

Summer 2009

# Georgia's Health Safety Net: A Model of Excellence: The Good Samaritan Health Center

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**Georgia's Health Safety Net  
A Model of Excellence:  
The Good Samaritan Health Center**

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An Internship Paper  
Submitted in Partial Fulfillment of the Requirements for the

Master of Public Administration

**Kennesaw State University**

July 2009

## EXECUTIVE SUMMARY

The state of Georgia continues to struggle with the large amount of people who lack the ability to obtain healthcare when needed. Over a million Georgians have no health insurance, and face a variety of barriers to receiving healthcare. There are many layers to Georgia's safety net, where each clinic provides primary care in certain areas to a specific population in need. One active member in Georgia's safety net clinic system is The Good Samaritan Health Center, a privately funded, not for profit 501 (c) 3 organization. The center provides dependable, full-time healthcare for Atlanta's indigent, working poor, uninsured, and homeless population. For the MPA Professional Exercise, I have spent over 300 hours working in the development and fundraising department of this organization. During my time at the organization, I have gained invaluable hands-on experience in aspects of fundraising, public relations, marketing, donor management, and event planning. Good Samaritan Health Center exemplifies the four underlying functions of the nonprofit and voluntary sector described in *On Being Nonprofit*, by Peter Frumkin. These functions include encouraging civic and political engagement, delivering needed services, enacting private values and religious convictions, and providing a channel for social entrepreneurship. This paper will focus on the organizational efficiency of Good Samaritan Health Center's policies and procedures that lead to successful operations and management, as well as the tasks and projects associated with my internship that have led to greater understanding and perspective on the functioning of nonprofit organizations.

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## **THEORETICAL BACKGROUND**

The nonprofit and voluntary sector includes a vast array of many different types of organizations. Many times it is hard to define the exact boundaries in which they operate because they are all so different. The only concept most people attribute with nonprofit organizations is that they are tax-exempt, and most often serve a good cause. What most people don't consider is how many people are employed by these organizations and the wide range of services they provide.

The rise in nonprofits providing services can be traced to a response to the government undersupply of providing such services. Governments aim to satisfy the median voters, but unfortunately do not always meet the demands, therefore nonprofits are seen as answering to these demands as a means to fill this gap. The public good theory models non-profit organizations as suppliers of public goods, which are undersupplied by the government to heterogeneous populations. People will continue to seek services from nonprofits because it is the most rational choice to maximize benefits and minimize costs to the fullest potential (Seelarbokus, 8/28/08).

*On Being Nonprofit*, by Peter Frumkin, defines the many features of the nonprofit sector. He lists three features that show how unique the nonprofit sector actually is, in comparison with government and for-profit businesses. The first feature is nonprofit organizations do not coerce participation. Citizens cannot be forced by nonprofit organizations to give their time or money in support of any collective goal (Frumkin, 2000). Overall nonprofit success stems from the goodness of people's hearts. Personal experiences have shown that people give their time and money because they have an intimate interest in supporting a specific cause or charity, not to receive something or be recognized for what they have done. The second feature is that they

operate without distributing profits to parties, such as shareholders. People find comfort in being able to rely on nonprofit services because they are portrayed to deliver a value and are more compassionate about people and the cause the organization supports, rather than how much profit the organization can generate. The non-distribution constraint strongly reinforces the perception that these entities are acting for the good of the public (Frumkin, 2000). The third feature demonstrates how they exist without clear ownership and accountability. Although organizations can be somewhat accountable to foundations and donors, it does not have the same relationship as the government and its responsibility to voters, and businesses with their accountability to shareholders.

Throughout the text, *On Being Nonprofit*, Frumkin elaborates on the four underlying functions of the nonprofit and voluntary sector: encouraging civic and political engagement, delivering needed services, enacting private values and religious convictions, and providing a channel for social entrepreneurship (Frumkin, 2000). This paper will focus on the excellent functions, operations, and management of Good Samaritan Health Center in Atlanta, Georgia. Many examples will be provided on why this organization does an outstanding job of carrying out the tasks associated with the four functions mentioned above.

## **GEORGIA SAFETY NET CLINICS**

Access to health care is the ability to obtain health services when needed. Lack of adequate access for millions of people is a crisis in the United States, especially in Georgia (Bodenheimer and Grumbach, 2009). Over 1 million Georgians, have no health insurance. Non-financial barriers to health care include the inability to get care when needed, language, literacy, and cultural differences between patients and health care-givers, as well as factors of gender and race (Bodenheimer and Grumbach, 2009). Georgia's Hispanic or Latino population has grown

nearly 300% in the past decade, without a corresponding increase in health professionals who speak Spanish. There are many layers to Georgia's safety net, with different government agencies, health care organizations, and individual providers that each provide some primary care services in certain geographic areas to some segments of the population in need.

Georgia's charitable clinics delivered health care services to approximately 175,000 low-income, uninsured Georgians in 2008. This year, clinics are experiencing increases of 25 to 75 percent over 2008. Despite the growth of patients served, clinics are forced to turn away an estimated 50,000 Georgians due to lack of capacity (Georgia Free Clinic Network, 2009). According to the Healthcare Georgia Foundation, 17.4 percent of the state's population is without any health insurance (Georgia Free Clinic Network, 2009). Overall health outcomes are determined by multiple factors. Socio-economic status appears to be the most dominant influence, but medical care and public health intervention are also very important (Bodenheimer and Grumbach, 2009).

