The Impact of Teams of Leaders Concept on Large Scale, Community-led Public Health Operations

Candace Gibson, Ph.D., Center for Collaborative Command and Leadership, Western University, London, ON; Dag von Lubitz Ph.D., M.D.(Sc), Center for Collaborative Command and Leadership, Central Michigan University, Mt. Pleasant, MI

The Together We Can Initiative

In 2010, *County Health Rankings* published by the University of Wisconsin indicated that Arenac, Clare, Gladwin, Isabella, Osceola, and Roscommon counties scored among the "unhealthiest" in the state (*FIG.1*). In truth, the severity of many of the indicator health outcomes placed these counties at the level comparable to that seen in the Less Developed Countries of the world. In order to address this problem, Central Michigan District Health Department initiated the Together We Can (TWC). The *executive intent* of TWC focused on rapid, maximally efficient, and systematic reversal of the serious deficiencies through a *mission-centered effort* based on the novel principles of community and inter-organizational collaboration. The principal operational target of TWC were

- a. Access to Health Services; Healthy Eating & Active Living
- b. Sexual & Reproductive Health
- c. Maternal & Infant Health
- d. Substance Abuse
- e. Abusive, Violent & Controlling Behavior
- f. Environmental Health

Successful implementation of the activities necessary to achieve goals of the executive intent was contingent on the implementation and adherence to the Team of Leaders (ToL) concept.

The Teams of Leaders (ToL) Concept

The concept of Teams of Leaders (ToL) was developed by the US Army, to provide an approach to leadership in extremely challenging or complex environments. It has been converted to civilian applications by the Center for Collaborative Command and Leadership (CCCL) then extensively and successfully used both nationally and internationally in applications ranging from healthcare to business and emergency management. ToL uses the strengths of existing individual leaders, brings them together, and transforms them into fully collaborative, flexible, High Performing Leader Teams (HPLTs) whose agility and responses greatly exceed that of individual team members. Thus, as a guiding concept, ToL promotes the development of shared purpose and unity of effort across boundaries of departments, organizations, function, and culture. The High Performing Leader Teams (HPLTs) can interact and collaborate informally to foster the rapid growth of the most fundamental aspects of any mission: shared trust and confidence based on shared purpose and Actionable Understanding (FIG.2). The ensuing transformation of loosely associated, independently (and ineffectually) acting individuals into mission-focused teams, where personal or organizational agendas are subordinated to the goals and requirements of the mission (executive intent) and its success is the principal outcome of ToL-based interventions. At the organizational level, implementation of ToL increases task understanding, enhances 'mission' focus, and reduces inter-organizational friction and bureaucratic stagnation. The overall outcome is consistent output, maximized utility of effort, and focus on strategic rather than subordinate goals.

TWC and ToL

TWC-related ToL interventions consisted of two types of activities:

- a. Team Launches
- b. Leader Team Exercises (LTXs)

Team Launches were executed in 2011 and 2012. Typically, these are 2-day long events during which the essential theory of ToL is introduced, followed by a series of practical exercises introducing participants to the fundamentals of real-life ToL-based operations. Team Launches are conducted under the guidance of a Senior Mentor – the member of CCCL Executive Staff whose principal task is rapid conversion of a group of recognized yet largely disconnected community leaders into a cohesive, intensely collaborative High Performing Leader Team (HPLT). In the context of TWC, the Senior Mentor was also tasked with transiting the emergent HPLT into the Collaborative Command Team tasked with the development of TWC executive intent, mission definition, and the development of operational goals, milestones, team responsibilities and TWC communication platforms and rules of conduct. Thus, the purpose of Team Launches was to create an *operational framework* shared by the representatives of all participating counties and their communities. Out of 6 counties, two (Arenac and Osceola) declined to be bound by ToL principles of operations.

