



CAH Quality Improvement and Care Transitions Collaborative

TeamSTEPPS® Series: Part I

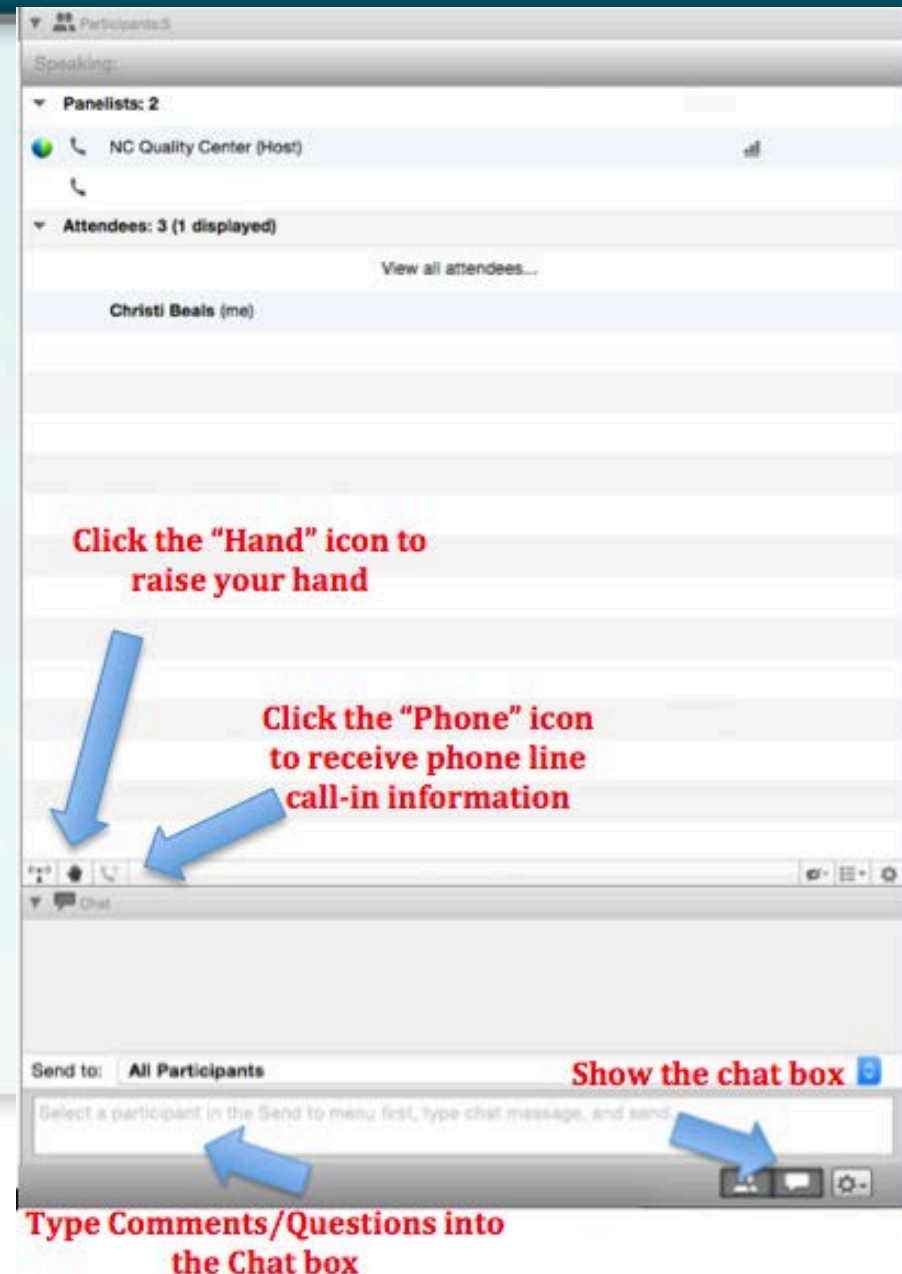
June 9, 2016



North Carolina
Quality Center

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
- Doshier 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



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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

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.

