Save the World, Save Your Team

Below is a list of ideas and thoughts related to Pandemic and Agile development. You may have your own thoughts and additional idea – this list is just to get you started and remind you of some of the themes we discussed if you choose to use this with your teams. If you do think of additional parallels, I'd love to hear them! Please feel free to reach out on Twitter (@cddiller) or LinkedIn (cddiller).

-Chris Diller, Agile Coach

- All team members have the ability to do core tasks
    - Treat disease, Move, Find a cure, Build a research center
- Team members also have a specific depth of knowledge in a particular area, but this does not preclude others from participating
    - All can treat disease, but Medic is *better* at treating disease
        - Does this mean that ONLY the Medic SHOULD treat disease? What would happen if this is how you operated? Have you ever been on a team with a Medic?
    - All can find a cure, but Scientist is *faster* at finding a cure
        - Does this mean that ONLY the Scientist SHOULD be involved in finding a cure? Are there other ways to SUPPORT this person and allow them to be successful at this?
    - Dispatcher has ability to move other players (enabling them to be more successful)
        - Is moving other players akin to removing the obstacles that prevent them from getting where they want to go? Or putting them into the best position to be successful? These tasks are frequently done while foregoing personal glory… Is there a role in Scrum / Agile that similarly removes impediments and sets the team up for success?
- There's a constant element of planning, and then adjusting those plans as circumstances change.
    - The game requires you to deal with the reality of your situation
    - Unlike at work where we are constantly trying to change reality
- There's an element of iteration or working in cycles (each player turn or each set of player turns).
- Each player turn is like a Daily Standup
    - What if we didn't communicate for 2 turns?
- Player turns (or a round of turns) are analogous to a Sprint
- Final product (4 cured diseases) is an MVP
    - Eradication is nice, but not necessary
- Treating just one disease cube vs wiping it out of a city is another MVP
- Planning future turns is analogous to continuous Backlog Refinement
- Future plans can change based on the cards drawn (and plans must be adapted)
- Multiple players working together to solve specific problem
    - Both treating disease in a region of the world is similar to pair- or mob-programming
    - Exchanging cards to find a cure is similar to swarming
- Outbreaks are like bugs that require attention and divert from main goal of finding a cure
    - Too many outbreaks and you lose due to worldwide panic is analogous to customers not buying your product due to on-going quality issues
- Group discussion of what to do before each turn analogous to Sprint Planning
- Deadlines (running out of cards) are a reality that must be dealt with
    - Sometimes delaying delivery negates any potential value of the product
- Visual indicators that clearly show status to the team and any interested observer

What are some questions you can ask your team to elicit the thoughts / mindsets from above?