## **INTRODUCTION TO THE ORGANIZATION**

Good Samaritan Health Center is a privately funded, not for profit, tax exempt 501 (c) 3 Christian organization, that provides a comprehensive range of services for patients who otherwise could not afford healthcare. The Good Samaritan Health Center was founded in 1998, and opened for service in January 1999 in downtown Atlanta with a mission of "spreading Christ's love through quality healthcare to those in need." The center began with the founder, a handful of employees, and several volunteers with a vision to create a dependable, full-time, comprehensive healthcare system for Atlanta's working poor, uninsured, and homeless. Most importantly, the center provides a comfortable environment for patients, where all people are treated with dignity and respect. For the MPA Professional Exercise, I am assisting the Director

of Development and Public Relations in all elements of fundraising and donor relations to increase and develop funding opportunities for the organization.

During the beginning years, Good Samaritan Health Center provided an average of approximately 6,682 patient visits per year, and since then has grown to provide 19,000 patient visits as they did in 2008. The racial demographics include 36% African American, 32% Hispanic, 13% Brazilian, 13% Caucasian, 3% Asian, and 3% other races. Good Samaritan Health Center is able to provide care to patients due to the high number of staff that are bi-lingual in Spanish or Portuguese. Main areas of service provided by the center include medical, dental, social, health education, and mental health counseling. Patients have access to pediatric care, adult care, prenatal care, cardiology, gastroenterology, gynecology, physical therapy, endodontics, ophthalmology, orthopedics, mammography, laboratory, immunizations, family dentistry, psychological counseling, nutrition, and diabetes education and management. Dental patients receive root canals, crowns, bridges, and dentures. These services are an important aspect in the overall care of a patient's health while receiving care at Good Samaritan Health Center. Many patients are forced to chose visiting the emergency room or seeking no care at all. This creates a system where patients go from outpatient clinic to clinic with minimal follow-up visits. Therefore there is no continuity in the care that patients receive. Medical and dental providers at Good Samaritan Health Center track medical history and establish relationships so they may identify and manage risk factors for acute and chronic diseases. The center also has a dispensary on site for patients to receive their prescriptions and medical supplies at a reduced rate through pharmaceutical company sponsored programs. Good Samaritan Health Center has incorporated providing a variety of services for the convenience of the families who seek them for care.

The average cost of one patient visit to the center is \$125 dollars. Patients are seen by appointment. Walk-ins are very difficult to accommodate with the high volume of existing patients. Good Samaritan turns away approximately 300 patients per week. Ten percent of patient visits are Atlanta's homeless and destitute, ten percent are eligible for Medicaid and Medicare, and the remaining eighty percent are the uninsured working poor. All patients are provided services based on a reduced sliding fee scale that is determined by income. Since most of the patient's income is within 200% of federal poverty guidelines, many patients pay a very small fee, or sometimes no fee at all to receive care. These fees paid by patients cover only 23% of the actual cost of the services they receive, and are not expected to increase above 25% in years ahead. Therefore, the success of development and fundraising fills the gap and is a critical part of the organization. The remaining 77 percent of the cost to provide services stems from foundations, individuals, churches, businesses, and other community organizations.

The most recent capital campaign raised \$10.3 million dollars over three years. Although an outside consultant was not hired for the campaign, they did seek a consultant to perform a feasibility study for a \$2 million dollar capital campaign in 2001. The campaign, Caring for Families: Moving for Atlanta, initiated by the Board of Directors, helped launch the center to increase capacity and move into a 33,000 square foot building from their old building that was just 10,000 square feet. The campaign is comprised of \$7.2 million for capital expenses, \$2 million for endowment, and \$1.1 million for increases in operating costs. A move was needed for a variety of reasons to continue down a path of achieving successful operations. The Centennial community neighborhood became populated with major tourist attractions, retail and restaurant locations, and higher-priced residential properties. Good Samaritan was committed to remaining in inner-city Atlanta, but strongly desired a location in a neighborhood where the majority of

residents are uninsured, underserved, and of low-income families. Their new neighborhood is able to serve residents of English Avenue, Vine City, and Grove Park neighborhoods where the average family income is around \$23,000. On the other hand, presence in such a neighborhood comes with crime and social blight, but they are committed to serving the needs of their neighborhood and investing in the renewal and revitalization of the surrounding areas. The old location was also not able to handle any significant increase in additional staff members or patients. It also presented unsafe traffic and parking problems for staff members, volunteers, and patients. It is of utmost importance for Good Samaritan to be able to provide tangible benefits to those living in the surrounding communities. One of Frumkin's functions, encouraging civic and political engagement is seen through the ways Good Samaritan has built trust and cohesion within their new community and inspired people to get involved with their cause. The center is now able to offer more opportunities for volunteers and training partnerships with colleges and universities.

### **ORGANIZATIONAL CAPACITY**

The center now has the capacity to provide services for an average of 19,000 patients in a year, exemplifying Frumkin's second function, service delivery. This is the most recognized function because many unmet demands are fulfilled for a very diverse population. Dental operatories and medical exam rooms have doubled from nine to eighteen on each wing of the building. There are currently 54 chairs in the patient waiting room, opposed to the maximum capacity of 32 chairs that were available in the old facility. The new gated facility also has a volunteer room, classrooms, conference rooms, and an area for a potential teaching kitchen for The Diabetes and Education Management Program. Good Samaritan Health center is able to provide services with 29 people on staff that range in all fields such as physicians, nurse

practitioners, dentists, dental assistants, mental health counselors, dental hygienists, front office staff, dispensary technicians and an administrative team. Services are also supplemented by over 300 volunteers providing services estimated to be worth over \$400,000 annually. The center's location on Donald Lee Hollowell Parkway is in a prime location to become immersed in a community where their services are needed most. Good Samaritan is able to respond to the effects of increased unemployment rates and people lacking health insurance much quicker than outside parties, such as government, because of how closely connected they are within their local community.

