

Collectively Intelligent Teams

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Disclosures

None



Outline

- Introduction
- Why Should I Care?
- Evidence for Collective Intelligence
- Comparison to Similar Models
- Application in UAB Department of Anesthesiology and Perioperative Medicine
- Conclusion/Questions



Introduction

- Medical School- UAB 2004
- Residency- UT Knoxville 2008
- Brookwood/Anesthesia Services of Birmingham, P.C. 2008-2018
- President- Anesthesia Services of Birmingham, P.C. 2014-2018
- Southern Anesthesia Management, 2018-2019
- UAB Department of Anesthesiology and Perioperative Medicine, May 2019
- Samford MBA- 2015-Spring 2020



"The sum total of medical knowledge is now so great and wide-spreading that it would be futile for one man to attempt to acquire...a good working knowledge of any large part of the whole. The very necessities of the case are driving practitioners into cooperation.
The best interest of the patient is the only interest to be considered, and in order that the sick may have the benefit of advancing knowledge,

union of forces is necessary."

~William James Mayo, MD, June 15, 1910



- Increasing reliance on teams from a variety of specialties to care for patients
- Increased incidence of complexity and specialization of care
- Increasing comorbidities/incidence of chronic disease
- Initiatives for safer working hours
- Our healthcare system is not as safe, effective, efficient as it should be
- We harm patients every day
- Ongoing "scope of practice" battles across the nation



According to the Institute for Healthcare Improvement, there is an average of **24 handoffs** per inpatient admission.



Teamwork failures (failures in communication) account for up to 80% of serious medical errors

-Joint Commission. Sentinel event data: root causes by event type 2004-2015. <u>www.jointcommission.org</u>

Top 3 identified root causes for sentinel events- Human factors, leadership, and communication

Joint Commission. Sentinel event statistics released for 2015.
 www.info.jcrinc.com



Medical error- the third leading cause of death in the US. Makary, MA, Daniel. M. (2016). <u>BMJ</u>. 353;i2139.

Teamwork results in better patient care and outcomes

- Horak, B.J. et al. (2004) *Journal of Healthcare Quality*. 26(2), 6-13.
 - Teambuilding, behavioral ground rules between nursing and house staff
- Gitell, J.H. et al. (2000) <u>Medical Care</u>. 38(8), 807-819.
 - Relational coordination, mutual respect- impact on pain scores, LOS, quality of care



Team-building is one of the most useful organizational interventions to improve morale and productivity in the workplace and to ensure the **mental and physical health of employees**.

 Guzzo RA, Shea GP. Group performance and intergroup relations. In: Dunnette MD, Hough LM, eds. *Handbook of Industrial and Organizational Psychology*. Palo Alto, CA: Consulting Psychologists Press; 1992:269-313.

Residents in emergency medicine who **view their work groups as cohesive** appeared **more satisfied** with their jobs and **less stressed** than those who experienced less group cohesiveness.

-Heyworth J, Witley TW, Allison EJ, Revicki DA. Predictors of satisfaction among SHOs during accident and emergency medicine training. *Arch Emerg Med*. 1993;10:279-288.



Members of work groups characterized by **positive teamwork** evidenced enhanced coping, **more job satisfaction**, less strain, and **improved scores of measures of mental health.**

Carter AJ, West MA. Sharing the burden: Teamwork in health care settings. In: Firth-Cozens J, Payne R, eds. Stress in Health Professionals: Psycological and Organisational Causes and Interventions. New York, NY: John Wiley and Sons; 1999;191-202.

One specific product is a **more cheerful nursing staff**, one of the factors that correlates with **patient satisfaction**.

 Murphy LR. Organisational interventions to reduce stress in health care professionals. In: Firth-Cozens J, Payne R, eds. Stress in Health Professionals: Psycological and Organisational Causes and Interventions. New York, NY: John Wiley and Sons; 1999;149-162.



