



Project to Expand Clínica Cariño

Blueprint of Program Design v1.1

<http://www.ucihs.uci.edu/som/meded/clinicacarino/>

Project Process, Supporters, and Timeline

Process

This document is the result of numerous discussions with key individuals and represents the second phase in a larger project cycle which includes: (1) Needs and Feasibility Assessment; (2) Project Design; (3) Project Implementation, and (4) Project Evaluation.

Supporters

UCI Administrators

UC Irvine Chancellor,
Dr. Michael Drake;
UCI SOM Deans,
Dr. Alberto Manetta,
Dr. Gerald Maguire

UCI Faculty

Camille Fitzpatrick NP,
Dr. Charles Vega,
Dr. Mario Bartolomé,
Sue Ahearn RN

Community Groups

*CEO of the Orange County
Coalition of Community
Clinics,*
Dr. Fred Richmond;
*Director of Orange County
Public Health Department,*
Dr Eric Handler;
*Liaison to the Mexican
Consulate,*
Dr Socorro Saramiento

Student Supporters

Medical Students,
Undergraduates,
Nurse Practitioner students

Timeline

Fall 2006

Needs and Feasibility
Assessment

Spring 2007

Project Design

Fall-Spring 2007-08

Phase 1 Project
implementation

Fall-Spring 2008-09

Phase 2 Project
implementation

Overview of Clínica Cariño: Clínica Cariño is UC Irvine's only student-run free clinic. It currently provides referral services once a month in partnership with Loaves and Fishes Soup Kitchen in Downtown Santa Ana. It does not provide medical services.

Objective: This document is the first step in the design phase of expanding Clínica Cariño. It is a blueprint for: (1) the population to be served, (2) medical services to be provided, (3) potential partnerships, and (4) the administrative support needed to institutionalize the expansion.

Target Population: We will provide medical care to those patients ineligible for existing programs, or who we cannot otherwise connect to existing programs, and especially the adult working poor, undocumented immigrants, and the homeless. Geographically, we will focus on the Santa Ana city center given its high population density and large prevalence of people who lack health insurance.

Services: We will provide continuity of care through preventive medicine, weekly non-emergent services, and management of chronic illnesses. These services will include laboratory and imaging work-ups through local providers, prescription medications through a Patient Assistance Program, health education, onsite social service enrollment, and referral services. In the future we will expand our days of operation and this core to include mental health, dental, and ophthalmology.

Partnerships: Immediate partners will include undergraduate, nursing, nurse practitioner, pharmacy, and nutrition students, as well as their institutions. We will also collaborate with the departments of Family Medicine, Pediatrics, Internal Medicine, and Psychiatry. Long-term partners will include dental or pre-dental, ophthalmology, public health, social work, law, MBA, and information technology students, as well as their institutions in a transdisciplinary fashion. Currently we are exploring collaborations with community organizations such as the Orange County Public Health Department, Coalition of Community Clinics, Latino Health Access, private foundations, and the Mexican Consulate.

Administrative Structure: The administrative hub will consist of student management groups dedicated to specific services, (i.e. charts, labs, prescriptions, referrals, education). This core of UCI students will work with a Medical Director (MD) who will have a strategic management focus and a Medical Coordinator (MC) with an operational management focus. There will also be a community board consisting of UCI and community leaders, members, and student representatives.

Potential Sites: The site will be limited by the UC Affiliation Agreement and possibilities include: (1) existing clinical space during non-use hours, (2) dedicated space in collaboration with a community organization, and (3) leased space.

UCI Institutional Support Needed for Sustainability:

Year 1:

- UC Affiliation Agreement
- 50% time compensation for an interim Medical Coordinator

Year 2:

- 50% of the time of a PRIME faculty Full-Time Equivalent (FTE);
- Curricular support for both undergraduate and graduate students to support focused and high quality participation.