

## LEADERSHIP/MANAGEMENT

# Does Your Leadership Team Work?

*Jo Manion, PhD, RN, NEA-BC, FAAN*

**OF COURSE, YOUR LEADERSHIP TEAM WORKS!** The real question here is whether your leadership team is effective as a result of the efforts it expends. I recently spoke at a national nursing conference in Las Vegas to experienced nurse managers on the topic of coaching for effective leadership teams. I was struck by the realization that although shared leadership and the concept of teams in health care have been popular topics for decades, there are still experienced managers struggling with creating an effective leadership team for their area of responsibility. Added to this realization is the fact that most nursing leaders have had extensive and varied experience serving on leadership teams. So why are people still struggling with the challenge of creating an effective leadership team? The title of this column is meant to be provocative. Of course, your leadership team works, but is it effective? Does it get the results intended, or is it more of a collection of people who are called a team, but are really a coordinating group created to make communication easier for your direct reports? Listening to the conference participants reminded me of a key fact I have come to believe over the years: Creating a truly effective leadership team is much easier to talk about than to do! I decided it might make a good topic for this column.

All the topics I have written about in this column are crucial for the development of effective, shared leadership: understanding the role of leadership, building healthy leadership relationships, execution and getting results, and communication skills. These are prerequisites for creating collective leadership within perioperative services.

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## Benefits of a Leadership Team

First, let us address the question of why shared leadership is such a hot topic. Increasing complexity in the workplace, dwindling resources, generational issues including a surge of baby boomer retirements and cultural value changes in younger staff members, as well as significant changes in the health care business environment all create tremendous pressure on today's nursing leaders. Years ago, I was conducting interviews and focus groups of managers about the many changes in their health care system. As a consultant, I had worked with their system for 4 years, helping them become a team-based organization. I was surprised to find that they were handling the current pressures so effectively. When I asked if the number of changes they were facing had decreased, they laughed and assured me that, if anything, the pace of change was faster than ever. I asked them why they seemed so calm and in control. To my surprise, I heard this response from manager after manager: "Since I implemented a leadership team, this is the first time in my management experience I don't feel like I'm alone! I feel like I have others to help me with the leadership load." What testimony to the benefit of a leadership team!

None of our current challenges are going to go away and our leadership load is not likely to lessen. It may be that the only realistic hope for help and support is to embrace the concept of shared leadership. Although it can require more effort to establish, in the long run, it pays off exponentially. When the leadership role in your department or work group (eg, on your shift or in your clinical area) is shared, needed results can be greatly improved. Other important benefits include: greater alignment with organizational values and purpose; improved communication and decision making; decreased "silo" behavior; increased support of each other; stronger personal commitment and engagement of members; and the deliberate development of future leaders. These benefits are realized only if the leadership team is a true team, working in concert with each other for the

benefit of the whole. A dysfunctional work group is more likely to increase the work for the leader rather than decrease it. For this reason, it is important you have the key assessment points at your fingertips to determine whether your team is effective or not!

### **Assessing Your Leadership Team**

There are at least six key points to consider in assessing the effectiveness of your leadership team. They include:

1. Are the key structural elements in place?
2. What is the level of trust in the team?
3. Does the team effectively handle conflict?
4. Are members fully committed to the work and outcomes of the team?
5. Do team members hold themselves and the team accountable?
6. Does the team pay attention to its results?

Each of these elements will be considered briefly in this column.

### **Key Structural Elements**

Many times, groups and/or teams are dysfunctional for very simple reasons that relate to basic structural elements, and once these issues are resolved, the path to effectiveness is clear.

### ***Purpose/Work of the Team***

What is the collective work of the team? Why are you considering developing a shared leadership team? What will the team do and for whom will it do it? This seems like an easy question, but in fact can be very difficult to answer. And, in a true team, if you are the leader, you only begin to answer this question. However, you need to have some clarity around this issue before you determine membership. The very best teams actually consider this question as one of their first tasks and develop a formal, written purpose statement that guides them as they progress in their work.

