

# Presenter's Guide – Team Form

QUALITY IMPROVEMENT

Welcome to Team Form – the first stage of your QI team's development.

## CONFLICT AND DISCLOSURE INFORMATION

**Speaker:**

**Program:**

**Financial Disclosure:**

**Other:**

Presenter Disclosure.

## LEARNING OBJECTIVES

After engaging in this session, you will be able to:

- Define the concept of team
- Differentiate stages of team development
- Identify stakeholders in your QI initiative.
- Perform a stakeholder analysis.
- Strategize engagement of stakeholders.
- Describe the roles needed on your QI team.
- Select your QI Team

On completing this module, you will be able to

Define the concept of team

Differentiate stages of team development

Identify stakeholders in your QI initiative.

Perform a stakeholder analysis.

Strategize engagement of stakeholders.

Describe the roles needed on your QI team.

Select your QI Team

## DEFINE “TEAM”

A team is a small number of people with complementary skills, committed to a common purpose, a set of performance goals, and an approach for which they hold themselves mutually accountable.

Katzenbach, Jon. Smith, Douglas. The Discipline of Teams HBR Mar-Apr 1993

4  
 Family & Community Medicine  
UNIVERSITY OF TORONTO

A team is necessarily small. Too many people requires too much structure for truly collaborative effort.

The skills of team members complement each other, so that the team as a whole is capable of achieving its

Common purpose. Team members share a vision of what they are about.

The team’s goals are well defined, and aligned with its purpose .

Each team member is accountable to the team as a whole for their individual contribution.

## DEFINE “TEAM”

Leadership is shared –  
at different times each member of the team  
may demonstrate a leadership role,  
**NOT**  
a single hierarchal leader as authority figure.

This mutual accountability allows leadership to be shared. The person most adept at a defined task takes the lead – and then follows when the team’s work moves to another task. It’s a fluid process.

Authoritarians demanding obedience at the expense of others’ concerns and wishes have no place on a team.

## DEFINE “TEAM”

Members are responsible to each other, and see the team as accountable for the work products,

**NOT**

responsible to an outside authority and accountable only for “their own thing”.

Mutual responsibility and accountability are central to high-performing teams.

The team may report to an outside authority – as a team. A team member does not simply do one task as an individual, then resting on individual laurels. It’s a group dynamic, the achievements belong to the team as a whole.

## DEFINE “TEAM”

Teams have meetings that encourage lively, open-ended discussion and active problem solving,

**NOT**

“efficient” meetings with tightly controlled agendas.

Teams have lively, open-ended discussions. Everyone participates; everyone contributes.

Meetings tend to be less formal. The objective is to move the work forward, unconstrained by procedural rules. Those rules are there to help if the group gets stuck – not when things are clicking along.

## DEFINE “TEAM”

Teams discuss, decide, and  
do the real work together,  
**NOT**  
discuss, decide and delegate the work.

With highly functioning teams, everyone participates in discussions, decisions and the work itself. A team works by consensus.

Unilateral decisions are out of place in team work. It is no one person's responsibility to delegate tasks.



## DEFINE “TEAM”

Teams provide collective work products  
where credit is shared,  
**NOT**  
work products where  
individuals take sole credit for their portion.

Teams work collectively. Members are interdependent. Credit is shared. Everyone’s achievements are team achievements.

A group that functions as silos, with independent tasks and efforts, is not a team.

## A TEAM EVOLVES

What is the “life cycle” of a team?

Teams are dynamic. They grow and evolve in a predictable pattern – a life cycle.

## LIFE CYCLE OF A TEAM

- Form
- Storm
- Norm
- Perform
- Transform
- Adjourn

Tuckman, Bruce (1965). "Developmental sequence in small groups".  
Psychological Bulletin 63 (6): 384-99

11

Family & Community Medicine  
UNIVERSITY OF TORONTO

In healthcare, understanding the family life cycle help in predicting the stresses, changes and transitions of our patients. Understanding the team life cycle has similar value. Each stage brings tasks to accomplish before moving on in the life cycle. The stages in the life of a team are:

Form,

Storm,

Norm,

Perform,

Transform, and

Adjourn.

