

# We Heal as One: Interprofessional Health Collaboration During the Covid-19 Pandemic

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## Abstract

A collaborative healthcare system enabled through multi-professional and interprofessional partnerships that pave the way to improved health outcomes has been the director of the Millennium Development Goals (World Health Organization, 2016). But the occurrence of the global COVID-19 pandemic challenged the healthcare system in unprecedented ways. This study explored the essence of interprofessional collaboration among medical and paramedical healthcare professionals. A phenomenological research study through photovoice was employed and analyzed using thematic analysis. Study corpus was gathered from a total of 15 participants, including three medical technologists, three nutritionists and dieticians, three radiologic technologists, three pharmacists, two nurses, and one physician. Four themes surfaced from the responses, namely: *unity in diversity*, *paradigm shift*, *parallel dilemmas*, and *resilient optimism*.

**Keywords:** healthcare system, interprofessional collaboration, medical, healthcare

## INTRODUCTION

In early December, the World Health Organization (WHO) was notified by China regarding pneumonia with unknown etiology, which is initially called the Wuhan pneumonia attributed to the place where the early case was isolated. It was later identified that the atypical pneumonia was caused by the new strain of coronavirus and thus called the novel human coronavirus disease or most commonly known as COVID-19 (Liu, Kuo, & Shih, 2020; Kumar, Malviya, & Sharma, 2020).

Amidst the growing numbers of patients, persons under investigation, and persons under monitoring, it is undeniable that the battle against the COVID-19 pandemic puts the healthcare delivery system of different countries around the world on the spot (Lim, 2020). Interprofessional healthcare collaboration has been investigated by many researchers to improve health outcomes. (Bosch & Mansell, 2015; Lutfiyya & et. al., 2019; Bridges, Davidson, Odegard, Maki, & Tomkowiak, 2011; Fox & Reeves, 2014; Sibayan et. al. 2019). The said action plan reiterates involvement or collaboration between varied fields of expertise that delivers quality care as it optimizes existing resources. With the global crises happening, it is well worth exploring the

healthcare professionals' collaborative work experiences during the COVID-19 situation here in the Philippines and discovering the strengths, weaknesses, and gaps in interprofessional healthcare practice.

## METHODOLOGY

Phenomenological qualitative research employing visual methodology through photovoice was the study design. Phenomenology describes the relationship between processes and phenomena that will be useful to ascertain the experiences and emotions of the people. It utilizes conversation, observation, and interview with the respondents to obtain information deemed necessary and is suitable in studies that analyze and seek insights (Suter, 2012). Photovoice techniques enable participants to capture realms of their experiences that convey ideas and provoke critical dialogue as represented by the image. The researchers used photovoice as a research tool to enable participants to direct the research process through visual representation and description of their experiences. Different layers and their essence can be uncovered as this method unravels deep emotions, memories, and ideas (Glaw et al., 2017).

To ensure the study's validity, the researchers approached the interview and data collection process with a phenomenological reduction mindset. This was observed using bracketing, wherein the researchers concealed prior understandings and preconceptions about the phenomena being observed. This allowed them to avoid placing biased ideas or interpretations coming from their own experiences (Kleiman, 2014). The researchers also used triangulation as a method to define, analyze, and appreciate various aspects of the elements in the research, thus reinforcing their findings and empowering their interpretations.

The primary source of data was obtained through the respondents' chosen pictures and a semi-structured questionnaire. The picture taken or chosen by the respondents themselves represented their experience in this pandemic in terms of interprofessional healthcare collaboration.

Snowball sampling was used in the study. To find and coordinate with healthcare professionals working in different hospitals from different places, the researchers used personal connections. From the initial respondents who agreed to take part in the study, recommendations for other potential participants were asked. The participants of the study included healthcare professionals who are Filipino, licensed, hospital-based, and have rendered service for COVID-19 patients. This is to obtain responses that tackle the effects of the COVID-19 pandemic on the collaborative relationship between the healthcare frontliners in the Philippines.

