***Table 2: studies concerning interprofessional training wards, research design and outcomes***

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Institution** | **Author / Year publisheda** | **Research question / Study aim** | **Type of research** | **Research tool**  (to study the research question) | **Number of study participants** | **Research outcome students** | **Research outcome patients** | **MERSQI** |
| Monash University,  Melbourne, Australia | Meek *et al.,* 2013 | .Compare Emergency Department (ED) performance indicators between IPL and usual care.  .Survey patient satisfaction. | Quantitative | Performance indicators:  Time to: nurse, doctor, inpatient referral, inpatient bed request, short stay unit bed request, ED length of stay  Patient satisfaction questionnaire from state-wide quality survey. | Study patients (n = 369)  Control patients (n = 365) | NS | Little difference in performance indicators between patients managed by IP student teams and similar group receiving usual ED care. Patients reported  high levels of satisfaction with student care. | 13 |
| Anderson *et al.,* 2014 | Describe development of an instrument to evaluate students’ perceptions of clinical learning environment during IP training. | Quantitative | Interprofessional Clinical Placement Learning Environment Inventory (ICPLEI) tool | Students (n = 38) | ICPLEI is reliable, feasible, fast to complete, suitable for use with pre-registration healthcare students.  After 2-week IP placement nursing, medical and allied health students rated their learning environment highly, with median responses 4 or 5 of five (mean total 83%). | NS | 7 |
| Morphet *et al.,* 2014 | Describe perceived effect of IP clinical placements on students. | Mixed methods | IPCPLEI tool  Focus groups students | ICPLEI (n = 38)  Focus groups students (n = 36) | Focus groups themes: student autonomy and workload; understanding other professional roles; communication; shared knowledge; IP teamwork/ collaboration; being part of “inner circle” of team.  In a postplacement satisfaction survey (n=38), students likewise rated the educational experience highly. | NS | x |
| Hood *et al.,* 2014 | Describe how senior nursing students viewed clinical learning environment and developed their professional identity through IP learning in a hospital ward. | Mixed methods | ICPLEI tool  Focus groups students  Satisfaction survey | Students (n = 23) | Focus group themes: describing “trying on”a professional role; “experiencing independence and autonomy”;”seeing clearly what nursing's all about”;”altered images of other professions”;”ways of communicating and collaborating’and‘becoming a functioning team”  Student satisfaction ratings were positive. | NS | x |
| Edmonton, Canada | Sommerfeldt *et al.,* 2011 | Explore processess and mechanisms to turn an acute care ward into an IP clinical learning unit. | Qualitative | Semi-structured interviews (patient care team members, students, faculty members)  Surveys (patient care team members, students and faculty members) | Interviews (n = 58)  Surveys (n = 107) | Interview themes: Communication; Profession specific learning foci; Teamwork; Uncertainty with teaching and learning pedagogy; Learning and work environment; Potential for increased interprofessionalism | NS | x |
| University of London, London, UK | Dando *et al.,* 2012 | NS | Mixed methods | .Generic written evaluation students experience  .Evaluation students  (open questions)  .Patients evaluation  .Mentor evaluation | Students (n = 59) | Placement positively evaluated; students reported increased understanding of their own role and that of teammates. Additional learning opportunities provided by the in-patient palliative care unit. | Number of patient questionnaires too low to analyse. | x |
| University of London, London, UK | Mackenzie *et al.*, 2007 | .Gather opinions on advantages and  disadvantages of this IP placement  .Make recommendations for future practice placements | Mixed methods | Nominal group technique | Students (n = 3) | Evaluation identifies value of this learning experience in giving students opportunities to: appreciate the importance of interpersonal skills; learn about other team members’ roles; experience the challenges of working on a busy geriatric rehabilitation ward. | NS | x |
| Aarhus University,  Regional Hospital Holstebro | Hansen *et al.,* 2009 | Compare whether the IP training unit is cost effective in treating patients compared with a conventional ward. | Quantitative | Cost-effectiveness analysis:  .QOL questionnaire at t=0 and t=3 months  .Data from hospital registry: diagnosis, procedure codes, gender, age, LOS, surgeon | Control patients (n = 62) IP patients (n = 72) | IP ward was more cost-effective than the conventional ward. | No difference was found in complications or patient-reported QOL. | 12 |
| Jacobsen *et al.,* 2009 | To investigate fulfillment of goals ITW | Qualitative | Focus group interviews + in-depth interview | Head nurse (n = 1), Project manager (n = 1), Superintendant therapists (n = 2), PhD student (n = 1), Students (n = 8) | Goals ITW fulfilled:  .IP teamwork learned  .Own professional role strengthened .Worked together in an organization for benefit patient | NS | x |
