TeamSTEPPS® 2.0: Basic Training and Beyond

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Learning Objectives

The purpose of this activity is to enable the learner to:

▪ Differentiate the four TeamSTEPPS® framework pillars which support the three domains of learning
▪ Summarize one tool or strategy within each pillar
▪ Describe appropriate mapping of TeamSTEPPS® within an individual course and throughout the curricula
▪ Discover additional TeamSTEPPS® resources for implementation, integration, and evaluation
ACTIVITY #1

TeamSTEPPS 2.0: Basic Training and Beyond
TeamSTEPPS® 2.0 - Team Strategies & Tools to Enhance Performance and Patient Safety
Fundamental Pillars & Team Competency Outcomes of TeamSTEPPS®

- Leadership
- Situation monitoring
- Mutual support
- Communication

- Knowledge:
  - Shared Mental Model
- Attitudes:
  - Mutual Trust
  - Team Orientation
- Performance:
  - Adaptability
  - Accuracy
  - Productivity
  - Efficiency
  - Safety
TeamSTEPPS® Key Principles:

- **Team Structure**: Identification of the components of a multi-team system that must work together effectively to ensure patient safety.

- **Leadership**: Ability to maximize the activities of team members by ensuring that team actions are understood, changes in information are shared, and team members have the necessary resources.

- **Situation Monitoring**: Process of actively scanning and assessing situational elements to gain information or understanding, or to maintain awareness to support team functioning.

- **Mutual Support**: Ability to anticipate and support team members' needs through accurate knowledge about their responsibilities and workload.

- **Communication**: Structured process by which information is clearly and accurately exchanged among team members.
Pillar One: Leadership

- Ability to maximize the activities of team members by ensuring that team actions are understood, changes in information are shared, and team members have the necessary resources.

- The following are responsibilities of effective team leaders:
  - Organize the team.
  - Identify and articulate clear goals (i.e. the plan).
  - Assign tasks and responsibilities.
  - Monitor and modify the plan; communication changes.
  - Review the team's performance; provide feedback when needed.
  - Manage and allocate resources.
  - Facilitate information sharing.
  - Encourage team members to assist one another.
  - Facilitate conflict resolution in a learning environment.
  - Model effective teamwork.
Team Events

- **Sharing the Plan**
  - **Brief**—Short session prior to start to share the plan, discuss team formation; assign roles and responsibilities, establish expectations and climate; anticipate outcomes and likely contingencies.

- **Monitoring and Modifying the Plan**
  - **Huddle**—Ad hoc meeting to re-establish situation awareness; reinforce plans already in place, and assess the need to adjust the plan.

- **Reviewing the Team's Performance**
  - **Debrief**—Informal information exchange session designed to improve team performance and effectiveness through lessons learned and reinforcement of positive behaviors.
Brief Checklist

- During the brief, the team should address the following questions:
  - Who is on the team?
  - Do all members understand and agree upon goals?
  - Are roles and responsibilities understood?
  - What is our plan of care?
  - What is staff and provider's availability throughout the shift?
  - How is workload among team members?
  - What resources are available?
Brief Checklist

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  - What is staff and provider's availability throughout the shift?
  - How is workload among team members?
  - What resources are available?
Pillar Two: Situation Monitoring

- Process of actively scanning and assessing situational elements to gain information or understanding, or to maintain awareness to support team functioning.
  - **Situation monitoring** is the process of continually scanning and assessing a situation to gain and maintain an understanding of what's going on around you.
  - **Situation awareness** is the state of "knowing what is going on around you."
  - A **shared mental model** results from each team member maintaining situation awareness and ensures that all team members are "on the same page."
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Components of Situation Monitoring: STEP

Status of the patient

Team Members

Environment

Progress Toward Goal

- **Status** of Patient:
  - Patient History
  - Vital Signs
  - Medications
  - Physical Exam
  - Plan of Care

- **Team** Members:
  - Fatigue
  - Workload
  - Task Performance
  - Skill
  - Stress
  - Psychosocial Issues

- **Environment**:
  - Facility Information
  - Administrative Information
  - Human Resources
  - Triage Acuity
  - Equipment

- **Progress Toward Goal**:
  - Status of Team’s Patient(s)?
  - Established Goals of Team?
  - Tasks/Actions of Team?
  - Plan Still Appropriate?
Components of Situation Monitoring

- **Cross-Monitoring**: A harm error reduction strategy that involves:
  - Monitoring actions of other team members.
  - Providing a safety net within the team.
  - Ensuring that mistakes or oversights are caught quickly and easily.
  - "Watching each other's back."

