# The Role Of Interprofessional Collaboration On Enhancing Quality Of Health Indicators In The Technology Era: A Systematic Review

Dr. Hassan Ali Albahlool<sup>1</sup>, Sehrish Khan (corresponding author)<sup>2</sup>, Nouf Nasser Mohammed Otayf<sup>3</sup>, Badar Abdul Mohsen Manour Al-Shaeeif<sup>4</sup>, Majid Ahmed Refaei<sup>5</sup>, Majed Mousa Mohammed Sulayyi<sup>6</sup>, Rawan Mohammed Hassan Modarba<sup>7</sup>, Ibrahim Mohammed Abdullah Safhi<sup>8</sup>, Ghazi Yahia Ali Homadi<sup>9</sup>, Adel Alawi Alfaqih<sup>10</sup>, Satam Mohammed Hakami<sup>11</sup>, Sami Ali Ibrahim Kariri<sup>12</sup>, Ali Ahmed Yahya Jada<sup>13</sup>, Kheder Moussa Yahia Gabarry<sup>14</sup>

<sup>1</sup>Consultant Of Family and Palliative Medicine, Palliative Care Department, Oncology Center, Prince Mohammed Bin Nasser Hospital, Jazan

<sup>2</sup>PhD Research Fellow, <u>amiu.research@gmail.com</u>, <u>https://orcid.org/0000-0002-8559-4949</u>

<sup>3</sup>Ahad Primary Health Care

<sup>4</sup>Abu Erwah Primary Health Centre

<sup>5</sup>Laboratory Department Blood Bank Centre, Jizan

<sup>6</sup>Ministry Of Health- Jizan

<sup>7</sup>Jazan Health

<sup>8</sup>Ahad Almasareha General Hospital

<sup>9</sup>Samtah General Hospital

<sup>10</sup>Abu-Arish Hospital <sup>11</sup>Abu-Arish Hospital <sup>12</sup>Samtah General Hospital <sup>13</sup>Ahad Almasareha General Hospital <sup>14</sup>Samtah General Hospital

# **Abstract**

Interprofessional collaboration (IPC) has emerged as a critical factor in improving healthcare quality and patient outcomes. This systematic review aims to synthesize existing literature on the

role of IPC in enhancing healthcare quality across various settings. A comprehensive search of databases from 2018 to 2022 yielded a total of 13 relevant studies focusing on themes such as interprofessional education, clinical practice pathways, collaborative technologies, and leadership strategies. The findings highlight the importance of IPC in fostering teamwork, communication, and shared decision-making among healthcare professionals. However, challenges such as attitudinal barriers, technological limitations, and measurement complexities were identified. Despite these challenges, the implications of the studies are substantial, offering recommendations for policymakers, healthcare institutions, educators, and researchers to promote collaborative practices and leverage technology to optimize healthcare delivery. This systematic review provides valuable insights into the current state of IPC research and underscores the need for continued efforts to advance collaborative healthcare practices and improve patient outcomes.

**Keywords:** Interprofessional collaboration, Quality of Health, Technology Era, KSA, Systematic Review

#### Introduction

# **Background of the Literature Review**

Interprofessional collaboration (IPC) is a partnership between healthcare professionals from diverse disciplines to provide comprehensive care. It involves pooling knowledge, skills, and resources to address patients' complex needs and improve health outcomes. IPC emphasizes teamwork, communication, mutual respect, and shared decision-making. It promotes a unified approach to healthcare delivery, enabling professionals to develop care plans, coordinate services, and optimize patient outcomes (Wei et al., 2020; Peltonen et al., 2020; Schot et al., 2020). Research shows that IPC leads to improved patient outcomes, safety, satisfaction, and efficiency. It also plays a critical role in addressing complex health challenges and improving population health outcomes. Overall, IPC enhances the quality, safety, and

effectiveness of care, ultimately improving health outcomes for patients and communities (Kaiser et al., 2022; McCutcheon et al., 2020; Park & Park, 2019).

The quality of health is the quality of healthcare services that meet patients' needs, achieve desired outcomes, and adhere to established standards. It includes clinical effectiveness, patient safety, patient-centeredness, timeliness, efficiency, and equity (Hussein et al., 2021; Kruk et al., 201). Clinical effectiveness is crucial for evidence-based, tailored services. Patient safety involves preventing harm from medical errors and infections. Patient-centeredness involves involving patients in care, respecting their values, and addressing their unique needs. Timeliness ensures timely service delivery. Efficiency maximizes resource use while minimizing waste. Equity ensures equal access to care regardless of socio-economic status. Measuring and assessing quality of health is crucial for identifying improvement areas and promoting accountability (Machta et al., 2019; Gillespie & Reader, 2018; Cao et al., 2018).

