

Teamwork interventions may positively affect hospital climate for nurses but do not improve patient outcomes

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A pragmatic controlled trial by a team from Northwestern University has found that interventions to redesign care for hospitalized medical

patients helped to improve the perceived level of teamwork from nurses' perspectives, but did not seem to affect patient outcomes. According to the authors, health care leaders should consider these findings in the context of their improvement priorities before implementing similar interventions. [The study](#) is published in *Annals of Internal Medicine*.

Medically challenging patients require care from multiple teams across several professions in one hospital. Teams providing care to hospitalized medical patients are large, team membership changes continually, and physicians often care for patients across multiple units simultaneously. A growing body of research has evaluated individual interventions to address these challenges by redesigning aspects of the care delivery system. The interventions seem to improve interprofessional [teamwork](#), but the evidence that [patient outcomes](#) are improved is unclear.

The researchers studied medical units at four U.S. hospitals to evaluate the effect of combined interventions to redesign hospital care delivery on teamwork and patient outcomes. Each [hospital](#) selected one unit for implementation of interventions and a second to serve as a control. Interventions included unit-based physician teams, unit nurse-physician co-leadership, enhanced interprofessional rounds, unit-level performance reports, and patient engagement activities.

After implementation of the complementary interventions to redesign care, nurses gave higher ratings to their teamwork climate score. While the authors hypothesized that greater teamwork and interprofessional communication would improve patient outcomes, they found that adverse events, length of stay, 30-day readmissions, and reported patient experience did not improve.

More information: *Annals of Internal Medicine* (2023).
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