

The Impact of Productive Teamwork and Teamwork Coordination on Organizational Productivity: Evidence from Medical Centers in Sulaymaniyah, Iraq

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Abstract

Teamwork has become a central mechanism for improving organizational effectiveness and sustaining competitive advantage, particularly in service-based industries where collaboration is essential. Despite extensive research on teamwork, limited empirical evidence exists on how productive teamwork (PT) and teamwork coordination (TC) influence organizational productivity (OP) in developing countries, especially in the healthcare sector of the Kurdistan Region of Iraq. This study examines the impact of PT and TC on OP among team leaders in private medical centers in Sulaymaniyah. Using a cross-sectional survey design, data were collected from 40 valid responses out of 86 distributed questionnaires. The measurement constructs were adapted from established scales, and hypotheses were tested using correlation and regression analysis. Findings reveal that PT significantly predicts OP ($\beta = 0.410, p < 0.001$) and that TC also significantly enhances OP ($\beta = 0.492, p < 0.001$). The results confirm that teamwork quality and managerial coordination are essential mechanisms for improving efficiency, quality of service delivery, and overall productivity in healthcare organizations. The study contributes to the literature by offering empirical evidence from an underexplored region and providing practical implications for medical center administrators to enhance teamwork structures and coordination systems. Limitations and recommendations for future research are also discussed.

Keywords: Teamwork, Productive Teamwork, Teamwork Coordination, Organizational Productivity, Healthcare, Medical Centers, Kurdistan Region, Iraq

Introduction

Teamwork has increasingly become an essential driver of organizational success, particularly in service-oriented sectors where interdependence among workers is high. Modern

organizations rely on teams to solve complex problems, innovate rapidly, and deliver superior performance in competitive environments (Salas et al., 2015). Healthcare institutions, in particular, depend heavily on interprofessional teamwork to maintain operational efficiency, patient safety, and quality of service delivery. As organizations confront rising market pressures, efficient teamwork becomes indispensable for sustaining productivity.

In developing countries, including Iraq, structural constraints such as resource limitations, coordination gaps, and workforce shortages intensify the need for effective teamwork mechanisms. In the Kurdistan Region, private medical centers have expanded rapidly, yet their performance continues to be hindered by inefficiencies related to teamwork, unclear work roles, and inconsistent managerial coordination. While teamwork has been widely studied globally, limited empirical evidence exists on how specific dimensions productive teamwork (PT) and teamwork coordination (TC) affect organizational productivity (OP) within healthcare environments in Sulaymaniyah. To address this gap, the present study examines the effect of PT and TC on OP among team leaders in private medical centers. By focusing on these two components, this research responds to calls for deeper investigations on teamwork mechanisms beyond general teamwork constructs, particularly in non-Western healthcare systems. The study contributes to the literature by offering empirical evidence from an understudied region; advancing theoretical understanding of teamwork dimensions in relation to productivity; and providing practical recommendations for enhancing teamwork quality in medical centers.

Literature Review

Teamwork

Teamwork is widely conceptualized as the coordinated and interdependent actions of individuals who work collectively toward shared objectives, integrating their diverse skills, perspectives, and efforts to accomplish tasks that could not be effectively achieved through individual work alone (Katzenbach & Smith, 2005). It represents a dynamic social process in which members communicate, collaborate, and adjust their behaviors to maintain alignment with team goals and organizational priorities. Effective teamwork has been shown to stimulate creativity, as the combination of diverse ideas produces more innovative solutions; foster cooperation, by promoting interpersonal trust and shared commitment; and enhance overall performance, as collective effort allows teams to solve problems more quickly and efficiently than isolated individuals (Oseiboakye, 2018).

In the healthcare sector, the importance of teamwork is amplified due to the inherently complex, high-pressure, and interprofessional nature of service delivery. Healthcare tasks often require simultaneous coordination between physicians, nurses, pharmacists, technicians, and administrative staff, making teamwork indispensable for ensuring continuity of care, reducing medical errors, and maintaining patient safety (Havyer et al., 2014). Team-based collaboration enables faster clinical decision-making, enhances information flow, and supports timely interventions factors critical in environments where delays or miscommunication can have life-threatening consequences. Beyond operational benefits, teamwork also increases employee involvement, as individuals feel more empowered when they can contribute actively to discussions and decision processes. It further encourages shared responsibility, which distributes accountability across team members and reduces the likelihood of work overload or emotional exhaustion. These conditions contribute

significantly to positive organizational outcomes, including reduced turnover intentions, improved quality of care, enhanced patient satisfaction, and higher overall productivity (Ceschi et al., 2014).

