

Trust and psychological safety in a virtual healthcare team

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Abstract

Virtual teams are a common feature in many organizations. Given the need to improve the management of disease, and harness advances in technology, virtual teams are increasingly seen in healthcare. Two ingredients considered necessary for an effective team are trust and psychological safety. There are differences between co-located and virtual teams, including face to face interaction and social interaction. Understanding how to develop and maintain trust and psychological safety is crucial to ensure that a virtual team works effectively.

Key words: Virtual team; Healthcare; Trust; Psychological Safety.

Introduction

As the face of healthcare delivery has changed with the COVID 19 pandemic, virtual interactions between clinicians and their patients have increased (1). Clinicians have worked in virtual settings before, for instance in certain types of multidisciplinary meetings (2). The pandemic is likely to see clinicians increasingly likely to work as part of virtual teams.

A virtual team is considered to possess certain characteristics: (3)

- That it is a functioning team
- The members of the team are geographically dispersed
- There is a reliance on technology mediated communication to accomplish a task

Virtual teams have several advantages, such as not requiring the individual to leave to travel to undertake a face to face interaction, thereby saving time travel and cost. There is the opportunity to include individuals from a wider pool who might otherwise not be able to join a physically co-located team (4).

Virtual teams are particularly vulnerable to breakdown of communications, conflicts, power struggles and mistrust (5) 70 to 80% of medical errors were related to interactions within the health care team (6). Two conditions considered important for a team to accomplish a task effectively are trust and psychological safety. Trust is likened to the “glue of the workplace” (7). Psychological safety allows team members to think freely and take risks with confidence (8).

Trust

Trust in virtual teams is positively associated with job satisfaction (9) and improved working relationships (10). Trust has been defined in terms of vulnerability and control (11). One individual (trustor) is willing to be vulnerable to the other individual (trustee) when the trustee cannot be monitored or controlled by the trustor. There are also three antecedent characteristics of trust:

- Ability refers to the skills that allow a trustee to be perceived as being able to be competent within a certain context.
- Integrity is the perception that the trustee is reliable through demonstrating a set of principles, such as work habit.
- Benevolence is the perception that the trustor will act in a good way, demonstrating “interpersonal care and concern...beyond an egocentric profit motive” (12).

The triad of antecedent characteristics is thought to arise at different stages in the formation of trust. Early on, trust is considered to develop from perceptions from the trustor about the ability and integrity of the trustee (12). Judgements based on benevolence would be made later in the relationship between trustor and trustee (13).

Trust can develop even when there is limited time to form interpersonal relationships. This is termed swift trust (14) and can develop in co-located as well as virtual teams (12). Swift trust is considered to arise from the trustor's own inclination to trust and an initial assumption of trustworthiness, based upon factors such as the trustee's reputation. However, the trustor's swiftly formed opinion about the trustee is confirmed or refuted with the passage of time. As such, swift trust is considered fragile (15).

Trust has been described as the glue of the global workspace, but technology does not do much to create relationships (16). Technology can enable communication in a virtual team, but non-verbal cues will be less apparent. Trust is influenced by the ability to directly see what colleagues are doing (17). In the virtual setting, it is important for team members to communicate what they are doing. This will avoid resentment of other members socially loafing (18), thereby undermining the perception of integrity. Task deadlines also need to be met so as not to undermine the belief in ability.

Technologically enabled communication should include a focus on developing social bonds. For instance, starting an email with a salutation such as “Hi” enhances trust in the setting of a distributed team (19). Other methods include allowing colleagues to discuss hobbies and interests. These social bonds will help to introduce benevolence and affective trust which will help to maintain trust.

Hunsaker and Hunsaker (20) suggested five things a leader should do to boost trust in virtual teams:

1. Create face time. For instance, this helps individuals to get to know each other, appreciate non-verbal cues and develop team cohesion.
2. Set goals and expectations. This will make clear the team agenda and what deadlines need to be met.
3. Provide ongoing feedback. Well delivered feedback yields increased job satisfaction, less depression and increased mental and physical longevity (21).
4. Show-case team members' competence. It is especially important that early interaction between colleagues includes sufficient information such as previous work or accomplishments.
5. Foster cultural understandings, such as particular ways of greeting one another or asking for advice may be different according to cultural practices, and these differences need to be recognized (22).

Psychological safety

If trust is considered to focus on the benefit of doubt that is given to others, psychological safety is concerned with the benefit of doubt given to the individual by others (23). It is a group phenomenon, allowing team members to think freely and take risks which are key aspects of learning, with confidence that there is mutual respect and trust within the team (8).

