

Impact of Interprofessional Collaboration on Team Effectiveness and Quality Care among Health Care Professionals in Hospitals in The Greater Male' Region

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Abstract: Interprofessional collaboration (IPC) has emerged as a critical strategy for improving teamwork, optimizing clinical performance, and enhancing the quality of care in modern healthcare systems. Despite extensive global research, empirical evidence integrating IPC, team effectiveness, and quality of work remains limited in Asian island contexts such as the Maldives. This conceptual paper examines the impact of IPC practices on team effectiveness and quality care among healthcare professionals working in public hospitals in the Greater Malé Region. Guided by the Sunnybrook Framework, the study conceptualizes IPC through six core competencies: shared decision-making, interprofessional communication, role clarification, conflict resolution, reflection, and interprofessional values and ethics. The paper proposes that these competencies collectively enhance collaborative behaviors, strengthen team functioning, and elevate professional performance, thereby improving care quality. By identifying gaps in existing literature and emphasizing context-specific challenges such as workforce shortages and rising non-communicable diseases, this work highlights the urgent need for structured IPC implementation in Maldivian hospitals. The conceptual model presented provides a theoretically grounded foundation for future empirical research and supports the development of policies and training programs aimed at fostering sustainable, team-based healthcare delivery.

Keywords: Interprofessional Collaboration; Team Effectiveness; Quality of Care; Healthcare Professionals; Shared Decision-Making; Communication; Role Clarification; Conflict Resolution; Reflection; Interprofessional Ethics; Sunnybrook Framework; Maldives Healthcare.

INTRODUCTION

Health care delivery in the 21st century increasingly relies on collaborative, team-based model in which professional from multiple disciplines work together to deliver holistic, patient-centered care (Lin *et al.*, 2020). Early research on collaboration primarily physician-nurse interactions, focusing attitudes, team work factors, and patient outcome (Hojat *et al.*, 1997). The concept of interprofessional collaboration (IPC) began in the healthcare research from the studies 1960 through 2011 which reflects an evolving the diverse professional interaction to improve patient centered care and protecting patient safety (Haddara & Lingard, 2013). The complexity of modern healthcare systems continues to increase due to the increasing severity of patient conditions and ongoing advancements in medical and technological innovation. These complex and dynamic healthcare setting requires a comprehensive in approach in which healthcare professionals from various disciplines collaborate together integrate care to enhance patient-centered care and ensure patient safety (Hanum & Findyartini, 2020).

As teamwork become vital in modern healthcare setting, global healthcare organizations have emphasized interprofessional collaboration as a foundation of sustainable healthcare system. The foundation of IPC was established in 2009 with the

publication of WHO's "Framework for Action on Interprofessional Education and Collaborative Practice" (World Health Organization [WHO], 2010). In this framework, WHO highlights that healthcare organizations must implement collaborative practice and interprofessional education (IPE) to enhance health outcomes. IPE must be facilitated by healthcare training institutes and universities to prepare a workforce that engages in collaborative practice.

Collaborative practice is where healthcare providers from various backgrounds work jointly with patients and communities, strengthen health systems and optimize care quality. This framework outlines mechanisms for implementing IPE and collaborative practices at policy, educational, and operational levels, advocating for system-wide shifts to a team-based healthcare delivery model. The World Health Organization (WHO, 2010) officially recognized ICP as central component of effective healthcare team and key strategy for maintaining workforce sustainability. The concept emphasizes significance of collaboration within multiple healthcare professionals, sharing goals, role clarifications, responsibilities, shared communication, and effective teamwork (Zenani *et al.*, 2023). This recognition has led to development of multiple competency frameworks emphasizing significant areas such as ethics, conflict resolution,

and patient-centered care among healthcare professionals to promote effective interprofessional collaboration (Witti *et al.*, 2023). These frameworks collectively highlighted that the IPC enhance the patient safety, improve care quality and improve healthcare professionals job satisfaction. The recent finding indicated that interprofessional collaboration causes knowledge sharing among the team members (Hassan & Hamid, 2025; Jameel, Solih & Hassan, 2025). Furthermore, these frameworks provide as an integrated structural foundation that brings healthcare experts from diverse disciplines to provide comprehensive, holistic patient-centered care.

