

Investigating Collaborative Strategies Between Nurses and Pharmacists in Saudi Hospitals

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Abstract

The World Health Organization emphasizes the importance of teamwork in the provision of healthcare services to hospitals with integrated approaches. Chronic conditions and healthcare reforms make collaborative care particularly important in the context of Saudi hospitals. In this paper the authors emphasize and explore collaborative efforts, solely between the nursing and pharmacy professions, measure the effect of these efforts and their results on patients, address their barriers, and list measures for their overcoming. Increasingly, research is devoted to such cooperative processes as interprofessional teamwork in the provision of those or other services. Through the analysis of prevailing patterns, showcases, and the contribution of cultural and technological facilitators of teamwork, the work seeks to find what makes interprofessional collaboration effective, or what are the impediments to its efficiency. Some of the recommendations include: integration of inter-professional education, technology use, and promotion of leadership involvement to support interprofessional collaboration. The findings of the study explain how the collaboration between nurses and pharmacists can help to reduce the number of medication errors, improve compliance, and enhance patient satisfaction after treatment. The study provides information on how to achieve improved health outcomes through more effective health care provision in Saudi hospitals thus contributing to national level health transformation goals.

Keywords : Collaborative , Nurses , Pharmacists , Saudi , Hospitals

Introduction

Enhancing the confirmation of patients' health status and offering better healthcare services has always been the main focus in Saudi Arabia. In accomplishing this focus, the Saudi health care system has gone recently through numerous changes and improvements. However, the necessity to improve collaboration between those pharmacists and other healthcare providers, particularly nurses, has become clear. Here the care coordination becomes of primary significance. It requires accurate involvement of various specialists as well as clearly defined roles and boundaries. It is within this context that the concept of nurse-pharmacist collaboration emerges[1].

Taking into account the importance of the confidentiality of the involved parties, the authors aim to identify the key features and elements of nurse-pharmacist collaboration and find ways for efficient integration of two parties. Such collaboration could potentially improve the efficiency of care as well as different patient outcomes. Here the discussion will mainly concentrate on how the motivation levels of current nurse-pharmacist practice could facilitate itself and become more common. To achieve this, the primary focus will be placed on identifying existing literature and establishing evidence-based methodologies and techniques to enact change[2]. The elaborate changes that occurred in the Saudi context over the recent years could also help broaden understanding on the importance of this collaboration. The Vision 2030 strategic plan introduced by the Saudi authorities aims at enhancing the overall quality of health care services rendered in the country. Therefore, though prescriptive in nature, it creates a necessity of a shift to a better case coupling which should have sharp alignment to the Vision 2030's values and guidelines.

Collaboration Between Nurses and Pharmacists

The relationship that exists between nurses and pharmacists is essential to the safe use of medication as well as patient-centered care. Studies conducted at the global perspective and at the local level within Saudi have demonstrated that when nurses and pharmacist's synergies are realized, the occurrence of drug adverse events

followed by medication non-adherence are significantly lowered. Nursing's knowledge of clinical processes and procedures as well as their skills combined with pharmacology make nurses and pharmacists work well together for the benefit of the patients[3].

Collaboration efforts in Saudi Arabian hospitals where chronic diseases including diabetes and heart diseases cases are common is more critical. Challenging complex treatment plans that include many different medications, require extensive education and customer service resources which are best achieved in collaboration. Due to exposure to patients, nurses are able to pick problems as they arise and are instant whereas pharmacists offer skills and knowledge by the basic concepts required in pharmaceutical practice[4].

There are considerable changes in Saudi healthcare system whereby doctors, patients and pharmacists can collude easily. Ward-based pharmacy service and interdisciplinary team rounds have also been introduced in more than one hospital. As a result, in most hallowed learning environments, pharmacists find themselves at the hospital wards where they come into contact with nurses and assess patient information, resolve medication discrepancies and teach.

Another promising practice is the incorporation of pharmacists into specialized patient education programs, mainly aimed at chronic diseases including diabetes, hypertension, and asthma. In these programs, patients are taught how to use medications, their potential side effects, and lifestyle changes necessary for management by nurses and pharmacists in collaboration. These approaches are indicative of a new thinking which appreciates working together in the provision of services[5].

Though there have been some positive outcomes in promoting collaborative efforts, there are still a number of obstacles that affect nurse and pharmacist teamwork in Saudi hospitals. One of the most serious Issues is the charge on the role of function. There are several overlapping roles of nurses and pharmacists which hinders clear understanding of who does what, if at all, for both. For example, there is a possible sense among the professions that they need to educate patients on medication, thus both may well be training patients and each and every one is going on a different direction[6].

