



Central Veterinary Clinic

A CASE STUDY ON TEAM DYNAMICS

C. Noelle Mackey | Capstone | January 1, 2016

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In an article with a unique perspective, former Blue Angels pilot, John Foley, indicated that the fighter jets flew a mere 36 inches apart from each other (Foley, 2013). The level of trust required for such a feat is beyond astounding (Foley, 2013). Foley insisted that the precision and trust within the Blue Angels fighter team can also be attained by businesses who are serious about cultivating a high performance team. In this paper, the author will discuss the dynamics of a high performance team, analyze the teamwork dynamic at Central Veterinary Clinic (CVC), and make recommendations for the cultivation of a high performance team. To begin, there must be an understanding of what a team is and what dynamic it possesses.

Team vs. Group

When discussing work teams as opposed to work groups, the dynamics of each need to be assessed to determine the appropriateness of terms. Research demonstrates that a *team* is a small number of individuals who work together for a common purpose and goal (Foley, 2013; Salas & Rosen, 2013; Welbourne, 2014; Hu & Liden, 2015). In contrast, groups tend to be less well-defined and much larger. In a business setting, a work group could be the accounts receivable clerks; whereas a work team could be the Intake Committee, who are members from various other groups, working together to decrease the number of accounts in arrears. The loss or addition of a group member does not have as great an impact on the group as the same loss or addition does on a team (Ning, Kirkman, & Porter, 2014). Team dynamics—especially the dynamics of a high performance team—require the support and focus of the entire team (Foley, 2013; Ning et al., 2014; Hu & Liden, 2015), as well as leadership support (Tost, Gino, & Larrick, 2013).

Structured teams afford an organization increased innovation and creativity (Welbourne, 2014). Each member brings his or her own talents and lived experiences to the dynamic, creating a scenario in which each individual has the opportunity to create something bigger than him or herself, as the result of collaboration (Ning et al., 2014; Hu & Liden, 2015). In the case of CVC, however, the team dynamic seems to have taken a negative turn. Tost et al. (2013) stated that power dynamics of team hierarchy can have a negative impact on team performance. Within CVC, there are *teams* of employees in that there are specialists who work with each other for the benefit of the clients involved; based on presented definitions, however, the author does not believe there is a true *team* within the organization. Salas and Rosen (2013) addressed the issue of teams within healthcare organizations, stating that work teams are effective, however implementation strategies and organizational conditions matter. Within CVC, there are so many organizational issues that need to be addressed, the dynamic of teams cannot even be considered. Since the author has provided a background for team versus group dynamics, she will now provide a more detailed analysis of the current teamwork dynamic at CVC.

Team Dynamic at CVC

According to the case study, there are no actual teams within CVC. The case study uses the term *team* to refer to a small group of people with similar skills. There is little to no communication

among the employees and each seems to act as an individual, rather than a member of focused group or even a team. Hu and Liden (2013) outlined several key functions of effective teams, including member motivation, while Foley (2013) insisted effective teams require trust, communication, and a drive for excellence.

Currently, the employees at CVC seem to lack motivation, communication, trust, and a drive for excellence. According to the case study, the underlying causes of the current state of affairs was the lack of leadership under Dr. Silverstein's tenure. The author also believes that there was a general lack of senior leadership, which is essential for managing a high performance team (Tost et al., 2013). The decline in morale that occurred under Dr. Silverstein, and Dr. Silverstein's alleged theft of medical supplies by all of the staff both contribute to the lack of communication and a climate of disrespect and distrust among the employees. The notion that the discontinuance of the Christmas party is the root cause of the animosity is not supported within the case study; and the literature does not indicate a single point in events such as these to be the root cause of a poor team dynamic. Rather, poor team dynamics develop as a result of poor leadership and implantation, as well as a poor organizational culture (Tost et al., 2013; Salas & Rosen, 2013; Hu & Liden, 2015). What the elimination of the Christmas party *does* do is provide a more tangible point of contention that brings out *neoracism* within a subset of the employees at CVC (Cortina et al., 2013).

Ning et al. (2014) offered two sets of behaviors within teams: Egoism and altruism. Egoism is the desire and goal of maximizing self-interest, while altruism is the cooperative behavior and attitude that benefit others (Ning et al., 2014). With the organizational climate deteriorating to one of seemingly selfish impulses, the employees demonstrate little to no *team* attitudes or behaviors. There is hope, however; Foley (2013) and Welbourne (2014) both offered suggestions for improving team work within an organization. Since the author has presented an analysis of the current state of affairs at CVC and presented definitions of teams, she will now present recommendations for CVC to improve their situation.

