Original Article

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Developing Professional Communication Proficiency among Nurses: A Phenomenological Exploration of Experiences, Challenges, and Strategies at Queen Elizabeth Hospital II Kota Kinabalu, Sabah

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ABSTRACT

Background: Professional communication proficiency is essential for effective teamwork, safe clinical practice, and quality patient care. However, communication barriers may affect the effectiveness of clinical interactions. **Objectives:** This study aimed to explore nurses' experiences and perceptions of professional communication proficiency at Queen Elizabeth Hospital II (QEH II), Kota Kinabalu, Sabah. **Methods:** A qualitative descriptive phenomenological design informed by Husserlian philosophy was employed. Twelve registered nurses were purposively recruited based on the study eligibility criteria. Data was collected through individual semi-structured interviews conducted between 11 and 20 January 2025, audio-recorded with participants' consent, transcribed verbatim, and manually analyzed using the six-phase thematic analysis of Braun and Clarke. Ethical approval was obtained from Lincoln University College Malaysia, and institutional permission was granted by QEH II. **Results:** Four main themes and eleven subthemes emerged: (1) Experiences and Perceptions of Healthcare Providers Regarding Their Professional Communication Proficiency; (2) Awareness of Professional Communication Proficiency; (3) Significance of Professional Communication Proficiency Among Healthcare Providers; and (4) Enhancing Professional Communication Proficiency Through Strategic Approaches. Participants identified clear communication, active listening, mutual respect, accurate information exchange, and open dialogue as essential elements. They also highlighted workplace barriers, including time constraints, hierarchical relationships, language difficulties, and technological limitations. **Conclusion:** The findings highlight professional communication proficiency as a multidimensional competency that supports professional collaboration, patient safety, workplace relationships, and patient-centered care. Its development requires individual commitment, continuous education, and organizational support. **Recommendation:** Healthcare organizations should strengthen structured communication training, promote open communication, provide leadership support, and maintain appropriate technological resources.

Keywords: Interprofessional Relations; Nurses; Patient Safety; Professional Communication; Qualitative Research

INTRODUCTION

Professional communication is essential for safe clinical practice, effective care coordination, and therapeutic relationships in nursing. It involves verbal, written, digital, and non-verbal interactions that require clarity, active listening, empathy, and respect (Kelly *et al*., 2020). Effective communication strengthens teamwork, patient trust, and quality of care (Augst *et al*., 2024). Despite extensive research on communication competencies and outcomes, nurses' experiences and perceptions of communication proficiency in everyday clinical practice remain less explored, particularly in Malaysian hospitals. Therefore, this phenomenological study explored nurses' experiences and perceptions of professional communication proficiency at Queen

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Elizabeth Hospital II (QEH II), Sabah, focusing on its key components, clinical significance, challenges, and improvement strategies.

Effective professional communication is essential in healthcare, supporting patient engagement, interprofessional collaboration, conflict resolution, patient safety, and quality of care (Abdeen & Mustafa Mohamed, 2021; Lee *et al*., 2023). It involves verbal and non- verbal interactions, including clarity, appropriate tone, active listening, empathy, and contextual understanding (Hafskjold *et al*., 2015; Blanch-Hartigan *et al*., 2018; Burton, 2024). In nursing practice, communication proficiency enables nurses to exchange clinical information, coordinate care, and respond effectively to patients' needs. Effective communication improves patient satisfaction, treatment adherence, and health outcomes, whereas communication failures may contribute to clinical errors, conflict, poor coordination, and reduced patient trust (Abidova *et al*., 2020; Jawhari *et al*., 2023).

Organizational Context and Communication

Communication is influenced by organizational structures, professional roles, leadership, and interprofessional relationships. Collaborative environments promote information sharing, shared decision-making, and continuity of care, whereas rigid hierarchies may discourage nurses from expressing concerns (Capone *et al*., 2020; Lobchuk *et al*., 2021). Leadership support, mutual respect, peer feedback, and open communication strengthen teamwork and reduce communication-related risks (Turkelson *et al*., 2020; Im *et al*., 2024). Structured handovers and standardized communication processes further support accurate information transfer, coordination, and patient safety (Panchuay *et al*., 2023; Liao *et al*., 2024).