- Each member of the team is responsible for assessing his or her own safety status.
  - I = Illness
  - M = Medication
  - S = Stress
  - A = Alcohol and Drugs
  - F = Fatigue
  - E = Eating and Elimination
Pillar Three: Mutual Support

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

- **Task Assistance**: Helping others with tasks builds a strong team.

  Key strategies include:
  - Team members protect each other from work overload situations.
  - Effective teams place all offers and requests for assistance in the context of patient safety.
  - Team members foster a climate where it is expected that assistance will be actively sought and offered.

- **Feedback**: Information provided to team members for the purpose of improving team performance.

  Feedback should be:
  - **Timely**—given soon after the target behavior has occurred.
  - **Respectful**—focuses on behaviors, not personal attributes.
  - **Specific**—relates to a specific task or behavior that requires correction or improvement.
  - **Directed** toward improvement—provides directions for future improvement.
  - **Considerate**—considers a team member's feelings and delivers negative information with fairness and respect.
Pillar Three: Mutual Support: Advocacy and Assertion

- **Advocate** for the patient
  - invoked when team members' viewpoints don't coincide with that of the decision-maker.

- **Assert** a corrective action in a **firm** and **respectful** manner.
  - Make an opening.
  - State the concern.
  - State the problem.
  - Offer a solution.
  - Reach agreement on next steps.

**Two-Challenge Rule:**

- Empowers all team members to "stop the line" if they sense or discover an essential safety breach.

- When an initial assertive statement is ignored:
  - It is your responsibility to assertively voice concern at least *two times* to ensure it has been heard.
  - The team member being challenged must acknowledge that concern has been heard.
  - If the safety issues still hasn't been addressed:
    - Take a stronger course of action.
    - Utilize supervisor or chain of command.
Pillar Three: Mutual Support: Advocacy and Assertion

▪ CUS: Assertive Statements
  – I am Concerned!
  – I am Uncomfortable!
  – This is a Safety Issue!
  – "Stop the Line."

▪ DESC Script
  ▪ A constructive approach for managing and resolving conflict.
    – D = Describe the specific situation or behavior; provide concrete data.
    – E = Express how the situation makes you feel/what your concerns are.
    – S = Suggest other alternatives and seek agreement.
    – C = Consequences should be stated in terms of impact on established team goals; strive for consensus.
Pillar Four: Communication

- Structured process by which information is clearly and accurately exchanged among team members.
  - **SBAR**: A technique for communicating critical information that requires immediate attention and action concerning a patient's condition.
    - **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 and Request**—What would I do to correct it?
  - **Call-Out**: Strategy used to communicate important or critical information.
    - Informs all team members simultaneously during emergent situations.
    - Helps team members anticipate next steps.
    - Important to direct responsibility to a specific individual responsible for carrying out the task.
Pillar Four: Communication

- **Check-Back**: Using closed-loop communication to ensure that information conveyed by the sender is understood by the receiver as intended.
  - Sender initiates the message.
  - Receiver accepts the message and provides feedback.
  - Sender double-checks to ensure that the message was received.

