## Interprofessional Collaboration on an Internal Medicine Ward: Role Perceptions and Expectations among Nurses and Residents

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**BACKGROUND:** Effective interprofessional collaboration requires that team members share a common perception of each other's roles.

**PURPOSE:** Describe and compare residents' and nurses' perceptions and expectations of each other's professional roles in the context of an Internal Medicine ward.

**METHODOLOGY:** Study participants were volunteer residents (14) and nurses (14) from the Division of General Internal Medicine at the University Hospitals of Geneva.

We conducted individual semi-structured interviews to determine participants' perceptions of each other's professional roles. Interviews were transcribed verbatim, coded and analyzed using grounded theory and thematic analysis.

Additionally, participants completed a questionnaire containing 11 clinical scenarios for which they had to choose their own intended actions and the expected actions of the other professional, out of a list of 6 proposed actions. Correlation (Spearman) was computed between intended and expected action choices of residents and nurses.

**RESULTS:** Interviews: Nurses and residents shared a common overall representation of their roles and of teamwork. However, there were discrepancies in perceptions of professional interdependence and regarding nurse participation in decision making. Concerning unmet expectations, nurses expected residents to listen more to them and residents expected nurses to be more proactive in the decision-making process. All aspired knowing more about each other's profession.

Questionnaire (Table 1): The overall correlation of action choices between nurses and residents was 0.68 (p<0.001). Correlation between residents' expectations and nurses' intended actions was 0.56 (p=0.08), while correlation between nurses' expectations and residents' intended actions was 0.80 (p<0.001). Nurses' intended actions did not meet residents' expectations mainly regarding decision-making autonomy.

**CONCLUSION:** There was a lack of shared understanding and expectations about certain aspects of nurses' and residents' roles. Such discrepancies may influence the quality of collaboration between residents and nurses and thus affect patient management. Interprofessionnal training should foster a shared vision of interprofessionnal collaboration and understanding of each other's roles.

Action choices	ions intended by nurses and Expected by residents (N)	Intended by nurses (N)	Correlation*
1. call emergency team	0	1	-
2. call resident	55	46	0.74
3. call chief resident	1	1	-
4. call head nurse	18	13	1.00
5. wait for next round	27	20	0.50
6. manage by oneself	30	53	0.36
Overall			0.56
Cases type II (N=5) : ac	tions intended by residents a	nd expected by nurses	
Action choices	Intended by residents (N)	Expected by nurses (N)	Correlation*
	1	4	-
1. call a colleague	•	•	
0	30	38	0.82
2. call chief resident	30 16	38 12	0.82 1.00
2. call chief resident 3. call emergency team			
<ol> <li>call chief resident</li> <li>call emergency team</li> <li>contact family</li> </ol>	16		1.00
<ol> <li>call a colleague</li> <li>call chief resident</li> <li>call emergency team</li> <li>contact family</li> <li>call a specialist</li> <li>manage by oneself</li> </ol>	16 5	12 1	1.00 0.50

Table 1. Number of occurrences of action choices across 11 different paper cases

\*Spearman's rho across cases