## LIFE CYCLE OF A TEAM

### Form: Build Relationships

Teams are motivated but uninformed.

- Gather the right people.
- Assess roles.
- Avoid conflict & controversy.
- Perform stakeholder analysis.
- Create acceptance through mutual respect.

During the Form stage, the primary task is building new relationships, particularly trusting relationships. Team members are motivated about the project, but not yet informed about the scope of the task ahead.

Having the right people on your team is the first step towards success.

The different roles within the team need to be described and defined.

At this introductory stage, try to navigate smooth waters. Conflict and controversy will arise as the team dives into the work – not at this point.

Identify your stakeholders, and analyze how they might help – or hinder – your project.

As relationships are building, foster an environment of mutual respect and acceptance.

## LIFE CYCLE OF A TEAM

### Storm: Team Growth

Teams are confronting differing ideas and perspectives.

- Demonstrate professional standards.
- Resolve conflict effectively.

As the project unfolds, people share differing ideas and perspectives as to how the team should proceed. This can lead to conflict – which can be constructive or destructive. The central challenge of the Storm stage is to effectively manage conflict so that it leads to new ideas and solutions – not personal animosity.

And that relies on maintaining professional standards in your own behaviour, and throughout the team.

You need the skills to effectively resolve conflict as it occurs.

## LIFE CYCLE OF A TEAM

### Norm: Develop Work Plan

Teams are letting go of individual goals.

- Establish team goals.
  - Specific
  - Measurable
  - Attainable
  - Relevant
  - Time-bound
- Negotiate contributions.

During the Norm stage, team members let go of their individual objectives, and fully commit to the team's purpose and goals. Now, an effective work plan is needed.

Team goals need to be set – SMART goals: specific, measurable, attainable, relevant, and time-bound,.

Contributions from team members must be negotiated. Most often, however talented and skilled your team is, you also have to negotiate for resources from outside the group.

## LIFE CYCLE OF A TEAM

### Perform: Action!

Make your meetings work!

- Caring
- Confronting
- Catalyzing

Its time for action! You have the right people in place, with a common purpose, and a shared understanding of their different roles and responsibilities. Team goals have been established. Project work has begun in earnest. Things start to click along. How do you help your team work together.?

You create a dynamic where people genuinely care about the project, and each other.

You confront unproductive behaviour.

As team leader, you act as a catalyst for all they do, to move the team forward in the most effective way. You optimize the team dynamic.

## LIFE CYCLE OF A TEAM

### Transform: Action!

A knowledge-creating team.

- Synergy: Team actions exceed individual capabilities.
- The team learns from within.



During the Transform stage, the QI work is progressing nicely, creating new knowledge and understanding.

It is performing synergistically. The accomplishments of the team are greater than the sum of each individual achievement along the way.

As the team learns from each other, you may well exceed your own expectations. You may notice a profound shift, a transformation to a culture of improvement.



## LIFE CYCLE OF A TEAM

### Adjourn: Legacy of team

Team's performance sets the standard for the next team.

- Celebrate your accomplishments.
- Let go; move on.


Finally, your project is complete. You've not only changed your organization, you have improved its practice. Your team has worked well – cohesively and collaboratively. Outstanding.

It's time to celebrate. You have found a new way of doing things that have improved patient outcomes, and/or made work life easier. You've reached a new standard of best practice. Make the time to share and record your accomplishments. Pat each other on the back.

It's also time to move on to another project, usually with a new team. Different people pick up the QI work with different projects at different times. Your team has set the bar. And so the cycle begins anew.

ARE YOU PART OF A TEAM?

Think of three teams  
you are on.

