

HOMES Clinic for the Homeless
Resource Guide for Managers and Managers-in-Training
version 7.0

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HOMES Clinic Manager Training Protocol: 2007

Pre-clinic:

During the week before clinic, the manager will check the sign-up sheet via the website <http://homes-clinic.com/Documents/schedulemed.htm> and contact the previous Sunday's manager for the clinic keys (2), pharmacy key (1), and bus tokens.

The manager will

- Bring with them:
 - Keys and tokens
 - ID badge
 - A notepad & pen
 - Watch (for vital signs)
 - Appropriate attire – business casual; no jeans, scrubs, or white coats
- Arrive at church **before 9:00 am**, come in through the Beacon front doors on Prairie or the volunteer entrance on Texas; come through the volunteer entrance (on Texas St.) and let people into the clinic through the front door (Prairie St.).

Orientation:

- Bring a full chart in order to show forms to the teams.
- Introduce his/her self to the volunteers and gauge the minimum number of teams that have arrived by the time the sign up period begins. Let volunteers know they should interact with parishioners during the sign up period.
- Teams:
 - 1 MS3
 - 2 MS1 or 2s
 - 1 Pharmacy or Public Health student
 - At least one experienced volunteer should be teamed with new volunteers
 - Assign a time keeper for each team
- Schedule for the day:
 - 9:20-9:50 Beacon

- Emphasize the importance of the interaction with clients at the Beacon. Encourage students (other than managers) to sit down and not to triage patients.
 - 10:00 First round assignments
 - 11:30 Second round (if possible)
 - 1:00 cleaning clinic rooms
 - 1:30 Reflections
 - Introduce it as a time for volunteers to discuss the day's events and the proper time to sign-in for educational credit.
- Formula for patient visit:
 - Introduce team to the patient
 - Chief complaint
 - Social History/Medical History
 - Physical Examination
 - Discussion with the team members and development of draft course of action
 - Presentation of patient to the attending physician
 - Physician along with team returns to patients for confirmation of the diagnosis and development of final action plan
 - Students return to discuss with the patient the course of action to be taken, such as medication assignment, or follow-up care needed
- Paperwork:
 - Emphasize the importance of filling out EVERY form in the chart (8 total)
 - 3 signature forms: privacy notice, income & homelessness verification
 - UDS
 - Patient Intake / Health History Forms
 - Encounter
 - History & Physical
- Rules:
 - HIPAA
 - Address patients by last name
 - Be aware of forms with patient information and who can read them; try to leave paperwork covered or face-down
 - Please do not discuss patient information in the waiting area or in front of other patients. Anticipate patient privacy needs when giving test results, setting up appointments and referrals.; keep waiting room door closed if talking in the hallway
 - Keep hands clean – hand sanitizer available in most rooms
 - GI/Pelvic exams – Only MS3 and preceptor in the room
 - Do not leave a patient alone in the patient room
 - More than one student should be in the room with the patient at ALL times
 - Keep personal items in a secure place (with manager or in preceptor room).
 - Tokens are available for medical referrals only. Please ask manager about Project Access bus passes.

The Beacon:

- Create a sign-up sheet with the following information:
 - i. Name
 - ii. Chief complaint
 - iii. New/Old patient; Previously seen at HOMES/Cathedral Clinic?
 - iv. Current insurance;
 - Ask if they have a Gold Card, VA benefits, Medicaid, or any other means of receiving medical care
 - v. Please make sure those you sign up are homeless!
- Walk around with sign-up sheet and introduce his/her self. Announce HOMES service in order to collect a list of patients who want to be seen.
 - Ask if anyone “needs medical care” or “needs to be seen in the clinic”
 - Ask patient if there are any other known existing co-morbidities in order to help gauge prioritizing patients to be seen at the clinic.
 - Let everyone know they will be seen on a priority basis not the order on the sign-up list
 - Ask patient’s permission for teamwork, explain the purpose of the HOMES Clinic
 - Give patients directions to clinic location and a time to arrive, or record meal ticket number and ask patients to wait in the Beacon if they are concerned about missing other services (eg. lunch, showers, etc.)
 - Ask definite first round patients to wait at the clinic front door.
 - Ask patients requesting blood pressure checks and other screenings to arrive between 10:30 and 11:00 in order to be seen and available for the second round.
 - Ask all other patients to come to the clinic at 10:00 or between 11:00 and 11:30.
- By 9:50 collect the volunteers and walk through the back to the clinic.

Cathedral Clinic:

- Unlock the pharmacy.
- Ask volunteers to set up the temporary rooms, get patient beds from the preceptor room, and get their supply kits from the pharmacy.
- Let patients in through front door and remind everyone that they will be seen on a priority basis.
- Set up 4 charts
 - 8 forms for new patients, 3 forms for returning patients
 - 3 forms every time: UDS, Encounter, and H&P forms
 - New patients: Patient Intake / Health History Forms
 - 3 signature forms: privacy notice, income & homelessness verification

I. Patient Assignment

- Prioritize patients determined as follows:
 - 1st: Severity of symptoms.
 - 2nd: Having no other means of medical treatment other than ER. (eg. no Gold Card, Veterans benefits, or other medical insurance.

3rd: History of HOMES clinical utilization, new patients are prioritized before patients that have previously been seen in the clinic.

