

Teaching Teamwork Using an Evidence Based Approach

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Introduction

- Team work is the backbone of geriatrics.
- 1995, the JAHF created GITT the 1st structured team training in American health care.
- Patient safety movement brought together the DOD & AHRQ to develop evidence-based teamwork system in 2006.
- 20 years of research and lessons supporting Team Strategies and Tools to Enhance Performance and Patient Safety (TeamSTEPPS).



Objectives

- Explain some of the evidence supporting TeamSTEPPS
- Complete part of a training module
- Describe the scope of tools in Team STEPPS
- Some adaptations of TeamSTEPPS used at UNMC

What Do Team Work and Pornography Have in Common?

You know it when you
see it !

Objective 1

The evidence supporting
Team STEPPS



Background: what is TeamSTEPPS?

- STEPPS= Strategies and Tools to Enhance Performance and Patient Safety
- Optimize patient outcomes by improving communication and teamwork skills among HCPs.
- A comprehensive set of materials and curriculum to integrate teamwork principles into any health care system.



Evidence Supporting TeamSTEPPS

- Research: teamwork is defined by interrelated KSAs that facilitate coordinated, adaptive performance, supporting one's teammates, objectives, and mission.
- Knowledge and skill are not enough
- Teamwork depends upon ability to:
 - Anticipate needs of others.
 - Adjust to each other's actions & changing environment.

Team KSAs and Coordinating Mechanisms

- Team leadership
- Mutual performance monitoring
- Backup behavior
- Adaptability

- Team orientation
- Shared mental models
- Mutual trust
- Closed loop communication



Team Training: does it work?

- Salas metanalysis (hum factors 50:903-933, 2008)
 - Moderate, positive relationships exist between team training interventions and improving :
 - cognitive outcomes,
 - affective outcomes,
 - teamwork processes,
 - and performance outcomes.

