

## The Changing Structure of Work: Use of Work Teams

**John D. Kraft**

**Director, Assessment Services Division  
U.S. Office of Personnel Management  
Washington, D.C.**

**Abstract:** This session discussed the use of work teams. Whether we like it or not, teams are playing a major role in most work settings. This session discussed the development of self-directed teams, their training, integration, leadership, and evaluation. The very nature of the process-oriented work in clinical laboratories lends itself to using work teams. The claimed benefits of teams include more integration of skills; tapping of unknown member resources; more stimulation, energy, and emotional support; more sustained effort at team goals; greater member satisfaction; and higher motivation.

By definition, a work team is a cohesive unit of highly motivated, highly skilled and highly trained workers who supervise themselves with the encouragement and direction of a coach. Although the coach is usually a manager who is responsible for directing several teams, this person can be the team leader. During the early life of a team, the team leader is often picked by management; later, the team itself picks the team leader. The team leader is responsible for calling meetings, insuring that necessary paper work and critical data are completed and documented; however, he or she is not a supervisor and the team itself will work to resolve any conflicts. Members of the team enjoy the privileges of empowerment as well as challenges of continuous improvement. Quality can be assured by continuous feedback or using a team member as a quality control expert.

In establishing teams, several questions must be kept in mind: What will the organization look like one or two years from now? How can we meet competition and lead and manage our business as we continue to push for higher quality and productivity? In what ways will we need to reengineer and change our current processes, jobs and culture to support the future business of the laboratory? How can we meet the legal requirements for quality control when we are using teams?

The very nature of the process-oriented work in clinical laboratories lends itself to the use of work teams. Properly functioning work teams can increase productivity and reduce personnel costs. They also can be more responsive to organizational changes needed to meet customer needs than hierarchical organizations; i.e., where there is a first-line supervisor to which employees report and a second-level supervisor to which the first-line supervisor reports, etc. I will discuss the development of teams and

their training, integration, leadership, and evaluation. I am not recommending this approach and it is not for every clinical laboratory.

Whether we like it or not, teams are playing a major role in most work settings. They will play an even larger role in the future. As economic trends force companies to downsize and focus on speed and efficiency, there has been a fundamental shift in organizational structures. Many factors can be attributed to this change in

organizational design. These factors have pushed the evolution of organizational structures from a hierarchical design, with a manager, several supervisors, and employees reporting to the supervisors, to a matrix design of self-directed teams that report to the manager or to a management team. The first level supervisor does not exist. The manager serves as a coach to many teams and insures that they stay on track by meeting with each team once a week every one or two weeks.<sup>1</sup> One laboratory that has moved to a team approach is the Washington Hospital Center. This hospital laboratory has moved from 12 to 3 supervisors/managers for a staff of approximately 300 with substantial savings in personnel costs and increased operational efficiency.<sup>2</sup> Also, SmithKline Beecham is using a team approach in its many laboratories; it uses a network of local, regional and national quality control experts to help insure that quality is maintained.

Quality control may be a critical issue in self-directed teams that are engaged in highly precise and exact work where errors can result in great health, financial, or welfare risk. For example, in a medical laboratory, the quality control that was maintained by the first-line supervisor in a hierarchical organization is now maintained by the team itself in a matrix organization of self-directed teams. The result is that all team members must be highly trained, or a team member must take on the role of a quality control expert. If the latter is done, this must be communicated to all team members, and that person must have authority to insure quality control of all critical processes carried out by the team.

Many environmental and social factors have pushed the evolution of organizational structures. Three main principles impinge on

organizations: 1) technology, 2) growth of knowledge, and 3) globalization.<sup>3</sup> First, the increased technology available allows a company's internal and external barriers to be broken down. Computers and computer-based technology have changed the flow of information. Likewise, technology has allowed many laboratory tests to be automated. Second, this increase in information or knowledge, which often has been the source of power in organizations, now is at a worker's disposal. The third key to changing the organization is the globalization of business. Companies now must compete globally for customers. Using improved technology allows companies to operate at a frenzied pace. The benefits of teams can be summarized as follows: (1) For the organization, teams provide more productivity, lower personnel costs, and allow more responsive actions to be taken to meet customer needs. For the individual, teams provide for integrating skills, tapping all staff resources, more stimulation, energy and emotional support for staff members, more sustained effort at meeting team goals, and greater satisfaction with work.

