

Implementation of effective communication in interprofessional collaboration to improve inpatient services

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ABSTRACT

Introduction: Interprofessional Collaboration (IPC) is an interprofessional collaboration between people with different professional backgrounds who work together to solve health problems and provide health services. This research aims to analyze the implementation of effective communication in interprofessional collaboration to improve inpatient services.

Research Methodology: The research is qualitative with a phenomenological design. Six people were the research informants: hospital leadership, PMKP, medical committee, medical service element, nursing element, and medical support element. Data will be collected using observation, FGD, in-depth interviews, and document study. Data processing and analysis use the Miles and Huberman method.

Result: The study's results indicate that the implementation of IPC still needs improvement. Lack of practical communication skills is the leading cause of IPC being less than good. Management efforts to improve helpful communication skills include providing training related to effective communication, forming an evaluation team, and giving rewards and punishments.

Conclusion: Management is making efforts to improve effective communication skills by providing training related to effective communication, forming an evaluation team, and giving rewards and punishments. Health workers are making efforts to comply with all rules that have been given by management to support an effective communication program for patients and between health workers.

Keywords: effective communication, interprofessional collaboration, implementation, patient services, outpatient.



INTRODUCTION

According to the World Health Organization (WHO), Effective communication and collaboration among health professionals are prerequisites for modern and well-functioning health care. Interprofessional education for future HCPs can pave the way for successful interprofessional collaboration in health care practice (Soueid *et al.*, [2024](#)). Interprofessional education (IPE) is characterized by "opportunities when members or students from two or more professions learn about, with and from each other, to improve collaboration and the quality of care. Achieving good interpersonal collaboration will have a positive impact on nursing services, especially the holistic outcomes felt by patients. Studies show that specific behaviors and holistic care carried out by doctors, nurses, and midwives in an integrated manner in one of the hospitals in Victoria, Australia, improve the quality of care (Karaca *et al.*, [2024](#)). Quality of care is holistic, addressing all patient needs competently and aiming for the best patient outcomes. Holism is related to communication, teamwork, good leadership, and commitment (Singh *et al.*, [2024](#)).

Hospitals that are primary health care services with operating room facilities are areas with the majority of chronic disease patients but often experience management problems with health teams that are still in the transition stage to work interprofessionally in achieving a collaborative and coordinated approach (Farmer *et al.*, [2024](#)). The solution offered is team-based treatment actions that focus on improving the quality of patient and family services, especially in the operating room. This coordination combines structures, services, or workflows between different professions and focuses on improving service delivery through synchronization and harmonization of information processes in the operating room area in various health services (Babu *et al.*, [2024](#)). The operating room requires cooperation between professionals to reduce medication errors and maintain patient health status stable after surgery. Hospitals that are primary health care services with operating room facilities are areas with the majority of chronic disease patients but often experience management problems with health teams that are still in the transition stage to work interprofessionally in achieving a collaborative and coordinated approach (Hsieh and Lo, [2023](#)). The solution offered is team-based treatment actions that focus on improving the quality of patient and family services, especially in the operating room. This coordination combines structures, services, or workflows between different professions and focuses on improving service delivery through the synchronization and harmonization of information processes in the operating room area of various health services. The operating room requires cooperation between professionals to reduce medication errors and maintain patient health status stable after surgery (Manjinja, Malesele and Mahlangu, [2024](#)).

However, working collaboratively is a challenging task. Significant barriers hinder interprofessional collaboration, such as communication problems between health professionals, ignorance of other staff members' professional roles and responsibilities, power and hierarchy, lack of trust (in others), and even lack of respect. It is essential to hold real interprofessional meetings to overcome these barriers, given that some real or de facto professional groups are not present at these meetings (where patient care is decided), and it is still common (Crunenberg *et al.*, [2024](#)). However, more than the existence of such meetings are needed, and those gathered in the meetings must value each team member's contribution to the patient's health so that the meetings are not just overlapping professionals gathered in the same setting with little interaction between them. Health workers have a significant role in increasing public satisfaction and assessing the quality of hospital health services. To answer and obtain this, hospitals must go through the accreditation stage through the hospital accreditation committee, namely by having the criteria for the National Hospital Accreditation Standards, namely Interprofessional Collaboration (IPCP), but the challenges are between professions and from

within themselves because there is still autonomy from each profession (Nikitina and Montenov, [2023](#)).