The integration of technology in healthcare delivery has revolutionized care by offering innovative solutions and transforming the way care is delivered and managed. Advancements like EHRs, telemedicine, wearable devices, and health information exchange systems have enhanced IPC by facilitating communication, streamlining workflows. improving information sharing among healthcare team members (Nurhidayah et al., 2020; Witt Sherman et al., 2020; Lackie & Murphy, 2020). However, realizing the full potential of technologymediated IPC requires careful consideration of its impact on health indicators and patient outcomes. Quality improvement is crucial for achieving better outcomes for patients and communities, and healthcare teams can identify areas for improvement using datadriven approaches and evidence-based practices (Ohta & Ryu, 2021; Manocha et al., 2020; Rosen et al., 2018).

Interprofessional collaboration (IPC) is a crucial tool in modern healthcare delivery, leveraging technological advancements to improve patient outcomes, streamline care delivery, and optimize healthcare systems. IPC facilitates

communication and information sharing among healthcare professionals, enabling real-time exchange of patient information and reducing medical errors (Mahajan et al., 2018; Sweeney Haney et al., 2018; Liaw et al 2019). It also promotes team-based care models, allowing healthcare professionals from different disciplines to work together to address complex patient needs. Technology-enabled IPC supports interdisciplinary education and training, providing innovative tools and resources for continuous learning. It empowers patients and caregivers to actively participate in their care, promoting patient-centered care and improved treatment adherence. IPC also enhances data analytics and population health management, enabling healthcare organizations to collect, analyze, and interpret vast amounts of healthcare data to inform decision-making and improve outcomes at individual and population levels (Beckmann et al., 2021; Shirey et al.,2021; Dellafiore et al., 2019).

## **Objectives**

## **IPC and Health Indicators**

Following are the Objectives for this literature review

- Examines the relationship between IPC and critical health indicators.
- Assesses effectiveness of technology-enabled IPC interventions.
- Identifies barriers and facilitators to effective IPC in the technology era.
- Explores the role of interdisciplinary teamwork in optimizing patient-centered care.
- Provides recommendations for enhancing IPC practices and leveraging technology.

## **Research Questions**

 What is the current state of research on the role of interprofessional collaboration in improving health indicators in healthcare settings that utilize advanced technologies?

- 2. How does interprofessional collaboration improve health indicators such as patient outcomes, safety measures, patient satisfaction, and healthcare utilization metrics in technology-enabled healthcare environments?
- 3. What are the most effective interprofessional collaboration models or frameworks that have been utilized with technological advancements to enhance health indicators?
- 4. What technologies are most commonly employed to facilitate interprofessional collaboration in healthcare, and how do they impact the quality of health indicators?
- 5. What are the barriers and facilitators to successfully implementing interprofessional collaboration initiatives in technology-driven healthcare settings, and how do they influence health indicator outcomes?

# Aim of the Study

The aim of current LR is to examine the role of interprofessional collaboration on enhancing quality of health indicators in the technology era.

## Methods

The standards of the Preferred Reporting Items for Systematic Reviews (PRISMA) were adhered to by this systematic review.

## **Identifying Studies through Search Methods**

A systematic review was conducted on the role of interprofessional collaboration in improving health indicators in the technology era from 2018 to 2022. A comprehensive search strategy was used, including academic databases like PubMed, Scopus, and PsycINFO. The search strategy included controlled vocabulary terms and freetext keywords, employing Boolean operators. Inclusion criteria included publication date, language, study design, and relevance to the research topic. Screening was conducted based on titles and abstracts, with full-text assessment performed on selected articles. Grey literature sources like conference abstracts, dissertations, and organizational reports were also searched. Data extraction and quality assessment were conducted to ensure comprehensive coverage and rigorous evaluation of the literature

Table 1 Syntax Search and Search Data Base

				No of
No	Database	Syntax Title	Year	Researches
		"Interprofessional collaboration" , "Quality of Health" AND	2018-	
1	PubMed	"Technology"	2022	261
		"Interprofessional collaboration" AND "Technology" AND "Health		
4	Scopus	Indicators"	2018-2-22	300
		"Interprofessional collaboration" AND "Technology" AND "Quality of	2018-	
5	PsycINFO	Health"	2022	162

#### **Statistics from the Data Base**

The study utilized Scopus, PubMed and PsycINFO databases to identify relevant research publications from 2018-2022. The most significant articles were found in Scopus 300 and 261 from PubMed whereas PsycINFO had 162 demonstrating thoroughness in the scientific search. The total researches were searched as 723 . Systematic Review Criteria for the examining the role of interprofessional collaboration on enhancing quality of health indicators in the technology era.