Development of Communication Proficiency

Communication proficiency can be developed through structured education, simulation, role-play, feedback, interdisciplinary learning, and cultural competence training (Albaharna *et al*., 2024). Continuing professional development, mentorship, and leadership support further strengthen communication skills and confidence (Enahoro *et al*., 2024; Stalmeijer *et al*., 2023). However, workplace demands, professional relationships, and organizational culture also influence how these skills are applied in clinical practice.

Research Gap

Despite the recognized importance of professional communication, qualitative evidence exploring nurses' broader experiences and perceptions of communication proficiency in Malaysian hospital settings remains limited. Ahayalimudin *et al*. (2024) identified several facilitators and barriers to effective clinical handovers among nurses in a Malaysian emergency department, including workload pressures, technological limitations, and documentation challenges. However, their study primarily focused on clinical handover practices rather than the broader dimensions of professional communication proficiency. Consequently, the interconnected influence of individual competencies, interprofessional relationships, and organizational conditions on nurses' everyday communication experiences requires further exploration. Addressing this gap, the present study explored nurses' experiences and perceptions of professional communication proficiency at Queen Elizabeth Hospital II (QEH II), Sabah, with particular attention to workplace challenges, clinical significance, and improvement strategies.

Theoretical Framework

This study adopted the Interprofessional Collaboration Gears Model proposed by Mulvale *et al*. (2016), which explains collaboration through interconnected individual, team, organizational, and broader system influences. Individual competencies, such as active listening and empathy, support effective communication,

while mutual respect and information sharing strengthen teamwork. Leadership, institutional policies, and resources provide organizational support for collaboration. The study themes were developed inductively through thematic analysis, and the model was subsequently used to interpret the findings in relation to these interconnected influences.

METHODOLOGY

Research Design and Study Setting

This study employed a qualitative descriptive phenomenological design informed by Husserlian philosophy (Jackson *et al*., 2018) to explore nurses' lived experiences and perceptions of professional communication proficiency. Phenomenology was selected to understand participants' subjective experiences and the meanings they attributed to communication (Beck, 1994; Shorey & Ng, 2022).

The study was conducted at Queen Elizabeth Hospital II (QEH II), Kota Kinabalu, Sabah, Malaysia. As a regional referral hospital providing specialized services, including cardiology, neurology, oncology, and orthopaedics, QEH II provided a suitable multidisciplinary setting for exploring nurses' communication experiences.

Population and Sampling

The target population comprised registered nurses at QEH II. Purposive sampling was used to recruit nurses aged 40 years or above, with at least 10 years of nursing experience and active involvement in interprofessional communication. Nursing tutors and Training Institute participants were included based on their eligibility and relevant experience. Two participants had received offers for tutoring positions three days before their interviews; their reported work areas reflected their assignments during data collection. A total of 12 nurses from different clinical specialties and professional ranks participated. Recruitment ended when subsequent interviews yielded no substantial new dimensions relevant to the research objectives (Guest *et al*., 2006; Saunders *et al*., 2018).

Semi-Structured Interview Guide

A semi-structured interview guide was developed based on the study objectives and relevant literature (Bartholomew *et al*., 2021). Section A covered participants' sociodemographic and professional characteristics, while Section B explored communication experiences, effective practices, influencing factors, challenges, improvement strategies, and implications for teamwork and patient care. Probing questions encouraged further clarification and elaboration.

Data Collection Procedure

Data were collected from 11 to 20 January 2025 through individual, private interviews lasting approximately 50 minutes. Eligible nurses received information about the study and provided written consent before participation. Interviews were audio-recorded with permission, while field notes documented relevant observations. Transcripts were prepared verbatim, checked against the recordings, and anonymized using participant codes. Participants were invited to review and clarify their transcripts, and relevant corrections were incorporated (Motulsky, 2021). Data collection and preliminary analysis were conducted concurrently.

Researcher Reflexivity and Bracketing

The study was informed by Husserlian descriptive phenomenology, which emphasizes bracketing prior assumptions to remain attentive to participants' descriptions of their experiences. The researcher acknowledged that previous nursing knowledge and professional experiences could influence the interpretation of participants' accounts. Therefore, the author consciously reflected on these assumptions throughout data collection and

analysis to minimize their influence on coding and theme development. Participants' accounts were repeatedly reviewed against the original transcripts to ensure that the findings remained grounded in their descriptions.