Health services can cause significant challenges in the collaboration process between health workers. In terms of service, each health profession must coordinate with other professions to produce safe and quality health services (Zeeman, Vyas and Ragucci, [2024](#)). So, there must be conducive and safe working conditions for interpersonal communication. However, work pressure impacts changes in work patterns, and high workloads result in high levels of physical and psychological stress. As a result, an uncomfortable work atmosphere is formed, resulting in decreased assertive communication. This condition can be hazardous and cause conflict in interprofessional collaboration. Some situations that often cause conflict are unclear roles and responsibilities. WHO explains that 70-80% of errors that occur in health services are caused by poor communication and lack of understanding of team members. Good team collaboration can reduce patient safety problems. One of the factors that hinders the implementation of interprofessional collaboration is poor communication between professions. Communication is the most critical aspect of interprofessional collaboration. Effective communication will give patient care direction and be based on stereotypes. Communication in implementing IPC is also essential in improving the quality of care and patient safety. Providing patient care is a complex endeavor that relies heavily on information communication. This communication is to and with the community, the patient and their family, and between clinical staff, especially the Professional Care Providers (PPA). Failure to communicate is among the most common causes of patient safety incidents. Communication can be effective if the message is received and understood as intended by the sender/communicator, the message is followed up with an action by the recipient/communicant, and there are no barriers to this.

So, the initial assumption based on the data and interview results can indicate that the implementation of collaborative interprofessional communication between health workers at Kendari City Hospital has not been carried out properly because there are still ineffective communication skills, such as the implementation of ISBAR confirmation, the accuracy of doctor visits, identification of inpatients and delays in administering drugs to patients, lack of clear communication to nurses, patients/patient families and delays in reporting lab results so that there are differences of opinion between health workers in carrying out teamwork. Therefore, researchers are interested in researching the Influence of Effective Communication in Interprofessional Collaboration on Improving Inpatient Services at Kendari City Hospital.

RESEARCH METHODOLOGY

This study uses a qualitative descriptive method by processing data obtained during the survey to provide an actual and detailed picture of the research object. The subjects of this study were related health professionals in the inpatient unit at the Kendari City Regional General Hospital. The research informants were the Head and Management staff of the Kendari City Regional General Hospital, namely: (1) Hospital Heads who are authorized in Inter-Professional Collaboration (IPC), (2) Hospital Quality Improvement and Patient Safety Committee (PMKP), including its PIC, (3) Medical Committee, (4) Medical service elements, (5) Nursing elements, (6) Medical support elements, which initially each numbered 1 (one) person, but this number could grow in the field depending on the needs, according to the recommendations of the informants (Snow Balling Technique). This study used the Interactive Model of Analysis data analysis technique proposed by Miles & Huberman.

RESULT

This research was conducted at Kendari City Hospital on Jalan Z.A. Sugianto, No. 39 Kendari. Kendari City Hospital is one of the Government Hospitals with type B, which Management manages, namely: (1) Hospital Management, (2) Patient Safety and Quality Improvement Committee (PMKP), (3) Medical Committee, (4) Medical Services, (5) Nursing, (6) Medical Support, which are the informants of this research. Implementation of

Interprofessional collaboration (IPC) is the interaction or relationship of two or more health workers who work together to share information that aims to make joint decisions and find out the optimal time to cooperate in patient safety care and provide good care to patients.

Interprofessional Collaboration (IPC) develops and maintains effective collaborative relationships between hospital healthcare workers. The purpose of interprofessional collaboration is to serve as a forum for striving to achieve effective collaborative practices between professions. Interprofessional collaboration is collaboration and communication between healthcare workers in a coordinated approach as decision-making about health problems to ensure that the care provided is reliable and sustainable so that the care provided to patients remains optimal and the impact of harm to patient health can be reduced.