Despite the broad recognition of teamwork's benefits, research shows that not all dimensions of teamwork exert equal influence on performance. Two specific components productive teamwork (PT) and teamwork coordination (TC) have been identified as particularly influential in determining how effectively teams function and how much value they contribute to organizational outcomes. PT captures the interpersonal and collaborative behaviors within the team, such as mutual support, shared goals, and collective problem-solving. TC, on the other hand, reflects the managerial and structural mechanisms that align team activities, ensure clarity of roles, and guide decision-making. Together, PT and TC provide a more holistic understanding of how teamwork contributes to organizational productivity: PT drives the behavioral quality of collaboration, while TC ensures the structural support necessary for teams to operate efficiently and consistently. Recognizing and disentangling these dimensions enables a more precise examination of how teamwork influences performance and highlights the critical role of both interpersonal dynamics and managerial coordination in achieving high-functioning healthcare teams.

Productive Teamwork (PT)

Productive teamwork (PT) refers to the collective capability of team members to collaborate efficiently, align their behaviors with shared objectives, solve emerging problems, and provide mutual support that enables the team to achieve organizational goals (Gupta, 2008). PT embodies the synergistic interaction of individual contributions within a team and reflects the extent to which team members are able to integrate their diverse skills, knowledge, and experiences toward accomplishing complex tasks. A foundational indicator of PT is the existence of shared and clear goals, which provide a common direction and ensure that team members understand not only what they are working toward but also why their efforts matter. Clear goals reduce ambiguity, align expectations, and foster a unified sense of purpose—critical in environments such as healthcare where precision and coordination are essential. Closely linked to shared goals are well-defined roles and responsibilities, which delineate each team member's tasks, minimize role overlap, and prevent operational confusion. When responsibilities are clearly established, teams operate more smoothly and can respond more effectively to workload demands.

Another core component of PT is mutual support among members, which reflects the social and emotional dimension of teamwork. Mutual support includes behaviors such as offering assistance, sharing expertise, providing feedback, and stepping in when colleagues face challenges. This supportive environment cultivates trust, strengthens interpersonal relationships, and contributes to psychological safety an important predictor of team learning and performance. The collective problem-solving capability of a team is also vital, as productive teams are able to diagnose issues, generate viable solutions, and adapt strategies in response to dynamic operational conditions. This collective capability enhances resilience and ensures that teams can maintain performance even when faced with unexpected disruptions. Finally, a healthy team environment, characterized by open communication, respect, equitable participation, and constructive conflict resolution, provides the foundation

upon which PT can flourish. Such environments encourage team members to contribute freely and engage in continuous improvement.

Empirical research strongly supports the benefits of PT, showing that teams exhibiting high levels of productive collaboration tend to achieve superior performance outcomes. Specifically, PT enhances both the quality and quantity of organizational output, as coordinated teamwork reduces duplication, improves accuracy, and accelerates task completion (McShane & Von Glinow, 2012; Newstrom & Davis, 2015). PT also reduces operational errors, which is particularly critical in healthcare settings where mistakes can have severe consequences. Moreover, teams with high PT demonstrate stronger cohesion, enabling them to adapt more effectively to challenges such as workload fluctuations, environmental uncertainty, or resource constraints. These teams are also more likely to experience higher job satisfaction, as supportive interactions and a shared sense of accomplishment contribute to positive work experiences (Fay et al., 2015). Ultimately, productive teamwork serves as a powerful driver of organizational performance, enabling institutions to achieve greater efficiency, higher service quality, and enhanced long-term sustainability