 Family & Community Medicine<sup>18</sup>  
UNIVERSITY OF TORONTO

We have all been on teams, in and outside of professional life. Think of three teams you're on and identify where they are in the life cycle.

*Reflection:*

ARE YOU PART OF A TEAM?

Where are those teams currently in their life cycle?

 Family & Community Medicine<sup>19</sup>  
UNIVERSITY OF TORONTO

*Regain attention of group.*

Let's have some examples. What teams were you on? At stage are they?

*Debrief: Solicit examples from 3-4 tables.*

## FORM YOUR QI TEAM

1. Identify stakeholders.
2. Complete stakeholder analysis.
3. Strategize stakeholder relations.
4. Describe roles needed for this QI initiative.
5. Select your current QI team.

Let's start with forming your QI team.

The first step is identifying your stakeholders,

then conducting a careful stakeholder analysis. Who is impacted by the work? Who can contribute to your project? Who has the skills you need? Are they complementary? Who is excited by the project's potential? Forming an high-performing team is a far more intricate process than simply asking, "Who's interested?"

What roles will team members play? Have you a diverse group who will approach the project from differing perspectives?

You must strategize about who is best to be on the team, who needs to stay in the loop, and who can help in an advisory capacity. You may have identified stakeholders who oppose your project. How will you address this?

Finally, select your QI team.

## 1. IDENTIFY STAKEHOLDERS

A stakeholder is:

any person or group that can claim the project's attention, resources or its deliverables, or is affected by its output.

Step 1: Identify Stakeholders. A stakeholder is any person that can claim attention or resources you need for the project, or someone who is affected by the final product. It's a very broad group.

## 1. IDENTIFY STAKEHOLDERS

- Stakeholders may or may not be part of your organization.
- Your QI project team will be a subset of your stakeholders.

Typically, the first stakeholders you identify will be part of your organization. But don't limit your thinking.

Some stakeholders will make up your QI project team.

## 1. IDENTIFY STAKEHOLDERS

- I. Patrons of QI initiative.
- II. Users of QI initiative.
- III. Advisors on QI initiative.
- IV. Specialists for QI initiative.

We classify stakeholders based on their relationship with the QI initiative.

Patrons,

Users,

Advisors, and

Specialists.

## 1. IDENTIFY STAKEHOLDERS

### I. Patrons of QI Initiative

- Sponsors
  - Have authority
  - Validate project
  - Provide resources
  - e.g. Executive Director of Community Health Centre
- Champions
  - Passionate & enabling
  - Represent users
  - e.g. you

Patrons of QI initiatives can have a couple of roles.

Sponsors want the project to move forward and can provide resources to make it happen. They have authority. In a family health team, sponsors can be the Lead Physician or the Executive Director.

Patrons may also be Champions – people who are passionate about the project and really, really want to see it succeed. Yes, you are a Champion.



## 1. IDENTIFY STAKEHOLDERS

### II. Users of QI Initiative

- Benefit from successful outcomes of QI project.
  - Directly or indirectly
- Includes patients and their families.

Users of the QI initiative are people who

benefit from its success, directly or indirectly. Consider people outside the hierarchy of your organization.

In patient-centred care, this always includes patients. Some users may be other members of the community. And staff, whose work life will improve with the success of your project.

## 1. IDENTIFY STAKEHOLDERS

### III. Advisors on QI Initiative

- Experts on subjects within the scope of the project.
- e.g. individual with QI experience

Advisors on the QI project are people

who are expert within the scope of the project, perhaps

someone who has participated in a QI project, or a specialist in the area of medicine you are working on.

## 1. IDENTIFY STAKEHOLDERS

### IV. Specialists for QI Initiative

- Have unique skills that contribute to products of the project.
- e.g. form designer, IT expert

Finally there are specialists,

people who have unique skills to contribute to the project.

Maybe you need someone who is a whiz at producing forms on your team. Or someone especially skilled in statistics to help with data analysis.

