

# Revisiting the Concept of Transdisciplinary Life Care Planning

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## Abstract

The field of life care planning is relatively young in comparison with others. The life care plan (LCP) can be completed by professionals from various disciplines, posing a challenge for interpretation and understanding when clinicians come from diverse backgrounds and educational levels. All life care planners must adhere to both the standards of practice for their discipline, but also for life care planning. Both the life care planning process and the life care plan (LCP) itself provide an exemplar of transdisciplinary team work. The purpose of this article is to revisit the term *transdisciplinary* and the implications of this concept for the field of life care planning.

Keywords: Life care plan, life care planners, transdisciplinary

## Revisiting the Concept of Transdisciplinary Life Care Planning

Life care planning is an evolving transdisciplinary specialty practice (Gamez, Johnson, & Stajduhar, 2017). Because a life care plan (LCP) can be devised by any of a variety of professionals, a review of the scope of practice of each of the seven most common major disciplines is the focus of this special issue. Members of these disciplines share their expertise and scope of practice to give a greater understanding of what each specialist has to contribute to the transdisciplinary team and the field of life care planning. The concept of transdisciplinary work has several facets that bear mentioning. The purpose of this article is to revisit the term *transdisciplinary* and its implications for the field of life care planning.

## Definitions

There are many definitions of the term *transdisciplinary*. Some relate to collaborative research done across disciplines. Others focus on cross-training in the clinical setting, with the accompanying challenge of blurring of roles in patient care. The term *transdisciplinary* as used in rehabilitation has at times fallen into disfavor because of the lack of success in using such models in patient care settings. This is due largely to the barriers of overlapping responsibilities and team members being asked to work outside their comfort zones in areas for which they were not educationally prepared in basic training.

The concept of transdisciplinary within the life care planning field is an interesting one because it encompasses two unique aspects of the process: the life care plan itself and the educational background of life care planners who develop the plans. It may be helpful, then, to look at a few definitions of the term *transdisciplinary*, in order to enlighten the

conversation.

Fuqua stated that “transdisciplinarity is considered a goal to strive for, but it is difficult to achieve due to the extensive time needed to overcome barriers, to gain a deep understanding of two or more disciplines, and to merge ideas in those disciplines” (Fuqua, 2012, p. ix). Certainly by looking at the comparison chart included in this special issue, all professionals can see the variety of educational backgrounds, scope of practice, licensure and certification requirements, and expertise unique to each field. Transdisciplinary teamwork suggests that clinicians from various disciplines “regularly teach, learn and provide care across disciplinary boundaries” (Cartmill, Soklaridis, & Cassidy, 2011, p. 8). This integrated type of practice has been associated with higher satisfaction and better patient-focused care coordination. Certainly this could also be said of life care planning. No matter the specialty area of the life care planner, the life care plan itself is transdisciplinary and can be developed by an expert from any one of seven major disciplines, provided appropriate scope and standards of practice are adhered to.

The concept of life care planning being transdisciplinary must also be distinguished between closely related terms such as *multidisciplinary* and *interdisciplinary* (or *interprofessional*). *Multidisciplinary* suggests that professionals work independently within their areas of expertise, but not with common goals - rather in silos. That represents an old way of thinking. Being *interdisciplinary*, or *interprofessional*, denotes a cooperation and collaboration between disciplines, also working toward common patient-centered goals. In rehabilitation, the term *interprofessional* has been adapted as the preferred term to denote clinicians working collaboratively toward a common patient-centered goal. This is true of life care planning, but the unique nature of life care plan development itself requires an even higher level of interaction. This is how life care planners engage in the work that is transdisciplinary, where it is identified “as a process in which individuals work jointly using a shared conceptual framework that draws together discipline-specific theories, concepts, and approaches to address a common problem” (Fuqua, 2012, p. viii).

So, it can be concluded that the concept of life care planning being transdisciplinary is indeed fulfilled in two distinct ways – the planner and the plan. Founders of life care planning saw a vision of a transdisciplinary team not found in other fields.

## Implications of Transdisciplinary Teamwork

There is indeed benefit to collaborating and consulting with expert life care planners from other disciplines. For

example, as illustrated in the tables that appears in this issue, physical or occupational therapists have specific items that fall within their scope of practice such as ordering equipment, knowledge of adaptive equipment and their lifespan, and the potential functional outcomes after therapy. Nurses, rehabilitation counselors, and physicians can gain valuable information from these peers. Conversely, physicians and psychologists can provide expert knowledge on diagnostic testing, disease processes and necessary labs. Nurses, particularly those with a rehabilitation background, know about community resources, communication with family members, medications, and teaching/learning principles in addition to potential health complications associated with various disease processes. The rehabilitation counselor has inside information on all things about returning to work. And the speech-language pathologist brings dedicated expertise on cognition, speech and swallowing. As Wirt and Porter (2012) summarized, “development of the LCP benefits when each member of the multidisciplinary team is given the opportunity to provide his or her input and expertise” (p. 473). All of the team members together comprise a compelling force that makes the LCP credible.

Interestingly, as life care planning is a younger specialty area than many, it provides an exemplar of transdisciplinary teamwork. While life care planners may represent different disciplines, all must abide by the scope and standards of their own profession including ethical practice, accountability, and quality assurance (Weed & Beren, 2019). In addition, life care planners also abide by the standards of life care planning according to industry standards and organizational governance (Johnson, 2015; Johnson, Lacerte, & Fountaine, 2015; Preston & Reid, 2015). The planner brings unique expertise to the plan, and the LCP itself should demonstrate transdisciplinary interventions. Even considering the numerous standards this type of work entails, the usefulness of the LCP for both litigation and advance care planning for catastrophic injury or chronic illness has gained it favor with the health and judicial communities. Certainly the transdisciplinary nature of the LCP not only makes the process more complex, but it also stands as one of its most powerful strengths.

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