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Cawangan Kedah
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# BOOK OF EXTENDED ABSTRACTS

# iVCPPS 2021

1ST INTERNATIONAL VIRTUAL CONFERENCE ON PUBLIC POLICY AND SOCIAL SCIENCE

## iVCPPS 2021:

## REGIONAL ISSUES IN PUBLIC POLICY AND SOCIAL SCIENCE DURING COVID 19 PANDEMIC

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FACULTY OF ADMINISTRATIVE SCIENCE AND POLICY STUDIES, UITM KEDAH
&
FAKULTAS ILMU SOSIAL DAN ILMU POLITIK UNIVERSITI OF AIRLANGGA (UNAIR)

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# MANAGING SUPERTEAMS: HOW TEAM COMPOSITION AFFECT THE TEAM PERFORMANCE OF PUBLIC HEALTHCARE IN MALAYSIA

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EXTENDED ABSTRACT

## INTRODUCTION

Public healthcare workers carry the responsibility of caring and healing for others. Their performance reflects the well-being of the end-receivers of their service, i.e., the patients. In the context of public healthcare, this means that the performance of the frontliners will ensure the well-being of the citizens, which will reflect the healthy growth of the nation. More often than not, healthcare workers work in a synergy and collaborative manner through team-working. High-performing teams are crucial in healthcare because this sector's tasks are highly interdependent, unpredictable, and dynamic (Bleakley, 2013). Healthcare teams are often faced with challenges that are complex and difficult to coordinate, requiring the teams to align high levels of collaboration between tasks, members' attributes, and the overall team strategy. Medical frontline workers are highly dependent on teams because high-performing teams will lead to a higher degree of members' satisfaction, decreased stress, increased quality of healthcare, reduced medical errors, and increased patient safety (Kalisch, Weaver, & Salas, 2009). The urge for healthcare workers to be coordinated in tasks signifies the importance of team performance in healthcare settings.

## PURPOSE/AIM & BACKGROUND

The paper intends to examine the relationship between team diversity and team skills on healthcare workers' team performance. Team performance is characterized by team task performance and team contextual performance (Morgeson, Reider, & Campion, 2005). This study would assist in the understanding of team composition and team performance among healthcare workers in Malaysia.

## METHODOLOGY

The objective of this study is to investigate the effects of team composition characteristics on team performance. Team performance was conceptualized as team task performance and team contextual performance. Data were collected at the team level, and score aggregation was done (Jayasingam, Ansari, Ramayah, & Jantan, 2013). The survey was distributed to team leaders and team members in a non-fixed setting, with minimal contact between respondents and the researcher.

## FINDINGS/RESULTS

Following data aggregation, the structural model of the study was assessed and developed. This involved hypothesis testing of direct and indirect effect, assessment of variance explained (R square values), predictive relevance (Q square values), and goodness of fit (GoF) (Tenenhaus, Vinzi, Chatelin, & Lauro, 2005). To test the path coefficients for significance, a nonparametric bootstrapping method was done. t-values were obtained with 300 cases and 1000 resamples (Hair, Hult, Ringle, & Sarstedt, 2013; Chin, 1998). Two out of four hypotheses were supported. In specific, team skills were found to have positive and significant relationships with team task performance ($\beta = 0.1446$, $p<0.01$) and team contextual performance ($\beta = 0.1149$, $p<0.05$), thus providing support for hypothesis 3 and 4. However, the remaining two hypotheses; hypotheses 1 ($\beta = 0.081$,$p>0.05$) and hypotheses 2 ($\beta= 0.026$, $p>0.05$) were not supported. $Q^2$ values were calculated using the blindfolding procedure, where data sets underwent a repetitive process of cross-validation up to a point where each data point has been excluded and re-estimated. Based on that, with $Q^2$ values 0.591 and 0.611, it can be concluded that the structural model of this study has a substantially significant predictive relevance ranging from medium to large. The $R^2$ values of the structural model in this study ranged from 0.499 to 0.763 indicated that the model is fit for this study.

## CONCLUSION

In the context of healthcare teams, team skills and team diversity must be engaged because it can be a benefit and a challenge to the team's functioning. In making collective decisions, team members will generate different ideas which need to be managed efficiently to ensure smooth task execution. Undoubtedly team diversity provides variation in the working environment, but the element needs to be encouraged and nurtured into the minds of team members to be aware of its benefits. Similarly, when team members have the necessary skills to exercise teamwork, they will encourage healthy work surroundings through good and supportive work relationships. In turn, this will lead to a more outstanding team contextual and task performance.

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