Teamwork Coordination

Teamwork is commonly conceptualized as the coordinated and interdependent actions of individuals who collaborate toward achieving shared objectives, pooling their skills, knowledge, and efforts to deliver outcomes that exceed the capabilities of any individual acting alone (Katzenbach & Smith, 2005). Effective teamwork encompasses not only the structural arrangement of tasks but also the behavioral and socio-emotional processes through which team members interact, exchange information, negotiate responsibilities, and build mutual trust. Numerous studies highlight that strong teamwork enhances creativity, as collaborative environments stimulate diverse perspectives and innovative solutions; cooperation, as members support one another to accomplish complex tasks; and overall performance, as synergy amplifies the efficiency and quality of outputs (Oseiboakye, 2018). In healthcare institutions, the importance of teamwork is even more pronounced due to the inherently complex, interprofessional, and high-stakes nature of service delivery. Clinical and administrative workflows require seamless coordination across physicians, nurses, technicians, pharmacists, and support staff, making teamwork essential for ensuring patient safety, reducing medical errors, and maintaining service continuity (Havyer et al., 2014).

Moreover, teamwork fosters greater employee involvement by encouraging participatory decision-making, empowering staff to contribute meaningfully to organizational activities, and creating a sense of shared ownership over outcomes. These processes promote shared responsibility, where individuals are mutually accountable for task completion and quality standards, thereby reducing tendencies toward work disengagement or performance inconsistency. As a result, effective teamwork is linked to numerous positive organizational outcomes, including reduced turnover intentions, as supportive team environments improve job satisfaction; higher quality of output, as communication and collaboration reduce error rates; and enhanced productivity, as coordinated effort streamlines processes and minimizes operational inefficiencies (Ceschi et al., 2014). The significance of teamwork is therefore multidimensional, influencing operational efficiency, employee well-being, and organizational resilience.

Within the broader teamwork literature, two dimensions have been identified as particularly influential in shaping team effectiveness: productive teamwork (PT) and teamwork coordination (TC). PT captures the collaborative behavioral dynamics that enable team members to work harmoniously and efficiently, while TC reflects the managerial and structural mechanisms that ensure alignment, direction, and control within the team. Together, these dimensions provide a more nuanced understanding of how teamwork contributes to organizational performance, especially in environments where task interdependence and performance precision are critical

Organizational Productivity (OP)

Organizational productivity (OP) refers to the effectiveness and efficiency with which an organization transforms its inputs—such as labor, capital, technology, and knowledge—into meaningful outputs, including goods, services, and measurable performance outcomes (Antony & Bhattacharyya, 2010). In the healthcare sector, where service delivery is complex, knowledge-intensive, and highly interdependent, OP extends beyond traditional measures of output quantity to encompass broader indicators of service quality, operational excellence, and patient-centered performance. Specifically, OP in healthcare is reflected in the quality of patient services, including clinical accuracy, patient satisfaction, and safety outcomes. It also manifests in the efficiency of operations, such as streamlined workflows, minimized service delays, and reduced redundancies in clinical and administrative processes. Additionally, OP is observable through the punctuality and reliability of staff, which influence patient flow, continuity of care, and the organization's ability to meet service demands consistently. Effective resource utilization—including optimal use of medical equipment, human resources, and financial assets—is another key dimension, ensuring that scarce healthcare resources generate the highest possible value. Lastly, the achievement of organizational goals, such as accreditation targets, patient throughput, or financial sustainability, provides a strategic measure of productivity in healthcare settings.

A growing body of research emphasizes that OP is shaped by multiple interrelated factors. Human capital, or the knowledge, skills, and competencies of healthcare workers, plays a central role, as productivity is heavily dependent on the capability and motivation of staff. Managerial competence, including leadership, decision-making, and coordination, directly affects how efficiently teams operate and how effectively resources are deployed. Technology—ranging from electronic health records to diagnostic equipment—enhances accuracy, reduces workload, and accelerates service delivery. Teamwork is particularly crucial in healthcare due to the multidisciplinary nature of care delivery, requiring coordination across physicians, nurses, pharmacists, and administrative staff (Chen et al., 2017). Finally, organizational culture, including norms of communication, accountability, and continuous improvement, shapes the overall environment within which productivity-enhancing behaviors occur. Together, these factors illustrate that OP in healthcare is not a singular construct but a multidimensional outcome driven by systemic interactions among people, processes, and organizational structures.