Teams offer the promise to improve clinical care because they can aggregate, modify, combine, and apply a **greater amount and variety of knowledge** in order to make decisions, solve problems, generate ideas, and execute tasks more effectively and efficiently than any individual working alone.

Larson, J.R. (2010). In Search of Synergy in Small Group Performance.
 Psychology Press, New York, NY.

Synergy is real, but it is difficult



Anita Woolley-Associate Professor of Organizational Behavior and Theory, Tepper School of Business, Carnegie Mellon University





Woolley, A.W. et al. (2010). Science. Vol. 330; 686-688.

- Psychologists have repeatedly shown that a single statistical factorgeneral intelligence (g) or IQ- emerges from the correlations among people's performance on a wide variety of cognitive tasks and how that predicts performance on future tasks
- No one has systematically examined whether a similar kind of "collective intelligence" (c) exists for groups of people
- Hypothesis: groups, like individuals, have characteristic levels of intelligence (c) which can be measured and used to predict the group's performance on a wide variety of future tasks



- 2 studies, 699 people, working in groups of 2 to 5
- Collective intelligence is the inference drawn when the ability of a group to perform one task is correlated with that group's ability to perform a wide range of other tasks
- Specifically, determine whether the collective intelligence of the group as a whole has predictive power above and beyond what can be explained by knowing the abilities of the individual group members
- Collective intelligence is a property of the group itself, not just the individuals in it



- Individuals completed tasks working alone- individual intelligence was a significant predictor of performance on the task (r=0.33, P=0.009)
- When the same task was performed by groups, the average individual intelligence of the group members was NOT a significant predictor of group performance (r=0.18, ns)
- When both individual intelligence and collective intelligence (*c*) are used to predict group performance, *c* is a significant predictor (β=0.36, P=0.0001), but average group member intelligence (β=0.05, ns) and maximum member intelligence (β=0.12, ns) are *NOT*





Study 1: Video Game

Study 2: Architectural Design



If SMART TEAMS are not simply teams of smart people, what leads to a collectively intelligent team?????

Cohesion, motivation and satisfaction did not

3 factors significantly correlated with "c"

- Positively correlated with average <u>social sensitivity</u>- measured by "Reading the Mind in the Eyes"
- Negatively correlated with <u>variance in speaking turns</u>- measured by sociometric badges
- Positively correlated with number of <u>females</u> in the group



Reading the Mind in the Eyes





The Big 3

 Social perceptiveness: ability to infer others' mental states, such as beliefs or feelings, based on social cues. The average social perceptiveness of team members is predictive of "c"

 Greater amounts of participation and more equal participation are associated with higher "c"

Females- generally more socially perceptive



Gender Differences in Emotional Intelligence



Conversational Turn Taking/Speaking up

- Likelihood of speaking up requires psychological safety
- "Sense of confidence that the team will not embarrass, reject, or punish someone for speaking up"
 - Edmondson, A.C. (1999). Psychological Safety and Learning Behavior in Work Teams. Admin Psy Q. 44(2):354.



Speaking up

- Lack of psychological safety often from being in "lower status roles or professions" can lead team members to avoid speaking up even when they know they have something to contribute.
- Leader inclusiveness predicts psychological safety
- Psychological safety predicts engagement in quality improvement work
 - Nembhard, I.M, Edmondson, A.C. (2006). Making it safe: The effects of leader inclusiveness and professional status on psychological safety and improvement efforts in healthcare teams. J Organ Behav. 27(7). 941-956



Stop the line

Jidoka- automation with a human touch Work stops immediately when an error occurs









Toyoda Weft-Break Auto Stop

Sakichi Toyoda



*Also invented warp-break auto stop





Toyota Production System



Transforming Health Care

Charles Kenney

Virginia Mason Medical Center's

Pursuit of the Perfect

Patient Experience

© 2009 Virginia Mason Medical Center



Leadership attributes that promote psychological safety

- Eliciting information from other team members- explicitly asking for contradicting viewpoints or un-discussed information *paradox mindset*
- Showing appreciation for members' contributions
- Providing constructive responses/feedback
- Researchers have consistently found that when members engage in inclusive behavior, other team members feel more psychologically safe and are more likely to speak up about relevant information
 - Edmondson, A.C. (2003). Speaking up in the operating room: how team leaders promote learning in interdisciplinary action teams. J Manage Stud. 40(6). 1419-1452.