Cultural aspects also influence how collaboration is undertaken. The dominant hierarchal system that characterizes Saudi Arabia health care facilities hinders collaboration as it puts nurses and pharmacists in unequal positions. Nurses are especially likely to be underappreciated and left out of decision making, while the opposing situation applies to Pharmacists who often face opposition when trying to modify their clinical roles.

In the context of collaboration, a number of logistical challenges seem to arise. There are often heavy patient loads of nurses and pharmacists and staff shortages, which may limit the quality of interaction for the two to pursue meaningful engagements. In as much as the plans and intentions are right, failure to properly plan in terms of time and resources leads to stagnation in collaborative efforts. Also, communication barriers, such as the lack of technology, language differences, or different working hours, can prevent the effective achievement of common tasks[7].

As the time has come around, technology has acted as one of the most important factors for ensuring collaborative interaction in healthcare facilities. CPOE systems and electronic health records adoption (EHRs) within Saudi hospitals ensured better communication links among inpatient nurses and pharmacists. These two professions can view current information about patients' circumstances thanks to the EHR and CPOE, which lessens the possibility of preventable mistakes and improves operational efficiency.

For instance, such nursing concepts as shared medication reconciliation allow the nurse and the pharmacist to jointly review and finalize medication lists. Such concepts would allow telemedicine platforms to other hospitals and allow pharmacists to carry out consultations through telemedicine, so that nurses in other places would collaborate with them while extending their reach of expertise[8].

Nonetheless, adopting the new technologies does not come easy. There are training factors, change management issues, and technical glitches that may limit the effective usage of the tools. It is vital that each of them is trained in the use of these technologies so that they can be able to assist in the expansion of the collaboration to the fullest.

There are several hospital case studies conducted in Saudi settings that support the benefit of nurse-pharmacist interaction. An Integrated Pharmacy Services model was adopted in a Riyadh-based tertiary care hospital, where pharmacists were incorporated into the critical care team and worked with nurses to monitor drug treatments of patients. These authors showed that their effort led to a decrease in medication error rates and higher patient satisfaction scores[9].

In the same way, Joint Education on the anticoagulant therapy was provided in a supplementary Nursing and Pharmacist Collaboration program in a hospital based in Jeddah. This program helped the patients to know more about their treatment and also enhanced cooperation between the two professional groups. Examples like these demonstrate the positive impact of integration on patients and health providers.

Addressing the Challenges One cannot talk blankly about overcoming the challenges to collaboration. Interprofessional education (IPE) is one of the strategies which is most useful in promotion of collaboration. By having nursing and pharmacy students introduced to each other's roles during their training, IPE programs foster appreciation for roles. For instance, such programs could include joint simulation exercises where in future

nurses and pharmacists work together in a clinical setting. Regular interdisciplinary meetings and workshops are another valuable tool for improving collaboration. These meetings allow nurses and pharmacists to discuss patients, learn from each other and avoid problems or disputes[10]. These initiatives would benefit from leadership sponsorship. For any teamwork, hospital management has to provide support in terms of resources and policies. Implications for Policy and Practice In Saudi Arabia, institutionalizing collaboration would require policy makers and health leaders to set out appropriate frameworks that would ensure interprofessional collaboration is not just encouraged, but also enforced. Such frameworks should set out the definition of roles, a unified approach to joint tasks equally defining monitoring and assessment of teamwork performance. Financial rewards and awards and recognition may be additional focuses to enhance interest of health workers in collaborative approaches.

Additionally, cultural barriers must be addressed as they can enhance the collaborative situation. Cultural divisions can be closed by providing training programs that highlight the value of teamwork and provide healthcare professionals with conflict resolution skills. A shared sense of respect and responsibility will go a long way in improving the working relationship between nurses and pharmacists[11].

As the healthcare industry faces rapid changes, the partnership between nurses and pharmacists remains vital, especially in Saudi hospitals. Despite remarkable achievements in improving collaboration efforts, some gaps remain like role uncertainty, some culturally based limitations or constraints, and some logistical challenges. With the help of relevant technologies, improving Interprofessional Education, and building encouraging policies, the Saudi hospitals' environments can be made suitable for such collaboration. The positive outcomes—such as better patient satisfaction levels, lowered errors rates, and more favorable patient outcomes—appeal for further efforts aimed at developing the collaborative arrangements. The focus of this paper is to lay the groundwork for contractors and to provide concrete nurse – pharmacist collaboration strategies in Saudi Arabia that would lead to the healthcare transformation objectives of the Kingdom[12].

