

Are you a knowledge-creating team member?



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The collective wisdom and efficiency of interprofessional teams will often outperform the efforts of skilled health professionals working alone in silos.¹ The *résumé* articles about interprofessional collaboration (IPC), published in Winter and Spring 2012,

introduced the “Use of Knowledge” Framework as a guide for RDs to create synergetic teams that learn, grow and innovate together for the benefit of clients. This article explains how teams develop in the process of becoming effective knowledge-creating IPC entities. It also describes what actions are needed to become an effective “knowledge-creating team member” and developing with your IPC team.

FIVE STAGES OF TEAM EVOLUTION AND FUNCTIONING

Making a meaningful contribution to your IPC team as a “knowledge creating team member” requires an understanding of how teams evolve. Teams move through various developmental stages before becoming collaborative and productive. Building on Tuckman’s model of team development, we characterize IPC team development through five phases or stages: forming, storming, norming, performing and reforming.²

Each stage of development into “knowledge creating teams” has its own characteristics as shown in Table 1, page 8.

TEAM FUNCTIONING EBBS AND FLOWS

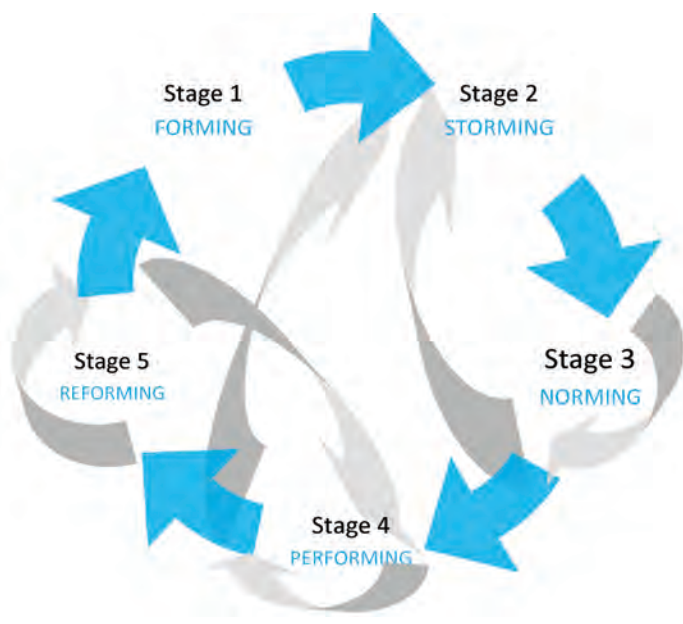
IPC teams are dynamic: members come and go, organizations and practice change, causing teams to ebb and flow through the functioning stages. Figure 1, on the right, *Ebb and Flow of Team Functioning*, shows that while all teams will eventually move through the five stages of functioning (blue arrows), teams typically move back and forth from one stage to another when changes in practice environments have an impact on the team (grey arrows). For example, teams without appropriate communication

processes may have conflicts arising from issues about changes in team composition or practice which push the team back from *Stage 4 Performing* to *Stage 2 Storming*. In *Reforming Stage 5*, an effective knowledge-creating team with appropriate communication processes will avoid unnecessary setbacks by adjusting to changes without causing a radical setback in team function. Understanding and thinking about the recursive nature of team development, will help you learn how to be a member of “knowledge creating teams” and increase your comfort level when dealing with conflict, blurring of boundaries and/or overlapping scopes of practice.

RDS AS KNOWLEDGE-CREATING TEAM MEMBERS

Effective knowledge-creating team members actively share knowledge with team mates, collaborate with other professions to create new knowledge in the team and seek knowledge from other team members for the benefit of clients. They take responsibility for their role and actively participate in team functioning. Becoming an effective knowledge-creating team member involves understanding how your IPC team currently functions (see Table 1), and

Figure 1 Ebb and Flow of Team Functioning



Team Definition

“A small number of people with complementary skills who are committed to a common purpose, performance goals and approach for which they hold themselves mutually accountable.”¹

then, recognizing and applying the action needed for team development.

In the *Code of Ethics for Dietitians in Canada* (Dietitians of Canada, 1996), RDs pledge to “work co-operatively with colleagues, other professionals, and laypersons.” This means that dietitians have an ethical obligation to seek new ways to achieve the goal of safe and high quality patient care. To enable “knowledge creating teams”, Registered Dietitians and other health care providers need to:

1. recognize the characteristics of team functioning;
2. understand what is happening in “knowledge creating teams”; and
3. identify individual and team responsibility for enabling the provision of safe, quality interprofessional services.

As dietitians, you contribute specialized dietetic knowledge and skills to the IPC team. Developing your ability to communicate the dietetic scope of practice, standards and accountabilities to other professionals on your team and considering that of others are both effective ways to enhance team functioning as a knowledge-creating team member. Effective team development will optimize your RD role by clarifying dietetic practice expectations, tasks and accountabilities within the IPC team.

RDs can help build their interprofessional teams by participating in clarifying team functions, developing a shared vision, helping to establish roles, facilitating team learning and encouraging the pooling of team knowledge for effective client-centred services. RDs work with the team by respecting team functions and roles, working toward a shared vision and contributing to the pool of knowledge.

