# Identifying Teamwork Processes in a Medical Command and Control Team During the COVID-19 Pandemic

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#### **ABSTRACT**

This paper presents an ethnographic study consisting of non-participatory observations of a Swedish regional medical command and control team during their crisis response to the COVID-19 pandemic. The field-notes from the observations were analyzed using a deductive content analysis with categories representing teamwork processes. The content analysis showed that the studied regional medical command and control team was engaged in all but one of the predefined teamwork processes. Furthermore, the content analysis also added to the understanding of the regional medical command and control team's work procedures by emphasizing how the team was engaged in the different processes. Lastly, the content analysis also made it possible to identify potential developmental needs of the studied regional medical command and control team.

#### Keywords

Teamwork, COVID-19, Crisis response, Command and control, Healthcare

#### INTRODUCTION

During the spring of 2020 the COVID-19 pandemic strained healthcare systems around the world due to the increasingly large number of patients in need of hospitalization, causing an unprecedented need of medical supplies, personnel, and space (Ferrara and Albano 2020; Myers and Liu 2022). National and regional actors needed to initiate crisis response processes to limit the impact of the pandemic and retain the capacity to provide care. This included prioritizing patient needs, allocating resources, securing personal protective equipment (PPE) and necessary medications, and developing non-pharmaceutical interventions (Laventhal et al. 2020; Livingston et al. 2020; Sibony 2020).

When responding to complex situations characterized by uncertainties and scarce resources, such as the COVID-19 pandemic, many organizations opt to establish short-lived command and control (C2) teams composed of members with different backgrounds and specializations (Salas et al. 2001). C2 teams are defined as two or more individuals working together with complex tasks towards a common goal. These tasks usually require multiple decisions to achieve the organization's objectives, and to be successful C2 teams must manage time pressure, stress, resources, and vague information (Jones and Roelofsma 2000).

In Sweden, where COVID-19 was declared a public health issue on the 10th of March 2020 (The Public Health Agency of Sweden 2020), the twenty-one regional public healthcare systems (RPHS) responsible for providing healthcare within their respective catchment areas also became responsible for managing the pandemic and its effects on their operations (The Corona Commission 2021). When responding to crises, such as the COVID-19 pandemic, the RPHSs can declare a Major Incident. When a Major Incident is declared, a specialized regional medical command and control team (RMC2) is established. The RMC2 should, according to regulation (SOSFS 2013:22) by the National Board of Health and Welfare, be capable of, inter alia, coordinating operations, reallocating resources, and prioritizing actions. Furthermore, the RMC2 should consist of at least one medical incident commander responsible for medical decisions and one incident commander responsible for the overall management of resources related to the Major Incident. When deemed necessary, the RMC2 can expand further by adding roles such as a chief of staff (CoS) and specialized functions containing multiple members assigned to different tasks and roles such as logistics and planning (Region Östergötland 2019). In Figure 1, an illustration of how the RMC2 can be structured is shown.

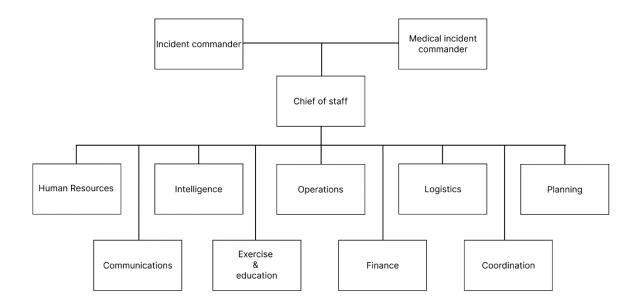


Figure 1. Example of RMC2 organizational structure.

In this paper, an analysis of teamwork processes within a selected Swedish RMC2 is presented. The analysis is based on the framework suggested by Marks et al. (2001; described below), which was chosen because of its broad previous usage, empirical support, and generalizability (Lepine et al. 2008). The purpose of the analysis is to examine how teamwork theory can contribute to the understanding of teamwork processes within C2 teams during crises, and emphasize developmental needs of the studied RMC2 which can be used to be better prepared for future crises. The following research questions will guide the analysis:

- Which teamwork processes can be identified in the selected RMC2?
- How does the framework suggested by Marks et al. (2001) add to the understanding of the work done by the RMC2?
- Which developmental needs are evident based on the identified teamwork processes?