Data Analysis

Data were analyzed manually using Braun and Clarke's six-phase approach to thematic analysis (Braun & Clarke, 2006; Bryant, 2022). The analysis was conducted inductively, focusing on participants' descriptions and meanings of their lived experiences of professional communication. This approach enabled the identification of recurring patterns across interview accounts.

The analysis involved six phases: (1) familiarization through repeated reading of transcripts and review of audio recordings; (2) generation of initial codes from meaningful data segments; (3) grouping related codes to develop candidate themes; (4) reviewing and refining themes against coded extracts and the overall dataset; (5) defining and naming the final themes and subthemes; and (6) presenting findings through an analytical narrative supported by representative participant quotations. These phases were applied iteratively, with one researcher undertaking the coding and theme development across all transcripts. Participants' clarifications obtained through member checking were considered where relevant. The analytical procedures are summarized in Table 1.

Consistent with the descriptive phenomenological orientation, the analysis focused on identifying shared meanings and patterns within nurses' accounts rather than imposing predetermined categories. The theoretical framework was subsequently used to interpret the findings rather than direct the initial coding process.

Table 1: Six-Phase Thematic Analysis and Strategies Supporting Descriptive Phenomenological Rigor

Phase	Thematic Analysis Process	Strategies Supporting Rigour
Familiarization	Repeated reading of interview transcripts and review of audio recordings.	Credibility through repeated engagement with participants' accounts.
Generating Initial Codes	Identifying and manually coding meaningful data segments.	Dependability through documenting coding decisions.
Searching for Themes	Grouping related codes to identify patterns and develop candidate themes.	Confirmability through checking codes against original transcripts.
Reviewing Themes	Reviewing and refining candidate themes against coded extracts and the overall dataset.	Credibility through iterative review and consideration of participants' clarifications.
Defining and Naming Themes	Clarifying the central meaning, scope, and characteristics of final themes and subthemes.	Confirmability by ensuring interpretations remained grounded in participants' descriptions.
Producing the Report	Presenting themes through an analytical narrative supported by representative participant quotations.	Transferability through contextual descriptions and supporting quotations.

Trustworthiness

Trustworthiness was established using the four criteria proposed by Lincoln and Guba (1985): credibility, dependability, confirmability, and transferability.

Credibility was supported through repeated review of interview recordings and transcripts, member checking, and consideration of field notes to clarify participants' accounts. Dependability was enhanced by documenting coding decisions and revisions throughout the analysis. Confirmability was maintained by checking interpretations against the original transcripts to ensure that findings reflected participants' descriptions. Transferability was supported through descriptions of the study setting, participants, clinical context, and research procedures, together with representative participant quotations.

Ethical Consideration

The research obtained ethical clearance from Lincoln University College Malaysia with reference number 24-01237- R0M[IIR] on 25th October 2024.

RESULTS

The findings covered participants' demographic and professional characteristics (Table 2) and four main

themes with eleven subthemes identified through thematic analysis.

Demographic Characteristics of Participants

A total of 12 female healthcare providers participated in this study. Most participants were married (91.7%), Christian (83.3%), and of Kadazan ethnicity (58.3%). Regarding academic qualifications, 41.7% held both diploma and bachelor's degree qualifications, while 16.7% held master's degrees. Half of the participants 50.0% had 26–35 years of service, and 58.3% held the designation of Nursing Sister. In terms of post-basic training, 41.7% had completed Coronary Care Nursing training, while an equal proportion had no post-basic training. Participants represented various clinical and educational work areas, with the Training Institute and Cardiac Unit and the Haemodialysis Unit accounting for the largest proportions (16.7% each). The demographic and professional characteristics of the participants are presented in Table 2.

