

Access

The newsletter of the Primary Care & Hope Clinic

Vol. 1, No. 1

Murfreesboro, Tenn.

July 1, 2005

From the Administrator's Desk

Dear Friends,

This year marks the 13th anniversary of operation for the Primary Care & Hope Clinic, and it has been a year full of blessings and challenges.

From its inception in 1992 to the present, we have continually seen God's hand upon our clinic as He has provided solutions and opportunities for us to serve our community's medically needy residents.

One of our most successful programs has been the Mobile Health Unit, which operates as a partnership between our clinic, the Murfreesboro City School System and Middle Tennessee Medical Center. We have been able to expand our services to include five city school sites, as well as medically at-risk areas of our community, such as Franklin Heights and Oaklands Court.

We get such a feeling of success when the Mobile Unit pulls up in a parking lot and members of the neighborhood are already waiting for our arrival! By bringing much-needed health care to where people work, live and worship, we have become a part of the neighborhood residents' lives.

The Mobile Unit represents an innovative way to overcome the barriers of transportation issues, mistrust of the medical system and lack of insurance by providing an environment of familiarity, trust and easy accessibility to high-quality health care providers. We now have the services of two retired pediatricians, Dr. John Dixon on our Mobile

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Welcome

Greetings from the Board:

On behalf of the board of directors of the Primary Care & Hope Clinic, I would like to express my gratitude to the staff for their tireless efforts as they provide health care to our community's most vulnerable residents.

Our patient population — the medically underserved and the uninsured — usually arrive at our clinic with a multitude of previously neglected medical conditions, along with social and financial challenges.

The staff continues to hold true to the clinic's mission of providing com-

passionate, efficient and quality health care for our patients and their families. For this, I am thankful and proud to represent the clinic.

Secondly, I am grateful for the support of our community, which has been shown through the city and county governments' willingness to embrace our mission, the United Way's continued funding and the ever-present contributions from area businesses, medical professionals, hospitals, churches, civic organizations, philanthropic entities such as the Charity Circle and the Christy-

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Luau in Summer Breeze July 23 to help raise funds

The Primary Care & Hope Clinic is preparing for its fourth annual fundraiser, which is set for July 23.

This is one of the main events that make it possible for the Primary Care & Hope Clinic to keep its doors open to the people of Rutherford County, organizers said. With the help of corporate sponsors and the citizens of Murfreesboro, Luau in the Summer Breeze will prove to be an enormous success for the Primary Care & Hope Clinic.

Luau in the Summer Breeze is scheduled from 7 p.m. until midnight at the Northwood Estates homes of Beverly and Dr. Warren McPherson and Drs. Max and Mary Moss, 1728 Shagbark Trail and 1727 Shagbark Trail.

Luau in the Summer Breeze is a casual event of outdoor dining and a night full of entertainment, organizers said. Different events planned for this evening will be enjoyed by all ages.

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Welcome

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Houston Foundation and countless community volunteers.

It seems that the plight of the medically uninsured is one that we can all agree is deserving of our attention, as it is the rare individual who can state that they "would never be uninsured."

I have received numerous letters from individuals who never thought they would find themselves among the ranks of the uninsured, only to encounter a medical catastrophe, loss of employment and subsequently the loss of health insurance. My daily thought is, "There, but for the grace of God, go I," and it is this principle that I hold dear to my heart.

As we prepare for the annual fundraiser, Luau in the Summer Breeze, which will be July 23 again in the lovely Northwoods Estates neighborhood, I am confident that the Lord, who knows our needs both now and in the future, will provide for us through His people.

I am constantly reminded that He

knows our needs before we know them.

This was recently evidenced by His provision for the establishment of our Social Services program, just months before the announced TennCare disenrollment of thousands of Rutherford County residents.

Another example of His knowing provision has been the establishment and success of the Dispensary of Hope, which provides medication assistance to the medically underserved of our community. Just as the dispensary ended its first full year of operation, the TennCare changes were announced. Our anxiety over providing medications for the approximately 6,500 Rutherford County residents who will find themselves uninsured has been greatly relieved.