Relevance of TeamSTEPPS® in CAHs

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

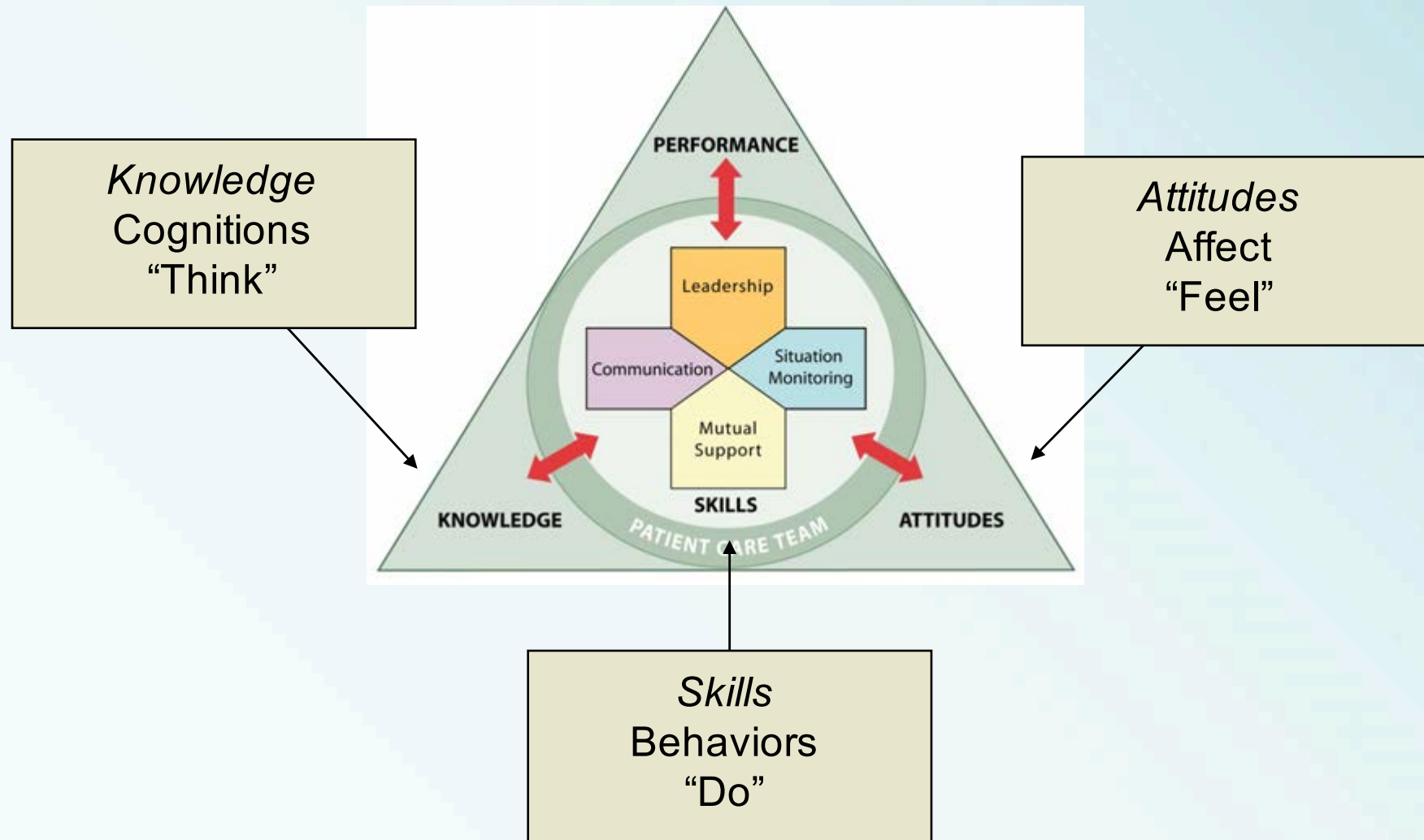


- Reduction in patient complaints in the ED
- Reduction in patients left without being seen in ED
- Improvement in STEMI care in the ED

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?



