# Project scope: implementing multidisciplinary teams in primary care

## 15/11/2022

### Research question

What is the evidence on effectiveness and cost effectiveness of multidisciplinary primary care teams supporting general practitioners?

What is the evidence on successfully implementing multidisciplinary team working in primary care/GP practices?

What are patient and clinician views on multidisciplinary primary care teams supporting general practitioners?

### Inclusion criteria

The selection of studies for inclusion in the literature review element of the project will be based on the following criteria:

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| **Population** | Adult accessing GP services (vaccination services, pharmacotherapy services, community treatment and care services, urgent care services and additional professional services including acute musculoskeletal physiotherapy services, community mental health services and community link worker services). |
| **Intervention** | GPs supported by multi-disciplinary teams; primary care professionals working as part of an integrated team. |
| **Comparator** | GPs as expert medical generalist without support of MDT (i.e. GPs involved in all routine tasks) |
| **Outcomes** | Barriers and facilitators to implementation<br>Patient satisfaction / experience / views etc.<br>GP satisfaction / experience / views etc.<br>Waiting lists (in primary care and secondary care)<br>No. GP appointments |

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| | No. of home visits<br>No. GP contacts / per patient (esp. regular attenders)<br>No. / % secondary care referrals<br>Cost of MDT service<br>Costs of healthcare utilisation (e.g. GP appointments)<br>Offset GP workload |
| **Limits** | Study types:<br>Grey literature reports<br>Systematic reviews or meta-analyses<br>Observational studies (UK)<br>Economic evaluations<br>Qualitative studies<br><br>Economic analysis limited to data available within 'evidence pack' |

## Planned activities

SHTG have agreed on the following activities to support the development of an SHTG Assessment of multidisciplinary primary care teams supporting GPs.

1. Rapid evidence review of the published literature on:

    a. The effectiveness and cost effectiveness of MDTs within GP practices (primary care) for different patient populations [secondary literature and economic evaluations]

    b. Implementing MDTs in primary care, including the facilitators and barriers to implementation [secondary literature]

    c. Implementing multidisciplinary teams in primary care in the UK [primary literature]

    d. The views of patients and clinicians about MDTs in primary care [qualitative literature]

2. An economic evaluation using data from the GP contract implementation 'evidence pack' provided to us, supplemented by any available data from the rapid review, will explore the costs and potential consequences of the expansion of MDT provision in Scotland in terms of relevant outcomes (e.g. patient outcomes, incurred and avoided utilisation of acute care, GP input required and/or avoided). It will only be possible to include data where we are sufficiently confident that we understand how the required parameter varies (e.g. by NHS Board area, practice list size or time period of follow up) and it may not be possible to include data within the evidence pack if we cannot clarify sufficient details about the population to which it refers. We will apply the method used by NHS Lothian (pending further details of the method used) to estimate comparative GP time associated with the activity carried out by other MDT staff, with view to quantifying the efficiency of MDT expansion in recent years.

## End products

At the end of the project, SHTG will publish:

- SHTG Assessment (which will not include peer-review)

## Timescales (approximate)

1-month (December deadline date TBC)