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EFFECTIVE TEAM WORKING AND COMMUNICATION

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COMPONENT 1 REPORT EFFECTIVE TEAMWORKING FOR TEAM SUCCESS.

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Executive Summary

This study explores effective teamwork as a predominant topic in health and care Organisations. The discussion is based on Green Field Care Home, which is facing a crisis because Carers cannot accept each other's differences in opinion and those of the service users. This has affected employee service delivery and cooperation, prompting others to leave the organisation. As a result, the report suggests that the management needs to use Tuckman's team development to create an effective team. The five-step approach addresses challenges and possible outcomes at each phase of team development. The report also shows that This study explores effective teamwork as a predominant topic in health and care effective teams are likely to improve the quality-of-care delivery, enhance team cohesion, promote job satisfaction, and enable employees to avoid mistakes at work. Potential barriers to effective team working include lack of commitment, loss of productivity, and poor communication. Lastly, the report suggests that crucial roles in developing an effective team should be based on Belbin's (thinking-oriented, action-oriented, and people-oriented) model of team roles.

Introduction

Teamwork is a predominant concept in various workplaces within relevant industries that companies want to perform better in. Managers acknowledge that collaboration at work is like promoting work efficiency, reducing the workload, and improving the general quality of the work that team members produce. According to Qin et al. (1995), working in teams and cooperating with colleagues gives employees the chance to come up with solutions to shared problems and achieve their personal goals. One of the critical fields where teamwork should be fostered at all costs is the healthcare industry. In care delivery, patients have a variety of needs that need different specialists to attend to them. In the same way, healthcare professionals possess different skills and knowledge that help them promptly execute their duties. As a result, they must work together to take care of each other's deficiencies and attain desired results. This report explores the teamwork concept further, based on the scenario at Green Fields Care Home, to propose how the management can build an effective team, explore the significance of an effective team, analyses barriers that impair teamwork, and suggest roles that could lead to a cohesive and effective team.

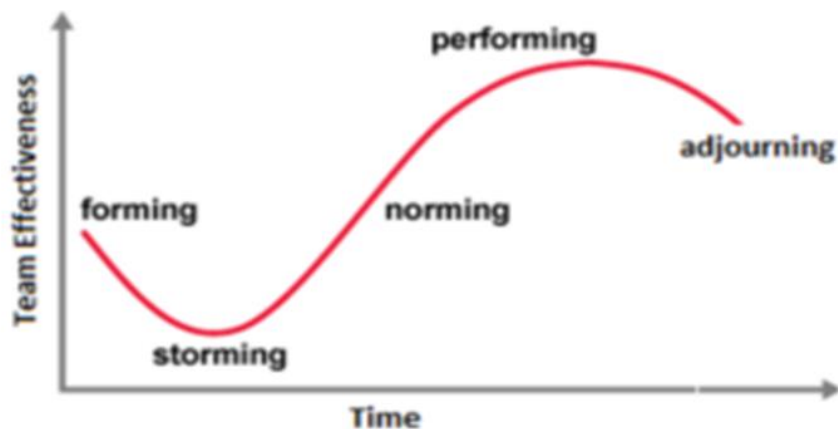
Overview of Green Fields Care Home Scenario

The care provider has a considerable capacity of 56 beds to provide care for older people from all ethnic and religious backgrounds. However, the facility's ability to provide quality and holistic care as desired is affected by staff's inability to accommodate diversity among service users and colleagues. This is problematic since cultural competence is paramount in care provision and significantly affects the outcome of the process. It is apparent in the low quality of service residents are currently getting at the care home. It is further reflected in the organisation's low morale, less teamwork, and high turnover. These are adverse outcomes to the care facility that should be mitigated for the wellbeing of residents and those who might want to check into the care home. Failure to solve this, the organisation will be staring at a bad public image that would adversely affect its intake and overall functioning going forward.

How Management at Green Fields Care Home Can Develop an Effective Team

Building an effective team is an uphill task for managers because it takes time to develop one. However, various scholars have created credible models that could prove helpful in formulating an effective team. Among these is Tuckman (1965), who developed a five-stage model as shown in Figure 1 below that can be used to create an outstanding team. However, it is not mandatory that all five stages be fulfilled when developing a team.

Fig 1: Tuckman's Model of team development



Source: (Lumen, 2014)

Forming

Forming is the initial stage of team development. Tuckman (1965) outlined that it is characterised by feelings of anxiety and uncertainty regarding the team's structure, purpose, and leadership. At this point, no one is sure about their commitment to the team as they try to determine which behaviors they need to uphold when they are part of the team. According to Alsever et al. (2014), a team member who seems knowledgeable or exhibits authority is likely to be chosen by others to lead the team. Such questions like what members stand to gain from being part of the team stand out at this stage. Consequently, this phase becomes complete when all members start thinking of themselves as team members (Tuckman, 1965).

