



# United Neighborhood Health Services



## General Information

### Contact Information

<b>Nonprofit</b>	United Neighborhood Health Services
<b>Address</b>	2711 Foster Avenue Nashville, TN 37210
<b>Phone</b>	(615) 227-3000 1024
<b>Fax</b>	615 515-5773
<b>Web Site</b>	<b>Web Site</b>
<b>Facebook</b>	<b>Facebook</b>
<b>Twitter</b>	<b>Twitter</b>
<b>Email</b>	mbufwack@neighborhoodhealthtn.org

### At A Glance

<b>Year of Incorporation</b>	1976
Neighborhood Health	

# Mission & Impact

## Statements

### **Mission**

United Neighborhood Health Services is dedicated to improving the health of our community by eliminating barriers to care and serving as a healthcare home without regard to ability to pay.

### **Background**

United Neighborhood Health Services (UNHS) is a private non-profit organization. The organization began in 1976 as a coalition of two volunteer medical clinics, Cayce Clinic in east Nashville and Waverly-Belmont Clinic in south Nashville. These began in 1971. Today, UNHS is a network of ten neighborhood clinics, two homeless clinics and two mobile medical vans serving over 25,000 residents with over 90,000 visits. 98% are low income and 52% are uninsured, with 29% having TennCare. 17% are children and 34% are women between 15 and 44 years old. 45% are African American, 21% Hispanic, 31% white and 3% other races and ethnicities. Physicians, nurse practitioners, physician assistants, dentists and licensed counselors form the clinical teams that offer holistic care. Persons of all ages receive quality primary care. Fees are on a sliding scale based on income and family size. No one is denied care because they are unable to pay. United Neighborhood emphasizes the continuity of care of each patient and comprehensive care, serving as the patient's "medical home" where they receive a full evaluation and comprehensive and holistic services including: chronic disease care and management, pregnancy testing, family planning, immunizations, TB testing, STD testing and treatment, prenatal care, parenting education and counseling of teen parents, labs, pharmacy, violence prevention, translation service, behavioral health counseling, and dental services. The clinic locations are: Cayce Clinic, 37206, Cleveland Park Clinic, 37207, Napier Clinic, 37210, Madison Clinic, 37115, East Side Clinic, 37206, Southern Hills Clinic, 37211, Casa Clinic, 37211, and Inglewood Clinic, 37216. The Downtown Homeless Clinic and Mission Clinic serve homeless clients. The Hartsville Family Clinic is in Trousdale County. The Lebanon Clinic is in Wilson County. Financing for UNHS comes from a diversity of sources. 50% of the approximately \$15 million budget comes from a federal grant to serve the uninsured. 8% is from state grants. 27% is from insurance payments primarily TennCare and 5% are from uninsured client payments for service and other insurance. Local grants and contracts are about 6% and donations are about 4%. Overall 84% of the budget goes to direct services and UNHS maintains its administrative costs at 16% of the budget.

## **Impact**

United Neighborhood Health Services is a leader in developing and providing health services and a "medical home" for those who have low income, uninsured or otherwise lack access to healthcare. In 2015, UNHS served over 25,000 residents of middle Tennessee. 52% were uninsured, 88% below poverty.

TOP ACCOMPLISHMENTS FROM THE PAST YEAR: 1. UNHS was re-approved by Joint Commission and re-certified for Patient Centered Medical Home Certification. 2. United Neighborhood expanded service by opening two full-time clinics; one in the Inglewood neighborhood of Nashville and one in Wilson County in Lebanon, TN. 3. UNHS has expanded dental care to the homeless clients at the Mission Clinic and is expanding dental care to its Cleveland Park clinic in Nashville and in the Wilson County/Lebanon Clinic. 4. UNHS has expanded behavioral health services adding behavior health counselors so that all twelve clinics have coverage. In addition, a treatment program for those with opioid addiction was begun in July, 2016.

TOP GOALS FOR THE CURRENT YEAR 2016-2017: 1. Preterm births and other poor birth outcomes continue to grow in the low income neighborhoods of east and northeast Nashville, UNHS will expand services for pregnant women in these neighborhoods serving over 600 pregnant women. 2. UNHS will open a clinic in partnership with Nashville CARES and Street-works. The goal of the clinic is to cut in half the transmission of HIV in Nashville. While HIV transmission has been overall going down. There is a rise in Middle Tennessee in the transmission rate among young African American men who have sex with men. There are now new medication therapies, PrEP, which are nearly 100% effective in reducing transmission. The clinic will provide this service as well as other health services for the LGBTQI community. CARES and Street-works are veteran HIV organizations and co-locating should lead to greater trust and improved numbers who are served. 3. Increase those served in the opioid addiction treatment program. We are now serving 15 and the goal is to grow to 100. 4. UNHS purchased a building for administration in 2015. This will enable the organization to move out of rented space and invest in its own property. The space is also arranged more appropriately for work and good communication and teamwork. The renovations will be completed and organization moved into the space by the end of the year, 2016. 5. UNHS has been selected to participate in the Tennessee patient-centered medical home initiative for TennCare. This will allow UNHS to participate in a pay for performance model program.

