



Demystifying HROs with TeamSTEPPS®

AHA Team Training Monthly Webinar

10/19/2017



RULES OF ENGAGEMENT

- Audio for the webinar can be accessed in two ways:
 - Through the phone (*Please mute your computer speakers)
 - Through your computer
- A Q&A session will be held at the end of the presentation
- Written questions are encouraged throughout the presentation and will be answered during the Q&A session
 - To submit a question, type it into the Chat Area and send it at any time during the presentation

UPCOMING TEAM TRAINING EVENTS

- November 8 Webinar
 - Integrating TeamSTEPPS® into Simulation and Team Debriefing
 - Free to [register](#)
- Master Training Course in Chicago on December 14-15
 - Registration to open soon

TEAM TRAINING NATIONAL CONFERENCE



Save The Date



2018 AHA Team Training National Conference
June 20-22 • San Diego
aha.org/teamtraining



TeamSTEPPS® strategies and tools available from AHA Team Training • Preconference sessions on June 19 and 20

CONTACT INFORMATION

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TODAY'S PRESENTERS



Chris Hund, MFA, Director of AHA Team Training program, American Hospital Association



Marcia Cooke, DNP, RN-BC, Assistant Professor, School of Nursing at Northern Illinois University

THREE QUESTIONS

- What is a Highly Reliable Organization and why is it important?
- What are practical ways (Hint: TeamSTEPPS) to support your HRO implementation?
- Why is it important to encourage *ownership* instead of *buy-in*?

WHAT ARE HROs AND WHY ARE THEY IMPORTANT?

HROs...

- Have processes and systems in place that are exceptionally consistent in accomplishing their goals and avoiding potentially catastrophic errors
- In other words...
 - Nuclear power
 - The military
 - Airlines
 - NASA

TEAMSTEPPS

- Creates a culture of safety and improved quality via:
 - Improved teamwork and communication
 - Increased ability to speak-up
 - Higher employee satisfaction
- Evidence-based and over 10 years in the field:
 - Across the care continuum
 - Seen as foundational to many safety/quality projects
 - Developed out of the same highly-reliable industries

TEAMSTEPPS TOOLS

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 Followup With Coworkers
- Distractions
- Fatigue
- Workload
- Misinterpretation of Cues
- Lack of Role Clarity

TOOLS and STRATEGIES

Communication

- SBAR
- Call-Out
- Check-Back
- Handoff

Leading Teams

- Brief
- Huddle
- Debrief

Situation Monitoring

- STEP
- I'M SAFE

Mutual Support

- Task Assistance
- Feedback
- Assertive Statement
- Two-Challenge Rule
- CUS
- DESC Script

OUTCOMES

- Shared Mental Model
- Adaptability
- Team Orientation
- Mutual Trust
- Team Performance
- *Patient Safety!!*

PRACTICAL WAYS TO SUPPORT YOUR HRO IMPLEMENTATION WITH TEAMSTEPPS

#1 SENSITIVITY TO OPERATIONS

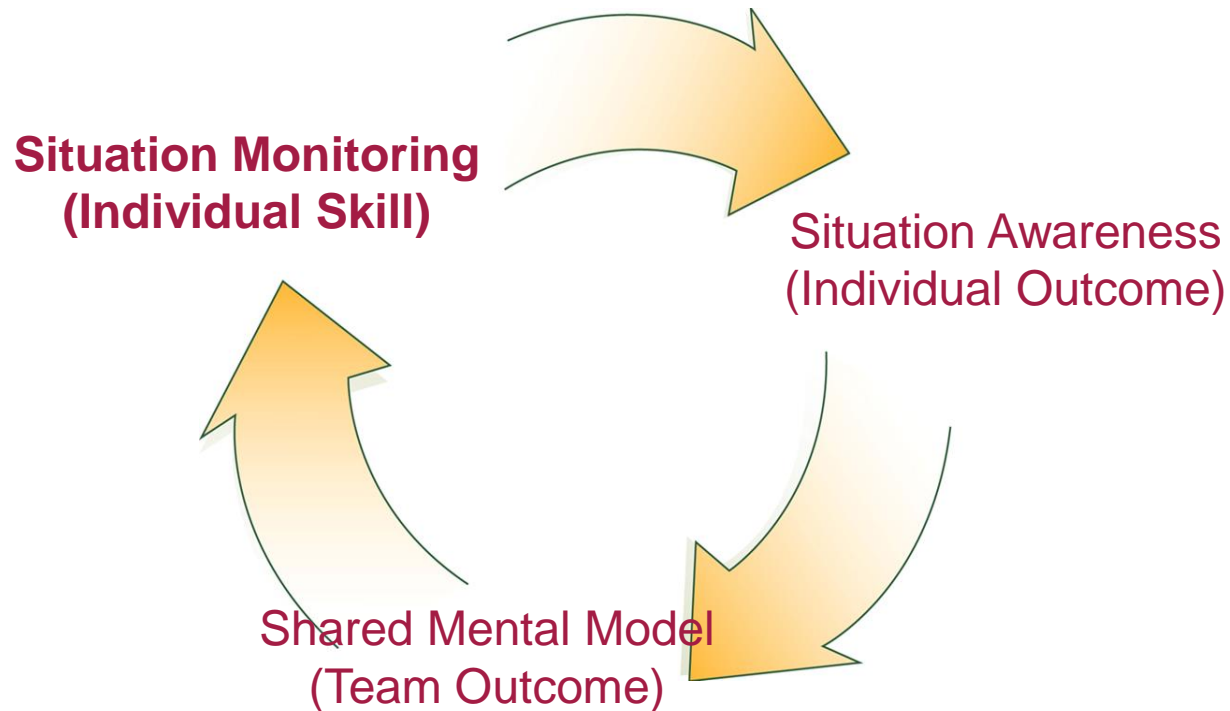
A system is undergoing constant change so being sensitive to operations means...

