

## The North Texas Primary Care Research Network Newsletter

# TESSA: TECHNOLOGY ENHANCED SCREENING AND SUPPORTIVE ASSISTANCE

In August 2015, a team of UNTHSC School of Public Health and Family Medicine/NorTex faculty, led by Associate Professor Emily Spence-Almaguer, received funding from the Office of Women's Health to create a community demonstration project called TESSA. TESSA; which stands for Technology Enhanced Screening and Supportive Assistance, was created to implement Interpersonal Violence (IPV) screenings within primary care clinics. Although studies link IPV to increased injuries and poor long term health outcomes; universal screening is difficult to achieve due to a variety of barriers. The TESSA project is designed to overcome these barriers through efficient technology, evidence-based interventions, and integration of health and IPV support services.

TESSA's approach is bi-directional in nature focusing not only on patients of clinics, but also on the clients of local IPV agencies. The TESSA project includes the following components:

- Implement IPV screening: Each clinic will administer IPV screening through an electronic tablet device.
- IPV risk level assessed: Based on patient responses, a risk level will be assigned and put into the EMR. Prompts will include guidance for doctors on discussing IPV and its connection to health.
- Tele-linkage to Health Advocate: For patients wanting further assistance, an immediate session with a TESSA health advocate will be offered. These sessions will utilize motivational interviewing techniques and will be conducted through the Facetime application on an Ipad.
- Health care management: Health advocates will assist clients of partner IPV service agencies with accessing health



**From left to right:** TESSA Team members: Kwynn Gonzalez-Pons, MPH (TESSA Health Advocate); Jessica Grace, LMSW (TESSA Program Manager); Irene Gallegos, MPH (TESSA Health Advocate); Alita Andrews, MA, MPH (TESSA Health Advocate)

care, linking them to TESSA clinics when appropriate.

TESSA's partners include 9 primary care NorTex clinics in Fort Worth; UNT Family Medicine, UNT Pediatric Mobile Unit, JPS Community Medicine and Homeless Clinics, and North Texas Area Community Health Center (NTACHC) FQHC clinics. Participating Interpersonal Violence (IPV) service agencies include One Safe Place, Safehaven of Tarrant County, and the Women's Center.

For more information about TESSA, please contact Dr. Emily Spence-Almaguer at [Emily.spencealmaguer@unthsc.edu](mailto:Emily.spencealmaguer@unthsc.edu) or Jessica Grace at [Jessica.grace@unthsc.edu](mailto:Jessica.grace@unthsc.edu).

FEATURED

## CURRENT NORTEX PROJECT

### Family Health History in Diverse Healthcare Settings

NorTex is participating in a multisite project with Duke University, the Medical College of Wisconsin, the Air Force, Essentia Health, and UNTHSC Department of Family Medicine in an implementation-effectiveness study to investigate the use of the MeTree tool to collect family health history data. MeTree, a Family Health History Clinical Decision Support tool, is a patient facing tool that provides disease risk-stratification to both patients and providers. In previous studies, several perceived barriers for the use of this type of tool

were identified, including limited time during a patient visit and lack of patient knowledge regarding their family health history. The primary goal of this project is to optimize the collection of patient-entered family health history (FHH) in diverse clinical environments for coronary heart disease, thrombosis, and selected cancers. Additionally, the study aims to assess both the clinical and personal utility of FHH. Patients are asked to complete an electronic FHH survey and receive a risk assessment and disease prevention report. This report is available to providers and is discussed with each patient during their next appointment. Recruitment for this study is projected to end in December 2016. For more questions, please call 817-735-0522.

This project is funded, through Duke University, by the National Human Genome Research Institute (NHGRI).

FEATURED

## COMPLETED NORTEX PROJECT

### Exploring the Role of Protective Factors on Depressive Symptoms among Mexican American Adolescents

Using the Social Ecological Model (SEM), this research explored protective factors for depressive symptoms in a cross-sectional sample of 144 Mexican American adolescents. Participants aged 10-14 and their legal guardians were evaluated based on exposure to seven protective factors: 1) acculturation 2) self-worth 3) positive physical development 4) consumption of family meals together 5) parent attendance of child events 6) neighborhood safety and 7) presence of recreation centers. The total number of protective factor exposures was categorized into four levels: 1, 2, 3, ≥4 exposures and used in a logistic regression model as the exposure of interest with depressive symptoms as the outcome. Of the 74 boys (51% of sample), 10 (7%) had depressive symptoms, compared to 20 (14%) girls. Logistic regression adjusting for gender showed a relationship between protective



factor exposures (predictor variable) and depressive symptoms (outcome variable). Poverty, parent income, and BMI were not significantly associated with depressive symptoms. The model showed that for each increasing level of protective factor exposure, there was a 0.168 (CI: 0.058, 0.490) odds for depressive symptoms. The results of this study support the role of protective factors in reducing depressive symptoms among Mexican American adolescents.

