



# Partnerships for Follow-up Care Toolkit

**Special Olympics, Inc. – Updated April 2014**

*This toolkit is designed to equip Special Olympics Programs with several promising practices learned from the Programs participating in the Healthy Communities initiative. The follow-up care toolkit outlines ways Programs can seek to establish follow-up care partnerships in their communities to ensure athletes have year-round access to quality health care and health services.*

**Special Olympics**





# Partnerships for Follow-Up Care

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## I. Project Planning

The project planning section of this guide will help you analyze the health need you have identified, develop objectives and activities to address the need, budget for what it will take to implement, and measure and report on your success.

We encourage you to make an effort to include athletes in every stage of the planning process. Consider bringing together an “athlete council” to gather input and guide the design of your project. Athletes have keen insight into the health problems they face as well as ways these problems can be addressed. Additionally, getting athlete buy-in early in the project will encourage their participation once the project has begun.

### *Problem analysis*

After attending a Special Olympics (SO) Healthy Athletes screening event, many athletes are told they have a health issue that needs follow-up care from a health professional. Globally, 67% of SO athletes receive a referral for follow-up dental care at Special Smiles, 37% of athletes attending Special Olympics-Lions Clubs International Opening Eyes need a new eye-glass prescription, and 27% of athletes fail their hearing test at Healthy Hearing. However, a survey of Healthy Athletes events in 2013 showed that parents and caregivers were given examination results at only 44% of events. Additionally, athletes received a list of care providers at only 35% of events, and athletes were referred to specific care partners at just 24% of events.

When thinking about the issue of poor access to follow-up care among your athletes, you should attempt to identify the root causes of this problem rather than just the symptoms. Many problems are more complex than they might appear on the surface, and an in-depth understanding of the



problem and its causes and effects is important in order to have a successful project. The root causes are what you should tackle if you want a sustainable, long-term impact on the health of your athletes.

For example, your problem might be that only 10% of your athletes who get referrals from Special Smiles actually receive follow-up care. Why is this the case? Perhaps they don't know where to go for care. Why not? No one tells them which dentists are willing and know how to treat people with intellectual disabilities (ID). Why not? The Program does not have a provider list or partners who have agreed to see SO athletes. If you want to address this root cause, you would need to create partnerships for follow-up dental care and create a list of dental providers who are willing to treat people with ID.

Here are a few tools that might help you in your problem analysis:

- 1) Problem tree analysis ([odi.org.uk/publications/5258-problem-tree-analysis](http://odi.org.uk/publications/5258-problem-tree-analysis))
- 2) But Why? technique ([ctb.ku.edu/en/table-of-contents/analyze/analyze-community-problems-and-solutions/root-causes/main](http://ctb.ku.edu/en/table-of-contents/analyze/analyze-community-problems-and-solutions/root-causes/main))

There are a number of factors that contribute to challenges with follow-up care among SO athletes that may or may not be present in your Program. Before designing your project, it is a good idea to learn as much as you can about the problem by talking to athletes, coaches, caregivers, and others. Each of these groups can give you valuable insight into your problem. It is important to understand the barriers to care faced by athletes in your community.

When considering how best to improve follow-up care for your athletes, some barriers that might exist include:

- 1) Referral information not being communicated to the athlete and caregiver
- 2) Lack of means to pay for treatment and/or health insurance
- 3) Poor understanding of the importance of follow-up care by athlete and/or caregiver
- 4) Logistical challenges in seeking care (e.g. transportation, escort for athlete)
- 5) Don't have a doctor/dentist willing to treat them or don't know where to go for care

To increase the likelihood that an athlete gets the care he or she needs, Programs can link athletes and providers by developing partnerships with healthcare professionals or universities in order to facilitate the athletes receiving care. For tips on meeting with potential partners, see Attachment A.

### *Objective and activities*

Once you have a comprehensive understanding of your problem and its causes, you are ready to start designing your program. To begin, develop an objective that represents the change you are hoping to see as a result of your project. Your objective should be SMART (specific, measurable,



achievable, relevant, and time-bound). Once you have your objective, you can begin selecting activities that address the earlier identified root causes and will ideally lead to achievement of your objective.

Write down a list of activities that need to be accomplished to enable you to achieve your objective. Be specific and list them in order of what needs to be done at what time. When selecting activities, try to focus your efforts so that you can achieve the desired impact. Consider limiting your activities to a specific target audience and/or a defined geographic location so you can see and measure a real impact on the health of a group of athletes rather than trying to expand your reach too far and risk having no impact. Look for measurable success that can be expanded and brought to scale later.

Sample objective and activities:

Sample Objective: Increase the percentage of athletes who receive follow-up dental care by 20% among those receiving a referral at Special Smiles. For an objective like this, you will need to know the baseline so you can determine whether you had a 20% increase in athletes receiving treatment. Currently, what percentage of your athletes receiving referrals actually go on to receive care? This baseline will help you determine what is a realistic improvement you can expect from your project. Alternatively, if it is not possible to collect a baseline, your objective could be, "Ensure that 80% of athletes who receive referrals at Special Smiles receive dental care within six months of the screening." For an objective like this, you do not need to know the baseline but you do need to know the percentage of athletes who receive treatment during your project. In subsequent years, this first measurement can be your baseline against which you can measure change.

Sample activities:

- Recruit two partners who can provide free follow-up dental care to SO athletes referred from Special Smiles
- Screen 200 athletes at Special Smiles and make referrals to identified partners
- Call, email or send automated text messages (sometimes referred to as Short Message Service or "SMS") to athletes and caregivers two weeks after examination date to remind athletes to make and attend follow-up care appointments (note: if you are interested in sending SMS to athletes, please contact your Regional Healthy Athletes Manager or SOI Healthy Athletes department)
- Call, email or send SMS to athletes and caregivers one month after exams to track and record whether athletes kept their appointments and received treatment

Be sure to involve athletes in the implementation of your project. For follow-up care, here are a few ways athletes might participate:

- Attend partnership discussions and share about their experiences at SO and Healthy Athletes



- Call other athletes to remind them to attend their follow-up care appointment
- Manage or oversee a component of the project

### *Monitoring and evaluation*

You must be able to measure the impact of your project in order to know how successful you were, make improvements in future projects, and satisfy the requirements of your donors and partners. During the planning phase, you should select an indicator or multiple indicators that you will measure to show whether you are on your way to achieving your objective, and at the end of the project, whether you have achieved your objective.

For example, if your objective is “Increase the percentage of athletes who receive follow-up dental care by 20% among those receiving a referral at Special Smiles” then your indicator of success will be “Percentage of those receiving a referral at Special Smiles who receive follow-up dental care.” This is what you would want to track to know, when compared to your baseline, whether your project was successful at achieving its objective.

For a tool to help you track whether your athletes have received follow-up care, see Attachment B: Follow-Up Care Tracking Template.

### *Budget*

Your budget should reflect what it will cost to implement your project. In many cases, partners can offset some of these costs which will allow you to do more with your resources. Try to find partners who are willing to provide what you need at no or low cost to your Program. Partnerships also increase the likelihood that your project will be sustainable and extend beyond the grant period.

When developing your budget for follow-up care, some expenses to consider include:

- T-shirts and meals for volunteers
- Transportation for athletes or volunteers
- Telephone calls to athletes and caregivers about whether they received care
- Cost of SMS/text message program (which would be coordinated through SOI)
- Program staff time

## II. Implementation Process

### *1) Identify and secure partners*

What's included:



- Identify priority disciplines for follow-up care
- Survey potential partners
- Engage potential partners
- Schedule initial partner discussions
- Establish partnership agreements

Developing and sustaining effective partnerships is essential to delivering follow-up care for your athletes. Identifying and engaging partners can seem overwhelming at first, but you will find that there are hundreds of organizations that share some part of Healthy Athletes' mission and would find mutual value in a partnership with your Program.

Begin by **identifying priority disciplines** or areas of need for follow-up care. For instance, many Programs find the most urgent need for Special Smiles because government-sponsored medical programs often fail to cover dental needs. Opening Eyes, Healthy Hearing and Fit Feet may also be priority programs because of the need for specialized care. While you may not be able to fulfill all of the care needs of your athletes, this process will enable you to address the most urgent needs and those that cannot be met through existing government and not-for-profit benefits programs. You can also set a goal of expanding follow-up care to a new discipline each year.

Once you have determined your needs, **survey potential partners** with similar missions. Partners may include government organizations, universities, private clinics, other not-for-profits, or commercial organizations at the local, regional, and national levels. For example, many Healthy Athletes programs in the United States partner with the America's Dentists Care Foundation Missions of Mercy to deliver free dental care to Special Olympics athletes. An excellent opportunity to find partners is through Clinical Directors and other health professionals who volunteer at Healthy Athletes. Many are affiliated with universities, clinics, or professional organizations that might be interested in partnering for follow-up care. You might also consider contacts through your Board of Directors or other high level supporters of your Program. As you compile your list of potential partners, keep track of important information, including the organization name, website, mission, point(s) of contact (POCs), and any additional details that will help you prioritize the list and create your engagement strategy. See Attachment C for a sample partner list.

Once you have developed and prioritized your partner list and received input from others in your Program or region as appropriate, consider the best way to **engage potential partners**. Finding opportunities to connect with partners through your personal network is always best, but don't be afraid to make a cold call or send a tailored email or letter to the appropriate contact at that particular partner organization. If possible, try to schedule an in-person meeting at a location convenient to your potential partner early in the discussions. If you cannot visit the partner in person, seek out their LinkedIn account or Twitter handle to enhance your virtual relationship. Building rapport early will facilitate communication, understanding, and commitment. See



Attachment A for tips on meeting with potential partners and Attachment D for a sample email template and telephone script.

When a potential partner expresses interest in collaborating with your Healthy Athletes program, move quickly and **schedule initial partner discussions**. The goals of the meeting should be to discuss shared goals and objectives, roles and responsibilities, and the overall vision for the partnership being established. During this meeting, 1) share information about the program history, impact, and needs, focusing on shared interests and using stories to convey a sense of urgency; 2) discuss potential scenarios for collaboration, including the scope, timing, and location; and 3) decide on initial plans, identify next steps, and establish lines of communication for future discussions. See Attachment E for research and references to help make your case to potential partners and/or donors.

Within a week of the meeting, send a follow-up email to the partner thanking them for their consideration and/or commitment, including a list of action items and timeline for planning and delivering follow-up care. These items may include:

- Identifying and securing space for care delivery
- Recruiting and managing volunteers
- Contacting caregivers
- Transportation (consider additional partners and/or sponsors where necessary)
- Release forms, insurance, and other necessary paperwork
- Payment

There are a few different options for the delivery of follow-up care, and the delivery strategy you choose will depend on what works best for your partner and your athletes. One option is to have partners provide treatment on-site immediately following the screening. This method mitigates some of the challenges athletes face in receiving follow-up care, such as lack of transportation, not knowing where to go for treatment, and fear of doctors' offices. **However, it is important for legal purposes that every effort is made to ensure that athletes and others are clear that these services are being provided by a partner organization and not by Special Olympics.** Another option is to plan a follow-up care event with your partner for a date following a screening. A third option is to connect athletes to clinics or providers in the community who have agreed to see SO athletes. Some clinics or providers will reserve hours or days for SO athletes and/or offer reduced treatment rates. **When referring athletes to providers onsite or in the community, it is important to verify that they are licensed by appropriate medical accreditation agencies in the country/state/province.**

Once all of these details have been decided, you may want to **establish partnership agreements** to formalize the commitment—either through a high level written agreement or a more formal



memorandum of understanding (MOU). Many collaborative efforts evolve over time, so use your discretion to determine the level of formality needed to nurture your partner relationship while protecting you and your partner before, during, and after care delivery. See Attachment F for an example MOU.

## *2) Screen and prioritize athlete needs*

What's included:

- Capture information
- Review screening results with athletes and caregivers
- Make plan for follow-up care

Planning for follow-up care before your screening events will enable you to more successfully connect athletes with the care they need. Be prepared to **capture relevant information** during the screening, including copies of the Healthy Athletes report card and all available contact information for athletes and caregivers (i.e. phone numbers, email addresses, and mailing addresses). Consider asking your clinical volunteers to flag high priority needs.

Before the athlete leaves the event, be sure to review the **screening results** with the athlete (and his or her caregiver or coach, if possible) and discuss plans for obtaining any recommended care. It is valuable provide athletes with documentation of their results so they can show their parents/caregiver and their provider. The **plan for follow-up care** will depend on the delivery method you have worked out with your partners. If your partners are providing care onsite, you can send your athletes directly to the treatment station. Make sure to have any necessary paperwork available.

