**Free & Charitable Clinics of Michigan**

**Annual Report Presented at the Annual Meeting**

**May 11, 2023**

**State of the Organization**

In 2022, Free Clinics had 37 paid member clinics of the 63 known clinics and resource and referral agencies in Michigan. The available funds have remained at about $25,000. The current budget including year-to-date is available on the website. FCOM is in good standing regarding 501 requirements and Michigan’s non-profit corporation laws. Currently, the FCOM office will remain home-based with the Office of Record at City On A Hill Health Clinic in Zeeland.

Over the last year:

* The website had about 1300 visits. Most for the “Find A Clinic” page
* Sent out monthly updates
* I attended both House and Senate Health Policy and Appropriation Committee meetings
* I attended the NAFC State Managers monthly meetings (23 states have statewide organizations)
* I assisted one organization to open Gateway Health Center in Midland.
* I attended both the NAFC Symposium in Indianapolis and the BlueCross/BlueShield Safety Net Symposium in Lansing…..along with a lot of you
* We were awarded our first AmeriCorps VISTA member grant. Nimesha Liyanage is with us for the year to work on four main projects: ClinicData/Quality Improvement Survey, sustainability grant search, improving office/region/clinics communication and becoming a presence at state legislature.

**Direct Clinic Work**

 A lot of our work this year has been dedicated to strengthening the structure of the clinics. We have begun working with clinics: examples are instituting the Quality Standards survey, sending out the Emergency Preparedness checklist, the Document Retention schedule, Closing A Clinic checklist, working with individual clinics through 1:1 virtual meetings, creating the local marketing strategy pamphlet, continuing to share anything that comes across my desk that I think would be of interest or value (this year there were at least 89 of these forwarded emails including information on the Afghan refugee relocation issue and COVID developments), hosting the regional meetings (except for the Midwest Region, where they have met regularly for at least two years) and the monthly updates. We hope next year to have a valuation survey document for your use that can be used to calculate the value of your services to your community.

**Legislative and State Work**

This is the first year we have worked intently at state level. I have been introducing the organization and the clinics to state legislators so they have a better visual of who we are, what we do, where the clinics are located and all of the things they do. For all of these discussions the aggregate clinic data is everything. Once again, thank you for making that available to us.

The inclusion of the written prescription waiver into both PA306 and PA134, HHS adding the phrase “and other health related clinics” to their last statewide RFP offering and the full support of our appropriation are good examples of this work.

I have met with HHS Department Directors regarding working more closely with HHS and county health departments. I believe over the next year we will see more tangible awareness of our clinics.

**Goals for next year that will be melded into the goals decided by the Strategic Plan discussion this afternoon.**

In the coming year the Board is looking at moving from a Board of Directors run organization to an Executive Director/Board model. As we seek ED position funding, this organizational model is much more attractive and more commonly used.

1. Having all of the clinics complete a Quality Standards Survey whether the NAFC or the FCOM version
2. Introduce the valuation calculation document
3. Increase our membership percentage by at least 20%
4. With successful grants, hire an Executive Director and Administrative Assistant
5. Continue to strengthen our connections with Health Policy and Appropriations Committee members with a view of increasing our state appropriation
6. Continue to strengthen our association with HHS
7. Begin obtaining grants and acting as grant facilitator for clinics
8. Creating and sending out the next advocacy pamphlet – Strategies for Strengthening Relationships with County and State elected representatives
9. Begin visiting our clinics across the state…….in person. (Hopefully!)

A very busy year but each of you can very probably say the same.

 I hope this brief report clearly indicates the work the Board of Directors and I do is to continually support the work you do.

Thank you.

Ann Heler

Interim Executive Director