Several studies have empirically established the positive relationship between IPC and team effectiveness. Schmutz *et al.*(2019) found that collaborative communication directly improves clinical performance in surgical team. Similarly, McGuier *et al.*(2024) stated that team engaging reflection and shared-decision making reported as higher level of innovation and adaptation of evidence-based practice within the interprofessional team. The relationship between team effectiveness and quality of work has also been substantiated teams with higher collaboration levels report fewer medical errors, greater morale, and improved patient outcomes (Rosen *et al.*, 2018; Tandan *et al.*, 2024)

RESEARCH PROBLEM STATEMENT

Most empirical evidence on IPC originates from North America, Europe, and Australia, with limited studies in Asian and island healthcare systems. Research in these regions has predominantly focused on acute care and primary health settings (Reeves *et al.*, 2017; Zajac *et al.*, 2021). Although international evidence supports IPC as determine of better teamwork and patient outcome, few studies that have integrated all three constructs IPC, team effectiveness, and quality of work within a unified framework. Even fewer have examined team effectiveness as a mediating variable between IPC and quality outcomes in public hospital settings. This gap represents a crucial area for empirical exploration.

This gap is noticeable in the Maldivian context. The urgent challenges of an aging population and the increasing burden of chronic diseases have introduced new complexities to the healthcare systems (Atella *et al.*, 2019). In the Maldivian, especially within the public hospitals of the Greater Male' Region, the healthcare system is

under increasing pressure due to raising prevalence of non-communicable diseases (NCDs). This trend has led to workforce shortages and an increased risk of care fragmentation, which may compromise the quality of care. These leads raise risk of care fragmentation, compromise quality of care, increased health cost. In response, innovative care model has been developed. Among these, IPC emerged as a potential solution to improve healthcare processes and patient outcome and reduce healthcare costs.

Therefore, this study will evaluate the current IPC practices and impacts on team effectiveness and work quality and the mediating role of team effectiveness in Maldivian public hospitals.

Research objectives

1. To examine the impact of interprofessional collaboration practices on team effectiveness among healthcare professionals in public hospitals of Greater Male' area
2. To assess the impact of interprofessional collaboration practices on health care quality among healthcare professionals in public hospitals of greater Male' area

Significance of the Research

This study extends the Sunnybrook Framework by incorporating its six elements, thereby bridging the conceptual gap between teamwork theory and hospital performance. Practically the framework guides the hospital administrator and developing IPC. It contributes to national health policy efforts aimed at developing sustainable, team-based care in geographically dispersed island context.

LITERATURE REVIEW

Review of Key concepts

Interprofessional Collaboration was defined in various definitions by emphasizing corporation among diverse healthcare professionals working together to achieve common goals. For example, Green & Johnson (2015) definition is widely cited in healthcare literature, received more than 800 citation, and ICP was define as two or healthcare professionals working to attain common goals. On WHO's policy on interprofessional collaboration, IPC defined as collaborative practice within multiple healthcare professionals with patient and family members collaborating to deliver the best available care across the setting, this definition identified as benchmark of IPC in healthcare setting (World Health Organization [WHO], 2010). Recent conceptualizations have expended IPC to include integration of system,

communication, shared decision-making and ethics (Aggarwal *et al.*, 2025; Dib & Belrhiti, 2025; McLaney *et al.*, 2022). These definitions underline

that ICP is not merely specific to the location or the conversation, but it’s deliberate collaboration in a common objective and collective action.

