Teamwork in Assertive Community Treatment (TACT)

References for Teamwork in Assertive Community Treatment Scale items
1.   Levitt B, March JG: Organizational learning. Annual Review of Sociology 14:319-340, 1988
2.   Tucker AL, Nembhard IM, Edmondson AC: Implementing new practices: an empirical study of organizational learning in hospital intensive care units. Management Science 53:894-907, 2007
3.   Jehn KA: A multimethod examination of the benefits and detriments of intragroup conflict. Administrative Science Quarterly 40:256-282, 1995
4.   Shah PP, Dirks KT, Chervany N: The multiple pathways of high performing groups: the interaction of social networks and group processes. Journal of Organizational Behavior 27:299-317, 2006
5.   Edmondson AC: Psychological safety and learning behavior in work teams. Administrative Science Quarterly 44:350-383, 1999
6.   Edmondson AC: Speaking up in the operating room: how team leaders promote learning in interdisciplinary action teams. Journal of Management Studies 40:1419-1452, 2003
7.   Zohar D: A group-level model of safety climate: testing the effect of group climate on microaccidents in manufacturing jobs. Journal of Applied Psychology 85:587-596, 2000
8.   Shah R, Ward PT: Defining and developing measures of lean production. Journal of Operations Management 25:785-805, 2007
9.   Endsley MR: Theoretical underpinnings of situation awareness: a critical review; in Situation Awareness Analysis and Measurement. Edited by Endsley MR, Garland DJ. Mahwah, NJ: Lawrence Erlbaum and Associates, 2000

Teamwork in Assertive Community Treatment (TACT)

Appendix A: TACT Definitions and Items		
Construct	**Definition**	**Items**
MODERATING PROCESSES		
Team Learning (1, also see2) – Exploration & Exploitation 1 – None 2 – Once or twice 3 – Three to five times 4 – More than five times (during the past six months)	Exploration is activities that identify the best practices that are currently available from external sources.	• I reviewed resource manuals and written materials for effective ACT team's work processes. • I reviewed emails and newsletters for effective ACT team's work processes. • I participated in training sessions for ACT teams. • I participated in training sessions related to ACT (e.g., integrated dual disorder treatment, supported employment, cognitive behavioral therapy). • I observed other ACT teams.
	Exploitation is activities that operationalize practices in a given setting and evaluate their performance.	• I learned new ideas for improving ACT team's work processes from my ACT team members. • I participated in selecting work process changes for implementation. • I helped to implement a planned change in my ACT team's work processes. • I participated in analyzing problems in my ACT team's work processes. • I helped to evaluate a planned change in my ACT team's work processes. • I reflected on our ACT team organization and improvement activities with my ACT team.
Conflict & Constructive Controversy (3, 4) 1 – Strongly disagree 2 – Somewhat disagree 3 – Somewhat agree 4 – Strongly agree	Conflict is perceived incompatibilities or discrepant views among team members.	• I felt that my ACT team members did NOT get along. • I felt that personality clashes were evident in my ACT team. • I felt that conflicts regarding ideas frequently arose in my ACT team. • I felt that my ACT team members had different opinions about how to organize work.
	Constructive controversy is "the critical and open discussion of divergent perspectives including task related facts, data and opposing ideas."	• I felt that even when we disagreed on my ACT team, we communicated with respect for each other. • I felt that on my ACT team we used our opposing views to understand problems.

Teamwork in Assertive Community Treatment (TACT)

Appendix A: TACT Definitions and Items		
Construct	**Definition**	**Items**
MODERATING STATES		
Psychological Safety (5, 6) 1 – Strongly disagree 2 – Somewhat disagree 3 – Somewhat agree 4 – Strongly agree	"Team psychological safety is a shared belief that the team is safe for interpersonal risk taking."	• I felt that I could bring up personal safety issues, such as working in dangerous neighborhoods, to my ACT team members. • I felt that I could bring up mistakes and slips by my team in consumer care activities to my ACT team members. • I felt that I could bring up problems and tough issues, such as unprofessional behavior or missing team meetings, to my ACT team members. • I felt that if I made a mistake, other members of my ACT team would NOT hold it against me. • I felt that it was safe to take a risk to try new things in my ACT team. • I felt that my personal skills and talents were valued by other members of my ACT team. • I felt that it was easy to ask for a change in the time of a visit. • I felt that it was easy to ask for a partner to accompany me on a visit.
Goal Agreement – Safety and Quality Orientation (7) 1 – Strongly disagree 2 – Somewhat disagree 3 – Somewhat agree 4 – Strongly agree	Goal agreement is a shared perception of the priority of a team's objectives.	• I felt that I had the time during visits with consumers to assure safety for me or the consumers, even if it meant visiting fewer consumers. • I felt that I had the time to assure high quality visits with consumers, even if it meant visiting fewer consumers. • I felt that I had to make as many consumer visits as possible, even if it meant lower quality visits or less personal or consumer safety. (reverse coded)