# THEORETICAL BACKGROUND

A team is commonly defined as two or more individuals working interdependently to reach a common goal (Kozlowski and Ilgen 2006). The work done by a team can generally be divided into two different types, taskwork and teamwork (Ilgen 1999). Taskwork includes actions that directly lead the team towards its goal, while teamwork is commonly defined as the actions that coordinate and support the taskwork. The teamwork performance, or team outcome, is dependent on the characteristics of the input to the team, teamwork processes, and the emergent states in the team (Ilgen et al. 2005).

Marks et al. (2001; see also Lepine et al. 2008) provide a temporally based framework for teamwork processes

where they define teamwork processes as the interaction between team members that organizes the taskwork towards the team's common goal. They suggest a taxonomy of three process dimensions: transition processes, action processes, and interpersonal processes.

The transition process dimension is defined as planning and analytical team behavior, and includes the subdimensions of mission analysis, goal specification, and strategy formulation. The mission analysis subdimension contains behaviors that are focused on defining the broader mission of the team and evaluating the available external and internal resources. Goal specification contains behavior that further divides the mission into specific goals and sub-goals. Strategy formulation consists of developing alternative ways to achieve the main goal. Transition processes are mainly conducted in preparation for, or following, taskwork (Marks et al. 2001).

The action process dimension includes behaviors that support the taskwork. It includes the subdimensions of monitoring progress towards goals, systems monitoring, coordination, and team monitoring and backup behavior. Monitoring progress towards goals includes tracking or communicating the team's progress towards identified goals. Systems monitoring consists of tracking the team's and environment's resources. Coordination includes behaviors that coordinate the timing and sequence of team member's work. Team monitoring and backup behavior includes behaviors that respond and adapt to the change needed to complete tasks, which can include performing other members' tasks, assisting other members, or providing feedback (Marks et al. 2001).

The interpersonal process dimension includes the subdimensions: conflict management, motivation and confidence building, and affect management. These processes take place concurrently to both transition and action processes as they include behaviors that are tightly coupled with the team member's relations to each other. Conflict management consists of behaviors responding to and preemptively handling conflicts between team members. Motivation and confidence building consists of behaviors that positively influence the team's collective confidence and motivation in relation to its main tasks. Affect management consists of behaviors regulating negative and positive emotions within the team (Marks et al. 2001).

# **METHOD**

An ethnographic fieldwork approach, consisting of non-participatory observations, was used to study teamwork processes of the selected RMC2. The observations were conducted by one of the authors between the 18th and 27th of March 2020, which means that the RMC2 had been active for six days before the observations began (Knuthammar 2020). During the observations, the observing author followed separate individuals with different roles and responsibilities each day as they attended meetings and completed their tasks. To contextualize the observations further, it should be mentioned that the observing author only observed the RMC2 during office hours, while the RMC2 were active beyond regular office hours. It should also be mentioned that while most of the work conducted by the RMC2 was on the designated premise, i.e., the members were physically present, some meetings were remote or hybrid. Furthermore, the observations were conducted without the specific aim of producing the current study, which means that the observing author had no specific intent to capture teamwork processes. In total, the observations resulted in 52 pages of field-notes, written on a computer, describing how the RMC2 worked to limit the impact of the pandemic during March 2020.

To analyze the field-notes, a deductive content analysis was conducted by two of the authors not involved during the observations. The content analysis followed the framework presented by Elo and Kyngäs (2008). First, the field-notes were read through multiple times to gather an understanding of the data. Next, the categories that would be used during the coding of the data were identified. The categories were derived from the framework suggested by Marks et al. (2001). This resulted in three categories, namely transition processes, action processes, and interpersonal processes. After the three categories were identified as the basis for the analysis, the field-notes were coded accordingly. The content analysis was later discussed with, and validated, by the author who conducted the observations.

### **RESULTS**

In the following section each category used during the content analysis is presented beneath separate headings with excerpts from, and descriptions based on, the field-notes.

## **Transition Processes**

The field-notes illustrated that the studied RMC2 were involved in various transition processes. The most common transition process, out of the three defined by Marks et al. (2001), was mission analysis formulation and planning. This process was evident throughout the field-notes where it was repeatedly described how the RMC2 spent time defining and interpreting their tasks, and analyzing external factors that would affect their tasks. One example

from the field-notes illustrating this type of transition process comes from the 18th of March, where the RMC2 had been reached by information that there was a shortage of PPE, and that they therefore had to figure out how to solve the shortage as well as how to communicate the shortage to the entire RPHS.

Based on the information available today, those working with tasks related to the PPE situation can determine that there is a shortage of PPE everywhere, and the question is how this should be communicated to the rest of the RPHS.