I ask that you pray for wisdom and guidance as our board, staff and patients face the challenges of the next year.

With gratitude to all,

Leslie Akins, MSN, CANP
Chair, Board of Directors

Luau

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Dinner will include luau fare by Chef Brian Peters and whole roasted pigs by Jerry Robinson of Slick Pig BBQ.

Entertainment for the event will include "Pokey Brown," sponsored by Bluesboro Rhythm & Blues Company and Rob Fortney and an authentic luau show from Paradise Productions, including hula dancing and live musical accompaniment.

Another part of the fund-raiser consists of our silent auction. The auction will be arranged as three sepa-

rate islands: the Cabana, the Luxury and the Mai Tai.

Each island will be decorated as a room with all the items from each island to be auctioned off before the evening has ended. Different items for sale include a teak outdoor table and bar, a one-year membership to the YMCA, two Rolex watches—one lady's and one for a gentleman, artwork, handbags and much, much more.

Tickets are \$100 per person.

For information about the fund-raiser or inquiries about tickets, please call (615) 893-9390 ext. 230.

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TennCare changes to add patients

More than 6,500 county residents may be in need of free medical services after their removal from the TennCare program, but what funding may be available from the state to help provide those services is not yet clear.

The state Legislature has approved a \$16 million appropriation to provide assistance through local health care initiatives, but Lisa Pewitt, administrator of the Primary Care & Hope Clinic, said specific allocations are not yet available.

"We do qualify for funds, but we do not know how much we will be getting at this time," Pewitt said.

She noted the recommendation of the state "safety net" task force that funding be "divided up across the state to the safety net organizations including health departments, hospitals, faith-based clinic and community clinics."

The Task Force on the Healthcare Safety Net issued its 44-page report in May.



Gov. Phil Bredesen

"We can never replace TennCare coverage for those who are losing it," the task force's chairman, Dr. Kenneth S. Robinson, said at the time. "But today's recommendations can serve as a blueprint for providing basic health care options for those uninsured Tennesseans who need help."

In addition to support for local initiatives, the task force recommended creation of a 24-hour nurse hotline to try to prevent inappropriate use of emergency rooms, trying to maximize federal resources, identifying insurance

options for those who are losing TennCare benefits and study of a state-sponsored drug-discount program.

TennCare recipients have begun receiving letters informing them of their eligibility for future benefits from the TennCare program.

State officials have indicated that the disenrollment will not include those recipients who are children or pregnant women.

Gov. Phil Bredesen, who initiated the reform in the TennCare program, said the cuts are necessary to ensure the financial stability of the program that had provided coverage for 1.3 million Tennesseans or nearly one-quarter of the state's residents.

TennCare officials initially indicated that the reforms would result in the disenrollment of 323,000 persons from the program, but Bredesen has won legislative approval for a \$100 million allocation to preserve coverage for 97,000 of the state's medically needy.

Even with the planned cuts in enrollment, the total TennCare budget for the coming fiscal year, including the federal share, will be \$25.7 billion, state officials said.

The TennCare program began during the McWherter administration under a waiver from the federal Centers for Medicare and Medicaid Services to provide greater and wider coverage than available through the federal Medicaid program.

State officials said that with TennCare, Tennessee has had the highest percentage of its residents enrolled in its health care program.

Even with the planned cuts, Tennessee still will be in the Top 10 for percentage of population included in a taxpayer-funded health plan, officials said.

Despite a series of court challenges, the U.S. Sixth Circuit Court of Appeals ruled May 27 that the state could proceed with the disenrollment process.

County commissioners approve increased appropriation for clinic

Rutherford County commissioners June 24 approved a \$10,000 increase in the county's appropriation for the Primary Care & Hope Clinic.

The increase was part of the Budget Committee's recommendation to the full commission to the increase the allocation from \$20,000 to \$30,000.