If you are planning a follow-up care event at a date following the screening, you should give the athlete and caregiver the event details. If you are unsure whether the treatment needed can be provided by your partners at this event, delay giving event details until you can confirm that the care falls within the scope of the partnership agreement.

If you are connecting athletes to providers in the community, provide your athletes with names and contact information for providers who are willing to treat SO athletes. A list of provider resources such as a directory will make it easier for caregivers to follow through with the referrals and other care recommendations. If possible, encourage the caregiver to select a provider during this discussion so you can record that information for tracking purposes. For some Programs, especially those in locations with government-sponsored health insurance, the Clinical Director may write a referral for the athlete onsite and possibly even make an appointment.

Unless partners are providing care onsite, you should make every effort to give athletes and caregivers a document to take home that captures their screening results and when and where to



go for care. If care is provided onsite, you should make sure athletes and caregivers understand the need that was identified and the care that was provided.

### 3) *Coordinate and track care*

What's included:

- Coordinate event or appointments with partners and caregivers
- Arrange transportation
- Send any required paperwork
- Confirm appointment with caregiver
- Send media advisory

Your **coordination and support** activities will depend on the delivery strategy you choose. If you are planning a follow-up care event, review the screening data and referral list and make sure that everyone needing a referral to the event received one. Work with your partners to develop a tentative care schedule and finalize outstanding logistics. If possible, contact athletes and their caregivers to remind them about the event and provide them with scheduling information. This can often be the most burdensome component of the process, as many athletes move frequently and caregivers may be difficult to reach. The additional contact information you collected during the screening event should come in handy, but often the best strategy is to be persistent.

Once you connect, work closely with the athlete or athlete caregiver to **coordinate transportation** based on the caregivers' ability to provide transportation for the athlete. Some Programs will choose to provide transportation directly or offer transportation vouchers to athletes. If possible, send any **required paperwork** in advance in addition to having copies onsite during care delivery. Be sure to email or call the athlete or athlete caregiver for **confirmation** one to two days prior to the scheduled treatment and provide contact information for questions. Review the confirmed list with your partner to make any last minute scheduling changes and ensure that your team is ready to give the athletes the care they need.

If your strategy is to connect athletes with providers in their community, contact the athlete and their caregiver one or two weeks after the screening to ask whether they have made an appointment. If not, you might offer to make the appointment for them. Check that the athlete has a means of transportation and, if necessary, offer assistance.

Depending on your delivery strategy, partnership agreement, and the sensitivity of the care, consider **sending a media advisory** in advance of care delivery to invite the media to experience Healthy Athletes success stories first hand. The timing and content of your media outreach will vary based on the outlet. For example, a traditional news magazine may need a few months lead time to accommodate their editorial calendar. Also, providing as many resources as possible to the media will increase their interest. Do you have a compelling athlete story that you can include? Can you



provide access to athletes and medical professionals for interviews? Think outside the box about what you might be able to provide and how you can make your story more compelling and easier to produce for journalists.

#### *4) Capture data and recognize partners*

What's included:

- Capture quantitative and qualitative data
- Recognize partners
- Schedule partner debrief
- Record VIK contribution

Capturing and analyzing **follow-up care data** is essential to know whether you achieved the objectives set forth in your project plan, identify opportunities for improvement, and sustain engagement with your partners over time. Make sure to measure the indicator(s) you selected during project planning. The follow-up care tracking tool (Attachment B) can help you keep an organized record of whether athletes received care.

If your follow-up care delivery strategy with your partners was to offer onsite treatment immediately following the screening or to refer athletes to a follow-up care event, it will be easier for you to determine whether the athlete received care because you will have access to the records. Be sure to also capture **qualitative data**, including inspirational stories and feedback/suggestions from participants. Arm yourself and/or your team members with a camera and digital video recorder, and interview the athletes, caregivers, and other participants. Also, keep in mind that capturing a before and after picture of someone's change in appearance can tell a very powerful story. This content can be used for a later pitch to media and to share the best stories with your internal network and with the wider Special Olympics Movement. Be sure to have a few copies of your Program's model release form on hand and keep track of the signatures you receive. See Attachment G for advice on how to tell compelling stories about your health activities.

If your delivery strategy is to connect athletes with providers in their communities, you will need to contact athletes and caregivers to learn whether the athlete kept his or her appointment and actually received care. Using the contact information you collected at the screening, contact the athlete and caregiver at one or two weeks following the screening to see whether they made an appointment, a month after the screening to see whether they kept the appointment, and again at two or three months if you did not receive a response at one month. Be persistent and try various contact methods, but know that some athletes and caregivers will not respond no matter how hard you try. Although time-consuming, a recent study by SO Australia showed that contacting an athlete or family member by telephone after a screening can result in a 30% increased likelihood that they schedule an appointment for follow-up care.



***Handling any patient diagnosis and/or treatment information requires that you follow patient privacy laws in your country. In some cases, this will require you to obtain a written consent from the individual allowing you to access or share their details. Please consult with a local expert to determine the best way to comply with local laws and protect athlete privacy.***

As soon as possible after care delivery, **recognize your partners** for their contributions to your athletes. Here are a few ways to recognize your partners:

- Present them with a Certificate of Appreciation (see template in Attachment H) and/or Special Olympics gear (e.g., T-shirts)
- Distribute a press release with photos of the athletes and caregivers (see example in Attachment I)
- Post the story on your website and social media channels
- Submit your success story to Special Olympics International for posting on national media channels  
([specialolympics.org/Stories/Share\\_Your\\_Stories\\_about\\_Special\\_Olympics.aspx](http://specialolympics.org/Stories/Share_Your_Stories_about_Special_Olympics.aspx))
- Send thank you notes with pictures of healthy, happy athletes

Exceeding partner expectations through thoughtful coordination and recognition will help leave a positive impression and position your Program for sustained engagement.

The final step in the process is to **schedule a debrief meeting** with your partner(s) to discuss lessons learned, share the data you captured, and begin planning for future collaboration. If appropriate, **record their value-in-kind (VIK) contribution** for year-end reports.

### III. Examples from the Field

**Program:** Special Olympics Florida

**Title:** Partnerships and Provider List for Follow-Up Care

**Focus:** All Disciplines

**Partners:** Nova Southeastern University, Miami Dade College Dental Hygiene Program, Chamberlain College of Nursing, Hollywood Diagnostic Center, Miami Children's Hospital, Barry University, Florida International University

**Contact:** Karlyn Emile, Healthy Community Site Director, [karlynemile@sofl.org](mailto:karlynemile@sofl.org)

SO Florida has a Healthy Community (HC) site where volunteers conduct health screenings in various disciplines and provide wellness opportunities for SO athletes. Each discipline does a



screening a couple of times each month, and athletes are screened annually. Knowing that follow-up care is essential, SO Florida developed partnerships with various health care providers and universities in the community to provide care to SO athletes either at the HC site or at their own facilities. SO Florida also created a provider list of health care professionals who are willing to see SO athletes.

Once an athlete is screened, if there is a health issue needing follow-up care, the athlete and his or her caregiver are taken to a private counseling room to discuss referral options with SO Florida staff or volunteers. Depending on the health issue and the type of care necessary, the athlete is referred to one of SO Florida's partners, given a provider list and advised to contact someone from the list, or the athlete commits to seeing his or her regular health care provider. If the athlete plans to see one of SO Florida's partners, either at the HC site or at the partner's facilities, SO Florida staff will help make arrangements and coordinate care. All athletes in need of follow-up care are given a copy of their results to take to their appointment.

To create these follow-up care partnerships, SO Florida identified the key individuals at various institutions/agencies then determined what resources they can assist with by discipline. In disciplines without a current Clinical Director (CD), SO Florida invited healthcare professionals from these institutions to act as CDs which helped strengthen the partnerships. Currently, Nova Southeastern University provides hearing exams, hearing aid fittings, and earwax extractions at the HC site, and Nova also has a vision clinic where athletes are sent for vision tests. When an athlete is overweight or has abnormal vital signs, an in-house public health practitioner and nutritionist help them develop a wellness plan. Miami Dade College Dental Hygiene Program sets aside two days per month at their campus clinic exclusively for athlete referrals at a very discounted rate. Other partners provide volunteers to staff the HC site during screenings and other health events.

When a referral to a partner will not work and the athlete does not have his or her own doctor to visit, SO Florida gives the athlete and caregiver a list of providers who have agreed to see SO athletes. To create the provider list, SO Florida pulled up a local directory of providers relative to each discipline and contacted them by mail to introduce Special Olympics and Healthy Athletes. They followed with a phone call asking if the provider would accept referrals for individuals with ID/DD from SO screenings. Those who agreed were added to the list. The list keeps growing because caregivers and athletes make their own recommendations based on their experiences. Being that most SO Florida athletes have Medicaid (a government-run insurance program), staff and volunteers also contacted Medicaid providers using the same process.

Before athletes come to the HC site for screenings, they fill out a newcomer registration form that captures all contact information. Athletes and caregivers receive a call from SO Florida staff or volunteers two weeks after the referral for follow-up care, asking whether they made an appointment or whether they kept their appointment. If they hadn't yet gone to their appointment, another call is made a month later. A third call is made after a year to remind the athlete to come to the HC site for the annual screenings. However, tracking whether athletes actually receive care has



been challenging for a few reasons: making so many calls is very time intensive for staff, many people don't answer their phones or emails, and most won't call SO Florida back after a missed call. To help overcome this challenge, SO Florida is recruiting student interns from university health programs to assist in making phone calls.

**Program:** Special Olympics Peru

**Title:** Partnerships for Dental Care at Special Schools

**Focus:** Oral Health

**Partners:** Universidad San Martin de Porres Dental School, Universidad Cientifica Del Sur Dental School

**Contact:** Gonzalo Larrabure, Director of Healthy Athletes for Latin America, [glarrabure@specialolympics.org](mailto:glarrabure@specialolympics.org)

SO Peru has partnered with two universities to provide free oral health care for SO athletes and others with ID. Multiple times each year, SO Peru and university volunteers travel to low-income special schools in Lima to provide screenings and dental care. Over three visits, athletes are screened and receive minor treatment onsite. Those needing more complex treatments are referred to the university clinic for free or reduced-cost care. At the same time, SO Peru conducts Family Health Forums with caregivers of the students to explain the oral health outreach and the quality care offered at the university clinics to encourage them to take their athletes for necessary follow-up care.

During the first visit to the special schools, volunteers give the athletes a full dental screening. Three months later, volunteers return and provide minor treatment such as fluoride and sealing small cavities. On a third visit three months later, volunteers make sure the treatment from the second visit went well and provide more minor treatments as necessary. After each visit, SO Peru provides the school with a list of students needing more complex treatments and teachers are told the students can go to either of the partner dental clinics for care.

In 2013, SO Peru helped caregivers or teachers make appointments at the clinics. In 2014, SO Peru will also work with the school to arrange transportation since this can be a barrier to seeking care. Oftentimes, a teacher will escort a group of athletes to the clinic so that taxi costs are reduced for each athlete. The clinic at Universidad Cientifica del Sur offers very inexpensive treatment for athletes three days per week. The clinic at the Universidad San Martin de Porres offers low rates to all patients and the dentists have been trained in working with people with ID. In addition, San



Martin opens its doors to athletes for completely free care once day per year. This is the preferred option if the athlete's care can wait until this day.

One challenge has been sharing data from the screening with caregivers as well as the dentists providing the follow-up care. In the beginning, the overall screening data was given to the school headmistress and she was supposed to contact the caregivers, but this system did not work well. The caregivers wanted a form that gave specific data about their athletes and volunteer dentists thought the form should be more robust than what is used for Special Smiles. SO Peru created an improved form that is meant to be completed by volunteers and given to the caregivers following the screening, but this has been hard to implement because the dentists don't feel like they have enough time to finalize and sign all of the reports (must be done by a dentist, not a dental student).

Universities were natural partners for this work because they have clinics athletes can attend for treatment and they have many students who can serve as volunteers while also becoming more sensitive to the needs of people with ID. With the Universidad San Martin de Porres, the partnership started in 2010 when some of its dental students became Healthy Athletes volunteers. These students graduated and remained involved with SO Peru, recruiting more volunteers along the way. SO Peru wanted to expand the relationship to include prevention and follow-up care, so Program staff met with university officials to discuss how the partnership could grow. For this work with the special schools, the universities recruit the volunteers and provide them with lunch while SO Peru pays for transportation. During the free dental care day at the San Porres clinic, the university invites the media to cover the event. This gives the university as well as SO Peru the opportunity to enhance their image in the community. Corporate social responsibility is very important in Peru, so including the media and other opportunities for recognition is an important motivation for partners.

