



# Helping Hands

News from the School-Community Health Alliance of Michigan

*News from the Grassroots:*

## The Needed Shift in Our Dialogue with Law & Policymakers

By Rod Johnson, Director, Community and Program Development

**B**udgeting for outcomes has become a new catch phrase in Michigan state government. It is a framework drawn from the ideas of David Osborn and Peter Hutchinson in their popular book *The Price of Government*. Both the Governor's Office and the state Legislature assert that the 2005-06 budget will reflect a basic change in how a budget is developed and executed. Central to the budgeting for outcomes model is the idea that when a budget needs balancing, officials must focus on spending, not cutting.

Indeed, Mr. Hutchinson (co-author of *The Price of Government*) has said that if the concepts and ideas in the book had to be boiled down to two or three, they would be: include all the money when calculating the budget, because to the public "all money is green" and the public doesn't care if it comes from the general fund, or restricted funds; don't focus on organizations because the budget has to be focused on getting the most results for whatever the citizens are willing to spend; and finally, and most importantly, we must ask: Does the budget really challenge the process and implement a strategy that aims for results? Thus, the process has more to do with getting better results and less to do with budgeting.

So what does this mean for school-based and school-linked health centers? This

means that we must begin to think more rigorously and/or copiously document the work that is being done so that, if necessary, we can convince the skeptical legislator, funder, or taxpayer that our program purposes are being achieved.

New approaches to evaluating complex programs, such as the ones we serve, provide avenues that are built on a strong theoretical and conceptual base. They emphasize the shared interests between the evaluator and the program, utilize numerous methods and perspectives, and offer both rigor and relevance. These are approaches that we must embrace.

With this in view, we encourage each of you to:

- Collect and briefly summarize, in plain English, the work that you're doing. This demands that we think more rigorously and document the work that is being done.
- Document at least three recent success stories (especially those that bridge any perceived gap between health and academic performance).
- Meet and get to know your local, state, and Congressional lawmakers (on a first name basis if possible).
- Give us a call if we can assist you in scheduling or preparing for a meeting with your law or policy makers.

The latter two bullets are, of course, of particular interest to us. As many of our SCHA-MI constituents know, we have been meeting with members of the Michigan Legislature and Congress and talking to them about the works and the value of school-based and school-linked health centers. Many of you are aware of these efforts because you were with us at some of these meetings where you showcased your center and programs and told your own stories. This is important work that we intend to continue with you on behalf of Michigan's school-based and school-linked health centers and programs.

Having said that, I return to the central point of this piece: We are now speaking to law and policymakers who intend to implement strategies that aim for results. Thus, to more fully engage in these discussions, we must speak not only to our value, but to our results.



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## HELPING HANDS

Helping Hands is published quarterly by the School-Community Health Alliance of Michigan (SCHA-MI) for distribution to association members, friends of SCHA-MI, and state and national legislators.

SCHA-MI welcomes articles and information from our readers. Issue deadlines are February 10, May 10, August 10 and November 10. For membership information, permission to reprint, or submission guidelines please contact:

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# Message from the Executive Director



Welcome to our first newsletter publication and we are excited to be sharing this with you. We hope that this newsletter will act as a way to keep you connected to each other, update you on a variety of topics and serve as a vehicle for sharing the outcomes of the work being done within school-based and school-linked health centers. This is your newsletter and we welcome your articles, suggestions and ideas.

This creation comes to you from the staff of the School-Community Health Alliance of Michigan. What a wonderfully talented and committed group of people. I would like to take this time to introduce them. For without them, many things would not be accomplished, including the birth of this newsletter. Let me begin with Anne Gladstone, your Communications and Education Coordinator. Anne has been with SCHA-MI since its inception. She is the glue that holds us together and is the creative energy within the organization. Many of you know Brenda McCulloch, your Billing and Technical Assistance Specialist. She is founder and developer of the billing and reporting service. She is our detail thinker, can-do person and our humorist on staff. Next, Rod Johnson is your Director of Program and Community Development. He is the analytic thinker, philosopher and world traveler. He brings a depth and wide range of experience to us all. Finally, our newest staff member is Alan Lantzer, your AmeriCorps volunteer focusing his efforts on outreach activities. Alan is our resident poet, writer and world thinker. I am blessed to work with such a gifted staff but more importantly it is a joy to work with a passionate and dedicated group to children's health and well-being.

