



Nurses' Perception of Physiotherapists as Rehabilitation Team Member in a North East Nigerian Hospital.

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Abstract

This study arose from the necessity to improve professional interaction and communication that can facilitate group process and team building for the benefit of the patients and clients. As different team members often have different perception of other professionals' roles within the team. But data on the level of perception among these professional groups are not readily available in Nigeria. This study aimed to determine nurses' perception of physiotherapists as rehabilitation team members in a North East Nigerian Hospital. Sample of convenience was used to recruit 298 male and female nurses. A 31 items role perception questionnaire adapted from generic role perception questionnaire was used to assess nurses' perception. The questionnaires were given to the participants in the course of their duty and completed in the presence of the researchers. Socio-demographic information of gender, age, educational qualifications, ranks, and years of working experience were also obtained from the participants. The result showed that nurses have above average level of knowledge and awareness of physiotherapy with a mean score of 5.06 ± 1.57 . The result also showed that nurses had a good perception of physiotherapists as rehabilitation team member 21.17 ± 4.89 .

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The registered midwives had a significant higher perception of physiotherapist as rehabilitation team member than other education qualifications ($f= 3.06$, $p= 0.03$) and the assistance chief nursing officer had a significant higher perception than the other ranks ($f= 16.35$, $p<0.01$). Also, nurses who have between 25-35 years of working experience had a significant higher perception than those who have spent lesser years ($f= 35.32$, $p< 0.01$). Significant difference was not found between male and female nurses' perception of physiotherapists as rehabilitation member. The study affirmed previous findings that Nurses have good perception of physiotherapists as rehabilitation team member.

Keywords: Rehabilitation Team; Nurses; Physiotherapist; Perception.

1. Introduction

Rehabilitation team employs a transdisciplinary approach to rehabilitation processes that addresses the medical, physical, cognitive, neuropsychological, and family needs of the patient. Working together, physicians, therapists, and nurses develop individualized itinerary of treatment to help each patient set and reach practical, patient-focused goals. Rehabilitation team is widely accepted as the preferred approach for meeting the complex array of bio psychosocial needs presented by patients traditionally receiving medical rehabilitation services [1, 2]. While its composition and methods are still evolving [3, 4], there can be little doubt about its potential for complexity, both structurally and operationally. As rehabilitation team is composed of members from different professional disciplines (e.g., medicine, nursing, occupational therapy, physical therapy, social work, speech pathology, and others) and therefore has a rich blend of occupational modus operandi and cultures. The dynamics within rehabilitation teams present distinct challenges to the delivery of effective rehabilitation services. The rehabilitation team plays a critical role in the determination of appropriate services to ensure maximum patients' function.

Rehabilitation can be defined as a health strategy that aims to enable people with health conditions experiencing or likely to experience disability to achieve optimal function in interacting with their environment [5]. Rehabilitation focus less on impairment, but help the patient find "ability" in the presence of obvious disability [6,7]. Rehabilitation also focuses on enhancing the quality of life of patient [8, 9]. Successful rehabilitation of a patient depends on the collaboration and cooperation among members of a rehabilitation team with a common client- focus goal [10]. The skills and knowledge of each member is required to ensure successful outcome for the patient and family. According to [11] rehabilitation team collaborative work provides opportunities for informal education across disciplines and enhances skill and knowledge for their profession, as well as sense of understanding and respect among healthcare professionals.

The prime purpose of physiotherapy is to restore function, independence and prevent injuries and illnesses [12]. Physiotherapy as a profession provides a holistic multi-faceted approach to the management of a wide range of conditions. Physiotherapists are an integral part of the multidisciplinary team; provide interventions focus around patients' goals and aim to maximize their functional ability, prevent secondary complications and enhance self-efficacy [13]. In the United Kingdom, Dalley and Sim [14] found that nurses perceived the role of physiotherapists as being concerned with mobility and movement and valued the therapist knowledge and skill

