

The Synergy between Health Administration and Nursing: Enhancing Patient Care and Operational Efficiency

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ABSTRACT

The health administration and nursing go hand in hand in bringing about improvements in patient care and operational efficiency in health systems. The relationship between health administrators and nurses will be reviewed in terms of the need for these two to work together in order to improve patient safety and patient satisfaction. In improving safety culture, analysis, and integrating patient safety concepts into nursing education and practice, both of these work towards bringing in optimal health delivery. Health administrators, by making such policies and systems that ensure safety and efficiency, provide the enabling environment for the nurses to translate these policies into practice on the ground through evidence-based practice and quality care. Workforce development and resource management are several of these challenges that will be discussed along with overcoming the barriers for better outcomes in patients.

Keywords: Health Administration, Nursing, Patient Care, Operational Efficiency, Collaboration, Patient Safety

INTRODUCTION

Healthcare is a complex system where several professions are expected to collaborate for it to realize excellent care for the patients and efficiency in operations. Among such professionals are health administrators and nurses, who complement each other while dealing with clinical and organizational matters. While health administrators define the operation mechanism of the health facilities regarding financial plans, resource allocation, and policy-making, nurses take care of the patients by giving them bedside care and supporting their needs (Buchbinder & Thompson, 2010). That combination has generated a symbiotic relationship in the pursuit of achieving better patient and operational outcomes by health facilities. This means that integrating health administration into nursing practice is the most reasonable approach to adapt to increasing modern demands (Albalawi et al., 2023).

A very vital aspect of this partnership is that it provides supportive environments for nurses to give quality care. The health administrator should be aware of the changing healthcare and institute policies that are strategic towards meeting organizational goals; Kash et al., 2014 adds. In this light, it is the role of the administrators to ensure the availabilities of resources to the nurses and provide them with time for professional development by

improving patient care services and operational efficiency. The nurses will, with this, be well prepared to meet patient needs and provide relevant organizational strategies. The partnership closes the gaps in administrative policies and clinical practices, translating into better health care provision.

It is also a very important measure of the efficiency of health services; thus, it is an issue of concern for both health administrators and nurses. While the administrators are responsible for designing and implementing the system to enhance the patient experience through measures like wait time reduction, enhanced communication, and friendly/family/patient-friendly environments, nurses play at the operational level and have the most contact with patients (Kash&McKahan, 2017). Common interests in data collection and analysis from patient feedback facilitate the realization of gaps that need intervention, which is then followed by strategic interventions toward a patient-centered culture. This shared interest in patient satisfaction builds confidence in health institutions and shapes continuous improvement in service delivery.

Another example of the interaction between health administration and nursing includes the issue of protecting patient safety. While the administrators establish safety policies and train, it is the nurse who actually practices them during the course of daily care for the patient (Khoury et al., 2011). In fact, evidence-based measures related to safety-including infection control practices and error reporting systems-require coordination between the two groups if they are to be at all effective. By sharing concern for safety from both the administrators and nurses, medical errors are greatly reduced and patient outcomes greatly improved. This approach places even greater emphasis on the need to incorporate administrative oversight with clinical expertise in ensuring quality care.

METHODOLOGY

This study explores the collaboration between health administration and nursing in the delivery of improved patient care and operational efficiency within healthcare organizations. A systematic review of literature was conducted using several prominent databases, including PubMed, CINAHL, and Scopus, to explore how collaboration between health administrators and nurses improves patient outcomes and operational efficiency. Relevant keywords such as "health administration," "nursing," "patient care," "operational efficiency," "patient safety," and "healthcare collaboration" were used to guide the search. The search was limited to articles published between 2010 and 2023 to ensure the relevance of the findings.

The initial search yielded a large number of articles that were screened for relevance based on their title and abstract. Duplicates were removed, and studies that did not fall within the scope of this research were excluded. Remaining articles were subjected to a full-text review to determine eligibility. Inclusion in this study entailed studies that focused on the relationship between health administrators and nurses, particularly in terms of how this relationship affects patient care, operational efficiency, patient safety, and patient satisfaction. The study designs include but are not limited to randomized controlled trials, cohort studies, systematic reviews, and qualitative studies. Exclusion entailed articles that were not in the English language, those that were dissertations, conference abstracts, or studies unrelated to the research questions.