As the new year unfolds and its many challenges are revealed, I am reminded of the importance and the need to reflect on all that is good and the ways we can contribute to the lives of children and families. This is especially true when we are faced with yet another year of budget problems. I am always amazed at how resilient and optimistic our centers, programs and their boards are. Over the past three years, each and every one of you has stepped to the plate and continuously shared the meaningful work you have done with children, adolescents, young adults, families and schools. More importantly, you have continued without interruption to deliver high quality health care and prevention services to Michigan's neediest children.

We hope that you will find our newsletters useful. As always, we look forward to working with you.

Debbie Brinson, Executive Director  
School-Community Health Alliance of Michigan

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*The School-Community Health Alliance of Michigan (SCHA-MI) is a collaboration of individuals and organizations that represent and support school-based and school-linked health centers and programs across the state of Michigan. We believe that all Michigan children and youth have the basic fundamental right to access and receive comprehensive primary health care and prevention services.*

# Meet Our New Staff Member

## *In His Own Words*



*Alan Lantzer joined the School-Community Health Alliance of Michigan staff in February of 2005 as an AmeriCorps volunteer.*

I've lived most of my life in or close to the great mountain ranges of the American Southwest. From the Jemez in New Mexico to the San Juans in Colorado; from the Black Hills of South Dakota to the Sierras of California, mountains have been material and metaphorical anchors which, in significant ways, define me as a man.

I've climbed many of them in fact: the Collegiate Peaks, for example, a 150 mile string of 14,000' peaks running through central Colorado. I struggle a bit physically at altitude, but I truly savor the experience. That should tell you something about me.

In metaphorical terms, I've climbed other peaks. And for each, I also struggled, but found value and meaning in each ascent. I've earned my degrees (BA, MA, 99.9% of my Ph.D.) My doctoral work focused on organizations and how they can be both more productive and humane. I was a forest ranger and wild land fire fighter before I returned to graduate school. During my last year, terrible wild fires killed many fire fighters. Tragically, most of these deaths occurred because organizational leaders made mistakes. Addressing that, and searching for solutions, is my guiding professional light.

I've ascended creative and artistic peaks. My novels and books are out in the world, and I envision more to come. My first novel, Tigerland, became (without my knowledge!) the basis for a Hollywood movie starring

Colin Farrell. That produced something like a creative epiphany. I'm developing my own video production business centered in Ojai, a small village in California. This is truly exciting, and as imposing a mountain as I have ever encountered!



And, like every mountain climber, I've failed to reach the summits more times than I could list. The details are not important; I've suffered innumerable defeats, but from them I have extracted some small measure of humility and purpose. In fact, I believe the pain of each of those defeats has shaped my identity more profoundly than the sum of my victories.

I've returned to central Michigan, where I was raised. I've been away a long time, but returning here has kindled a new sense of meaning and purpose. I teach writing at the community college, work part time as a supervisor at one of the local YMCAs, and have accepted a position as an AmeriCorps volunteer with the School-Community Health Alliance of Michigan. Said simply, in each of these, I hope to provide something useful.

I hope we meet. When we do, perhaps you will spare me a few moments to tell you a story or two about mountains, and the magic which can still be found amidst those great peaks and canyons.

*By Alan Lantzer*

## SCHA-MI MEMBERSHIP UPDATE

The School-Community Health Alliance of Michigan has updated their membership structure and process to accommodate the different levels of membership needed. The levels of membership now include:

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Friend of SCHA-MI  
Individual  
Organizational

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Each level of membership has a corresponding level of benefits. Organizational members will also have the option of enrolling additional sites (for example: SBHC sites) to receive member benefits.