- Constant ***situational awareness***
 - Understanding the work being done by those who do it
 - Scanning for anomalies or potential problems
- Use standards and standard work – think of a ***standard language***
- If you're a leader, regularly interact with the frontline staff

FOCUS ON A TOOL

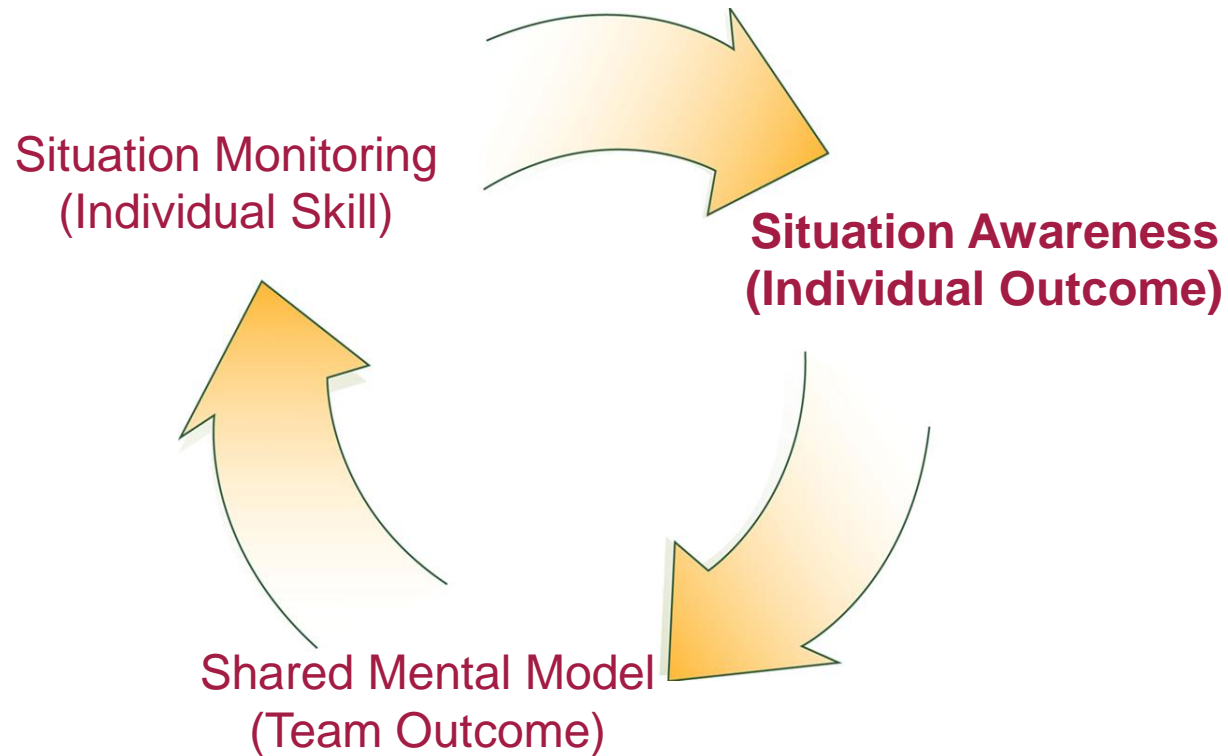
- SBAR – clear, brief and timely
 - Situation
 - Background
 - Assessment
 - Recommendation or Request

