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ORIGINAL ARTICLE



Interprofessional education and practice guide: interprofessional team writing to promote dissemination of interprofessional education scholarship and products

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ABSTRACT

Collaborations to develop, implement, evaluate, replicate, and write about interprofessional education (IPE) activities within and across institutions are wonderful opportunities to experience teamwork, team communication, ethics and values, and the roles and responsibilities of interprofessional team writing. Just as effective communication in interprofessional team-based care is essential for providing safe, high-quality health care, similar communication strategies are necessary to produce high-quality scholarship of IPE curricula and activities. Relationship and communication issues that affect health care teams' abilities to work together effectively (e.g., hierarchy, exclusion, assumptions, non-responsiveness, biases, stereotypes and poor hand-offs of information) can also occur in interprofessional team writing. Between 1970 and 2010, interprofessional practice research publications increased by 2293%. Although there has been tremendous growth in the IPE literature, especially of articles that require collaborative writing, there have not been any papers addressing the challenges of interprofessional team writing. As more teams collaborate to develop IPE, there is a need to establish principles and strategies for effective interprofessional team writing. In this education and practice guide, a cross-institutional team of faculty, staff, and graduate students who have collaborated on externally funded IPE grants, conferences, products, and workshops will share lessons learned for successfully collaborating in interprofessional team writing.

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Introduction

Interprofessional collaborations provide opportunities for capacity building and sharing of instructional or institutional innovations. Mapping to the United States Interprofessional Education Collaborative's core competencies, collaborative development and dissemination of interprofessional education (IPE) activities and products allows for learning and modeling of teamwork, team communication, ethics and values, and roles and responsibilities (Hall & Zierler, 2014; Interprofessional Education Collaborative [IPEC], 2016). The Lancet Commission Report highlighted the power of collaboration as a tool to improve the quality of educational activities and as a mechanism to "enhance productivity through sharing of information, academic exchange, pursuit of joint work, and synergies between institutions" (Frenk et al., 2010, p. 1940). In fact, two of the nine proposed reforms outlined by the Frenk and colleagues (2010), "adapt locally but harness resources globally" and "strengthening of educational resources" support interprofessional collaborations (Frenk et al., 2010, p. 1951).

Between 1970 and 2010, the number of interprofessional practice research publications increased by 2293% (Paradis &

Reeves, 2012). As the number of publications have increased, so has the number of interprofessional teams conducting the research. Since the Interprofessional Education Collaborative's 2011 publication of the competencies for interprofessional collaborative practice in the United States, even more intra- and inter-institutional collaborations are taking place to develop, implement, evaluate, and replicate IPE activities (Interprofessional Education Collaborative [IPEC], 2016). Considering the increasing prominence of IPE, it is necessary for scholars working in interprofessional research teams within and across institutions to prepare for the dissemination phase of the research process with a shared understanding of how to successfully write together for scholarly publication.

This guide focuses on principles and strategies for effective interprofessional team writing. We define interprofessional team writing as engaging at least two disciplines or health-related professions in disseminating new knowledge to improve the quality of health care and impact patient and population health outcomes. This definition was adapted from Little and colleagues' definition of interprofessional collaborative research practice (2016). In addition to adding to the

research literature, there are many teams collaborating to produce educational products (e.g. IPE curricula, IPE activities) and disseminating through venues such as MedEd Portal. This type of interprofessional writing also requires the same principles.

The process of interprofessional team writing relies on effective communication and an appreciation of varying interpersonal styles and encounters logistical challenges such as differences in time zones or academic calendars (Committee on the Science of Team Science, 2015). This is similar to the challenges encountered in other types of teamwork and interprofessional work. Despite the complexity interprofessional team writing poses, it is a valuable tool for communicating findings from IPE activities to interprofessional and multidisciplinary audiences and models interprofessional collaboration.