Importance of Collaboration

Nurses and the pharmacists need and should work more closely because this can aid in communication, prevent medication errors, and enhance a team-based approach to patient care. There has been evidence which demonstrated in a number of studies that the constructive collaboration that is established produces better outcomes for patients through lowering the occurrences of adverse drug events and improved compliance towards the treatment plans [1]. And it promotes the active use of knowledge which is important as the medical field is constantly changing. To gain such effectiveness in care delivery requires significant input coordination by all practitioners, especially in Saudi hospitals where the prevalence of chronic diseases like diabetes and cardiovascular disease is immense.

Current Trends

In Saudi hospitals and clinics, the roles of the nurses and the pharmacists are beginning to change to a more team-based approach. Ward-based pharmacy services and interdisciplinary rounds are also commenced to improve collaboration. While nursing staff provides some patient education, they are trained to give education in relation to complex medications [2]. They come to understand the importance of becoming a part of the provider team, especially with the advent of e-health technology, such as EHRs.

Barriers to Collaboration

While some progress have been made, many barriers still impair teamwork. These obstacles include the hierarchy nature of health care facilities, roles confusion and differences in the culture. Studies carried out in Saudi Arabia show that nurses feel underappreciated in a collaborative setting, and pharmacists feel that their participation in clinical decision making is minimal [3]. Other evil factors such as poor staffing and workload may also help these challenges.

Strategies to Improve collaboration

In order to overcome these obstacles, strategies should be formulated. IPE programs were shown to be effective in overcoming such barriers. Such programs provide exposure for nursing and pharmacy students to the roles of the other group, instilling respect since training begins [4]. Other mechanisms such as regular interprofessional meetings and joint workshops can also enhance communication and teamwork. Leadership regarding this issue is also especially essential to build an attitude helping foster collaboration.

Case Studies Several Saudi hospitals have implemented successful joint ventures. For example, in a tertiary care unit located in the capital city of Saudi Arabia, some of the pharmacists were assigned to work within the intensive care units and therefore collaborated with nurses in the management of medications. As a result of this initiative, there was a substantial decrease in the number of medication errors and an enhancement in the level of satisfaction among patients [5]. Likewise, in a report from a different hospital in Jeddah, patients who attended a joint education intervention with the healthcare providers targeting anticoagulant therapy had better outcomes than those who did not, thus improving interpersonal professional relationships. **Impact on Patient Care** The impact of collaboration on patient care improvement needs no emphasis. In Saudi hospitals, collaborative practices have been noted to shorten the average duration of hospitalization, as well as enhance medication compliance [6]. For instance, when nurses partnering with pharmacists explain medications to

patients in detail, there is greater comprehension and adherence to the regimen. Furthermore, data collection on patient feedback in various facilities points to a relationship between collaboration and patient satisfaction. Cultural and Policy Considerations Culture, just like organizational structure, is of major importance when defining collaborative endeavors within Saudi hospitals. Furthermore, in the Saudi Arabian context, the hierarchical structures inherent in every healthcare team can sometimes cause barriers to collaboration. These problems need to be addressed through specifically defined policies. Structures to promote interprofessional collaboration have been articulated in some documents by the Saudi Ministry of Health and Policies, although these policies are not adhered to very well in practice [7].

Technology as an Enabler To summary in a single world ‘-ahl al’ at times seems more of a distant strategy than firm practice. Nevertheless, Outdated Work systems combined with new systems have been put into place to enable better collaboration between nurses and pharmacists. Computerized physician order entry systems and evolvment of shared EHRs have expedited communications and reducing errors. Technologies uptake in Saudi hospitals has been increasing where over time, high quality and quantity care becomes commonplace, however, barriers in terms of training and implementation thwack one’s perspective. Within the text, emphasis will be placed on both the quantitative and qualitative aspects to help derive an effective analysis. Overall the Saudi hospitals have a high care potential particularly with incorporation of the technologies. These adopted technologies have not only assisted with communication ex-pats from the developed world further reducing professional barriers, but hierarchical structures as well. One caveat is that these collaboration lies primarily within the nursing scale: recommendations are that future collaborations must engage nurses to a high degree because they warrant necessary leadership positions.

Conclusion

Collaboration between nurses and pharmacists is a cornerstone of high-quality healthcare delivery, particularly in the evolving landscape of Saudi hospitals. While significant progress has been made in fostering collaboration, challenges such as role ambiguity, cultural barriers, and logistical constraints persist. By leveraging technology, enhancing interprofessional education, and promoting supportive policies, Saudi hospitals can create an environment that nurtures effective collaboration. The benefits of such efforts—improved patient outcomes, reduced errors, and increased satisfaction—underscore the importance of continuing to invest in collaborative strategies.

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