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EDITORIAL INTERPROFESSIONAL COLLABORATION AND ORGANIZATIONAL CULTURE IN HEALTHCARE ORGANIZATIONS REVIEWS PREPAREDNESS OF HEALTHCARE PROFESSIONALS TOWARDS A NEW CRISIS: A SHORT REVIEW OF EXPERIENCES, CHALLENGES, AND LESSONS FROM THE COVID-19 PANDEMIC SPECIAL ARTICLES RESEARCH'S POLICIES ON HEALTH: FUNDAMENTAL TEXTS OF THE EUROPEAN UNION AND GREECE RESEARCH ARTICLES PATIENT CHARACTERISTICS AND PREDICTION OF COVID-19 IN-HOSPITAL MORTALITY: A RETROSPECTIVE COHORT STUDY IN CRETE, GREECE BEFORE AND AFTER THE ONSET OF A TARGETED VACCINATION STRATEGY IN 2021 THE ACUTE EFFECT OF RESPIRATORY MUSCLE TRAINING ON MICROCIRCULATION IN PATIENTS WITH CHRONIC HEART FAILURE SYSTEMIC REVIEW STUDYING THE SWALLOW USING SURFACE ELECTROENCEPHALOGRAPHY: A SYSTEMATIC REVIEW THE EFFICACY OF INFORMATION INTERVENTIONS FOR PATIENTS UNDERGOING HEMATOPOIETIC STEM CELL TRANSPLANTATION: A SYSTEMATIC REVIEW OF RANDOMIZED TRIALS

Interprofessional collaboration and organizational culture in healthcare organizations

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Editorial Article

INTERPROFESSIONAL COLLABORATION AND ORGANIZATIONAL CULTURE IN

HEALTHCARE ORGANIZATIONS

Health care is a complex activity that requires health care providers to collaborate for accomplishing the desired outcome for the patient. Furthermore, health professionals share essential principles, knowledge, and abilities, but have traditionally been trained independently in building their professional identities. Different disciplines in health care have different philosophies and different problem-solving styles. These "professional silos" (medicine, nursing, social work, etc.) frequently foster relationships based on power, competition, and hierarchies, resulting thus, in inadequate teamwork preparation (Margalit et. al., 2009). It is anticipated that health care workers have a thorough understanding of their duties, responsibilities, and professional limits, although this may not always be the case.

In recent years, interprofessional collaboration has become more widely acknowledged by healthcare professionals and educators, as reflected by the increased implementation of health care team training in health care organizations (Rosen et. al., 2018). The transition of the hospital culture from an individualistic, isolated endeavour to interprofessional collaboration is progressing, but permanent results are limited (Sullivan, Kiovsky, Mason, Hill, & Dukes, 2015). Core Competencies for Interprofessional Collaboration include values and ethics for interprofessional practice, roles and responsibilities, interprofessional communication, and teamwork (Interprofessional Education Collaborative (IPEC, 2016).

Hughes et. al., (2016), in a meta-analysis found that health care team training was linked to a host of positive outcomes within the health care context, including a more comprehensive approach to preventing and managing chronic conditions, reduced patient mortality, reduced medical error, and improved teamwork on-the-job. Given these findings, there is a clear case for health care organizations to emphasize teamwork and health care team training as viable approaches to enhancing patient care.

Major facilitators that enhance interprofessional collaboration practice in health care are the organizational characteristics, such as the organizational culture which encompasses the shared values, beliefs, or perceptions held by employees within an organization (Shein 1990). The organization's culture affects relationships and communication within the team, teamwork, success criteria, conflict management, and the authority and autonomy of care coordination. In addition, organizations' readiness and willingness for change are key factors and play a significant role in facilitating or impacting interprofessional care (Runtu, Novieastari & Handayani, 2019).

Current literature indicates that team culture may considerably impact team results and performance (Wranik et al., 2019). Team climate and performance may be enhanced by implementing strategies such as shared leadership, bottom-up policy development, role-clarity, adequate staffing, resources, open communication, mutual respect, and an ethical and caring culture (Michalsen et al., 2019). Sharing leadership, shared vision and learning, and a sense of belonging among team members, provide a platform for healthcare professionals to work collaboratively. Even more, these qualities play a significant role in promoting relationships and teamwork (Wranik et al., 2019).

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On the contrary, considerable barriers to interprofessional collaboration practice in relation to organizational culture are mostly attributable to divergent core philosophies and organizational structure and support, such as limited resources, occupational stress, burnout, turnover intention, internal top management resistance lack of communication, time pressure, competing priorities, operational constraints and lack of leadership support (Wranik et al., 2019).

To a further extent, the advent and fast dissemination of the COVID-19 virus has dramatically affected health professions education and practice, as well as interprofessional education, on a worldwide scale. On top of that, with the recent outbreak of COVID-19, the effect on burnout among frontline health care providers is evident. COVID care is demanding, emotionally draining, ethically challenging, and frequently isolated due to the nature of the disease. All these aspects forcefully pose the issue of how to develop resilient, collaborative, practice-ready learners and how to support practitioners to be able to withstand the strain of working in extreme conditions, such as in the case of a pandemic (Langlois et. al., 2020).

WHO (2010) suggested that health professionals who frequently work on a collaborative practice team can increase a region's capacity to respond to health security challenges such as epidemics. In the case of a worldwide pandemic or natural disaster, the only way to address the issue is through effective collaboration among health care workers.

Wei et al., (2022), in a systematic meta-review of systematic reviews found that interprofessional collaboration provides considerable benefits to patients, health professionals and health care organizations. The major patient outcome related to interprofessional collaboration is promoting patient satisfaction, quality of care, patient and family education, medication adherence, significant reductions in hospital length of stay, follow-up assistance after discharge and reduced readmission rates. In addition, the researchers documented positive effects on healthcare professionals, included improved staff attitudes, job satisfaction, engagement, efficiency, well-being, perceived autonomy, service quality, reduced clinical errors, burnout, and turnover intention. As it concerns organizational outcomes researchers highlighted significant organizational aspects, such as staff views of work environments, trust, supports, and collective ownership or shared organizational mission, values, strategies, and leadership (Wei et al., 2022).

Conclusion

We should realize that health care sector, is one of the biggest industries in terms of employment. The increasing demands in an ageing society as well as the new challenges such as recent outbreak of COVID-19, poses a considerable pressure as high costs involved. To comply with these demands, health care professionals need to join forces and optimize their collaborative efforts. Health care professionals may also learn from each another and discover more about themselves and their colleagues through collaborative practices. Both from the perspective of their interest as health service providers and from the perspective of hospitals as places of learning, efficient teamwork and high-quality health service provision are needed. There is emerging evidence that services' users are benefiting from new ways of joint working and interprofessional team collaboration. Collaborative practice among health professionals along with a constructive and supportive organizational culture is the only sustainable strategy that can result in resilient health systems that will provide high-quality health services.

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