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Teambuilding for Nurse Managers

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TEAMBUILDING FOR NURSE MANAGERS

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A Culminating Project Presented to the Faculty of the Graduate School of the Lindenwood Colleges in Partial Fulfillment of the Requirements for the Degree of Masters of Science in Health Administration

Thesis M784+ 1982

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DEDICATION

The author wishes to dedicate this manual to the three most important men in her life--her Father and Lord Jesus Christ, Bill, and Keven.

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Thank You.

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PREFACE

This manual is written for nurse managers in hospital settings and nurse administrators in a variety of health care facilities i.e., comprehensive neighborhood health centers, community agencies, long term care facilities and rehabilitation centers. Managers in the field of business could also enhance their managerial skills through the use of this manual.

The purpose of this manual is to promote the concepts of teambuilding. These concepts are presented through seven (7) self-instructional modules. Teambuilding, an organization development concept, encourages and enhances a team approach to task performance, decision-making and problem-solving. Teambuilding can also enhance the development of effective interpersonal relationships.

Teambuilding started as a precursor to organizational development programs. It was not well received initially, because managers were sent to seminars and workshops outside of their perspective organizations. When the managers

returned they either attempted to implement the teambuilding concepts without success or made no attempts to implement them. Nonacceptance of teambuilding stemmed largely from rejection of those within the organization who had no interest in changing the status quo.

An effort to enhance the acceptance of teambuilding led to prepackaged and individualized programs. The most successful implementation occurred when the organization's administrative staff accepted and promoted the implementation of teambuilding.

It was also successful when participating management techniques were integrated into the manager's leadership style.

Teambuilding has currently been accepted and implemented in industry, business and limited health care organizations across the country.

Teambuilding can be beneficial to nurse managers without formal managerial preparation and can broaden the scope of experienced managers. They can be taught managerial skills most conducive to teambuilding. These skills are developing interpersonal relationships; promoting an organizational climate conducive to teambuilding implementation; establishing open communication, promoting cooperative team cohesiveness and conducting effective team meetings.

Self-instructional modules refer to a learning package which include pre-instructional and post-instructional exercises, provisions for responses, feedback and selected content. The materials can be learned without an instructor or with minimal guidance. The learning materials are self-paced.

The theoretical basis for the self-instructional approach to the learning of teambuilding concepts are based upon varied sources. The American Nurses Association (ANA) (1978 p. 1) documented that there was a current shift towards the learner being held accountable for education. The emphasis in learning was on competency not the educational process.

As early pioneer in self-instructional methodologies (Skinner, 1954, pp. 86-97) supports the effectiveness of self-instruction for the quantity of content learned. He further suggests that two individuals may cover the same materials in different time spans, however, in terms of content, the learning results would be the same.

When one considers the thrust of the adult learner concepts and theories the focus is on adult expectation for their increased competence. Learning experiences sought are significantly related to previous knowledge and/or past life experiences. Adult expectation is a motivating factor to

accomplishing goals. In as much, self-instructional modules can be motivational in that the learner experiences the acquisition of knowledge and skills.

The theory for learning according to Knox, (1977, p. 428) specifically relates to the focus of these self-instructional modules. He suggests change in major roles of the nurse manager and organization development towards teambuilding warranting a change in performance. The potential for learning is enhanced and focuses the learner's attention on needed change in competence.

As the instructor facilitates the learning experience through a non-threatening climate the adult expectations can be clarified. The provision of a role model is advocated. An example related to the skill or knowledge the learner will possess at the end of the educational experience especially in health settings is also suggested. The examples could be in the form of diagrams, written, oral interpretations or through the use of a practitioner.

Swendsen (1981) conducted a study with heads of the National League of Nurses (NLN) accredited baccalaurate nursing schools. The study showed that self-instructional modules, in contrast to the more traditional methodology, have not been proven to be a better mode for teaching.

The trend for instruction in nursing education is progressively moving towards the self-instructional modes of learning. The Swendsen study (1981) did not show a reduction in cost for using self-instructional methodologies in learning. However, faculty were allowed more time to facilitate the students learning experiences. Subsequently, Swendsen stated, learning was enhanced without increased faculty staffing.

Self-instructional modules were selected as the learning mode of choice for this manual because of their unique advantages. Modules promote active individual participation. They allow nurse managers to work at their own pace and time schedule.

The modules provide immediate feedback and reinforcement. Less time is required per learner as the subject matter and related topics are presented in small steps resulting in longer retention. The modules are accessible and can be modified to adjust to the changing conditions within the organization. Teambuilding self-instructional modules are a timely approach to managerial development. However, there are benefits and problems to self-instructional learning according to Swendsen's (1981) study.

Benefits:

- -- Teaching materials well organized
- --Learning objectives are clearly defined
- --Self paced
- --Student and faculty preference for self-instructional modules
- --Adaptable to a variety of learning styles
- -- Specified level of competence can be achieved
- -- Programs define what the student should learn more than traditional instruction
- --Students are clearly aware of instructor expectations
- -- Increased self-esteem and confidence in own competence
- --Increased one to one instructor student interaction for consultation and guidance

Problems:

- -- Lack of support from administration
- --Instructors not rewarded for spending time and expertise invested in the development of self-instructional materials
- --Students and instructors who do not like selfinstruction
- --Instructors and students who do not know how to use self-instructional modules
- -- Loss or damage to the equipment
- -- Loss of small group interaction
- --Student procrastination
- -- Instructors who continue to lecture from selfinstructional modules

Problems: (Con't.)

- --Instructor resistance to changing learning materials as the need indicates
- --Instructor unfamiliarity with materials before presenting to students
- --Students lose drive to think for themselves by reviewing answers before completing instructional exercises

Many nurse managers are promoted because of their clinical expertise and their ability to demonstrate clinical competency, both of which are crucial elements to successful management. However, another critical element is a manager's preparation and influence to accomplish the goals of the organization through the work of others.

Today's nurse manager frequently has little or no managerial preparation. Yet, they are held accountable by the health care organization to perform and maintain competence as managers. Unfortunately, professional and personal commitments minimize time for formal managerial preparation.

A credible choice for novice and experienced managers alike is to build their skills towards implementation of teambuilding and managerial development through the use of economical, easily accessible, and easily modified self-instructional modules.

Nursing personnel today do not respond productively to authoritarian or lassize-faire leadership styles. The concept of teambuilding advocates the use of participative leadership as the style of choice. Nursing personnel work more effectively when they contribute to the decision-making process. They feel a sense of control of their environment instead of the environment controlling them.

In most instances, nurse managers are faced with people problems which effect the quality of patient care. There is poor communication, strained interpersonal relationships and unmet organizational goals. The existence of these problems and others related to non-committed employees warrant action on the part of management.

If teambuilding is implemented properly it can minimize or alleviate poor communication, strained interpersonal relationships, inadequate decision-making and poor patient care. However, teambuilding is not a panacea. It is time consuming and a challenge for administration, the manager, and the staff. All of these factors must be given consideration before teambuilding is implemented.

INTRODUCTION

This manual is divided into two sections. Section I entitled "Develop Managerial Skills" contains three modules. Section II entitled "Teambuilding Concepts: Principles and Practical Applications" contains four modules. Each module contains objectives, pre and post-instructional exercises with corresponding response sheets, answer sheets, and a module text.

SECTION I: DEVELOP MANAGERIAL SKILLS

Module I - A Systematic Approach: Introduction to

Organizational Theory and Development - Introduces and
reinforces the structure and function of the health care
organization from a systems perspective. Organizational
development is introduced as a process of organizational
planned adaptation to changing conditions in an organizational climate conducive to the needs of the employees
characterized by the informal organization.

Module II - Managerial Assessment: An Ongoing Process Describe the role of the leader and five managerial leadership styles. A managerial assessment questionnaire,
skills assessment and standards list are provided to assist

the nurse manager in identifying where emphasis on managerial development should be placed towards teambuilding.

Guidelines for the selection of a competent, compatible coach to facilitate managerial development are provided. The manager is encouraged to utilize all available resources to promote managerial development. At this point the manager could identify and develop a strategic plan to utilize strengths and eliminate weaknesses. The manager may utilize these skills in a variety of settings.

Module III - <u>Building Managerial Skills</u> - Identifies and provides guidelines for those managerial skills essential to teambuilding. It promotes self-confidence as the manager influences others to accomplish the goals of the organization. Strategical plans are outlined to assist the manager in developing a rapport and establishing a climate which will promote teambuilding. Such skills as developing open communication, establishing trusting and working relationships, and conflict management are discussed. Suggestions for use of 1) collaboration, 2) discipline, 3) influence,

SECTION II: TEAMBUILDING CONCEPTS: PRINCIPLES AND PRACTICAL APPLICATIONS

Module I - Teambuilding - Describes the purpose of teambuilding as it relates to planned change. It illustrates the kind of organizational problems that can be resolved through the use of teambuilding. Five concepts are discussed which may effect nursing personnel's ability to accept teambuilding. The role of a team leader as well as a mature team is described.

Module II - <u>Determining the Feasibility of Teambuilding</u> - Compares and correlates the Nursing Process, standards of nursing practice, and job satisfaction survey. The nurse manager is exposed to a familiar management assessment tool, the Nursing Process. Its value and correlation to the nursing standards of practice and job satisfaction management assessment tools are explored. These tools can be significantly integrated to serve the needs of both the nurse manager and the team.

Most importantly: the tools facilitate the manager in assessing the team to determine the need for teambuilding.

The manager is provided selected behavior and team problems by which to assess the team. The manager is shown how to

develop a job satisfaction survey. The purpose and advantages of the survey are discussed. If these select problems exist then the implementation of teambuilding techniques are suggested. Once the problems are identified the nurse manager is shown the advantages of the use of participative management in resolving the problems.

Module III - <u>Implementing Teambuilding</u> - Identifies three possible leaders who can implement teambuilding; the administrator, consultant or head nurse. The advantages and disadvantages of each are discussed. The nurse manager is guided through the preliminaries for the implementation of teambuilding. The selection of a coach is encouraged. This person can expedite and facilitate the manager's development.

A major thrust of the module is the behavior of the manager. The impact the manager has as a role model on the team is especially significant. The manager is asked to predict and analyze the effects of managerial behavior on the team and the team's perception of the effects of that behavior.

Once there is an indication to implement teambuilding the manager is guided through an evaluation process to determine the practicality of participative management and teambuilding.

The manager is then asked to imagine being a participative manager viewing the nursing team as a viable functioning system. The module delimits five acceptance concepts and team interactions which can promote the implementation of teambuilding.

Module IV - Effective Team Meetings - Provides a description of group dynamics, team formation, the interactional process and task performance techniques. The manager is provided step by step guidelines, approaches and exercises to strengthen team cohesiveness, team commitment, negotiate roles for task accomplishments and conduct team meetings. The manager is shown how to develop an agenda based upon the job satisfaction survey. An evaluation process is explored to determine the effectiveness of meetings.

HOW TO USE THIS MANUAL

Self-instruction as a mode of learning is highly conducive to the adult learning process. Yet, this approach to learning requires honesty on the part of the learner to complete the instructional exercises prior to reviewing the provided answers for maximal learning benefit. Reviewing the answers prior to completing the instructional exercises could significantly affect the outcome of the learning experience.

An instructor should be available as needed by the student to facilitate the learning experience, although an instructor does not necessarily need to be present for the learner to complete the modules.

This manual can be used by managers on all levels. Novice managers can complete Section I and II in sequential order. Experienced managers may read any or all modules within Section I based upon need. It provides an introduction to assessing and developing managerial skills. Section II, Modules I-IV can then be completed. Persons with considerable managerial skills who choose to read only Section II should do so only if they have a sound awareness of their managerial developmental process.

SECTION I DEVELOP MANAGERIAL SKILLS

MODULE I A SYSTEMATIC APPROACH: INTRODUCTION TO

ORGANIZATIONAL THEORY AND DEVELOPMENT

OBJECTIVES

Upon completion of this module the nurse manager should be able to:

- 1.1 Define the complex organization as it relates to organization theory
- 1.2 Identify formal organization
- 1.3 Explain the informal organization
- 1.4 Cite the composition and purpose of a system
- 1.5 Define an ideal organizational climate
- 1.6 Identify flexibility as it relates to organization adaptation to changing conditions
- 1.7 Identify the purpose of organizational development
- 1.8 List three (3) qualities of organizational development

SECTION I

DEVELOP MANAGERIAL SKILLS

MODULE I

A SYSTEMATIC APPROACH: INTRODUCTION TO ORGANIZATIONAL THEORY AND DEVELOPMENT

PRE-INSTRUCTIONAL EXERCISE

DIRECTIONS: The purpose of this exercise is to determine your present knowledge of organizational theory. Circle the BEST response/s for each question from the choices provided on the response sheet 12. A complete answer may consist of one or a combination of responses. Compare your answers with the answer sheet provided on page 13. There are ten (10) questions in this pre-instructional exercise. The minimum criterion is for you to respond correctly to nine (9) of the questions below.

- 1. Health care delivery system/s is/are the following type of organization/s:
 - a. complete
 - b. comparison
 - c. complex
 - d. comprehensive

- 2. The component/s of the health care organization is/are:
 - a. simple and complex
 - b. formal and informal
 - c. structure and process
 - d. purpose and structure
- 3. The process of the formal organization is:
 - each department contributing to the organization
 - b. individuals getting their needs met
 - it describes procedures to accomplish
 work
 - d. staff uniting according to needs
- 4. The structure of the organization can be described as the employees who work together daily.
 - a. formal
 - b. component
 - c. complex
 - d. informal

- Select the category of need/s for an informal organization.
 - a. anticipate
 - b. approval
 - c. conform
 - d. construct
 - e. belong
- 6. In an organizational system there is:
 - a. give and take
 - b. confusion and miscommunications
 - c. cohesiveness and continuity
 - d. recognition and praise
 - e. all of these
- 7. The conditions in the internal and external environment of a viable health care facility should be:
 - a. inflexible/unresponsive
 - b. responsive/adaptive
 - responsive and informal
 - d. formal and unadapting

- 8. The medical center gives the interdependency of the departments coordinated and unified:
 - a. contributions
 - b. goals
 - c. demands
 - d. objectives
- 9. Organizational climate can be defined as the:
 - a. atmosphere in which the nursing staff work
 - b. interdependent departments
 - policies, procedures, and job descriptions
 - d. adaptation to changing conditions
- 10. The purpose of organizational development is to:
 - a. assist in problem-solving
 - b. belong and conform
 - unite staff according to needs
 - d. contribute and receive

SECTION I DEVELOP MANAGERIAL SKILLS

MODULE I A SYSTEMATIC APPROACH: INTRODUCTION TO

ORGANIZATIONAL THEORY AND DEVELOPMENT

RESPONSE SHEET

PRE-INSTRUCTIONAL EXERCISE

1.	а	Ъ	С	đ	e		
2.	а	ь	С	d	е		
3.		ъ		đ	e		8
4.		ъ		đ	e		
5.		b			e		a
6.		b			e		
7.		Ъ		d	e		
8.		b		d	е		
9.	а	ь	c	d	e		
10.	а	ь	с	d	e		

Correct Responses = ____%

SECTION I DEVELOP MANAGERIAL SKILLS

MODULE I A SYSTEMATIC APPROACH: INTRODUCTION TO

ORGANIZATIONAL THEORY AND DEVELOPMENT

ANSWER KEY

PRE-INSTRUCTIONAL EXERCISE

- 1. c Complex
- 2. b Formal and informal
- 3. c It describes the procedures to accomplish work
- 4. d Informal
- 5. b Approva1
 - c Conform
 - e Belong
- 6. e All of these
- 7. b Responsive/adaptive
- 8. b Goals
 - d Objectives
- 9. a Atmosphere in which the nursing staff work
- 10. a Assist in problem-solving

SECTION I

DEVELOP MANAGERIAL SKILLS

MODULE I

A SYSTEMATIC APPROACH: INTRODUCTION TO
ORGANIZATIONAL THEORY AND DEVELOPMENT

ORGANIZATIONAL STRUCTURE

Objective Number

1.1

The health care delivery system is made up of complex organizations. A health care facility is a complex organization composed of two parts--the formal and informal organization.

1.2

They can be explained in terms of their structure, process and purpose. The formal organization establishes policies, procedures, and job descriptions. Its purpose is to provide health services for its clientele and salaries for its employees. The process of the organization is that it describes procedures employed by various group members so that specific activities connect smoothly to accomplish the work of the facility.

1.3

The informal organization is comprised of the employees who work together daily. They have special needs and act accordingly. The informal organization's structure is based on likes and dislikes, self-assumed leaders and group appointed leadership. The informal process is the result of individuals using their position to get their needs met.

