>Major expense: Employee salaries</i>	0-60%	33-63%	0-9%	0.5-19%
Mission Medical Clinic					
Shelter Association of Washtenaw County					
Clinics Located in a Large City (>500,000 people)					
Christ Community Health Services	\$1,500,000 (Range: \$25,000 - 3,500,000/clinic) <i>Major expense: Employee salaries / benefits</i>	0%- Unknown	Unknown- 85%	0-10%	0-5%
NYC Free Clinic					
SF Free Clinic					
Volunteers in Medicine - Jacksonville					

Fundraising

Fundraisers can be an excellent, and fun, way to raise money. For some clinics, fundraisers comprised up to 16% of their total revenue, a very sizable portion. But for others, fundraisers are less of a way to generate money than they are a way to generate public awareness, both about the difficulties the un- and underinsured face and the clinic's role in helping address their need.

There were a great variety of fundraisers performed by each clinic, playing to the strengths of the team members, the interests of the community, and the surrounding area. Many fundraisers did not raise excessive amounts of money, but every bit helps and every event raises awareness. Below are a few examples of fundraisers that were held and how much money they raised, if that information is known:

- **A Meal that Heals** (\$14,500): Held at a local restaurant with a raffle and entertainment
- **Auctions / Fundraising raffle**
- **Charity Wine Tasting** (\$32,000)
- **Clayware for Healthcare**
- **Comedy Show**
- **Golf Tournament** (\$12,000)
- **Holiday Dinner** (\$4,500)
- **Honorarium** (\$133,000)
- **Poker Tournament** (\$250)
- **Yard Sale** (\$6,000)

What Students Can Do to Help

If you have the time, host your own fundraiser! Anything you do will help; no contribution you make to such medical clinics is too small. Take something you enjoy doing, or what your classmates enjoy, and turn it into a fundraiser. Like dancing? Host a charity ball. Enjoy playing poker? Create a charity poker tournament. Like golf? Host a charity golf tournament.

Enjoy video games? Organize a video game tournament. There are no limits as to what you can do, and remember, every little bit helps. Have fun with it!

And the business community is often more than happy to help by contributing items if you are persistent enough, including prizes, food, and sponsorship.

And even if you hold a fundraiser, and it does not raise much money, you can feel good in knowing that at the very least you are raising community awareness for both the needs of the uninsured and the clinic.

And hopefully having fun in the process!

A few fundraising examples that you may enjoy holding include:

“Our work for the clinic is mainly through raising funds and awareness. We originally received most of our money through events with fellow students and members of the community, with some small private donations made by friends and family members as well. But recently we have reached out to the school and broader community through newspaper articles and spots in the news. So far we have raised tens of thousands of dollars.”

– Jessica Sedley

- **Auction / Raffle** – Businesses are often able to donate gifts for auctions and raffles, but students can offer their own ideas as well (perhaps someone in the class can fly a plane and would be willing to fly the winner? Would someone be willing to clean up the other person’s house? Can someone offer horse riding lessons? Etc.). Can be combined with other events, like dinner or dancing, to increase participation.
- **Bachelor/Bachelorette Auction** – Expand outside of the medical school for more participation (and to better network with students from other school who can also help the clinic).
- **Ball** (as in Fall Ball, i.e. a formal dance – can be combined with an auction or raffle for more enticement)
- **Bucketing** (as in multiple people looking forlorn, scattered around the city with buckets in hand to collect money and to hand out flyers to raise community awareness)
- **Comedy show** – Recruit from a local comedy club and split the profits, or bring out amateurs from school or the community.
- **Dinner** – Food can be catered by donated food from a local eatery, or cooked by volunteers. Enticements to get people to come can include a raffle/auction, entertainment, dancing, or just the promise of a good meal for a good cause.
- **Dodgeball / Sporting Tournament** – Charge per team, and make it a weekend event.
- **Garage / Yard Sale** – Everyone has something they want to get rid of – sell it yourself for a profit.
- **Golf (or Minigolf) Tournament** – Tournaments can be held for individual players or

QuickTime™ and a
TIFF (LZW) decompressor
are needed to see this picture.

for teams by playing scramble. These have great potential to raise large amounts of money, to the amount of tens of thousands of dollars. Sponsors can sponsor each hole and each preceding and proceeding event, including cocktails, lunch, and prizes for the winners. HealthLink did an amazing job getting sponsors and prize contributors (see previous page).

- **Ice Cream Social** – These may not make the big bucks, but they will be a good way to meet people and raise awareness.
- **Poker Tournament** – Companies can sponsor the event and offer prizes, similar to golf tournaments.
- **T-shirts** – Make them for cheap and with a neat logo, sell them for a good cause.
- **Wine Tasting Tour** – Provide transportation to tour local wineries, and see if the wineries will contribute part of the profit to the clinic.
- **Video Game Tournament** – Try to obtain a large auditorium at school to host the event, and ask sponsors to donate prizes.

For additional resources on fundraiser tips and how to run them, look at the following websites:

Fundraising Tips.com:

<http://www.fundraisingtips.com/>

About.com:

http://nonprofit.about.com/od/fundraising/Fundraising_Tips_and_Tools.htm

Grants

Grants are the largest source of income for most clinics that participated, with some clinics receiving 2/3rd or more of their total income from grants. Grants come from multiple sources, including cities, counties, states, the federal government, private corporations, non-profits and foundations. While some national corporations and the federal government give money to many different areas, many private and non-profit entities give money locally to areas where their employees reside. Participating clinics reported a huge variation in the source of such grants, indicating that there are a lot of resources available; it is just a matter of finding the grants to apply to (no easy task), and getting lucky enough to be approved.

Helpful resources from the government are available. The U.S. Department of Health and Human Services offers a grant section, and Grants.gov is a governmental one-stop shop for all governmental grants.

U.S. Department of Health and Human Services (HHS):

FAQs:

<http://www.hhs.gov/faq/grants/>

Upcoming grant opportunities at HHS:

<http://www.hhs.gov/grantsforecast/>

Grants.gov:

<http://www.grants.gov/>

Below are selected source samples of grants received by clinics that participated in this report. This list is by no means comprehensive, is in many instances region or city-specific, and should by no means be your sole source for grants. Instead, this list should be used as reference as to what opportunities exist, and will hopefully encourage you to look for grants not just in your city and county, but also nationally from large corporations, non-profits, and the government as well.

