

Putting science back into the Family Medicine Forum

“Let’s put our science back into Family Medicine Forum.”

That was one of the suggestions of the Family Medicine Forum Research Committee (FMFRC) as they worked to develop a slate of exciting and noteworthy Research Day and FMF events for the 2013 conference. The Section of Researchers responded, bringing the best family medicine research and science to family physicians attending FMF 2013 in Vancouver.

Among the research highlights during FMF was a session entitled “FMF Research Pearls—The Top Four Clinically Relevant Research Submissions from Research Day.” These presentations, considered to be of significant interest to family physicians in the practice community, were chosen from the top-ranked abstracts submitted for presentation on Research Day.

FMF participants filled the room, eager to learn about the latest research carried out by family medicine researchers from across the country and to better understand practice issues. In brief, here are the four Pearls, each of which was presented on behalf of a team of contributing family medicine physicians and researchers.

A Newly Implemented EMR: Effects on workflow and communication in family practice training

Gayle Halas, Carol Styles, Dr Alan Katz, Dr Alex Singer

This research team from the University of Manitoba reported on their careful examination of the implementation of an electronic medical record (EMR) in three family practice teaching clinics. Using focus groups, they identified challenges both generic and unique to the complexities of maintaining practice flow and educating family medicine residents.

Finding a BETTER Way: A chronic disease prevention and screening program in primary care

Please see the full team list below

Dr Donna Manca presented on behalf of a large national research team about their BETTER project: Building on Existing Tools To Improve Chronic Disease Prevention and Screening in Primary Care. The original BETTER project included a remarkable cluster randomized controlled trial carried out in two provinces. The BETTER trial assessed the impact of trained prevention practitioners on prevention and screening of chronic disease in family practices across a variety of diseases. The overall quality of prevention care and screening was improved and the proportion of positive changes in health promotion, prevention, and screening manoeuvres was more than doubled in participants who received the intervention as compared to a control group. This promising work is now being expanded as a program into four provinces and territories and will involve diverse practice settings in Canada, including geographically remote ones. View the slide presentation.

The full BETTER team:

Dr Donna Manca	Vee Faria	Dr Rahim Moineddin
Carolina Aguilar	Dr Lee Green	Dr Nandini Natarajan
Rebekah Barrett	Dr Michelle Greiver	Dr Sarah Newberry
Dr Kris Aubrey-Bassler	Dr Eva Grunfeld	Dr Mary Ann O'Brien
Julia Baxter	Dr Jeffrey S Hoch	Dr James Pencharz
Jaclyn Beca	Dr Kami Kandola	Peggy Riches
Shelley Bible	Dr Doug Klein	Jess Rogers
Dr Denise Campbell-Scherer	Dr Paul Krueger	Dr Ginetta Salvalaggio
Dr June C Carroll	Dave Ludwick	Dr Nicolette Sopcak
Dr Andrew Cave	Dr Muhammad Mamdani	Dr Kevin E Thorpe
Dr Catherine Cervin	Dr Emily Marshall	Dr Margo Wilson
Sandra Delon	Christopher Meaney	

Determinants of Urgent Care Clinic Use and Barriers to Accessing Patients' Own Family Physicians

Dr Jessie Weaver, Dr Christa Kozanczyn, Dr Anwar Parbtani

Dr Jessie Weaver of Barrie, Ontario, presented an overview of her team's simple but elegant study examining the use of an urgent care clinic in that city. It demonstrated that the centre was being used just like a walk-in clinic and that most patients had family physicians but did not perceive them as being accessible. In fact, only one-third had even tried to contact their family physician for an appointment. The study suggested that potential remedies lie in examining access barriers and implementing "advance booking" models; educating patients about the acuity of their ailments; examining the use of partners, including nurse practitioners and physician assistants, in the provision of care when immediate access to care is required; and correcting the misperception that the use of walk-in clinics or urgent care centres means bad medicine. View the slide presentation.

HIV Practice Data Demonstrates CME Efficacy: Learning that promotes practice improvement

Dr Jennifer Barrows, Gurveen Grewal, Dr Réka Gustafson, Dr Marisa Collins

Dr Brenna Lynn, PhD, presented on behalf of a team from the University of British Columbia's Division of Continuing Professional Development (CPD) and Vancouver Coastal Health. Through their study the team was able to demonstrate that CPD can change behaviours in clinical settings. A multifaceted program of HIV-testing education aimed at family physicians in Vancouver was associated with a significant rise in HIV testing in the practice of family physicians who attended the program. British Columbia is now implementing province-wide routine education on HIV testing. View the slide presentation.

Congratulations to these four research teams! Each presenting researcher received a certificate recognizing the group's achievement.

As the leading primary care and family practice meeting in Canada, FMF is a significant opportunity for family medicine researchers to engage our clinical colleagues in knowledge exchange while also showcasing the best of Canadian primary care research.

This year's FMF Research Committee is working now to build on this success, to grow this exchange, and to strengthen the role of science will play at FMF 2014.

Watch the CFPC website for information about next year's presentations.