NEWS RELEASE

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Physician and nurse perceptions of teamwork and collaboration differ on general medical services

Study in December 2020 issue of The Joint Commission Journal on Quality and Patient Safety

(OAKBROOK TERRACE, Illinois, November 19, 2020) – Teamwork and collaboration are essential to providing high-quality care. While research has found discrepancies between nurses’ and physicians’ perceptions in operating rooms, ICUs and labor and delivery units, less is known about perceptions on general medical services.

A new study, “A Multisite Study of Interprofessional Teamwork and Collaboration on General Medical Services,” in the December issue of The Joint Commission Journal on Quality and Patient Safety, assessed teamwork climate among nurses, nurse assistants and physicians/hospitalists working on general medical services in four mid-sized hospitals. Using the Safety Attitudes Questionnaire, respondents were asked to rate the quality of collaboration experienced with their own and other professional categories.

Among the 380 participants, median teamwork climate scores were significantly different across the four sites. In addition, ratings of the quality of collaboration differed significantly based on professional category. Specifically, 63.3% of hospitalists rated the quality of collaboration with nurses as high or very high, while 48.7% of nurses rated the quality of collaboration with hospitalists as high or very high.

Given the importance of teamwork in high-quality care and considering the variation across sites in the study, the researchers suggest that health care leaders consider conducting similar assessments to characterize teamwork and collaboration on general medical services within their own hospitals.
An accompanying editorial, “**Measuring Collaboration in Health Care: Insights from the Science of Teamwork**,” highlights three insights to guide future research on teamwork and collaboration in health care. “Although research on teamwork in health care provides some insights to explain differences in perceptions of collaboration by professional group, the current study leaves room for future research on interprofessional collaboration in health care,” notes the editorial.

Also featured in the December issue:

- **Improving Use of a Hospital Transitional Care Clinic** (Northwestern University Feinberg School of Medicine, Chicago)
- **Implementing Antibiotic Stewardship in a Network of Urgent Care Centers** (ChristianaCare, Newark, Delaware)
- **An Examination of the Barriers to and Facilitators of Implementing Nurse-Driven Protocols to Remove Indwelling Urinary Catheters in Acute Care Hospitals** (study of 17 U.S. hospitals)
- **The Perspective of Key Stakeholders on the Impact of Reaccreditation in a Large National Mental Health Institute** (Institute of Mental Health, Singapore)
- **Design and Implementation of an Analgesia, Sedation, and Paralysis Order Set to Enhance Compliance of pro re nata Medication Orders with Joint Commission Medication Management Standards in a Pediatric ICU** (The Johns Hopkins Hospital, Baltimore)
- **Rapid-Cycle Improvement During the COVID-19 Pandemic: Using Safety Reports to Inform Incident Command** (Brigham and Women’s Hospital, Boston)

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**Note for editors**

The article is “**A Multisite Study of Interprofessional Teamwork and Collaboration on General Medical Services**,” by Kevin J. O’Leary, MD, MS; Milisa Manojlovich, PhD, RN; Julie K. Johnson, MSPH, PhD; Ronald Estrella, MHA, RN; Krystal Hanrahan, MS, MSPH, RN; Luci K. Leykum, MD, MBA, MSc; G. Randy Smith, MD, MS; Jenna D. Goldstein, MA; and Mark V. Williams, MD. The article appears in *The Joint Commission Journal on Quality and Patient Safety*, volume 46, number 12 (December 2020), published by Elsevier.

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