In this guide, we summarize the lessons learned from our 10-year experience of interprofessional team writing and recommend strategies and principles to support interprofessional team writing. Our interprofessional team has a shared history of writing together for scholarly publication (Abu-Rish Blakeney, Pfeifle, Jones, Hall, & K Zierler, 2015; Dyer et al., 2017; Willgerodt et al., 2015; Zierler, Abu-Rish Blakeney, O'Brien, & Teams, 2018). We collaborate across our respective professions of nursing, social work, public health, pharmacy, dentistry, and medicine and incorporate our unique perspectives as students, staff, clinicians, patient and family advisors, and junior and senior faculty. The lead author is the newest member of our interprofessional team, a junior colleague with previous experience in team writing for scholarly publication across professions, disciplines, and institutions. She was mentored closely in the development of this manuscript by Drs. Erin Blakeney and Brenda Zierler, who are both interprofessional practice scholars. Our interprofessional team writing collaborative has learned many key lessons during the preparation of manuscripts and other scholarly products as we have worked together to develop, implement, evaluate, and replicate IPE activities across institutions. This guide aims to provide insights to IPE scholars at all levels of professional development for collaborating smoothly and effectively to create high quality work for dissemination.

Key lessons learned

Participation on an interprofessional writing team promotes professional development and productivity (Bennett & Gadlin, 2012; Driscoll & Aquilina, 2011; Keen, 2007; Willgerodt et al., 2015). We have outlined 15 key lessons learned for collaborating in interprofessional team writing to develop products for scholarly publication (Table 1). The three foci we emphasize in this guide are: Authorship and acknowledgement, planning for success, and developing the IPE product.

Authorship and acknowledgement

Identify the writing team early in the process

Establishing an interprofessional writing team early in the process creates a culture of scholarly productivity and

Table 1. Checklist of strategies and principles for interprofessional team writing.

Checklist of Strategies and Principles for Interprofessional Team Writing	
Authorship and Acknowledgement	
1)	Identify the writing team early in the process. Establish the writing team during the development of the interprofessional education (IPE) products for all those who participated in conception, development, implementation, and evaluation.
2)	Establish guidelines for authorship. What constitutes an author should be explicitly stated and agreed upon by the entire team. The authorship guidelines proposed by the International Committee of Medical Journal Editors are an excellent resource.
3)	Determine author order and associated roles for your IPE product. Determine the lead author and order of all co-authors. Order of authorship should depend on contribution to conceptualizing activities, preparing, and revising the product.
4)	Integrate students, patients, and family advisors into interprofessional team writing. Their perspectives will bring strength and credibility to the product.
5)	Acknowledge funders and people who participated in the IPE project. Acknowledge funders, technology support, previous content developers, facilitators of the IPE activity, and student actors who contributed but did not participate in writing.
Planning for Success	
6)	Pre-determine strategies for dealing with limitations on number of authors. Choose a journal without such limitations, send a letter to the editor asking for an exception, or name your team and identify authors elsewhere – at the end or in a footnote.
7)	Identify one to three venues appropriate for the topic and product. Consider sending your abstract to journal editors to gauge their interest in the product and consider the needs of co-authors when selecting a journal for dissemination.
8)	Create a timeline for completing and disseminating the product. Explicating structured writing assignments and smaller, specified targets with deadlines are effective ways to ensure interprofessional team writing is making continual progress in developing a product.
9)	Make a plan for version control and transparency. Co-authors often benefit from a shared online space where they can remotely access documents related to the project.
10)	Establish ground rules and policies to ensure successful interprofessional team writing collaborations. Signed agreements from all authors that they will be engaged in the process and that they agree to the proposed timeline solidifies their commitment and establishes expectations.
Developing the IPE Product	
11)	Find your team's collaboration style. A good approach is to divide and conquer the writing tasks, then complete round-robin exchanges in the revising and editing process.
12)	Schedule "check-in" meetings to discuss progress, challenges, and changes in schedules (in-person or phone conferences). These can be in the form of writing retreats that facilitate intense bursts of productivity on scholarly products.
13)	Adopt a progressive dissemination approach to team writing. External deadlines, such as submission to conferences can help ensure that work will be completed.
14)	Communicate in plain language with clear and consistent terminology (and define your terminology). Avoid jargon in verbal and written communication to facilitate collaboration in interprofessional team writing and reach to a broad audience. Journals may provide definitions for commonly used terminology. We support the creation of a style and terminology document to iteratively track your decisions and serve as a reference for team members.
15)	Encourage participation, promote inclusivity, and leverage co-authors' strengths. Co-authors should appreciate the diversity and professional differences in interprofessional team writing.

