

PATIENT'S SATISFACTION: AN INTERPROFESSIONAL COLLABORATIVE PRACTICE AMONG DOCTORS, NURSES, AND PHARMACISTS

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Abstract. Patients are the major focus in health care delivery service, therefore, stimulating a collaborative practice among medical personnel is very important in ensuring care quality, safety, and satisfaction. This study aims to determine patient's satisfaction from the collaborative practice among doctors, nurses, and pharmacists. This is a descriptive analytic study with a cross-sectional approach, while purposive sampling method was used with criterion reference. The validated questionnaires were distributed to 66 patients. The response rate was based on doctors (97%), nurses (92%), and pharmacists (89%), and the data were analyzed using descriptive analysis method. The results showed that the patients' satisfaction towards doctors, nurses, and pharmacists were in the percentage of 98.4%, 99.1%, and 96.6%, respectively. Therefore, they expressed satisfaction towards the services provided by the three health professions, particularly in ethics and communication. In addition, collaborative practice was considered the best method in caring for patients.

1. Introduction

Health workers are facing a great challenge in providing holistic services to patients, due to the increasing complex medical problems. Also, the issue of human resources and the health care system is caused by the low level of service.

Currently, errors in drug administration is ranked first (24.8%) in the top 10 medical record, making it one of the most common prevalence occurrences in hospitals. Meanwhile, in the Intensive Care Units (ICU) in Yogyakarta, it reached 96%, and around 80% in the Primary Health Center [1].

The World Health Organization (WHO) [2] stated that 70-80% of errors in health services are caused by poor communication and understanding within the team. Subsequently, when a good teamwork is not carried out in facing patient problems, there is tendency of overlapping services, inter-professional conflict, late checks, and actions. Therefore, in health care delivery, collaborative practices are very important. Complex problems are not best handled by one medical profession; however, it should involve various fields' personnel. The practice of collaboration is not only needed for patient safety, it also increases their satisfaction and quality health services.

Inter-professional education (IPE) is a medium of collaboration between health professionals, embedding basic knowledge and skills in the education period [3]. A research by Brewer (2013) [4] stated that the practice of inter-professional collaboration is a team cooperation from various health professions, aiming at improving patient wellbeing by understanding the limitations of each personnel.

Patient-focused health services are now activated through the collaborative efforts of medical professionals towards the development of effective relationships between practitioners, patients/families, and communities, and also to improve health service quality [5].

The World Health Organization provides a solution to the problem of medical services by implementing the practice of collaboration between workers based on patient-centered care. Collaboration occurs when health care providers work with colleagues in other professions, patients and their families [6]. Inter-professional collaboration is defined as the working, collaborating, communicating, and integrating services within the team, in order to ensure continuous and reliable care [7]. This is expected to reduce the incidence of medication errors, for patients to receive quality and comprehensive services.

Patient-centered care is a health service that focuses on patients through collaboration among health workers, namely doctors, pharmacists, nurses, and other professionals. Based on their report, they felt higher levels of satisfaction and better health outcomes from this service. In addition, collaborative practices improve patient satisfaction, reduce treatment duration, care cost, and outpatient visits [7].

The implementation of collaborative practice refers to several domains, including inter-professional communication, their roles and responsibilities, values/ethics, and teamwork. In the term of health, many situations cause collaboration between one profession and another [8]. Assuming inter-professional communication is ineffective and does not occur as expected, patient safety is at stake. The reasons for communication failures include lack of critical information, incorrect perception, unclear commands over the telephone, and missed changes in transmission status [9].

Inter-professional communication in the health sector usually occurs between pharmacists, doctors, and nurses. According to Barnlund (2008) [10], this process consists of at least two parties. Based on previous research, the use of professional jargon creates a limit of inter-professional relationship causing fewer effective outcomes. The most important aspect in the process of communication among professions is the use of general terms, to minimize the occurrence of misinformation and miscommunication.

Furthermore, the involved health team is requested to understand how the roles and responsibilities of each profession are able to complement each other in patient-centered care. It should be noted that these differences occur in different health professions either to their advantages or disadvantages.

