Collective decision-making in rehabilitation teams: practices of talking work

Chiara PICCINI & Antonella CARASSA

Università della Svizzera italiana, Istituto di Psicologia e Sociologia della comunicazione, Via G. Buffi 13, CH-6900 Lugano

Chiara.Piccini@usi.ch & Antonella.Carassa@usi.ch

Nell'articolo vengono comparate le pratiche discorsive di due gruppi di lavoro all'interno della medesima istituzione (un servizio socio-psichiatrico) in rapporto all'attivita' di formulazione dei problemi che avviene durante le riunioni. Dal punto di vista metodologico lo studio combina una indagine etnografica con un'analisi qualitativa di otto riunioni che sono state registrate e trascritte; l'analisi qualitativa e' stata condotta sulla base di tre dimensioni: la cornice di partecipazione, la polifonia, e la memoria condivisa. L'analisi mostra come i due gruppi – nonostante si muovano all'interno dello stesso quadro istituzionale – realizzino differenti organizzazioni dell'attivita' discorsiva. Da un lato la cornice istituzionale da' forma al lavoro discorsivo; dall'altro lato ciascun gruppo di lavoro sviluppa un repertorio di pratiche unico, in risposta ad un insieme di vincoli che includono quelli istituzionali, ma non sono da questi stessi esauriti.

Parole chiave:

Pratiche discorsive, servizi socio-psichiatrici, cornice di partecipazione, polifonia, conoscenza condivisa

1.   Introduction

In this paper we present a study about talking work, and in particular about team talk in a psycho-social service. The aim of the study was to uncover and compare discursive practices of collective problem formulation during team meetings in two different teams of the same institution. By focusing on collective problem formulation we address those discursive processes that occur when professionals – for example in a meeting context – report and evaluate facts until they are able to describe something that is recognizable as a problem according to their professional vision (for an account of professional vision see Goodwin, 1994). Problem formulation, although often undervalued, is a key aspect of problem solving and decision making, and the ability to formulate problems according to the institutional constraints and resources is an important component of a professional expertise. In fact, there is a strong relationship between problem formulation and the local conception and organization of work that set the actual opportunities team members have to intervene. The experience of working in a specified organizational context – where an operational model is shared, professional roles are institutionally defined, and rehabilitative services are organized in a specified way – shapes the professional vision through which team members highlight and codify certain reported facts as problems, while they overlook others. Such professional vision is enacted in the form of discursive practices through which

team members – moving from an initial issue – progressively formulate a problem that can be solved with the institutionally enabled intervention possibilities (Piccini & Carassa, forth.).

In the case of psycho-social services, problems faced by team members tend to be chronic and it is difficult to assess complete recovery of patients. The descriptions of a patient's case play a huge role in determining rehabilitation programs and case evolution (Crepeau, 2000). Many teams do not follow a shared model for describing problems, and even when a model is supposed to be shared, practice may be far away from theory.

Many studies in this field identify forms of decisional asymmetry, drawing upon the classic themes of discourse-power relationship (Griffiths, 1997) and identity negotiation (Housley, 1999; Hall *et al.,* 1999; Erickson, 1999): the analysis of how a decisional power – explicit or not – is enacted reveals that having a social role does not merely imply a pre-established authority to exert in discourse. Discourse is rather the place to negotiate and enforce our own role and those of others by performing acts of identity appropriation and attribution.

Another issue which is relevant to the analysis of problem formulation and decision making is information distribution (Lundgren, 2006). In fact, the information required to formulate problems in relation to which team members must make a decision is splintered and its organization does not necessarily reflect the organization of roles and tasks so that, for example, information related to a patient's familial problem may come from the physiotherapist instead than the social worker.

However, not every piece of information is regarded in the same way, since the different social roles of the interlocutors, either those attending the current discussion or those animated by the meeting participants, may incorporate different kinds of authority. The interrelationship between information, evidentiality and reportability has been highlighted by Sarangi in the context of social work (Sarangi, 1998), while Maseide has analyzed the processing of evidence in medical discourse (Meseide, 2006).

Practitioners are often unaware of their problem formulation practices, therefore an analysis on team talk conducted by a communication researcher can provide them with valuable help to gain more awareness and perhaps to engage in a constructive change of their way to conduct team meetings (Piccini, Carassa & Colombetti, 2006).