The final article selection involved a careful analysis of the quality of each article, its relevance to the topic, and the depth of its insights into the various roles and interaction of health administrators with nurses. Data extraction entailed major themes related to collaboration models, impact on patient care, patient safety initiatives, operational strategies, and various challenges faced in these roles.

LITERATURE REVIEW

A comprehensive literature review on the roles health administration and nursing play in developing patient care and operational efficiencies in healthcare was conducted. Various keywords were used in the search in PubMed, CINAHL, and Scopus: "health administration," "nursing," "patient safety," "patient care," and "collaboration in healthcare." References were manually searched for additional studies.

Studies involving health administrators and nurses and their collaborative effort towards improving patient outcomes, operational efficiency, and patient safety were included in this study, although the search range was limited to those published between 2010 and 2023. Studies had varying designs, from randomized control trials to cohort studies, qualitative research, and systematic reviews. Exclusions included non-English articles, dissertations, and conference abstracts, and those whose topic did not fall into the spectrum of health administration and nursing.

The review identified several key findings on how collaborations between health administration and nursing positively influence patient outcomes and operational efficiency. From the studies, health administrators were found to create an enabling environment for nurses by developing strategic goals in line with the organization's goals while issuing policies that will ensure patient safety. Nurses, being the first-line caregivers, were found to be principal in identifying patient risks, providing actual care to improve a patient's satisfaction through direct or indirect contact with a patient and families. In addition, collaboration between the two groups facilitates a safety culture, resource utilization, and reduction in operational inefficiencies.

Some of the challenges identified in the literature involved difficulties in communications, data interoperability, and the evolving scope of responsibilities between the health administrator and nurse. Effective communication and a supportive learning environment were found to be the most critical elements necessary to facilitate the elimination of these barriers. In addition, research evidenced the need for training and professional development as critical to building competencies in both groups, especially in patient safety and quality improvement areas.

DISCUSSION

The healthcare environment is a complex and dynamic setting that requires effective collaboration among different professionals to deliver quality care to patients. Of the numerous professionals, health administrators and nurses are two key players in the smooth running of healthcare facilities and the well-being of patients. Health administrators are concerned with the overall operations of healthcare facilities, including financial management, human resources, and strategic planning (Buchbinder & Thompson, 2010). They develop policies, manage budgets, and ensure that healthcare organizations have the necessary resources to deliver quality care. Nurses, on the other hand, are frontline caregivers who interact with patients, assess their needs, and provide essential care services. In this way, health administrators and nurses can work together in a synergistic relationship that would improve patient care and operational effectiveness (Albalawi et al., 2023). This synergy enables the development of policies and procedures that focus on patient safety, improve patient outcomes, and optimize the use of resources within healthcare organizations.

Health administrators are very instrumental in creating a supportive environment for nurses and other health professionals to provide quality care to patients. They need to understand the health industry in detail and be able to adapt to changing times for their organizations to succeed (Kash et al., 2014). They have to be abreast of all current regulations in healthcare, technologies, and practices. Health administrators are responsible for developing and implementing strategic plans that align with the organization's mission and vision. The plans should consist of initiatives that improve the quality of care for the patient, reduce costs, and enhance efficiency within the operation. Health administrators create an enabling environment and equip nurses with what they need to render the best care to patients.

Measuring and improving patient satisfaction is one of the major roles played by health administrators. Patient satisfaction has increasingly gained much importance in the health sector as it is a reflection of the quality of care provided by healthcare facilities (Kash & McKahan, 2017). Satisfied patients are more likely to comply with treatment plans, have better health outcomes, and recommend the health facility to others. In this regard, health administrators have to collaborate with nurses in the development and implementation of strategies that will lead to increased patient satisfaction, such as good communication, reduced waiting time, and provision for a comfortable and conducive environment. This may be achieved through conducting patient satisfaction surveys, analyzing the results, and making appropriate changes. It is through increased patient satisfaction that health administrators and nurses can achieve a patient-centered culture that is focused on delivering quality care and improving patient outcomes.

