

Enabling and supporting teamwork to secure safe and effective working environments

Professional Standards Authority Research Conference

Tuesday 18th November 2025

Presented by: Mary Costello & Lucy Ambler



Overview of the session

- Teamworking in healthcare, and regulatory context
- Our evidence sources in exploring teamwork
- Findings from HYMS research - barriers and enablers to team work
- Considerations for regulation

Teamworking is central to safe and effective healthcare



Improves **communication** and coordination across professions



Strengthens **psychological safety**, enabling staff to raise concerns and learn together.



Builds shared understanding and **collective responsibility** for patient care



Enables **patient safety, quality and morale**



Creates more **resilient** teams, improving outcomes for both patients and staff.

“I am a clinician, and I have a duty of care... it is teamwork and **if the teamwork is nice, I am fine to pick up extra work**”

- GP, 2024

Managing workloads interviews

Teamwork within a regulatory context

Updated in 2024, the GMC's *Good Medical Practice* states that it is essential for **good and safe patient care** that **doctors, physicians' associates and anaesthesia associates work effectively with colleagues** from other health and social care disciplines, both **within and between teams** and organisations.

Good medical professionals must:

- Treat colleagues with **kindness, courtesy and respect**
- Contribute to a positive **working and training environment**
- Demonstrate **leadership behaviours** and delegate appropriately
- Contribute to **continuity of care** and **keep patients safe**



Overview of evidence sources

Annual surveys



 **NATIONAL
TRAINING SURVEY**
2025 results

General
Medical
Council

The state of medical education
and practice in the UK
**Workplace experiences
2025**



General
Medical
Council

Bespoke research

FAIR TO REFER?



June 2019

Reducing disproportionality in fitness to
practise concerns reported to the GMC

This independent research conducted by Dr. Doyin Atewologun & Roger Kline, with Margaret Ochling, was commissioned by the General Medical Council to understand why some groups of doctors are referred to the GMC for fitness to practise concerns more, or less, than others by their employers or contractors and what can be done about it.

Caring for doctors
Caring for patients

How to transform UK healthcare
environments to support doctors and
medical students to care for patients

Professor Michael West and Dame Denise Coia

Feedback from
Outreach and
Employer Liaison
Advisor teams

Wider
intelligence and
feedback from
across the system

In 2020, COVID-19 saw healthcare teams rapidly adapt

Our National Training and Barometer surveys found that:



Many doctors agreed there had been a positive impact on **teamwork between doctors** (62%), and **multidisciplinary teamworking** (48%)



84% of **doctors in training** and 74% of **trainers** agreed that their workplace encouraged a **teamworking culture** between all healthcare professionals.



