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Communication proposal in the maternity ward of a public hospital, Rosario 2024 / Propuesta comunicacional en el área materno de un hospital público, Rosario 2024

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ABSTRACT

The term 'project' is used to refer to a set of activities that are proposed to be carried out in a coordinated manner, with the aim of producing certain goods or services capable of satisfying needs or solving problems, within the limits of a budget and in a specific time frame. This intervention project seeks to improve communication among nursing professionals at a public hospital in the city of Rosario through a series of proposals. It will be carried out in an inpatient ward for six months, with the possibility of extension if necessary. The proposals selected include the introduction of monthly team meetings, the organisation of daily work, the appointment of a liaison between the different shifts, and the use of a virtual platform in addition to the existing communication channels. By raising awareness of the importance of internal communication and creating spaces and mechanisms for communication, the aim is to strengthen team cohesion and integration.

Keywords: Internal Communication; Nursing; Teamwork; Work Environment; Patient Safety.

RESUMEN

El término proyecto se utiliza para designar al conjunto de actividades que se proponen realizar de una manera articulada entre sí, con el fin de producir determinados bienes o servicios, capaces de satisfacer necesidades o de resolver problemas, dentro de los límites de un presupuesto y en un determinado tiempo. Este proyecto de intervención busca a través de una serie de propuestas mejorar la comunicación entre los profesionales enfermeros de un hospital público de la ciudad de Rosario. El mismo será desarrollado en un servicio de internación, durante seis meses, con la posibilidad de extenderlo si fuera necesario. Dentro de las propuestas elegidas se encuentran la incorporación de reuniones mensuales del equipo, la organización del trabajo diario, la incorporación de una persona como nexo entre los diferentes turnos, además de la utilización de una plataforma virtual, a los canales ya existentes de comunicación. A través de la concientización acerca de la importancia de la comunicación interna, junto con la creación de espacios y mecanismos de comunicación, se busca fortalecer la cohesión e integración del equipo.

Palabras clave: Comunicación Interna; Enfermería; Trabajo en Equipo; Clima Laboral; Seguridad del Paciente.

INTRODUCTION

The characteristics of the place where the proposed intervention will take place are: a

public hospital in the city of Rosario, under provincial jurisdiction. It will be presented to the professional nurses and the head nurse, with prior consent from the Nursing Department.

The service in which the proposal will be developed is the Maternity Ward, which comprises 17 nursing assistants and the head nurse. The entire staff is female, ages 26 to 60, with the majority of nurses aged 30 to 40.

Four of them are licensed nurses, and the rest are technicians; three nurses are studying for a nursing degree. Most work rotating shifts but do not vary in terms of service within the hospital; five of them work longer hours, and none have two jobs.[1]

In the field of health, effective communication plays a central role as a process based on interaction, far from being merely an activity aimed at transmitting information. The way information is communicated is as important as its content, which is why knowing how to communicate is a fundamental and relevant skill. Developing communication skills is one of the preventive factors for burnout syndrome, which inevitably affects the quality of care.[2]

Teamwork is not just about working together; it involves an organizational philosophy of leveraging collective talent. To this end, professionals must possess the skills and aptitudes to communicate across different backgrounds, with a common purpose that leads to clearly identified objectives. Working individually, with poor and ineffective communication within and between teams that make up a healthcare institution, is one of the main obstacles to providing safe, quality care.[3]

This article establishes two elements for optimizing communication in the institutional setting:

Active listening: not just hearing what the other person is saying, but paying attention to what is being expressed. It requires different approaches, including not anticipating the other person's message (prejudice), facilitating the story, nodding, inviting them to continue, clarifying, asking for examples, sharing thoughts, allowing functional silences, and showing empathy, which encourage discourse and increase the capacity for understanding.[4]

Conflict and negotiation: conflict is a phenomenon inherent to human beings, often generated by failures in interpersonal communication. Resolution can occur through various negotiation styles.[5]

On the other hand, "Health communications are of interest because they affect the quality of patient care."[1] The author introduces the importance of communication from the patients' perspective, namely, how health professionals' actions directly impact the quality of care. In addition, her study recommended that the Head of the Obstetrics Service promote the achievement of team goals and offer incentives for joint goals to improve collaboration, coordination, respect, and teamwork. The Hospital Management was also invited to implement mechanisms to measure the quality of care for obstetrics patients every quarter.[6]