2.   Methodology and analytical focuses

The study combines discourse analysis on 8 meeting transcripts with an ethnographic analysis of the working context in which team meetings take

place. We integrate discourse analysis with an ethnographic account because problem formulation processes are extremely context dependent. That means, team meetings are part of a work activity which has specified goals – a specified commitment toward patients – and which is structured by several elements, including the institutional framework, the expert knowledge of professionals, and the personal history of the team. Those elements shape the activity of problem formulation in professional contexts, and must be taken into consideration in the analysis. To analyze the discourse we have selected three analytical focuses that reflect – according to our view – important dimensions of every problem formulation process in a professional context.

The first focus of our analysis is the participation framework (Goffman, 1979; Goodwin, 1981; Ochs & Capps, 2001) of team members during the meeting. In relation to this focus, we identify different forms of collaboration implemented by team members while they describe problems and plan work. This dimension has been selected because it allows seeing the extent to which problem formulation is carried out by team members as a joint activity, which is a critical goal in order to work as a team. Specifically we look at:

- the turn taking management and the occurrence of overlapping discourse;

- the management of topic change and the kinds of connections between subsequent turns;

- the discursive representation of the team as a plural subject (Gilbert, 1986), through the use of we-form vs. I-form;

- the animation of team members as agents in recounted episodes which changes the status of hearers, who may become legitimate co-tellers;

- the addressing of specific interlocutors which shows a speaker's point of view about who is the actual recipient.

The second focus is the organization of voices (Bachtin, 1981), in relation to which we observe how the point of view of relevant others is embodied in a speaker's turn. This dimension has been selected because it helps to understand to whom team members refer in their decision making process. In particular, we point out the uses of:

- the institutional voice, when the discourse of the institution's director is reported;

- the professional voice, when the speaker reports the discourse of a colleague belonging to the team or to the network of services that collaborate with the team;

▪ the team voice, when the speaker reports something that has been stated by team members – during a previous meeting or in other venues – using a we-form;

▪ the patient voice, when the patient's discourse is reported.

As a third focus, we analyze the references to knowledge shared among team members (Clark, 1996). In particular we observe the references to experiential knowledge – i.e. knowledge derived by team members' experience – and to theoretical knowledge – i.e. shared operational models and theories – that may be referred to by team members and used to evaluate facts under discussion, or even renegotiated during the meeting. This last focus is relevant for our analysis because the sharing of knowledge facilitates the work of a team (Wenger, 1998) and we intend to see how references to such common ground are used in the process of problem formulation and decision making.

3.   Ethnographic information about the study community

The institution in which the study has been conducted is a center for the care and education of the disabled located in Tessin (Switzerland). The institution has a central administration and runs a variety of services including a residential accommodation for patients who reside in small groups under the responsibility of professional teams. There are six professional teams, each of them managing one group of patients. Patients have similar conditions across different groups, therefore the six teams conduct the same work with different groups of patients. Other services are the school for special education offered to children, the professional service consisting of several laboratories in which patients accomplish working activities, and a therapeutic service, including logopedia, physiotherapy, a psychiatric service, and a medical one. In the research we have focused on two teams operating in the residential service. Several interviews have been conducted with team members and the structure of the two teams has been considered in order to answer important questions related to the work organization and to the team's integration level (Lichtenstein *et al.*, 1997). In particular we were interested in understanding what kinds of qualifications team members held, how long they have been working together, how their roles were differentiated, to whom team members had to account for their job, and finally from where procedures and rules – that the team is supposed to follow – come. We came to know that the rules and procedures team members are supposed to follow come in part from the institution and in part from the State. In other words, team members do not internally create rules to administrate their own work, and – although there is one team member with the function of team leader – they account for their job exclusively to the director of the institution. Team leaders have organizational responsibilities and a coordination function within the team and between the

team and the institution. The team leader has no more decisional power than any of the other team members.

All team members are hired as educators and have exactly the same tasks, although they may have had different qualifications. Team one is extremely heterogeneous in relation to team members' qualifications, past experiences, age, origins. Team two appears to be divided in two groups, since three team members were school teachers and have been working together for more than ten years, while two other team members, who joined the team later – are much younger, have a diploma – from the same school – that qualifies them to work in psycho-social services.