#### Inclusion and Exclusion Criteria

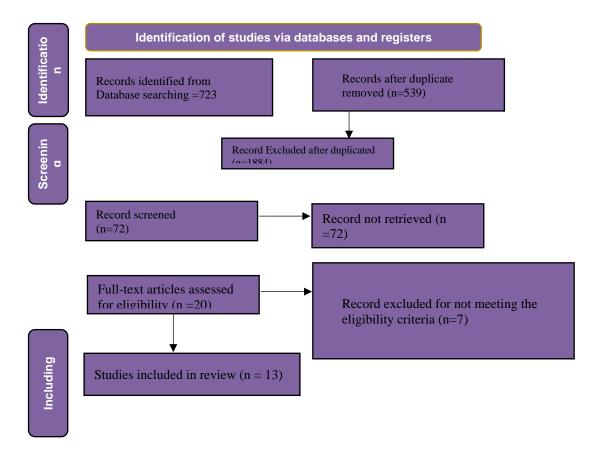
The systematic review identifies relevant studies based on inclusion and exclusion criteria. The criteria include studies published between 2018 and 2022, focusing on interprofessional collaboration in healthcare settings using advanced technologies like electronic health records and telemedicine. The studies must examine the impact of interprofessional collaboration on health indicators like patient outcomes, safety measures, patient satisfaction, and healthcare utilization metrics. Eligible studies include empirical studies, systematic reviews, and meta-analyses in English. Exclusion criteria exclude studies published before 2018 or after 2022, conducted outside healthcare settings, or without relevant outcome reporting or methodological rigor.

# **Gathering and Analysing Data**

Using PRISMA criteria, the researcher carried out an independent assessment, concentrating on titles and abstracts to find pertinent

articles. Next, a full-text screening was carried out, which included the addition of exclusion criteria to the study selection flow diagram and the removal of irrelevant publications

**Figure 1** PRISMA 2020 flow diagram for new systematic reviews which included searches of databases and databases



### Result

## **Quality Assessment**

Quality assessment is crucial for ensuring the reliability and validity of evidence in systematic reviews. Common tools include the Newcastle-Ottawa Scale for observational studies, the Cochrane Risk of Bias Tool for randomized controlled trials, and the AMSTAR 2 tool for systematic reviews and meta-analyses. The process involves systematically appraising each study based on criteria such as design, sample size, blinding, allocation concealment, follow-up rates, and statistical analysis. The focus should be on

methodological strengths and limitations rather than numerical scores. The results are used to inform data synthesis, interpretation, and conclusions.

**Table 3** Assessment of the literature quality matrix

Sr		Selection of	Literature	Method	Findings	Quality
#	Author	Studies	Coverage	Description	Description	Rating
	Alruwaili, A. et al.					
1	(2020)	Yes	Yes	Yes	Yes	High
2	Sami, A. Y. et al. (2019)	Yes	Yes	Yes	Yes	High
	Chenot & Christopher					
3	(2019)	Yes	Yes	Yes	Yes	Medium
	Asmirajanti, M. et al.					
4	(2018)	Yes	Yes	Yes	Yes	High
	Bahammam, H. A.					
5	(2020)	Yes	Yes	Yes	Yes	High
	Katoue, M. G. et al.					
6	(2021)	Yes	Yes	Yes	Yes	Medium
7	Effa, E. et al. (2021)	Yes	Yes	Yes	Yes	Medium
8	Abasse, K. S. et al. (2022	Yes	No	Yes	Yes	High
9	Everitt, L. et al. (2022)	Yes	Yes	Yes	Yes	Medium
	Kithuci, R. K. et al.					
10	(2022)	Yes	Yes	Yes	Yes	High
	D'Angelo, M. et al.					
11	(2019)	Yes	Yes	Yes	Yes	High
12	Côté, A. et al. (2020)	Yes	Yes	Yes	Yes	Medium
13	Moussa, F. L. (2019)	Yes	Yes	Yes	Yes	High

The systematic review of studies provided clear descriptions, methods, selection processes, literature coverage, and clear conclusions, resulting in a "High or Medium" rating for their quality.

# **Study Selection**

Two independent reviewers screened retrieved studies for eligibility, then reviewed full-text articles against inclusion and exclusion criteria, with disagreements resolved through discussion or consultation with a third reviewer