Teamwork in Assertive Community Treatment (TACT)

Appendix A: TACT Definitions and Items		
Construct	**Definition**	**Items**
MEDIATING PROCESSES		
Information Accessibility (8) 1 – Almost never 2 – Occasionally 3 – Often 4 – Usually 5 – Almost always	Information accessibility is low waste in obtaining information.	• I could obtain information about consumer issues, such as living arrangements or personal relationships, from my ACT team's daily meeting. • I could obtain information about consumers that I needed to provide care from other members of my ACT team. • I felt that the encounter notes for consumers who I was visiting were current. • I felt that the rehabilitation interventions for consumers to be seen that day were clearly discussed during daily team meetings.
MEDIATING STATES		
Situational Awareness – Encounter Preparedness & Consumer-Centered Care (9) 1 – Almost never 2 – Occasionally 3 – Often 4 – Usually 5 – Almost always	Encounter preparedness is the degree to which team members feel prepared to perform their daily tasks. A high degree of preparedness means that a team member knows her or his schedule, consumer information, purpose of the visit, and the activities/intervention that he or she should perform during an encounter.	• I worked with consumers to develop rehabilitation goals. • I knew my complete consumer visit schedule. • I knew the medical diagnosis of the consumer before a visit. • I knew the functional assessment of the consumer before a visit. • I knew the rehabilitative intervention I should work on with the consumer before a visit. • I related my observations of the consumer during a visit to the consumer's medical diagnosis and functional assessment. • I knew how to code a visit's rehabilitation activities at the conclusion of the visit.
	Consumer-centered care is the degree to which teams integrate	• Consumers participated in treatment planning meetings. • Rehabilitation planning was integrated into assessments, treatment planning, or interventions.

Teamwork in Assertive Community Treatment (TACT)

Appendix A: TACT Definitions and Items		
Construct	**Definition**	**Items**
	consumer-specific contexts and conditions in their treatment planning and interventions.	• Skill building was integrated into assessments, treatment planning, or interventions. • Natural supports were integrated into assessments, treatment planning, or interventions.

Appendix B. Factor Loadings from Exploratory Factor Analysis with Promax Rotation of 1st Wave [1,2]