Values/ethics domains for inter-professional practice are very important in IPC, with their specific competencies which include placing patient desires as a priority, respecting their privacy and uniqueness of culture, values, roles and responsibilities of each profession, working with fellow providers and recipients of health services, as well as building trust in the relationships with other team members.

The inter-professional teamwork is essential in the process of delivering better services. In the collaboration of the health team, there are potential sources of conflict among professions in the form of differences in the areas of expertise. The character of a strong team leader is needed in the collaboration process to manage conflict, in order to provide patients' satisfaction.

The team-based care has shown improvement in the provision of services to patients, especially for the treatment of those with health complications. When properly implemented, team-based approaches are proven to improve clinical decision-making and patients' satisfaction [11].

Patient-centered care is defined as an innovative approach to plan, deliver, and evaluate health service that is grounded in mutually beneficial partnerships among health workers, patients, and families. Therefore, patient- and family-centered care are applied to all ages, and practiced in any health care setting. The dimensions involving PCC implementation include respect for patients' preferences and values, emotional support, physical comfort, information, communication and education, continuity and transition, coordination of care, involvement of family and friends, and access to care. PCC is an effort in improving the quality and safety of services focusing on the care of consumers [12].

Therefore, this study aims to determine the satisfaction of hospitalized patients based on collaborative practice among doctors, nurses, and pharmacists. It is also known that these three health workers are the core energy in managing health problems. By obtaining the data of patient's perspective on the services of the three professions, these sectors are therefore improved in the future. Theoretically, this research increases the knowledge on collaborative practices. Practically, it contributes to quality improvement in providing better services in terms of patients' satisfaction.

2. Method

This study applied a descriptive analytical method in identifying patients' satisfaction with the practice of collaboration among health workers, namely doctors, nurses, and pharmacists. It was conducted in a private hospital, and consisted of 66 inpatients that met the criteria, which were

selected purposively in the adult ward from April to June 2018, covering:

- a. adult patient
- b. having acute or chronic disease in stable condition
- c. willing to be a research respondent

3. Instrument

The instrument used, included a questionnaire on patient satisfaction consisting of 11 questions with 4 Likert scale. The grid of questions covered roles and responsibilities, communication and ethics, as well as open inquiry about team work. The validity test was carried out by distributing questionnaires to 30 respondents outside the research samples with similar characteristics. The Cronbach's alpha values for doctors were 0.94, pharmacists were 0.93, and nurses were 0.95. The validated questionnaires were distributed to 66 patients in the hospital wards and the returned or response rates included 97% for doctors, 92% for nurses and 89% for pharmacists, and data were analyzed descriptively.

4. Result

The table below showed the assessment of health professional services given in the ward in one of the private hospitals in the Special Province of Yogyakarta. The health professions consisted of doctors, nurses, and pharmacists.

Table 1. The Recapitulation of Patients Assessment on Doctor's Services

Description	Assessment							
	Highly Dissatisfied		Dissatisfied		Satisfied		Highly Satisfied	
	Freq	%	Freq	%	Freq	%	Freq	%
The doctor introduces her/himself when visiting to the patient	-	-	1	1.58	35	55.55	27	42.85
The doctor wears an ID card when making a visit to the ward	-	-	-	-	39	61.90	24	38.09
The doctor assesses the patient's complaints and listens patiently	-	-	-	-	29	46.03	34	53.96
The doctor conducts physical examination carefully	-	-	-	-	33	52.38	30	47.61
The doctor explains about the patient condition/illness in a simple way	-	-	1	1.58	32	50.79	30	47.61
The doctor explains the treatment or plans in a simple way	-	-	-	-	29	46.03	34	53.96
The doctor gives health education about the illness or complication in a simple way	-	-	1	1.58	36	57.14	26	41.26
The doctor gives a chance to the patient for asking questions	-	-	-	-	36	57.14	27	42.85
The doctor provides privacy for the patients when conducting examination or other procedures	-	-	1	1.58	38	60.31	24	38.09