The RMC2 was engaged in multiple simultaneous tasks, such as securing PPE, establishing co-operational structures with other involved actors, and developing medical guidelines. To manage team resources effectively, the tasks therefore had to be assigned to the members. The process of assigning tasks to the members, which can be interpreted as mission analysis formulation and planning, started with identifying what to do, including a short description of the task. Following the identification of what to do, it was identified by whom the task should be done. This process was repeated multiple times throughout the observations.

The first question is what should be done, a short description of the task. Next, it is written who in the RMC2 should execute the task, alternatively who it is that has the main responsibility for making sure that it is completed.

However, even though the process of assigning tasks to the members was repeated throughout the time-period of the observations, it sometimes appeared as if some tasks were forgotten and not assigned properly. This was particularly evident during some meetings where these unassigned tasks were brought into the light, something which was usually managed by the CoS assigning the tasks immediately.

Sometimes there are discussions about specific tasks which must be completed, and when it is not clear who is supposed to do what, the CoS speaks up and makes sure that a specific individual takes responsibility to make sure that the task is not forgotten.

Another transition process evident in the field-notes was goal specification, i.e., the process of identifying and prioritizing goals. A particular goal repeated and updated throughout the time-period of the observations was the goal of increasing the RPHS's capacity. Sometimes this goal was presented in the context of a specific number, e.g., make sure that the capacity is increased enough to take care of 30 additional patients in need of intensive care, while sometimes it was presented in a more general manner, simply stating that the capacity had to be increased.

The CoS once again repeats the previous message put forward by those working with tasks related to the PPE situation: "We have one goal, to increase the capacity in order to take care of more patients"

In addition to goals specifying the need for an increased capacity, the RMC2 also specified internal goals related to managing team resources. These goals were made to make sure that the RMC2 had the capacity to continue operating throughout a long period of time. One of the goals belonging to this category of internal goals was specifically related to dismantling parts of the RMC2 to secure stable routines and sustainability.

The CoS mentions that the RMC2 should begin working to dismantle parts of the RMC2 to create stable routines and secure the sustainability of the RMC2. The RMC2 should also work with preparing to leave some of the tasks to new members soon joining to replace the current personnel. The goal is to start working regular office hours.

The field-notes also included examples of how the RMC2 developed or discussed alternative courses of actions, i.e., strategy formulation. The alternative strategies mostly referred to the PPE situation, where the sudden rise in global demand made it impossible to follow regular purchasing procedures. To solve this issue, one alternative strategy discussed by the RMC2 was to begin purchasing equipment from abroad.

The RMC2 are also looking at solutions involving purchasing equipment from abroad and are therefore discussing if it is necessary to inspect the products to see if they fulfil requirements in accordance with various quality indicators and certification marks.

In addition to strategies related to the RMC2's tasks, the RMC2 also formulated strategies related to team resources. These strategies usually targeted how the work procedures of the RMC2 could be changed to be more effective or how to adapt if the RMC2 had to move away from their designated premise. For example, working from home due to a significant spread of COVID-19 within the RMC2.

An important topic which was discussed during the staff briefing is that the RMC2 should start formulating strategies for what to do if they are forced to work from home. These strategies include alternative digital tools and work procedures, but currently there are no concrete strategies, but they are keeping it in mind.

#### **Action Processes**

The field-notes also provided examples of the RMC2 being engaged in action processes. One of the action processes according to the framework presented by Marks et al. (2001) is monitoring progress towards goals. This process was emphasized throughout the field-notes, for example by describing how the RMC2 constantly displayed goals and kept track of progress on a marker board located on the premise. In addition to the general tracking of progress towards the goals, monitoring progress was also evident during meetings, particularly through the CoS who wanted to make sure that the current tasks always were related to the goals and the most important issues.

Sometimes the CoS develops links between the topics of discussion and the priority list to make sure that the RMC2 are constantly working on tasks related to the most important issues.

In conjunction with tracking internal progress towards goals, the RMC2 also monitored how their decisions and directives were followed by the rest of the RPHS. In one example from the field-notes, the CoS wanted to make sure that the primary care knew about decisions made and when they were planning to effectuate the decisions.

The CoS follows up the decision that was previously mentioned to the primary care group. The CoS elaborates on why the decision was made and how they reasoned when making it. The CoS asks for the primary care's opinion on the decision, and when they will follow the decision.