Your leadership team does a lot of work, but is it doing the right work? Is it doing work that only it can do? Leadership teams are different than patient care teams, but there is often confusion about their purpose. While the work of a patient care team is

to deliver safe and high quality nursing care, that is not the purpose of the leadership team. The purpose of the leadership team is to provide consistent and effective leadership for the staff who deliver the patient care. The direct customer of the leadership team is the staff of the department, and the indirect customer is the patient. This may seem like a small point, but is crucial in keeping the team focused on their work. Too often leadership teams get involved in the day-to-day operations rather than taking the longer view and doing the strategic work that is necessary for continual improvement and growth in the department. So, ask yourself: Are we putting out fires or are we setting fires? Are we so busy with staffing issues that we lose sight of the coaching and mentoring our staff members need? Are we creating alignment with our organizational values and goals, or are we so focused on schedules and resources that we do not have time to pay attention to these strategic issues?

### ***Values of the Team***

What are the key, important values held by the team? As the team works to identify and clarify their values, trust begins to develop within the team. The team's values do not have to completely replicate the organization's values; however, they should not be in contradiction to established organizational values. Once the 4 to 5 key values of the team are identified, the next step is identifying key behaviors that would demonstrate these values on a day-to-day basis. Commitment to these values is a process that does not occur if the team is just handed a list of values that have been created by another group or individual, but rather as the team invests the energy in figuring out what is most important to them and how they will know they are living their values for others to see.

### ***Membership of the Team***

An early structural question relates to who should be on your leadership team. The basic question to ask is "who do I need to help achieve the purpose of the team?" The answer, in part, depends on the scope of your position. For example, if you are a Perioperative Director, your leadership team may consist of managers of the operating room service, the perianesthesia care unit, central processing, materials management, charge nurses or lead

team members, and perhaps educators in your department. If you have nursing shared governance in your organization, the Nursing Council member for your area may be a member of your leadership team. If you are the manager of the PACU, your leadership team will consist of key leaders within your patient care unit. This could include charge nurses, Nursing Council members, and basically anyone that could share the role of leadership in your area. If the charge nurse role is not an established job in your unit, but instead a role that is filled by a variety of skilled and experienced nurses, two or three might serve on the leadership team for a limited time (such as a year) and then rotate off to allow others to help share the leadership role.

Think broadly in terms of membership on the leadership team. Consider people with complementary skills and characteristics to create a diverse team. For example, having a staff member who often expresses contrarian views may be very helpful to the team in really working through conflicts and hashing out their decisions. Having an educator on the team or the Nurse Council member can help ensure that these viewpoints are considered carefully as the team makes decisions. Members from other shifts, job categories, and disciplines can also round out your team.

### ***Common Approaches***

Once the team defines and agrees on its purpose and work, then the work of defining how it will approach this work begins. For example, having a leadership team means decisions are made differently. It is far more than simple participative leadership where the manager gathers stakeholders together, asks their opinion and then makes the final decision. A true leadership team is very clear about what decisions it will make and how these decisions will be made. Having a team does not mean the team makes all the decisions for the department; however, it does mean there is clarity around which decisions are team decisions and which are individual decisions (such as those made by the manager or by individual members of the team in doing their individual work). This can raise some early issues for the team. Although you may be the manager of the department, it does not automatically give you veto power in the face of agreement by the rest of the team members.

You become one member with one voice and one vote. As manager, you certainly need to identify relevant parameters for decision making and clarify the level of authority the team has, but there may be instances when you have performed this and the team makes a decision that you do not feel is the best decision. You remain involved and coach the team as well as hold them accountable for the outcomes of the decision. Learning often occurs best by making mistakes and being accountable for them. This can feel very frightening for both the manager and the other team members; however, it is often the path to growth for the team.

Figuring out common approaches to its decision making is only one of the key issues. Other areas to be explored and considered include approaches to communication, coverage for each other, and shared participation in needed committee work.

