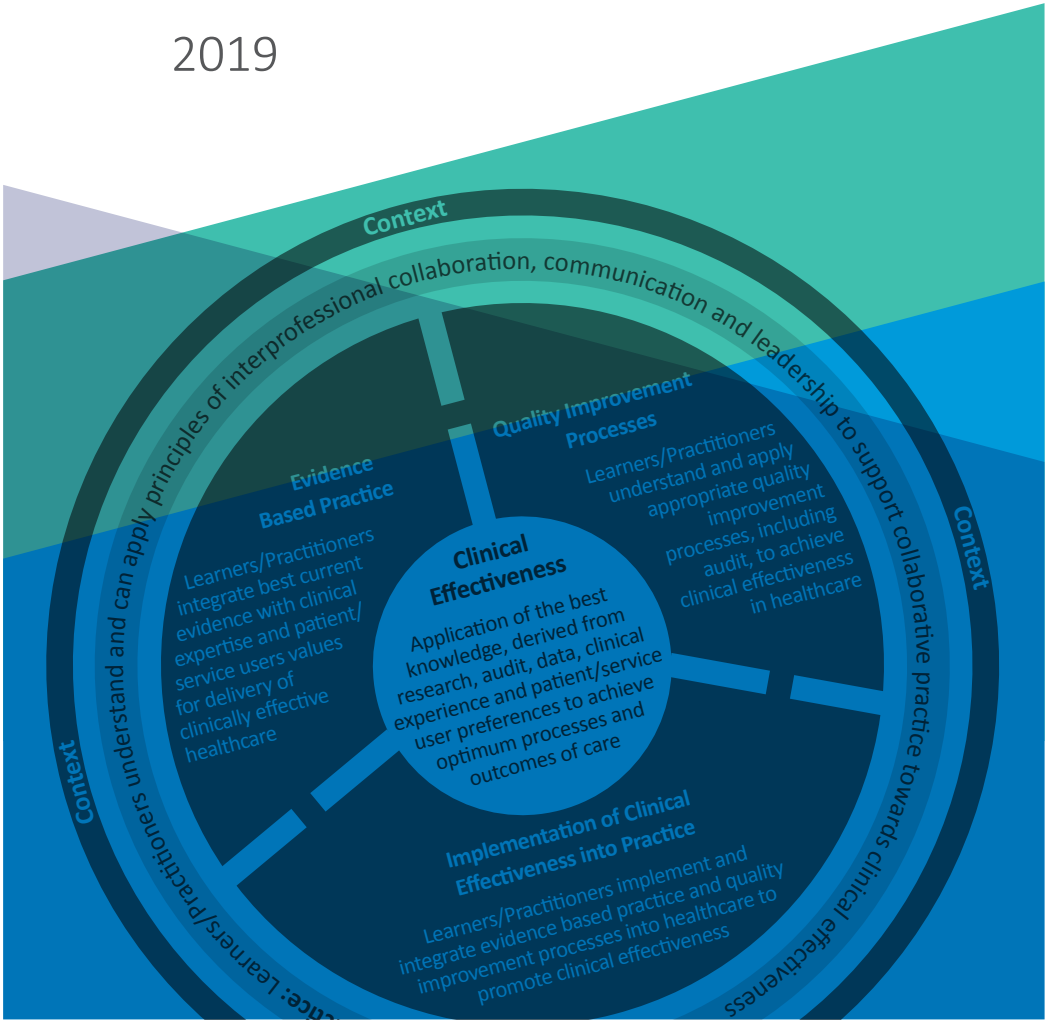
An Roinn Sláinte
Department of Health

Competency Framework for clinical effectiveness education

Summary

2019



Full and summary reports available on Department of Health website at:
https://health.gov.ie/national-patient-safety-office/ncec/

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Framework purpose & structure

Purpose

To foster a culture of clinical effectiveness in healthcare through describing an approach to competencies that can guide clinical effectiveness education (CEE).

Structure

Four competency domains highlight the knowledge, skills, attitudes and values that shape the judgments essential for clinically effective practice and include:

- Domain 1: Evidence-based practice
- Domain 2: Quality improvement processes
- Domain 3: Implementation strategies
- Domain 4: Collaborative practice

See Figure 1 (page 6)

'Context' refers to contextual issues, such as regulatory requirements and educational standards, national healthcare policy, or professional setting that require consideration when applying the framework.

Background

Clinical effectiveness: "the application of the best knowledge, derived from research, clinical experience and patient preferences to achieve optimum processes and outcomes of care for patients. It aims to make clinical practice more explicitly evidence-based, with the goal of improving the effectiveness of clinical practice and service delivery"[(1)].

Project aim: To develop a competency framework for clinical effectiveness education for health & social care professionals working in various healthcare settings in Ireland.

Development Process – 3 phases

Phase 1

Consolidation report
- National professional regulator(s) standards & requirements
- NCEC Clinical Effectiveness education forum proceedings 2016 & 2017
- National research on evidence based practice education
- Data from national EBP teaching surveys
- Interviews with international EBP teaching experts

Phase 2

Stakeholder consultation
- Focus groups x 13

Phase 3

Refinement of proposed framework
- Review & integration of Phase 1 & 2 outputs
- Feedback from NCEC & NCEC sub-group (Education & Training)

Domain 1: **Evidence-based practice**

Competency statement:
Learners/practitioners integrate best current evidence with clinical expertise and patient/service-user preferences and values, for delivery of clinically effective healthcare [(2)].

Competencies:
Competencies for this domain, i.e., 'Introductory', 'Ask', 'Acquire', 'Appraise & Interpret', 'Apply' & 'Evaluate' are outlined in the main report.

