Valley Youth House: Creating a Student-run Clinic

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Introduction

Effectively delivering healthcare to underserved populations can be challenging, but is an excellent way for medical students and educators to intimately examine the unique health and social issues that our patients face. Establishing a clinic provides opportunities for students to practice leadership, relationship management, and examine health systems in a new light.

Problem Statement

How can a group of students establish a sustainable student-run clinic?

Methodology

A group of interested, motivated students began meeting periodically in the fall of 2014 to discuss establishing a student run clinic. We discussed a variety of topics: What population would we like to target? What relationships can we build to make the idea a reality? What are the steps necessary to have our school and hospital approve such a venture? What types of material and human capital are required to start and run a clinic? Integral from inception was the support and guidance of the LVHN Street Medicine team. From those early discussions, a shared vision emerged and like-minded faculty were asked to join in the effort. We communicated with the Street Medicine program at our Tampa campus for advice on establishing a charter and obtaining approval from our deans. We also relied on the knowledge of faculty at LVHN for the best ways to approach approval there. At the same time a partnership with Valley Youth House, a local shelter for youth, was established and we began tailoring our focus to the needs of the unique patient population there. When the clinic opened, we collected data on our material and financial needs, as well as the investment of time by support staff and attending clinicians.

Results

We began operations in April of 2015, with at least two clinics run per month since then. Concerns with staffing were allayed by the great interest of the third year medical student class and the strong commitment of faculty. We collected data on the time commitment required and established guidelines for the minimum effective staffing. The on-site pharmacy, which is stocked with a variety of non-narcotic and non-psychogenic medications, has been rarely used, with a total cost of $12.70 over the initial 8 months of the clinic. This greatly exceeded the $1,195 raised to support the clinic from a network-wide talent show.

Conclusions and Future Implications

Delivering care to homeless youth has proven to be rewarding work that many USF students and clinicians at Lehigh Valley Hospital were interested in undertaking. The goal of this capstone is to represent the efforts required to launch a project and explore how the needs have shifted. This discussion is included with the intent of providing others with background knowledge for future undertakings and the hope that our actions and successes will encourage further work with underserved communities.