## **HUMAN RESOURCES**

It is important for Human Resource Managers to understand the changing characteristics of the American workforce. Demographic diversity and a representative workforce in terms of race, ethnicity, and gender will remain a concern for all nonprofit organizations. The Good Samaritan staff represents a diverse culture by a variety of ethnicities. All nonprofits, including Good Samaritan Health Center, are dealing with effects of a changing workforce that includes employees with disabilities, retired baby boomers, and workers who are increasingly professionalized and highly trained. Another change in human resources is to recognize the needs for family-friendly policies and practices due to an increased amount of women and single parents in the workforce. Being aware of and utilizing cost conscious employee benefit plans are also crucial to the financial management of the organization (Choi, 4/8/09). Many of the administrative staff at Good Samaritan has the luxury of working a flexible schedule.

The Chief Operating Officer and the Human Resource Manager work closely together to administer personnel policies that are overseen by the Board of Directors. Employees are

equipped with an employee handbook that references a formalized policy manual. Job descriptions and other center operating procedures are the responsibility of the Chief Operating Officer and then administered by the Director of Human Resources and Compliance. The Human Resource Manager is in charge of initial interviews, hiring, firing, training, dress code, payroll, benefits, and also administers discipline as needed. Self evaluations, as well as supervisor performance evaluations are performed each year. During a self evaluation employees are given the chance to set goals and objectives for the course of the year. Performance and compensation reviews cover quality and quantity of work, strengths and weaknesses, attendance, problem solving, professional growth, teamwork, and customer service orientation. After the supervisor's evaluation, job descriptions are modified according to what has been determined. The policy manual is currently being edited to create a more standardized job description structure.

Not only does the mission incorporate and remind those involved with the organization to incorporate Christ's love in providing quality healthcare, the center holds true to the vision of the organization through a variety of outreach activities. First, the center is equipped with a prayer room ministry. This provides a place for staff and volunteers to pray for the patients, and sometimes even with the patients. Boxes with prayer cards are dispersed throughout the center to give the opportunity for all patients to fill out a card if they wished to be prayed for during staff devotion times. Another unique activity created to build a close-knit family group between staff members is a daily devotion before patients arrive to the center each morning. Several activities are focused around enacting private values and religious convictions for both staff members and patients, which is also Frumkin's third function. Each staff member has a duty to provide a 15-20 minute devotion of their choice once per month. Staff members listen to the needs of others and pray together each and every day. The staff are seen as an investment in ways other than the

salaries they are paid. Activities such as staff retreats, monthly birthday cake celebrations, and exemplary service and character recognition are just a few of the ways Good Samaritan recognizes their employees. Such activities keep the cozy, warm atmosphere they once shared in a small-confined building to remain strong even during the busiest of times in the larger, new two-story building.

The founder of the organization, Dr. Bill Warren, is also a practicing Pediatrician and the current Medical Director. He has great charisma and a strong potential to affect others through his passionate efforts of serving the needy. He illustrates a high degree of professional and organizational knowledge not only about medicine, but also on ministry, fundraising, leadership, management, and much more. Another strong quality is the active role he takes in a responsibility for acquiring new information and looking at old information in new ways (Van Wart Chapter, 2008). He is outspoken with his belief about continual learning and is an encouragement to all who seek additional higher education. Frumkin's fourth function, social entrepreneurship, involves individuals who lead these types of organizations. Anyone who comes in contact with him will notice his strong vision, that he is a self-starter, and one day a little over ten years ago he was willing to take a chance. Many nonprofits originate because someone was interested in solving a simple problem. The founder can most be described through Frumkin's idea that some nonprofits begin with a "believer," who is an entrepreneur that has a strong commitment to a cause, and formulate their plan so as to advance a particular moral or social cause (Frumkin, 2000). It is also key that he has been able to possess the capabilities to hire the right staff and volunteers from the beginning. For example, one doctor met with the Founder when he shared his dream of starting Good Samaritan in 1998, and he has been fortunate enough to continue in the joy of serving patients ever since.

Although Good Samaritan could not open its doors each day without the hard work and dedication of the medical and dental staff, the work of the administrative team can be attributed to the continual overall success of the organization. With an operating budget of almost \$2.4 million, the administrative team is comprised of four or five key individuals. This team is made of a chief operating officer, a facility and administrative coordinator, a volunteer and human resource director, and a director of development and public relations. As seen in many nonprofits, each individual fills a variety of different roles and has duties outside the normal job titles they all carry. The chain of command follows a hierarchical system of top down communication from the President, and also Medical Director, and then branches off to either the administrative team or the Dental Director. Both the Medical and Dental directors are responsible for nurses, volunteer providers, Emory dental and medical students, and many others.

Full-time staff, both professional and support personnel, are allowed up to two paid days per year and a budget of \$200 for registration, the cost of classes, or seminar. Part-time and hourly employees are also eligible for continuing education, but policies and reimbursement processes are different. Management and the Board of Directors of Good Samaritan Health Center may also request or require educational activities of the staff as well. The procedure includes a written request no less than two weeks prior to the activity. The written request is part of the "Request for Educational Reimbursement Form." Other times speakers or seminars are conveniently scheduled during lunch so all staff can take advantage during their designated hour of lunch.

## **PHILANTHROPY**

In the book, *America's Nonprofit Sector*, Salamon explains a crucial distinction between the private nonprofit sector and philanthropy. The private nonprofit sector is usually an

organization, such as Good Samaritan Health Center, that serves some type of public purpose. Philanthropy on the other hand, is the giving of time or valuables for a public purpose (Salamon, 1999). Good Samaritan Health Center can be described with both of these categories in mind. Dozens of people contribute their time, money, and goods to keep the organization functioning. Not only do people volunteer time and send in donation checks on a weekly basis, people contribute tangible goods. Palm trees in the lobby were donated by a woman in the community, breakfast is provided for staff every Friday by a Board Member, and a volunteer knits scarves in the winter time to hand out to expectant mothers who may not have the means to buy such an item. Frumkin's third function covers nonprofits that are based on values and faith. This plays a vital role in the success of Good Samaritan because of how strong people are moved by the services they are providing. This function explains why many people enter into this type of work, bringing their work together with their passion to serve others.