### **Steps in Setting-up Work Teams.**

Research shows that the following steps should be taken to effectively introduce and establish work teams in an organization: (1) Secure top management support; (2) Assess the climate of the organization to determine if it is ready for teams; (3) Set up a planning committee to investigate the team approach, to visit sites where teams are working, and to study the organization and its needs; (4) Set up the organizational structure for teams; the individual teams, team leaders, and coaches; (5) Train staff to work in teams; and (6) Continuously evaluate the program to maximize opportunities for making

improvements.

Two key positions affect how teams operate: the team leader and the coach. The team leader calls meetings of the work group, keeps records of progress, coordinates training, and does other leader roles with the group. Usually when teams are introduced to an organization, the leader is appointed by management. After the team is functioning for some time (1½ to 2 years), the team itself picks its leaders or the leadership role is rotated among the members. The coach is usually a manager in the organization who is responsible for insuring that the team is staying on track. He/she usually directs several teams. The coach, however, can be the team leader. The members of the team enjoy the privileges of empowerment as well as challenges of continuous improvement. Quality can be assured by continuous feedback or the use of a team member as a quality control expert.

By definition, a work team is a cohesive unit of highly motivated, highly skilled and highly trained workers who supervise themselves with the encouragement and direction of a coach. Although there are several types of teams, two that we are most familiar with are: (1) Parallel teams which exist in parallel to or in addition to the established organizational structure; and (2) Project teams which are temporary, special-project groups of people who are brought together to complete a project. The work teams we are discussing here, however, are permanent structures that function as integral parts of an organizational structure to accomplish the work.

In establishing teams, several questions must be kept in mind: What will the organization look like one or two years from now? How can we meet competition and lead and manage our business as we continue

to push for higher quality and productivity? In what ways will we need to reengineer<sup>4,5</sup> and change our current processes, jobs and culture to support the future business of the laboratory? How can we meet the legal requirements for a clinical laboratory when we are using teams of people from different disciplines?

The management literature points out that for teams to succeed, the following must be true. First, trust between management and staff is an absolute requirement for successful teams. Actions of management and employees must reflect the belief that (1) people can be trusted to make important decisions about work activities and (2) that people can acquire the knowledge to make important decisions about managing of their work activities.

You can assess your readiness for moving to teams. You can develop your own survey, use those reported in management books on teams, or hire a consultant to do this assessment. The Environmental Protection Agency uses an effective survey for this purpose.<sup>6,7</sup> Also, the Organizational Assessment Survey (OAS) of the U.S. Office of Personnel Management is available for use.<sup>8</sup> It is recommended that the use of materials like the OAS should be done by trained organizational specialists. The survey can identify where the organization is not working well and identify the areas that need to be examined more carefully. This survey is in the public domain; comparison data are available from the U.S. Office of Personnel Management (OPM) for sharing, provided the survey users share their data with OPM.

### **Staff Performance Appraisals.**

An important issue is how to conduct performance appraisals on team members.

Since the team itself is more important than the individual workers, employees can be evaluated on the overall success of the team. Particularly outstanding contributions can be recognized by a plaque or monetary reward. Most research studies of teams suggest that individual awards be kept to a minimum and that team awards should be frequent and varied. Many think that the traditional performance appraisal should not be used for individuals in teams. The reason for this is that no one person is familiar with all of the activities of an individual employee who may be on two or more teams. One alternative method is to use what is called the 360° rating.<sup>9,10</sup> Usually this type of rating takes input from many sources, peers, subordinates, superiors, customers, etc. Although it is usually limited to identifying training and development needs, it can be used for performance appraisal. This rating is based on self, peer, and management input on the level of competency and task expertise the person shows and the need for training and development to improve this competency and task performance.