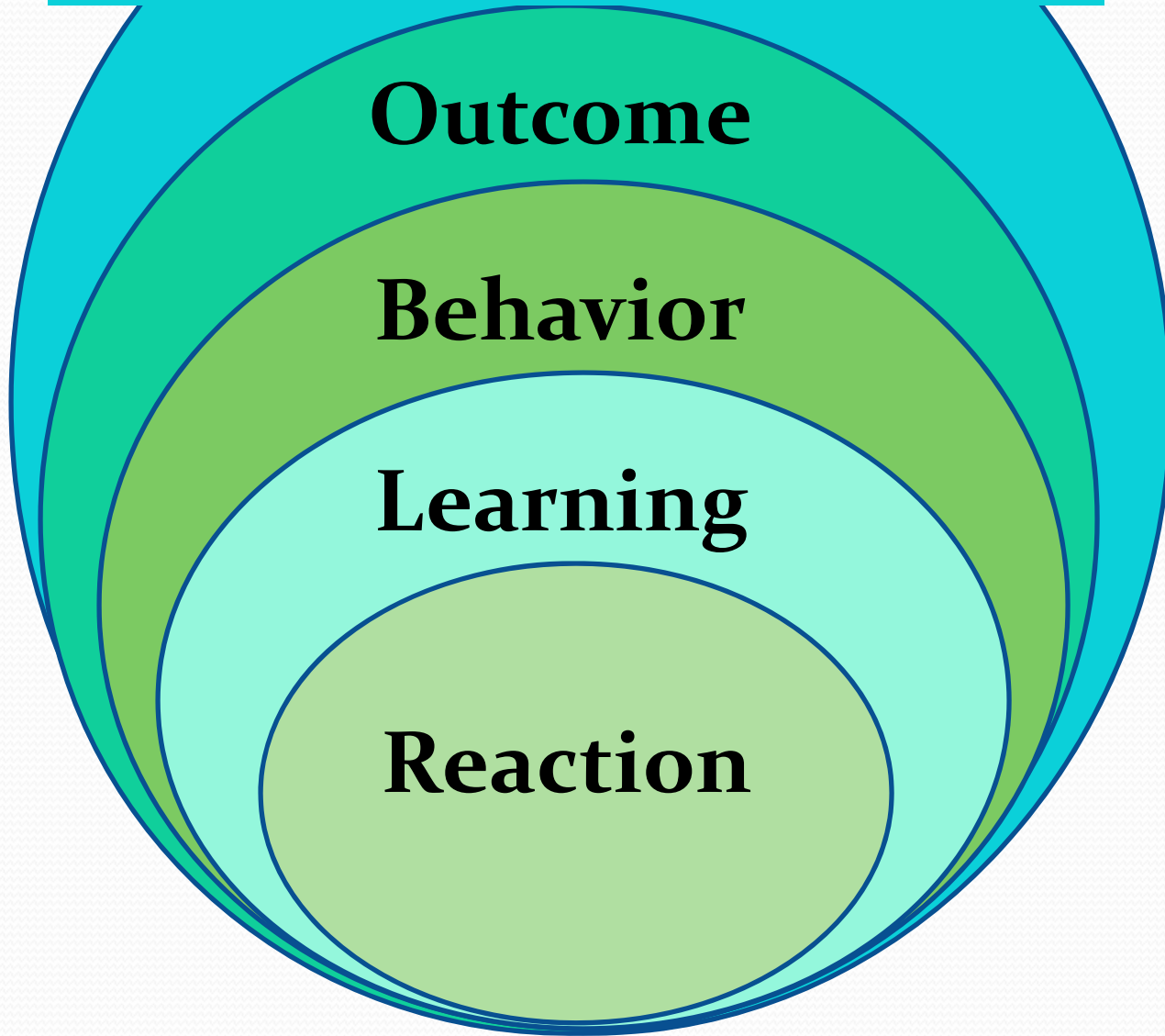
Return on Investment

Outcome

Behavior

Learning

Reaction



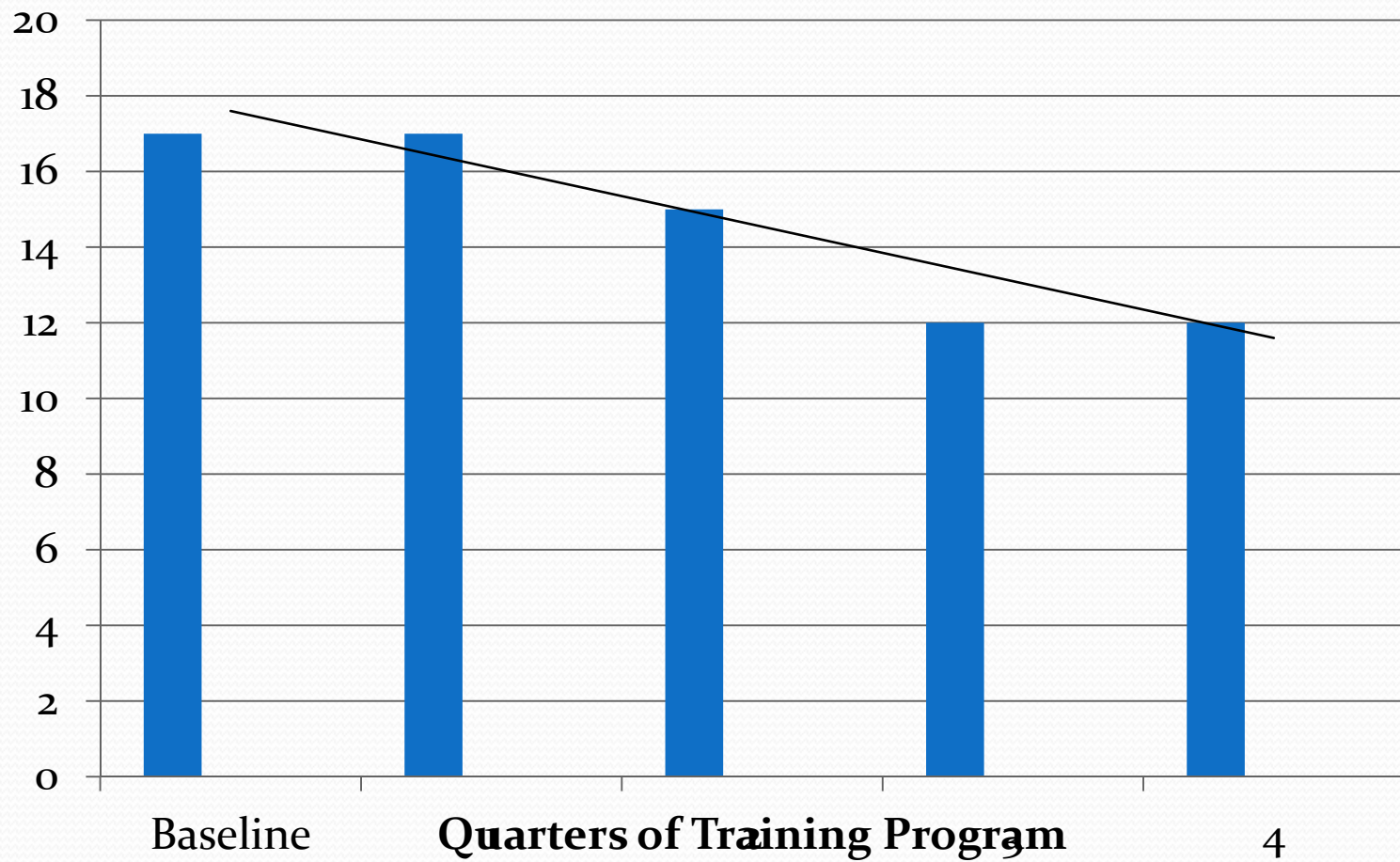


Example Improved Outcomes

- Health care studies with patient level outcomes:
 - Reduced nosocomial infection
