



VIRTUAL TEAM COLLABORATION

as depicted in a hypothetical example provided by
Kelly Robinson, a Sales Training Specialist at Medtronic

by Lee C. Thomas with Ravi Bapna & Norm Chervany

After a long day of back-to-back meetings, Katja Wuttig still managed to arrive at the gym in time for the six o'clock blended fitness class. Although tired, she knew from experience that the workout would help relieve stress and release some endorphins. The gym was only five minutes from the Medtronic office campus where Katja worked, so it was a convenient stop on her way home.

Having changed clothes and stowed her things in the locker room, Katja tied her hair back and entered the fitness studio, which was rapidly filling with people. Katja found an open space and set her towel and water bottle down to claim it. Then she grabbed a workout mat from the stack by the door and began stretching to loosen up. As the instructor punched buttons on the sound system to adjust the music and microphone volume, Katja noticed Cheryl Voy, a friend and colleague, joining the class on the other side of the room. Cheryl noticed Katja too, and waved just as the instructor started the class with some enthusiastic banter about the workout to come.

Katja first met Cheryl five years earlier at a networking event for business professionals working in healthcare, biotech, and related fields. During the usual introductions, the two women learned that they both worked at Medtronic, although in different parts of the business—Cheryl as a senior R&D engineer and Katja as a senior market development manager. Given that Medtronic employed thousands, it wasn't unusual that they hadn't known one another previously. After that first meeting, the two crossed paths a few more times until polite greetings in passing

NOTE: *Although based on actual business needs, the characters, names, roles, situations, and some locations presented here are fictional. Certain other details have been modified for the purposes of the case.*



eventually turned into chats over coffee in the on-campus cafe. Katja appreciated Cheryl's candor and insight about navigating the large organization, especially because Cheryl had roughly a dozen more years of experience than Katja.

Forty-five minutes later, the exercise class came to an end. The instructor thanked everyone for coming, and a smattering of applause rippled through the room, perhaps because the attendees really enjoyed all the push-ups, planks, lunges, squats, and other resistance reps interspersed with sprints across the studio. More likely the applause simply celebrated that the workout was over.



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Katja toweled off her forehead and neck as she walked over to where Cheryl was finishing her stretching. Flat on her back on the floor, Cheryl looked up at Katja and said, "Oof. That was a killer sequence."

"No kidding," said Katja, "I'm going to have some especially sore triceps and shoulders for a couple days." She reached a hand down to Cheryl, who took hold and hoisted herself up.

"Thanks," said Cheryl, back on two feet. "Good to see you, Katja. How've you been?"

"Really good, thanks. How's everything with you?"

"Just fine. Well, the kids are both teenagers now and driving me crazy." Cheryl rolled her eyes but smirked at the same time. "Phil and I joke about boarding schools at least every other day. But of course, when the time comes that we're empty-nesters for real, I'm sure I'll be a mess," she laughed. "And you? Things at work going well these days?"

"Yes, thanks. It has been going well. In fact, I was recently chosen for a new assignment, something I'm excited about—I'll be leading the launch of a new product for the Restorative Therapies Group."

"Katja, that's great!" exclaimed Cheryl, clearly pleased for her colleague. "What an opportunity for you. Tell me more. Do you have time to walk around the track?" she asked.



Images courtesy of Medtronic, www.medtronic.com

“That’d be great,” said Katja, “I’ve been meaning to get in touch with you. I was hoping you’d be willing to be a sounding board as I gear up for this. We won’t really get rolling for another month or so, but I want to get organized ahead of time.”

Katja and Cheryl made their way to the fitness center’s indoor track, where they started to walk laps and cool down after their workout. While they walked they continued their conversation. Katja began with a little background on the product she’d be launching.

The Targeted Pain Reliever System from Medtronic’s Restorative Therapy Group

In 2015, Medtronic’s business spanned the globe and included 460 locations in 155 countries. With a growing population of 85,000 employees, Medtronic pursued its mission to use “biomedical engineering to alleviate pain, restore health, and extend life.”

