EFFECTIVE TEAMWORK: HOW DOES IT CONTRIBUTE TO SAVE LONG-TERM CARE?

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ABSTRACT

The long-term care sector is facing growing demand for services, an increasing range of complex health problems among patients, and high safety and quality requirements. In this context, teamwork is essential to ensuring coordinated, continuous, and patient-oriented care. This article analyses the scientific literature to reveal how teamwork, including its structural and interpersonal components, contributes to patient safety and service quality in long-term care. A narrative analysis of scientific articles published between 2017 and 2025 was conducted, focusing on international studies of interprofessional collaboration, team dynamics, soft skills, and organisational culture. The literature review shows that effective communication, clear role distribution, leadership, psychological safety, and interpersonal trust are associated with a lower risk of adverse events, better continuity of care, and greater satisfaction among service recipients. Teamwork in long-term care should be seen as a strategic factor in ensuring quality and safety.

Keywords: *teamwork; long-term care; interprofessional collaboration; patient safety; service quality; organisational culture; leadership; soft skills.*

1. INTRODUCTION

The long-term care (LTC) sector has been significantly affected by demographic and structural changes over the past few decades, particularly the ageing population and the spread of chronic diseases, which have increased the complexity of health and social needs and driven a growing demand for integrated services. LTC encompasses medical, social, and psychological care for individuals who require ongoing support in their daily lives, making service quality and patient safety key evaluation criteria. The literature recognises that the competence of individual specialists alone is insufficient to ensure the quality of care, and that individuals with complex needs require coordinated, interprofessional care based on clear communication and shared goals to prevent fragmented care and improve clinical outcomes (*interprofessional collaboration*). This model of collaboration is characteristic of interactions among specialists from different professions and is critically important in long-term care [1]. Research shows that understanding the factors of interprofessional collaboration, such as communication quality, team dynamics, and patient and family involvement in decision-making, is essential to ensuring high-quality, coordinated care for older patients in long-term care facilities [1].

2. MATERIALS AND METHODS

This article presents a narrative analysis of scientific literature to assess the role of teamwork in ensuring patient safety and service quality in long-term care. The literature search was conducted across international scientific databases, including PubMed, EBSCOhost, and other peer-reviewed publication platforms accessible via academic access (LibKey). The following criteria were applied to the selection of literature:

- articles published between 2017 and 2025;

- peer-reviewed scientific articles.
- studies examining interprofessional collaboration, teamwork, organisational culture, leadership, patient safety, or service quality in the context of long-term care.
- full text available in English

Articles that examined only the specifics of acute care or other segments of the health system not related to the long-term care sector, as well as publications that did not meet the criteria of scientific reliability, were not included in the analysis.

The following keywords and combinations thereof were used in the search: "long-term care," "interprofessional collaboration," "teamwork," "patient safety," "quality of care," "organisational culture," "leadership," "team dynamics," and "soft skills." The selection of articles was carried out in several stages: first, the titles and abstracts were evaluated, and then the full texts were assessed for relevance to the research objective.

The selected literature was analysed using thematic analysis, yielding the following main categories: structural components of team interaction; soft skills; team dynamics and safety culture; service quality; and organisational culture and leadership. The results of the analysis were systematised and integrated into a conceptual scheme of the significance of team interaction in long-term care.

Since the article is based on secondary data (published literature), no ethical committee approval was required.

Generative artificial intelligence tools were used as an aid in structuring and editing the text. The final decisions on the selection of literature, interpretation, and content formation were made by the authors, ensuring academic independence and responsibility for the information presented.

3. THE CONCEPT OF TEAMWORK IN LONG-TERM CARE

Teamwork in the healthcare system is considered a key factor in ensuring service quality, patient safety, and continuity of care. In the context of long-term care, this concept takes on particular significance due to the complexity of services, the diverse needs of patients, and the need to coordinate the actions of different specialists. In the scientific literature, teamwork is most often analysed through the prism of interprofessional collaboration, which is defined as the coordinated work of specialists from multiple professions, based on a common goal, shared responsibility, and collective decision-making [1].