SITUATION MONITORING



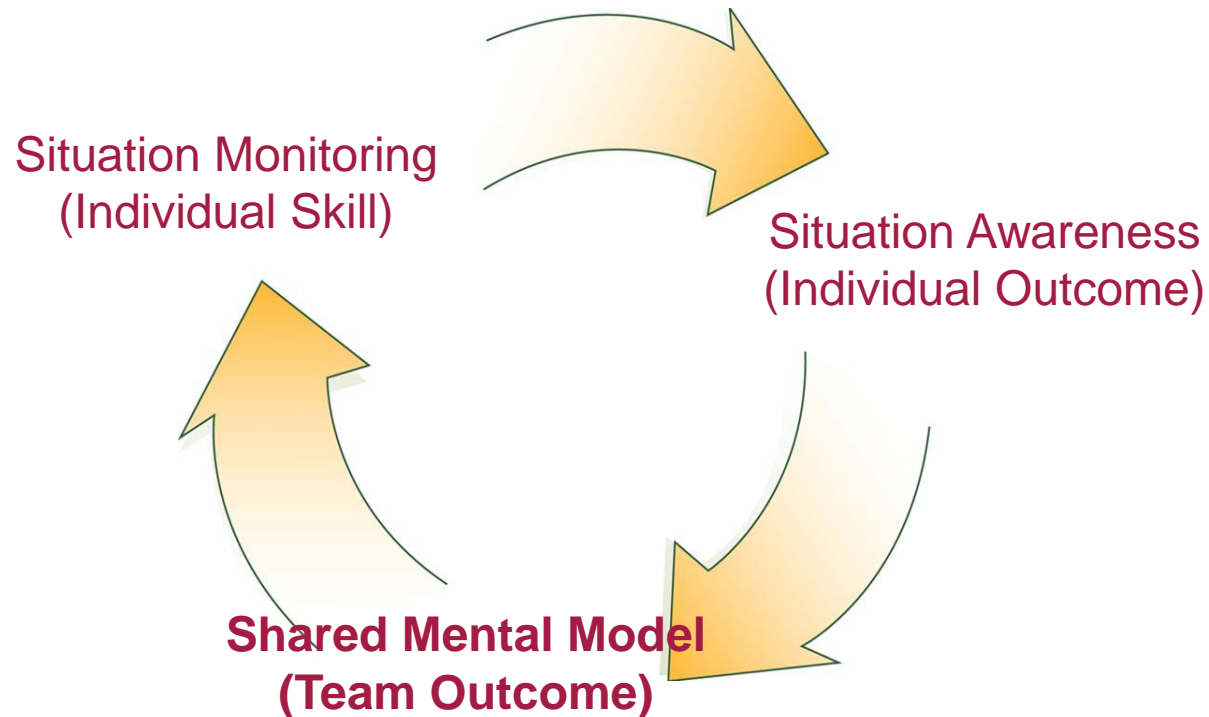
Situation Monitoring: the **process** of continually scanning and assessing a situation to gain and maintain an understanding of what's going on around you.

SITUATION AWARENESS



Situation Awareness: the state of “knowing what’s going on around you.”

SHARED MENTAL MODEL



Shared Mental Model: results from each team member maintaining situation awareness and ensures that all team members are “on the same page.”

#2 PREOCCUPATION WITH FAILURE

HROs use failure and near-failure to gain insight into strengths and weaknesses.

