Curriculum Development Centers Program

Awardee of The Office of the National Coordinator for Health Information Technology

HEALTH IT WORKFORCE CURRICULUM
COMPONENT BLUEPRINT
Version 2.0/Spring 2011

Component Number: 17
Component Name: Working in Teams

Component Description (from FOA): An experiential course that helps trainees become "team players" by understanding their roles, the importance of communication, and group cohesion.

Assigned Institution: Johns Hopkins University
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Workforce Roles: Implementation Managers

Component Objectives:
At the completion of this component, the student will be able to:
1. Establish and monitor ground rules, or rules of engagement, that serve as behavioral guidelines for members of teams involved in HIT.
2. Develop an HIT action plan that can be easily adapted to changing situations, environments, and goals across a variety of health and healthcare settings.
3. Communicate a clearly articulated position in writing and speech.
4. Incorporate diversity in values, critical thinking, and judgments that amplifies the best of individual performance toward the HIT team mission.
5. Provide leadership for continuous assessment and learning on practices, processes, and outcomes of the HIT team mission.
   Develop a sustaining framework that maximizes the integrated power of teams while recognizing excellence in individual performance of various stakeholders involved in HIT (patients, families, communities, nation, etc.).

Component Units with Objectives and Topics

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Unit 1: Health IT Teams: Examples and Characteristics
Description: This unit is an introductory unit designed to highlight different types of health information technology teams and the purpose and functions of its different members. Characteristics of effective teamwork will also be discussed with emphasis on the organizational structure, individual contributions, and team processes. Why teams are valued for their collaborative efforts and teamwork will be outlined in this component. Activities for the learner include a virtual hospital tour that will facilitate the learner to explore different areas where HIT teams may be used, to interview a member of a HIT team and explore their job, purpose, skills, and contributions made to the team in addition to serving as a HIT team member who needs to select HIT team members to build an effective team for the work outlined in the case.

Objectives:

a. Describe the characteristics of an effective team and work group.
b. Describe and differentiate roles of IT health care professionals in teams.
c. Describe the value of teams and the importance of collaboration for the HIT professional in teams.

Topics:

1.1 - Introduction of Teams and Teamwork
1.2 - Teams as a Three-Stage System
1.3 - Characteristics of Effective Teamwork
1.4 - Components of Effective Teams
1.5 - Values of Teams and the Importance of Collaboration

Unit 2: Forming and Developing a Team for HIT
Description: This unit is designed to introduce students to the stages of team development: forming, storming, norming, and performing with the needs of the team identified at each stage. Common goals and purposes will be described in addition to information on key factors needed to maintain an effective team.

Objectives:

a. Describe stages of team development.
b. Identify the needs of the team at each described stage.
c. Establish and clarify common goals and purpose for a team.
d. Identify key characteristics of effective team members.
e. Identify key factors to maintain HIT teams.

Topics:

2.1 – Components of Effective Team Building
2.2 – Five Stages of Team Development
2.3 – Define Team Purpose

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Unit 3: Initial Tools for Teaming: Ground Rules & Action Plans for HIT Team
Description: This unit is designed to introduce learners to specific guidelines and rules that may be associated with teams and working on a HIT team. A realistic learning activity that focuses on the learner developing a team action plan will bring this unit to the forefront for application and understanding of the team plan. Two major communication strategies, active listening and assertive communication techniques will be included in this component and demonstrated through selected exercises in the module.

Objectives:
a. Create and describe SMART ground rules.
b. Develop and refine a team action plan.
c. Establish ground rules and an initial action plan for an HIT team.

Topics:
3.1– Setting team ground rules
3.2– Development of an Action Plan
3.3– Tools for Team

Unit 4: Individual Roles and Team Mission
Description: This unit is designed to describe individual roles and tasks of specific health IT team members. Roles will be divided and discussed that are identified by group roles that include those in task functions, maintenance functions, and individual functions. The roles and responsibilities will be defined for the team members' functions and aligned with the ground rules for working in teams. Clues to dysfunctional team members will be addressed along with discussion on how to avoid these behaviors and activities.