## **VOLUNTEERS**

Good Samaritan Health Center benefits from their usage of volunteers not only from a standpoint of financial savings, but volunteers are highly motivated because it is their choice rather than their livelihood to volunteer. Volunteers serve as a great way to become involved with new community contacts that may be a source of new contributions, they bring crucial skills to the organization, and often they can speak their minds or be a great sounding board for creative, innovative new ideas (Grobman, 2008).

A passionate, yet hard working environment can be seen throughout the organization through the work of the volunteers. It is amazing how many volunteers contribute to the overall success of the day-to-day operations. On any given day at the center, one might come in contact with an administrative volunteer, a college student doing an internship, a church group, a

medical or dental student, or even a volunteer medical or dental provider who is giving their time to contribute their part to the organization. Many specialists who come to the center to provide care have their own private practices outside the organization, but enjoy giving back to the metro Atlanta community once to several times per month as their services are needed. There is a high degree of resilience seen among staff between the walls of the center. Staff could easily become bogged down by the heartbreaking stories each patient shares, but instead they have the ability to spring back into shape and continue persistence toward the goal of the organization (Van Wart Chapter, 2008).

As mentioned before, volunteers are at the core of Good Samaritan's ability to provide care for such a large amount of patients each year. Nonprofit organization budgets rarely allow hiring all the employees they desire or need, as seen at Good Samaritan Health Center. So, this is where volunteers fill the unmet demand. During times of recent economic uncertainty, a variety of nonprofit organizations have been vulnerable, and perhaps even experienced budget cutbacks or shortfalls, at the same time their services they are providing are increasing (Grobman, 2008). Between January and May 2008, Good Samaritan had seen 575 new patients. Considering what has recently happened with the downturn of the economy, and the increased capacity with a larger building, it is no surprise that Good Samaritan has seen 1,058 new patients from January to May 2009. Changing demographics in recent years include single-parent households, more working women, and postponed retirement, which demand that volunteer recruitment and training are at an all-time high. National statistics provided by the Independent Sector validate the continuing popularity of volunteerism. According to these statistics, 83.9 million or 44 percent of U.S. adults provided volunteer service in 2000. This monetary value was estimated to total around \$239 billion dollars (Grobman, 2008). New initiatives are strengthening the push to

promote volunteerism. Partnerships are being developed by schools, colleges, and religious institutions across the country. Such partnerships are also being encouraged by government. Federal legislation such as The National and Community Service Trust Act, provided an incentive to promote volunteerism amongst the young and the elderly by paying out education or living stipends from a program budget of \$733 million in 1993 (Grobman, 2008). This push can be seen through the creation of AmeriCorps, Learn and Serve America, and the National Senior Service Corps (Grobman, 2008). President George W. Bush attempted to promote such an idea by establishing “US Freedom Corps” after the September 11th attacks, as well as through the request to increase funding for AmeriCorps. More recently, President Obama requested for Congress to create new service and volunteer opportunities for Americans that will help to build a stronger country. The Edward M. Kennedy Serve America Act give Americans of all ages the opportunity to help our nation recover and make progress on crucial issues such as health care (Speaker Nancy Pelosi). He also has proposed an increase of \$2 billion in spending for community health center and safety net clinics under the American Recovery and Reinvestment Act of 2009 (Wikipedia).

Good Samaritan Health Center prides itself on the hard work of their volunteers. Few can argue with the view that most nonprofit organizations human capital is one of the most important resources. Volunteers are recruited on an as needed basis, but usually general volunteers are the ones seeking out Good Samaritan for a place they can give their time. On many Saturdays, you are likely to see hard-working volunteers throughout the center. Many groups give a morning or afternoon to cap medicine bottles for the dispensary, plant or weed flower beds, and clean up trash around the building and parking lot. The volunteer coordinator has attended some volunteer fairs in the past, but does not see this as a high priority since her time is split between

coordinating volunteers and managing human resources. If time and additional personnel would allow, Good Samaritan could seek volunteers by targeting church groups, listing information in newspapers, public service announcements, or online postings. The only challenge seen thus far in volunteer recruiting has been medical and dental providers, as most of these individuals become volunteers because they have heard about what Good Samaritan Health Center is doing by word of mouth. Volunteer providers are also recruited with TAP-IN, from The America Health Initiative. TAP-IN works with the nation's highest-quality free clinics to match them with the doctors, nurses, dentists, pharmacists, mental health specialists and other healthcare professionals who are ready to donate their time. It is important to identify interests of potential volunteer candidates to make sure they are compatible with the organization (Grobman, 2008). Motivations for volunteering can range from passion for a cause, developing job skills, making contacts, or having a place to hangout. A volunteer can have the same, if not more, organizational impact as a paid staff employee (Grobman, 2008). Even though nonprofits are usually stretched very thin when it comes to the amount of personnel they have on staff, just because a person is willing to work for free does not always make them a good candidate for the position (Grobman, 2008). Once an individual shows an interest in the organization and is accepted to become a volunteer they are required to go through an orientation process. This includes an information session, watching an informative DVD, and making sure the mission and expectations of the organization are clearly understood. If an individual plans on providing health services to patients they also must pass a criminal background check. Even though volunteers are not compensated for their efforts, they are recognized for their hard work. Volunteers are invited to an annual appreciation banquet ceremony; they receive a special volunteer newsletter, as well as a birthday card each year. The banquet gives volunteers a chance

to hear testimonies from patients who have been affected by their service at the center. One thing the volunteer coordinator would like to implement in the future is a way to recognize yearly anniversaries for those individuals who contribute several consecutive years of service.

