



The Five Dysfunctions of a Team

By Patrick Lencioni. San Francisco, California: Josey-Bass Publishers; 2002.

You are starting your intern year of residency, and on day 1 you are leading a medical student, presenting patients in rounds, collaborating with the nurses to address a concern that has come up, and running a family meeting. You start your first job out of residency and are responsible for running rounds, working with the team to determine discharge, and have been asked to join a hospital committee. After 5 years on the job, you are appointed medical director and need to review performance, budgets, and determine future directions of the team that you supervise. Our career as child psychiatrists will be filled with opportunities to work with teams and often a leadership role within it. Although that role might not always have a title associated with it, it will still come with the need to know how to effectively run a team. The problem is the lack of training in leading a team and overall leadership training in medical school and residency. This might play a part in why physicians avoid leadership roles in hospital systems, even though there is a positive impact when they are in those roles.¹ *The Five Dysfunctions of a Team* is a book that offers child psychiatrists in any level of training some tangible skills necessary to taking on the roles of being a part of or leading a team.

The Five Dysfunctions of a Team has a unique style of introducing the concepts, using the story of a new executive and the strategies that she incorporates to identify the troubles and to come up with solutions in the team dynamic. This unique model of presenting the strategies helps to make them feel relatable and easier to follow. This way of storytelling also helps the reader to see examples of what might go wrong and how we can use these strategies with individuals with different strengths, weakness, and personalities. Although the book is set in Silicon Valley, the leadership and team struggles can easily apply to the experiences that we have in medicine.

The book introduces us to Kathryn, who has just been hired as the new CEO to right the ship of a struggling but promising Silicon Valley start-up. Kathryn has no experience in Silicon Valley and is immediately questioned by her

peers who have been in that industry and working in startups for their whole careers. This is one of the appeals of the book for us as physicians. We often walk into environments where we are new to the culture, to the systems, or to the people. This can happen when we come onto the team as a new resident or fellow or when we maybe change institutions to take on a new job or position. This also helps the reader understand that the skill sets used to improve team function are not specific to an industry—these can be applied universally. Like when Kathryn walked into her new role, we walk in with questions of our age, experience, knowledge base, and intentions. These are all very hard starting points when you need to lead or even be a part of a team. Following through the story helps to give us a guide to the strategies that work and don't work in navigating this difficult territory.

The Five Dysfunctions of a Team introduces us to team members who are invested but lacking direction, not invested, struggling with change, not team players, and just plain rude. Even though we do not work in business, we can close our eyes and see the people with whom we have worked who fit many of the characteristics of the people presented in the book. Through the lens of Kathryn, we see when she strategically avoids and engages and when it does and doesn't work. This gives the reader the chance to play out scenarios that they might have thought through and to see what the expected outcomes might be. In the book people change roles, are promoted, and are let go in an effort to build the team environment that will move the company forward. Based on the role that you have, you might not have the same level of control as a CEO, but all of us can influence a team of which we are part. Reviewing this gives strategies, no matter what your level, on how to work through the conflicts that can occur and to come out better for it.

The author uses the story to introduce the reader to the five dysfunctions of a team: absence of trust, fear of conflict, lack of commitment, avoidance of accountability, and inattention to results. Reviewing these five dysfunctions gives us a framework to be able to assess our own health care teams. The interactions modeled in the story, again can feel very similar to experiences we have had in our jobs, creating a sense of how universal these dysfunctions are in teams. In child psychiatry, the absence of trust can be dangerous for our patients: for example, if there is a lack of trust between teams and child psychiatry consultation, then recommendations might be avoided or consults might not be called, leading to a drop in care. The fear of conflict can be associated with the fear of speaking up in medicine. There are plenty of examples of the lack of speaking up

leading to errors in medicine. Studies show that there is a team structure that favors a hierarchy in which, if people can't speak up, errors will occur.² As often one of the leaders of that structure it is critical, we are developing a team in which speaking up, creating some conflict, is allowed in the interest of patient safety. Commitment to the team is becoming a more important topic in medicine as we see the pandemic impact burnout and intent to leave in record numbers.³ Learning strategies about how we can recognize this change in commitment and what we can do systemically to address it is a critical leadership skill we otherwise don't learn. It is clear that these dysfunctions are present and need to be addressed in medicine, but having the skill set to do that is often lacking.

Without the extra training of an MBA, many of us will feel lost addressing the team and leadership challenges into which we will be thrust. As physicians, we are also busy and have to be conscious of the time that we dedicate to self-learning other skills, such as leadership. *The Five Dysfunctions of a Team* presents a unique narrative style to introduce us to strategies that are applicable to our work as physicians. It also is short and easy to follow, hopefully allowing a quick review, reflection, and ability to implement the strategies in place. Hopefully this book represents only the start of your library focusing on leadership and team development. As child psychiatrists, it is important that we have the tools necessary to run toward, and not away from, these opportunities to be leaders.

Justin Schreiber, DO, MPH

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Correspondence to Justin Schreiber, DO, MPH; e-mail: schreiberj@upmc.edu
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