Furthermore, with respect to trust, the long-term consequences of trusting another person are considered, whereas the calculus inherent in psychological safety considers the very short-term interpersonal consequences expected from engaging in a specific action (24).

Researchers originally suggested that psychological safety was a response to organizational change and postulated that, during the change process, it would enable the individual to have a pro-active approach to team goals rather than a focus on self-protection (25).

When three factors (co-worker relations, co-worker norms and supervisor relations) were assessed, supervisor relations had the strongest relationship with psychological safety (26). If the supervisor or leader is authoritarian and not welcoming the opinions of others, the team has low psychological safety, potentially leading to disastrous consequences (27).

In health care, learning and improvement can be made harder if communication must cross traditional hierarchical lines of status (23). Status differences which challenge good communication have been identified as contributory to many medical errors (28). A hostile team diminished the members' willingness to take part in problem solving activities (29).

It has been suggested that health care providers should be high reliability organizations preoccupied with the possibility of failure (30). Research has found that high-performing medical teams reported more mistakes than their low-performing teams. Those high performing teams possessed greater levels of psychological safety in comparison to low performing teams (8).

When Google's People Analytics Unit assessed the characteristics of high performing teams, psychological safety was found to be the most important characteristic (31). The ability of team members to have their opinions heard was one of the keys to success. Previous research has also found "groups where a few people dominated the conversation were less collectively intelligent than those with a more equal distribution of conversation turn-taking" (32, at page 688).

Team members are more inclined to speak up in the team if a leader is democratic and supportive, welcoming questions and challenges (29). Psychological safety facilitated learning, experimenting and new practice production in intensive care units within 23 hospitals (33). Units with greater learning behaviors had lower risk adjusted mortality rates after 2-3 years of observation (34).

With respect to the virtual team setting, leaders need to consider certain factors:

1. The way the team is configured to avoid ingroup and outgroup if there is one large and one smaller subgroup (35).
2. Team members require familiarity with the technology that is being used to communicate. If there is a reporting system that is in place, then this should be designed to be easy to use and not disruptive to the normal ebb and flow of patient care (36).
3. In the virtual meetings, expectation is established that everyone gets an equal chance to speak and active listening is encouraged from co participants (32).
4. The leadership approach needs to be one which facilitates a sense of safety from team members to express themselves authentically.
5. Most of the research on psychological safety has been undertaken in Western countries, so its interpretation might require adaptation if the virtual team spans other countries (37).

Communication within a virtual team

There are barriers to successful communication in virtual teams including communication that is lacking contextual information, providing inaccurate information, interpretation of silence and technical problems (38).

The lack of convenient nonverbal cues in digital communication can make virtual team working challenging, for instance, it is less conducive for the establishment of mutual knowledge (39).

Communication media can be considered to exist on a continuous scale based on the ability to communicate a complex message efficiently. Videoconferencing, for instance, is richer than using emails. The richer the media, the more efficiently it can clarify ambiguous issues (40). Use of richer media in virtual teams helps to increase an individual contribution being noticed and valued and reduces perceived social loafing (41).

Although it might be assumed that individuals would choose to communicate messages using richer media, when sending more equivocal messages, rather than voice mail, the less rich medium of email was used (42). The ideal communication system for a virtual team would feature a variety of types of media, with a range of media richness, in which team members are able to choose the media that is best suited for them and the task (43).

Summary

With developments in technology and the impact of disease, working patterns in healthcare continue to change. Interacting remotely, not just with a patient but also with colleagues, is becoming more common, such that clinicians are now likely to be part of virtual teams.

For these virtual teams to be effective, trust and psychological safety need to be developed and maintained. Though they are not identical, one commonality is the need for bonds to develop between colleagues based upon confidence that a task can be completed, and any questions can be raised.

For those bonds to develop, the communication systems that are used and the interface between team members and the team leader need to facilitate exchange of information, both formal and informal, easily, and ideally, as close to face to face exchanges as possible.

Key Learning points

Team members need to be confident in the ability and integrity of colleagues and go on to build emotional bonds with them. They need to feel able to express themselves, for instance in a team meeting, and not feel at risk of ridicule when doing so.

Team leaders need to understand how trust and psychological safety are fostered and maintained in their teams. They need to take care not to stifle the informal aspects of teamwork. They should ensure that team members feel able to approach them with suggestions or concerns.

The technology used to communicate in the virtual team needs to provide as many types of media possible to facilitate timely communication and foster bonds within the team to allow for work to be done effectively and with positive participation.

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