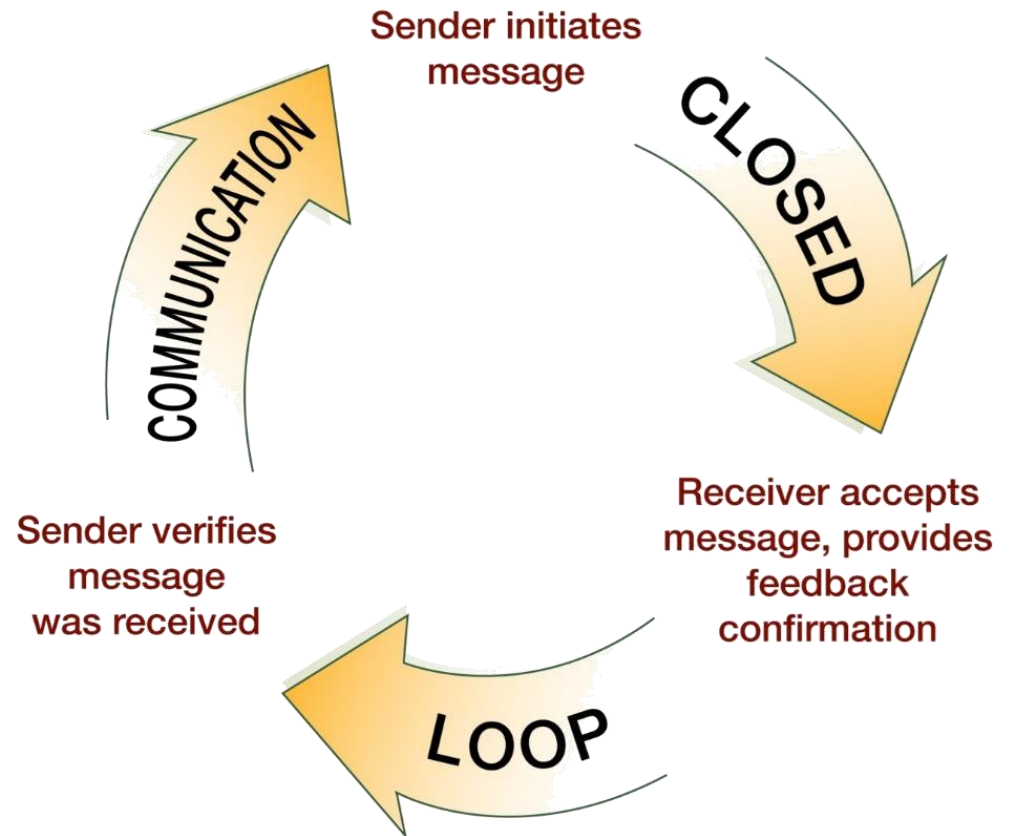
- Failures are expected
- And ***reviewed*** when they occur
- Look for opportunities to change and make sure to ***make the change***
- Think about failure even when it hasn't occurred

FOCUS ON TOOLS

- Brief
 - Short sessions prior to the start of something (share the plan, discuss team formation, assign roles and responsibilities, establish expectations)
- Huddle
 - Ad hoc meetings (re-establish situational awareness, reinforce plans and assess the need to adjust the plan)
- Debrief
 - Review the teams performance (what went well, what can be improved, what's one thing you'll different next time)

FOCUS ON TOOLS

- Closed Loop Communication using
 - Call Outs
 - Check Backs



#3 DEFERENCE TO EXPERTISE

To be a HRO you must listen, plain and simple.

- Important to listen and respond to the experts regardless of rank, position and title.
- Status does not mean team expertise.
- Boots on the ground people can provide *situational awareness* and help craft a *response*.

FOCUS ON A TOOL

CUS Clinical

I am **C**ONCERNED!

I am **U**NCOMFORTABLE!

This is a **S**AFETY ISSUE!

CUS Non-Clinical

I am **C**ONCERNED!

I am **U**NCOMFORTABLE!

This is a **S**UCCESS ISSUE!

#4 RESILIENCE

Being resilient means maintaining or regaining the normal state of operations after something has gone wrong or stress is building up.

- Talk about the mishaps openly and work together to determine ways to solve
- Practice for emergencies
- Come up with processes to detect, control and bounce back from errors

FOCUS ON A TOOL

To be resilient you need to be willing to offer constructive feedback

A = Ask...is now a good time to talk?

D = Describe the specific situation

E = Express/Explain your concerns

S = Suggest other alternatives

C = Consequences should be stated

- Does not need to be negative
- Not meant to be an ultimatum or threat
- **C = Consensus/Conclusion**

FOCUS ON A TOOL

To be resilient you need to take care of yourself. Use the I'M SAFE Checklist.

Illness

Medication

Stress

Alcohol and Drugs

Fatigue

Eating and Elimination

#5 RELUCTANCE TO SIMPLIFY

If you are a HRO you embrace all of the complexity of your operations.

- Don't simplify just to simplify
- This doesn't mean you should shy away from standardization

FOCUS ON A TOOL

SBAR may not provide enough information for handoffs, consider:

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?

MAKING A CHANGE: PUTTING TEAMSTEPS TO WORK

How would you make this fail?

Consider Buy-In vs Ownership

WHAT ARE YOU GOING TO TRY?

TeamSTEPPS Tools:

Situation Monitoring

SBAR

Briefs/Huddles/Debriefs

Closed-Loop Communication

CUS

ADESC Script

I'M SAFE Checklist

I PASS the BATON handoffs

Five Principles:

Sensitivity to Operations

Preoccupation w/ Failure

Deference to Expertise

Resilience

Reluctance to Simply



QUESTIONS?

- Stay in touch! Email teamtraining@aha.org or visit www.aha.org/teamtraining



AHA TEAM TRAINING
TeamSTEPPS® strategies and tools available
from AHA Team Training

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