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**The association between
team characteristics,
performance and Human
Resource Management
(HRM) in rehabilitation
teams.**



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David Joseph Pereira

Bsc (Hons), MBA

PhD Candidate

Centre for Clinical Governance

Research in Health

Australian Institute of Health Innovation

Faculty of Medicine

University of New South Wales



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Supervisors

- ***Dr David Greenfield***

Senior Research Fellow

Centre for Clinical Governance Research

Australian Institute of Health Innovation

Faculty of Medicine

University of New South Wales



- **Professor Jeffrey Braithwaite**

Foundation Professor and Director

Australian Institute of Health Innovation

Professor and Director

Centre for Clinical Governance Research

Faculty of Medicine

University of New South Wales





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My research

- Explores the association between team characteristics, performance and Human Resource Management (HRM) in rehabilitation teams.



Presentation outline

- Research rationale
- Teams and team characteristics in healthcare
- HRM in healthcare
- Rehabilitation teams
- Performance measures
- Expected outcomes
- Research plan



Research rationale

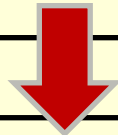
- HRM's link to performance in healthcare is considered a 'black box' (Purcell et al., 2003, Harris et al., 2007).
- My research proposes team characteristics as an element of the 'black box'.
- My focus is on rehabilitation teams as there is an absence of research that comprehensively evaluates team characteristics in Australian rehabilitation services.



Theoretical framework for the proposed research

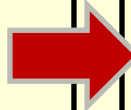
Human Resource Management (HRM)

- Human resource planning and evaluation
- Healthcare staff work systems
- Healthcare staff education, training and development
- Healthcare staff well-being and satisfaction



Team characteristics

- Individual characteristic of team members
- Structural team characteristics
- Team functioning characteristics



Performance

- Rehabilitation medicine clinical indicators
- Overall Job Satisfaction





Teams in healthcare

- Teamwork is an important component of effective healthcare

(Stoller et al., 2004, Brown and Richardson, 2006, Barrere and Ellis, 2002, Zwarenstein and Bryant, 2000, Mickan and Rodger, 2005).

- Terms which are associated with teams in healthcare are teamwork (Mickan and Rodger, 2005), collaboration (Larson, 1999, Zwarenstein and Bryant, 2000) and working together (Baggs and Schmitt, 1997).



Benefits of effective teams in healthcare

- Improving patient care, staff feeling better in the job and controlling costs (Baggs and Schmitt, 1997).
- Job satisfaction (Moore et al., 2006).
- Overcoming the difficulties and stresses of the job (Robertson and Finlay, 2007).



Consequences of poor healthcare team functioning

- Unhealthy work environments and poor patient outcomes (Larson, 1999).
- Poor staff morale, loss of learning opportunities, a tendency for staff to work as a group of individuals rather than a team and reduced job satisfaction for all staffs (Aston et al., 2005).



Why team characteristics?

- We know that different variables of team characteristics influence one another and influence different elements of performance depending on healthcare context and setting (Shortell et al., 2004, Borrill et al., 2000, Gene-Badia et al., 2008, Goni, 1999, Proudfoot et al., 2007).
- Being able to describe a team is the first step to answering which types of multidisciplinary teams are most effective in different settings (Øvretveit, 1996).



Team characteristics categories

- Individual characteristics of team members.
- Structural team characteristics.
- Team functioning based on Thylefors et al.'s (2005) team type index, perceived efficiency index and team climate index.



Individual characteristics of team members adopted for proposed research

No	Item
1	Gender
2	Age
3	Profession
4	Country of professional training
5	Professional healthcare experience
6	Rehabilitation team experience
7	Current rehabilitation team experience



Structural team characteristics taken into account for the proposed research.