On the base of information collected, both the teams can be considered as low-integrated.

4.   The analysis of team talk

The analysis shows that the two teams have developed different practices of team talk that can be compared in relation to our three analytical focuses. Table 1 provides a synthesis of the outcomes of the analysis, which we elaborate subsequently.

	Team 1	Team 2
Participation framework	high collaboration; high centralization	low collaboration; low centralization
Organization of voices	high level of polyphony; team vs. the institution	high level of polyphony; the institution as a point of reference
Shared knowledge	no explicit references to theoretical and explicit knowledge; use of evaluative scenarios; frequent use of storytelling; cases of storytelling are strategic	no explicit references to theoretical and explicit knowledge; use of evaluative scenarios; use of storytelling; cases of storytelling are strategic; implicit, not strategic references to shared knowledge prevail

Table 1: Analysis' outcomes

From the point of view of the participation framework, Team 1 displays a high level of collaboration among team members, who pay attention to each other discourse. In fact, we do not see multiple concurrent threads of discussion and any background chatting. There is no example of simultaneous speech in conversation treated as a turn-taking problem in need of repair (Sacks, Schegloff & Jefferson, 1974), and there are examples of a supportive kind of overlapping (James & Clarke, 1993): there are examples of turns in which interlocutors complete each other's sentence or in which someone intervenes

repeating the last words of the previous turn displaying conversational coordination.

Example 1 shows the collaboration among interlocutors in the construction of a factual report, during a conversational sequence in which team members are reconstructing events that happened during a day trip which some team members undertook a few days earlier with some patients. The speaker marked with the asterisk (*) is the team leader.

Example 1

```
Anna*:  Perciò eravamo andati a?
        So, we went to?
Marco:  Lodrino?
        to Lodrino?
Anna*:  a vedere gli aereoplani
        to see airplanes
Paolo:  Lodrino a vedere l'aereomodellismo
        to Lodrino to see aircraft modeling
```

Marco (3) provides a word to complete Anna's sentence and then Paolo resumes the word used by Marco and reformulates the claim of Anna by providing more precise information about the purpose of the day trip.

Example 2 is extrapolated from a discussion in which team members are trying to understand whether it is possible to perform a certain type of intervention with a patient, namely they are describing what they imagine would happen if they should try to give a medicine to a patient – who is quite aggressive – during an epileptic crisis. The proposal of giving this medicine to the patient had come from the director of the institution, who is not present during the meeting. The extract shows the joint construction of an evaluative scenario, i.e. a description in which alternative courses of action are compared and evaluated in terms of the intervention possibilities prefigured to team members.

Example 2

```
Anna*:  due lo tengono fermo tu gli tappi il naso e gliela lanci
        two of us hold him and you hold his nose and you flick him the
        pill
Paolo:  e ci vuol la mira perché lì
        and one has to take careful aim because
Marco:  il problema è che come facciamo se siamo da soli
        the problem is, how can we get it if we are alone
Anna*:  eh bé se siamo da soli non fai neanche lo Steso,
        well if we are alone you cannot do either the Steso
        come cavolo fai a fargli lo Steso?
        how can you do the Steso?
Marco:  no però vuol dire girare sempre – quando sei con lui
        no, but it means always to go around – when you are with him
        vuol dire che tu devi avere qua in taschino
        it means that you must have the pill ready
        già pronta la tua pastiglietta
        here in your pocket
```

Paolo (4/5) makes a comment about Anna's statement (1/2) aligning with her ironic account. The implausible scenario constructed by Paolo and Anna has the effect of highlighting the inherent difficulty of giving a pill to a patient during an epileptic crisis. In fact, Marco (6/7) – abandoning the humorous tone in favor of a more pragmatic one – makes explicit the problem implicitly indicated by his colleagues. This problem is evaluated by Anna (8/9) as implying the conclusion that the hypothesized course of action cannot be implemented. Marco counters (12/13: no però / no, but) a different and more optimistic conclusion, by proposing a solution that would help in that situation, namely having the pill in the pocket every time a team member is working alone with this patient, in order to be ready to answer an emergency situation in a short time. Evaluative scenarios, as the example displays, can be seen as a joint achievement at two levels: first, they can be jointly constructed by team members, and second they can be evaluated – once they have been constructed – through multiple perspectives by professionals who draw different conclusions from them. Moreover, all the team members are discursively represented as actively involved in the critical situation; in fact, generic subjects – which can represent any team member – are animated through the use of the indefinite *you* form (1/2, 8/9, 10/11, 14/15), or else the we-form is employed (6/7, 8/9).