County Mayor Nancy Allen recommended the increase to the Budget Committee in light of the cutbacks in the state's TennCare program that had provided medical services for the uninsured and the underinsured.

"That was one of the reasons I wanted to revise my recommendation to Primary Care," Allen told the Daily New Journal. "They had an 11 percent increase of uninsured patients in the past six months."

Allen told the DNJ earlier in June

that she was confident that the full commission would approve the increase in the appropriation.

Enrollment statistics from the state TennCare office indicate that 24,408 residents of the county have been receiving TennCare benefits and that planned cutbacks, which will be effective beginning in August, will remove 6,566 county residents from the program.

"We're already seeing a substantial increase in the number of people coming to the clinic that are uninsured," clinic Administrator Lisa Pewitt told the DNJ. "We're very excited to get additional funding."

The County Commission June 24 approved the budget resolution that did not require an increase in the county property tax rate. The new fiscal year begins July 1.

Staff Profile:

Jacqueline Peters sees clinic role as destiny

Jacqueline Peters is where she wants to be.

"I always knew that I wanted to be a nurse," said Peters, who has worked as a nurse practitioner at the Primary Care & Hope Clinic since 1997.

Since she completed her education and training as a nurse practitioner, Peters said she planned to be working in an indigent-type clinic. "I think it's where God wants me to be. I think he has placed me here."

Peters said she wants her patients to see her as more than a detached clinician. "I am a person. I think my patients see me as a person."

Clinic Administrator Lisa Pewitt said the patients see Peters as more than that. "The patients of PC&HC adore her and greatly appreciate the compassion she displays."

Peters, 40, began her nursing work at 16 at a nurse's aide in an extended-care facility. She earned her B.S. degree at the College of our Lady of the Elms in Chicopee, Mass., and her master's degree in nursing at Belmont University in Nashville.

Her experience has included work in pediatric intensive care and neo-natal care and as a pediatric flight nurse.

Peters moved to Tennessee in 1991 when her husband, Brian, had a job transfer. She began work at Vanderbilt University Medical Center in Nashville and then became a nurse practitioner at the Primary Care & Hope Clinic in 1997.

"I think (Administrator Pewitt) actually hired me because of my pediatric background," Peters said.

"I felt the clinic desperately needed a practitioner with a strong background in working with children because of the high number of children seeking health care in the clinic," Pewitt said. "I was searching for a practitioner who would

strengthen our knowledge and ability to care for pediatric patients."

Peters' patients now include both adults and children.

"My first love is pediatrics," said Peters, who has certification both as a pediatric nurse practitioner and a family nurse practitioner, but "I'm seeing many more adults."

She indicated, however, that she is happy to get up each morning and to come to work each day "because I have such great patients."

Peters acknowledges that she sometimes gets behind schedule in her daily routine. "I want to treat every patient like I would like to be treated. I want every patient to think they're the only one."

The schedule is fast-paced, she said, and "it's very busy."

Many of her patients who are uninsured have received no health care in 5-10 years, and some have chronic conditions. They have not had good primary care or health maintenance, she said.

Care at the clinic includes education both for adults and young persons, she said, particularly in regard to risk behaviors.

Providing health services to young persons also involves working with the adults in their lives. "We're giving parents the knowledge, and we're giving parents the skills," she said.

In caring for young persons, Peter said she draws on her own experience as the mother of two daughters, Juliann, 9; and Emily, 7. "They are light of my life," she said.

But Peters acknowledges that "I have challenges with my own children" and that "I take my work home."

She said the greatest challenge she faces is setting boundaries and "finding the balance."



Jacqueline Peters, FNP/PNP, BC

Her husband, Brian, who is the chef at Middle Tennessee Christian School, does provide assistance as the family cook, she said, and with looking after their daughters who are students at MTCS.

Peters said she thinks her daughters have an understanding of her work and its demands. "I think they are proud of me."

Pewitt said while Peters is slight in stature, any impression that she is fragile or weak "is very inaccurate. She is a person of tremendous strength and passion."

Peters' involvement with the care of children is taking a new turn with her training to provide forensic examinations for children who may be victims of sexual abuse.