 - Decreased perinatal morbidity
 - Reduced surgical mortality
 - Reduced rate of adverse drug events
 - Improved medication reconciliation at patient admission

See bibliography

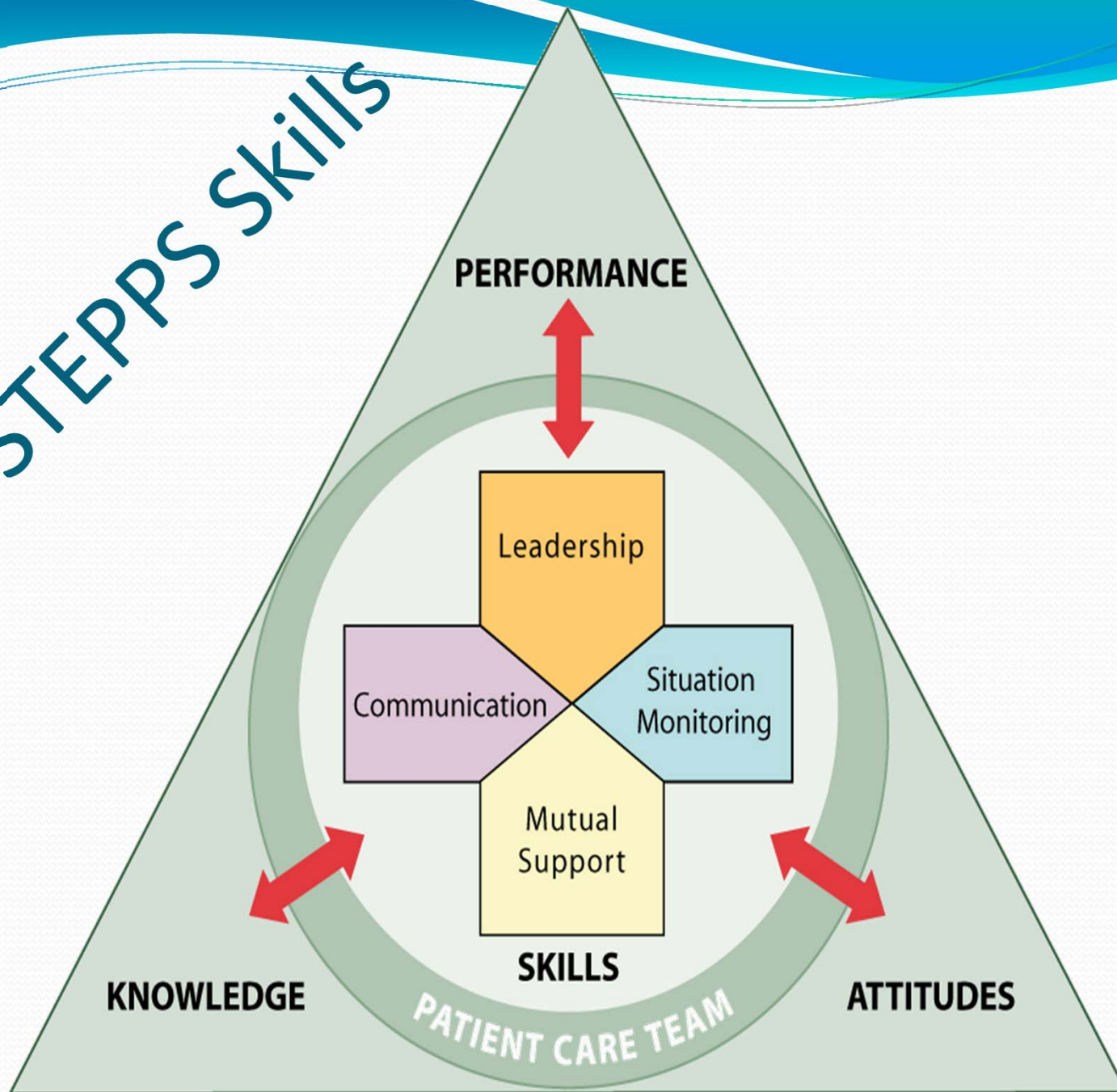
Quarters of Risk Adjusted Surgical Mortality Rate