- **Handoff**: The transfer of information (along with authority and responsibility) during transitions in care across the continuum. It includes an opportunity to ask questions, clarify, and confirm.
TeamSTEPPS® Resources

- **TeamSTEPPS® 2.0 Video Training Tools**
  - TeamSTEPPS® Overview (2:22 minutes)
  - Emergency Department (4:25 minutes)
  - Inpatient Medical (<8 minutes)
  - Inpatient Surgical (10:24 minutes)
  - Labor & Delivery (8:15 Minutes)
  - Physician’s Office (9:18 minutes)
  - Sue Sheridan Video (9:49 minutes)

- **Using Simulation in TeamSTEPPS® Training**
  - PDF
  - PPT
TeamSTEPPS® Resources

- Enhancing Safety for Patients With Limited English Proficiency Module
  - Opportunity (4:35 minutes)
  - CUS Words (47 seconds)
  - Briefing (36 seconds)
  - Psychological Safety (40 seconds)
  - Checkback (57 seconds)
  - Success (6:08 minutes)
TeamSTEPPS® Resources

- **Rapid Response Systems Guide**
  - Let's Watch the RRS in Action (7:18 minutes)
  - Detection (2:25 minutes)
  - RRS Activation (32 seconds)
  - Response, Assessment & Stabilization (2:43 minutes)
  - Patient Disposition (1:17 minutes)
  - RRS Evaluation (1:08 minutes)
  - Let's look back (8:22 minutes)
Additional TeamSTEPPS® Resources

- **TeamSTEPPS® 2.0 Curriculum**
  - Overview Video (1 hour)
  - Course Management Guide (PDF)
  - Essentials Course
    - Fundamentals (Modules 1-7)
    - Supplemental (Modules 8-12)

- **Webinars**

- **National Conference**

- **TeamSTEPPS® 2.0 On Line Master Trainer Course:**
  - On-Line format for self-paced learning

- **Additional Resources:**
  - Video Training Tools
  - Measurement Tools
  - Printable Components
  - Specialty Scenarios
  - Readiness Assessment
  - Learning Benchmarks
  - TeamSTEPPS® Case Studies
  - Sample Course Evaluation Form
  - Teamwork Attitudes Questionnaire
  - Teamwork Perceptions Questionnaire
  - Team Performance Observation Tool
  - TeamSTEPPS® Pocket Guide App
ACTIVITY #2: Just a Routine Operation

TeamSTEPPS 2.0: Basic Training and Beyond
Team Performance Observation Tool

**Team Structure**
- Assembles team.
- Assigns or identifies team members’ roles and responsibilities.
- Holds team members accountable.
- Includes patients and families as part of the team.

**Communication**
- Provides brief, clear, specific, and timely information.
- Seeks information from all available sources.
- Uses check-backs to verify information that is communicated.
- Uses SBAR, call-outs, check-backs, and handoff techniques to communicate effectively with team members.

Team Performance Observational Tool available at:
Team Performance Observation Tool

**Leadership**
- Identifies team goals and vision.
- Utilizes resources efficiently to maximize team performance.
- Balances workload within the team.
- Delegates tasks or assignments, as appropriate.
- Conducts briefs, huddles, and debriefs.
- Role models teamwork behaviors.

**Situation Monitoring**
- Monitors the state of the patient.
- Monitors fellow team members to ensure safety and prevent errors.
- Monitors the environment for safety and availability of resources (e.g., equipment).
- Monitors progress toward the goal and identifies changes that could alter the care plan.
- Fosters communication to ensure a shared mental model.

**Mutual Support**
- Provides task-related support and assistance.
- Provides timely and constructive feedback to team members.
- Effectively advocates for the patient using the Assertive Statement, Two-Challenge Rule, or CUS.
- Uses the Two-Challenge Rule or DESC script to resolve conflict.
TeamSTEPPS 2.0
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 Followup with Coworkers
- Distractions
- Fatigue
- Workload
- Misinterpretation of Cues
- Lack of Role Clarity

**TOOLS and STRATEGIES**
- Communication
  - SBAR
  - Call-Out
  - Check-Back
  - Handoff

**OUTCOMES**
- Shared Mental Model
- Adaptability
- Team Orientation
- Mutual Trust
- Team Performance
- Patient Safety!!
ACTIVITY #3: Mapping TeamSTEPPS® 2.0

TeamSTEPPS 2.0: Basic Training and Beyond
To learn more about TeamSTEPPS®:

Contact:

- Agency for Healthcare Research and Quality (AHRQ) website:
  - [www.ahrq.gov/qual/teamstepps](http://www.ahrq.gov/qual/teamstepps)
- AHRQ: About TeamSTEPPS® website:
References

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