encourages the design of rigorous evaluations that will add to existing literature (Driscoll & Aquilina, 2011; Reeves, Boet, Zierler, & Kitto, 2015). Offering an opportunity to produce a scholarly product associated with an IPE activity may encourage more faculty to participate in IPE, particularly for those who are seeking academic promotion. By establishing a writing team early in the process, those who plan to lead may begin reviewing the literature, identifying a conceptual framework to drive the activity, mapping IPE competencies and

learning objectives to the activities, and determining best tools for assessing learners and evaluating the event. In our experience, an author team inclusive of educators, clinicians, staff, patients and family advisors, and students whenever possible is effective and carries the added benefit of IPE skill development for all. Staff who participate in the development, implementation, and evaluation of the activities or teaching guides should be invited to participate as authors as well. The team should identify anticipated scholarly products early in the development of an IPE activity and determine how they will be disseminated. For example, IPE products could be disseminated through a curriculum submitted to MedEdPORTAL, a journal article, a workshop presentation, or an online module or toolkit. Identifying several writing products from a single project may further facilitate faculty involvement. Early in the development of IPE activities, our team lists possible products based on the activity's objectives and identifies a team member to lead the scholarship effort (Ness, Duffy, McCallum, & Price, 2014). These products could include curriculum, process or outcome papers, assessment of learners, and evaluation of IPE activities.

Establish guidelines for authorship

Discussions about what constitutes authorship should occur concordantly with anticipating scholarly products early in the process (Bennett & Gadlin, 2012). Clear communication about what constitutes an author is paramount, and sharing established guidelines with the team can avoid the conflicts associated with hierarchy, assumptions, poor hand-off of information (Barton, 2009; MacNaughton, Chreim, & Bourgeault, 2013; Sutcliffe, Lewton, & Rosenthal, 2004), or non-response (when those who volunteer to participate do not respond to email or participate on phone calls) (Bennett & Gadlin, 2012). We learned early on that team members can have widely disparate understandings of and expectations regarding authorship.

Since 2015, our IPE team has followed the authorship guidelines proposed by the International Committee of Medical Journal Editors (ICMJE, 2017; Appendix).

Different journals have their own set of guidelines regarding what contributions qualify for authorship. Our complete interprofessional writing team authorship guidelines are provided in the accompanying interprofessional team writing Toolkit, which can be found at <https://collaborate.uw.edu/ip-team-writing-toolkit/>.

Determine a flexible author order and associated roles for your IPE product

Equally important as agreement on what constitutes an author is a shared understanding of the order of authors (Bennett & Gadlin, 2012). While there are many ways of determining author order (Smith & Williams-Jones, 2012; Tscharrntke, Hochberg, Rand, Resh, & Krauss, 2007), the culture we have established for interprofessional team writing is that the order of authorship depends on level of effort in conceptualizing activities, preparing products, reviewing, and editing rather than rank, position (student, staff, faculty), alphabetical order of names, or discipline.

Those with seniority should mentor graduate students, staff, and junior faculty to take a leadership role in producing scholarly products. One important consideration is the potential for appointment, promotion, and tenure committees to undervalue the contributions of faculty participating in collaborative research who were not first authors or principal investigators on a grant (Klein & Falk-Krzesinski, 2017). Typically, the lead author will self-identify, and the senior author and co-authors need to agree. We prefer the self-selection process rather than appointing or designating a lead author because designating a lead author may not be productive or efficient if the team member chosen has no interest in the topic or in writing in general, or if they have competing priorities that will prevent them from meeting team deadlines. Another important consideration is the timing of appointments or promotion. For example, if a faculty member of our team is nearing a review of their appointment or up for promotion, our team may encourage that member to take the lead. Once the lead author is identified and their role is defined for the project, the whole team should acknowledge the choice. The lead author's responsibility is to set timelines and coordinate meetings in collaboration with the team. It is necessary to be somewhat flexible about the lead author because over the course of several months or a year, the lead can change for various reasons – competing priorities, academic move, personal circumstances, disinterest, lack of help from writing team, and inadequate performance (Wills, 2000). If timelines need to be adjusted or authorship assignments need to be revised after “check-ins,” then transparent and respectful communication to all members is paramount. If there is a need to change the lead author, communicating the change to the entire team and the lead author assisting in selecting and “handing off” to whoever will take over that role is necessary for transparency.

