

IMPLEMENTATION OF A QUARTERLY INTERDISCIPLINARY FOOT CLINIC FOR AN UNHOUSED POPULATION



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INTRODUCTION

The community of Colorado Springs, Colorado, has created a quarterly Foot Clinic in partnership with a local medical school, podiatrists, a Federally Qualified Health Center (FQHC), and a homeless shelter. This project aims to describe its development in an underserved area to demonstrate social accountability, a pillar of medical education, and the ability to reproduce this project in other communitites.



PROJECT GOALS

- Provide consistent, trauma-informed preventative foot care services, minimizing barriers to care
- Build trust between individuals experiencing homelessness and healthcare providers
- Utilize interprofessional collaboration to form a well-rounded volunteer base
- Assess outcomes based on guest feedback and volunteer experience/retention data

RESULTS AND ANALYSIS



Figures 1 and 2. Post-clinic guest feedback survey responses to Likert-scale questions. The question is shown in the title of each figure, with possible responses on the x-axis. The Y-axis represents the number of guests who chose each option. n=553. Response rate = 78%.

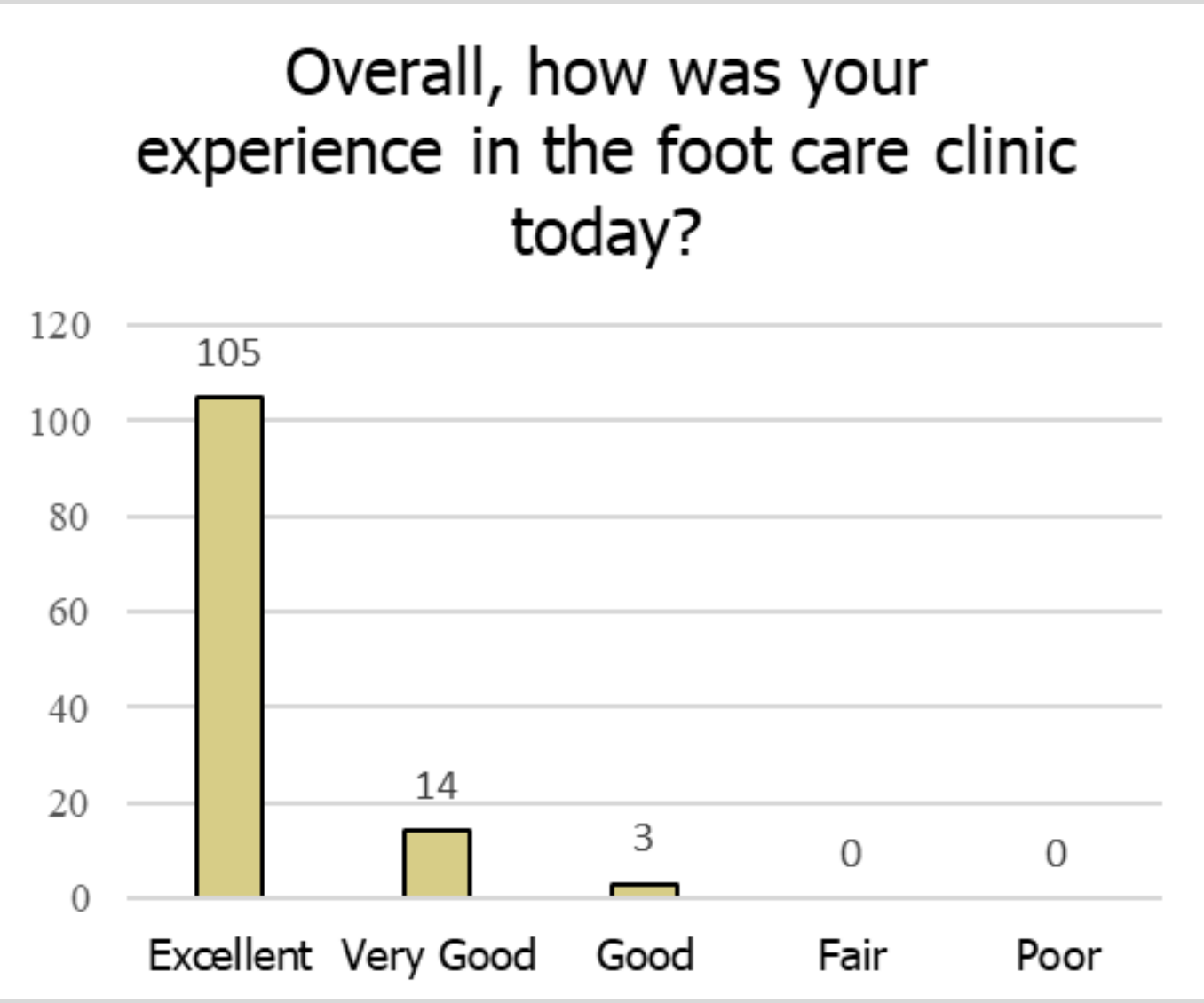


Figure 3. Post-clinic guest feedback survey responses to overall experience. The question is shown in the title of each figure, with possible responses on the x-axis. The Y-axis represents the number of guests who chose each option. n=553. Response rate = 78%.