## 1. IDENTIFY STAKEHOLDERS

- a) Brainstorm to develop list of stakeholders.
- b) Establish their profiles:
  - Name
  - Reporting relationship
  - Characteristics:
    - i. Roles & responsibilities
    - ii. Interest in outcome
    - iii. Special skill set
    - iv. Contribution:  
Power or Influence / Support / Expertise /  
Need

To identify your stakeholders,

Brainstorm. Write down as comprehensive a list of people or roles that you want to contribute to your project people who are affected by your work, people who can expedite or impede your project, people who can provide practical advice.

Then create stakeholder profiles:

Be specific – name the individual;

Outline their reporting relationships – who they report to, how many people report to them. The more people that report to them, the more influence they have within the group.

Characterize their roles and responsibilities.

Articulate their interest in the outcome? Of the project.

## 1. IDENTIFY STAKEHOLDERS

- a) Brainstorm to develop list of stakeholders.
- b) Establish their profiles:

*Continued . . .*

- Characteristics:
  - i. Roles & responsibilities
  - ii. Interest in outcome
  - iii. Special skill set
  - iv. Contribution:  
Power or Influence / Support / Expertise /  
Need

Identify their special skill set or expertise as it applies to your project.

What contribution can they make? Is it in the realm of power or influence? How much can they support the outcome of a successful project? Do they really need the project to succeed? All of this information leads to your next step – your analysis.

## 1. IDENTIFY STAKEHOLDERS

For your QI opportunity:

- Identify your project's stakeholders.

Referring to the QI opportunity you have identified for your project,

identify your stakeholders to your project. Please use your workbook.

*Workbook:*

## 1. IDENTIFY STAKEHOLDERS

Let's review a couple of examples.

*Regain attention of group.*

OK let's hear some examples.

*Debrief: Elicit examples from 2-3 tables.*

## 2. COMPLETE STAKEHOLDER ANALYSIS

		STAKEHOLDER ANALYSIS				
		Power and Influence	Support and Commitment	Skill Set or Expertise	Need for Vested Interest in	
Name	Role					

- Enter name and role of stakeholder.
- Rank from 1 (low) to 5 (high) each individual on all characteristics.
- Determine who must be further engaged in QI initiative.
- Determine who can assist in this effort.

Family & Community Medicine  
UNIVERSITY OF TORONTO

It's time to complete your stakeholder analysis.

Enter the names and roles of your stakeholders on the analysis grid.

Rank them as to what degree they have power or influence, support and commitment, a particular skill set or expertise, or a need for or vested interest in, the project succeeding. We will leave the Stage of Change column alone for the moment.

Identify those who must be further engaged in your project to move it towards success.

Identify who might help.



## 2. COMPLETE STAKEHOLDER ANALYSIS

STAKEHOLDER ANALYSIS		Power and Influence	Support and Commitment	Skill Set or Expertise	Need for Vested Interest in
Name	Role				
Jane Doe	QI Consultant				
Dr. Bigwig	CEO				
Dr. John Smith	Partner in Practice				
Patient A	Patient				

Let's just walk through an example. The project leader has identified an example list of four stakeholders: Jane Doe is a QI consultant. Dr. Bigwig is the head of the group. Dr. John Smith is a partner in the practice, and Patient A is a patient in the practice. In all likelihood, your list will be far longer.

## 2. COMPLETE STAKEHOLDER ANALYSIS

Jane Doe QI Consultant

Support and Commitment  
Power and Influence

Skill Set or Expertise

Need for/ Vested Interest in

- Has no real power or influence on the project.
- Supportive of the project and recognizes urgency.
- Has required expertise needed for the project.
- Has nothing to gain or lose at outcome of the project.

Family & Community Medicine <sup>34</sup>  
UNIVERSITY OF TORONTO

Let's first rank Jane Doe. As a consultant, she doesn't control resources or have authority in the organization, -- however she is very supportive, recognizes the urgency of the project and wants it to go ahead. She is a QI expert, and this is the leader's first project. The outcome of the project will have no direct impact on Jane.

