

HUMAN SERVICES NETWORK AGENCY ANNOUNCEMENTS JULY, 2007

Hillsdale County Community Foundation

Sharon Bisher will be out of the office from August 2nd through September 17th. Anyone needing assistance is encouraged to contact the Foundation office and either Susan Stout or Amber Yoder will assist you.

Hillsdale County Intermediate School District

Hillsdale's Early On program (Sharon Roberts at ISD) has been chosen as one of **5** sites for the pilot of a program that will help identify children ages 0-3 with social/emotional delays and disabilities. It will mean free training for staff and help with working towards implementing a county-wide social-emotional curriculum for Early Childhood.

OTHER NEWS OF INTEREST

Battle begins to save health care for low-income kids

Tuesday, July 17, 2007

**By Sharon Emery
Lansing Bureau**

LANSING -- With more Michigan workers earning less, now's not the time to cut back on helping low- and moderate-income families, say supporters of expanding the federal-state MIChild health insurance program. They want Congress to not only renew the program, which has a \$25-billion, five-year budget, but to boost funding. Known nationally as the State Children's Health Insurance Program (SCHIP), it provides health insurance to 30,400 children and 64,000 childless adults in Michigan families making too much to qualify for Medicaid but too little to afford insurance on their own.

Families of three can qualify if they earn up to \$34,340 a year, or 200 percent of poverty; childless adults are eligible if they earn up to \$3,600 annually, or 35 percent of poverty.

"Too many Michigan children are without any health coverage and the number continues to grow as more employers either stop offering insurance or increase premiums so high that they're out of reach for many working families," said Sharon Claytor Peters, president and CEO of Michigan's Children, an advocacy group.

The bipartisan plan being considered by the U.S. Senate Finance Committee starting today would pump \$35 billion more into the program over five years. It's likely to go through several changes over the summer, as Congress works to complete the bill before authorization expires Sept. 30.

Members of The Promise of Michigan's Children, a coalition backing increased funding, held a Lansing news conference last week to urge speedy action on increasing funding by \$50 billion. They say at least \$14 billion more is needed just to maintain current coverage.

The additional money would cover 110,000 more uninsured children in Michigan. Nationwide, the increase would cover an additional 6 million children and continue coverage of 5.5 million kids.

President Bush is threatening to fight the Senate plan, saying it's an attempt to provide universal health care. He has said backers are trying to "federalize medicine."

Families qualifying for MIChild pay a \$10 monthly premium and their children receive regular checkups, immunizations, emergency care, dental and vision care, as well as medications. There are no co-pays or deductibles. Families must earn between 150 percent and 200 percent of poverty.

"There's a negative stigma associated with welfare, but this is not welfare," said Shoma Pal, of Blue Cross

Blue Shield of Michigan, which insures most of the recipients in Michigan. "This is private insurance, you get a Blue Cross card."

As a result, access is generally not a problem because providers are reimbursed at commercial rates. Pam Carter of Royal Oak, a mother of five who makes \$26,000 a year as a full-time preschool teacher, praised the program and said her youngest daughter, who suffers from a rare seizure disorder, was able to receive high-quality, specialized care.

"We will forever and forever and forever be grateful for that," an emotional Carter said at the press conference. She said she was unable to afford the \$384 monthly it would have cost to insure her children under her employ-sponsored insurance.

Several Michigan members of Congress are in prime positions to move the bill, so Promise for Michigan's Children highlighted their roles. Democrat Sen. Debbie Stabenow sits on the Senate Finance Committee, and U.S. Rep. John Dingell, D-Dearborn, is chair of the House Energy and Commerce Committee.

The Senate plan would bring an extra \$60 million into the state, Stabenow said, preventing a shortfall in the program starting next year.

"I think it's a very positive bill," Stabenow said. "It would add dollars for Michigan and allow the state to insure more children."

Dingell said the program has given millions of children access to health care, but expansion is necessary. "Despite a decade of success, nearly 9 million children are currently without health insurance, many of whom would be helped by SCHIP," Dingell said.

More information and an online application for MICHild are available at www.michigan.gov/michild.

Committee: Better background checks paid dividends for elderly

7/17/2007, 5:32 p.m. ET

By KEVIN FREKING

The Associated Press

WASHINGTON (AP) — About 5,000 applicants for jobs caring for the elderly have been rejected after background checks disclosed criminal records or a history of abusing patients.

The results, compiled by the Senate Aging Committee, represent lawmakers' first efforts at evaluating a pilot program, used in seven states including Michigan, that was designed to reduce cases of people preying on the elderly.

Congress approved the program in 2003. It gave the selected states the seed money — \$16.4 million in all — to beef-up their background checks for workers who care for the elderly, primarily nursing home staff. Now, some lawmakers believe the findings justify expanding the program nationally.

"It's helped identify thousands of people who should not be working in nursing homes," said Sen. Herb Kohl, D-Wis., chairman of the Senate Aging Committee. "Every facility that hires these people should have that information available to them."

Nursing home workers in every state are subject to some type of background check. But federal investigators describe the overall effort as a patchwork system — one filled with dangerous gaps.

For example, each state maintains a registry of nurse aides who have been found guilty by a court or who have been deemed by state officials as mistreating residents or defrauding them.

However, many states only check the names on their own nurse aide registry. They don't check the names on other states' registries.

Most states also require criminal background checks, but the inspector general for the Department of Health and Human Services recently concluded that the checks were often limited in scope. Again, they were often limited to crimes in just one state.

The pilot project helped states pay for establishing and operating more extensive databases. Job applicants screened through the pilot project were required to submit fingerprints so that they could be checked at the national level for a criminal history.

Access to the FBI's national database was key, Kohl said. Some workers with checkered histories move frequently to gain work caring for the elderly in nursing homes, hospice centers and home health agencies.

Michigan, which got the largest grant, \$3.5 million, used the money to link several databases, including the state's sex offender registry and its nurse aide registry. More than 3,100 applicants in Michigan were excluded during that phase of the search.

If no matches are found in the various registries, then the applicant's fingerprints are sent to the Michigan State Police and to the FBI. About 700 more were excluded after that phase, according to the Aging Committee's review.

The result: About 5 percent of applicants in Michigan were prevented from working in nursing homes, as well as hospice centers, home health agencies and psychiatric hospitals.

For those with criminal histories, about a quarter had drug or theft offenses. Orlene Christie of Michigan's Department of Community Health said excluding individuals with such records makes sense given their access to patient's medicine as well as financial information, such as credit cards.

"The people who work in our facilities may have access to prescription drugs, financial and medical records and other identifying information," Christie said. "In this age of identity theft and drug abuse, we must give our patients peace of mind while they are cared for in our facilities."

Kohl made clear that the large majority of nursing home workers do a good job of caring for the elderly. But, the committee's review of the pilot project indicates that about 3 to 5 percent of applicants have a background that should preclude them from working in such facilities.

Each year, ombudsmen for nursing home patients get thousands of complaints alleging abuse, neglect or exploitation. In 2005, ombudsmen got 20,622 such complaints. Of those complaints, about 5,200 alleged physical abuse and 1,200 alleged sexual abuse. Another 4,100 alleged verbal or mental abuse.

Besides Michigan, the states participating in the pilot project were Alaska, Idaho, Illinois, Nevada, New Mexico and Wisconsin. Some of the states used the funding for more extensive checks in just a few counties. The program ends Sept. 30, but all seven states plan to continue their expanded background checks in some form, the Aging Committee's review indicated.