Table 2: Demographic and Professional Characteristics of Participants

Variable	Category	Frequency (n)	Percentage (%)
Gender	Female	12	100.0
Age (years)	40–43	1	8.3
	44–47	3	25.0
	48–51	3	25.0
	52–55	1	8.3
	56–59	2	16.7
	≥60	2	16.7
Marital status	Married	11	91.7
	Single	1	8.3
Ethnicity	Kadazan	7	58.3
	Dusun	2	16.7
	Lundayuh	1	8.3
	Brunei	1	8.3
	Bajau	1	8.3
Religion	Christian	10	83.3
	Islam	2	16.7
Highest academic qualification	Diploma and Bachelor's degree	5	41.7
	Master's degree	2	16.7
	Other combinations (Diploma only and Degree only)	5	41.7
Years of service	18–21	2	16.7
	22–25	2	16.7
	26–29	3	25.0
	30–35	3	25.0
	≥36	2	16.7
Post-basic training	None	5	41.7
	Coronary Care Nursing (CCN)	5	41.7
	Haemodialysis	2	16.7
Designation	Nursing Sisters	7	58.3
	Staff Nurses	3	25.0
	Nursing Tutors	2	16.7
Work area	Training Institute (MOH) and Cardiac Unit	2	16.7
	Haemodialysis Unit	2	16.7
	Clinical Instructor (Cardiac Unit)	1	8.3
	Invasive Cardiac Catheterisation Laboratory (ICL)	1	8.3
	Cardiac Rehabilitation Ward (CRW)	1	8.3
	Intensive Care Unit (ICU)	1	8.3
	General Medical Ward	1	8.3
	General Surgery Ward	1	8.3
	Haemodialysis Day Unit (HDU)	1	8.3
	Cardiac Clinic	1	8.3

Thematic Findings

Thematic analysis of the interview data identified four main themes and eleven subthemes concerning participants' experiences and perceptions of professional communication proficiency. The themes addressed participants' experiences and perceptions, awareness of communication proficiency, its significance in healthcare practice, and strategies for its improvement.

Theme 1: Experiences and Perceptions of Healthcare Providers Regarding their Professional Communication Proficiency

This theme describes participants' experiences and perceptions of professional communication proficiency in healthcare settings. Three subthemes were identified: key components of effective communication and their influence on professional interactions, experiences with communication in clinical practice, and perceptions of communication proficiency in healthcare.

Key Components of Effective Communication and their Influence on Professional Interactions

Participants described effective communication as involving verbal, non-verbal, and written communication. They highlighted facial expressions, tone of voice, eye contact, body language, clear spoken messages, and accurate documentation as important elements in facilitating understanding among healthcare providers and patients.

"Effective communication involves both verbal and non-verbal elements. Non-verbal cues such as facial expressions, tone of voice, and eye contact are essential in conveying messages, fostering empathy, and strengthening the patient-provider relationship. These cues enhance understanding, promote collaboration, and contribute to greater patient satisfaction and adherence to treatment plans" (P2)

"Verbal communication plays a vital role in healthcare interactions at QEH II, where specialized medical services are provided. Spoken language, reinforced by body language cues, facial expressions, and tone of voice, ensures that messages are well understood by the healthcare team…" (P7)

"Written communication is another key component of effective communication, involving documentation and recording of messages. These written records serve as instructions or guidelines for various tasks and procedures…" (P9)

Experiences with Communication in Clinical Practice

Participants shared experiences of communication during ward rounds, multidisciplinary meetings, patient handovers, rehabilitation sessions, emergency responses, and discharge planning. Their accounts described how communication practices varied according to clinical responsibilities and working environments.

"Throughout my experience working in medical wards and intensive care units, I have observed that healthcare professionals' proficiency in effective communication skills and techniques is essential for fostering inter-professional collaboration and minimizing medical errors. Clear and timely communication among healthcare teams enhances patient safety, improves care coordination, and ensures a more efficient clinical workflow…" (P1)

"I observed that highly effective teamwork, along with rapid, precise, and concise communication among emergency responders, was crucial in managing risks. These elements allowed for swift intervention, patient stabilization, and maximized survival outcomes." (P7)

"Based on my experience, taking the time to understand a patient's cultural background and adjusting my communication approach accordingly has significantly improved their engagement and trust. When patients

feel acknowledged and respected, they are more open to medical advice and actively participate in their care. I believe that strong organizational support, including continuous corporate culture training, is crucial in bridging the gap between theoretical knowledge and practical, patient-centered communication.…" (P5)

Perceptions of Communication Proficiency in Healthcare

Participants perceived professional communication proficiency as the ability to convey information clearly, understand messages accurately, maintain appropriate interpersonal relationships, and collaborate effectively with others. They also described leadership, experience, professional roles, and workplace culture as factors associated with communication proficiency.