## **BOARD OF DIRECTORS**

Volunteers also make up Good Samaritan's Board of Directors. The primary philosophy used when initially gathering Board Members was to focus on areas of expertise. The Board of Directors provides governance and guidance of the organization, while the President and staff manage daily operations. Throughout the ten years of serving metro Atlanta, Good Samaritan Health Center has become more complex, requiring a sophisticated and professional Board of Directors. The essential role of the board of directors is to assure the organization is mission-driven, governed by a board of citizens responsive to the community that they serve. Roles are also based on the values of altruism, community and diversity, operating in an ethical and prudent manner, and providing citizens an opportunity to participate in the civic life of the community (Grobman, 2008). Areas of expertise that are represented from members of the board include inner-city ministry, dental and medical doctors, lawyers, and real estate and business professionals. There are 16 total members; of those three main positions are the Founder and President, a Chairman, and a Secretary/Treasurer.

Recently Board Members have taken a front seat approach on how they can contribute to the importance of donor recognition. Each meeting members write one or two letters each to a donor that has given between \$1,000 and \$5,000 as a more personal way to say thank you. This summer I was also part of initiating new "Get to Know Good Sam" lunches for key community members and major donor prospects. Board Members have a responsibility to solicit outside donors, so we decided to provide a tour of the facility, a boxed lunch, and a meet and greet with

the Founder to establish a place for these types of relationships to flourish over a casual lunch. Good Samaritan Health Center has a clear distinction between board and staff roles. Although board members are not actively involved in day-to-day decision making, they do regularly oversee the budget that they set based on recommendations. Once recommendations are approved, the staff make the rest of the decisions to carry out the process. For example, if the board approved a \$2,000 technology upgrade, it would be the staff's job to decide on which brand and how many computers or printers they would purchase. A potential way Good Samaritan could redefine the role of board governance to ensure that their organization is operating in an ethical and prudent manner would be to implement term limits of time individuals serve on the board. Currently there are still board members who sit on the board from when it first started about ten years ago. In the last ten years only three or four individuals have rotated off from serving on the board. This type of tenure gives an opportunity for the board to become stagnant, lacking new, creative and innovative ideas.

While everyone makes policy at some level, the question to consider is what policies the board should be responsible for (Grobman, 2008). Policy is defined as, the values or perspectives that underline actions. Four main areas should encompass all board of directors in every nonprofit organization (Grobman, 2008). First, it is important to outline the outcomes of the organization. The board must determine how the world will be different as a result of the organizations activities. Second, policies should articulate the board's values regarding how the executive director manages the organization, in this case the Founder and President. Policies should also describe what is expected of the executive director, and how and when the policies of the board will be monitored. Last, it is crucial to have policies that outline how the board will govern itself (Grobman 2008). One committee within the Board of Directors is a finance

committee, which is a small group of members who prepare the budget. Other duties include making salary recommendations that are based on a yearly staff evaluation. Although, this is not a guaranteed paid increase, because it is directly related to funding numbers and what the organization is able to budget. The most recent recommendation was to give only hourly employees a cost of living increase, and unfortunately salaried employees did not receive a raise for this year. Other policies made by the board include the hiring procedures for the dental and medical providers.

Similar to the Board of Directors, is the Women's Auxiliary. This group is comprised of 17 women who volunteer together to benefit the mission of the organization. These are influential women in the community who have contacts to work together with the Development staff to increase funding for Good Samaritan Health Center. Their most recognized annual contribution to the organization is their Women's Luncheon. Auxiliary members can sponsor a table and invite guests to dine at a fancy lunch affair, or women who are invited are asked to buy their seat for the event. After the food and other overhead expenses are covered, all proceeds go to Good Samaritan. They also host an annual summertime staff and volunteer luncheon. One Friday during the summer the center closes early and the women provide a cookout for staff and volunteers that is anticipated all year long. They are able to keep staff morale high, as this is one event where staff and volunteers can connect and relax together. Members also volunteer their time, solicit donations, and look for individuals to volunteer through their churches and other community organizations they may be involved in.

## **DEVELOPMENT**

The functions and responsibilities that fall under the Development and Public Relations Director include everything from sending out a receipt, writing a grant, planning a golf

tournament, managing the donor database, editing the annual report, as well as many, many, more. It is crucial for the Development and Public Relations Director, at Good Samaritan to remain flexible while she does the job duties of two or three people. She communicates with the chief operating officer and the president on a daily basis to make sure everyone is informed and has input on the variety of things being worked on. With limited financial resources, it is clear that the position has required being a master of many roles. This summer the internship has consisted of assisting the one-stop-shop development department in the vast array of projects that have either been put off or postponed due to the lack of inadequate staffing.

### **DONOR MANAGEMENT**

Raiser's Edge is a fundraising and donor database system that Good Samaritan uses, as well as many other organizations in the nonprofit sector. This system allows you to track donations, pledges, gift-in-kind donations, volunteer hours, appeals, honor and memorial gifts, events, as well as other functions. Knowing this software and staying up to date with its capabilities and functions is crucial to the success of working within development and fundraising. The software is most used for relationship cultivation, contact management, diversifying fundraising methods, and communicating for effectiveness. Before starting the internship I was sent to a week of training from Blackbaud University to become certified in the Part I and Part II Essentials of using this software. The center actually made an investment in a training pass from Blackbaud University to send an unlimited amount of staff members to receive training this year. After being certified in Raiser's Edge, I immediately began managing donations on a daily basis. It is my responsibility to keep track of donations in the system and produce receipts for donations received every day.

