



Prioritizing Community-Focused Care: The Journal of Student-Run Clinics

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Abstract

In the third issue of the Journal of Student-Run Clinics, we highlight community-focused quality improvement at student-run clinics (SRCs). Given the increasing ubiquity of SRCs in health education and underserved communities, regular efforts must be made to assess and improve quality of care and education. Identification of community-specific health priorities is necessary to implement successful quality improvement strategies at SRCs. Needs assessments can help SRCs objectively identify these priorities, implement effective interventions, and successfully evaluate these interventions. Just as SRCs develop programs based on the needs of their community, the SRC must frequently assess the needs of its student volunteers to provide high quality educational experiences. Focused interventions based on the specific needs of the student population can dramatically improve the educational experience of student volunteers and translate into better patient care.

Community-focused Care

Student-run clinics (SRCs) have been recognized as important contributors to both health professional education and the health care safety net.¹⁻³ The unique ability of SRCs to provide much-needed care to underserved populations, while simultaneously providing educational experiences to students, has led to the number of SRCs doubling over the past 10 years.^{1,4} In 2014, 75.2% of US medical schools reported having an associated SRC, with many reporting more than one affiliated clinic.⁴

Given the increasing ubiquity of SRCs in health education and underserved communities, regular efforts must be made to assess and improve quality of care and education. As do most safety net providers, SRCs face significant barriers to providing high quality health care, such as lack of funding, high staff turnover, scarcity of resources, volunteer inexperience, and time constraints. Therefore, in order to provide the best possible care, SRCs must focus their efforts on the specific needs of populations they serve.

Identification of community-specific health priorities is necessary for implementation of successful quality improvement strategies at SRCs. Socio-economic factors—such as ethnic make-up, health literacy, education, economic stability, and cultural values—are important determinants of health, especially in underserved communities.⁵ SRCs must fully comprehend these issues in the population they serve in order to identify community-specific health gaps. One of the mandates of the Affordable Care Act requires nonprofit hospitals to conduct community health needs assessments every three years.⁶ While not required for SRCs, conducting similar assessments can help SRCs objectively identify health priorities, implement effective interventions, and successfully evaluate these interventions.

In addition, the SRC must consider the specific needs of another community—the health professional students who volunteer at the clinic. SRCs are associated with a variety of health professional schools (medical, dental, pharmacy, etc.) and many have interdisciplinary collaborations. At each school there are also students at various lev-

els of training, each of whom have different educational needs. Just as SRCs develop programs based on the needs of their community, the SRC must frequently assess the needs of its student volunteers to provide high quality educational experiences. SRCs should allow students to reflect upon their experience at the SRC and provide constructive feedback to clinic leaders.⁷ Student-focused interventions such as interdisciplinary communication workshops or extra training for pre-clinical students can dramatically improve the experience of student volunteers, which will translate into better patient care.

In the third issue of the Journal of Student-Run Clinics, we present three original studies, four descriptive reports, and one perspective article that highlight community-focused quality improvement. The diversity of health services and educational programs offered by SRCs reflect their dedication to serving their local communities. Join us as we learn from the experiences of seven SRCs.

- The Northern Ontario School of Medicine shares its experience conducting a needs assessment to guide creation of an SRC
- The University of Nebraska SHARING Clinic evaluates an intervention aimed at improving preventative health services
- The University of Minnesota HOPE Clinic gauges the effectiveness of a crisis prevention training program for medical and pharmacy students
- The Robert R. Frank Student-Run Free Clinic at Wayne State University School of Medicine describes its fourth-year elective clerkship
- The Georgetown HOYA Clinic details the development of its new Asylum Clinic in response to the growing number of refugees seeking asylum in the US
- The Chester Community Physical Therapy Clinic at Widener University chronicles its evolution from concept to national leader
- The Rowan University School of Osteopathic Medicine Camden Saturday Health Clinic describes its implementation of a chronic disease management program for community members with chronic hypertension

- The Robert R. Frank Student-Run Free Clinic at Wayne State University School of Medicine reviews best practices for medical record keeping at SRCs

Journal Statistics

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