in rehabilitation. They felt though that physiotherapists had insufficient understanding of the demands and pressure of nursing practise and lacked recognition of the nurses' professional autonomy in decision making in rehabilitation. They also view nursing and physiotherapy as two quite distinct and different roles in rehabilitation, despite roles being overlapping. A similar study by Chilvers [15] on nurses' perception of assessment and rehabilitation found that nurses perceived rehabilitation as purely role of physiotherapist and holistic care is clearly lacking in rehabilitation of the patient. According to Davis and Marsden [16], nurses believed in providing appropriate care to the disabled patient and client but do not perceive the importance of functional rehabilitation in patient as a problem. However, in another study [17] the authors found the majority of nursing staff (66%) of acute health centres believed that rehabilitation was activity undertaken by physiotherapists aimed at improving patients' functional abilities. Walker [18] also found that nurses perceive rehabilitation to be entirely the function of physiotherapists, which involve improve functional ability with the use of movement techniques and physical modalities achieved by thorough assessment and goal planning. Studies [19, 20, 21] have focused mainly on the perceived characteristics of physiotherapists or what is known about the profession and the services it provides [22, 23]. Other Health care professionals associate the profession with exercise and treatment of musculoskeletal conditions and seem unaware of the range and extent of physiotherapeutic services [23, 24]. Information has been elicited from diverse groups such as patients and non-patients [19], high school students [25] medical practitioners [19, 22] and practicing physiotherapists [26]. Physiotherapy seems to lack a clear identity, with some evidence suggesting that the public and even health care professionals are unable to differentiate physiotherapy from related health care professions [27]. Research on the effectiveness of coordinated teams in variety of disciplines and specialties continue to support the assumption that team approach is both enduring and efficient [28, 29, 30].

There is therefore little or no definite role identification and demarcation among members of the rehabilitation team especially in hospital settings or health facilities based in developing countries like Nigeria, where rehabilitation team work has not yet been fully accepted or practice as an integral part of patients' management. And that nurses being much closer to patients and patients first contacts in these health settings are supposed to have a positive perception to other rehabilitation team members like the physiotherapist, for a much effective and decisive rehabilitation of patients. It is therefore of significance for nurses to have good perception of physiotherapists for optimum and effective patients' rehabilitation, avoidance of replication and disintegration of roles [31]. This is equally important as each team member will bring an exceptional perspective of their profession and work together to achieve best possible results [32]. Furthermore, a good perception can facilitate effective contribution to knowledge and clinical skills necessary to care for clients and patients with physical disability and chronic illness [32]. Moreover, a good perception of physiotherapy by the nurses will help in improving patients planning and appropriate rehabilitation delivery within the hospital setting, thereby preventing any role replication, avoidance of role participation and facilitating proper referral process. To buttress the fact that good perception is also important to improve professional interaction and communication that can facilitate the group process and team building for the benefit of the patients and clients. There is paucity of data on nurses' perception of physiotherapist as rehabilitation team member in Nigeria, with available studies solely from developed countries.

To the best of our knowledge, no study has been published on Nigerian nurses perception of physiotherapists in

Nigeria. There is a dearth of information concerning perception of physiotherapist as rehabilitation team member in Nigeria, as there are no readily available existing data. Thus, this study investigated on nurses' perception of physiotherapists as rehabilitation team member in University of Maiduguri Teaching Hospital, Borno State, North Eastern, Nigeria.

2. Method

2.1 Participants and design

Two hundred and ninety-eight (298) willing male and female nurses out of the 385 nurses employed by the University of Maiduguri Teaching Hospital Borno State, Nigeria, participated in this study. Student Nurses were not included in this study. Sample of convenience was used to recruit the participants. The design of the study is a cross-sectional survey.

2.2 Procedure

An ethical approval was collected from the ethical review committee, University of Maiduguri Teaching Hospital for this study. Consent forms were given to the participants before the completion of the questionnaire. The questionnaires were given to the participants in the course of their duty and completed in the presence of the researchers.

