Triad for Optimal Patient Safety
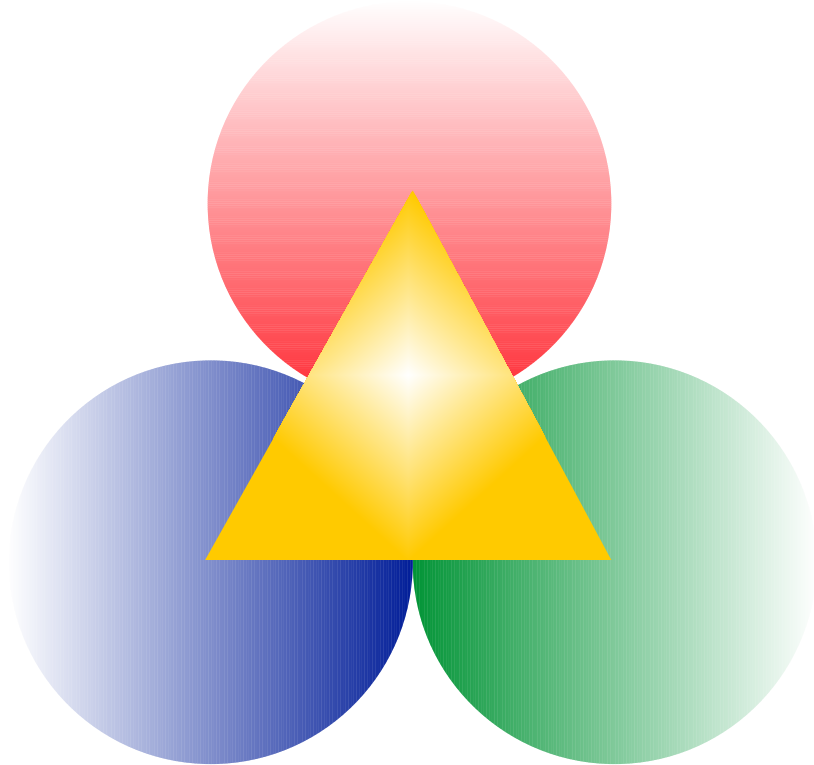
TOPS

Teamwork Training Program:
A Facilitator's Guide

Developed by the TOPS Curriculum Group

Trainer's Guide for Foundation Teamwork Training
Spring, 2006
Program Plan

Learning—an active process of communication between students and instructors,
resulting in the gaining of knowledge and mastering of information; results in a relatively
permanent change or modification in behavior as a result of experience or training.
Parvensky, 1995

Program Purpose and Goal:

Traditional communication in healthcare settings is rife with deficiencies and opportunities for patient harm. These situations occur among provider disciplines (e.g., physician to physician, nurse to nurse, nurse to physician, etc…) and between providers and their patients. Communication patterns and styles reflect the cultural and educational traditions represented by the healthcare disciplines. Changing these patterns requires transformation of a unit's traditional hierarchical culture and practices to a team-oriented model. The goal of this 4-hour interdisciplinary training is to learn the basic affective and cognitive skills to work as an interdisciplinary team. Following the training session, participants will meet these following objectives:

- Recognize the association between communication, teamwork, and patient outcomes
  - ❍ Didactic Content: Laying the Foundation and "First, Do No Harm" video presentation

- Communicate with all team members to foster and promote patient safety in a focused and professional manner
  - ❍ Practice: small group problem-solving scenarios

- Understand how agency, the motivated actions of individuals, can be channeled into a teamwork model that promotes patient safety
  - ❍ Didactic Content: Healthcare Team Training lecture
  - ❍ Practice: small group problem-solving scenarios

- Identify the key elements of situational awareness and describe clinical situations where these concepts apply
  - ❍ Didactic Content: Healthcare Team Training lecture
  - ❍ Practice: small group problem-solving scenarios

- Acquire specific communication skills to apply in daily interactions with team members
  - ❍ Didactic Content: Healthcare Team Training Behaviors lecture
  - ❍ Practice: small group problem-solving scenarios