Integrate students, patients, and family advisors into interprofessional team writing

We include students, patients, and family advisors in IPE activities (Nester, 2016), and we also include them in writing and developing IPE products because their perspectives on our work strengthen and add credibility to the IPE product (Reeves et al., 2015). Much like faculty and clinicians, students and patients or family advisors have multiple competing roles and responsibilities. It is important to be cognizant of the responsibilities placed on students, patients, and family advisors as to not overburden them. The writing team should be prepared to support their success in meeting the team's expectations. Our IPE team has found the most success in working with students, patients, and family members by being clear about the expectations of a given project, being available for in-person or phone meetings or to answer questions via email, and collectively setting up reasonable timelines and other supportive practices for success. Offering financial assistance to co-authors (e.g. hiring students as research assistants, buying out percentages of staff and faculty full time equivalents) can incentivize commitment to a writing project, as it will likely be prioritized over volunteer commitments.

Our IPE team believes strongly in the value of working with students and junior faculty as emerging scholars.

Students and junior faculty offer valuable perspectives on IPE activities. Writing in interprofessional teams prepares them to collaborate interprofessionally throughout their careers and facilitates the modeling of interprofessional values, ethics, and collaboration by senior faculty (Hall & Zierler, 2014; Silver & Leslie, 2009). Participating in product preparation with an IPE team also instills the value of dissemination and begins to develop the habit early in a student's and junior faculty member's career. By supporting their scholarly development, students and junior faculty may choose to continue IPE research and contribute to furthering its evidence base.

Acknowledge funders and people who participated in the IPE project

It takes a village to implement an IPE project, and it is important to be inclusive with acknowledging all contributors. Those who have contributed to the work but do not meet criteria for authorship should be acknowledged. For example, staff or students who assist with logistics should be acknowledged (whether paid or not). Those who contributed to technology support, previous content development, and IPE facilitation deserve acknowledgement, as do patient and family participants. Funders have an expectation or requirement for being recognized and for receiving updates and copies of all academic products supported by their funding. The acknowledgements should include funding organization, grant name, and grant number (if required). Acknowledgements may be modified as necessary throughout the process.

Planning for success

Pre-determine strategies for dealing with limitations on number of authors

Working in large, interdisciplinary, and interprofessional teams from within and across institutions is commonplace in IPE research and scholarship. When choosing one to three target journals appropriate to the product or topic, it is important to consider whether the journal has a limitation on the number of authors that can be included on the product. This can be found in the journal's submission guidelines. If working in a large team with more potential co-authors than the target journal allows, you may wish to send a letter to the journal editor to request an exception or choose another target journal that will allow your whole team to be included as co-authors. Alternatively, some journals allow you to name your team "Interprofessional Education..." and the authors can be identified elsewhere – at the end or in a footnote.

Identify one to three venues appropriate for the topic and product

When identifying potential products, it is helpful to first decide whether the article/product should be published in an interprofessional journal, discipline-specific journal, or another venue. Sending an abstract or letter of inquiry to a journal editor to determine the fit of the scholarly IPE product with a potential journal's aims and scope saves time and effort and helps to focus the structure of the

product. The selection of the journal also needs to fit co-authors' fields and impact factors that may facilitate faculty promotion. Again, clear and honest dialogue among team members is critical for collaboration. Navigating the choice of journals across professions can be challenging as people often have strong beliefs about where dissemination should occur as well as the perceived quality of journals based on their professions preferences. While journal choices should be primarily driven by the content, creating a rotating journal plan within the team may provide assurance that scholarly products will be disseminated across professions. Writing with a specific journal in mind is helpful because it can guide the framing and formatting of the manuscript (e.g. reference style, word count). There are online tools such as, "Journal/Author Name Editor," or "JANE" where key words, a title, an abstract, or an entire manuscript can be entered, and journals, authors, and articles with similar published work can be identified (The Biosemantics Group, 2007; Appendix). JANE can be helpful if authors are uncertain about which journals might be the best fit for their manuscript.