### **Program Evaluation**

It is important to evaluate the progress of an organization when it moves to teams. Because of the critical nature of clinical laboratories, a quality control and program evaluation effort is important. For this program, continuous and follow-up evaluations should be made. These should include error rates, costs, other outcomes, and training and development needs assessment. Several forms of evaluation can be used; for example, anonymous surveys of employees and management can be made. Likewise, surveys of customers should be conducted. A complaint or suggestion box and perhaps a telephone hot-line should be

established.

Because technology has increased the available information and allowed for easier, more rapid communication, an organization must structure itself in a manner that facilitates and utilizes its resources. The new organization has few upper management positions. The workforce is usually divided into teams; moreover, the members of teams usually work on more than one team. Information disseminates via the teams, computers, and telephones/facsimiles. No formalized chain of command or channels of communication may exist. Everything flows throughout the organization unimpeded; thus, the boundaries of old hierarchial organizations are broken down and flattened. Technology, growth of information, and globalization define the new organizations. Speed and efficiency are increased and service quality is enhanced.

Organizations will continue to flatten as companies strive to cut costs without sacrificing speed, efficiency, and, most importantly, product quality. Usually, teams go through developmental stages; it often takes 2 to 3 years for a team to mature so that it is functioning at its maximum efficiency. Each team member may be an expert in a different aspect of a process. A team, however, is usually established to carry out one or a few entire processes for a customer.

As a final note, if you are considering moving to a team approach in your laboratory, you should remember 4 things:(1) Teams are not a panacea for all problems. A traditional, hierarchial organization can and will run very effectively for most laboratories. (2) Your organization should not jump in and set up teams without careful planning. You should establish a planning committee. This committee should

have representatives from all of the disciplines in your laboratory and from management and staff, as well as union representatives, if you have a union. The team should make site visits to organizations where teams are functioning well. You should plan to have this committee work for a minimum of six months in planning. (3) You do not need to change to teams for all organizations within your laboratory. Some may not be ready to go to teams. This is OK. However, you must have top management support for teams or they will not work. (4) You must be willing to spend more time and money on training. To be maximally effective, team members must be well trained. Team leaders may need additional training.

### References

1. Beecker-Reems, ED. *Self-managed work teams in health care organizations*. American Hospital Publishing, Inc., American Hospital Association. Chicago. 1994.
2. Department of Pathology, Washington Hospital Center. *Team building workshop*. Washington, DC. 1995.
3. Wheeler, AR. *The changing structure of work: From hierarchical to flat and boundryless organizations*. U.S. Office of Personnel Management, Personnel Resources and Development Center. Washington, DC. 1995.
4. Hammer M and Champy J. *Reengineering the corporation*. Harper & Row, New York. 1993.
5. McNair CJ and Liebried KHJ. *Benchmarking: A tool for continuous improvement*. Oliver Wright Publications Inc. 1992.
6. Rodela E. *Are you ready for work teams?* Environmental Protection Agency. Teams Series 2. Washington DC. 1994.
7. Rodela E. *Implementing work teams*. Environmental Protection Agency. Teams Series 3. Washington DC. 1994.
8. U.S. Office of Personnel Management. *The organizational assessment survey*. U.S. Office of Personnel Management, Personnel Resources and Development Center. Washington, DC. 1994.
9. Kiefer T. *Laboratory technician & technologist rating form: Training and development evaluation*. U.S. Office of Personnel Management, Personnel Resources and Development Center. Washington, DC. 1995.
10. Kiefer T. *Laboratory supervisor & anager rating form: Training and development evaluation*. U.S. Office of Personnel Management, Personnel Resources and Development Center. Washington, DC. 1995.