"Professional communication proficiency in healthcare refers to the ability to convey messages clearly and effectively. Healthcare providers perceive it as essential for patient safety, teamwork, and quality care. Their experiences shape how they value clear communication, active listening, and non-verbal cues in minimizing misunderstandings and ensuring smooth healthcare delivery…" (P6)

"Good communication skills are indicative of a high level of professional communication proficiency, enabling individuals to convey important messages, collaborate effectively, and resolve conflicts efficiently, thereby enhancing teamwork…" (P8)

Theme 2: Awareness of Professional Communication Proficiency

This theme concerns participants' views on improving awareness and promoting effective communication within healthcare organizations. Two subthemes were identified: enhancing awareness and fostering continuous education and fostering a culture of open communication.

Enhancing Awareness and Fostering Continuous Education

Participants identified continuous education, communication training, practical exercises, self-reflection, and regular assessment as approaches to strengthening professional communication proficiency.

"Enhancing awareness and promoting ongoing education in professional communication proficiency are crucial for fostering cohesive teamwork. Because, through mutual understanding, healthcare providers were able to collaborate more harmoniously, leading to improved efficiency and enhanced productivity in clinical settings…" (P1).

"Enhancing awareness through attending courses or seminars on communication proficiency provides valuable knowledge; however, adherence to the teachings varied, and anticipated changes were not always immediate. Regular assessment and self-reflection were essential in evaluating communication competency, reinforcing knowledge, improving practical application, and fostering more effective interactions in healthcare settings…" (P6).

"Regular assessments evaluate the effectiveness of initiatives, ensuring continuous improvement in communication practices throughout the organization…" (P12)

Fostering a Culture of Open Communication

Participants described open communication as an organisational practice involving transparency, honesty, active listening, respectful dialogue, constructive feedback, and the willingness to share information.

"Open communication practices are essential for facilitating effective information exchange in healthcare settings. When team members freely share their thoughts, ideas, and feedback without hesitation, it reinforces transparency and accountability while enhancing efficiency in delivering holistic patient care and boosting patient satisfaction…" (P1)

"Fostering open communication is essential for building trust, enhancing collaboration, and promoting understanding among team members. By actively listening, expressing ideas clearly, and engaging in respectful dialogue, teams can create a culture where honest exchanges thrive, leading to stronger relationships, more effective problem-solving, and improved teamwork…" (P9)

Theme 3: Significance of Professional Communication Proficiency among Healthcare Providers

This theme describes participants' perceptions of the significance of professional communication proficiency in teamwork, patient safety, job satisfaction, and patient satisfaction and quality of care. Four subthemes were identified.

Enhancing Teamwork through Effective Collaboration

Participants consistently described communication as important for collaboration and coordination among healthcare providers. They highlighted structured handovers, accurate documentation, information sharing, leadership, and mutual support as aspects of effective teamwork.

"Effective communication enhanced clarity in both verbal and written instructions by utilizing standardized communication protocols, such as structured handovers and accurate documentation. These practices enabled team members to communicate effectively, ensuring they efficiently shared critical patient information, fostered excellent interdepartmental collaboration, and improved teamwork.…" (P1)

"Effective communication enhances collaboration, strengthens teamwork, and fosters a more cohesive and communicative healthcare culture. With real-time information sharing, interdisciplinary coordination is enhanced, enabling healthcare teams to deliver more responsive, efficient, and patient-centered care. This holistic approach underscores the critical role of communication in achieving excellent patient outcomes and overall satisfaction…" (P7)

Risk Management and Patient Safety

Participants perceived effective communication as important for reducing errors, identifying risks, sharing clinical information, and supporting timely decision-making. They highlighted accurate documentation, clear instructions, open discussion of safety concerns, and prompt information exchange.

