

Core Competencies for Interprofessional Collaborative Practice

Sponsored by the Interprofessional Education Collaborative*



Pre-publication recommendations from the IPEC Expert Panel

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*IPEC sponsors:

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Team-Based Competencies: Building a shared foundation for education into clinical practice

IPEC and the expert panel to develop competencies for interprofessional collaborative practice appreciate the support of the Health Resources and Services Administration, Josiah Macy Jr. Foundation, Robert Wood Johnson Foundation, and ABIM Foundation in sponsoring this conference to use the recommendations of the expert panel as a stimulus for discussion of the core issues surrounding preparation for interprofessional, collaborative practice.

The goals for this conference are to:

- Examine a set of foundational competencies to guide the professional socialization of future health professionals in delivering interprofessional collaborative care that is timely and consistent in quality.
- Assess the relevance of these core competencies for the current practice of interprofessional team-based clinical care and identify any significant gaps.
- Develop an action plan to catalyze the widespread implementation of these competencies in health professions education and practice including identification of critical opportunities and challenges.

BACKGROUND

Interprofessional Education Collaborative (IPEC)

In 2009, six national education associations of schools of the health professions (AACN, AACOM, AACP, ADEA, AAMC, and ASPH) formed a collaborative to promote and encourage constituent efforts that would advance substantive interprofessional learning experiences to help prepare future clinicians for team-based care of patients.

To help guide educational programs and stimulate joint learning in the six professions, the collaborative convened an expert panel, with two appointees from each association, to recommend a set of core competencies that will lay the foundation for interprofessional collaborative practice.

The panel began its work by reviewing all relevant statements on interprofessional competency previously developed by organizations in the United States and Canada, as well as by international groups and agencies.

Interprofessional Education Collaborative Partners

American Association of Colleges of Nursing

American Association of Colleges of Osteopathic Medicine

American Association of Colleges of Pharmacy

American Dental Education Association

Association of American Medical Colleges

Association of Schools of Public Health

IPEC EXPERT PANEL RECOMMENDATIONS

Core Competencies for Interprofessional Collaborative Practice

The panel's recommendations are available to serve as the stimulus for dialogue and development of an action plan to catalyze the widespread implementation of these competencies in health professions education and practice, with particular focus on opportunities for and challenges to implementation.

Interprofessional Competency Domains

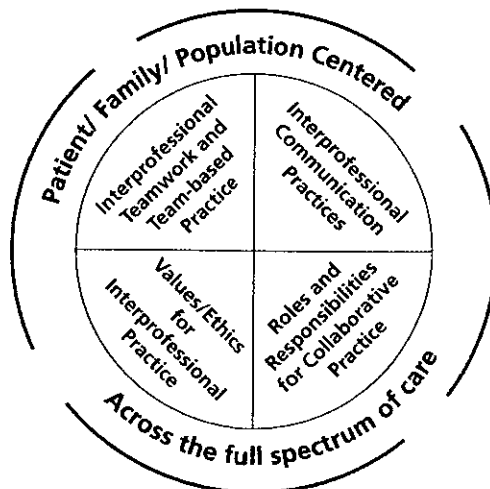
The panel identified four core competency domains that draw meaning from the specific contexts of patient care. Development and demonstration of these competencies require reflection, flexibility, and adaptability to the spectrum of care contexts – from prevention and health maintenance to acute, chronic, long-term, and palliative care – and the overall goals of care in specific situations. These competencies are a key adjunct to the general professional competencies of the individual health professions.

- Values/Ethics for Interprofessional Practice
- Roles/Responsibilities for Collaborative Practice
- Interprofessional Communication
- Interprofessional Teamwork and Team-based Care

Competency Sets

Competency statements were drafted to include the following properties: relationship-centered, process-oriented, able to be integrated through the learning continuum, applicable across practice settings and professions, stated in "common language," patient-centered, outcome driven. Graduates of health professions programs should be able to demonstrate ability to perform each competency in the context of patient care and population health.