The doctor gives motivation and prays for the patient to be healthy	-	-	-	-	29	46.03	34	53.96
The patient's general opinion about the doctor's role in curing and caring	-	-	1	1.58	35	55.55	27	42.85

Table2. The Recapitulation of Patients Assessment on Nurses Services

Description	Assessment							
	Highly Dissatisfied		Dissatisfied		Satisfied		Highly satisfied	
	Freq	%	Freq	%	Freq	%	Freq	%
The nurse introduces her/himself when making a visit to the patients	-	-	-	-	36	59.38	25	40.63
The nurse assesses patients' main complaints	-	-	-	-	39	64.06	22	35.94
The nurse conduct physical examination to the patient	-	-	1	1.54	37	60.00	23	38.46
The nurse monitors and observes patient condition	-	-	-	-	33	53.85	28	46.15
The nurse explains the method of preventing and solving the patient health problem	-	-	3	4.76	36	58.73	22	36.51
The nurse gives a chance for questions	-	-	-	-	37	60.00	24	40.00
The nurse works with other health professions in caring for patient	-	-	2	3.13	35	57.81	24	39.06
The nurse gives information about the procedure and treatment given to the patient	-	-	1	1.56	34	56.25	26	42.19
The nurse guides the patient in exploring the health problem	-	-	4	6.25	39	64.06	18	29.69
The nurse gives motivation to the patient and example of a healthy live	-	-	1	1.64	36	59.02	24	39.34
The patient's general opinion about the nurse's role in curing and caring for a patient	-	-	-	-	36	59.38	25	40.63

Table3. The Recapitulation of Patients Assessment on Pharmacists Services

Description	Assessment							
	Highly Dissatisfied		Dissatisfied		Satisfied		Highly satisfied	
	Freq	%	Freq	%	Freq	%	Freq	%
The pharmacist introduces her/himself when making a visit to the patient	1	1.7	1	1.7	40	67.8	17	28.8
The pharmacist gives medicine needed based on the prescription accurately	-	-	-	-	36	61.0	23	39.0
The pharmacist gives medicine profile information (name, indication, and dosage of the medicine) clearly	1	1.7	2	3.4	36	61.0	20	33.9

The pharmacist gives information how to use the medicine clearly	-	-	2	3.4	32	54.2	25	42.4
The pharmacist gives information about side effect of the medicine	-	-	3	5.1	35	59.3	21	35.6
The pharmacist gives information on the result (effect) after consuming the medicine	1	1.7	3	5.1	36	61.0	19	32.2
The pharmacist gives medical information services using simple language	-	-	2	3.4	32	54.2	25	42.4
The pharmacist is friendly and polite when giving medicinal information	-	-	-	-	33	55.9	26	44.1
The pharmacist responds quickly and provides answer to questions based on the medicine to the patient	-	-	1	1.7	36	61.0	22	37.3
The pharmacist gives other information related to the disease, such as nutrition and activity that should be taken or avoided	-	-	2	3.4	33	55.9	24	40.7
The patient's general opinion about the pharmacist's role in curing and caring	-	-	2	3.4	40	67.8	17	28.8

5. Discussion

5.1. The Description of Interprofessional Collaboration Practice in a Private Hospital

The questionnaire that were distributed to patients discussed about interprofessional collaboration practice in the hospital among healthcare team (doctors, nurses, dan pharmacists). All the 66 patients agreed that the healthcare team performed their role effectively, and also showed a good attitude and ethic when caring. Around 83.3% of them were present in the health care team, visiting the patients together and communicated effectively, however, the other 16.6% were absent. Also, some healthcare team did not participate in the joint visit, since they visited the patients separately in different times, however, they communicate through the integrated medical record. Based on the result, the patients gave opinion for health profession to visit together, in order to improve collaboration and verbal communication. Therefore, an effective communication as a competence needed for interpersonal collaborative practice created a strong team work [13].

