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Title

Creating a Culture for Community-Engaged Clinical Care

Priority 1 (Research Category)

Community based participatory research

Presenters

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Abstract

Context: The lack of meaningful community-engagement in clinical care is shown to contribute to ineffective patient care and disconnection with communities. University of Minnesota Family Medicine and Community Health residency programs created a primary care community-engagement framework to address these issues. Objective: Engage diverse community leaders to inform the primary care community engagement framework with their perspectives about community health priorities and strategies for clinic-community-engagement. Study Design: Community-based participatory research (CBPR) designed, conducted and analyzed results from in-depth community specific focus group discussions with diverse community leaders. Bilingual/bicultural team members conducted focus groups on Zoom in participants' preferred language, then transcribed/translated the recordings into English. Team members inductively coded interviews and then identified similar and unique themes across the 5 groups. All interested focus group participants gave input into the themes. Setting: Twin Cities Metro Area. Population: 19 leaders from 5 ethnic groups: Black, Hmong, Latin American, Nepali. Outcome Measures: Shared community themes. Results: Four major shared themes: 1) Communities are supportive of community engagement with clinics to build a culture of community-led work that guides clinic policies and practices. However, each community has their own perspective. 2) Communities have shared principles for clinic-community engagement. 3) Communities have similar prioritized health topics and shared desires for improved healthcare delivery/services. 4) Communities recommend similar and unique strategies for engagement. Participants emphasize the need to build trust, invest in the community, and improve communication to address gaps in education and ensure effective health care delivery. Findings include recognizing the value of community representation in decision-making and policy creation that impact clinic practices at all levels, including patient care practices, health education, provider/staff education/training and no identifying/utilizing resources to improve community health. Conclusion: These findings could guide efforts for building sustainable, effective partnerships with primary care clinics to meet the needs of diverse communities.