Effect of communication on collaborative working



<u>Discuss how communication within an inter-professional team could affect</u> collaborative working.

Inter-professional learning and collaborative working in healthcare are two significant practices that must be understood as health care practitioners and trainee health professionals, to deliver high quality of patient-centred care in National Health Service (NHS) through effective communication.

Thus, the aim of this essay is to critical discuss and analyse how communication within an interprofessional team could affect collaborative working to reduce medical errors, decrease workloads, reduce mortality rate, conflict and lack of trust. Two specific key points will be addressed throughout this essay; collaboration with staff and students, effective communication such as verbal and non verbal which entails active listening. In accordance to the Nursing and Midwifery Council (NMC) (2015) codes of conduct on confidentiality, personal information and trust identifiers will be anonymous in the essay and service users (SU) will signify patients.

Buring et al (2009) explained Inter-professional teamwork as the extent of which an array of several healthcare professionals such as doctors, nurses, pharmacists and many more work together successfully to influence the quality of care being provided, improve collaboration, enhance quality of patient care, lower costs, decrease patient length of stay and overall reduction in medical errors in health care setting. Negatively, poor communication within a team of health professionals might lead to conflict, lack of trust and may impact on patient care and safety (Vincent, 2011). Collaborative working in healthcare is the process whereby professionals from different disciplines work and support each other as a team cohesively,

whilst balancing their roles, sharing responsibility towards making difficult clinical evidence based decisions appropriate enough for the best interest of the SU (McCabe & Timmins, 2013).

The NMC (2015) stated that to promote a dynamic collaboration among health and social care professionals, effective communication must be established and demonstrated within respective teams, at the same time respecting individual professional's knowledge, skills and contribution.

Flin (2009) defines communication as ' the transfer of information, ideas or feelings' (p. 16). However, Emmitt and Gorse (2009) articulate that the transmission of information from sender to receiver may be distorted, therefore, in order for communication to be successful within collaboration, professionals have to utilise this skill effectively. Daly (2004) affirms that effective communication between healthcare professionals is the cornerstone to successful collaboration. Furthermore, Stukenberg (2010) states that once effective communication has been implemented within collaborative working, improved knowledge, work interactions, and positive environment for professionals to work cohesively is established, subsequently, improving the delivery of patient care (Chatman, 2008).

The two method of communication that has been commonly cited by numerous literatures are, verbal and non-verbal communications which are widely used by health and social care practitioners in various settings. A study of Purtilo and Haddad (2009) highlighted that verbal communication is vital to health professionals in forming professional relationship through the form of team meetings. The study further emphasised that regular meetings

of interprofessional team linked by a common care pathway help to enforce verbal communication and activate effective team collaboration. An example of this was during the author's placement in a hospice (palliative care), a multidisciplinary meeting was held regularly every week consisting of an array of professionals from different department such as nurse specialists, consultants, social workers, student nurses, doctors, occupational therapist, spiritual and psychological specialist to discuss and up-date members of the team regarding patients care. As observed, effective communication was utilised and initiated throughout the course of the meeting as ideas from this group of professionals were put forward in an orderly manner as each professionals took it in turn to contribute towards the decision-making process.

Communication observed was clear and concise among the health professionals. Bach and Grant (2012) concurs that clarity of conservation among professionals will aid the process of information being transmitted accordingly thus leading to understanding, as it ensure vital information are not misheard in turn reduces the risk for confusion among individuals within the team. Burnard and Gill (2014) further explained that communication is the art and process of creating and sharing ideas from different individuals, therefore, when this is demonstrated within a group of professionals, they are able to contribute ideas drawing from their own knowledge, experience and expertise as suggested by Baatrup (2014). Tindall, Sedrak and Boltri (2013)also articulated that effective communication will warrant that each members of the team are kept up-to-date which is vital when key decisions are made regarding a patient's care. They further elaborate that

communication forms relationship where trust and respect are instilled thereby enhancing job satisfaction and wiliness of health professionals to join forces with one another as a team in order to deliver a care that is of high quality. Rost and Wilson (2013) maintains that active listening should also be incorporated within communication as it an invaluable tool that sustains collaborative working among healthcare professionals.