Also in the talk of Team 2 we can find examples of collaboration in constructing factual reports or evaluative scenarios. However, such activity is sporadic in Team 2. Moreover, there are many sequences in which the connections between subsequent turns are blurred. There are many cases of overlapping talk and multiple discussion threads, so that many times sentences are initiated in a turn and remain uncompleted. In the Example 3, as instance, team members are discussing the possibility that one patient, Marta, would stop – according to the proposal of her sister – going home on Friday, so that she would stay until Saturday inside the institution. The excerpt we report is at the beginning of the meeting. One team member, Lucia, in a quite extended turn, explains that it's difficult for the sister to manage the return home of Marta on a Friday and that she would prefer to pick Marta up on a Saturday instead. After Lucia's explanation, the sequence we report in Example 3 follows.

Example 3

```
Bruno: ma la cosa è che ((Marta)) accetti
       but the point is making ((Marta)) accept
Lucia: NO APPUNTO:
       no, exactly
Bruno: e che si veda
       and making it clear
Lucia: io ho capito che
       I have understood that
Bruno: da subito?
       immediately?
```

```
Lucia:  io ho capito che c'è una volontà nella Eliana che questa cosa
        I have understood that Eliana wants this thing to be accomplished
        vada in porto: adesso non so:
        being accomplished, I don't know now
Bruno:  partiamo dalla pratica (.) venerdì questo cosa fa lei?
        Let's start from the concrete issues (.) what is she going to do
        on the next Friday?
Lucia:  ah no no ((non si capisce))
        ah no no ((not understandable))
Bruno:  intendo quelli che lavorano con lei
        I mean, the ones working with her
Lucia:  [NO NO NO:
         no no no
Bruno:  [che si fa subito la cosa: ma che sia chiaro
        that the thing is immediatly done, but it needs to be clear
Nadia:  lui ((il direttore)) ha detto che vuole cose chiare
        he ((the director)) said he wants everything clear
        ((voices overlapping))
```

Lucia (3/4) breaks into Bruno's turn (1/2, 5/6, 9/10) and tries to interrupt him; she uses a connective expression (no appunto/ no, exactly) which signals topic continuity, although she is trying to change the discussion focus, moving the colleagues attention from the patient's state of mind to the family members' states of mind. Neither Bruno's nor Lucia's is taken up and developed by team members, and Bruno at 15/16 changes the approach to the problem. At this point a separated thread of conversation arises from among some participants, so that the discussion becomes difficult to follow and highly fragmented. The general issue of defining and implementing a new way of managing the patient's home visits is referred to at multiple points under multiple perspectives (what is wanted by the patient, by the family, or by the director), but the interlocutors do not collaborate to reach a comprehensive view of it and seem to be disoriented among multiple points of access that could be used to initiate problem formulation.

The participation framework in the two teams presents differences also in relation to the work done by the team leaders. In both teams, according to institutional prescriptions, there is one team member with the role of team leader. Although the role is defined in the same way in the two teams, the two leaders actually play two different roles during the meetings.

The talk of Team 1 seems to be much more centralized around the team leader, Diana, who manages the turn taking by asking questions and soliciting the others' points of view; she makes a systematic use of the we form and exhorts team members to make a decision that will reflect the point of view of "the team". We do not find such features in the discourse of Lucia, the leader of Team 2. The extensive use of the we form represents a difference between the two teams also in relation to the discourse of team members other than the leader. In fact, the we form is more used in Team 1 than in Team 2. Moreover, in the discourse of Team 1 there are more occurrences of the pronoun "we" than in Team 2 (see Table 2), which is systematically used to:

- Introduce actions that team members have done or are going to do: e.g., quello lo valutiamo noi / we are going to evaluate that problem ourselves.

- Encourage a line of conduct that should be embraced as "the team line of conduct": e.g., noi dovremmo fare un po' piu' di resistenza a questa cosa / we should put up some more resistance against this thing.