Interprofessional Collaborative Practice Core Competency Domains



The Learning Continuum

Values/Ethics for Interprofessional Practice

Work with individuals of other professions to maintain a climate of mutual respect and shared values.

- ▶ Place the interests of patients and populations at the center of interprofessional health care delivery.
- ▶ Respect the dignity and privacy of patients while maintaining confidentiality in the delivery of team-based care.
- ▶ Accept and embrace the cultural diversity and individual differences that characterize patients, populations, and the health care team.
- ▶ Recognize and respect the unique cultures, values, roles/responsibilities, and expertise of other health professions.
- ▶ Work in cooperation with those who receive care, those who provide care, and those who contribute to or support the delivery of prevention and health care services.
- ▶ Develop a trusting relationship with patients, families, and other team members (Canadian Interprofessional Health Collaborative 2010).
- ▶ Demonstrate high standards of ethical conduct and quality of care in one's contributions to team-based care.
- ▶ Manage ethical dilemmas specific to interprofessional patient/population-centered care situations.
- ▶ Act with honesty and integrity in relationships with patients, families, and other team members.
- ▶ Maintain competence in one's own profession appropriate to scope of practice.

Roles/Responsibilities for Collaborative Practice

Use the knowledge of one's own role and the roles of other professions to appropriately assess and address the health care needs of the patients and populations served.

- ▶ Communicate one's roles and responsibilities clearly to patients, families, and other professionals.
- ▶ Recognize one's limitations in skills, knowledge, and abilities and engage others when appropriate.
- ▶ Engage diverse health care professionals who complement one's own professional expertise, as well as associated resources, to develop strategies to meet specific patient care needs.
- ▶ Explain the roles and responsibilities of other care providers and how the team works together to provide care.
- ▶ Use the full scope of knowledge, skills, and abilities of available health professionals and health care workers to provide safe, timely, efficient, effective, and equitable care.
- ▶ Communicate with team members to clarify each member's responsibility in executing components of a treatment plan or public health intervention.
- ▶ Forge interdependent relationships with other professions to improve care and advance learning.
- ▶ Engage in continuous professional and interprofessional development to enhance team performance.
- ▶ Use the unique and complementary abilities of all team members to optimize patient care.

Interprofessional Communication

Communicate with patients, families, communities, and other health professionals in a responsive and responsible manner that supports a team approach to maintaining health and treatment of disease.

- ▶ Choose effective communication tools and techniques, including information systems and communication technologies, to facilitate discussions and interactions that enhance team function.
- ▶ Organize and communicate information with patients, families, and health care team members in a form and format that is understandable, avoiding discipline-specific terminology when possible.
- ▶ Express one's knowledge and opinions to team members involved in patient care with confidence, clarity, and respect, and work to ensure common understanding of information, treatment, and care decisions.
- ▶ Listen actively and encourage the ideas and opinions of other team members.
- ▶ Give timely, sensitive, instructive feedback to others about their performance on the team, and respond respectfully as a team member to feedback from others.
- ▶ Use respectful language appropriate for a given difficult situation, crucial conversation, or interprofessional conflict.
- ▶ Recognize how one's own uniqueness, including experience level, expertise, culture, power, and hierarchy within the health care team, contributes to effective communication, conflict resolution, and positive interprofessional working relationships (University of Toronto 2008).
- ▶ Communicate consistently the importance of teamwork in community and patient-centered care.

Interprofessional Teamwork and Team-based Care

Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan and deliver patient/population-centered care that is safe, timely, efficient, effective, and equitable.

