

The Residency Research Network of Texas: Promoting Scholarship in Family Medicine Residency Programs

INSTITUTE FOR INTEGRATION OF MEDICINE & SCIENCE UT HEALTH SCIENCE CENTER®

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PBRN RESOURCE CENTER

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Introduction



The Residency Research Network of Texas (RRNeT) is a practicebased research network (PBRN) comprised of 11 family medicine training programs who began collaborating in 1998. Their purpose is

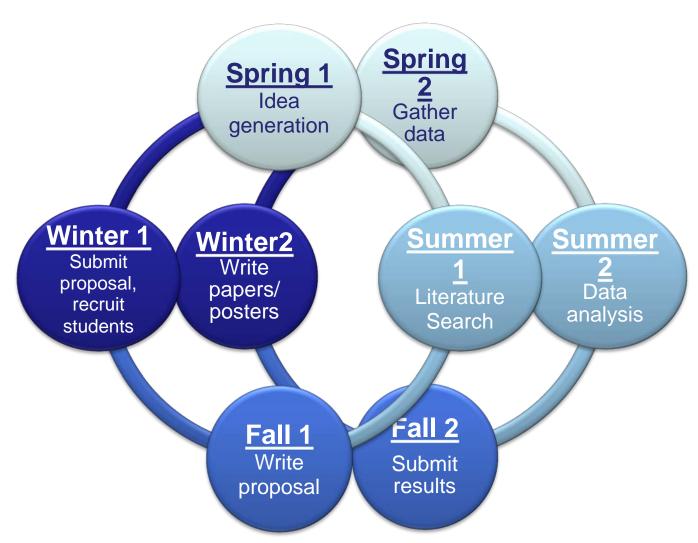
"to improve family physicians' skills and interests in research, and to find answers to clinical questions that are relevant to family medicine in Texas."

A practice-based research network (PBRN) is a group of practices devoted principally to the care of patients and affiliated for the purpose of examining the health care processes that occur in practices. PBRNs are characterized by an organizational framework that transcends a single practice or study. They provide a "laboratory" for studying broad populations of patients and care providers in community-based settings.



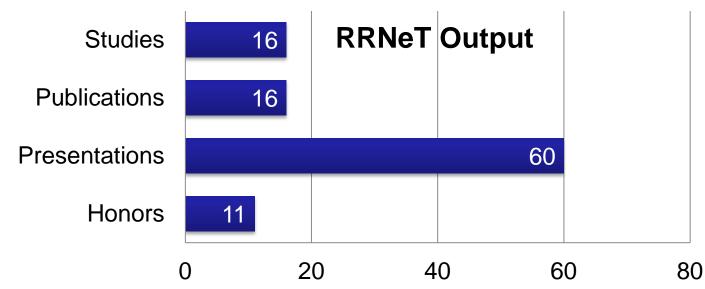
Methods

RRNeT is comprised of about 300 family medicine residents and 100 family physician faculty who see approximately 300,000 outpatient visits each year. The RRNeT Steering Committee is comprised of one representative from each site. They meet biannually and communicate regularly via conference calls in order to steer projects forward. A new research projects starts each spring and follows a two-year trajectory and growth cycle.



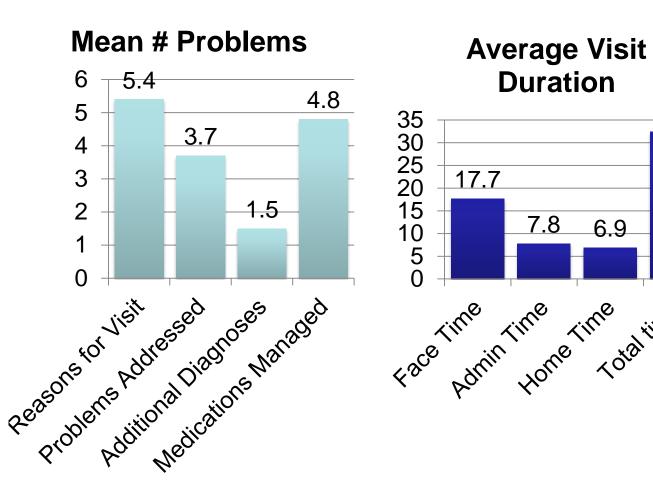
Results

Over the course of 18 years, RRNeT investigators have completed 16 projects which resulted in 16 publications, 60 presentations, and 11 honors.



Current Work

2015: Complexity of Family Medicine Visits



2016: The Referral Survey

Referred to this Specialist <u>because</u>... I usually prefer to send patients to specialists that communicate visit notes in a clear and timely

manner.

Unhappy with Referral because.. Reports not done in a timely manner, leaving my patient to suffer longer than needed, and delayed care.

Referred to this specialist because... This cardiologist is slower to do procedures on our elderly patients. He generally works well with their families and tries nonprocedure treatments first



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