- Make reference to a team's stance or belief: e.g., noi avevamo pensato che era la sua crisi, del Pietro, e invece imitava la Marta / we have thought it was his own crisis, of Pietro, but he was imitating Marta.

- Underscore team members' needs: e.g., se noi abbiamo bisogno nelle riunioni di sostegno da parte sua / if we have the need, during the meetings, for his support)

- Introduce decisions taken by team members: e.g., poi noi domain gli diciamo che cosa abbiamo deciso, cioe' (...) / then tomorrow we tell him what we have decided, that is (…).

- Make reference to actions or stances attributed by others to team members: e.g., tutta la spataffiata che ha fatto sta mattina che noi dovevamo tenerlo / the long sermon he gave this morning, that we were supposed to hold Pietro.

In particular, the use of the pronoun "we" to address attribution of actions and stances is related to another practice we have highlighted through the analysis of voices, namely the discursive construction of a distance between "the team" and "the institution".

	Team 1	Team 2
Date of the meeting: 03.10.2006	occurrences of we: 38 Tot. of words: 13442 Percentage: **0.28**	occurrences of we: 24 Tot. of words: 11.527 Percentage: **0.20**
Date of the meeting: 10.10.2006	occurrences of we: 65 Tot. of words: 16067 Percentage: **0.40**	occurrences of we: 19 Tot. of words: 11349 Percentage: **0.16**
Date of the meeting: 24.10.2006	occurrences of we: 42 Tot. of words: 12914 Percentage: **0.32**	occurrences of we: 31 Tot. of words: 12400 Percentage: **0.25**
Date of the meeting: 21.11.2006	occurrences of we: 37 Tot. of words: 12678 Percentage: **0.29**	occurrences of we: 15 Tot. of words: 9357 Percentage: **0.16**

Table 2: Occurrences of "we"

From the point of view of the organization of voices, both of the teams display a high level of polyphony. In fact, in both of the teams the discourse of team members is rich in references to what someone else has said. In particular, seven voices have been identified in team members' discourse (the voice of

the educator, the team voice, the voice of the private sphere, the patient's voice, the voice of family members, and the voice of the professional network). However, they are differences in how the others' points of view are used in the practice of problem formulation developed by Team 1 and Team 2.

In particular the two teams differ in relation to the use of the institutional voice. The use of an institutional voice in Team 1 contributes to constructing a distance between the team and the institution.

In Example 5, Anna reports the voice of the director when she imagines what the director would say if team members were to tell him about scratches and bites they get from Gianni, one patient. Although Anna is reporting an imaginary director's statement (14/15), she uses the Italian form of reality (dice / he says) instead of the conditional form (direbbe / he would say).

Example 5

```
Anna*:  il Gianni ti prende e con graffi e morsi
        Gianni seizes you and with scratches and bites
        vai in giro con tatuaggi
        bear the scars from Gianni bites
Paolo:  poi se sei tatuato non farti più vedere dal direttore, eh
        then if you bear the scars don't let the director see you
(...)

Paolo:  se per caso sei tatuato da Gianni per i morsi
        in case you bear the scars for Gianni's bites
        se tiri su le maniche per mostrati dal direttore si si
        if you pull your sleeves up to let the director see, he
Anna*:  s'incazza dice ha fatto bene a farlo (.) anzi
        becomes angry he says he did a good job (.) or better
Marco:  anzi doveva darne di più
        or better, he should have given you more
```

Anna depicts a situation in which the director is seen as not supporting team members, and Marco collaborates with Anna, by repeating her last two words (anzi / or better at 14/15, and again at 16/17) and adding "he should have given you more" so as to complete the scenario. The words of Anna and Marco convey an opinion about the director's point of view and about the relationship between him and team members, which is already suggested by the precedent turn uttered by Paolo at 5/6 that introduces Anna's turn.

Similarly, Example 6 shows how team members in Team 1, through the use of an institutional voice, discursively build a distance between "the team" and "the institution". Anna, the team leader, reports what the director has asked them to evaluate, i.e. whether a specific medicine is adequate for a patient. Immediately after that (14-17), she makes a comment about what the director has asked, claiming that she cannot take up the director's point of view (labeled in her words as "the theory of the director") and then she makes explicit her opinion telling the team that he says "many good words" but he – unlike the team members – has never seen the patient during a crisis.

