

# When Is a Team Not a Team?

**Meanings get slippery when words become badges of progress.**

**N**owadays, when most people consider it desirable for a family medicine practice to be a “patient-centered medical home” (PCMH) and to involve “care teams,” such terms tend to be used somewhat loosely. People often use the terms without fully understanding them – and, of course, it’s tempting to think that one’s practice is already a PCMH if it has a care team in place, even though a PCMH requires much more than that. The more the concept of team care seeps into the spirit of the day, the more likely one is to hear doctors referring to “my team.” The mere appellation does not make a group a team, however.

As Berdi Safford, MD, and Cynthia Manning, MA, make clear in the cover story (see page 26), a care team in the current sense of the word is a group unified by open communication, shared values, and a shared aim. And for a care team, that shared aim needs to be taking the best care possible of patients, not pleasing the boss or making money or anything else. Team members are not only cross-trained but ready and willing to fill in for others; they must shore up each other’s weaknesses and capitalize on each other’s strengths; even more, they need to be able to trust and respect one another as contributors to the common effort. They can’t consider their jobs “just a job.” They need to have ideas for improvement and be ready to share them. They need to feel empowered to point out errors – including errors made by physicians – without pointing blame.

The importance of the care team is emphasized throughout the NCQA standards for PCMH recognition. Basically, if you don’t have a high-functioning care team, you don’t have a PCMH. And difficult as it may be to implement an electronic health record, teamwork can’t be installed as easily. While the first requisite for a good care team is certainly to have the right team members – including a physician who actually views himself or herself as a team member – such teams are made, not born. They require training, nurturing, and (pardon the rather hackneyed expression) team building. For now, such teams are still pretty rare, although practices across the country are working on developing them. If you haven’t started, now is the time to begin. We’ll try to help with more articles like the one in this issue and those in our “Care Team & Staffing” collection (<http://www.aafp.org/fpm/careteam>).



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