## IV. Tips/Recommendations

- 1) Get to know the universities, agencies, and other partners in your area. Join associations, attend community events, network and be proactive in establishing relationships. If you don't have a Clinical Director in a discipline and you are interested in partnering with a certain institution, consider finding someone at the institution who can become a CD and help drive the partnership.
- 2) During partnership discussions, be aware that your partners may have different goals than your Program. You want to make the partnership mutually beneficial and provide opportunities for partner recognition. However, some partners may make demands that are not in the best interest of the Program, such as asking to be your only partner on a project that requires multiple partnerships. Be open and clear in your discussions about what is and is not possible.
- 3) Create incentives for your partners to stay engaged. Many partnerships fade away after an event, and you need to think about ways to keep them interested and benefiting from the partnership.



Incentives could be more recognition, media coverage, opportunities for their staff to interact with athletes, etc.

4) Tracking follow-up care is a significant challenge. Make sure you have a solid strategy in place and a strong team of volunteers for implementation. Instead of relying solely on calls with caregivers, try to get information from the providers as well. They should be able to tell you how many SO athletes they saw over a certain period of time.

5) If you are going to make follow-up phone calls, be sure to inform caregivers and athletes that you will be conducting these phone calls. Giving them warning will prepare them for the calls, and, in some cases, knowing you are going to call will make them more proactive in seeking care. If athletes do not know their contact information, get the name of their coach and reach out to that coach to obtain the information.

6) Automated SMS (text messaging) or automated email can reduce the number of volunteers needed for tracking follow-up care. Particularly during the “appointment reminder” stage, setting up a system that automatically sends an email can be very helpful to remind athletes of their appointments while reducing staff time (work with your Regional Healthy Athletes Manager if you want to use this method). You could use MailChimp, Survey Monkey or Google Forms to create a free survey asking whether the athlete/caregiver has set up an appointment, needs help finding a doctor, or made it to the appointment.

7) It is important to provide education to caregivers so they understand the necessity of taking their athletes to follow-up care. In Peru, one of the biggest barriers to seeking care is fear among parents that their children will be treated poorly by health providers. SO Peru needed to convince caregivers that the university clinics were welcoming and inclusive places with providers who understand how to work with people with ID.

8) If doing outreach to schools or other facilities, be thoughtful about the number of visits you conduct. For SO Peru, the benefit of three visits was that athletes who were afraid and reluctant during earlier visits got used to the dentists and were more willing to be screened. Additionally, the volunteers got more comfortable and experienced in working with people with ID. However, the health volunteers themselves said they would rather just do two visits and spend the extra time at another school.

9) Communicate very clearly with athletes, caregivers, teachers and coaches about what is and is not provided during the school visits. There was some confusion about the fact that athletes could receive some but not all treatment during the volunteer visits. Instead of going to the university clinics, they waited for the visits from the volunteers when in actuality, the treatment they needed could not be provided onsite.

## **Attachments**



Attachment A: Tips for Meeting with Potential Partners

Attachment B: Follow-Up Care Tracking Template

Attachment C: Partner List Sample

Attachment D: Email Template and Telephone Script

Attachment E: Demonstrating Impact Presentation

Attachment F: MOU Example

Attachment G: Telling Your Story

Attachment H: Certificate of Appreciation Template

Attachment I: Press Release Example

**Additional Tools/Resources**

- 1) SO Kansas Follow-Up Care Tracking Postcard
- 2) SO Florida Athlete Referral Note
- 3) SO Florida New Participant Patient Registration Form
- 4) SO Florida University Affiliation Agreement



## Attachment A: Tips for Meeting with Potential Partners

### The First Meeting

When you arrive at a meeting for the first time with a potential new partner, allow for some time at the beginning of the meeting to get acquainted personally. With a small group, each attendee might take a moment to introduce his or her self and explain how they became involved with their organization or how long they have been involved. Plan ahead and confirm in advance the number of people who will be at the meeting. If it is culturally appropriate, take a small gift or a token of appreciation in advance.

Depending on the setting, you might notice something in the host's office or home that is of interest. As human beings, we love to find common ground either through shared experiences or shared interests. If the meeting consists of only you and the host, commenting on a photo or memento in their office is a terrific way to find common ground. If there are a number of people in the meeting, be careful not to carry on a conversation with only one individual and by doing so exclude the others from the conversation.

Look for a natural break in the conversation to focus everyone on the purpose of the meeting. It is impossible to say thank you too many times! Thank everyone for their time that day or their interest in Special Olympics. Use the individual's culturally appropriate more formal name. Do not use someone's informal name unless or until you are invited to do so. Even then, it may be more appropriate when referring to them in the third person to use their more formal name. Bear in mind that you may be speaking with other people who have yet to be invited to address the individual using their more familiar name. Showing that you have a relationship with them where you use a more familiar name can backfire. Rather than demonstrate your close relationship, it might be considered a sign of arrogance or insensitivity.

Allow time for both organizations to present a brief overview of their history, scope of their success, and goals and objectives. Try to refrain from saying TOO much until you really understand where their interests lie. *The meeting is less about presenting information and more about helping the other person or people want to say YES to what you would like for them to do.* Though you are at the meeting to work on an agreement that will be beneficial to Special Olympics, the most enduring partnerships are mutually beneficial. Take time to understand what challenges they face and offer solutions where you can. Be generous but sincere with any praise you can offer for the good work they have already accomplished. Be empathic when listening to their challenges.

When speaking about Special Olympics, consider including a story about a local athlete that embodies the power and significance of our movement. People tend to remember and retell stories! If you know of a wonderful story as a result of their organization's engagement with

Special Olympics with another Accredited Program, share that story. As you think about a powerful story to tell, you might approach it this way:

1) Describe the athlete's life before Special Olympics. How difficult was it? Were they isolated? Limited? Did they have an undiagnosed health issue? Did they lack basic eye care resulting in a lack of vision or basic dental care?

2) The intervention: How did they come in contact with SO? How did they get involved? What support did they receive? What observations do you have about how they changed?

3) How is their life different now? How did they benefit, change or grow? How was their family affected? Their community? What does the future hold for them now? How are they giving back?

As you begin to discuss what a partnership might look, be honest about challenges you are facing. When understanding their objectives and motivation, ask questions for clarification. Be a good listener.

Be conscious of the time. If the meeting is going longer than intended, ask the other individuals if their schedule allows for the conversation to continue or if a second meeting should be scheduled. Recap what has been decided and any agreed upon next steps. Offer to summarize the meeting in writing. Confirm what the best method of communication is going forward. Thank everyone again! Consider sending a prompt thank you note when you return home or to the office.

### **After the Meeting**

Following the meeting, do everything you can to respond to requests in a timely manner. The initial interactions that take place in the early phase of a new partnership can set the tone for the duration of the partnership. If it is an exceptionally busy time or if you cannot provide information in the agreed upon time frame, take a quick moment to communicate the delay and offer a revised date for getting back in touch.

For the duration of the partnership, show appreciation and share any success stories with the new partner that is a result of their involvement! Treat them the same way that you would like to be treated. It is much easier to keep or renew an existing partner than it is to find a new one!







## Attachment C: Partner List Example

Organization	Mission	POC/Contact Info	Notes
Houston Cy-Fair Lions Club <a href="http://www.houstoncy-fairlions.org/">http://www.houstoncy-fairlions.org/</a>	To empower volunteers to serve their communities, meet humanitarian needs, encourage peace and promote international understanding through Lions clubs.	Theresa Casey 281-686-4614	National Partner



Texas State Optical <a href="http://www.tso.com/">http://www.tso.com/</a>	Offer patients convenient locations, qualified Doctors of Optometry and a complete line of competitively priced eyewear that is fashionable and functional.	<a href="http://www.tso.com/content/contact-us">http://www.tso.com/content/contact-us</a> <a href="http://www.twitter.com/tsonetwork">www.twitter.com/tsonetwork</a>	
LensCrafters <a href="http://www.lenscrafters.com/">http://www.lenscrafters.com/</a>	Help people see life a little more clearly in a way that's easy, friendly and fun.	LensCrafters, Inc. 4000 Luxottica Place Mason, OH 45040 877-753-6727	
Oculus <a href="http://www.oculus.de">http://www.oculus.de</a>	Focus on progress – to develop sophisticated technology-based instruments of the highest quality and providing professionals with excellent in-serve training on their efficient operation.	425-670-9977	Provides equipment and staff to operate it for screenings for Opening Eyes Poland
American Optometric Society <a href="http://www.optometricsociety.org/">http://www.optometricsociety.org/</a>	To improve the quality and accessibility of optometric care available to the public and to support and enhance education, competency, and excellence in optometry.	American Optometric Society c/o Dr. Tom Cheezum 801 Volvo Parkway, Suite 133 Chesapeake, VA 23320 805-768-4267	
American Academy of Ophthalmology <a href="http://www.aao.org/">http://www.aao.org/</a>	To advance the lifelong learning and professional interests of ophthalmologists (Eye M.D.s) to ensure that the public can obtain the best possible eye care.	P.O. Box 7424 San Francisco, CA 94120-7424 415-561-8500	



## ATTACHMENT D: Partner Email Template or Telephone Script

*Earl Smith, Dean of the University of Houston College of Optometry*

Hello, my name is **Jane Thomas**, and I'm the **Director of Health and Wellness** for **Special Olympics Texas**. Through our Healthy Athletes Opening Eyes program, we host hundreds of vision screenings for people with intellectual disabilities each year. *Because of your global leadership in vision education, care, and research, we think you could be an important partner in helping us fulfill our mission of providing quality vision care for all.* At the same time, working with our athletes can provide your students and faculty with unique opportunities to care for and learn about one of the world's most vulnerable populations.

Would you be interested in learning more about our program and discussing possible opportunities for collaboration? If so, we would like to meet with you or someone from your organization at a time and location that is convenient for you. Please let me know the best way to coordinate, and I'd be happy to schedule a meeting.

# Demonstrating our Impact (abridged for Health focus 11/13)

August 14, 2013  
Chris Parker Hunt

***Special Olympics***



# Goal of Session



## Demonstrating our Impact

Provide overview on the research available to us and how it can be used to demonstrate impact.

Provide research reference document (this ppt)

# How to use this ppt



Much of this powerpoint is dense with research references.

Its meant to be used by internal staff as a background/reference tool.

The research is presented in easy to understand language and then the pink shaded slides show the background/reference/research citation so fundraisers can properly give credit to the research in proposals/presentations and reports to donors.

# Demonstrating Impact



The goals and activities we do and the targets we set *convey work*.

The problems we are trying to solve, with the work we are doing, *convey meaning*.

By positioning ourselves as problem solvers we better *convey our role in the world*. We are more relevant to a person or company or an institutions' own experience, needs and objectives.

We should spend our time explaining the problem and our role in providing solutions rather than the work we do.

# Why is research important to fundraisers and demonstrating our impact?



If you don't know what the problem is –  
then how will the donor?

Data helps us document the problem, documents our  
activities and our work.

Research and evaluation helps us understand the  
problem and gives us information or better ideas on  
how we can solve the problem.

Together, these can highlight the importance of  
Special Olympics' role in solving the problem

# Types of research we have and conduct



## **Special Olympics commissioned studies focus on:**

Attitudes, perceptions, behavior change, characteristics of an athlete, process evaluation, gaps in health care, athlete needs, awareness, World Games.

## **Special Olympics has its own stats and research:**

Athlete Census / Reach Report – Do you know the data we collect?

Health Screening data – Do you know the local data in your Program or region, by discipline?

At World Games we often collect data across many countries – attitudes and perceptions, health, etc.

Special Olympics is the holder of the largest health dataset in the world on people with ID

# General Issues/Gaps in Research



There is no global “surveillance” or census or documentation of needs of people with ID.

People with ID are often excluded from research studies.

Research on disabilities doesn’t differentiate among disability groups. ID is grouped with a whole lot of other disabilities.

For all our health data, we do not have longitudinal data on individuals, we have event screening data.

Our research isn’t perfect but its getting better.