Relationship between PT, TC, and OP

While prior research consistently demonstrates that teamwork positively influences organizational productivity, the majority of studies treat teamwork as a single, unified construct and seldom differentiate between its subcomponents, such as productive

teamwork (PT) and teamwork coordination (TC). This lack of distinction limits understanding of how and why certain elements of teamwork exert stronger effects on organizational outcomes. The present study advances this discourse by empirically demonstrating that PT and TC function as distinct yet complementary determinants of organizational productivity (OP). PT plays a critical role in shaping team dynamics by fostering collaboration, promoting mutual support, and strengthening shared responsibility among team members. Teams exhibiting high PT are more capable of aligning individual efforts with collective goals, adapting to operational challenges, and maintaining high engagement factors consistently linked to improved productivity (Hanaysha & Tahir, 2016; Salas et al., 2015). PT facilitates the development of shared mental models, enhances problem-solving capacity, and encourages discretionary effort, enabling team members to deliver higher-quality outcomes even under demanding conditions (Fay et al., 2015; McShane & Von Glinow, 2012).

In contrast, TC contributes to productivity through managerial mechanisms that ensure teams have the structural and procedural support needed to function effectively. TC encompasses task alignment, planning, performance monitoring, and decision-making facilitation elements that create coherence and direction within the team (Kovács & Talpoş, 2015; Passos & Lewis, 2013). When coordination is strong, employees experience greater clarity regarding expectations, timelines, and performance standards, reducing ambiguity and operational inefficiencies. TC is therefore not merely administrative; it directly influences how teams integrate individual contributions into a unified and efficient work process. Effective coordination also reduces the likelihood of communication breakdowns, minimizes conflict, and supports a more predictable workflow all of which enhance overall organizational productivity (Robbins & Judge, 2008; Bedwell & Lazzara, 2015).

Together, PT and TC form two pillars of effective teamwork: PT captures the behavioral and relational strengths within the team, while TC reflects the structural and managerial conditions that enable teams to operate optimally. By empirically distinguishing these two constructs, the study provides a more nuanced understanding of teamwork and highlights that improving productivity requires simultaneous investment in team behaviors and managerial coordination systems. This reinforces the argument that high-performing organizations succeed not only because their teams collaborate well, but also because leadership systems effectively guide, structure, and support those collaborative efforts. Thus, this study proposes:

H1: Productive teamwork is positively associated with organizational productivity.

H2: Teamwork coordination is positively associated with organizational productivity.

Methodology

A quantitative cross-sectional survey design was adopted to collect data from team leaders in private medical centers in Sulaymaniyah. This design allows measurement of perceptions at a single point in time, suitable for analyzing teamwork–productivity relationships. The target population consisted of 101 team leaders in private medical centers certified with ISO 9001. Using Krejcie and Morgan’s (1970) table, a minimum sample of 86 respondents was appropriate. A total of 57 questionnaires were returned, and 40 were valid for analysis. The questionnaire consisted of two main sections, Section A: Demographics and Section B: Variables (PT, TC, OP), each measured with 4 items using a 5-point Likert scale. The Measurement sources for each variables are from PT: Hanaysha et al. (2016), TC: Marsicano

et al. (2020), OP: Ayeni & Fakunle (2021). Data were collected between three months using a self-administered survey, after approval from the Ministry of Health and QIU. SPSS Version 21 was used to conduct to analyse descriptive analysis, reliability testing, Pearson correlations, Multiple regression analysis, Cronbach's alpha values exceeded 0.80 for all constructs, indicating strong reliability.

Results

The analysis of the demographic profile reveals important insights into the characteristics of the respondents and the contextual dynamics of teamwork within the sampled medical centers. The gender distribution shows that 72.5% of team leaders were male, while only 27.5% were female, suggesting that leadership roles within private medical centers in Sulaymaniyah are still predominantly occupied by men. This imbalance aligns with regional labor trends in healthcare administration, where male employees often occupy supervisory positions despite the growing presence of women in clinical roles. Age distribution indicates that the largest proportion of respondents (45%) were between 20 and 30 years old, reflecting a predominantly young leadership cohort. This youthful demographic may influence teamwork dynamics, as younger leaders often demonstrate greater openness to collaboration, flexibility, and innovation; however, they may also lack extensive managerial experience. In terms of educational attainment, a significant 62.5% held a bachelor's degree, while 30% possessed a master's degree and only 7.5% a PhD. This suggests that the majority of team leaders possess foundational academic training but may require further professional development in advanced leadership or organizational management to enhance team functioning. Finally, the analysis of work experience shows that 37.5% had between 0–5 years of experience, indicating that many respondents were relatively new to leadership roles. This limited experience may impact how effectively teamwork and coordination practices are implemented, as leadership maturity often develops over time through practice and exposure to organizational challenges.