| Jacobsen *et al.,* 2010 | (1) To investigate to what extent medical students’ stay in the ITW contributes to the student’s professional knowledge and capability  (2) To investigate to what extent medical students’ stay in the ITW teaches IP collaboration in preparation for future clinical work.  (3) To evaluate the teaching and learning environment with special  focus on supervision given by clinical associate  professors and to find areas for further development of  supervision. | Mixed methods | Questionnaire post – ITW + semi-structured interview subgroup | Questionnaire (n = 55)  Interview (n = 22) | Medical students developed their professional knowledge / capability as they learned IP collaboration. Students valued the teaching methods because students were in the forefront and treated as professionals. Students demanded more homogeneous instruction and better introduction to the ITW. | NS | x |
| Jacobsen *et al.,* 2011 | To evaluate if students’ short term impressions of a clinical placement in an ITW are stable or if they will change over time. | Mixed methods | 12 item Questionnaire – Likert  Comparison of students’ short term perceptions of most important LOs immediately after a two week stay in the IP unit with alumni’s long term (1–4 years after graduation) perceptions of most important LOs from the IP unit. | Students (n = 398)  Alumni (n = 336) | Students stated “uniprofessionalism” as the most important LO followed by “interprofessionalism”, “professional identity” and “learning environment”.  Alumni stated “professional identity” as most important LO followed by “interprofessionalism”, “learning environment” and “uniprofessionalism”.  The study indicated that the  perceived outcome of learning experiences from an IPE ward change in priority. | NS | x |
| Norgaard *et al.,* 2013 | To assess impact of an IP training programme on students’ perceived self-efficacy by comparing students trained in an ITW vs. students trained in normal ward. | Quantitative | Online questionnaire (including validated instrument that assesses perceived self-efficacy in IP collaboration)  T1: before training; T2: directly after ITW; T3: after training | Students ITW (n = 239)  Students normal ward (n =405) | IP training improved students’ perception of self-efficacy more than traditional clinical training. | NS | 8 |
| Karolinska University, Stockholm, Sweden | Ponzer 2004 | Describe context and objectives of the IP clinical course and on reporting students’ perceptions of  this type of IP and professional training | Quantitative | Questionnaire focusing on students’ perceptions  regarding specific IPE ward goals; attitudes towards IP training; satisfaction with the course | Students (n = 962) | IPE wards provided students with good clinical training in their own professions; supported learning about other professions. Importance of good communication for teamwork and patient care was recognised. Quality of supervision and students’ perception of own professional roles were important factors regarding satisfaction. | NS | 10 |
| Lindblom *et al.,* 2007 | To assess medical students’ experiences of IP care during their orthopaedic training and patient satisfaction. | Quantitative | -Questionnaire students  -Patient-satisfaction questionnaires | Students (n = 962) Patients (n = 299) | Medical students were generally satisfied with the IP course. | Patient-satisfaction questionnaires showed that patients perceived CEW as highly satisfactory. | 8 |
| Hylin *et al.,*  2007 | To examine former students’ impressions of the IP course they had passed as undergraduate students and its relationship to their current healthcare experiences including their use of IP skills they had subsequently learned in practice. | Mixed methods | Follow-up questionnaire (Likert scale + open questions) | Former students (n = 633) | Qualitative analysis of open-ended questions regarding lasting impressions of the IP course at the training ward + opinions on how course should be developed resulted in five categories: .Professional role development .Working in teams .Tutoring. Patient care .Future aspects of course and real world practice  Most former students had lasting positive impressions of the clinical IPE course. | NS | x |
| Hallin *et al.,* 2009 | To evaluate whether students perceived that they had achieved IP competence after participating in patient based teamwork training during the clinical IPE course. | Mixed methods | Pre- and post-questionnaires | Students (n = 616) | All groups increased their perceived IP competence. OT and medical students had the greatest achievements. All groups perceived improved knowledge of the other three professions’ work and assessed that the course contributed to the understanding of the importance of communication and teamwork to patient care. | NS | x |
| Hylin *et al.,* 2011 | To investigate health care students’ evaluations of IP clinical training in relation to their approach to learning | Mixed methods | Questionnaire students | Students (n = 369) | Three clusters of study approaches: low collaboration, collaborative constructivist, cookbook.  Study orientations appear to play a role in how students evaluate IP training and should be taken into account in instruction. Students with a ‘Cookbook’ approach to learning showed an increased understanding of IP collaboration after the course. | NS | x |
| Hallin *et al.,* 2011 | To assess patients’ perceptions of collaborative and communicative aspects of care when treated at an ITW as compared to usual care. | Quantitative | Seven questions were chosen from a valid patient satisfaction questionnaire regularly used by hospital for quality assurance purposes. Questions concerned the collaborative and communicative aspects of care –areas were student involvement could have a positive or negative impact | ITW patients (n = 84)  Control patients (n = 62) | NS | ITW patients rated a higher grade of own participation in treatment as compared to controls (p = 0.006). Patients rated a higher grade of satisfaction with information regarding need for help at home (p = 0.003) and perceived that the staff had taken their home situation into account at a higher grade in the preparation of discharge (p = 0.0002). IPE patients felt better informed (p = 0.02). | 12 |