# Frequently used Researchers



- UMass-Boston is an official Special Olympics Collaborating center, with researchers Gary Siperstein, Paddy Favazza, and Robin Parker
- University of Ulster, Roy McConkey
- Gallup
- [http://resources.specialolympics.org/Topics/Research/Program\\_Research\\_Toolkit/Program\\_Research\\_Toolkit\\_Section.aspx](http://resources.specialolympics.org/Topics/Research/Program_Research_Toolkit/Program_Research_Toolkit_Section.aspx)
- [http://www.specialolympics.org/Sections/What\\_We\\_Do/Leading\\_Research\\_Studies.aspx](http://www.specialolympics.org/Sections/What_We_Do/Leading_Research_Studies.aspx)

# The Vision, The Problem, our Role, our Successes, Limitations, and Solutions



Our focus today:

We are going to educate you on available research that can help you demonstrate the Problem and our Role in providing solutions to the problem.

## Sustaining Athlete Health

Special Olympics

### VISION

A world where every person with an intellectual disability & their family understands what they need to do in order to optimize their health, & where accessible information, resources, systems & policies exist at the individual, community, national & global levels that support them in realizing healthy & productive lives.

### THE PROBLEM

<b>The Issue</b> 200,000,000 people with intellectual disabilities are denied access to quality health services.	<b>Our Role</b> Promote the overall well-being of people with intellectual disabilities via programs that ensure ongoing access to quality, community-based healthcare services, highlighted by free health screenings at Special Olympics' competitions, games and other venues.	<b>Successes</b> <ul style="list-style-type: none"><li>1.2 million screenings</li><li>7 healthcare disciplines</li><li>120,000 professionals trained</li><li>New data for research &amp; awareness</li></ul>	<b>Limitations</b> <ul style="list-style-type: none"><li>Episodic screenings (at games only)</li><li>3.5% athlete penetration rate</li><li>Static snapshot data system</li><li>Limited engagement of coaches, families &amp; community partners</li></ul>
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### THE SOLUTION

- Increase expanded health services, including ones focused on diseases of extreme poverty, into all of Special Olympics' worldwide, year round events & programming.
  - > More Screenings in More Places
  - > New Programming
    - MALARIA
    - HYDRATION
    - HEALTHY WEIGHT
    - HYGIENE
    - NUTRITION
    - TB, HIV/AIDS
  - > More SO Advocates (athletes, coaches, families)
- Create local Healthy Community networks of health providers engaged in Special Olympics' health work & committed to providing ongoing health resources & services to people with intellectual disabilities & their families outside of Special Olympics.
  - > Foster Community Partnerships
  - > Activate at Special Olympics
  - > Catalyze Access to Community Healthcare Services
- Create global Healthy Communities coalition of leading businesses, NGOs & governments that support Special Olympics' health work & increase access to health resources & services through macro-level action.
  - International + unicef + care + NOVARTIS
- Develop world class bio-informatics capability to monitor longitudinal health outcomes for people with intellectual disabilities to measure progress, inform public policy leaders, and demand health justice worldwide.
  - ID Data
  - WORLD HEALTH ORGANIZATION

# What data can you use that demonstrates The Problem (1 of 2)



Much of the public holds negative attitudes and low expectations about our athletes.(see slide 13-14)

There is a gap in health care - access and provision; (Yale study, 2000)

Health condition of our athletes is poor – eyes, ears, feet, general fitness (see slide 15)

Lack of access to and even neglect in these areas: education, sports, health, employment, families.(CGI brochure, slide 16)

More likely to die young ([Bristol.ac.news/2013/9230](http://Bristol.ac.news/2013/9230))

## What data can you use that demonstrates The Problem (2 of 2)



There is relationship between poverty and disability: People with disability are more likely to be in poverty and people in poverty are more likely to have a disability (Emerson)

We find that one in ten students with ID are bullied or victimized once a week or more (Developmental Neuro-rehabilitation, 2009).

Students with ID are two to three times more likely to be victims of bullying than their nondisabled peers (Disabilities: Insights from across Fields and around the World, 2009).

**Our population faces neglect, has many unmet health needs, they are bullied, and are not a priority across many industries – health, government, business, education, sports.**

# Global Clinical Findings from Health Screenings of Special Olympics Athletes



<b>Special Smiles</b>	80,344 screenings	<b>Fit Feet</b>	38,951 screenings	<b>Healthy Hearing</b>	40,788 screenings
Mouth Pain*	14.4% (n = 11241)	Gait Abnormalities	52.7% (n = 20543)	Blocked or Partially Blocked Ear Canal	39.0% (n = 15907)
Untreated Tooth Decay*	37.5% (n = 28576)	Bone deformation	22.3% (n = 8679)	Failed Puretone Hearing Screening	27.0% (n = 11014)
Missing Teeth*	28.4% (n = 21816)	Skin/Nail Conditions	50.6% (n = 19721)	<b>Health Promotion</b>	49, 105 screenings
Gingival Signs*	46.5% (n = 35533)	<b>Opening Eyes</b>	76,582 screenings	Low Bone Density*	22.7% (n = 1711)
Urgent Dental Referral*	14.5% (n = 11027)	Never Had an Eye Exam*	24.3% (n = 12543)	Overweight* (youth)	15.0% (n = 3606)
		Eye Disease	15.8% (n = 12115)	Obese* (youth)	14.0% (n = 3370)
		Needed new Rx	30.6% (n=23453)	Overweight* (adults)	28.8% (n = 5708)
				Obese* (adults)	30.8% (n = 6102)



## THE CRISIS FACING PEOPLE WITH ID

### Societal & Environmental Challenges

- People with ID and their families typically fall at the bottom of the economic spectrum in communities and across countries. (*Emerson, E. Disability Rights International Country Reports, 2007*)
- Families of children with ID face extra burdens and stress.
- People with ID have lower levels and rates of employment and/or less meaningful employment than the general population or other disability groups.
- Much of the public across all societies hold attitudes about people with ID that reflect low expectations of competence and high expectations of problems.
- In many cultures, inaccurate understandings about ID, irrational cultural beliefs and just plain fear cause people to actively discriminate against people with ID and their families, producing stigma, isolation (including forced detention), taunting, neglect, physical abuse, and, sometimes death, including infanticide.

### Educational Neglect

- At least 90% of children with disabilities in the developing world are denied the right to education.
- Children with ID receive less educational opportunities than any other group. Often parents cannot work, especially in developing countries, because they are caring for their child in the absence of schooling or other programs.
- As a result of lack of schooling, health education delivered to students in schools never reaches children with ID.
- Globally, most children with ID do not attend school at all.
- The public believes that children with ID are most appropriately educated at special schools and would disrupt regular classrooms.
- Where children with ID attend school, it is usually in a segregated facility or classroom with grossly substandard resources.
- Even where there is physical inclusion in schools of people with ID, there is too often social exclusion or even taunting or bullying.
- Teachers generally feel unprepared to teach children with ID and lack the support needed from schools to be effective.

### Abuse

- As many as 68% of female adolescents with ID have been abused before the age of 18. (*Frohman, 2002 in UNICEF, 2012 Towards an AIDS Free Generation, Promoting Community Based Strategies for and with children and adolescents with disabilities*)
- Among adults who have developmental disabilities, as many as 83% of females and 32% of males are victims of sexual assault. (*Johnson, L, Sigler R. 2000. Journal of Interpersonal Violence*)
- When it comes to HIV programs, children, adolescents and young people with intellectual/developmental impairments must be taken into account not only because they lack equal opportunities to learn and be informed but also because of their heightened vulnerability to sexual abuse. (*UNICEF, 2012*)
- Reports about the mistreatment of individuals with developmental and mental disabilities, including physical and sexual abuse, consistently demonstrate levels of negligent and often abusive treatment higher than in the population without ID, especially in institutions. (*Disability Rights International Country reports, Jones L et al, 2012, World Report on Disability, 2011*)



<http://media.specialolympics.org/soi/files/resources/Communications/UpdatedCGIBrochure.pdf>

# Background/References on The Problem (Slide 11-12)

Gap in health care: (Yale Study, 2000) **The Health Status and Needs of Individuals with Mental Retardation(2000)(Department of Epidemiology and Public Health, Yale University School of Medicine, Department of Psychology, Yale University)** In recognition of the need to improve the quality of life of individuals with mental retardation (MR), Special Olympics Inc. (SOI) commissioned this report to examine the health needs of children and adults with MR. The purpose of this report is three-fold: 1) to identify the current health status and needs of individuals with MR, 2) to identify services gaps in supporting these needs and 3) to propose specific recommendations to address the unmet health care needs of individuals with MR.

Individuals with MR are particularly vulnerable to having unmet health care needs, as they are faced with many challenges in understanding and maintaining their health.

The lack of access to appropriate health care services may be a relatively new problem as individuals with MR were mainstreamed.

U.S. Surgeon General's report, "[Closing the Gap – a National Blueprint to Improve the Health Care for Persons with Mental Retardation.](#)" 2002 In issuing this Blueprint for improving the health of those with mental retardation, the Surgeon General has drawn the attention of the Nation to the longstanding health disparities experienced by a group of Americans who deserve our full attention and support in their efforts to get the health care they need.

Refer to Healthy Athletes screening data that SO collects globally across disciplines.

People with ID die young. Men with ID die 13 years younger than those without; women with ID die 20 years younger. 1200 die needlessly each year due to poor NHS care.

<http://bristol.ac.uk/news/2013/9230.html> UK government funded report published (March 2013) that shows that people with learning disability die on average 16 years before the general population - with women in a worse position.

# Slide 11-12 Background/References Cont'd on The Problem

See CGI brochure – Health needs/access, Abuse, Education, societal, environmental – lots of references and stats on sub-par conditions/environment for our athletes.

## **Poverty and People with Intellectual Disabilities, Eric Emerson (Institute for Health Research, Lancaster University, United Kingdom)**

Available evidence suggest that people with intellectual disabilities in the world's richer countries (and probably elsewhere) are at significantly great risk of living in poverty that their nondisabled peers.

Poverty is a distal cause of I.D., an effect mediated through the association between poverty and exposure to a range of environmental and psychosocial hazards that are likely to impede children's I.D. Supporting a child with I/D/ may entail significant direct and indirect or "opportunity" cost for families. Having an I.D. in most countries significantly increases the risk of exclusion from the workforce, the possibility of long-term unemployment and consequential poverty.

People with intellectual disabilities in the world's richer countries (and probably elsewhere) are at significantly greater risk of living in poverty than their non-disabled peers.

Exposure to poverty during childhood exerts a powerful influence on shaping a person's health, well-being, opportunities and experiences.

Reducing the rates of exposure to poverty among families supporting a child with I.D. should form a cornerstone of public policies that seek to address the health and social inequalities faced by people with I.D.

**The United Nations Development Program** estimates that 80% of all people with disabilities reside in low-income countries (*Groce, 2011*). While people with disabilities represent one in ten people worldwide, they are one in every five of the world's poorest people (*Groce*). Despite the severe need and higher health risk, people with ID are denied health services, community interventions, and there is a lack of targeted interventions and programs for this population. (***WHO, 2011, World Health Organization Report, SOI 2001***)

# Health Research

What research do we have that demonstrates our role in solving problems related to health and health care for our athletes.



Our own research and data is a global data set on people with ID.

Our own research shows the need for treatment and care.

We are changing doctors and medical professionals attitudes, skills and abilities as it relates to screening and providing health care for our athletes.

Golisano Grant: We are providing more screenings and more relevant screenings.

We are going to create communities that can treat athletes, not just screen them.

Most people don't think of sport as solving social, political or human problems



Focus on **Unified Sport** and its role in solving social isolation

Focus on **nexus between health and sport** and coaching for high expectations

Challenge the organization to be **empowerment and dignity centered** and showcase the individual and social impact of dignity

Showcase and/or develop the explicit **sport-fitness-health connection** for athletes to create positive health outcomes

**Document the changes** in attitudes and behavior that result from sports participation among both athletes and partners

Highlight the **importance of motor development** for child development

## MEMORANDUM OF UNDERSTANDING

### **Parties**

This Memorandum of Understanding (“**MOU**”) is entered into this 2<sup>nd</sup> day of October, 2013 by and between the following parties:

- (1) Catholic Relief Services - Malawi  
Manobe Complex,  
Plot 5/1,  
Mchinji Roundabout,  
Lilongwe, Malawi

and

- (2) Special Olympics Malawi  
National Council of Sports Building,  
Kamuzu Stadium Grounds,  
P.O. Box E28,  
Post Dot Net,  
Blantyre, Malawi

Catholic Relief Services - Malawi and Special Olympics Malawi are referred to collectively herein as “**the Parties**”.

### **Background**

WHEREAS Special Olympics is an international not-for-profit organization dedicated to providing year-round sports training and athletic competition in a variety of Olympic-type sports for children and adults with intellectual disabilities, giving them continuing opportunities to develop physical fitness, demonstrate courage, experience joy and participate in a sharing of gifts, skills and friendship with their families, other Special Olympics athletes and the community. In addition, Special Olympics offers a variety of direct health, early childhood development, and inclusive education services and opportunities for individuals with intellectual disabilities as part of an inclusive development platform designed to empower this most marginalized population.

