Course Objectives

Effective Team Building

- Define characteristics of effective teams.
- Identify the five stages of team development.
- Examine the critical components required for a high performance team.
- Devise an action plan for building an effective team.
- Explain the benefits of developing and maintaining an effective team.
Instructions: Please review the following list of descriptors, circling those that accurately describe you. Then find other participants NOT at your table and ask them to initial the items that pertain to them. Gather at least 5 sets of initials.

___________ I have taken a training on teamwork before.

___________ I have been a supervisor for more than one year.

___________ I can identify three different types of teams of which I’m a member—anywhere outside work!

___________ I prefer working in a team as much as possible.

___________ I can think of more benefits than challenges to teamwork in child welfare.

___________ I believe that whoever is in charge of the team should just tell us how to proceed.

___________ I am pretty good at solving complex problems involving more than 25 people at one time.

___________ I have heard about “forming-storming-norming & performing” as a description of team development.

___________ I get bored in teams when there isn’t a need for me as the leader to take charge.

___________ I prefer when a team’s leader can serve as a consultant to the team.

___________ I can list four keys to effective teamwork.

___________ I understand the elements required for team problem-solving.

___________ I receive unsolicited applause from my colleagues at a satisfactory frequency.
Effective Team Building

? What efforts have you made to team build with your team?

? In what ways is your team functioning well as a team?

? In what ways does your team need to function better as a team?
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Five Stages of Team Development

Stage One: Forming (Tentative)
Stage Two: Storming (Emerging)
Stage Three: Norming (Advanced)
Stage Four: Performing (Mature)
Stage Five: Adjourning

Forming/Tentative (Politeness and Pretending)

- During this stage, the leader directs.
- Individual roles are unclear.
- Members figuring out "how do I fit in?"
- Trust level is low and not much sharing is going on.
- Members pretend to agree with the leader on all matters.

Storming/Emerging (Chaos)

- During this stage, the leader coaches.
- Members vie for influence.
- Confusion about roles and boundaries.
- Sub-groups form as power coalitions or support.
- Unresolved conflicts arise.
Notes

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Norming/Advanced (Discarding and Redefining)
- During this stage, the leader facilitates and enables.
- Members become more comfortable with one another.
- Conflicts from storming stage resolved.
- Members speak more freely.
- Group begins to feel united and cohesive.

Performing/Mature (Resolution)
- During this stage, the leader delegates and oversees.
- Norms become strong and binding.
- Individually and collectively group is productive and able to resolve disputes.
- New member may upset balance.
- Performance may lag due to burnout.

Adjourning (Closure)
- During this stage, the leader recognizes accomplishments.
- Marks the end of a team.
- May result in breakdown of group skills.
- Conflict may increase.
- Separating is difficult for members.
- Evaluation of performance.
Terri, Anthony, and Tia

Mother: Terri 30 years old African-American
Father of last 3 children: Anthony, 32 years old African-American
Father of the first 3 children: Michael 35 years old African-American
Youngest child: Tia, one month old, in specialized foster care due to her medical problems
Other children: 5 children ranging in ages from 2 years to 12 years. They are now living with their parental grandmother (Anthony’s mother)
Paternal Grandmother: Pat (Anthony’s mother)
Foster Parents of Tia (medically fragile home): Gwendolyn and Wayne Franks: Caucasian

History:
Terri has been in residential drug treatment for one month. Tia was born one month ago and tested to have cocaine in her system. Terri was involved with crack cocaine and also drank alcohol. Terri admits her fault in not stopping her drug usage while she was pregnant. She says she was always able to stop her drug use before the birth of her other children. This time she just could not stop. She was in drug treatment once before “but it did not help her.”

The family was referred for services by the hospital staff as they were concerned that Tia’s medical condition was severe and Terri did not seem to understand the special needs of a baby who has pre-natal drug exposure and who has a heart condition. Terri told the ER worker that she had successfully raised the other children so she did not think it should be a problem for her to take care of Tia. Anthony, the doctor and the DCFS worker were able to convince Terri to enter a residential drug treatment program. Tia was placed in foster care due to the pre-natal drug exposure and her medical needs. The father, Anthony and his family were not able to care for a medically fragile child. There were no maternal relatives who were identified at the time of placement. Terri did not provide information on Michael or his family. The family plan is for Tia to return to the family as soon as Terri completes her drug treatment and can take care of Tia and her siblings. The worker did a review of the condition of the 5 older siblings and found no indications of abuse or neglect.

Drug addiction is part of Terri’s life. Her mother and grandmother were addicted and died from their addiction. Terri was in foster care as a child due to her mother’s problem. She ran away from foster care at 17 and met Michael. They have never married but they were together for years. Seven years ago she left Michael and moved in with Anthony. Terri has been with him since then and he is the father of her last three children.