**Table 4** Selected Studies for SR (Systematic Review)

No	Author	Research	Year
1	Alruwaili, A. et al.	Students' readiness for and perception of Interprofessional learning	2020
2	Sami, A. Y. et al.	Simulation-based training to improve obstetric/perinatal nurses competency	2019
	Chenot, T. M. &	Integrating Quality and Safety Education for Nurses (QSEN) through academic-	
3	Christopher, R.	clinical partnerships	2019
4	Asmirajanti, M. et al.	Clinical care pathway strengthens interprofessional collaboration	2018
5	Bahammam, H. A.	Transforming inter-professional dental care	2020
6	Katoue, M. G. et al.	Interprofessional education and collaborative practice in Kuwait	2021
7	Effa, E. et al.	Human resources for health governance and leadership strategies	2021
		Collaborative writing applications in support of knowledge translation and	
8	Abasse, K. S. et al.	management during pandemics	2022
9	Everitt, L. et al.	Educational programs and teaching strategies for health professionals	2022
		Attitudes towards interprofessional education and associated factors among	
10	Kithuci, R. K. et al.	faculty at the college of health sciences in a public university in Kenya	2022
11	D'Angelo, M. et al.	The teamwork model	2019
12	Côté, A. et al.	The clinical microsystems approach	2020
		Improving quality of care in Saudi Arabia: An Interprofessional Practice Model and	
13	Moussa, F. L.	Evidence based practice approach	2019

## **Study Database**

A systematic search of electronic databases identified 2021 records. After removing duplicates, 13 unique records were assessed for eligibility based on titles and abstracts.

## **Title and Abstract Screening**

The reviewer evaluated the titles and abstracts of the identified records in the first screening. 13 studies were chosen for full-text review using this procedure. The reviewers' disagreements were settled by consensus and discussion.

# **Data Extraction**

For assessment, a uniform data extraction form was created. Key findings, participant characteristics, research characteristics (authors, publication year), and any other pertinent information were retrieved by two reviewers separately from the selected papers. Consensus was used to settle disagreements.

**Table 5** Research Matrix

-	Autho					
N	r,			Sam		
0	Year	Aim of Study	Methodology	ple	Setting	Conclusion
						Identified
						factors
						influencing
						students'
		To assess				readiness
		students'	Cross-			and
	Alruw	readiness for	sectional			perception
	aili et	and perception	study; Survey			of
	al.	of	${\it question naire}$	Not	Not	Interprofessi
	(2020	Interprofessional	administered	speci	specifi	onal
1	)	learning	to students	fied	ed	learning.
		To evaluate the				
		effectiveness of	Observational			Improved
		simulation-based	study;	Obst		competency
		training in	Assessment	etric		in managing
	Sami	improving	of nurses'	/peri		obstetric
	et al.	obstetric/perinat	competency	natal	Saudi	emergencies
	(2019	al nurses'	pre- and	nurs	Arabia	post-
2	)	competency	post-training	es	(KSA)	training.
		To implement		Nursi	Acade	Improved
	Chen	Quality and	Interventiona	ng	mic	health
	ot &	Safety Education	l study;	stud	and	outcomes
	Christ	for Nurses	Implementati	ents	clinical	through
	opher	(QSEN) through	on of QSEN	and	setting	enhanced
	(2019	academic-clinical	through	healt	s in	quality and
3	)	partnerships	academic-	hcar	KSA	safety

	Autho					
N	r,			Sam		
0	Year	Aim of Study	Methodology	ple	Setting	Conclusion
			clinical	e		education
			partnerships	provi		for nurses.
				ders		
						Identified
						benefits of
						clinical care
						pathways in
		To review the				enhancing
		impact of clinical				interprofessi
	<b>A</b>	care pathways	review;			onal
	Asmir	on interprofessional	Synthesis of		Health	collaboratio n and
	et al.	collaboration	literature on	Not	care	quality of
		and quality of	clinical care	speci	_	health
4		health service	pathways	fied	KSA	service.
						Improved
			Doctoral			delivery of
	Baha	To evaluate the	dissertation;		Pediatr	interprofessi
	mma	effectiveness of	Evaluation of		ic	onal dental
	m	a team-based	a team-based		dental	care in
_		pediatric dental	pediatric	-	clinic	pediatric
5	)	clinic	dental clinic	fied	in KSA	settings.
						Identified
		To assess				attitudes and barriers
		attitudes and				toward
		barriers toward	Cross-			interprofessi
	Katou	interprofessional			Acade	onal
	e et	education and	study; Survey		mic	education
	al.	collaborative	questionnaire		setting	and
	(2021	practice among	administered	Facul	s in	collaborativ
6	)	faculty in Kuwait	to faculty	ty	KSA	e practice

_	Autho					
N	r,			Sam		
0	Year	Aim of Study	Methodology	ple	Setting	Conclusion
						among faculty in Kuwait.
			Narrative			Identified
		To explore	review;			governance
		governance and	Synthesis of		Low-	and
		leadership	existing		and	leadership
		strategies for	literature on		middle	strategies
	Effa	improving health	governance		-	for
	et al.	outcomes in low-	and	Not	income	improving
	(2021	and middle-	leadership	speci	countri	health
7	)	income countries	strategies	fied	es	outcomes.
						Identified
		To examine the	Scoping			the role of
		use of	review;			collaborativ
		collaborative	Review of			e writing
		writing	existing			applications
	Abass	applications in	literature on			in
	e et	knowledge	collaborative			knowledge
	al.	translation	writing	Not	Not	translation
	(2022	during	applications	speci	specifi	during
8	)	pandemics	in pandemics	fied	ed	pandemics.
		To explore educational programs and				
		teaching	Scoping			Identified
		strategies for	review;			educational
		health	Review of			programs
		professionals	existing			and
		responding to	literature on			teaching
	Everit	perinatal mental	educational			strategies
	t et al.	health and	programs and	Not	Not	for health
	(2022	psychosocial	teaching	speci	specifi	professional
9	)	concerns	strategies	fied	ed	S.