There are three needs of the informal organization. They are as follows: attention and approval; belonging and conforming; and participation and contribution.

These three needs are manifested in the daily interactions among the nurses. As the nurses work together, they interact on three levels.

Level I - Interpersonal

The formal role of the nurse is redefined for self-satisfaction.

1.3 (Con't.) Level II - Group

The staff unite or divide themselves according to their needs.

Level III - Intergroup

Nurses are in conflict or united in a destructive or productive manner.

1.4 Systematic Organization

Another aspect of the health care facility is that it is a system. A system can be defined as a group of interdependent departments which together make up the organization. Each department contributes and receives something from the health care facility. The facility is interdependent on the health care delivery system and the community.

The hospital as a health care facility is an organization. All departments are interdependent for smooth functioning as no one department could exist without the support of the other. Further, if

1.4 (Con't.) individual departments were all tallied,
the sum total of these individual departments are not the same nor are they greater
than the whole. It is the hospital which
give the interdependency of these
departments coordinated unified goals and
objectives.

The nursing service department is a subsystem of the hospital. Each unit within the nursing service is an interdependent component of the nursing service subsystem.

Taken a step further an individual nursing unit is a sub-subsystem, composed of interdependent components (nursing staff).

Each nursing staff member contributes and receives something from the nursing unit as well as its other staff members. Each nursing unit contributes and receives something from the nursing department as the nursing department contributes and receives from other interdependent

1.4 (Con't.) departments as well as the hospital. The hospital receives and contributes to other health care facilities or organizations as it is an interdependent component of the health care delivery system.

The nursing unit is an example. When nursing staff, an informal organization have unmet needs they are unlikely to be able to contribute to and receive from the hospital productively. As a result of unmet personal needs hospital goals are left unaccomplished. The quality of patient care may decline as well as staff morale. This type behavior will affect both the unit and the hospital as a whole. When the unit becomes dysfunctional the hospital as a whole becomes dysfunctional. When any of these components become dysfunctional and stop contributing to the whole it affects the ability of the entire system to function effectively.

1.5

Once the hospital or administration allows the informal organization to continue unsatisfactorily, a negative organizational climate is established.

Essential Organization Components

Organizational climate relates to the atmosphere in which the nursing staff work. The climate can be controlled by the nurse manager. The climate might be one in which animosities, cliques, gossip, negative attitudes, poor communication exist.

The climate could also be one in which open communication and differences are discussed within a group setting to resolve conflict and misconceptions. Non-constructive cliques are minimized.

1.6

It is the responsibility of the hospital to be responsive to both the needs of the informal organization and the changing conditions of the community.

1.6 (Con't.) When the hospital is responsive to the needs and is flexible to changes, it is considered a viable organization.

Any organization which is unresponsive and inflexible to the changing internal, external conditions and needs is likely to die and become nonexistent.

Internal problems within the health care

organization such as unmet goals may

indicate a need for organization development.

Although there has been limited acceptance of organization development it can assist in problem-solving and the renewal process within the health care organization.

1.8 Organization development is planned change.

Its purpose is to improve organizational
effectiveness in achieving goals. Organization development can succeed through planned
intervention in both process and task/goals
concerning individuals or the group.

SECTION I

DEVELOP MANAGERIAL SKILLS

MODULE I

A SYSTEMATIC APPROACH: INTRODUCTION TO

ORGANIZATIONAL THEORY AND DEVELOPMENT

POST-INSTRUCTIONAL EXERCISE

DTRECTIONS: Circle the BEST response/s for each question from the choices on the response sheet provided on page __24_. A complete answer may consist of one (1) or a combination of responses. The minimum criterion is for you to respond correctly to five (5) of the questions below. Review page __25__ to compare your responses to the answer key. The number of correct responses will determine how well you understood the material provided on organizational theory.

- 1. The nursing service is a subsystem of:
 - a. all other departments
 - b. complex organization
 - c. health care delivery system
 - d. hospital

2.	Organizational	climate	is	best	described	as:	
----	----------------	---------	----	------	-----------	-----	--

- a. atmosphere
- b. temperature
- c. location
- d. all of these

3. An adapting responsive health care organization effects:

- a. community
- b. clients/patient
- c. employees
- d. other health care organizations

4. Significant aspect/s of the nursing staff system is/are:

- a. interdependency
- b. receiving
- c. contributing
- d. dependency

- 5. Distinctive qualities of organization development are:
 - a. planned change
 - b. planned renovation
 - c. goal achievement
 - d. construction bids
 - e. planned intervention

MODULE I A SYSTEMATIC APPROACH: INTRODUCTION TO

ORGANIZATIONAL THEORY AND DEVELOPMENT

RESPONSE SHEET

POST-INSTRUCTIONAL EXERCISE

1. a b c d

2. a b c d

3. a b c d

4. a b c d

5. a b c d e

Correct Responses ____ = ___%

Compare pre-instructional and post-instructional exercise results. See instructor for guidance as needed.

MODULE I A SYSTEMATIC APPROACH: INTRODUCTION TO

ORGANIZATIONAL THEORY AND DEVELOPMENT

ANSWER KEY

POST-INSTRUCTIONAL EXERCISE

- 1. d Hospital
- 2. a Atmosphere
- a Community
 - b Clients/patients
 - c Employees
 - d Other health care organizations
- a Interdependency
 - b Receiving
 - c Contributing
- 5. b Planned change
 - c goal achievement
 - d planned intervention

You have completed this module.

MODULE II MANAGERIAL ASSESSMENT: ONGOING PROCESS

OBJECTIVES

Upon completion of this module the nurse manager should be able to:

- 2.1 Define the term "leader"
- 2.2 List four (4) of five (5) managerial leadership styles as described in this module
- 2.3 Define each managerial leadership style

Autocratic

Democratic

Laissze-faire

Participative

Situational

- 2.4 Cite eight (8) standard managerial skills
- 2.5 Perform a managerial assessment

Use the managerial skills list to identify strong and weak managerial skills.

List strong and weak managerial skills.

Objectives

2.5 (Con't.) Answer the assessment questions to determine which managerial skills can be maximized through practice.

Determine how strengths, weaknesses and interpersonal interactions are preceived by administration, peers, and staff.

Review list for identified weak managerial and interpersonal skills.

Establish goals to improve weak managerial skills.

Seek a competent coach to assist in managerial skills, assessment and development.

DEVELOP MANAGERIAL SKILLS

MODULE II

MANAGERIAL ASSESSMENT: ONGOING PROCESS

PRE-INSTRUCTIONAL EXERCISE

DIRECTIONS: The purpose of this exercise is to determine your present ability to assess your managerial skills. Use the response sheet provided on page 32. Circle the BEST response/s for each question from the choices provided. A complete answer may consist of one or a combination of responses. Compare your answers with the answer sheet on page 33. There are nine (9) questions in this pre-instructional exercise. The criterion is for you to respond correctly to eight (8) of the questions below.

- 1. A leader can be defined as one who:
 - a. controls behavior
 - b. demands respect
 - promotes recognition
 - d. influences behavior

- 2. Decisions made between the nurse manager and the staff who feel a sense of success in their endeavors is what type of leadership style?
 - a. situational
 - b. participative
 - c. contributive
 - d. autocratic
- 3. Identify managerial skills:
 - a. define and negotiate roles
 - b. make decisions
 - c. clarify goals
 - d. control emotional climate
 - e. demand excellent performance
 - f. control administrative climate
- 4. Which method/s will assist you in determining your strengths and weaknesses:
 - a. expression
 - b. inspection
 - c. introspection
 - d. reflection

- 5. Whose interpretation of strengths and weaknesses may have a significant impact on your effectiveness and ability to influence others within the health care organization:
 - a. staff and relatives
 - b. administration and peers
 - c. relatives and close friends
 - d. administration and close friends
- 6. Your perception may be different from those you supervise relative to:
 - a. behavior
 - b. skills
 - c. influence
 - d. interpersonal interaction
- 7. Maximize your strengths by:
 - a. comparing strengths to weaknesses
 - b. utilizing your strengths frequently
 - documenting their effectiveness
 - d. minimizing your weaknesses

- 8. Describe the characteristic/s of an effective goal:
 - a. challenging
 - b. concise
 - c. measurable
 - d. attainable
- 9. An effective coach should be:
 - a. confident in your managerial potential
 - b. competent in managerial theory
 - c. confident in their reputation
 - d. competent in managerial practical application

MODULE II MANAGERIAL ASSESSMENT: ONGO ING PROCESS

RESPONSE SHEET

PRE-INSTRUCTIONAL EXERCISE

1. a b c d

2. a b c d

3. a b c d e f

4. a b c

5. a b c d

6. a b c d

7. a b c d

8. a b c d

9. a b c d

Correct Responses ____ = __ %

Compare pre-instructional and post-instructional exercise results. See instructor for guidance as needed.

MODULE II MANAGERIAL ASSESSMENT: ONGOING PROCESS

ANSWER KEY

PRE-INSTRUCTIONAL EXERCISE

- 1. c Promotes recognition
 - d Influences behavior
- 2. b Participative
- a Define and negotiate roles
 - b Make decisions
 - c Clarify goals
- 4. c Introspection
- b Administration and peers
- 6. a Behavior
 - b Skills
 - c Influence
 - d Interpersonal interaction
- 7. b Utilizing your strengths frequently

- a Challenging
 - c Measurable
 - d Attainable
- 9. a Confident in your managerial potential
 - b Competent in managerial theory
 - d Competent in managerial practical application

DEVELOP MANAGERIAL SKILLS

MODULE II

MANAGERIAL ASSESSMENT: ONGOING PROCESS

INTRODUCTION

Objective Number

2.1

A managerial assessment can assist you in determining your managerial competence.

Whether you are a self-made, appointed, novice or experienced head nurse, an ongoing process of assessment can be beneficial to you. The first step in the ongoing process is to define a "leader". A leader has the ability to influence the behavior of other people.

How one acts to influence the behavior of others varies. Here is a description of five managerial leadership styles.

2.2 <u>Managerial Leadership Styles</u>

- a) Autocratic
- b) Democratic
- c) Laissze-faire
- d) Participative
- e) Situational

2.3 (Con't.) The five leadership styles are defined as follows:

Autocratic leader: Decisions are made independent of the staff. Orders are given with explanation. No questions are allowed. Pay is believed to be the only reward for services rendered. The staff takes no responsibility for its actions. They just do as they are told. Production is good only in the presence of the leader.

Democratic leader: Decisions are made between the head nurse and the staff. When the head nurse is required to make a decision without the input of the staff, an explanation is given. Constructive criticism is given. The staff is generally more satisfied. They develop a sense of responsibility as their ideas and suggestions for change are encouraged and recognized. They feel a sense of success in their endeavors.

2.3 (Con't.) Laissez-faire leader: This head nurse has
little or no confidence in her ability to
lead. Goals are not set for the staff.
The informal organization reigns. Any staff
member who chooses, makes the decisions.
Productivity is low and work output is
disorganized. Morale and team work is
usually low, the staff has little interest
in their work.

Participative leader: The head nurse has confidence in her staff. Staff ideas are sought. Staff participate in setting goals. Accurate communication goes up, down, across and is received with an open mind. The head nurse and other supervisors are well informed of the staff problems and are responsive. The informal organization is responsive to the goals of the formal organization because they share mutual goals. This makes for a viable organization.

2.3 (Con't.) Situational leader: This style of management incorporates a variety of styles dependent upon the goal to be accomplished and the behavior of the staff in a given situation. Requires adaptability and flexibility as well as foresight to appropriately judge a situation and act efficiently and effectively.

Review the aforementioned leadership styles.

Determine which style most closely represents
your managerial behavior.

The degree to which a nurse manager possesses these management skills will determine her effectiveness in promoting and effecting team spirit among staff members. The goals/tasks which should be accomplished are open communication, team decision-making, and problem-solving. Increased productivity and morale feeling of increased self-confidence among individual staff members and improved interpersonal relationships are the results of effective leadership.

2.3 (Con't.) Now, that you have identified the leadership style which most resembles your management behavior, review the following managerial skill standards list.

2.4 Managerial Skill Standards

- 1. Assess staff needs and objectives.
- 2. Utilize the Nursing Process as it relates to your staff:
 - a) Gather data
 - b) Identify problems
 - c) Establish attainable goals
 - d) Set target dates
 - e) Develop plan of action
 - f) Evaluate
 - g) Revise
- Establish trusting and working interpersonal relationships
- 4. Establish open communication
- Make decisions
- Solve problems
- 7. Plan
- 8. State performance standards

2.4 (Con't.)

Managerial Skill Standards (Con't.)

- 9. Demonstrate technical competence
- 10. Set and clarify goals
- 11. Secure commitment to goals
- 12. Define and negotiate roles
- 13. Provide guidance and supervision
- 14. Manage conflict
- 15. Provide feedback
- 16. Follow up on assigned tasks for self and staff
- 17. Control staff's organization climate

These skills are not listed in any priority.

The priority would be dependent upon the nurse manager.

2.5 Assess your managerial skills:

How do you determine your competency in the aforementioned managerial skills?

Introspection - a look within your own mind and at your feelings will determine your strengths and weaknesses.

2.5 (Con't.) Your perception of your ability to carry out the identified managerial skills is very important.

Make a list with two columns. Entitle one column "Strengths" and the other one "Weaknesses".

Review the managerial skills list. Write the skills in the column for which you believe your skills are most reflective.

For example, if making decisions is a strength of yours, write making decisions in the column marked "Strengths". Follow through the same format for listing other strengths and weaknesses.

Assessment Questionnaire

Ask yourself the following questions in relation to each skill:

1. Do I make use of the skill identified as a strength?

2.5 (Con't.)

- 2. Can I make changes in my job to capitalize on my strengths?
- 3. What are other opportunities within the health care facility in which these skills can be used?
- 4. Do I have other alternatives available to me through community resources, i.e., civic activities and volunteering.

The next phase of the assessment process is to determine how others perceive you. Ask yourself the following questions:

- 5. How do others perceive my ability to perform these skills?
- 6. How do I relate to others?
- 7. What impression have I made on them?

Then ask other people to give you their impression of your ability to perform the managerial skills.

2.5 (Con't.) The people selected to participate in your assessment process should be those whom you trust and who have known you for a period of time. Select at least three people, one from each category:

- a) relative
- b) close friend
- c) work associate (community or professional)

 Ask them the following questions:
- 8. How do you perceive my ability to perform? (Select the skills from the managerial skills list).
- 9. How do I relate to people?
- 10. What impact do I have on them?

As you obtain the information from these people, compare your perception of your strong managerial skills to their perception of your strengths.

Did you find they were the same or different?

2.5 (Con't.) Another step to this phase of the assessment process is to determine how your strong, weak managerial skills and interpersonal interactions are perceived by administration, peers and your staff members.

Perhaps your work associate may be able to provide you with this vital information.

However, if she/he is not able, then you will need to identify someone in each role:

administration, peer and staff to obtain this information.

It is their interpretation of your strong and weak skills that will have a significant impact on your effectiveness and ability to influence them.

When you ask for feedback related to your behavior and skills, anticipate the unexpected. Occasionally, your perception of yourself is not what is being projected to others. You may be perceived different in one degree or

2.5 (Con't.) another by others. You are taking a personal risk when you ask for this type of information. You must weigh what you are being told against the underlying dynamics as well as your own judgment.

Review all the information from the assessment process. That which relates to managerial skills and interpersonal interactions should be given careful consideration. Look for and participate in activities which will allow you to maximize your strengths.

A word of caution, do not place undue emphasis on your strong skills at the expense of your weak skills by allowing those weaknesses to stagnate; allowing those weak skills to remain weak.

2.5 (Con't.) Strategically plan the steps you can take on your own and with the assistance of other resources to develop and improve your weak managerial and interpersonal relationship skills.

Review the list of compiled weak skills.

Identify short term goals, three (3), six

(6) months; long term goals, nine (9) months and one (1) year.

Establish attainable and measurable goals.

Develop step by step plans as to how you

plan to improve each weakness and evaluate

your progress at the intervals you established.

It will not be long before your progress is

significantly measurable.

2.6 Elicit the support of a reliable coach whom you trust and have confidence in their managerial competence, theoretical knowledge and performance.

2.6 (Con't.) It is equally important for the coach to have mutual feelings toward you and confidence in your potential to develop into the nurse manager you aspire. The coach should be confidently able to assist in your development.

The role of the coach is to assess, guide, and support the development of the nurse manager. You may be a self-made, appointed, new or experienced manager. You can determine your capability to accomplish the goals and task of bringing team spirit to your staff members through the ongoing process of self-assessment.