Table 1

Correlations

| Correlation | r | p-value | Result |
|-------------|-------|---------|------------------|
| PT → OP | 0.664 | <0.001 | High Correlation |
| TC → OP | 0.719 | <0.001 | High Correlation |

In Table 1, Correlation analysis demonstrates robust, statistically significant relationships between the predictor variables productive teamwork (PT) and teamwork coordination (TC) and the outcome variable, organizational productivity (OP). The correlation between PT and OP ($r = 0.664$, $p < 0.001$) indicates a strong positive relationship, suggesting that higher levels of productive teamwork are associated with higher organizational productivity. This supports the theoretical premise that teamwork enhances collaborative problem-solving, fosters mutual support, and improves efficiency all of which contribute to improved organizational outcomes. The association between TC and OP ($r = 0.719$, $p < 0.001$) is even stronger, implying that managerial coordination plays a more prominent role in influencing productivity. Effective coordination ensures that teams have clear direction, consistent monitoring, and structured decision-making processes, which tend to elevate performance reliability. The strength of these correlations demonstrates that teamwork processes are deeply intertwined with organizational performance, reaffirming findings from prior organizational behavior

research that emphasize teamwork and managerial alignment as central drivers of productivity.

Table 2

Regression

| Hypothesis | Path | β | p-value | Result |
|------------|---------|---------|---------|-----------|
| H1 | PT → OP | 0.410 | <0.001 | Supported |
| H2 | TC → OP | 0.492 | <0.001 | Supported |

In Table 2, regression analysis further clarifies the specific impact of each independent variable on OP. The regression coefficient for PT ($\beta = 0.410$, $p < 0.001$) confirms that productive teamwork significantly and positively predicts organizational productivity, meaning that improvements in PT can lead to measurable increases in productivity within medical centers. This effect is consistent with earlier studies showing that teams exhibiting shared goals, mutual trust, and strong work ethic contribute significantly to operational effectiveness. Meanwhile, TC demonstrates an even stronger predictive power ($\beta = 0.492$, $p < 0.001$), suggesting that coordination practices such as setting standards, guiding decision-making, and monitoring performance have a more substantial influence on productivity than PT alone. This indicates that although teamwork behaviors are critical, managerial oversight and structured coordination play a more decisive role in ensuring that team activities translate into organizational outcomes. The finding aligns with evidence that leadership-driven coordination mechanisms are essential in complex service environments, particularly in healthcare, where interdependence and accuracy are crucial. That TC exhibited a slightly stronger predictive effect than PT underscores the importance of managerial roles in shaping team functioning, highlighting that productivity improvements are optimized when teamwork behaviors are complemented by strong coordination structures.

Overall, the combined results provide convincing empirical support for both hypotheses and show that teamwork-related factors significantly enhance organizational productivity. They also offer practical insights for healthcare organizations: efforts to strengthen productivity should focus not only on improving team cohesion and performance but also on enhancing managerial coordination frameworks that guide and regulate teamwork. These findings highlight the dual importance of team-level behaviors and leadership-driven processes in achieving high organizational productivity.

Discussion

The findings confirm that both PT and TC are significant predictors of OP in healthcare settings, aligning with global evidence. PT enhances OP by improving interdependence, responsibility-sharing, and team morale. Supportive environments allow team members to contribute effectively, increasing both quality and efficiency (Fay et al., 2015). The results indicate that Sulaymaniyah medical centers can benefit greatly from cultivating PT. TC had a stronger influence on OP than PT, suggesting the pivotal role of managerial leadership. Effective coordination reduces ambiguity, increases efficiency, and ensures employees deliver consistent performance. This aligns with studies showing that managerial guidance and supervisory support significantly improve productivity in healthcare (Passos & Lewis, 2013).