Tia was born with a heart defect that required surgery shortly after her birth. She continues to need extensive medical care and is considered medically fragile. The doctors state that Terri’s drug addiction did not cause Tia’s medical problems but did make it hard to treat Tia until she completed her drug withdrawal. Tia visits with Terri, her siblings and Anthony once a week at
the residential program. The visits are supervised. Terri has always been appropriate with Tia during the visits. The treatment staff report that Terri is a good parent with all her children. Tia has had frequent medical emergencies. The older children can move into Terri’s residential drug treatment program. They are on the waiting list but the program does not have enough slots available for this large number of children. The program will NOT be able to have Tia placed in the facility due to her need for extensive in-home medical care.

Anthony has been part of Tia’s visits. He has been appropriate with all the children during his visits. He is working and did not feel he could care for 5 children by himself so he agreed for them to move into his mother’s home. This was done on a voluntary agreement. The grandmother said she could not handle 6 children especially as Tia would need extensive in-home medical treatment and needs to go to medical appointments several times a week. But she could handle the five older children if Anthony helps by coming over after work. There is no involvement by DCFS in regards to these older children.

The worker and family could not find a family resource that was willing and able to take care of Tia. A dependency petition was filed on Tia. Anthony and Terri were upset that Tia was placed with strangers. They both want the family to be together as soon as possible. Anthony says he does not have any drug problems and there is no evidence that he is addicted. There is no known history of Anthony abusing any children. The five older children have shown no signs of abuse or neglect. The three older children attend the local public grade school and the teachers report that they are doing fine academically. The teachers report that all the children appear to be connected with both Terri and Anthony. Anthony is often the parent who responds to the teachers’ notes or phone calls.
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**Team Communication**

Modes of Communication
- Communication modes available include:
  - Written
  - Spoken
  - Visual
  - Electronic
- Select the best mix to get the message across

Barriers to Communication
- Barriers to effective communication include:
  - Use of jargon
  - Poor listening habits
  - Prejudice and personal bias
  - Complexity of the message
  - Inappropriate media used
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Other barriers may be:
- Perceptions about the sender
- Accuracy of information
- Timing of the communication
- Ignoring what the members do not agree with
- Communication overload

Break Down Barriers
- Ways to reduce or remove barriers to effective communication:
  - Excellent listening habits
  - Appropriateness of the channel
  - Quality of the information
  - Use of simple and direct language
  - Development and use of a feedback system
How Well Does Your Team Communicate?

Based on what we’ve just been discussing, evaluate the communication processes at work on your team. Where is your team on the continuum—defensive, respectful, or collaborative?

Can you identify any barriers to communication that exist on your team? What can you do to begin to break down these barriers?
Effective Team Behavior

- Effective Team behavior has three main aspects:
  - Achieving the team tasks/objectives
  - Meeting the needs and goals of the individuals involved
  - Enhancing morale and harmony in the team

Negative Team Behavior

- Negative behaviors that can damage the functionality of a team:
  - Point scoring
  - Non-constructive criticism
  - Sulking and avoidance
  - Defending as opposed to listening
  - Aggression or over-assertiveness
  - Formation of cliques

Seven Keys to Effective Teamwork

- Clearly stated objective
- Small successes reinforce
- Diverse objectives, common purpose
- Common goal benefits all
- Mutually supportive
- Adversity strengthens
- Recognize real & symbolic needs
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Systematic Approach to Teambuilding

- Scope & Expectations
- Briefing and Guiding
- Performing the Task
- Monitoring & Reviewing

Benefits of a Systematic Approach

- The benefits of a systematic approach to teambuilding are:
  - Consistency of the team-based processes
  - Learning from and building on past experiences
  - Teamwork is seen as a normal business process

Scope and Expectations

- Team members need to be clear on:
  - Exactly what is expected of them
  - What they must achieve
  - The constraints under which they must work
  - The level of decision making that they have
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Brief and Guide
This involves:
- Communicating the purpose of the team
- Outlining the resources available to the team
- Listening to and answering questions from the team
- Agreeing how and by when the tasks are to be completed
- Explaining how progress will be monitored

Performing Task
Once the first two steps have been taken, then the team can set about performing the tasks required to meet the set objectives.

Provided that the resources have been allocated and the purpose is clearly defined the team should be able to proceed.

Monitor and Review
At this stage, issues such as the following may arise:
- Ensuring that the original brief was understood
- Provision of any additional guidance
- Revision of resource and time allocations
- Provide feedback on progress

Team Problem-Solving Summary
- Communication
- Relationship
- Leadership
- Problem Identification
- Mutual Respect
- Forward Momentum
- Plan of Action
- Follow-through
- Direct Feedback

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My Teambuilding Action Plan

1.

2.

3.

4.

5.
Teambuilding Resources

Garner, Howard


Zoglio, Suzanne Willis

*Teams at Work: Seven Keys to Success*