Create a timeline for completing and disseminating the product

Creating a timeline is extremely beneficial to manage team expectations and plan writing activities. With co-author's busy schedules, varying academic calendars of health professions faculty across institutions, and the sheer number of contributors and their diverse professional backgrounds and perspectives, interprofessional team writing can take longer than individual writing and is dependent upon feedback from the group. In a study about collaborative writing, participants said collaborative writing takes longer than writing alone but perceived it resulted in deeper insights and a better product (Rice & Huguley, 1994). Explicating structured writing assignments and smaller, specified targets with deadlines are effective ways to ensure that the IP writing team makes continual progress on developing a product (Von Isenburg, Lee, & Oermann, 2017). To keep track of goals and deadlines, our team keeps a running document with an "assignments" category (i.e. to document assignments from phone calls, sections of product needing attention, progress to-date, research completed, manuscript submitted, etc.) along with a "date due" and a way to mark completion "date completed." Team timeline and tracking methods should be readily available to all team members.

Plan for version control and transparency

With document sharing across multiple participants and sites, we have found it necessary to retain and date all drafts and correspondence about IPE products. When multiple teams at multiple sites are involved in a writing project, versions of products being passed around can rapidly multiply and the risk for miscommunication may exponentially increase.

Thus, determining a way to share and collaborate electronically across sites in an online space (e.g. Dropbox, Google Doc, and OneDrive) is critical. Each sharing tool has its advantages and disadvantages. For example, clinicians may not be allowed to use certain shared spaces because of security

issues relating to patient privacy. In other instances, collaborators may have strong preferences, resource barriers (e.g. subscription costs), or dislike of certain sharing platforms. Asking about barriers to existing sharing platforms early on will help the interprofessional writing team determine the most suitable online-shared platform for its members. This organizational strategy has the added benefit of allowing co-authors to easily find relevant and up-to-date information during the product development and revision process.

Establish ground rules and policies to ensure successful interprofessional team writing collaborations

Developing a set of internal ground rules and policies to guide *how* the team works together can be very helpful to support collaborative partnerships within the team. Faculty, staff, and clinicians are increasingly pulled in multiple directions that may shift writing priorities among the team. Having established policies for interprofessional team writing such as a signed agreement from all authors that they will be engaged throughout the process (i.e. responding to emails in a timely fashion) and agree to the proposed timeline solidifies their commitment to the writing process, establishes boundaries and expectations for the collaboration, and builds mutual trust (Bennett & Gadlin, 2012; Committee on the Science of Team Science, 2015; Vangen & Huxham, 2003). If priorities change, then the team can re-visit the agreement and make necessary changes to the team configuration or authorship order. We have experienced instances where an author's commitment to a writing project shifted and then moved from being an author to an acknowledgement in the product.

Developing the IPE product

Identify your team's collaboration style

How will your IPE team go about writing your manuscript or product? One approach is to divide the sections and assign them to team members; another approach is to circulate a draft in which everyone continues to build on each section in a round-robin approach (Wolfe, 2010). An initial divide and conquer approach is most effective in moving a product forward at a reasonable pace. One way to approach this is for the lead author to write a general topic-sentence outline and then assign writing tasks to each of the co-authors (including themselves) or ask them to self-select sections to write based on their expertise and interest (Saver, 2017). The lead author then synthesizes all the components of the product into a unified voice and shares the draft for editing and revision. Taking a round-robin approach at the editing and revising stage allows co-authors to build on each other's ideas. It is important to periodically check in throughout the process to formatively assess whether the approach is effective and meeting the needs of the team. As with all team-based activities, we recommend debriefing after each product submission as a process improvement strategy to ensure future success. Debriefs often lead to constructive discussions, identification of areas for improvement, and generation of new ideas that may be integrated into the team writing process moving forward.