Membership terms will also now begin when we receive your application and dues and will be valid for a one-year term. We will send out renewal letters as your membership term comes to an end.

As always, your membership benefits include access to advocacy efforts and member's only resources and services, discounts on conferences and events, networking opportunities, and voting rights. Please see the membership packet for a more detailed description of the membership benefits.

If you have any questions or to request a membership packet please contact Anne Gladstone at [agladstone@scha-mi.org](mailto:agladstone@scha-mi.org) or visit the SCHA-MI website at: [www.scha-mi.org](http://www.scha-mi.org).

## Thank you to our renewing members in 2005!

*Cathy Wenz, NP*

*The Student Health Center at  
Battle Creek Central High School*

*Nicole Speck, FNP*

# HealthPlace 101 Hosts Award-Winning Challenge Day Program

The Regional Alliance for Healthy Schools (RAHS) and HealthPlace 101 recently hosted the award-winning program, Challenge Day, for two of its middle schools, Scarlett Middle School in Ann Arbor and East Middle School in Ypsilanti. Over 300 7<sup>th</sup> graders and 135 adult and high school volunteers participated in the California-based program designed to stop teen violence and alienation and to promote understanding, acceptance, and love within school and community environments.

The Challenge Day program is a one-day workshop where youth, teachers, parents, administrators, counselors and members of the community experience for themselves that love and connection are in fact possible in our schools. Through a carefully designed series of innovative games, activities, group discussions, icebreakers and trust-building exercises, participants learn how to break down the walls of separation and create new levels of respect and communication with their peers, teachers, parents and themselves, according to the group's website.

Throughout the day-long workshops, an environment of safety and acceptance was created. Students and adults together learned how and why people hurt each other, and themselves. They began to realize that they, like most people, unnecessarily accept fear, anger, and violence as "normal".

"Every part of the day was so youth focused to the point that I thought some of the adult volunteers might not like parts of it." Jennifer Salerno, RAHS Coordinator, commented. But, despite

the youth focus, the participating adults were able to feel and experience the impact of the program as well. One teacher even said "This is the best thing that has happened since I started at Scarlett (Middle School)." Almost the entire 7<sup>th</sup> grade teaching staff from both schools participated along with the schools' principals, guidance counselors, health teachers, school nurses, ESL teacher, community members, parents, and one school board member.

The Challenge Day program, started in 1987, has reached hundreds of thousands of youth across the country. The program has received numerous awards from the Juvenile Justice System, the D.A.R.E. Officers Association, government officials, and many school districts and cities nationwide. Participating schools have reported outcomes including reduced drug, alcohol, and tobacco use among youth, reduced student absenteeism, and reduced verbal and non-verbal violence in middle and high schools.



"This was an expensive program to bring in, but one of the most worthwhile we have done." says Jennifer Salerno. Jennifer and her team would be happy to share their experience with this program. They have a 2-page write up describing their Challenge Days in more detail, along with additional comments from school staff and parent volunteers. For more information please contact Jennifer Salerno at [jsalerno@umich.edu](mailto:jsalerno@umich.edu) or Kristy Postlewaite at [kpostlew@umich.edu](mailto:kpostlew@umich.edu). Kristy, RAHS Social Worker, coordinated the Challenge Day program for the RAHS Middle Schools and has attended the *Being the Change* workshop.

In addition, the Challenge Day program welcomes community members to attend the upcoming days being planned all over Southeastern Michigan for the rest of the school year. A three-day community workshop, *Being the Change*, is being planned for the greater Detroit area for April 29 – May 1, 2005. For more information contact Jean Ritok at (313) 884-3792.

To learn more about Challenge Day and its many programs, please visit [www.challengeday.org](http://www.challengeday.org).

