



# The Simple Question That Made Me Go All-in on Team-Based Care

## Skilled primary care physicians spend an inordinate amount of time doing mundane tasks. Why?

I recently was talking to a colleague who was about to visit The Camden Coalition — an organization devoted to improving the health and well-being of people with complex medical needs by promoting fair and comprehensive care.<sup>1</sup> I recalled attending a lecture by the group's founder, Jeffrey Brenner, MD, a primary care physician, more than 10 years earlier. It was one of the first times I truly grasped the value of team-based care.

He asked a series of questions:

"Raise your hand if you order mammograms."

"Raise your hand if you've gotten the results of those mammograms."

"Raise your hand if you've seen normal mammograms."

I sat in the back of the room (my usual location) and wondered where he was going with this. Then came the hook — "Why?"

Why, he wondered out loud, would a room full of experienced clinicians spend valuable time tracking down a bunch of normal results, when what we really want to do is act on the abnormal ones?

This was eye opening for me. Why am I clicking through the chart looking for the last mammogram, when my staff could do that? Why am I the one ordering

influenza vaccines for each patient when everyone over six months old needs one? The list goes on and on.

Good team-based care offloads these tasks from physicians, giving us more time to talk to and care for our patients. Dr. Brenner, whose personal story is interesting,<sup>2</sup> has supercharged this process to create a comprehensive primary care system for society's most vulnerable.

As I get further into my career, I think about how much care my patients need and what I can and cannot do myself. I spend 20 minutes with them deciding whether they need their losartan adjusted, then look at their most recent A1C and debate increasing their metformin, followed by a quick glance at their immunization record to make sure their pneumonia vaccine is up to date. This leaves almost no time to discuss diet, smoking, or their dysthymia/borderline depression — not to mention social needs, family dynamics, or how their last vacation went. Only with my team's help can I hope to provide that kind of deep, relationship-based care.

For those just getting into team-based care, a nurse care manager is probably the first team member to add.<sup>3</sup> Identify your highest risk/highest need patients, then turn the care manager loose! I moderated a panel at the AAFP's FMX conference in October, during which two of our highly esteemed family medicine colleagues, Sarah Mullins, MD, and Jennifer Woodward, MD, agreed that having someone focus on your most vulnerable patients is

the first step in team-based care.

I occasionally think back to that day listening to Dr. Brenner, when my recalcitrance about team-based care resolved. Since then, I've been all-in, and it has been immensely helpful for my professional satisfaction. When I talk to my colleagues around the country, I hear their frustrations. We have a difficult job on the best of days, and at times it's like drinking out of the proverbial fire hose. I don't have rose-colored glasses on here; I know primary care physicians have struggles that team-based care can't solve.

My call to action, though, is that if you haven't yet embraced team-based care, try it. Pick something small to delegate and build from there. If you are already in a team-based environment, expand it.<sup>4</sup> Pick something challenging and see if it helps you save time. Ask the same question about your daily tasks that Dr. Brenner posed many years ago: "Why?" If the answer is "because only I can do it," then keep it on your list of responsibilities. But if the answer is "Maybe someone else can help me with this," then move it over to a team member. Maintain oversight and watch the process flourish! **FPM**

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1. Camden Coalition: About Us. Accessed Nov. 1, 2023. <https://camdenhealth.org/about-us/>

2. Gawande A. The hot spotters. *The New Yorker*. Jan. 16, 2011. Accessed Nov. 1, 2023. <https://www.newyorker.com/magazine/2011/01/24/the-hot-spotters>

3. Hodge KS, Brull JL. Care management in the real world: a small, private practice's journey. *Fam Pract Manag*. 2021;28(2):33-36.

4. Hopkins KD, Sinsky C. Taking team-based care to the next level. *Fam Pract Manag*. 2022;29(3):25-31.