Grant Examples:

City

- City of Ann Arbor
- City of Colorado Springs

County

- Bucks County Health Improvement Project
- Washoe County Human Services Consortium

State

- Michigan Council for the Arts & Cultural Affairs
- Michigan Department of Education
- Michigan Department of Human Services
- Michigan Department of Community Health

Federal

- Health Care Financing Administration
- Ryan White CARE Act (for HIV/AIDS)

Corporations

- Cisco
- Costco
- Ford Motor Company
- GlaxoSmithKline
- Merck & Company, Inc.

- Pfizer Matching Gifts Program
- Saint Joseph Mercy Health System

Non-Profits and Foundations

- Association of American Medical Colleges Caring for the Community Grant
- American Dental Association Foundation
- American Medical Association
- Ann Arbor Area Community Foundation
- Churches
- Claneil Foundation
- Connelly Foundation
- Community Foundation for Southeast Michigan
- Delta Dental Foundation
- Gates Family Foundation
- Kaiser Permanente
- Kiwanis Club of Ann Arbor
- Kresge Foundation
- Nevada Women’s Fund
- Operation Good Neighbor Foundation
- The Philadelphia Foundation
- Rite Aid Foundation
- Rotary Club of Ann Arbor
- Salvation Army
- United Way
- Washtenaw (County) Housing Alliance
- Washtenaw (County) United Way

What Students Can Do to Help

Regardless of the source, grants require that someone roll up their sleeves and write the proposal. This can be both painful and arduous. But a few tips and suggestions will hopefully make the process a little more gentle.

“We searched online for available grants, but what we found was disorganized and unwieldy.”

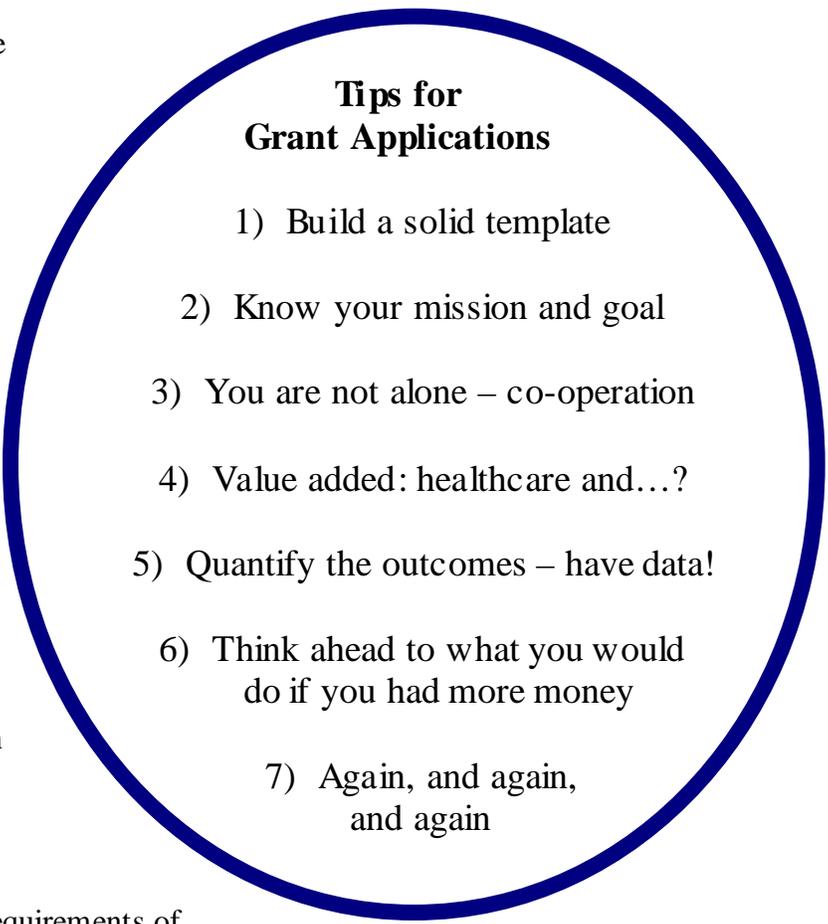
– Jessica Sedley

Grants are by no means easy to find. Web searches can help find grants that pertain to your clinic in your city, county, and state, specifically using such words as “grant application.” Other places to look are in city, county, and state government websites, as well as large non-profit foundations such as United

Way, and countless others throughout the country. The government also offers help consolidating grants online at <http://www.grants.gov/>. Just keep trying, and keep plugging away!

It is important when applying for grants to make sure you meet the specific requirements, which vary from grant to grant. Before you start to write, make sure you know exactly what they are. For common grants, easy requirements to fulfill typically include being a non-profit organization and offering a benefit related to health care to those in your city/county/state. These should not pose a problem. Other requirements may require more preparation and organization, including:

- 1) Have a well-defined purpose and specific objectives
- 2) Express a well-outlined, logical protocol
- 3) Identify a feasible budget, adequate funding and operational resources, specified and qualified person(s) responsible for operation of the activity and generally demonstrate the ability to complete the proposed program or project
- 4) Demonstrate the intent and capability for self-evaluation and for periodic reporting of status and accomplishment



Tips for Grant Applications

- 1) Build a solid template
- 2) Know your mission and goal
- 3) You are not alone – co-operation
- 4) Value added: healthcare and...?
- 5) Quantify the outcomes – have data!
- 6) Think ahead to what you would do if you had more money
- 7) Again, and again, and again

So assuming you meet the requirements of the grant, you are about ready to get started. But before we get to actually sitting down and writing a proposal, there are just a few more suggestions to keep in mind:

- 1) **Build a solid template** – Figure out your mission statement, contact information, description of the clinic, activities and services performed, and board members, etc., and write these in an articulate and powerful manner. You can then cut and paste these for future grant applications. There is no need to duplicate work!

- 2) **Be sure you have a mission statement and goal** – Nothing says ‘rejection’ faster than not being able to articulate what your organization does and describe exactly what you intend to do with the money you receive.
- 3) **Co-operation** – It is important for organizations to see that your project is already receiving support. While this is hard to do if you are starting a project, any evidence you can provide will only help you get a grant, including having received material equipment from private sources, volunteers to work with the project, etc.
- 4) **Value added** – Providing health care to uninsured community members is a wonderful goal for your proposal, and is quite necessary to mention this, **preferably with quantifiable, hard data!** But don’t just limit yourself to this – think how else you can dress up your proposal. For example, when medical and public health students volunteer, you are also improving student education – do not neglect to mention this!
- 5) **Data** – It is important to measure and quantify outcomes. The number of patients seen, the number of conditions treated, etc., all help quantify the work done by the organization. This greatly helps justify to donors what their money is going to, and establishes both effectiveness and need.
- 6) **Your grant application was approved – now what?** Think for a moment about what you would want to do with money were you to get it. Now imagine you actually get that money. What would you do with additional money? And with more? And more? Write down a list of sequential objectives that you would hope to accomplish if you had more and more money, and actions that would accomplish them. This way, as you receive more money, your next proposals will be easier to write as you can just go down the list and insert new goals and actions in your next proposals.
- 7) **Apply again, and again, and again** – Apply to as many programs as you possibly can. You never know which grants you will actually receive.
- 8) **Same grants, new year** – Keep track of grants that you apply to, especially those you receive. Write down specific due dates on a calendar, so when next year rolls around you will know when deadlines are coming up and for which specific grants.