"When messages, whether in the form of instructions, prescriptions, or investigation results are communicated clearly and accurately, the risk of medical errors in diagnosis, treatment, or medication administration is minimized…" (P2)

"When effective communication ensures that information flows accurately and comprehensively among team members, it strengthens collaboration and coordination in patient care. Additionally, accurate documentation of patient information upon admission, including medical histories and prescribed treatment regimens provided by patients and their accompanying family members, is essential for timely decision-making and effective medical care. This ensures prompt and accurate medical attention, ultimately enhancing patient safety, quality care, improved outcomes, and overall patient satisfaction…" (P1)

Enhancing Job Satisfaction

Participants associated professional communication proficiency with respectful workplace relationships, staff confidence, involvement in decision-making, professional recognition, and a supportive work environment. They described how clear and polite communication promoted cooperation, mutual respect, and a sense of belonging among colleagues. Effective communication also encouraged employee engagement, openness, feedback, and connectedness among nurses and other healthcare providers, contributing to a more positive and collaborative workplace.

"Effective communication practices enhance employee engagement and foster a culture of openness, continuous feedback, and transparent communication, promoting unity and strong connectedness among healthcare providers. This, in turn, improves employee well-being and job satisfaction, creating a ripple effect that strengthens patient interactions, boosts treatment adherence, and enhances overall satisfaction with healthcare services…." (P4)

"Clear and polite communication helps colleagues work together better, respect each other, and feel like they're part of a team. This friendly atmosphere makes healthcare providers feel valued, resulting in higher levels of job satisfaction…" (P1)

"Leaders with strong communication proficiency actively listen to the concerns and feedback of their team members, ensuring that everyone feels heard and valued. This enhances teamwork, collaboration, and job satisfaction among healthcare providers…" (P2)

Patient Satisfaction and Quality of Care

Participants emphasized that effective communication helped reduce patients' anxiety and uncertainty by building trust, addressing their concerns, supporting shared decision-making, and enhancing their overall healthcare experiences. They highlighted the importance of clear explanations, attentive listening, and empathetic responses to patients' needs and concerns.

"Effective communication plays a significant role in reducing patient anxiety and uncertainty by offering reassurance and addressing concerns promptly, leading to increased satisfaction…" (P1)

"Validating patients' experiences and emotions is crucial in the Cardiac Ward. By acknowledging the challenges they face during their stay, healthcare providers show empathy and understanding, which helps build trust and rapport…" (P3)

"Engaging patients in shared decision-making processes empowers them to play an active role in their care, ultimately leading to higher satisfaction…" (P11)

Theme 4: Enhancing Professional Communication Proficiency through Strategic Approaches

This theme describes participants' suggested approaches to improving professional communication proficiency. Two subthemes were identified: structured training and continuous education and leveraging technology for effective communication.

Structured Training and Continuous Education

Participants identified structured training, continuing education, leadership involvement, performance evaluation, and organizational support as approaches to strengthening communication proficiency.

"Implementing structured ongoing training in communication skills empowers employees to streamline operations, enhance efficiency, and achieve better outcomes. In healthcare settings, strong communication is essential for ensuring patient safety, fostering teamwork, and reducing errors while promoting a compassionate and empathetic approach to care…" (P4)

"Leaders play a critical role in identifying common communication challenges within their unit/department, following which they hold discussion and develop effective strategies to overcome ... observing and listening to team interactions to identify common communication pitfalls…" (P3)

Leveraging Technology for Effective Communication

Participants described digital technologies as supporting information sharing, documentation,

multidisciplinary coordination, patient education, and continuing professional development.

"Electronic Health Records (EHRs) have significantly improved our communication. Doctors from other departments (discipline) involved in patients' care management can access all investigation results complete with patient data instantly, reducing errors and ensuring prompt decision making…" (P1)

"Mobile applications for real-time patient record updates can reduce paperwork, allowing nurses and other healthcare providers to focus more on direct patient care while ensuring compassionate, patient-centered care ultimately enhancing overall quality of care and patient satisfaction…" (P5)

"Digital technology played a vital role in patient education, enabling us to provide digital resources, videos, and interactive tools that enhanced patients' understanding of their conditions. Moreover, these tools empowered patients by strengthening self-efficacy, promoting compliance, and ensuring adherence to prescribed medications...." (P9)

DISCUSSION

This study explored nurses' perceptions of professional communication proficiency and its influence on clinical practice and patient outcomes at Queen Elizabeth Hospital II (QEH II), Kota Kinabalu, Sabah. Four main themes emerged: experiences and perceptions of professional communication proficiency, awareness of communication proficiency, its significance in healthcare practice, and strategies for improvement. Overall, the findings highlighted communication as an essential competency for promoting teamwork, patient safety, staff satisfaction and quality of care.