Table 1: Definition of Interprofessional Collaboration in healthcare setting

Author(s)	Definition
Green & Johnson (2015)	Interprofessional collaboration occurs when two or more healthcare professionals work together to attain common goals.
World Health Organization (2010)	In health care setting Interprofessional collaborative practice is defined when the multiple healthcare professional work together with the patient and families to provide the best available care.
McLaney <i>et al.</i> (2022)	Interprofessional collaboration is defined outline within the competency frameworks as healthcare professionals working together to achieve the highest quality of patient care.
Kobrai-Abkenar <i>et al.</i> (2024)	Interprofessional Collaboration is defined as a process that connects systems, organizations, and individuals from different professions in order to achieve shared objectives.
Aggarwal <i>al.</i> (2025)	Interprofessional Collaboration is defined as team-based care model in which healthcare providers from multiple disciplines collaborate to integrate care that is required for the patients.
Dib & Belrhiti (2025)	Interprofessional Collaboration is defined as the process of various healthcare professionals collaborating through effective communication and shared decision-making using expert knowledge and competencies to improve patient outcomes.

These definitions reveal three essential key elements: (1) shared goals and decision-making, (2) effective communication and shared responsibility, and (3) incorporation of professional role and structural frameworks. Thus, IPC can be defined as structured process where healthcare professionals from different disciplines collaboratively plan and deliver patient-centered care to provide high quality care within the complex healthcare system.

Team Effectiveness

Team effectiveness emerged as a fundamental concept for evaluating how groups collaborate in healthcare settings to achieve desired outcomes and organizational objectives. Zajac *et al.* (2021) found that higher teamwork correlates with better clinical performance. McGuier *et al.*(2024) enhanced this understanding by emphasizing the impact of reflection, shared learning and the acceptance of innovation.

Table 2: Definition of Team effectiveness

Author(s)	Definition
Zajac <i>et al.</i> (2021)	Team effectiveness is defined as an extent to which a team achieves desired outcomes, smooth team functioning, and sustainability of collaborative work within the team.
Aggarwal <i>et al.</i> (2025)	Team effectiveness is defined as the team’s ability to accomplish desired outcomes through collective efforts.
Zajac <i>et al.</i> (2021)	Team effectiveness is explained as a validated, measurable quality of interdisciplinary teams, specifically communication, coordination, and role clarity, which predicts quality of patient care.
Schmutz <i>et al.</i> (2019)	Team effectiveness is defined as the degree to which team collaboration among team members contributes to achieving clinical performance.
McGuier <i>et al.</i> (2024)	Team effectiveness refers to collaboration within the team and the ability to apply innovative and evidence-based practice to improve clinical practice.

Team effectiveness in healthcare is defined as the extent to which interprofessional team achieve objectives through collaborative performance, integration and communication. In this study, it is conceptualised as the mediating construct that connects interprofessional collaboration practice to enhance quality outcome.

Quality of Healthcare

The concepts of healthcare quality has evolved from outcome-based measures to more complex concept that includes patient safety, equality and workforce wellbeing. Mosadeghrad (2013) defined it as “consistently delighting the patient by providing efficacious, effective and efficient healthcare services according to the latest clinical

guidelines and standards, which meet the patient’s needs and satisfies providers”. The WHO (2018) highlighted the importance of safety, patient-centered, and integrated. This concept has been evolved later by Kipo-Sunyehti (2021), Alenezi *et*

al., (2022) and Milosavljević *et al.*, (2024), highlighted that the both patient satisfaction and staff performance as indicators of quality of care service.

Table 3: Definition of the quality of care

Author(s)	Definition
Mosadeghrad (2013)	“consistently delighting the patient by providing efficacious, effective and efficient healthcare services according to the latest clinical guidelines and standards, which meet the patient’s needs and satisfies providers”
World Health Organization (2018)	Quality of healthcare services is defined as delivery of effective, safe person-centered care that is equitable, integrated and efficient way.
Milosavljević <i>et al.</i> , (2024)	The quality of healthcare is defined as satisfying both patient and professional expectation while improving resources and minimizing potential risk.
(Alenezi <i>et al.</i> , 2022)	Quality of health care refers to the process of providing safe and effective care that promotes positive patient outcome.
Kipo-Sunyehti (2021)	Quality healthcare services are defined as effective, affordable, efficient, safe and patient centered care.