"The currency of safety is information"- Ivan Pupulidy

- Learning environment- trust, sharing, flow of information
- Judgmental environment- pain, distrust, silence
- "Anything we do to degrade our ability to gather information affects the safety of the system"





What happens when we don't speak up

Korean Air Flight 801- August 6, 1997. 228 deaths. CFIT- Controlled Flight Into Terrain "Airport not in sight"- numerous times, minutes before impact "Let's make a missed approach"- 5 seconds before impact







- Amy Edmondson- Novartis Professor of Leadership and Management, Harvard Business School.
- Fast paced environments, shifting mix of projects, shifting team of partners







Estance Bien En El Refugio 10333





- In contrast to stable teams, teaming involves fast paced environments where people work on a shifting mix of projects with a shifting team of partners.
- Teaming is about identifying essential collaborators and quickly getting up to speed on what they know so you can work together to get things done.
- This more flexible teamwork is on the rise because work is increasingly complex and interdependent, and the time between an issue arising and when it must be resolved is shrinking fast



Characteristics of a teaming culture

Edmondson, AC. (2013) The Three Pillars of a Teaming Culture. Harvard Business Review.

- Curiosity- drives people to find out what others know, what they bring to the table, and what they can add.
- Passion- fuels enthusiasm and effort, makes people care enough to go all out.
- Empathy- the ability to see another's perspective, which is critical to effective collaboration under pressure
- Willing to take risks to learn fast- FAIL FAST
- Humble in the face of the challenge ahead- situational humility



Situational Humility

"It's hard to learn if you already know. *We are wired to think we know*. When teaming works you can be sure that some leaders had been crystal clear that they didn't have the answers."

"It's hard to speak up, to ask for help, or offer an idea that might be a stupid idea if you don't know people very well. **Situational humility**, when combined with **curiosity**, creates a sense of **psychological stability** that allows you to take risks with strangers."

Amy Edmondson



Simon Sinek- Trusting Teams

LEADERSHIP IS NOT- how can I get the most out of my people?

LEADERSHIP IS- how can I create an environment where my people can work at their natural best?

an environment where people aren't afraid to raise their hands and say "I made a mistake", "I need help, I don't know what I'm doing", "I'm having trouble at home and it's affecting my work", "I'm scared".

no fear of humiliation, retribution, or firing

•expectation that bosses and colleagues will rush to your aid




Trusting Teams

"If you DO NOT have trusting teams, what you DO have is a group of people who show up to work every single day LYING, HIDING, and FAKING."

Simon Sinek-The Infinite Game





Mutual Learning vs Unilateral Control Mindset

UNILATERAL CONTROL

Values

- Be right
- Win, don't lose
- Minimize expressions of negative feelings
- Act rational

Assumptions

- I understand the situation; those who disagree don't
- I am right; those who disagree are wrong
- I have pure motives; those who disagree have questionable motives
- My feelings and behaviour are justified
- I am not contributing to the problem





Mutual Learning vs Unilateral Control Mindset

Mutual Learning Model*

Core Values

- Transparency
- Curiosity
- Accountability
- Informed choice
- Compassion

Assumptions

- I have some information, others have other information
- Each of us may see things the others do not
- Differences are
 opportunities for learning
- People may disagree with me and have pure motives

Strategies (Ground Rules)