Medtronic had built a reputation on innovative cardiac and vascular therapies such as pacemakers, stents, valves, and other implantable devices. As the company matured, its business grew and diversified into new categories while reaching \$20.3 billion in 2015. By revenue, the Restorative Therapies Group made up the second largest of Medtronic’s global business units.

The Restorative Therapies Group developed neuromodulation, neurovascular, spine, and surgical technologies. The group’s latest product to reach the launch stage was the Targeted Pain Reliever System. This device sent electricity through reusable, self-adhesive pads placed on areas of the body in pain. The portable device could be used on the legs, arms, feet, or other areas, but it was originally designed to treat chronic lower back pain. Medtronic developed the device to fill a



gap in the marketplace between low-intensity, less-effective procedures and more invasive, riskier treatments like surgery. As one of the world’s leading makers of medical devices and technologies, Medtronic planned to market the product to physicians, clinics, and hospitals around the world.

Preparing to Lead a Virtual Team

As they circled the track, Katja told Cheryl more about the team leader role and how the opportunity had come about. The pair passed a bank of windows overlooking the now-dark parking lot as Katja described the composition of the team. Roles included sales training educator, human factors engineer, field development manager, and additional players from clinical, regulatory, quality assurance, and sourcing. In addition, the team would need to seek the approval of senior executives, including Dr. Howell, a key opinion leader (KOL) advising the launch.

“There are always a lot of people who have to work together on something this complex,” said Katja. “The coordination across departments, functions, and countries does concern me, if I’m being honest.”

“Well, it probably should,” said Cheryl. “A team that large is tricky enough, but when you add in the fact that the people are distributed around the world and connecting mostly virtually, it changes the way you work together. Believe me; I’ve been there.”

Katja cocked her head in question, “Oh yeah? What? Tell me; I need to know.”

Cheryl’s Lessons Learned

Cheryl took a deep breath, “About a year and a half ago I was on a team that launched a new product for the cardiac group. The team did a lot of work virtually, and it was ... challenging. Working with a team of people dispersed across time zones, countries, even continents was rocky at times.”

Katja slowed her pace slightly. “How so?” she ventured.

“Don’t get me wrong,” continued Cheryl, “We got through it and managed, but it seemed so much harder than it needed to be. Looking back on it now, I can recall a number of issues that seemed to cause problems. Some of them might have been unique to the project and the people, but other things seemed more related to the fact that we weren’t all together in the same place to work on things. Or maybe it was a combination. In short, it was kind of a mess at times.”

“Ugh. But why would that be?” asked Katja. “You said this was just a year and a half ago. Not ten or twenty years ago. I mean, if it was 2014, you had decent technology for communication, file sharing, and all that, right?”

TEAM MEMBERS (fictional)



Katja Wuttig, Market Development Manger

Leads team activities related to product launch and marketing. Reports progress to executive leadership.

Location: Minneapolis, MN



Key Opinion Leader

Physician who presents to other physicians who will provide the product to patients.

Location: Boston, MA



Regulatory Managers

Report on data integrity assessment. Provide integration plan and strategy for gaining FDA approval. Collaborate with clinical leads to develop required clinical evidence for inclusion in marketing material.

Location: Minneapolis, MN



Clinical Leads

Align with regulatory on assessment and data integrity report. Use clinical evidence to formulate how the product is utilized for efficacy. Collaborate with regulatory to develop required clinical evidence for inclusion in marketing material.

Locations: Memphis, TN; Tolochenaz, Switzerland



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continues



“Well, yes, we did. That was actually part of the problem: Everyone thinks that because we have all this technology, it will be easy, or at least easier. Most of us assumed that would be the case.

“But if you ask me what technology tools worked well, I’d say, ‘WebEx, Box, conference calls, and email,’” Cheryl paused.

“That’s good!” said Katja, “What technologies didn’t work so well?”