Schedule "check-in" meetings to discuss progress, challenges, and necessary adjustments

Regularly scheduled "check-in" meetings should occur via in-person, phone conferences, or electronic communication (e.g. webinar). In most cases, not all members of the writing team can participate on conference calls due to time differences or competing priorities (east coast vs. west coast, semesters vs. quarters, clinic hours, etc.), thereby requiring a heavy reliance on email communication. For local writing initiatives, holding quarterly writing retreats has been helpful to engage a cadre of faculty and other team members in defining and completing writing projects (Cleary & Horsfall, 2014; Willgerodt et al., 2015). We found that having intensive "bursts" of dedicated time is helpful in three ways. First, it allows the team to get a jumpstart on writing, which can be an initial stumbling block for some. Second, having a writing retreat permits focused writing with team members who otherwise may have difficulty coordinating the writing. Third, it creates a community of learning and supports a culture of team writing (Driscoll & Aquilina, 2011). The in-person nature of a periodic writing retreat facilitates both creative thinking about potential writing products as well as accelerates productivity and clarity, moving products along more quickly than relying on email and conference calls.

During the retreats, we divide into subgroups to write, coming back together at specified intervals to check in and review progress. We have held five writing retreats in the last two years with great success, and similar initiatives have been successful elsewhere (Brandon et al., 2015; Committee on the Science of Team Science, 2015; Steinert et al., 2008; Von Isenburg et al., 2017). We invite all faculty, staff, family advisors, and graduate students involved in the interprofessional projects to participate, sometimes with a virtual component for inclusion of those at other institutions. We begin each retreat by checking in on the status of in-progress products and then work together to brainstorm ideas for new products as a large group before breaking into smaller groups to determine titles, authors, acknowledgements, target journals, and timelines for completion. We then report these items back to the larger groups and begin writing (either that day or after the retreat). A designated staff member tracks progress of each product at our monthly operations meetings. Graduate students and staff have been instrumental in helping with literature reviews, reference citations, and organization of sub-writing teams.

Adopt a progressive dissemination approach to team writing

We have found it useful to develop products step-wise by first submitting an abstract for a conference, creating the presentation materials for the conference and then using those materials to outline and draft a product. External conference abstract and presentation deadlines, as well as journal special issue deadlines, can help writing teams prioritize dissemination and draft reasonable but firm timelines for moving the product forward. Utilizing a step-wise approach to dissemination can help ensure steady "movement" on a deliverable. For example, our team has benefitted from external conference

submission deadlines because they facilitate progression and completion of work. Every presentation then serves as a foundation for a product. These types of external deadlines have facilitated timely product development for our team.

Communicate in plain language with clear and consistent terminology (and define your terminology)

Just as effective communication in interprofessional team-based care is essential for providing safe, high-quality health care (Brock et al., 2013), clear and transparent communication among team members is paramount during the writing process. Relationship and communication issues commonly associated with team-based care may also exist in team-based writing. Just as in clinical and other work settings, timely, accurate, problem-solving, and respectful communication is needed to build and sustain successful collaborations. It is important to acknowledge potential challenges around communication and relationships and to take steps to mitigate them by speaking with one another in plain language, seeking clarification, assuming positive intent, and exploring misunderstandings as they arise. Writing in plain language is also important. For example, a nurse lead author may use nursing jargon if developing a manuscript for a nursing journal; however, this language would need to be adjusted as appropriate for several professions when speaking to a broader, interprofessional audience (Saver, 2017).

In addition to communicating in plain language, applying clear and consistent terminology and providing definitions for that terminology is crucial when collaborating interprofessionally to conduct research and disseminate findings. Disciplinary expectations, jargon and “insider terminology,” and the use of metaphors can all contribute to muddled writing and communication and even perpetuate professional silos (Bracken & Oughton, 2006; Koskan, Friedman, & Messias, 2010; Quinn et al., 2018; Szostak, 2014; Wear, 1999). Communicating in plain language with clear and consistent terminology is a problem of critical concern in interprofessional research (Barr, Koppel, Reeves, Hammick, & Freeth, 2005; Reeves, Lewin, Espin, & Zwarenstein, 2010; Reeves, Xyrichis, & Zwarenstein, 2017; Xyrichis, Reeves, & Zwarenstein 2017).