So this is how you might rank Jane: not a lot of power and influence, really committed to the success of the project, and has expertise. She neither needs the project nor has a vested interest in it.

## 2. COMPLETE STAKEHOLDER ANALYSIS

Support and Commitment  
Power and Influence

---

Dr. Bigwig

Skill Set or Expertise

Need for/ Vested Interest in

- Has ability to influence others.
- Limited buy in, has bigger concerns elsewhere.
- Not knowledgeable in this area.
- Not likely to be affected if project succeeds or fails.

Family & Community Medicine  
UNIVERSITY OF TORONTO

On the other hand, Dr. Bigwig is the boss – as head of practice, she has far-reaching influence, and great authority. However, she’s a busy lady, and has only a marginal sense of ownership of the project. She is unfamiliar with QI. This project will have little impact on her daily work life.

Dr. Bigwig would rank highly on being able to control resources but otherwise isn’t that much involved. This is someone who needs to be more engaged. How you would approach this is a possible issue for your communication plan.

## 2. COMPLETE STAKEHOLDER ANALYSIS

Support and Commitment  
Power and Influence

---

Dr. John Smith

- Interested but has limited resources.
- Committed, but concerned changes may result in new issues.
- Not proficient in this area.
- Has a stake in the project and is interested in it's **success.**

Family & Community Medicine <sup>36</sup>  
UNIVERSITY OF TORONTO

Dr. John Smith is interested but doesn't control a lot of resources. Although committed, he is a little bit concerned that the changes may bring forward other issues. He is not particularly proficient in this area, but has a stake in the project and is interested in its success.

This is how you might rank Dr. John Smith.

## 2. COMPLETE STAKEHOLDER ANALYSIS

Support and Commitment  
Power and Influence

---

Patient A

Skill Set or Expertise

Need for/ Vested Interest in

- No influence or power.
- Supportive of change and sees the benefits.
- Not proficient in this area.
- Has a stake in the project and will directly benefit from its success.

Family & Community Medicine  
UNIVERSITY OF TORONTO 37

It's hard to think of a QI project in healthcare where patients are not stakeholders. Patient A is a particularly complex diabetic, and a “frequent flyer”. This project to increase access would make her life far easier. She would be happy to do whatever she can to help, but has no relevant skill to offer the project.

This is how Patient A ranks.

## 2. COMPLETE STAKEHOLDER ANALYSIS

		STAKEHOLDER ANALYSIS				
		Power and Influence	Support and Commitment	Skill Set or Expertise	Need for Vested Interest in	
Name	Role					
Jane Doe	QI Consultant	2	5	4	1	1
Dr. Bigwig	CEO	5	1	1	1	1
Dr. John Smith	Partner in Practice	4	3	1	3	
Patient A	Patient	1	4	1	5	

Who must be further engaged in the QI initiative?

Do you need to develop a communication strategy for some stakeholders?

Overall, there are a couple of people with power and influence, a couple with support and commitment, and one with relevant expertise.

Who needs to be more engaged in the QI project to help it along? If you could develop Dr. Bigwig's support, her power and influence could expedite your project.

How would you accomplish this? Communication is key. What would you communicate and how? Does the project have the potential to make her practice easier? Does she respect Dr. Smith's opinion? If so, could he be an advocate for the project? How would you first increase his support? Who would be the best choice to approach Dr. Smith? What information would they need?

## 2. COMPLETE STAKEHOLDER ANALYSIS

For your QI opportunity:

- Conduct a stakeholder analysis.

You have identified a QI opportunity, and your stakeholders.

Now, begin your stakeholder analysis in your table groups. Use the grid in your workbook.