DEVELOP MANAGERIAL SKILLS

MODULE II

MANAGERIAL ASSESSMENT: ONGOING PROCESS

POST-INSTRUCTIONAL EXERCISE

DIRECTIONS: Please circle the BEST response/s for each question from the choices on the response sheet provided on page __51_. A complete answer may consist of one or a combination of responses. The criterion is for you to respond correctly to six (6) or more of the questions below. Compare your answers to the answer sheet on page __52_. The number of correct responses will determine how well you understood the material provided on managerial assessment for teambuilding.

- Which of the following is/are managerial leadership style/s?
 - a. laissze-faire
 - b. contributive
 - c. demonstrative
 - d. participative
 - e. situational
 - f. democratic

- 2. The characteristics of a compatible and competent coach is/are:
 - a. trustworthy
 - b. facilitates your development
 - c. managerial expertise
 - d. mutual confidence in your potential
- 3. Managerial skill/s which can enhance interpersonal relationships between the manager and the team are:
 - a. make decisions
 - establish trusting and working relationships
 - demonstrate technical competence
 - d. solve problems
- 4. Communication between manager, team and individual team members can be promoted by:
 - a. feedback
 - b. clearly stated performance standards
 - c. manage conflict
 - d. set and clarify goals

- 5. Based upon what you have learned what other alternative/s may be available to you to maximize your strengths and limit your weaknesses outside of the work setting:
 - a. home
 - b. retail stores
 - c. community organizations
 - d. volunteer groups
- 6. When assessing your managerial skills which of the following should be considered?
 - a. weaknesses only
 - b. present skill utilization
 - elicit others perception of your ability and impact
 - d. personal risk taking
 - f. strengths not weaknesses

MODULE II MANAGERIAL ASSESSMENT: ONGO ING PROCESS

RESPONSE SHEET

POST-INSTRUCTIONAL EXERCISE

- 1. a b c d e f
- 2. a b c d
- 3. a b c d
- 4. a b c d
- 5. a b c d
- 6. a b c d e

Correct Responses ____ = ___%

Compare pre-instructional and post-instructional exercise results. See instructor for guidance as needed.

DEVELOP MANAGERIAL SKILLS

MODULE II

MANAGERIAL ASSESSMENT: ONGOING PROCESS

ANSWER KEY

POST-INSTRUCTIONAL EXERCISE

- 1. a Laissze-faire
 - d Participative
 - e Situational
 - f Democratic
- a Trustworthy
 - b Facilitates your development
 - c Managerial expertise
 - d Mutual confidence in your potential
- 3. b Establish trusting and working relationships
- 4. a Feedback
 - b Clearly stated performance standards
 - d Set and clarify goals
- 5. a Home
 - c Community organizations
 - d Volunteer groups

- b Present skill utilization
 - c Elicit others perception of your ability and impact
 - d Personal risk taking

You have completed this module.

DEVELOP MANAGERIAL SKILLS

MODULE III

BUILDING MANAGERIAL SKILLS

OBJECTIVES

Upon completion of this module the nurse manager should be able to:

- 3.1 Compile a list of managerial skills, requiring development along with other professional goals
- 3.2 Compare professional goals to organizational goals to determine compatability
- 3.3 Define negotiation
- 3.4 Identify three (3) of the four (4) methods which can build self-confidence from the results of the managerial assessment
- 3.5 Choose four (4) of five (5) strategical methods for the development of a trusting and working relationship among staff
- 3.6 Define open communication
- 3.7 Define influence

- 3.8 Identify two (2) factors which will initially increase the amount of influence you have on the staff
- 3.9 Define discipline
- 3.10 Select five (5) of six (6) reasons for strategically planning, incentive, recognition, rewards and discipline
- 3.11 Define collaboration
- 3.12 Cite the two types of ultimatums offered staff during the final stage of negotiation
- 3.13 Define conflict
- 3.14 Compare emotional conflict to substantive conflict
- 3.15 Discuss when conflict management is most effective
- 3.16 Discuss the preparatory phase of the conflict resolution method
- 3.17 State two (2) aspects of the substantive process
- 3.18 Describe the three (3) steps to the conflict resolution method

- 3.19 Describe three (3) of four (4) approaches to implement the conflict resolution method
- 3.20 List five (5) of the six (6) steps to the collaborative problem-solving method
- 3.21 Identify seven (7) of the fifteen (15) motivating factors which can support the staff

DEVELOP MANAGERIAL SKILLS

MODULE III

BUILDING MANAGERIAL SKILLS

PRE-INSTRUCTIONAL EXERCISE

DTRECTIONS: The purpose of this exercise is to determine your present knowledge regarding building managerial skills. Please use the response sheet provided on page 63. Circle the BEST response/s for each question from the choices provided. A complete answer may consist of one or a combination of responses. Compare your answers with the answer sheet provided on page 64. There are ten (10) questions in this pre-instructional exercise. The minimum criterion is for you to respond correctly to nine (9) of the questions below.

- 1. Self-confidence is gained through:
 - acknowledging weakness in managerial skills
 - b. establishing attainable goals
 - inquisitive thinking
 - d. setting challenges just beyond your ability to accomplish

- 2. Approaches which will assist in the development of a trusting and working relationship among staff is/are:
 - a. demonstrate a desire to get to know staff
 - b. using power as a source of influence
 - c. change your habits instead of your staff's
 - d. treat them as they wish to be treated
 - e. help staff develop professionally
- 3. What factor/s initially increase/s the amount of influence you have on your staff?
 - a. flexibility and staff perception
 - b. punishment and power
 - c. staff perception and discipline
 - d. discipline and ultimatums
- 4. Emotional conflict is to informal organization as substantive conflict is to:
 - a. distrust
 - b. formal organization
 - c. health organization
 - d. rejection

 Matching: Write the letter of the definition in Column II which corresponds with the correct term in Column I in the space provided.

COLUMN I

- 1)___collaboration
- discipline
- negotiation
- 4)___open communication

COLUMN II

- a. Power to effect thinking and attitudes of staff without coercion.
- b. A climate in which concerns and mutual sharing of ideas is actively encouraged.
- c. Process of changing

 behavior through education and

 training to act according to

 rules and policies.
 - d. State strong feelings before problem-solving through the use of conflict resolution.
 - e. Staff invest themselves, their ideas, and opinions together toward a mutual goal.
 - f. Use of information and power to effect behavior within a time frame to satisfy needs.

- 6. Select the step/s to conflict resolution.
 - a. treat the other person with respect
 - b. define the problem in terms of need
 - c. listen until you experience the other side
 - d. select the solution
 - e. state your views, needs and feelings
- 7. The formal and informal organizations benefit from the substantive process of conflict resolution because:
 - a. your concerns are stated after the team concerns are understood
 - it addresses conflict of needs and establishes mutual goals
 - c. emotionally laden words are avoided
 - d. emotions are settled before rational problem-solving begins

8.	Put in correct or	rder the steps to the collaborative
	problem-solving	process by placing the number on the
	response line in	a performance sequence.
	1)	select the best solution that will meet both parties needs
	2)	plan who will do what, where, and by when
	3)	define the problem in terms of needs, not solutions
	4)	brainstorm possible solutions
	5)	evaluate the problem-solving process
	6)	implement the plan
9.	9. Select the motivating factor/s.	
	а.	consistent leadership, loose supervision
	ъ.	autocratic management, trust, upward
		mobility
	с.	adequate staffing, inadequate facilities
	d.	variance in workload, acceptance of
		initiative and creativity

- 10. Negotiation is/are closely associated with:
 - a. collaboration
 - b. discipline
 - c. communication
 - d. introspection

SECTION I DEVELOP MANAGERIAL SKILLS MODULE III BUILDING MANAGERIAL SKILLS RESPONSE SHEET PRE-INSTRUCTIONAL EXERCISE b c d 1. 2. a b c d e a b c d 3. 4. a b c d 1)____ 5. 2)____ 3)____ 4)____ 6. c d 7. a b 8. 1) 3)____ 4)____ 5)____ 6)____ 9. a b c

a b c d Correct Responses = ____%

10.

DEVELOP MANAGERIAL SKILLS

MODULE III

BUILDING MANAGERIAL SKILLS

ANSWER KEY

PRE-INSTRUCTIONAL EXERCISE

- b Establish attainable goals
- 2. a Demonstrate a desire to get to know staff
 - d Treat them as they wish to be treated
 - e Help staff develop professionally
- 3. a Flexibility and staff perception
- 4. b Formal organization
- 5. e 1) Staff invest themselves, their ideas and opinions together toward a mutual goal
 - c 2) Process of changing behavior through education and training to act according to roles and policies
 - f 3) Use of information and power to affect behavior within a time frame to satisfy needs.
 - b 4) A climate in which concerns, and mutual sharing of ideas is actively encouraged

- 6. a Treat the other person with respect
 - b Define the problem in terms of need
 - c Listen until you experience the other side
- 7. b It addresses conflict of needs and establishes mutual goals
- 8. 1)c Select the solution
 - 2)d Plan who will do what
 - 3)a Define problem
 - 4)b Brain storm
 - 5)e Implement
 - 6)f Evaluate
- d Variance in workload and acceptance of initiative creativity
- 10. a Collaboration

DEVELOP MANAGERIAL SKILLS

MODULE III

BUILDING MANAGERIAL SKILLS

INTRODUCTION

Objective Number

This module will provide the nurse manager with guidelines to assist in the building and development of managerial skills.

Essential to the development phase is the manager's understanding of self and staff as well as the role and function respectively within the health care organization. The manager's self-understanding and understanding of staff will be treated separately.

Professional Versus Organizational Goals

3.1

The managerial assessment assists the nurse manager in developing insight; defining strengths, weak areas and establishing goals. The compilation of these and other professional goals should be correlated to the goals and objectives of the organization to determine compatability.

3.2

Ask yourself the following question: Can I get my personal goals and needs met through accomplishing the goals and objectives of the organization?

If your determination results in incompatability you have one of two options. One option is to separate from the organization. The other option is to effect change within the organization. If upon reflection you should find that your goals are compatible with the organization, confidently plan strategies to accomplish your goals.

3.3

Negotiation is the use of information and power to affect the behavior, within a time frame in an attempt to satisfy needs.

Negotiate with the organization to accept your plan, providing you an opportunity to implement or pilot your proposal. How to negotiate for organizational change will be treated later.

3.4

Developing Self-Confidence and Working Relationships

Self-confidence is gained through acknowledgement of strengths in managerial skills;
the establishment of attainable goals; and
realistic plans to improve weak managerial
skills. Further, self-confidence is
manifested when you set your thinking in a
positive direction. I can... I will....
This kind of thinking is not only a
mechanism for building self-confidence it is
the essence of pure power. If you think you
have the power to do it you have power!

Self-confidence is reinforced by feedback from significant others i.e., administration, peers and staff. The feedback is a direct result of the positive impact your self-confident attitude and behavior influences in others.

Insight can be enhanced through a concerted effort to get to know staff and develop a trusting and working relationship.

3.5

A trusting and working relationship can be effectively accomplished through the use of the following strategical plans:

- Demonstrate a desire to get to know your staff.
- Get to know as much about their individual needs as they will allow you to know.
- Accept your staff whether you like them or not.
- 4. Make an earnest attempt to treat them as they wish to be treated.
- Help staff develop professionally.

When developing a trusting and working relationship establish consistent standards of practice and act as a role model. Demonstrate your clinical competence; consistently practice open communication, provide fair and constructive criticism for the staff as they develop professionally.

Managerial Skills

To enhance managerial skills which will promote a trusting and working relationship concentrate on open communication, influence, discipline negotiation, and collaboration.

Open Communication: can be defined as a climate in which concerns, issues, suggestions, differences of opinion, mutual sharing of ideas are actively encouraged. Staff are further encouraged to communicate with a purpose to the persons involved in any given situation. They are discouraged from discussing indiscreetly with anyone. Here, an attempt is made to minimize the potential for confusion, miscommunications and gossip.

From what you have learned can you think
of other ways you can promote open communication among your staff members?

3.6 (Con't.) List on a separate sheet of paper three (3) additional methods you can use to promote open communication.

Consistent behavior towards developing a trusting and working relationship and promoting open communication will earn respect among staff members as well as peers and administration.

Once you have earned a reputation of respect your ability to influence others will be enhanced.

3.7

Influence: is the power to effect the thinking, attitudes and the behavior of staff
members without the use of coercion to meet
the needs of the health care organization.
The degree to which you can influence others
is dependent partially upon how much you
allow others to influence you. Allowing
yourself to be influenced really means going
into a situation with an open mind.

3.8

In your observations and new found awareness of the team you may practice flexibility even to the point of changing your own habits and ideas instead of those of your staff.

Experience will be your best guide to the appropriate use of flexibility. Your influence may be perceived by the staff as positive or negative. Their perception is greatly dependent upon how you use influence.

If influence is expanded it would reflect power. Power relates to legitimate authority. This is the power given through the formal organization. However, the power of great significance is that which is given through the informal organization. The impact of both is illustrated and manifested when you discipline or praise your staff.

3.9

<u>Discipline</u>: is the process of changing the behavior of staff or a staff member through education and training to act according to rules, policies, and procedures. Discipline does not equate with punishment.

3.10

Although spontaneous praise or discipline is appropriate, at times managers should strategically plan incentives, recognition, rewards and discipline.

Identification of the criteria for behaviors which warrant recognition, rewards or discipline can be pre-established. Establish in your mind, keeping fairness and consistency uppermost, what type recognition or discipline would result in the behavior you want to reinforce and encourage.

The reasons for strongly encouraging the planning of incentives, rewards, recognition and discipline is to prevent incidents of inconsistency or omission of the action when needed.

3.10 (Con't.) Two examples:

A situation in which the staff work consistently hard, receiving recognition, praise and thanks is positive.

Another situation could exist in which some workers are given recognition while others go unrecognized for work of the same caliber. This situation could result in low morale which could lead to decreased productivity. The day to day routine can be so engrossing, that the possibility of forgetting to recognize or discipline staff is highly likely.

The practice of recognizing and disciplining staff has far reaching ramifications and implications for application. Many more staff persons are affected than the one receiving input from you.

3.10 (Con't.) Other elements which can have a significant impact on the results of your action and require consideration before you take action are:

- a. place
- b. situation
- c. other people
- d. contributing factors

Anticipate how your comments will be perceived. What will be the impact? How will it be acted upon by the staff involved and staff potentially affected.

You are setting a standard of practice, guidelines and ground rules for what will be accepted as appropriate and inappropriate staff behavior. The staff will evaluate your behavior as being fair and appropriate or unfair and inappropriate.

The process of negotiation starts as a collaborative approach. Approach the staff in this manner when you start negotiations. "Help me!"

3.11

Collaboration: means staff invest of themselves their ideas and opinions together towards a mutual goal. The results being the more they invest the more committed they are to the needs outcome.

Towards the end of the negotiation process ultimatums may be interjected with caution. Ultimatums and final options are choices. When you must use ultimatums they may be more effective after a considerable amount of investment has been made on the staffs part. If presented during the initial interaction ultimatums result in rejection by the staff. Ultimatums should be presented in an agreeable or appealing manner.

3.12

An example for initiating an ultimatum which will be receptive to the staff: "I would like to...." It is advisable to have more than one ultimatum. Allow the staff the selection. Give them an ultimatum that is:

3.12 (Con't.) Ultimatum I: Reasonable for them.

Reasonable for you.

Ultimatum II: Unreasonable for them.

Reasonable for you.

Two examples of ultimatums are:

- I. Staff will be expected to report to duty on time.
- II. Staff will be expected to punch in time card at the beginning of the tour of duty.

In ultimatum I the staff is given freedom and expected to be trustworthy that they will report to duty on time. Ultimatum II removes freedom and trust. The time clock is a controlling factor.

Negotiations are difficult when emotional issues and quantifiable fixed salary rates exist. These situations lead to conflict and a competitive climate among staff members.

3.13

Conflict: is that state in which one individual believes in order to get personal needs met other persons should sacrifice something of value.

Some of the situations which contribute to the development of conflict are:

- a. A difference and incompatability in goals; struggles over allocation of goods, rewards and resources that are highly valued;
- b. Threat to identify and rights;
- c. An atmosphere of distrust and fear.

Conflict can be further analyzed from two perspectives. There is the emotional and substantive aspects.

3.14

Emotional Conflict: Those behaviors among staff quite like the actions of the informal organization suffering from unmet needs.

They may display negative attitudes, anger, distrust, fear, resentment, and rejection.

Substantive Conflict: Relates to the conflict needs of the formal organization regarding disagreements of policies and procedures and differing conceptions of roles and uses of resources.

- 3.15 Conflict Management: Conflict management is more effective when emotional conflict is resolved before substantive conflict.

 When emotions are high it is best to settle the feelings before attempting to rationally problem solve.
- 3.16 <u>Preparation phase</u> of the conflict resolution method requires mutual agreement to proceed with the process and a mutual understanding of the steps to the process

3.16 (Con't.)

