How to Participate in the Session

• If you have called in by phone, you can “raise your hand” by selecting the hand icon.

• If you would like to call in by phone, select the “phone” icon to receive call in information.

• Select the “Chat Bubble” icon to show the comments box and type your comments and questions in the chat box throughout the session.
The Collaborative

- Alleghany Memorial Hospital
- Angel Medical Center
- Cape Fear Valley – Bladen County Hospital
- Cannon Memorial Hospital
- Chatham Hospital
- Dosher Memorial Hospital
- FirstHealth Montgomery Memorial Hospital
- Murphy Medical Center
- Pender Memorial Hospital
- Pioneer Community Hospital of Stokes
- St. Luke’s Hospital
- Washington County Hospital
Site Visits Completed!
The Use of TeamSTEPPS® in Critical Access Hospitals
Making the Case

The publication of *To Err is Human* brought unprecedented attention to the problem of medical errors, which rank among the leading causes of death and injury in the United States.

For CAHs:

- Choice of strategies to improve patient safety is critical
- Limited quality improvement resources exist
- Selection of initiatives that will have the greatest value in terms of safety improvement is essential
- Challenge exists of fitting strategies and initiatives to the small rural hospital context
Teamwork and team training have become a standard, evidence-based intervention in small and larger hospitals alike.

TeamSTEPPS® is a training program developed and disseminated by the Department of Defense and the Agency for Healthcare Research and Quality.
What the Research Reveals

70% of all medical errors can be attributed to breakdowns in healthcare team interactions

Key Findings

- State Flex programs and CAH’s have successfully adapted and used TeamSTEPPS® to improve patient safety through team training.
- The evidence indicates that team training increases communications and reduces error.
- The success of TeamSTEPPS® depends on having appropriate expectations and identifying and cultivating internal champions.
- Building a patient safety infrastructure helps sustain teamwork.
What is Teamwork?

Teamwork is NOT:
• An automatic consequence of grouping individuals together
• A requirement that individuals work together on a permanent basis

Teamwork IS:
• Sustained by a shared set of knowledge, skills, and attitudes
Core Competencies of Teamwork

- Team leadership
- Mutual performance monitoring
- Back-up behavior
- Adaptability
- Team orientation
The “Birth” of TeamSTEPPS®

TeamSTEPPS® was designed to improve participant knowledge of, skills in, and attitudes toward…

• Team leadership,
• Mutual support,
• Situation monitoring, and
• Communication

… in order to enhance the quality, safety and efficiency of health care.
Regardless of the distinctive conditions found in small rural hospitals...

- organizational and interpersonal barriers that hinder effective teamwork such as the inter-professional nature of healthcare delivery
- the differing communication styles that result from the disparate training of health professionals
- the hierarchical decision making processes that characterize the medical profession

...remain relevant in the rural context.
Examples of TeamSTEPPS® in CAHs

St. Charles Madras in Madras, Oregon

- Improved communication in the emergency department
- Improved patient/family engagement
- Reduction in errors
Examples of TeamSTEPPS® in CAHs

Grand Ronde Hospital in La Grande, Oregon

• Reduction in patient complaints in the ED
• Reduction in patients left without being seen in ED
• Improvement in STEMI care in the ED
Barriers to Team Performance

- Inconsistency in team membership
- Lack of time
- Lack of information sharing
- Hierarchy
- Defensiveness
- Conventional thinking
- Varying communication styles

- Conflict
- Lack of coordination and follow-up
- Distractions
- Fatigue
- Workload
- Misinterpretation of cues
- Lack of role clarity
What Makes Up Team Performance?

- **Knowledge**
  - Cognitions
  - “Think”

- **Skills**
  - Behaviors
  - “Do”

- **Attitudes**
  - Affect
  - “Feel”
Outcomes of Team Competencies

Knowledge
• Shared Mental Model

Attitudes
• Mutual Trust
• Team Orientation

Performance
• Adaptability
• Accuracy
• Productivity
• Efficiency
• Safety
High-Performing Teams

Teams that perform well:

- Hold shared mental models
- Have clear roles and responsibilities
- Have clear, valued, and shared vision
- Optimize resources
- Have strong team leadership
- Engage in a regular discipline of feedback
- Develop a strong sense of collective trust and confidence
- Create mechanisms to cooperate and coordinate
- Manage and optimize performance outcomes

(Salas, et al., 2004)
• Effective communication skills are vital for patient safety

• Enables team members to effectively relay information

• The mode by which most TeamSTEPPS® strategies and tools are executed
Standards of Effective Communication

Complete
- Communicate all relevant information

Clear
- Convey information that is plainly understood

Brief
- Communicate the information in a concise manner

Timely
- Offer and request information in an appropriate timeframe
- Verify authenticity
- Validate or acknowledge information
Communication Challenges

- Language barrier
- Distractions
- Physical proximity
- Personalities
- Workload
- Varying communication styles
- Conflict
- Lack of information verification
- Shift change
Information Exchange Strategies

Communication
Effectively exchange information among team members, regardless of how it is communicated.