## **Needs**

United Neighborhood's most pressing needs grow from patient care and management needs.. 1. In order to improve the health of patients, particularly those with chronic conditions like diabetes and hypertension and those in need of preventive services, UNHS needs staff devoted to reaching out and providing care coordination and health education as a member of each care team. We estimate that we need of 5 new staff members at an individual cost of \$60,000 and a total cost of \$300,000. 2. Information technology: Expenses for electronic health records are significant. We have added exceptional IT staff. We have also added a staff member to do analytics and begun to develop a data warehouse. To complete the reporting capabilities and warehouse we estimate the need is for \$50,000 for set up, software and equipment. 3. As the organization has grown and receives multiple grants, we have not grown in staff writing and managing grants. We need to add a grants manager. We estimate that this cost will be approximately \$100,000 a year and an on-going cost. 4. In order to better treat children with asthma, our programs need equipment that assists in the diagnosis of asthma. At \$5,000 per site that sees children, we estimate the cost at about \$50,000. 5. In order to better serve our prenatal patients, UNHS should be doing on-site ultrasounds. This would help in identifying high risk women earlier and preventing preterm births. The cost would be about \$40,000.

## **Other ways to donate, support, or volunteer**

Ways to donate: Go to website and click on "donate" button: [www.neighborhoodhealthtn.org](http://www.neighborhoodhealthtn.org). Checks may be mailed to 711 Main Street, Nashville, 37206. To make an in-kind donations call: 615-227-3000 x1000.

Volunteer opportunities are available to assist in care, provide classes, assist in outreach and health fairs and landscape projects. To volunteer: Call Katie Hill at 615-227-3000.

## **Service Categories**

### **Primary Organization Category**

Health Care / Community Clinics

## **Secondary Organization Category**

Human Services / Homeless Services/Centers

## **Tertiary Organization Category**

Mental Health & Crisis Intervention / Counseling

## Areas of Service

### **Areas Served**

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TN - Davidson

TN - Trousdale

TN - Wilson

United Neighborhood Health Services Inc. serves the Middle Tennessee area, with clinics in Davidson County, Trousdale County and Wilson County. There is not residency requirement to receive care at UNHS. The clinics in these three counties serve broader areas and care for residents in nearby counties as well. Individuals in need of care can go to any clinic.

### **Board Chair Statement**

The Board of Directors of United Neighborhood Health Services has a dual function: to secure the future of the organization and to be a voice for our low-income and underserved communities. A majority of the members of the UNHS Board are consumers assuring that we remain sensitive to the needs of those we serve. These consumers live in public housing, have been homeless and on the streets and have faced the challenges of unemployment. Other members have skills and experience which assist the Board in meeting its obligations of sound financial and organizational management. The UNHS Board is confronted with a continually changing healthcare environment. This diverse and representative Board is particularly well suited to plan strategically for this changing future. We are creative and innovative in developing strategies to reach those in need of care, improving the health of those most in need and maintaining a financially sound organization. UNHS has been extremely successful in growing to meet the needs of the community. From 2000 to 2014 UNHS grew from 9,642 patients to over 25,000. In that same time period the budget grew from \$3.7 million to \$12 million, and the federal grant grew from \$1.5 million to over \$8 million. The biggest challenges faced by UNHS are: 1. Uninsured numbers continue to be half of those served. There are many discussions about how to solve the problem of those without health insurance. We at UNHS believe that the UNHS' model of direct care, with community ownership, is an important part of the solution to the current healthcare crisis. 2. The health of our community is deteriorating with high levels of obesity and related illness. Tennessee continues to be identified as one of the least healthy states in the United States. Opioid addiction is a growing problem. 3. The low income of Nashville are moving into outlying county areas. UNHS developed in the inner-city but economic development of the urban core is pushing low income residents into more distant areas of the county. UNHS opened a clinic in Madison and one on Wallace Road in south Nashville to meet this need and we continue to identify locations that might better reach these developing pockets of need. United Neighborhood and its clinics and programs are a major asset to Nashville. UNHS adds to the resources of the community, bringing over \$8 million in federal funds and other support into the city. As a low-cost healthcare provider, UNHS assures that many who would not otherwise have care have access to quality care. UNHS clinics also assure that patients who are best served in a clinic do not burden the more expensive sources of care like emergency rooms.

