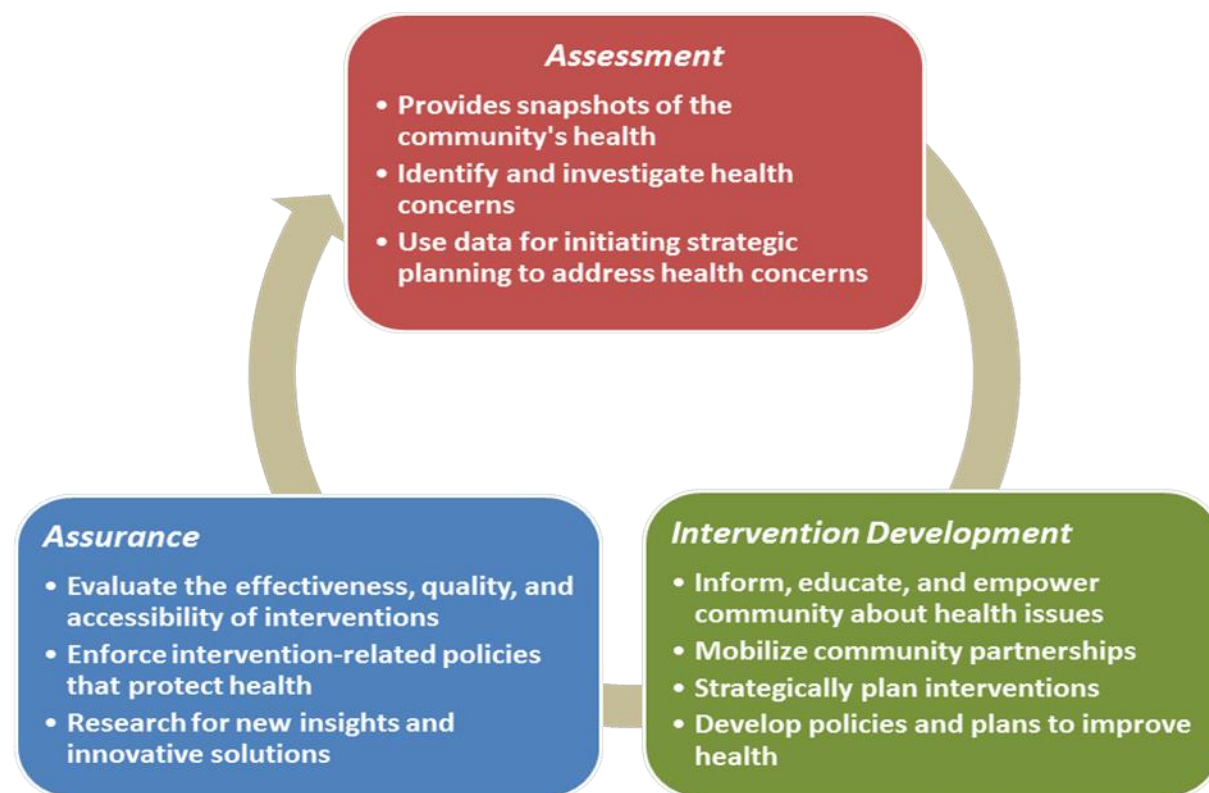


Introduction

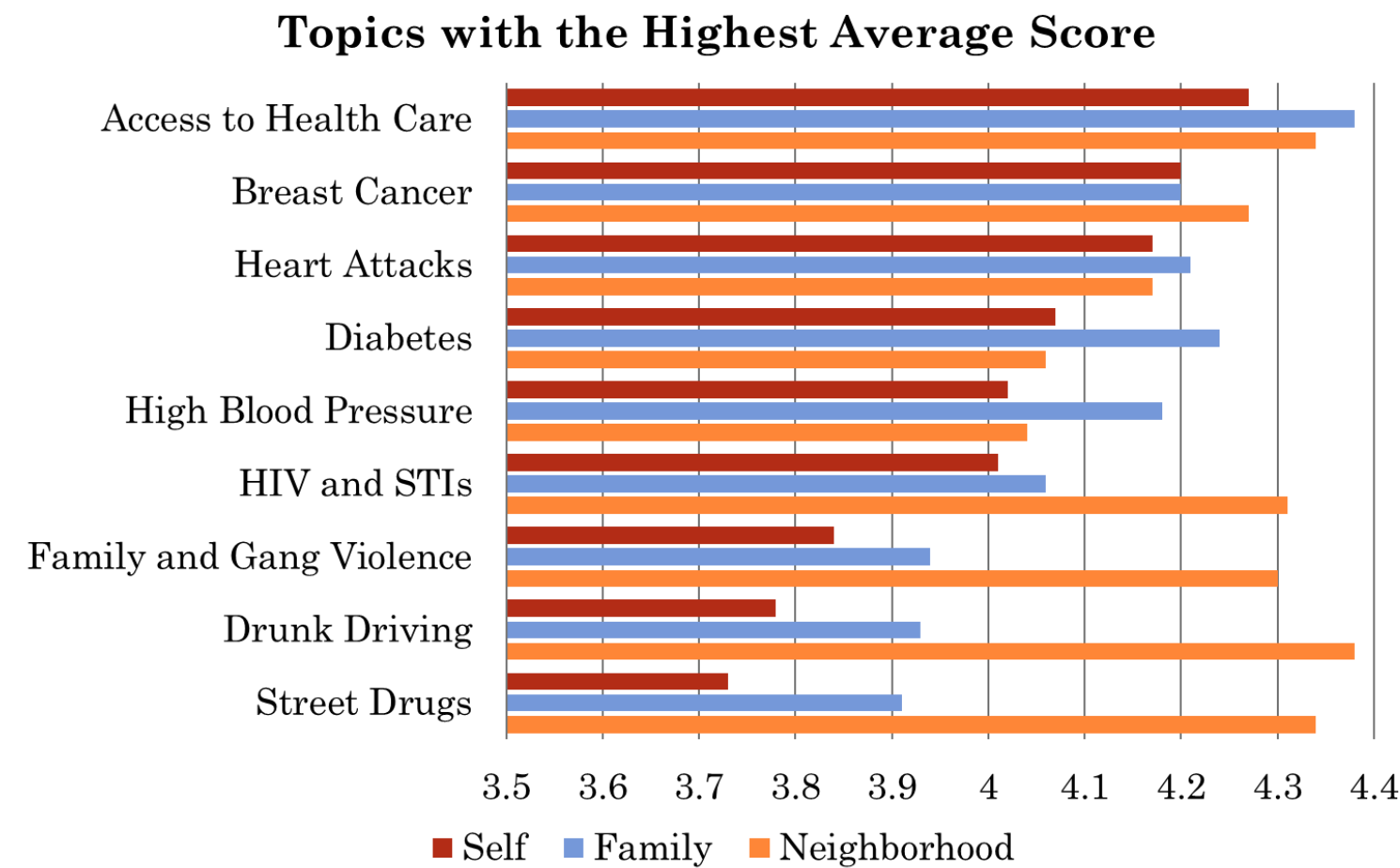
Established in 2008 in Bexar County Texas, the Bexar County Translational Advisory Board (TAB) focused our work on the Edgewood Community of San Antonio. Utilizing the “promotores” of the Edgewood Family Network, we recruited community members to participate in a series of focus groups to identify the health priority topics of most concern to themselves, their families and their community. Our TAB is comprised of community Bexar County residents to include promotores, librarians, health workers, researchers, educators, pharmacists, non-profit agency professionals and students.