| Hallin and Kiessling 2016 | To address how and why an ITW increases collaborative and professional competence among students. | Qualitative | Questionnaire (free-text) | Students (n = 333) | Two main themes emerged:  1. Students found that the IPE ward provided an enriching learning environment—a safe authentic place with space.  2. They developed an awareness of their own development with faith in the future—from chaos to clarity. | NS | x |
| Ericson *et al.,* 2012 | NS | Mixed methods | .Validated questionnaire  . Summative feedback from supervisors based on a self-assessment evaluation form focusing both on team and profession-specific goals | Students (n = 314) | All three categories (medical, nursing, PT), with no significant difference, highly appreciated the setting and team training. The training significantly increased students’ knowledge of their own professional role as well as their knowledge of other professions. | NS | x |
| Ericson *et al.*, 2017 | To gain a deeper understanding of the contextual factors and mechanisms  that may contribute to the positive outcome of an ITW. | Mixed methods | Observations Questionnaires  Interviews | Students (n = 52 medical, n = 52 nursing, n = 16 PT students)  Supervisors (n = 35 physicians, n = 33 nurses,  n = 5 PTs. | The emergency ward provided an excellent environment for interprofessional education  (IPE), as attested by the students, supervisors, and the clinical managers.  An essential prerequisite is that  the students have obtained adequate skills to work independently. Exemplary conditions for IPE to work  well in an emergency department demand the continuity of effective and encouraging supervision  throughout the training period and supervisors who are knowledgeable about developing a team. | NS | x |
| Lachmann *et al.,* 2012 | To adapt the Contextual Activity Sampling System (CASS) questionnaire and methodology for use in clinical practice and how it is experienced by students. | Mixed methods | . CASS  .Interview students | CASS (n = 51)  Interview (n = 25) | CASS provided a range of detailed qualitative and quantitative data. Participants reported that CASS worked well, was easy to use, helped  them structure their days and reflect on their learning activities. | NS | x |
| Lachmann *et al.,* 2013  +  Lachmann *et al.,* 2014 | To investigate students’ learning experiences and academic emotions as they occur in actual context in relation to collaborative and trialogical activities during a clinical ITW course. | Mixed methods | . CASS (contextual activity sampling system)  .RIPLS before and after IPTW | Students (n = 37) | Results provided understanding of the students’ experiences of their academic emotions and how they created new knowledge collaboratively. These collaborative knowledge creation activities occurred mostly when students from different professions were collaborating as a team and were significantly related to optimal experiences, i.e. “flow” (high challenge in combination with high competence). | NS | x |
| Curtin University, Perth, Australia | Brewer *et al.,* 2013 | NS | Mixed methods | Curtin University IP capability Framework | Students (n = 79) | Observed IP capabilities at week (2 or) 3 were high.  Self assessment: CAT: grade 3 or 4 (high ratings). High level of satisfaction pre-post questionnaire. | High level of satisfaction patients | x |
| Queens University, Belfast, United Kingdom | Morison and Jenkins 2007 | Explore the attitudes of students 1 year after their experience of the undergraduate shared learning (SL) programme, and to compare attitudes of students who had participated in the programme with their  peers who had not. | Mixed methods | .Questionnaire (34 items) designed to assess their attitudes to SL, teamwork and IP communication and to explore sustained effects of SL. | Students (n = 171)  3 groups:  1. no experience SL  2. SL in lectures  3. SL in lectures and clinical placement | Significantly different responses were found between the groups for a number of statements, and these were further developed in responses to open-ended questions. Only group 3 had developed and sustained a less exclusive attitude and were better able to appreciate that SL can make an important contribution to learning communication skills and understanding patient problems. | NS | x |
| University of Gothenburg, Gothenburg, Sweden | Carlson *et al.,* 2011 | To gain a deeper understanding of facilitating as an important aspect of successful IPE, an ethnographic study was undertaken to describe how nurses act when facilitating IP student teams at a clinical training ward. | Qualitative | .Participant observation (50 hours) .Individual interviews  .Focus group | Observation / interview (n = 8)  Focus group (n = 4) | Analysis revealed four  strategies used when facilitating teams of IP students to enhance collaborative work and professional understanding:   * Supporting team work * Facilitating professional understanding * Breaking down barriers * Using a reflective approach   Nurse facilitator as a team builder is a new and exciting role for nurses taking on responsibility of facilitating IP student teams. | NS | x |