## **CEO Statement**

Princess, a patient with UNHS, says it best. "Our neighborhood clinic means that people care about us and will be there for our families when we need help." United Neighborhood is committed to access to care for all. To increase access UNHS has a sliding fee scale and no one is denied care because of inability to pay. United Neighborhood has a unique strategy for providing healthcare to the most vulnerable and impoverished residents of Nashville. UNHS establishes a "medical home" right in the neighborhood of those without healthcare. UNHS goes to the people and to their local communities. UNHS aggressively looks for those in need and develops ways to reach them. United Neighborhood follows this model of putting clinics in reach when it expands. In 2008, UNHS used this model to meet the healthcare needs of homeless people with a clinic in downtown and in the Rescue Mission. In 2014 UNHS opened services for immigrants and refugees in partnership with other refugee and immigrant services. Another way that UNHS increases access is through its evening and weekend clinics. One clinic of UNHS is open until 10 pm each weekday and on Saturday. A third way that UNHS expands access is to have "same day" visits. People need care when they are sick and they can't wait for an appointment. All clinics of UNHS accept clients that day. A fourth way is through our central Customer Service Line. Individuals can call, receive all needed information and pre-register and they will be directed to the clinic closest to them. Through these many ways of increasing access, UNHS can help those served avoid costly emergency room visits and perhaps even hospitalization. This also results in great savings to the local hospitals and to the overall healthcare community. People must have their health to realize their full potential. Improving the health of those living in poverty and those living without insurance will have many beneficial results for individuals and for Nashville as a whole. In addition to access, UNHS emphasizes quality of care and health outcomes. UNHS uses the most evidence-based approaches to care. Our quality improvement activities enable us to assure our clients that they are receiving first class care. United Neighborhood is committed to continuing to develop innovative programs that reach our impoverished communities and meet their critical health needs. Each year brings new challenges, but with its dedicated staff and volunteers, UNHS is able to respond and continue to grow.

# Programs

## Programs

### Medical Services

<b>Description</b>	UNHS goals are to improve the health of uninsured and low income clients. Uninsured are estimated to be 20% of the residents of the area. Residents under poverty exceed 18%. There are wide disparities in health for the low income and uninsured.. Comprehensive services are provided to all ages, including acute, preventive and chronic care. They include labs and prescriptions. Dental care, nutrition, health education and counseling are also available. All are provided on a sliding-fee scale based on family size and income. No one is denied care because of inability to pay. In 2015 over 25,000 were provided over 90,000 visits. The services of UNHS grow to respond to emerging needs. UNHS' prenatal services are expanding to the demand and the high pre-term birth rate and low birthweight. UNHS has begun to offer PrEP, a medication that can reduce HIV transmission. UNHS is also adding expertise to enable us to meet the needs of residents of the area with sickle cell.
<b>Budget</b>	10000000
<b>Category</b>	Health Care, General/Other Ambulatory & Primary Health Care
<b>Population Served</b>	Poor,Economically Disadvantaged,Indigent, Minorities, Homeless
<b>Short Term Success</b>	It is the goal of United Neighborhood Health Services that patients establish UNHS as their medical home. This is particularly true with those with diabetes who are recruited to take advantage of additional services. Our goal is to have 70% of those participating in the program achieve an A1c of 9 or less. This goal is being accomplished.
<b>Long term Success</b>	This program will result in: 75% of those with diabetes will be controlled. 72% of those with hypertension controlled 66% of women receive pap smears at appropriate intervals 80% of pregnant women enter care in the first trimester 85% of children immunized by the age of three
<b>Program Success Monitored By</b>	Evaluation tools used to evaluate the program are several: Patient surveys indicate the degree of client satisfaction. Reports taken from the electronic health record monitor health improvement and outcome.
<b>Examples of Program Success</b>	To date, over 500 have participated in our diabetes program with 70% achieving an A1c of 9 or less. This program has been life-saving for many. In one case, a woman referred for a retinal screening to check her eye-sight was found with extreme abnormalities and had to have immediate surgery. This surgery saved her sight, enabling her to return to work and remain active.