Preparation phase (Con't.)

- Ascertain the state of strong feelings before problem-solving through the use of conflict resolution.
- 2) People involved in the process are those who will be affected by the outcome of those with essential information.
- 3) Mutually establish a time and place. It usually takes approximately fortyfive minutes.
- 4) Discussing the purpose of the meeting with the involved staff prior to the session should be decided with discretion.
- judgmental manner so that your statement will accurately represent your concerns "assertion message", (Bolton 1979, p. 251).

3.16 (Con't.) 6) Tell staff what method you will be incorporating into the meeting and why you are doing so.

Example: Past attempts to resolve conflicting needs has resulted in strained relationships among staff. The different approach is an attempt for both the staff and you to get both your needs met.

- 7) If you meet resistance from your staff.

 employ reflective listening. This

 allows for: free expression, reduced

 stress, development of trust. All of

 which promotes the beginning of the

 problem-solving process. If your

 proposal is accepted this step, the

 preparatory phase, may not be needed.
- 3.17 <u>Substantive process</u>: Resolution promotes the concept of participative management in that the staff are given productive structure to assist in the decision-making and the problem-solving process.

3.17 (Con't.) The formal and informal organization benefits from this method because it addresses conflict of needs and is a good tool for establishing mutual goals.

3.18 The Conflict Resolution Method:

"The Conflict Resolution Method" can be an effective management tool. There are three steps to the process.

Step I: Treat the other person with respect.
Respect is conveyed in your behavior.

- a) listen and look attentively
- b) be cognizant of your body language
- c) note your tone of voice, word selection and type of reasoning

Step II: "Listen until you experience the other side." (Bolton, 1979, p. 220).

The goals of good listening is to:

- a) determine the content of the staff's message.
- b) recognize the meaning the message has
 for the staff

3.18 (Con't.) c) acknowledge the feelings displayed

State your concerns only after you have stated the concerns of the staff in a manner which indicates you understand the message given.

Step III: "State your views, needs and
feelings".

Effective open communication is the key:

- a) express your concerns in a concise statement
- b) avoided emotionally ladened words
- c) be honest in your statement
- d) share your feelings
- 3.19 <u>Conflict Resolution Method</u>: can be implemented in the following four situations:
 - singularly by listening on your part and speaking in a non-threatening fashion, thus, reducing tension and promoting productive communication.

3.19 (Con't.)

- 2) at the onset or during a disagreement; explain the method and elicit participation from those involved.
- 3) when there are no disagreements. Roleplaying is a positive method of introduction.
- 4) by you or others as a third party. Your role would be to remain unbiased towards either side. Assure the process is used.

3.20 The Collaborative Problem-Solving Method:

Used in substantive conflict consist of the following:

1) Define the problem in terms of needs, not solutions. "I need"... "You need"...
20 minutes. (Bolton, 1979, p. 242).

- 2) Brainstorm possible solutions.
 - a) do not allow staff to evaluate or clarify any suggestions.
 - b) elect comments from all participants.
 - c) do not allow abstainers
 - d) participation promotes commitment.
 - e) seek quantity not quality.
- Select the solution or combination of solutions that will best meet both parties' needs.
 - a) now is the time to clarify prior
 brainstorm suggestions.
 - b) no evaluations of suggestions.
 - do not select solutions individually;
 time consuming.
 - e) a joint decision should be made on the alternatives

- f) mutual satisfaction is important.
- g) there should be a consensus by a willingness on the individuals part to accept the group decision.
- h) another important aspect to this step is to consider potential consequences of the solution or combination of solutions.
- 4. Plan who will do what, where, and by when. Write out what was agreed upon in terms of who, what, where, and when.
- 5. Implement the plan.
- 6. Evaluate problem-solving process according to (Bolton, 1979, p. 248) asking the other person or persons:
 - --How each of us feels in general about the process we just went through.

- --What each liked most about the process.
- --What each liked least about the process.
- -- Something that bothered me.
- -- Something that bothered the others.
- --Something I wish I hadn't done or said.
- --Something the others wish they hadn't said or done.
- --What each of us can do better next time.
- a) set target date for evaluation.
- b) communication during the evaluation period should be a two way channel.
- c) you should be providing information on the outcome of the solutions.

- d) the staff should also provide you with any information to assist in the implementation of the solution.
- e) further, your role involves constructive guidance and supervision.
- f) the climate should promote positive interpersonal relationships and continued efforts to accomplish established goals.
- 3.21 <u>Motivators</u>: Motivating factors which support the staff in accomplishing its goals are:
 - knowledgeable and consistent leadership
 - adequate facilities and materials with which to work
 - 3) appropriate pay for services rendered
 - 4) adequate staffing
 - 5) clearly defined goals and objectives
 - adequate time schedule

- participatory management
- 8) decreased job pressure lessened due to the clarity of the standards of practice
- 9) supportive resources to assist the staff in accomplishing standards
- 10) trust
- 11) opportunities for the acceptance of initiative and creativity
- 12) variance in workload
- 13) upward mobility
- 14) give respect
- 15) promote a dignity among the staff

DEVELOP MANAGERIAL SKILLS

MODULE III

BUILDING MANAGERIAL SKILLS

POST-INSTRUCTIONAL EXERCISE

DIRECTIONS: There are six (6) questions in the post-instructional exercise. The criterion is for you to respond correctly to five (5) of the questions below. Circle the BEST response/s for each question from the choices provided on page 92. A complete answer may consist of one or a combination of responses on page 93.

- Incompatible personal and organizational goals can lead to:
 - a. frustration
 - b. alienation
 - c. acceptance
 - d. resistance
- 2. The manager who does periodic self-assessments, thinks positive and receives positive feedback will demonstrate:
 - a. open communication
 - b. collaborative skills
 - c. self-confidence
 - d. discipline

- 3. Which of the following managerial behavior/s will promote a trusting and working relationship?
 - establish consistent standards of practice
 - b. demonstrate clinical competency
 - c. practice open communication
 - d. provide fair and constructive criticism
- 4. When planning incentive rewards and discipline consider:
 - a. quantity over quality
 - b. recognition for performance level
 - c. personalities and appearance
 - d. past work performance
- 5. Conflicting policies and procedures for the organization resulting in differing perceptions of employee roles is best described as:
 - a. emotional conflict
 - b. conflict management
 - c. substantive conflict
 - d. conflict resolution
- 6. The team can be motivated best by which of the following:
 - a. paticipatory management
 - b. close supervision
 - c. clear standards of practice
 - d. many rules and regulations
 - e. supportive resources

DEVELOP MANAGERIAL SKILLS

MODULE III

BUILDING MANAGERIAL SKILLS

RESPONSE SHEET

POST-INSTRUCTIONAL EXERCISE

- 1. a b c d
- 2. a b c d
- 3. a b c d
- 4. a b c d
- 5. a b c d
- 6. a b c d e

Correct Responses = %

Compare pre-instructional and post-instructional exercise results. See instructor for guidance as needed.

DEVELOP MANAGERIAL SKILLS

MODULE III

BUILDING MANAGERIAL SKILLS

ANSWER KEY

POST-INSTRUCTIONAL EXERCISE

- 1. a Frustration
 - b Alienation
 - c Resistance
- c Self-confidence
- a Establish consistent standards of practice
 - b Demonstrate clinical competency
 - c Practice open communication
 - d Provide fair and constructive criticism
- 4. b Recognition of performance level
- 5. c Substantive conflict
- a Participatory management
 - c Clear standards of practice
 - e Supportive resources

SECTION II TEAMBUILDING CONCEPTS: PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE I TEAMBUILDING

OBJECTIVES

Upon completion of this module the nurse manager should be able to:

- 1.1 Define teambuilding as it relates to planned change
- 1.2 Explain the purpose for teambuilding
- 1.3 Determine three (3) problems that can be resolved through the use of teambuilding
- 1.4 Describe the role of the team leader
- 1.5 Identify five (5) concepts which can effect the team's ability to accept teambuilding
- 1.6 List six (6) of eight (8) positive aspects of teambuilding
- 1.7 Describe a mature team

TEAMBUILDING CONCEPTS: PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE I

TEAMBUILDING

PRE-INSTRUCTIONAL EXERCISE

DIRECTIONS: The purpose of this exercise is to determine your present knowledge of teambuilding. Use the response sheet provided on page 99. Circle the BEST response/s for each question from the choices provided. A complete answer may consist of one or a combination of responses.

Compare your answers with the answer sheet provided on page 100. There are nine (9) questions in this pre-instructional exercise. The criterion is for you to respond correctly to eight (8) of the questions below.

- 1. A nursing team is a functioning system composed of:
 - a. interdependent components
 - b. dependent components
 - c. people
 - d. RN, LPN, NA and Orderlies

- 2. A team does not function at its maximum level when?
 - a. members work together
 - team establishes mutual goals
 - c. team goals do not coincide with organizational goals
 - d. the nurse manager participates in decision-making
 - 3. Efforts for teambuilding is a precursor to most organizational wide:
 - a. planned committee
 - b. change strategies
 - c. survival
 - d. planned change
 - 4. The purpose of teambuilding is to assist the:
 - a. staff in identifying problems
 - manager develop problem-solving skills
 - c. manager and the team identify problems
 - d. manager and the team solve problems related to task performance

- 5. Identify the problem/s teambuilding can resolve.
 - a. budgeting
 - b. communication
 - c. decision-making
 - d. problem-solving
 - e. staffing
- 6. The role of the nurse manager in teambuilding is to:
 - a. influence team members to negate their personal needs for the needs of the organization
 - b. encourage the team to work in a team effort to meet the needs of the team and the organization
 - c. influence team effort to meet the needs of the team and the organization
 - d. prepare patients and staff to work in a team effort

- 7. Team members must identify skills needed and have determination to accomplish goals is a description of:
 - a. adult change process
 - b. resistance to change
 - c. power of expectation
 - d. expected outcome behavior
- 8. Circle advantage/s of teambuilding
 - a. improved patient care
 - b. increased salaries
 - c. open communication
 - d. development of decision-making and problem-solving skills
 - e. better grievance procedures
 - f. self-confidence
- 9. The mature team can define its:
 - a. manager's goals
 - b. informal organization
 - purpose and goals
 - d. position in the system

TEAMBUILDING CONCEPTS: PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE I

TEAMBUILDING

RESPONSE SHEET

PRE-INSTRUCTIONAL EXERCISE

1.

2.

3.

d 4.

d 5.

6.

7.

8. d

9. c Ъ

Correct Response___ =

TEAMBUILDING CONCEPTS: PRINCIPLES AND SECTION II

PRACTICAL APPLICATIONS

MODULE I

TEAMBUILDING

ANSWER KEY

PRE-INSTRUCTIONAL EXERCISE

- RN, LPN, NA, Orderlies 1.
- 2. Team goals do not coincide with organizational c goals
- 3. d Planned change
- Manager and team solve problems related to task 4. d performance
- 5. Communication
 - C Decision-making
 - Problem-solving d
- Influence team effort to meet its needs and the 6. organization
- 7. Adult change process

- 8. a Improved patient care
 - c Open communication
 - d Development of decision-making and problemsolving skills
 - f Self-confidence
- 9. c Purpose and goals

TEAMBUILDING CONCEPTS: PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE I

TEAMBUIL DING

INTRODUCTION

Objective Number

The head nurse is the manager of a health unit composed of a group of nurses who form a team. The team is a functioning system for which the manager is a part. It may be composed of registered nurses, licensed practical nurses, nursing assistants and orderlies.

The team goals should be correlated and mutually aimed toward organizational goals. There is a break in the system which decreases its ability to function at its maximal level, when a team member does not work towards mutual goals.

If the team is not working towards the goals of the organization, it is a non-functioning system. When this occurs the root of the

problem usually stems from a lack of personal satisfaction in the job setting related to the informal organization, its needs, level of interaction and process.

- 1.1 Teambuilding is a precursor to most all organizationally-wide planned change efforts. When organization development concepts are adopted teambuilding oftentime is implemented early on to improve team effectiveness. Teambuilding can increase organizational effectiveness and organization health.
- 1.2 Teambuilding, a managerial tool, is an ongoing process which requires planning and time to reap the benefits. It can be used to assist nurse managers and the team identify existent problems and aid them in developing problem-solving skills related to interpersonal and work setting issues.

1.2 (Con't.) If you find that your staff is showing evidence of internal strife along the lines of communication, problem-solving, decision-making, lack of cohesiveness, high level frustration, low morale, self-esteem and lack of confidence, among themselves, towards you and the organization then teambuilding may be a useful managerial tool for you.

1.3

Teambuilding specifically relates to problems such as communication, decision-making and problem-solving. The other previously mentioned problems can be indirectly resolved as a result of implementing teambuilding.

The manager can plan strategies to change the behavior of team members to that of an effective and constructive nursing team, a functioning system.

1.4

The nurse manager influences the team to have the desire to work in a unified team effort to accomplish tasks and goals for the good of the team and its individual team members. The team meets the objectives of the health care organization.

Brill (1976) defined team work as

...that work which is done by a group of people who possess individual expertise, who are responsible for making individual decisions who hold a common purpose and who meet together to communicate and share and consolidate knowledge from which plans are made, future decisions are influenced and actions are determined. (p. XVI)

Nurses make for an ideal team who can actively and effectively demonstrate team work. When the nurse manager develops and builds the team to function as Brill describes the purpose of teambuilding is accomplished. However, as stated before, teambuilding requires long range strategical planning to be accepted and implemented effectively.

1.5

The nurse manager should be aware of five concepts which can effect the team's ability to accept teambuilding. They are as follows:

- 1. Adult change process
- 2. Achievement patterns
- 3. Power of expectation
- 4. Resistance to change
- 5. Organizational climate

Adult Change Process: refers to the team member's awareness of any lack of knowledge or skills necessary for performance. The team member must be able to identify exactly what is needed to improve performance.

Change will not occur as a result of a desire to acquire needed skill or knowledge. The team member must have determination to achieve the goal for the development of skills or knowledge.

1.5 (Con't.)

Achievement Patterns: the manager may be able to recognize among team members those who set challenging but achieveable goals for themselves. Others who select challenging goals in which success cannot be attained. The result is frustration and feelings of inadequacy. Still another group of team members make no attempt to change or progress. They have established for themselves that there is no possibility of them being able to change. This group is an example of power of expectation.

Power of Expectation: relates to those team members' self-concept which influences their behavior. If they believe they will succeed then they probably will. If they do not believe they can succeed they probably will not. The team members will not act in a manner which is incompatible with self-concept. The risk of failure though seldom admitted is greatly feared.

1.5 (Con't.) The nursing profession has some internal problems. Many nurses are critical and non-supportive of one another. As a result, it is very hard for a nurse to admit a lack of knowledge in her profession. The team members' ability to change is based upon their past experience.

If they as individuals or as a group have been accepted when change occurred they will continue being flexible to change. If however, they have met with ridicule and rejection they will resist change.

Resistance to Change: is the result of the team falling into a rut. Functioning according to habit, they will often say it takes too much energy to learn new ways. The real issue is their concern as to how they will be perceived by others if they attempt the change toward teambuilding. Past experiences will influence their reluctance to change.

1.5 (Con't.)

Organizational Climate: refers to the atmosphere of the work environment. It should be responsive as well as supportive of the needs of the team and its goals. The nurse manager's clout within the organization will have a significant effect on the climate set for the team.

Change may be accepted better when presented in small, safe steps. You and the team as a whole will accept moving towards change more readily if you believe it is in your best interest.

1.6 The advantage

The advantages of teambuilding are numerous and have long range ramifications. Listed are eight advantages to the ongoing process of teambuilding.

Teambuilding sessions will allay thought and feelings of mistrust, low self-esteem and lack of confidence.

Open communications can clear the air of many problems.

1.6 (Con't.) Cohesiveness - the team will work together

Mutual respect - team members are sincerely acknowledged for their contributions and increased cooperation.

Teambuilding meetings promote new and improved approaches to old problems.

Improved interpersonal relationships will decrease absenteeism if absenteeism stemmed from conflict among team members. More team members on duty as scheduled decreases workload and therefore work is more evenly distributed.

Professional, individual and team accountability and responsibility is developed and enhanced.

Increased quality patient care. If these advantages appear to promote hope for your staff, consider what a mature team could represent for you and your organization!

1.7

The mature team can clearly define, understand and accept its purpose and goals. It can anticipate, plan ahead and make constructive use of conflict. The team can develop their own leadership and supervision. Gradually and progressively the team develops maturity, responsibility and accountability for its actions.

If your long range goal is to see your staff function as a mature team, you must expect that they can and will function accordingly.

More important you must be willing to help them reach this goal.