Now it’s time to sit down and write our grant. Where do we begin?

Feeling opportunistic, I asked my friend (who has a masters degree in non-profit organization) if there was such a thing as a grant template. Her response disheartened me when she replied, “If it were easy to do, there’d be plenty available.” Indeed, there are not many available, so it must not be easy to do. But have no fear, as I modified an existing template to provide an example. While many grants are likely to list specific

requirements that may differ from those below, the items below are commonly asked questions and should be included in proposals if no specific information is asked for by the proposal.

On the following pages is a grant template I made that was borrowed and modified from the Orphan Children Fund (<http://orphanchildrenfund.org>). For more information about how to write a grant, refer to additional tips at the Catalog of Federal Domestic Assistance website:

The Catalog of Federal Domestic Assistance:

http://12.46.245.173/pls/portal30/CATALOG.GRANT_PROPOSAL_DYN.show

Grant Template Example

*Grant template borrowed and modified from the Orphan Children Fund
(<http://orphanchildrenfund.org>)*

Project Title: Providing Dental Care to the Uninsured in Santa Clara County

1. Organization: 49er Health Care Clinic, San Francisco, CA

2. Contact Information

49er Health Care Clinic
49 Bill Walsh Way
San Francisco, CA 94115
Website: www.49erHealthCareClinic.org

Joe Smith, MD – President
jsmith@49erHCC.com
(408) 491-4949 office
(408) 492-4949 cell phone
(408) 492-4949 fax

Jerry Rice – Board Member and General Manager
BestReceiverEver@49erHCC.com
(408) 494-4949 office
(408) 495-4949 cell phone
(408) 496-4949 fax

3. Briefly describe your organization

Mission:

The San Francisco 49er Health Care Clinic is a primary care treatment center for residents of San Francisco, treating all who walk in our doors regardless of ability to pay. We hope to expand health care coverage to those without healthcare insurance to the greater San Francisco community.

Membership:

Dr. Joe Smith, a physician at ABC health Clinic who is determined to expand medical coverage to the uninsured, heads the San Francisco 49er Health Care Clinic. Other esteemed and honorable Board of Directors members include Dr. XXX XXX, a family practitioner at ABC Health Clinic, YYY YYY, CEO of XYZ Medical Company, ZZZ ZZZ, Professor of Medicine at College University, etc.

Local physicians volunteer their time to work at the clinic, which is also staffed by additional administrative volunteers.

Activities:

The 49er Health Care Clinic, a non-profit organization, is in its third year of providing primary medical care to the uninsured of San Francisco. Driven by the enthusiasm of physicians in the area to treat the uninsured, the clinic has seen over 2,000 patients yearly, treating conditions such as hypertension, diabetes, and asthma.

To date, the 49er Health Care Clinic has seen 7,500 patients in 18,000 patient visits, have held 25 outreach education programs such as lunchtime health classes, and have provided over 500 immunizations to children. While we are pleased with our past accomplishments, we realize there is much more that can be done, as due to funding constraints we are simply unable to accommodate the ever-increasing demand for our services.

4. Board Support

Our Board of Directors has unanimously approved this project and has given it their full support.

5. Brief Project Description

The 49er Health Care Clinic is seeking to expand its coverage of the uninsured by offering basic dental care to its patients. This will be achieved by offering dental services

to patients within the 49er Health Care Clinic itself.

An extra room is available within the 49er Health Care Clinic and is being reserved for such a purpose. In addition, Acme Dental Chair Co has already donated two dental chairs, and dentists and dental assistant volunteers have been recruited to participate. However, supplies are needed by the dentists to perform necessary work.

49er Health Care Clinic proposes to purchase necessary dental equipment to provide dental care to its patients. One year's worth of supplies costs \$5000. This amount is the only cost necessary to continue operational support of the dental clinic, as dentists have volunteered their time to work and there are no other incremental costs. We will raise \$5000 each year to continue to keep the dental clinic operational. The supplies will be purchased via Acme Dental Supplies, a company that has agreed to provide us with steep product discounts.

6. Project Goal

The purpose of this project is to provide dental care to the thousands of patients who come to the 49er Health Care Clinic each year. Our goal is to provide every patient that walks through our door with dental care, so as to provide our patients with comprehensive primary care. We intend to staff the dental clinic within the health clinic with a sufficient number of volunteer dentists and dental assistants so as to be open five days a week for ten hours each day, and seek to promote student education by inviting dental students to volunteer beside experienced dentists.

7. Detailed Project Description

Preparations have already been made in advance of receiving dental supplies. We have secured the services of dental and dental assistant volunteers, who are eager to assist in providing dental care to the uninsured. Acme Dental Chair Company and Acme Dental Light Company graciously donated two sets of chairs and lights to our clinic. These have already been installed in a room within the 49er Health Care Clinic, and are waiting to be uses.

Before being used, however, we first need to obtain dental supplies. We have reached an agreement with Acme Dental Supplies to provide medical supplies at a steep discount, so as to be able to purchase maximal quantities with a minimal budget. We are seeking to buy one year's worth of supplies. This includes the intended purchase of A, B, C, D, E, F, G, H, and I. Items that are purchased will be kept in our storage room until they are to be used.

8. Project Timeline

Action	Target Date	Finished?
Procurement of dental chair and lights	10/1/08	Yes
Installation of dental chair and lights	10/21/08	Yes
Procurement of volunteer services of dentists and dental assistants	11/1/08	Yes
Receive Funding	12/1/08	No
Place order for dental equipment	12/15/08	No
Receive order for dental equipment	12/31/08	No
Open dental clinic to health clinic patients Expected hours: 5 days a week, 10 hours per day	1/1/09	No

9. Outcome measures

After one year, we hope that the dental clinic within the 49er Health Care Clinic will have made a positive difference to the primary and dental health of the thousands of patients depend on our clinic for their primary healthcare. After one year, we hope to serve 3,750 patients, which is 50% of the number of patients our clinic sees each year. We hope to reduce tooth decay and gingivitis by 50% amongst our patients, and that the overall health of our patients is significantly better. We hope to reduce the levels of oral pain that our patients feel by 75% and promote dental education for continued patient improvement in oral hygiene and health. We also hope to provide an opportunity for dental students and pre-dental students to continue their dental education by working with volunteer dentists.

