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DRAFT: Recommendations for Interdisciplinary Core Competencies for Care of Older Adults

The development of these interdisciplinary core competencies was based on reviews and collation of discipline-based core competencies for care of older adults (nursing, social work and medicine). We need feedback (suggestions/support) on this current draft (draft #11) of interdisciplinary core competencies.

The format follows the CanMed Competencies of Clinician, Communicator, Collaborator, Manager, Advocate, Scholar and Professional in relation to role, definition and key competencies. Two additional roles were identified and added, “Educator” and “Health System (staff) Member”, with specific competencies delineated. We selected this format because we believed it to be useful in identifying key competencies required across all disciplines. We recognize areas of overlap between the identified roles (e.g. manager, versus collaborator versus communicator).

Family involvement is integrated throughout these competencies into various roles. The practice/clinical setting (i.e. community, acute care, long-term care) is not specified.

The competencies are proposed for students at the undergraduate level who are pursuing a generalist degree. The “foundation of knowledge” statement that appears under the heading of “definition” within each role suggests further work on course content or essential curriculum content for interdisciplinary education.

We have adopted, with minor revisions the following preamble and definitions from Core Competencies for Canadian medical students: Geriatrics Draft Three provided by Tricia Woo:

A core competency is fundamental knowledge, ability, or expertise in a specific subject area or skill set. Specifically, there is a need to ensure that all students in the health care field graduate with a fundamental set of knowledge, skills and attitudes that will enable them to provide competent care to older adults.

If the goal is to provide a general education to prepare undergraduate students from all disciplines to perform within their scope practice, it can be stated that a learning experience that provides a basic foundation in Geriatrics should be standard in every health related school curriculum. When the educational needs (based on core competencies) of students in the care of the older patients is clearly defined, institutions are better able to plan curriculum and examinations to achieve these basic standards.

For the purpose of these recommendations, we distinguish curriculum, objectives and core competencies.

Curriculum is the means by which educational institutions achieve planned objectives and competencies. This includes resources, formats, and venues.

A Learning Objective is the knowledge, skill or attitude that should result from the delivery of curriculum. Learning objectives may be broad and inclusive.

A Core Competency is a discrete ability derived from a learning objective. A Core competency is a minimum expectation. Ideally, it should be observable in the context of real application.

Evidence Based Practice/Best Practice Guidelines recognizes that evidence-based practice incorporates knowledge generation, synthesis, transfer and adoption. In providing care to older adults, the best results will be achieved through integration of current research, clinical expertise, older adult needs/preferences, and available resources.

The overall goal in creating these competencies is to promote optimal care and quality of life, and maximize function.

1) Clinician

Definition:

The clinician practices safely, ethically and effectively along a continuum of care in situations of health and illness in a variety of health care environments. The care of older adults is based on evidence and “best practice” guidelines. The foundation of knowledge is an understanding of the relationships among: age-related physical, functional, cognitive and psychosocial changes; and risk factors emanating from lifestyle, pathology and the environment. The clinician’s clinical focus includes other disciplines and members of the health care team, and family members, as appropriate.

Key competencies:

1. Performs and refines assessment of the older adult in the domains of:
 - a. Physical health and illness conditions
 - b. Functional ability
 - c. Cognitive ability and mental health
 - d. Psychosocial function including social support system and life course changes.
 - e. Spirituality
 - f. Socio-environmental situation
 - g. Safety and Security
2. Selects/administers valid, reliable and age-appropriate assessment/ diagnostic/screening tools.
3. Applies evidence-based standards/best practice guidelines to promote healthy activities in older adults.
4. Involves older adults and their families in developing expected outcomes.
5. Performs interventions to: promote health and optimal care; enhance quality of life; prevent disease, injury, and excess disability; maximize function; maintain desired level of autonomy and independence; promote rehabilitation; and provide palliative care to older adults.
6. Uses technology to support the care of older adults and to enhance their function, independence and safety.
7. Recognizes and manages the interaction of normal aging and one or more persistent health conditions in an older person.
8. Recognizes and manages geriatric syndromes common to older adults, and the complex interaction of acute and chronic co-morbid conditions common to older adults (e.g. cancer, depression, hip fracture, influenza, and stroke).
9. Identifies older adults’ use of prescription medication, over-the-counter medication, herbal remedies and complementary and alternative therapy.
10. Assesses family knowledge and skills, needs, and level of stress in providing care to older adults.
11. Assists family caregivers to reduce their stress levels and maintain their own mental and physical health.

12. Facilitates group interventions with older adults and their families (e.g. bereavement groups, reminiscence groups).

2) Communicator

Definition: The communicator communicates effectively and respectfully with older adults and their families, and with other disciplines and members of the health care team. The foundation of knowledge is an understanding of communication strategies, interviewing and counseling techniques and conflict resolution skills.

Key competencies:

1. Recognizes the changes (e.g. sensory, cognitive) that affect communication with older adults and optimizes the ability of the older adult to communicate.
2. Recognizes that all behaviour has meaning and views challenging behaviour of older adults as an attempt at communication based on need.
3. Identifies that older adults may be at risk in relation to their right to information and privacy of information.
4. Provides information that takes in to account cohort differences in the use of words and expression.
5. Assists and provides counseling to older adults and their families in making complex decisions that arise with aging.
6. Mediates situations of conflict between older adults and their family members.