- Apply team behaviors and communication skills to prevent, trap, and/or mitigate error
  - ❍ Practice: small group problem-solving scenarios
  - ❍ Didactic: training wrap-up

Intended Audience:

■ All members of the healthcare team who help provide patient care on the unit. The approach for targeting participants should be inclusive rather exclusive and not limited to:

❍ Registered nurses
❍ Attending physicians
❍ Pharmacists
❍ Physicians-in-training
❍ Pharmacists-in-training
❍ Nurses-in-training
❍ Housekeepers
❍ Patient care assistants
❍ Respiratory therapists
❍ Social workers
❍ Case managers
❍ Registered dieticians
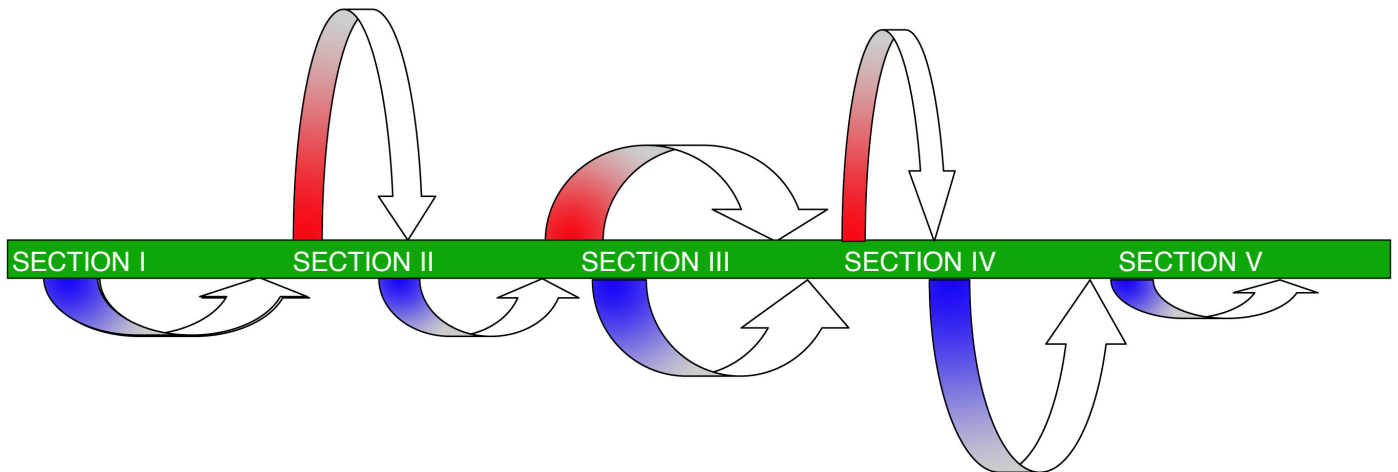❍ Physical, occupational, and speech therapists

Format:

• Lecture, discussion, and small group problem solving scenarios.

Details explained in this document.

Training Guide for Foundation Teamwork Training

SECTION I	SECTION II	SECTION III	SECTION IV	SECTION V

Arrows above the line represent portions of the program where patient safety events/errors are presented. Arrows below the line represent the debriefing/training segments. The height of the arrows shows the relative emphasis on the presentation of events and skills teaching in the program.