Experiences and Perceptions of Healthcare Providers Regarding their Professional Communication Proficiency

The findings demonstrated that healthcare providers perceived effective communication as a multidimensional competency involving verbal, non-verbal and written communication. Participants emphasized clear spoken language, appropriate tone, facial expressions, eye contact, body language and accurate documentation. These components were considered essential for ensuring mutual understanding, maintaining professional relationships and supporting continuity of care. This finding is consistent with Reeves *et al*. (2017), who highlighted the importance of communication in facilitating interprofessional collaboration. Participants also described communication as essential in clinical activities, including ward rounds, multidisciplinary meetings, handovers, emergency responses and discharge planning. Effective information exchange was perceived as important for coordinating interventions, supporting timely decisions and minimizing errors. Participants further highlighted the need to adapt communication according to patients' cultural backgrounds and individual needs. Notably, communication proficiency was not perceived as being determined solely by educational qualifications, professional seniority or years of experience. Rather, participants emphasised the ability to convey information clearly, understand others and maintain positive professional relationships. This highlights the importance of practical communication behaviors and interpersonal skills across all professional levels.

Awareness of Professional Communication Proficiency

Participants highlighted continuous education, communication training, self-reflection and regular assessment as important for strengthening awareness and improving communication proficiency. They recognized that communication skills required ongoing development through formal learning and clinical experience. These findings support Sonnenschein and Ferguson (2020) and Albaharna *et al*. (2024), who emphasized the importance of continuous professional learning and communication development among healthcare professionals. In addition, participants emphasized transparency, honesty, active listening, respectful

dialogue and constructive feedback in fostering open communication. These practices were perceived as promoting trust, mutual understanding and teamwork. The findings suggest that developing communication awareness requires both individual commitment and a supportive organizational culture that encourages staff to exchange information and express concerns openly.

Significance of Professional Communication Proficiency among Healthcare Providers

Professional communication proficiency was perceived as essential for strengthening teamwork and interprofessional collaboration. Participants highlighted structured handovers, accurate documentation, timely information sharing, effective leadership and mutual support as important practices in coordinating patient care. These findings are consistent with Reeves *et al*. (2017), who emphasized the contribution of effective communication to interprofessional collaboration. Communication was also associated with risk management and patient safety. Participants explained that clear instructions, accurate documentation and timely information exchange helped minimize misunderstandings and reduce potential clinical errors. These findings support Kee *et al*. (2018) and Imam (2024), who highlighted the importance of communication in promoting patient safety and reducing clinical risks.

Regarding job satisfaction, participants associated effective communication with respectful workplace relationships, staff confidence, professional recognition and involvement in decision-making. Clear and polite communication was perceived to promote cooperation, mutual respect and a sense of belonging. Participants also emphasized the importance of leaders listening to staff concerns and acknowledging their contributions. These findings suggest that supportive communication practices contribute to a positive working environment in which healthcare providers feel valued. This is consistent with Shanafelt and Noseworthy (2017) and Santos *et al*. (2024), who discussed the importance of supportive workplace relationships and organizational practices.

Furthermore, participants linked effective communication with patient satisfaction and quality of care. Clear explanations, attentive listening, empathy and reassurance were considered important in addressing patients' concerns, reducing anxiety and building trust. Participants also highlighted shared decision-making as a means of encouraging patient involvement in care. These findings are consistent with Tarbi *et al*. (2022) and Kindie *et al*. (2024), who highlighted the relationship between healthcare communication and patient satisfaction.

Enhancing Professional Communication Proficiency through Strategic Approaches

Structured training and continuous education were identified as important strategies for improving communication proficiency. Participants highlighted practical learning opportunities, leadership support, constructive feedback and performance evaluation as approaches to strengthening communication practices. These findings suggest that communication development should be incorporated into ongoing professional development programmes and supported by healthcare organizations.