10. Project Budget:

Items and description	Cost	Already Contributed?
Dental chair	--	Yes - Acme Dental Chair Co.
Dental lights	--	Yes - Acme Dental Light Co.
Dental Supplies		
A – This is what this item does	\$2,500	No
B – This is what this item does	\$50	No
C – This is what this item does	\$450	No
D – This is what this item does	\$200	No
E – This is what this item does	\$500	No
F – This is what this item does	\$500	No
G – This is what this item does	\$200	No

H – This is what this item does	\$500	No
I – This is what this item does	\$100	No
Total	\$5,000	

Please note this grant will not support indirect costs.

Donations

Grants and fundraisers both have the ability to generate a lot of money, but they certainly can take a lot of time. Donations, from the clinics point of view, are much easier – just collect, document, and write a thank you letter expressing your appreciation. And they can be successful for clinics as well, with some clinics reporting nearly 20% of their total income coming from donations. But how do clinics get their donations? Are they successful, and who contributes?

There are multiple ways to receive donations – letter drives and the clinic’s website are the most common. Using the website as a donation source offers the advantage of requiring minimal front-end work, and requiring only the effort in documenting and sending thank you letters. In addition, the website offers multiple avenues in which to donate, including PayPal, providing an address for mailing checks, a wish list of items that are desired, and details as to how to do online and stock transfers. And best of all, clinics can acknowledge those who have previously donated right on the website. HealthLink offers an excellent example of a website that is geared toward donations:

HealthLink Medical Center:

<http://www.healthlinkmedical.org/donations.asp#>

Direct mailings have the potential to be lucrative, but can also be intrusive and aggravating to recipients. Most clinics reported that individuals tend to donate more so than corporations, as individuals have, and express, a very generous spirit.

What Students Can Do to Help

The easiest way to provide long-term help with donations is to link your clinic to GoodSearch, an online search engine that donates money to the charities and non-profits of the users choice each time they perform a search and make a purchase. It’s simple, and free, and to reap the benefits only requires spreading the word.

Another way to provide long-term help with donations is to help develop a website that describes multiple avenues in which people can donate. For instance, setting

up a PayPal account, providing an address as to how and where to send checks, and posting a donation wish list all offer long-term benefits and require minimal effort.

If you and your clinic do participate in a letter drive, it is very important to run it the right way. There are tactful and tactless ways to solicit money, and it is important to spend time before your letter drive to think through some considerations. SymbioMarketing offers many such suggestions on its websites:

SymbioMarketing:

http://www.symbiomarketing.com/articles/article_avoidfailure.html

http://www.symbiomarketing.com/articles/article_stupidtricks.html

I suggest viewing these websites in full for complete information. But in summary, SymbioMarketing suggests that if you participate in a letter drive, it is important to:

- **Not trick your audience:** Say upfront who you are and what you want, don't hide from the fact that you are seeking their donation. And do not use envelopes that hide the name and address of who sent the letter!
- **Highlight your clinic's success, but do not overwhelm:** Include your statistics and successes in your letter, but do not send so much information, such as multi-paged brochure, that it overwhelms the donor. Do provide your website so that interested parties can have for more information if they want it, and make sure the statistics on the website and the newsletter are the same.
- **Treat each donor differently:** If this donor already donated, acknowledge and thank them for their past support, and be sure to address them by their correct name. Repeat donors and prospect donors should have completely different letters. Imagine you are in these peoples' shoes and receive the letter that you are to send. Would you be happy with it?
- **Provide concrete evidence as to what donations would do:** Sending \$25 will not allow you to treat the entire city's uninsured, so do not imply that it will. But if you know the amount that will pay for one patient's visit, mention that! Include different levels, such as (borrowed from Volunteers in Medicine – Jacksonville):
 - \$50 – One patient office visit + supplies
 - \$1,000 – Half day of patient care + medications
 - \$2,000 – Full day of patient care + medications
- **Not overwhelm:** Sending a few letters is okay, but do not overdo it with quantity; newsletter impact is far superior to newsletter quantity.

In addition, the Viola Startzman Free Clinic has a great idea by forming the “Free Clinic Network” – people are asked to make annual dues of \$15 to join, in turn for certain privileges such as newsletters and being able to attend events. This way both parties win: the clinic receives money from willing donors, and donors feel as though they were part of a club, and receive certain benefits for donating. This is a win-win situation, and a very clever idea.

Raising Awareness

The general public is not likely to be fully aware as to the plight of the uninsured. “Yes, it sounds scary to be uninsured, and yes, it seems unfortunate, but it probably only happens to people who lose their job, which means they must have been fired, right? And how many people could there really be who are uninsured?”

We know the reality to be far different. More than forty million people are without health insurance, which is thirteen percent of all Americans, and it occurs to people from all walks of life – people whose jobs do not offer insurance, people who work independently who cannot afford insurance, those unemployed, those who move and cannot find a new job at their new location, and those simply unable to afford insurance. We know this to be a common and catastrophic situation. But the public, with the stumbling economy, falling home prices, and rising gas and commodity prices, may have other concerns that are closer to home which reduce their ability to realize the scope of the problem, and prevent people from fully recognizing what your clinic is doing to address the situation.

There is a battle for the public’s awareness, a battle that exists with countless other causes that are just as worthy. It is extremely difficult to break through and to capture the public’s attention. So how do clinics do it?

Participating clinics have done so in numerous ways. Examples of efforts cited include:

- **Annual / Quarterly Reports** – Writing annual or quarterly reports allows for the maximal sharing of information. Then it just becomes a matter of getting people to read it. Placing these on websites helps.
- **Churches** – Some clinics have excellent relationships with churches. These clinics find that church members have an innate willingness to help their cause, as religions often seek to help the sick. Churches are an excellent location to raise public awareness, either through flyers on billboards or speaking at mass.

- **Donor Appreciation Luncheon / Dinner** – Health Access Washoe County provides a wonderful example of what appreciation lunches can do. Holding the event in the ballroom of a local hotel, donors and staff were appreciated over a nice meal. This provides an excellent opportunity for clinics to highlight what they do, and to continue to keep their donors involved.
- **Fundraisers** – Regardless of the amount of money raised by fundraisers, they certainly raise public awareness. For more coverage, contact your local newspaper to see if they would be interested in writing a piece about your fundraiser and clinic; the larger the fundraiser, the more likely it is that they will write about it.