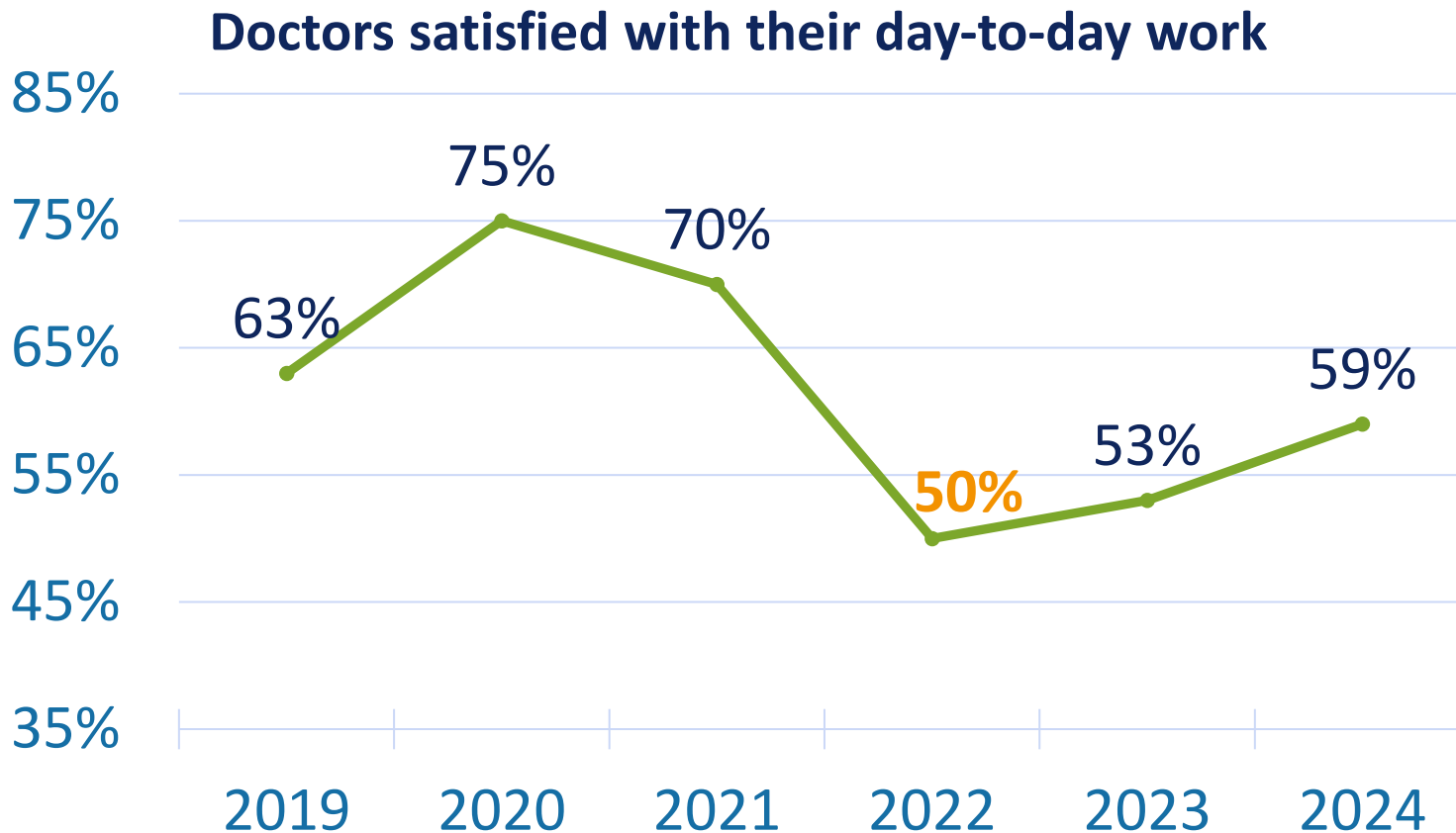
Two-fifths of doctors felt that **visibility of senior leaders** was positively affected (38%).

“[COVID] **bonded us together** even more really... occasionally we got a bit fractious, but we were **checking in on each other** and saying... **what can I do to support you?**”

- Senior clinical leader

Rapid decline in doctors' satisfaction post-pandemic

Whilst our Barometer survey reported high rates of doctors' satisfaction with their work during the pandemic, there was a significant decrease observed in 2022.