| Royal London Hospital, London, UK | Freeth et al, 2001 | Evaluation ITW  from nurse perspective | Mixed methods | .Semi-structured interviews  .Questionnaire data students (pre- and post IP)  .Group interviews  .Observational data (focusing on the student ward-based work, their handovers and their reflective sessions) | Interviews (n = 23)  Questionnaire / group interviews (n = 36) | The most important finding of the evaluation was that patients, students and staff considered the training ward to have been worthwhile and successful. | Data collected from the training ward patients  revealed that all patients enjoyed their stay  on the ward. Training ward patients were more  satisfied with their hospital stay than patients  who received ‘normal’ care. Training ward patients felt that they received ‘more individual attention’ and information than they normally received during hospital stays. | x |
| Reeves *et al.,* 2002  +  Reeves *et al.,* 2002 | Student, staff and patients’ experiences of ITW. | Mixed methods | .Group interviews with student teams  .Pre-/post-individual interviews facilitators  .Questionnaires with training ward patients and non-training ward patients  .Pre-/post-ward questionnaires students;  .Follow-up questionnaire students after 1 year | Students (n = 36)  Facilitators (interview) (n = 10)  ITW patients (n = 34)  Non ITW patients (n = 34) | IP training ward pilot:  -Enhanced teamwork skills  -Provided valuable learning experience for an IP students that resulted in rich insights into teamwork, patient care  -Provided valuable staff development in relation to IP facilitation  -Delivered safe, appropriate care  -Elevated roles of collaborating institutions, with potential to improve recruitment and retention  Facilitators:  -Positive, but very time-consuming + stressful.  -Needed proper preparation + traning. | Questionnaire data  from training ward patients over pilot period revealed  that they were very  satisfied with care compared to the control group. Training ward patients felt that students communicated better  with them. Patients felt that amount of attention from students + their motivation and enthusiasm were better than they experienced in normal wards. | x |
| Linköping University, Linköping, Sweden | Fallsberg *et al.,* 1999 | To examine whether IP ward project improves students ’attitudes towards the IP goals. | Quantitative | Questionnaire students | Students (n = 176) | Results show that students from all programmes, generally speaking, entered the training with high expectations and that these expectations changed very little, i.e. their expectations were satisfied.  The IP ward gave students an understanding of the skills of other health care professions  nursing students were most positive. | NS | 8 |
| Fallsberg *et al.,* 2000 | To measure student attitudes and to evaluate both expectations and fulfillment of the stated goals of the 2-week rotation. | Qualitative | .Critical incident method  .Interviews | Critical incident method  (n = 113)  Interview (n = 7) | - Students used 3 strategies for integrated teamwork: delegating, differentiating and discussion.  - Students used 2 approaches to think about integrated teamwork: equal work distribution and life-long learning  - Important to stress to students that IPE is combination of collaborative practice + specialist content | NS | x |
| Pelling *et al.,* 2011 | To examine students’ assessments of their progress in participating in IP collaboration. | Quantitative | Questionnaire (scale) | Students (n = 841) | Students from all programmes reported that the student ward had strengthened insight about their own future professional role, roles of the other professions and the value of teamwork within health care. | NS | 8 |
| Falk *et al.,*  2013 | To understand student experiences of collaboration and learning in an IP training ward through the lens of practice theory. | Qualitative | Questionnaire (open questions) | Students (n = 454) | Themes:  -Enactment of expected profesional responsibilities.  -Dealing with unexpected- conflicting understanding (e.g. doing general tasks and being forced to be on the ward the entire day. | No | x |
| Lindh Falk *et al.*, 2015 | To explore how female and male students from different programs  within the health care education system experience an IPE ward as a part of their professional identity formation. | Quantitative | Questionnaire - Likert | Students (n = 454) | .positive influence on professional development  .female and male medical students were significantly less  positive than other female and male students  .male students from all programs were slightly, but significantly, less positive than all the female students. | NS | 11 |
| Hull York Medical School, Heslington, York, UK | McGettigan *et al.,* 2015 | To investigate the impact of ITW on students, on staff (work demand and perceived quality of care) and on patients (quality indicators ward). | Mixed methods | Students: RIPLS  Staff: Questionnaire for Psychological and Social factors  at Work (QPS Nordic) +  focus groups | Students RIPLS: medical (n=308), nursing (n=10), OT + PT (n = 14)  Staff: QPS Nordic pre-rotation n=33 and post-rotation n=16 | Staff identified benefits including skills recognition and expertise sharing. Ward functioning was stable. Students showed significant improvements in the RIPLS measures of Teamwork, Professional Identity and Patient-Centered Care. Despite small numbers of students from other professions,  medical students’ rated the placement highly. | NS | x |

