

Evaluation Of Healthcare Worker Knowledge Enhancement Regarding Comprehensive Service Delivery Through Interprofessional Focus Group Discussion Method At Pertamina Hospital Tarakan

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ABSTRACT

Comprehensive healthcare service delivery represents a holistic approach integrating medical, psychological, social, and spiritual patient care dimensions. This qualitative descriptive study evaluated interprofessional Focus Group Discussion (FGD) effectiveness in enhancing healthcare worker (HCW) knowledge about comprehensive service delivery at Pertamina Hospital Tarakan. Seven healthcare workers participated in in-depth interviews and interprofessional FGD sessions during May 2025. Data analysis employed qualitative thematic analysis with triangulation methods. Findings revealed HCWs possessed good comprehensive service delivery understanding, conceptualizing it as patient-centered care incorporating biological, psychological, social, and spiritual dimensions. Primary implementation barriers included communication challenges, interprofessional coordination gaps, and cultural patient differences. Interprofessional FGD sessions demonstrated significant effectiveness in improving understanding, enhancing communication, and facilitating cross-professional collaborative problem-solving. Weekly Tuesday FGD forums served as effective service evaluation and solution development platforms. Conclusions indicate interprofessional FGD methodology proves effective for enhancing HCW comprehensive service delivery knowledge. Sustained communication training, optimized FGD implementation with clear themes and complete participant attendance, and continuous professional development are essential for strengthening interprofessional collaboration and improving service quality.

***Keywords:** comprehensive service delivery, healthcare workers, interprofessional collaboration, focus group discussion, qualitative research*

INTRODUCTION

Comprehensive healthcare service delivery encompasses all efforts undertaken individually or collectively within an organization to maintain and promote health, prevent and cure disease, and restore wellness at individual, family, group, and community levels (Indonesian Ministry of Health, 2009). Comprehensive service delivery emphasizes providing complete, integrated services addressing patient needs holistically through biological, psychological, social, and spiritual dimensions. This approach requires healthcare workers moving beyond disease-focused interventions to consider complete patient context including family support systems, psychosocial factors, and individual values.

Successful comprehensive service implementation in hospitals depends critically on healthcare worker knowledge, competence, and motivation. Strategic human resource management at health facilities directly determines patient health outcomes. When HCW understanding of comprehensive service principles remains inadequate, effective service delivery becomes compromised. Interprofessional collaboration has emerged as key strategy for enhancing healthcare system effectiveness. Effective collaboration between physicians, nurses, pharmacists, and other health professionals strengthens service coordination and improves overall service quality.

Focus Group Discussion (FGD) represents a qualitative research method involving facilitated group discussion on specific topics in exploratory manner allowing participants to freely share perspectives and experiences in relaxed atmosphere. Interprofessional FGD brings together multiple health professions simultaneously, enabling exchange of viewpoints among physicians, nurses, and other professionals to build collective understanding regarding comprehensive service delivery. This study evaluates effectiveness of interprofessional FGD methodology in enhancing HCW knowledge about comprehensive service delivery at Pertamina Hospital Tarakan, which has not been previously studied, making it valuable for institutional evaluation and potentially applicable to other healthcare settings throughout Indonesia.

METHODS

This qualitative descriptive study was conducted at Pertamina Hospital Tarakan, North Kalimantan, Indonesia during May 2025. Seven healthcare workers from various disciplines (physicians, nurses, pharmacists, administrative staff) were selected through purposive sampling based on work experience, job position, and service delivery involvement. Data collection employed semi-structured in-depth interviews and one interprofessional FGD

session with 7-10 participants. Interview guides directed inquiry toward healthcare worker understanding, attitudes, and experiences regarding comprehensive service delivery and interprofessional collaboration implementation.

Data analysis utilized qualitative thematic analysis with triangulation methods including member checking and peer debriefing to ensure trustworthiness. Credibility was maintained through data source triangulation comparing information across interviews, FGD, and documentation from diverse perspectives. Transferability was ensured through detailed research context description. Dependability was achieved through audit trail documenting research processes. Confirmability was maintained through researcher objectivity reflection and peer debriefing. The study received ethical approval from Prima Indonesia University Ethics Committee with informed consent obtained from all participants and confidentiality strictly maintained.

RESULTS

Seven healthcare workers representing diverse professions participated in the study. Findings revealed that HCWs possessed good understanding of comprehensive service delivery.

Table 1: Healthcare Worker Understanding of Comprehensive Service Delivery

Understanding	R1	R2	R3	R4	R5	R6	R7
Concept of comprehensive service	Complete bio-psycho-socio-spiritual service with effective communication and SOP compliance	Layered approach: promotive, preventive, curative, rehabilitative services	Addresses psychological, social, spiritual patient conditions alongside medical treatment	Complete service delivery from promotion through rehabilitation covering all patient aspects	Holistic integrative services with bio-psycho-socio-spiritual approach	Recognizes individual patients have different problems requiring holistic approaches	Collaborative interprofessional approach for complete patient management

Analysis demonstrates all seven healthcare workers possessed aligned good understanding of comprehensive service delivery concepts. Respondents universally recognized service delivery as holistic healthcare addressing biological, psychological, social, and spiritual patient dimensions, emphasizing effective communication and interprofessional collaboration. Across responses, HCWs demonstrated comprehensive service delivery aims at patient-centered care addressing complete patient requirements rather than disease-focused interventions alone.