“Fundraisers are useless financially (for us),
but they do *raise awareness*.”

– Dr. Rick Donlon, Christ Community
Health Services Founder

- **Newspapers** – Opinion pieces and weekly public service announcements in local newspapers are ways that some clinics share what they do with the public, both those who are uninsured and those who may be willing to donate. Having an article in the newspaper about the plight of community members or the clinic is an excellent way to raise awareness to a maximum number of people.
- **Website** – Nearly all participating clinics have a website, allowing clinics the ability to disperse information as to what they do, what they need, how people can donate, upcoming events, annual or quarterly reports, etc. The website is used by both patients seeking a place to be seen and donors who are interested in contributing.

What Students Can Do to Help

Most clinics reported that raising awareness was the most important thing that medical students can do to help. While raising more money, collecting more medicines and supplies, and building better connections with schools within the university would all

be useful, these are not easy to do, and often require a large amount of sweat and a little bit of luck.

Raising awareness for the local clinic, on the other hand, is something that takes less time and may be more suitable for busy medical students. Students can help raise awareness in many ways, including:

- **Fundraisers** – Some clinics find fundraisers helpful not for raising money, but instead for raising awareness. Others would disagree, as some clinics receive as much as 16% of their total income from fundraisers. Regardless of the amount of money you would raise with your particular fundraiser, know you will at least be raising public awareness.

Raise awareness by:

- **Create a fact sheet / brochure:** Be sure to include clinic stats, success stories, upcoming events, and how people can donate
- **Holding a fundraiser:** No matter what money you raise, you raise awareness
- **Write a Letter to the Editor:** Inform the community of the plight of the uninsured, and what your clinic is doing to help

- **Opinion piece for a local newspaper / news placement** – Write an opinion piece stressing the difficulties the uninsured face in your community, and what your local clinic is doing to help. Try contacting the newspaper to see if they would be interested in writing an article about the clinic, as well as local news stations.
- **Updates** – Help write a quarterly or yearly update as to what has been happening, making sure to include accomplishments, clinics statistics, patient testimonials, past and future fundraisers, how to donate, and a section thanking volunteers and donators for their support. Both the Corner Health Center and the Viola Startzman Free Clinic have excellent annual reports and newsletters, which can be found at:

The Corner Health Center:

<http://www.cornerhealth.org/>

Viola Startzman Free Clinic:

<http://www.startzmanfreeclinic.org/clinic/newsletter.htm>

- **Fact sheet / Brochure** – similar to the “update” above, but condensed into a single piece of paper (front and back) that can be used to give to pharmacies, clinics, hospitals, medical schools, and donors when seeking monetary or in-

kind donations. Below is an example of a two page brochure from the Viola Startzman Free Clinic:

Did you know....

- for every dollar that the Viola Startzman Free Clinic receives, \$4.20 of value is created!
- for every dollar that the Viola Startzman Free Clinic receives, \$16 is spent on direct patient care! The remainder is spent on administration (12%) and fundraising (8%).
- volunteers donate one hour for every three hours of staff time!
- the number of annual patient visits more than doubled between 2003 and 2007!
- the VSFC treated two-thirds more patients in 2007 than it did in 2003! (see graph below)
- other than Community Development Block Grant money, the VSFC does not receive any government funding!

2007 Revenue Sources

Clinic Highlights from 2007

- Introduction of new source of free patient medications through Ohio's "Drug Respiratory Program" and "Nurse's Law" in cooperation with nursing homes and pharmaceutical distribution centers
- Addition of dental staff one full day per week
- Introduction of summer "Camp Vision" to encourage children to get involved in their communities
- Addition of weekly endocrinology services thanks to volunteer Dr. Everett Burgess, MD
- Addition of 90 new volunteers!
- Creation of 2 annual volunteer awards in honor of Dr. Thomas Graves, MD, & July Bork, RN
- Formation of the "Free Clinic Network", the volunteer-driven fundraising arm of the VSFC, and the addition of the Network's two new fundraisers: "A Meal that Heals" and "Claypans for Healthcare"
- Recognition by the Ohio Association of Free Clinics of Tom Kelly and the Cleveland Clinic Wooster as "Champion of Free Clinics"
- Creation of clinic website
- Introduction of quarterly informal "Director Chat" series
- Introduction of option for supporters to donate electronically through checking/savings account.
- Completion of a staff efficiency study coordinated by an independent consultant!

VSFC Patient and Visit Trends

Who we serve

The VSFC treats uninsured residents of Wayne County whose gross household income is below 200% of the federal poverty line, which is \$42,400 for a household of four. In 2007 we provided care over the course of 9,400 ambulatory visits, and 46% of the patients were new to the clinic.

Who we are

The Viola Startzman Free Clinic is a 501 (c)(3) United Way partner agency that provides free health and dental care to low-income, uninsured residents of Wayne County. A member of the Ohio Association of Free Clinics, it is the third largest free clinic in the state and one of over 1,700 free clinics across the nation.

Where we came from

Opened in 1996 as Healthcare 2000 Community Clinic, the clinic is now named in honor of founder Dr. Viola Startzman, MD, Wayne County's first female pediatrician. In 2003 "Dr. Vi" donated the facility we occupy today.

What we do

The VSFC Board of Trustees is comprised of 16 leaders from the medical, dental business and faith communities along with others passionate about providing healthcare to the uninsured. More than 200 volunteers help us provide high-quality care to our patients by serving as primary care providers, nurses, dentists and dental assistants, interpreter, and fundraising, data, custodial, and special volunteers.

How we pay for the services we provide

The VSFC is supported by the following resources:

- Cleveland Clinic Wooster, Dunlap Community Hospital, Radiology Services of Canton, and Wooster Community Hospital
- Graville Area United Way and United Way of Wayne and Holmes Counties
- Investment income from accounts held at various local institutions including an Endowment Fund at the Wayne County Community Foundation
- Donations of money and in-kind items from individuals (including patients), businesses, churches, and service groups
- Special events
- Grants from foundations, corporations, and the government

Who we do NOT do

The VSFC does not:

- provide emergency services
- treat patients who are insured, including those who receive coverage through Medicaid or other government programs
- bill or receive payment for services. Though we do encourage patient donations
- receive funding from tax revenues

How we Impact Lives

The VSFC helps our neediest neighbors lead healthy lives, gain employment, and support their families. The following was written by a patient at Dr. Vi, in honor of her birthday:

"I am a single mother of two beautiful daughters. I work part time and am a full-time college student in the Diagnostic Medical Sonography Program. I am struggling to improve my life and the lives of my children. I can't tell you how much it means for me to have a place to come when I need help. I hope you Dr. Vi live a wonderful birthday. How many times you have changed and how many people you have helped. Thank you again and have a wonderful birthday."