2.2.1 Instrument

The instrument used for data collection is a close-ended structured questionnaire that was adapted from generic role perception questionnaire. It consists of two sections; Section A was used to elicit information on the participants' socio demographic information which include sex, age, educational qualification, rank and years of service of the participants. Section B is a 31-item questions divided into five (5) parts for assessing Nurses' perception of the physiotherapists as rehabilitation team member. The first part assessed nurses' knowledge and awareness of physiotherapy, second part assessed nurses' perception of role and interaction of physiotherapists in rehabilitation team, third part assessed nurses' perception of role and interaction of physiotherapist in patient management, fourth part assessed nurses' perception of physiotherapy as a profession and the last part assessed nurses' perception of physiotherapy as a career choice and confidence in physiotherapists. Participants choose either "yes", "no" or "I am not sure" represented by 1, 2, 3 respectively. Participants who choose "yes" were scored "1" while "no" and "i am not sure" were scored "0". Lower score indicates poor perception while higher score indicates good perception. Overall perception of nurses' perception score calculated as the sum of all scores from the five domains. The generic role perception questionnaire also contains 31 items questions which have been used for various health care professionals [33].

2.2.1.1 Reliability and validity of the instrument

Test re-test reliability of this tool was conducted prior to collection of data. The questionnaire was self-administered to 10 nurses of University of Maiduguri teaching hospital. The same questionnaire was

administered to the same 10 nurses after two weeks. A test re-test reliability of the instrument was determined using Pearson's correlation coefficient; the tool demonstrated a modest to moderate reliability coefficient ranging from 0.49 to 0.66. Face and content validity of the questionnaire was determined to be good and acceptable by two experts in the field of physiotherapy and nursing.

3. Data Analysis

Descriptive statistics of proportions were used to describe the socio demographic data of participants. Mean and standard deviation were used to describe nurses' level of perception of physiotherapy as a rehabilitation team member. Independent t-test was used to analyse difference between male and female nurses' perception of physiotherapists as rehabilitation team member. One-way ANOVA was used to analyse the difference: in perception of physiotherapists as rehabilitation team members by sociodemographic characteristics. Statistical significant difference was defined as p-values less than 0.05. All analysis was done using SPSS Version 16.

4. Results

Table 1 shows the sociodemographic characteristics of the participants. A total of 298 out of 385 nurses participated in this study translating to a response rate of 77.4%. More female 175 (58.7%) than male 123 (41.3%) nurses participated in this study. One hundred and sixty participants (53.7%) were between the age group of 25-39 years, 166 (55.7%) were registered nurses and registered midwives and 15 (5%) were nurses prepared at bachelors degree level. Eighty-eight (29.5%) were nursing officer II, 26 (8.7%) were chief nursing officers, 159 (53.4%) had spent between 1-12years in service, 30 (10.1%) between 25-35years in service (Table 1).

The overall nurses' perception of physiotherapists as rehabilitation team members was 21.17 ± 4.89 , Participants' score ranged from 5 to 31, with a maximum possible score of 31.

Table 2 shows nurses' knowledge and awareness of physiotherapy. Findings showed mean score in knowledge and awareness of all participants to be 5.06 ± 1.57 with maximum possible score of 7, while male and female have a mean score of 5.02 ± 1.56 and 5.09 ± 1.59 respectively. Nurses between 40-59 years have a mean score of 6.03 ± 0.98 , while registered midwives 6.14 ± 0.90 , assistance chief nursing officer 6.27 ± 0.83 and nurses with 25-35 years of working experience have a mean score of 6.20 ± 0.85 .

The mean score on the perception of role and interaction of physiotherapists by the nurses' was 4.33 ± 1.86 with maximum possible score of 8, while male and female have a mean score of 4.32 ± 1.97 and 4.34 ± 1.79 respectively. Nurses of 18-24 years have the lowest mean score of 3.79 ± 1.88 , registered midwives and nurses with bachelor degree have a mean score of 5.14 ± 1.95 and 3.92 ± 1.03 respectively, with chief nurses scoring 5.27 ± 1.93 and those who have spent between 13-24 years in service has a mean score of 4.81 ± 1.69 (table 3).

Table 4 shows detailed information on nurses' level of perception of role and interaction of physiotherapists in patient management. The mean score of all the participants was 3.75 ± 1.11 with a maximum possible score of 5, while male and female have a mean score of 3.63 ± 1.16 and 3.82 ± 1.06 respectively. Nurses between age group

of 18-24 years and 25-39 years have a mean score of 3.47 ± 1.23 and 3.66 ± 1.14 respectively, nurses who had both registered nursing and registered midwives qualification scored 3.76 ± 1.10 , nursing officer II scored 3.41 ± 1.19 . Nurses with 1-12 years of working experience scored 3.48 ± 1.20 .