Indicators:
- To understand fundamental or core concepts associated with EBP
- To structure clinical questions, learners/practitioners demonstrate "ask" competencies
- To identify and recognise relevant sources of research information and evidence
- To critically evaluate the integrity, reliability and applicability of health research
- To engage with evidence in daily practice
- To reflect upon knowledge translation processes.

Rationale:
To improve clinical effectiveness it is essential for learners/practitioners to adopt an evidence-based approach to their practice.

Domain 2: **Quality improvement processes**

Competency statement:
Learners/practitioners understand and apply quality improvement processes to achieve clinical effectiveness in the context of healthcare.

Competencies:
Competencies for this domain, i.e., 'Introductory', 'Appraise', 'Engage' & 'Reflect' are outlined in the main report.

Indicators:

- To understand fundamental or core concepts associated with quality improvement processes
- To identify areas for quality improvement, by analysing the care setting for gaps between local and best practice standards
- To apply quality improvement processes into practice
- In considering continuous quality improvement processes, demonstrate "reflect" competencies.

Rationale:
Quality improvement processes should be part of the efforts of learners/practitioners to make changes that lead to clinically effective practice, through better patient outcomes, better experience of care and continued development of staff.

Domain 3: **Implementation strategies**

Competency statement:
Learners/practitioners implement and integrate evidence-based practice and quality improvement processes into healthcare to promote clinical effectiveness.

Competencies:
Competencies for this domain, i.e., 'Introductory', 'Appraise & Engage' & 'Reflect' are outlined in the main report.

Indicators:

- To understand fundamental and core concepts associated with implementation science
- To identify challenges and enablers for operationalising implementation of best evidence and quality improvement processes into clinical practice
- In considering implementation processes, learners/practitioners demonstrate "reflect" competencies.

Rationale:
Dedicating time and resources to implementation plans and actions is crucial to integrating evidence-based guidelines and quality standard interventions into practice [(2)].

Domain 4: **Collaborative practice**

Competency statement:
Learners/practitioners understand and can apply principles of interprofessional collaboration, communication and leadership to support collaborative practice towards clinical effectiveness processes, which promote healthcare that is evidence-based, effective and consistent.

Competencies:
Competencies for this domain, i.e., 'Collaborate', 'Communicate' & 'Leadership' are outlined in the main report.

Indicators:
- To support interprofessional "collaboration"
- To "communicate" appropriately in professional practice
- To determine best "leadership" approaches to achieve clinically effective processes.

Rationale:
Effective professional relationships and patient/service-user involvement are key characteristics of collaborative practice towards clinical effectiveness.

Figure 1: Competency Framework for Clinical Effectiveness Education

Principles underpinning this framework

Framework

- Designed for all health & social care professionals, with competency domains generic and universal in nature
- Assumes clinical effectiveness is an inter-professional collaborative effort
- Based on evidence and expert consensus
- Places the patient/service-user at the center of professional learning
- Acts as a resource for workplace/institutional learning, from which individuals and organisations can develop curricula, educational programmes or training packages
- Provides direction for the achievement of competencies at an individual level.

Education

- Assumes adult learning principles
- Recognises that prior learning/current competency related to clinical effectiveness impacts the level at which a competency is attained.

Framework application

Curriculum considerations

- Explicitly demonstrate integration of clinical effectiveness competencies throughout clinical and academic learning contexts
- Map clinical effectiveness competencies across programme content and learning outcomes
- Develop & conduct curriculum evaluation plans with all relevant stakeholders (i.e. clinicians, patients/service-users, students, academic/clinical educators, and health regulators).

Teaching & learning strategies

- Active learning approaches e.g. problem/case-based learning
- Inter-professional group-based learning
- Experiential learning activities that provide opportunities to apply clinical effectiveness knowledge and skill.

Assessment methods

- Varied assessment types including structured self, peer or inter-professional approaches
- Use of self-assessment and self-reflection against competency standards relevant to role
- Use of multi-source and '360' assessments.

This Framework is informed by and should be used in conjunction with:

- NCEC Implementation Guide and Toolkit for National Clinical Guidelines[3]
- HSE Framework for Improving Quality in our Health Service[4]
- NCEC Framework for Public Involvement in Clinical Effectiveness Processes[5]
- Report of Research on Teaching of Evidence Based Practice in Ireland, UCC[6].

References:

1. Ashford & St. Peters Hospitals- NHS Trust. 2008 http://www.ashfordstpeters.nhs.uk
2. Albarqouni L, Glasziou P, Hoffmann T, Rydland Olsen N, Young T, Ilic D, et al. Core competencies in evidence-based practice for health professionals: consensus statement based on a systematic review and Delphi survey. JAMA Netw Open. 2018;1(2):e180281.
3. Department of Health. NCEC Implementation Guide & Toolkit. 2018.
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5. Department of Health. NCEC Framework for Public Involvement in Clinical Effectiveness Processes. 2018.
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Report Citation: Lehane, E., Agreli, H., O'Connor, S., Hegarty, J., Leahy-Warren, P., Bennet, D., Blake, C., Burke, F., Corrigan, M., Drennan, J., Hayes, M., Heffernan, E., Horgan, F., Lynch, H., McVeigh, J., Müller, N., O'Keeffe, E., O'Tuathaigh, C., Sahm, L. and Savage, E. (2018). Development of a Competency Framework for Clinical Effectiveness Education in Ireland. Report prepared for Clinical Effectiveness Unit, National Patient Safety Office, Department of Health, Ireland.

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