However, communication failures among health care professionals have been highlighted as the leading cause of unintentional patients harm with many leading to permanent injuries and even deaths (The Joint commission, 2006). An example will be the devastating case of Victoria Climbie (UK Department of Health (DoH), 2003) which demonstrated the effects of ineffective team work and poor communication among health professionals. The recommendation from Lord Laming's report on the Victoria Climbie inquiry stress the need for health care professionals to improve interprofessional communication and collaboration. As emphasised by UK DoH (2013), effective communication is crucial among health professionals to enhance care delivery, develop therapeutic relationships and it is known to be one of the 6C's approved by government and NHS to support the values and ethics in health care delivery.

Ineffective collaborative working can be as a result of lack of understanding, poorly defined roles and responsibilities, poor communication challenges among health care professionals, which evidently has a negative impact on clinical outcomes. As seen in the Francis report (2013) of the Mid Staffordshire hospital where SU were left to suffer as a result of poor

https://assignbuster.com/effect-of-communication-on-collaborative-working/

communication and collaboration among interprofessional team. For this reason, the DoH (2013) emphasise the need for all health care professionals to work together collaboratively, communication effectively among each other and have an increased knowledge of the role of each member of the team.

Interprofessional team must possess active listening skills which is an important tool in improving discussion and help building trusting relationships between health care professionals (Stainton et al, 2011). Aitken (2013) recognised good listening skills as an important tool for effective communication that can consolidate collaborative working among health professional especially for student analysis and learning. In terms of collaboration between staffs and students, this allows students to be able to gain insights into the varieties of language used such as terminologies commonly used within health and social care, in turn enhances understanding as students are aware of how best to communicate with other professionals within clinical practice building up their interprofessional skills paving away for effective collaboration (ref). REF) put fort the notion that where there is effective communication between staff and students, a strong relationship is formed where there is mutual respect and trust, even though there is differing competence between this specific group of individuals (Hamilton, 2010). Morgan, (2013) also states that effective communication will improve staff and students experiences.

Collaborative working through effective communication facilitates professionals from a diverse range of other expertise to help achieve single aim, decrease work load, share ideas on how to deliver highest quality of https://assignbuster.com/effect-of-communication-on-collaborative-working/

care through understanding of information communicated. In addition, NMC (2015) recommends that professionals should have the necessary skills to communicate effectively with colleagues and other professionals in order to improve patient care. Hence, working collaboratively has been widely stimulated as the best approach in improving health outcomes (UK DoH, 2010). Furthermore, to support collaborative practice individuals need to utilise interpersonal skills to promote effective teamwork and communication. Therefore, Combined Universities Inter-professional Unit (CUILU) (2010) recommended a guideline designed to help students and different professionals understand how the development of a collaborative worker is evaluated by applying the inter-professional capability framework. This consists of four domains which are Collaborative working (CW), Reflection (R), the Cultural Awareness and Ethical Practice (CAEP) and the Organisational Competence.

In conclusion, effective communication and collaboration has a huge impact on the lives of SU and health professionals either positively or negatively. It is the role of health professionals to address this and collaboratively maintain continuity of care where there is high quality patient centred care, promote good working relationship with members of a team, thereby enhancing job satisfaction for professionals and quality of life for patients. A good listening skills, mutual respect and value for team members irrespective of their discipline will also facilitate an effective collaboration and patient safety.

REFERENCES

Aitken, J. E. (2013). *Cases on Communication Technology for Second Language Acquisition and Cultural Learning*. United States: IGI Global.

Baatrup, G. (2014). *Multidisciplinary Treatment of Colorectal Cancer: Staging*– *Treatment – Pathology – Palliation.* United Kingdom: Springer.

Bach, S. & A. Grant, (2012). *Communication and Interpersonal skills in nursing*. Exeter: Learning Matters Ltd.