## Homeless Health Services

<b>Description</b>	United Neighborhood Health Services is the major provider of healthcare to the homeless of Nashville, serving over 4,500 in 2015. Medical, dental and behavioral health services are provided at the Downtown Homeless Clinic, the Mission Clinic and through a mobile medical unit. UNHS also works with partner agencies to visit their sites and provide care there. This includes many shelters and lunch programs in Nashville. 94% of the homeless have no health insurance. UNHS provides visits, lab tests and medication to assure better health management. One-third of the homeless served are women and also include 150 children. Over 25% have hypertension and 10% are diabetic.
<b>Budget</b>	3000000
<b>Category</b>	Health Care, General/Other Ambulatory & Primary Health Care
<b>Population Served</b>	Homeless, Unemployed, Underemployed, Dislocated, Poor, Economically Disadvantaged, Indigent
<b>Short Term Success</b>	In the short term, those cared for will be properly diagnosed and evaluated for the full range of their health needs and have a health plan to improve their care. 70% of those with diabetes will have a 9 or less A1c reading and 60% of those with hypertension will have under a 140/90 blood pressure.
<b>Long term Success</b>	United Neighborhood's goal is to meet the needs of the homeless as much as possible in primary care settings and to deliver medical and behavioral health in an integrated model to stabilize patients and help them get into housing.
<b>Program Success Monitored By</b>	United Neighborhood uses many sources of data: Patient Satisfaction Surveys Progress notes and electronic health records can be used to report on health services and outcomes.
<b>Examples of Program Success</b>	In addition to medical care, homeless patients receive a behavioral health evaluation and about 30% are found to also have a behavioral health and/or substance abuse related concern. This enables UNHS to be sure that individuals in need also receive the right behavioral health counseling and medication. Many clients have indicated that it is this combination of services that enables them to begin to address the issue of being homeless.

## Dental Services

<b>Description</b>	Dental care is one of the most needed services among the low income in Nashville and few have any type of dental insurance. The dental program of UNHS began in 2003 because of the great demand. In 2015 UNHS' dental services served 2,500, primarily low-income adults. 95% had no dental insurance. Dental services include: emergency evaluations, preventive care such as x-rays and cleaning, restorative services including fillings, and procedures such as extractions. Dentures are also provided at reduced cost. Dental and medical care are integrated at UNHS. Many benefit from dental services. These are diabetic patients who often have gum disease. Pregnant women need dental care as their dental health can affect the rate of premature birth. Elderly patients often have bad nutrition because of poor teeth. UNHS is expanding dental services and will add these services to the services of the Cleveland Park Clinic. Services will also be added for the more rural population in Lebanon, Tennessee.
<b>Budget</b>	1000000
<b>Category</b>	Health Care, General/Other Dental Health Care
<b>Population Served</b>	Poor,Economically Disadvantaged,Indigent, Children and Youth (0 - 19 years), Homeless
<b>Short Term Success</b>	On a short term basis we are able to relieve pain and provide emergency dental care. We are moving toward our goals. 65% are completing their treatment plans. We have also improved sealants and 50% of the age eligible children are receiving sealants.
<b>Long term Success</b>	United Neighborhood wants to assure that all those in need have access to dental services. We would like to be more able to assist people in maintaining healthy teeth rather than many extractions. Within the practice, we want to assure that 90% complete their dental treatment plan. We also want to be sure that 80% of the children who are the appropriate age receive sealants.
<b>Program Success Monitored By</b>	United Neighborhood uses an electronic dental record to record patient care. This tool is also used to provide reports on outcomes like treatment plan completion and sealants. We also have a system by which clients can report their concerns by phone. They can do so anonymously or provide their name and we can call and get more information.
<b>Examples of Program Success</b>	The dental program is particularly effective at caring for clients with other conditions and chronic illness. All pregnant women, patients with diabetes and those with heart conditions are referred to dental caare.



## Mental Health Services

<b>Description</b>	UNHS found that medical teams were diagnosing and treating depression and anxiety as well as substance use and more severe mental conditions. Patients seldom followed up on referrals to mental health providers, so in 2003 UNHS added mental health providers to the medical team. In 2015 licensed counselors and practitioners provided diagnosis, treatment and medication management to 2,600 patients. 100 homeless individuals were provided intensive alcohol and drug treatment through a 12 week program. Mental health and medical services are integrated. The patient is assessed by the medical provider and referred to behavioral health, often on the same day. This reduces the stigma of counseling and assures medications and treatment are coordinated. Patients with chronic illness like diabetes and pregnant women are always screened by the medical provider as these patients are very prone to suffering depression and anxiety. UNHS also has a program for those with opioid addiction.
<b>Budget</b>	1000000
<b>Category</b>	Mental Health, Substance Abuse Programs, General/other Outpatient Mental Health Treatment
<b>Population Served</b>	Poor, Economically Disadvantaged, Indigent, Homeless, Alcohol, Drug, Substance Abusers
<b>Short Term Success</b>	United Neighborhood has built assessment for mental health and substance abuse into all medical visits. One-on-one counseling is then available at all sites. Special programs include a substance abuse program for those who are homeless and a newly launched opioid treatment program. 85% of the participants in the homeless substance abuse program complete the full 12 weeks and remain in after-care. The goal is that all will have the opportunity to reintegrate with the community. The opioid use program is developing and has 15 enrollees.
<b>Long term Success</b>	Long term, United Neighborhood's goal is to evaluate every medical patient for mental health and substance abuse needs and refer as needed integrating medical and behavioral health care.
<b>Program Success Monitored By</b>	Success is monitored by patient care notes, reports from the electronic health record and interviews with the clients.
<b>Examples of Program Success</b>	85% of the homeless participating in the substance abuse program complete their care. Those completing become strong advocates for the program and remain in aftercare. Our screening of patients for mental health and substance abuse concerns has improved to 78%.

