

TABLE 2-1	
TYPES OF PARTNERSHIPS	
TYPE OF PARTNERSHIP	DESCRIPTION OF THE RELATIONSHIP
Limited partnerships	<ol style="list-style-type: none"> <li>1. <i>Participatory</i>: One partner participates fully in the work at the EBP team level, but is not involved in the overall program development or decisions regarding the overall program.</li> <li>2. <i>Consultative</i>: One partner may serve in a consultative role, providing advice and recommendations for the program, but is not responsible for decisions about the program.</li> </ol>
Full partnerships	<ol style="list-style-type: none"> <li>1. <i>Unequal</i>: Both partners collaborate on the development and design of the program; however, one partner may have more decision-making power than the other partner. Accountability and responsibility may be less for the partner that has limited decision-making authority.</li> <li>2. <i>Equal</i>: Both partners fully collaborate on the development and design of the program in which the decisions, accountability, and responsibilities for the program are shared.</li> </ol>

TABLE 2-2	
HEALTH CARE ORGANIZATION CHECKLIST FOR CHOOSING A UNIVERSITY PARTNER	
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	Leadership: Strong, stable leadership, ability to deliver on agreements and represent the organization, sufficient power for decision making
	Mission/vision: Compatible and complementary organizational mission and vision
	Accountability: Doctoral prepared faculty, with a history of leadership, to serve as co-program coordinators with the health care organization
	Capacity: Faculty experienced in clinical practice, IPE and IPP, EBP, research, grantsmanship, and dissemination
	Commitment: Robust and resilient, sees projects through, history of delivering more than promised, capable of shared ownership
	Diversity: Wide range of interprofessional health care degree programs and students
	Culture: Track record of collaboration, cooperation, and willingness to understand the historical and social context of the health care organization
	Innovation: History of developing innovative learning approaches
	Resources: Ability to provide additional resources, such as learning technology platforms, learning modules, library access, continuing education accreditation, project management support, grant management
	Finances: Financially stable organization
	Reputation: High quality graduates, well known in the community, region, and nationally
* Grey shading denotes similar elements in both organizations	

Both checklists have the same evaluation categories, specifically leadership, mission and vision, accountability, capacity, commitment, diversity, culture, innovation, resources, finances, and reputation. Some of the elements within the categories on the checklists are the same for both organizations, such as under the leadership category. Other elements described within the categories are unique to the type of

setting. For example, under the category of diversity, a health care organization should have practitioners from a wide range of disciplines willing to serve as interprofessional EBP scholars. Interprofessional EBP is more likely to flourish with transformational leaders in health care organizations and in universities that encourage participatory decision making and a sense of inquiry that result in organizational learning.