“WebEx, Box, conference calls, and email,” answered Cheryl. “The technology didn’t provide a cure-all for painful meetings, miscommunication, problems that could have been avoided, delays, you name it.”

Katja grimaced, “All right. Let’s hear it.”

“For example, meetings were hard,” Cheryl continued. “The first few meetings went something like this: We’d schedule a call at a particular time and send out a meeting invitation. Sometimes the invitation would have the dial-in number and code in it, but only sometimes. So people would be searching for the number in their email, trying to track it down. You know how it can be. At least a couple of times whoever set up the call used a teleconference service that couldn’t be accessed by everyone dialing in internationally. We got that worked out, but then, even when everyone gets on the calls, there’s all that nonsense at the beginning with the system beeping every time someone joins or drops off, and with the number of people we had, it was tricky to keep track of who all was on the call. Discussion was harder because people didn’t know who was speaking half the time, or they’d interrupt each other because they couldn’t see visual cues.

“Some people always joined the call late, too, and we’d more or less start over for them. And about a month into things, some of us noticed that team members from certain countries seemed to join late more often than not. Eventually we figured out that was a cultural thing: For them, meetings always started ten to fifteen minutes after the posted time to allow people to get from one thing to another. It was normal and expected. Turned out they kept wondering why the Americans on the team were so bent on starting as soon as the clock struck the appointed hour.”

“Wow. Interesting,” said Katja, “I hadn’t thought of that.”

“That’s just one example,” said Cheryl. “Just finding meeting times was a chore too. The time differences meant some people were calling in late at night or early in the morning, from home in their pajamas and half awake. I mean, Australia sleeps while the U.S. works, and vice versa.

“The meetings themselves were often unproductive too. What time wasn’t wasted on the logistics and technology was often unstructured and aimless. Who was supposed to be leading the call? Who was tak-

TEAM MEMBERS (fictional)



Product Quality Engineers

Ensure consistency in product delivery, performance, and appropriate functionality.

Locations: Austin, TX; China



Sourcing Manager

Collaborates with product quality engineers to select contract manufacturers for production and assembly.

Locations: China



Quality Assurance Manager

Plans and reports on quality assessment and integrity, including product packaging, shipping, and default reporting.

Location: Bangalore, India



Sales Training Educator

Trains all field personnel including sales team and clinical team.

Location: Memphis, TN



Field Development Manager

Delivers the selling techniques and messages to field sales force.

Location: Charleston, SC



Human Factors Engineer

Researches how end users actually utilize the product, reports on any differences between actual and intended use.

Location: Santa Rosa, CA



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ing notes or making sure decisions and action items got recorded? It changed from call to call, or wasn't clear because people had different ideas about who was responsible. Some people assumed that the meeting topic dictated these roles; others thought project management was handling it all and distributing the results.

"One team insisted that every call be recorded and transcribed, which I thought was crazy. I mean, the only thing worse than sitting through a dysfunctional conference call has got to be reading a transcript of a dysfunctional conference call."

"What team was that?" asked Katja.

"I don't remember. Legal? Regulatory maybe? Some other players decided they could multi-task during the call, but they'd lose focus and kind of drop out of the conversation because they're reading other email or whatever."

"It wasn't all bad, was it?" pleaded Katja.

"No, of course not!" said Cheryl. "There were some definite advantages, too. For example, with people from different cultures and backgrounds, we got more diversity of thought when coming up with ideas and strategies. That was great. The thing to watch out for there is that people from some countries may be more aggressive on the phone than others. If there are language barriers or people from less aggressive cultures, there's a chance their voices don't get heard."

"Okay, good. That's helpful," said Katja. "What else?"

"Well, documentation became an issue, especially as the project went on and the number of files grew. In addition to document organization, we had some version control issues due to differing file naming conventions or occasional overwriting. If someone missed a meeting and wanted to catch up later with the minutes, they weren't always able to because meeting recaps were inconsistent and not everyone used the centralized system for project updates.