The RMC2 was also engaged in systems monitoring, i.e., tracking resources of the team and external conditions affecting the progress towards goals. One concurrent issue, characterizing almost everything the RMC2 was involved in, was the situation related to PPE and other medical products. To make sure that the RMC2 were always one step ahead in the purchasing processes, they therefore needed to constantly monitor products which were at risk of running out of stock.

They are trying to monitor products that might run out of stock. During the meeting it is mentioned that there is a shortage of a specific material, since someone (a microbiologist) is testing too much for COVID-19.

Perhaps the most important aspect which had to be monitored, and forecasted, was the number of COVID-19 infections. Monitoring, and forecasting, the number of infections was important since it would affect the goals and missions of the RMC2, which in turn also affected its tasks. When forecasting potential development of the pandemic, data from past epidemics were used to anticipate future developments.

The infection control physician is drawing a graph presenting the COVID-19 forecast. The curve shows how they believe COVID-19 will spread in the population based on how epidemics usually behave. The infection control physician suggests that until now there has been a linear increase in the number of infected, but now we are moving into an exponential phase with an escalation of infections.

The members of the RMC2 were also engaged in activities to assist other team members, i.e., team monitoring and backup behavior. Assisting behaviors within teams can take different expressions, for example by providing feedback, helping other team members with their tasks, or simply completing tasks assigned to other team members. In the field-notes, it was particularly assisting behaviors in the form of providing feedback which was evident. This feedback usually seemed to come from the CoS, who throughout the period of the observations was engaged in feedback sessions with the members.

The CoS is engaged in multiple conversations about diverse topics with other members of the RMC2. It could be described as if everybody needs the CoS, but the CoS needs no one.

In addition to providing direct feedback to the members of the RMC2, the CoS also assisted the members of the RMC2 by repeatedly reminding them of how the RMC2 was supposed to work. This can be interpreted as the CoS assisting the team members by providing a structure for how to efficiently complete their tasks.

Just like yesterday, the CoS repeats the message that the RMC2 has a specific method of operation that must be followed. The method is as follows: information, decision, follow-up. Follow-up is important and it must be done, since in the end the decisions will affect someone who is working with patients.

An important aspect when engaged in multiple simultaneous tasks, as was the case for the RMC2, is to make sure that actions are properly coordinated. When coordinating actions, different procedures can be used, but one way to make coordination possible is to make sure that the entire team has the same information. To guarantee that everyone had the same information, the RMC2 made sure that all members were present at the staff briefings.

Everyone from all parts of the RMC2 was present during the staff briefing to make sure that no other meetings were needed to spread the information presented.

However, the field-notes also offered examples of when there was a lack of coordination. This lack of coordination was attributed to inadequate decision-making procedures, where decisions sometimes were not properly documented, something which made it impossible for other members of the RMC2 to answer questions related to why and how some decisions were made.

A problem with how the RMC2 works is described. It is about how decisions are made. For example, a decision regarding restraining orders in some parts of the hospital. If this decision is made, followed by the decision makers taking the weekend off, how are questions regarding this specific decision supposed to be answered? The decision must be properly documented regarding who made it and when it was made, so that the rest of RMC2 knows about it and can answer questions about the decision since the entire RMC2 is responsible for it.

The most common coordination process found in the field-notes was when the RMC2 sought to coordinate their communication to the public and the rest of the RPHS. These communication efforts were particularly related to the PPE situation, where both media and the rest of the RPHS requested information, something which emphasized the importance of coordinating the communication efforts so that the same information was communicated.

Once again, they are discussing how information related to the PPE situation should be communicated, particularly how to communicate with the media.

## **Interpersonal Processes**

In addition to transition and action processes, Marks et al. (2001) also specifies interpersonal processes as a separate category. One of these processes is conflict management, which includes managing ongoing conflicts and preventing potential conflicts. While the field-notes did not contain any information of ongoing conflicts within the RMC2, the field-notes showed how the RMC2 tried to avoid conflicts with the rest of the RPHS through clear communication. One example of this can be seen in relation to the PPE situation, where the RMC2 was aware of potential conflicts since some unpopular decisions had to be made. To avoid these conflicts the RMC2 strived to make it clear why these decisions were necessary.

Another recurring problem is the PPE situation and that the RMC2 must communicate with the personnel working with the patients why they are making certain decisions in relation to the PPE situation (e.g., guidelines and policies).