The mean score of nurses' perception of physiotherapy profession was 3.96 ± 1.58 with a maximum score of 6 with male and female with a mean score of 3.92 ± 1.62 and 3.98 ± 1.56 respectively. Participants between the age group of 18-24 years with the lowest mean score of 3.5 ± 1.65 , registered nursing with 3.66 ± 1.42 , Senior nursing officer with 4.06 ± 1.51 and nurses with years of working experience 25-35 and 13-24 years with a mean score of 4.87 ± 1.46 and 4.36 ± 1.42 respectively (table 5).

Table 6 shows nurses' level of Perception as career choice and confidence in the profession. The mean score of all the participants was 4.08 ± 1.01 with maximum possible score of 5, with male and female having a mean score of 4.02 ± 1.16 and 4.11 ± 0.90 respectively, nurses between the age group of 40-59 years 4.35 ± 0.8 , registered midwives and registered nursing with a mean score of 4.71 ± 0.92 and 4.08 ± 0.99 respectively. The chief nursing and principal nursing with a mean score of 4.46 ± 0.65 and 4.19 ± 0.92 respectively while participants 13-24 years of working experience has a mean score of 4.28 ± 0.84 (Table 6).

Table 7 shows the differences in perception of physiotherapists as rehabilitation team members among nurses by their socio-demographic characteristics. There was no significant difference between the male and female nurses' perception of physiotherapists as members of the medical rehabilitation team ($p > 0.05$), while differences was observed by educational qualifications ($f = 3.06$, $p = 0.03$) with the registered midwives having the highest significant mean score 24.71 ± 3.95 . Post hoc analysis shows that the registered midwives scored a significant higher ($p < 0.05$) than the registered nurses and the nurses who are prepared with bachelors degree. Significant difference was observed by different ranks ($f = 16.35$, $p < 0.01$) with the assistance chief nursing officers having the highest mean score 25.31 ± 3.22 . The chief nursing officer, assistance chief nursing officer, principal nursing officer, and senior nursing officers each scored a significant higher perception ($p < 0.01$) than the nursing officer II and nursing officer I. Also, the chief nursing officers and assistance chief nursing officer each scored a significant higher ($p < 0.01$) than senior nursing officer whereas chief nursing officer scored a significant higher perception ($p < 0.01$) than the principal nursing officers. Significant difference was also found by years of working experience ($f = 35.32$, $p < 0.01$) among nurses with 25-35 years having significant higher mean score of 25.03 ± 3.9 ($p < 0.01$) than those with 1-12 years of working experience and those who have 13-24 years of working experience ($p < 0.01$). Similarly, participants who have 13-24 years of working experience scored significant higher ($p < 0.01$) than those who have 1-12 years of working experience.

Table 8 shows nurses response to specific questions. The nurses response to the question "do you think physiotherapist can work in other places other than hospital"? 199(66.85) responded yes and 97 (32.6 %), responded no with 2(0.7%) no any response. Response for the question "do you think physiotherapists can manage other conditions apart from those related to muscle, tendons and bones"? 138(46.3%) of them responded yes. Nurses response to the question "do you think physiotherapists have specific role with little collaborate with other members"? 77(25.8%) responded positively and 221(74.2%) responded negatively.

Responses to the question “do you usually refer patient for physiotherapy” was 263(87.8%) yes and 33(11.1%) no.

Table 1: Socio-demographic characteristics of the Participants

Characteristics	n	%
Gender		
Male	123	41.3
Female	175	58.7
Age group		
18-24yrs	58	19.5
25-39yrs	160	53.7
40-59yrs	80	26.8
Educational Qualification		
Registered nursing	110	36.9
Reg. nursing/Reg. Midwifery	166	55.7
Registered midwifery	7	2.3
B.sc nursing	15	5.0
Rank		
Nursing officer II	88	29.5
Nursing Officer I	54	18.1
Senior nursing officer	68	22.8
Principal nursing officer	36	12.1
Ass Chief nursing officer	26	8.7
Chief nursing officer	26	8.7
Years of experience		
1-12yrs	159	53.4
13-24yrs	109	36.6
25-35yrs	30	10.1