### **CEO Comments**

United Neighborhood Health Services addresses critical health needs in Nashville by providing individual comprehensive health care to people of all ages. United Neighborhood is meeting its mission by serving those in poverty and ethnic minorities who suffer the greatest health disparities and often lack access to care. In 2015, of the over 25,000 provided care, 88% were under the federal poverty level and 98% were under economically disadvantaged. 52% of those served are uninsured, 29% have TennCare and 17% have commercial insurance or Medicare. The ethnic breakdown of those served was: African American 45%; Hispanic 21%, White 31%, and Other Identity 3%. A UNHS clinic is not just for patients when they are sick. It is a "medical home" providing each patient a full range of health service. This includes: chronic disease care and management, preventive services, pregnancy testing, family planning, immunizations, TB testing, STD testing and treatment, prenatal care, ultrasound, parenting education and counseling of teen parents, labs, pharmacy, violence prevention,

translation service, counseling, and dental services. Of those 25,000 served in 2015: 19 years old or younger were 17%; women 15-44 years old were 34%. UNHS clinics are a cost effective way to deliver quality health care. One of the greatest challenges faced by UNHS is the rising number of uninsured, now estimated at 20% of the population. This is accompanied by increasingly poor health particularly with the growing overweight and obesity, particularly in our minority communities. This contributes to extensive chronic conditions such as hypertension and diabetes, complications during pregnancy and numerous other health issues. This growing complexity of illness and poor health is a continual challenge at the primary care level. These conditions must be met with more innovative programs that go beyond medical care, such as our diabetes centers. However, such services are not paid for through standard insurance billing. But these types of services are required if we are to have an impact on health outcome and cost of care. UNHS will continue to pursue opportunities to develop these more comprehensive programs for health intervention through funding and partnerships.

# Governance

## Board Chair

<b>Board Chair</b>	Ms. Brenda Morrow
<b>Company Affiliation</b>	Edgehill ONE
<b>Term</b>	Sept 2016 to Aug 2017
<b>Email</b>	frc@edgehillcommunity.org

## Board Members

<b>Name</b>	<b>Affiliation</b>	<b>Status</b>
Ms. Angela Ballou Pharm. D.		
Ms. Claudia Barajas		Voting
Ms. Leigh Binkley	United Healthcare	Voting
Buddy Comer	Community Volunteer	Voting
Ms. Candice Haynes	Dental	Voting
Mr. Glenn Hunter	Association Consultant	Voting
Mr. Michael E. Johnson		Voting
Mr. Ken McKnight	Housing Consultant	Voting
Mr. Scott Mertie	Kraft CPAs	Voting
Ms. Brenda Morrow		
Ms. Mary E. Owens		Voting
Ms. Heather Piper	Self Employed	Voting
Ms. Mary Robertson		

## Board Demographics - Ethnicity

<b>African American/Black</b>	6
<b>Asian American/Pacific Islander</b>	0
<b>Caucasian</b>	6
<b>Hispanic/Latino</b>	1
<b>Native American/American Indian</b>	0
<b>Other</b>	0 0

## Board Demographics - Gender

<b>Male</b>	5
<b>Female</b>	8
<b>Unspecified</b>	0

## Governance

<b>Board Term Lengths</b>	3
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<b>Board Term Limits</b>	3
<b>Board Meeting Attendance %</b>	65%
<b>Written Board Selection Criteria?</b>	Yes
<b>Written Conflict of Interest Policy?</b>	Yes
<b>Percentage Making Monetary Contributions</b>	80%
<b>Percentage Making In-Kind Contributions</b>	20%
<b>Constituency Includes Client Representation</b>	Yes
<b>Number of Full Board Meetings Annually</b>	12

## Board CoChair

<b>Board CoChair</b>	Ms. Leigh Binkley
<b>Company Affiliation</b>	Retired
<b>Term</b>	Sept 2016 to Aug 2017
<b>Email</b>	leighbinkley@outlook.com