There is a clear standard operating procedure for receiving donations. Majority of Good Samaritan's donations come in the form of a business or personal check through the mail and the remaining small percentage of donations are made online with a credit card. The President or the Chief Operating Officer receives the mail and distributes checks to the development office. Once they have been entered into Raiser's Edge, copies are made and they are given to a LIBERTY to deposit them into the bank. There is also a 48 hour turn around time from receiving a check in the mail to the time the receipt is put in the mail to the donor. Each receipt has a hand-written note from the President to the donor that emphasizes the importance of a donation. Due to their transparency and a great system of checks and balances, for five consecutive years Good Samaritan Health Center has received a 4-star rating from Charity Navigator, America's largest independent charity evaluator. This public rating is given to organizations based on their organization expenses and their organizational capacity. Program expenses total 76.4 percent, administrative expenses are 19.1 percent, and fundraising expenses are about 4.4 percent. The Founder, Dr. Bill Warren does not take a salary, so next in line is a medical doctor who's salary is 4.94 percent of total expenses. Good Samaritan is also a member of the Evangelical Council for Financial Accountability, which is an accreditation agency that helps Christian ministries earn the public's trust through adherence to the seven standards of responsible stewardship. Some of the issues focused on include board governance, financial transparency, and fundraising integrity.

There is a standard of excellence associated with the way fundraising and donor management is executed at Good Samaritan. In fact, other organizations, although smaller in size and budget, visit Good Samaritan from all over the country to learn and understand best practice methods on how to run this type of organization. Donor management includes a strong

understanding of the variety of areas on how funding trickles into the center. Funding is contributed by individual donors, churches, community organizations, businesses, and foundations. One must be knowledgeable about keeping in close contact with major donor prospects, but also with long-time routine donors as well. This summer I have initiated a new letter to be sent out when a constituent gives to the organization for the first time. Business rules and codes created in Raiser's Edge allow users to tag a record and note that they have or have not received this letter for the first time in a given year. Although this can be one of the most tedious and time consuming tasks of development, it is one of the utmost important priorities that those working in development should attend to daily.

## **EVENT PLANNING**

Crucial to the future operation of Good Samaritan Health Center are the planning and hosting of several special events throughout the year. Special events are time consuming and the least cost effective of the fundraising types. Although, this is where organizations can use creativity and distinguish their organization from others. Last year students from the Wesleyan School teamed up to plan a skating party to celebrate birthdays. They requested no gifts, but suggested contributions be made to Good Samaritan. The biggest and most profitable special event put on by Good Samaritan is the annual charity golf tournament. Last year was the third year for the tournament that hosted more than 160 golfers to attend the event. After the expenses of \$69,000 were subtracted, the proceeds of \$100,000 provided more than 1,100 patient visits. A planning committee assisted the Director of Development to acquire sponsorships, raffle items, and recruit teams of players. Considering the downturn of the economy at the end of 2008, the center decided to postpone hosting a golf tournament in 2009. Since May, I have been involved in the beginning stages of planning for the tournament being put on in 2010. Currently the

decision is being made between two different facilities the Development Director and I have researched and visited.

Good Samaritan Health Center is also involved in an annual 5K event called “Vinings Run for the Kids,” hosted by the Vinings Rotary Club that benefits Good Samaritan Health Center. The organization also has a team to participate in the It’s A Journey Inc. 2-Day Walk for breast cancer. The Development Director and I have begun planning a charity event called “Do The Bright Thing.” Our plan includes signing up some of the center’s volunteer dental providers and other dentists throughout the metro Atlanta area that have their own practice to provide services for the program. Dentists will contribute their time, staff and supplies at their private practices for people to receive teeth whitening or teeth cleanings for a price that will directly benefit Good Samaritan Health Center. Boxes will also be set up in these dentist offices for those who wish to contribute but do not want to pay or receive dental services. This event is projected to bring in an estimated \$20,000 of additional revenue in the first year. There is also a desire to attend more health fairs around the metro Atlanta area to increase awareness about what the organization is doing. Becoming a beneficiary of events in Atlanta is also a great idea for the Center. I am currently working on the application process for Good Samaritan to become the beneficiary for the Cathedral Antiques Show and Tour of Homes, put on by the Episcopal Women of the Cathedral of St. Philip. This is crucial to the event side of development, due to the fact that there is usually one person devoted to planning special events. By becoming a beneficiary of an event the center is still privileged of receiving a monetary contribution but the planning and time associated with being involved in the event is incremental compared to hosting an event of such caliber independently. Planning special events are a great way to gain

positive exposure in the community, but can be a very time consuming process. Therefore, it is important to perform a cost-benefit analysis for every event that is organized.

## **MARKETING AND PUBLIC RELATIONS**

Market and needs identification can be one of the most time-consuming yet fascinating aspects of marketing. This is examining who the target market is, and finding out what they need and want (Smith and Bucklin, 2000). It is crucial for Good Samaritan to examine the several different markets that lie within their two major markets; donors and volunteers. These include young people, college students, elderly people, people working in ministry, or members of minority groups. Breaking down the larger two markets into special interest groups is called market segmentation (Smith and Bucklin, 2000). Currently, Good Samaritan does not differentiate methods of communication according to amounts given or hours served. Possibly differentiating mailings to various groups would enhance a stronger relationship by creating documents for specific targeted groups.

Public Relations is the practice of communicating with individuals and groups to influence the success, the cause, constituency, profession, or industry it represents. Public relations can be used to enhance an organization's image, increase participation, energize supporters, or support fundraising (Smith and Bucklin, 2000). Different ways public relations are used to benefit the mission of Good Samaritan is through fundraising efforts, community awareness, recruiting volunteers, and for special events. According to Smith and Bucklin, advertising is bought, public relations is earned. Ways to earn proper public relations is through earning praise through good deeds, careful work, and community outreach. Media has a profound impact on the practice of public relations. In 2007, Good Samaritan was featured in the Atlanta Journal Constitution about clinics that help relieve the number of uninsured Georgians

found in emergency rooms. Fox News also did a story in 2008 that highlighted the need for Good Samaritan during tough economic times. A news channel re-aired a piece on Good Samaritan and to their surprise the center found out when patients flooded the phone lines and the front office because they saw the story and wanted to become patients. It is important for the development department to evaluate and analyze a direction to increase awareness for the Center in metro Atlanta. This will require a focus on increasing awareness to gain additional individuals who are interested in giving their time to volunteer or contribute financially, which will in turn increase the capacity to increase patient visits. Aside from being a financial burden, sudden mass media exposure would flood patients to the center and the capacity would not be there to handle the influx of people.