Example 6

Anna*: *il Mauro ha rimandato ancora a noi di valutare*
Mauro still asks us to consider
che lo Stesolit è troppo aggressivo
that Stesolit is too aggressive
metterlo lì tirargli giù i pantaloni infilargli lo
to lay him down, to pull down his trousers, to insert him
Stesolit e poi se è rigido irrigidisce
the Stesolit, and moreover if he becomes stiff, he stiffens
anche le natiche. Io gli ho detto cioè
also the buttocks. I told him, I mean
ma lui si irrigidisce sopra. Cioè è sopra che lui è
but he stiffens above. I mean, it is above that he is
rigido non è sotto. (1) Io comunque ragazzi la
stiff, not below. (1) Anyway people, I
teoria del direttore che tante belle parole ma
the theory of the director, who many good words but
non l'ha mai visto,
he has never seen him,

Team 2 uses the institutional voice in a different way, namely as an authoritative point of reference in evaluating facts and making decisions.

Example 7

Olga*: *però Mauro dice che*
but Mauro says that
è aperta anche la possibilità
there is the chance for her
per lei perché lei scia (.)
because she is able to ski
ha sempre sciato ((...))
she has always skied
quindi lavoriamo su questo
so, let's work on this

Example 7 is extrapolated from a discussion in which team members are evaluating the possibility of taking one patient with them during a winter vacation. The team has assessed this possibility in a negative way. The director's point of view is introduced as challenging their decision, in fact it is introduced by Olga with pero' / but (1/2), and then the final decision – i.e., to consider the possibility of taking the patient with them (lavoriamo su questo / let's work on this) – is introduced as a consequence of the director's argument (quindi / so).

In the Example 8, Fedra recounts to the team her use of the director's voice during a meeting with a family member to support an important point she wanted her interlocutor to understand.

Example 8

Fedra: *le ho rinnovato quello*
I repeated her what
che mi aveva detto Mauro alla riunione (.)
Mauro told me during the meeting (.)
se intervieni
if you intervene

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rischi di farla schlerare
you run the risk of driving her crazy
rischi questo
you run this risk
rischi quel altro
you run that other risk
```

From the point of view of the references to shared knowledge the two teams present similar features.

Explicit knowledge in the form of shared theories and operational models is never invoked.

Experiential knowledge is invoked in two different forms: the construction of evaluative scenarios and references to collective memory through storytelling.

The construction of evaluative scenarios is an important activity in professional problem formulation. Evaluative scenarios are different from a simple reporting of facts, since they mediate between the activity of reporting and the activity of planning. In a scenario, real or possible events – past, present, or future – are reported and compared in relation to intervention possibilities prefigured for team members. In such forms of discourse, professionals enact their professional vision (Goodwin, 1994) even if they do not make reference to any explicit professional knowledge.

An instance of an evaluative scenario has been reported in Example 2; another is reported in example 9 and again in Example 10.

Example 9

```
Maurizio: FORSE è successo con altre persone:
          maybe it happened with other people
          che non conoscono bene Pietro, sarebbe
          who do not know Pietro very well, it would be
          un'altra dinamica ancora: se tu fossi stata da sola:
          it would be different if you had been alone
          sarebbe successo ancora diverso:
          it would have been different
          perché vuol dire: tu devi contenere lui:
          because it means you must control him
          devi: comunicare con lui
          you must communicate with him
          devi andare a prendere la pastiglia scioglierla:
          you must go and take the pill and melt it
          guarda Pietro (.)  ah un bel bicchiere di sciroppo:
          look Pietro ha a good glass of syrup
          vedrai che passa tutto:
          you will get over it
          non aver paura: guarda che io sono qua: rassicuralo
          do not be scared I'm here to make him confident
(...)
Anna*:    è quello che io ti dico: che non so: un
          it is what I'm telling you, I don't know a
          il problema di è quando ti capita che sei da sola:
          the problem of being alone when it happens.
```

Example 9 is taken from a discussion in which team members try to distinguish between different situations of nervous crisis experienced by a patient and therefore the ways in which to face them. In particular they are comparing the situation in which they could expect a nervous crisis as opposed to situations where the crisis comes as an unexpected event, and situations in which they work alone with the patient as opposed to situations in which they have the support of a colleague. In the example, Maurizio draws upon the shared knowledge about specific actions needed in order to comfort and control the patient during a crisis (9-20) and the scenario he depicts allows other team members (Anna at 22-25) to argue that the most difficult aspect is the fact of being alone, more than the unexpected character of the patient's crisis.

Similarly, in the Example 10 a scenario is built in order to assess the difficulty implied by administering specific kinds of medicines. In particular, Anna compares two medicines, highlighting as relevant the possibility offered by one of them being able to be injected even through the jacket. This feature, in the light of her knowledge about typical situations the team faces, represents an important criterion for choosing one medicine over the other.

Example 10