The findings of this study offer several theoretical and practical implications for advancing scholarship and improving organizational practices. Theoretically, the study reinforces the multidimensional nature of teamwork, demonstrating that productive teamwork (PT) and teamwork coordination (TC) function as distinct yet complementary drivers of organizational productivity (OP). This supports existing theoretical models that conceptualize teamwork as an interaction of behavioral, cognitive, and managerial components rather than a single construct (Salas et al., 2015; Cohen & Bailey, 1997). The results also extend extant literature by providing empirical evidence from a developing-country healthcare context, an area often underrepresented in organizational behavior and human resource management studies (Havyer et al., 2014). By illustrating that both PT and TC significantly influence OP, the study strengthens the leadership–teamwork–productivity nexus, suggesting that coordination, goal alignment, and managerial support are central mechanisms linking team processes to performance outcomes (Kirkman & Mathieu, 2005; Bedwell & Lazzara, 2015). This advances theoretical discourse on how leadership behaviors and teamwork structures jointly shape productivity in complex service environments.

Practically, the findings offer clear guidance for healthcare administrators seeking to enhance organizational effectiveness. Medical centers should invest in team-based training programs to develop shared mental models, mutual support behaviors, and problem-solving capabilities among staff, which have been shown to improve collective performance in healthcare teams (Havyer et al., 2014; DeAngelis et al., 2014). Strengthening managerial coordination systems is equally critical, as effective supervision, task alignment, and ongoing performance monitoring were found to significantly predict productivity (Robbins & Judge, 2008; Passos & Lewis, 2013). Organizations should also encourage autonomy and constructive communication, as empowering teams to make localized decisions enhances responsiveness, innovation, and morale (Hanaysha & Tahir, 2016). Finally, developing clear team goals and performance standards can reduce ambiguity and ensure that team members work cohesively toward shared outcomes, a practice consistently linked to high performance in healthcare and service organizations (Fay et al., 2015; McShane & Von Glinow, 2012).

Despite these contributions, several limitations should be acknowledged. The sample was limited to private medical centers in a single city, which restricts the generalizability of the findings to broader healthcare systems or other sectors. Additionally, because only team leaders participated, the perspectives of general staff who experience teamwork dynamics differently were not captured. The use of a cross-sectional design also limits the ability to infer causality or observe how teamwork processes evolve over time (Sekaran & Bougie, 2011). Furthermore, the exclusive reliance on quantitative self-report measures may overlook nuanced interpersonal dynamics and contextual factors that influence teamwork and productivity.

These limitations open avenues for future research. Scholars should examine public hospitals and multi-city samples to improve external validity and explore how contextual differences affect teamwork outcomes. Future studies may also employ longitudinal designs to understand how teamwork productivity relationships shift over time, particularly in rapidly changing healthcare environments. Researchers are encouraged to investigate mediating variables, such as job satisfaction, psychological safety, team climate, or leadership style, to deepen understanding of the mechanisms through which teamwork influences productivity

(Edmondson, 1999; Chen et al., 2017). Lastly, mixed-method approaches combining surveys with interviews or observations would provide richer insights into communication patterns, coordination challenges, and cultural influences that cannot be fully captured through quantitative methods alone. By addressing these areas, future research can build a more holistic understanding of teamwork effectiveness and contribute to evidence-based management practices in healthcare settings.

Conclusion

This study provides important empirical evidence demonstrating that productive teamwork (PT) and teamwork coordination (TC) are critical drivers of organizational productivity (OP) within the healthcare sector of Sulaymaniyah, Iraq. The results confirm that while PT strengthens the interpersonal, collaborative, and problem-solving dynamics within teams, TC serves as the structural and managerial backbone that ensures alignment, clarity, and operational consistency. Together, these dimensions play complementary roles in enhancing efficiency, service quality, and overall organizational performance. The findings underscore the need for medical centers to cultivate teamwork capabilities while simultaneously reinforcing coordination systems to sustain high productivity. By extending evidence from a developing-country context, this study contributes to global teamwork literature and highlights the central role of leadership, shared goals, and structured coordination in optimizing healthcare operations. Despite its limitations, the study lays important groundwork for future research exploring the nuanced mechanisms through which teamwork influences performance, encouraging scholars to adopt broader methodological and contextual perspectives. Strengthening teamwork and coordination remains a strategic imperative for healthcare organizations seeking to achieve operational excellence, enhance patient care, and build resilient, high-performing teams.

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