No	Standardized	To be evaluated
1	Team type (Rehabilitation)	Team size
2	Team category (Full service)	Team tenure
3	Sector (Public)	
4	Patient population (General)	
5	Geographical dispersion (Sydney)	
6	Setting (Urban)	



Team functioning evaluation tools selected for proposed research

Tool	Themes/Items covered		Relevance of tool
Team Type Index	1	Role specialization	Determines type of <u>team organization</u> (multiprofessional, interprofessional or transprofessional) <u>based on the level of integration.</u>
	2	Task interdependence	
	3	Coordination	
	4	Task specialization	
	5	Leadership	
	6	Role interdependence	



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Tool	Themes/Items covered		Relevance of tool
Perceived Efficiency Index	1	Team members working towards the same goal	Evaluates <u>goal achievement.</u>
	2	Efficiency of teamwork	
	3	Team success	
	4	Quality of team output	
	5	Meeting patients' needs	
	6	Satisfaction with team work	



Tool	Themes/Items covered		Relevance of tool
Team Climate Index	1	Ability to provide feedback among team members	Provides a <u>comprehensive evaluation of general team working climate</u> that includes <u>social</u> as well as <u>task oriented aspects</u> .
	2	Interest and attention among team members	
	3	Ability to identify and feel empathy among team members	
	4	Ability to listen to others	
	5	Ability to express one's position	
	6	Ability to give and take	
	7	Performance of work in an informal and supportive atmosphere	
	8	Participation in team discussions	
	9	Respecting and taking advantage of disagreements and different points of views	
	10	Striving for consensus decision making	
	11	Expression of criticism in a positive and constructive manner	
	12	Expression of feelings and opinions on factual questions	
	13	Domination of team work by formal leader and dependence of leadership style on circumstances and nature of the given task	
	14	Team task orientation	
	15	Team encouragement of individual performance	



Human Resources Management (HRM) in healthcare

- HRM is synonymous with the formal strategies developed by organizations for people management and their alignment to broader organizational strategies (Michie and West, 2004).
- HRM covers management practices such as recruitment, selection, induction, training, appraisal and the design and application of reward systems which aim to enhance organizational performance by improving the performance of individuals within the organization (Michie and West, 2004).



- While HRM generally has a positive impact on organizational performance, limited research has been conducted to explore the relationship between HRM and performance in healthcare (Harris et al., 2007).
- Studies on HRM in the healthcare sector make up only 2% of HRM performance studies worldwide (Hyde et al., 2006).
- Healthcare studies have shown a positive relationship between HRM and performance ranging from patient mortality rates to customer and staff satisfaction (West et al., 2006, West et al., 2002, Meyer and Collier, 2001, Brown et al., 2003, Purcell et al., 2003).



- Human resource policies and practices are likely to influence patient care quality by affecting both technical and interpersonal aspects of quality care (West et al., 2006).
- While studies have shown HRM to have a role in encouraging teamwork in healthcare (West et al., 2006, West et al., 2002), the association between HRM and team characteristics has *not* been researched in the healthcare sector.



Malcolm Baldrige National Quality Award's Human Resource Development and Management (HRDM) category areas

Areas	HRM coverage
Human resource planning and evaluation	<ol style="list-style-type: none">1. HRM planning such as ensuring recruitment of a proper mix of professionals.2. Employee development objectives and strategies3. Staff/management relationships4. Job design
Healthcare staff work systems	<ol style="list-style-type: none">1. Range of tasks given to employees2. Decision making responsibility given to employees3. Employees compensation and recognition policy4. Provision of rewards for employees learning new skills
Healthcare staff education, training and development	<ol style="list-style-type: none">1 Training to build staff capabilities2. Training of frontline employees to handle service failures3. Provision of problem solving skills training for employees4. Evaluation of the benefits of staff training
Healthcare staff well being and satisfaction	<ol style="list-style-type: none">1. Creating work environment that supports the well being and development of all employees2. Measuring employee satisfaction.3. Improving employee health and safety4. Provision of career development services for employees.5. Evaluation of turnover



The research context

- There are many types of healthcare teams, each with different membership and different ways of matching a person's needs to a team practitioner's skills and abilities (Øvretveit, 1996).
- As a contingency or situational approach is advocated for the organization of teams (Thylefors et al., 2000), this study focuses on a specific field of medicine in exploring team characteristics.



Why rehabilitation teams?

- The decision to focus on rehabilitation services was determined by the strong teamwork emphasis given to this medical field (Gibbon et al., 2002, Mullins et al., 1994, Nelson et al., 2008, Shaw et al., 2008, Strasser et al., 2008).
- Rehabilitation services aim to optimize the activity and participation of patients with restrictions due to both acute and chronic conditions (Graham et al., 2008).



- Teamwork is regarded as the cornerstone of rehabilitation and it is recognized that the skills of a multiprofessional team are required to provide the care and interventions necessary to maximize the patient's potential to recover (Gibbon et al., 2002).
- Team characteristics specifically team functioning has been linked to performance in rehabilitation teams (Strasser et al., 2005).