Buring, S. M., Bhushan, A., Broeseker, A., Conway, S., Duncan-Hewitt, W., Hansen, L. & Westberg, S. (2009). *Interprofessional Education: Definitions, Student Compentencies, and Guidelines for Implementation. American journal of pharmaceutical education, 73* (4), 1-8.

Burnard, P. &Gill, P. (2014). *Culture, Communication and Nursing.* United States: Routledge.

Chatman, I. J. (2008). *Medical Team Training: Strategies for Improving Patient Care and Communication*. United States: Joint Commission Resources.

CUILU (2010) Interprofessional Capability Framework: *a framework* containing capabilities and learning levels learning to Interprofessional capability. The Combined Universities Interprofessional Unit. Sheffield Hallam University and The University of Sheffield.

Daly, G. (2004). *Understanding the barriers to multiprofessional collaboration*. *Nursing Times, 1* (9), 78 -79.

Emmitt, S. &Gorse, C. A. (2009). *Construction Communication* . United Kingdom: John Wiley & Sons.

Flin, R. et al (2009) *Human factors in patient safety: review of topic and tools. Report for Methods and Measures Working Group of WHO Patient Safety*. Geneva: World Health Organization. Retrieve April 7 th 2015, fromhttp://www. who.

int/patientsafety/research/methods_measures/human_factors/hu
man_factors_review. pdf

Francis, R. (2013). Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry. The Mid Staffordshire NHS Foundation Trust Public Inquiry. London: TSO

Hamilton, C. (2010). *Communicating for Results: A Guide for Business and the Professions.* (9 th ed.). United States: Wadsworth Cengage Learning.

McCabe, C. &Timmins, F. (2013). *Communication Skills for Nursing Practice*. (2 nd ed.). United Kingdom: Palgrave Macmillan.

Morgan, M. (2013). *Improving the Student Experience: A Practical Guide for Universities and Colleges.* United Kingdom: Routledge.

Nursing & Midwifery Council. (2015). *The code professional standards of practice and behaviour for nurses and midwives* . London: NMC

Purtilo, R. & Haddard, A. (2009). Health professional and patient interaction. (7 th ed.). United States:

Rost, M. &Wilson, J. (2013). Active Listening. United States: Routledge.

Stainton, K., Hughson, J., Funnell, R., Koutoukidis, G. & Lawrence, K. (2011). *Tabbner's Nursing Care:* Theory and Practice. Elsevier Health Sciences.

Stukenberg, C. M. (2010). Successful Collaboration in Healthcare: A Guide for Physicians, Nurses and Clinical Documentation Specialists. United States: CRC Press.

The Joint Commission (2006). *Root causes of sentinel events, all categories* .

Oakbrook, IL Retrieved April 4th , fromhttp://www.jointcommission.

org/NR/rdonlyres/FA465646-5F5F-4543-AC8F-E8AF6571E372/0/root_cause_se
. jpg

Tindall, W. N., Sedrak, M., &Boltri, J. (2013). *Patient-Centered Pharmacology: Learning System for the Conscientious Prescribe*. Philadelphia: F. A. Davis.

United Kingdom. Department of Health (2010). *Modernising Scientific*Careers: The England action plan. Retrieved April 10 th, 2015

fromhttps://www.gov.

uk/government/uploads/system/uploads/attachment_data/file/139529/dh_11 5144. pdf

United Kingdom. Department of Health and NHS Commissioning Board (2013). *Compassion in practice. Nursing, midwifery and care staff: our vision and strategy* Redditch: NHS Commissioning Board.

United Kingdom. Department of Health. (2003). *Laming Report. The Victoria*Climbié Inquiry-Report of an inquiry by Lord Laming. Retrieved April 4 th,

https://assignbuster.com/effect-of-communication-on-collaborative-working/

2015 fromhttps://www.gov.

 $uk/government/uploads/system/uploads/attachment_data/file/273183/5730. \\$ pdf

Vincent, C. (2011). *Patient Safety* .(2 nd ed.). United Kingdom: Wiley Blackwell.