



The Creation of a New Student-Run Free Clinic and Volunteer Opportunities for Improved Community Health

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Abstract

Over one-third of the population in Pontiac, Michigan lives below the poverty line. Consequently, access to healthcare is limited for many in the Pontiac community. After years of conceptualizing and months of diligent planning, the leadership of the Family Medicine Interest Group (FMIG) at the Oakland University William Beaumont (OUWB) School of Medicine, in conjunction with the Gary Burnstein Community Health Clinic, designed and implemented the school's first student-run free clinic in 2015. Currently, the clinic is run by the students of OUWB School of Medicine and operates on the first Thursday of every month from 6 PM to 9 PM to provide free care to an average of eight patients. A growing group of student leaders have come together to provide ethical, high-quality, and cost-free healthcare to our community members in need while simultaneously working to improve the efficiency of the clinic, enhance student interest in community service and health promotion, as well as increase community awareness and support of the Gary Burnstein Community Health Clinic. As the student-run free clinic continues to grow and see improved operations, plans are underway to provide additional days of clinical services and offer new student-run health education services.

The Family Medicine Interest Group (FMIG) of Oakland University William Beaumont (OUWB) School of Medicine, in collaboration with the Gary Burnstein Community Health Clinic (GBCHC), established a student-run free clinic (SRFC) to serve the community in Pontiac, Michigan. There is a great need for affordable care in Pontiac as approximately 37% of the residents live in poverty and the median income of the community is \$28,000.

Our vision is to improve the health status of the underserved in Pontiac by delivering cost-free, high-quality care while upholding the ethical and best practice standards of the OUWB School of Medicine. We hope to simultaneously instill within our student body a lifelong commitment to address health disparities.

Since the inception of the OUWB School of Medicine in 2011, students have expressed interest in the development of a SRFC. However, OUWB initially did not have the critical mass of students needed to effectively implement and maintain a SRFC. In August 2015, OUWB had its first full four-year enrollment with 375 total medical students. At that time, the FMIG leaders researched the feasibility of establishing a SRFC and subsequently established a unique partnership between the GBCHC, an existing community clinic, and the School of Medicine.

After many months of collaboration, a comprehensive proposal was approved by both the OUWB School of Medicine and the GBCHC, and enabled the FMIG E-Board and FMIG Faculty Advisor to start setting up the SRFC. They created volunteer

training documents regarding GBCHC rules, outlined the roles of each respective medical student class, and designed a scheduling system. Furthermore, the 2015 FMIG President and Vice President, with the help of other FMIG members, created an orientation video and guidelines for all future volunteers, physicians, and medical students to review before attending clinic.

The first SRFC, held on March 3, 2016 from 6 PM to 9:30 PM, was a success. Volunteers and leadership were invigorated to see the dream of a SRFC finally become reality. There were a total of eight preclinical students (M1 and M2) and five total 3rd and 4th year medical students (M3 and M4). Five patients with a variety of health complications attended the clinic. There was a debriefing session after clinic concluded, and the FMIG President and Vice President solicited feedback from all of the participants. Based on that feedback, four more positions for M3 and M4 students were added in order to accommodate eight patients per night. This increased capacity was first implemented on the April 7, 2016 clinic date. The student teams effectively managed the care for the increased number of patients that night and have continued to accommodate approximately eight patients per clinic every month since April 2016.

During those first couple months, we also faced several challenges. It was difficult to efficiently track patients through each step of their visits and to know which medical students were responsible for seeing particular patients. We also found it challenging to minimize the time patients had to wait between being checked-in, being examined, and receiving prescriptions prior to leaving the clinic. In order to address these issues, we have implemented a system in which we track the patient through each step of the visit on a whiteboard chart and match which triage student and exam team is responsible for that patient. This has significantly decreased confusion about who is seeing a patient and has minimized waiting times for patients.

The basic foundation of our current operational design is comprised of three triage positions, three pharmacy positions, and four clinical teams of two. In the triage positions, M1 and M2 students take patient vitals and ascertain the patient's reason for the visit before escorting the patient to an exam room. The exam teams, each comprised of one M3 and one M4, complete a comprehensive patient history, perform a physical exam, and create a treatment plan. The students then collaborate with residents and attending physicians to affirm the treatment plan. Afterwards, a licensed pharmacist fills the patient's prescriptions while the pharmacy team of three M1s and M2s educate patients with relevant instructions, side effects, and warnings. The GBCHC director and staff, as well as members of the FMIG and SRFC executive boards, attend each clinic to improve patient care, optimize the clinic's efficiency, and provide additional support throughout the night.

Since opening the clinic, we have also made adjustments to the volunteer experience in order to attract and retain more OUWB students as SRFC volunteers. We use an online system to allow students to sign up for clinic volunteer dates. Initially we sent the sign-up form to our student body three months in advance of the clinic date, but because we experienced many student schedule changes and cancellations, we recently began accepting volunteers only three weeks in advance. This has significantly decreased the number of students needing to withdraw from their volunteer assignments. We also began providing volunteers with dinner each month and discovered that this encourages volunteers to arrive punctually. In order to ensure that all OUWB students have an opportunity to volunteer at the SRFC, we have placed previous volunteers on a 2-month waiting list. The volunteer learning experience has also been enhanced by a round-table debriefing session at the conclusion of each clinic. During this time, M3s, M4s, and attending physicians have the opportunity to present and discuss their patients while the M1s and M2s benefit from the opportunity to

participate in patient presentations and gain exposure to clinical situations.

Since the opening of the SRFC, there has been increased student interest in Family Medicine and more traffic on the FMIG website. Many medical students have reached out to inquire about how they can become involved in promoting the health of our community.

The early successes that we have seen with our SRFC are only possible because of the constant work from a dedicated team of OUWB students. Every member has been vital to the improvement of the clinic's operations. The past FMIG President and Vice President now direct overall logistics and operations of the clinic while the current FMIG President and Vice President assist with physician scheduling. M1/M2 and M3/M4 student volunteer coordinators are responsible for volunteer recruitment and retention. Volunteers are recruited via our weekly student affairs newsletter, social media, and FMIG events. Finally, our team has recently added a Technology Chair and two Public Relations and Marketing Chairs in order to pursue opportunities for fundraising and expand our presence in the community through a website and social media. While the SRFC is still very young, we are greatly encouraged by the support and interest we have received from our student body and our faculty. We continue to regularly seek feedback from our mentors and peers so that we can improve upon our current system. This has been an incredible endeavor for all of us. We look forward to our future progress of the SRFC and more importantly to the betterment of our community's health.