## Standing Committees

Executive  
Finance  
Operations

## Risk Management Provisions

Accident & Injury Coverage  
Automobile Insurance  
Commercial General Liability  
Computer Equipment & Software  
Crime Coverage  
Directors & Officers Policy  
Disability Insurance  
Employment Practices Liability  
General Property Coverage  
Improper Sexual Conduct/Sexual Abuse  
Life Insurance  
Medical Health Insurance  
Medical Malpractice  
Professional Liability  
Special Event Liability  
Umbrella or Excess Insurance  
Workers Compensation & Employers' Liability

## **CEO Comments**

Challenges: The health care world is a continually changing one. Securing the future and financial stability of United Neighborhood Health Services is challenging. As an organization very dependant upon federal and state funds, UNHS must be constantly alert and engaged in the legislative and governing process. As the debates about the Affordable Care Act and how the US will move head to assure that a greater number of its citizens have access to healthcare, UNHS is engaged and continually monitoring developments. The local environment is equally challenging. Many larger local health organizations and entities can overshadow the important of the work of smaller organizations and of primary care organizations. To address these issues, UNHS has a strategic plan to insure that UNHS implements changes and transformations that enable it to continue to be an important part of healthcare in the future and assure its viability as an organization and a valuable partners. These initiatives include: electronic health records, transformation to a "healthcare home" model of care, updating and renovating facilities, developing innovative approaches to improve health outcomes and reduce emergency room use and hospitalizations among clients. OPPORTUNITIES: UNHS anticipates many opportunities, though some may be a couple of years off yet. Should Tennessee expand its Medicaid/TennCare Program as is possible through the Affordable Care Act, more than 50% of the uninsured cared for by UNHS would have access to this insurance program. This would mean significantly more resources for patients to achieve better outcomes as well as for UNHS to develop programs and facilities. Other opportunities are working with partners. This can include local hospitals as well as insurance programs who have a strong interest in cost savings. UNHS, as a primary care provider, is well placed to be a partner in reducing the cost of care to insurance and to the hospital. Several partnerships are in the development stage. UNHS is well positioned to expand to meet community primary care needs and will continue to identify strengths and address concerns to remain a critical part of the local healthcare landscape for the future.

# Management

## Executive Director/CEO

<b>Executive Director</b>	Ms. Mary Bufwack Ph.D.
<b>Term Start</b>	Aug 1988
<b>Email</b>	mbufwack@neighborhoodhealthtn.org

### Experience

Mary Bufwack has served as CEO of UNHS since 1988 and is completing her twenty-eighth year. Her formal training includes a doctorate in anthropology from Washington University, St. Louis, and her experience includes university level teaching, writing as well as other non-profit work. Bufwack is a published author: Finding Her Voice: 100 years of Women in Country Music. She has served as President of the Tennessee Primary Care Association, the state organization of community health centers. She serves on the Board and Policy Committee of the State Association. Bufwack has served on the Board of Directors of the National Association of Community Health Centers. She serves on the Homeless Healthcare Committee and the Legislative Committee of the National Association. Her innovative work with UNHS has been recognized within the Southeast Region. Locally, Bufwack has received recognition as the 2009 CEO of the Year by the Center for Non-Profit Management.

## Former CEOs

<u>Name</u>	<u>Term</u>
Ms. Kristen Grey	June 1985 - Jan 1988
Ms. Ruth Trevino	Jan 1988 - Aug 1988

## Staff

<b>Full Time Staff</b>	150
<b>Part Time Staff</b>	3
<b>Volunteers</b>	25
<b>Contractors</b>	3
<b>Retention Rate</b>	80%

## Plans & Policies

**Does the organization have a documented Fundraising Plan?**

No

**Does the organization have an approved Strategic Plan?**

Yes

**Number of years Strategic Plan Considers**

3

**When was Strategic Plan adopted?**

May 2018

**In case of a change in leadership, is a Management Succession plan in place?**

Yes

**Does the organization have a Policies and Procedures Plan?**

Yes

**Does the organization have a Nondiscrimination Policy?**

Yes

**Does the organization have a Whistle Blower Policy?**

Yes

**Does the organization have a Document Destruction Policy?**

Yes

## Affiliations

<b>Affiliation</b>	<b>Year</b>
ANE (Association of Nonprofit Executives)	1998
Center for Nonprofit Management Excellence Network	2000
Nashville Area Chamber of Commerce	2000
Tennessee Conference on Social Welfare (TCSW)	2000
Nashville Prevention Partnership	2000
Metro Nashville Public Schools/Chamber of Commerce Alignment Process	2004
Community Resource Center - Nashville	2000
United Way Member Agency	2001
Alignment Nashville	2005
Madison Chamber of Commerce	2006
Nashville Area Hispanic Chamber of Commerce	2004
Tennessee Hispanic Chamber of Commerce	2004
National Association of Community Health Centers	1972
Nashville Coalition for the Homeless	2007
Leadership Nashville	1999
Primary Care Association of Tennessee	1972
Chamber of Commerce	2000

