Sapientia Diversalis Journal of Human Interaction and Social Studies
Vol 1 No 4 November 2026, Hal 23-36
ISSN: 3125-1269 (Print) ISSN: 3125-0696 (Electronic)
Open Access: https://researchfrontiers.id/sapientiadiversalis

Internal Communication Patterns in the Laundry and Sterilization Unit at Dr. Amino Gondohutomo Regional Mental Hospital, Central Java

Maskup[1*], Suryanto[2]
[1-2] Sekolah Tinggi Ilmu Komunikasi Semarang, Indonesia
email: masmaskup129@gmail.com[1]

Article Info :
Received:
24-10-2026
Revised:
02-11-2026
Accepted:
09-11-2026

Abstract

This study examined internal communication patterns and operational coordination in the Laundry and Sterilization Unit at Dr. Amino Gondohutomo Regional Mental Hospital, Central Java. A descriptive qualitative design involved five employees selected through purposive sampling. Data were collected through semi-structured interviews, participatory observation, and documentation, then analyzed using data reduction, data display, and conclusion drawing, with source, method, and time triangulation supporting credibility. Findings identified vertical and horizontal communication involving supervisory instructions, coworker interaction, and face-to-face and digital exchanges. Supervisory information flows displayed wheel-like characteristics, whereas the available evidence did not establish a definitive star network. WhatsApp facilitated the distribution of shift schedules, operational reports, and protective equipment instructions, while direct explanations helped clarify workplace requirements. Communication barriers included unread messages, incomplete descriptions of linen conditions, insufficient attention, and limited openness. An unread schedule update delayed work, and inadequate identification of a stained pillowcase contributed to repeated complaints and the omission of preliminary treatment. These incidents demonstrated that access to digital channels did not guarantee message reception or understanding. The study highlights the value of clear instructions, recipient acknowledgment, direct clarification, and responsive interpersonal communication for supporting coordinated laundry and sterilization activities. Further investigation could examine communication networks in detail.

Keywords: *Communication Barriers, Digital Communication, Hospital Laundry, Internal Communication, Sterilization.*

©2026 Authors.. This work is licensed under a Creative Commons Attribution-Non Commercial 4.0 International License.
(https://creativecommons.org/licenses/by-nc/4.0/)

INTRODUCTION

Hospital support services constitute an essential component of healthcare delivery because their operational reliability affects the continuity of clinical activities, infection prevention, and the availability of medical resources. The central sterilization supply department performs a critical function in maintaining the availability and safety of sterilized equipment through standardized processing, storage, and distribution activities (Bal & Balaraju, 2025). Hospital laundry services similarly require coordinated procedures for collecting, sorting, washing, drying, storing, and distributing linen to maintain operational continuity and environmental hygiene (Ningsih et al., 2023). The interdependence of these activities creates communication requirements involving work instructions, task allocation, reporting mechanisms, and the timely exchange of information between personnel and organizational units. Research examining hospital linen management through planning, organizing, actuating, and controlling has demonstrated the relevance of administrative coordination and procedural compliance to the effectiveness of laundry operations (Ekawati et al., 2025). Internal communication has also been identified as an organizational factor associated with employee performance quality, indicating that communication practices extend beyond information transmission to influence workplace functioning (Rahmasari et al., 2026). At Dr. Amino Gondohutomo Regional Mental Hospital in Central Java, the laundry and sterilization unit provides a relevant institutional setting for examining how communication relationships are organized to support technically interdependent activities within a specialized healthcare environment.

Contemporary research on hospital communication has increasingly examined the relationship between interpersonal interaction, organizational coordination, communication structures, and professional performance rather than treating communication solely as a mechanism for transmitting instructions. Social network analysis of hospital nurses has illustrated the analytical value of identifying interpersonal communication relationships and information-sharing structures in understanding how evidence-based practice changes circulate within healthcare organizations (Arsenault Knudsen et al., 2024). Research on interprofessional collaboration at Hasanuddin University Hospital has further identified communication patterns, professional relationships, technological conditions, and organizational support as relevant dimensions of effective coordination across healthcare personnel (Hapsari et al., 2022). Organizational communication has also been examined in relation to nursing performance, establishing a connection between communicative processes and professional activities within Indonesian hospital environments (Wajdi et al., 2025). Developments in digital internal communication research have broadened this perspective by conceptualizing organizational interaction as an interdependent arrangement of technological systems, social relationships, and communication practices (Wuersch et al., 2023). These approaches collectively indicate that internal communication can be analyzed through interpersonal relationships, hierarchical structures, communication channels, and coordination processes, although their explanatory emphasis remains concentrated on clinical personnel, organizational performance, and digitally mediated interaction rather than communication within hospital laundry and sterilization operations.

The existing literature nevertheless reveals a contextual and empirical research gap concerning how internal communication patterns are formed, maintained, and applied within hospital support units responsible for laundry and sterilization activities. Research conducted at RSI Unisma Malang has examined laundry and linen management through operational procedures and service implementation, providing evidence concerning technical management practices without primarily investigating the structure of interpersonal communication among laundry personnel (Efitasary et al., 2023). Research on integrated information systems in central sterilization supply management has addressed technological coordination and operational performance, but its intervention-oriented approach does not directly explain how employees communicate through everyday interpersonal exchanges (Li et al., 2026). Studies describing central sterilization supply departments have clarified their organizational functions and technical responsibilities, although these descriptions do not establish the specific vertical and horizontal communication arrangements operating within individual hospital units (Bal & Balaraju, 2025). Communication-network research involving hospital nurses provides an alternative relational perspective, but its emphasis on clinical personnel and evidence-based practice change limits its direct applicability to the operational characteristics of laundry and sterilization personnel (Arsenault Knudsen et al., 2024). The distinction between technical service management and interpersonal communication analysis therefore leaves insufficient understanding of how instructions, feedback, operational information, and coordination responsibilities circulate among personnel performing sequential hospital support activities. Within the ten studies reviewed, no investigation specifically establishes the internal communication patterns of the laundry and sterilization unit at Dr. Amino Gondohutomo Regional Mental Hospital, making the identification of these patterns a defined empirical problem rather than an assumption that communication deficiencies already exist.

