OPERATIONAL EVIDENCE BRIEF

Strengthening the Implementation & Optimization of Team-Based Cancer Care (TBC) in BC

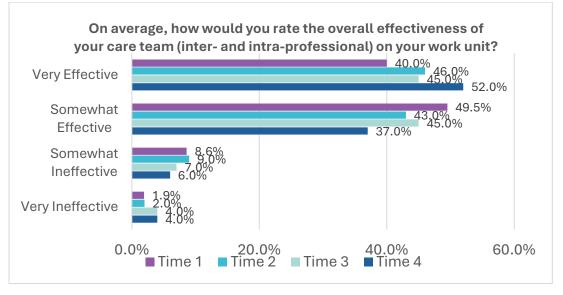
Purpose

To provide evidence-basedⁱ insights and recommendations to those responsible for the implementation, scaling, and optimization of TBC. Findings from the early evaluation highlight successes, challenges, and strategic priorities to ensure TBC continues to be effective and sustainable in achieving the intended goals.

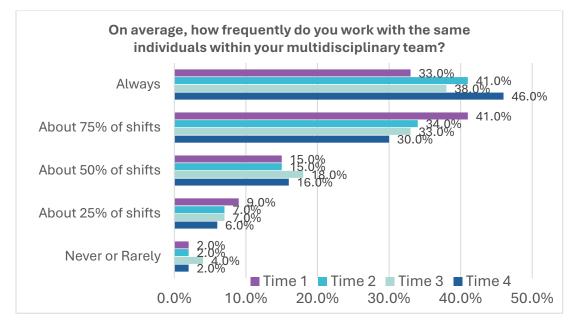
Key Preliminary Findings

1. Team Effectiveness is High – and Linked to Team Consistency

• On average 89% of staff rated their teams as somewhat or very effective.



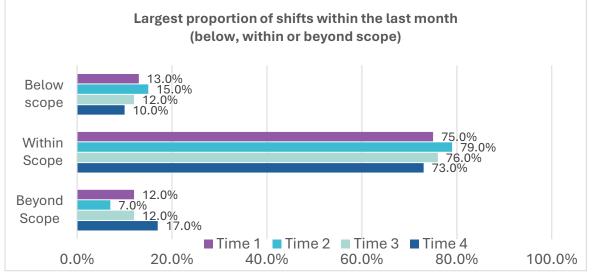
• On average 74% of staff and clinicians reported working with the same team members for at least 75% of their shifts. Staff who worked consistently with the same team members were 1.76 times more likely to rate their team as effective (p = 0.021).



• Staff described how consistent teams improve workflows, communication, and confidence in care delivery.

2. Under-Utilized Scope Reduces Team Performance

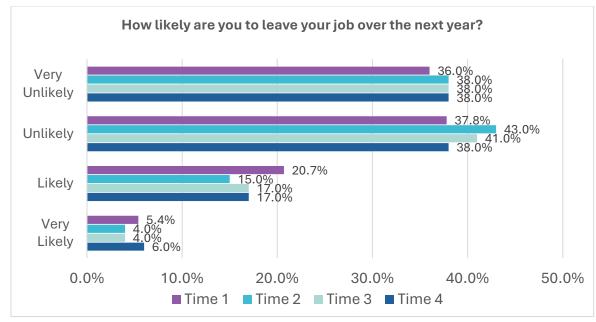
• In T1 working below scope was a significant predictor of lower team effectiveness.¹ The more time staff spent working below scope, the less likely they were to view their team as effective.



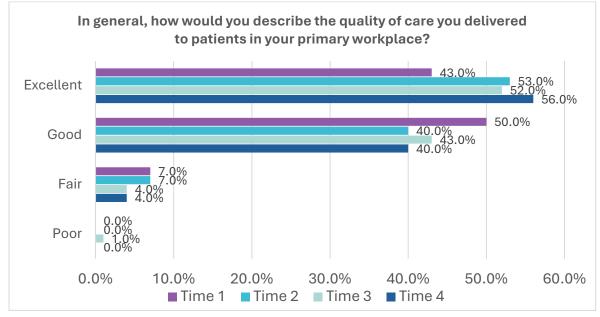
- Even small increases in underutilization had a measurable negative impact. Each 1% increase in shifts worked below scope was associated with a statistically significant decline in perceived team effectiveness. Specifically, the odds of reporting higher team effectiveness decreased by approximately 6% (OR = 0.94; 95% CI: 0.92–0.97).¹
- Qualitative feedback linked practicing below scope to staffing levels and misaligned workflows.