## External Assessments and Accreditations

<b>Assessments/Accreditations</b>	<b>Year</b>
Joint Commission on Accreditation of Healthcare Organizations (JCAHO) - Ambulatory Care Accred.	2000

## Awards

**Awards**

<b>Award/Recognition</b>	<b>Organization</b>	<b>Year</b>
Grassroots Advocacy Award	National Assoc of Community Health Center	2005
Finalist--Making a Difference	Center for Non-Profit Management	2005
Healthcare Heroes	Nashville Business Journal	2007
Ten Women to Watch	Nashville Medical News	2008
Women of Influence	Nashville Business Journal	2009
CEO of the Year	Center for Non-Profit Management	2009

## Senior Staff

### Ms. Mary Bufwack Ph.D.

<b>Title</b>	CEO
<b>Experience/Biography</b>	Mary Bufwack has served as CEO of UNHS since 1988. Her formal training includes a doctorate in anthropology from Washington University, St. Louis, and her experience includes university level teaching, writing as well as other non-profit work. Bufwack is a published author: Finding Her Voice: 100 years of Women in Country Music. She has served as President of the Tennessee Primary Care Association, the state organization of community health centers. Her innovative work with UNHS has been recognized within the Southeast Region.

### Ms. Pamela Brillhart

<b>Title</b>	Chief Operating Officer
<b>Experience/Biography</b>	

### Mr. Anthony Villanueva

<b>Title</b>	Chief Information Officer
<b>Experience/Biography</b>	

### Mr. Ivan Figueredo

<b>Title</b>	CFO
<b>Experience/Biography</b>	

### Dr. Samuel Parish MD

<b>Title</b>	Chief Medical Officer
<b>Experience/Biography</b>	

#### **CEO Comments**

Challenges: In area of Management Concerns, the greatest challenges faced by UNHS are staff recruitment and retention and staff development. RECRUITMENT AND RETENTION: The most difficult area of recruitment and retention of UNHS is with primary care physicians. Not only have training programs for primary care physicians decreased, but the need for primary care physicians has increased increasing the competition for these doctors. This has meant steadily rising salaries and benefits. UNHS meets this challenge as it can



generally get its clinicians load repayment, however, retention after that initial three years continues to be difficult. UNHS also has partnerships with medical schools to train providers and encourage community care as a career choice. The other area of recruitment difficulty is licensed behavioral health providers. Few are trained in a primary care setting and are primarily attracted to mental health settings. Strong Management staff are also at a premium. STAFF TRAINING AND RETRAINING: Technology: Electronic Health Records are becoming the standard for health organizations. This development is not only costly. Implementation requires significant retraining of staff and retooling processes. The level of technology expertise on staff and among contractors must constantly be improved. UNHS has begun implementation, training staff and hired needed staff and contractors. CERTIFICATIONS: Certification as Patient Centered Medical Home as well as Joint Commission accredited. FINANCIAL SUSTAINABILITY: UNHS is exceptionally dependent upon Federal Grants. Given the stress on public resources, even should this be stable, we do not expect it to grow. UNHS launched its community fund-raising plan with a fund-raising breakfast. LEADERSHIP SUCCESSION: The transition of leadership within UNHS is critical in the next few years. UNHS has put in place a strong management team that can support leadership transition. OPPORTUNITIES: The greatest opportunities are with health reform and partnerships. These continue to be an important part of UNHS strategy.

# Financials

## Fiscal Year

<b>Fiscal Year Start</b>	Feb 01 2016
<b>Fiscal Year End</b>	Jan 31 2017
<b>Projected Revenue</b>	\$14,556,764.00
<b>Projected Expenses</b>	\$14,556,764.00
<b>Endowment Value</b>	\$12,000.00
<b>Endowment Spending Policy</b>	N/A
<b>Endowment Spending Percentage (if selected)</b>	0%

## Detailed Financials

### Revenue and Expenses

<b>Fiscal Year</b>	<b>2016</b>	<b>2015</b>	<b>2014</b>
<b>Total Revenue</b>	\$15,071,313	\$13,256,664	\$13,558,930
<b>Total Expenses</b>	\$13,034,194	\$12,134,427	\$11,623,238

