## **UR HOME: Homeless Outreach Medicine and Education A Street Medicine collaboration**

# Project Proposal Emma Lo University of Rochester School of Medicine July 19, 2011

#### Mission Statement:

UR HOME (Homeless Outreach Medicine and Education) is a Street Medicine program whose mission is to ensure access to quality medical care for Rochester's unsheltered homeless population, operating under the principle that health care is a basic human right. UR HOME seeks to bridge gaps between the homeless and medical communities through direct street outreach and engagement with homeless people where they live, building relationships and trust, and offering companionship and respect.

Goals and Objectives: ierson as a whole and focuses on the individual's own goals and needs.

- 3. Promote health literacy, healthier lifestyles, and general well being.
- 4. Break down stigmas and confront stereotypes by creating a space of positive dialogue and an env

ironment of dignity and respect between the homeless population and the medical world.

 Create a valuable educational and community service opportunity for students to practice Street icine.
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In order to fulfill our mission statement, goals, and objectives, UR HOME will operate as a branch of UR Well<sup>1</sup> and collaborate with Unity HealthReach for the Homeless, St. Mary's Church, House of Mercy, and the Center for Youth. Volunteers will go out weekly to various campsites, city parks, and other locations to meet homeless people where they reside. Teams will be composed of an outreach guide, a physician, medical students, pharmacy students, and social workers.

We have investigated major barriers to health care access for the homeless population and found a significant gap in access to health care in Rochester. Therefore, this project will bring health care directly to the homeless in order to overcome these barriers. This project is based on data gathered locally throughout the year, and is modeled off of several successful Street Medicine programs throughout the country; specifically Operation Safety Net in Pittsburgh, PA, and MUSHROOM in Morgantown, WV.

#### **Outcomes:**

In order to evaluate the effectiveness of this project, data will be collected quantitatively through careful documentation of services rendered, needs met and unmet, and patients encountered, as well as qualitatively through surveys. Quantitative measurements will include:

- Numbers, types of students and other volunteers involved
- Specific medical and non-me

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Models:			
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	clinician will be essential in the educational component of this project, both in providing medical expertise, and in guiding and processing the encounters with each homeless indlvidual.  93 Tc 103s iednd1 361 (ce9.6)]TJ /054d1 361 (ce9.ppT
3.	Group leaders: Group leaders will be experience students, who will execute the II925 220.3 1356.9 Td (

#### Appendices:

- A. Student Backpack Contents
- B. Resource booklet: In progress working on with Becca to finalize
- C. Interviews of Homeless Providers
- D. Encounter note
- E. Map of locations for outreach

A. Student Backpack Contents<sup>16</sup>: individual baggies will contain medications each of the following categories

"0 Pain: Tylenol, Motrin 200/400/600, Naprosyn 375

#0 Antibx: Pen VK, Keflex, Bactrim DS, Doxycycline, Z Packs,nEycin

L0 Inhalers: albuterol, combivent, advair, flovent (optional)

JO Cold Rx: Sudafed, Benadryl, Tessalon, Cepacadib Claritin (optional)

10 Misc.: Dilantin, Glucotrol

X0 Eye/ear. antibiotic eye and ear meds

P0 Potions/lotions cortisone cream, antifungal ointment, antibiotic ointment, baby powder

F0 Bandages (small and medium), 4x4Os, tape, kling roll, ACE wrap

R0 Vitamins: multivitamins, iron, folate and thiamine

"E0Hand care: medical gloves and hand cleanser

""0 Cardiac: Norvasc, HCTZ, ASA (optional)

"#0 GI: Pepcid, Prevacid/Prilosec, Tums, maybe Lomotil

#### Other supplies:

Socks

Fruit (bananas, oranges, apples)

Hygiene Kits (toothbrush, tolopaste, soap)

BP cuff, stethoscope, otophthalmoscope, watch, flash light, pencil and note pad, suture removal kit, surgical gloves, plastic bags

Referral booklets, encounter forms, release of information forms

B. Resource Booklet: (to include clinis and referral sites with maps, shelters, soup kitchens, clothing resources, social services)

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### C. Interviews of homeless providers

	Mike Boucher: Clinical Social Worker at St. JoeÕs Neighborhood Center	CatherineTrimbur: UR Well	Hubert Wilkerson: Formerly homeless outreach guide	Eric Soublet: Center for Youth 585473- 2464 x227
What barriers do the homeless face in accessing	Geography	Other issues are greater priority.	Lack of trust DonÕt think people	Insurance

D. Encounter Note: (to be discussed)

E. Map: (see attached)