Variable	Exploitation	Psych Safety	Enctr Prep	Cons Ctrd	Conflict	Exploration	Goal Agree	Const Contr	Info Access
Safety personal issue	0.064	0.608	0.118	-0.068	0.021	-0.124	0.025	-0.001	-0.025
Safety mistake	-0.022	0.462	0.026	0.055	0.016	0.041	0.046	0.131	-0.048
Safety problems	0.035	0.344	0.096	-0.053	-0.023	0.139	-0.029	0.224	-0.057
Safety tolerance	-0.067	0.673	-0.119	0.035	-0.036	0.019	0.014	0.076	0.014
Safety take risk	0.005	0.642	-0.012	-0.099	-0.081	0.103	-0.058	0.002	-0.043
Safety skill valued	0.023	0.536	0.090	-0.119	-0.071	-0.029	-0.012	0.211	0.032
Safety change time	0.016	0.527	-0.090	-0.002	0.084	-0.009	0.049	-0.052	0.119
Safety ask company	0.059	0.693	-0.056	0.159	-0.046	0.008	-0.048	-0.065	0.163
Conflict get along	-0.029	-0.032	-0.003	-0.025	0.634	-0.006	0.114	-0.180	0.073
Conflict person clash	0.003	-0.001	-0.031	0.023	0.760	0.065	0.010	0.017	0.018
Conflict ideas	0.010	-0.045	0.041	-0.085	0.743	-0.015	-0.208	0.067	0.062
Conflict diff opinions	0.053	-0.003	0.046	0.076	0.523	-0.066	-0.042	-0.050	-0.075
Conflict respect	-0.046	0.132	-0.050	0.075	-0.097	-0.108	-0.014	0.608	0.087
Conflict understand	0.074	0.066	-0.079	0.140	-0.052	-0.100	-0.004	0.657	0.083
Goal safety	0.028	0.181	0.087	-0.070	0.020	0.032	0.454	0.118	0.120
Goal quality	0.032	-0.053	0.046	-0.017	-0.050	0.015	0.901	-0.031	0.008
Goal productivity	0.055	-0.010	0.037	-0.014	0.032	0.032	-0.666	0.043	-0.061
Info from meeting	0.039	0.233	-0.007	-0.023	0.019	0.059	0.186	-0.102	0.457
Info from peers	-0.072	0.184	0.118	0.008	0.121	-0.025	0.044	0.178	0.625
Info notes current	-0.033	-0.074	0.078	0.164	-0.187	0.121	-0.087	0.153	0.251
Info intervention discussed	0.067	-0.120	-0.038	0.314	-0.090	0.089	0.036	0.206	0.367
Know consumer involvement	-0.058	0.015	0.585	0.063	0.129	-0.014	0.002	-0.025	-0.060
Know schedule	-0.061	0.070	0.620	-0.031	-0.146	-0.021	0.069	0.041	-0.070
Know diagnosis	0.049	-0.012	0.649	-0.100	-0.023	0.014	0.003	-0.014	0.132
Know function assess	-0.076	0.022	0.601	0.081	0.033	0.129	-0.066	-0.076	0.041
Know rehab intervention	-0.019	0.036	0.554	0.179	0.051	-0.071	0.043	-0.070	0.134

Appendix B. Factor Loadings from Exploratory Factor Analysis with Promax Rotation of 1st Wave [1,2]

Variable	Exploitation	Psych Safety	Enctr Prep	Cons Ctrd	Conflict	Exploration	Goal Agree	Const Contr	Info Access
Know relate observation	0.095	-0.175	0.524	0.121	0.004	-0.042	0.069	-0.028	0.014
Know code rehab	0.216	-0.058	0.384	0.177	-0.075	-0.002	-0.030	-0.034	-0.038
Know consumer participation	-0.030	-0.080	0.102	0.378	-0.034	0.087	-0.064	0.075	-0.007
Know integration	0.052	-0.006	0.079	0.830	0.022	-0.016	0.047	-0.024	-0.075
Know skill building	0.004	0.096	0.090	0.863	0.055	-0.039	-0.015	-0.003	0.003
Know natural support	-0.095	-0.060	-0.034	0.606	-0.022	0.029	-0.020	0.152	0.092
Learn review manual	0.152	-0.047	0.077	-0.069	0.081	0.618	0.068	0.189	-0.065
Learn review newsletter	-0.006	-0.003	-0.018	0.111	0.058	0.737	0.122	0.098	-0.083
Learn act training	-0.008	0.138	-0.088	0.104	-0.051	0.761	-0.023	-0.242	0.032
Learn other training	0.116	0.043	0.143	-0.008	-0.040	0.570	-0.173	-0.209	0.100
Learn observation	0.069	-0.187	-0.068	-0.136	-0.057	0.448	-0.008	-0.059	0.204
Learn from peers	0.531	-0.051	0.050	0.036	-0.104	-0.017	-0.084	0.216	0.132
Learn select change	0.716	-0.005	0.014	0.003	0.041	0.156	0.013	0.124	-0.084
Learn implement change	0.821	-0.012	-0.111	0.022	0.106	0.075	0.050	0.058	-0.028
Learn analyze problem	0.922	0.057	-0.031	-0.012	-0.033	-0.111	0.009	-0.105	0.034
Learn evaluate change	0.856	-0.001	-0.020	-0.008	-0.004	0.010	-0.022	-0.083	0.011
Learn reflect	0.638	0.085	0.126	-0.061	0.003	0.043	-0.003	-0.017	-0.042

Teamwork in Assertive Community Treatment (TACT)

1. Four candidate items that loaded on single-item factors in an initial EFA were dropped from the scale and excluded from this analysis.
2. Highlights indicate item-to-factor assignments.