Currently, PR packets are made of the most recent annual report, two past newsletters, information sheets on services and needed items, an overview and history of the center, a brochure, and an informational DVD. The annual report is a good indication of what the center is about because it summarizes activities and accomplishments, and the accounting of funds raised and spent throughout the year. Another PR tool comes from the speeches and presentations given by Dr. Bill Warren at a variety of conferences throughout the country. He is a great tool because he can connect with various industries from managing a nonprofit, being a doctor, being a fundraiser, and being in ministry. In June I created a presentation for him that outlined how he started Good Samaritan and how people who are not currently practicing in the dentistry field can add on or start clinics just like the one at Good Samaritan. Dr. Warren is a pediatrician, but has been able to successfully run a dental clinic alongside a medical clinic even though he had no experience in the dental industry.

Other additional recommendations for Good Samaritan are to perhaps generate untraditional revenue streams with a publication. After Dr. Bill Warren has served the community for ten years, what better a time to put out a book on what he has been able to accomplish since founding the organization in 1998. Good Samaritan could also use their ratings of excellence and superior operations and management procedures to their advantage financially. Holding an annual meeting or convention for organizations that operate similar type of clinics and are interested in learning best practice methods of running a safety net clinic could be an additional stream of revenue. This would be a great opportunity to generate additional income beyond the most obvious ways.

As I mentioned before, Good Samaritan has considered attending events like health fairs and other public health awareness events. The best way for nonprofits to build goodwill is to educate consumers about matters that affect their well-being (Smith and Bucklin, 2000). As a development intern, I have presented different promotional items that Good Samaritan could take to such an event, such as sunscreen, to hand out to help prevent damage from sun exposure. People are drawn to healthy tips and free items that involve health, first aid, youth, and family well-being. Other communication tactics that promote community relations to enforce values are fun runs, cookouts, liter cleanup days, building homes, mentoring, raffles, and demonstrations. Bringing an eye chart or a blood pressure cuff to such an event is also another way to attract people and inform them about their health and sharing about Good Samaritan Health Center.

Currently the staff and strategic approach is severely limited by the lack of personnel. The center has the space for extreme growth, but lacks the resources required to carryout the potential of additional marketing and public relations tasks at hand. In 2008, a 60 second spot that ran for two weeks cost \$7,700 after a huge nonprofit discount was provided to advertise the

golf tournament. So, Good Samaritan finds they are forced to consider how to increase awareness, donors, and volunteers through donated or free advertising. I have come up with several ways in which Good Samaritan could follow through with their desire to increase awareness. Free public service announcements on A.M. radio stations could inform potential volunteers and other community members of what is going on within the walls of the center. Since informational DVD's are already a current resource, those could be used in more effective ways. Instead of saving them for face-to-face meetings at the center they can be distributed throughout the community at a much larger rate to those who would benefit from receiving this. Additional ideas that might be worth a small expenditure include an article to recruit medical and dental volunteer providers in medical journals. This could be a great way for dentists and doctors to learn they can earn continuing education credits by volunteering their time at the center. Good Samaritan Health Center also needs new display boards, as their current boards are extremely outdated. This will be worth a small fee to update the look of the board that draws people to come to their table when they are set up at events in the community.

Another great way to establish a positive face in the community is by being involved with professional associations such as The Chamber of Commerce, The Rotary Club, or Atlanta Fundraising Professionals. Cultivating relationships with individuals should always be your first fundraising concern (Smith and Bucklin, 2000). Surprisingly, no person on the administrative team currently has the time to take an active role with any type of association. Since the development and marketing is a one stop shop handled by the same person, it is a challenge to devote time to being a member or involved with something of this nature. The time it takes to cultivate relationships over a breakfast meeting or at a Rotary luncheon is more time spent away from other high priority tasks that outweigh such activities. One need this administration team

does have is to eventually separate a development and fundraising position from a marketing and public relations position when the funding will allow.

## **FUNDRAISING**

The most commonly used fundraising methods used by Good Samaritan include special appeals, special events, capital campaigns, planned giving, endowments, and gift-in-kind donations. Special appeals are usually centered geared toward an urgent project or a particular program. For example, Good Samaritan received a challenge grant from a foundation. An individual donor is using a foundation to contribute \$12,500 to the organization as an endowment for a family member who is deceased. The funding will be dispersed when Good Samaritan raises that same amount themselves. The individual has certain people in mind that reside in Virginia Beach that would help Good Samaritan Health Center with their portion; therefore they will receive a special appeal related to this situation. Capital campaigns are usually designated by large organizations for building projects, renovations, new program development, endowments, and special projects. Capital campaign goals far exceed annual giving numbers by a factor of 10 or more (Smith and Bucklin, 2000). Planned giving allows donors to make gifts in the form of wills, bequests, or trust funds. The different funds that Good Samaritan currently has allocated to donations include annual, capital, endowment, or gift-in-kind funds. General donations are always categorized as annual funds. Endowment funds are designated by the Board of Directors and encompass honor gifts, memorial gifts, celebration gifts, or anniversary and birthday gifts. The center also receives a large amount of gift-in-kind donations. Donations include prescription drugs, medical and dental supplies, food, office supplies, decorations, and bibles. Other facilities also perform services for Good Samaritan patients, for example, an outside vendor is in charge of running all lab results, which Good

Samaritan is not charged for because it is donated as an in-kind gift. Marketing and fundraising have a close relationship because in order for an organization to appeal to their donors they must understand the motivations behind giving. Donors are motivated to give for altruistic reasons, because of a personal relationship with someone in the organization, for publicity or recognition, or religious reasons to name a few. In order to appeal to all types of donor's, organizations must understand the reasons behind why people write checks or make a pledge.