"Oh, and one that surprised me was that team members in certain departments and in certain countries couldn't get access to all the documents due to regulatory restrictions."

"That's surprising," remarked Katja.

"Yep. But that's the way it is sometimes. So back to the point about technology making these virtual teams and projects possible – it's part of the equation, yes, but not the answer to everything. Even when there is a technology solution, there can be resistance to using it. People say, 'Ugh! Do we really have to learn another tool? Will it be worth it?' Because we've all been told that before: that some tool is going to save the day but then not enough people use it and it's back to email, PowerPoint, spreadsheets, and the other old standbys."

Cheryl and Katja stopped walking and paused at the drinking fountain to fill their water bottles.

Katja sighed and stared off into the distance. "Wow. Okay, I've got to think more

KEY TASKS FOR KATJA'S TEAM

Planning

- » Create master launch plan; gain input from senior management and executive sponsors
- » Engage the right people at the right time from the right functions and build consensus on deliverables, timelines, and objectives
- » Develop launch plan schedule, identify milestones, establish issue tracking and reporting systems
- » Determine key objectives and timelines for each functional area

Integration

- » Transition new product from development phase to business operations teams
- » Translate due diligence information into integration plan

Rollout

- » Conduct market analysis and segmentation
- » Determine pricing strategy
- » Plan for phase in/phase out, based on demand forecast
- » Identify target accounts
- » Develop sales training materials, plan, and schedules
- » Develop customer (physician) training materials and plan
- » Define PR and social media strategies; develop promotional materials and other publications



about these things. Thanks for the advice.”

“Sorry if I burst your bubble,” said Cheryl, “But better to know ahead of time than to find out once you’re knee-deep in it, right?”

“Exactly,” agreed Katja. “I definitely appreciate it.”

“You’ll be fine, Katja. I know you’ll figure it out. You might check with the education and training group to see if they have recommended tools or best practices for virtual team work. I thought I heard something about Medtronic adopting some standards.”

“Let’s hope so,” said Katja.

“Or maybe your team will be the pilot project that sets the standard for the rest of the company,” suggested Cheryl. “Seriously, if you can get through that class we just did, you can do this.” She grinned and elbowed Katja conspiratorially.

“Ha! Right,” said Katja, smiling slightly. She took a last swig of water from her bottle and snapped the cap shut.

MEDTRONIC BUSINESSES
FY 2015

Cardiac and Vascular

\$9.4B (46%)

- Aortic and Peripheral Vascular*
- Cardiac Rhythm and Heart Failure*
- Coronary and Structural Heart*

Restorative Therapies

\$6.7B (33%)

- Neuromodulation*
- Neurovascular*
- Orthopedics*
- Spine*
- Surgical Technologies*

Minimally Invasive Therapies

\$2.4B (12%)

- Early Technologies*
- Patient Monitoring and Recovery*
- Surgical Innovations*

Diabetes Group

\$1.8B (9%)

- Diabetes Services and Solutions*
- Intensive Insulin Management*
- Non-Intensive Diabetes Therapies*

Information provided by Medtronic.



Case Questions to Consider

- » What combination of processes and protocols should Katja institute to ensure effective communication and collaboration among team members?
- » Should the team adopt new tools or technologies to facilitate their work? If so, what specifically should they use, and for what purpose(s)?
- » Should Katja institute formal roles for her virtual team members for this project? If so, how should these roles be defined and governed? Explain how each relates to this team's effectiveness.
- » What are the possible dimensions of failure for virtual team projects such as the one Katja is about to lead? How can they be overcome?

ABOUT THE CASE

Created for the 2016 CoMIS Case Competition at the University of Minnesota. Developed by Ravi Bapna, Norm Chervany, Svjatlana Madzar, and Lee C. Thomas for the University of Minnesota, in collaboration with Kelly Robinson and Brett Treptow from Medtronic. Written by Lee C. Thomas.

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