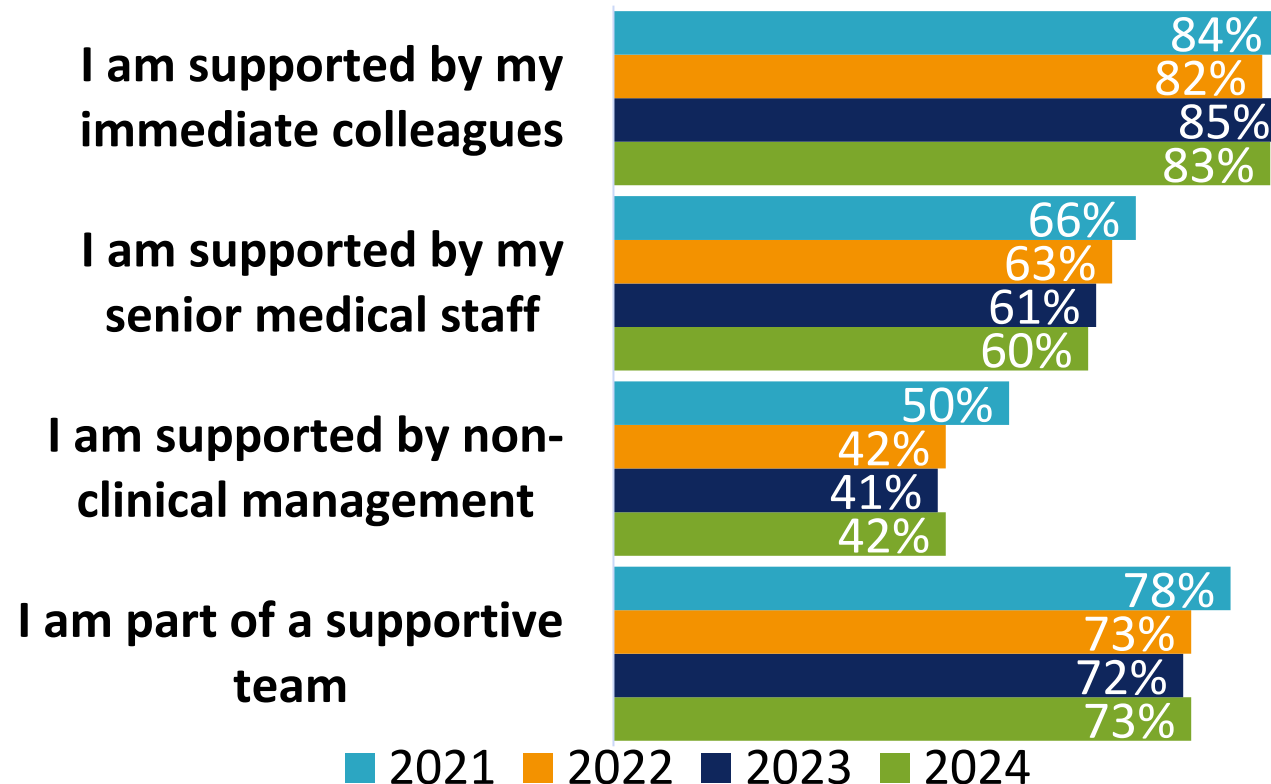


In 2024, the most common **reasons for satisfaction** given were:

- Finding work enjoyable & rewarding (30%)
- Liking & respecting their colleagues & team (14%)

Understanding doctors' individual experiences

We track doctors' experiences of receiving **support from colleagues**. The survey has shown variations **supportive culture as uneven** across different groups, levels, and interactions.



'Caring for doctors, Caring for patients' (2019) highlighted:

- A. **Autonomy/control** – to **have control** over our work lives and act consistently with our **work and life values**
- B. **Belonging** – to be **connected** to, cared for, and caring of others in the workplace, and feel **valued, respected and supported**
- C. **Competence** – to experience **effectiveness** and **deliver valued outcomes**, such as high-quality care

General
Medical
Council

Teamworking research

Getting a better understanding of
wider team members' experiences of
working with doctors

Teamworking:
**Understanding barriers
and enablers to
supportive teams in UK
health systems**

**Final report
November 2023**

Research team:

Dr Paul Crampton & Dr Amelia Kehoe (co-PIs)

Dr Amaya Ellawala, Dr Dilmini Karunaratne,
Prof Paul Tiffin (CIs)



Why good teamworking matters

- Healthcare is based on **teamwork activities** that relies not only on **individual skill** but on **supportive organisational systems**.
- Effective teamwork is vital to **safe, coordinated care**, yet pressures and **fragmented systems and delivery** can undermine collaboration.

Why we commissioned the research

- Our existing research has built a strong basis of understanding and trackability about ***individuals'* experiences of feeling supported** by teams and colleagues.
- We had less detail into ***how this works*** in reality ***within teams*** and the barriers and enablers to successful teamworking.

Aims and research questions

This study aimed to explore **how doctors work together and across wider teams**, to identify what **factors contribute to effective teamwork** and the elements that make it more **challenging**.