```
Anna*: invece sembra che comunque con il discorso intramuscolare::
       on the contrary it seems that about the intra-muscle
       ((injection))
       sia un discorso ancora diverso::
       the discourse is different
       (.) tu non puoi fare dove ti  trovi glielo cacci dentro
       you cannot do that where you are pushing it inside
       (.) mentre l'Epipem tu non devi spostare::
       while Epipem you do not need to move
       il (.) glielo fai tu (.)
       you can do it yourself
       io veramente (.) ringrazio Dio non ho mai dovuto fare::
       I really thank God I have never had to do it
       ma anche tramite la giacca glielo puoi fare
       but you can do it even through the jacket
```

Another form of experiential knowledge is evoked by team members through storytelling. Team talk is full of references to information – about events, people, places, etc. – shared by team members, but sometimes those references become extended and detailed: speakers resume entire episodes in the form of stories not for the sake of updating colleagues, who already know about such episodes. Storytelling has a strategic function, since the facts are recounted in the context of a discussion in which a new problem needs to be evaluated and comparison with an old story may be helpful to this extent, by providing interpretive resources for evaluation. In Example 11 Anna, the leader of Team 1, is speaking about the opportunity of giving a specific medicine – Temesta – to Gianni, a patient. She argues that Temesta is not going to work with Gianni, on the base of a comparison with the story of Lara,

who couldn't have benefits from Temesta. Anna makes an implicit comparison also between Lara's and Gianni's geeral conditions, which in Anna's words seems to be much more complicated. Anna's account of Lara's story related to her treatment with Temesta is full of redundancy and repetitions (the affect of Temesta on Lara, that is zero. Zero, zero, do you remember… Its effectivness with Lara was Zero), and this feature contributes to show that Anna's attempt is not to inform team members about this facts, but to use them in a strategic way.

Example 11

Anna*: *Io sono dell'idea che se la Temesta non faceva*
I think that if the Temesta was ineffective
niente alla Lara, secondo voi fa qualcosa
with Lara, do you think it can work
al Gianni?
with Gianni?
(...)
Anna*: *Io sono scottata dall'effetto che aveva la Temesta*
I got stung by the affect of Temesta
sulla Lara, cioè zero. Zero, zero, vi ricordate
with Lara, that is zero. Zero, zero, do you remember
quando prendeva la Temesta in riserva la Lara?
when Lara was taking Temesta as emergency therapy?
Quando aveva il Dupiperol in terapia e la Temesta
When she was taking Dupiperol as therapy and Temesta
in riserva. Zero efficacia faceva alla Lara.
in emergency. Its effectivness with Lara was Zero.

A similar example is provided by Team 2, when Olga, the leader, resumes the story of Eliana at the seaside – which constituted a bad experience – in order to make the point that is better not to let Eliana join seaside holidays for the upcoming season.

Example 12

Olga*: *Eliana non parteciperà più ai soggiorni*
Eliana will no more participate in holiday trips
Olga*: *io l'Eliana l'ho vista al mare ormai tre anni, seduta*
I have seen Eliana at the seaside, for three years now, sitting
sulla sdraio mettersi lì sul bagno asciuga
down on the deckchair, there, on the boot topping
e vedevi che non riuscivi a portarla
and you could see that you were not able to take her
via dalla spiaggia
away from the beach
(.) l'ho vista quest'anno che dopo che
(.) I've seen her the last year, after that
urlava come una pazza la mettevi in acqua
she starter screaming like a mad person you put her in the water
lasciarla sul bagnasciuga (.) si è srotolata a terra
leaving her on the boot topping (.) she wallowed in the sand
cioè quest' anno al mare è stata ingestibile,
I mean, the last year at the seaside she was unmanageable,
uno per i suoi compagni
for her mates above all
perché comunque dovevano sempre staccarsi dall'Eliana a turno
because they always had to go away from Eliana one by one

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(.) TRE il pranzo interrotto perché lei
(.) point three, the lunch broken up, because she
prima di pranzare iniziava ad urlare e
was screaming before eating and
uno di noi per forza si alzava e andava (.) la spiaggia
one among us was compelled to stand up and go away (.)
la spiaggia, i bambini che giocavano
the beach, children playing,
la spiaggia non era per niente piena (.)
the beach was not crowded, absolutely (.)
io ho fatto tre giorni a portarla dalla spiaggia di albergo