The document entitled "The importance of interpersonal relationships among healthcare personnel, a factor to consider in job performance" refers to:

It is imperative to maintain and promote healthy interpersonal relationships to foster a positive

working environment and increase efficiency. It is necessary to consider these relationships by developing and strengthening professionals' mental health. It is advisable to research this topic to identify interactions among healthcare personnel across the different services that make up the establishment, thereby promoting a working environment among professionals that fosters care, tolerance, intervention, and freedom, transcending patient care.[2]

Despite their importance, few institutions have focused on establishing measures that could be implemented to address this problem, and consequently, no actions have been taken to prevent adverse effects.[7]

In the case studied, the leading causes of the problem identified are the absence of internal communication channels or plans among the members of the work team, which is reflected above all in remote shifts, since the head of the ward provides guidelines or information during her shift. She is unable to delegate tasks or transfer information effectively, as the service lacks a coordinator or deputy head. On several occasions, this information is distorted or lost because the transfer is informal.

FORTALEZAS • Estructura edilicia y tecnológica • Disposición del personal a recibir nuevas propuestas • Adaptación a los cambios • Compañerismo, trabajo en equipo • La mayoría del personal posee más de cinco años de antigüedad en el servicio	**OPORTUNIDADES** • Integración del equipo de trabajo • Mejora en la comunicación interpersonal • Disminución del estrés laboral • Sentido de pertenencia • Espacio de intercambio de información, opiniones y puestas en común • Unificación de criterios
DEBILIDADES • Ausencia de persona nexo • Dificultad en la delegación de tareas	**AMENAZAS** • Inasistencias a las reuniones • Falta de participación en las decisiones grupales • Desinterés, desmotivación

Figure 1. SWOT matrix

Some situations arose when patients' relatives visited, and the number of admissions was changed without some team members being aware of it. Likewise, everyday work items, such as the pulse oximeter, were stored, but not all team members were aware of this. In addition to

changes in some protocols, such as discarding sterile fields, not all staff used the same criteria. On the other hand, there are often discrepancies among team members because they lack a work plan or patient division. Therefore, the objective of this intervention project is to develop a strategic plan in the nursing service that improves communication among team members.[8] Implementing this proposal could contribute to the discipline by improving communication and group integration and establishing common information spaces. It could also strengthen working relationships, improve the working environment, and reduce stress. Next, the SWOT matrix will be used to analyze the strengths, opportunities, weaknesses, and threats involved in carrying out this proyect.

METHOD

To achieve the objectives set out in this intervention proposal, the following measures will be implemented:

1. Monthly meetings.
2. Organization of daily work.
3. Incorporation of a liaison person between the different shifts.
4. Use of a virtual platform.

These will be presented in advance for the work team's consensus.

Monthly meetings

	ENERO	FEBRERO	MARZO	ABRIL	MAYO	JUNIO	Personal asistente:
9 a 11hs.	Comunicación efectiva, herramientas, protocolos.	Ejercicios de confianza, simulación de traspaso de información.	Resolución de conflictos, comunicación no verbal, motivación.	Equipos de trabajo, trabajo en equipo, roles, salud mental.	Ejercicios de trabajo en equipo, simulaciones.	Puestas en común, debate.	
19 a 21hs.	Comunicación efectiva, herramientas, protocolos.	Ejercicios de confianza, simulación de traspaso de información.	Resolución de conflictos, comunicación no verbal, motivación.	Equipos de trabajo, trabajo en equipo, roles, salud mental.	Ejercicios de trabajo en equipo, simulaciones.	Puestas en común, debate.	

Figure 2. Schedule of monthly meetings

Since no meetings are planned for the service, they will be scheduled monthly, at two different times (morning and afternoon), for 6 months. Attendance will be mandatory and will be compensated with a day off.

They will be held on the first Tuesday of each month, from 9 to 11 a.m. and from 7 to 9 p.m. The ward head will lead them during the morning shift, while the afternoon shift will be led by a liaison person, to be appointed at a later date.