WHEREAS this emphasis on sport training and competition not only improves the lives of people with intellectual disabilities, but also provides a vehicle to bring others into contact with them,

enlightening the larger community and changing the lives of everyone who gets involved. Special Olympics has demonstrated its transforming capabilities for individuals, communities and nations for over 40 years.

WHEREAS Special Olympics Malawi provides the abovementioned services for children, youth and adults with an Intellectual Disability in Malawi.

WHEREAS Catholic Relief Services Catholic Relief Services (CRS) is a global development organization, dedicated to the promotion of human development by responding to major emergencies, fighting disease and poverty, and nurturing peaceful and just societies. As part of the universal mission of the Catholic Church, CRS works closely with local, national and international Catholic institutions and structures, as well as other organizations, on the basis of need, not creed, race or nationality.

WHEREAS Special Olympics Malawi and Catholic Relief Services - Malawi share a commitment to empowering and protecting children and adults with an intellectual disability.

WHEREAS through this MOU the Parties wish to set up a strategic collaboration to cooperate together in Malawi in activities that may further the mission of both parties ("the partnership"). This strategic partnership is designed to advance the rights and protections of children and adults with intellectual disabilities in low-to-middle income groups in Malawi. As part of a shared commitment to empowering and protecting the most marginalized populations, Special Olympics and Catholic Relief Services are committed to the sustained implementation of health, early childhood development, and inclusive programming to benefit the population of people with intellectual disabilities, as well as the community.

WHEREAS this strategic partnership is part of a concerted effort to strengthen international development cooperation on behalf of people with disabilities.

### **Agreement**

Now, therefore, the Parties set forth their understanding as follows:

#### **1. Overall Relationships**

- 1.1 Status of the Parties. Except as specifically set forth herein, it is understood that each of the Parties retains all of its rights and responsibilities in conducting its own activities including the activities which may be undertaken jointly under the terms of this Memorandum of Understanding.

- 1.2 Legal Status. Nothing in this MOU shall be construed as creating any partnership or joint venture as a matter of law between the Parties or creating any separate legal entity. Neither party to this agreement is or shall be the agent of the other party. Neither party (nor its respective employees) shall have any right or authority to enter into any contract or undertaking in the name of, or for the account of the other party or to assume or create any obligation of any kind, express or implied, on behalf of the other party.
- 1.3 Third parties. The Parties shall have the right to enter into contractual arrangements with third parties for the execution of specific projects to enhance the Partnership.
- 1.4 Term. This MOU shall become effective as of the date set forth above and shall remain effective until the ( date) unless the Parties mutually agree to extend it for a further term.

## 2. **Cooperation between the Parties**

- 2.1 The Parties commit to use existing relationships, partnerships and resources to further activities and objectives outlined in this agreement.
- 2.2 The Parties agree that in building awareness and publicity around the partnership they will seek to further the awareness about individuals with intellectual disabilities.
- 2.4 The Parties agree that any and all funds jointly raised between the two of them under the banner of the partnership shall benefit the athletes of Special Olympics Malawi
- 2.4.1 **Scope of Joint Fundraising Activities.** The Parties shall:
- (1) jointly determine which potential sponsors to approach, how to approach each potential sponsor (including deciding which party should make the approach), and the general terms of proposals to a potential sponsor;
  - (2) use their respective best efforts to conduct meetings with potential and actual sponsors jointly when practical;
  - (3) jointly determine the use of revenue donated by joint sponsors;
- 2.4.2 **Joint Efforts.** The Parties shall fully consult, coordinate, and cooperate on all joint fundraising activities. Joint fundraising activities, including potential sponsors either party wishes to approach, potential special events relevant to the partnership, and potential cause marketing and direct response fundraising projects for the partnership shall be discussed and it shall be mutually determined how best to proceed.

- 2.5 The Parties agree that the trademark "Special Olympics" and the official "Special Olympics Malawi" logo will be included on any joint communications regarding the partnership. Catholic Relief Services shall ensure that the name and logo will only be used in their official form in compliance with the Special Olympics Graphic Standards Guide (a copy of which will be provided to Catholic Relief Services), without alteration or distortion. All uses of the official Special Olympics logo shall be accompanied by a legible depiction of the registered trademark symbol (®), or by a legible statement that Special Olympics logo "is a registered trademark of Special Olympics, Inc."

**3. Objectives of Cooperation**

The objectives of cooperation between the Parties are inter alia:

- 3.1 Support quality growth and expansion of Special Olympics Malawi to reach more athletes and families throughout the Republic of Malawi;
- 3.2 Help build local and national capacity to create sustainable development models to benefit people with intellectual disabilities as well as civil society;
- 3.3 Build collaborative best practices around athlete and family education, ECD programming, and health services and interventions.

**4. Catholic Relief Services commitments:**

- 4.1 Assist Special Olympics Malawi as needed in the planning and implementation of development programming designed to provide improved support for children and adults with intellectual disabilities;
- 4.2 Extend Catholic Relief Services programming to Special Olympics athletes and their families wherever possible;
- 4.3 Promote and support the implementation of Early Childhood Development initiatives in support of children with intellectual disabilities;
- 4.4 Promote and support the empowerment of children and adults with intellectual disabilities as recognized and contributing members of their community;
- 4.5 Promote and support the implementation of the Special Olympics Malawi Healthy Community project objectives;
- 4.6 Engage government and non-governmental partners to support programming to benefit children and adults with intellectual disabilities;
- 4.7 Promote and support the implementation of health screening and intervention programs including HIV testing for people with intellectual disabilities and their families;

- 4.8 Promote and support the recruitment of health care professionals and educators to support ongoing Special Olympics – Catholic Relief Services collaborative programming;
- 4.9 Collaborate with Special Olympics Malawi in the creation of a referral network for follow up treatments and health interventions as a part of the Special Olympics Healthy Athletes and Healthy Communities platform.
- 4.10 Include Special Olympics athletes and family members in Community Health Days or similar events which focus on Health, Nutrition, Child Protection, Agriculture and Economic Empowerment.
- 4.11 To look at other opportunities for collaboration with Special Olympics Malawi.

**5. Special Olympics Malawi commitments**

- 5.1 A formal article written in the Special Olympics International website [www.specialolympics.org](http://www.specialolympics.org);
- 5.2 A formal article written in the Special Olympics Global Development and Government Relations newsletter;
- 5.3 Organisation of local press event in Lilongwe/ blantyre to inaugurate national partnership signing;
- 5.4 Coverage of partnership activities on the Special Olympics Malawi page on the Special Olympics International website, in the Special Olympics Africa newsletter and on the Special Olympics Africa Face Book page;
- 5.5 Official mention of Memorandum of Understanding in the annual report for Special Olympics Africa;
- 5.6 Provide Catholic Relief Services with branding opportunities at all partnership events
- 5.7 Provide Catholic Relief Services with the opportunity to provide guest speakers at Family Health Forums and other suitable events
- 5.8 To look at other opportunities for collaboration with Special Olympics Malawi.

**6. Termination by Agreement**

This MOU may be terminated by either of the Parties on not less than 30 days' written notice.

**7. No Detrimental Actions**

No action shall be taken by either of the Parties under this MOU that would be detrimental to the other party or its respective Global and National Organizations or Programs, or which would result in the other party or any National Organization or Program being in breach of obligations pursuant to the terms of any grant agreement, or associated documentation.

**8. Publicity and Trademark License**

The Parties shall represent efforts under this MOU as an official partnership and shall provide each other due, positive recognition. Neither of the Parties shall use the trade name or marks of the other without the owner's prior written consent save that each of the Parties hereby grants a non-exclusive, no fee license to use the corporate name and logo of the other in publications produced to publicize the Initiative, which publications the Parties shall write and edit jointly. Such license shall be limited in time to the licensing party's participation in the activities pursuant to this Memorandum of Understanding.

**9. Intellectual Property Developed for the Partnership**

Each of the Parties which develops materials the subject of copyright or other intellectual property rights in connection with the subject of this MOU hereby grants to the other party a non-exclusive, world-wide, non-terminable, and royalty free license to use, copy or make derivative works of such materials provided that such licensee shall use the materials exclusively for the benefit of (1) the Parties and the objectives set out in clause 3 of this MOU or (2) the licensee in connection with its mission.

**10. Confidentiality**

The Parties shall at all times respect and protect the confidentiality of all confidential information belonging to the other party and the beneficiaries of the other party. Confidential information belonging to one party shall not be used by the other except with the express written authorization of that other party.

**11. General Provisions**

11.1 Liability Matters. Each of the Parties shall indemnify and hold harmless the other party and their officers, directors, employees and agents from and against any and all claims, demands, liabilities, fines, losses and other expenses that arise in connection with the negligence, intentional wrongdoing or fraud of the indemnifying party.

11.2 Applicable Law. The Parties shall comply with all applicable laws and regulations relating to activities conducted pursuant to this Memorandum of Understanding.

11.3 Entire Agreement. This Memorandum of Understanding, and any amendments to it, state the complete understanding of the Parties with regard to the matters envisioned

herein and supersede any prior or contemporaneous understandings, oral or written, with respect to the same subject matter. Any amendments to this Memorandum of Understanding must be in writing and signed by the Parties hereto.

- 11.4 No Third-Party Beneficiaries. No provision of this Memorandum of Understanding shall in any way inure to the benefit of any third party so as to constitute such party as a third-party beneficiary of the Memorandum of Understanding or otherwise give rise to any cause of action to any party.
- 11.5 Counterpart Signatures. This Memorandum of Understanding may be executed in counterparts, each of which shall be deemed an original but all of which shall constitute one and the same instrument. The Parties are entitled to rely on a counterpart executed and delivered by facsimile to the same extent as a counterpart with an original signature.

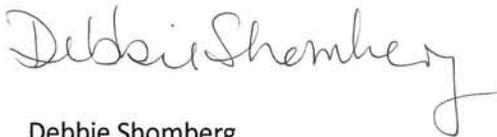
**IN WITNESS WHEREOF**, the Parties have executed this Memorandum of Understanding as of the date first above written.

Signed for and on behalf of

Signed for and on behalf of

**Catholic Relief Services – Malawi :**

**Special Olympics Malawi :**



Debbie Shomberg  
Country Representative, CRS Malawi



Peter Mazunda  
Board Chairman, Special Olympics Malawi

# Building Awareness for Healthy Communities: The Importance of Storytelling and Branding

*Karl Hejlik, Senior Manager, Health & Research Communications*

Special Olympics  
**Healthy Athletes<sup>®</sup>**



# Building Awareness



Partnership Development	Engaging our Own Network	Leveraging Technology	Building Awareness
<ul style="list-style-type: none"> <li>• Create partnerships</li> <li>• Bring partners (and the services they provide) to HA events</li> <li>• Partners then integrate our athletes (and others with ID) into their own community-based services &amp; programs.</li> </ul> <p><b>Examples:</b>            Dental college student association and faculty advisor volunteer at HA, then provide follow-up care at their student clinic at no charge to athletes.</p> <p>Local fitness club offers discounted membership rates to SO athletes.</p>	<ul style="list-style-type: none"> <li>• Family Health Forums</li> <li>• Healthy Young Athletes clinics</li> <li>• Sport-specific coach health education</li> <li>• Fitness &amp; nutrition training programs</li> <li>• ALPs peer health coaches</li> </ul> <p><b>Examples:</b>            Standard coach trainings integrate sessions on injury prevention, sports nutrition, and hydration.</p> <p>Unified walking clubs, run by family members increase physical activity outside of SO training.</p>	<ul style="list-style-type: none"> <li>• Electronic health records</li> <li>• SMS/text message reminders after Healthy Athletes</li> <li>• Coach access to information on athlete health</li> <li>• Fitness/nutrition training apps and self-monitoring programs</li> </ul> <p><b>Examples:</b>            Athlete/family receives SMS reminder after HA to make an appointment at the dental clinic.</p> <p>Athlete uses smart phone app to track daily physical activity.</p>	<ul style="list-style-type: none"> <li>• Capturing success stories</li> <li>• Direct Program-to-Program communication</li> <li>• Building awareness in health networks and general public</li> </ul> <p><b>Examples:</b>            Social media platform for Healthy Communities.</p> <p>Regular pitches to journalists interested in health news.</p>

# Why Build Awareness?



Emotional impact.  
Influence policy.  
Share best practices.  
Demonstrate Value.