- Estimate the number of patients that can be seen that morning by multiplying 2xs the number of teams. (Approximately 1/3 of patients who sign up at the Beacon will not show up at the clinic, and there will be walk-ins)

II. Clinic Management

- By 10:00 the first patients should be assigned and in a room
- Patients that are going to be seen should be given a copy of the HHH Privacy Policy document
- When possible, patients should be given the 3 forms they must sign before the team takes them back to the room
- When charts are handed back the paperwork should be double checked
 - i. Physician signature at the bottom of the H&P
 - ii. Patient signature on 3 forms
 - iii. All forms must be filled out completely, or returned to the MS3
 - iv. Make sure the patient's date of birth is on every necessary form.
- Triage in waiting room continues as patients arrive
- Patients not able to be seen should be notified as quickly as possible
- Patients seen by the manager on the side should have charts made
- If vital signs are taken, are normal and do not require treatment, a UDS and Encounter form are sufficient (along with all new patient paperwork if applicable)
- Any patient with high blood pressure or high blood sugar must be seen and treated so there must be room available in the second round to check these

- By 12:00 the last patients should be assigned and in a room. No one should be waiting and all new patients should be informed they will not be seen and assisted in putting together an alternative plan of care.
- Last patient should be escorted out by 1:30 pm.
- When teams finish seeing their last patient, ask them to clean their room.
- Temporary patient rooms should have patient beds re-stored in the preceptor room
- Temporary room kits should be returned to the pharmacy.

III. Lab Specimens

See the folder labeled "Lab Specimens" for additional guidance and all necessary forms.

- **Wear gloves at all times**
- Specimen bags are in the pharmacy/triage room with the cardboard storage box
- Place a label on the specimen with date and patient name
- Place specimen in bag
- Fill out form for specific lab:
 - Clinical Laboratory Services
 - Triplicate form for blood labs
 - City of Houston HHS labs:
 - Gram stain form (1/2 page)

- GC for Chlamydia or Gonorrhea form
- Provider is always Dr. Buck, unless it is Dr. Clark who orders the specimen
- Copy form and place copy in patient chart
- Fold form in half or quarters and place the front pouch of the specimen bag with the patient name facing outward
- Seal bag flap over both pouches
- All specimens must be labeled, bagged and have the paperwork completed, making sure that the patient name, date and time are clearly documented.
- All specimens must be logged into the lab book located at the front desk.
- All cultures and swabs may remain at room temperature for up to 72 hours.
- All blood must be refrigerated immediately and transported within 24 hours.
- Once finished, check to make sure there are more lab spec supplies available. If there are none, check in the supply closet and restock them.
- Ask patient to return in **two weeks** for lab results
- When a patient returns for lab results, check the patient chart. If there is nothing there then ask the patient to return in one more week.

IV. Referrals

- Sometimes appointments are available during the week at the Cathedral Clinic. Check the black appointment book in the managers office.

1) Writing a referral

- Use Healthcare for the Homeless – Houston letterhead
- Write using the following format:

“To [referral location],

[John Doe] is a [#] year old [race] [gender] who presented to the HOMES clinic c/o [chief complaint]. [What was done; what needs to be done]. Please treat accordingly.”

- Sign it as: HOMES Clinic Manager,
[signature & name]

2) Transportation

- Tokens
 - For medical referrals *that day only*
 - Or if a preceptor requests them
- Metro Trip Planner
 - For patient assistance with directions to referrals
 - Houston Metro’s website <http://www.ridemetro.org/> is saved as a favorite
 - Select “Schedules & Maps”, then “Trip Planner”
- Project Access
 - For medical referrals Monday through Friday along bus route
 - Check that there are plenty of the forms before giving one each to a team

- Team should complete the application and return it to manager,
- Circle the referral location and the give route schedule & 10 tickets to the patient
- Team may have to cut the ticket page into 10 tickets
- Metrolift Applications
 - Complete and save the application
 - Have a physician complete and sign the patient’s Disability Status Form
 - Tell patient to return on a weekday in two weeks to check on status of application

3) For services see Help Card or other Resource guides in the manager’s office

Reflections Period & Closing:

- Pull out confidentiality forms for each new volunteer
- Notebooks for volunteer sign up should be pulled out and either held in the managers office until after reflections or brought into the room,
- No one should sign out until after the period is over.
- Appoint a clinical student (preferably “LACE track”) to hold reflections period.
- At the end:
 - Ask all volunteers to fill out and sign the notebook for their respective schools.
 - Remind new volunteers to sign a confidentiality form
 - Have the manager trainee(s) fill out their manager training form

Closing

- Check all charts again for completed paperwork,
 - 3 patient signatures and 1 preceptor signature (H&P)
- Remove UDS forms and stack next to chart stack,
 - place Project Access and Metrolift applications on top of the stack of UDS forms.
 - Supplies needed should be listed and placed on top of this stack.
- Finish patient flow form if not complete
 - Place in the cabinet drawer below the charts
- Open “New HOMES Patient Flow.xls” spreadsheet and enter patient demographics for day (M/F/child, new/old & total encounters). Total encounters should be equal to the number of charts generated.
- Check rooms to be sure they are clean; close all doors
- Be sure to turn off the lights in patient bathroom and the pharmacy. These are the only rooms without automated lights.