Quality of care for this study reflects both clinical competence and professional work satisfaction. It reflects how healthcare professionals provide safe, coordinated and compassionate care. Through IPC enhance trust, and improve the efficacy of care processes (Rawlinson *et al.*, 2021; Reeves *et al.*, 2017b)

Health care professionals

Healthcare professionals are the central part of the IPC. Healthcare professionals are individual with accredited education, professional licensed and ethically responsible to provide evidenced-based care (Carini *et al.*, 2020; Gershuni *et al.*, 2023)

Table 4: Definition of Health care professionals

Author(s)	Definition
Gershuni <i>et al.</i> , (2023)	Healthcare professionals are defined as individuals who are formally trained, certified, and licensed to deliver healthcare services to both individuals and community.
Symons <i>et al.</i> , (2021)	Healthcare professionals are individuals who are members of a regulatory body and are authorized to provide healthcare services to patients or the community according to established guidelines.
Joseph <i>et al.</i> , (2022)	Healthcare professionals are referred to as individuals who hold licenses and have the necessary competencies to provide effective healthcare.
Carini <i>et al.</i> , (2020)	Healthcare professionals are trained and licensed to provide medical care and incorporate scientific and evidence-based management to improve patient health outcomes.
Sanil & Eminer (2021)	Healthcare professionals are certified and trained individuals who implement standards and clinical guidelines to ensure effective and efficient healthcare.

For this study, healthcare professionals are defined as competent, licensed individuals collaboratively deliver safe, evidence-based care.

Underlying Theories

This study adopted the Sunnybrook Framework of interprofessional collaboration as its guiding model. The Sunnybrook framework of core competencies is a healthcare specific model designed to foster team-based competencies rather than individual professional roles (McLaney *et al.*, 2022). This framework identified six sets of core competencies; each deliberately articulated as

shared competencies essential for team collaboration. The Sunnybrook Framework of IPC is appropriate for assessing the impact of ICP on team effectiveness and work quality. This is due to its intentional design as a set of specific shared competencies that are team-based and directly reflect the functioning of real healthcare team in providing patient care such as shared decision-making, communication, role clarification, conflict resolution, reflection, interprofessional values.

Although the framework has been used widely disseminated as organizational strategy, there is

still limited empirical research assessing its impact in practice. The original Sunnybrook Framework of IPC was published 2022, mainly describes how the framework integrated into ongoing training to develop IPC (McLaney *et al.*, 2022). The framework highlights the positive outcomes, such as mutual support and team-based reflection. However, the author stated that the six concepts were not tested in the study (McLaney *et al.*,

2022). Most existing publications used few concepts of this framework to do the research study (Nackerdien, 2025). Not all six competencies were tested in one study; this is a methodological gap in research methodology that future studies need to address. There for this study will be evaluating the six concepts of Sunnybrook Framework of IPC.