# What Makes a Good Story?



The 4 C's – character,  
conflict, connection,  
cutting edge.

Quotes

Photos/video to  
accompany

“Character”  
name/delegation/  
sport

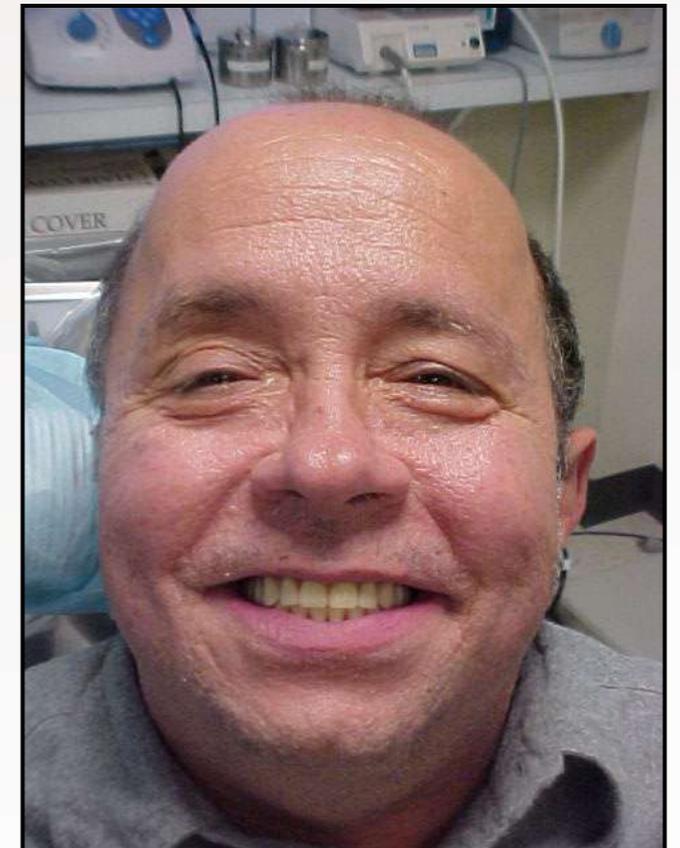
# The Power of Photos/Video



Worth a 1000  
words?

Shows Emotion  
or tells a story

Action > posed



# What Stories to Look for?



## Innovative Practices

The screenshot shows a web browser window with the URL [log.wordpress.com/2012/08/](http://log.wordpress.com/2012/08/). The page title is "The World of Special Olympics". A navigation bar includes links for "Home", "About our Blog", and "Learn our Lingo".

The main content area features a large banner with the text "BE A FAN OF **UNITY**" and "THE WORLD OF SPECIAL OLYMPICS". The banner includes an image of athletes hugging and the website URL [specialolympics.org](http://specialolympics.org).

Below the banner, there are two article teasers:

- End the Name Calling!
- Christmas: Once a Year is Not Enough —

The featured article is titled "Healthy Choices Through Culinary Creativity", posted on August 1, 2012, by [healthathletes](#). The text reads:

What's the best way to encourage athletes to eat healthy? Offering them healthy food, of course! Special Olympics Mexico is doing just that, and taking the concept one step further by also having athletes prepare the healthy alternatives. Part of the Program's Healthy Athletes Health Promotion discipline, the project is helping to feed not just athletes but also the need for job training for people with intellectual disabilities.

Partnering with the International School of Chefs in Mérida Yucatá, Health Promotion Special Chefs serve foods that provide many vitamins, contain few calories and are easy to eat for athletes. Some of the foods served include: skewers of fruit with honey, sticks of vegetables with dressing, and frozen yogurt with fruit and honey. The Special Chefs not only serve healthy food, but explain the importance of nutrition to the athletes that visit the Health Promotion venue as well as develop vital career training skills supplemental to a bright future.

On the right side of the page, there is a "Special Olympics" logo and a "DONATE NOW" button with a photo of a smiling person. At the bottom right, there is a "Subscribe to Posts" link.

# What Stories to Look for?



## Sponsorship And Funding

olympics.org/Topics/Healthy Special Olympics Healthy Athletes Special Olympics Healthy Athletes Special Olympics: Home Page Special Olympics: Hea

### Healthy Hearing Model Changing Athlete Lives in Jordan

Monday, May 28, 2012

Print Share Like 15 Tweet 1

Special Olympics and the Hear the World Foundation recently formed a global partnership to increase access to health care and hearing services for people with intellectual disabilities. This partnership, launched at the 2011 Special Olympics World Summer Games Athens, introduced a new Remote Access Model (RAM), connecting athletes in need with a hearing aid distributor in their home country for follow-up care.



The partnership is focused on providing Special Olympics athletes in need with free, high quality hearing instruments that will provide a life changing health intervention, as well as a 'hearing home' for follow up services. This partnership has helped transform the way in which Healthy Hearing implements global programming, and has also helped demonstrate the global corporate social responsibility that Phonak, through the Hear the World Foundation, represents to those most in need.

Healthy Athletes Update spoke with Dr. Ali Alshawahin on the impact this partnership has had in Jordan and throughout the MENA region.

Dr. Ali, as National Director of Special Olympics Jordan, can you share with us your perspective on the access to health care issues that our population faces both in Jordan and perhaps throughout the Middle East/North Africa region?

\*According to our sources, health care in Jordan is generally advanced; almost 80% of Jordan's population are

Follow Us

The Calendar

Find events near you and learn about volunteer opportunities at one of our 220 worldwide locations.

"Healthy Athletes has a main role in providing actual services that have positive impact on people with intellectual disabilities, aiding them to

# What Stories to Look for?



## Athlete Impact or Need

The screenshot displays two overlapping web pages from Special Olympics. The background page is an article titled "Outlasting Osteopenia" dated Tuesday, June 12, 2012. It features a photo of athletes at a sports event and discusses how the Healthy Athletes program helped an athlete named Virginia participate safely. The foreground page is a blog post titled "Treatment of Heart Defect will Add Decades to Athlete's Life" dated December 13, 2011. It includes a photo of a young girl and a quote from Dr. Erhan Sayali. The top of the foreground page has a banner that says "BE A FAN OF UNITY THE WORLD OF SPECIAL OLYMPICS" with the specialolympics.org logo.

# What Stories to Look for?



## Volunteer Stories

The screenshot shows a web browser window displaying the Special Olympics website. The page features a navigation menu with categories like World Games, Fundraising, Communications, Sports & Games, Volunteer, and Youth & Schools. The main content area highlights a news article titled "Students Critical to Healthy Hearing Success". The article text discusses the role of students in Healthy Hearing screenings and mentions the Student Academy of Audiology (SAA). A photo of Sam Gustafson, chair of the SAA, is included. The right sidebar contains social media links, a calendar section, and a world map.

### Students Critical to Healthy Hearing Success

When a Special Olympics athlete who has been through Healthy Hearing relishes in the roar of the crowd, or simply enjoys a quiet conversation with friends, it is often thanks to a student of audiology.

Traditionally, the majority of Healthy Hearing screenings are conducted by students. In 2010, more than 200 students across the United States volunteered their time and energy to help Special Olympics athletes with hearing difficulties.

And as Healthy Hearing moves into its new model focusing on follow-up care (read related story here), audiology students will become even more central, as hearing aids are fitted and calibrated, both at Healthy Hearing events and at follow-up visits.

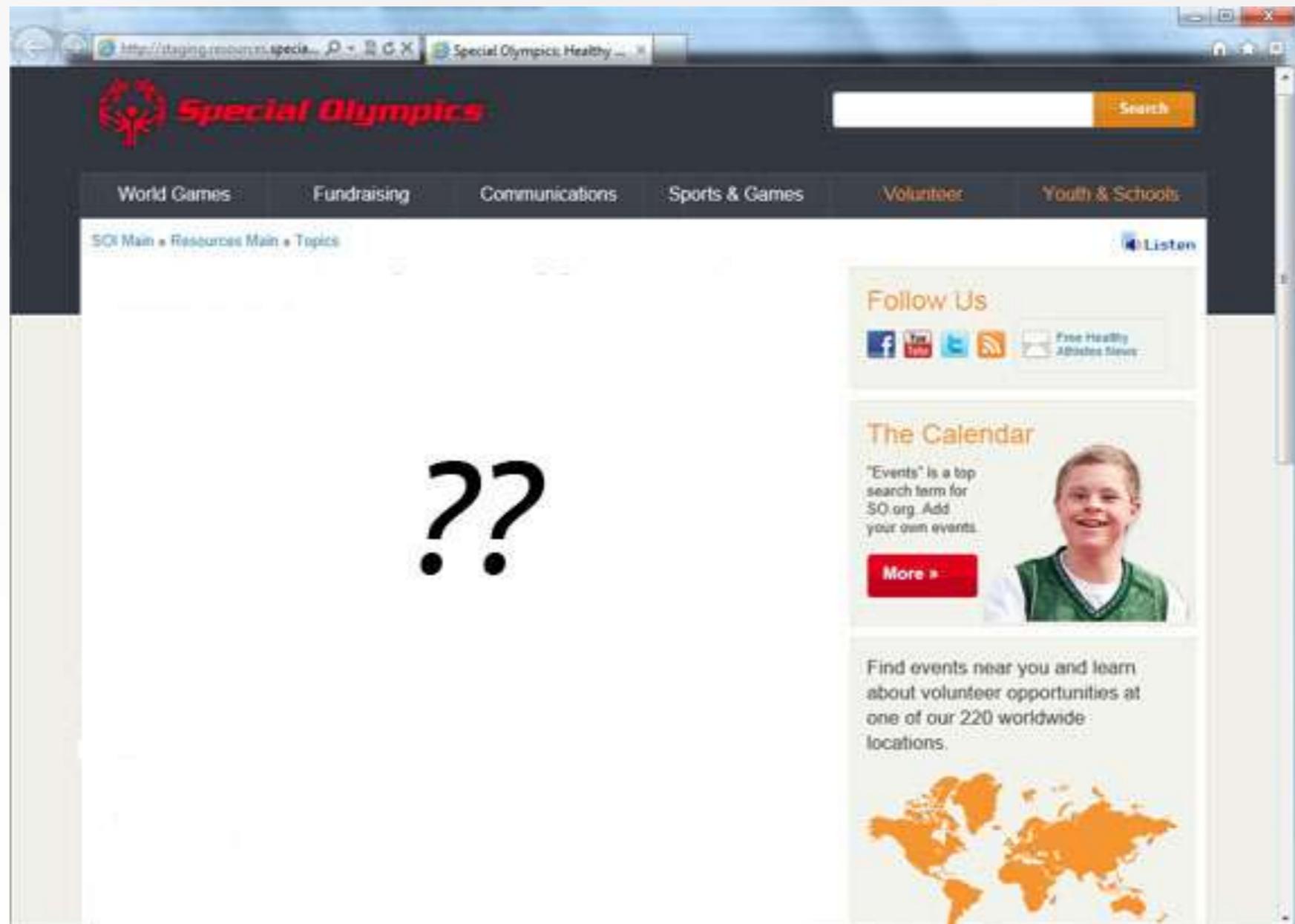
In 2010, the Student Academy of Audiology (SAA) adopted Special Olympics Healthy Hearing as its national philanthropy, entering into a mutually supportive relationship with the program to become SAA's primary focus. Students from more than 20

Sam Gustafson, chair of the SAA, is shown in a photo with a sign that reads "Special Olympics Healthy Hearing".

# What Stories to Look for?



## Your ideas



# How Do We Get Our Story Out?



E-newsletter  
SOI websites  
SOI blog  
Social Media



## The Tooth Fairies vs. the Bad Bugs

Posted on March 4, 2011 by healthyathletes



**Special Olympics**

Be a fan.

Give the power of sport to one more person.



# Share your Stories



The screenshot shows the Special Olympics website's 'Share Your Stories' page. At the top, there is a navigation menu with links for 'What We Do', 'Who We Are', 'Sports & Games', 'Connect', 'Get Involved', and 'Donate'. Below the navigation is a search bar and a 'Listen to page' button. The main heading is 'Share Your Stories About Special Olympics'. Below the heading is a paragraph: 'Do you have a story or news about Special Olympics to share? Fill out the form below and send it along. We'll review it and let you know when it's published.' There are language options: 'English', 'العربية', '中文', 'Français', 'Pycckий', and 'Español'. The form itself is divided into several sections: 'Your Story Headline' (a text input field), 'Your Story (limited to 1000 characters)' (a large text area), 'Your Name (Story Author)' and 'Your Email' (two text input fields), and a 'NOTE: This is for internal purposes only, so we may contact you when your story is published. Your email will NOT be visible to the public.' To the right of the main text area are three optional sections: 'Upload a Photo' with a 'Browse' button, 'Photo Caption', 'Video Web Link', 'Video Caption', and 'Related Web Link'. At the bottom of the form, there are fields for 'Location' and 'I am a(n)'. The Windows taskbar is visible at the bottom of the screenshot, showing icons for Internet Explorer, Outlook, Word, and PowerPoint, along with the system clock showing 4:00 PM.