Outcomes of Team Competencies

Knowledge

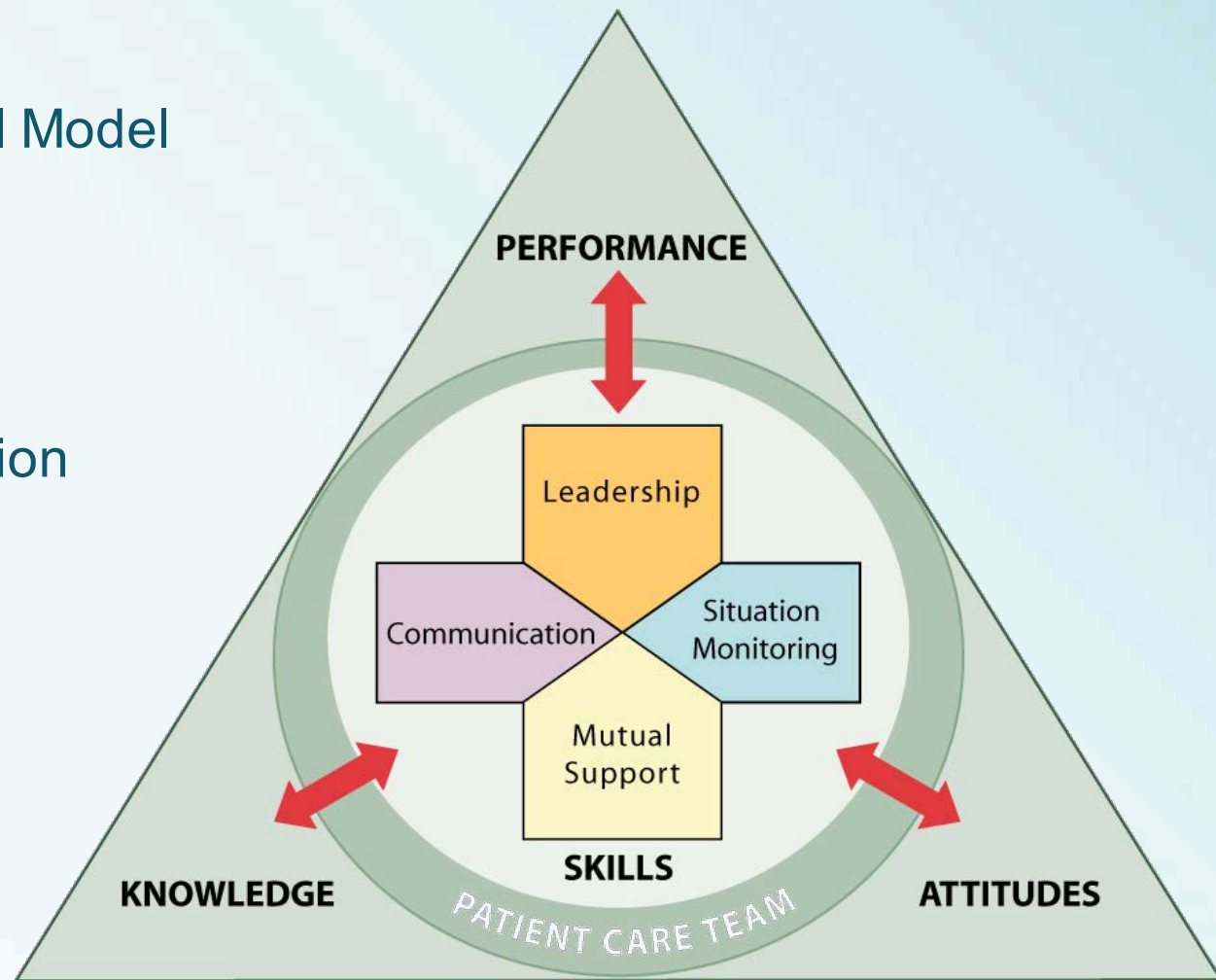
- Shared Mental Model

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)

Communication

- 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.

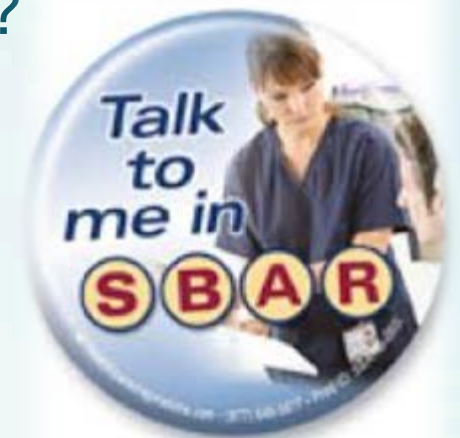


SBAR Provides...

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?



