Who is on my team: Insiders' perspective from primary healthcare

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Context

- Teamwork is crucial to delivery of high-quality primary care
- The Patient-Centered Medical Home (PCMH) model requires primary care teams built around patients' needs[1]
- However, currently:
  - Scope of primary care teams has been arbitrarily defined in the literature
  - We lack an understanding of "who is on the team" from the insiders' perspective
  - Leads to barriers in designing for supporting teams and teamwork
- Categories of definitions of team scope/membership in the literature
  - Communication/interaction[2]
  - Shared goal/mission[3]
  - Structure[2][3]
  - Assigned roles[2]
  - Shared equipment/task[4]
  - Personal relationship[5]
  - Pod[6]

Objective: To understand how professionals working in primary care clinics define the scope of their teams

Study Design
- In-depth cognitive-work interviews with primary care professionals asking about who was on their team
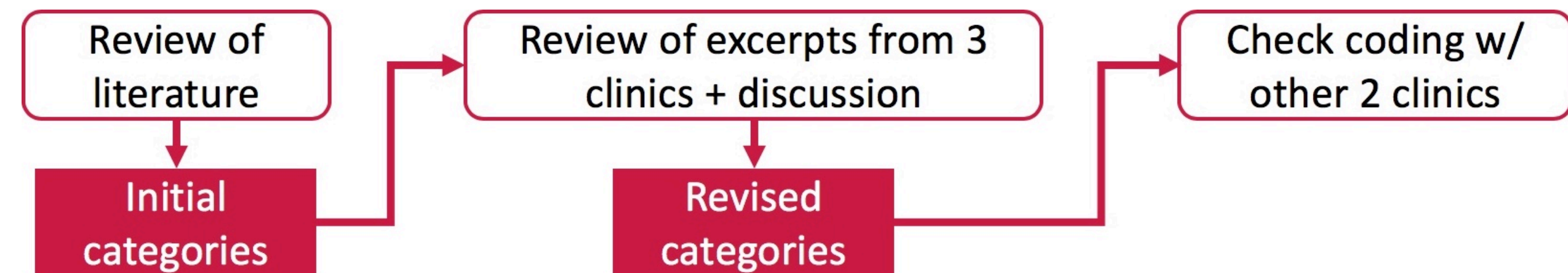- Directed content analysis of interview excerpts

Setting
- Five Midwestern primary care clinics with varying sizes, patient populations, team structures, and ownership models

Participants
- 64 primary care professionals, including:
  - 9 Physicians (Phys), 3 Advanced Practice Professionals (APPs – Nurse Practitioners & Physician Assistants)
  - 12 Nurses (RN), 11 Medical Assistants (MA)
  - 29 professionals with other roles, e.g., Case Manager, Social Worker, Pharmacist
  - For each clinic, at least 2 Physicians/APPs and the RN/MA they commonly worked with participated

Data analysis

Review of literature → Initial categories → Review of excerpts from 3 clinics + discussion → Revised categories → Check coding w/ other 2 clinics

Results Table

Categories & Definition * = new from data analysis	Example Excerpts	Mentioned by % participants
Assignment — * **Pairing - physician/APP & nurse/MA:** Assigned fixed pairing relationship between a physician/APP and the nurse/MAs performing patient rooming.	"… I took the PC program and kind of just got thrown in with [Phys name] one day …" (MA)	33%
* **Pairing - APP/resident and supervising physician:** Assigned fixed relationship between an APP or resident and his/her supervisor/mentor physician.	"So [Phys name], I think, brought me here, and from my conversation with him being hired, with the idea of setting up more of a team. … And then there was a definite pairing of me working with him to assist him primarily with his patient panel. And we called it the [Phys name – APP name] Care Team. …" (APP)	6%
* **Other assignment:** A professional is assigned to a group with different roles than his/her own to support their work; also include discussions about departments.	"So there's two care coordinators here. We have two teams, so there's one for each team. So [Care Coordinator name] works on my team, on the [team name] team…" (MA)	44%
Collaboration — **Shared tasks:** Discussion about sharing the tasks with other professionals making them part of the team.	"I think, yeah, just other physician's assistants and faculty, I think they aren't, on a day-to-day basis, as much of the team, but I, you know, I care for their patients, they care for mine. We work together, we collaborate." (Phys/APP)	78%
* **Resource:** "Borrowing" the "resource" (e.g. expertise, time, control over something) from other professionals makes them part of the team. Also include any talk regarding the frequency of interaction.	"I think like lab staff, radiology staff, I see them as part of the team. I mean, like the managers, clinic manager, nurse supervisor, front desk manager, just as far as everything I do, I do some other like group visit work and, you know, they help with those things." (Phys/APP)	67%
Shared goals: Discussion on shared goal of the team (versus of an individual) - e.g. meet patient needs.	"And over the last three years in my role as a medical director, I've been trying to convey day after day after day culturally that that's what we're all aspiring to achieve…" (Phys/APP)	39%
* **Structure:** Discussion on team structure, leadership, etc. This also includes discussions about one physician/APP identified as a "preferred provider" among a few providers.	"Well, we have more of a pyramidal structure, so I'm like the, you know, the doctor boss person and then everybody else is on my team." (Phys/APP)	28%
Co-location — * **Workbench:** Discussion about including certain professionals as part of team because they are co-located within a same space/desk.	"… Probably the people who work in the nurses' station would be the closest team, I guess, the nurses and the other MAs. …" (MA)	22%
Pod: Discussion about including certain professionals as part of team because they are co-located within the pod; or using "pod" to refer the team.	"Yeah, so it's [Phys name]'s pod. It's [Phys name], [Phys name], … [RN name], the triage nurse. There's an open position right now, which was just hired, [RN name], who will also be a triage nurse. …" (OCTM)	17%
* **Clinic:** Discussion about including certain professionals as part of team because they are co-located within the clinic.	"INTERVIEWER 1: Okay, so it's pretty much everyone in the clinic is on your team. RESPONDENT: Yeah, that's a better way maybe to put it is we're all on the same team." (Phys/APP)	39%
* **Size** — Discussion regarding having many/few people makes it more/less like a team.	"… But other than that, we're such a small clinic, I think we're one big team." (MA)	33%
Relationship — Expression of personal relationship with other professionals - including length of time working together, trust between each other, appreciation of others' work, feeling close to other team members, etc.	"In terms of our team, I think it's been really easy to get to work with a nice group of people. Between me and [MA name], my MA, she seems to kind of anticipate the things that I need and makes my day run pretty smooth. When I don't have her, and I have a substitute, I often am like where's [MA name]?" (Phys/APP)	33%
* **Schedule** — Discussion on how a professional's working schedule impacts whether s/he or any other professional is included in the team or not.	"… when [Phys 1 name] is here, I'm her primary nurse, as [Phys 1 name]'s, and I room with [Phys 1 name] from start to finish, and still do the messages, still do the phones, mail, refills, anything that comes through. And then I float over and help on [Phys 2 name]'s side. Then the other days when she (Phys 1) is not here, I'm his (Phys 2's) primary nurse, which I take care of phones, mail, messages, scheduling, rooming." (RN)	33%

Key Take-aways

- Primary care professionals rely on diverse factors to form their own definition of the scope of their 'team'
- Frequency of each category being mentioned varies
- Preliminary results based on 5 clinics only

Discussion

- The variation in perception of team scope should be taken into consideration in terms of technology design, practice management, staff scheduling, team training, etc.
- Further analyses should evaluate how work-system factors, including clinic size, organizational culture, patient population, etc. impact the definitions of team scope in these clinics

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