- SBAR
- Call-out
- Check-back
- Handoff
SBAR Provides…

A framework for team members to effectively communicate information to one another

Communicate the following information:

- **Situation**—What is going on with the patient?
- **Background**—What is the clinical background or context?
- **Assessment**—What do I think the problem is?
- **Recommendation**—What would I recommend?
Call-Out is…

A strategy used to communicate important or critical information

- It informs all team members simultaneously during emergency situations
- It helps team members anticipate next steps
Check-Back is...

Sender initiates message

Sender verifies message was received

Receiver accepts message, provides feedback confirmation

COMMUNICATION

CLOSED

LOOP
Handoff is...

The transfer of information during transitions in care across the continuum

- Includes an opportunity to ask questions, clarify, and confirm
Handoff Consists of…

• Transfer of responsibility and accountability
• Clarity of information
• Verbal communication of information
• Acknowledgment by receiver
• Opportunity to review
“I Pass the Baton”

<table>
<thead>
<tr>
<th>Introduction:</th>
<th>Introduce yourself and your role/job (include patient)</th>
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<tbody>
<tr>
<td>Patient:</td>
<td>Identifiers, age, sex, location</td>
</tr>
<tr>
<td>Assessment:</td>
<td>Present chief complaint, vital signs, symptoms, and diagnosis</td>
</tr>
<tr>
<td>Situation:</td>
<td>Current status/circumstances, including code status, level of uncertainty, recent changes, and response to treatment</td>
</tr>
<tr>
<td>Safety:</td>
<td>Critical lab values/reports, socioeconomic factors, allergies, and alerts (falls, isolation, etc.)</td>
</tr>
<tr>
<td>Background:</td>
<td>Comorbidities, previous episodes, current medications, and family history</td>
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<tr>
<td>Actions:</td>
<td>What actions were taken or are required? Provide brief rationale</td>
</tr>
<tr>
<td>Timing:</td>
<td>Level of urgency and explicit timing and prioritization of actions</td>
</tr>
<tr>
<td>Ownership:</td>
<td>Who is responsible (nurse/doctor/team)? Include patient/family responsibilities</td>
</tr>
<tr>
<td>Next:</td>
<td>What will happen next? Anticipated changes? What is the plan? Are there contingency plans?</td>
</tr>
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Leadership

- Holds a teamwork system together
- Ensures a plan is conveyed, reviewed, and updated
- Facilitated through communication, continuous monitoring of the situation, and fostering of an environment of mutual support
Effective Team Leaders

• Define, assign, share, monitor, and modify a plan
• Review the team’s performance
• Establish “rules of engagement”
• Manage and allocate resources effectively
• Provide feedback regarding assigned responsibilities and progress toward the goal
• Facilitate information sharing
• Encourage team members to assist one another
• Facilitate conflict resolution
• Model effective teamwork
A team briefing is an effective strategy for sharing the plan

**Briefs should help:**

- Form the team
- Designate team roles and responsibilities
- Establish climate and goals
- Engage team in short and long-term planning
During the brief, the team should address the following questions:

- Who is on the team?
- All members understand and agree upon goals?
- Roles and responsibilities are understood?
- What is our plan of care?
- Staff and provider’s availability throughout the shift?
- Workload among team members?
- Availability of resources?
Huddle

Monitoring & Modifying the Plan:

- Employs ad hoc planning to re-establish situational awareness, reinforce plans that are already in place, and assess any need to adjust the plan.
- Gathers team members to review patient data and decide on a course of action.
- Can be requested by any team member at any time.
- Uses the SBAR tool frequently.
Debrief

Reviewing the Team’s Performance:

• Brief, informal information exchange and feedback sessions
• Occur after an event or shift
• Designed to improve teamwork skills
• Designed to improve outcomes
  • An accurate recounting of key events
  • Analysis of why the event occurred
  • Discussion of lessons learned and reinforcement of successes
  • Revised plan to incorporate lessons learned
During the debrief, the team should address the following questions:

- Communication clear?
- Roles and responsibilities understood?
- Situation awareness maintained?
- Workload distribution equitable?
- Task assistance requested or offered?
- Were errors made or avoided? Availability of resources?
- What went well, what should change, what should improve?
### BARRIERS
- Inconsistency in Team Membership
- Lack of Time
- Lack of Information Sharing
- Hierarchy
- Defensiveness
- Conventional Thinking
- Complacency
- Varying Communication Styles
- Conflict
- Lack of Coordination and Follow-up With Coworkers
- Distractions
- Fatigue
- Workload
- Misinterpretation of Cues
- Lack of Role Clarity

### TOOLS & STRATEGIES
- Communication
  - SBAR
  - Call-Out
  - Check-Back
  - Handoff
- Leading Teams
  - Brief
  - Huddle
  - Debrief

### OUTCOMES
- Shared Mental Model
- Adaptability
- Team Orientation
- Mutual Trust
- Team Performance
- *Patient Safety!!*
• **July 6th** – Submission Deadline for HCAHPS Measures to QualityNet

• **July 15th** – Submission Deadline for EDTC Measures to NC Quality Center QDS

• **August 19th** – In-Person Collaborative meeting in Winston-Salem
Thank You!

QUESTIONS?
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<thead>
<tr>
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