In addition to establishing the structural elements of the team, there are five additional assessment points. Many of these begin to be established as the group does its initial work together and must be accomplished in order for your team to be effective.

### **Establishing Trust**

One of the first issues for any team is to build trust between members. Trust among team members is based on the belief that their peer's intentions are good and there is no reason to be protective or careful around or in the group. It results in the ability of members to openly engage in passionate and unfiltered debate about what needs to be performed in any given circumstance. It is an acceptance and celebration of team member's differences because those differences actually create a stronger and more effective team. So ask yourself: "What is the level of trust within the team? What is the level of trust with other teams?" Reflect on the degree to which team members are genuinely open with one another about their mistakes and vulnerabilities. Does the team engage in unfiltered and passionate debate of ideas? Or is there still a lot of carefulness and guarding of expression? Are team members careful in how they choose their words and actions based on how they want others to react rather than how they really think?

The team may begin with a high level of trust between members because these are usually people who have worked together and are now forming into a cohesive, consistent leadership team. However, with the initial work of the team and in its early stages of formation as it deals with difficult issues, trust really begins to gel and solidify within the team.

### **Dealing With Conflict**

How frequently does conflict or disagreement occur within the team? An effective team only deals with conflict well if trust has been established. Constructive conflict is essential for the growth and development of any healthy team. It is inevitable in today's challenging work world. Harmony is fine if it comes as a result of working through issues constantly and cycling through conflict. False harmony occurs when people hold back their opinions and honest concerns. False harmony may appear positive on the surface, but is often destructive in the long term because conflict unresolved often leads to back-channel personal attacks and disagreements.

Is the conflict that occurs about substantial issues rather than personalities or preferences? Productive, ideological conflict is different from destructive fighting and interpersonal conflict. This can be confusing because both types of conflict are characterized by passion, strong emotion, and frustration. Passive and sarcastic comments are not a healthy form of conflict.

How does the team handle conflict? Do they need skill development in this area? One of the most difficult things for a leadership team to recognize is that fighting is NOT bad if it is about issues. The role of the leadership team is to really hash out difficult issues so each member can leave the team meeting and give their people clear and consistent direction. Your purpose as a team is to get the best solution in the shortest time. This requires honest airing of differences and contrarian viewpoints.

### **Gaining Commitment**

Dealing effectively with conflict is only possible if there is solid trust in the group. And in a similar way, gaining commitment is only possible if the team has worked through disagreements and

conflicts. If a team member feels unheard or that his or her opinion has not been solicited nor fully considered, commitment and buy-in is unlikely to follow. In determining how well your team gains the commitment of its members ask: "What happens when a team decision or course of action is not supported by a team member?" How is this dealt with by the team? What can you do to ensure that you have the commitment of all team members to the decisions made by the team?

One of the most important ways to ensure commitment by the entire team is for the team to have thoroughly hashed out and agreed on how it will work together. This was already addressed in the section on structural elements. Deliberately and intentionally deciding what decisions will be made by whom and how the team will make its decisions is hard work. However, without this clarity you will be unlikely to achieve buy-in from all members on key decisions. This is an area where skill and knowledge development is very likely to be needed. There are several key forms of decision-making (such as majority, minority, unanimous, and consensus decisions), and each is used in different circumstances. Few people fully understand what consensus decision making is although the term is frequently used.

Consensus is a form of group decision making useful when full commitment of all members is necessary for the decision to be implemented fully. It occurs when every member of the group can say:

1. I expressed my opinion and believe you tried to understand it.
2. I heard your opinion and believe I fully understand it.
3. I believe the decision has been made in a fair manner and I will support the decision even if I may not completely agree with it. (Consensus is 70% agreement and 100% commitment.)

True consensus takes time and needs only be used for critical decisions that will require every team members' full commitment in order to implement. It is very powerful when used appropriately.