Long-term care is most often provided to people with chronic diseases or functional impairments, so their care requires consistent and integrated specialist activities. Recent studies show that effective interprofessional collaboration in long-term care and geriatric rehabilitation is associated with improved care coordination, greater service continuity, and better patient outcomes [1]. Furthermore, a systematic analysis of interventions to improve the effectiveness of healthcare teams confirms that structured team practices and clearly defined models of collaboration contribute significantly to improving quality and safety [2]. Such interaction avoids fragmented care, which often occurs when professionals work in isolation and do not integrate their actions into a common care plan.

Teamwork is not the same as a simple division of labour. It involves constant communication, mutual trust, a clear understanding of roles, and a shared value system. The literature emphasises that team effectiveness is determined not only by the individual competence of its members, but also by their ability to function as a

unified system in which structural coordination and collective responsibility are important [2]. Clarity of roles is particularly important in healthcare teams, as undefined boundaries of responsibility can lead to information loss or duplicate decisions.

In the long-term care sector, teamwork often takes place in an interdisciplinary environment involving nurses, doctors, social workers, psychologists, and other specialists. In such teams, it is necessary not only to coordinate actions but also to ensure a common understanding of the patient's situation. Research also shows that structured communication practices and a safe team environment improve service quality and enhance patient safety [3]. Psychological safety- the ability to openly ask questions and report potential errors - is considered one of the important factors for team effectiveness and learning in healthcare.

Team interaction is also closely related to continuity of care. In long-term care, where patients' conditions may change slowly but consistently, the systematic transfer of information between specialists is important. Studies on the nursing work environment and team functioning show that a well-organised team structure and a supportive professional environment contribute to safer and more coordinated care.

In summary, teamwork in long-term care is a complex process that involves interprofessional collaboration, structured communication, clear role distribution, and support for the organisation's culture. The latest scientific literature confirms that effective teams directly contribute to improving service quality, patient safety, and continuity of care, underscoring the need to view teamwork as a strategic element of the long-term care system.

4. STRUCTURAL COMPONENTS OF EFFECTIVE TEAMWORK

Effective teamwork in long-term care is not a random or spontaneous phenomenon- clearly defined structural and procedural components determine it. The scientific literature emphasises that team effectiveness in the healthcare context depends on interrelated factors: communication quality, role clarity, leadership, trust, shared goals, and decision-making models [1, 3]. The harmony among these elements is particularly important in long-term care, where specialists interact continuously and address not only clinical but also social and psychological needs.

Communication is considered an essential element of teamwork, directly affecting patient safety and the quality of care. Studies show that team communication training, which emphasises trust and psychological safety, improves team members' ability to exchange information and solve problems effectively, thereby being associated with improved patient safety and team performance [2]. In the context of long-term care, information about changes in a patient's condition, behavioural characteristics, or social circumstances must be communicated consistently and accurately between shifts and different specialists.

The quality of communication is closely linked to the relationships and cooperation between team members. Open, respectful, and constructive communication increases trust and strengthens cooperation, while hierarchical barriers or fear of expressing opinions can weaken team effectiveness and reduce psychological safety. The quality of interprofessional collaboration is related not only to individual competencies but also to organisational conditions, such as team operating standards and clear communication protocols [1].

An equally important component of effective team interaction is a clear definition of roles and distribution of responsibilities. Long-term care teams include representatives

of various professions, so undefined boundaries of responsibility can lead to duplication of activities or failure to perform important tasks. Research shows that clearly defined roles and functions reduce the likelihood of conflict, promote cooperation, and increase team effectiveness [1,3].

Leadership is also among the most important factors determining team effectiveness, especially when it promotes open communication, trust, and shared decision-making. Systematic review data show that transformational and supportive leadership are significantly associated with higher-quality care, better team climate, and greater job satisfaction among employees [4]. In addition, positive leadership styles are associated with nurse engagement and organisational commitment, thereby strengthening teamwork and reducing employee turnover [5]. Research also confirms that leadership indirectly influences patient outcomes by improving the work environment and team collaboration. In long-term care, where services are consistently provided over a long period, the role of the leader is a key factor in creating a culture of collaboration.