- ▶ Describe the process of team development and the roles and practices of effective teams.
- ▶ Develop consensus on the ethical principles to guide all aspects of patient care and teamwork.
- ▶ Engage other health professionals – appropriate to the specific care situation – in shared patient-centered problem solving.
- ▶ Integrate the knowledge and experience of other professions – appropriate to the specific care situation – to inform care decisions, while respecting patient and community values and priorities/preferences for care.
- ▶ Apply leadership practices that support collaboration and team effectiveness.
- ▶ Actively engage self and others to identify and constructively manage disagreements about values, roles, goals, and actions that arise among health care professionals and with patients and families.
- ▶ Share accountability appropriately with other professions, patients, and communities for outcomes relevant to prevention and health care.
- ▶ Reflect on both individual and team performance improvement.
- ▶ Use process improvement strategies to increase the effectiveness of interprofessional teamwork and team-based care.
- ▶ Use available evidence to inform effective teamwork and team-based practices.
- ▶ Perform effectively on teams and in different team roles in a variety of settings.

Selected Resources

- American Association of Colleges of Pharmacy. 2004. Center for the Advancement of Pharmaceutical Education. Educational Outcomes 2004. <http://www.aacp.org/resources/education/Documents/CAPE2004.pdf>
- Barr, H., Koppel, I., Reeves, S., Hammick, M., and Freeth, D. (2005). *Effective Interprofessional Education: Argument, Assumption and Evidence*. Oxford: Blackwell Publishing.
- Barr, H. (1998). Competent to collaborate: towards a competency-based model for interprofessional education. *Journal of Interprofessional Care*, 12, 181-187.
- Buring, S. M., Bhushan, A., Broeseker, A., Conway, S., Duncan-Hewitt, W., Hansen, L., and Westberg, S. (2009). Interprofessional education: definitions, student competencies and guidelines for implementation. *American Journal of Pharmaceutical Education*, 73(4), Article 59.
- Canadian Interprofessional Health Collaborative. (February 2010). A National Interprofessional Competency Framework. <http://www.cihc.ca/resources/publications>
- Institute of Medicine. (2003). *Health Professions Education: A Bridge to Quality*. Washington, D.C.: The National Academies Press.
- Walsh, C. L., Gordon, M. F., Marshall, M., Wilson, F., and Hunt, T. (2005). Interprofessional capability : a developing framework for interprofessional education. *Nurse Education in Practice*, 5, 230-237.
- Page, R. L. II, Hume, A. L., Trujillo, J. M., Leader, W. G., Vardeny, O., Neuhauser, M. M., Dang, D., Nesbit, S., and Cohen, L. J. (2009). ACCP White Paper. Interprofessional education: principles and application. *A framework for clinical pharmacy. Pharmacotherapy*, 29(3), 145e-164e.
- Salas, E., Rosen, M. A., Burke, C. S., and Goodwin, G. F. (2009). The wisdom of collectives in organizations: an update of the teamwork competencies. In Salas, E., Goodwin, G. F. and Burke, C. S. *Team effectiveness in complex organizations* (pp. 39-79). New York: Psychology Press.
- Quality and Safety Education for Nurses (QSEN), Competency KSAs, especially Teamwork and Collaboration. <http://www.qsen.org/definition.php?id=2>
- Suter, E., Arndt, J., Arthur, N., Parboosingh, J., Taylor, E., and Deutschlander, S.. (2009). Role understanding and effective communication as core competencies for collaborative practice. *Journal of Interprofessional Care*, 23, 41-51.
- Thistlethwaite, J., and Moran, M. (2010). Learning objectives for interprofessional education (IPE): Literature review and synthesis. *Journal of Interprofessional Education*, 24, 503-513.
- University of British Columbia, College of Health Disciplines. (2008). *The British Columbia Competency Framework for Interprofessional Collaboration*. Vancouver: University of British Columbia. <http://www.chd.ubc.ca/files/file/BC%20Competency%20Framework%20for%20IPC.pdf>
- University of Toronto, Centre for Interprofessional Education. *A Framework for the Development of Interprofessional Education Values and Core Competencies*. 2008. <http://ipe.utoronto.ca/IPE%20Curriculum%20Overview%20FINAL%20oct%202028.pdf>
- World Health Organization. (Winter, 2010). *Framework for Action on Interprofessional Education & Collaborative Practice*. Geneva: World Health Organization. http://www.who.int/hrh/resources/framework_action/en/index.html

Core Competencies for Interprofessional Collaborative Practice Panel Roster

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