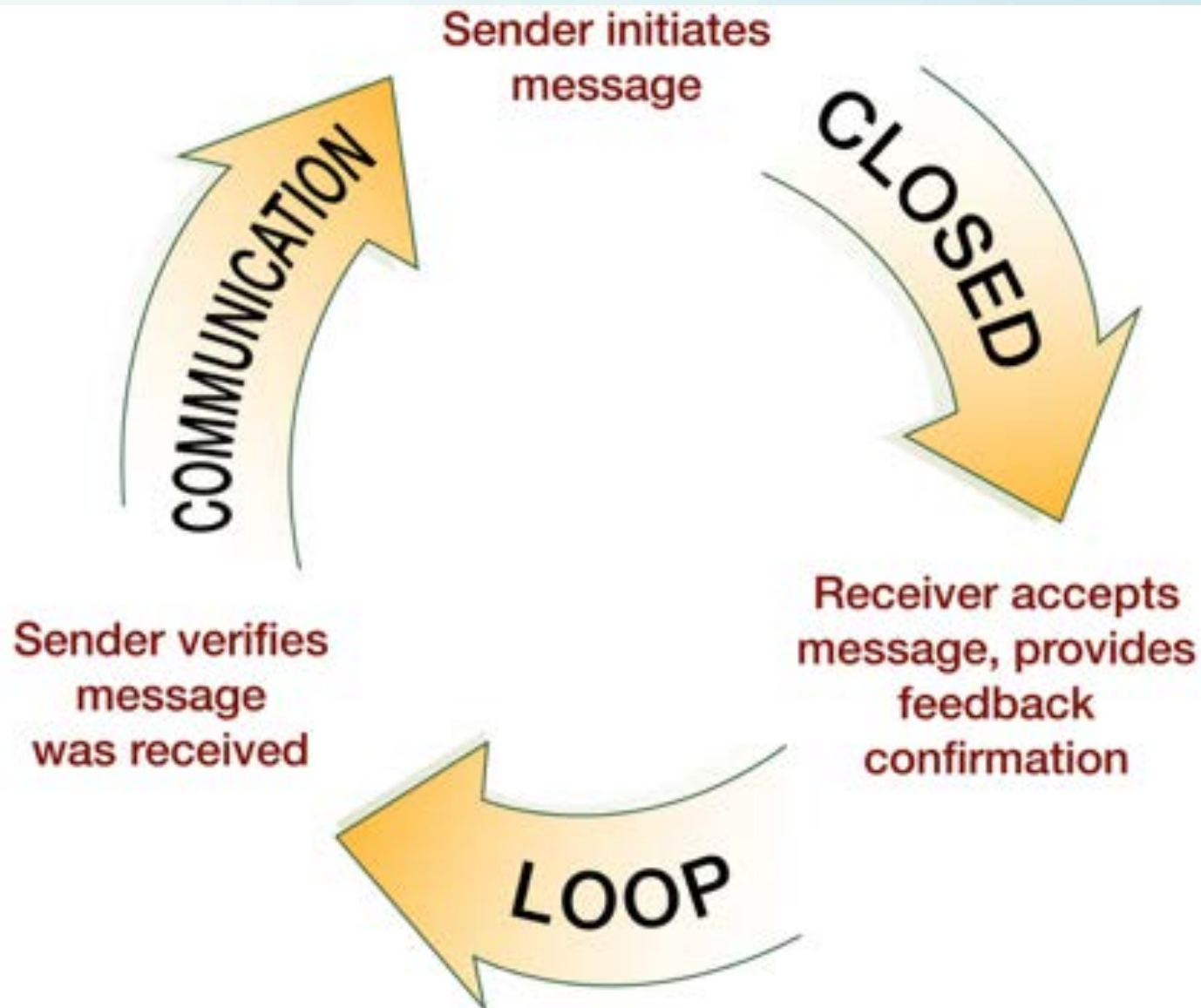
Call-Out is...

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...



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”



Introduction: Introduce yourself and your role/job (include patient)

Patient: Identifiers, age, sex, location

Assessment: Present chief complaint, vital signs, symptoms, and diagnosis

Situation: Current status/circumstances, including code status, level of uncertainty, recent changes, and response to treatment

Safety: Critical lab values/reports, socioeconomic factors, allergies, and alerts (falls, isolation, etc.)

the

Background: Comorbidities, previous episodes, current medications, and family history

Actions: What actions were taken or are required? Provide brief rationale

Timing: Level of urgency and explicit timing and prioritization of actions

Ownership: Who is responsible (nurse/doctor/team)?
Include patient/family responsibilities

Next: What will happen next? Anticipated changes?
What is the plan? Are there contingency plans?

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

Brief

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

Brief Checklist

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



Debrief Checklist

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?



Tools & Strategies Summary

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!!*



Reminder

- **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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