Trust among team members is another prerequisite for effective interaction. Psychological safety- an environment in which employees feel free to express their opinions and report potential errors without fear of negative consequences - is considered an important component of team learning and safety culture. Research shows that psychological safety in healthcare teams is associated with better information sharing, greater employee engagement, and a lower risk of errors (O'Donovan & McAuliffe, 2020). Studies conducted in nursing homes also confirm that managerial support and open communication strengthen safety culture and teamwork [2]. This shows that a trust-based environment is an important prerequisite for patient safety and quality in long-term care.

Effective teams are also characterised by clearly defined common goals and collective decision-making. The literature emphasises that shared values and goals strengthen team identity and coordinated action [4]. When team members share a common understanding of patient care goals, decision consistency increases, and the risk of fragmented care decreases. In long-term care, shared goals include not only stabilising the clinical condition but also maintaining independence, quality of life, and dignity. This collective, patient-centred approach sets the stage for better organisational and clinical outcomes.

In summary, effective teamwork in long-term care is based on structural and procedural components, such as communication, clear roles, trust, leadership, and shared goals, which interact to create the conditions for safe, coordinated, and patient-centred care.

5. THE IMPORTANCE OF SOFT SKILLS IN LONG-TERM CARE TEAMWORK

In the context of long-term care, the effectiveness of teamwork depends not only on structural organisational factors, but also on the personal and interpersonal competencies of team members. These competencies, often referred to as soft skills, include emotional intelligence, empathy, conflict management skills, constructive dialogue, self-reflection, and psychological resilience. Scientific literature emphasises that these skills are essential for a safe and effective team environment, as they directly affect the quality of interprofessional collaboration and employees' psychological well-being [6, 7].

Emotional intelligence is considered one of the most important prerequisites for teamwork. Studies show that higher levels of emotional intelligence among nurses are significantly associated with lower levels of burnout and better interpersonal communication [6]. In long-term care, where employees often face complex emotional situations, the ability to recognise and regulate emotions becomes an important professional resource that helps maintain constructive teamwork and empathetic relationships with patients.

Constructive dialogue and the ability to manage disagreements are integral to interdisciplinary teamwork. Research on psychological safety shows that teams where employees feel safe expressing their opinions and report potential errors have better information sharing and greater involvement in decision-making [7]. Such an environment creates conditions for constructive conflict resolution and ensures safer patient care.

Psychological resilience is also an important soft skill, especially in the long-term care sector. Meta-analytic studies show that higher resilience levels are associated with lower emotional exhaustion and burnout among healthcare workers [8]. Resilience enables employees to maintain professional stability and participate effectively in team activities even under constant emotional stress.

Interpersonal trust within a team is formed through consistent, respectful communication and the assumption of responsibility. The literature on psychological safety emphasises that such a culture promotes open communication, error prevention, and collaboration [6, 7]. In long-term care, trust among team members is essential to ensure coordinated, patient-centred care.

In summary, soft skills are essential to teamwork in long-term care. Emotional intelligence, empathy, conflict management, psychological resilience, and trust-based communication form the basis for effective interprofessional collaboration. Research confirms that these competencies are associated with a lower risk of burnout, a better team climate, and safer patient outcomes [6, 8].

6. TEAM DYNAMICS AND PATIENT SAFETY IN LONG-TERM CARE

Patient safety in long-term care is a key indicator of service quality, closely linked to the team's operating model and organisational culture. Patient safety in long-term care facilities encompasses not only the prevention of clinical errors but also the reduction of the risk of falls, inappropriate medication administration, communication breakdowns, and other adverse events. Systematic reviews show that ensuring safety in the long-term care sector depends on complex factors, among which teamwork and safety culture play an important role [9]

Team dynamics include patterns of interaction, communication structure, level of trust, and ability to respond in a coordinated manner to changing situations. Kim [10], analysing patient safety measurement tools in nursing homes, found that safety culture assessment is often associated with team aspects such as information sharing, management support, and interprofessional collaboration. The study data show that institutions where employees have a positive view of team communication and collaboration practices have better safety indicators and a lower frequency of adverse events.