Table 2: Nurses' level of knowledge and awareness of physiotherapy

Characteristics	Score	
	Mean	(S.D)
Gender		
Male	5.02	1.56
Female	5.09	1.59
Age group		
18-24yrs	4.21	1.78
25-39yrs	4.89	1.50
40-59yrs	6.03	0.98
Educational Qualification		
Registered nursing	4.89	1.61
Reg nursing/Reg Midwifery	5.19	1.54
Registered midwifery	6.14	0.90
B.sc nursing	4.40	1.59
Rank		
Nursing officer II	4.42	1.77
Nursing Officer I	4.69	1.48
Senior nursing officer	4.97	1.40
Principal nursing officer	5.72	1.14
Ass Chief nursing officer	6.27	0.83
Chief nursing officer	6.12	0.95
Years of experience		
1-12yrs	4.57	1.63
13-24yrs	5.47	1.35
25-35yrs	6.20	0.85

Table 3: Nurses' level of Perception of role and interaction of physiotherapists in Rehabilitation team

Characteristics	Score	
	Mean	(S.D)
Gender		
Male	4.32	1.97
Female	4.34	1.79
Age group		
18-24yrs	3.79	1.88
25-39yrs	4.04	1.74
40-59yrs	5.3	1.74
Educational Qualification		
Registered nursing	4.15	1.77
Reg nursing/Reg Midwifery	4.45	1.97
Registered midwifery	5.14	1.95
B.sc nursing	3.93	1.03
Rank		
Nursing officer II	3.77	1.94
Nursing Officer I	3.7	1.53
Senior nursing officer	4.5	1.73
Principal nursing officer	4.81	1.53
Ass Chief nursing officer	5.5	1.86
Chief nursing officer	5.27	1.93
Years of experience		
1-12yrs	3.8	1.79
13-24yrs	4.81	1.69
25-35yrs	5.43	1.96

Table 4: Nurses' level of Perception of role and interaction of physiotherapist in patient management

Characteristics	Means	Score	
		(S.D)	
Gender			
Male	3.63	1.16	
Female	3.82	1.06	
Age group			
18-24yrs	3.47	1.23	
25-39yrs	3.66	1.14	
40-59yrs	4.13	0.83	
Educational Qualification			
Registered nursing	3.69	1.15	
Reg nursing/Reg Midwifery	3.76	1.10	
Registered midwifery	4.14	1.07	
B.sc nursing	3.80	1.01	
Rank			
Nursing officer II	3.41	1.19	
Nursing Officer I	3.37	1.20	
Senior nursing officer	3.99	1.03	
Principal nursing officer	3.89	0.95	
Ass Chief nursing officer	4.15	0.73	
Chief nursing officer	4.42	0.64	
Years of experience			
1-12yrs	3.48	1.20	
13-24yrs	3.99	0.98	
25-35yrs	4.27	0.64	

Table 5: Nurses' level of Perception of Physiotherapy Profession

Characteristics	Score	
	Mean	(S.D)
Gender		
Male	3.92	1.62
Female	3.98	1.56
Age group		
18-24yrs	3.5	1.65
25-39yrs	3.79	1.56
40-59yrs	4.63	1.38
Educational Qualification		
Registered nursing	3.66	1.42
Reg nursing/Reg Midwifery	4.19	1.65
Registered midwifery	4.42	1.27
B.sc nursing	3.33	1.59
Rank		
Nursing officer II	3.31	1.53
Nursing Officer I	3.81	1.57
Senior nursing officer	4.06	1.51
Principal nursing officer	4.5	1.44
Ass Chief nursing officer	5.0	1.38
Chief nursing officer	4.38	1.44
Years of experience		
1-12yrs	3.51	1.57
13-24yrs	4.36	1.42
25-35yrs	4.87	1.46

Table 6: Nurses' level of Perception as career choice and confidence in the profession

Characteristics	Score	
	Mean	(S.D)
Gender		
Male	4.02	1.16
Female	4.11	0.90
Age group		
18-24yrs	4.03	0.97
25-39yrs	3.96	1.10
40-59yrs	4.35	0.8
Educational Qualification		
Registered nursing	4.08	0.99
Reg nursing/Reg Midwifery	4.04	1.05
Registered midwifery	4.71	0.49
B.sc nursing	4.07	0.8
Rank		
Nursing officer II	3.98	1.02
Nursing Officer I	3.75	1.30
Senior nursing officer	4.1	0.93
Principal nursing officer	4.19	0.92
Ass Chief nursing officer	4.42	0.70
Chief nursing officer	4.46	0.65
Years of experience		
1-12yrs	3.89	1.11
13-24yrs	4.28	0.84
25-35yrs	4.3	0.84