- State views and ask genuine questions
- Share all relevant information
- Use specific examples and agree on what important words mean
- Explain reasoning and intent
 - Test assumptions and inferences
 - Focus on interests not positions
 - Jointly design the next steps
 - Discuss undiscussable issues
- Use a decision-making rule that generates the level of commitment needed

Results

- Increase learning and understanding, reduce unproductive conflict and defensiveness
- Increase trust
- Help people make better decisions and stick to them
- Decrease time to implement decisions
- Improve working relationships
- Increased quality of work life – group member satisfaction



* Based on research of Argyris and work of Roger Schwarz



Team of Teams

"Today's rapidly changing world, marked by increased speed and dense interdependencies, means that organizations everywhere are now facing dizzying challenges, from global terrorism to health epidemics to supply chain interruption to game-changing technologies. These issues can be solved only by creating sustained organizational adaptability through the establishment of a *team of teams*."

"Harvard Business School teams expert **Amy Edmondson** explains 'great teams consist of individuals who have learned to *trust* each other...**They have discovered each others strengths and weaknesses, enabling them to play as a coordinated whole**."

US Army General (retired) Stanley McChrystal





Emotional Intelligence

Capability of individuals to recognize their own emotions and those of others, discern between different feelings and label them appropriately, use emotional information to guide thinking and behavior, and manage emotions to adapt to environments.

Daniel Goleman- El accounts for 67% of the abilities deemed necessary for superior performance in leaders, and mattered twice as much as technical expertise or IQ.

Goleman, D. (1998). Working with Emotional Intelligence. New York, NY. Bantam Books.





Emotional Intelligence





Knowledge that will change your world

with Daniel Goleman & Hanuman Goleman

El & Beyond

INTELLIGENCE 17, 433-442 (1993)

EDITORIAL

The Intelligence of Emotional Intelligence

JOHN D. MAYER University of New Hampshire

> PETER SALOVEY Yale University

Emotional intelligence is a type of social intelligence that involves the ability to monitor one's own and others' emotions, to discriminate among them, and to use the information to guide one's thinking and actions (Salovey & Mayer, 1990). We discuss (a) whether intelligence is an appropriate metaphor for the construct, and (b) the abilities and mechanisms that may underlie emotional intelligence.

Emotional intelligence is a type of social intelligence that involves the ability to monitor one's own and others' emotions, to discriminate among them, and to use the information to guide one's thinking and actions (Salovey & Mayer, 1990). The scope of emotional intelligence includes the verbal and nonverbal appraisal and expression of emotion, the regulation of emotion in the self and others, and the utilization of emotional content in problem solving.

The emotional intelligence framework organizes the existing individualdifferences literature on the capacity to process and adapt to affective information. Many intellectual problems contain emotional information that must be processed; this processing may proceed differently than the processing of nonemotional information. Emotional intelligence could have been labeled "emo-

"' we chose intelligence in order to link our framework to a telligence. Our concept overlaps with Gardner's (1983) nce":

rk here is access to one's own feeling life—one's range of capacity instantly to effect discriminations among these to label them, to ennesh them in symbolic codes, to draw of understanding and guiding one's behavior. In its most personal intelligence amounts to little more than the capac-

> Peter Fernald, who directed their attention to materials on emotion

as for reprints should be sent to John D. Mayer, Department of Psyty of New Hampshire, Durham, NH 03824, or Peter Salovey, Departrersity, Box 11A Yale Station, New Haven, CT 06520-7447.