Recommendations

Foley (2013) described what causes the Blue Angels fighter jet team to be the high-precision, high-functioning team that it is. One of the key features of a high-performance team member is his or her desire to constantly improve (Foley, 2013). Foley (2013) provided a methodology for creating, maintaining, and sustaining a high functioning team. His methodology is called the Diamond Performance Framework (DPF), and it focuses on a center point, which reflects real-world conditions, making it dynamic and malleable (Foley, 2013). Since there are no true teams within the ranks of CVC, and because change requires leadership support (Salas & Rosen, 2013; Welbourne, 2014), the author recommends the Senior Leadership Team become the change they desire to see within the organization. In order to do this, they need to select a center point. Foley (2013) stated that the center point can be *tactical* or *strategic*, and there can be more than one. For the purposes of this study, the author recommends the Senior Leadership Team select the center point of *superior customer care and satisfaction*.

A high performing team has vision (Foley, 2013) and motivation to accomplish the goals set forth by the team (Hu & Liden, 2015). Ning et al. (2014) indicated that individual team members have a tendency to demonstrate high organizational citizenship behaviors and that a true *altruistic* team

will actively and collectively strive for the improvement of their team and organization. By beginning with the Senior Leadership Team, they will have the power to demonstrate their activeness within the organization, which will have an impact on the employees who may believe the leadership team is *out of touch* with their experiences, as a result of the debacle of Dr. Silverstein's abhorrent leadership (Hu & Liden, 2015). In the DPF model, *belief levels* are of critical importance (Foley, 2013). Foley indicated that humans, by nature, rise to their belief levels, or their expectations. If a person believes he or she cannot perform something at a higher level, they will not be able (Foley, 2013). If, however, the person raises the level of his or her belief, the performance level will follow suit, providing a clarity of vision (Foley, 2013). The Senior Leadership Team, therefore, must set realistic goals for themselves and the organization. The author recommends establishing the goal of servant-leadership for the Senior Leadership Team, as well as establishing a more *open-door* policy for staff members seeking to air grievances, in order to build rapport and trust among the staff.

Naturally, in order to implement goals, there needs to be an idea of how those goals will be achieved. Foley (2013) stated that the *focused preparation* aspect of his DPF model was not about planning, but rather, about getting focused on the task ahead and energizing the team and beyond in the performance and attainment of the goals. Salas and Rosen (2013) stated that measurement driven feedback is what drives improvement for teams. In the implementation of Foley's (2013) DPF model, it is imperative that the Senior Leadership Team encourage feedback from the other employees. Once the Senior Leadership Team *commits* to the goal set and understands what needs to happen in order to generate change within the organization, then it is time for them to act (Foley, 2013). Tost et al. (2013), stated that those who have recognized formal leadership positions tend to have more power over team dynamics. The members must be aware of their own feelings or perceptions of power, otherwise they may become more dominate and less collective (Tost et al., 2013). Hu and Liden (2015) spoke to the need of humility among team members, and the need for team cooperation within a prosocial motivation—or a motivation that promotes the good of the many over the good of the few.

The Senior Leadership Team meets too infrequently for a thorough evaluation of clinic effectiveness. The author, therefore, recommends a monthly meeting for this team to discuss their own team effectiveness, how they can improve themselves and the team, what the clinic's effectiveness is like, and the effectiveness of any teams they put together within the clinic. By constantly seeking to improve and soliciting honest feedback, the team has the potential to propel the clinic forward toward a more effective practice (Salas & Rosen, 2013; Welbourne, 2014; Hu & Liden, 2015).

Foley (2013) stated three characteristics of the Blue Angels team: they share a mind-set; create a culture of excellence, and transcend exceptions. From research for team dynamics and the individuals who comprise high-performance teams, the three characteristics of the Blue Angels team are also key characteristics of high performance team *members* (Ning et al., 2013; Welbourne, 2014; Hu & Liden, 2015). Obviously, team members who lack any of these would cause the team to perform less than optimally. As demonstrated within the CVC case study, the lack of leadership support and presence has created a void within the organization, leaving the employees feeling lost and alone. The lack of communication and the *neoracism* that comes from someone in a perceived position of power also contribute to the feelings of isolation and reinforce the egoism of *every man for himself*. There are a number of recommendations the author could make to help improve the conditions; however, she believes the best approach is to start with the top leadership, using

transformational leadership principles to effect change throughout the organization and create a positive energy to engage staff to become better (Foley, 2013; Tost et al., 2013; Welbourne, 2014).

Conclusion

The author provided recommendations for transforming the teamwork dynamic at CVC, analyzed the current team situation, and provided a working definition of *team* and what creates a high performance team. Foley's (2013) DPF model of team performance provides a quick overview of how teams should function, while Welbourne (2014) provided the framework for sustainability. Leadership needs to be involved with their high performance teams (Tost et al., 2013); therefore, if an organization lacks cohesion, the first team to make changes should be the leadership team. The author finds this case study open to many avenues of performance recommendations, but stresses the importance of diagnosing and addressing the underlying issues before making structural changes to team composition.

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