Table 7: Difference in overall Perception of physiotherapists as rehabilitation team members among nurses by socio-demographic characteristics

Characteristics	Mean (SD)	T-value	F-value	p-value
Gender				
Male	20.94(5.13)			
Female	21.34(4.72)	-0.74		0.48
Educational Qualification				
Registered nursing	20.5(4.60) ^a			
Reg nursing/Reg Midwifery	21.62(5.08)			
Registered midwifery	24.71(3.95) ^b			B.sc
nursing	21.17(4.17) ^c	3.06	0.03	
Rank				
Nursing officer II	18.9(5.3) ^d			
Nursing Officer I	19.33(4.19) ^e			
Senior nursing officer	21.62(4.14) ^f			
Principal nursing officer	23.17(3.47) ^g			
Ass Chief nursing officer	25.31(3.22) ^h			
Chief nursing officer	24.65(3.72) ⁱ		16.35	<0.01
Years of experience				
1-12yrs	19.25(4.81) ^j			
13-24yrs	22.93(3.89) ^k			
25-35yrs	25.03(3.9) ^l		35.32	<0.01

For particular variable, LSD post hoc shows the mean with different superscripts are significant at $p < 0.05$ superscript (a and b) (b and c) (l and k) or at $p < 0.01$ (d and f), (d and g), (d and h), (d and i), (e and f), (e and g), (e and h), (f and h), (f and i), (g and i) **and** (l and j) (k and j)

Table 8: Distribution of Response with specific questions (n=298)

	Yes	No	No response
Do you think physiotherapists can work in other places other than hospital?	199(66.8%)	97(32.6%)	2(0.7%)
Do you think physiotherapists can manage other conditions apart from those related to muscle, tendons and bones?	138(46.3%)	160(53.7%)	0
Do you think physiotherapists manage conditions using various exercises technique and equipment?	262(87.9%)	36(12.1%)	0
Do you think physiotherapists are involve in general well being of the patient?	216(72.5%)	81(27.2%)	1(0.3%)
Do you think physiotherapists have specific role with little Collaborate with other members?	77(25.8%)	221(74.2%)	0
Do you think physiotherapists can see patient on first contact?	129(43.3%)	169(56.7%)	0
Do you think physiotherapists show high level of skills and scientific approaches?	221(74.2%)	76(25.5%)	1(0.3%)
Do you think physiotherapists intervention is effective in promoting patient's condition?	267(89.6%)	31(10.4%)	0
Do you think that medical doctors are more superior to physiotherapists?	136(45.6%)	161(54%)	1(0.3%)

Do you usually refer patient for physiotherapy?	263(87.9%)	33(11.1%)	3(1%)
Do you think physiotherapists' can assess diagnosed and treatment autonomously?	183(61.4%)	114(38.3%)	1(0.3)