The unresolved relationship between operational procedures and communication practices carries practical implications because laundry and sterilization activities require coordinated decisions across multiple stages involving different personnel, responsibilities, and service requirements. A review of hospital laundry management in Indonesia has identified operational and managerial aspects that influence linen management practices, indicating that service processes must be understood beyond the availability of technical procedures alone (Ningsih et al., 2023). Evaluations of hospital linen management using the planning, organizing, actuating, and controlling framework further demonstrate the relevance of organizational arrangements to the implementation and supervision of routine laundry activities (Ekawati et al., 2025). Research on interprofessional collaboration has likewise shown that effective communication involves professional interaction, reporting arrangements, leadership support, and the capacity to coordinate activities across organizational responsibilities (Hapsari et al., 2022). Developments in sterilization supply information systems have highlighted the operational relevance of information integration, process traceability, and coordination between service locations, particularly where equipment processing depends on interconnected administrative arrangements (Li et al., 2026).

Examining communication within a hospital laundry and sterilization unit is consequently necessary to clarify how operational instructions are understood, how information is exchanged between organizational levels, and how coordination is maintained during routine activities, while providing an empirical foundation for evaluating communication arrangements without presupposing particular service failures.

The present research is positioned within organizational communication studies by focusing on the interactional processes through which hospital support personnel exchange information, coordinate responsibilities, and maintain working relationships during laundry and sterilization activities. Previous research examining internal communication and employee performance in an Indonesian hospital has emphasized associations between organizational conditions and performance outcomes, rather than providing a detailed account of communication patterns within a specialized technical service unit (Rahmasari et al., 2026). Research connecting organizational communication with nursing performance similarly concentrates on clinical personnel, leaving the communicative experiences of nonclinical hospital workers outside its principal analytical focus (Wajdi et al., 2025). Studies of digital internal communication have developed socio-technical explanations of organizational interaction, but these perspectives do not independently establish how direct communication, supervisory instructions, and routine coordination are organized within materially intensive hospital workflows (Wuersch et al., 2023). Research on hospital laundry management has provided operational evidence concerning linen handling and procedural implementation, offering a relevant technical foundation without treating interpersonal communication patterns as the central research object (Efitasary et al., 2023). The proposed contribution lies in examining vertical and horizontal communication, information exchange, communication channels, and coordination barriers as interconnected aspects of daily work within the laundry and sterilization unit of a regional mental hospital. This analytical positioning distinguishes the present research from studies primarily concerned with clinical communication, employee performance, technical compliance, or information systems by directing attention to how organizational communication is structured and experienced within a specialized hospital support service.

This study aims to identify and analyze internal communication patterns among personnel in the Laundry and Sterilization Unit at Dr. Amino Gondohutomo Regional Mental Hospital, Central Java. The investigation focuses on vertical and horizontal communication relationships, the exchange of operational information, and the mechanisms through which employees coordinate responsibilities during routine service activities. Particular attention is directed toward communication channels, the transmission of instructions, feedback processes, and circumstances that may influence the clarity and continuity of workplace communication. The analysis seeks to explain how communication practices operate within the organizational structure of the unit and how personnel manage information requirements associated with interdependent laundry and sterilization activities. The expected theoretical contribution is an empirically grounded understanding of internal communication within a specialized nonclinical hospital service, extending organizational communication analysis beyond its predominant emphasis on clinical professional interaction. The practical contribution is a context-specific foundation for evaluating existing communication arrangements, identifying potential coordination constraints, and informing improvements in internal communication practices that support reliable hospital services.

RESEARCH METHODS

This study employed a descriptive qualitative research design to examine internal communication patterns and their relationship to work activities in the Laundry and Sterilization Unit, emphasizing employees' experiences and interpretations of workplace interactions (Creswell, 2014). The research was conducted at the Laundry and Sterilization Unit of Dr. Amino Gondohutomo Regional Mental Hospital, located at Jl. Brigjend Sudiarto No. 347, Semarang, Central Java, with the location selected purposively because the unit had not previously been investigated according to the original research description. Five employees participated as research informants and were selected through purposive sampling based on their relevance to the operational activities and communication processes examined in the study (Bungin, 2007). Informant selection considered length of employment, organizational role, employment status, assigned responsibilities, and knowledge of activities performed within the laundry and sterilization unit. Data collection employed three complementary techniques consisting of semi-structured in-depth interviews with the five informants, participatory

observation of face-to-face and digital workplace interactions, and documentation of work-related activities. Documentary materials included work-incident records, photographs of operational activities, and other relevant institutional documents, providing contextual information that complemented the interview and observation data (Moleong, 2012).

The qualitative data obtained through interviews, participatory observation, and documentation were examined to identify recurring communication patterns, information-sharing practices, and coordination mechanisms associated with daily operational responsibilities. Data analysis followed the interactive model developed by Miles and Huberman, consisting of data reduction, data display, and conclusion drawing or verification as interconnected analytical processes (Miles & Huberman, 1994). During data reduction, information relevant to internal communication was selected and organized, while data display involved arranging the selected information into narrative descriptions to facilitate systematic interpretation. The organized materials were subsequently examined to identify recurring patterns of communication, relationships between personnel, information exchange, and coordination practices within the laundry and sterilization unit. Research credibility was strengthened through source, method, and time triangulation, allowing information obtained from different perspectives and collection procedures to be compared for consistency (Denzin, 1978). These procedures involved comparing information across informants, examining correspondence between interview statements, observational records, and documents, and reviewing information obtained at different collection times to support the credibility and consistency of the qualitative interpretation (Lincoln & Guba, 1985).