3. Workforce Retention is Strong, but Staffing Gaps Persist

• On average 77% of staff said they are unlikely or very unlikely to leave their role in the next year.



- Participants suggested improving retention by addressing workload imbalances, streamlining workflows, offering flexible scheduling (e.g., 4-day workweeks), optimizing scope of practice, and reducing administrative burden.
- Positive team culture, feeling valued, and being able to practice to full scope were cited as key reasons for staying.



4. Patient Care Quality is Rated Highly

• On average 92% of staff rated the overall quality of care they provided as good or excellent, and 91% of staff would recommend BC Cancer as a place to receive care.

What's Working Well

- Consistent team assignments are supporting stronger relationships and more coordinated care.
- Understanding of scope of practice is improving over time, which is helping teams function more effectively.
- Job satisfaction is high, with many staff reporting a desire to stay in their roles
- High-quality, safe care is consistently being delivered, even in the context of ongoing staffing pressures.
- Staff are confident in their workplace, with most saying they would recommend BC Cancer both as a place to receive care and as a place to work.

Opportunities for Improvement

- **Increase team consistency** by using staffing and scheduling models that keep teams together and build in regular interdisciplinary touchpoints (e.g., team huddles, care planning, and case reviews).
- **Enable full-scope practice** by ensuring team members have the time, support, and shared understanding needed to work to their full capacity. This includes:
 - Clearly aligning roles, responsibilities, and scopes of practice across disciplines
 - Providing targeted training (e.g., tumour-specific knowledge)

- Ensuring consistent clerical and administrative support, so clinicians are not pulled into tasks outside their role
- Embedding routine conversations—involving physicians, nurses, allied health, and support staff—to align on team roles, expectations, and how responsibilities are shared in practice
- Onboarding new staff into TBC workflows, communication practices, and team norms early on

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• **Co-locate teams to support real-time collaboration.** Where teams work matters. Bringing team members into shared spaces—rather than working across separate or distant locations can reduce communication delays, improve workflow, and strengthen team consistency.

Link to publication	Lambert et al. AMC Cancer (2025) 25:371	BM
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	RESEARCH	Oper
	An early evaluation of team co and scope optimization in tea care	
	Leah K. Lambert 1,p , Farinaz Havaei P., Scott M. Beck 1,2 , Andy Ma 2 , John Dan Le 1,2 and Ryan Woods 1,2	Larmet ¹ , Jagbir Kaur ¹ , Nassim Adhar
	Abstract Background The British Columbia (BC) government has made signifi of team based care (TBC) in its provincial comprehensive cancer cont purposel, efforts towards: (a) establishing/expanding multidisciplina pacifica and (a) increasing are team consideration. Study objectives association between TBC elements and team effectiveness and (B) sta effectiveness.	rol program. TBC implementation invo ry care teams, (b) optimizing scope of clude an early-phase evaluation of (i) t
Contact: Leah.Lambert@bccancer.bc.ca	Methods A strain of fire surveys over a 2-year period will be adminis- inplementation of TEC. This study draws on data from the first of the 2022. Bigble respondents included 399 program employees—span and unit clariss—working within TEC at the time of survey deploymer researcher-developed quasitions that were alther closed or open-end team consistency, team effectiveness, scope of practice, and demogra	five planned surveys, administered in h ing various roles such as physicians, ni t. The survey included both validated ad, including measures of team compo phics. Quantitative data were analyze
	descriptive and regression analysis; qualitative data were analysed gui Reutits . Collection dersponses totaled 121, with the majority of respon- (50%), and working in direct patient care (77%). Regression analyses in working with the same team members and fill bave proportion of the predictions of higher team effectiveness ratings. Qualitative data highli over-titidia (scoper of practice. Furthermore, effective communication scope of practice, and strong interpresental intellionships were highling among multidisciplinary care teams.	dents being women (7698), full-time er idicated that (i) higher frequency of co ifts practicing below scope are both is ghted staffing levels as a driver of und n, enhanced knowledge of each team
	Conclusions Patiliminary findings from the first of the prospective su optimization as drivers of effective tearnwork in the early implementa	

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¹ Lambert, L.K., Havaei, F., Beck, S.M. *et al.* An early evaluation of team consistency and scope optimization in teambased cancer care. *BMC Cancer* **25**, 371 (2025). https://doi.org/10.1186/s12885-025-13644-9