

Bexar TAB: Linking Community Based Research to Emerging Primary Care Workforce

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Introduction

The Bexar Translational Advisory Board (TAB) was established in 2008 and is comprised of a diverse group of community organizations, individual citizens and academic programs from primarily the San Antonio community. Since 2013, we have partnered with the UTHSCSA Family Medicine Residency Program to address access to care issues in Bexar County. We meet every 2nd Thursday of the month.



Significance

As part of their 2nd year of residency, Family Medicine residents are required to participate in community medicine experiences. Bexar TAB members serve as the primary partners for the residency program, which provides the residents with community medicine experience and collaboration on multiple aspects of community-based research.

Through our TAB, resident projects are truly community-based initiatives that have been identified by the community as being high priority for them individually, their family and their neighborhoods.

The importance of this partnership is to increase the capacity of primary care professionals to initiate practice quality improvement projects that are cost effective method and continually improves care that is patient centered and generalizable to their professional practice past residency.



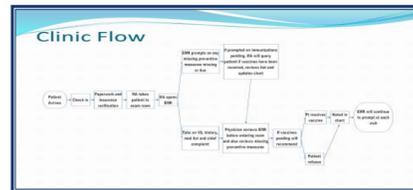
Methods

The primary focus of the Bexar TAB is to conduct quality improvement initiatives with the residency program to improve the health of the community, based on the principles of clinical safety and effectiveness.

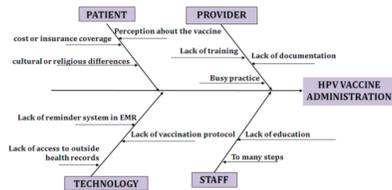
Our methodology for developing initiatives to address the gaps of health care of our community begins with having our residents review patient charts to assess the current health status of the patient cohort in question.

Several of our initiatives focused on immunizations for both adult and children population after patient chart reviews revealed a high rate of adults failing to receive the Zoster vaccines for Shingles and children failing to receive all three series of the HPV vaccine.

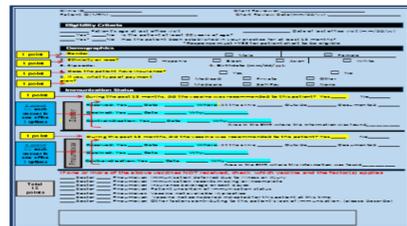
We used several quality tools to assist with our immunization initiatives:



Use of Quality Tools: Clinic Flow Diagram
 Mapped the clinic flow from the time the patient arrived and checked in until the time they left the building.

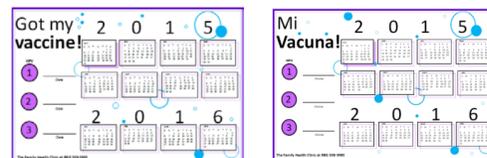


Use of Quality Tools: Fishbone Diagram
 A Fishbone Diagram helped to categorize potential barrier to the documentation of the immunization process.



Standardized Chart Review:
 Forms were used to collect, record and analyze data. Regular feedback reports on improving inclusion of critical data elements in the EMR were provided to clinic staff.

Reminder tools such as magnets were used in both English and Spanish for patients:



Our primary patient cohorts are from our local Robert B. Green Clinic located downtown.

Findings

Our TAB members have learned the rigors of being a physician in training and their project findings assist TAB members to share the details of the research with community agencies, other researchers and the community at large. The connection assists the residency to meet their curricular requirement for community medicine experiences and increases the knowledge of the resident of the importance of practice improvement strategies to address health challenges.

The projects that the TAB and the residents share respond to health topics that both the community and the residents have identified as challenges and ultimately provide a timely approach to patient centered care.

Next Steps

- Continue working on the pediatric obesity projects
 - Conduct a windshield survey with the resident of the month
 - Continue reviewing patient charts
- Finalize the HPV immunization initiative by publishing articles and presenting posters at various poster fairs
- Continue meeting on a monthly basis and address the health challenges of the community

Conclusion

The TAB has been meeting consecutively every month for 8 years and continues to be active partners with the residency program and provide community research opportunities. The Bexar TAB serves as a model that we have not seen in any other community engagement forums and one that we enjoy very much.

We currently have several projects we are working on; two projects related to pediatric obesity and one related to chronic non cancer pain. We maintain our partnership by working collaboratively.