Objectives:
a. Clarify individual roles relative to the tasks and processes assigned to a team
b. Identify strengths and limitations relative to the tasks and process when developing a team
c. Define specific roles and responsibilities for the fulfillment of the team mission
d. Define expectations to support the team action plan

Topics:
4.1– Methods for Making Team Decisions
4.2– Types of Decision
4.3– Leadership Styles

Unit 5: Leveraging Integration Techniques: Power of HIT Team Dynamics
Description: This unit will discuss techniques for team members to problem solve within their teams so the team can be more effective. Activities will include how to conduct a

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SWOT analysis and mind maps within this component. Different activities described within the module will be differentiated between team or individual task. Activities will include a SWOT analysis of a case-based team and other experiential activities associated with team tasks and specific roles within the team.

Objectives:

a. Use problem-solving techniques (mind maps, SWOT analysis, swim lanes, fish bone diagrams) when developing teams.
b. Differentiate between a team task versus an individual task.
c. Demonstrate a practical understanding of dimensions of team formation and management.

Topics:

5.1 – Problem-solving Techniques
5.2 – Team task versus Individual Task

Unit 6: Articulating Feedback and Feedforward: Tracking Success and Change

Description: This unit will provide information to the learner on tools and techniques for giving and receiving feedback regarding HIT team performance. Elements introduced include the use of formative and summative evaluations, conflict management, and appropriate communication channels. Participants will evaluate individual behaviors regarding stated ground rules for functioning as a member of an HIT team. The difference between feedback and feedforward will be clarified as students will incorporate the seminal elements of positive change into their dealings with others. Tools for serving as a change agent and tracking success will also be practiced by students in team exercises. Based upon the belief that we can change the future but we cannot change the past, participants will practice the steps to both delivering and receiving feedforward information. Also based on the belief that it can be more productive to help people be right than to prove they are wrong, participants will be challenged with developing strategies for applying feedforward mechanisms within HIT team involvement.

Objectives:

a. Develop skills for clear communication and understanding of others
b. Provide appropriate feedback to others
c. Develop and deliver appropriate feedforward
d. Communicate in ways that help promote positive change for your team

Topics:

6.1 – Communication for Results
6.2 – Feedback and Feedforward

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Unit 7: **Leadership: All Members as Leaders – Leaderful Teams**
Description: This unit will challenge participants to critically evaluate elements that lead to success in the field of HIT. The changing role of leadership will be explored. Leadership has taken on new requirements as we have moved through the information and biotech ages into the conceptual age where the knowledge worker is being continually replaced by the conceptual leadership at every level in organizations. The expansive role of leadership that requires each team player to be prepared to "carry the torch" and lead others is a fundamental building block for HIT teams. Participants will investigate leadership behavior across HIT platforms, identify key leadership skills, and demonstrate personal abilities across those skill areas as related to HIT teams.

Objectives:

a. Develop and implement standards for shared leadership roles in complex, stressful, and often hierarchical health related environments.
b. Differentiate progression from self-awareness to self-leadership to team leadership.
c. Demonstrate collective, concurrent, collaborative, and compassionate activity.

Topics:

7.1 – Leadership Traits
7.2 – Leadership Types
7.3 – The 4 C's of Leadership

Unit 8: Sharing Resources and Information: Tools to Optimize Performance of HIT Teams
Description: This unit will equip participants with a working appreciation for tools and techniques that enable HIT teams to optimize performance both within their team and in collaboration with other teams, units, and organizations. Specific technologies and methods will be introduced and applied to HIT team settings. Participants will be provided an opportunity to use several of these tools and techniques as they simulate HIT team functions. Outdated views on how people share information will be highlighted. New frameworks in thinking regarding information access and decision making activities for successful HIT teams will be discussed. Meeting to share information will be discouraged as participants will become adept using some basic tools for collaboration. Meeting for purposes of clarifying options and making decisions will be encouraged along with applying tools and techniques to facilitate such meetings. Participants will select appropriate structural components to enable greater efficiencies of information sharing and decision making by HIT teams.