TEAMBUILDING CONCEPTS: PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE I

TEAMBUILDING

POST-INSTRUCTIONAL EXERCISE

DIRECTIONS: Circle the BEST response/s for each question from the choices on the response sheet provided on page _114. A complete answer may consist of one or a combination of responses. The criterion is for you to respond correctly to three (3) of the questions below. Review page 115 to compare your responses to the answer key. The number of correct responses will determine how well you understood the material provided on teambuilding.

- 1. Teambuilding can improve interpersonal relationships leading to improved:
 - a. team cohesiveness
 - client/patient care
 - group decision-making process
 - d. task performance
 - e. all of the above

- 2. The role of the nurse manager is to persuade without coercing the team members to:
 - a. recognize they are a member of a functioning system
 - b. realize their behavior can have a positive or negative impact on others
 - c. allow other team members to make decisions
 - d. A & C
 - e. A & B
- 3. Element/s which can effect the teams ability to accept teambuilding:
 - a. team meetings
 - b. resistance to change
 - c. rewards
 - d. achievement recognition
 - e. power of expectation
- 4. The mature team can define its:
 - a. manager's goals
 - b. informal organization
 - c. purpose and goals
 - d. position in the system

PRACTICAL APPLICATIONS

MODULE I TEAMBUILDING

RESPONSE SHEET

POST-INSTRUCTIONAL EXERCISE

1. b c d e

2. a b c d e

3. Ъс đ e

a b c d

Correct Response ____ = ____%

Compare pre-instructional and post-instructional exercise results. See instructor for guidance as needed.

TEAMBUILDING CONCEPTS: PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE I

TEAMBUILDING

ANSWER KEY

POST-INSTRUCTIONAL EXERCISE

- 1. All of the above: team cohesiveness, client/ patient care, group decision-making process, task performance
- 2. Recognize they are a member of a functioning e system
 - Realize their behavior can have a positive or negative impact on others
- 3. Ъ Resistance to change
 - Power of expection e
- 4. Purpose and goals

PRACTICAL APPLICATIONS

MODULE II DETERMINE FEASIBILITY FOR TEAMBUILDING

OBJECTIVES

Upon completion of this module the nurse manager should be able to:

- 2.1 Correlate the nursing process with the concepts of teambuilding to determine its feasibility for the nursing team.
 - 2.2 Identify two (2) tools which when incorporated with the nursing process will assist in the assessment of the need for teambuilding.
 - 2.3 Describe six (6) components of the nursing process.
 - 2.4 Define nursing standards of practice.
 - 2.5 State how organizational goals are accomplished by establishing nursing standards of practice.
 - 2.6 Explain integration as it relates to the role of the nurse manager in the process of influencing mutual goals for the format and informal organization.

- 2.7 Determine the significance of teambuilding in the teams process of attaining organizational goals.
- 2.8 Chose ten (10) of eleven (11) elements which can be included when developing a job satisfaction survey.
- 2.9 Name four (4) of six (6) benefits of the job satisfaction survey.
- 2.10 Define decision-making.
- 2.11 Define problem-solving.
- 2.12 Analyze the factors which indicate that the time is ideal for implementing teambuilding.
- 2.13 Distinguish the causative factors effecting the team which can be averted through teambuilding intervention versus administrative intervention.
- 2.14 Describe characteristics of participative management

PRACTICAL APPLICATIONS

MODULE II DETERMINE FEASIBILITY FOR TEAMBUILDING

PRE-INSTRUCTIONAL EXERCISE

DIRECTIONS: The purpose of this exercise is to determine your ability to recognize the feasibility of teambuilding for your team. Please use the response sheet provided on page 123. Circle the BEST response/s for each question from the choices provided. A complete answer may consist of one or a combination of responses. Compare your answers with the answer sheet provided on page 124. There are twelve (12) questions in this pre-instructional exercise. The criterion is for you to respond correctly to eleven (11) of the questions below.

- The nursing process can assist in the assessment of the nursing team for teambuilding. Identify assessment tools which can also be used to assess the team.
 - a. needs assessment and physical assessment
 - b. job satisfaction survey and nursing standards of practice
 - c. needs assessment and job satisfaction survey
 - d. nursing standard of practice and physical assessment

- 2. Choose the components of the nursing process:
 - a. goals, problem identification, plan of action
 - b. revise plan, time management, nursing care
 - c. data control, plan evaluation, implementation of plan
 - d. budgeting, staffing, planning
- 3. The primary goal of all health care organizations is:
 - a. balanced budget
 - b. survival of the fittest
 - c. quality patient care
 - d. employee satisfaction
- 4. The health care organization goal can be accomplished by nursing service through:
 - a. staffing according to budget
 - b. firing incompetent nursing personnel
 - c. encouraging continued education courses
 - d. establishing nursing standards of practice
- 5. The time is ripe for teambuilding when:
 - a. a survey team is expected
 - b. facilities and equipment are inadequate
 - c. the team is hostile
 - d. interpersonal relationships are poor

- 6. Causative factor/s effecting the team which can be averted through the intervention of teambuilding is/are:
 - a. lassiez-faire leadership
 - b. inadequate staffing and scheduling
 - c. participative management
 - d. lack of trust and respect among team members
 - e. inappropriate managerial behavior
- 7. Benefit/s of a job satisfaction survey is/are
 - a. identification of team member strengths and weakness
 - b. provides information related to nursing team concerns
 - c. clarifies standards of nursing practice
 - d. promotes commitment to plan
 - e. promotes decision-making and problem-solving
- 8. The nursing standards of practice can be defined as:
 - a. procedures
 - b. time schedules
 - c. proficiencies
 - d. client/patient needs

- 9. Integration relates to the role of the nurse manager in the process of influencing mutual goals between:
 - a. team members
 - b. nurse manager and team members
 - c. team and patients
 - d. formal and informal organization
- 10. As the team strives to accomplish organizational goals through teambuilding it is affected by:
 - a. needed salaries
 - b. open communication
 - c. problem-solving and decision-making
 - d. clinical competence
 - e. accountability
- 11. Decision-making can be described as:
 - a. process of problem-solving related to tasks of a group
 - b. responding to changing conditions
 - c. influencing the behavior of others
 - d. problem identification then determining what should be done

- 12. Characteristic/s of participative management is/are:
 - a. team participation in setting goals
 - b. promotion of mutual formal and informal goals
 - c. accurate communication
 - d. group cohesiveness
 - e. all of these

PRACTICAL APPLICATIONS

MODULE II DETERMINE FEASIBILITY FOR TEAMBUILDING

RESPONSE SHEET

PRE-INSTRUCTIONAL EXERCISE

1. a b c d

2. a b c d

3. a b c d

4. a b c d

5. a b c d

6. a b c d e

7. a b c d e

8. a b c d

9 a b c d

10. a b c d e

11. a b c d

12. a b c d e

Correct Response ____ = ____%

Compare pre-instructional and post-instructional exercise results. See instructor for guidance as needed.

PRACTICAL APPLICATIONS

MODULE II DETERMINE FEASIBILITY FOR TEAMBUILDING

ANSWER KEY

PRE-INSTRUCTIONAL EXERCISE

- 1. b Job satisfaction survey and nursing standards of practice
- 2. a Goals, problem identification, plan of action
- 3. c Quality patient care
- 4. d Establishing standards of nursing practice
- 5. d Interpersonal relationships are poor
- 6. a Lassiez-faire leadership
 - d Lack of trust and respect among team members
 - e Inappropriate managerial behavior
- 7. a Identification of team member strengths and weaknesses
 - b Provides information related to nursing team concerns
 - e Promotes decision-making and problem-solving

- 8. a Procedures
- 9. d Formal and informal organization
- 10. b Open communication
 - c Problem-solving and decision-making
 - e Accountability
- 11. d Problem identification then determining what should be done
- 12. e All of these

TEAMBUILDING CONCEPTS: PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE II

DETERMINE FEASIBILITY FOR TEAMBUILDING

Objective Number

2.1

The principles of the nursing process are a universal model of a basic management tool for problem identification, systematic problem-solving and goal attainment.

These basic principles integrated with other tools can assist the nurse manager as well as the team member make decisions, solve problems, communicate, and be accountable for actions. These elements are all consistent with the thrust of teambuilding.

2.2

The other useful and practical tools are a job satisfaction survey and nursing standards of practice, both reflect the concept of teambuilding.

2.2 (Con't.) The nursing process, job satisfaction survey and nursing standards of practice will help you identify whether your team has problems which the concepts of teambuilding could apply.

- 2.3 The nursing process, a readily accessible and familiar tool, consists of the following:
 - a. Assessment and data gathering
 - b. Identification of problems
 - c. Establishing goals
 - d. Setting target dates
 - e. Developing a plan of action
 - f. Evaluation

These principles can be used to assist in managing and assessing your nursing team for their ability to attain organizational goals.

2.3 (Con't.) Health care organizational goals are numerous and diverse. However, in most all settings the primary goal is to provide quality client/patient care.

So, an organizational goal we would all share is quality client/patient care.

- 2.4
- A. The nursing standards of practice are established generally by the formal organization, nursing administration, in the form of policies and procedures. Specifically, the standards of practice are developed by you, the nurse manager and implemented by you and your team.
- B. The nursing standards of practice are pre-requisites to assessment and evaluation of the team's ability to attain quality patient care.

2.5

C. How well your staff attains this goal is dependent upon the existence and clarity of the nursing standards of practice. Further, the attainment of goals is dependent upon the team member's knowledge and ability to perform the standards of practice.

2.6

The role of the manager is to integrate
the nursing standards of practice, a
reflection of organizational goals, with
the personal needs of the team members.
Integration establishes mutual goals
between the informal and formal organization.

The personal needs of team members are as follows:

- a. Attention and approval-
- b. Belonging and conforming
- c. Contribute and participate

2.6 (con't.) Generally, the team member wants to perform in a manner which will be recognized, conform, and contribute significantly to the goals of the organization.

2.7

The significance of teambuilding comes into play when the process for the attainment of organizational goals through the standards of practice are evaluated.

A. Prior to integrating standards assess your team's process.

Observe your team's ability to:

- Meet personal needs through organizational goals.
- Maintain morale, self-esteem, self-confidence
- 3. Solve problems

2.7 (Con't.)

- 4. Make decisions
- 5. Accept accountability for care provided
- 6. Maintain job satisfaction
- 7. Communicate among themselves and you, their plans and accomplished goals
- 8. Maintain team cohesiveness
- 2.8 Develop a Job Satisfaction Survey

 In the job satisfaction survey you might ask your team members to:

Identify on-the-job satisfactions and causes.

Identify strengths in team members and the reasons for those strengths. Identify weakness in team members and the reasons for the weakness.

When developing your survey give consideration to the following:

2.8 (Con't.) The organizational goal "quality patient care".

You might ask the team members,

"How well does the staff provide quality
patient care?"

How do you want the team to provide quality patient care?

What is preventing us from providing the quality of care desired?

What can the team do to improve quality patient care?

What will help the team improve patient care?

- 2.9 A job satisfaction survey will provide the following for the manager:
 - a) pertinent information related to nursing team's concerns.
 - b) a useful tool for problem identification, solving, and decision-making for the team.

2.9 (Con't.)

- c) an opportunity to express their personal concerns and opinions related to the work environment and the team.
- d) a sense of participation and contribution of their opinions and recommendations being important enough to be heard.
- e) an opportunity to identify personal strengths, weaknesses, problems as individual team members see them and establish plans for action for bringing about change.

The survey continues to serve as a team member development tool.

It is an indirect method for encouraging, developing and reinforcing the use of the nursing process specifically, gathering of information, problem identification, goal setting, plan of action, implementing plan and evaluation.

2.9 (Con't.) Most team members have these skills in varying degrees. As a manager you may provide a variety of settings in which the staff can develop these skills on an ongoing process. Indirect integration without formal presentation is non-threatening and more easily accepted by the team. It becomes their choice to make the decision. If you do not encourage development of these basic skills through a variety of mechanisms your staff will lack competence in their ability to accomplish goals specifically, quality patient care.

Here is an illustration of how the job satisfaction survey can be used to build some of the skills in the nursing process and some fundamental skills for teambuilding.

First the team members mentally gather information based upon work experience to identify existent situations and problems related to goal accomplishment.

Survey Question:

"Identify on the job satisfactions, frustrations and their causes for the team's present condition and situation."

2.10 Decision-making consists of situations or problem identification, then determining what should be done. At this point you must compile the information from the survey to get an overview of the team's perception of their work environment and its problems. Encourage them to determine what they perceive as the solutions.

They are encouraged to decide how they want to improve and what direction. Setting goals and target dates, involves what level of performance you want them to accomplish? When do you want them to make this accomplishment.

2.11 <u>Problem-solving</u> is the process of looking at circumstances and making a decision about a question or goal.

2.11 (Con't.) You promote the development of problemsolving skills by asking them to identify
obstacles which prevent them from
accomplishing their goals. You then ask
them to decide what must be done to
accomplish goals. They will be developing
a plan of action.

What do you need to help you improve patient care. Defining where you want to go is another example of decision-making and problem-solving.

2.12

If indications of the formation of apathetic, frustrated, hostile, and uncooperative cliques who experience low morale and lack of confidence; complain of organizational insensitivity to the needs of the team members; have misconstrued conceptions of organizational goals; provide poor quality care and low productivity; show high level absenteeism, show disrespect among team members and internal strife then the timing is ripe for teambuilding.

2.13

If you find that these problems stem from administrative negligence related to inadequate staffing, poor time scheduling, poor pay, inadequate facility and equipment, poor supervision and policies and procedures, then teambuilding is not the management choice. These problems require administrative correction to stir the team towards organizational goals.

- Problems related to conflict, disruption,
 poor interpersonal relationships,
 internal strife, lack of trust, minimal
 management intercession and inappropriate
 managerial behavior can be resolved.
- 2. Evidence of team uncertainty as to what to do, confusion, lack of communication can be related to vague management and administrative expectations.

2.13 (Con't.)

- 3. Teambuilding along with a change in managerial behavior style towards participative management will be most conducive to motivate the nursing team towards mutual organizational goals.
- 4. The compiled information from the survey will provide the basis for the agenda of the first team meeting.
- 2.14 Participative management promotes:

self-confidence
group process task accomplishment
team participation
open communication
team cohesiveness
mutual goals between formal and informal
organization

The characteristics of the team who practices participative management are a group of professionals and technicians who can make decisions, problem solve, and require minimal supervision once the expectations are defined.

2.14 (Con't) This group is ideal for functioning with participative management leadership towards the development and implementation of teambuilding.

SECTION II

TEAMBUILDING CONCEPTS: PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE II

DETERMINE FEASIBILITY FOR TEAMBUILDING

POST-INSTRUCTIONAL EXERCISE

DIRECTIONS: There are five (5) questions in the post-instructional exercise. The criterion is for you to respond correctly to four (4) of the questions. Circle the BEST response/s for reach question from the choices provided on page 143. A complete answer may consist of one or a combination of responses. The number of correct responses will determine how well you understood the material provided on feasibility for teambuilding. Review page 144 to compare your responses to the answer key.

- 1. The tool/s which can assist in the assessment of the nursing team for teambuilding are:
 - a. standards of nursing practice
 - b. job satisfaction survey
 - c. needs assessment
 - d. program management
 - e. nursing process

- 2. Clearly define standards of nursing practice promote:
 - a. administrative evaluation of the nurse manager
 - b. organizational goal attainment
 - c. integration of personal team needs and patient needs
 - d. team apathy and hostility
- 3. The process of uniting formal and informal organization needs is referred to as:
 - a. introversion
 - b. introspection
 - c. integration
 - d. intervention
- 4. The team is ready to accept teambuilding when there is:
 - a. internal strife
 - b. ventilating
 - c. conflict
 - d. disruption
 - e. interaction process

5.	Write the correct letters in the space provided.
	Sequence the following components of the nursing
	process:
	1)implement plan
	2) problem identification
	3) develop plan of action
	4) evaluate plan
	5) data gather
	6) set goals/target date

SECTION I	T i	TEAMBUILDING CONCEPTS: PRINCIPLES AND						
	Pl	PRACTICAL APPLICATIONS						
MODULE II			ETERMI	NE :	FEASIBILITY	FOR	TEAMBUIL	DING
RESPONSE SHEET								
POST-INSTRUCTIONAL EXERCISE								
1.	a	Ъ	С	đ	e			
•								-
۷.	a	D .	С	d				
3.	a		c	đ				
4.	a	Ъ	c	d	е			
5.	1)							
	2)							
	3)							
	4)							
	5)							

Correct Response ____ = ____%

Compare pre-instructional and post-instructional exercise results. See instructor for guidance as needed.

