

Increase funding for existing primary and specialty medical services through:

- a. Seeking alternative funding and grants with the help of MPA students, nonprofit resource center, Grant Station, etc.
- b. Working to increase State funding for mental health services
- c. Moving hospital dollars towards local clinics to support wellness visits and other care to limit unnecessary emergency room care (Mercy Clinic, Nurses' Clinic Neighborhood Health Clinic, Palm Housing Recovery Center, and Others)
- d. Supporting Neighborhood Health Center's Federally Qualified Health Center grant
- e. Creating a local pooled health insurance policy for small businesses to offer their employees
- f. Addressing the disparity in public health nurse salaries through scholarships, loan forgiveness and other incentives

COMMITTEE RECOMMENDATION WORKSHEET

Name*: Becky McCaskey
Phone*: 706-475-5628 E-Mail*: bmccaskey@armc.org
Committee*: _____

I. List the Learning(s) that this recommendation is addressing:

- **WRITE THE COMMITTEE RECOMMENDATION** (limit focus to one subject or action item, more than one recommendation may be needed to address a particular learning):**

Seek alternative funding to support local clinics: Mercy Clinic, Nurses' Clinic, Neighborhood Health Clinic, Palm House Recovery Center, Others

- **Identify any research, or other kinds of information that was used to craft this recommendation.** (add additional sheets as necessary or continue on back of sheet)

Web-based research to seek appropriate grant opportunities, GA Free Clinic Network, Grant Station, MPA grad students at UGA

- **Identify additional research or information that could help clarify this committee recommendation. List potential sources if possible.**

Create a nonprofit resource center, Community Foundation for Athens area

- **Indicate people or groups that we need to talk to help clarify this committee recommendation. List any recommended locations.**

Resources- North Georgia Community Foundation (Hall), UGA MPA program, Therapeutic MSW, GA Center for continuing ed.

- **What kind of action or resources would be necessary to implement the recommendation?**

Partner with UGA grant-writing workshops or classes, seek advice from Hall County North GA Community Foundation

- **Indicate what forces and influences are likely to occur that will support or oppose implementation.**

Forces that support (please list):

*Community based support
Churches*

Forces that oppose (please list):

Lack of volunteers to complete grants

COMMITTEE RECOMMENDATION WORKSHEET

Name*: _____
Phone*: _____ E-Mail*: _____
Committee*: _____

I. List the Learning(s) that this recommendation is addressing:

- **WRITE THE COMMITTEE RECOMMENDATION** (limit focus to one subject or action item, more than one recommendation may be needed to address a particular learning):**

Increase state funding for Mental Health services
Address reductions in Medicaid for Mental Health services

- **Identify any research, or other kinds of information that was used to craft this recommendation.**
(add additional sheets as necessary or continue on back of sheet)
- **Identify additional research or information that could help clarify this committee recommendation. List potential sources if possible.**
- **Indicate people or groups that we need to talk to help clarify this committee recommendation. List any recommended locations.**
- **What kind of action or resources would be necessary to implement the recommendation?**
- **Indicate what forces and influences are likely to occur that will support or oppose implementation. Forces that support (please list):**

Forces that oppose (please list):

***As information is received and/or clarified, these potential recommendations may change or be discarded.*

RECOMMENDATION WORKSHEET

Name*: Sarah Himmelheber

Phone*: _____ E-Mail*: sarahh@advantagebhs.org

Committee*: _____

I. List the Learning(s) that this recommendation is addressing:

Funding of things that are already in place

- **WRITE THE COMMITTEE RECOMMENDATION** (limit focus to one subject or action item, more than one recommendation may be needed to address a particular learning):**

Have a pool of \$ in the foundations to solicit grant application for no cost beds at recovery houses (12 beds @\$25/night X 365 days/year)

- **Identify any research, or other kinds of information that was used to craft this recommendation.**

(add additional sheets as necessary or continue on back of sheet)

Availability of Recovery Houses, encourage of no cost residential sales tax

- **Identify additional research or information that could help clarify this committee recommendation. List potential sources if possible.**

Solicit number of beds, info about programs/rules/etc. establish referral process

- **Indicate people or groups that we need to talk to help clarify this committee recommendation. List any recommended locations.**

Coordinates of local recovery programs

- **What kind of action or resources would be necessary to implement the recommendation?**

- **Indicate what forces and influences are likely to occur that will support or oppose implementation.**

Forces that support (please list):

Forces that oppose (please list):

COMMITTEE RECOMMENDATION WORKSHEET

Name*: _____
Phone*: _____ E-Mail*: _____
Committee*: _____

I. List the Learning(s) that this recommendation is addressing:

- **WRITE THE COMMITTEE RECOMMENDATION** (limit focus to one subject or action item, more than one recommendation may be needed to address a particular learning):**

*Athens Neighborhood Health Center (ANHC); Ask that the Health Committee recommend the sharing of statistical and other data with ANHC's consultants retained to compile, write, and submit a competitive application for Federal Qualified Community Health Centers (FQHC) of ANHC.
(Health group voted to support this concept).*

- **Identify any research, or other kinds of information that was used to craft this recommendation.**
(add additional sheets as necessary or continue on back of sheet)
- **Identify additional research or information that could help clarify this committee recommendation. List potential sources if possible.**
- **Indicate people or groups that we need to talk to help clarify this committee recommendation. List any recommended locations.**
- **What kind of action or resources would be necessary to implement the recommendation?**
- **Indicate what forces and influences are likely to occur that will support or oppose implementation. Forces that support (please list):**

Forces that oppose (please list):

***As information is received and/or clarified, these potential recommendations may change or be discarded*