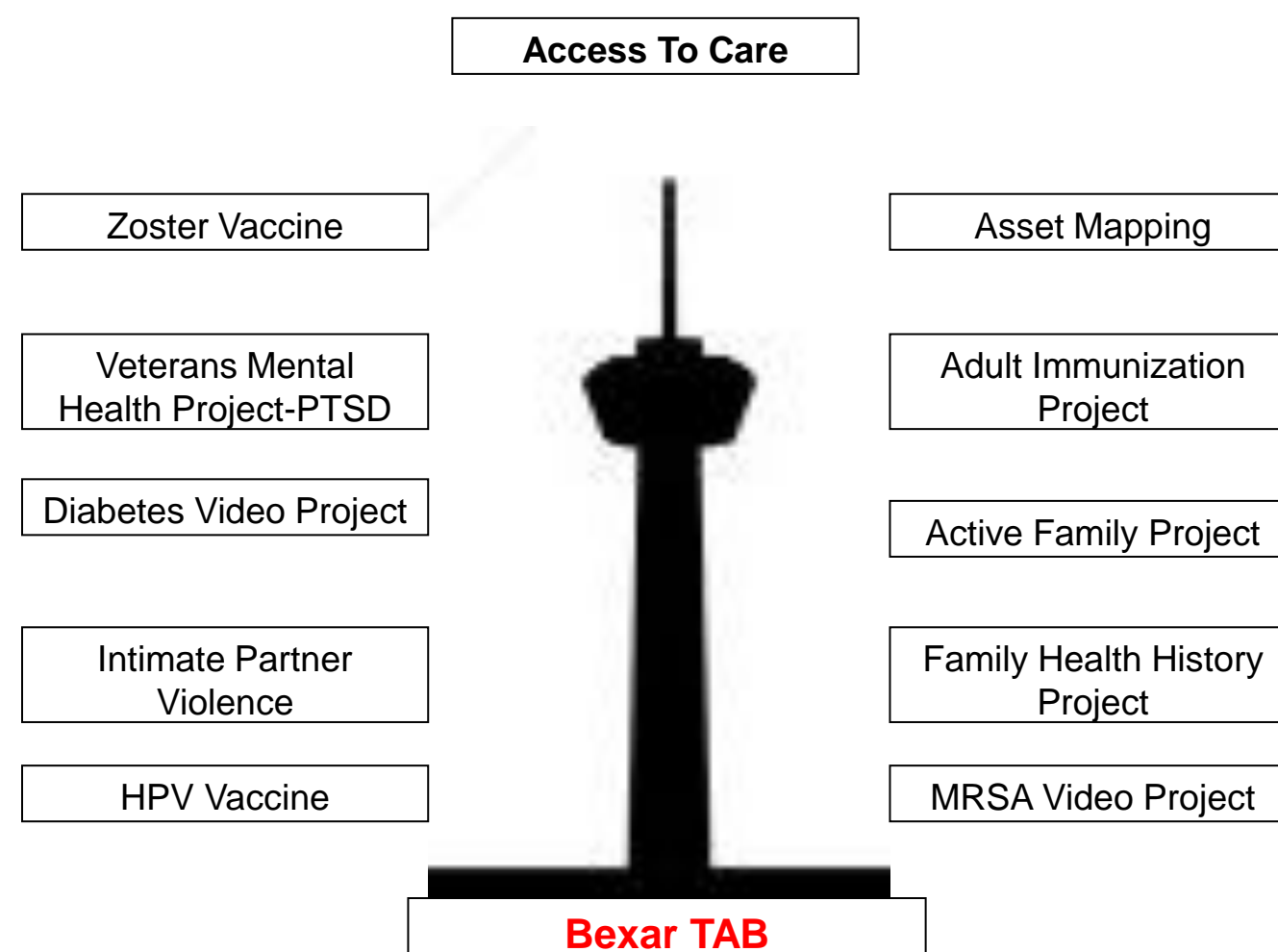
What We Do: Materials and Methods



Results from the Priority Survey

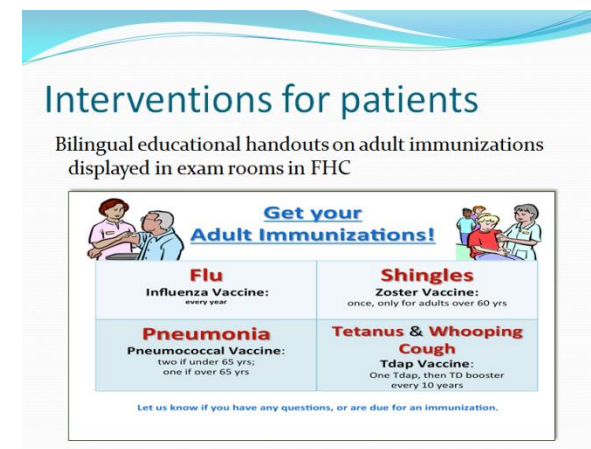
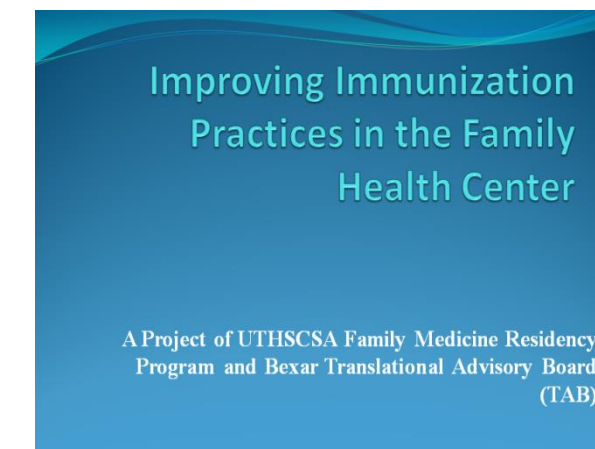