Storming

This is the second stage, which is marred with a lot of uncertainty like the first one. It is also the most complex and crucial stage because competition from conflicting interests and personalities among members emerge (Alsever et al., 2014). Team members accept being part of the team but may largely disagree with the constraints as well as the team's leadership (Tuckman, 1965). Successful completion of this phase is based on being able to settle on a clear leadership hierarchy.

Norming

Contrary to the third stage, members begin showing cohesiveness and close relationships when they reach the norming phase (Tuckman, 1965). From the outside, one can observe a strong identity of the team. At this point, individual differences begin to die down as members learn to cooperate with their colleagues (Alsever et al., 2014). This stage also sees excellent improvements in team performance, where carers will become more focused on team goals and not individual interests.

Performing Stage

At this point, the team exhibits a lot of maturities, consensus and cooperation are high, and members are organised and promptly attending to their duties (Alsever et al., 2014). This is because the care providers will now have known and understood each other to refocus energy on what matters. Unlike the initial stages, when conflict arises, members are quick to deal with it and move on to execute other responsibilities.

Adjourning Stage

This is the fifth and last stage. Tuckman (1965) believed that it underscores the last development phase for permanent work teams. For temporary groups like committees, this stage is for wrapping up activities and dissolving the team. It does not apply in this scenario since Green Fields Care Home needs a permanent effective team to mend the deteriorating situation at hand. Managers can also observe that some carers will become upbeat and bask in the team's success at this point.

The Impact Effective Team Working Can Have in a Health and Social Care Setting

After developing an effective team, it is essential to reflect on the benefits of having such a team in health and social care organisations. Firstly, effective teamwork improves the overall quality of care that patients receive. According to Anderson et al. (2020), patient care relies heavily on the ability of different practitioners to coordinate their activities. For instance, social care workers better understand residents' life out of the care home and could share this information with other carers attending to the person. As a result, the providers can easily assess the needs of the patient based on other factors that make them feel the way they do.

Moreover, teamwork allows team members to become familiar with one another. In healthcare, when practitioners have worked together before, they become aware of each other's responsibilities, skills, and areas of specialisation (Schmutz et al., 2019). As revealed in Tuckman's team development model, the first two stages involve uncertainty and unawareness of what other members have to offer. However, this is rectified in the fourth phase, where team cohesion is part and parcel of performance, which is needed in health and social care workplaces. Team familiarity enhances work performance because members can report upcoming problems to the right specialists (Schmutz et al., 2019).

Accordingly, effective teamwork in care settings promotes skill differentiation. Borrill et al. (2000) define this as having diverse expertise within the same team that aids different approaches towards solving a medical problem. For instance, a team of nurses lacks team differentiation because members have almost similar qualifications and knowledge. However, incorporating doctors, nurses, therapists, and social care workers creates a diverse team in terms of knowledge and skills. These types of teams can attend to the diverse needs of the service user by combining their expertise and vast knowledge to complement each other's deficiencies in care delivery.

Team members can also benefit from job satisfaction, engagement, commitment, performance, and wellbeing if they are part of an effective team. This is because delivering care is a delicate process where physician mistakes could lead to death or harm to the patient (Borrill et al., 2000). However, working in teams can help one avoid these mistakes, especially when working with supportive members. Effective teams allow members to inquire or ask for help from colleagues when stranded. More importantly, one does not have to make individual decisions concerning their practice. As Wheelan (2016) noted, small teams enable individual members to engage with their leaders, share ideas, and make group decisions. This collaboration minimises mistakes and wrong choices or the pressure to make crucial decisions that could backfire.

Barriers of Effective Teamwork

Teamwork undoubtedly inspires positivity in any workplace. However, some barriers could impair teams from being effective. Among these is the lack of commitment, which Griffith and Dunham (2014) referred to as a perennial problem because a team cannot function with only a few members committed to the course. Usually, this can happen when members doing the most work are reluctant to give the rest a chance to participate. This is likely to make them ride on the group's success without contributing anything. The Royal College of Physicians (2017) also added that a good team needs to have clear roles and responsibilities. This understanding of what everyone is supposed to do is a significant reminder for everyone to commit to group goals.

