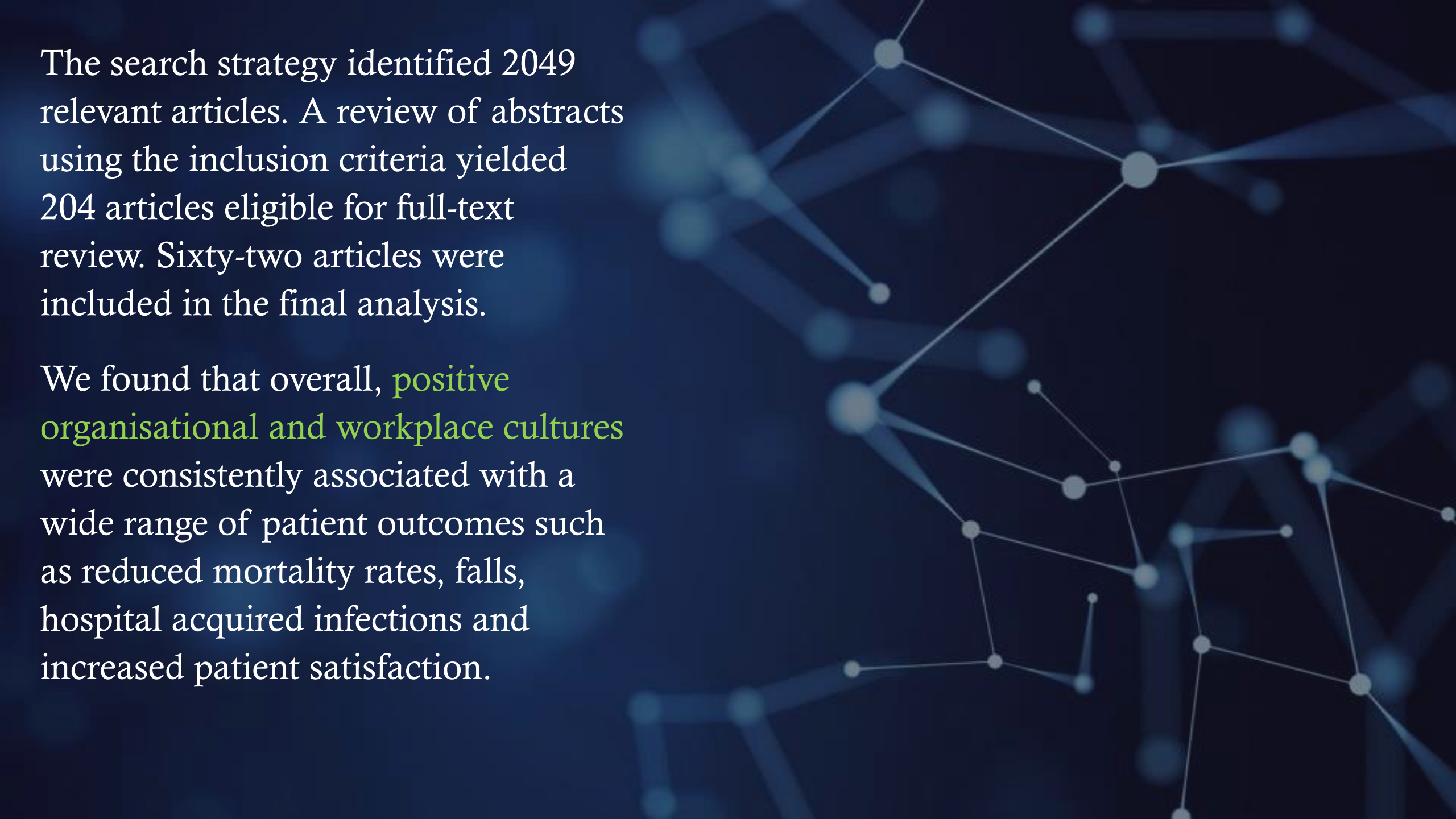




# Highlights

“Association Between  
Organisational and  
Workplace Cultures, and  
Patient Outcomes: Systematic  
Review”

*(BMJ, 2017)*



The search strategy identified 2049 relevant articles. A review of abstracts using the inclusion criteria yielded 204 articles eligible for full-text review. Sixty-two articles were included in the final analysis.

We found that overall, **positive organisational and workplace cultures** were consistently associated with a wide range of patient outcomes such as reduced mortality rates, falls, hospital acquired infections and increased patient satisfaction.



We define **culture** in a summarised way, as the sum of jointly held characteristics, values, thinking and behaviours of people in workplaces or organisations.



We found that organisational and workplace cultures were correlated with patient outcomes in over 90% of studies.



Culture was positively associated with a range of system-related patient outcomes. These comprised four broad, systems-based outcomes: mortality rates, failure to rescue, readmission rates and adverse events/medication errors. They also included well-being outcomes, notably, patient satisfaction, quality of life and patient mood.



More **specific clinical outcomes related to culture** were pressure ulcers, falls, hospital acquired infections, depressive symptoms, pulmonary embolism/deep vein thrombosis, incontinence, symptom burden at the end of life and physical and mental health status.







Almost three in four (74.2%) studies reported exclusively positive associations, or a mixture of positive associations and no associations, between culture and patient outcomes.



For example, hospital-based cross-sectional studies found **patient mortality rates were nearly 48% lower** in hospitals with better work environments, and **surgical mortality rates were >60% higher** in hospitals with poor work environments.





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