This project was funded by a collaborative intramural project between the UNT Health Science Center and Universidad Autónoma del Estado de México (UAEM).

# Drive the Difference Summit

*Leading Innovation in  
Patient Safety*



## RECENT PUBLICATIONS AND PRESENTATIONS

NorTex research has been presented at local, national, and international conferences over the past year! We will see you at the North American Primary Care Research Group Annual conference in November!

### PRESENTATIONS

**Balyakina E, Fulda KG, Franks S, Cardarelli K, Hinkle K. (November 2015).** "Association between healthcare provider type and intent to breastfeed among expectant mothers." 143rd APHA Annual Meeting and Exposition, poster presentation; Chicago, IL.

**Mallaiah J, Cross D, Fulda K, Espinoza A, Zhang J. (April 2016).** "Identifying provider and patient barriers to the implementation of MeTree Family Health History Clinical Decision Support (FHH CDS) tools." 92nd TPHA Annual Education Conference, poster presentation; Galveston, TX.

**Espinoza A, Raines-Milenkov A, Fulda K, Wilder M, Lee M, Salyer-Caldwell A. (April 2016).** "Preconception care and reproductive life planning: engaging primary care providers." 92nd TPHA Annual Education Conference, poster presentation; Galveston, TX.

**Namuduri A, Franks SF, Fulda K, Habiba N. (April 2016).** "Internalizing behaviors in Hispanic boys predict overweight/obese status." ACOFP 2016 Annual Convention and Scientific Seminars, poster presentation; San Juan, Puerto Rico.

**Cung T, Fulda K, Franks S. (April 2016).** "Internet accessibility and perceptions for possible online interventions." ACOFP 2016 Annual Convention and Scientific Seminars, poster presentation; San Juan, Puerto Rico.

**Fernando S, Gehlsen J, Fulda K, Bowman WP, Habiba N. (June 2016).** "The association between liver enzyme values and risk for type 2 diabetes mellitus among Hispanic children aged 10-14." Annual Meeting of the Society for Pediatric and Perinatal Epidemiologic Research (SPER), poster presentation; Miami, FL.

**Fulda KG, Franks S, Fernando S, Ebert D. (Accepted for November 2016).** "Relationship between waist to hip circumference and metabolic risk factors in Mexican American adolescents 10-14 years." North American Primary Care Research Group, poster presentation; Colorado Springs, CO.

To access previous NorTex Newsletters  
<https://www.unthsc.edu/research/nortex/newsletters/>

## MEMBER HIGHLIGHT: DR. ISAAC WATEMBERG



As a family practice primary care physician in Fort Worth, Texas, Doctor Isaac Waternberg prides himself on being a great listener and on understanding the holistic needs of his patients and their families. A native of Barranquilla, Colombia, Doctor Waternberg received his medical degree from Universidad Del Norte, Colombia in 1986.

After graduation, Doctor Waternberg worked as a research assistant in the Liver Transplant Department at Baylor University Medical Center in Dallas and collected data for scientific publications. He has also co-authored six articles. He joined the family practice residency program at Metro Health Hospital in Cleveland, Ohio, and completed it in 1997.

For two years, he worked at Baylor All Saints Hospital in Ft. Worth. Following his time at Baylor, Doctor Waternberg was employed with UNTHSC for 14 years within the Community Medicine Department at the JPS South Campus Clinic where he served as medical director and taught medical students.

Doctor Waternberg joined Texas Health Care three years ago as a family practice physician and sees patients in the clinic at 1307 8th Avenue, Suite 106.

Doctor Waternberg also serves as the Principal Investigator for the Ventavia Research Group. The Fort Worth based organization coordinates outpatient clinical trials in an efficient manner and in the highest standard of regulatory compliance. Doctor Waternberg's work primarily focuses on supervising clinical trials in diabetes, hypertension, ulcerative colitis, and Crohn's disease treatment. In addition to these areas, Doctor Waternberg also oversees clinical trials involving the development of preventive vaccines for meningitis, Clostridium difficile and flu. (If you are interested in participating in one of his clinical trials, please call 817-348-0228 for additional information).

Doctor Waternberg enjoys traveling, reading, and photography. He is a proud husband and father of 5 kids.



### MISSION

Create solutions toward a healthier community through interdisciplinary primary care, public health service, research and education.

### VISION

Be the team of choice for innovative primary care and public health research.