RESULTS AND DISCUSSION

Internal Communication Patterns and Organizational Relationships in the Laundry and Sterilization Unit

Internal communication within the Laundry and Sterilization Unit of Dr. Amino Gondohutomo Regional Mental Hospital constitutes an organizational process through which employees exchange operational information, coordinate responsibilities, and maintain continuity in supporting healthcare services. The qualitative investigation involving five employees provides an empirical basis for examining communication relationships associated with routine work activities and the organizational arrangements governing information exchange. The research materials identify vertical and horizontal communication as relevant forms of interaction, supported by face-to-face conversations and digital communication channels used to distribute instructions and report operational conditions. Laundry activities involving linen collection, washing, disinfection, drying, ironing, folding, and distribution require coordination because each stage depends on the appropriate completion and communication of preceding activities. These operational dependencies make communication relevant not only to the transmission of managerial instructions but also to the interpretation of responsibilities, the identification of processing requirements, and the continuity of service delivery. Bal and Balaraju (2025) emphasize the organizational importance of central sterilization services within hospital operations, demonstrating the broader relevance of structured coordination in technically specialized support units. Hapsari et al. (2022) similarly situate effective communication within collaborative healthcare activities, supporting an understanding of information exchange as an organizational process involving distinct responsibilities and interdependent work relationships.

Vertical communication was evident in the supervisory arrangements through which operational instructions, work schedules, and institutional information were conveyed to employees within the laundry and sterilization unit. Interview information indicated that the supervisor used a WhatsApp group to distribute work-related instructions and scheduling information, establishing a recognizable channel through which employees received operational directions. A separate communication sequence involved a complaint from an inpatient ward concerning stained linen, which was communicated to the laundry supervisor before being forwarded to the employees responsible for laundry processing. The supervisor subsequently communicated the reported problem through digital messages and direct interaction, indicating that the supervisory position connected information originating outside the unit with personnel responsible for implementing operational responses. These incidents demonstrate how vertical communication can organize the movement of information across hierarchical positions, although the available evidence does not establish that every operational decision or employee interaction required supervisory authorization. Research by Rahmasari et al. (2026) identifies internal communication as a factor associated with employee performance quality in hospital

organizations, providing a relevant basis for interpreting supervisory communication as a component of organizational functioning rather than merely an administrative procedure.

Horizontal communication represents interactions among employees occupying comparable organizational positions and is relevant to the coordination of tasks involving shared responsibilities and sequential work processes. The original research description recognizes communication among coworkers as part of the internal communication arrangements operating within the laundry and sterilization unit. Operational activities involving different stages of linen processing create opportunities for employees to exchange information about work progress, processing requirements, and conditions that may affect subsequent tasks. The available accounts, however, provide more detailed descriptions of communication routed through the supervisor than of individual conversations occurring exclusively between coworkers. This evidentiary distinction is significant because the presence of horizontal communication as an organizational category does not independently demonstrate its frequency, distribution, or relative importance compared with hierarchical communication. Arsenault Knudsen et al. (2024) demonstrate the relevance of examining interpersonal communication relationships through social network analysis, illustrating why the actual configuration of information exchange deserves attention beyond formal organizational positions. The identification of horizontal communication in the present study consequently provides a basis for understanding coworker interaction while requiring caution against attributing undocumented communication frequencies, network centrality, or patterns of collaboration to particular employees.

Communication relationships within organizations can be interpreted through several network configurations, including wheel, chain, star, circle, and restricted arrangements in which access to other members varies according to network position. The wheel configuration concentrates communication around a central individual, whereas the chain configuration distributes information sequentially through connected organizational members. The star configuration permits direct communication among members, while the circle configuration organizes information exchange between adjacent participants without requiring every message to pass through a single central position. These distinctions provide an analytical framework for examining whether information is centralized, transmitted through intermediate personnel, or exchanged directly across organizational relationships. The reported supervisory distribution of instructions is compatible with a centralized communication arrangement for particular activities, but the available interviews do not establish a complete network structure encompassing every employee or operational interaction. Table 1 summarizes the communication relationships, channels, and applications documented in the research materials without treating conceptual network configurations as independently verified empirical findings.

Table 1. Internal Communication Patterns Identified in the Laundry and Sterilization Unit

Communication Relationship	Communication Channel	Documented Application
Supervisor-to-employee communication	WhatsApp and face-to-face communication	Shift schedules, work instructions, and PPE guidance
Interunit reporting through the supervisor	WhatsApp text messages and photographs	Reports concerning stained linen
Communication among employees	Face-to-face and digital interaction	Exchange of operational information

Source: Research interview and observation descriptions

The communication relationships presented in Table 1 indicate that the supervisor served as an identifiable intermediary in the distribution of work instructions and the transmission of information originating from other hospital units. Supervisor-to-employee communication was documented through scheduling announcements, operational directions, and explanations of institutional requirements, demonstrating the presence of a recognizable hierarchical communication channel. Communication involving an inpatient ward followed a reporting sequence in which information concerning linen quality reached the supervisor before being conveyed to laundry personnel. The identification of communication among employees also indicates that internal interaction was not limited conceptually to the relationship between managerial personnel and subordinates, although the original material

provides limited detail concerning specific coworker exchanges. These relationships distinguish the direction of information movement from the medium used to convey a message because digital communication and face-to-face interaction may both support supervisory and interpersonal exchanges. Kaneko (2025) examines the relationship between communication channels and workplace performance, offering a relevant analytical perspective for distinguishing communication structures from the channels through which organizational information is delivered. The documented supervisory arrangements may therefore be interpreted as displaying wheel-like characteristics in particular communication sequences, while a definitive classification of the unit as a wheel, chain, star, or circle network would require more comprehensive evidence about communication links among all participants.