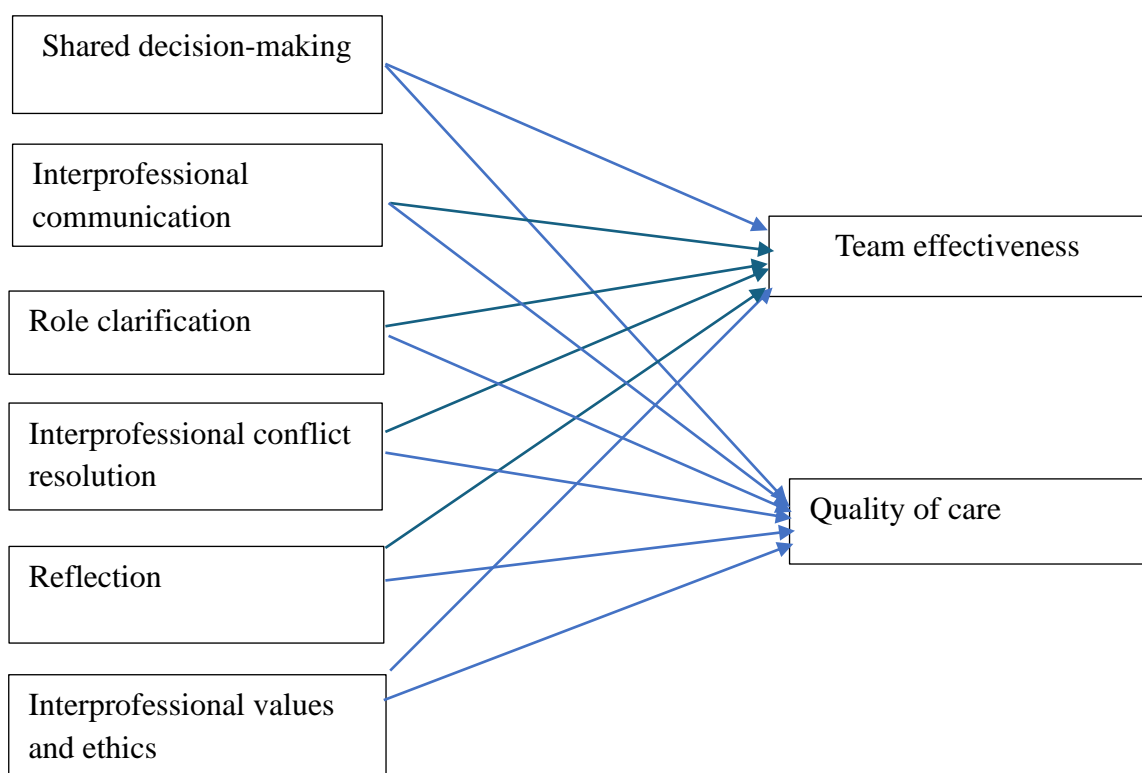


Figure 1 Conceptual Framework of Interprofessional collaboration, team effectiveness and quality of care

The conceptual framework for this study is guided by the Sunnybrook Framework of Interprofessional Collaboration, which outlines six core competencies that enhance effective IPC with the team. Six core competencies are purposely designed for team collaboration, which include shared decision-making, communication, role clarification, conflict resolution, reflection, interprofessional values and ethics. In this study, interprofessional collaboration is conceptualized as independent variables, while team effectiveness and quality of work are identified as dependent variables.

Effect of Shared Decision-Making on team effectiveness and quality of work

Shared Decision-Making (SDM) is process when healthcare professionals collaborate to plan patient care integrating scientific evidence, professional knowledge, and with patient preferences (Hoque, 2024; Lu *et al.*, 2022). Research on SDM shows mixed results, however the overall evidence indicates that SDM has a predominantly positive influence on both team effectiveness and work quality among healthcare providers. A comprehensive scoping review conducted in 2023 by using more than 100 randomized controlled trails shows that SDM has significant positive impact on healthcare team, specifically improved clinical performance, promote mutual accountability, and enhanced team collaboration (Wehking *et al.*, 2024). Moreover, studies on IPC

indicate that SDM plays a significant role in an empowering multidisciplinary teams to achieve a coherent care plan, thus minimize the work duplication, and enhance the continuity of care, which together highlight the hallmarks of team effectiveness and quality of work (Rawlinson *et al.*, 2021; Reeves *et al.*, 2017b; Al Salman & Hassan, 2016). There for the following hypothesis are formulated:

H1 *Team based shared decision-making competency has positive effect on team effectiveness.*

H2 *Team based shared decision-making competency is increase quality of work.*

Interprofessional Communication Impacts Team Effectiveness and Quality of Work

Effective communication is identified as primary predictor of healthcare team effectiveness. Clear communication ensures that the accurate information exchange, avoid misunderstanding, and promotes coordination (Wehking *et al.*, 2024). Poor communication has been linked to medical error and fragmented care, while effective communication practice promotes cultural safety and mutual trust (Leonard *et al.*, 2004). In a collaborative environment, communication improves team cohesion, which ultimately improves both team effectiveness and quality of work (Selna *et al.*, 2022).