In long-term care, safety culture, shaped by daily team practice, is particularly important. A systematic review by Świtalski [9] emphasises that interventions focused on strengthening employee collaboration, improving communication, and implementing structured safety processes are associated with positive patient safety outcomes. The authors point out that strengthening safety culture in long-term care

facilities is not limited to developing formal policies but also requires consistent team involvement and collective responsibility.
Team dynamics are also related to the decision-making process and response to risk situations. Garay [11] emphasises in their systematic review that interventions aimed at strengthening nursing staff safety culture often include team training programs, reflective discussions, and structured meetings. Such measures help to improve mutual understanding, clarify responsibilities, and strengthen trust within the team. This is particularly important in long-term care, where subtle changes in patients' conditions can require a rapid, coordinated response.
An important aspect of team dynamics is the continuity of information transfer. Shift work is common in long-term care facilities, so inaccurate or poorly structured information transfer can pose a significant safety risk. Kim [10] emphasises that safety assessment tools often include indicators of communication between shifts and the quality of information transfer, which are considered essential elements of safety culture. This shows that structured information sharing is inseparable from team dynamics and patient safety.
In addition, the microclimate and mutual support within the team influence employee engagement in safety processes. Świtalski [9] notes that interventions that encourage active employee participation in safety initiatives and open discussion of incidents contribute to the long-term strengthening of a safety culture. Such an environment allows employees to feel responsible for the overall results and reduces the fear of reporting possible mistakes.
In summary, team dynamics in long-term care are essential for patient safety. Studies show that strengthening safety culture, structured information transfer, interprofessional collaboration, and team interventions are associated with better safety indicators [9, 10, 11]. Therefore, patient safety in long-term care should be viewed as the result of collective teamwork, which requires a systematic approach to organisational culture and team functioning.

7. THE IMPACT OF TEAMWORK ON SERVICE QUALITY AND SERVICE RECIPIENT EXPERIENCE

The quality of long-term care services is a multidimensional concept encompassing clinical outcomes, service continuity, safety, individualised care, and the subjective experience of service recipients. Teamwork in this context acts as a systemic quality assurance factor, as it is through interprofessional collaboration that interventions are coordinated, care is planned, and outcomes are evaluated. Systematic review data show that effective interprofessional collaboration is associated with better patient outcomes and positive patient-reported quality indicators [3, 13].
One of the most important aspects of long-term care quality is the individualisation of care. Since service recipients often have complex medical and psychosocial needs, an interprofessional team enables the integration of diverse professional perspectives and the development of a holistic care plan. An analysis of the effectiveness of the person-centred care model shows that individualised, person-centred care is associated with better quality of life and fewer behavioural symptoms in nursing homes [12]. This confirms that teamwork focused on individual needs directly impacts the experience of service recipients.
The experience of service recipients is closely related to how well the team works together. Kaiser [13] found that interprofessional collaboration positively impacts patient-reported outcomes, including satisfaction with services and perceived quality

of care. In long-term care, this manifests as consistent information provision, clearly coordinated decision-making, and patient involvement in care planning. When professionals communicate with each other and share responsibility, service users are more likely to experience care as consistent and focused on their needs.

Teamwork also influences service efficiency and clinical outcomes. A systematic review [3] emphasises that collaboration between long-term care physicians and other medical specialists is associated with better quality of care and improved quality-of-life indicators. This suggests that structured and clearly defined teamwork allows for more efficient use of available resources and reduces the risk of fragmented care.

Quality assurance in long-term care also includes specialised interventions designed to meet complex patient needs. Liu [14] analysed the effectiveness of palliative care interventions in long-term care facilities and found that coordinated, team-based interventions are associated with better quality-of-life indicators and greater satisfaction among service recipients and their relatives. This confirms that, in the long term, quality care is inseparable from interprofessional teamwork.

In addition to objective quality indicators, teamwork also influences service recipients' subjective assessments. Kim [10] emphasises that safety and quality assessment tools in nursing homes often include aspects of team communication and collaboration, which are considered important components of a culture of quality. This shows that service recipients' experience and perceptions of quality are closely related to the team's operating model.

