Nurses and physicians are expected to work collaboratively in teams and across disciplines to positively affect patient outcomes. Where do health professionals learn to work together effectively in teams—each respecting what the other contributes to patient-centered care? One critical area of education, that of delivering culturally congruent and competent care, mandated by accrediting bodies as core competencies for both physicians and nurses, may be one key target area for interprofessional educational initiatives.

**Methods**

The Multicultural Health Series, (Kaiser Permanente Foundation), a series of cultural vignettes each 10 minutes long focusing on cross-cultural interactions between patients of diverse backgrounds and their health care providers was used to stimulate discussion surrounding differing health beliefs and practices, values in conflict, stereotyping, overt and covert prejudices, and language barriers as they occur in healthcare settings. 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 short case films and discuss the content.

**Results**

Preliminary analysis indicates differences between the medical interns and the graduate nursing students in 2 areas:

1) The role of cultural competency training and
2) The benefits of interprofessional education.

While both groups recognized the need for cultural sensitivity in patient interactions, they differed in their approaches to culturally diverse situations.

The medical interns were more task-oriented and concerned about learning medical management than were the nurse practitioner 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 patient-centered care. Analysis of the data is ongoing.

**Selected References**