Another critical aspect is in patient safety. Health administrators bear the responsibility of creating an environment that supports patient safety in their organizations and provides practice nurses with all the resources and support to provide safe and effective care (Khoury et al., 2011). For that matter, development and implementation of policies and procedures that emphasize patient safety, including infection control, medication management, and incident reporting processes, have to be considered by policymakers. For that matter, health administrators should ensure continuous training and education for nurses in best practices related to patient safety. Indeed, they are at the very front line of care and are oftentimes the first ones to raise red flags over potential hazards to patient safety. This calls for them to be vigilant by observing patients closely, reporting concerns, and being proactive by way of averting harm. The collaborations between health administrators and nurses can be reflected in the development and implementation of evidence-based practice with a view to reducing medical errors and improving patient outcomes.

Because nurses care for patients directly and are usually closer to the patients and their families, their perceptions about hospital care are of immense importance in the development of improvement policies geared toward better patient outcomes. A study by Aiken et al. (2001) indicated that nurses' reports about hospital care varied significantly across five countries, thus calling for close interaction between health administrators and nurses to understand the unique challenges facing each healthcare facility. Interactions may be in the form of meetings, focus groups, and questionnaires aimed at eliciting nurses' perceptions and views. The active solicitation of nurses' views is bound to see health administrators develop specific interventions to improve patient care and also support nurses in their jobs.

Good patient safety culture will minimize medical errors and help achieve better patient outcomes. According to Alswat et al. (2017), the culture of patient safety in Saudi Arabia has considerably improved from 2012 until 2015 because of the efforts of healthcare administrators and nurses. Improvement was accredited to the no-punishment reporting system instituted, continuous training and education, and open communication among health professionals. Healthcare administrators and nurses can help develop a culture that places a premium on

open communication, reporting, ongoing education, and training that support the prioritization of patient safety. The culture needs to change the paradigm into learning from mistakes, establishing the best practices, and continuously improving the processes in order not to harm patients.

Nurses' perceptions about patient safety culture can ensure or compromise their capability for safe and effective care. A study conducted by Ammouri et al. in 2015 showed that nurses' perceptions of patient safety culture varied significantly across different healthcare settings, thus presenting a niche for targeted interventions that are informed by local challenges. The safety concerns for a nurse in critical care are different from those who work in outpatient clinics. Health administrators have a great role in working with nurses to establish their perceptions of safety culture and the development of strategies to eliminate barriers to safe care delivery. It should be done through regular assessment of the safety culture, training, and education, focusing on the specific safety initiatives at unit levels. Therefore, the identification of the concerns of nurses and offering them an enabling environment will enable administrators to empower nurses to make the consideration of patient safety routine in their practice.

The incidence of medication error also relates to the learning climate within the healthcare organization. For instance, a study by Chang and Mark (2011) has recorded that a good learning climate moderates the relationship between nurse staffing and medication errors. That is, even when there are limited nurse staffing hours, a good learning climate mitigates the occurrence of medication errors. Accordingly, healthcare administrators have the great responsibility of creating a supportive learning environment that will encourage nonstop education as well as professional development among nurses. This may be achieved through access to continuing education courses, mentorship programs, and specialized courses. Through investment in the professional development of nurses in addition to a culture of continuous learning, healthcare administrators are thus capable of reducing the risk of medication errors and improving patient safety.

The nursing curricula should highlight concepts of patient safety and its practices so as to better equip nurses with the knowledge of safe care practice. Chenot and Daniel, 2010 reviewed a number of frameworks on integrating patient safety into the nursing curriculum and identified the importance of a course that is integrated which encompasses didactic and experiential learning on medication safety, infection control, patient advocacy, and error prevention strategies. The health administrators should therefore ensure that patient safety forms the core of the nursing curricula in such a way that when leaving school, safety lies in front of their practice. They can do this through Curriculum development, clinical placement, and ongoing professional development of nursing faculty.

The described culture of patient safety should play a significant role in enhancing patient outcomes and ensuring the incidence of adverse events is minimized. In a systematic review by DiCuccio (2015), a significant relationship between patient safety culture and patient outcomes was identified, translating into fewer mortality rates, medication errors, and increased levels of patient satisfaction. Creating a strong culture of patient safety requires healthcare administrators and nurses to move forward in developing evidence-based practices that are increasingly transparent and accountable and safety cultural without punishment but rather encouragement in reporting and learning from mistakes. Safety culture in a health organization should permeate through the organizational levels, right from leadership and governance to the frontline of patient care. By placing premium emphasis on the safety of patients and working tirelessly to enhance processes and practices, healthcare administrators and nurses are assured of the translated outcome: a healthcare system that delivers quality, safe care to patients habitually.