Since December Peters has been working with a nurse practitioner and social worker from Our Kids in Nashville on training to conduct the examinations under the Children of Hope program at the Primary Care & Hope Clinic (**See related article, page 5**).

Peters said she hopes she can expand her role to become a resource for the community: "I really would like to be a key player in educating the
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Children of Hope

New program offers child sexual abuse services to families

Rutherford County children who may be long-time victims of sexual abuse no longer have to travel to Nashville for medical forensic exams.

And the Primary Care & Hope Clinic, in conjunction with the Child Advocacy Center in Murfreesboro, is working to provide even better access to that service in the county.

"Having the program in Murfreesboro means the children living in our county will not need to travel to Nashville for these examinations," said Lisa Pewitt, administrator of the Primary Care & Hope Clinic.

Emergency or acute exams that have to occur with 72 hours of an alleged sexual abuse incident, officials said, are available at Nashville General Hospital.

Non-acute exams, which now are available through the Children of Hope program at the Primary Care & Hope Clinic, are necessary for investigation of alleged long-time abuse.

Pewitt said District Attorney General William Whitesell proposed moving the forensic examinations to Rutherford County.

"Transportation in Nashville was often a hardship for the families," Pewitt said.

The Children of Hope team consists of Jacqueline Peters, a nurse practitioner from the Primary Care & Hope Clinic, along with a social worker from the Child Advocacy Center and a nurse practitioner and a social worker from Our Kids in Nashville.

Since December 2004, this team of four has been providing non-acute exams for county children on the second and fourth Tuesdays of each month at the Primary Care & Hope Clinic.

Beginning in August, the exams will be available on a weekly basis at the clinic, officials said.

Funding for the Children of Hope program is coming primarily from the Charity Circle of Rutherford County.

"We knew that a family entrenched in potential child sexual abuse would find themselves in great need of compassion and love."

— Lisa Pewitt, administrator

Pewitt commended the members of the Charity Circle for support of the program.

"They are single-handedly responsible for funding the beginning of this program," she said. "Their concern for the children of this community and their generosity have been phenomenal."

A grant from the Baptist Health Trust also has provided funding for training the nurse practitioner from the clinic to provide the forensic exams.

"We knew that a family entrenched in potential child sexual abuse would find themselves in great need of compassion and love," Pewitt said. "We feel this program fits the mission of our clinic and have blessed by the addition of this program."

Peters, who is certified as a pediatric nurse practitioner, will have to participate in at least 50 exams to

become qualified as a forensic expert, she said.

Peters said the Children of Hope program will also work to educate the community about child sexual abuse.

Pewitt said, "We hope to educate the community and decrease the number of cases of sexual abuse in our community."

Peters said the education process also will involve those in the judicial and law-enforcement communities.

"A negative physical exam does not mean that the abuse has not occurred," Peters said.

Peters said she hopes to take an active role in the education efforts, but she acknowledged that conducting forensic exams is not the same as the health care that she provides for her pediatric and adult patients at the clinic.

"It's different," Peters said. "It's sad."

Peters...

(Continued from page 4)

community about child sexual maltreatment."

"One of my top goals is to become an expert" in that area, she said.

With coming changes in TennCare, Peters also sees challenges for the clinic and its staff with an increased number of uninsured patients. "I think the clinic is extremely important to the community."

The clinic also provides services to TennCare recipients whom Peters described as "underinsured."

"I think they get good care in our office. I think we spend the time" with

the patients, Peters said.

Pewitt said Peters makes a major contribution to that effort with her dedication to the persons to whom she gives care at the clinic.

"She's dedicated to caring for the underserved in our community, Pewitt said, "and she has a great passion for those who are in need."

Some who receive care at the clinic have no family to provide them with support or care, Peters said, and she recalled the words of one of her single, male patients:

"You are all I have," he said. "I have no family."

Volunteer Profile:

Young helps recruit volunteers

In the fifth decade of his medical practice, Dr. J. Howard "Bud" Young still looks forward to seeing patients.

