

# Elevating our Engagement: An Evaluation of Launching a Community Board at a Student-Run Free Clinic

Kristina Sandquist<sup>1,2</sup>, Josten Overall<sup>1,2</sup>, Veronica Parra-Mendoza<sup>2</sup>, Kari Mader, MD MPH<sup>3,4</sup>

<sup>1</sup>University of Colorado School of Medicine, <sup>2</sup>University of Colorado School of Public Health,<sup>3</sup>Denver Health & Hospitals, <sup>4</sup>University of Colorado Department of Family Medicine

## Background

- Community Advisory Boards are prevalent and are a requirement of Federally Qualified Health Centers, with most staying true to “advising” levels of engagement
- DAWN is a 501(c)(3), interprofessional Student-Run Free Clinic (SRFC) that provides primary care to uninsured patients in Aurora, CO
- There is no literature describing feasibility or models of community board formation at a SRFC
- In Fall 2017, DAWN decided to establish a community board to improve its responsiveness to community needs, and develop a sustainable partnership
- Best practices for community board formation were established using literature and expert interviews
- A resultant core value was to facilitate an environment of group self-determination and a high level of engagement between DAWN and the board, aiming for “shared decision making and work” (*grounded in Hart’s Ladder of Participation*)
- The Community Leaders of DAWN (CLD) group was created in October 2018 with a mission statement of “*Community leaders partnering with DAWN to promote healthy communities in Aurora*”

## Objective

- To evaluate the process and outcomes of the initial launch of the Community Leaders of DAWN



## Methods

### Community Leaders of DAWN Design

- Kick-off with an eight-hour training day: group norms and project objectives established, leadership skills training, team building exercises
- Monthly two hour meetings to run between December 2018–October 2019: identification of community needs, discussion of project ideas, identification of first CLD project in March 2019
- Expert facilitation with translations in English and Spanish

### Continuous Evaluation

- Pre-post surveys
- Focus groups with CLD members and CLD Planning Committee
- Analysis conducted after first four monthly meetings
- CLD Member key-informant interviews (*future*)
- Student-leader post-participation survey (*future*)

## Results

### Demographics

Age	Range: 26 – 53 years (Mean: 42.8 years)
Self-Described Race/Ethnicity	4 – Mexican, 1 – Sudanese, 1 – Black, 1 – Caucasian, 1 – Hispanic
Country of Birth	5 – Mexico, 1 - Saudi Arabia, 1 – Nigeria, 1 – USA
Years Lived in USA	Range: 3 – 53 years (Mean: 22.0 years)
Preferred Spoken Language	3 – Spanish, 2 – English & Spanish, 2 – English, 1 – Ibo
Other Languages Spoken	2 – English, 1 – Arabic

### Quantitative Process and Outcomes Measures

	Post Training (mean)	3 Month (mean)		Baseline (mean)	Post Training (mean)	3 Month (mean)
<b>PROCESS MEASURES</b>			<b>OUTCOMES MEASURES</b>			
Able to share opinions*	4.6	4.1	I am a leader in my community**	3.5	3.3	3.3
CLD is making its own decisions**	3.4	3.6	I am comfortable talking with others about community needs**	3.6		3.4
I understand my role in the group**	3.4	3.5	Confident I have the skills to create a project addressing a community need**	3.1		3.4
My time is respected**	3.6	3.5	Confident I can identify the community's most important health needs**			
Unique backgrounds valued***	3.8	3.9			3.1	3.1
Different languages valued***	3.8	4.0	CLD is improving the health of Aurora**		3.5	3.0

\*5-point Likert Scale: 1-Strongly Disagree, 2-Disagree, 3-Neither Agree nor Disagree, 4-Agree, 5-Strongly Agree

\*\*4-point Likert Scale: 1-Strongly Disagree, 2-Disagree, 3-Agree, 4-Strongly Agree

\*\*\*4-point Likert Scale: 1-Poor, 2-Fair, 3-Good, 4-Excellent

## Themes

### Feedback for Improvement

#### Create central method of communication and utilize it regularly (*WhatsApp*)

*“Create group chat about timing, location...or other happenings within the group.” (CLD Member)*

#### Increased accountability would be helpful to ensure group progress

*“For those that are not as engaged, we [will] talk to them one-to-one about if they are interested in participating. If the answer is yes, then we need to talk about the set meetings/calling in if they can’t come.” (CLD Planning Committee Member)*

### What is Working Well

#### Intentional attention to language (English/Spanish) with interpretation

*“I really liked the thoughtful split of English/Spanish and think that was appreciated by Spanish speaking only members.” (CLD Planning Committee member)*

#### Group has a sense of connection

*The connection we have as a group [is the most valuable part of the work], even though everyone hasn’t come, we are all connected...you’re like the base foundation and we are like the stairs.” (CLD Member)*

#### Using technology to bring the group together

*“Even though only 2 people showed up, we accomplished a lot! Using the media, email, texting.” (CLD Member)*

### What We Are Getting Out of Project

#### Learning and acknowledging what it looks like to work with the community and not to expect “perfection”

*“I think in community organizing, it’s pretty normal to not get everyone attending every single meeting. More than 50% [attendance] is good...I think quality over quantity is a good idea to be had and we shouldn’t be discouraged.” (CLD Planning Committee Member)*

## Themes Continued

### Family feel

*“We are a family and we are a great team. And even though people are not here, I feel like people are still engaged and participating.” (CLD Member)*

### Satisfaction from being able to help the community

*“That it is going to affect people one day in a positive way, I hope.” (CLD Member)*

### Appreciate productive and exciting feel of the work

*“[I] loved getting to the idea phase, getting encouraged and excited by that” (CLD Planning Committee Member)*



## Discussion

- Decrease in some quantitative measures on survey
- Observed disconnect between some survey and qualitative findings
- May be due to:
  - Initial excitement of kickoff day and subsequent shorter meetings
  - One member who missed kickoff and has only attended one meeting
  - Not enough time to see change over time
  - Survey questions may not represent phenomena happening in group
- Keys for success have been flexibility, facilitation, leveraging technology, and building relationships

## Limitations

- Small sample size (n = 8)
- Completion of some baseline surveys after initial training session
- CLD focus group not conducted after 12/8 meeting due to time constraints
- Variable in-person attendance at CLD meetings – not all CLD members were represented in end of meeting focus groups

## Next Steps

- Utilize standing focus groups to reflect back results thus far, and glean insight into disconnect between survey and thematic findings
- Continue evaluation of year-long launch of CLD, conduct key-informant interviews with members, and anonymous student exit surveys
- Evaluate sustainability of CLD