

SDT Project Proposal 2013

I. Mission Statement:

The University of Iowa Mobile Clinic is a student run organization based at the Carver College of Medicine whose mission is to provide health care services to under-served populations in and around Iowa City. We utilize interdisciplinary potential from the allied health sciences at the University of Iowa (dentistry, medicine, nursing, nutrition, pharmacy, physical therapy, psychology, and public health) to bridge health care gaps, raise awareness about existing health resources in the area, and to connect people in communities served to these resources. The clinic operates solely on grant funding and all health care students and providers are volunteers. The mission of this project is to utilize resources through the UIHC Mobile Clinic to create a new clinic site in the community of West Liberty, Iowa. This clinic site will be unique as we will also conduct a health needs assessment of the community and therefore hope to provide more directed care and education based on community needs.

II. How you decided on the Project

Beginning in April of 2010, a member of the West Liberty community approached the Mobile Clinic to request that West Liberty become a new mobile clinic site. We began to research the community through meetings with various community members and health care databases and found that West Liberty is a community impacted by changing demographics and insufficient health care access. The community has a population of about 3,000 people and is home to a meat-processing plant whose workforce is largely Latino, which has made West Liberty a magnet for immigrants over the past few years. West Liberty was recently identified as the first Iowa town to have a majority Hispanic population. It is currently identified as a medically under-served service area and a health care provider shortage area. As evidenced by our initial assessment, and discussion with prominent community members, there seemed to be significant barriers to obtaining medical care for a large number of immigrants in the community and therefore, the West Liberty Mobile Clinic was born.

The goals of our project were the following:

- 1) Identify the unmet health needs of West Liberty, Iowa
- 2) Determine how the University of Iowa Mobile Clinic could potentially address several of these needs
- 3) Develop an advisory committee composed of West Liberty residents, including members with diverse socioeconomic statuses, ethnicities, and language abilities who could counsel Mobile Clinic regarding the needs of the community
- 4) Work with West Liberty community members to implement a Mobile Clinic site in West Liberty, and offer services based on the results of a health needs assessment and the input of advisory committee members

III. Resources Needed

The resources needed for this project come from a variety of different sources. First and foremost cooperating with the already existing UICCOM Mobile Clinic which serves as a base for volunteer recruitment of students and faculty supervisors for the clinic, as well as, clinic supplies, laboratory equipment, education materials and most importantly, resources and connections within the University community. The second crucial resource is community support within West Liberty. This began by being invited by community members to come to West Liberty. Starting with these individuals, we were able to form an advisory committee of pertinent community members who could help inform our decisions regarding the creation of a new clinic site. Second, we wanted to connect with individuals in the community who are dedicated to service and also have a leadership role in service projects for the community. With this in mind we were able to be in contact with the West Liberty Rotary Club and made a presentation to the club about our clinic and how we hoped to continue our involvement in the community. Presenting to Rotary was crucial as it opened the doors to many more community resources. We were able to not only have the support of the Rotary club but were able to connect with a community foundation (the Mellick Foundation) and obtain a \$3000 grant to be used as a monetary resource for the clinic. Finally, we connected with the local school district superintendent who has served as our direct connection to a very important resource, a building to hold the clinic in. He has also been crucial in helping us mobilize advertising support for the clinic throughout the West Liberty school district.

IV Timeline

- *April 2011:* West Liberty community members approached Mobile Clinic Board about initiating a new clinic site in West Liberty.
- *May 2011:* Meeting consisting of two medical students and a PhD candidate in counseling psychology interested in pursuing a possible clinic site in West Liberty
- *July 2011:* Contact with various community organizations (churches, Rotary Club, community healthcare offices, school nurse) inviting participation in advisory committee
- *August 2011:* Received IRB approval for Health Needs Assessment and began conducting one-on-one interviews with community health professionals
- *October 2011:* Held first West Liberty Clinic, offering flu shots and advertising future full-service clinics
- *November 2011:* Initiation of full-service monthly clinics
- *January 2012:* Presentation to West Liberty Rotary Club about clinic offerings for collaboration, consultation, and support
- *January –May 2012:* Full-service monthly mobile clinics
- *February 2012:* Held first meeting of West Liberty Advisory Committee
- *July 2012:* Obtained \$3000 grant from Melick Foundation
- *August 2012:* Held first all day sports/school physical clinic, including dental care
- *September 2012 - present:* Full-service monthly mobile clinics during the school year, with periodic involvement of physical therapy and dental volunteers.

V. Outcomes- Measurable Goals

The outcome and measurable goals of this project are encompassed in bridging the healthcare gap in the community. We will measure this based on the number of individual patients who attend the clinic and their survey responses to how the clinic functions. Furthermore, continued attendance of community members at the clinic implies continuing need for the project. Attendance from the first year of the project are included below:

First year of implementation of Mobile Clinic in West Liberty

Clinic Date	Total number of patients	Special services offered (in addition to physician visits, vitals, glucose and cholesterol screenings, health education)
November 2011	60	Flu shots only
January 2012	7	Flu shots – 0
February 2012	28	n/a
March 2012	17	n/a
April 2012	5	n/a
May 2012	7	n/a
August 2012	115	Athletic physicals and back-to-school physicals, dental care
September 2012	15	Physical therapy, nutrition education session (10 attendees)
October 2012	80	Flu shots, physical therapy, physical activity education session (14 attendees)
December 2012	32	Flu shots, physical therapy

VI. Assessment/evaluation methods

The first stage of the health needs assessment, which consisted of interviews with health care providers and other West Liberty residents, has been completed. From our initial assessment, it seems that there are significant barriers to obtaining medical care for a number of immigrants in the community. There is only one private medical clinic in the small town and one chiropractor. The nearest free clinic and hospital are located in Iowa City, which presents a challenge for patients who may not have access to transportation. Additionally, a number of immigrants do not have legal immigration status, which may discourage them from seeking conventional health care. The second stage of the assessment, which consists of anonymous surveys distributed to patients at the clinic, confirmed that there are significant health disparities in West Liberty. Participants identified a number of

At our first clinic in November, over sixty free flu shots were administered to West Liberty residents. We have held regular monthly clinics starting in January of this year, totaling five clinics so far. While our first clinic had a disappointing turnout of only seven patients, we have seen between 17-28 patients at each of the remaining clinics, and saw 115 patients at our school physicals clinic in August. Volunteers have reported that they feel the clinic is well-organized, and that they have enjoyed volunteering because the high patient volume allowed them to feel useful.

We have established what we hope will be long-term relationships with the school district in West Liberty, as well as the members of the West Liberty Advisory Committee. In terms of continuity, we are currently in our third year of involvement with the project. During the first year, we (the three students initially involved in the development of the clinic) served as clinic liaisons and principal coordinators. During the second year, that responsibility was passed on to a second year medical student who volunteered as the West Liberty Liaison through Mobile Clinic. This year, another second year medical student has taken over responsibility. We anticipate that the clinic will continue to run smoothly for the coming years through Mobile Clinic.

Our long-term goals for the project include maintaining the continuity of the clinic through the Mobile Clinic infrastructure. Additionally, the co-organizers and I will continue to participate in the project as members of the Mobile Clinic West Liberty Committee, which has been organized to assist the West Liberty Liaison with tasks that may arise throughout the course of the coming year. We hope to expand the role of mobile clinic to include dental screenings, mental health services, and physical therapy services through collaborations with the Department of Counseling, the dental school and the physical therapy program at the University.