Objective 2

A TASTE OF TeamSTEPPS
(complete part of a training module)

Team STEPPS Skills





Leadership

Leadership is motivating people to work together collaboratively to accomplish tasks

- **Shared leadership**
- **Characteristics of effective leadership:**
 - Role modeling and open sharing of information
 - Constructive and timely feedback
 - Facilitation of briefs, huddles, debriefs, and conflict resolution

Slide 15

A1

Idea that leadership is not a permanent fixture and can be transient between team members?

Administrator, 5/13/2013



Leadership Strategies

- Briefs – planning
- Huddles – problem solving
- Debriefs – process improvement/learning

*Leaders assemble the team
and facilitate team events*

But remember...

Anyone can request a brief, huddle, or debrief



Debrief

Process Improvement

- Quick, informal information exchange & feedback
- Occur after an event or clinic session
- Designed to improve teamwork skills
- Designed to improve outcomes
 - An accurate reconstruction of key events
 - Analysis of what did/did not work and why
 - What should be done differently next time
- Recognize good team contributions or catches



Situation Monitoring

Process of *actively scanning* behaviors and actions to assess elements of the situation or environment

- Fosters mutual respect and team accountability
- Provides safety net for team and patient
- Includes cross-monitoring

Cross-Monitoring is...

A process of monitoring unfolding actions against the established plan of care to avoid errors

- Helps maintain accurate situation awareness
- Way of “watching each other’s back”
- Gives team members a way to monitor patient care and give constructive feedback

Mutual performance monitoring has been shown to be an important team competency.

(McIntyre and Salas, 1995)



Cross Monitoring

- Awareness of workload spikes and stress levels among team members
- Freedom to speak up when concerned for errors/unsafe behaviors



Mutual Support: is the essence of teamwork

- Includes the ability to anticipate needs of other team members through knowledge of their tasks and responsibilities.
- Protects team members from work overload that may reduce effectiveness and increase risk of error



Task Assistance


Team members foster a climate in which it is expected that assistance will be actively *sought* and *offered* as a method for reducing the occurrence of error.