### **Hold Each Other Accountable**

The next challenge faced by the team is only met if commitment has been attained. Without

commitment and buy-in team members will not hold themselves or the others accountable for their actions. In a true team, members need to increase their willingness to accept different behavior. However, the one deviation in behavior that is not acceptable is the person who is unwilling or unable to put the team first. It is not okay when one person's behavior is having a negative effect on the team. In a true team, members challenge each other about what each is doing, how time is spent, and whether there is enough progress. Challenge with respect, but challenge.

Has the team established standards of behavior for each other? Is there a defined team operating agreement? These state expected behaviors and create clarity for each team member about how they will treat each other. How is it handled when a team member acts or behaves in a way that is counterproductive to the good of the team? Although this issue can be devastating to any team, there is also a bright side. The team that meets this challenge and effectively deals with counterproductive team behavior is positioned for great growth and better results.

There are many examples of individual behavior that is counterproductive to the team and difficult to handle. A team member who becomes very defensive in the face of conflict or one with an abrasive or intimidating personality may be very difficult to deal with. However, just as difficult is the friendly, helpful team member who is always volunteering to do a task or take on a responsibility but then continually falls short. Because they are so helpful, it may be difficult to address the fact that they are in fact NOT achieving outcomes. The team may need to address this behavior and say: "Stop being so agreeable! Only accept tasks and responsibilities for which you can follow through on the commitment."

### **Focus on Results**

The final challenge for any team is to pay attention to the results they are achieving. This leadership issue has been discussed any number of times in this column. For a team, the question is: "How do you know you have accomplished your needed outcomes as a team?" Has the team established the key results they are seeking? Does the team evaluate its outcomes on a consistent basis? And,

does the team hold itself collectively accountable for its outcomes or is one team member or the team leader blamed when something fails?

Team results need to be put ahead of individual issues. The ultimate dysfunction of a team is when individual members seek out individual recognition and attention at the expense of the goals of the entire team. It is not that there is not any ego on the team, but the collective, shared ego of the team is stronger than that of any individual team member. You have to make the results needed to be achieved SO CLEAR to everyone on the team that no one would even consider doing something purely to enhance his or her own status.

In addition, the team needs to ask if it is looking at the right outcomes? I remember working with a remarkable Patient Care Services leadership team some years ago. I was on-site to facilitate a retreat with them as they evaluated their effectiveness. They described a situation where at a team meeting on a Friday, one of the members announced that a surgeon was starting a new procedure in the OR the following Monday. The Director of Perioperative Services angrily replied: "No he's not! I haven't been told anything about this. Our staff isn't ready for this procedure. We don't have the equipment or instruments to do this procedure." The Director of Critical Care quickly chimed in and agreed. "We haven't taught or trained any of our Intensive Care staff on caring for these patients. He's not starting on Monday!" The team was in an uproar.

In leading them through an evaluation of this situation, they talked about how they resolved the situation and dealt with it quickly so the surgeon could begin doing the procedure on Monday morning. They were very proud of their work as a team. I was a bit appalled and challenged them. One of their stated purposes as a team was to ensure open communication between all the areas. They evaluated their crisis intervention on a late Friday afternoon as a success when I saw the failure to communicate the situation on a timely and proactive basis as an abject failure! They had failed in meeting one of their primary purposes as a team. It is important for any good team to be ruthlessly honest with themselves about their needed outcomes and the degree to which they are achieved.

**Summary**

As a leader you will serve on leadership teams and may in fact establish a leadership team for your area of responsibility. Regardless of your role, it is important to understand the concept of shared leadership and the use of a structural design of a team to achieve the desired shared leadership. These assessment points have been offered to help you increase the effectiveness of your leadership team.

- Have the key structural elements been considered and established?
- Are there high levels of trust within the team?
- Does the team address and handle conflict effectively?
- Are team members committed to the work of the team?
- Does the team and its individual members hold themselves accountable for their outcomes?
- Is the team clear about its needed results and does it pay attention to their outcomes?