MEL AND ENID ZUCKERMAN **COLLEGE OF** PUBLIC HEALTH

Developing Core Competencies for Interprofessional Integrative **Healthcare Education:**

An Example From Public Health



Douglas Taren¹, Ben Kligler², Patricia Lebensohn¹, Audrey J Brooks¹, Victoria Maizes¹ 1 University of Arizona; 2 Mount Sinai Beth Israel

Meta-Competencies and the Public Health Sub-Competencies

1. Practice patient-centered and relationship-based care.

- Provide culturally competent systems to support patient-centered and relationship-based care.
- Evaluate the delivery of patient-centered and relationship-based care.
- Describe what is patient-centered and relationship-based care.

2. Obtain a comprehensive health history which includes mind-body-spirit, nutrition, and the use of conventional, complementary and integrative therapies and disciplines.

- Provide culturally appropriate settings to obtain an integrative health history.
- Generate variables that measure public health conditions.
- Develop patient education materials to inform patients about what is an integrative health history.

3. Collaborate with individuals and families to develop a personalized plan of care to promote health and wellbeing which incorporates integrative approaches including lifestyle counseling and the use of mind-body strategies.

- Incorporate diverse perspectives to support appropriate use of integrative approaches.
- Use a variety of approaches to disseminate public health information.
- Communicate the role of integrative health within the overall health care system.

4. Demonstrate skills utilizing the evidence as it pertains to integrative healthcare.

- Evaluates the integrity and comparability of data.
- Evaluate program performance.
- Incorporate integrative health data into the resolution of scientific, political, ethical and social public health concerns.

5. Demonstrate knowledge about the major conventional, complementary and integrative health professions.

- Able to critique the scientific functions of both integrative and conventional health professionals.
- Modify organizational practices in consideration of integrative and conventional healthcare in response to changes in the health care system.
- Integrate both integrative and conventional health professionals into the healthcare.

6. Facilitate behavior change in individuals, families and communities.

- Contribute to building the scientific base of public health.
- Retrieve scientific evidence on both integrative and conventional health care from a variety of text and electronic sources.
- Use behavioral change models to support integrative healthcare professionals.

7. Work effectively as a member of an interprofessional team.

- Provide mechanisms to create interprofessional teams.
- Ensures opportunities for professional development for individuals and teams.
- Uses group process to advance involvement.

8. Engage in personal behaviors and self-care practices that promote optimal health and wellbeing.

- Apply basic human relations skills to the management of organizations, motivation of personnel, and resolutions of conflicts.
- Create policies and procedures that support the practice of self-care.
- Incorporate government and non-government organizations to develop policies and programs to support the practice of selfcare.

9. Incorporate integrative healthcare into community settings and into the healthcare system at large.

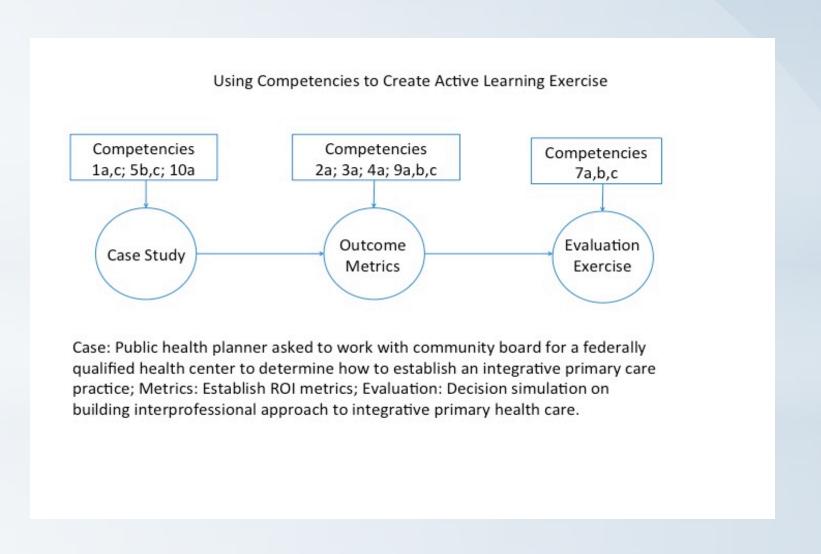
- Evaluate outcomes of integrative health care in community settings.
- Establish performance management systems for delivering integrative health care services.
- Include the use of cost-effectiveness, cost-benefit and cost-utility analysis in programmatic prioritization and decision making.

