

Desirable Physician Attributes

To maintain compliance with the Core Accreditation Criteria of the ACCME, activities should be developed in the context of desirable physician attributes. The following defines these attributes as identified by the Institute of Medicine (IOM), American Board of Medical Specialties (ABMS)/ Accreditation Council of Continuing Graduate Medical Education (ACGME), and Interprofessional Education Collaborative (IEC).

ACGME/ABMS Competencies

- Patient Care and Procedural Skills—Provide care that is compassionate, appropriate and effective treatment for health problems and to promote health.
- Medical Knowledge—Demonstrate knowledge about established and evolving biomedical, clinical and cognate sciences and their application in patient care.
- Practice-based Learning and Improvement—Able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence and improve their practice of medicine.
- Interpersonal and Communication Skills—Demonstrate skills that result in effective information exchange and teaming with patients, their families and professional associates (e.g. fostering a therapeutic relationship that is ethically sound, uses effective listening skills with non-verbal and verbal communication; working as both a team member and at times as a leader.
- Professionalism—Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles and sensitivity to diverse patient populations.
- Systems-based Practice—Demonstrate awareness of and responsibility to larger context and systems of healthcare. Be able to call on system resources to provide optimal care (e.g. coordinating care across sites or serving as the primary case manager when care involves multiple specialties, professions or sites).

Institute of Medicine Competencies

- Provide patient-centered care- Identify, respect, and care about patients' differences, values, preferences, and expressed needs; listen to, clearly inform, communicate with, and educate patients; share decision making and management; and continuously advocate disease prevention, wellness, and promotion of healthy lifestyles, including a focus on population health.
- Work in interdisciplinary teams- Cooperate, collaborate, communicate, and integrate care in teams to ensure that care is continuous and reliable.
- Employ evidence-based practice- Integrate best research with clinical expertise and patient values for optimum care, and participate in learning and research activities to the extent feasible.



- Apply quality improvement- Identify errors and hazards in care; understand and implement basic safety design principles, such as standardization and simplification; continually understand and measure quality of care in terms of structure, process, and outcomes in relation to patient and community needs; and design and test interventions to change processes and systems of care, with the objective of improving quality.
- Utilize informatics- Communicate, manage knowledge, mitigate error, and support decision making using information technology.

Interprofessional Education Collaborative Competencies

- Values/Ethics for Interprofessional Practice- Work with individuals of other professions to maintain a climate of mutual respect and shared values.
- Roles/Responsibilities- Use the knowledge of one's own role and those of other professions to appropriately assess and address the healthcare needs of the patients and populations served.
- Interprofessional Communication- Communicate with patients, families, communities, and other health professionals in a responsive and responsible manner that supports a team approach to the maintenance of health and the treatment of disease.
- Teams and Teamwork- Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan and deliver patient-/population-centered care that is safe, timely, efficient, effective, and equitable.