HOMES Clinic Board of Directors Meeting #2 Minutes
July 16, 2023

1. **Items requiring a board vote.**
   a. Bylaws
      i. Updated bylaws must be voted on by the board.
      ii. Stakeholders: all officers
      iii. Outcome of Vote: Bylaws will continue to be revised. Will determine which information should be included in bylaws vs. policies and procedures manual.

2. **Updates**
   a. Reed clinic vaccine event – August 5th
      i. Vaccine drive at Reed Clinic that Dr. Clark is organizing
      ii. Dr. Clark reached out to see HOMES if we can assist with patient education and outreach
      iii. Recruit HOMES volunteers to fill these roles
         1. Need 6 HOMES medical school volunteers – they need to have completed their pediatrics clerkship to volunteer as they have preexisting knowledge for the counseling.
         2. Send out on listserv with stipulations on sign up. On honor system and will check to verify that they have volunteered with HOMES
   b. HOMES Clinic Ophthalmology clinic
      i. Caroline St. Clinic on Tuesday afternoons for 3hrs
      ii. Once everything is approved, signups will be sent out
      iii. 3 week commitment on Tuesday afternoons
         1. Each 3 week block will have 2 students (one from each school)
      iv. Ideally for MS2, MS3s – restricted to Baylor and UT students interested in ophthalmology
         1. Must have volunteered at HOMES before
         2. Must be Baylor or UT because of HH Epic access
      v. This is HOMES-specific with no partner institutions (students cannot do anything with clinic or optho preceptor without HOMES executive director approval)
      vi. HOMES will manage sign-up genius (Ops) and weekly emails (Reps)

HOMES Clinic Board of Directors Meeting #2 Minutes
July 16, 2023

  vii. Longitudinal so if student does 1 week and cancels for the rest, another student will not fill this role

  viii. No LOR or research will come from this

c. Baylor initiatives to increase clinical students

  i. Elective for care of the underserved

   1. Working with director of care of the underserved pathway (Dr. Aggarwal) to add HOMES as part of this elective so that students can meet elective requirements by volunteering at HOMES

   2. Restricted to 10 students per year and starting times will be staggered with 6mo to complete

   3. For McGovern and UH, if similar pathway, or elective can initiate something similar

    a. McGovern: discussed Global health scholarly concentration that requires 125h of clinical volunteering with underserved; also discussed potentially requiring clinical volunteer shift for students that want bluebook credit

  ii. SLP for clinical students and health advocates

   1. Working on submitting necessary paperwork

   2. SLP credit will be given to Clinical students and HA's

d. Smoking cessation findings

  i. If pt smokes, motivational interviewing is actionable item

   1. Done by clinical student or MIT

  ii. PowerPoint will be emailed out and further discussion will occur at next meeting.

e. Clinic note updates.

  i. New format will have tabs that follow the order we do things in clinic.

  ii. Can print referrals directly from template in tab.

  iii. Last tab is for clinical note. Once all other tabs complete, can print note from that tab.

  iv. Time is logged for each section (i.e., HPI) and can see how long in each section. Once recommended time is exceeded, time will turn red.

  v. Guiding/ recommended questions included in note.

   1. Discussed ways to get preclinical students to access those questions.

vi. After visit summary, meds don't currently auto-populate. Will try to write code so that it auto-populates and there is an option to remove meds.

vii. Chat GPT has helped dramatically. Needs $40-60 for GPT4.

1. Working to get funding

viii. Make new GitHub for HOMES

1. Discussed need to continue note as HTML since we have new computers that will stay at homes. If it was on computer (and not HTML), need to ensure HIPAA compliant and not all computer users can access note.

3. **Officer Updates**

a. Events

i. Working on Gala and getting vaccines for drive (approved for full amount)

b. Clinic Operations

i. Drafting cancellation policy.

ii. About to start working on ophthalmology clinic logistics.

iii. Finished laptops for clinical students (will hopefully drop off this week to start integration into the clinic).

c. Manager Operations

i. Planning for manager training

ii. Trying to better describe roles.

iii. Organizing HOMES Clinic cabinets

d. Projects

i. PowerPoint about smoking cessation is being prepared and will be sent to board soon.

e. Finance

i. Looking at food options for gala

ii. Working on how to get direct deposits into account.

f. UHCOP Rep

i. Trying to recruit pharm HA students.

g. UHCOM Rep

i. Working on student organization status and recruitment.

h. McGovern Rep

i. Establishing lecture series dates

i. Advocacy

      i. Working on satisfaction survey, issue briefs, and residency survey

j. Quality Improvement
      i. Draft of policies and procedures manual has been created for review by board members and anchor preceptors.

k. Health Advocate Operations
      i. Made badges for HA's.
      ii. Updating social resource guide

l. Research
      i. Working to redesign clinic note

m. Continuity and Strategy
      i. Dr. McCurry wants to adapt resource guide for all of HHH; meeting with social workers at HHH for knowledge exchange – can invite students that are recurrent HA's; paper on resource guide is published; 10 more that are in various stages of developments.

4. Items to discuss.

a. Vaccine drive
      i. Received grant and working on depositing money to HHH. Will begin to finalize dates and work on getting vaccines.

b. Clinical student triage algorithm initiative
      i. New MS3 clinical students don't know what does in to deciding patients off triage list.
      ii. Idea for algorithm for triaging
            1. Ex) Emergency? Y-send to ED, N-continue to next q.
            2. Would be hard to make an algorithm that would capture all presentations, this would help at least narrow down and give clinical students an idea of what we can/can't help with
            3. Would be helpful to have a list of things we can/can't see (ex. MSK – don't have imaging modality)

c. Clinic issue today
      i. Pt was discharged prematurely by preclinical student.
      ii. Emphasize to managers that they are the only ones that discharge patients.
      iii. Ops team will continue to work on this so that it does not occur in the future.

HOMES Clinic Board of Directors Meeting #2 Minutes
July 16, 2023

d. Advocacy briefs
   i.   Creating quick guide for people when they want to reach out to rep.
   ii. Brief draft was quickly reviewed.
   iii. Will put info on Canva graphic – need to get approval first from partner institutions.

e. ASF updates
   i.   Initially were told program would be free then told it would be upwards of $1500 for 6mo; as of now, free until May 2024, only need to pay for training.
   ii. For longevity, options: 1) advocate to HHH for them to adopt in their clinic 2) talk with schools for them to adopt 3) ASF person every year as "legacy project" 4) subsection of ASF for patient navigation.

f. Naloxone Training
   i.   Plan to start on 7/30
   ii. Tabling to people in Beacon about project and session and hosting session in conference room on naloxone training for 3-4 patients
   iii. Will need to accommodate and provide clinic space.
   iv. Finalizing details on IRB

g. Residents interested in getting involved with HOMES.
   i.   MOU specifies only students and attendings.
        1. To get residents in, would need lawyer to update MOU.
        2. Seemingly low barrier to entry to get residents involved.
        3. Residents still wouldn't be able to practice if no attending there to sign out to
   ii. Currently residents can't play role in patient care.
   iii. Can get involved with projects.
        1. Resident can help translate some cards to Spanish.
        2. If anyone has a project that could use resident help, let executive director know