Formal communication within the unit was particularly apparent in the transmission of work schedules, operational instructions, and institutional policies requiring employees to understand and follow established procedures. The hospital's personal protective equipment policy was communicated through a PDF circular distributed in a WhatsApp group, followed by a direct explanation from the supervisor concerning equipment requirements and associated occupational risks. This sequence illustrates the combination of written institutional communication and verbal explanation, allowing an organizational instruction to be delivered through more than one communication channel. The supervisory explanation also provided an opportunity to clarify the practical meaning of written instructions, distinguishing the communication of a policy document from employees' interpretation of the responsibilities it established. Informal communication may occur through spontaneous exchanges among coworkers, but the research materials do not provide sufficiently detailed episodes to classify such conversations as an independently documented communication network. Wuersch et al. (2023) explain digital internal communication through the interaction of social and technological elements, supporting an interpretation in which communication channels operate alongside organizational relationships rather than functioning as substitutes for interpersonal coordination.

The interpersonal dimension of internal communication concerns the extent to which employees can exchange information clearly, report operational difficulties, and respond constructively to instructions or feedback from other organizational members. The research description identifies openness toward work reports, educational guidance, suggestions, and criticism as conditions relevant to effective communication within the laundry and sterilization unit. It also recognizes that limited willingness to share information and insufficient attention to workplace messages can hinder the transmission of operational details necessary for coordinated activity. These descriptions indicate that organizational communication cannot be understood exclusively through hierarchical positions or the availability of technological channels because employees' responses influence whether communicated information becomes operationally meaningful. The existence of a reporting channel does not necessarily establish that a message has been received, understood, or translated into the appropriate work procedure, particularly when the message concerns a specific processing requirement. Wajdi et al. (2025) examine the relationship between organizational communication and nursing performance, reinforcing the relevance of communication quality to professional activities while not establishing a direct causal relationship within the unit investigated here. The interpersonal characteristics identified in the research materials consequently direct analytical attention toward openness, responsiveness, and opportunities for clarification as dimensions that interact with the formal structure of internal communication.

The findings establish that internal communication in the Laundry and Sterilization Unit of Dr. Amino Gondohutomo Regional Mental Hospital involves hierarchical information distribution, recognized coworker interaction, and the combined use of digital and face-to-face communication channels. Supervisory coordination constitutes the most clearly documented communication relationship, particularly in the distribution of work instructions, the transmission of institutional policies, and the handling of information received from other hospital units. Horizontal communication is identified as part of the organizational arrangements, although the available evidence does not support determining whether a star, circle, or chain network predominates across routine employee interactions. The distinction between observed communication sequences and conceptual network classifications is methodologically necessary because five qualitative informants provide accounts of workplace practices without establishing quantified interaction frequencies or comprehensive measures of network centrality. The findings are consistent with the analytical relevance of interpersonal communication

relationships in hospital organizations demonstrated by Arsenault Knudsen et al. (2024), while extending attention to the communication requirements of nonclinical support personnel. The resulting characterization identifies communication direction, organizational relationships, and information channels as interconnected dimensions that provide a foundation for examining operational coordination, supporting conditions, and communication barriers in the subsequent analysis.

Communication Channels and Supporting Factors in Operational Coordination

Communication channels within the Laundry and Sterilization Unit of Dr. Amino Gondohutomo Regional Mental Hospital involved the integration of digital messaging and direct interpersonal interaction to support operational coordination. Interview and observation descriptions identified WhatsApp as a communication medium used to distribute work schedules, operational instructions, and information requiring attention from unit personnel. Face-to-face interaction complemented these exchanges by allowing employees and supervisors to communicate directly when additional explanation or clarification was necessary. The combination of these channels reflected different informational requirements associated with routine work activities, supervisory responsibilities, and the transmission of institutional directives. Wuersch et al. (2023) conceptualized digital internal communication through the interaction of technological infrastructure and social relationships, emphasizing that communication effectiveness cannot be explained exclusively by the availability of digital media. The communication arrangements identified in the unit similarly indicate that digital technology functions within an existing organizational structure where interpersonal relationships and employee responsiveness remain relevant to the interpretation and implementation of operational information.

WhatsApp functioned as an identifiable communication channel for distributing information among employees, particularly regarding work schedules, task instructions, and operational matters requiring timely attention. The use of group messaging allowed supervisors to disseminate information without requiring employees to participate simultaneously in a physical meeting. Digital messages could contain written instructions, attached documents, and photographs, enabling different forms of operational information to be communicated through a common technological platform. The original research materials documented the use of WhatsApp for communicating shift schedules and transmitting reports concerning the condition of hospital linen, demonstrating its application in routine administration and operational reporting. Kaneko (2025) examined the relationship between workplace communication channels and organizational performance, emphasizing the relevance of communication media to the coordination of professional activities. Research by Astarini et al. (2026) similarly addressed the relationship between electronic documentation and communication quality among hospital nursing personnel, indicating the importance of examining technological communication alongside the organizational conditions under which information is exchanged. The evidence from the present study suggests that WhatsApp facilitated information distribution, although the effectiveness of this arrangement remained dependent on message reception, employee attention, and the adequacy of information provided.

Face-to-face communication served as a complementary mechanism through which supervisors could explain institutional instructions and clarify operational responsibilities beyond the information contained in digital messages. The research materials documented direct communication following the distribution of an institutional circular concerning personal protective equipment, demonstrating the use of verbal explanation to reinforce written instructions. Direct interaction provided opportunities for immediate responses, clarification, and the interpretation of spoken and nonverbal information that may not be fully represented in written communication. The interpersonal characteristics of direct communication, including tone of voice, facial expressions, and immediate feedback, are relevant when employees must interpret instructions involving practical responsibilities and occupational safety. Gleeson et al. (2023) examined interprofessional communication in hospital settings, providing a broader analytical foundation for understanding how interpersonal exchanges contribute to organizational coordination and professional interaction. The available research evidence establishes the use of direct explanation as a communication practice within the unit, although it does not provide detailed conversational records from which individual interaction patterns or employee responses during each exchange could be independently reconstructed.