The pandemic also forced the RMC2 to involve multiple units from the RPHS. However, this involvement which forced units to cooperate did not proceed painlessly, instead resulting in conflicts or potential conflicts. This also meant that it was up to the RMC2 to manage these conflicts, something which was requested to be done proactively by communicating how the different units should cooperate.

It is being told how there is a lack of communication between two units and that the trust between these two units is low. One member of the RMC2 suggests that the RMC2 must act in a more proactive manner with clearness regarding how the two units should cooperate.

Another interpersonal process found in the field-notes was motivation and confidence building, which also includes promoting task cohesion. Building motivation and confidence, and promoting task cohesion, was particularly important for the RMC2 due to the high tempo. One way in which they tried to build task cohesion was through constantly aiming at keeping the discussions at a high level without getting stuck in details.

It is a very high tempo, and they are trying to keep the discussions at a "high" level without getting stuck in details. They are aiming to solve the most acute problems and avoid getting stuck in "unnecessary" sidetracks.

The last interpersonal process, affect management, states that team members should be engaged in activities to limit frustration and promote social cohesion. The field-notes, however, did not provide any clear examples of how the RMC2 were engaged in such activities. Nonetheless, the field-notes did include examples of when the RMC2's members were frustrated, something which indicates that perhaps affect management activities should have been conducted. One example of how frustration came to be in the RMC2 can be seen in relation to the PPE situation, where the team members responsible for that task showed their frustration by pointing out that the problems should have been solved earlier.

They are expressing a dissatisfaction with the current state of affairs, particularly since they think that these issues [regarding the PPE situation] should have been managed much earlier and that they now must engage in "political activities". That is, they must make use of all their personal contacts to try and solve the PPE situation.

# **Summary of Results**

In Table 1 a summary of the results with examples from the field-notes is presented, showing which processes the RMC2 was engaged in and how they were engaged in the different processes.

Table 1. Summary of the results with examples from the field-notes.

Teamwork process	Subdimension	Identified in the field-notes	Example
Transition processes			
	Mission analysis	Yes	Analyzing what to do in relation to the PPE situation.
	Goal specification	Yes	Specifying general capacity goals.
	Strategy formulation	Yes	Potentially changing purchasing procedures.
Action processes			
	Monitoring progress towards goals	Yes	Assuring that the tasks were related to the goals.
	Systems monitoring	Yes	Monitoring the availability of PPE.
	Team monitoring and backup behavior	Yes	Providing verbal feedback to team members.
	Coordination	Yes	Making sure that information reached all members.
Interpersonal processes			
	Conflict management	Yes	Communicating why decisions were made.
	Motivation and confidence building	Yes	Keeping the discussions at a high level.
	Affect management	No	Frustration was present but not managed.

#### **DISCUSSION**

In the following section the results and the methodological choices are discussed beneath separate headings.

#### Results

The first research question which aimed to be answered through the content analysis was "Which teamwork processes can be identified in the selected RMC2?". Based on the results it is possible to conclude that the studied RMC2 was engaged in all teamwork processes defined by Marks et al. (2001) except for affect management.

While the answer to the first research question is expected, since teams ought to be engaged in teamwork processes, the results emphasize that the framework was appropriate for the analysis. Furthermore, the results also add to the evidence of the framework, increasing its validity by concluding that the suggested teamwork processes are present in C2 teams during real life crises. However, it should be mentioned that although almost all processes were identified, some processes were more frequent than others, for example transition processes compared to interpersonal processes. This discrepancy can be explained by the nature of the tasks, where, for example, processes such as mission analysis and systems monitoring are deemed more important when aiming to complete tasks compared to, for example, affect management. The discrepancy can, however, also be explained by the methodological choices, where the observer unintentionally might have focused more on transition and action processes or that the observed RMC2 members felt uncomfortable to show or engage in, for example, conflicts when they were observed.

The second research question, "How does the framework suggested by Marks et al. (2001) add to the understanding of the work done by the RMC2?", can be answered via the content analysis by considering which processes characterized the RMC2's work. As can be seen in the results, the RMC2 was particularly involved in transition processes, something which emphasizes that such processes were an integral part of the RMC2's work. Furthermore, while the results show that the RMC2 was engaged in all action processes, the results also indicate that the systems monitoring process was particularly prominent since multiple different examples were identified in the content analysis. Continuing with action processes, the results also showed that although examples of coordination processes were found, these examples did not show coordination in action, instead showing how the RMC2 created sufficient conditions for future coordination or lacked coordination. It is therefore possible to conclude that the RMC2's work was characterized by a need for coordination, but perhaps the team sometimes did not fulfill this need. It is also possible to conclude that the RMC2 was not action oriented, instead mostly focusing on transition processes, monitoring, and creating sufficient conditions for actions. Lastly, the results also suggest that although examples of interpersonal processes were identified, the RMC2 did not properly engage in processes such as conflict and affect management.