6)

SECTION II

TEAMBUILDING CONCEPTS: PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE II

DETERMINE FEASIBILITY FOR TEAMBUILDING

ANSWER KEY

POST-INSTRUCTIONAL EXERCISE

- Standard of nursing practice
 - b Job satisfaction survey
 - Nursing process
- 2. Organizational goal attainment
- Integration С
- a i Internal strife
 - Conflict С
 - d Disruption
- 5. Implement plan
 - ь Problem identification
 - đ Develop plan of action
 - f Evaluate plan
 - a Data gather
 - Set goals/target date

You have completed this module.

3.3	Hypothesize the results of unfair and
	inconsistent role model behavior on team
	members.

- 3.4 List three (3) qualities of a coach to assist you in developing teambuilding skills.
- 3.5 Cite the reason for discretion when using participative management to implement teambuilding.
- 3.6 Give an analogy between the definition of a functioning system and the nursing team.
- 3.7 Image self in the role of a participative manager.
- 3.8 Analyze the team members perception of the role model behavior of the nurse manager.
- 3.9 List the behaviors which indicate a need to implement teambuilding.
- 3.10 Distinquish the five (5) accepting concepts which help implement teambuilding.
- 3.11 List four (4) of the five (5) team interactions which promote successful implementation of teambuilding.

SECTION II TEAM

TEAMBUILDING CONCEPTS: PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE III

IMPLEMENT TEAMBUILDING

PRE-INSTRUCTIONAL EXERCISE

presentations: Please complete the practice exercise before reading the text. The purpose of this exercise is to determine your ability to implement teambuilding. Circle the BEST response/s for each question from the choices provided on the response sheet on page 152. There may be more than one correct response to each question. There are eleven (11) multiple choice questions in this pre-instructional exercise. The criterion is for you to respond correctly to ten (10) of the questions below.

Compare your answers with the answer sheet provided on page 153.

- 1. Managerial preliminaries in preparation for teambuilding includes:
 - a. self-assessment
 - b. select a role model
 - c. planned strategy
 - d. integration of participative management

- 2. Advantage/s of the nurse manager implementing teambuilding is/are:
 - a. to know how much team knows
 - b. correct problem at occurence
 - c. evaluate daily progress
 - d. the power of authority
- 3. As a role model the manager should demonstrate behavior/s that is/are:
 - a. consistent
 - b. critical
 - c. fair
 - d. respectful
- 4. Qualities of a teambuilding coach is/are:
 - a. an administrative position
 - b. support, counsel and guidance
 - c. mutual trust and confidence
 - d. respectful professional character

- 5. Initiating leaders of teambuilding are:
 - a. instructors
 - b. head nurses
 - c. consultants
 - d. directors of nurses
- 6. The concept/s which promote team acceptance of teambuilding is/are:
 - a. organizational climate
 - b. power of expectation
 - c. informal organization
 - d. resistance to change
 - e. adult change process
- 7. A system is to interdependent parts as the nursing team is to:
 - a. RN, LPN, NA
 - b. time, money, facility
 - c. administration, management, staff
 - d. community, organization, patient

- 8. What will occur if the nurse manager and the organization make unilateral decisions?
 - a. lost team commitment
 - b. increased productivity
 - c. unaccepted responsibility
 - d. personal satisfaction
- 9. Team members evaluate and emulate the nurse manager's behavior based upon:
 - a. what the manager says
 - b. their perception
 - c. good intentions
 - d. the manager's job description
- 10. Consistent productivity is the result of:
 - a. independent team work
 - b. dependent team work
 - c. incentives and rewards
 - d. interdependent team work

- 11. Small successes which are recognized privately and publicly relate to:
 - a. adult change process
 - b. resistance to change
 - c. organization climate
 - d. achievement patterns
 - e. power of expectation

SECTION II TEAMBUILDING CONCEPTS: PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE III IMPLEMENT TEAMBUILDING

RESPONSE SHEET

PRE-INSTRUCTIONAL EXERCISE

1. a b c d

2. a b c d

3. a b c d

4, a b c d

5. a b c d

6. a b c d e

7. a b c d

8. a b c d

9. a b c d

10. a b c d

11. a b c d e

Correct Responses = %

Compare pre-instructional and post-instructional exercise results. See instructor for guidance as needed.

SECTION II TEAMBUILDING CONCEPTS: PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE III IMPLEMENT TEAMBUILDING

ANSWER KEY

PRE-INSTRUCTIONAL EXERCISE

- 1. a Self assessment
 - b Select a role model
 - c Planned strategy
 - d Participative management integration
- 2. a Know how much team knows
 - b Correct problem at occurence
 - c Evaluate daily progress
- 3. a Consistent
 - c Fair
 - d Respectful
- 4. a An administrative position
 - b Support, counsel and guidance
 - c Mutual trust and confidence
 - d Respectful professional character

- 5. a Instructors
 - b Head nurses
 - c Consultants
 - d Directors of nurses
- 6. a Organizational climate
 - b Power of expectation
 - c Informal organization
- 7. a RN, LPN, NA
- 8. a Lost team commitment
 - c Unaccepted responsibility
- 9. b Their perception
- 10. d Interdependent team work
- 11. c Organization climate

SECTION II

TEAMBUILDING CONCEPTS: PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE III

IMPLEMENT TEAMBUILDING

INTRODUCTION

Objective Number

> Teambuilding can be implemented by a variety of qualified individuals.

Its success is dependent upon the leader's teambuilding skills, support, commitment of the team leaders, management, and administration. Team members quickly see through a non-supportive administration. - The nurse manager and administration must be open to constructive critiscism and should have a clear understanding of the teambuilding concepts process before implementation.

3.1

Three possible initiators of teambuilding are consultants, director of nurses or head nurses.

3,1 (Con't.) The consultant can be obtained externally or internally. Consultants could be drawn from the personnel, educational and/or training departments.

Group dynamics and applied behaviors are essential in the professional consultant's foundation. The ability to establish a trusting and working relationship is significantly important to promote the implementation of teambuilding.

The role of the consultant is to assist the team in becoming more skillful in solving and identifying problems. The climate should be structured to promote effective data gathering and teambuilding.

The team is assisted in learning group dynamics, group process, and the significance of individual perception.

3.1 (Con't.) Group dynamics can be introduced to the team through formal and informal meetings.

Interpersonal relationships are improved as internal strife is minimized.

The consultant essentially functions as a trainer. The group is assisted in understanding their own experiences.

The consultant introduces relevant ideas, identifies objectives in a non-threatening fashion regarding the group interactional process and reactions. Regular meetings are established on a long term basis as teambuilding is an ongoing process.

The team is encouraged to identify methods for bringing about change and developing plans of action to perform tasks effectively.

PERSONAL INTERVIEWS:

The team problems and perspectives are assessed and identified through anonymous personal interviews. Here, the function of

3.1 (Con't.) the consultant, the purpose of the interview; and how the information will be used are shared with each team member.

The explanation allays fear of the unknown and prevents mistakes and misunderstandings. The interviews assist in the development of rapport, open communication and trust. The team may be more candid because the consultant has no authority to enforce performance and therefore offers no threat to them. Caution should be taken to avoid the gripe sessions.

Team members appreciate being asked their opinions. They respond more readily and are committed to their responses. Because team members want their opinions to be accepted and heard they will more readily accept the same from their peers.

A non-threatening open climate promotes general concensus and commitment to team goals which should be reflective of organizational goals.

3.1.1 <u>CONSULTANT LIMITATIONS</u>:

The consultant should not be regarded as an expert. The disadvantages is that the role could be used as a crutch by the staff and stifle their own growth.

Another disadvantage is the expense of a consultant. Most health care facilities will not invest in the services.

The organization who does invest in a consultant is progressive, and attempts to improve the quality of life for the client/patient and its personnel.

BENEFITS OF THE CONSULTANT:

There are advantages for the use of a consultant who is not a member of the team. The consultant may be more objective, face issues point blank and more readily be accepted by the team. Another advantage is that the consultant can devote full attention to the problems at hand.

3.1.2 <u>DIRECTORS OF NURSES:</u>

Directors of nurses can initiate teambuilding with her administrative staff.

The best place to start is in nursing
service because once the concept of
teambuilding is accepted administration will
be committed to its implementation. An
advantage which promotes the success of
teambuilding is the united force among
nursing service administration. Another
advantage is that nursing teams will
become a part of the system and change
can be implemented with much less
difficulty as a result of the support
systems and resources actively participating.

The three (3) disadvantages of the director of nurses acting as the leader for teambuilding are that nursing administration is aware of its internal problems. However, administration may be subjective and bias in the assessment and identification of its problems.

3.1.3 HEAD NURSE - NURSE MANAGER:

If you are not fortunate enough to have access to a consultant and do not have the initial support of your director of nurses you can still be innovative and begin the process of teambuilding yourself.

A proposal is essential. Application of the previous information given in Section I and II will assist you in developing an effective program proposal. Show evidence of the use of the nursing process. When planning your proposal strategies consider alternative solutions to existent problems.

Clearly define your teambuilding program, state your objective, goals, tentative target dates and build in an evaluation process.

A proposal of this quality probably would warrant some kind of action from nursing administration.

3.1.3 (Con't.) Administration may implement the program throughout nursing service or the entire organization. However, they may only consent to the implementation of the program on your unit as a pilot study. You are still off to a good start.

Realistically, there are some disadvantages related to your close involvement with the team. Your authority to enforce performance may result in the team resisting the idea. Your involvement in the day to day routine limits the time available to devote to your teambuilding efforts. Maintain an objective flow of communication. If all else fails support from your immediate supervisor may be just enough to allow you to start to work.

The advantage of you initiating teambuilding is that you know the scope of knowledge your team possesses. Communication can be improved

3.1.3 (Con't.) by the day to day interaction between you and the team members. You can evaluate the daily progress of the team. Correct the problems as soon as they occur.

Teambuilding requires skill and preparation.

The preliminaries for the nurse manager consist of introspection for managerial skills. Self-assessment for role model behavior and skills; selection of a coach; integration of participative management styles; and planned strategies toward teambuilding. Information on assessment and development of managerial skills can be obtained in Modules II and III of Section 1, Develop Managerial Skills.

3.3 BEING A ROLE MODEL:

You must begin to demonstrate if you haven't already begun the type of behavior you want your staff to emulate.

3.3 (Con't.) Your response to the team members' personal characteristics such as age, sex, race, appearance, religion, socio-economic status, education and title, will have a significant impact on your staff and may determine their respect and trust for you and their fellow team members.

A genuine sincere effort to be consistent, honest, fair, respectful, communicative, constructive and open should result in the same behavior from your staff.

If you practice favoritism, prejudices and iniquities you will be condoning the same behavior among your team members.

Attempt to rectify your behavior in the areas you identify need improvement.

Perform a managerial assessment if it is in the best interest of all involved. This will assist you in identifying how your behavior impacts your team and others.

3.4 SELECT A COACH:

Observe people within your organization.

Select an individual who demonstrates the professional character that can be respected and in whom you have trust and confidence to provide support and guidance. This individual's interpersonal assessment to evaluate and communicate the influence one has on others is critical. Your coach can counsel you on other important elements outlined in the Managerial Assessment Questionnaire in Section I, Module II entitled Perform a Managerial Assessment.

There could be a mutual agreement between the two of you that the coach can assist you in accomplishing your managerial developmental goals.

With or without the support of a coach there can be ongoing self-development as a result of practicing the self-assessment.

3.4 (Con't.)

PARTICIPATIVE MANAGEMENT STYLE:

It does not matter what management style you currently practice. Participative management is the style of choice to effectively implement teambuilding. A gradual and progressive introduction to this management style will be accepted better by staff. They may need assistance to adjust to the new roles and responsibilities this style of management will require of them. The degree of adjustment for the team depends on the style of management you have practiced in the past. Autocratic to participative will require more adjustment on you and the staff's part. Democratic to participative may not require as much adjustment. There are many implications and ramifications which occur and result from the practice of participative management.

3.4 (Con't.)

It is imperative to develop a communication matrix based upon a trusting and working relationship. Each member's participation in the team requires discipline, maturity, flexibility, capacity to give and take; willingness and ability to learn; and general respect for fellow team members. The team member must have the capacity and objectivity to evaluate self and others personal commitment. Self-actualization and ego satisfaction can be accomplished through commitment and achievement of organization goals. Usually, the team member learns to accept responsibility and seeks it out. Members who shy away from responsibility, seek security and lack drive and ambition have learned to do so through past experience.

Put yourself in their place. Understand their values and personal goals. What they hope to gain from participating in team activity. Careful observation will help you

3,4 (Con't.) identify motivational patterns. Belonging and esteem are at the core of many individual motivational patterns. The average team member seeks security, acceptance and success from the work environment.

It is not necessary to agree with the team members to understand their attitudes, philosophy, and values. Understanding team members will assist you in anticipating how they will react and avoid unnecessary confrontations.

When considering disciplining your team remember, being fair does not mean treating all members the same. Treat them fair on an individual basis according to their needs, behavior, and performance.

3.5 Participative management cannot be used
universally. Some team members require
different approaches dependent upon their

3.5 (Con't.) past experiences and preparation. There are also those members who are not committed who require management through control rather than understanding or inspiration.

You can assist team members identify and enhance their self-concept by promoting a climate conducive to successful cohesiveness; maintenance of teambuilding; group formation; and more. Clearly define expectations on the level of performance, rules and regulations, knowledge of skills, equal reward for equal performance, controls based on democratic principles, humane work conditions and situational allowances for individual needs. Team relationship should be based upon respect for mutual integrity, knowledge, skill and recognition. It is a team effort to learn skills in problemsolving, thereby improving task performance, planning, and decision-making tasks. You are responsible for coordinating and integrating the team's resources.

3.5 (Con't.)

Teambuilding strengthens individuals as well as the team's commitment to the goals. This results in improved organizational effectiveness. Team members who are fully aware of their role in the decision-making and problem-solving process increase quality and productivity as well as gain personal satisfaction. They have not been told what to do according to job descriptions but have worked in a team effort to determine their own destiny in the work environment. The more unilateral decisions are made by you or the organization without giving consideration to the nees and input of the team the greater the loss of commitment. Further, there is loss of motivation, self-direction, self-control and increase cost to the facility. If your team shys away from work, shows apathy, an unwillingness to accept responsibility according to the McGregor's (1960) theory of integration it is assumed it's management's fault.

3.5 (Con't.) Integration cannot be perfectly matched between the individual nurses and the organization. What is anticipated is that the individual will meet her needs best by selecting more attractive alternatives other than through apathy, sabbotage, hostility, non-compliance. It is theorized that the team members efforts will be directed towards the goals and objectives of the organization.

Most individuals want self-respect and want to feel they contribute a significant role in the work environment. Oftentime the members may not recognize this as a need or desire. Therefore they may blame the organization for the dissatisfaction and bad feelings. If they are able to recognize this as a problem they do not know what specific changes for which to ask to satisfy their needs. The inability to know what to request results in frustration. Incentives and rewards that stimulate or spurt a member

3.5 (Con't.) into action may change at any given time.

The longevity of the effectiveness of incentives are likely to be limited. The potential of this occurring is heightened if basic needs are not met first.

You can maintain efforts and feelings of contributing and self-respect through continually encouraging the development of knowledge, skills, ingenuity and use of capabilities in ways supportive of organization. There is a wealth of untapped resources on your particular unit who can develop creative and imaginative methods and solutions to organizational problems on your particular unit. However, as the organization exist today these human resources are only partially used. There is great potential for growth and development of the team members who work for you. You are now equipped to control and resolve problems.

3.5 (Con't.) As the leader of your team you must be able to establish your own beliefs, values and morales. Then define your goals and objectives as they relate to the objectives and policies of the organization. Coordinating the equipment, finances, team, time, and work to accomplish organizational goals is the next step. You must be able to personally and organizationally delineate, evaluate and support the needs of the team. Determine the team's rewards and punishment. You should possess clout within the organization and the external environment. You must be able to demonstrate expertise among peers and team members. Further, you should act as a role model. You are responsible for all members of the team.

On many units there is a climate of distrust, disrespect, nonwillingness to work together, tension, hostility, decreased productivity, cliques, antagonistic and

3.5 (Con't.)

non-supportive attitudes. Employees on all levels often dread coming to work, while others awaken biting nails. They do not mind the work that they do or how hard they work. However, the factor that makes work so difficult for them and hinders their ability to get their work done is the complexity of personalities with which they must cope. The team members' attitudes and games they play hinder the individual member's ability to function. If team members could work without detractors they would probably be just fine.

The issue is that most of the team feel this way. Productivity is the result of all getting the whole job done.

The system as a whole is made of team members. The sum of the team members do not make up the whole. It is all the members working interdependently which

result in efficacious productivity.