Objectives:

a. Plan skillful use of collaborative tools and techniques.
b. Develop a system to provide full transparency of key information related to actions of the HIT team.

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c. Design an information sharing structure that supports high performance and knowledge exchange.

Topics:
8.1 – Sharing Resources
8.2 – Tools for Interaction
8.3 – Tools for Collaborative Document Development

Unit 9: Expanding Value: Tools for Collaboration Across Time and Space in HIT-Related Activities
Description: This unit will provide information to the learner on global collaboration tools so HITS team members can communicate 24/7 and worldwide, if needed. There are no longer borders or barriers to interacting with other HIT personnel or others with the sophisticated technology used today. The learner will participate in a virtual scavenger hunt to discover tools needed for a HITS project assigned in this module. In addition, future tools, equipment, and devices to connect health IT all over the world will be highlighted. A paper on the future face of healthcare HITS teams and the collaborations worldwide will be discussed with activity time spent on creating what the future in health IT may be like 25 years from now.

Objectives:
a. Select appropriate communication tools available for global and diverse team collaboration.
b. Predict future tools that could be used in the healthcare arena to collaborate and connect health professionals.
c. Foresee the future face of the healthcare field where team collaboration and patient-centeredness is a fundamental practice.

Topics:
9.1 – Communication tools for global and diverse team collaboration
9.2 – Future tools used in healthcare arenas to collaborate and connect healthcare professionals
9.3 – Future face of the healthcare field and team collaboration

Unit 10: **Barriers to Success: Reading Early Warning Signs to HIT Team Failure**
Description: This unit prepares participants to recognize elements that lead to HIT team failures and provides several frameworks that can serve to maintain appropriate monitoring of more typical symptoms of team dysfunction. Elements of selfish behaviors, tool seduction, lack of confidence, arrogance, lone heroism, cowardice, and comfort will be examined along with appropriate responses to each. Effects such as common knowledge, in-group bias, false consensus, and transactive memory will be investigated along with proper mechanisms to alleviate negative consequences and mitigate further damage. Lessons will be gained by inspecting case histories of HIT

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teams involved in each of these elements. Participants will explore frameworks to heighten awareness and early diagnosis of symptoms that lead to HIT team failures.

Objectives:

a. Predict key signals to team failure, considering culture, hierarchy and other attributes common to the health environment.
b. Construct appropriate response mechanisms to address team dysfunction.
c. Practice consistent scanning for symptoms of potential team failure.

Topics:

10.1 – Team Dysfunction
10.2 – Organizational Structure and Culture
10.3 – Symptoms of Dysfunction
10.4 – Strategies to Manage Dysfunctional Teams

Unit 11: Positioning for High Performance Teaming: Challenges and Opportunities in the HIT Environment

Description: This unit provides participants an opportunity to gain insights into the criteria, processes, and structures that support the development of high performance for HIT teams. As Observations from various industries, sports, and military examples will be compared with HIT team environments. Participants will draw from personal experiences in developing criteria for providing the requisite structure to support high performance teaming.

Objectives:

a. Demonstrate a working knowledge of high performance.
b. Identify key criteria for high performance teaming.
c. Propose a team structure that enables high performance.

Topics:

11.1 – High Performance
11.2 – Nurturing a High Performance Team
11.3 – Sustaining a High Performance Team

Unit 12: Life Cycle of HIT Teams: Reforming and Repositioning Techniques

Description: This unit introduces participants to the natural stages in team development and the normative life cycles of teams. The process of handling change will be investigated as participants work through understanding the elements of immobilization, denial of change, incompetence, acceptance of reality, frustration, understanding, and integration. Participants will be introduced to techniques employed to structure HIT teams for specific purposes and repurposing teams for new tasks.

Objectives:

a. Classify the life cycle stages of a team.

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b. Apply strategies to move a team into the next formative stage.
c. Reposition a team for a new challenge.

Topics:

12.1 – Team Life Cycle

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