10. Incorporate ethical standards of practice into all interactions with individuals, organizations and communities.

- Write a code of ethics and standards of practice.
- Identify local and national laws related to the ethical practice of primary health care.
- Identify steps and procedures that protect the right of privacy.
- Establish integrative primary health care systems that promote honesty, integrity and accountability. Promote professional development.



The NCIPH Team



Public Health Impact

- 1. Competencies are now present to provide guidance on how public health professionals can support integrative medicine into health care services.
- 2. Competency-based curricula can be developed for credit bearing courses and continuing education units.
- 3. Accreditation agencies have a set of competencies that can be used to assess the role of public health within interprofessional training.

Acknowledgements

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number UE1HP27710, Integrative Medicine: Empowering Communities through Interprofessional Primary Care Teams for \$1,699,998. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.

Background: The University of Arizona Center for Integrative Medicine, in collaboration with the Consortium of Academic Health Centers for Integrative Medicine received a HRSA grant to establish the National Center for Integrative Primary Healthcare (NCIPH). A primary goal of the NCIPH is to develop a coordinated set of competencies in Integrative Health across primary care professions, and a uniform curriculum to address those competencies. Methods: Experts representing primary care residency training programs, nursing, public health, pharmacy, behavioral health, and complementary and integrative health professions convened to create a set of meta-competencies in Integrative Primary Healthcare. Results: Nine domains of competencies were developed: 1) patient-centered care, 2) obtaining an integrative health history, 3) collaborative treatment planning to develop a personalized care plan, 4) utilizing evidence-based integrative health treatments, 5) knowledge of integrative and conventional health professions, 6) facilitating behavior change, 7) working interprofessionally, 8) self-care, and 9) incorporating integrative healthcare across settings. Each profession developed competencies for the domains applicable to their practice. The Public Health sub-competencies were adapted from the Core Competencies for Public Health Professionals and will be presented. Conclusions: The competencies provide guidance on how to have public health incorporate integrative primary care into public health settings. The specific competencies provide the basis for developing an Interprofessional Integrative Health curriculum for public health professionals who support primary care. Next steps include strategies for adoption of the competencies within primary care disciplines and broad dissemination of competencies, curriculum, and related resources through the NCIPH and partner organizations.

Abstract

NCIPH

The University of Arizona Center for Integrative Medicine and the Academic Consortium for Integrative Medicine & Health in cooperation with the Health Resources and Services Administration (HRSA) created the NCIPH. The purpose of the NCIPH is to advance the incorporation of competency- and evidence-based integrative health (IH) curricula and best practices into primary care education and practice. The most important gap filled by this 3-year project will be the development of a set of competencies and a course that is relevant to and appropriate for use across the entire interprofessional spectrum of primary care practitioners. See ncihph.org for more information.

Methods

The NCIPH developed 10 meta-competencies (see Kigler et al (2015). Global Adv Health Med 4(5):33-39.) for which discipline specific subcompetencies were developed. The public health sub-competencies are based on the Council on Linkages Core Public Health Competencies (see phf.org). The 27 sub-competencies with in the first 9 mega-competencies address all 8 of the core public health competency domains:

Analytical/Assessment Skills (2) Policy Development/Program Planning Skills (7) Communication Skills (3) Cultural Competency Skills (3) Community Dimensions of Practice Skills (2) Public Health Science Skills (3) Financial Planning and Management Skills (5)

Leadership and Systems Thinking Skills (2)

The sub-competencies on ethical standards were adapted form the National Association on Healthcare Quality (nahq.org).