*Workbook exercise:*



*Regain attention of group.*

A stakeholder analysis requires a great deal of thought. Hopefully, you are now comfortable with the concepts. Completing the stakeholder analysis for your QI project will be a homework assignment for this evening.



### 3. STRATEGIZE

Engage stakeholders to:

- Get the right people on, and behind, the project.
- Help manage relationships.
- Plan communications, initially and ongoing.
- Optimize project outcomes.

The next step is to determine how best to engage your stakeholders in your project.

You need the right people on, and supporting, your project.

One element of relationship management is knowing who to call on for assistance. Sometimes stakeholders can be a huge help in this. A sponsor's introduction can be very powerful.

You will need communications plans for any and all affected by your project – on your team, in your organization, and if appropriate, outside your organization. Failing to communicate, will lead to failure to collaborate, disruptive relationships, and unsuccessful project outcomes. Stakeholders may be a big help in their planning, and implementation.

Creative thinking about your specific initiative will lead you to different ways your various stakeholders can optimize outcomes throughout your project.

### 3. STRATEGIZE

1. Who do you want to maintain linkages with, although they are not on the team?
2. Who do you have to contain as a possible adversary to your project?
3. Who do you want on your team?



You need a strategy. Who do you need to be aware of developments in the project as they occur, even though they're not on the team?

Have you identified anyone who might work against your project? What can you do to overcome their objections?

Of the stakeholders you have identified, who are good candidates for your team?

### 3. STRATEGIZE

1. Who do you want to maintain linkages with, although they are not on the team?
  - Individuals who would have been great to have on the team, yet unable or unwilling to commit
  - Stakeholders with power or influence
  - Need a communication strategy



Who do you want to keep in the loop, but not on your team? This can develop widespread support of your project.

Maybe they are unable to join your team, but you still value their opinion.

Maybe they are powerful or influential stakeholders, and developing their support is important to the smooth running of your project.

You need a communications strategy. Map out when and how you will maintain linkages with these stakeholders.

### 3. STRATEGIZE

2. Who do you have to contain as a possible adversary to your project?
  - Identify source of resistance if possible
  - Develop a communication plan
  - Use data to support your position
  - Strategize to build your power base



You may well have identified stakeholders who oppose your project.

They should be engaged in the planning stage of your project in an effort to identify their objection. Perhaps they think the project will impact them negatively, notwithstanding the potential benefit for many. Perhaps they simply do not adapt easily to new ideas– they want to see the benefits before jumping on the bandwagon. It is important to have a clear idea of their position – and their interest.

You need a communication strategy. What do you need them to know? What is the most persuasive way to tell them? Giving some serious thoughts to this up front will save you time later.

Maybe they simply lack information. Maybe you need to strengthen your position with supportive data.

Maybe you need to build the necessary supportive relationships with those with the power to override the naysayers.

### 3. STRATEGIZE

#### 3. Who do you want on your team?

- Members representing a balanced skill set as per your analysis
- Agreeable personalities
- Members who are prepared to make a commitment to participate
- Members who are not “oversubscribed” to a lot of project activity



Who do you want on your team.?

Who has the skills you need?

Who is likely to take a collaborative approach to the work?

You need commitment to the project . Participation costs time and energy. Will they come through?

Consider what other commitments candidates might have. Are you concerned they're spreading themselves too thin? If so, and it is someone you really want, share this concern with them. Tell them you really appreciate their support, but you'd rather they sit this out if they are feeling oversubscribed. And make sure you keep them in the loop as the project moves forward.

## 4. DESCRIBE ROLES NEEDED ON TEAM

### Exploring Professional Roles

- Team settings
  - Overlapping competencies; shared responsibilities
- Overlapping scopes of practice
  - Confusion
  - Ineffective teams
- Knowledge of roles of other health professionals
  - Required to practise collaboratively
- Clarifying scopes
  - Understanding roles in a team setting

What roles do you need to move your project forward?

