

Consensus Outcomes from the 2010 All-Advisory Committee Meeting

On April 21, 2010 the HRSA Bureau of Health Professions held its third annual All-Advisory Committee Meeting, which focused on the topic of interprofessional competencies. During the meeting the members of the All-Advisory Committee engaged in consensus building activities to help them identify the following five interprofessional competencies for health professions:

- Person/patient/family/community-centered care
- Interprofessional team functions
- Quality improvement and patient safety
- Informatics
- Evidence based practice

The following charts detail the KNOWLEDGE, SKILLS & ABILITIES associated with each of the competencies.

Person/family/community-centered care:		
refers to the person in context with family, community within populations		
KNOWLEDGE	SKILLS	ABILITIES
Ethical, legal, social implications	Recognition of boundaries	Value shared decision making with empowered patients and families
Knowledge of diverse populations, family functioning and developmental levels	Ability to assess patient values, cultural preferences, social system support, health literacy and beliefs	Respect for the values of different cultural systems, and for family values
Knowledge of prevention and diagnosis levels		Value for prevention and health promotion
Principles of effective communication	Appropriately identifies when and how to use interpreters	Willingness to learn from patient/family, value use of interpreters
Knowledge of social determinants of health, knowledge of community and social service resources	Identifies and links appropriate social and community resources to meet patient health care needs	Appreciates the significance of health disparities
Knowledge of physical health and pathophysiology of disease	Provide care appropriate to need	Value patient needs

Interprofessional Team Functions		
KNOWLEDGE	SKILLS	ATTITUDES
Knowledge of roles and responsibilities of other health professionals	Knowledge of each team members role capabilities, achieving optimal results based on effectively engaging team members to operate at the top of their scope of practice.	Respect for each team member's role, scope of practice and contribution Respect for cultural and ethnic backgrounds Value the role of teams
Common understanding of priorities for patient care	Coordinates and integrates care processes across different settings Effectively manages handoffs/transition for patients or groups of patients	Trust and respect for collaborative practice to achieve best patient outcomes
Knowledge of common definitions/language Knowledge of active listening Self aware of style, and as a team	Communicate with other members to develop a shared language Ensure communication is accurate and timely	Respect for contributions of team Willingness to present point of view

member in relation to role strengths, limitation, biases	Demonstrates active listening	
Understand alternative mechanisms of conflict resolution	Ability to resolve and manage team conflicts	Respect team ethics, including confidentiality, resource allocation, and professionalism
Knowledge of situational leadership model	Appropriately demonstrates ability to lead based on context and goals	Value for different types of leadership and different styles within professional role implementation
Knowledge of feedback models	Demonstrates ability to give and receive constructive feedback	Open and flexible
Knowledge of group processes and stages	Demonstrates understanding of group dynamics in choices of approach in communication, problem solving, and rewarding success	Appreciation for the strengths and challenges of team-based delivery

Quality improvement and patient safety – Minimizes risk of harm to patients and providers through both system effectiveness and individual performance. Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.		
KNOWLEDGE	SKILLS	ATTITUDES
Understand basic safety	Identifies errors and hazards	Hold all team members mutually accountable - Common purpose
Knowledge of quality standards of care	Measures quality of care and implements basic safety design principles	Appreciate that continuous quality improvement is an essential part of the daily work of all health professionals
Knowledge of common safety issues with teams and how to avoid them		Assume personal responsibilities for safety and quality
Describe strategies for improving outcomes of care in the setting in which one is engaged in clinical practice	Use a variety of sources of information to review outcomes of care and identify potential areas for improvement	Value measurement and its role in good patient care
Analyze the impact of context (such as, access, cost or team functioning) on improvement efforts	Propose appropriate aims for quality improvement efforts	Appreciate that continuous quality improvement is an essential part of the daily work of all health professionals
Graduate level knowledge (below)		
Design, test, and evaluated safety interventions: CQI process	Address quality issues across all disciplines Reflect and measure errors and take corrective action	Appreciate the importance of data that allows one to estimate the quality of local care Appreciate how unwanted variation affects outcomes of care processes

Evidence based practice (EBP)		
KNOWLEDGE	SKILLS	ATTITUDES
Conceptual understanding of how evidence strength and relevance influences the choice of interventions in caring for the person, family and community	Questions rationale for routine approaches to care that result in less than desired outcomes or results in adverse events	Values the strengths and weaknesses of scientific and cultural bases for practice
Conceptual understanding of valid reasons for modifying evidence-based	Engages interprofessional colleagues in questioning and discussing current	High value for evidence based practice

clinical practice based upon variables including clinical expertise, population, person, family, community needs and circumstances	evidence for practice and facilitates consensus building regarding care interventions	
Knowledge of resources that provide evidence within and across disciplines and able to evaluate evidence sources	Ability to monitor and update evidence for clinical practice Ability to solicit, synthesize and integrate evidence from the alternative disciplines (multidisciplinary evidence from relevant sources)	Recognition of the lack of evidence in many areas of clinical practice

Informatics: meaningful use criteria – use data to inform practice. Use information and technology to communicate, manage knowledge, mitigate error, and support decision making.		
KNOWLEDGE	SKILLS	ATTITUDES
Benefits and limitation of IT in care delivery	Obtains and applies information about patients and Communicates	All team members need to buy in to development process
Ability to evaluate strengths and weaknesses of IT during care process		
Can access and or provide essential information in data base		
Health information exchange- understands the interoperability – common definitions for data		
Explain why information and technology skills are essential for safe patient care	Seek education about how information is managed in care settings before providing care Apply technology and information management tools to support safe processes of care	Appreciate the necessity for all health professionals to seek lifelong, continuous learning of information technology skills
Identify essential information that must be available in a common database to support patient care Contrast benefits and limitations of different communication technologies and their impact on safety and quality	Navigate the electronic health record Document and plan patient care in an electronic health record Employ communication technologies to coordinate care for patients	Value technologies that support clinical decision-making, error prevention, and care coordination Protect confidentiality of protected health information in electronic health records
Describe examples of how technology and information management are related to the quality and safety of patient care Recognize the time, effort, and skill required for computers, databases and other technologies to become reliable and effective tools for patient care	Respond appropriately to clinical decision-making supports and alerts Use information management tools to monitor outcomes of care processes Use high quality electronic sources of healthcare information	Value involvement in design, selection, implementation, and evaluation of information technologies to support patient care
Explain why information and technology skills are essential for safe patient care	Seek education about how information is managed in care settings before providing care Apply technology and information management tools to support safe	Appreciate the necessity for all health professionals to seek lifelong, continuous learning of information technology skills

	processes of care	
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NEXT STEPS:

Use this team-based competency framework to launch a national initiative to facilitate adoption of interprofessional team based competencies that will be used to guide practice and education. HRSA/BHPr in partnership with the Macy Foundation will use these recommendations to further develop consensus with other key interdisciplinary professional stakeholders, educational institutions, and oversight organizations to advance the development of a competency based interprofessional team practice model that possess shared definitions and guidelines for use.