The dissemination of institutional instructions concerning personal protective equipment provided a specific example of the relationship between digital communication and direct workplace education within the laundry and sterilization unit. Hospital management issued a policy requiring personnel to use protective equipment, including work clothing, aprons, gloves, masks, head coverings, and appropriate footwear during operational activities. The policy was initially distributed through a PDF circular shared in the WhatsApp group, allowing employees to receive written information concerning the protective requirements established by the hospital. The supervisor subsequently assembled personnel and explained the importance of using protective equipment, including the occupational risks associated with inadequate protection during laundry and sterilization activities. According to the informants, employees understood the instructions and complied with the protective equipment requirements while performing their assigned responsibilities. The World Health Organization (2024) emphasized the relevance of education and training to infection prevention and control, supporting the interpretation that written guidance and direct explanation can serve complementary instructional functions in healthcare environments. The documented sequence indicates that combining written communication with interpersonal clarification supported the dissemination of operational requirements, although the available evidence does not include independently measured compliance rates or longitudinal assessments of employee behavior.

Openness in interpersonal communication emerged as a relevant condition supporting the exchange of operational information and the maintenance of working relationships within the laundry and sterilization unit. The research description identified employees' willingness to communicate work outcomes, receive educational guidance, and exchange suggestions or criticism as factors associated with constructive organizational interaction. These forms of communication are particularly relevant to interdependent work processes because information obtained during one operational stage may influence the responsibilities and decisions of personnel undertaking subsequent activities. The willingness to disclose difficulties or report unusual conditions can facilitate the transmission of information that might otherwise remain limited to individual employees or particular work assignments. Wajdi et al. (2025) examined the relationship between organizational communication and nursing performance, providing a relevant basis for considering interpersonal communication as a component of professional functioning within hospital organizations. The present qualitative evidence supports the identification of openness and responsiveness as communication-related conditions, but it does not establish their frequency, quantify their influence on operational performance, or demonstrate that all personnel experienced the same level of interpersonal openness.

The selection of communication channels was particularly relevant when operational information involved specific conditions requiring more detailed explanation than could be provided through a brief written message. Digital communication enabled photographs and textual descriptions to be transmitted between hospital units and laundry personnel, creating a mechanism for reporting visible problems with processed linen. Photographic documentation could illustrate the appearance of a defective item, while written messages could communicate the existence of a complaint or identify the general nature of an operational concern. The documented complaint concerning a stained pillowcase nevertheless showed that transmitting a photograph and written report did not independently ensure that all information necessary for appropriate linen treatment was understood by the employees responsible for processing it. Bonaconsa et al. (2024) examined communication practices associated with infection prevention and healthcare activities, providing an analytical reference for understanding the importance of purposeful communication adapted to specific professional information requirements. The distinction between the transmission of a complaint and the clarification of its technical implications indicates that communication effectiveness depends partly on whether the selected channel enables recipients to understand the operational meaning of the information received. The incident illustrates the potential value of combining visual documentation with direct explanation when an item requires particular treatment, without establishing that digital messaging is inherently ineffective or that interpersonal communication necessarily prevents every operational misunderstanding.

Employee responsiveness constituted another relevant dimension of communication because the distribution of information through an established channel did not automatically ensure its reception or interpretation. The original research materials described a shift-schedule announcement distributed through WhatsApp that was not read by an employee, demonstrating a discrepancy between message transmission and employee awareness. The documented use of direct explanation following the

circulation of the protective equipment policy illustrated a different communication arrangement in which written information was supplemented through an interpersonal instructional process. These contrasting situations indicate that communication involves distinguishable stages of message delivery, reception, understanding, and subsequent action, each of which may influence whether organizational instructions are implemented as intended. Winzer et al. (2024) examined the relationship between communication channel selection and the effectiveness of internal hospital communication, offering a relevant comparative perspective on the importance of matching communication practices with informational requirements. The research materials do not document a formal acknowledgment system, standardized message confirmation procedure, or measurable response-time requirement, making it inappropriate to assume that such mechanisms were formally implemented within the unit.

The findings characterize operational communication within the Laundry and Sterilization Unit as an arrangement involving digital information distribution, direct interpersonal explanation, supervisory coordination, and employee participation in workplace information exchange. WhatsApp supported the dissemination of schedules, written instructions, photographic documentation, and institutional information, while face-to-face communication provided opportunities for clarification and practical explanation. The protective equipment communication sequence illustrated how digital and direct communication could operate together, whereas the unread scheduling message and the incomplete information concerning stained linen demonstrated limitations associated with message reception and informational completeness. These incidents do not establish a quantitative difference between the effectiveness of digital and interpersonal communication, but they provide empirical examples of how particular communication practices functioned under different operational circumstances. Hapsari et al. (2022) emphasized the relevance of effective communication to collaborative activities within healthcare organizations, supporting the interpretation that coordination depends on organizational relationships as well as the mechanisms used to exchange information. Communication quality in the unit can consequently be interpreted through the relationship between message clarity, employee responsiveness, opportunities for clarification, and the operational responsibilities associated with the information being communicated. The integration of these dimensions provides an empirical foundation for examining how incomplete information, limited attention, and insufficient clarification may create communication barriers affecting the continuity and reliability of laundry and sterilization services.

Communication Barriers and Their Implications for Laundry and Sterilization Services

Communication barriers within the Laundry and Sterilization Unit of Dr. Amino Gondohutomo Regional Mental Hospital were identified through interview accounts and observations concerning the transmission, reception, and interpretation of operational information. The findings indicated that communication difficulties were associated with incomplete messages, insufficient attention to instructions, limited openness in exchanging information, and failures to respond appropriately to digital notifications. These conditions were particularly relevant because laundry and sterilization activities required coordination among employees responsible for different stages of linen handling and processing. Information that was not received or adequately explained could interrupt the continuity of work, even when communication channels were formally available and routinely used by personnel. The documented incidents concerning an unread shift-schedule announcement and repeated complaints about stained linen provided concrete examples of how communication problems emerged during everyday operational activities. Gleeson et al. (2023) examined interprofessional communication in hospital settings, providing a relevant analytical foundation for understanding how communication barriers may arise from organizational relationships and information-exchange practices. The findings suggest that communication barriers in the unit were not exclusively technological problems but also involved employee responsiveness, interpersonal interaction, and the completeness of information needed to perform assigned responsibilities.