	Autho					
N	r,			Sam		
0	Year	Aim of Study	Methodology	ple	Setting	Conclusion
		To assess				
		attitudes				
		towards			College	Identified
		interprofession al			of	attitudes
		education			health	towards
		$among \ faculty \ at$	Cross-		science	interprofessi
		the college of	sectional		s in a	onal
	Kithuc	health sciences	study; Survey		public	education
	i et al.	in a public	question naire		univers	among
1	(2022	university in	administered	Facul	ity in	faculty in
0	)	Kenya	to faculty	ty	KSA	Kenya.
			Theoretical			Proposed
			article;			the
			Proposal of a			teamwork
		To propose a	model for			model for
	D'Ang	model for	studying			studying
	elo et	studying	interprofessio			interprofessi
	al.	interprofession al	nal	Not	Not	onal
1	(2019	healthcare	healthcare	appli	applica	healthcare
1	)	teams	teams	cable	ble	teams.
						Identified
			Systematic			effectivenes
		To evaluate the	review;			s of the
		effectiveness of	Synthesis of			clinical
		the clinical	existing		Health	microsystem
	Côté	microsystems	literature on		care	s approach
	et al.	approach in	the clinical	Not	practic	in
1	(2020	healthcare	microsystems	speci		healthcare
2	)	practices	approach	fied	KSA	practices.
		To assess the	Observational	Healt		Improved
		effectiveness of	study;	hcar	Health	quality of
	Mous	an	Assessment	e	care	care in Saudi
	sa	Interprofessional	of quality of	prof	setting	Arabia
1	(2019	Practice Model	care pre- and	essio	s in	through
3	)	and Evidence-	post-	nals	KSA	Interprofessi

Special Issue On Multidisciplinary Research

Autho					
Nr,	Sam				
o Year	Aim of Study	Methodology ple	<b>Setting Conclusion</b>		
	based practice	implementati	onal		
	approach in	on of practice	Practice		
	improving quality of care in Saudi Arabia	model	Model.		

## **Data Synthesis**

Data synthesis in a systematic review involves extracting and analysing findings from multiple studies to draw overarching conclusions, integrating quantitative and qualitative evidence to provide a comprehensive understanding of the research question.

## **Finding**

The 13 researches emphasize the significance of interprofessional collaboration and strategies in enhancing health outcomes quality.

# 1. Interprofessional Collaboration:

Interprofessional Learning and Health Outcomes in the KSA are as follow;

- 1. Influencing students' readiness and perception of interprofessional learning.
- 2. Enhancing health outcomes through advanced quality and safety education for nurses.
- Strengthening interprofessional collaboration and health service quality through clinical care pathways.
- 4. Enhancing interprofessional dental care in pediatric settings.
- 5. Identifying attitudes and overcoming barriers to interprofessional education
- 6. Developing a framework for studying interprofessional healthcare teams.

7. Evaluating the clinical microsystems approach in healthcare practices.

## 2. Quality of Health

Saudi Arabian Healthcare Improvements;

- 1. Enhancing obstetric emergency management competency
- 2. Implementing governance and leadership strategies
- 3. Utilizing collaborative writing applications for knowledge translation.
- 4. Designing educational programs for perinatal mental health professionals.
- 5. Enhancing care quality through Interprofessional Practice Model.

#### Discussion

A recurring issue in the research is interprofessional collaboration, which highlights the value of this approach in promoting healthcare workers' shared decision-making, teamwork, and communication. In their investigation of the variables affecting students' preparedness and attitudes toward interprofessional education, Alruwaili et al. (2020) emphasize the significance of educating upcoming medical professionals for teamwork. In a similar vein, Chenot & Christopher (2019) emphasize the need of academic-clinical cooperation in bridging the knowledge gap between education and practice, with an emphasis on improving health outcomes through quality and safety education for nurses.

However, iinterprofessional collaboration has advantages for clinical practice as well as education. The impact of clinical care pathways on improving collaboration and the caliber of health care delivery is covered by Asmirajanti et al. (2018). Clinical pathways streamline care procedures and encourage interdisciplinary contact to enable coordinated, patient-centered care. Furthermore, Bahammam (2020) assesses how well a team-based pediatric dental clinic works, showing how cooperative

cooperation improves the delivery of interprofessional dental treatment in pediatric settings.