## QUOTES FROM CHALLENGE DAY PARTICIPANTS

"The leaders were fabulous!"  
-Teacher

"Great accomplishment with such a diverse school."  
-Community Member

"(Challenge Day) brought me closer to my son."  
-Parent

"This is the most support I have ever felt from the teachers, especially with sending students to HealthPlace 101 (SBHC) when they have a counseling appointment."  
-RAHS

"The games were easy to follow. My ESL student's were able to participate and had fun!"  
-Teacher

"I liked that the leaders were as diverse as our school population."  
-School Staff Member

# Tips for Good Documentation

By Brenda McCulloch, Billing and Technical Assistance Specialist

There are several things that a clinician should take into consideration when reviewing their chart documentation. Following are an explanation of a few of the important characteristics that should be included in the patient record.

## Legibility

There are instances when the insurance carriers may need documentation of the visit with claims, so it is important that the record is legible. Providers may receive denial of payment if their charting can not be read. Illegible documents may also be construed as quality issues with care of patients. When coordinating patient care it can be difficult for other providers to provide the appropriate level of service if they are unable to determine what was provided by another clinician.

## Completeness

Information in the chart should flow logically and should not have gaps. All abnormal test results should have explanatory documentation and all reports should be included in the chart. It is also important that documentation in the record is not conflicting.

## Timeliness

It is important to keep the patient record updated in a timely manner, if they are not it can prevent other clinicians within a clinic to overlook important information when seeing a patient. There are rules and regulations in place surrounding this issue, and some documentation is required to be in the chart within 24 to 48 hours from the visit.



## Authentication

Clinicians need to be sure that their signature is on their documentation. Teaching physicians also need to be aware that they are responsible for signing off and possibly adding documentation to the clinicians whose work they are responsible for.

## Corrections and Alterations

No clinician is perfect, and it is inevitable that mistakes will be made. When a mistake is made it should be corrected in the following manner.

- Put a line through the error, making sure the error still shows through.
- Write error above the line.
- Initial and date just after the word error.
- Never use erasure, whiteout, or other cover up techniques. This can create questions about credibility.

For more information on billing and coding please visit the following websites:

[www.codecorrect.com](http://www.codecorrect.com)  
[www.cms.hhs.gov/manuals](http://www.cms.hhs.gov/manuals)  
[www.intelicode.com](http://www.intelicode.com)

## KIDS COUNT SHOWS IMPROVEMENTS AMONG MICHIGAN TEENS

There is good news for Michigan teens according to the findings in the *2004 Kids Count in Michigan Data Book*. Among the five areas of child well-being examined in this year's *Kids Count Data Book*, the biggest improvement in Michigan over the trend period occurred among teenagers.

Improvements among Michigan teens include:

- High school dropout rates fell significantly between 1996 and 2002—with a decline of 40 percent.
- Teen births to high school-aged teens dropped by over one-third — from 30 to 20 births among every 1,000 teens.
- Teen injury death rates declined by almost one-third — from 66 to 46 deaths among every 100,000 youth, ages 16-19.

While Michigan teens are showing improvement, young children, the focus of this year's book, are at a higher risk on several measures of well-being. The report also found that little or no progress has been made in improving maternal and infant health in Michigan between 1995 and 2002.

*Kids Count in Michigan* is state project that is part of a national effort to measure the well-being of youth at the state and local levels and to shape efforts to improve conditions for children and their families. It is a collaborative project of the Michigan League for Human Services and Michigan's Children.

The *2004 Kids Count in Michigan Data Book* can be downloaded or ordered online from the Michigan League for Human Services website at: [www.milhs.org](http://www.milhs.org).

# Community Watch: Webberville

By Rod Johnson, Director, Community and Program Development

## *Webberville is Realizing its Goal of Establishing a School-Based Health Center*

**W**ebberville's efforts to build a school-based health center as a central part of its school building improvement planning project reminds us that we should never doubt the potential of a few thoughtful, concerned citizens to change the world. Last September the Webberville Community Schools asked its voters to approve borrowing up to \$7,835,000 for school building improvements, which included a proposal for a school-based Community Recreation, Athletics, and Health Center, which will serve children in grades K-12. The proposal was a rousing success despite Webberville's two bond debt issues that were to expire in 2014. With the approval of the new bond questions, the district's debt will be refinanced and extended to the year 2032 at the current tax rate.