The first documented communication problem involved an employee who did not read a shift-schedule update distributed through the unit's WhatsApp group. According to the interview account, the employee arrived at midday despite being required to report for duty earlier, resulting in delays to laundry activities. This incident demonstrated that the distribution of operational information through digital messaging did not necessarily ensure that the intended recipient received and acted upon the instruction. The communication channel successfully provided a means of distributing the schedule, but

the absence of attention to the message interrupted the connection between information delivery and operational implementation. Wuersch et al. (2023) emphasized the interaction between technological and social elements in digital internal communication, supporting the interpretation that communication effectiveness depends on employee engagement as well as the availability of communication technology. The incident illustrates a limitation of reliance on group messaging when operational instructions require timely acknowledgment, although the available data do not establish whether a formal message-confirmation procedure existed within the unit.

A second communication problem concerned the delivery of a stained pillowcase to an inpatient ward as part of a supply of clean hospital linen. The ward head reported the problem to the laundry supervisor through WhatsApp using written messages and photographic documentation of the stained item. The supervisor subsequently communicated the complaint to laundry personnel through digital messaging and direct verbal interaction, demonstrating the involvement of multiple communication channels in the reporting process. The research account indicated that a similar complaint occurred again, accompanied by a photograph showing what appeared to be the same stain, suggesting that the initial information exchange had not adequately resolved the processing problem. Further examination established that the stain had dried and required specific treatment, while the affected pillowcase had previously been returned among other soiled linen without a direct explanation identifying its condition. Ekawati et al. (2025) examined hospital linen management through organizational management functions, providing a relevant basis for interpreting linen-related complaints as operational issues requiring coordination and procedural attention. The incident indicates that communication deficiencies may persist despite the availability of photographic evidence and supervisory reporting when information concerning the actual condition of an item is not sufficiently communicated to the personnel responsible for processing it.

The stained-linen incident further demonstrated the relationship between incomplete operational information and the selection of appropriate handling procedures within the laundry unit. The affected pillowcase required brushing and soaking before machine washing because the dried stain could not be adequately addressed through machine washing alone. The original research description indicated that employees had not been informed directly about the need for this additional treatment when the item was returned with other soiled linen. This information gap prevented the specific condition of the pillowcase from being incorporated into the initial handling process, illustrating how insufficient identification of an operational problem could affect subsequent work activities. Efitasary et al. (2023) discussed laundry and linen management in hospital operations, providing a relevant comparison for understanding the relationship between procedural implementation and the management of linen-processing activities. The documented problems and their operational implications are summarized in Table 2, distinguishing the communication difficulties reported by informants from the consequences specifically identified in the research materials.

Table 2. Documented Communication Problems and Operational Implications in the Laundry and Sterilization Unit

Documented Incident	Communication Problem	Operational Implication
Employee missed a shift-schedule update	WhatsApp message was not read	Late arrival and delayed laundry activities
Stained pillowcase was reported by an inpatient ward	Complaint required communication through the supervisor	Recurrent complaint concerning stained linen
Linen requiring special treatment was returned without explanation	No direct identification of the defect	Required brushing and soaking were not initially performed

Source: Research interview and observation descriptions.

The incidents summarized in Table 2 indicate that communication barriers occurred at different stages of information exchange, including message reception, the transmission of complaints, and the explanation of technical requirements. The scheduling incident primarily concerned the recipient's failure to attend to an available digital message, whereas the stained-linen incident involved incomplete

information about the treatment required for a particular item. These distinctions are important because communication problems arising from employee inattention cannot necessarily be addressed through the same mechanisms as problems involving insufficient operational detail. The research description also identified closed interpersonal attitudes and limited willingness to share information as potential obstacles to effective communication among employees. Such conditions may restrict opportunities for reporting unusual linen conditions, requesting clarification, and communicating problems before they affect subsequent processing activities. Wajdi et al. (2025) examined the relationship between organizational communication and professional performance in a hospital environment, supporting the relevance of employee interaction and communication quality to the execution of workplace responsibilities. The findings indicate that communication effectiveness should be evaluated through both individual responsiveness and the adequacy of information exchanged, rather than through the existence of formal reporting channels alone.

Communication problems within the laundry and sterilization unit have implications for the continuity of work activities and the consistency of linen-handling procedures, although the available evidence does not establish their effects through quantitative performance measurements. The delayed arrival associated with an unread schedule demonstrated a direct operational consequence, while the repeated stained-pillowcase complaint revealed a failure to communicate a condition requiring additional processing. These incidents suggest that incomplete or unattended information can create discrepancies between expected work procedures and the actions undertaken by employees during routine service delivery. Hospital linen management requires attention to processing procedures and organizational coordination because linen passes through interconnected stages before being returned to clinical service areas. Bal and Balaraju (2025) emphasized the importance of structured central sterilization services within hospital operations, reinforcing the broader significance of coordinating technical support activities through clearly organized procedures. The present findings establish operational disruptions and communication deficiencies in specific incidents, but they do not demonstrate increased infection rates, measurable patient safety outcomes, or a general decline in hospital service quality.