### Revenue Sources

<b>Fiscal Year</b>	<b>2016</b>	<b>2015</b>	<b>2014</b>
<b>Foundation and Corporation Contributions</b>	\$135,525	\$412,298	\$741,677
<b>Government Contributions</b>	\$10,023,690	\$9,313,700	\$1,012,812
<b>Federal</b>	\$8,777,098	\$8,005,088	\$0
<b>State</b>	\$913,396	\$953,462	\$0
<b>Local</b>	\$333,196	\$355,150	\$0
<b>Unspecified</b>	\$0	\$0	\$1,012,812
<b>Individual Contributions</b>	\$12,897	(\$38,613)	\$46,779
<b>Indirect Public Support</b>	\$0	\$0	\$0
<b>Earned Revenue</b>	\$4,682,081	\$3,227,844	\$10,836,268
<b>Investment Income, Net of Losses</b>	\$4,009	\$3,718	\$2,935
<b>Membership Dues</b>	\$0	\$0	\$0
<b>Special Events</b>	\$0	\$0	\$7,000
<b>Revenue In-Kind</b>	\$0	\$65,212	\$628,192
<b>Other</b>	\$213,111	\$272,505	\$13,558,930

**Expense Allocation**

Fiscal Year	2016	2015	2014
Program Expense	\$10,427,488	\$9,667,628	\$8,485,292
Administration Expense	\$2,606,706	\$2,466,799	\$3,137,946
Fundraising Expense	\$0	\$0	\$0
Payments to Affiliates	\$0	\$0	\$0
Total Revenue/Total Expenses	1.16	1.09	1.17
Program Expense/Total Expenses	80%	80%	73%
Fundraising Expense/Contributed Revenue	0%	0%	0%

**Assets and Liabilities**

Fiscal Year	2016	2015	2014
Total Assets	\$13,718,196	\$11,991,790	\$968,909
Current Assets	\$6,268,970	\$5,066,940	\$644,064
Long-Term Liabilities	\$0	\$267,879	\$324,845
Current Liabilities	\$767,036	\$808,870	\$644,064
Total Net Assets	\$12,951,160	\$10,914,041	\$9,791,804

**Short Term Solvency**

Fiscal Year	2016	2015	2014
Current Ratio: Current Assets/Current Liabilities	8.17	6.26	1.00

**Long Term Solvency**

Fiscal Year	2016	2015	2014
Long-Term Liabilities/Total Assets	0%	2%	34%

**Top Funding Sources**

Fiscal Year	2016	2015	2014
Top Funding Source & Dollar Amount	Federal Government Grants \$8,777,098	Federal Government Grants \$8,005,088	Program Service Revenue \$10,836,268
Second Highest Funding Source & Dollar Amount	Program Revenue \$4,682,081	Program Revenue \$3,227,844	Government Grants and Contracts \$1,012,812
Third Highest Funding Source & Dollar Amount	State Government Grants \$913,396	State Government Grants \$953,462	Foundations and Corporations \$741,677

**Capital Campaign**

Is the organization currently conducting a Capital Campaign for an endowment or the purchase of a major asset? No

Capital Campaign Goal \$0.00

Capital Campaign Anticipated in Next 5 Years? No

**State Charitable Solicitations Permit**

TN Charitable Solicitations Registration Yes - Expires July 2017

Registration No 0

**Organization Comments**

CHALLENGES: United Neighborhood Health Services has experienced continued financial growth. This has included substantial growth in federal grants. We do not expect this to continue, but many grants are on-going

and will be a source of sustainability. A fund-raising breakfast was launched this year as a beginning to building a donor base. Rising Costs: The cost of delivering health care, even primary care, continues to grow. This is true particularly for well-trained personnel and clinicians, benefit costs (health insurance) and technology costs. Opportunities: Reorganization: With reorganization, UNHS strengthened its leadership as well as its whole finance department, achieving greater control of the revenue cycle and created a stronger organizational structure that could monitor and maximize revenue. TennCare Service and Revenue: The greatest opportunity for UNHS to grow revenue is in providing strong services that result in greater utilization by more TennCare/Medicaid recipients. This would increase service revenue while also improving health outcome. In this effort there is also potential to receive pay for performance. Cost Containment: UNHS is achieving better cost containment through joint purchasing and contract renegotiation. UNHS has also had to revise its healthplan to keep that cost stable. Facility: UNHS has been fortunate to receive considerable federal funds to assist with renovation of facilities. By the end of 2015 we will have had renovated five clinics with primarily federal funds. We have also purchased and renovated a building for administration. We will move into this by year end 2016.

### **GivingMatters.com Financial Comments**

Financial figures taken from 990.

Financial documents completed by Matheney, Stees & Assoc., PC.

Comments provided by Kathryn Bennett 9/30/16.

