## RESEARCH BRIEF





# Interprofessional Teams and Capacity in Collaborative Primary Care: A **Rapid Scoping Review**

#### Summary

We conducted a rapid scoping review to understand what is and is not known in the literature about whether and interprofessional primary care (IPCTs) impact the capacity of the most responsible clinician to serve more patients. The studies varied in how capacity was measured and optimized through IPCTs. Our study highlighted the paucity of research on the topic and the need for future work to elucidate the specific contexts and mechanisms through which IPCTs can optimize primary care capacity.

## **Implications**

Researchers, clinicians, and health system planners can use the results of this review to inform future research, primary care workforce plans, and ongoing investments aimed at addressing the primary care crisis. This rapid scoping review highlights that more studies are needed to determine exactly how interprofessional care teams optimize primary care capacity. Such future studies should aim to standardize the measurement of primary care capacity to better analyze this relationship. Future research exploring the qualitative research in this area may also facilitate richer context-specific insights that may be of importance for future implementation efforts of team-based models of care.

Reference: Tricco A, Kiran T, Ivers N, et al. Collaborative Primary Care: The impact of Interprofessional Teams on Panel Size: A Rapid Scoping Review. 2023.osf.io/cgvjn

For more information, please contact **Andrea Tricco** 

(Andrea.Tricco@unityhealth.to).

#### What is the current situation?

Interprofessional primary care teams are pursued often to improve access to primary care services and increase capacity within the health system for more patients to be served. However, the relationship between interprofessional primary care teams and the capacity to serve more patients has yet to be synthesized.

### What is the objective?

To conduct a rapid scoping review and investigate what is known about the impact of interprofessional primary care teams on a clinician's capacity to serve more patients.

#### How was the review conducted?

- The scoping review was conducted using the JBI guide and the WHO guide for rapid review methods. Results were reported using the Preferred Reporting Items for Systematic Reviews and Meta-Analysis extension for Scoping Reviews (PRISMA ScR).
- We searched MEDLINE for eligible English studies from 2000 to
- Included studies reporting: (Population) outpatient groups and primary care clinicians working in team-based collaborative settings providing a range of services, (Concept) core group of health professionals working together with shared patients, and (Context) high-income countries.
- The main outcome of interest was the capacity for the clinician to care for more patients. Other outcomes such as patient health, clinician experience, and cost of care were also explored.

#### What did the review find?

- We screened 14,639 citations and 853 full-text articles. 35 studies were included in the rapid scoping review, the majority of which had a quasi-experimental or observational study design.
- 28 of the 35 included studies showed increased patient care capacity after implementation or expansion of team-based care, of which 20 studies showed improvements in primary care capacity.
- There was substantial variation across studies in how capacity was measured. This suggests a need to standardize the measurement of how team expansion impacts care capacity.
- The limited number of studies included in this review suggests a need for more evaluations of team-based care on patient care capacity.
- Overall, findings suggest that further research is needed to elucidate the specific contexts and mechanisms through which IPCTs can optimize primary care capacity.