As a team, responsibility for the project is shared. Each team member will have different strengths and skills to contribute. Often, their abilities will overlap. Roles need to be clearly defined.

Consider the professional scope of practice of all candidates for your team. There could well be overlaps. How will you manage this when assigning tasks on the team?

It may well be necessary to educate team members about the roles of allied health professionals. If communicated well, mutual respect grows, and collaboration is facilitated.

Clarity around scope of practice of each of the professionals on your team is required. Are the policies and procedures of your practice limiting? Empowering allied professionals to maximize their contribution may be useful to your project.

## 4. DESCRIBE ROLES NEEDED ON TEAM

In a CHC, think:



Consider what will best help to develop the project and take it efficiently and effectively to completion.

Think comprehensively,

Beyond what a physician can do.

The allied professionals you work with have a tremendous amount to contribute.

Administrative staff are often the most familiar with the strengths and weaknesses of practice procedures, especially as they impact patients. They are usually the first to hear complaints.

The potential contribution from nursing staff is enormous.

And what about your patients? Can they offer insight into the issue you are tackling?

## 4. DESCRIBE ROLES NEEDED ON TEAM

Consider:

- Regulated Health Disciplines

Physicians are just one of many regulated health disciplines. Each has a professional college which establishes regulations for performance. Each profession has an established scope of practice, delineating what they can and cannot do. Familiarize yourself, and your team, with the scope of practice of your allied professionals. Consult the college's website – or simply ask your colleagues. You may be surprised!



#### 4. DESCRIBE ROLES NEEDED ON TEAM

- Audiologist
- Chiropracist
- Chiropractor
- Dental Hygienist
- Dental Surgeon
- Dental Technologist
- Denturist
- Dietician
- Massage Therapist
- Medical Laboratory Technologist
- Medical Radiation Technologist
- Midwife
- Naturopath/Drugless Practitioner
- Nurse
- Occupational Therapist
- Optician
- Optometrist
- Pharmacist
- Physician and Surgeon
- Physiotherapist
- Psychologist
- Respiratory Therapist
- Speech Language Pathologist
- Veterinarian

Although not complete, this is a pretty good list of regulated health disciplines that may participate in Family Health Teams. Each brings its own expertise to the table.

Not all healthcare providers are regulated. For example, while a psychologist offers mental health counselling, so do other, non-regulated professionals.

## 4. DESCRIBE ROLES NEEDED ON TEAM

Consider:

- Regulated Health Professionals
- Others with whom you work

You may wish to include others at your worksite in your project. For example, if your project focuses on infection control, it may be valuable to have the office cleaner on your team. Consider more than the title or position of potential team members. Consider what they bring to the project.

#### 4. DESCRIBE ROLES NEEDED ON TEAM

- Social work
  - Health promoter
  - Spiritual leader
  - Industrial engineer
  - IT, Informatics
  - Cleaning staff
- ... etc. . .

Here are just a few ideas of professions that might add great value to a QI initiative.

#### 4. DESCRIBE ROLES NEEDED ON TEAM

For your QI opportunity:

- Is there anyone you forgot?

Looking at your QI opportunities, and the team candidates you have in mind,

Can you think of another discipline or role that would add value to the team? Make a note in your workbook.

*Workbook exercise:.*

## 5. SELECT YOUR QI TEAM

On your team, make sure you have:

- A diversity of roles, and
- Stakeholders who:
  - Have power and/or influence.
  - Support the QI initiative.
  - Have relevant expertise to offer.
  - Need the project to succeed.

Finally, you are ready to select your team for the current QI initiative.

Make sure you have a diversity of roles; you want differing perspectives. It is generally a good principle in QI work to enable people to work to the full scope of practice of their discipline.

And you want stakeholders who have complementary skills and abilities to offer.

## 5. SELECT YOUR QI TEAM

- List all the stakeholders to your QI initiative
- Identify a team for your QI initiative.
- Describe the roles each will play.