5. Discussion

Nurses in the present study had a good perception of physiotherapists as rehabilitation team member 21.17 ± 4.89 (which is 68.29% of the total score). This finding was similar to Dalley and Sim [14] in the United Kingdom who found that nurses perceived the role and contribution of physiotherapists but identified inter professional relationship as a barrier in effective rehabilitation. Consistence finding was also found by Walker [18] that nurses perceived the important role of physiotherapists in rehabilitation by use of movement techniques and physical modalities. Similarly, Waters and Luker [34] also reported that nurses perceive the major contribution of physiotherapists in rehabilitation and did not believe that they also have an important role to play. The good nurses' perception of physiotherapists as rehabilitation team member in this study was probably attributed to their good knowledge and awareness of physiotherapy. Also, 72.5% of the nurses reported physiotherapist to be involved in general well-being of the patient, 87.9% reported that physiotherapists use various movement techniques and are aware of physiotherapy modalities. This conforms to the findings by Dalley and Sim [14] that nurses perceived the role of physiotherapist as being concerned with mobility and movement. 89.6% valued that physiotherapy intervention is effective in promoting patient's condition. This is in line with a recent study by [35] that rehabilitation program seemed to have an effect on patients' ability to manage symptoms with improvement in both physical disability and mental health. In addition to these, 55.4% reported that physiotherapists can assess, diagnose and treat autonomously but 55.7% reported that doctors have final decision making in rehabilitation team. Consistence finding was reported by Temple and Dyer [36] that consultant in charge is the member of the team with the clearest medico-legal responsibility for all aspects of the patients care while in hospital. 87.9% of the nurses reported that they usually refer patient to physiotherapy. This finding implicated that in this hospital a good referral system which can promote multidisciplinary approach exists. This contradicts the findings of [37] in a study exploring district nurses' reluctance to refer palliative care patients for physiotherapy, nine beliefs were identified as influencing referral decisions, the majority of which were negative, such as the belief that physiotherapists lack palliative care skills and could foster false hope to patients. 74.2% of the nurses perceived physiotherapy to show high level of skills and scientific approaches, this is not surprising as the findings in this study show that Nurses in the present study have average knowledge and awareness of physiotherapy. This finding was similar to [38] that reported average knowledge and awareness of physiotherapy among final year medical students. The reason for the average level of knowledge and awareness in this study may also be attributed to nurses' report that physiotherapist manage conditions related to muscles, bones and tendons.

Effect of socio-demographic characteristics on nurses' perception

There was no significant difference in nurses' perception by gender. Although the female nurses has a higher perception than male nurses. There was significant difference in nurses' perception among different educational qualification with the registered midwives having the highest mean score. This finding implicated that they have better perception of physiotherapists as rehabilitation team member than their counterparts. This might not be unrelated to their higher mean score in knowledge and awareness, which could be related to their overall perception. The difference within the group was shown by least significant difference (LSD) post hoc.

Also, there was a significant difference in nurses' perception among the different ranks studied. An unexpected result was found with the assistance chief nursing officer with the highest mean score and the chief nursing officers having the second highest score. Since the chief nursing officer was the highest available rank in this study were expected to have the highest score which was contrary to the finding from this study. This finding implicated that assistance chief nursing officers have better perception than chief nursing officer and the other ranks. Their good knowledge and awareness with a score of about 80% may be suggested to be related with their overall perception of physiotherapists as rehabilitation team. There was significant difference in nurses' perception among different years of working experience. Nurses who had 25-35years of working experience have a significantly higher perception than others. Their good knowledge, perception of role and interaction of physiotherapist all could be responsible for their overall perception. Also, since knowledge and perception tends to increase over time as a result of their more contacts or interaction with physiotherapists at field of work. Hence, nurses who have more years of working may probably have accumulated knowledge which may have affected their perception positively. Previous studies did not examine the effect of socio-demography on nurses' perception of physiotherapists. The result from this study is of relevance because there is paucity of studies that have exploited the effect of socio-demography on nurses' perception of physiotherapists as rehabilitation team member.

5.1 Implication for practice

The study implied that nurses have good perception of physiotherapist as rehabilitation team member in Nigeria. Suggesting the possibility of a more cordial and collaborative team work can be enhanced between these professions. The study also has implication for role clarity and positive referral decision making.

5.2 Limitation of the study

This study has some limitations even though the study design provides reliable and valid information. One of the limitations of the study is the convenient sampling technique used for participants recruitments into the study and the relatively small sample size utilized. Even though the study has a high response rate, findings of the study should be interpreted with cautions.

5.3 Conclusion

Based on the outcome of this study, the following conclusions were drawn: Nurses have good perception of physiotherapists as rehabilitation team member. Though hard to explain the registered midwives had a significant higher perception than other educational qualifications. The assistance chief nursing officer had a significant higher perception than other ranks. The female participants have higher level of perception than their male counterparts.

5.4 Recommendations

1. The institution should ensure that special programmes are put in place to enable sufficient education to ensure better effective collaborative team work.
2. Scenarios should be made for the multi-professionals to come in contact and communicate their concerns and reservations so as to agree on joint rehabilitation goals.
3. More research works should be carried out to further exploit nurses' perception of physiotherapists in rehabilitation team.

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