Moreover, interprofessional collaboration is essential, yet it has obstacles, such as attitudes and hurdles among healthcare providers. In their investigation of faculty attitudes about collaborative practice and interprofessional education, Katoue et al. (2021) emphasize the need of dispelling myths and fostering constructive attitudes toward collaborative care models which shows that importance of comprehending team dynamics and communication patterns in reaching the best possible patient outcomes in their collaboration model for researching interprofessional healthcare teams. Additionally, to foster interprofessional collaboration, governance and leadership initiatives are just as important as educational and clinical settings. In their evaluation of the clinical microsystems approach's efficacy in healthcare settings, Côté et al. (2020) place special emphasis on the leadership's role in promoting a culture of cooperation and ongoing quality improvement. Furthermore, Moussa (2019) talks about putting interprofessional practice into practice model in Saudi Arabia, highlighting the role of effective leadership and organizational support in driving practice transformation and improving the quality of care.

In order to improve patient outcomes and healthcare delivery, quality improvement initiatives are crucial. Numerous studies concentrate on methods to raise the caliber of healthcare, such as patient-centered care, clinical competency, and knowledge translation. Sami et al.(2019), Abasse et al.(2022) and Everitt et al.(2022) are key figures in the field of healthcare quality improvement. Sami's research on simulation-based training has shown its effectiveness in enhancing obstetric emergency management competency among nurses. Effa's study on governance and leadership strategies in low- and middle-income countries in 2021 emphasizes the importance of solid leadership in addressing systemic challenges. Abasse's research on collaborative writing applications in knowledge translation during pandemics emphasizes using technology to disseminate evidence-based information and support decision-making. Everitt's research on educational programs and teaching strategies for health professionals addressing perinatal mental health concerns underscores the need for ongoing education and training to address complex psychosocial needs.

## Conclusion

On the basis of findings from the 13 studies, it is concluded that the importance of interprofessional cooperation and quality improvement programs in enhancing patient outcomes and advancing healthcare delivery in the technological age. Healthcare systems may effectively adapt to the changing demands of patients and communities by removing obstacles, encouraging collaboration, and implementing evidence-based strategies. This will ultimately improve care delivery's quality, safety, and efficacy.

# **Limitation & Implications**

Although it has some limitations, the study "The Role of Interprofessional Collaboration on Enhancing Quality of Health Indicators in the Technology Era in KSA" gives essential insights. Limitations on time, technology, measurement difficulties, sampling bias, and data collection techniques could affect the study's validity and generalizability. Nonetheless, the study's ramifications are significant. It offers a basis for influencing healthcare legislation, encouraging teamwork among healthcare providers, incorporating technology into healthcare delivery, developing educational and training initiatives, and directing future research projects. Healthcare systems in KSA can increase interprofessional collaboration, adopt technological advances, and ultimately improve patient outcomes and quality of care in the technology era by addressing these obstacles and utilizing the study's findings.

#### Recommendations

To improve healthcare quality in the technology era in KSA, healthcare institutions should invest in comprehensive training programs to foster teamwork, communication skills, and collaborative decision-making among healthcare professionals. Integrating technology into healthcare delivery processes, such as electronic health records and telemedicine platforms, can

facilitate information sharing and coordination of care. Policymakers should prioritize supportive policies and regulatory frameworks that incentivize collaborative practices and promote technology use in healthcare settings. Further research is needed to evaluate the impact of collaborative interventions on health outcomes, identify best practices, and address emerging challenges in interprofessional collaboration and technology integration.

### References

- Wei, H., Corbett, R. W., Ray, J., & Wei, T. L. (2020). A culture of caring: the essence of healthcare interprofessional collaboration. Journal of interprofessional care, 34(3), 324-331.
- Peltonen, J., Leino-Kilpi, H., Heikkilä, H., Rautava, P., Tuomela, K., Siekkinen, M., ... & Stolt, M. (2020). Instruments measuring interprofessional collaboration in healthcare—a scoping review. Journal of Interprofessional Care, 34(2), 147-161.
- Schot, E., Tummers, L., & Noordegraaf, M. (2020). Working on working together. A systematic review on how healthcare professionals contribute to interprofessional collaboration. Journal of interprofessional care, 34(3), 332-342.
- Park, K. H., & Park, K. H. (2019). Patient safety education: Team communication and interprofessional collaboration. Korean Medical Education Review, 21(1), 22-30.
- Kaiser, L., Conrad, S., Neugebauer, E. A., Pietsch, B., & Pieper, D. (2022). Interprofessional collaboration and patient-reported outcomes in inpatient care: a systematic review. Systematic reviews, 11(1), 169.
- McCutcheon, L. R., Haines, S. T., Valaitis, R., Sturpe, D. A., Russell, G., Saleh, A. A., ... & Lee, J. K. (2020). Impact of interprofessional primary care practice on patient outcomes: a scoping review. Sage Open, 10(2), 2158244020935899.
- Hussein, M., Pavlova, M., Ghalwash, M., & Groot, W. (2021). The impact of hospital accreditation on the quality of healthcare: a systematic literature review. BMC health services research, 21, 1-12.
- Kruk, M. E., Gage, A. D., Arsenault, C., Jordan, K., Leslie, H. H., Roder-DeWan, S., ... & Pate, M. (2018). High-quality health systems in