*aFreeth & Nicol et al., 1998 was not described in Table 2 as the article did not have a research question and only reported evaluations that were not gathered in a systematic manner.*

**References**

Anderson A, Cant R, Hood K. 2014. Measuring students perceptions of interprofessional clinical placements: development of the Interprofessional Clinical Placement Learning Environment Inventory. Nurse Educ Pract. 14:518–524.

Brewer ML, Stewart-Wynne EG. 2013. An Australian hospital-based student training ward delivering safe, client-centred care while developing students’ interprofessional practice capabilities. J Interprof

Care. 27:482–488.

Carlson E, Pilhammar E, Wann-Hansson C. 2011. The team builder: the role of nurses facilitating interprofessional student teams at a Swedish clinical training ward. Nurse Educ Pract. 11:309–313.

Dando N, d’Avray L, Colman J, Hoy A, Todd J. 2012. Evaluation of an interprofessional practice placement in a UK in-patient palliative care unit. Palliat Med. 26:178–184.

Ericson A, Lofgren S, Bolinder G, Reeves S, Kitto S, Masiello I. 2017. Interprofessional education in a student-led emergency department: a realist evaluation. J Interprof Care. 31:199–206.

Ericson A, Masiello I, Bolinder G. 2012. Interprofessional clinical training for undergraduate students in an emergency department setting. J Interprof Care. 26:319–325.

Falk AL, Hult H, Hammar M, Hopwood N, Dahlgren MA. 2013. One site fits all? A student ward as a learning practice for interprofessional development. J Interprof Care. 27:476–481.

Fallsberg MB, Wijma K. 1999. Student attitudes towards thegoals of an inter-professional training ward. Med Teach. 21:6.

Fallsberg MB, Hammar M. 2000. Strategies and focus at an integrated, interprofessional training ward. J Interprof Care. 14:337–350.

Freeth D, Reeves S, Goreham C, Parker P, Haynes S, Pearson S. 2001. ’Real life’ clinical learning on an interprofessional training ward. Nurse Educ Today. 21:366–372.

Hallin K, Henriksson P, Dalen N, Kiessling A. 2011. Effects of interprofessional education on patient perceived quality of care. Med Teach. 33:e22–e26.

Hallin K, Kiessling A. 2016. A safe place with space for learning: Experiences from an interprofessional training ward. J Interprof Care. 30:141–148.

Hallin K, Kiessling A, Waldner A, Henriksson P. 2009. Active interprofessional education in a patient based setting increases perceived collaborative and professional competence. Med Teach. 31:151–157.

Hansen TB, Jacobsen F, Larsen K. 2009. Cost effective interprofessional training: an evaluation of a training unit in Denmark. J Interprof Care. 23:234–241.