The relationship between communication barriers and operational reliability indicates the need to distinguish information transmission from confirmation, interpretation, and appropriate follow-up. The unread scheduling message illustrates the potential relevance of confirming whether employees have received instructions that directly affect working arrangements and task continuity. The stained-pillowcase incident demonstrates the need for information accompanying returned linen to identify unusual conditions and explain any additional treatment requirements before routine processing begins. These interpretations arise from the documented problems and should be understood as practical implications rather than as procedures that were already formally established or tested within the hospital. Lo et al. (2021) examined the implementation of structured communication practices among healthcare workers, providing an analytical reference for considering how message completeness and consistency can support professional information exchange. Bonaconsa et al. (2024) addressed effective healthcare communication in activities associated with infection prevention, reinforcing the relevance of clear information exchange where operational responsibilities intersect with safety-related procedures. The findings support consideration of direct clarification, explicit identification of problematic linen, and acknowledgment of important operational messages as potential improvements, although their effectiveness would require further evaluation before being presented as demonstrated interventions.

The findings establish that communication barriers within the Laundry and Sterilization Unit involved employee attention, the completeness of operational messages, and the capacity of existing communication arrangements to support coordinated responses to workplace problems. WhatsApp enabled the distribution of schedules and the reporting of linen-related complaints, but its availability did not eliminate misunderstandings or ensure that employees responded to all information requiring operational attention. Face-to-face communication provided an additional mechanism for explanation, although the stained-linen incident demonstrated that technical information could remain incomplete when the condition of an item was not directly identified during its return for processing. Wahyuningsih and Firmanda (2025) examined the role of interprofessional communication in hospital service quality, providing a relevant perspective for understanding communication as a component of organizational coordination and reliable service delivery. The evidence contributes to organizational communication

research by illustrating how barriers emerge within nonclinical hospital support activities where tasks are interconnected and operational information must remain sufficiently precise across successive work processes. The practical implications concern improving the clarity of work instructions, strengthening employee responsiveness, and ensuring that unusual processing requirements are communicated through channels appropriate to the information being conveyed.

CONCLUSION

This study identified vertical and horizontal communication patterns supported by formal and informal interactions, supervisory coordination, and digital communication channels within the Laundry and Sterilization Unit at Dr. Amino Gondohutomo Regional Mental Hospital, Central Java. Vertical communication facilitated the distribution of instructions, work schedules, institutional policies, and operational reports, while horizontal communication supported information exchange among employees. The documented supervisory arrangements demonstrated characteristics of a wheel communication network, although the available evidence was insufficient to establish a definitive star network configuration. WhatsApp served as an important medium for transmitting operational information, while face-to-face communication provided opportunities for clarification and direct explanation. The integration of these communication channels supported workplace coordination, particularly in disseminating protective equipment requirements and communicating operational responsibilities. The findings contribute to organizational communication research by demonstrating how hierarchical relationships, interpersonal interaction, and digital media operate within a specialized nonclinical hospital service.

Communication barriers were associated with employee inattention, incomplete information, limited openness, and insufficient responsiveness to operational messages. The unread shift-schedule notification and repeated complaint concerning stained linen demonstrated how communication deficiencies could delay activities and interfere with appropriate processing procedures. These findings indicate that communication effectiveness depends not only on the availability of communication channels but also on message clarity, recipient attention, and timely clarification. Practical improvements should prioritize confirmation of important instructions, direct identification of linen requiring special treatment, and consistent communication between supervisors and employees. Combining supervisor-led coordination with accessible coworker communication may strengthen operational information exchange without relying exclusively on digital messaging. Further investigation involving more detailed communication-network observations is recommended to establish the relative roles of different communication patterns and evaluate their implications for service reliability.

REFERENCES

Adam, M. (2015). *Manajemen Pemasaran Jasa: Teori dan Aplikasi*. Alfabeta.

Arsenault Knudsen, É. N., Mundt, M. P., & Steege, L. M. (2024). Describing nurses' communication about evidence-based practice change: A social network analysis of hospital nurses. *Worldviews on Evidence-Based Nursing, 21*(2), 128–136. https://doi.org/10.1111/wvn.12708

Astarini, M. I. A., Maryuti, I. A., & Pae, K. (2026). An analysis of the association between the use of electronic nursing documentation and the quality of effective communication among nurses in hospital settings. *Nurse and Holistic Care, 6*(1), 66–78. https://doi.org/10.33086/nhc.v6i1.8682

Bahri, S., Rohendi, A., & Andikarya, O. (2026). Implementation of Lean Six Sigma in linen management: A case study at Samarinda Medika Citra Hospital. *Journal of Economics and Social Sciences (JESS), 5*(1), 25–32. https://doi.org/10.59525/jess.1276

Bal, B., & Balaraju, A. (2025). Overview of the central sterilization supply department, an integral part of the hospital. *The Journal of Infection in Developing Countries, 19*(3), 325–334. https://doi.org/10.3855/jidc.18646

Bhatiasevi, V. (2024). The uses and gratifications of social media and their impact on social relationships and psychological well-being. *Frontiers in Psychiatry, 15*, Article 1260565. https://doi.org/10.3389/fpsyt.2024.1260565

Bonaconsa, C., Mbamalu, O., Surendran, S., George, A., Mendelson, M., & Charani, E. (2024). Optimizing infection control and antimicrobial stewardship bedside discussion: A scoping review

of existing evidence on effective healthcare communication in hospitals. *Clinical Microbiology and Infection, 30*(3), 336–352. https://doi.org/10.1016/j.cmi.2023.12.011

Bungin, B. (2007). *Penelitian Kualitatif: Komunikasi, Ekonomi, Kebijakan Publik, dan Ilmu Sosial Lainnya*. Kencana.

Creswell, J. W. (2014). *Research Design: Qualitative, Quantitative, and Mixed Methods Approaches* (4th ed.). SAGE Publications.

Denzin, N. K. (1978). *The Research Act: A Theoretical Introduction to Sociological Methods* (2nd ed.). McGraw-Hill.

