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## Title

Comprehensiveness in primary care: Findings from a scoping review

## **Priority 1 (Research Category)**

Healthcare Services, Delivery, and Financing

## **Presenters**

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## **Abstract**

Context: Comprehensiveness is a central element of primary care and family medicine but has not been clearly and consistently conceptualized in literature. The lack of an encompassing framework for comprehensiveness reduces our ability to measure and evaluate its presence and impact in primary care delivery. Objective: To examine the nature and extent of the literature on comprehensiveness in primary care and map the current definitions and attributes of comprehensive primary care. Study Design: Scoping review. Setting or Dataset: English language literature search with no limits on year of publication in MEDLINE (Ovid), CINAHL, and EMBASE. A grey literature search was undertaken using Google, as well as websites recommended by team members and experts in the field of primary care. The search included a set of terms for the concept of "comprehensiveness" and a set of terms for "primary care." Population Studied: Sources that address the topic of comprehensive care in the primary care or family medicine setting were included. After a multi-step review, a total of 359 articles were included for extraction. Outcome Measures: Primary outcomes include definitions of comprehensiveness and key attributes of comprehensiveness in primary care. Results: We identified 9 key comprehensiveness attributes and 3 enablers of comprehensiveness in the definitions included in this review. We organized the comprehensiveness attributes into two domains: breadth of care (services, settings, health needs and conditions, patients served, and availability) and approach to care (one-stop-shop, whole person care, referrals and coordination, and longitudinal care). The three enablers of comprehensiveness included structures and processes, teams, and competency. Conclusions: The identification of defining attributes of comprehensiveness contributes much-needed shape and form to this key aspect of primary care, which has not been clearly and consistently conceptualized in the literature. The further identification of the domains and enablers provides a structure for thinking about comprehensiveness that will aid future decision making about the delivery of comprehensive primary care, as well as the development of relevant measures to assess comprehensiveness and its impact.

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