Each meeting will include presentations, discussions, and the sharing of new protocols or necessary information to ensure common knowledge and unified criteria.

In addition, these meetings can be used to schedule training sessions or informative talks given by expert personnel.

Organization of daily work

A written daily schedule will be available in the nursing office, setting out the tasks assigned per shift and the daily rotation of each member of staff through the different areas of the inpatient ward. This method is used across the institution's departments and helps prevent discrepancies among staff members.

TURNO MAÑANA	• Baños a pacientes dependientes y de largo reposo • Cambio de sábanas • Laboratorios a recién nacidos
TURNO TARDE	• Reposición de medicamentos • Colocación de hojas de acciones de enfermería nuevas
TURNO NOCHE	• Reposición de materiales • Control de carro de urgencia (días miércoles)

Figure 3. Distribution of tasks by shift

Weekly staff distribution

Through staff planning, the distribution across inpatient sectors will be arranged each week. The inpatient ward will be divided into three sectors:

- Sector 1: patients with more complex conditions, pregnant women with various pathologies, post-cesarean section patients, and patients who will need to remain on prolonged bed rest.
- Sector 2: women who have had regular deliveries with their newborns.

- Sector 3: low-risk neonatology patients, newborns who require hospitalization for nutritional and/or gestational recovery, as well as those who require intravenous antibiotic treatments or light therapy, among others.

Thus, staff who, for example, were in sector one on Monday will remain in sector two on Tuesday and in sector three on Wednesday. Although each nurse will be responsible for the patients in their area, all nurses must collaborate and be prepared to handle any emergencies or events that may occur. This type of planning is currently used in other inpatient wards at this institution.

Table 1. Weekly staff allocation

Sector	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
1	A B	E F	C D	A B	E F	C D	A B
2	C D	A B	E F	C D	A B	E F	C D
3	E F	C D	A B	E F	C D	A B	E F

Incorporation of a liaison person

A liaison will be available during shifts when the head nurse is not present and will be responsible for communicating information, concerns, and updates.

The nursing team will vote to choose the staff member who will be on duty from 3:00 p.m. to 9:00 p.m. and will have direct communication with the head nurse.

They will be responsible for reporting any news or changes to the established schedule and may also make changes to the monthly schedule, if necessary.

The official communication channels will be the news notebook, the WhatsApp group, and the new platform. In all these media, upon receiving messages, notifications, or news, each person must acknowledge that they have received or viewed it.

Virtual platform

It will be accessible via the web or as a mobile app. It can be downloaded as an app specific to the maternity service with its own icon and name. Those invited by the service to participate in this private network can download it for free; it weighs 6 MB. It is done in the following steps:

- Message creation: messages can be text, photos, videos (including live video streams), surveys, links to files, or external sites.
- Audience segmentation: choose who will receive the message, selecting the recipient by area, group, or individual.
- Response measurement: each communication or survey identifies who interacts and when, and results can be exported to a spreadsheet.
- Segments: news board: daily messages, with the option to keep them at the top until they are read, according to their importance. Posts can contain photos, videos, and links. Surveys: you can consult what you need to know in general or by groups, in a simple, measurable way that can be exported to a spreadsheet. Private and group chats: private messaging and the possibility of organizing chat groups between two or more users. Events: communication of events that are set in the application's calendar, with the option of exporting them to your personal or institutional calendar.

Actividades	Enero	Febrero	Marzo	Abril	Mayo	Junio
Reuniones mensuales						
Organización del trabajo diario						
Persona nexo						
Plataforma virtual						

Figura 4. Determination of deadlines

External factors or conditions affecting the achievement of results.

Possible situations that affect the expected results include: absence from meetings, lack of participation in group decisions, disinterest, or demotivation.

Resources and budgets

Recursos		Costos
Humano	Persona que suplante el puesto que ocupará la enfermera nexo.	$ 700.000 mensual (aprox, sueldo básico enfermera con 6hs diaria)
Material	Escritorio, 10 sillas, pantalla blanca, computadora de escritorio y computadora tipo notebook, impresora, resma de hojas, lapiceras	$ 50.000
Espacio físico	Consultorio, office de enfermería	

Figure 5. Resources and Budgets

Monthly meetings will be held in one of the service's offices, which has a desk and chairs. A white screen with a notebook computer will be added for slide presentations if necessary.

