Conference: Canadian Association of Occupational Therapists National Conference, Vancouver BC June 20-23rd, 2018

Session ID# S37 Title: Measuring the value of interprofessional primary care teams Saturday 9:30:00 AM - 10:00:00 AM | Junior Pavilion Foyer

Authors Contact:

Nicole Bobbette (Queens University, Kingston) nicole.bobbette@queensu.ca
Catherine Donnelly (Queen's University, Kingston) catherine.donnelly@queensu.ca
Amanda Mofina (Queen's University, Kingston) 12am67@queensu.ca
Rachelle Ashcroft (University of Toronto, Toronto) rachelle.ashcroft@utoronto.ca
Carol Mulder (Association of Family Health Teams of Ontario, Toronto) carol.mulder@afhto.ca

Abstract:

Introduction: There is continued emphasis on interprofessional primary care (IPC) models however much of what is known about this model is based on physician based performance indicators. Part of the challenge is determining how to measure the value of interprofessional collaboration. **Objectives:** 1) identify current practices supporting and measuring the impact of collaboration in IPC teams, and 2) identify IPC performance indicators from an interprofessional health provider perspective. **Methods:** A qualitative study; part of a larger mixed methods developmental evaluation to examine performance measurement in IPC teams. A pre-conference workshop for interprofessional health providers took place at the Association of Family Health Teams of Ontario Annual Meeting. Six questions on IPC performance indicators guided the workshop. Each question and responses were individually reviewed by two authors and 11 categories that best represented the responses were created. Frequencies for each category were determined. **Results:** 283 interprofessional health providers from fourteen health professions working in IPC teams participated. Top three elements of interprofessional collaboration (total responses; n= 628) were co-booking (n=193), communication (n=146) and attitudes (n=75). Top three performance indicators currently used to demonstrate IP collaboration (total n= 298) were patient experience (n=71), patient health status (n=35) and within team referrals (n=30). **Conclusions:** Participants were able to identify factors that foster collaboration but had more difficulty identifying performance indicators to measure the impact of collaboration on the team or population health. Results suggest that adding an indicator of team processes could be valuable way of measuring IPC teams.

Summary:

Despite the focus on interprofessional primary care (IPC) teams there is less emphasis on measuring the value of these teams. This study identified current practices that support collaboration in IPC teams and IPC performance indicators. Patient experience, patient health status and within team referrals were the most frequently identified indicators.