The Department of Family Medicine Newsletter

Quarterly news about students, patients, faculty and programs in the Department of Family Medicine

OUR MISSION

Our rapidly growing program combines excellence in medical care with social justice. We aim to enhance the quality of life for underserved and vulnerable patients, while educating future generations of highly skilled, compassionate primary care specialists. Our goal is to combine education, high-quality comprehensive care and research to advance the family medicine discipline.

The mission of the Department of Family Medicine is to improve the health of individuals and families in partnership with the communities we serve by translating advances in medicine to excellent, accessible and holistic care through education, clinical care, scholarship and service.

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Keck School of Medicine of USC



Photo/Ricardo Carrasco III

Jehni Robinson appointed as chair for the Department of Family Medicine

Jehni Robinson, MD, has been appointed as chair of the Department of Family Medicine of the Keck School of Medicine of USC, effective Nov. 1, 2018. Robinson served as interim chair of the department for a year and previously was the vice chair for clinical affairs.

"In her year as interim chair, Dr. Robinson has risen to every challenge; she has my trust and respect and I am sure she will be successful in this new venture," Keck School Dean Laura Mosqueda, MD, said in a memo announcing the appointment.

In addition, Robinson simultaneously has been appointed as associate dean for primary care. In this role, Robinson will work with both the leadership of the Keck School and Keck Medicine of USC to serve as the point person for primary care strategy across all areas. She will provide guidance, as requested by Keck Medicine leadership, regarding clinical practice development in the community and consultation with respect to primary care practices and protocols.

Robinson has a combination of practical administrative experience from leading a large, multiservice community clinic to considerable experience in teaching and developing curriculum. She is passionate about care for underserved communities, developing teams and creating efficient patient-centered models of care that bring joy back into the practice of medicine. She is interested in developing reliable systems of care that improve quality across multispecialty practice. She also is a skilled physician who has dedicated her career to caring for children, adolescents, adults and their families in the context of their community.

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Robinson previously was a professor of clinical family medicine and has been a faculty member at USC since 2014. Prior to joining the team at USC, Robinson served as chief medical officer at the Saban Community Clinic, formerly the Los Angeles Free Clinic, where she developed interdisciplinary teams and created innovative models to provide comprehensive primary care to underserved communities. She also served as interim clinical director at the Community Clinic Association of Los Angeles County, coordinating quality improvement activities across a consortium of community clinics. She served as faculty in the Harbor-UCLA Transforming Primary Care Fellowship, where she developed curriculum, coached and developed family medicine fellows and taught the principles of Patient Centered Medical Home.

Robinson received her undergraduate degree from Stanford and completed medical school at the Morehouse School of Medicine in Atlanta, Georgia. She completed her internship and residency at Harbor-UCLA in the Family Medicine Residency Program and completed a fourth-year chief residency and faculty development fellowship.



"I am looking forward to working with the department's exceptionally talented clinicians, staff and students to provide patient-centered, team-based health and wellness to all patients touched by Keck Medicine of USC, particularly those in the local underserved communities surrounding our Health Sciences Campus."

-Jehni Robinson, MD

New medical director Renee Poole joins family medicine private practice



Renee M. Poole, MD, is a board-certified family physician bringing over 13 years of experience facilitating positive changes for all age groups in disadvantaged and underserved communities. Her core clinical expertise is in preventive medicine and effective management of chronic illnesses and conditions such as diabetes and hypertension.

"I am passionate about creating continuity of care with every family member and empowering individuals to modify their behaviors and improve their overall health, while integrating a holistic approach, including the physical, mental and even spiritual in their care," shared Poole.

Poole is a certified physician executive, with a graduate degree in medical management from the USC Marshall

School of Business and has four years of junior executive level administration experience with a focus on quality and clinical operations improvement. Poole is a servant leader with a leadership style best described as objective focused, which creates an atmosphere of alignment and collaboration for providers and support staff.

Poole earned her undergraduate degree from the University of California, Los Angeles, and graduated from the Saint Louis University School of Medicine in 2005 with a distinction in community service. Thereafter, she completed her family medicine residency program at Advocate Christ Medical Center in Illinois, obtained her board certification in family medicine and was awarded the Degree of Fellow by the American Academy of Family Physicians. Poole has served as a part-time faculty member and clinical preceptor at the University of Chicago Pritzker School of Medicine and Keck School of Medicine of USC.