# Share your Stories



## Stories about Healthy Athletes

The Special Olympics Healthy Athletes initiative brings quality health screening clinics to people with intellectual disabilities worldwide. Read these stories of inspiration, hope and health.



FRIDAY, AUGUST 31, 2012 | SOI GENERAL: HEADQUARTERS

### Adding Years of Life

By Karl Hejlik

Zuebeyde Horus, a Special Olympics athlete from Turkey, was living with a serious heart condition, b...

[VIEW STORY ▼](#)

FRIDAY, AUGUST 31, 2012 | SOI GENERAL: HEADQUARTERS

### Creating Special Smiles

By Karl Hejlik



Devin Hohl suffered from a chronic infection in her mouth, requiring a root canal and crown, but los...

[VIEW STORY ▼](#)

FRIDAY, AUGUST 31, 2012 | SOI GENERAL: HEADQUARTERS

### Overcoming Low Bone Density

By Karl Hejlik



Virginia, a Special Olympics athletes in Hawaii, thought her health was great, until a visit to Heal...

[VIEW STORY ▼](#)

## Follow Us



Sign up for our free newsletter

## Donate Now

Help us reach out to one more athlete

[Donate »](#)



Find events near you and learn about volunteer opportunities at one of our 220 worldwide locations.



[FIND A LOCATION NEAR YOU »](#)

## Videos And Photos



Photos on FB

See photos and comments from our supporters around the world.

[SEE PHOTOS »](#)

Special Olympics Blog

# Share your Stories



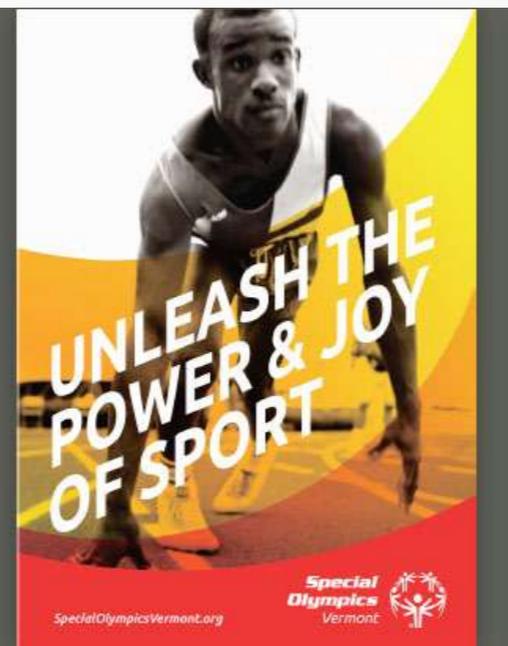
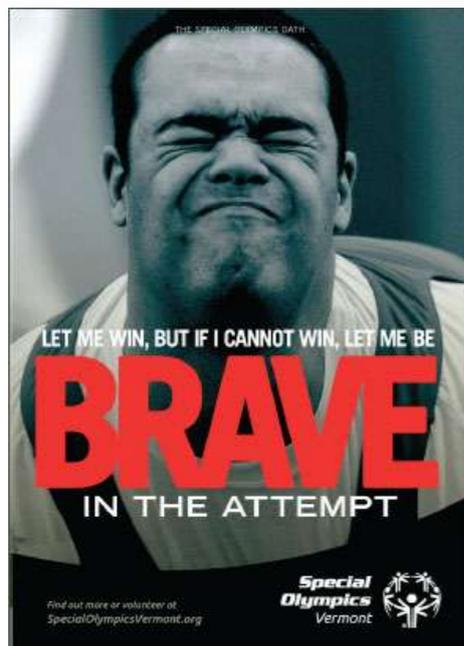
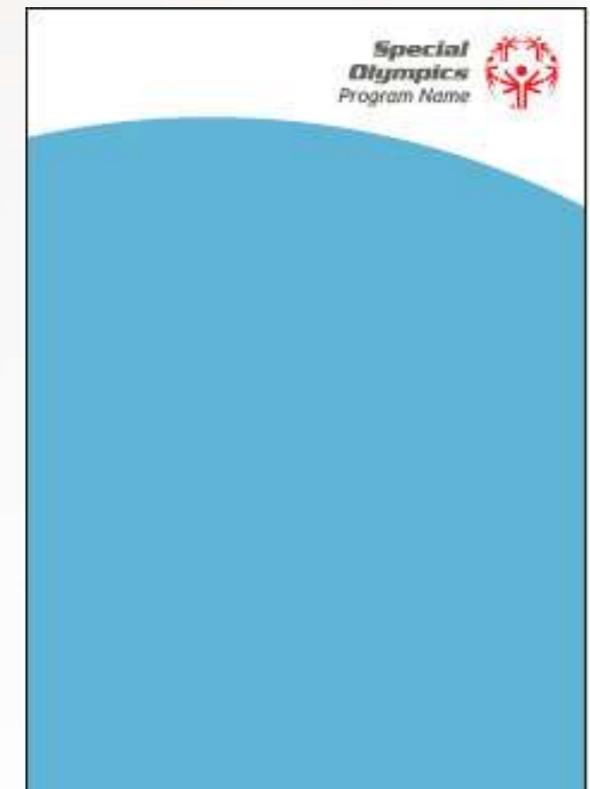
The screenshot shows the Special Olympics website for the Hawaii region. The page features a navigation menu with options like 'What We Do', 'Who We Are', 'Sports & Games', 'Connect', 'Get Involved', and 'Donate'. The main content area is titled 'Hawaii' and includes a 'Listen to page' button, contact information for the Hawaii office (1833 Kalakua Avenue, Suite 100, Honolulu, Hawaii), and social media links. A 'Follow Us' section includes icons for Facebook, YouTube, Twitter, and RSS, along with a sign-up for a free newsletter. A 'Find events near you' section features a world map and a 'FIND A LOCATION NEAR YOU' button. The 'Videos And Photos' section highlights 'Around The World' with a photo of a person and a 'SEE SLIDE SHOW' link. The 'Find Us On Facebook' section shows a Facebook post from Special Olympics Hawaii asking for donations of used PCs and laptops. The 'News and Stories' section features an article titled 'Overcoming Low Bone Density' by Karl Hagtki, with a photo of a person playing a sport. The article text reads: 'Virginia, a Special Olympics athlete in Hawaii, thought her health was great, until a visit to Healthy Athletes proved otherwise. A bone density screening revealed her to be at risk. "I was worried because she's very active," said Paul Lee, Virginia's father and a certified Special Olympics coach. "The doctor said he would have never thought to screen her until she was 45." Virginia was immediately put on medication. Today, as an active 27 year old, her bone health is good to go.' The URL for the article is http://specialolympicsblog.wordpress.com/2012/06/11/outlasting-osteopenia/.

# Healthy Athletes Branding

Special Olympics  
**Healthy Athletes**<sup>®</sup>



History and Philosophy  
Branding tools –  
color, font, dynamic curve



# Healthy Athletes Branding

Special Olympics  
**Healthy Athletes®**



Special Olympics  
**Fit Feet**



Special Olympics  
**MedFest**



Special Olympics  
**FUNfitness**



Special Olympics  
**Special Smiles®**



Special Olympics  
**Health Promotion**



Special Olympics  
**Healthy Hearing**



Special Olympics  
Lions Clubs International  
**Opening Eyes®**



# Healthy Communities Toolkit

Special Olympics  
**Healthy Athletes**<sup>®</sup>



Branding, Other  
Tools on Thumb  
Drives

Online Resource  
Page:

[http://resources.specialolympics.org/  
healthy-communities.aspx](http://resources.specialolympics.org/healthy-communities.aspx)



# How You Can Help



Develop an eye for stories

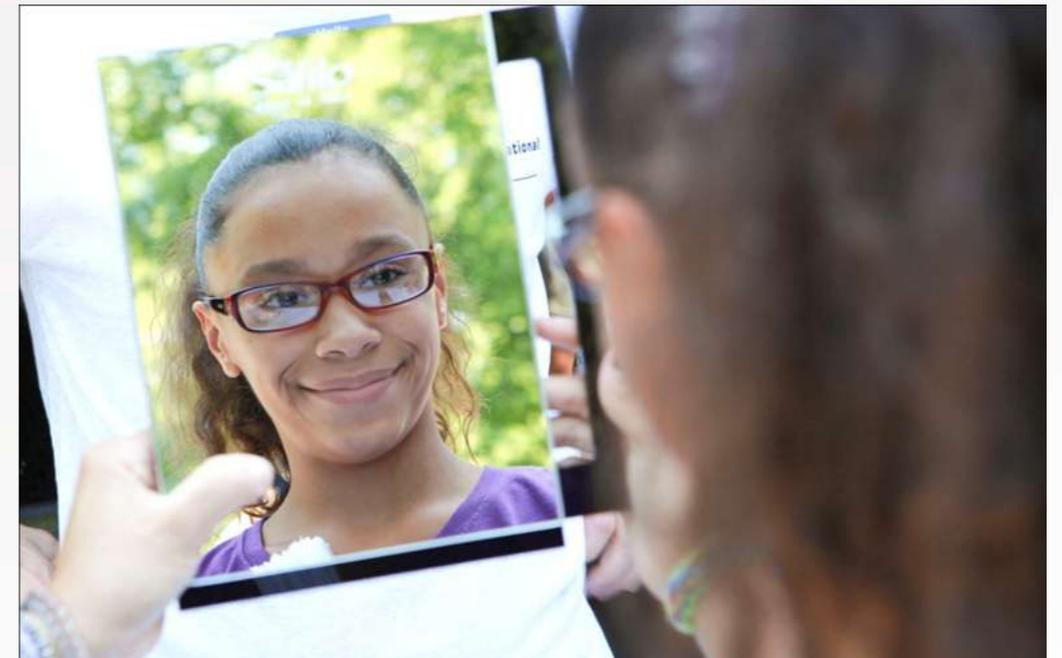
Share your photos/video

“Like” us on Facebook

Submit articles or ideas

to us – “Share your Stories”

Utilize new branding tools



# Questions??



*Karl J. Hejlik*

*Senior Manager, Health and Research Communications*

*khejlik@specialolympics.org*

*Special Olympics*

*1133 19th Street, N.W.*

*Washington, DC 20036 USA*

*Phone: 202-824-0308*

*Cell: 202-459-1273*

*Facebook: Karl.hejlik or Special.Olympics.Healthy.Athletes*

*Twitter: @healthyathletes*

[www.specialolympics.org](http://www.specialolympics.org)

# Certificate of Appreciation

*Presented to*

**[Insert Recipient Name]**

In appreciation for your support of  
[Insert Program/activity]

[Insert Date]

Special  
Olympics  
**Healthy  
Athletes<sup>®</sup>**

---

[Insert Nominator Name, Title]





## Attachment I: Sample Press Release

(Insert Date) Contact: (Insert Media Contact Name)  
(Insert Contact Phone)

Special Olympics and (insert partner name) host (insert event name)  
in support of Healthy Athletes®

(Insert City/State)- To provide Special Olympics athletes with necessary health screenings, and to bring awareness to the proper maintenance of **XXX health (relates to specific discipline)**, (insert organization name) today (announced/will host/organized, etc.) (insert event name) in partnership with Special Olympics. The event will (insert one or two lines with more details about your event/activity, if needed). (Insert information about shared mission among the two organizations).

According to (insert your spokesperson's name), "Our (insert event/activity name) is (insert quote describing the impact of the event)."

(Insert a paragraph that highlights key aspects of your event.)

(Insert organization name) activities are in partnership with *Special Olympics Healthy Athletes*®. The Healthy Athletes program is the world's largest public health program for people with intellectual disabilities, delivering basic levels of health information and care to hundreds of thousands of people each year. Healthy Athletes includes seven key initiatives: FUNfitness, Fit Feet, MedFest, Special Smiles, Healthy Hearing, Health Promotion and Lions Clubs International Opening Eyes. The goal of Healthy Athletes is to improve the everyday life of people with intellectual disabilities and train health professionals to become change agents within their disciplines.