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Emotional Intelligence

- **Primary traits**
- Self awareness
- Self regulation
- Social skill
- Empathy

The 18 El Competencies in 4 Domains		
	SELF-AWARENESS	SOCIAL AWARENESS
	 Emotional self-awareness Accurate self-assessment Self-confidence 	 Empathy Organizational awareness Service orientation
	SELF-MANAGEMENT	RELATIONSHIP MANAGEMENT
	 Emotional self-control Transparency Adaptability Achievement Initiative Optimism 	 Developing others Inspirational leadership Influence Change catalyst Conflict management Teamwork and collaboration
	optimistry	

Source: Goleman D, Boyatzis RE, McKee A. Primal Leadership: Learning to Lead with Emotional Intelligence. Harvard Business Press; 2004

NEJM Catalyst (catalyst.nejm.org) © Massachusetts Medical Society



Anesthesia Care Team Optimization Committee

- Facilitated discussions between MDs and CRNAs
- Early sessions- listening only
- Discovered common goals, understood different perspectives
- Working together to redefine future state of UAB Anesthesia Care Team built upon common mission, vision, and core values



Leadership Development Office

LABMEDICINE

Leadership Development Office Better Leadership. Better Outcomes.



TRANSITION TO PRACTICE

ANESTHESIOLOGY & PERIOPERATIVE MEDICINE



The University of Alabama at Birmingham



Transition to Practice Curriculum

- Quarterly evening sessions beginning 9/2020
- Needs Assessment- Outgoing Resident Interviews, IRB Approval
- Future TTP Session Topics
 - Business Topics
 - Choosing the Right Job
 - Malpractice Insurance
 - Billing and Compliance
 - Healthcare and Contract Law
 - Personal Finance



Knowledge that will change your world



ANESTHESIOLOGY & PERIOPERATIVE MEDICINE

Transition to Practice Curriculum

- Future TTP session topics
 - Social Emotional Learning topics
 - Emotional Intelligence
 - Life and Personal Strategy
 - Physician Burnout, Addiction, Suicide, Wellness
 - Conflict Resolution
 - Leadership and Teamwork



Knowledge that will change your world



ANESTHESIOLOGY & PERIOPERATIVE MEDICINE

Transition to Practice Curriculum

All residents and fellows are invited to

LEADERSHIP & TEAMWORK Inaugural Session of the Transition to Practice Series

Virtual Meeting Wednesday, September 16th 4:30-6 P.M.

Presented by Drs. Matthew Sherrer, Dan E. Berkowitz, Juhan Paiste and David Miller

Email velison1@uabmc.edu for the Zoom link.

DEPARTMENT OF ANESTHESIOLOGY AND PERIOPERATIVE MEDICINE

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Knowledge that will change your world

All residents and fellows are invited to

The Second Session of the Transition to Practice Series

Virtual Meeting Wednesday, December 2, 2020 4:30-6 P.M.

"Personal Finance" with Patrick Morgan, CFP and Senior Vice President Morgan Stanley

Email velison1@uabmc.edu for the Zoom link.

DEPARTMENT OF ANESTHESIOLOGY AND PERIOPERATIVE MEDICINE

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All residents and fellows are invited to

The Third Session of the Transition to Practice Series

> Virtual Meeting Wednesday, March 10th 4:30-6 P.M.

"Emotional Intelligence" featuring Elizabeth Duggan, M.D., and Matthew Sherrer, M.D.

Please contact Victoria Elison for the Zoom link.

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Wrapping up

- Unilateral control isn't the only form of leadership
- Smart teams aren't simply collections of smart people on a team
- Work on social sensitivity, empathy- seek first to understand...
- Encourage speaking up by creating psychological safety
- Elicit ideas, show appreciation, provide constructive feedback
- Try to understand others' views- "I could be wrong"
- Be suspicious of any plan that involves omitting a group altogether-
 - WE is greater than ME!!!



We can see things completely differently....and both be RIGHT

- "Gestalt switch"
- Are perceptions cognitively impenetrable?????





Thank you

"The formation of ideas is shaped more by the iterative interplay within the group than by an individual tossing in a wholly original concept. The sparks come from ideas rubbing against each other rather than as bolts out of the blue."

Isaacson, W. (2014). *The Innovators: How a group of hackers, geniuses, and geeks created the digital revolution.* Simon and Schuster, US.

Questions?

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