Community Connections Free Clinic Providing Health Care and More to Uninsured

Kendi Parvin, WMJ Managing Editor

hen Aaron Dunn, MD, began seeing patients in his rural Wisconsin practice who couldn't afford to pay, he wanted to do something about it.

"Physicians are in a critical position to lead the change we want to see to make sure everyone has access to the care we can provide to keep everybody healthy," Dr Dunn said. So he picked up the phone, called the local county health department and said, "Hey, I'm new in the community. What can I do to help?"

That was in 2006. Dr Dunn recently had completed his residency in family medicine and joined a practice with clinics in southwestern Wisconsin. He wondered where those patients who couldn't pay were going, and wanted to know where he could volunteer. But when he spoke with June Meudt, director of the Iowa County Public Health Department, he learned such a place didn't exist.

"People knew there was a need and had been wanting to do something about it for a long time," said Dr Dunn. "Basically, all it took was me saying that I would be willing to see these patients."

So Dr Dunn and about a dozen community members, including Meudt, clergy and other community leaders decided to create a free

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To learn more about Community Connections Free Clinic, visit www.ccfcwi.org. clinic in Dodgeville to provide care for the uninsured. They sought the advice of Haakon Carlson, MD, a physician who volunteers at a free clinic in Sauk County, for a basic "recipe," then went to work. They modeled bylaws, policies, and other forms after those of other free clinics. Space came from the Southwestern Wisconsin Community Action Program, Inc. (SWCAP), an anti-poverty agency that recently had purchased a building to house some of its programs. Exam tables and other equipment were donated, and other volunteers stepped forward to staff the clinic.

In October 2006, Community Connections Free Clinic (CCFC) opened its doors. Dr Dunn and a retired physician staffed the clinic, which was open initially on Tuesday afternoons. Word spread, in part thanks to some television news coverage, and Dr Dunn says, "We've been full ever since."

More than 2000 individual patients have sought care at the CCFC since it opened; and to meet demand, the clinic expanded in 2009, relocating in what used to be the building's basement. Today it has 4 exam rooms, a lab, pharmacy, prescription assistance consult room, a social care room, and a kitchen and conference area for specialty services such as mental health counseling and physical therapy. The space is shared with the Reproductive Health Care Center, and public areas such as a reception and waiting room are shared with Access Dental Services of Dodgeville, which provides dental services to Medicaid and low income patients through a federally qualified community health center in the region.

CCFC is open 2 nights a week, and clinicians see 10 to 20 patients each evening on a first-come, first-served basis. There are no appointments. Approximately 80 to 90 active volunteers staff the clinic, including 10 physicians, nurse practitioners and physician assistants who provide primary care. Dr Dunn, who serves as medical director, said the schedule is full enough that no clinician is asked to work more than 2 nights per month. Volunteers also provide nursing, lab, and pharmacy services; serve as Spanish translators; and offer clerical support. There is 1 paid staff member, clinic manager Therese Hess.

"On any given night, we might see an ear infection, a cough, a rash. We'll also see back pain, belly pain, headaches," Dr Dunn said. "And then we see the people I think we really help the most—the chronically ill who have fallen out of the system. People who say, 'I'm diabetic, I had a heart attack 5 years ago.' We see a handful of those patients every night where we say 'OK, what meds are you taking, how long have you been off of them, when did you last have your blood sugar and blood pressure checked? Let's start over and figure out what meds we can get you on, and get them for you ASAP.'"

Medications are provided at little or no cost to patients as needed. The clinic has a small inventory of antibiotics and other commonly dispensed medications purchased



from the local hospital, according to Dr Dunn. It also has a small supply of samples that may not have a generic alternative. If the clinic doesn't have a medication in its inventory, the clinic contracts with a local pharmacy that dispenses prescriptions to the patients but bills the clinic. Additionally, CCFC's drug assistance program provides a valuable resource for patients who need medications for chronic conditions.

"Arguably, the most impactful program we have is our drug assistance program," said Dr Dunn. Volunteers complete and submit applications for pharmaceutical assistance programs on behalf of patients, who then typically receive the medications in 1-month, 3-month, or 6-month supplies.

"We figure we've saved each patient in that program on average about \$5000 a year," said Dr Dunn. "We've calculated about \$600,000 a year in drug costs saved compared to the retail price."

In addition to providing medical care

and prescription assistance, clinic volunteers work to connect patients with other community resources. Following a visit, each patient meets with a social care volunteer who tries to identify other needs the patient might have such as fuel assistance, food pantry resources, or social services.

As an extension of the clinic, a new English tutoring program was launched last year for Spanish-speaking patients who expressed an interest in learning to speak and read English.

"The idea started at the clinic with our interpreter team," said Dr Dunn. The clinic's intake survey asks if people would take advantage of an opportunity to learn English if it was available. Because so many patients said "yes," they decided to create a program.

CCFC volunteers and staff teamed up with members of Grassroots of Iowa County and the Iowa County Literacy Council to create a tutoring program. So far, about 20 volunteers have been trained and matched with learners.

"It speaks a lot to how special our vol-

Family physician Aaron Dunn, MD, talks with a patient about his back injury at the Community Connections Free Clinic in Dodgeville. Dr Dunn, who serves as medical director, spearheaded efforts to start the clinic, which opened in 2006.



unteers are," said Dunn. "They're basically thinking on the fly, seeing a need and saying, 'let's just put this together and do it."

While volunteers are a critical component of CCFC's success, so is funding. The clinic receives limited financial support from the county, but the majority of funding is from the community—through donations from individuals, churches, local businesses, and some grants.

"We're making a difference, but at the same time, we're basically a lifeboat for people who are drowning. We are not a fullservice clinic. We are not a solution to the broken health care system," said Dr Dunn. "That said, it's been a cool thing to see how the community has rallied around this issue. To have a clinic like this—a real clinic—from the minimal resources we had and the partnerships we've developed, the volunteer support we've had, and the continued funding stream is a testament to everything good about the community."



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