While the journey for Webberville is far from over, the journey thus far provides an encouraging model of how a community can come together and address the health care needs of its children despite seemingly overwhelming odds.

Webberville's journey was led by the Webberville Area Healthy Community Initiative (a local nonprofit corporation) and was initially made possible through a Community Voices grant awarded by the W.K. Kellogg Foundation.<sup>1</sup> Community

<sup>1</sup> Community Voices sites were selected to serve some of the hardest to reach populations including those living in poor urban and rural areas, immigrants, Native Americans and the homeless.

Voices staff conducted community focus groups and interviews to develop an understanding of the community's health needs and aspirations.

Next, a community summit was held. The summit was attended by 75 members of the community. During the summit, Community Voices staff used the information that had been gathered during the focus groups and personal interviews to assist the community in prioritizing needs and identifying useful approaches to addressing those needs. Interestingly, the overriding community concern was that there needed to be better dialogue between the community and its schools. Other top priorities included: the need for better community and parental involvement, a lack of primary health care, and the need for a community center for youth. Indeed, under the need for primary health care, the community recognized the need for mental health services to treat ailments like childhood depression. Also identified was a lack of dental care, the need for a smoking cessation program, kindergarten physicals, and well child services.

**“we should never doubt the potential of a few thoughtful, concerned citizens to change the world”**

Four subcommittees were formed and each made significant contributions. However, it was the hard work and recommendations of the Health Team sub-

committee that gave rise to the decision to build a school-based health center. The Health Team subcommittee was truly representative of the school-health community. It included parents, health care professionals, the elementary school principle, a school board member, and other community volunteers.



Indeed, the newly hired school superintendent began attending Health Team meetings. The Health Team began by taking a closer look at the community's health care needs. This eventually led to an exploration of models of care, which included school-based health centers. In the end, it was the school superintendent who proposed that the Health Team recommend exploring a bond proposal so that the community's need for health care could be addressed at the school-level.

**Now the decisive test: Getting voter support.** A 50-person bond committee was formed. A committee was formed to disseminate information. Flyers were distributed. The school district placed articles in the paper. And community members, including parents, mailed letters encouraging people to attend the upcoming community forums. Then, numerous community forums were held prior to the election where citizens voted on the new bond questions. **The result: Huge voter turnout and bond passing with 75% voter approval.**

Webberville's success is a model of a democratic and decentralized decision-making process. Indeed, this type of synergy and collaboration is the basis of, and can readily serve as model for

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## Community Watch: Webberville *continued from previous page*

grassroots organizing with an eye on establishing school-based or school-linked health centers in rural and underserved areas throughout our great state.

Webberville expects to break ground in the spring and have its Community Recreation, Athletics, and Health Center up and running by midsummer 2006. The vision for the school-based health center is that it will “provide comprehensive primary health care for a broad segment of the community, especially infants,” says Karen Risch a member of the Webberville Area Healthy Community Initiative. Referring to the W.K. Kellogg Foundation program, Karen adds: “This could not have been done without the Community Voices program.”

For more information of the Community Voices Program go to:  
[www.communityvoices.org](http://www.communityvoices.org)

Are you wondering what  
district you are in?  
Who your legislators are?

Visit the SCHA-MI website to  
download a listing of  
Michigan's school-based and  
school-linked health centers  
and programs with their  
legislative contact information.  
[www.scha-mi.org](http://www.scha-mi.org)

## Educating Newly Elected Officials

Did you know that...

- local, state and federal governments support nonprofits through tax incentives for charitable giving, grants and contracts, in-kind support, tax exemptions, special zoning provisions and more, and
- policymakers pass legislation that directly impacts the individuals you serve and the resources you protect.

With new officials in office it is important for groups to introduce or re-introduce themselves to policymakers. Building relationships with officials is key to an organization's mission since local, state and federal elected-officials are directly tied to the success of your organization.