3.6

3.6 (Con¹t.) The manager who says, "I realize I have a people problem but I'm not a magician. just do not have the ability to correct the problem," might need to reconsider. That manager's system is dysfunctional and inefficient. Responsibility for making the system functional and efficient falls greatly upon the manager. However, no one expects miracles. Administration would not expect the manager to be aware of a problem and make little or no effort to improve the situation. The situation can be manageable. Development of a strategical plan with a step by step approach to the problem can result in significant improvements. It can give the nurse manager a feeling of controlling the team instead of the reverse. Tremendous change can take place simply through introspection.

First and foremost there should be ongoing personal growth in one's self-confidence to function as a nurse manager. Your ability

3.6 (Con't.) to anticipate, identify and resolve problems will be keener. Practicing the concept of teambuilding will help you to acknowledge your staff in a different light. You will become more familiar with their needs and desires for personal satisfaction. Problems can be anticipated, avoided, and handled more effectively. There should be an enlighted awareness of the interrelatedness of the team's overall function.

3.7

Can you imagine what it would be like for you to integrate participative management into your management style, to implement teambuilding.

ASSESS AND ANTICIPATE TEAM NEEDS:

In planning your strategy to implement teambuilding anticipate the needs of the team.

- *Do you demonstrate a desire to get to know your team?
- *Do you accept them whether you like them or not?

3.7 (Con't.) *Do you make an earnest attempt to treat
them as they wish to be treated?

*Do you help your team develop professionally?

*Do you know the situations in which your
team works best?

Get to know as much about your team members' needs as they will allow. Then assist them in meeting their individual needs towards the goals of the organization. Place emphasis and expect high quality performance to maintain productivity and morale.

Can you think of two other ways to anticipate your team's needs?

A key factor is to establish that all important trusting and working relationship.

3.8 Observe your team's behavior as you begin to practice as the role model you would want them to emulate. If your team shows evidence of negative attitudes and behavior

3.8 (Con't.) evaluate your performance again. It is how you are perceived by others not your good intentions upon which you are evaluated and emulated.

You want the team member to feel secure in predicting the environment and your stability. You then must continue to demonstrate potential problems and opportunities will be made known so that the member can plan and prepare for possible contingencies as the future unfolds.

Understanding feelings of the team may help you in motivating, increasing productivity and improving performance.

Most head nurses are women. Most women have a nurturant orientation. This positive quality can assist you in developing the potential in the team members, the nurturant support, and feedback on performance.

3.8 (Con't.)

Head nurses as nurse managers are in an excellent position to know their team members on a one to one basis.

In the process of getting to know your team, what kinds of behavior have you identified?

What kinds of problems have they caused?

3.9 List on a separate sheet of paper the behaviors which indicate a need for teambuilding.

If you identified any of these behaviors or similar ones you are correct.

- Internal strife.
- 2. Dissatisfaction and frustration.
- 3. Incohesive group.
- Inability to make decisions and problem-solving.

Then ask yourself what is my goal for the team.

3.9 (Con¹t.) What obstacles can prevent us from accomplishing the goals?

What can I do to influence the team to accomplish its goals?

Develop a strategy towards the implementation of teambuilding.

An overview of the teambuilding implementation process is to determine your team's preparedness for change, incorporate approaches to gain team acceptance of the teambuilding concept.

TEAM ACCEPTANCE

Teambuilding will be more readily accepted through the use of the five concepts:

The adult change process.

The power of expectation.

The achievement patterns.

The organization climate.

Resistance to change.

3.9 (Con't.) Using these managerial approaches may facilitate the acceptance and implementation of teambuilding. More information on these five concepts may be found in Section II, Module I, Teambuilding.

3.10 When distinquishing the five accepting concepts consider:

The <u>adult change process</u> can be enhanced through your assisting the team to understand:

- --how they fit into the total health care system:
- --how other departments function within the health care system;
- --how to perform specific responsibilities,
 i.e., job descriptions.

Problems and opportunities the future can bring as a result of the use of teambuilding concepts.

You must know.

3.10 (Con¹t.)

How do you expect the team to function?

Encourage the team to acknowledge and

practice established policies and procedures.

Use your own expertise in establishing standards of practice guidelines.

Then you must communicate to your team:

Who is expected to perform what procedures,

practice or process.

Explain when the procedure is to be done, its frequency and duration.

Provide supportive resources to assist the team in producing this quality of performance.

The <u>power of expectation</u> can be effectively managed through the following approaches:

Get to know your team members on an individual basis.

Take an active role in attempting to understand their self-concept. Respect their ability to function as a team member.

3,10 (Con't.) Does the team see themselves as a winner or a loser?

Learn about past work experiences, positive and negative.

Has the team ever done what is being expected of them before?

What were the results?

Evaluate skills and expertise of each member, this will help you identify obstacles which may effect goal accomplishment.

The achievement pattern advocates your communicating on an individual and team basis which goals are realistic and attainable and which goals are not. Using your foresight, communicate potential and anticipated pitfalls. Members of your team may be unable to recognize what is essential for their successful development in establishing attainable goals. However, there are times when it is a better practice to allow team members to grow from their experiences.

3.10 (Con't.) Your support will be greatly appreciated if you appropriately select the guidance given the teams.

Resistance to change may be minimized through the establishment of a positive and supportive organizational climate.

Negative comments and discussions should be strongly discouraged especially outside the team meetings. Constructive criticism is sanctioned during team meetings. This will help minimize fear of negative perceptions and critical evaluations from team members.

Past experiences must be recognized and considered when looking at a time frame for acceptance of new concepts and team implementation of teambuilding. The team may need change introduced in small increments. This will help break down the barrier of resistance.

3.10 (Con't.)

Organization climate promotes a positive and supportive organizational climate.

Administration can show positive support through the provision of a non-evaluative period. During this period the non-evaluative time frame is clearly defined. It may be advantageous if work performance does not effect income and rank. This supportive climate allows for constructive feedback and indicates to the team a genuine interest and fairness on yours and administration's part.

Establish a non-threatening climate in which small successes are recognized and appreciated privately and publicly. This approach on your part will begin to improve self-concept, confidence, esteem, and morale among various team members.

Discourage cliques and gossip by encouraging open communication and discussions in group settings.

3.10 (Con't.)

Encourage team members who have disagreements to discuss their differences with the individual involved or the individual who can effect change in the situation.

Group Formation - As each potential team member enters the team, consideration may be given to the team as a whole. The member taking a risk is giving of self to become a part. If the member feels the others cannot be trusted to be motivated and cooperate there will be resistance becoming a member of the team. The member will cooperate in the teambuilding approach if teambuilding is believed to be the best or only way to accomplish personal goals. As the team begins to come together, team member's awareness of the interdependency among one another is important. The need to see that their individual motives, goals and interests can be attained through a joint effort. The individual team members

3.10 (Con't.)

must decide to work together. These cooperative efforts must be initiated and reciprocated in such a manner that there is a confirmation by the individuals that the potential for a cooperative relationship is desired and can exist. A team member's attainment of goals does not always require cooperation. A decision to cooperate with the group may be based on the effective attractiveness of cooperating. The member may ask the question, "Is it to my advantage or disadvantage to cooperate?" Cooperation may be chosen as the lesser of two evils.

- 3.11 The team interactions which can promote successful implementation of teambuilding are:
 - 1. intrateam communication
 - 2. team cohesiveness
 - 3. interpersonal congeniality
 - 4. team acceptance
 - 5. team willingness

3.11 (Con't.)

Success of the teambuilding is dependent upon intrateam communication, which is dependent upon team cohesiveness and visa versa. Once the team members have taken the risk of becoming a part of the team system it is the intrateam communication which leads to familiarity. A sense of similiarity and convergence in beliefs and values among the team exist. Team cohesiveness is determined by interpersonal congeniality. The desire to maintain membership, positive attitudes towards the functioning of the team is associated with increased communication between members. This practice increases the readiness of team members to be influenced by the others. An increased consensus on attitudes and values as they relate to group function and increased sense of responsibility towards team members is the result.

Successful implementation of teambuilding is dependent on the acceptance and willingness of the team. It is they who will put the

3.11 (Con't.)

wheels into motion. Cooperative interaction in the areas of trust, coordination and bargaining is the result of mutuality.

PRACTICAL APPLICATIONS

MODULE III IMPLEMENT TEAMBUILDING

POST-INSTRUCTIONAL EXERCISE

DIRECTIONS: There are four (4) multiple choice questions. There may be more than one correct response to each question. Circle the BEST response/s for each question from the choices provided on page 192. The criterion is for you to respond correctly to three (3) of the questions below. The number of correct responses will determine how well you understood the material provided on implementing teambuilding. Review page 193 to compare your responses to the answer key.

- 1. From what you have learned what is/are the reason/s for gradual selective integration of participative management?
 - a. team preparedness
 - b. communication matrix
 - c. uncommitted team members
 - d. treat all members the same

- 2. The behavior of a role model who practices favoritism, iniquities and prejudices will have a staff who:
 - a. resists
 - b. emulates
 - c. denies
 - d. supports
- 3. Group formation takes place when there is:
 - a. intrateam communication
 - b. cooperative interaction
 - c. team cohesiveness
 - d. interpersonal congeniality
- 4. Based upon the behaviors that you have learned, identify other factors which indicate a need for teambuilding
 - a. demand for wage hikes
 - b. absenteeism
 - c. non-commitment
 - d. quality patient care
 - e. strained interpersonal relationships

SECTION II TEAMBUILDING CONCEPTS: PRINCIPLES AND
PRACTICAL APPLICATIONS
MODULE III IMPLEMENT TEAMBUILDING

RESPONSE SHEET

POST-INSTRUCTIONAL EXERCISE

1. a b c d
2. a b c d
3. a b c d

ь

Correct Responses ____ = ___%

Compare pre-instructional and post-instructional exercise results. See instructor for guidance as needed.

PRACTICAL APPLICATIONS

MODULE III IMPLEMENT TEAMBUILDING

ANSWER KEY

POST-INSTRUCTIONAL EXERCISE

- 1. a Team preparedness
 - c Uncommitted team members
- 2. b Emulates
- 3. a Intrateam communication
 - b Cooperative interaction
 - c Team cohesiveness
 - d Interpersonal congeniality
- 4. b Absenteeism
 - c Non-commitment
 - e Strained interpersonal relationships

PRACTICAL APPLICATIONS

MODULE IV CONDUCT A TEAM MEETING

OBJECTIVES

Upon completion of this module the nurse manager should be able to:

- 4.1 Determine the beginning of team formation
- 4.2 Describe group dynamics
- 4.3 Define the interactional process
- 4.4 Define task performance techniques
- 4.5 Identify ten (10) of the eleven (11) task performance techniques which promote effective meeting
- 4.6 Identify six (6) of the seven (7) task performance techniques which hinder meetings
- 4.7 Establish ground rules essential for effective management of team meetings
- 4.8 State the ideal number of team members to place in a small group
- 4.9 Apply the concepts of small team learning sessions and exercises to team meetings
- 4.10 Recognize five (5) key elements in gaining acceptance by the team to effect change.
- 4.11 Gain team concensus on a solution

- 4.12 Negotiate roles to accomplish tasks
- 4.13 Use methods to gain team commitment
- 4.14 Plan an agenda for the team meeting based upon the job satisfaction interview
- 4.15 Evaluate the effects of the team meeting

PRACTICAL APPLICATIONS

MODULE IV CONDUCT A TEAM MEETING

PRE-INSTRUCTIONAL EXERCISE

DIRECTIONS: The purpose of the exercise is to determine your ability to conduct effective team meetings. Please use the response sheet provided on page 201. Circle the BEST response/s for each question from the choices provided. A complete answer may consist of one or a combination of responses. Compare your answers with the answer sheet provided on page 202. There are ten (10) questions in this pre-instructional exercise. The minimum criterion is for you to respond correctly to nine (9) of the questions below.

- 1. Methods which gain team commitment:
 - a. participation
 - b. personal investment
 - c. cooperation
 - d. mutuality

- 2. Problems placed on the agenda to be discussed as a result of the job satisfaction interview are determined:
 - a. by the number of times mentioned
 - b. at the discretion of the nurse manager
 - c. by all team members at the next meeting
 - d. by administration and the organization goals
- 3. When team members show intracommunication, team cohesiveness, interpersonal congeniality and cooperative interaction they have moved towards:
 - a. interactional process
 - b. team formation
 - c. small group learning sessions
 - d. group dynamics
- 4. Identify three task performance techniques which promote effective team meetings.
 - a. standardizing-guidelines for selecting discussion topics
 - b. pleading hidden agenda
 - c. energize introducing new ideas
 - d. striving calling attention to oneself
 - e. conciliating joking to maintain sanity among team members

- Identify times when established ground rules could effect the outcome of team meetings.
 - a. before
 - b. during
 - c. after
 - d. all of these
- 6. The ideal number of team members involved in a group discussion should be:
 - a. 3-4
 - b. 5-7
 - c. 7-10
 - d. 10-15
- 7. What factors assist the team in coming to a concensus on a solution to a mutually agreed problem?
 - a. encourage volunteer participation
 - b. negotiate for members to implement solutions
 - c. identify and list advantages, disadvantages, risks, and determine best solution
 - d. team brainstorming for solution identification

- 8. When team members will not offer their energies to implement solutions the ideal approach is to make the team:
 - a. an offer they cannot refuse
 - b. a reasonable offer for them and you
 - c. an unreasonable offer for them, reasonable for you
 - d. no offer at all
- 9. Interactional analysis, a small team learning exercise, can assist the team develop skills in:
 - acknowledgement of the value of different points of view
 - b. enhancement of creative thinking skills
 - team member has on others
 - d. none of these

- 10. Four factors which promote team acceptance to effect change are:
 - a. increase salaries
 - b. role clarity
 - c. participation in decision-making
 - d. skill development through resources
 - e. modernization of work environment
 - f. agreement on goal, problem and solution
 - g. clearly defined expectations

SECTION II TEAMBUILDING CONCEPTS: PRINCIPLES AND PRACTICAL APPLICATIONS MODULE IV CONDUCT A TEAM MEETING RESPONSE SHEET PRE-INSTRUCTIONAL EXERCISE l. a b c d 2. a b c d 3. a b C ď 4. a b c٠ d e 5. đ Ъc a 6. b c d а 7. b c d 8. a b c d 9. Ь. d a C 10. a b c d e f g

Correct Responses = ____%

PRACTICAL APPLICATIONS

MODULE IV CONDUCT A TEAM MEETING

ANSWER KEY

PRE-INSTRUCTIONAL EXERCISE

- 1. a Participation
 - b Personal investment
- 2. a By the number of times mentioned
- 3. b Team formation
- 4. a Standardize
 - c Energize
 - e Conciliating
- 5. d All of these
- 6. b 5-7
- 7. c Identify and list advantages, disadvantages, risks and determine best solution
- 8. b A reasonable offer for them and you
- 9. a Acknowledge the value of different points of view

- 10. b Role clarity
 - c Participation in decision-making
 - d Skill development through resource
 - f Agreement on goal, problem, and solution
 - g Clearly define expectations

SECTION II

TEAMBUILDING CONCEPTS:

PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE IV

CONDUCT A TEAM MEETING

Objective Number

This module will provide the nurse manager with pertinent information related to group formation and dynamics. It will also provide step by step guidelines and approaches to planning, implementing and evaluating the effects of the team meeting towards effecting change for the good of the organization.

4.1 The nurse manager must determine the degree of team formation existing among her team members.

Observe for the following team behavior:

- a) intra-team communication
- b) team cohesiveness
- c) interpersonal congeniality
- d) cooperative interaction

4.1 (Con't.) This type behavior will be evidenced when the team members begin to accept teambuilding as a result of the conducive organizational climate, the manager acting as a role model and the opportunity to express themselves through the job satisfaction survey and interviews.

- 4.2 <u>Group dynamics</u> in this instance refers to the ongoing process of communication through interaction and interpersonal relationships on a day to day basis among your team members.
- 4.3 The interactional process relates to the roles the individual team take on especially during team meetings including daily interactions.

Taken a step further the interactional process is the method by which the team members solve problems and make decisions.

4.4

There are various behavioral techniques which can be integrated into the interactional process by you and your team members during team meetings. Task performance techniques may assist you in accomplishing your goals. These behavioral techniques promote teambuilding and its maintenance:

4.5

Energizing: new ideas, solutions and
approaches are introduced; enhances group
discussion.

Searching: asking for clarification of suggested ideas and adding more information.

<u>Polling</u>: determining the group's feeling; establishes group's position, comparison is brought between the group decision and the task; leader ties pertinent points into coherent and concise statements.

<u>Summarizing</u>: pulling together of related suggestions; if all agree then it is safe to move on.