The Need: Where we go from here

Based on clinic statistics and US Census figures, the VSFC treated roughly 12% of our potential patient base in 2007. Overall, we do not anticipate the demand for our services to diminish or stabilize in the near future. While a free clinic may not be a long-term solution for the nation's healthcare crisis, the VSFC plans its doors every weekday to help our neighbors who have a need TODAY.

How YOU can help fulfill the Mission

For information on donating to the operating fund or the Endowment Fund, contact the Executive Director at 330-262-2500 extension 102.

To inquire about volunteer opportunities, contact the Volunteer Coordinator at 330-262-2500 extension 103.

To donate items from our Wish List or to schedule a tour of the Clinic, contact the Administrative Assistant at 330-262-2500 extension 103.

Serving the healthcare needs of Wayne County's uninsured citizens

United Way

1874 Cleveland Rd
Wooster, OH 44691
Phone: (330)-262-2500
Fax: (330)-264-8713
www.viola-startzman-free-clinic.org

- Website** – Help build your clinic’s website, including providing information as to what your clinic does, clinic statistics, upcoming events, annual or quarterly reports, ways to donate and what specific donations would do (i.e. \$25 would pay for a single visit to the clinic by one patient), as well as a wish list for what is needed. Most clinics referred to the fact that they wanted to update their websites, or were in the process of doing. Help your clinic build a stellar one, and try to beat my favorite website, which is that of the New York City Free Clinic, which can be found at: <http://www.med.nyu.edu/nycfreeclinic/>.
- Build connections** – By building connections with local hospitals, clinics, and your medical school, you are raising awareness of the clinic and what it does to very influential, and potentially very helpful, individuals. Refer to the next section to learn more about building connections and the benefits in doing so.

Building Connections

So the clinic you are working with is raising funds through fundraisers and grants, yet never seems able to fully serve the needs of the patients who walk through the clinic’s doors. How do other clinics do it?

The answer is that most clinics do not work alone. For every clinic that works with the un- and underinsured, there is an army of healthcare workers and administrators behind the scenes who offer their assistance. From hospitals to clinics to individual physicians, participating clinics in this survey reported the help of many other entities.

Such help often comes in the form of in-kind donations, which are donated services or goods. Many clinics reported working with hospitals that offer their referred patients discounted visit costs, discounted or free laboratory services, discounted dental services, free access to specialists such as nephrologists and cardiologists, and medicines and supplies at cost.

Clinics that serve the un- and underinsured do not have the type of large budgets that other hospitals, clinics, and universities have, and it is therefore to their strategic advantage to associate with such entities. Large healthcare providers do not lose from such arrangements either, as they receive good publicity for their actions. In all, it can be a win-win arrangement.

As can be seen on the right, HealthLink Medical Center has numerous community partnerships, allowing for many services such as X-rays, ultrasounds, lab tests, eye care, dental services and access to specialists. Many other participating clinics reported similar arrangements with institutions in their area, allowing for increased services offered to their patients.

QuickTime™ and a
TIFF (Uncompressed) decompressor
are needed to see this picture.

However, it takes luck and persistence to get specialists and dentists to participate. These are the fields which clinics have found the most difficult to receive assistance from.

Connecting with local medical schools and hospitals also provides for increased assistance. Primarily, this may result in an increased number of physicians who volunteer their services from the university hospital at the clinic. In exchange, such clinics typically house residents, who are able to train with university physicians. Such connections may also allow for in-kind donations, such as services offered at the university hospital, as well as discounted drugs and supplies.

What Students Can Do to Help

Medical students are in the perfect position to be liaisons between the clinic they are helping and their school. As medical students, we can talk to senior administrators within the medical school as to how the university can foster goodwill by providing financial or in-kind donations to the clinic we are assisting. The university hospital has the resources for advanced laboratory tests, access to specialists, and a large pharmacy that would all be of enormous benefit to such clinics. In addition, medical students can be point people to help recruit physician volunteers, as the greatest cost for many clinics that work with the un- and underinsured is providing salaries for staff, including physicians. By recruiting more volunteers, clinics can increase the number of patients they see and possibly save money that can be used for other services, such as medicines and supplies.

Medical students can also be liaisons with other schools within the university. Public health students are similarly motivated to serve the uninsured; for the Shelter Association of Washtenaw County, the local university's School of Public Health provides more student volunteers than does the medical school. Students and faculty of public health schools may also be able to assist in locating and writing grants. In addition, multiple clinics reported their frustration at not being able to provide enough dental care to their patients. Students can coordinate with dental students at the dental school, and contact faculty to see if they would be able to offer assistance. The business school may be able to assist in assessing and addressing clinic finances, and finally, translators can be solicited to volunteer from language departments, as many clinics reside in communities where there are sizable populations that primarily speak a language other than English.

In addition to acting as point people within the local university, medical students can also seek to connect their local medical clinic with other hospitals and institutions in

Help your clinic connect with:

Your University

- *Medical school:*
Support, volunteers, medicines, and supplies
- *Dental school:*
Support, volunteers, and supplies
- *Business school:*
Help with clinic finances
- *Public Health school:*
Assistance with grants
- *Language departments:*
Translators
- *Hospital:*
Services, specialists, and cheap drugs

Other hospitals, clinics, and dentists

- In-kind donations, reduced fees for tests, drugs, and supplies, and access to specialists

the area. Medical clinics are foundations built piece by piece, and anything that neighboring clinics and hospitals can do to help just add to that foundation, no matter how small the offer. By providing discounted laboratory services or access to specialists, local hospitals and clinics can monumentally increase the level of care the uninsured receive. Stress the problem that exists within your community, what your greatest need is for your clinic, and what the hospital can do to help. And above all: be patient and persistent!

Medicine and Supplies

Surprisingly, medicines and supplies do not constitute the majority of clinics' expenses. Instead, typically the major costs for clinics are salaries and benefits for employees. Medicines and supplies, on the other hand, cost a lot less, typically costing around 5% of each clinics' budget.

