Teamwork and Patient Care in Health Services

Office of Health Care Management
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Attracting and retaining
Information overload
Cooperative working
Involvement
Building trust
Innovation and change
Leadership
Job Satisfaction and Stress in Britain

- In the ten years of the 1990s, job satisfaction of workers fell and stress increased.
- Levels of satisfaction fell particularly in the public sector (but generally higher levels of satisfaction).
- People in smaller organisations and women are more satisfied with their jobs.

www.oswald.co.uk
EMPLOYEE SATISFACTION & COMPANY PRODUCTIVITY (18 MONTHS LATER)

- Prior productivity: 52%
- Employee satisfaction: 25%
- Other factors (sector etc.): 23%
WHICH MANAGERIAL PRACTICES MOST POWERFULLY PREDICT COMPANY PRODUCTIVITY?

- HRM: 18%
- R & D: 6%
- Strategy: 3%
- Quality: 1%
- Technology: 1%
Research Question

What is the link between people management practices and patient care in hospitals?
Research Methods

- Interviews and questionnaires: 61 trusts
- Training
- Appraisal: % in formal teams
- Controls: size & health profile; number of doctors; mortality
Methods

- size of training budget
- spend over statutory requirements
- access to tailored, formal training policy for each occupational group
- percentages of each occupational group having 3 days formal off-the-job training in previous year
- frequency of training needs analysis for each occupational group
- percentages doing NVQs
Methods

Appraisal:

- priority attached to appraisal
- % of staff in each group received appraisals in last year
- frequency
- % of appraisers receiving training
- methods used to evaluate appraisals and systems of appraisal
Methods

Controls: size & health profile; number of doctors; mortality

- hospital size
- number of doctors per bed
- local health profile from Health Authority data:
  - deaths (all causes) 15-64 standardised
  - deaths from cancer
  - deaths from circulatory disease
  - emergency re-admissions
  - emergency admissions
Methods

- Does the team have clear overall objectives?
- Do team members have to work interdependently to achieve these objectives?
- Do team members have clear roles within the team?
- Do others in the organization see the team as a team?
Results

HR accounts for 33% of hospital variance in mortality

1. Appraisal
2. Training
3. Staff in formal teams
% deaths after admission for hip fractures

Sophistication of appraisal system

- Low
- Moderate
- High
Mean mortality index

% staff working in teams

- <40%
- 40-59%
- 60-79%
- 80-99%
- 100%
Implications

- A significant improvement in appraisal is associated with a reduction of 12.3% of the number of deaths after hip fracture.
- 25% more staff working in teams is associated with 275 fewer deaths per 100,000 following emergency surgery or 7.1% of the total number of deaths following emergency surgery.
Additional Control Variables

- GP Facilities per 100,000
- NHS facilities per 100,000
- Income
- Prior mortality 72%
Results …

- Change in mortality
- Doctors/100 beds
- HRM overall
- Appraisal
- HR director Voting
- Case studies support
- Implications …

No controls significant
A Comparison of GHQ-12 Findings from the BHPS\(^1\) and the NHS Sample

<table>
<thead>
<tr>
<th>Source</th>
<th>Status</th>
<th>Sample Size</th>
<th>Percent Case</th>
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</thead>
<tbody>
<tr>
<td>BHPS</td>
<td>Employed</td>
<td>5,001</td>
<td>17.8%</td>
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<tr>
<td>NHS</td>
<td>Employed</td>
<td>11,291</td>
<td>26.8%</td>
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Team working and stress

- Not in a team
- Pseudo team
- Work in a team
Benefits due to:

- Role clarity
- Social support
- Buffered from organisation
- Humans in groups
Clear shared objectives

Participation

Emphasis on quality of patient care

Support for innovation
Health Care Team Effectiveness

Similar findings in CMH teams
Health Care Team Effectiveness

External Ratings of Innovation

Similar findings in CMH teams
Health Care Team Innovation

Innovation in Quality of Care

Professional Diversity
Health Care Team Effectiveness

Retention and turnover

- Within health care, those working in well functioning teams are more likely to stay working in their settings than those working in poorly functioning teams.
Why Team-based Working?

- Performance
- Involvement
- Well-being
- Change and innovation
Failures of team-based working

Cooperation across teams

Autonomy and responsibility

Building team organizations

The tasks for teams
How to promote effectiveness and innovation in teams ...
1. Select people with diverse experience and knowledge to form the team
2. A team task and one that challenges the team
3. Clear leadership
4. Dance together constantly to pass the 20 second test
5. Encourage constructive conflict and dissent – agreeing to disagree
6. Regularly check that the team is functioning well (role of leadership)
7. Value errors and problems
8. Emphasise team creativity not just productivity ... and stop work.
Reflexivity and Team Effectiveness

- Teams will be more effective and innovative to the extent that they reflect upon their objectives, strategies, processes and environments and adapt these aspects of their task worlds accordingly.
9. Bonding *and* bridging – inter-team relationships
Train to work in teams
Knowledge, skills and attitudes for customer teamwork

- **KSAs for teamwork:** communication
- **KSAs for teamwork:** goal setting and performance management
- **KSAs for teamwork:** planning and co-ordination
- **KSAs for teamwork:** collaborative problem-solving
- **KSAs for teamwork:** conflict resolution
Introducing team-based working

1. Audit of organisational structures and culture
2. Audit of business environment
3. Identification of types and locations of teams
4. Implementation of support systems
5. Implementation of team management and leadership systems
6. Implementation of team based working
7. Evaluation and maintenance systems
Organizational Supports for Teams

- Setting clear objectives for teams and the organization with a primary focus on patient care
- Communication and information systems
- Education and training systems
- Feedback systems
- Liaison and integration
- Process assistance
- Recruitment, appraisal and selection policies.
Team-organizational Relationships

- Negotiate versus comply with organizational demands
- Challenge versus accept organizational limitations
- Challenge versus accept organizational incompetence
- Communicate independence versus dependence
- Rely appropriately versus heavily on organizational direction
Revolutionary Teams

- Have a clear vision
- Form small team of committed colleagues
- Develop a clear, consistent and coherent message linked to patient care
- Repeat, repeat, repeat the message
- Listen openly to the views of others
- Be persistent whatever the obstacle
- Ensure participation
- Be prepared for conflict
The Human Pathology

- Rwanda
- Northern Ireland
- Customers?
- Middle East
- Intergroup Prejudice
- Race
- Kashmir
- Football Violence
- Bosnia
Your Out Groups

Who are they?

What words?

Feelings?

Their threat?
Circle of Trust

open
values
risk
respect
+conflict
Shared fate
altruism
Comm
Leadership

Kindness

Vision

Optimism

Identity

Reflexivity

External relationships

Courage

Relationships