Efitasary, E., Susanto, S. B., Wulandari, L., & Matrahman. (2023). Implementation of laundry management linen management at RSI Unisma Malang. *Journal of Hospital Management and Services, 5*(2), 43–48. https://doi.org/10.30994/jhms.v5i2.55

Ekawati, F. A., Rusmiati, R., Sari, E., & Rokhmalia, F. (2025). Evaluasi pengelolaan linen dengan pendekatan POAC di Rumah Sakit PKU Muhammadiyah Surabaya. *Jurnal Kesehatan Lingkungan Indonesia, 24*(3), 389–397. https://doi.org/10.14710/jkli.74900

Febriyanti, M., Zulfa, & Putra, A. S. (2025). Gambaran pengelolaan linen di unit laundry Rumah Sakit Islam Ibnu Sina Bukittinggi tahun 2024. *SEHATMAS: Jurnal Ilmiah Kesehatan Masyarakat, 4*(1), 227–239. https://doi.org/10.55123/sehatmas.v4i1.4780

Gleeson, L. L., O'Brien, G. L., O'Mahony, D., & Byrne, S. (2023). Interprofessional communication in the hospital setting: A systematic review of the qualitative literature. *Journal of Interprofessional Care, 37*(2), 203–213. https://doi.org/10.1080/13561820.2022.2028746

Hapsari, M. K., Rivai, F., Thamrin, Y., Pasinringi, S. A., Irwandy, I., & Hamzah, H. (2022). Analysis of the implementation of effective communication on interprofessional collaboration in the inpatient installation of Hasanuddin University Hospital. *Journal of Asian Multicultural Research for Medical and Health Science Study, 3*(1), 23–35. https://doi.org/10.47616/jamrmhss.v3i1.234

Herlambang, S. (2016). *Manajemen Pelayanan Kesehatan Rumah Sakit: Cara Mudah Memahami Manajemen Pelayanan di Rumah Sakit dan Organisasi Pelayanan Kesehatan Lainnya*. Gosyen Publishing.

Kaneko, A. (2025). Team communication in the workplace: Interplay of communication channels and performance. *Business and Professional Communication Quarterly, 88*(2), 223–248. https://doi.org/10.1177/23294906231190584

Kementerian Kesehatan Republik Indonesia. (2026). *Peraturan Menteri Kesehatan Republik Indonesia Nomor 6 Tahun 2026 tentang Rumah Sakit*.

Li, G., Xia, F., Chen, X., Li, L., Xu, L., Zeng, H., Mao, X., Li, Q., & Chen, R. (2026). Enhancing sterilization supply management: A pre-post study on the impact of an integrated information system in a multi-campus hospital setting. *BMC Health Services Research, 26*, Article 687. https://doi.org/10.1186/s12913-026-14477-3

Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic Inquiry*. SAGE Publications.

Lo, L., Rotteau, L., & Shojania, K. G. (2021). Can SBAR be implemented with high fidelity and does it improve communication between healthcare workers? A systematic review. *BMJ Open, 11*(12), Article e055247. https://doi.org/10.1136/bmjopen-2021-055247

McHugh, S. K., Lawton, R., O'Hara, J. K., & Sheard, L. (2020). Does team reflexivity impact teamwork and communication in interprofessional hospital-based healthcare teams? A systematic review and narrative synthesis. *BMJ Quality & Safety, 29*(8), 672–683. https://doi.org/10.1136/bmjqs-2019-009921

Miles, M. B., & Huberman, A. M. (1994). *Qualitative Data Analysis: An Expanded Sourcebook* (2nd ed.). SAGE Publications.

Moleong, L. J. (2012). *Metodologi Penelitian Kualitatif*. Remaja Rosdakarya.

Ningsih, S., Sriatmi, A., & Suhartono. (2023). Manajemen pengelolaan linen di instalasi laundry rumah sakit di Indonesia. *Jurnal Ilmiah Permas: Jurnal Ilmiah STIKES Kendal, 13*(2), 337–350. https://doi.org/10.32583/pskm.v13i2.695

Rahmasari, H., Paramarta, V., Yuliaty, F., Kosasih, & Rulia. (2026). Internal communication, work environment, compensation, and skill development associations with permanent employee performance quality at Cijantung Hospital Jakarta. *Journal of Business, Social and Technology, 7*(4), 2134–2147. https://doi.org/10.59261/bustechno.v7i4.788

Ramli Ahmad, K., Sibuan Amir, L., & Hapipi, M. (2024). Pengaruh media sosial terhadap pola komunikasi dan hubungan sosial dalam kalangan Generasi Z. *Sanskara Ilmu Sosial dan Humaniora, 1*(2), 85–94. https://doi.org/10.58812/sish.v1i02.364

Trihastuti, A. E. (2020). *Komunikasi Internal Organisasi*. Deepublish.

Wahyuningsih, A., & Firmanda, G. I. (2025). The role of interprofessional communication in enhancing the quality of hospital health services: A scoping review. *JMMR (Jurnal Medicoeticolegal dan Manajemen Rumah Sakit), 14*(2), 230–241. https://doi.org/10.18196/jmmr.v14i2.570

Wajdi, N. A., Fatimah, F. S., & Putri, I. R. R. (2025). Hubungan komunikasi organisasi terhadap kinerja perawat. *Indonesian Journal of Hospital Administration, 8*(1), 1–11. https://doi.org/10.21927/ijhaa.2025.8(1).1-11

Winzer, H., Stevik, T. K., & Scholderer, J. (2024). Internal crisis communication in hospitals: The choice of communication channels and its impact on effectiveness. *Journal of Contingencies and Crisis Management, 32*(4), Article e70008. https://doi.org/10.1111/1468-5973.70008

World Health Organization. (2017). *WHO Strategic Communications Framework for Effective Communications*.

World Health Organization. (2024). *Infection Prevention and Control in-Service Education and Training Curriculum*. https://www.who.int/publications/i/item/9789240094123

Wuersch, L., Neher, A., & Peter, M. K. (2023). Digital internal communication: An interplay of socio-technical elements. *International Journal of Management Reviews, 25*(3), 614–639. https://doi.org/10.1111/ijmr.12323