= debriefing/teaching periods

= events

Four-Hour Training Schedule

Morning	Afternoon	Topic
0800-0830	1300-1330	**Laying the Foundation** ▪ Introduction to TOPS project and project champions ▪ Discussion of the Patient Safety movement and creating a culture of safety ▪ Setting the stage for the day ▪ Complete Hospital Survey on Patient Safety Culture- following a statement on how to complete ▪ Brief overview of the patient safety movement and lessons learned ▪ Creating a Culture of Safety
0830-0850	1330-1350	***First, Do No Harm* Video** (18 minutes)
0850-0905	1350-1405	**Facilitated Discussion of *Do No Harm*** ▪ How both systems and individuals contribute to these errors ▪ How teamwork can be an intervention to prevent, trap, and mitigate error ▪ Intro to the remainder of the class
0905-1000	1405-1500	**Healthcare Team Behaviors Lecture** ▪ Background of the aviation safety movement ▪ Aviation and patient safety behaviors ▪ Bridge from "Do No Harm" to the problem solving modules ▪ Setting team behavior standards
1000-1015	1500-1515	**Break**
1015-1140 (1015-1055 1100-1140)	1515-1640 (1515-1555 1600-1640)	**Building an Infrastructure of Safety:** **Scenario-based small group problem solving modules.** • **Two** 40-minute modules based on areas of focus determined from each unit's needs assessment. The presentations will be held in small-group formats to maximize audience participation. *(Will require 5 min facilitator change)*
1140-1200	1640-1700	**Facilitated Wrap-Up and Evaluation** • What have we learned today? o What systems issue to work on? • Where do we go from here: interventions on the unit • Completion of course evaluation

TOPS Training at a Glance

	Laying the Foundation	"Do No Harm" Video And Discussion	Healthcare Team Training	Small Group Scenarios	Wrap-up
Objectives	• To introduce TOPS project and local champions • Provide definition of safety culture • Deliver leadership message that positive safety culture is important	• To engage audience attention to the problem of patient error ("icebreaker") • Provide groundwork for further discussion of teamwork as a solution to safety issues	To understand: • error chains • how effective communication reduces error • how teamwork reduces harm How to apply team training in the unit	• To assess the scenario for healthcare team behaviors • To discuss how team behaviors can affect workload and resource management • To practice communication skills learned in team training lecture	• To bring closure to the session • To prepare audience for their next steps
Content	• Intro from hospital leader • TOPS champion introduction to the training	Video of simulated patient experiences that led to a fatal medical error	Lecture by Mach 1 consultants	• Expanding Hematoma • Medication Error	• Review objectives • Review specific teachings • State next steps for the unit
Format	• Lecture with power point presentation	View video, then group has a facilitated discussion of poor outcome following numerous medical errors	Power Point slides, short videos, anecdotes	Scripted scenarios, roles taken by participants, stop at cut points for teaching	• Members of the champion group meet at the front
Timing	• 15 minutes	17 minute video 8 min. discussion	55 minutes	• 45 minutes for each scenario • Both scenarios experienced by each participant	• 20 minutes
Materials	• Laptop • Projector • Screen • Participant handouts (schedule, evaluation form)	• DVD • Projector • Screen	• Laptop • Projector • Screen • Mach 1 Pilot	• Scripts • Flip charts	• None

"It may seem a strange principle to enunciate as the very first requirement in a hospital that it should do the sick no harm."
—Florence Nightingale (1863)

Total time: 30 minutes
Time allotment includes expected delays in getting everyone signed in, seated, and provided an opportunity to eat and complete pre-course surveys (if applicable). If a survey is being administered, details on the process are included in a separate section of the facilitator's guide entitled, "Survey Administration."

Format: Lecture with optional power point presentation
This session should include one individual (i.e., a physician) to present the introductory content and a second individual (i.e., senior executive/CEO/CMO/CNO/COO) to make a few comments and provide a 'story' of why patient safety represents an organizational commitment.

Resources:

- Laptop computer

- LCD projector

- Sample Powerpoint Presentation attached

Objectives for the Presenter:

- To introduce TOPS project and local champions

- Provide definition of safety culture

- Deliver leadership message that positive safety culture is important

Procedure for Presentation:

Introduction (10-12 minutes)
- Provide a welcome and introduction to the TOPS Project, including identification of local project champions and project infrastructure. Emphasis should be placed on the multidiscipli-nary nature of project from planning to current implementation.

- Explain the project's overall goal to improve Patient Safety Culture starting with a definition of the term, a context for the deficiencies in which we currently deliver care (drawing analogy to aviation and IOM report), and what makes a 'good' safety culture.