Earlier in his career, Young, 75, a gynecologist who has been in practice since 1961, noted that he would say, "I would do it for free if I had to."

"Now it's my honor to do it for free," he said.

Young, a volunteer physician, sees patients, beginning at 3 p.m. on Thursdays, at the Primary Care & Hope Clinic. On Thursdays, he said, "I'm adrenalinized up. I look so forward to it."

Lisa Pewitt, clinic administrator, said Young is "very dedicated to the patients and the clinic," but his contributions to the clinic extend far beyond the voluntary medical services that he provides.

"He not only volunteers but also serves as one of our best recruiters of volunteers," Pewitt said. "He is frequently convincing friends to volunteer for the clinic and has added several different specialties to our clinic through his recruitment efforts."

Young, who is a member of the clinic's board of directors, said a number of retired and active physicians are volunteering their services to the clinic.

"It's a very generous medical community, by and large," Young said.

Young acknowledged, however, that he is concerned about the availability of advanced care for his clinic patients, particularly with changes coming in the state's TennCare program.

"It's a scary part of it," he said.

Costs for gynecological and obstetric services have escalated in recent years, Young said, because of costs for malpractice insurance and the related costs of new technology.

"A lot of this is defensive," Young said, as physicians order advanced tests because of fear of malpractice suits. Cost of malpractice insurance for an OB-GYN now in Rutherford County is \$68,000 each year.

Young said he last delivered a baby in 1984 because of the rising malpractice costs even then.

The state Legislature this year, however, provided some relief for physicians who provide voluntary services. These physicians are not subject to malpractice claims unless it is a case of gross negligence, he said.

"It gives you a lot more protection," Young said.

Volunteer physicians at the clinic have malpractice insurance, Young said, but the cost of his malpractice insurance is a minute fraction of what he would pay as an active physician.

Young said the clinic is working to reduce the cost of all services to its patients.

He noted that a gynecological procedure available through the clinic at \$150 would cost several times that much through a private practice.

Young said the patients he sees at the clinic each week have had varying levels of medical care in the past. Some are receiving indigent care for the first time, and others have had "to go for awhile without care" because of other financial demands.

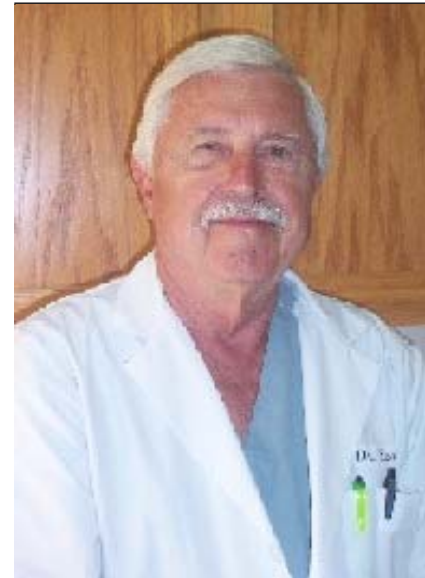
Young said he does not inquire into the financial circumstances of his patients. Even when he was in private practice, he said, "I never asked a patient how she was going to pay the bill."

Generally, his patients are women who "have been diagnosed with a bad Pap smear," he said. A Pap smear is a diagnostic test for genital-tract malignancy.

Clinic Administrator Pewitt noted that Young also is providing similar voluntary services to referrals from the Rutherford County Health Department and Student Health Services at MTSU.

"These procedures can be live-saving," Pewitt said.

Young said he is talking to MTSU officials about expanding the voluntary services for MTSU students. "We may



Dr. J. Howard 'Bud' Young

be setting up a clinic there."

Young, who retired from his active practice in 1997, said he sees his current work as part of his "mission."

Although Young said he participated in mission trips to provide medical services in South America, he said he reached the realization quickly that "we've got that need in Murfreesboro."

Young has been working with the clinic for more than four years. "We just found each other one day," he said.