*“In support of patient safety,
it’s expected!”*



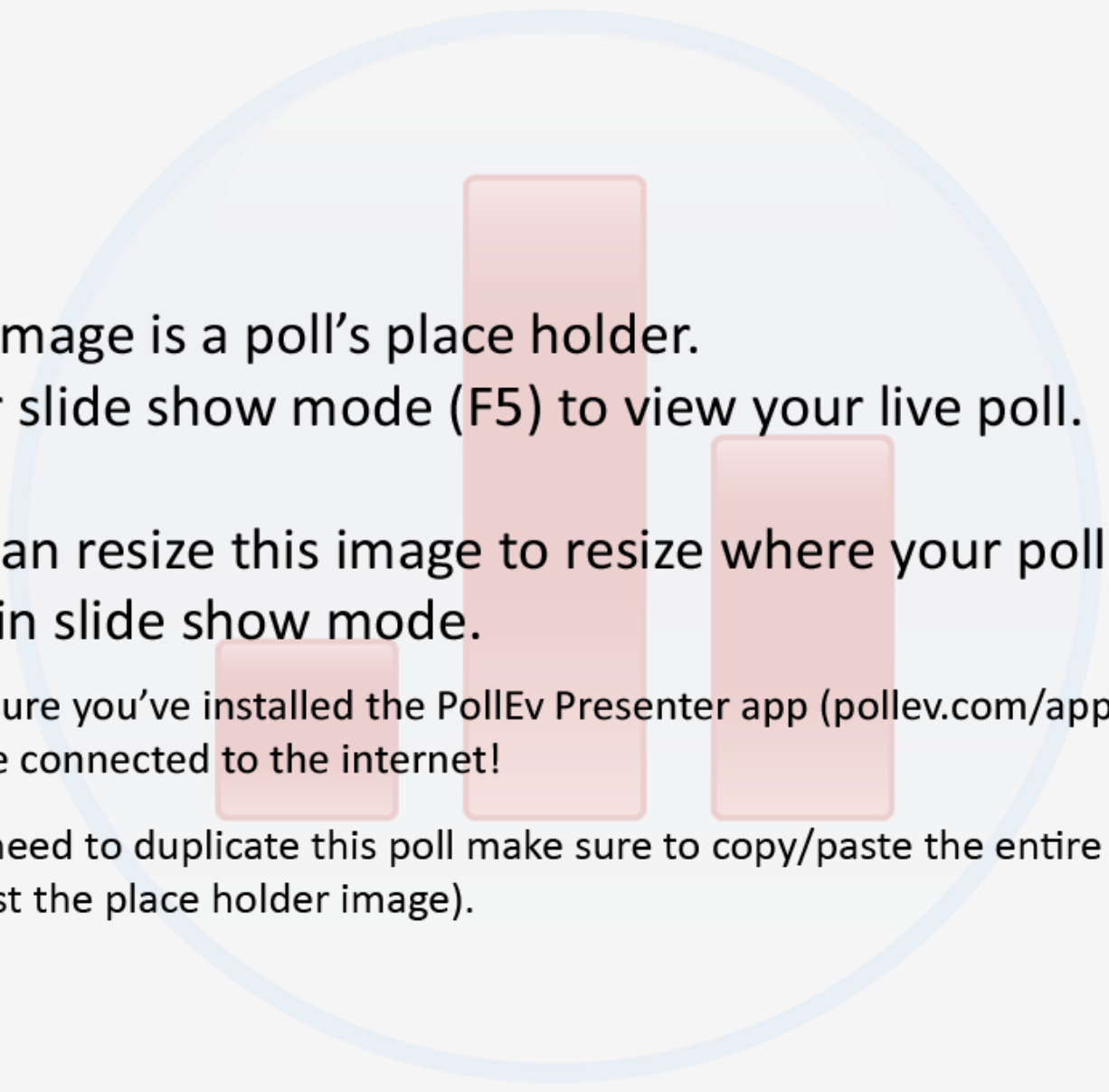
The Assertive Statement

- Respect and support authority
- Clearly assert concerns and suggestions
- Use an assertive statement (**nonthreatening and ensures that critical information is addressed**)
 - Make an opening
 - State your concern
 - Explain the problem
 - Offer a solution
 - Reach an agreement



Vote with your smart phones as you see each of the following team tools or behaviors:

1. Leadership (shared/situational)
2. Situation monitoring
3. Mutual support
4. Assertive statement
5. Debrief



This image is a poll's place holder.
Enter slide show mode (F5) to view your live poll.

You can resize this image to resize where your poll will load in slide show mode.

Make sure you've installed the PollEv Presenter app (pollev.com/app) and are connected to the internet!

If you need to duplicate this poll make sure to copy/paste the entire slide (not just the place holder image).

Objective 3

Describe the scope of tools in Team STEPPS & their use in training staff, students and faculty.



The Scope: free or at cost

- A comprehensive set of materials and curriculum to integrate teamwork principles into any health care system.
 - Slide sets
 - Videos
 - Instructors guides
 - Evaluation tools
 - Readiness assessment

Objective 4

Some adaptations of Team
STEPPS used at UNMC



TeamSTEPPS: Basic Training

- Internal Medicine Residents and staff at resident run medical home: with geriatric case scenarios
- Geriatric medicine faculty, fellows, and staff at geriatric medical home: with geriatric case scenarios
- Update training for new personnel from both clinics, 1 yr later
- Resident Quality Committee, faculty, program directors with inpatient geriatric patient scenario