Other ideas that may be put into practice once the budget allows for additional staffing, are soliciting corporate sponsorships for day-to-day activities. One proposed idea is to find a sponsorship for children's health, therefore finding a revenue stream for vaccinations or immunization clinics. Currently, vaccination clinics are held on Thursday evenings for a couple hours to attempt to in preparing families to start a new school year in the fall. Good Samaritan also does not receive funding from the government. Due to the new stimulus money that has been awarded to the state of Georgia, the Georgia Department of Community Health is planning to share grants to many different organizations. The stimulus funds in community health will be awarded to health information technology, prevention and wellness, and safety net clinics for federally qualified health clinics. I have started the process and acquired a DUNS Number, and completed Central Contractor Registration. These steps are required by the government to be eligible for funding. This is a controversial debate because some people in the organization may feel that jumping through hoops of red tape and bureaucracy may not be worth the time that will be allocated to apply for such funding.

Within the fundraising realm, churches are an untapped arena for funding and for volunteering. Last year only 17 churches financially contributed to Good Samaritan. Perhaps seeking out churches that staff members or board members attend may be an additional idea.

Many churches are prone to financially support community ministries such as Good Samaritan, although many churches may not be aware of what Good Samaritan Health Center is doing if a church congregation does not face issues with uninsured individuals. If more relationships were developed with churches in and around Atlanta, churches could refer people needing the services of Good Samaritan with somewhere to go. Many of these ideas have the potential of being put into practice, but currently the Director of Development is limited in taking Good Samaritan Health Center to another level and increasing the budget, just because one person can only do so much when they are responsible for some many crucial functions of the organization.

### **GRANT WRITING AND FOUNDATION RESEARCH**

Like special events, preparing proposals for submitting a grant can be tedious and time consuming. Organizations must air on the side of caution when looking to submit a new grant proposal. Without proper research ahead of time, organizations can easily slip into straying from the mission of their organization by being forced to perform other jobs or add other services due to the restraints and recommendations by the funding source. Most grants only allow around seven percent of the asked amount to be indirect costs allocated to personnel and salary expenses. Currently, I am writing on a \$100,000 grant called Atlanta Benefits funded by Humana. I am writing to Humana to ask for funding for The Diabetes Education and Management Program. Due to Humana's guidelines of indirect costs not exceeding fifteen percent of the \$100,000, I am calculating the cost of the program per patient visit. This requires a program budget that includes estimated calculations for a complex medical visit, nutrition counseling, diabetes education classes, vision screening, along with foot care and dental checkups. Humana also requires program objectives and outcome measures, as do many other

grantors. Other required documents include organization achievements, relationships, project strategies and evaluation, financial information, and much more.

Once granting Good Samaritan funds some foundations can be very low maintenance and only require a six month performance checkup and a year end report. Others can require detailed, documentation and pictures which takes time to prepare and administer sometimes on a weekly basis. Other grant proposals we are currently preparing for include the Health Care of Georgia, Georgia Baptist Ministry, Susan G. Komen, It's A Journey, Jesse Parker Williams Foundation, and CNN Heroes.

Recently sitting in on a Komen grant writing workshop has given me an in-depth perspective on the preparation involved in submitting a grant to their organization specifically. They require each organization to use their final report budget form and detail grant funding for personnel, supplies, equipment, travel, patient care costs, and other expenses. Each category must be justified with a written out description to explain how the costs will be allocated. For example, we calculated Good Samaritan would provide 302 screening mammograms and interpretations at \$65. Also anticipated services will include 89 diagnostic mammograms for \$130 and 89 ultrasounds for \$200. Several calculations such as these are formulated to come up with the total amount of requested funding. Special to this grant are zip code regulations on who services can be provided to, which requires a thorough system of checks and balances to keep track of patient information.

Foundations like to see organizations who exhibit they are fiscally responsible by having concrete goals and objectives. Narrative statements give organizations a chance to report pertinent information other than numbers to list objectives, how organizations are meeting or exceeding expectations, addressing challenges, and so on. Other things that must continue to be

monitored are number of group education presentations, number of individual consultations, newsletter mailings, brochure distributions, or radio airtime. The information provided to an organization, such as Susan G. Komen, is analyzed to pinpoint gaps between counties that are providing service so that the Komen Atlanta Board of Directors can see where the needs are being met, as well as for national and local organization accounting procedures.

## **CONCLUSION**

There are various examples that indicate why Good Samaritan Health Center is an excellent example of Frumkin's four nonprofit organization functions, from the text *On Being Nonprofit*. Throughout the internship I have been exposed to several crucial components on how to operate a successful nonprofit fundraising and development department. I am aware of my strengths and weaknesses in the workplace and look forward to working on those as I begin a career within the nonprofit sector. Hands-on, invaluable experiences have presented the issues and elements of nonprofit management that I had yet to experience thus far in the Public Administration program. Not only are nonprofits responsible for being fiscally responsible to their constituents, but more importantly they are faced with building everlasting relationships to change the lives of those living in the communities they serve. For this organization specifically, I was able to be a part of the aftermath of a successful capital campaign, take on responsibilities of donor management, and perform grant writing and research that was not only crucial to the organization, but to beginning the building blocks for starting a successful career in a health-related nonprofit organization.

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## **Appendices**

History and Mission Statement

Organizational Chart

2009 Budget

2008 Financial Income Statement

Organization Census

Luncheon Invitation

Sample Budget for Grant Proposal: Atlanta Benefits