

INTERPROFESSIONAL LEARNING AND COLLABORATION WITHIN A HOSPITAL, A qualitative study of experiencing interprofessional learning between medical and nursing students.

Background

In both medicine and nursing attrition is high, work stress and work culture are main causes. Interprofessional collaboration forms the basis of high quality person-centred care. It also minimize work stress and attenuate positive work culture and job satisfaction. However interprofessional collaboration is merely taught explicit.

Aim(s)

To support and strengthen a culture in which interprofessional collaboration in the medical and nursing profession is seen as the norm and necessity for high quality care and job satisfaction.

Methods

Qualitative research was conducted in two hospitals. 12 pairs were formed of nurse and medical students in their third or fourth year, doing their internship on a ward. They interviewed each other 3 times with intervals over period of some weeks. The first interview was to discuss the image of each others role. The second interview focussed on reflecting about a recent joint experience during care. At the third evaluative interview participants reflected on each others roles, values and how the previous exchange influenced this.

Results

All pairs experienced the conversations as valuable. Both professions mentioned the same expectations and characteristics needed to collaborate. The students could not always tell what the other profession entails. Taking perspective provides greater understanding. In addition a difference in the use of language is noticeable. The medical student communicates more decisively and less insecurely and more independently compared to the nurse student. At the end there was more unity, more understanding of each others perspective, more awareness and motivation to collaborate.

Discussion

The current curricula of both professions are still mainly focussed on their own discipline, interprofessional feedback is hardly seen during educational programs. Using a joint experience and that both are trainees ensures more equality and safety. The interventions used in this study have potential and will therefore be continued. A small addition during internship seems to provide more understanding and more equality. Furthermore it is recommended to include interprofessional learning and collaboration as a structural component within both curricula of medicine and nurses.

References

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