For the analysis of the interview questions, the researchers were divided into groups of three. To attain dependability and conformability, one of the groups categorized the data gathered into themes. The other groups reviewed the transcribed material to validate the themes and descriptions identified. With the assistance of a research specialist, thematic analysis was utilized wherein common patterns within the data were identified, analyzed, and interpreted. Results were accepted upon the congruence of the two analyses done.

## RESULTS

Four themes surfaced from the responses, namely: are unity in diversity, paradigm shift, parallel dilemmas, and resilient optimism. Unity in diversity has subthemes consisting of a synergistic element, experiential solidarity, and collaborative endeavor. It was found that despite the respondent differences as professionals, they value their roles as members of the healthcare team. It has strengthened their relationships while also making the team process more effective for better patient care delivery. This was supported by the studies done by Bosch and Mansell in 2015 that state that recognizing and achieving comfort towards interlaced roles within a team is for the patient's best interest which was further supported by Halawi et al. (2020) that alluded to a unified and collaborative approach fosters timely initiation of policies towards reformative change in any given situation. Professionals and their unique roles are vital components of interprofessional healthcare collaboration that leads to holistic care and better patient outcomes. Another positive process of team collaboration seen in this crisis period is recognizing that all healthcare workers are critical members of a tight group who share the same sentiments and have an assertive voice during challenging and critical times (Goldman & Xyrichis, 2020).

The paradigm shift is composed of subthemes: facing unprecedented, bureaucratic complexities, and conscientious practice, in which stated the new system in the workplace such as protocol and guideline and they practice to be cautious and follow the system, but there are gaps in the support and resources to fully suffice the changes (Bescos, Casas-Agustench, Belfield, Brookes & Gabaldón, 2020; Ran, Chen, Wang, Wu, Zhang & Tan, 2020; Lai, Tang, Chau, Fung & Li, 2020). As covid challenged the healthcare systems in unprecedented ways, collectively, healthcare reform had to undergo rapid and responsive adaptation and adjustment, shifting the ways to meet the demands (De Filippo et al., 2020).

Parallel dilemmas arise, challenging the physical, emotional, and mental faculties, but they find meaning in this shared experience. Regardless of the experiences of healthcare professionals during this time of crisis, resilient optimism was observed assisting the team process in adapting to the situation. As if the task on hand was not tumultuous enough, the care providers had to adapt protocols and guidelines that, while protective was also taxing in that prolonged use limited movement, hampered the performance of duties, and was extremely uncomfortable (Arnetz, Goetz, Arnetz, & Arble, 2020). This was further supported by Benitez et al. (2020), who cited cognitive fatigue as one of the obstacles that overpowered the adaptive strategies of many healthcare providers.

The essence of interprofessional healthcare collaboration by the participants is to be united even they are in different fields. They were able to distinguish their roles as an essential part of a whole, which led to better teamwork. The cooperation improves upon the realization Communication is an essential process that enables them to work positively in this crisis. In this time of the pandemic, interprofessional healthcare collaboration is more potent than before.

## DISCUSSION AND CONCLUSION

Despite the immense suffering and challenges the COVID-19 pandemic has brought upon the lives of many all around the world, this phenomenon has given a rich and diverse set of experiences that taught invaluable lessons to men from all professions, especially to those working in the medical field. The respondents were brought together in ways like never before. The strong and weak points of their hospital's healthcare delivery system were also pointed out. Regardless of the physical, mental, emotional, and social devastation caused by the global health problem, the healthcare professionals who took part in this study felt a sense of shared empathy and comradeship that empowered them to continue fighting COVID-19. They are working together with a common goal in mind which is to provide a better patient care delivery. The unity in times of adversity is seen by the study participants as the silver lining in this cloud brought by the pandemic.

The following recommendation was made based on the study's results:

1. Quantitative research based on the study results can further explore interprofessional collaborative practice among healthcare professionals.
2. Interprofessional Education programs in higher education institutions can be implemented if strengthened as it serves as the foundation to collaborative practice.
3. Mental health programs and support should be given to the mentally exhausted professionals and proper compensation for their physical efforts.
4. In-service training and team-building activities can be done to foster and reinforce a better cognizance and understanding of the collaborative practice and its impact to care.

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