From the interview results, the six informants said that they were implementing interprofessional collaboration (IPC) in the inpatient unit; according to the three informants, it was pretty good, only that supervision and guidance were needed to be better in providing services in the hospital. According to the other three informants, it could have been better because it was still found that the delivery of information was not as expected; for that, guidance and training were needed for effective communication.

From the results of the interviews, the six informants said they were implementing inter-professional collaboration (IPC) in the inpatient unit. The average answer from the six informants was that implementing inter-professional collaboration (IPC) in the inpatient unit at the Kendari City Regional General Hospital in 2024 still needed to be improved due to the lack of communication skills of health workers with patients and their families.

From the results of the interviews, the six informants said that they were implementing inter-professional collaboration (IPC) in the inpatient unit; the average answer of the six informants was that the efforts that could be made to improve the implementation of inter-professional collaboration (IPC) in the inpatient unit at the Kendari City Regional General Hospital in 2024 were by providing training or seminars related to communication and providing rewards to health workers who had communicated well and giving punishment to officers who did not communicate well.

The findings of this research sub-focus related to implementing inter-professional collaboration (IPC) in the inpatient unit could be better in implementing inter-professional collaboration (IPC) in the inpatient unit. Not all communication can be done well, such as conveying information or explaining related actions and reporting the results of the condition of patients treated at the Kendari City Regional General Hospital. From the interviews with informants, it can be concluded that there is a need for training for hospitalized health professionals so that communication can be built. Self-potential can be developed in directed communication between patients and health professionals in the Kendari City Regional General Hospital inpatient ward.

Based on the informants, it provides guidance and direction to health professionals in the inpatient section about effective communication materials. Provide rewards for those who communicate well and punishment for those who do not communicate well between health professionals, patients, and families. Provide training/seminars with effective communication materials to develop self-potential and work evaluation. This is in line with communicating with patients, families, communities, and professionals in the health sector and other fields responsibly and responsibly, which supports the team approach to health promotion and

maintenance as well as disease prevention and treatment. Implementation of Interprofessional Collaboration between health workers can improve patient safety and have several impacts, such as impacts on patient safety, patient satisfaction, and quality of hospital services; some factors that influence the implementation of interprofessional collaboration are communication, different educational backgrounds, and understanding each other's roles, good cooperation and collaboration between health workers so that patient safety goals increase, but there are still several obstacles in the implementation of collaboration, namely poor communication, different educational backgrounds and limited understanding of the role of each profession.

Challenges in Interprofessional Collaboration include:

1. Ineffective Communication: One of the significant challenges in interprofessional collaboration is ineffective communication. Differences in terminology, understanding, and work culture can hinder the flow of information necessary for coherent and coordinated care.
2. Lack of Understanding of Each Other's Roles: Sometimes, healthcare team members may need to fully understand the roles and responsibilities of other professionals, which can lead to duplication of work or imbalanced workloads.
3. Structural and Organizational Barriers: Rigid organizational structures and lack of institutional support can hinder effective interprofessional collaboration. These include limited time, resources, and facilities that support interprofessional collaboration.

Strategies to Enhance Interprofessional Collaboration include:

1. Training and Education: Education and training emphasizing the importance of interprofessional collaboration should be enhanced. Interprofessional education programs can help healthcare workers understand their roles and improve communication and teamwork skills.
2. Use of Information Technology: Information technology, such as integrated electronic medical record systems, can support better communication and coordination among healthcare team members.
3. Institutional Policies and Support: Policies supporting interprofessional collaboration must be developed and implemented. This includes providing adequate time and resources for team meetings and other collaborative activities.
4. Team-Based Approach: Adopting a team-based approach in health care, where each team member is valued and empowered to contribute according to their expertise, can improve the effectiveness of collaboration.