Table 2: Barriers to Comprehensive Service Implementation

Barriers	R1	R2	R3	R4	R5	R6	R7
Implementation barriers	Diverse patient backgrounds: language, ethnicity, cultural differences	Cultural and social patient differences causing intervention rejection	Illegible prescriptions; extended pharmacy queues from staff shortages	BPJS claim complications and diagnostic errors manageable through coordination	Communication barriers and socio-cultural patient background differences	Staff-patient and inter-staff communication difficulties due to comprehension gaps	Patient complaints and inter-unit miscommunication regarding BPJS issues

Primary barriers relate to communication and socio-cultural patient background differences. Language, cultural, and customary patient variations frequently cause communication breakdowns between healthcare workers and patients. Technical barriers including illegible prescriptions, extended pharmacy queue times from workforce insufficiency, and administrative BPJS claim challenges also emerged. However, all respondents indicated identified barriers remain manageable through improved coordination and interprofessional teamwork.

Table 3: Focus Group Discussion Effectiveness in Knowledge Enhancement

FGD Role	R1	R2	R3	R4	R5	R6	R7
FGD effectiveness	Weekly Tuesday FGD supports service evaluation generating improvement recommendations	FGD enhances understanding facilitating concrete solution discovery weekly	FGD addresses patient barriers and medication availability improving understanding	FGD functions as effective cross-unit problem resolution accelerating solutions	FGD functions as weekly evaluation forum enhancing service quality	Weekly FGD significantly improves communication and service delivery	FGD identifies inter-unit problems seeking collaborative rapid solutions

Respondents unanimously recognized FGD significant importance and effectiveness in strengthening HCW understanding of comprehensive service delivery. Weekly FGD implementation, particularly Tuesday sessions, provided venue for diverse health profession discussions, service evaluations, and cross-unit problem solving. Through these activities, participants exchanged recommendations, identified barriers, and collaboratively developed solutions enhancing patient service quality. FGD significantly contributed to improving interprofessional communication, coordination, and collaborative practices.

Table 4: FGD Impact on Interprofessional Communication and Coordination

Communication Impact	R1	R2	R3	R4	R5	R6	R7
Impact on communication	More transparent communication; service errors minimized	Strengthened interprofessional coordination and communication	Improved coordination and mutual understanding of barriers	Accelerated and effective inter-unit coordination	Enhanced transparency and cross-professional evaluation	Reduced miscommunication; enhanced interprofessional teamwork	Facilitated problem resolution and accelerated cross-professional coordination

FGD implementation produced significant positive impacts on interprofessional interaction and cooperation quality. All respondents concurred FGD functions as effective mechanism creating transparent, directed, and purposeful interprofessional communication among diverse health professions. Work coordination becomes accelerated and efficient because all barriers receive collective discussion and resolution. FGD substantially supports service error minimization, miscommunication reduction, and interprofessional synergy strengthening in integrated patient care delivery.

DISCUSSION

Research findings reveal multifaceted picture of comprehensive service understanding, implementation challenges, and FGD methodology effectiveness at Pertamina Hospital Tarakan. Several critical themes emerge from data analysis.

First, adequate knowledge foundation with implementation gap exists. All healthcare workers demonstrated solid understanding of comprehensive service delivery conceptual components, including bio-psycho-socio-spiritual integration and patient-centered approaches. This suggests adequate theoretical knowledge among HCWs regarding modern healthcare service standards. However, persistent identification of barriers suggests gap between conceptual understanding and practical implementation, indicating need for bridging strategies and support mechanisms.

Second, communication emerges as central organizational challenge. Communication barriers appeared across nearly all data collection domains as primary impediment to effective collaboration and comprehensive service implementation. This pattern suggests communication difficulties transcend individual professional groups and affect organizational

functioning broadly, aligning with healthcare management literature identifying communication as fundamental to organizational effectiveness.

Third, interprofessional FGD proves effective change mechanism. Convergent respondent testimony regarding FGD effectiveness in enhancing understanding, facilitating communication, and enabling collaborative problem-solving suggests this methodology merits continued implementation and potential expansion. The weekly Tuesday FGD structure appears particularly valuable for maintaining consistent interprofessional engagement.

These findings align with recent literature on interprofessional collaboration and healthcare worker professional development. Studies demonstrate that structured interprofessional learning methods effectively enhance teamwork and communication. FGD, as participatory adult learning approach, enables healthcare workers to learn from peer experiences and collectively develop solutions to practice challenges, consistent with andragogy principles.

Practical implications include that communication enhancement should become primary organizational development priority. FGD should be formalized with clear themes, scheduled consistency, and documented outcome tracking. Periodic communication and professional ethics training should be allocated institutional resources. Healthcare worker expectations for ongoing training and continuous professional development indicate readiness for sustained improvement initiatives.

CONCLUSION

1. Healthcare workers demonstrated good comprehensive service delivery understanding, recognizing holistic bio-psycho-socio-spiritual nature essential for service quality improvement.

2. Primary implementation barriers relate to communication and interprofessional coordination, cultural patient differences, and administrative system challenges rather than clinical limitations.

3. Interprofessional FGD methodology proves effective in enhancing HCW knowledge of comprehensive service delivery through improved understanding, communication strengthening, and collaborative problem-solving facilitation.

4. Structured continuous HCW training produces significant competency and professionalism enhancement supporting comprehensive service implementation.

5. Interprofessional communication functions as foundational element for effective coordination, error prevention, and rapid collaborative decision-making in patient care.

6. Despite identified challenges, professional culture and collaborative commitment suggest barriers remain addressable through focused interventions and sustained improvement initiatives.

7. Future collaboration optimization requires communication training focus, FGD structure enhancement with clear themes and complete participation, and ongoing interprofessional forum development.

8. Sustained communication training, optimized FGD implementation with clear themes and full participant attendance, and continuous professional development programs are essential for strengthening interprofessional collaboration and improving comprehensive healthcare service quality.

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