- Begin framing the 'why you...' for the audience in discussing the 'local' nature of safety culture (graphically represented in accompanying powerpoint slide set), the goal to deliver such efforts to a med/surg setting, and how this represents an innovative endeavor. "We don't all work in a 'unit-based' environment such as an ICU, OR, or ED—nurses are unit-based and many others (docs/pharmacists/therapists, etc…) are service-based."

- Use energy, enthusiasm, and inspiration by outlining the goals of today——a focus on communication, teamwork, and the patient. Explain how it requires everyone's expertise in the room as all of us are part of the patient's care (using diagram from slide set). This piece is critical as it provides the 'thread' for the rest of the day and each subsequent session.
- Introduce the 'executive' to share a few words with everyone and then return to review the day's agenda prior to moving forward with the video presentation

Executive Remarks (5-7 minutes)
- Reinforce importance and innovativeness of TOPS project

- Express organizational commitment to Patient Safety

- Share an anecdote of an 'error' that occurred at the organization and how a lack of communication and teamwork contributed to the event (anecdote should be relevant to the target unit and audience for training)

Training Guide for Foundation Teamwork Training
Section II
First Do No Harm: A Case Study in Systems Failure

Total Time: 35 minutes

Format
- Presentation of video/DVD followed by facilitated discussion
  - ❍ 18 minute video developed from 3 Malpractice Cases from the Harvard Hospitals detailing the events and experiences of an Obstetric patient resulting in a poor out-come

- Facilitated discussion
  - ❍ 17 minutes

Resources
- Personnel:
  - ❍ Facilitator

- Equipment
  - ❍ Video or DVD
  - ❍ VCR or DVD player
  - ❍ Monitor or projector

Objectives: At the completion of this section, the facilitator will:
- Engage the audiences' attention

- Make the issues relevant and personal for the participants

- Provide the groundwork to further the discussion of teamwork as a solution to safety issues

Procedure for Presentation:

Objective 1: Engage the audiences' attention
- Preface the video: "we will be viewing this video which is a fictional account based on the real facts of 3 malpractice cases at the Harvard Hospitals. We will then engage in a discussion of what we see"

- Allow for silence after the video
  - ❍ Turn off the image, count to 10, take a couple of deep breaths—this is difficult, so try to sit with the silence and don't rush
  - ❍ You may wish to frame this as "lets take a few moments to absorb what we just saw"

Objective 2: Make the issues relevant and personal for the participants
- Opening the case
    - ❍ How do you feel? You may want to say: "what is going on in your head right now?"
    - ❍ Be prepared to share your experience with the video to open the conversation—"when I first saw this I…"

- Focus on making it personal
    - ❍ Could this happen at your institution? Have you ever experienced something like this? Could you have been one of the people that cared for her? What would that feel like?

- Probing questions for the participants
    - ❍ When solutions occur, push the audience to work through the solution in real time e.g." the MD could have"…response—"so show us how—pretend you are that MD, what would you say"

Objective 3: Provide the groundwork to further the discussion of teamwork as a solution to safety issues
- Focus the discussion teamwork and teamwork training as one solution to the system issues

- Acknowledge and re-frame comments as needed
    - ❍ validate each comment: some suggested responses:
        - ■ "that makes a lot of sense"
        - ■ "that rings true for me as well"
        - ■ "that is a challenge"—have a couple of these validations practiced so you don't use the same for every comment

- Ask open ended questions:
    - ❍ Did the individuals on this team work well together?
    - ❍ How would better teamwork affect this scenario?
    - ❍ Do teams ask for help differently than individuals? How?

- Re-focus statements:
    - ❍ Bring it back to the issue of teamwork—this sets up the rest of the curriculum

Conclusion:
- Wrap up what we did: "Today we watched the case of….."

- Focus on teamwork: "As you all articulated—these individuals didn't work well together and the system didn't support their teamwork"

- Set up the rest of the curriculum: "Today you will learn tools to work in teams to improve the care we deliver to patients and better protect them from errors like the ones we saw in the video."