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Types of rehabilitation services in Australia

(Graham and Cameron, 2008)

- Full service
- Specialist service
- Supervised allied health service
- Unsupervised allied health service



Full service rehabilitation teams

- Focus on this category allows the evaluation of rehabilitation teams with the highest professional diversity.
- Essential team members would include the nurses, medical practitioner, physiotherapist, occupational therapist and social worker.
- A speech pathologist, nutritionist and psychologist would also be available on a consultative basis.



Performance measurement criteria

- The evaluation of team performance on more than one dimension and using both a primary and secondary data approach.
- At least one of the chosen measures should specifically reflect the performance of the team as a whole instead of providing a performance appraisal for an individual team member or even giving a measure of the entire healthcare organization's performance.



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Clinical Indicators



- A clinical indicator is a measure of the clinical management and/or outcome of care (Collopy, 2000).
- Rehabilitation medicine clinical indicators reflect the performance of the entire rehabilitation team rather than the performance of an individual team member or the entire hospital organization.
- Rehabilitation medicine clinical indicators in Australia are standardized by the Australian Council on Healthcare Standards (ACHS) .
- Clinical indicator data are routinely submitted by Australian rehabilitation services to the Australasian Rehabilitation Outcomes Centre (AROC)



Rehabilitation Medicine Clinical Indicators

No	Indicator
1	Timely assessment of function on admission
2	Assessment of function prior to episode end
3	Timely establishment of a multi-disciplinary team rehabilitation plan
4	Discharge plan prior to patient separation
5	Functional gain achieved by rehabilitation program
6	Destination after discharge from a rehabilitation program



Job satisfaction



- Job satisfaction has been defined as the degree to which a person reports satisfaction with intrinsic and extrinsic features of the job (Warr et al., 1979).
- Job satisfaction is not only widely connected to teamwork (Moore et al., 2006, Baggs and Schmitt, 1997, Goni, 1999, Robertson and Finlay, 2007) but also a key measure of HRM efforts (West et al., 2006, Boselie et al., 2005, Purcell et al., 2003).
- The lack of job satisfaction among healthcare workers has been linked to absenteeism (Siu, 2002), burnout (Visser et al., 2003), turnover (Lu et al., 2002) and intention to leave (Estryn-Behar et al., 2007).
- To be evaluated using the Overall Job Satisfaction Scale (Warr et al. 1979).



Overall Job Satisfaction Scale items

(Warr et al. ,1979)

No	Item
1	Physical work conditions
2	Freedom to choose working methods
3	Fellow workers
4	Recognition for good work
5	Immediate manager
6	Amount of responsibility given
7	Rate of pay
8	Opportunity to use own abilities
9	Relations between management and staff
10	Future chance of promotion
11	Way the hospital is managed
12	Attention paid to own personal suggestions
13	Hours of work
14	Amount of variety in own job
15	Job security



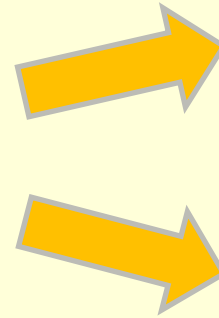
Overview of methodology

- Cross sectional study.
- Mixed method approach.
- Survey questionnaire.
- Document analysis.
- Focus groups and interviews.



Expected outcomes (i)

Human resource
planning and
evaluation



Individual team
characteristics

Structural team
characteristics

Healthcare staff work systems

Healthcare staff education,
training and development



Team functioning
characteristics



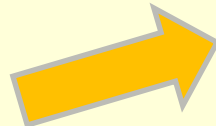
Expected outcomes (ii)

Healthcare staff
well-being and
satisfaction



Overall Job
Satisfaction

Team functioning
characteristics



Rehabilitation medicine
clinical indicator performance



Overall Job
Satisfaction



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Research plan

- To obtain ethics approval and commence data collection (2009/2010)
- Data analysis and write up (2010/2011)



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Questions?





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Contact details:

David Pereira

djpereira@student.unsw.edu.au

Ph: (02) 9385 3434

M: 0414 956 831

PhD Candidate

Centre for Clinical Governance Research in Health

Australian Institute of Health Innovation

University of New South Wales



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Thank you!