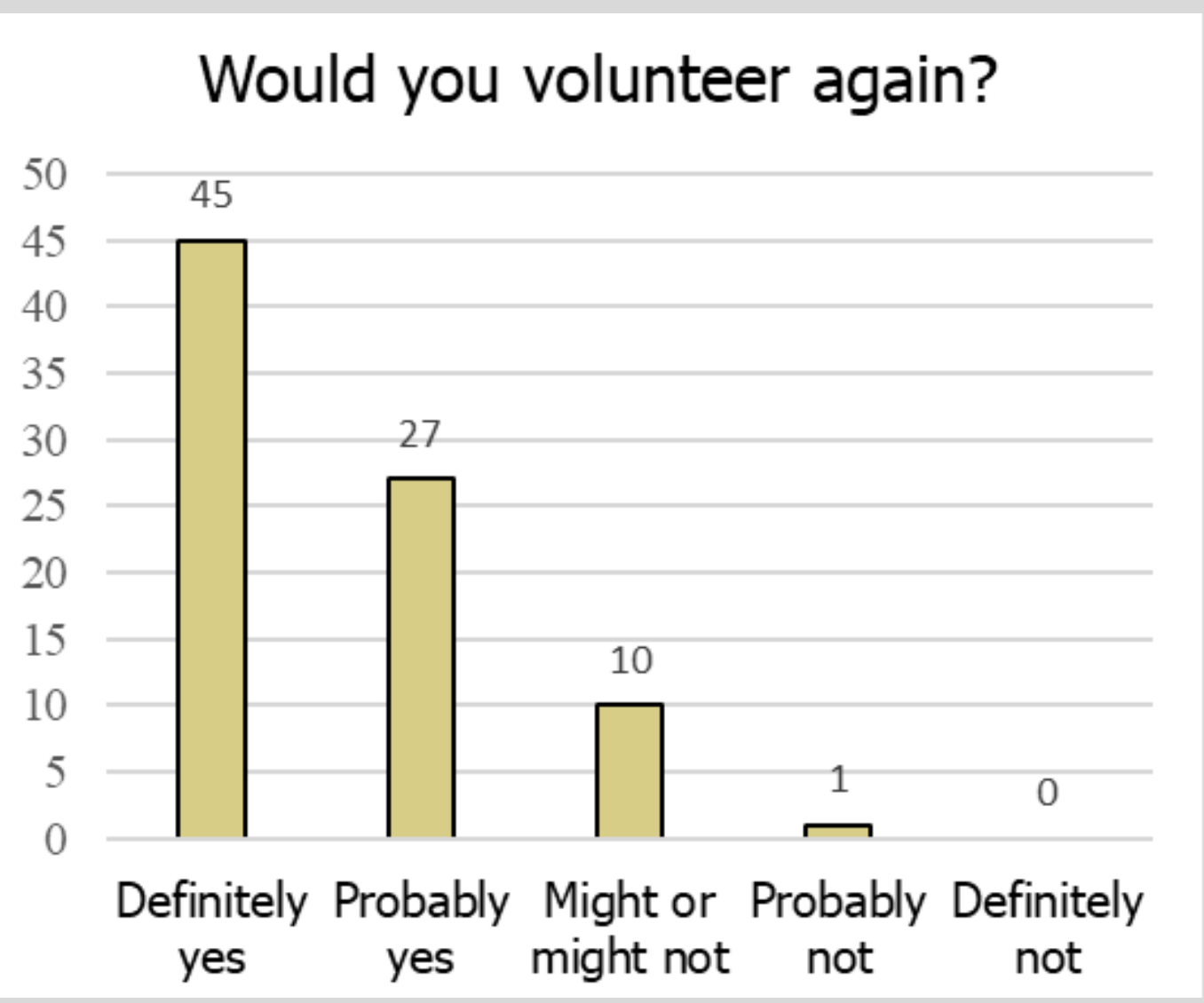
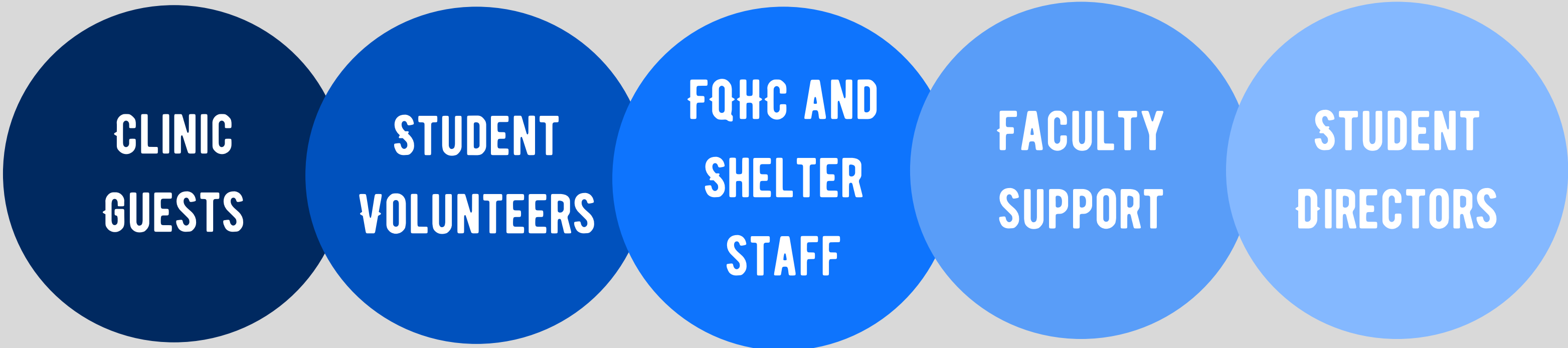


Figure 4. Post-clinic volunteer feedback survey responses of likelihood to volunteer again. Y-axis represents the number of volunteers who chose a particular answer. n = 83

STAKEHOLDERS AND IMPLEMENTATION



- The clinic takes place in a large shelter for unhoused individuals
- FQHC staff provide follow-up appointment scheduling
- Volunteers provide basic foot care
- Faculty support (physicians and podiatrists) provide more advanced medical care
- Student directors coordinate the clinic, train volunteers, collect data, maintain inventory, and renew grants annually



Supplies on the center table, with shoe donations and foot care being provided in the background



Foot care stations with supplies and seating areas for both guests and volunteers

CONCLUSION

- Mutually beneficial: the guests obtain foot care, and the student volunteers receive invaluable training working with this population.
- Can be a model for providing low-barrier health care services to individuals experiencing homelessness
- Also a model for IPE learning and social accountability, both of which are required for LCME accreditation



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