The work of the clinic is "awesome," he said. "I think it will get bigger and better. We have a dedicated staff."

Plans are under way now to make the best possible use of volunteer physicians, he said. Carroll Kyle, a registered nurse at the clinic, will direct that effort to coordinate volunteer services.

Young also is working through his church, First Baptist, to develop a free medical clinic in a rural community between Sparta and Crossville. The area has high unemployment and widespread poverty.

"God calls me to do it; I'm doing it," he said.

Desk

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Unit and Dr. Jerry Campbell at the Clinic, to help us with our growing numbers of uninsured children.

The Primary Care & Hope Clinic has established many new partnerships within the past year that has helped us meet the common needs of individuals in a variety of settings. We have officially partnered with MTSU Student Health Services in an effort to provide complex women's health services to their uninsured female students.

As an example of how God continues to provide for His work, the

Melinda Haines Endowment for Women's Health was generously established within hours of MTSU's request for assistance.

Another partnership that has been established between our county's legal system, the Child Advocacy Center, Our Kids in Nashville and the Primary Care & Hope Clinic is the Children of Hope program for suspected victims of sexual abuse.

Our clinic is unique in that we do not present any financial barriers to those in need of our services, and this is just one quality that made the Children of Hope program possible.

I am proud of the work and effort of our staff, volunteers, board of directors and community members as they have all contributed to the success of our organization during the past year.

As we prepare to meet the incredible challenges that will occur in our community due to the recent TennCare changes, I ask for your prayers and support that we may remain faithful to our mission and see God's possibilities in our daily work.

With faith and thanksgiving,
Lisa Pewitt, APRN, FNP
Clinic Administrator

Donation Form

Primary Care & Hope Clinic

745 S. Church Street St., Suite 106

Murfreesboro, TN 37130

615-893-9390

<http://www.hopeclnc.org>

Name: _____

Street/P.O. Box: _____

City/State/Zip: _____

Telephone No.: _____

E-mail Address: _____

Enclosed is a donation of \$ _____

(The Primary Care & Hope Clinic is a 501(c)(3) nonprofit organization.

Donations are tax-deductible.)

Would you like to provide volunteer services to the Primary Care & Hope Clinic?

Please indicate the nature of those services: _____

United Way ends successful campaign

United Way of Rutherford County collected \$2,315,479 in its 2004 campaign, only 4 percent short of its \$2.4 million goal.

The Primary Care & Hope Clinic is one of 42 agencies in Rutherford and Cannon counties that receive funding through the United Way campaign.

United Way of Rutherford County also serves as a call center for the “2-1-1” organization for community information and referral.

Rachel Holder, communications director for United Way, said June 7 that member agencies soon will receive notices of their allocations from the 2004 fund-raising campaign.

United Way officials have praised the success of the 2004 campaign and the widening of the donor base for the campaign.

United Way President Tom Starling said the number of \$10,000 donors had increased from five to 10, but he said he was also impressed with the number of donors who are on fixed incomes and “who are nearest to needing our services – food, shelter, disaster relief.”

“It seems that more people are be-



ginning to understand how comprehensive United Way is,” Starling said in a release. “It’s obvious that residents and employees throughout Rutherford County want to help their neighbors, strengthen children and care for our aging mentors and veterans.”

Don and Melanie Alexander served as campaign chairs for the 2004 campaign.

Even as information about the 2004 allocations is going out, work already is beginning on the 2005 campaign, Holder said.

Kevin Smith is the 2005 campaign chairman.

United Way’s Pacesetters, which generally are smaller companies, will launch their campaigns July 1, Holder said.

The 2005 campaign will begin Sept. 13 with the annual Day of Caring, she said.

United Way’s Top 10 company campaigns for 2004 were Nissan North America Inc., General Mills/Pillsbury, Yates Services, Ingram Book Group, Bridgestone Firestone USA Inc., Johnson Controls, State Farm Insurance Co., MAHLE Tennex North America Inc., Middle Tennessee State University and Heritage Dairy Farms Inc.

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