The terminology used in interprofessional team writing should largely depend on the disciplinary leanings of your research and target journal. For example, the *Journal of Interprofessional Care* acknowledges the inconsistent use of terminology in interprofessional writing and provides a glossary of relevant terms to guide how they should be applied as keywords and used in scholarly writing (Barr, Koppel, Reeves, Hammick, & Freeth, 2005; Informa UK Limited, 2018; Reeves et al., 2010). Furthermore, the *Journal of Interprofessional Care*'s blog post about successful publication highlights this issue and provides the example of “interprofessional collaboration” and “interprofessional teamwork” as two words with qualitatively different definitions that are often erroneously used interchangeably (Silvaggi, 2016; Appendix). Creating a “living” document, or “style sheet,” with your interprofessional writing team to iteratively track your decisions regarding style and terminology and serve as a reference will be helpful in promoting clear and consistent use of terminology among interprofessional writing team members

throughout the manuscript development process. As we translate our research to clinical care and policy settings, using clear and consistent terminology and definition will be paramount to extend the reach of interprofessional research and improve population health (Koskan et al., 2010; Paradis & Reeves, 2012).

Encourage participation, promote inclusivity, and leverage co-authors' strengths

One of the many strengths of interprofessional team writing is the potential for multiple perspectives to be represented. Participation should be encouraged and teams should be inclusive of all who were involved and are interested in writing. This necessitates an awareness and sensitivity to each co-author's background, including professional norms regarding scholarly publications and perceived status and seniority. Furthermore, because working styles vary (Barton, 2009), the approach used should fit the needs of the writing team. Some co-authors may prefer to work in dyads while others may prefer working in writing groups. Organizing different types and sizes of groups in the writing process will allow team members to thrive in their comfort zone, while also helping them develop skills working in other group settings. Understanding each other's background and styles will allow the team to leverage each participant's strengths in developing the IPE product (Hall & Zierler, 2014).

Discussion

Interprofessional team writing for scholarly publication is a rewarding endeavor, and our team has been successful in writing across professions, disciplines, and institutions by developing and adhering to the strategies and principles outlined in this guide. For further reference, Table 1 outlines a checklist and summary of the 15 key lessons learned for interprofessional teams to apply in their writing endeavors. Additionally, the 15 key lessons learned from our team's experiences has led to the development of an online “Interprofessional Team Writing Toolkit” Copyright © 2017 (Appendix). In this Toolkit, we included the resources that we have developed for use in our own interprofessional team writing to help establish common ground rules, set expectations, and prevent misunderstandings. We have found providing team members with these resources at the onset of each project helps them begin with a mutual understanding for effectively engaging in the collaborative writing process. This toolkit and the associated resources are free to use so they may benefit your interprofessional writing team. We have also listed additional online resources in the Appendix.

IPE scholars have an obligation to produce scholarly work to contribute knowledge that can advance the field (Ness et al., 2014; World Health Organization [WHO], 2010). Sharing findings through dissemination of scholarly IPE products will ultimately enhance the patient experience, reduce costs (Berwick, Nolan, & Whittington, 2008), improve population health, and provide further evidence for system-wide IPE and collaborative practice (IPEC, 2016; WHO, 2010).

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Appendix

Key Resources

Below is a selection of recommended websites for further reading about interprofessional team writing:

- Our interprofessional writing team has created an “Interprofessional Team Writing Toolkit” available online. Website: <https://collaborate.uw.edu/ip-team-writing-toolkit/>
- The *Journal of Interprofessional Care* blog post entitled, “Ten Tips for Publishing Manuscripts in the Journal of Interprofessional Care (Repost),” has tips for writing in interprofessional teams for publishing in the Journal. Website: <http://jicareblog.org/ten-tips-for-publishing-manuscripts-in-the-journal-of-interprofessional-care-repost/>
- The Biosemantics Group Journal/Author Name Estimator (JANE). Website: <http://jane.biosemantics.org/>
- International Committee of Medical Journal Editors authorship guidelines. Defining the role of authors and contributors. Website: <http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html>