Everyone's budgets are tight and staff time is limited, however, there are a few simple activities that all organizations can do to improve relationships with policymakers. The following are low-cost and require minimal staff time to implement:

- Add elected-officials to your mailing list (those who represent your district and/or are active in the issues you care about will be most receptive to these mailings). Be sure to send a constant-flow of information, including newsletters, annual reports, donation request, etc.
- Send a letter introducing your organization, who you serve and how your organization serves the official's district. Be sure to talk about the group's social and economic benefits to the community.
- Invite your elected-officials to visit your organization.
- Go visit your elected officials.
- Email Michigan Nonprofit Association (MNA) at [skeneeri@mnaonline.org](mailto:skeneeri@mnaonline.org) or call MNA at 517/492-2400 to obtain a free directory of government officials that can be placed directly into your organization's database and mailing lists. Also, after the New Year, MNA will again provide all MNA members with a hard-copy government directory.



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## MDCH 2005 FALL REGIONAL IMMUNIZATION CONFERENCES

Conference Brochures will be distributed in early June. If you would like a copy send an email message to [franklinr@michigan.gov](mailto:franklinr@michigan.gov). Enter the word 'subscribe' in the subject field. You will be added to the list.

October 4 ▪ Treetops Conference Center, Gaylord, MI  
October 6 ▪ Northern Michigan University, Marquette, MI  
October 18 ▪ Wayne State University, Detroit, MI  
October 19 ▪ Eagle Crest Conference Resort, Ypsilanti, MI

October 25 ▪ MSU Management Education Center, Troy, MI  
November 1 ▪ Fetzer Center (WMU), Kalamazoo, MI  
November 2 ▪ Kellogg Conference Center, East Lansing, MI

**Kate Conway, *President***  
Henry Ford Health System

**Val Overholt, *Vice-President***  
Oakwood Teen Health Centers

**Ken Coleman, *Treasurer***  
St. John Health System

**Barbara Blum, *Secretary***  
Taylor Teen Health Center

**Margaret Betts**  
Detroit Department of Health  
and Wellness Promotion

**Joan Chesler**  
The Corner Health Center

**Jennifer Salerno**  
Regional Alliance for Healthy Schools

**Sue Szurek**  
Oakwood Lincoln/Jefferson Barns  
Healthcare Center

**Angelia Williams**  
Health Delivery, Inc.

## MARCH 2005

**SCHA-MI Board Meeting**  
March 17 ▪ 9:30-11:30am  
Lyon Meadows  
New Hudson, MI

## APRIL 2005

**SCHA-MI Board Meeting**  
April 21 ▪ 9:30-11:30am  
Lyon Meadows  
New Hudson, MI

## MAY 2005

**SCHA-MI Membership Meeting**  
May 12 ▪ 9:30-11:30am  
Ingham County Health Dept.  
Lansing, Michigan

## JUNE 2005

**GAPS Training**  
June 10  
Location TBD  
*Watch for Registration Info!*

## SCHA-MI Board Meeting

June 16 ▪ 9:30-11:30am  
Lyon Meadows  
New Hudson, MI

## National School-Based Health Care Convention

June 16-18  
Rhode Island Conv. Center  
Providence, RI  
[www.nasbhc.org](http://www.nasbhc.org)

## JULY 2005

**SCHA-MI Board Meeting**  
July 21 ▪ 9:30-11:30am  
Lyon Meadows  
New Hudson, MI

## AUGUST 2005

**SCHA-MI Membership Meeting**  
August 11 ▪ 9:30-11:30am  
Ingham County Health Dept.  
Lansing, Michigan

## SEPTEMBER 2005

**SCHA-MI Board Meeting**  
September 15 ▪ 9:30-11:30am  
Lyon Meadows  
New Hudson, MI

## OCTOBER 2005

**SCHA-MI Board Meeting**  
October 20 ▪ 9:30-11:30am  
Lyon Meadows  
New Hudson, MI

## NOVEMBER 2005

**SCHA-MI Annual Meeting**  
November 10  
Location TBD

## DECEMBER 2005

**SCHA-MI Board Meeting**  
December 15 ▪ 9:30-11:30am  
Lyon Meadows  
New Hudson, MI

Working together to build a healthy future!



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