TeamSTEPPS and Master Training Overview

September 24, 2013

Webinar Agenda

• Overview & Introductions – Betsy Lee

• Healthcare as a Team Sport – Karyn Baum, M.D., M.S.Ed.

• Wrap-up/ Questions – Betsy Lee
Evaluation

- Webinar funded by CMS through the Partnership for Patients
- CMS reviews results and wants 80% of participants to evaluate educational sessions
- Please complete the simple three question evaluation by Oct. 2, 2013:
  https://www.surveymonkey.com/s/20130924TeamSTEPPSWebinar
HEALTHCARE

- Is not as safe as it should be
- Does not produce value
Institute of Medicine (IOM) Report

Institute of Medicine Report in relation to communication errors:

November, 1999

“...approximately 100,000 patients die in the hospital each year from medical errors, and 72 % resulted from communication errors...”

This report lays out a comprehensive U.S. strategy by which government, health care providers, the industry and consumers can reduce preventable medical errors.

SAFETY IS NOT JUST “THEIR” PROBLEM

Indiana Survey of Patient Safety 2007 to 2012
ERRORS AND PROFESSIONALS

• Misperception
• Assumption
• Miscommunication

...and error rates increase when we are in a hurry!

HEALTHCARE IS TOO EXPENSIVE

SOURCE: Data compilation and graphics, Peter G. Peterson Foundation
WE ARE BURNED OUT

• 46% of physicians in one recent study showed signs of burnout
• Highest among:
  • EM
  • IM
  • FM
  • Neurology
• We are in a culture which expects, and is designed around, perfection even though we know this is not possible

PERHAPS…

• Teamwork can help address (some of) these problems
SWISS CHEESE MODEL OF ERRORS

WHERE IS THE EVIDENCE?

Length of ICU Stay After Team Training

(Pronovost, 2003)
Johns Hopkins
Journal of Critical Care Medicine
WHERE IS THE EVIDENCE?

(Mann, 2006)
Beth Israel Deaconess Medical Center
Contemporary OB/GYN

EVIDENCE

• 2010 JAMA article
  • 74 hospitals in the US Veterans Affairs with a formalized team training had:
    • 18 percent reduction in annual mortality
    • Verses a 7 percent reduction in those without training
    • The longer since training, the more reduction they had
    • Nearly 120,000 cases reviewed

TEAMSTEPPS

Strategies and Tools to Enhance Performance and Patient Safety

- Leadership
- Communication
- Situation Monitoring
- Mutual Support

PERFORMANCE

KNOWLEDGE

SKILLS

ATTITUDES

TEAMSTEPPS

- Evidence-based
- PowerPoint modules
  - Facilitator guides
  - Interactive, with exercises
  - Videos
  - Case examples
- Website with additional resources
- “Train the trainer” approach
- All free for use by anyone
SHIFT TOWARDS A CULTURE OF SAFETY

LEADERSHIP AND CULTURE CHANGE
COMPONENTS OF TEAM PERFORMANCE

Knowledge
Cognitions
"Think"

Attitudes
Affect
"Feel"

Leadership
Communication
Situation Monitoring
Mutual Support

Skills
Behaviors
"Do"

Shared Mental Model

A shared knowledge and understanding about a patient or patient plan by healthcare team.

- Provides common understanding of the situation, task responsibilities
- Allows team members to anticipate one another's needs

... for the benefit of the patient!!
Effective Communication

Must be:
- **Complete**: relevant information avoiding unnecessary detail
- **Clear**: standard terminology, minimize acronyms
- **Brief**: be concise
- **Timely**: avoid delays, verify, validate or acknowledge
Information Exchange Strategies

- SBAR
- Call-Out
- Cross-Check
- Check-Back
Mutual Support

Ability to anticipate and support other team members’ needs through accurate knowledge about their responsibilities and workload.

- Willingness and preparedness to assist other team members during patient care
- **Modeled** by good leadership
- **Derived** from situational monitoring
- **Moderated** by communication

The team is only as strong as its weakest link
‘Team of Experts’ ≠ ‘Expert Team’

PARADIGM SHIFT TO TEAM APPROACH

From (INDIVIDUAL)
- Single focus (clinical skills)
- Individual performance
- Under-informed decision-making
- Loose concept of teamwork
- Unbalanced workload
- Having information
- Self-advocacy
- Self-improvement
- Individual efficiency

To (TEAM)
- Dual focus (clinical and team skills)
- Team performance
- Informed decision-making
- Clear understanding of teamwork
- Managed workload
- Sharing information
- Mutual support
- Team improvement
- Team efficiency
**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 Co-Workers
- Distractions
- Fatigue
- Workload
- Misinterpretation of Cues

**TOOLS & STRATEGIES**
- Brief
- Huddle
- Debrief
- STEP
- Cross Monitoring
- Feedback
- Advocacy and Assertion
- Two-Challenge Rule
- CUS
- DESC Script
- Collaboration
- SBAR
- Call-Out
- Check-Back
- Handoff

**OUTCOMES**
- Shared Mental Model
- Adaptability
- Team Orientation
- Mutual Trust
- Team Performance

**SELECTED TEAMSTEPPS OUTCOMES**
- Well-liked by learners
  - Medical units
  - ICU teams
  - Behavioral health units
  - Clinics
  - Emergency department (Kansas, personal communication)
- Team behaviors improved
  - ICU teams
  - Trauma teams
  - Emergency department
OUTCOMES CONTINUED

- Improvement in patient safety culture
  - Australian effort in behavioral health units
- Patient outcomes
  - Time to ECMO placement decreased (PICUs)
  - Decreased patient seclusion orders (Behavioral health)
  - Time from arrival to CT scanner, intubation, and OR (Trauma teams)
  - Decreased retained foreign objects (OR teams)

WHO TO TRAIN?

- Interprofessional
- Must include physicians
  - May not include all
- Remember “non-clinical” staff
  - Environmental services
  - Transport
  - Scheduling
- Plan to train 100% but at least 80% of staff
- Have a plan to orient new staff
  - Video, brochure
TEAM TRAINING IS ONE PIECE

CONCLUSIONS

• Healthcare fall short in value, outcomes, safety
• Healthcare workers are burning out
• Teamwork may represent one way to move the needle
• Physicians need to be included
THANK YOU VERY MUCH

PLEASE CONTACT WITH QUESTIONS: KARYN BAUM, KBAUM@UMN.EDU OR 612-625-6370

MORE INFORMATION ON TEAMSTEPPS

• www.teamstepps.ahrq.gov
TeamSTEPPS Master Training

- Offered as a part of the IHA Coalition for Care
- Three one-day training sessions will be offered
  - Oct. 24  Courtyard Fort Wayne, Fort Wayne
  - Nov. 13  Marten House, Indianapolis
  - Nov. 14  Comfort Inn, Columbus, IN

- 7:30 am - registration begins
- 8:00 am - meeting starts
- 12:15 - 1 pm - lunch, on your own
- 5:00 pm - meeting concludes

TeamSTEPPS Master Training

- Pre-conference webinar: Oct. 8, 2-4 pm ET
  - Required for all participants (will be recorded)
- Space is limited at each location. Only IHA Coalition for Care hospitals may register.
- IHA is not limiting the number of registrations per hospital at this time.
  - Adjustments may be necessary for hospitals with multiple registrations to accommodate additional participating hospitals.
- Registration:
  www.regonline.com/2013teamSTEPPS
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**Thank you**