- the Sustainable Development Goals era: time for a revolution. The Lancet global health, 6(11), e1196-e1252.
- Machta, R. M., Maurer, K. A., Jones, D. J., Furukawa, M. F., & Rich, E. C. (2019). A systematic review of vertical integration and quality of care, efficiency, and patient-centered outcomes. Health care management review, 44(2), 159-173.
- Gillespie, A., & Reader, T. W. (2018). Patient-centered insights: using health care complaints to reveal hot spots and blind spots in quality and safety. The Milbank Quarterly, 96(3), 530-567.
- Cao, V., Tan, L. D., Horn, F., Bland, D., Giri, P., Maken, K., ... & Nguyen, H.
   B. (2018). Patient-centered structured interdisciplinary bedside rounds in the medical ICU. Critical care medicine, 46(1), 85-92.
- Witt Sherman, D., Flowers, M., Rodriguez Alfano, A., Alfonso, F., De Los Santos, M., Evans, H., ... & Walsh, S. (2020, October). An integrative review of interprofessional collaboration in health care: building the case for university support and resources and faculty engagement. In Healthcare (Vol. 8, No. 4, p. 418). MDPI.
- Nurhidayah, R. E., Amin, M. M., & Tanjung, H. R. (2022, March). Virtual Patient to Support Inter Professional Education and Inter Professional Collaboration. In 2nd International Conference on Social Science, Political Science, and Humanities (ICoSPOLHUM 2021) (pp. 315-318). Atlantis Press.
- Lackie, K., & Murphy, G. T. (2020). The impact of interprofessional collaboration on productivity: Important considerations in health human resources planning. Journal of Interprofessional Education & Practice, 21, 100375.
- Ohta, R., & Ryu, Y. (2021). Improvement in palliative care quality in rural nursing homes through information and communication technology-driven interprofessional collaboration. Rural and Remote Health, 21(2), 1-6.
- Manocha, S., Speigelman, J., Miller, E., & Solomon, S. (2020). Smartphone technology: impact on interprofessional working relations between doctors and nurses. Healthcare Quarterly, 23(SP), 34-42.
- Rosen, M. A., DiazGranados, D., Dietz, A. S., Benishek, L. E., Thompson, D., Pronovost, P. J., & Weaver, S. J. (2018). Teamwork in healthcare: Key discoveries enabling safer, high-quality care. American Psychologist, 73(4), 433.

- Beckmann, M., Dittmer, K., Jaschke, J., Karbach, U., Köberlein-Neu, J., Nocon, M., ... & Pfaff, H. (2021). Electronic patient record and its effects on social aspects of interprofessional collaboration and clinical workflows in hospitals (eCoCo): a mixed methods study protocol. BMC Health Services Research, 21(1), 377.
- Shirey, M. R., Selleck, C. S., White-Williams, C., Talley, M., & Harper, D. C. (2021). Interprofessional collaborative practice model to advance population health. Population Health Management, 24(1), 69-77.
- Dellafiore, F., Caruso, R., Conte, G., Grugnetti, A. M., Bellani, S., & Arrigoni, C. (2019). Individual-level determinants of interprofessional team collaboration in healthcare. Journal of Interprofessional Care, 33(6), 762-767.
- Mahajan, R., Mohammed, C. A., Sharma, M., Gupta, P., & Singh, T. (2018). Interprofessional education: An approach to improve healthcare outcomes. Indian Pediatrics, 55, 241-249.
- Sweeney Haney, T., Kott, K., Rutledge, C. M., Britton, B., Fowler, C. N., & Poston, R. D. (2018). How to prepare interprofessional teams in two weeks: an innovative education program nested in telehealth. International journal of nursing education scholarship, 15(1), 20170040.
- Liaw, S. Y., Soh, S. L. H., Tan, K. K., Wu, L. T., Yap, J., Chow, Y. L., ... & Wong, L. F. (2019). Design and evaluation of a 3D virtual environment for collaborative learning in interprofessional team care delivery. Nurse education today, 81, 64-71.
- Nurhidayah, R. E., Amin, M. M., & Tanjung, H. R. (2022, March). Virtual Patient to Support Inter Professional Education and Inter Professional Collaboration. In 2nd International Conference on Social Science, Political Science, and Humanities (ICoSPOLHUM 2021) (pp. 315-318). Atlantis Press.
- Ohta, R., & Ryu, Y. (2021). Improvement in palliative care quality in rural nursing homes through information and communication technology-driven interprofessional collaboration. Rural and Remote Health, 21(2), 1-6.
- Manocha, S., Speigelman, J., Miller, E., & Solomon, S. (2020). Smartphone technology: impact on interprofessional working relations between doctors and nurses. Healthcare Quarterly, 23(SP), 34-42.