### About *Special Olympics*

Special Olympics is an international organization that changes lives through the power of sport by encouraging and empowering people with intellectual disabilities, promoting acceptance for all, and fostering communities of understanding and respect worldwide. Founded in 1968 by Eunice Kennedy Shriver, the Special Olympics movement has grown from a few hundred athletes to more than four million athletes in over 170 countries in all regions of the world, providing year-round sports training, athletic competition and other related programs. Special Olympics now take place every day, changing the lives of people with intellectual disabilities all over the world, from community playgrounds and ball fields in every small neighborhood's backyard to World Games. Special Olympics provides people with intellectual disabilities continuing opportunities to realize their potential, develop physical fitness, demonstrate courage, and experience joy and friendship. Visit Special Olympics at [www.specialolympics.org](http://www.specialolympics.org). Engage with us on: Twitter @specialolympics; [fb.com/specialolympics](https://www.facebook.com/specialolympics); [youtube.com/specialolympichq](https://www.youtube.com/specialolympichq), and [specialolympicsblog.wordpress.com](http://specialolympicsblog.wordpress.com).

Special Olympics Healthy Athletes' influence is evident with more than 120,000 healthcare professionals trained, free health screenings provided to more than 1.4 million athletes, and

90,000 free pairs of eyeglasses given to athletes. Healthy Athletes continues to grow each year with help from a global network of volunteers, in-kind donations and other financial support.

For more information on Healthy Athletes, contact Lynn Aylward, Senior Manager, Global Health External Relations, at +1 (202) 824-0336 or [laylward@specialolympics.org](mailto:laylward@specialolympics.org).



# Healthy Athletes

**Special Olympics**  
Kansas



Thank you for participating in the recent SOKS \_\_\_\_\_ Screening.

\_\_\_\_\_ was recently assessed at the following screening(s):

- Fun Fitness
- Special Smiles
- Health Promotion
- Healthy Hearing
- Opening Eyes

It was determined that there is a follow up need for:

- Physical Therapy
- Doctor or Health Professional
- Audiologist
- Dentist
- Optometrist
- Ophthalmologist
- Bone Health
- BMI
- Blood Pressure
- Ear Wax Removal
- Middle Ear Problems
- New Rx

An information sheet was sent home with your athlete to provide you with the details of the care needed. Please help us to ensure that our athletes are receiving the care needed by completing and mailing the enclosed postcard. If you prefer not to mail the card please follow up with us by fax, email or phone.

Do not hesitate to contact us if you need assistance.

Corazon Ochanda  
Program Manager Healthy Communities

**Special Olympics Kansas**

5280 Foxridge Drive, Mission, KS 66202

Tel 913 236 9290 Ext. 110 Fax 913 236 9771 Email [ochandac@kssso.org](mailto:ochandac@kssso.org)

[www.kssso.org](http://www.kssso.org) Twitter @sokansas Facebook @specialolympicskansas

*Created by Joseph P. Kennedy Jr. Foundation for the benefit of persons with intellectual disabilities.*

## How are you doing?

- I have a health care provider
- I do not have a health care provider
- I have not received follow up care
- I have already received follow up care
- I need assistance finding follow up care
- I do not have the screening information - please contact me

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Special Olympics**  
Kansas



**Name:**

**Please contact me at:**

Address:

phone:

mobile:

email:

**Contact Us at:**

[ochandac@kssso.org](mailto:ochandac@kssso.org)

913.236.9290

800.444.9803

[www.kssso.org](http://www.kssso.org)



## Referral Information

Date \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_

### Referred to:

Institute for Special Needs Dentistry

1750 NE 167th Street

North Miami Beach, FL 33162

(954) 262-1795

(Ask for Jihane or Cynthia- Leave a message and it will be returned within 24 hours)

For questions, please contact:

Karlyn Emile

6411 Taft Street

Hollywood, FL 33024

954 901-9232

[karlynemile@sofl.org](mailto:karlynemile@sofl.org)

For questions about Special Olympics

Broward County contact: Linda Mills

3301 College Avenue

Fort Lauderdale, FL

954-262-2150

[LMills441@aol.com](mailto:LMills441@aol.com)

\_\_\_\_\_  
Person Completing Form



**New Participant/Patient Registration**  
*(Persons not enrolled in Special Olympics Florida)*

**Please Print**

Name: Last			First			Middle		
Gender (Male or Female)			Date of Birth			County		
Insurance Carrier			Policy #					
Address								
City			State			Zip		
Home Phone#			Email					
*Cell Phone#								
Attends Agency or /School (Daytime) <input type="checkbox"/> Yes <input type="checkbox"/> No if yes please specify:								
<b>Residency:</b> Please check: <input type="checkbox"/> Group Home <input type="checkbox"/> ICF <input type="checkbox"/> Foster Care <input type="checkbox"/> Lives with Family <input type="checkbox"/> Other _____								
Name of residency:								
Legal Status: Please check all that apply: <input type="checkbox"/> Florida Resident <input type="checkbox"/> US Citizen <input type="checkbox"/> Resident Alien								
<b>Primary Means of Transportation: Please check all that apply:</b> <input type="checkbox"/> ADA <input type="checkbox"/> Private <input type="checkbox"/> Public Transportation								
Parent/Guardian/Caregiver Name								
Address (if different from above)								
City			State			Zip		
*Cell Phone#			Home Phone#					
Email								

\*Healthy Community Florida is one of six programs nationwide which will be implementing a new program that allows each person screened to have their own electronic personal health record. Part of this program includes appointment reminders, follow-up care and referral information sent via text (at no cost to you). The key to follow up and referral is the person being screened or their caregiver having a **cell** phone. Until implementation starts phone, mail and or email will be used.

**Personal Health Records:**

Primary Care Physician \_\_\_\_\_ Phone# \_\_\_\_\_

Principal Diagnosis \_\_\_\_\_

List of Medications \_\_\_\_\_

Do you use a wheelchair?  Yes  No      Other (cane, walker, etc): \_\_\_\_\_

Name: Last	First	Middle

**Services Requested:**

What are your needs today? (Please circle all that apply)

- Healthy **Hearing**                       Opening **Eyes**                       Fit **Feet** (Podiatry)  
 Special Smiles **Dental**                       FunFitness **Physical Therapy**                       Sports **Medical**                       Health Promotion

How did you hear about the Special Olympics Florida Healthy Community Program at Lucanus? (Check all that apply)

- Email                       Mail                       Facebook                       Flyer                       APD                       Special Olympics  
 Other \_\_\_\_\_

**Current Services:**

Medicaid Waiver  Yes  No

Are you on a waiting list?  Yes  No If yes, which one? \_\_\_\_\_

Do you have a Support Coordinator?  Yes  No If yes, Name \_\_\_\_\_

Do you receive Medicaid?  Yes  No Do you receive Medicare?  Yes  No

**Special Olympics Florida:**

Yes  No Have you ever been in Special Olympics?  
If yes, what sports \_\_\_\_\_ Where? \_\_\_\_\_

Yes  No Would you like to join Special Olympics Florida?

Yes  No I was given an application for participation today.

Yes  No Do you have access to a computer to download forms?

Yes  No Would you like more information about Special Olympics and where to practice?

How would you like to receive information about Special Olympics Florida?  Email  Mail

**Permission for Release of Information:**

I hereby give my permission for the Lucanus Developmental Center to discuss matters related to my services or goals or to release protected health information to Special Olympics Florida Healthy Communities, Medicaid or health providers for the purpose of providing me with health screenings and referral or follow up services which may be needed.

Signature (if 18 or older) or parent/guardian \_\_\_\_\_

**OPTIONAL INFORMATION**

- Ethnic background:  Asian     African American     Caucasian     Haitian     Hispanic     Native American  
 Other \_\_\_\_\_

AFFILIATION AGREEMENT  
BETWEEN  
THE FLORIDA INTERNATIONAL UNIVERSITY  
BOARD OF TRUSTEES  
AND

---

THIS AGREEMENT is entered into as of the 28th day of February, 2013, by and between **THE FLORIDA INTERNATIONAL UNIVERSITY BOARD OF TRUSTEES**, on behalf of Florida International University, University Park, Miami, Florida 33199, hereinafter referred to as the "UNIVERSITY", and **SPECIAL OLYMPICS FLORIDA (SOFL)**, hereinafter referred to as "SOFL".

**WITNESSETH**

WHEREAS, UNIVERSITY desires that students enrolled in the **Master of Public Health** Program of UNIVERSITY obtain clinical experience at SOFL; and

WHEREAS, SOFL is offering to provide said clinical experience in recognition of the need to train personnel.

NOW, THEREFORE, for and in consideration of the premises and mutual covenants and agreements herein contained, the parties hereto agree as follows:

1. **SPECIAL OLYMPICS FLORIDA:**

SOFL agrees to make the following facilities available to UNIVERSITY in order to provide clinical experience for STUDENTS:

- (a) Cafeteria facilities, if available, shall be open to STUDENTS while on assignment at SOFL. The cost of meals at such facilities shall be borne by said STUDENTS.
- (b) SOFL library facilities used by SOFL staff members shall be open to STUDENTS.
- (c) Emergency out-patient treatment, if available, in case of accident or illness to STUDENTS while at SOFL for clinical experience. SOFL shall not bear the cost of the emergency out-patient treatment.
- (d) Vehicular parking at SOFL for STUDENTS. To the extent there is a charge for parking, such charge will be paid by STUDENTS.

2. **PROVISIONS FOR INSTRUCTION AND SUPERVISION OF STUDENTS:**

- (a) UNIVERSITY shall acquaint its STUDENTS with the rules and regulations of SOFL. This does not preclude SOFL from providing further orientation. SOFL will provide UNIVERSITY with a current set of rules and regulations at least sixty (60) days prior to the beginning of each fall term, and promptly following any amendments to such rules and regulations.

- (b) SOFL reserves the right to refuse its facilities and services to any STUDENT who does not comply with either the professional or other regulations of SOFL or of any appropriate authority controlling and directing SOFL.
- (c) UNIVERSITY through its faculty maintains its responsibility for the instruction and academic supervision of Masters of Public Health Program STUDENTS assigned to SOFL; however, SOFL shall assign a staff member to assist in providing on-site instruction and supervision of the students.
  - (1) On-site instruction will be pertinent to the clinical objectives stated in the course syllabus.
  - (2) A copy of the clinical objectives is attached to this Agreement.
  - (3) SOFL shall assist UNIVERSITY in the evaluation of students assigned for clinical experience.
- (d) Liability insurance coverage:
  - (1) UNIVERSITY maintains general liability coverage with the State of Florida Risk Management Trust Fund for its faculty and employees; coverage is provided to the limits of the State's waiver of sovereign immunity, \$100,000 per person, \$200,000 per occurrence. Additionally, UNIVERSITY maintains professional liability insurance coverage with a single limit of \$1,000,000 and an annual aggregate limit of \$3,000,000 for its faculty and students who participate in clinical programs. A copy of this certificate of insurance will be provided to SOFL upon request.
  - (2) Faculty shall be licensed or certified for practice.
  - (3) The UNIVERSITY shall advise students of risks of exposure infectious diseases, including, without limitation, HIV infection, during the learning experience, and that SOFL is not responsible for unpreventable exposure.

3. NON-DISCRIMINATION:

No person shall be denied access to or the benefits of this training program on the basis of race, color, sex, age, religion, national origin, marital status, handicap, or disability, unless otherwise allowed by law.

4. TERM OF AGREEMENT:

The initial term of this Agreement shall be from February, 2013 through February, 2018. This AGREEMENT shall be automatically renewed for yearly periods thereafter. Either party hereto may terminate this AGREEMENT at any time by giving to the other party notice in writing at least sixty (60) days prior to the intended termination date; provided, however, that all STUDENTS enrolled in the clinical training program at SOFL at the time of the notice of termination shall be given the opportunity to complete their clinical training program at SOFL, for a period not to exceed six (6) months.

IN WITNESS WHEREOF, the parties have executed this AGREEMENT as of the day and year first above written.

FOR SPECIAL OLYMPICS FLORIDA:

THE FLORIDA INTERNATIONAL  
UNIVERSITY BOARD OF TRUSTEES

\_\_\_\_\_  
Name:  
Title:

\_\_\_\_\_  
Tonja Moore  
Associate Vice President, Academic Affairs

Date: \_\_\_\_\_

Date: \_\_\_\_\_

APPROVED AS TO FORM AND  
LEGAL SUFFICIENCY

University General Counsel  
Florida International University

By: \_\_\_\_\_

Andrew B. Eisman, MBA, JD  
Associate General Counsel  
Florida International University

Date: \_\_\_\_\_