The Institute of Medicine challenged health professions faculty to better educate students to work in teams across disciplines. Research demonstrates improved outcomes and increased patient satisfaction when health professionals work together. Stereotyping of professional roles differences in curricula timetables, and competing demands for faculty time sometimes interferes with interprofessional educational initiatives.

The purpose of this pilot project was to provide interprofessional teaching/learning opportunities for medicine interns and nurse practitioner students through a series of four (4) one-hour workshops and to leverage the teaching/learning opportunity of the workshop series around the common interprofessional core competency—developing cultural awareness.

The Multicultural Health Series, a series of cultural vignettes, was used to stimulate discussion surrounding health beliefs and practices, stereotyping, prejudices, and language barriers as they occur in healthcare. A total of 20 students from each discipline (5 medicine interns and 5 advanced practice nursing students per month) met for a luncheon seminar over a four-month period to view the case films and discuss the content.

Following discussion of the scenario, 5 questions generated discussion regarding perceptions of the value of interprofessional education. A 5-Minute Paper elicited additional responses.

Preliminary analysis indicates differences between the medical interns and the nurse practitioner students in 2 areas: 1) the role of cultural competency training and 2) the benefits of interprofessional education. Both groups recognized the need for cultural sensitivity in patient interactions, but differed in their approaches to diverse situations. The interns were more task-oriented and concerned about learning medical management than were the graduate nursing students. Both groups valued the cross-discipline exposure and discussion but differed in views on optimal timing in curricula.

Interprofessional education is desired by both nursing and medical trainees. It should begin earlier in their educational training to improve appreciation of role differences and contributions to culturally sensitive care.