What would you do if your iceberg is melting?

TeamSTEPPS Teamwork and communication

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TeamSTEPPS™ Objectives

> Evidence based teamwork training system developed by Agency for Healthcare Research and Quality and the Department of Defense US

> Improve knowledge, attitudes and clinician performance (skills) related to communication and teamwork associated with transfer of information/responsibility between clinicians about patient care (handover)

> Reduce incidents and harm that may be associated with transfer of information and/or transfer of responsibility between clinicians.
US Evidence

> After implementation of medical team training
  • Improved team behaviours (observation)
  • Enhanced staff attitudes towards teamwork
  • Reduced observed clinical errors (Morey et al 2002)

> Implementation of pre-op brief
  • Increase in communication in theatre
  • Increase (84% to 95%) in administration of prophylactic antibiotics prior to incision
  • Increase (92% to 100%) in preop DVT prophylaxis prior to induction
  • 7 patients identified with surgical risks – surgery cancelled (Awad et al 2005)
US Evidence

> Staff satisfaction
  - 16% reduction in nursing turnover
  - 19% increase in OR employee satisfaction (Leonard 2004)

> Intensive Care
  - After implementing a “Patient Daily Goals” form to facilitate staff communication
    - Reduction (50% 2.2-1.1) in mean ICU length of stay (Pronovost 2003)
## TeamSTEPPS™ Framework

<table>
<thead>
<tr>
<th>Teamwork Competency</th>
<th>Behaviour &amp; Skills</th>
<th>Tools &amp; Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Leadership</strong></td>
<td>Clarify roles/expectation/Engage in team events</td>
<td>Brief – short planning session prior to start</td>
</tr>
<tr>
<td>Direct/motivate</td>
<td></td>
<td>Huddle – adhoc plan</td>
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<td>Assign tasks/resource</td>
<td></td>
<td>Debrief – after action</td>
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<tr>
<td><strong>Situation Monitoring</strong></td>
<td>Anticipate and predict team members needs</td>
<td>Situation awareness</td>
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<tr>
<td>Shared mental model</td>
<td>Provide feedback</td>
<td>Cross monitoring</td>
</tr>
<tr>
<td></td>
<td>Watching others ‘back’</td>
<td>STEP</td>
</tr>
<tr>
<td><strong>Mutual Support</strong></td>
<td>Distribution to under utilized team members</td>
<td>Task assistance</td>
</tr>
<tr>
<td>Anticipate needs</td>
<td>Resolve conflict</td>
<td>Feedback</td>
</tr>
<tr>
<td>Shift workloads to balance</td>
<td>Advocate</td>
<td>Two challenge rule</td>
</tr>
<tr>
<td>needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Communication</strong></td>
<td>Structured techniques</td>
<td>SBAR</td>
</tr>
<tr>
<td>Share information regardless of situation</td>
<td>Information conveyed and understood through follow up and acknowledgement</td>
<td>Call-out/Check-back Handover</td>
</tr>
</tbody>
</table>

SA Health
Implementation overview

- 5 sites (nominated) 4 metro 1 country
- Train the trainer model
- Executive sponsor/ clinical champions
- Create a change team
- Health service trainers attend 2.5 day Master Training Course in TeamSTEPPS™ competencies/ tools
- Deliver fundamentals to health service
- Measurement
- Evaluation of observation/ non observation
TeamSTEPPS™ overview
TeamSTEPPSTM overview

PHASE I
- Assessment
  - Pre-Training Assessment
    - SITE ASSESSMENT
    - CULTURE SURVEY
    - DATA/MEASURES
    - Climate Improvement
  - Ready?

PHASE II
- Planning, Training & Implementation
  - TRAINING
  - ACTION PLAN

SA Health
TeamSTEPPSTM overview

**PHASE I**
- Assessment
  - Pre-Training Assessment
    - SITE ASSESSMENT
    - CULTURE SURVEY
    - DATA/MEASURES
  - Climate Improvement

**PHASE II**
- Planning, Training & Implementation
  - TRAINING
    - ACTION PLAN
  - Intervention
  - Tost

**PHASE III**
- Sustainment
  - Culture Change
    - COACH & INTEGRATE
    - MONITOR THE PLAN
    - CONTINUOUS IMPROVEMENT

Set the Stage ★ Decide What to Do ★ Make it Happen ★ Make it Stick

SA Health
Evaluation – ACSQHC Project

> Documentation Review
> Project Staff Interviews
> Participant Questionnaires
> Focus group
> Observation
  • Direct observation, reflective diaries and semi structured interviews
> Incident data
Observational evaluation

> Findings from implementation

• All sites implemented SBAR
• Other techniques followed
  > SBAR for medical discharge summaries
  > Briefings
  > Whiteboards/ journey boards
  > Notice of an intervention

• Several “flow-on” effects
  ▪ Not directly related to TeamSTEPPS™ techniques
    > Reduction in seclusion rates

• Noticeable process changes –
  ▪ “one size does not fit all”
    > Cost savings through restructure

SA Health
Observational evaluation

> Increase in quality of communication and clinical care
> Improvement in process of communication and teamwork
> Improvement in role clarity and identification
> Increase in recognition for multi-disciplinary teamwork and communication

Non observational evaluation

> Significant increase in teamwork (9%)
> Knowledge, skills and attitudes increased (2%)
> Improvement in patient safety culture (4%)
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> Project Team
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  • Professor Paddy Phillips
  • Ms Christy Pirone
  • Dr Tim Schultz
  • Dr Saravana Kumar

> Project site representatives
Watch out for the penguins

TeamSTEPPS™ Website

- Google TeamSTEPPS AHRQ or Department of Defense
- http://dodpatientsafety.usuhs.mil/teamstepps/

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