There are multiple ways in which clinics receive their medications. Some buy the medicines outright, either at face value or at cost through local pharmacies and hospitals. Other clinics purchase their drugs through national purchasing cooperatives, and others rely on donations. The same is true for supplies. One such purchasing cooperative for medical supplies is offered by the National Association of Free Clinics, which requires membership and sliding scale yearly dues, depending on income generated:

National Association of Free Clinics (NAFC):

<http://www.freeclinics.us/>

Typically, regional or state associations of free clinics also offer discounted supplies and medicines. A list of such organizations can be found at:

State and Regional Free Clinic Associations, NAFC:

<http://www.freeclinics.us/StateFreeClinicAssociations/tabid/59/Default.aspx>

Another way that clinics can buy medicines at a reduced cost is through the 340B Drug Pricing Program. Eligible clinics include Federally Qualified Health Centers (FQHCs), FQHC look-alikes, and family planning clinics, among others. For more information, explore the Health Resources and Services Administration's (HRSA) website discussing 340B Drug Pricing Programs at:

HRSA 340B:

<http://www.hrsa.gov/opa/introduction.htm>

In addition to clinics buying medicines themselves, there are many programs that uninsured individuals can sign up for, including both state-run programs and those

offered by pharmaceutical companies themselves. State programs vary by state, and can be searched for at Patient Assistance's website:

Patient Assistance – Government Benefits Programs:

<http://patientassistance.com/benefits.html>

Most pharmaceutical companies also offer drug assistance programs and list them on their websites, an example of which is Pfizer's Share the Care program. To see if an assistance program exists for a particular drug, search companies' assistance programs at the Pharmaceutical Research and Manufacturers of America (PhRMA) website, listed below:

PhRMA Drug Assistance Program:

<https://www.pparx.org/Intro.php>

County Rx Card offers up to 75% off drugs nationwide. For more information go to:

County Rx Card:

<http://www.countyrxcard.com/>

In addition to government and pharmaceutical programs, many large, ubiquitous companies like Walmart and Target offer generic drug programs costing only \$4 per one month's worth of drugs, or \$10 per three months' worth. Drug lists can be found at the companies' websites:

Walmart:

<http://www.walmart.com/>

Target:

<http://www.target.com/>

Help your clinic collect medicines and supplies by:

- Enrolling in the 340B Drug Pricing Program, if eligible
- Seeking national purchasing cooperatives which to join
- Scouring the land in search of sympathetic clinics, hospitals, and pharmacies that can sell drugs and supplies at cost or donate them outright
- Helping to enroll patients in local governmental and pharmaceutical drug assistance programs

What Students Can Do to Help

Students, by sheer volume, represent a volunteer army that can scour the neighboring community, able to look for local pharmacies, clinics, and hospitals that are sympathetic to clinics. Such entities may be willing to offer assistance, including selling their drugs and supplies at cost or at great discount, or even being able to donate items

such as unused and sample packs. Just make sure that the drugs and supplies you receive are not expired!

Students can also seek national cooperatives for both medicines and supplies which their clinic can buy from, and help enroll their clinic in the 340B Drug Pricing Program if they are eligible to do so.

In addition, students can help patients enroll in drug companies' drug assistance programs as they enter the clinic, and ensure that patients and the clinic are aware of generic alternatives at places like Target and Walmart.

Physician Staffing

Staff salaries and benefits compose the greatest percentage of clinic expenses. Physicians, who typically make more money than other employees, therefore are often the greatest expense for clinics. Cumulatively, staff salaries dwarf all other clinical expenses by a wide margin. But of course, without physician and other healthcare participation, clinics could not offer healthcare. So how do clinics handle this expense?

Name	Average Number of Employed MDs	Average Number of Volunteer MDs	Approximate % of MDs who Volunteer
<i>Clinics Located in a Small City (<50,000 people)</i>			
HealthLink Medical Center	2 (Range: 0-2)	8 (Range: 0-17)	80%, but highly variable from 0-100%
The Corner Health Clinic			
Viola Startzman			
Whitmore Lake Health Clinic			
<i>Clinics Located in a Medium City (50,000-500,000 people)</i>			
Health Access Washoe County	2 (Range: 0-6)	80 (Range: 2-137)	95% (Range: 85-100%)
Mission Medical Clinic			
Shelter Association of Washtenaw County			
<i>Clinics Located in a Large City (>500,000 people)</i>			
Christ Community Health Services	3 (Range: 0-6/clinic)	10 (Range: 0-20)	Highly variable, from 0-100%
NYC Free Clinic			
SF Free Clinic			
Volunteers in Medicine – Jacksonville			

Some clinics do not have any volunteer physicians at all, instead relying solely on employed physicians. To employ a large number of physicians, clinics need to have a

large operating budget. If clinics have smaller budgets, they typically employ only a few physicians.

For other clinics, with the exception of medical directors, few physicians are employed. Instead, clinics that work with the uninsured typically rely on physician volunteers. Some clinics operate with just a few volunteers, while others, with strong connections to a local universities or hospitals, utilize the services of more than a hundred.

There are pros and cons to relying more on employed physicians or volunteer physicians. Volunteers cost less, but there is less of an established patient-doctor relationship, as patients typically see new physicians every time they visit. In addition, clinics cannot be certain that physicians will show up for each shift, and it may not be easy or possible to recruit the number of volunteers needed. Employed physicians work well with the clinics, which is why they were hired in the first place, and get to know their patients much better. They also are stable, as they are employed and therefore show up each day. However, physicians do not come cheaply.

Whichever approach your clinic takes, the physicians who work at such clinic are likely to be more centered on the patient than at most other hospitals, for they either as volunteers they donate their time and effort or if they are employed they (often) take a pay cut to work specifically at such clinics.

“The doctors spend an extraordinary amount of time spent with each patient, regardless of what an individual patient will be paying. I have also observed the physicians take the time to teach patients about their conditions, rather than just simply prescribe. These uninsured patients are getting better quality care than I get from some of my physicians!”

– Jessica Sedley

What Students Can Do to Help

Staff salaries and benefits typically make up the largest component of clinics’ budgets. For clinics that are able to finance this large expense, it is often the preferred method, as physicians that are employed are more experienced and knowledgeable about

the needs of the clinics' patient clientele, and the administration does not need to worry about volunteers from week to week. But for clinics whose budgets are tighter, it is preferable to have more physician volunteers, as they simply cost the clinic less money.

As a medical student, you are in an ideal position to recruit physicians from your school to volunteer at your clinic. A good place to start is by contacting department chairs for the departments of family medicine, OB/GYN, and pediatrics, seeking their input as to whether anyone within the department would be interested. Department chairs typically send out emails within the department, and you should receive a response from eager volunteers.