DISCUSSION

The study's results indicate that the implementation of IPC still needs to be improved. Lack of practical communication skills is the leading cause of poor IPC. Implementing effective communication in interprofessional collaboration plays a vital role in improving the quality of inpatient services. By adopting a structured approach and utilizing technology, hospitals can create a work environment that supports team collaboration and produces better patient outcomes. This improves the patient experience and empowers health workers to carry out their duties. Collaboration is an effective strategy to achieve the expected quality of results because, through good cooperation, the quality and quality of hospital services will also increase. Collaboration is one strategy to improve the quality of hospital services. Interprofessional Collaboration (IPC) is a strategic approach to improving the quality of health services through cross-professional collaboration (Lapierre *et al.*, 2024). IPC requires effective communication to ensure alignment of goals, division of tasks, and team-based decision-making. Poor implementation of IPC is often rooted in ineffective communication among healthcare workers (Thorakkattil *et al.*, 2024). To overcome this challenge, a holistic approach is needed, including communication skills training, organizational culture change, technology utilization, and structured communication tools (Bucknell *et al.*, 2024). IPC can be optimized by improving

communication skills, resulting in more coordinated, efficient, and patient-centered healthcare services (Baumgarten *et al.*, 2023). This effort will also enhance interprofessional work dynamics, increase healthcare worker satisfaction, and support achieving the primary goal of healthcare services, namely patient safety and well-being (Gurtner *et al.*, 2024).

The weakness of effective communication is the leading cause of poor IPC implementation. To overcome this problem, a holistic approach is needed, including training, organizational culture change, technology utilization, and continuous evaluation (Franco Vega *et al.*, 2024). By improving cross-professional communication, interprofessional collaboration can run more optimally, improving service quality and patient safety (Chia *et al.*, 2024). These improvement efforts will not only support the success of IPC but also create a more harmonious working environment for all health workers. Inpatient care requires close collaboration between healthcare professionals such as doctors, nurses, pharmacists, nutritionists, physiotherapists, and others (Moote *et al.*, 2024). This collaboration, known as Interprofessional Collaboration (IPC), will only be successful if supported by effective communication (Makkonen, Turunen and Haaranen, 2023). Good communication ensures that each team member understands their role, can share information promptly, and makes decisions together in the patient's best interests. Effective communication is a critical element in the success of interprofessional collaboration in the inpatient setting (Zhang *et al.*, 2024). Implementing a structured communication strategy, supported by training, technology, and a collaborative work culture, can significantly improve the quality of patient care. In this way, hospitals can ensure patient safety and satisfaction and support the well-being of healthcare workers working as a team (Suprpto *et al.*, 2023).

Interprofessional collaboration (IPC) in healthcare is an approach in which multiple healthcare professionals from different disciplines work together to provide holistic and integrated care to patients (Espejord *et al.*, 2024). This collaboration is essential in hospitals, especially in inpatient care, requiring attention from various professions, such as doctors, nurses, pharmacists, nutritionists, physiotherapists, and others. Effective communication between professions is crucial to ensure optimal care outcomes. However, despite its importance, the implementation of IPC often encounters various obstacles, including the need to be more effective in communication. This can affect the quality of collaboration and directly impact inpatient care.

CONCLUSION

It can be concluded that implementing Interprofessional Collaboration (IPC) in the inpatient unit applied could have been better. The lack of communication skills among health workers causes work collaboration not to run well, and patient satisfaction with the information provided is very low. The efforts management to improve the implementation of Inter-Professional Collaboration (IPC) include improving the quality of service by including good communication. The hospital management's efforts include holding in-house training on IPC related to communication. I will give IPC responsibility to the communication audit team, which needs to be running better. Conducting monthly evaluations, the results of the monthly review are reported in the quarterly report. They are giving rewards or awards, such as making announcements on information boards related to health professions that have worked well so that the public can know them. Health workers must make efforts to improve good communication, and officers must comply with all rules that the hospital audit team and management have given to support effective communication programs for patients among fellow health workers. Health workers must actively develop themselves in a sense of self-awareness and develop their potential without waiting for direction.

Conflict of Interest

The authors declare that they have no competing interests.

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