4.5 (Con¹t.) Encouraging: promotes responsiveness and supportive team climate; is friendly and warm encouraging contribution of other team members.

<u>Ventilating</u>: a description of the team's reaction to team ideas.

<u>Standardizing</u>: express guidelines for team use in choosing discussion topics, procedures policies and determining decisions.

<u>Diagnosing</u>: determines sources of difficulty and group progress.

Testing: asks for tentative group opinion to determine if consensus is developing.

Mediating: harmonizing; ground rules
established for conducting discussions,
defines and reinforces team rules, procedures
and values.

Conciliating: joking to maintain sanity among the team.

4.6

The behavioral technique which may be detrimental to the teambuilding process are:

Blocking: criticizing, blaming, deflating egos or status and competing.

<u>Pleading</u>: having a hidden agenda and superceding personal biases.

Clowning: disrupting team work.

Handglasping: members talking with others
or establishing relationships with one
person.

Striving: calling attention to oneself.

<u>Isolating</u>: acting indifferent or passive excessively formal or wandering off the subject.

Honeymooning: those who believe everyone
loves everybody.

4.6 (Con't.)

Strategies for effective meetings:

Many factors can determine the effectiveness of team meetings. The nurse manager should have a plan. It should include the purpose for the meeting, the goal to be accomplished; the method for accomplishing the goal; strategies for controlling the meeting; and involving team members in the participative process. During strategical planning the manager should give thought to meeting ground rules; task performance techniques; team exercises which can assist in the effectiveness of the meeting; interactional process and accomplishment of goals.

4.7 The ground rules may include how the team members will participate in the decision-making process.

For example:

 All team members will contribute input regarding decisions made. No member will be allowed to abstain.

4.7 (Con't.)

- 2) Discussions about group decisions will only be encouraged in the team meetings. Discourage evaluation or opinion making sessions outside team meetings.
- 3) During brain storming period of meeting no one will be allowed to criticize or evaluate suggestions made by any member.

4.8 Team meetings are most effectively managed in small groups of five to seven team members.

However, if you have a much larger staff ten team members would be the most suggested in one session. Another alternative would be to break your team into small groups and allow them to work in smaller teams and then come together periodically during the team meeting for general discussions.

Teambuilding is an ongoing process. There will be many opportunities to incorporate small team learning sessions to assist the team in their development.

4.9

Here are two small team learning processes which may assist you.

The Interaction - Analysis Team:

Purpose: provides the team an opportunity to evaluate their interactional process. The team's problem-solving process is recorded ideally with the use of a video recorder. If you do not have this luxury a tape recorder will serve as well. The meeting is taped.

You may choose to share with the team an explanation of the task performance technique as behavior team members take on during process of interaction at some point during the meeting or at the next meeting.

When the team views or listens to the tape they will listen with a sharper acuity for the behaviors they and other members have played. They will begin to be able to

4.9 (Con't.) evaluate what impact they as individuals and as team members have on one another. As well as the impact they have on the decision-making process.

Here, a critical look can be given to those who help and hinder the team's process of growth. These team members can be assisted and encouraged to work towards the goals of the team.

The possible advantages of this approach are:

- 1) Improved problem-solving techniques.
- 2) Sharpened viewing and/or listening skills.
- 3) Reinforces the importance of adequate preparation for problem-solving
- Acknowledge the value of different points of view.

4.9 <u>Manager Guidelines</u> (Con't.)

The interactional analysis team process:

- Practice using the taping equipment before the meeting. Get assistance as indicated.
- 2) Divide the team into three to seven team members.
- 3) Make sure each team member is aware or has read the question or problem.
- 4) Each team independently
 - a) clarifies the problem; all should understand it.
 - b) form a consensus on the definition or interpretation of the problem.
 - c) each member offers a solution to the problem.
 - d) after all members have contributed a solution each is evaluated by the team.
 - e) after the evaluation process a summary discussion takes place.

4.9 (Con't.)

5) Each team listens or views the tape to determine individual and team behavior towards the team goals.

Suggestions:

Emphasis should be placed on positive individual behavior of the team member as a contributing force to the team.

If time permits the tape may be shown more than once. Encourage exchange of information among the members. It will enhance their problem-solving skills.

The second approach to small team learning sessions is the:

Brainstorming Team

Purpose: increases the team's ability to find solutions to problems through the use of their individual creativity and frame of reference.

4.9 (Con't.)

The possible advantages:

- 1) Enhances creative thinking skills
- 2) Improves analytical skills
- 3) Develops the concept of team cooperation

Manager Guidelines

The Brainstorming Process:

- Divide the staff into teams with a maximum of eight to twelve members.
- 2) Assign one team member on each team the job of the recorder.
- 3) Give each team a limited problem for which they are to identify as many different solutions to the problem as time permits. General problems are discouraged as they would not allow for specific solutions.
- 4) Ground rules for team members:
 - a) one member talks at a time
 - b) no analyzing or criticism of another member's solution is allowed

4.9 (Con't.)

- c) all solutions offered are recorded no matter how uncanny.
- 5) Allow ten to twenty minutes or a maximum of two minutes per member on the team. The list is then analyzed showing to the team that there is more than one way to solve the same problem.

Suggestions:

This technique may be used in many situations to assist the team in its growth towards problem-solving.

There are also a variety of exercises to help the team develop effective interpersonal relationships and open communication. For example:

Purpose: This exercise encourages feedback; respective listening among team members in the team meeting regarding their behavior in the work setting.

4.9 (Con't.) Process: Divide the team into groups of five to six members. Each member is given five minutes to interact one to one with each participant. Within this time frame each team member gives and receives feedback about their behavior in the work setting. This exercise requires approximately 30 minutes to complete.

This statement may be used by all team members. It is a non-threatening approach.

"When you"...."in"....."it makes me feel....
What the team member is stating is:

"When you" (a description of what ther other member says or does) "in" (where the behavior occurs) "it" (the effects that are observed) "and it makes me feel" (a description of feelings).

The member listening must hear the member speaking out. Then the other member may do the same.

4.9 (Con't.) The possible advantages are:

- Increases awareness of the impact one has on others
- 2) Develops a mutual respect among team members
- 3) Promotes a climate where behavioral changes can occur

Suggestions:

This exercise is challenging initially for team members. Once they put forth the effort the momentum picks up. They begin to feel more comfortable.

The feedback should <u>focus on behavior</u> not on values, personalities or attitudes.

Behavior can be changed.

Information gained should be specific objective and relevant regarding their behavior.

4.9 (Con't.) Instructions given by you on how to present feedback will promote the probability for the receiver to perceive the information accurately and accept the message.

Refer to Section I, Module III Develop

Managerial Skills for a review of techniques
for use during conflict and problem-solving.

You now have basic knowledge of the roles
the team members can play in effecting the
results of team meetings; you are also
aware of techniques you can use to stimulate
the interactional process and enhance
interpersonal relationships.

Now, the next objective is to integrate the knowledge you possess and implement it.

4.10 The success for the implementation of team-building during team meetings is dependent upon team acceptance. The factors which may promote the team's acceptance are:

 Clearly defined expectations (standards of practice)

4.10 (Con't.)

- Team member understand their role in the process
- 3) Team participation in the problemsolving and decision-making process
- 4) Team concensus on the problem, goal and solution
- 5) Identification and utilization of supportive resources to attain the skills necessary to accomplish team goals.

During your first meeting tell the team the purpose for the meeting. Share your concerns regarding observations you have made. Share your goal to improve some of the existent problems. Break the ice by directing the team through any of the above-mentioned team sessions or exercises.

4.11 Another approach to the initial team meeting is as follows:

You will need a flip chart and marker.

4.11 (Con't.)

Statement of the Problem:

Present the problem objectively in terms of the situation or behavior not subjective in terms of personalities. What problems you see among the members on the unit: conflict internal strife, frustration, low morale, lack of trust and disrespect among staff members.

Further, as a result of the behavior you have identified among the team a decrease in the quality of patient care is developing as well. Specify.

Check with the team to determine if there is a concensus of the definition of the problem. Obtain input from each team member.

Write the problem on the left center side of the flip chart as you explain the problem.

Writing the problem on the flip chart takes the stigma of blame away from the team and depersonalizes the problem.

4.11 (Con't.) Draw a horizontal line from the problem to the other side of the flip chart.

Statement of the Goal:

Near the top of the page explain to the team that your goal is to see improved patient care and improved interpersonal relationships.

Gaining Team Input:

Now, ask the team for input related to obstacles which will prevent them from reaching the goal.

Draw arrows downward from the goal towards the problem. Write the problems on the vertical arrows.

You can control the input from the team by encouraging them to look at a broader range of problem areas. For example, if they state the problem stems from administrative negligence or interference ask them to identify other areas in which problems may be stemming, such as clinically or educationally.

4.11 (Con't.)

Administrative Problem:

Poor staffing.

Clinical Problem:

Nurses inability to manage a non-complaint diabetic patient.

Educational Problem:

Nurses inability to describe a nursing diagnosis.

After they have identified the obstacles preventing them from accomplishing their goal ask them to identify those measures which may assist them in attaining their goals.

During the brainstorming for solutions do not allow criticism and evaluation at this point. Any other climate may increase team members' reluctance to share goals.

4.11 (Con't.) One solution to the interpersonal problems
may be to rely on one another more for
expertise. Utilize nursing education to
provide classes in writing nursing diagnosis.

4.12

You can motivate the team to brainstorm for possible solutions to their problems. Then help them identify and list advantages and disadvantages, risks and trade offs involved in the solution. You and the team can decide on a mutually acceptable solution. Write the solution on the flip chart. Determine who is responsibile for the implementation of the solution and target date. Here is where your negotiation skills can prove helpful if there are no volunteers, utilize the techniques outlined in Section I, Module III Develop Managerial Skills.

If you find your team has difficulty in identifying problems or solutions within a group setting another approach is to make

4.12 (Con't.) them aware of your concern about problems related to task performance, interpersonal relationships and the quality of patient care.

Then inform the team that you are going to conduct a job satisfaction survey. The information will be obtained anonamously and used to assist the team and you in identifying team problems.

The information from the survey will be compiled and presented at a later meeting for team discussion on possible solution and development of plans of action.

The compilation of information will generate discussion and open communication.

The team will respond favorably because experiences, problems and concerns will be shared. Many team members through this experience will find they are not facing the problems alone.

4.13

Commitment is gained through team participation in identifying the problem.

Once the team has made a personal investment they are more committed to solving the problems. An example is Objective 4.11 and 4.12.

4.14

The information obtained from the job satisfaction interview will serve as an agenda for your next team meeting. The major problems can be determined by the number of times they were mentioned in the job satisfaction interview.

In most instances it is advantageous to distribute an agenda in advance to allow the team members an opportunity to prepare themselves for the meeting.

A suggestion on how the agenda might be prepared is to attempt to write the problem in the form of tasks.

4.14 (Con't.) List the major problems identified based upon the concensus of the team.

Write a statement on the agenda to this effect.

Review the listed problems. Be prepared to

share your suggestions for solving the

problems.

Planning is an intregal element for this very important meeting.

Establish in your mind and write down for the team members specific quantifiable measurable performance goals.

Clearly define minimum performance criteria that must be performed before each task is completed.

Plan to provide feedback to individuals, team members, as well as the team in general.

Encourage frequent reporting from team
members. Each member should know what kind
of feedback is expected on their progress.

4.14 (Con't.) This feedback communication process will enable you to monitor the team's progress.

Team morale may increase as a result of improved communication and recognition from you of their progress.

The benefits of this approach to team meetings are that they clarify roles; organizational expectations; expectation of others; promotes team planning and allows for open negotiation of individual roles by each team member in concert with the rest of the team.

Evaluation Process of Team Meetings

The major purpose for team meetings is to build a productive and cohesive team of nursing personnel. As stated before, teambuilding is a long ongoing process, which necessitates good evaluation to determine the team's progress.

4.15

Here are some guidelines which can be used to approach the evaluation process at the end of each meeting. Ask the team members:

How does each of them feel about the process, in general, they just went through?

Include yourself.

What did each member like best about the process?

What did each member like least about the process?

Identify something during the meeting which bothered each of you.

Can each member identify something they wish they had not done or said?

Can each member identify what they can do better the next time?

The effects of your teambuilding efforts can be measured by:

4.15

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How does each of them feel about the process, in general, they just went through?

Include yourself.

What did each member like best about the process?

What did each member like least about the process?

Identify something during the meeting which bother each of you.

Can member identify something they wish they had not done or said?

Can each member identify what they can do better the next time?

The effects of your teambuilding efforts can be measured by:

4.15 (Con't.)

- --observing the behavior of individual team members for the flow of communication without animosity and hostility.
- --demonstration of mutual respect, through
 the evidence of sharing of self physically
 and clinical expertise.
- --improved inter-personal relationships.
- --improved patient care.
- --decreased levels of frustration and dissatisfaction with the organization.
- --clear understanding of roles and expecta-
- --effective use of resources to assist in goal accomplishment.
- --improved communication, problem-solving, and decision-making skills.

SECTION II TEAMBUILDING CONCEPTS: PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE IV CONDUCT A TEAM MEETING

POST-INSTRUCTIONAL EXERCISE

DIRECTIONS: Circle the BEST response/s for each question from the choices on the response sheet provided on page 234. A complete answer may consist of one (1) or a combination of responses. The minimum criterion is for you to respond correctly to four (4) of the questions below. Review page 235 to compare your responses to the answer key.

- Staff members show evidence of team formation when there is:
 - a. extra team communication
 - b. team competitiveness
 - c. interpersonal conflicts
 - d. cooperative interaction
- Which ground rule would prove MOST effective during the team meeting?
 - a. no team member will be allowed to abstain
 - b. no private discussions during meetings
 - c. evaluation and criticism of suggestions will not be allowed
 - d. hidden agendas will be discouraged

- 3. Can you imagine how your team would respond if the five elements for gaining team acceptance were not implemented?
 - a. role uncertainty
 - b. expectations could be followed
 - c. helping resources could enhance skills
 - d. resistance to change
- 4. The effects of the team meeting can BEST be evaluated by:
 - a. increased productivity
 - b. interactional process during the meeting
 - c. interpersonal relationships after the meeting
 - d. team discussion of its impact and meaning on each individual
- 5. Which approach/es would you take to gain commitment from your team members?
 - a. jeopardize their jobs
 - b. ask their opinions
 - c. tell them what they want to hear
 - d. tell them what they will do

SECTION II TEAMBUILDING CONCEPTS: PRINCIPLES AND
PRACTICAL APPLICATIONS

CONDUCT A TEAM MEETING

RESPONSE SHEET

MODULE IV

5.

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POST-INSTRUCTIONAL EXERCISE

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Correct	Responses	=	·%
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Compare pre-instructional and post-instructional exercise results. See instructor for guidance as needed.

SECTION II TEAMBUILDING CONCEPTS: PRINCIPLES AND

PRACTICAL APPLICATIONS

MODULE IV CONDUCT A TEAM MEETING

ANSWER KEY

POST-INSTRUCTIONAL EXERCISE

- d Cooperative interaction
- 2. a No team member will be allowed to abstain
- 3. a Role uncertainty
 - d Resistance to change
- 4. d Team discussion of its impact and meaning on each individual
- 5 b Ask their opinions

You have completed this module.

SUMMARY

Teambuilding is not the answer to all managerial problems.

The manager must review the pros and cons, time, money,
needs of the staff and personal level of preparedness to
manage the nursing staff using this technique. Once these
factors have been given consideration and it appears
feasible to pursue the benefits will be worth the determined,
deligent efforts made by the manager.

The advantages of teambuilding are many. The nurse manager:
--can assist the nursing team to focus on its primary
goal, which is quality patient care.

- --gains increased self-confidence and ability to effectively apply managerial skills through the guidelines of teambuilding. The managerial skills essential to the acceptance and implementation of teambuilding are motivation, practice and self-direction.
- --and the nursing team's morale and esteem will be improved.

 The manager's esteem and morale increases because of the basic guideline presented through the teambuilding concept. It provides a workable tool to assist in identification and resolution of problems which may have been unmanageable before.

The team's esteem and morale increases because they are recognized as unique individuals who have a significant contribution for the good of the patient and the satisfaction derived thereof. They are getting attention and approval. They feel a sense of belonging and conformity to the team as well as the organization. They are contributing and participating for the good of the patient/client and themselves. Team members are fully aware of their role in the decision-making and problem-solving process. There is increased quality and productivity as well as personal satisfaction. Through a team effort they determine their own destiny in the work environment. Personal commitment is strengthened.

The primary goal of any health care organization is quality patient/client care/service. Public relations can improve as the community will have an improved perception of the health care facility. Teambuilding as it strengthens the individual as well as the team's commitment to the goals results in improved organizational effectiveness.

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