Student Volunteering

Nearly all clinics reported taking medical student volunteers. Such experiences allow students the opportunity to shadow physicians and practice their history taking abilities. Some clinics, however, choose not to accept student volunteers. For these clinics, which often have physician volunteers, do not wish to 'impose' on the physicians by having students around, as the physicians are already being very helpful in donating their time to the clinic. But there is much more that medical students can do than simply shadow.

What Students Can Do to Help

As medical students, we typically volunteer at clinics so as to break the didactic grind of the first two years of medical school and do what we signed up to do when we applied to medical school: to work and interact with patients! Many clinics that work with the uninsured are happy to have medical students shadow and volunteer for a few hours a day. These clinics graciously provide education for medical students, who are able to practice their interview techniques and learn what it is like to work both in a clinic and with the uninsured. In turn, medical students offer enthusiasm and hard work, saving physicians a few minutes by taking a preliminary history, and often head back to school eager to assist the clinic by other

Volunteer, in addition to shadowing a physician, by:

- Raising money
- Raising awareness
- Building connections with other clinics, hospitals, and your medical school
- Seeking donated medicines and supplies
- Working as a receptionist
- Translating
- Gardening
- Painting
- Repairing the clinic

means, whether by raising awareness or more ambitious goals such as raising funds or seeking in-kind donations.

But not all clinics readily take medical students – some feel that physicians already volunteer their time to work at the clinic, and do not want to impose any more inconvenience on them by asking them to have a medical student shadow them, because let's face it, while students are inquisitive and bright, they are still not ready to fly solo in the clinic by their second year in school.

But even if you do not volunteer at a clinic by shadowing physicians, you can still do a lot to help. Do not worry: you will have plenty of practice interviewing standardized patients by year two, and you will be inundated with clinical exposure in years three and four. In the mean time, consider volunteering at the clinic in other capacities, including at the reception desk, translating, or doing clinic improvements such as helping with landscaping, repairing, or painting the facilities. If nothing else, it will be good to get out for a day from the library and see what a day in the life of a clinic is like!

And of course, doing anything from the previous sections in this report, including volunteering your time to raise money, awareness, and build connections with other hospitals, clinics, and your medical school are all activities that should be greatly appreciated by the clinic you are assisting.

Resources

Resources for Clinics

Non-profit resources

IRS:

<http://www.irs.gov/charities/charitable/index.html>

Foundation Group:

<http://www.foundationgroup.com/faqs.html>

Becoming a Federally Qualified Health Center (FQHC)

Centers for Medicare and Medicaid Services (CMS):

<http://www.cms.hhs.gov/center/fqhc.asp>

Rural Assistance Center:

http://www.raconline.org/info_guides/clinics/fqhc.php

Fundraising tips

Fundraising Tips.com:

<http://www.fundraisingtips.com/>

About.com:

http://nonprofit.about.com/od/fundraising/Fundraising_Tips_and_Tools.htm

Grants

U.S. Department of Health and Human Services (HHS):

FAQs:

<http://www.hhs.gov/faq/grants/>

Upcoming grant opportunities at HHS:

<http://www.hhs.gov/grantsforecast/>

Grants.gov

<http://www.grants.gov/>

The Catalog of Federal Domestic Assistance

http://12.46.245.173/pls/portal30/CATALOG.GRANT_PROPOSAL_DYN.show

Donations

SymbioMarketing:

http://www.symbiomarketing.com/articles/article_avoidfailure.html

http://www.symbiomarketing.com/articles/article_stupidtricks.html

Free Clinic Associations

National Association of Free Clinics (NAFC):

<http://www.freeclinics.us/>

State and Regional Free Clinic Associations, NAFC:

<http://www.freeclinics.us/StateFreeClinicAssociations/tabid/59/Default.aspx>

Volunteers in Medicine:

<http://www.volunteersinmedicine.org/>

Medicine

HRSA 340B:

<http://www.hrsa.gov/opa/introduction.htm>

Resources for the Uninsured

Drug and Benefits Programs

Patient Assistance – Government Benefits Programs:

<http://patientassistance.com/benefits.html>

PhRMA Drug Assistance Program:

<https://www.pparx.org/Intro.php>

County Rx Card:

<http://www.countyrxcard.com/>

Conclusion

Approximately 45,000,000 people in this country do not have health insurance, and an ever-increasing number of people are underinsured. When calamities hit, and lingering, minor illnesses progress to chronic, major diseases, there are few places that the un- and underinsured can go. Clinics that serve this population serve a very pressing need in our society and act as a safety net, as they are places of refuge patients can go to get better, regardless of ability to pay. Society as a whole loses when there are un- and underinsured individuals, for when they get sick their productivity declines, and when they visit the ER as a last effort, longer wait times and higher service fees are paid by all.

Clinics that serve the un- and underinsured are filled with noble individuals who see this problem and wish to offer a solution, who see people suffering and reach out to lend a helping hand. But running a clinic is hard work, and it pulls its leaders in multiple directions. Leaders must continually raise funds, hold fundraisers, write grants, raise awareness, find supplies, and establish connections with establishments in the community, all while trying to run the clinic itself. Such clinics can often use a helping hand.

Medical students are likely to be at their most idealistic and energetic stages of their career. Having just applied to medical school with the intention of doing making a difference in the world, all we need is a little direction and inertia to get us going. Pairing medicine students and clinics that work with the uninsured naturally seems like a perfect fit.

If you the student have the urge to help, contact your local clinic and see what it is that you can do. If the clinic does not offer an idea, suggest your own from those mentioned in this report. There are many things that you as a medical student can do to help, regardless of the time you have available. For the students who have more time, ambitious projects such as holding large fundraisers such as golf tournaments or auctions and writing grants can greatly help your local clinic by raising both awareness and funds. But for those with less time, you can still do both, just on a smaller scale, such as by doing smaller things such as creating a grant template or holding smaller fundraisers such as poker or video game tournaments.

Clinics are often in need of a lot of help, so anything you are able to do will likely be worthwhile. The important thing is to just make the commitment, find out what it is your clinic really needs, and get started. There is nothing harder to fight than inertia! Be

patient, be persistent, and be resolute: know that your work is for a great cause, and never lose sight of the fact that no help is too small, and that every little bit helps. And above all, be sure to have fun!

It is my hope that people respond to this report by wanting to improve it. So please, if you have suggestions as to how to improve this, or would like to include new insights and tips, please contact me by email at *aheling@gmail.com*. I look forward to receiving and incorporating your comments!

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