The third research question "Which developmental needs are evident based on the identified teamwork processes?" is possible to answer based on the content analysis by identifying how the RMC2 was engaged in the different processes. A first developmental need which can be identified is related to the relationship between mission analysis and goal specification, The content analysis showed that although the RMC2 was engaged in both processes, the goals they specified were usually general and did not relate to the identified missions which most of the time were related to specific tasks. A suggestion for the RMC2 in the future is therefore to clearly develop specific goals related to each identified mission. A second potential developmental need identified based on the content analysis is related to the coordination processes, where it was shown that there sometimes, particularly in relation to decision-making and communication, was a lack of coordination. It is therefore possible that the absence of proper coordination processes negatively affected the RMC2's effectiveness, something which suggests that the RMC2 ought to focus on coordination processes in future crises and during exercises. A third potential developmental need is related to team monitoring and backup behavior processes. While the content analysis showed that the RMC2, particularly through the CoS, was engaged in such processes, they all were in the form of providing verbal feedback. This means that processes such as assisting team members by completing their tasks were not present, something which indicates that the RMC2 in the future ought to focus more on team monitoring and backup behavior. A last potential developmental need relates to the interpersonal processes, where the content analysis showed that although episodes of conflicts and affect were evident, the RMC2 were mostly not engaged in processes to manage these episodes of conflicts and affect. It can therefore be interpreted as an area in need of improvement, for example by focusing on conflict and affect management during training and education.

It should however be mentioned that all answers to the research questions might come because of methodological shortcomings, which means that future research is needed to verify the findings. The future research ought to be based on the preliminary findings from this study. It would also be interesting to investigate the RMC2's work as described by the teamwork processes in relation to team effectiveness.

#### Method

The methodological choices in this study come with advantages as well as disadvantages. The advantages are mainly related to the fact that the chosen method, with non-participatory observations, offered unique insights into how C2 teams work during a real-life crisis. By extension, this means that it is possible to determine that the identified teamwork processes are evident in C2 teams in real life crises, something which strengthens the evidence of the theoretical framework. However, the methodological choices also come with limitations. For example, the observing author observed the RMC2 with no intention of identifying teamwork processes, which might have resulted in some important aspects of teamwork not being included in the field-notes, thereby also affecting the analysis negatively. Similarly, the data collection mainly took place early in the RMC2's response period, thus limiting the analysis to the developing phase of the team. The ethnographic approach also means that this study ought to be interpreted as a case study, meaning that it is not possible to offer any generalizations regarding the results to other teams.

The choice of using the framework described by Marks et al. (2001) also has its advantages and disadvantages. The dimensional structure of the framework is supported (Lepine et al. 2008) which strengthens the validity of the results in the current study. However, the framework does not consider other aspects of teamwork effectiveness, such as emergent states (Ilgen et al. 2005), and is thus limited to the organization of work while agnostic about the results of the organization. This limits the framework to teamwork processes, providing an advantage for the analytical method used in the current study as it makes it possible to categorize data with regards to the actions of the team members in relation to the purpose of the team. As such, the framework presented by Marks et al. (2001) for teamwork processes is suited for the current analysis but further studies including teamwork effectiveness and performance should include complementary frameworks or models such as the IMOI (Ilgen et al. 2005) or big five of teamwork (Salas et al. 2005).

#### CONCLUSION

In March 2020 the COVID-19 pandemic forced Swedish RPHSs to declare Major Incidents and establish RMC2s. In this study one selected RMC2 was observed with the purpose of gathering information of how C2 teams work during real crises. The field-notes from the observations were analyzed using the framework presented by Marks et al. (2001) to identify teamwork processes and add to the understanding of studied RMC2. The analysis showed that the studied RMC2 was engaged in all processes described by Marks et al. (2001), except for affect management, something which adds to the existing knowledge of applying the framework. Furthermore, the analysis also offered unique insights into how the RMC2 worked, adding to the understanding of the team's work procedures. Lastly, the analysis made it possible to identify developmental needs of the RMC2. Future work should aim to further contextualize the RMC2's teamwork processes by making comparisons with other C2 teams and study the relationship between teamwork processes and team effectiveness.

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