I spent three days carrying her from the beach to the hotel
davanti ai bambini e alle persone che si giravano
in front of children and people turning ((to look))
e ai bambini che
and ((in front of)) children who
si buttavano nelle braccia delle mamme
run in the arms of the arms' moms
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In Example 12, Olga before initiating the storytelling anticipates her decision (1/2); in this way, the story follows as an account for such decision. Olga starts her recounting with a present perfect past tense in Italian (l'ho vista al mare / I shaw her at the seaside, 3/4) and then she reports specific aspects of the vacation using the imperfect past tense (7/8, 13/14, 28/29, 35/36) so as to highlight the general character of Eliana's behaviour, rathere than singular episodes that happened in that circumstance. The speaker alternates between accounts of the patient's behaviour (e.g., she was screaming as a mad person; she wallowed in the sand) and the report of her own experience of facing such behaviour (e.g., you could see that you were not able to take her away; I spent three days taking her from the beach to the hotel). Moreover, she animates in the story other people who had experienced a difficulty due to the patient's behaviour (other patients, team members, children on the beach, and their families). Team members are animated in the story through the use of the indefinite you form (7/8, 13/14), and the we form (27/28), as to highlight how the recounted experience is shared among team members.

The story told by Olga seems to provide team members with good reasons to avoid taking the patient with them again during holiday trips, at the seaside in particular. In fact, team members do not have any further discussion on this point and everyone seems to agree with Olga's evaluation.

5.   Conclusions

In this paper we have described the discursive practices of work in two teams in relation to three analytic dimensions apt to capture important aspects of problem formulation processes in any professional team. In particular, we have addressed three dimensions; first, the team participation framework, which allows seeing the extent to which problem formulation is carried out by team members as a joint activity. Second, the organization of voices, which highlights how the point of view of relevant others is embodied in a speaker's

turn. Third, the references to knowledge shared, assuming that the sharing of theoretical and experiential knowledge facilitates the work of a team.

The analysis shows that the two teams – although they move within the same institutional framework – realize different organizations of the discursive activity. One the one hand, the institutional framework shapes the talking work. On the other hand, different teams develop different discursive practices within identical institutional constraints, so that each emerging social organization of work is unique.

For example, it can be observed – through the analysis of the participation framework – that team members in one team display a higher degree of collaboration than in the other one. In relation to the organization of voices, it comes into view that professionals of both teams systematically refer to the institutional framework and exhibit how the cope with it in the talking work, either resisting or conforming to constraints. Finally, from the point of view of knowledge sharing, we can see the lack of references to any theoretical knowledge, which is quite understandable in light of the ethnographic study's results. In fact, team members have heterogeneous qualifications and do not receive any internal training; moreover, nobody has mentioned in the interviews any institutionally defined operational model that they are required to follow. The lack of references to theoretical knowledge is compensated for in both teams by references to experiential knowledge, in the form of storytelling or in the form of evaluative scenarios that are constructed to formulate problems.

We do not propose our analysis as an evaluation of team talk; nevertheless, it can constitute for team members the starting point for reflective work on their own practice, in which the communication analyst can collaborate.

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Appendix

Transcription symbols

`[`	overlapping text
`(0.2), (0.5), (0.8), (1)`	silence, represented in tenths of a second
`(.)`	micro pause, a silence less than 2/10 of a second
`TALK`	stress or emphasis
`::`	prolongation or stretching of the sound
`(…)`	speech that has been omitted
`(( ))`	transcriber's description of events