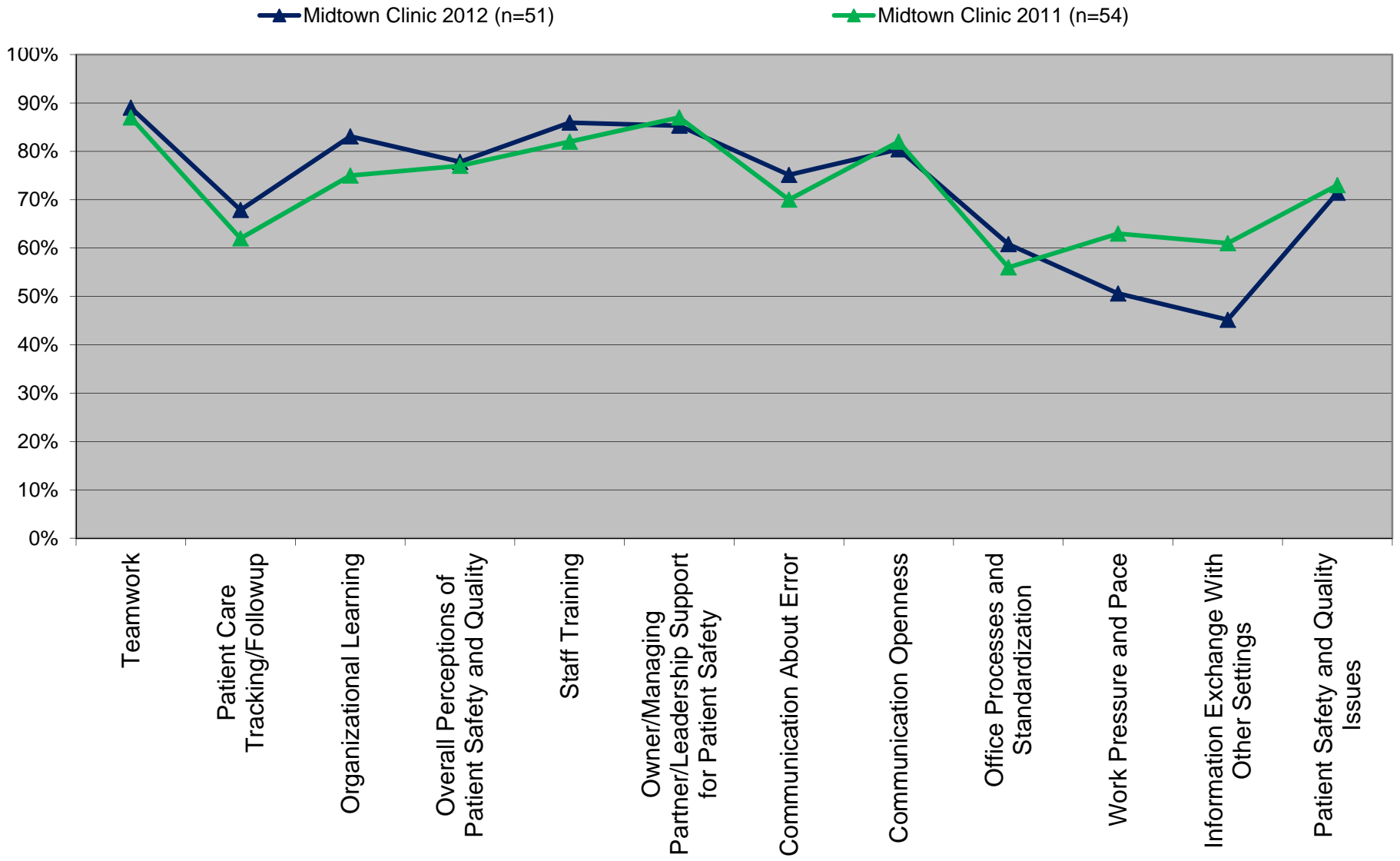


TeamSTEPPS: Primary Care

- Monthly faculty discussion with geriatric cases
- Module required of all residents, with outpatient scenarios built around geriatric cases.
- Online SBAR training required for all students on rotation, with practice during clinic sessions

Midtown Clinic outcomes

Medical Office Survey on Patient Safety Culture Composite Positive Responses Comparison Over Time

