

Innovation Showcase

Moderated by Gerald “Jay” Fetter, MSHA



AMERICAN ACADEMY OF
FAMILY PHYSICIANS

GROWING YOUR OWN

Marshall University Pipeline Program

Tammy Bannister, MD
Associate Professor
Program Director



GROWING YOUR OWN



Community Scavenger Hunt: Fun Team Building While Walking in Our Patient's Shoes

Wendy B Barr MD, MPH, MSCE
Cara Marshall, MD
John Raser, MD



Learning About Community Resources



PCMH Team Building



Engaging with the Community

Walking in Our Patient's Shoes

Using a Structured Interview for Family Medicine Resident Applicants to Assess Professionalism Data

Sheryl Beard MD

University of Kansas School of Medicine-Wichita
Family Medicine Residency at Via Christi



Changes we would make

- Create a summary of the overall assessment rather than just a score
- Altering the rating scale used
- Change scenarios and make them more ethical
- Add several scenarios with only a few pointed questions
- Give the applicant a patient scenario with HPI,ROS, PE, labs

Interprofessional Education Through A Global Health Experience

Darin Bell, MD
Family Medicine Residency of Western Montana



To Ethiopia and Back

- Purpose
 - To create a global health IPE experience
- Result
 - Improved interaction among health professions students and FM residents
 - Improved confidence and understanding of global health issues
- Recommendations
 - Advanced planning is important
 - Flexibility is key



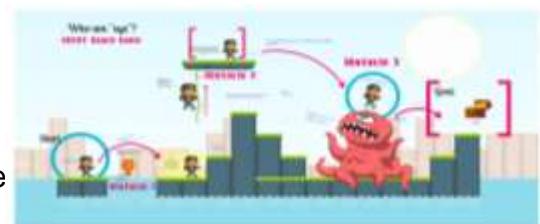
Increasing Resident Engagement in Didactics Through Innovative Games: Why Should We Play to Learn?

Lauren Biehle, PharmD, BCPS



Game-based Learning in the Didactic Setting

- Competition and games can be engaging and effective forms of interprofessional active learning
- Self-directed, internally motivated, prefer active involvement, need to build on previous experiences, and learn in problem-centered way
- Game-based learning engages these areas and across the cognitive, affective, and kinesthetic domains
- Specific examples:
 - Benzo Jeapo
 - ID Chutes and Ladders
 - Oral Anticoagulant Family Feud
 - Obesity Management Catchphrase
 - Who am “eye”?



OB Group Visits – Increasing education, efficiency, satisfaction and revenue

Beth A. Damitz, MD
Sandra Olsen, MS



- Birth outcome disparity in our community
- Educational OB group visits
- Outcomes
 - Education
 - Satisfaction
 - Birth outcomes
 - Revenue
- Learnings



Medication Safety: Changing "Dull and Boring" to Dynamic and Rewarding

Dr. Heidi Harris-Bromund
Dr. Amanda Place



Promoting Safe Medication Prescribing in a Family Medicine Residency Clinic

Innovation implementation

Phase I: January 2010-June 2011
- Developed baseline medication safety culture survey
- Identified key areas of need and reporting processes
- Facilitated education and training on key clinical events

Phase II: July 2011-June 2012
- Developed and implemented a communication system for
- Standardized reporting of key clinical events

Phase III: July 2012-June 2013
- Developed and implemented a reporting system for key clinical events

Phase IV: July 2013 to present
- Standardized reporting of key clinical events
- Standardized reporting of key clinical events

Phase V: July 2015 to present
- Integrated reporting system for all key clinical events
- Standardized reporting of key clinical events

Medication Safety "Postcard"

Out-Sail!
A FISHY MYSTERY...
THE CASE OF THE TIN-GLING FISHY 'LEGS'...

Dear Doctor Fishy
It's a pleasure to introduce you to a new campaign to promote patient safety and encourage better communication between patients and healthcare providers. We have created a special "Postcard" for you to use in your office or clinic. We encourage you to print out the postcard and share it with your patients. After you receive my Postcard, please be sure to read it and then give it to your patients. It's a great way to help them understand what is happening with their medication. And for the best results, be sure to help with the "post" office stamp. We hope you find it helpful.

Keep patients safe! Be curious! Report!

Postcard developed by the American Academy of Family Physicians. © 2015 American Academy of Family Physicians. All rights reserved.

A cluster of five yellow stars of varying sizes, with a cluster of candy bars (Snickers, 100 Grand, Crunch, Butterfinger, Baby Ruth, and Twix) arranged around them.

Impact of the Innovation

Measurement of clinic safety culture:
Ambulatory Medication Safety Culture Survey
Q15: Medication safety is consistently reinforced as a priority in this clinic

Clinic event reporting rate

Year	Strongly Agree	Agree	Disagree	Strongly Disagree
2010	30	45	25	10
2014	70	20	10	0

Year	Primary Care Clinic	Family Medicine Clinic	Primary Care Residency
2010	10	5	5
2014	100	10	10

No to No-shows - Implementing the open access model of scheduling

Gwinnett Medical Center FMRP
Strickland Family Medicine Center



Open Access Works

- 3 month pre-intervention NS rate 45.2%
- 3 month post-intervention NS rate 31.1%
- Latest 3 month NS rate 29.8%
- Keys to success:
 - Same day access and flexible “super slots”
 - dedicated staff and reinforcement of mission

Incorporating Morning Report in a Busy Family Medicine Residency Clinic

D. Esther Ho, MD, Program Director

Presenting for

Hanh Nguyen, M.D., Assistant Program Director

UC Irvine School of Medicine – Department of Family Medicine



Morning Report In Residency Clinic

- **Introduction**

- Required morning report for all outpatient clinic residents prior to starting clinic on Wednesday morning before start of clinic
- To provide an interactive forum to discuss interesting cases, and working through differential diagnosis and thought process

- **Implementation**

- Blocked first patient of the morning
- Instructional didactics and expectations on style of morning report

- **Strengths**

- Improved resident driven education and participation
- Improved camaraderie among residents

- **Needs Improvement**

- Providing clear instructions on how to provide effective morning report vs classic didactic/lecture style

Development of a Program to Address Food Insecurity at an FQHC

Javier Zayas-Bazan, MD; Anne Garcia, MD; Cynthia Kegowicz, MD
HonorHealth Family Medicine Residency Program
Scottsdale, AZ



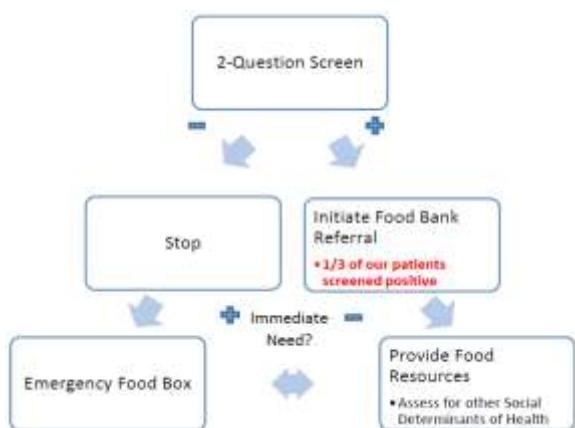
Development of a Program to Address Food Insecurity at an FQHC in Scottsdale, AZ

Q1: In the last 12 months, we worried whether our food would run out before we got money to buy more. Was this:

Often true? Sometimes true? Never true?

Q2: In the last 12 months, the food that we bought just didn't last and we didn't have money to get more. Was this...

97% Sensitivity 83% Specificity



Feedingamerica.org



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