Research questions:

- **How do doctors work together**, and with others in teams across the UK health systems?
- What are the **enablers** of effective teamworking with, for, and about doctors?
- What are the **barriers** to effective teamworking with, for and about doctors and what factors lead to **team breakdown**?
- How have **external/contextual factors** shaped teamworking with doctors over time?
- What are the **implications for the GMC** to enhance doctors teamworking?

Teamworking:

Understanding barriers and enablers to supportive teams in UK health systems

Final report
November 2023

Research team:

Dr Paul Crampton & Dr Amelia Kehoe (co-PIs)

Dr Amaya Ellawala, Dr Dilmini Karunaratne,
Prof Paul Tiffin (CIs)



Key enablers of effective teamwork

*"You need **strong and consistent medical leadership** genuinely interested in the **development of people** under them... and **train the next generation**"*

- Regular interaction
- Clear handovers & care coordination
- Team understanding & support to raise concerns



Stability of organisation and structures



Effective communication



Understanding, supportive and approachable leaders/role models



Continuity and proximity



Clearly defined roles and awareness and understanding of team needs and values

*"We have quite a **small team**.. that's **stable**. Had the same*

- Understanding roles
- Conflict resolution
- Joint decision making and information sharing

- Shared goals, purpose and expectations
- Incentivising and celebrating team success

Key barriers to effective teamwork

“...a lot of the time we can’t prioritise [improving teamwork] because we’re so busy...”

- Unapproachable leadership
- Impact on team competence, decision-making & wellbeing
- Power imbalances and toxic cultures



High service demand and work pressures



Poor leadership



Poor communication



Lack of stability through transitory and rotational roles



Lack of identification of roles and needs of the whole team (inc. ED&I issues)

“It’s about those working relationships

- Siloed working
- Misunderstanding between teams
- Isolation due to relocation
- Lack of continuity & rota gaps
- Unable to ask questions

*funny bunch you lot.”
- Physician Associate*

Enablers and barriers to teamworking



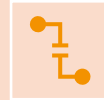
Continuity and proximity



High service demand and work pressures



Stability of organisation and structures



Lack of stability through transitory and rotational roles



Clearly defined roles and awareness/
understanding of team needs and values



Lack of identification of roles and needs of
the whole team (inc. ED&I issues)



Effective communication



Poor communication



Understanding, supportive and approachable
leaders/role models



Poor leadership

Reflecting on our role as regulators in supporting effective teamwork

Understanding our position and influence

Promoting good practice, positive leadership, and professional behaviours that embed team culture and support standards

Encouraging career development and lifelong learning

Recognising workforce realities

Doctors work across **multiple professional identities** – leading, coordinating, and collaborating.

High workloads and **power imbalances** between roles can hinder collaboration → importance of **clear standards** and **early interventions** to safeguard teams.

Highly **mobile and diverse workforce** brings different teamwork and learning experiences → need for **tailored induction and support**.

Acting through collaboration

Creating **open dialogues** across regulators, employers and professional bodies.

Sharing good practice and intelligence on working environments.

General
Medical
Council

Thank you for listening

Mary.Costello@gmc-uk.org

Lucy.Ambler@gmc-uk.org

Teamworking:
Understanding barriers
and enablers to
supportive teams in UK
health systems

Final report
November 2023

Research team:

Dr Paul Crampton & Dr Amelia Kehoe (co-PIs)

Dr Amaya Ellawala, Dr Dilmini Karunaratne,
Prof Paul Tiffin (CIs)

www.hyms.ac.uk/research/research-centres-and-groups/hpeu

© 2018 Hull York Medical School

FAIR TO REFER?



June 2019
**Reducing disproportionality in fitness to
practise concerns reported to the GMC**
This independent research conducted by Dr. Doyin Atewologun & Roger Kline, with Margaret Ochieng, was commissioned by the General Medical Council to understand why some groups of doctors are referred to the GMC for fitness to practise concerns more, or less, than others by their employers or contractors and what can be done about it.

**The state of medical education
and practice in the UK**
**Workplace experiences
2025**



General
Medical
Council

**Caring for doctors
Caring for patients**

**How to transform UK healthcare
environments to support doctors and
medical students to care for patients**

Professor Michael West and Dame Denise Coia