5.2 Patient Satisfaction on Doctors, Nurses, and Pharmacists' Services

Based on these three tables, the patients gave a good assessment for the role of doctors, nurses, and pharmacists. The doctor has three roles, namely giving medical diagnoses, treatment, and clinical advocacy. The nurses have role in giving nursing care that consists of assessment, diagnoses, care plan, implementation, and evaluation. The pharmacist has responsibility in giving information on the medicine to the patients, family, and health professional team [14].

In general, all patients gave a good score for the three different health professions, however, it was suggested that they improve their performance. Also, the doctors were expected to provide clinical advocacy, such as giving clear health education about patient's disease and complication. Moreover, the doctor needs to give the information in a simple language for the patients and their family to understand. When an adequate information is obtained,

doctor's advice is easily adhered to, therefore, contributing to the improvement of the health quality and also accelerating the healing process.

The effective communication between patients and doctors was the main function for establishing therapeutic relationships, providing quality care and increasing patients' satisfaction with health services [15]. The interactions between patients and doctors encourage the creation of values, goals, and expectations. This collaborative process of doctor-patient also generates trust, increases openness, support for medical care, and reduces anxiety [16].

The ineffective communication in health care resulted in delayed care, errors in diagnosis, medical errors, patients' injuries, and even death [17]. One obstacle that creates effective communication was the difference in styles between professions, and lack of knowledge or understanding of the roles of each health worker.

In addition to communication with patients, doctors also converse with nurses in improving patients' safety. The communication with nurses was in the form of therapy or actions given to patients [18]. The quality of patient care increased when the health team worked together according to the roles and responsibilities of each health profession [19]. Also, the collaboration among health professions improved patient welfare [20].

The nurse profession was considered essential in improving the provision of guidance for exploration and disease prevention, as well as the team work with other health care workers. Nurses are required to be able to conduct in-depth assessment related to the health and provide education to the patients and their families. They also have a role in carrying out preventive intervention, therefore, minimize individuals, families, and communities affected by the diseases. Furthermore, they also need to improve cooperation with other health professions, whether it's collaboration with doctors or pharmacists. The teamwork between nurses and other health workers improved health services for patients to recover quickly and reduced the length of stay in hospitals.

The pharmacists have responsibilities in the provision of drug information to patients, families, and other health professions. This process needs to improve in terms of giving clear information about drugs, impact, and side effect. In this study, there were respondents that disagreed with the statement "Pharmacists provide clear drug profiles". Based on the information from patients, pharmacists were less clear in providing drug-related information. This was probably due to the fact that the term and names of drugs were less familiar to the patients, therefore, they felt unclear in understanding the foreign concept given to them. In addition, the patients also stated that they were dissatisfied on the statement that "pharmacist provides information about the results to be obtained from drug administration". This was possible since the pharmacist did not explicitly state the treatment results. However, they rather mention the drug indications, therefore, some patients did not understand the explanation.

Good communication skills are needed for complex activities; therefore, pharmacist should consider the wide variety of patient needs and achieve their centered objectives [21]. Also, a variety of drug information activities were performed depending on the particular practice settings and needs [22]. Pharmacist's communication style needs to be further developed into a more patient centered

approach in order to take greater account of their perspectives and experiences in using medication [23]. The content of an education and counseling session include appropriate information for patient's pharmacotherapeutic regimen and monitoring plan [24]. Spoken information from a health profession remained the priority for most patients. However, consultations are usually too short, therefore, it was hard for people to absorb and remember all the necessary information about their medicines [25]. There were several barriers that influenced counseling effectiveness, such as perceptions of disease severity and drug impact, asymptomatic infection, poor health literacy, lack of knowledge, and complex medicine regimens. Therefore, pharmacists should meet patient's individual needs, and using suitable technique to deliver drug information [26].

6. Conclusion and Suggestion

Based on this study, patients' satisfaction towards doctors, nurses, and pharmacists was very good, particularly in ethics and communication. Therefore, the collaborative practice among health professions was very effective in taking care of patients, and also improving their well-being.

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