- Rosen, M. A., DiazGranados, D., Dietz, A. S., Benishek, L. E., Thompson, D., Pronovost, P. J., & Weaver, S. J. (2018). Teamwork in healthcare: Key discoveries enabling safer, high-quality care. American Psychologist, 73(4), 433.
- Beckmann, M., Dittmer, K., Jaschke, J., Karbach, U., Köberlein-Neu, J., Nocon, M., ... & Pfaff, H. (2021). Electronic patient record and its effects on social aspects of interprofessional collaboration and clinical workflows in hospitals (eCoCo): a mixed methods study protocol. BMC Health Services Research, 21(1), 377.
- Shirey, M. R., Selleck, C. S., White-Williams, C., Talley, M., & Harper, D. C. (2021). Interprofessional collaborative practice model to advance population health. Population Health Management, 24(1), 69-77.
- Dellafiore, F., Caruso, R., Conte, G., Grugnetti, A. M., Bellani, S., & Arrigoni, C. (2019). Individual-level determinants of interprofessional team collaboration in healthcare. Journal of Interprofessional Care, 33(6), 762-767.
- Alruwaili, A., Mumenah, N., Alharthy, N., & Othman, F. (2020). Students' readiness for and perception of Interprofessional learning: A cross-sectional study. BMC Medical Education, 20, 1-7.
- Sami, A. Y., Nabeel, A. Y., & Amatullah, A. F. (2019). Simulation-based training to improve obstetric/perinatal nurses competency in managing obstetric emergencies in Saudi Arabia (KSA). International Journal of Caring Sciences, 12(3), 1788.
- Chenot, T. M., & Christopher, R. (2019). A statewide initiative integrating Quality and Safety Education for Nurses (QSEN) through academic-clinical partnerships to improve health outcomes. Journal of Professional Nursing, 35(4), 282-292.
- Asmirajanti, M., Hamid, A. Y. S., & Hariyati, T. S. (2018). Clinical care pathway strenghens interprofessional collaboration and quality of health service: a literature review. Enfermería clínica, 28, 240-244.
- Bahammam, H. A. (2020). Transforming inter-professional dental care: evaluation of a team-based pediatric dental clinic (Doctoral dissertation, Boston University).
- Katoue, M. G., Awad, A. I., Dow, A. W., & Schwinghammer, T. L. (2021). Interprofessional education and collaborative practice in Kuwait: attitudes and barriers from faculty. Journal of Interprofessional Care, 35(2), 208-216.

- Effa, E., Arikpo, D., Oringanje, C., Udo, E., Esu, E., Sam, O., ... & Meremikwu, M. (2021). Human resources for health governance and leadership strategies for improving health outcomes in lowand middle-income countries: a narrative review. Journal of Public Health, 43(Supplement\_1), i67-i85.
- Abasse, K. S., Toulouse-Fournier, A., Paquet, C., Côté, A., Smith, P. Y., Bergeron, F., & Archambault, P. (2022). Collaborative writing applications in support of knowledge translation and management during pandemics: A scoping review. International Journal of Medical Informatics, 165, 104814.
- Everitt, L., Stulz, V., Elmir, R., & Schmied, V. (2022). Educational programs and teaching strategies for health professionals responding to women with complex perinatal mental health and psychosocial concerns: a scoping review. Nurse Education in Practice, 60, 103319.
- Kithuci, R. K., Makworo, D., Mutisya, A., Simba, J., & Mburugu, P. (2022). Attitudes towards interprofessional education and associated factors among faculty at the college of health sciences in a public university in Kenya: a cross-sectional study. Pan African Medical Journal, 42(1).
- D'Angelo, M., Cervero, R., Durning, S., & Varpio, L. (2019). The teamwork model: Proposing a model for studying interprofessional healthcare teams. MedEdPublish, 8.
- Côté, A., Beogo, I., Abasse, K. S., Laberge, M., Dogba, M. J., & Dallaire, C. (2020). The clinical microsystems approach: Does it really work?

  A systematic review of organizational theories of health care practices. Journal of the American Pharmacists Association, 60(6), e388-e410.
- Moussa, F. L. (2019). Improving quality of care in Saudi Arabia: An Interprofessional Practice Model and Evidence based practice approach. IJRDO-Journal of Applied Science, 5(3), 22-38.