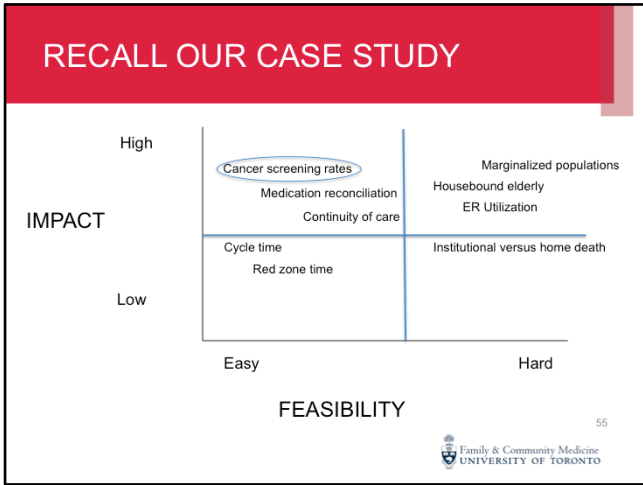
You now have the tools to select your QI team.

As homework, list the stakeholders to your QI initiative – this should be a long and comprehensive first pass.

Identify a team for your QI initiative by analyzing your initial list of stakeholders.

Note their names, and describe the roles each will play on your team in your workbook.

*Homework assignment.*



Recall our case study - the consensus of that practice group was to look to improve cancer screening rates.

## WHO WOULD BE STAKEHOLDERS?

- Patients eligible for screening and/or families touched by cancer
- All physicians
- Other clinical professionals who have an interest
- Informatics – IT – get data out, possible define data input standards, develop reminder systems
- Administrative staff – records, appointments
- Health promoter – practice or community based
- CCO regional cancer lead



Who might be stakeholders to the area of interest – “cancer screening?” You may list these as groups, although for those specifically in the practice you will want to list names for the purpose of your subsequent analysis.

These might include:

Patients eligible for screening and/or families touched by cancer

All physicians

Other clinical professionals who have an interest

Informatics – IT – get data out, possible define data input standards, develop reminder systems

Administrative staff – records, appointments

Health promoter – practice or community based

CCO regional cancer lead



## PROFILE AND ANALYZE THE STAKEHOLDERS

Name

Reporting relationship

Characteristics:

- Roles & responsibilities
- Rank contribution:
  - Power or Influence e.g. CCO lead
  - Support – e.g. Health promoter
  - Expertise – e.g. Informatics expert
  - Need – e.g. Physician (incentives) and patient (+ FH of cancer)
- (Stage of Change)



After compiling your list, you develop their profiles and analyze/rank their contributions, being

Power or influence – for example the CCO lead may provide resource support, or influence those who can.

Support such as from the health promoter to get your community behind a cancer awareness initiative

Expertise such as what an IT or informatics person may provide

Those with specific needs, such as physicians who receive reimbursements for attaining specific screening rates, or a patient with strong family history of cancer.

Finally, and we will learn about ranking this category in “Change Management” where are potential participants on the scale of being prepared to change their practice, to improve cancer screening?

## SO, NOW YOU KNOW:

What makes for an effective team

The different stages of team development.

How to identify, analyze and strategize the engagement of stakeholders.

The roles and scopes of the various professionals in family practice.

How to select a diverse, complementary team.



Having completed this module, you now

What makes for an effective team

Know the different stages the team life cycle

Can identify, analyze and strategize the engagement of stakeholders

Understand the different roles and scopes of practice of the various professionals you work with, and

Can select a diverse and complementary team.

QUESTIONS?

59



## ACKNOWLEDGEMENTS AND REFERENCES

- Katzenbach, Jon. Smith, Douglas. The Discipline of Teams HBR Mar-Apr 1993
- Ontario Ministry of Health and Long Term Care
- Tuckman, Bruce (1965). "Developmental sequence in small groups". Psychological Bulletin 63 (6): 384–99