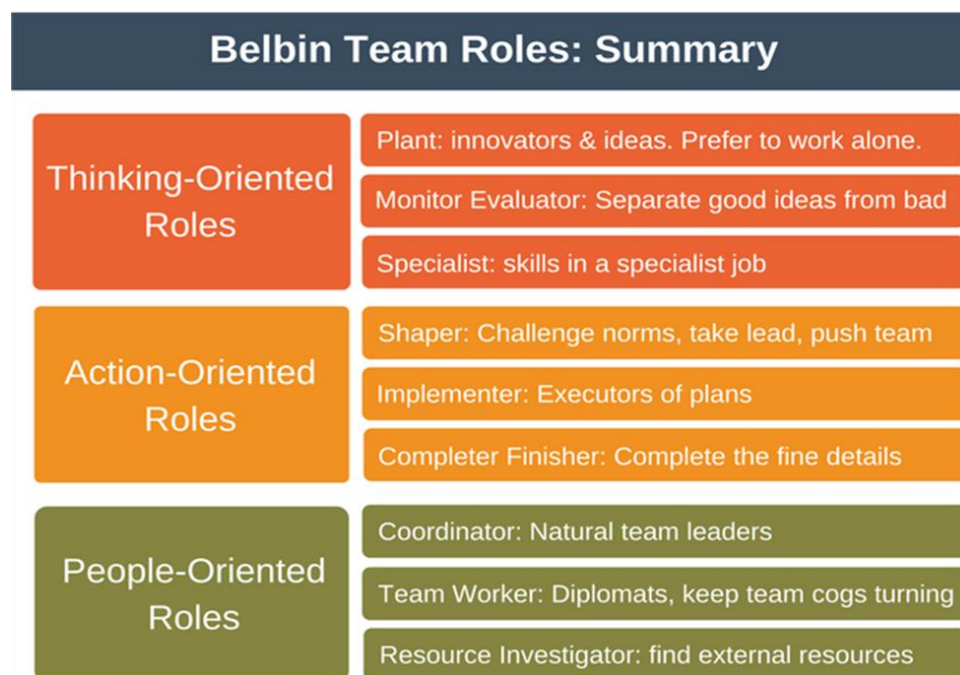
Another barrier to effective teamwork is the loss of productivity. According to Griffith and Dunham (2014), this can result from the team's lack of a clear structure and poor planning. For instance, at Green Fields Care Home, most carers there lack organisation with how groups perceive individual beliefs and acknowledge differences. Also, there is no plan to help teams become culturally competent and set aside their personal views for the sake of the organisation and residents under care. Further, productivity losses can result from the longevity of making decisions because several parties have to be involved (Griffith and Dunham, 2014). This time-consuming process negatively adds to the ability of the team to keep working on set goals.

Effective team working can also fail because there is no proper communication within the team. This predominant problem is characteristic in every underperforming team (Griffith and Dunham, 2014). Usually, groups hold meetings to communicate crucial aspects that would guide functions moving forward. However, members leave these meetings with different ideas of what was shared, which adversely affects their ability to work towards the same goals.

The Types of Roles that are Needed to Create a Cohesive and Effective Team

The proper functioning of effective teams depends on the presence of specific figures within the group. Belbin (2010) outlined this in his framework by coming up with 9 different roles divided into 3 categories that are crucial for a team to work effectively. The first category is embracing thinking-oriented roles, including plant, motivator evaluator, and specialist. Plants are idealists of the group; motivator evaluators decide which of these are usable, while the specialist has the right skills to execute the ideas (Belbin, 2010).

Fig 2: Belbin's Team Roles



Source: Expert Program Management (2017)

The next category is action-oriented roles, comprising a shaper, whose job is to challenge existing norms, step up, and push the team to do better (Belbin, 2010). The implementer is also charged with ensuring plans are implemented, and the completer, who oversees that fine details are covered within the finished project. Besides, there are also people-oriented roles, consisting of a natural team leader, e.g., healthcare human resource managers and supervisors. Belbin (2010) also added team workers as part of this category, and their job is to keep processes going. Lastly, this category also has resource investigators who outsource external resources to help actualise the plan.

Conclusion

The management of Green Fields Care Home can develop an effective team by following Tuckman's model. The framework follows the sequence of forming, storming, norming, performing, and adjourning to establish an outstanding team. Effective team working in health and social care settings help enhance the quality of care, promote team cohesion, reduce mistakes, and enhance job satisfaction. Some of the key barriers that could deter effective teamwork include lack of commitment, loss of productivity, and poor communication. Lastly, the report suggests that Belbin's model on influential team roles (thinking-oriented, action-oriented, and people-oriented) concludes on the crucial roles that could make the team effective.

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