Hood K, Cant R, Leech M, Baulch J, Gilbee A. 2014. Trying on the professional self: nursing students’ perceptions of learning about roles, identity and teamwork in an interprofessional clinical placement.

Appl Nursing Res. 27:109–114.

Hylin U, Lonka K, Ponzer S. 2011. Students’ approaches to learning in clinical interprofessional context. Med Teach. 33:e204–e210.

Hylin U, Nyholm H, Mattiasson AC, Ponzer S. 2007. Interprofessional training in clinical practice on a training ward for healthcare students: a two-year follow-up. J Interprof Care. 21:277–288.

Jacobsen F, Fink AM, Marcussen V, Larsen K, Hansen TB. 2009. Interprofessional undergraduate clinical learning: results from a three year project in a Danish Interprofessional Training Unit. J Interprof Care. 23:30–40.

Jakobsen F, Hansen TB, Eika B. 2011. "Knowing more about the other professions clarified my own profession". J Interprof Care. 25:441–446.

Jakobsen F, Larsen K, Hansen TB. 2010. This is the closest I have come to being compared to a doctor: views of medical students on clinical clerkship in an Interprofessional Training Unit. Med Teach.

32:e399–e406.

Lachmann H, Fossum B, Johansson UB, Karlgren K, Ponzer S. 2014. Promoting reflection by using contextual activity sampling: a study on students’ interprofessional learning. J Interprof Care. 28:400–406.

Lachmann H, Ponzer S, Johansson UB, Benson L, Karlgren K. 2013. Capturing students’ learning experiences and academic emotions at an interprofessional training ward. J Interprof Care. 27:137–145.

Lachmann H, Ponzer S, Johansson UB, Karlgren K. 2012. Introducing and adapting a novel method for investigating learning experiences in clinical learning environments. Informat Health Soc Care.

37:125–140.

Lindblom P, Scheja M, Torell E, Astrand P, Fellander-Tsai L. 2007. Learning orthopaedics: assessing medical students’ experiences of interprofessional training in an orthopaedic clinical education ward.

J Interprof Care. 21:413–423.

Lindh Falk A, Hammar M, Nystrom S. 2015. Does gender matter? Differences between students at an interprofessional training ward. J Interprof Care. 29:616–621.

Mackenzie A, Craik C, Tempest S, Cordingley K, Buckingham I, Hale S. 2007. Interprofessional learning in practice: the student experience. Br J Occup Ther. 70:358–361.

McGettigan P, McKendree J. 2015. Interprofessional training for final year healthcare students: a mixed methods evaluation of the impact on ward staff and students of a two-week placement and of

factors affecting sustainability. BMC Med Educ. 15:185.

Meek R, Morphet J, Hood K, Leech M, Sandry K. 2013. Effect of interprofessional student-led beds on emergency department performance indicators. Emerg Med Aust. 25:427–434.

Morison S, Jenkins J. 2007. Sustained effects of interprofessional shared learning on student attitudes to communication and team working depend on shared learning opportunities on clinical placement as well as in the classroom. Med Teach. 29:450–470.

Morphet J, Hood K, Cant R, Baulch J, Gilbee A, Sandry K. 2014. Teaching teamwork: an evaluation of an interprofessional training ward placement for health care students. Adv Med Educ Pract. 5:197–204.

Norgaard B, Draborg E, Vestergaard E, Odgaard E, Jensen DC, Sorensen J. 2013. Interprofessional clinical training improves selfefficacy of health care students. Med Teach. 35:e1235–e1242.

Pelling S, Kalen A, Hammar M, Wahlstrom O. 2011. Preparation for becoming members of health care teams: findings from a 5-year evaluation of a student interprofessional training ward. J Interprof

Care. 25:328–332.

Ponzer S, Hylin U, Kusoffsky A, Lauffs M, Lonka K, Mattiasson AC, Nordstrom G. 2004. Interprofessional training in the context of clinical practice: goals and students’ perceptions on clinical education wards. Med Educ. 38:727–736.

Reeves S, Freeth D. 2002. The London training ward: an innovative interprofessional learning initiative. J Interprof Care. 16:41–52.

Sommerfeldt SC, Barton SS, Stayko P, Patterson SK, Pimlott J. 2011. Creating interprofessional clinical learning units: developing an acute-care model. Nurse Educ Pract. 11:273–277.