The daily work schedule and staff distribution will be printed and posted in the nursing office each week.

The liaison person will be chosen from among the ward nurses, so an additional person will need to be hired to fill the vacant position.

The hospital's IT staff will set up the platform.

The computer in the nursing office will be used to draft personal satisfaction surveys, which will then be printed.

RESULTS

These actions will result in a 70 % improvement in internal communication, producing various advantages, such as a sense of belonging to the workplace, by being aware of decisions, projects, and initiatives, creating cohesion among members of the healthcare team and their environment, greater opportunities for participation in all processes and actions, and more information for decision-making. Healthcare personnel who are trained and informed about work issues will be more involved in the service and more efficient. As a result, the service as a whole will also be more effective.

The creation of spaces and the establishment of channels and communication means will facilitate the participation of the entire healthcare team, enabling the implementation of less structured management models and thus creating a sense of shared responsibility.

Regular meetings promote integration, and it is essential that all members feel part of the service's and the institution's objectives.

Shared knowledge, training, exchange, transparency in management, and human relations are the pillars of effective communication.

CONCLUSIONS

The Intervention Project proposed for the maternity ward of the public hospital in the city of Rosario aims to strengthen internal communication among the nursing team through the coordinated implementation of monthly meetings, the written organization of daily work, the designation of a liaison between shifts, and the use of an institutional virtual platform. These strategies are based on evidence linking effective communication with quality of care, the work environment, and the prevention of professional burnout, and seek to reduce failures in information transfer that currently manifest as discrepancies in practice, misinformation in the face of change, and overload in ward management.

It is expected that, with the implementation of these actions, there will be an estimated 70 % improvement in internal communication within the service, resulting in greater team cohesion, unified care criteria, increased sense of belonging, and active nurse participation in decision-making. At the end of the intervention period, an anonymous survey will be administered to nursing staff to assess the degree of adoption and acceptance of the resources implemented, as well as their perceived impact on work dynamics and the work environment. The results of this

evaluation will determine the need to extend, adjust, or institutionalize the proposed measures, contributing not only to the consolidation of a more effective and sustainable communication model but also to the continuous improvement of the quality of care provided to women and newborns served by the department.

BIBLIOGRAPHIC REFERENCES

1. Carrasco-Villate MY. Relaciones interpersonales del personal de salud y calidad de atención brindada en el Servicio de Obstetricia del Hospital Belén Lambayeque. Chiclayo: Universidad César Vallejo; 2021.

2. Campos-Cabello J. La importancia de las relaciones interpersonales en el personal sanitario, un factor a considerar en el desempeño laboral. Rev Peru Investig Salud. 2022;6(3):181-2. https://doi.org/10.35839/repis.6.2.1451.

3. Colegio de Médicos. Entrenamiento en comunicación para la salud. 2023. Programa-ECoS-2023-02.pdf.

4. Dartiguelongue JP. La comunicación en los equipos de salud. Arch Argent Pediatr. 2021;119(6):589-93. files_ae_dartiguelongue_26-10pdf_1634067286.pdf.

5. Ministerio de Salud de la Nación, Dirección Nacional de Calidad en Servicios de Salud y Regulación Sanitaria. Documento de buenas prácticas para el proceso de enlace de guardia de enfermería para la optimización de la comunicación efectiva (pase de guardia). Buenos Aires: Ministerio de Salud de la Nación; 2023. Resolución 937/2023 | Argentina.gob.ar.

6. Ortiz Z, Antonietti L, Capriati A, Ramos S, Romero M, Mariani J, et al. Preocupaciones y demandas frente a COVID-19: encuesta al personal de salud. Rev Fac Med (Buenos Aires). 2020;80(Supl III):16-24.

7. PAMI. Procedimiento de comunicación de traspaso de paciente. Santa Fe: PAMI; 2023.

8. Suárez N. Plan de mejoramiento en comunicación interna y propuesta de capacitación en liderazgo coach en el Sanatorio Prof. León Morra. Córdoba: Universidad Siglo 21; 2021.

FINANCING

None.

CONFLICT OF INTEREST

None.

AUTHORSHIP CONTRIBUTION

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