The purpose of LTXs is to both routinely train team members in the application of the relevant ToL procedures and in addressing the emergent operational requirements of individual teams. Initially, during the formative period, LTXs are conducted under the direction of a Senior Mentor. Once the procedural essence of ToL (i.e., sharing of knowledge and information, trust in mutual competence, communication, collaborative problem analysis, etc.) become the "second nature" of team, the frequency and subject of LTXs is subject to individual team operational needs. Within TWC, individual team LTXs were performed at approximately 60 day intervals. Concurrent with the operational progress of TWC, training LTXs rapidly substituted for the more common and (invariably) static After Action Reviews practiced by the majority of business and governmental organizations as the means of assessing their success. TWC use of LTXs as the means of assessing progress and future needs helped to align operations to the emerging goals of the initiative, and materially assisted in significantly reduced delays between the emergence of new needs and initiation of focused response (*FIGs 3 and 4*).

The impact of ToL on TWC

Probably the most significant indicator of the operational impact of ToL implementation is the fact that while the ranking of counties that participated in the initial ToL training (Team Launches) followed by routine LTX activities improved substantially. Conversely, the ranking of the two counties that declined participating in ToL-based operations and chose to retain their traditional approaches actually *decreased*.

Organizationally, the initial team Launch resulted in the establishment of the **Health Improvement Council** (the **Collaborative Command Leader Team**), i.e., a group of organizational and community leaders from across the region who meet monthly to formulate/adjust the executive intent focused on health improvement initiatives at the regional level.

Subsequent creation of a number of High Performing Regional Leader Teams (County Health Improvement Working Groups - HIP-WGs), the net effect of these organizational realignments was

enhanced "jointness" and unity of effort that resulted in the rapid emergence of the cementing actionable understanding that, in turn, assured close collaboration among all involved entities.

Among the most notable successes attained by TWC since introduction of ToL-based operations are:

- Advocacy Plan and federal Community Transformation Grant to assist with interventions designed to improve nutrition, increase physical activity levels, and reduce the rates of smoking.
- CMDHD received a grant from the Robert Wood Johnson Foundation to develop a Together We Can.
- The TWC Transportation Committee received a grant from the USDA for technical assistance in creating a regional medical transportation system through public transportation systems.
- The Michigan Oral Health Coalition received a DentaQuest strategic planning grant to assist in improving access to dental services in central Michigan.
- New primary clinic was established in Gladwin County in March, 2012, and they have served 635 patients.
- Established an Access Point Clinic in Clare County to enroll residents without a medical provider into a medical home .
- Four new permanent prescription drug drop boxes were installed at public safety buildings in Clare, Gladwin and Roscommon Counties.
- The Community Nutrition Network was formed to provide monthly food distributions. The food distribution truck provides healthy food and nutrition education for an estimated 300 people per month.

CONCLUSIONS

The list is of TWC successes is far from complete, and the exhaustive description of TWC achievements can be found at http://www.together-we-can.org/ Moreover, there is no doubt in our mind that the success of TWC is *not* the sole result of the implementation of ToL. The ToL concept is, after all, nothing but a tool, and even the best of tools will be entirely useless unless wielded by individuals who are dedicated, committed, and enthusiastic about their mission - individuals who do not surrender in face of difficulties. Thus, the successes of TWC are the tribute to the TWC members who uniformly share these attributes. What ToL does, however, is to transform groups of such individuals into unstoppable, extraordinarily agile entities – the collaborating High Performing Leader and Command Leader Teams who can achieve more and within a much shorter time than similar groups utilizing the traditional methods of leadership and team building. What is of significant interest in this context is the fact that the ToL concept spans the boundaries of nationality and culture: comparable results were attained during ToL-based activities in Canada and Europe not only in healthcare but among a wide range of professions ad missions.

FIG. 1 Counties of Michigan. The counties with ongoing TWC operations are outlined in blue



From TWC Health Assessment and Health Improvement Plan, 2013 Update

FIG. 2 The ToL Concept



FIG. 3 LTX principles in the TWC context







*) After The OODA Loop, The Patterns of Winning, Col John Boyd, USAF, 1987 . The figure taken fFrom TWC Health Assessment and Health Improvement Plan, 2013 Update