Research Priority & Projects



TAB & Community Based Research

Since 2013, we have partnered with the family medicine residence program to address access issues in Bexar County. Immunization was our first project.



Patients' Perceptions of Providers' Behaviors

205 completed pre-intervention surveys
 266 completed post-intervention surveys

- Patients reported an improvement regarding whether health care providers advised them on receiving a vaccination according to immunization schedule. This increased from 52.7% to 68.4% (p=0.001).
- Patients reported that they felt their health care provider was able to address all their questions and concerns regarding vaccines, improving from 61.5% to 75.6% (p=0.004).
- Patients also reported that their health care provider gave them information about vaccinations and where to obtain reliable information, improving from 48.3% to 64.5% (p=0.001).

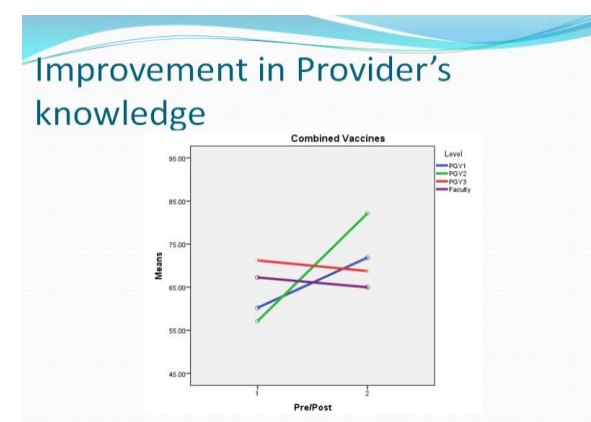
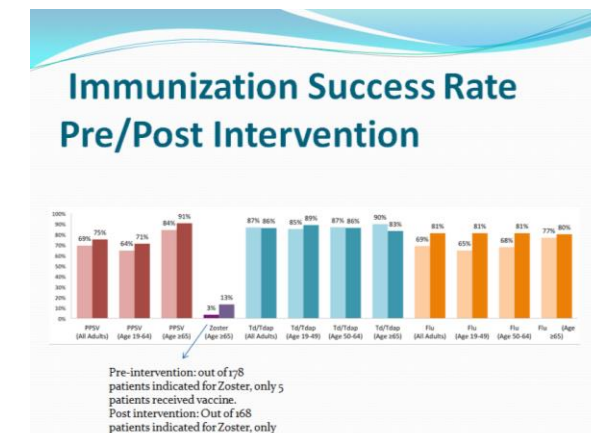


CHART REVIEWS

- 445 charts pre-intervention, 406 charts post-intervention.
- Inclusion criteria for chart review:
 - age ≥ 19
 - established care in FHC at least 6 months
 - ≥ 1 risk factor (age ≥65, current smoker, have chronic medical issue such as diabetes, asthma/COPD and etc.)



Barriers identified

- Lack of recommendation by Provider
- Lack of documentation, difficulty to review records from single data base
- Cost to providers:** Lack of reimbursement for vaccine administration. Most physicians have no direct way to bill Part D drug plans because these plans are designed to provide pharmacy benefits rather than medical benefits
- Cost to patients:** Even when the vaccine is covered by Medicare Part D or private insurance, patients are often responsible for co-pays and deductibles
- Lack of stock or unavailability of vaccine - Zoster vaccine requires a freezer for storage. Need to maintain zoster vaccine at temperatures of -15C or lower. Should be administered within 30 min after removal from the freezer

Future Direction of Bexar TAB

- Intimate Partner Violence Project
- HPV Project
- HCV Project
- Adolescent Violence Project