She is an active member of the Association of Black Women Physicians, Alpha Kappa Alpha Sorority, Inc. and American Academy of Family Physicians. In her spare time, she enjoys traveling, the arts and volunteerism.

Interprofessional Geriatrics Curriculum cultivates the next generation of health care providers for older adults

As Baby Boomers reach 65, the importance of having teams of providers that know how to care for older adults grows. Since 2011, the Interprofessional Geriatrics Curriculum (IPGC) has embraced this mission by bringing together students from medicine, physician assistant studies, occupational therapy, physical therapy, social work and psychology in an environment that gives them an opportunity not only to work on interprofessional teams, but see older adults in low-income housing. This opportunity creates a unique model of care. This year the number of participants has doubled since its inception to 125 students from various disciplines.

"As health care delivery becomes more interdependent and complex, it is critical that each health care team member works in concert to provide optimal patient care," said Jo Marie Reilly, MD, associate clinical professor of family medicine and one of the founders of the program. "Working together, each student maximizes and complements each other's skills, to provide the best patient care possible."



As part of this program, student teams visit an older adult in low-income housing, with each visit focused on topics such as medication management, nutrition, community resources and mental health. But it is the long-term effect that really shows the impact of a program like IPGC.

"The program helped me manage food portions, encouraged to make dental appointments and try to exercise more," one resident shared. "The program is great!"

First Primary Care Leadership Conference empowers medical students

On Jan. 26, medical students attended the first annual Primary Care Leadership Conference at the USC Health Sciences Campus. With more than 30 students in attendance, students heard a keynote from Jehni Robinson, MD, the chair of the Department of Family Medicine. Influenced by her parents, Robinson spoke about the successes and failures that led to her to become the physician and leader she is today. She asked the students to reflect on what motivates them and ignites their passion for medicine.

Breakout sessions focused on storytelling, team building and advocacy, which allowed attending students to put into practice some of the concepts shared by the keynote speakers. Students practiced telling their own stories in a challenge-choice-outcome formula to help share their stories more efficiently. In the team-building session, students discovered their own leadership style by working on telling their own story. In the advocacy session, students practiced giving an elevator pitch on a current health policy topic, helping them to become more confident speaking to legislators and using their platform as medical students to make positive change.

Josh Banerjee, MD, closed out the morning with a moving

and thoughtful telling of his personal journey from medical school to his current leadership role at LAC+USC. He shared with attendees how each of them can make a difference in the world around them.

"I was personally inspired by our keynote speakers and panelists, who talked about their personal stories," shared Haley Oosterhouse, an MS2 and co-president of the Family Medicine Interest Group. "Through their stories, I was able to reflect on my own motivations for coming to medical school an how I can use this to become a better leader in primary care in the future."



Josh Banerjee, MD gives his closing keynote address. Photos/Alexa Rodriguez

Want to make a difference in medicine, education and health care?

http://keck.usc.edu/family-medicine/support-family-medicine/

Your contribution to the Department of Family Medicine expands education, research and health. Your generosity makes a difference and we thank you for your support.

Keck School of Medicine of USC

2018 Year in Review



\$1.537 million in 2018

compared to

\$806,897 in 2017

total publications, interviews and presentations done by our faculty





1,052

socks from USC Student Health

500

shirts from USC Student Health

107

hygiene kits from PA students

1,758

socks from a sock drive

donations from the Department Retreat and Holiday Party

ONE start to the **Street Medicine Program**

We provided high-quality, patient-centered care to people and their familes.

percent increase in visit volume

percentile in overall provider ratings in academic health care center nationwide

new clinicians providing quality care



The GAP clinic saw 74 patients and had 99 students observe this year.





Student Senior Partnership expanded to include 20 senior volunteers, 87 students and 7 faculty.

The Interprofessional Geriatrics Curriculum doubled in size. They had 24 resident volunteers, 125 students and 16 faculty.



The National Center on Elder Abuse



coordinated World Elder Awareness Events in 50 states



grew their social media presence significantly with 420,000 elder justice supporters.



served 1,475 people in Technical Assistance



Being faster and more accurate than 95 national teams led to

the Primary Care PA Program winning the National Student Challenge Bowl at the American Academy of PA's national forum. The Pacific AIDS Education and Training Center had...

49 residents

rotate through the Clinical **HIV Training Program**

5 fellows

graduate from the HIV Clinical Leadership Fellowship