Effective, knowledge-creating IPC teams do not happen instantly; they evolve as teams of physicians, nurses, social workers, therapists, and others, work together to manage

obstacles and coordinate their efforts for safe client-centred services. In serving their clients’ interest, dietitians have the obligation to make interprofessional collaboration work. They can do this by growing their interprofessional communication skills and actively participating in building effective knowledge-creating teams.

JOIN THE CONVERSATION

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1. Go to www.cdo.on.ca to access your *Member Home Page* with your registration number and password.
2. Click on *CDO Communities*, upper right side of the Member Home Page
3. Click on *Professional Practice Blog*
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5. To leave a comment, click on the title and the reply box will appear.

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TABLE 1. TEAM STAGES OF FUNCTIONING IN BECOMING “KNOWLEDGE CREATING, EFFECTIVE TEAMS”

1. Forming

Individuals recognize the need to connect with other team members and to learn about the roles, expertise and skills of others. It is during this phase that team members recognize the need to develop processes and structures to enable optimal team functioning for client safety.

Actions of a Knowledge-Creating Team Member	Establishing Knowledge-Creating IPC Teams
<ul style="list-style-type: none"> • Build confidence in yourself and in your competence as an RD on the team. • Take responsibility for clarifying the dietetic scope of practice and your RD role and accountability within the team. Know how your specific skills and expertise as an RD add value to the team. • Take responsibility for understanding the roles, area of expertise and skills of other team members and begin to develop trust. Seek, learn and share knowledge from the other professions on the team. 	<ul style="list-style-type: none"> • A team leader ensures that all key members on the IPC team participate in setting the team mission, goals, IPC roles, tasks and accountabilities. • Through team discussion, team members begin to think of how they can work together to provide safe, quality, client-centered services. • The team determines the processes for sharing resources, team learning and use of knowledge/expertise within the team.

2. Storming

Typically, conflicts, disagreements or contradictions arise when a team begins to apply new processes and individuals recognize that the team goals, roles, resources and procedures need to be further clarified or adjusted to enhance team functioning.

Actions of a Knowledge-Creating Team Member	Problem-Solving Knowledge-Creating IPC Teams
<ul style="list-style-type: none"> • Share information, seek knowledge and encourage interaction among team members during disagreements and contradictions. • Practice active listening and facilitate open communication, negotiation and conflict management. • Review and clarify your own role, expectations, tasks and accountabilities within the team. • Be open and seek new ways, if necessary, to achieve safe and high quality patient care. 	<ul style="list-style-type: none"> • Procedures are further developed for dealing with disagreement and contradictions within the team. • Realistic expectations are emphasized to provide safe, ethical and client-centered services. • The team mission, goals, shared resources and procedures are further clarified. • Where necessary and with team consent, adjustments are made to improve the team dynamics and outcomes for clients.

3. Norming

The team is increasingly more cohesive. Conflicts, disagreements and contradictions are resolved. Individuals accept their roles within the team and begin to act and function as a team.

Actions of a Knowledge-Creating Team Member	Growing Knowledge-Creating IPC Teams
<ul style="list-style-type: none"> • Appreciate the diversity of the team, be open to all viewpoints and move beyond personality differences within the work team. • Be approachable, continue to develop your communication skills and facilitate conflict management. • Respect and work within the mission, goals, resources and procedures established by the team. 	<ul style="list-style-type: none"> • Communication procedures are established allowing mutual respect and trust to grow between team members. • Consensus is being achieved around team goals and procedures. • Team members are bonding (humour and openness to all viewpoints).

4. Performing

This is an effective knowledge-creating IPC team, working toward shared values, achieving goals, applying shared knowledge and benefitting from the skills of the various health professions on the team for the delivery of safe client-centred services.

Actions of a Knowledge-Creating Team Member	High-Functioning Knowledge-Creating IPC Teams
<ul style="list-style-type: none"> • Take responsibility for your role and actively participate to ensure team functions at the Performing Phase. • Value continuous open communication and collaboration. • Share information and learn from others by participating in teaching and learning opportunities. • Recognize the contributions of others to the team, mutual accountability and trust their area of expertise. 	<ul style="list-style-type: none"> • The team is accountable for achieving client-centred outcomes for quality services. • Procedures are established for continuous re-evaluation of team tasks and roles. • Opportunities are created for learning together and to create and seek new knowledge within the team for the benefit of clients.

5. Reforming

Team members have the ability to recognize change that may affect the productivity of the team. The team re-assesses performance, outcomes and functioning of the team when faced with change.

Actions of a Knowledge-Creating Team Member	Responsive Knowledge-Creating IPC Teams
<ul style="list-style-type: none"> • Accept that change is inevitable and be prepared to adjust to new team dynamics. • Recognize the changes that may affect the productivity of the team and participate in team activities that facilitate change (e.g., welcoming new members, learning new roles or adapting to new procedures). 	<ul style="list-style-type: none"> • Processes are in place to facilitate changing roles within the team, re-assess performance, outcomes and function of the team and to maintain team enthusiasm/keenness to get to the performing stage.