



In the Literature

Highlights from Commonwealth Fund-Supported Studies in Professional Journals

Healthcare Professional Training: A Comparison of Geriatric Competencies

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An abstract is available at: <http://www3.interscience.wiley.com/journal/121371963/abstract>

Synopsis

A comparison of geriatric competency domains across five health care disciplines—dentistry, medicine, nursing, pharmacy, and social work—reveals striking similarities. Based on these commonalities, it may be possible to improve interdisciplinary collaboration in the education and clinical training of health care professionals specializing in geriatrics.

The Issue

Health care professionals who are knowledgeable about the aging process and are skilled in managing the complex needs of older adults are an important but scarce resource. Geriatric specialists may be able to better serve the complex needs of older adults through education and training that incorporates common themes among health care disciplines and emphasizes collaboration among providers. Development of interdisciplinary geriatric training programs is hampered by the fact that, until this study, little has been known about the overlap between competencies specified in the training and certification documents used in different health care disciplines.

“The findings from this project can help geriatric programs take the first step toward identifying courses and clinical rotations that can be shared across disciplines.”

Key Findings

- Findings from this study reflect striking similarities in geriatric competencies across the five disciplines, as reflected in their training and certification documents.
- The dentistry documents addressed all domains except psychosocial elements and managing and negotiating health delivery systems.
- The pharmacy documents included all domains except the pharmacist’s teaching-coaching role as a team member.

- In medicine, the documents for geriatric fellows did not include evaluation of the plan of care, the teaching-coaching role, or cultural competence.
- The documents for geriatric social workers differed the most. The materials did not address risk assessment and health promotion, environmental issues, chronic health problems and functional status, or teaching-coaching role as a team member. They did, however, include domains not found in other disciplines, such as values clarification, interventions, and program development.
- Findings suggest the benefit of including disciplines such as dentistry and pharmacy in coordinated geriatric initiatives.

Addressing the Problem

Most educators, health care professionals, administrators, and policy bodies agree that interdisciplinary collaboration has the potential to improve quality and lower health care costs for older adults. Despite widespread support, few geriatric health care specialists are trained to work on care teams. Health care professionals with limited exposure to interdisciplinary teams in academic and training programs may be less likely to perceive the benefits of teamwork. Barriers to developing interdisciplinary academic programs include difficulties in scheduling courses and clinical rotations, few faculty with interdisciplinary skills or interest in teaching interdisciplinary courses, and language differences in competency documents. Significantly overlapping geriatric competencies across health care disciplines could further the development and testing of a core curriculum in geriatrics that includes interdisciplinary classes and clinical rotations.

About the Study

The study identified geriatric competency source documents from the geriatric-certifying bodies of five health care professions: dentistry, medicine, nursing, pharmacy, and social work. These documents were used to develop a geriatric competency grid that consisted of eight domains: assessment, diagnostic, plan of care and implementation, evaluation, professional role, teaching and coaching, cultural competence, and managing and negotiating health care systems.

The Bottom Line

Significant overlap in the geriatric competencies of a variety of health care disciplines could form the basis of an interdisciplinary program that maximizes the potential of a small number of geriatric specialists to better serve the needs of older adults.

Citation

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This summary was prepared by Helen Garey and Deborah Lorber.