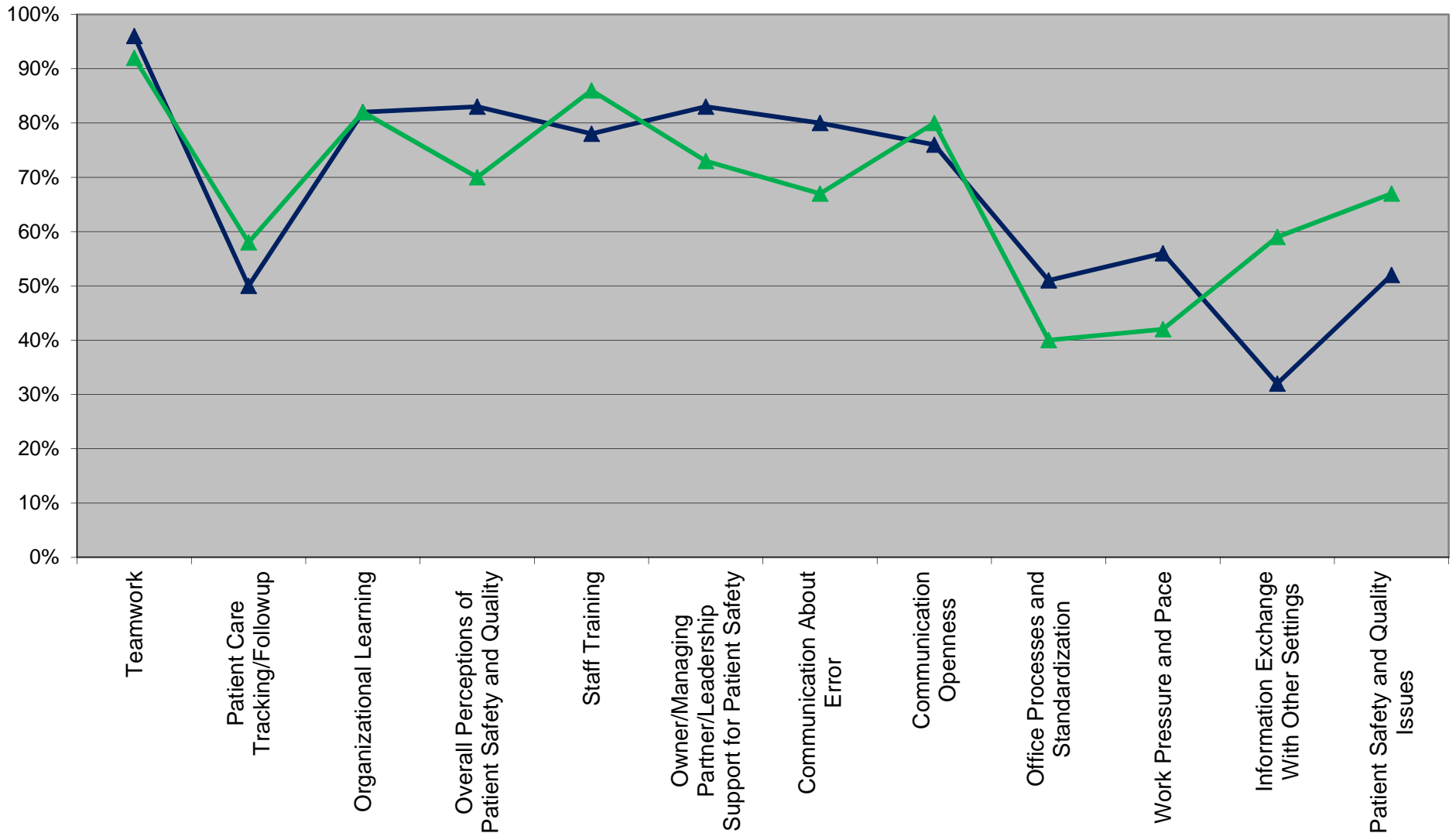


Geriatric Clinic outcomes

Medical Office Survey on Patient Safety Culture Composite Positive Responses
Comparison Over Time

▲ Geriatric Medicine Clinic 2012 (n=21)

▲ Geriatric Medicine Clinic 2011 (n=18)





Summary

- There is science behind teaching, learning and implementing effective team work.
- GITT was an innovation
- TeamSTEPPS has the advantage of being developed based on science and designed for training HCPs



Summary

- Team work is essential not only for clinical work; also for other settings
- Not easy to learn, but well worth the effort.
- The culture must support it, leaders must model.
- Training must be reinforced in practice, or with simulation.

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