H3: *Interprofessional communication positively influences team effectiveness.*

H4: *Interprofessional communication improves the quality of work.*

Role Clarification Effects on Team Effectiveness and Quality of Work

Role clarification is common barrier in interprofessional collaboration, which resulting in double task or gap in healthcare deliver (McLaney *et al.*, 2022). Role clarification strengthens accountability, allows effective task allocation, and enhances professional satisfaction (Orgambidez & Almeida, 2020). When the team members clearly communicate and understand their own and other responsibilities, collaborative care becomes more efficient, which has a direct effect on quality of care (Rodrigues *et al.*, 2025). The study formulated the following hypothesis based on above discussion:

H5: *Role clarification positively improves team effectiveness.*

H6: *Role clarification positively enhances the quality of work.*

Impact of Interprofessional Conflict Resolution on Team Effectiveness and Quality of Work

Conflict within healthcare teams is inevitable given diverse professional backgrounds, perspectives, and priorities. However, evidence suggests that constructive conflict resolution enhances creativity, strengthens relationships, and promotes a culture of collaboration (Swanwick & McKimm, 2017). On the other hand, unresolved conflict undermines trust and negatively impacts performance. Teams equipped with conflict resolution competencies are better able to sustain effectiveness and maintain high-quality work standards. Based on synthesis of existing literature following hypothesis formulated:

H7: *Interprofessional conflict resolution positively impacts both team effectiveness and quality of work.*

H8: *Interprofessional conflict resolution positively impacts the quality of work.*

Impact of Reflection on Team Effectiveness and Quality of Work

Reflective practice is the central to professional growth and continuous improvement. Research indicates that structured reflective practice helps healthcare providers recognize their strengths and weaknesses and develop strategies to enhance future performance (Selna *et al.*, 2022). Reflective practice strengthens motivation, trust, and shared responsibility within interprofessional team (Shaw *et al.*, 2012). Edelist *et al.*, (2024) stated that collective reflection improves the professional perspective and promotes learning in complex health care setting. Thus, reflection has a critical role in linking collaboration to continuous improvement, ultimately promotes effectiveness of teamwork and high quality of care. Thus, study formulated the following hypothesis based on above discussion:

H9: *Reflection help enhance team effectiveness.*

H10: *Reflection help enhance the quality of work.*

Impact of Interprofessional Values and Ethics on Team Effectiveness and Quality of Work

Shared values and ethics are the foundation of strong teamwork and high-quality work with the interprofessional team. Following interprofessional ethics fosters the mutual respects, equitable involvement, and shared responsibility for the patient's outcomes (Reeves *et al.*, 2017b). Teams with interprofessional ethics encourage everyone to work collaboratively, with help each other to share responsibilities and are more committed to

patient-centered care. Adherence to interprofessional ethics not only strengthens team effectiveness but also contributes to the consistent delivery of safe, high-quality care (Shah *et al.*, 2025). The following hypothesis developed based on the discussion:

H11: *Interprofessional values and ethics have a significant positive impact on team effectiveness.*

H12: *Interprofessional values and ethics influence to enhance the quality of work.*

IMPLICATIONS

Findings are essential for strengthening IPC in the Maldivian healthcare context. Since the research identifies six key competencies shared decision-making, interprofessional communication, role clarification, conflict resolution, reflection, and interprofessional values and ethics as elements of team effectiveness and work quality, practical application should begin with embedding these competencies in hospital policy and staff development frameworks. Hospitals in the Greater Malé Region can operationalize the conceptual model through structured interprofessional education (IPE) sessions, reflective team rounds, and shared performance evaluations that align with the Sunnybrook Framework. This implementation will not only promote ethical and cohesive teamwork but also lead to measurable improvements in care quality, staff satisfaction, and organizational efficiency. Theoretically, your study's integrated framework provides a validated model linking IPC to both team effectiveness and quality of work, addressing a methodological gap by testing all six competencies together something not previously achieved in past IPC research.

CONCLUSION

This conceptual paper presents a theoretically coherent framework linking interprofessional collaboration to team effectiveness and quality of work in Maldivian public hospitals. Drawing on the Sunnybrook Framework, it conceptualizes collaboration as an integrated set of competencies that enhance professional coordination, shared accountability, and care outcomes.

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