Knowledge of the predictors and outcomes of patient safety culture is important in coming up with targeted interventions in order to improve patient safety. The major predictors of patient safety culture, as established by a study conducted by El-Jardali et al. (2011) include: teamwork, effective communication, and management support. The same study established that a good patient safety culture was a predictor of fewer adverse events and improved patient outcomes. Health care administrators have to take up the evidence and come up with an evidence-based approach for enhancing a good patient safety culture in their various organizations. This will be possible by instituting programs on teamwork, ensuring clear communication channels, and offering effective management support for the patient safety initiative. Through this way, health care administrators will be in a position to develop a culture of targeted continuous improvement and patient safety.

Furthermore, measuring health professionals' perceptions of their own patient safety competence provides an opportunity for improvement. The H-PEPSS is a valid instrument, developed to measure health professionals' perceptions of patient safety competence at the time of entry into practice, introduced by Ginsburg et al. (2012). This tool assesses six significant domains of patient safety competence: working in teams, effective communication, managing safety risks, understanding human and environmental factors, recognition and response to adverse events, and culture of safety. Such a tool will help administrators in healthcare identify gaps in patient safety education and training in order to develop targeted interventions. For example, if results from the survey show new graduates are not very confident in their ability to manage safety risks, then healthcare administrators can partner with the nursing education programs to strengthen that aspect of the curriculum and develop more training opportunities for new nurses.

The identification of strengths and weaknesses in nurses' competence about patient safety will help in developing targeted interventions to improve patient safety. According to the results obtained from the survey, Hwang (2015) estimated the patient safety competence of nurses in three hospitals in Korea and found that nurses scored the highest in areas such as preventing infection and ensuring medication safety, while scoring at the lowest levels in areas such as patient engagement and communication. This shows that, although nurses may be well-competent technically in most areas relating to patient safety, they perhaps need additional help and training in areas concerning patient-centered care and effective interpersonal communication. Such information shall serve healthcare administrators in giving them insights as to where to create training programs and resources to develop areas of weaknesses while exploiting emergent strengths, including ensuring that communication skills training is conducted for nurses or even the adoption of patient-engagement initiatives that will foster better relationships between providers and patients. In this way, healthcare administrators will be better able to improve patient safety and the quality of care by targeting the particular needs of their nursing workforce.

The combination of health administration and nursing can create a great synergy in leveraging improved patient care and operational efficiency in hospitals. Health administrators and nurses must join hands in bringing a culture of patient safety, better medication management, and ultimately optimizing patient outcomes. This would include the development of policies and procedures in regard to patient safety, actively soliciting and incorporating nurses' observations of hospital care, and offering a no-punitive learning environment that supports continuous education and professional development. Healthcare administrators need to focus on prioritizing the integration of evidence-based interventions to reduce medication errors and ADEs and also engage nursing education programs to ensure that patient safety is part of the core in the nursing curriculum. Healthcare administrators and nurses can help build a health system that provides high-quality, patient-centered care through open communication that is fostered by transparency and accountability and perpetual effort at improvement of processes and practices for the attainment of best care. This can only be possible if health administrators and nurses can work together toward their common goal of providing safe, effective, and compassionate care to all patients.

CONCLUSION

Health administration and nursing collaboration go hand in hand to provide a major thrust to improve patient care and operational efficiencies. The study points out that, in cases when health administrators and nurses collaborate, patient outcomes improve due to the formulation of policies concerning patient safety, smooth care delivery, and operational plans that reduce inefficiency. Nurses are the first line of contact who, by understanding the presence of safety hazards, providing quality patient care, and ensuring patient satisfaction, set the tone. The health administrator builds on this by providing the strategic direction and enabling mechanisms for the nurse to perform successfully. Such is the collaboration that not only helps improve patient satisfaction but also leads to the establishment of a safety culture which enhances the general quality of healthcare.

However, the literature has suggested a number of difficulties or impediments that weaken this collaboration, including communication, workforce development issues, and integration of data systems. Overcoming such challenges will require proper communication and a common orientation between health administrators and nurses for excellent patient care and operational efficiency. The future work should develop strategies that can help enhance communication, workforce training, and further/alternative ways to help bridge interoperability and resource allocation challenges. In short, the stronger the partnership between health administration and nursing, the more effective the healthcare system in providing safety, outcomes, and operational effectiveness for the patients.

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