Technology was also recognized as a useful communication tool. Electronic health records, mobile applications, messaging platforms, telemedicine, video conferencing and digital educational resources were perceived as supporting information sharing, clinical coordination, patient follow-up and education. However, participants also acknowledged challenges such as technical difficulties, system interruptions and reduced face-to-face interaction. Therefore, digital communication tools should complement rather than replace direct professional communication.

These findings can be considered in relation to the Interprofessional Collaboration Gears Model by Mulvale *et al*. (2016), which emphasizes communication and collaborative processes in interprofessional practice.

Limitations

This study had several limitations. First, the study involved 12 registered nurses from a single hospital. The relative uniformity of the professional group may have limited the diversity of perspectives, particularly those of other healthcare professionals involved in interprofessional communication. Therefore, the findings may not represent the experiences of all healthcare providers. Second, although each interview lasted approximately 50 minutes, the depth of the findings may have been influenced by the extent to which participants elaborated on their experiences during the interviews. Third, the author's previous professional experience as a retired nursing sister in the Cardiac Unit may have introduced potential insider bias due to familiarity with the clinical environment and professional practices. This may have influenced the interview process or interpretation of participants' accounts. Finally, the interviews were conducted in English; therefore, translation of interview responses was not required. Nevertheless, these limitations should be considered when interpreting the findings and their transferability to other healthcare settings.

Future Scope

Future research should extend this inquiry to multiple public and private hospitals in Sabah and other Malaysian states to determine whether the communication experiences identified at QEH II are shared across different organizational contexts. Including doctors, allied health professionals, and nurses with fewer years of clinical experience would provide a broader interprofessional perspective on communication proficiency. Further qualitative studies using focus groups, repeated interviews, or observation of clinical interactions such as handovers and ward rounds may capture communication practices in greater depth and reduce reliance on self-reported accounts. Involving more than one researcher in coding and conducting interviews in Bahasa Malaysia and local languages could strengthen analytical rigor and reflect the linguistic diversity of Sabah's healthcare workforce. In addition, intervention and mixed-methods studies are recommended to evaluate the effects of structured communication training, leadership support, and digital communication tools on teamwork, patient safety, staff satisfaction, and patient outcomes.

CONCLUSION

This study demonstrated that professional communication proficiency was an important aspect of healthcare practice at QEH II. Participants associated effective communication with teamwork, patient safety, job satisfaction, patient satisfaction and quality of care. They also identified challenges involving time constraints, hierarchical relationships, language difficulties and technological limitations. The findings highlighted the importance of continuous education, open communication, leadership support and effective communication systems. Strengthening these areas may support better professional collaboration and communication practices in the clinical environment.

Recommendation

Based on the findings, healthcare institutions should provide regular structured communication training covering verbal, non-verbal and written communication, active listening, and effective information exchange. Practical exercises and role-playing may be incorporated to strengthen communication skills. Nurses should also be encouraged to participate in continuous professional development through education, self-reflection and feedback to identify areas for improvement. In addition, institutions should foster a culture of open communication by promoting respectful dialogue and providing opportunities for staff to raise concerns, clarify instructions and contribute to clinical discussions. Nurse managers and departmental leaders should provide constructive feedback, identify communication challenges and encourage collaboration among healthcare providers. Reliable communication technology and appropriate technical support should also be maintained to minimize disruptions to clinical information exchange, while ensuring that digital systems complement direct communication and accurate documentation. Finally, future research should involve nurses from different professional groups and multiple healthcare institutions to explore communication experiences across clinical

settings and examine communication barriers and improvement strategies in greater depth.

CRediT Authorship Contribution Statement

S.G.A.S.: Conceptualization, Methodology, and Investigation. **B.F.A.:** Writing – Original Draft, Data Curation and Formal Analysis. **R.D.:** Writing – Review, Editing and Project Administration.

AI Assistance Declaration

The authors used AI tools for language editing, clarity, organization, and formatting purposes only. All AI-assisted content was reviewed and verified by the authors, who take full responsibility for the final manuscript. AI was not used for data collection or statistical analysis.

Conflict of Interest

The researcher confirmed that they had no competing financial interests or personal relationships that could have influenced the work reported in this paper.

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