In summary, teamwork in long-term care has a multifaceted impact on service quality and service recipients' experience. It contributes to individualised care, better clinical outcomes, improved quality of life, and greater satisfaction among service recipients [3,13]. Therefore, teamwork in the long-term care system should be viewed not only as an organisational principle, but also as an essential quality assurance strategy.

8. THE ROLE OF ORGANIZATIONAL CULTURE AND LEADERSHIP IN STRENGTHENING TEAMWORK

Organisational culture and leadership are key factors shaping the quality of teamwork in long-term care facilities. Organisational culture encompasses shared values, norms, behavioural patterns, and attitudes toward quality and safety, while leadership serves as the mechanism through which these values are put into practice. Research shows that leadership style is directly linked to service quality indicators, employee engagement, and patient outcomes [4]

Sfantou [4] emphasises in their systematic review that transformational leadership is associated with higher-quality supervision, a better team climate, and greater job satisfaction among employees. Transformational leaders encourage collaboration, maintain open communication, and involve employees in decision-making. In the context of long-term care, this leadership model is particularly important because patients' complex needs require coordinated, interprofessional interaction.

Organisational culture is also closely related to employee motivation and their attitude toward teamwork. A systematic review by Specchia [5] shows that positive leadership styles are associated with greater job satisfaction among nurses and a better organisational climate. Employee satisfaction and emotional engagement are important components of team interaction, as they determine the quality of cooperation and mutual trust. In long-term care, where teams work continuously and closely, the organisational environment significantly affects interaction stability.

The link between leadership and safety culture is particularly relevant in nursing homes. A study [2] showed that a strong safety culture is associated with managerial support, clear communication, and the promotion of teamwork. Managers who actively participate in quality improvement processes and support employee initiatives help create a safer, more coordinated team environment. This shows that leadership in long-term care is not only an administrative function but also an instrument for shaping culture.

[5] emphasise that leadership influences the work environment and, through it, patient outcomes and quality of care. A positive work environment encourages collaboration, clearly defined responsibilities, and professional autonomy, fostering effective teamwork. In long-term care facilities, such an environment helps to reduce staff turnover, strengthen mutual trust, and ensure a consistent care process.

Organisational culture also influences how a team responds to challenges and change. Leaders who encourage open dialogue, reflection, and learning from experience create an environment where team interaction becomes dynamic and focused on continuous improvement. Such a culture allows for more effective integration of new practices and adaptation to changing long-term care needs.

In summary, organisational culture and leadership are key factors that strengthen teamwork in long-term care. Transformational and supportive leadership, clear values, and a positive organisational climate create conditions for effective interprofessional collaboration, increase employee engagement, and improve service quality [2, 4, 5]. Therefore, leadership in long-term care organisations should be viewed as a strategic factor in strengthening teamwork and ensuring quality.

9. CONCLUSIONS

An analysis of scientific literature from 2018–2025 suggests that teamwork in long-term care is one of the most important prerequisites for a safe and high-quality service system. Interprofessional collaboration, based on clear communication, structured role distribution, and collective decision-making, is associated with better clinical outcomes, lower risk of adverse events, and greater satisfaction among service recipients.

A review of the literature has shown that both structural and interpersonal factors determine the effectiveness of team interaction. The quality of communication, continuity of information transfer, psychological safety, and clear common goals form the systemic basis for coordinated supervision. Soft skills- emotional intelligence, empathy, conflict management, and psychological resilience—strengthen the team microclimate and reduce the risk of burnout and errors.

Team dynamics and safety culture in long-term care are closely related. Organisations that promote open communication, collective responsibility, and reflection achieve more stable quality and safety indicators. This confirms that patient safety results from collective teamwork.

Finally, it was found that organisational culture and leadership act as strategic factors in strengthening teamwork. Supportive and empowering leadership creates an environment in which teamwork becomes a sustainable mechanism for improving quality. Therefore, in long-term supervision, teamwork should be viewed as an essential strategy for ensuring quality and safety, with a focus on people and their long-term needs.

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