3) Collaborator

Definition: The collaborator effectively works with other disciplines and the health care team to promote optimal care and quality of life, and maximize function for older adults. The foundation of knowledge is an understanding of group dynamics and partnerships, and an appreciation of the contributions of other disciplines in the health care team.

Key competencies:

1. Promotes team problem-solving, decision-making and interdisciplinary collaboration by jointly assessing outcomes of care, planning interventions, implementing new strategies, evaluating the impact on older adults, families, and team members, and developing new and innovative working relationships.
2. Forms partnerships with older adults, their families and communities, to achieve mutually agreed upon health outcomes

4) Supervisor/Leader

Definition: Based on collaborative process, the manager makes decisions to delegate, guide and direct the care of older adults through other health care personnel as well as providing expertise in decision-making within the organization to promote optimal care and quality of life, and maximize function for older adults. The foundation of knowledge

is an understanding of time management, organizational structure and function, and the delegation and decision-making processes.

Key competencies:

1. Coordinates with health team members to ensure continuity of health services for older adults, families and communities.
2. Facilitates interdisciplinary case management to link older adults and their families to resources and services.

5) Advocate

Definition: The advocate initiates and takes opportunities to advocate on behalf of older adults and their families to advance the development and establishment of needed services and programs that contribute to the optimal care and quality of life, and maximize function of older adults. The foundation of knowledge is an understanding of the concepts of advocacy and social action.

Key competencies:

1. Supports older adults and their families to draw on their own abilities and resources for self-care and health promotion.
2. Informs and supports older adults and their families while they are making decisions about their health care.
3. Respects and promotes older adults' rights to dignity and self-determination within the context of the law and safety concerns.
4. Applies ethical principles to decisions on behalf of all older adults with special attention to those with limited decisional capacity.
5. Represents the older adult as requested and when the older adult is not able to advocate for self in discussions of care, preferences for care, and decisions related to care within the health care team and the organization.
6. Advocates on behalf of older adults and their families with agencies and other professionals to help them obtain services.
7. Supports older adults and their families who are dealing with: end of life issues related to dying, death, and grief; limitation of treatment; competency; guardianship; right to refuse treatment; advance directives; wills; and durable power of attorney for medical affairs.
8. Evaluates the accessibility, availability, and affordability of health care for older adults to promote their goals, maximize function, desired level of autonomy and independence, and their living in the least restrictive environment.
9. Advocates for services and programs that will enhance care for older adults within the organization and society.
10. Participates in "social action" that will contribute to the health and well-being of older adults.

6) Scholar

Definition: The scholar demonstrates a life-long commitment to skill and knowledge enhancement as a means to attain personal and professional growth and to promote optimal care and quality of life, and maximize function for the older adult. The foundation of knowledge is an understanding of established knowledge as a basis for practice, and current gaps in knowledge, and an appreciation that new knowledge is needed and must be implemented as a basis for improved practice and care.

Key competencies:

1. Reviews and synthesizes evidence from research studies pertinent to the care of older adults.
2. Seeks to implement best practices of care for older adults on an organizational basis.
3. Evaluates and learns from differing international models of geriatric care.

7) Professional

Definition: The professional is committed to promote optimal care and quality of life, and maximize function for older adults through knowledgeable and respectful practice, professional regulation and adherence to standards of practice. The foundation of knowledge is an awareness of one's own values and assumptions in interactions with older adults and the larger context of provincial/territorial/federal legislation that defines scope of practice.

Key competencies:

1. Identifies and assesses one's own values and biases regarding aging.
2. Recognizes that one's own values and assumptions affect interactions between older adults and their families and the interdisciplinary health care team.
3. Provides care that demonstrates sensitivity to older adults' cultural and spiritual diversity.
4. Adheres to laws and public policies related to older adults (e.g., elder abuse reporting, legal guardianship, powers of attorney, wills, advance directives, and Do-Not-Resuscitate orders).

8) Educator

Definition: The educator educates the older adult and family, providing information on prevention, health promotion, and management of conditions that will optimize health and quality of life, and maximize function. The educator also educates students, other disciplines and members of the health care team. The foundation of knowledge is an understanding of teaching and learning theory, principles and strategies.

1. Addresses the health-related learning needs of older adults, their families and

- communities through assessing learning needs and developing, implementing and evaluating learning plans.
2. Educates the older adult and their families in self-care practices.

9) Health System (Staff) Member

Definition: The context of care is the health care system and the care to older adults and their families is provided within the availability, accessibility and affordability of programs and services. The member provides maximum opportunities and choices for older adults and their families within the larger health care system to promote optimal health and quality of life, and maximum function of older adults with an effective and efficient use of the system. The foundation of knowledge is an understanding of the health care system structure and function, and the relationships among policy, service provision and service use.

1. Understands the diversity of older adults' attitudes toward the acceptance of services.
2. Identifies the availability, accessibility and affordability of health care for older adults and their families.
3. Identifies how policies, programs and services affect the health care of older adults and their families.
4. Works with older adults and their families to ensure appropriate use of the health care system and transition through the system.
5. Evaluates the effectiveness of the health care system in achieving intended outcomes for older adults and their families.
6. Applies evaluation and research findings to improve the health care system in achieving intended outcomes for older adults and their families.
7. Identifies gaps, barriers and fragmentation in the health care system and partners with older adults and their families, and other disciplines to adapt and revise programs and services.
8. Works with other disciplines, community organizations, policy makers, and the public to meet the needs and issues of a growing aging population.
9. Analyzes the impact of an aging society on the health care system.