Pitfalls to watch out for
- Don't forget to wrap up

- Too many things are wrong that we can't fix
   - ❍ Redirect with trying to focus on how each individual event is linked to the next and any break in these links (error chain) may protect the patient or prevent the error (Swiss cheese)

- "If only "so and so" did their job—this wouldn't happen"
   - ❍ Redirect with—why do you think they weren't able to make "x" happen?
   - ❍ Point out how the system didn't support the individual, or,
   - ❍ How a culture of teamwork would allow success in the task

- "It takes money—we don't have that"
   - ❍ VALIDATE first: it takes institutional as well as individual will to change culture, but not necessarily more money
      - ■ Did the communication impact the outcome?
      - ■ Improving communication is one improvement that takes people resources but not necessarily other money
      - ■ Are there other examples from the video of improvements that weren't financially related?

Information on obtaining the video:
Can be obtained from the "Partnership for Patient Safety" at
http://www.p4ps.org/interactive_videos.asp or call 800-726-9045

Total time: 55 minutes

Format: Power point lecture

Resources:
- Laptop computer

- LCD projector

Objectives: At the completion of this program, the participant learner will be able to:
- Understand error chains & how to break them

- Understand how effective communication can reduce errors and harm

- Comprehend that teamwork reduces the likelihood that errors will result in patient harm

- Apply healthcare team training in your work unit

Presentation:
Today's Flight Plan—see embedded compressed zipped file
- Aviation team training model

- Error chains

- Healthcare team training behaviors

- Leadership

- Communication

- Situational Awareness

- Workload management

- Debrief

- Objectives

Training Guide for Foundation Teamwork Training
Section IV
Small Group Problem Solving Scenarios

Total time: 2 Scenarios, 40 minutes each

Format: Tabletop presentation and discussion

Resources:
- Facilitators must have completed the train-the-trainer workshop

- Facilitator: participant ratio
  - ❍ Recommended 1:8, no more than 1:10

- Materials for the trainers/stations:
  - ❍ Scripts and materials for each module
  - ❍ 3 x 5 card handout, if appropriate

Procedure for Presentation:
- The facilitator will provide a brief introduction
  1. review objectives and teaching points (posted at the station)
  2. identify participants and assign roles (those who did not take part in the last module)

- Participants will read the first part of the scenario

- Facilitator will stop at the assigned cut point and guide the group to debrief the interactions
  1. Review teaching points
  2. Guide discussion to include the instructional objective for this portion

- Repeat for the remaining portions of the scenario

- Closing discussion
  1. Discuss teaching points and skill building techniques
  2. How to apply in daily practice

- Recommended: at the completion of the first scenario, facilitators will rotate to a second group.

Objectives:

"The Expanding Hematoma"
At the completion of this scenario, each participant will be able to:

- Identify opportunities in the scenario where SBAR can be used to improve the quality of the communication between the providers and with the patient.

- Identify opportunities in the scenario where providers can use assertion to effectively advocate for the patient

- Assess the scenario for the presence or absence of the following Healthcare Team Behaviors.
  - ❍ Leadership
  - ❍ Communication
  - ❍ Situational Awareness
  - ❍ Conflict Management
  - ❍ Resource Management

"Anatomy of a Medication Error:"
At the completion of this scenario, each participant will be able to:

- State the CUS words and use them to create a different outcome

- Identify areas in the scenario where the "error chain" could have been broken

- Demonstrate techniques for defusing angry and/or intimidating behaviors

- Discuss how team behaviors can affect workload and resource management

- Involve the patient when validating information

Total Time: 20 minutes

Format:
- Informal discussion with participants

- Written course evaluation

Resources:
- Personnel
  - ❍ Members of the site TOPS champions group
  - ❍ One or more TOPS team members to collect evaluation forms and envelopes

- Other
  - ❍ Course evaluations
  - ❍ Pens/pencils

Objectives: At the completion of this section, the facilitator will:
- Summarize and bring closure to the session

- Restate the training objectives

- Prepare the participants for their next steps towards improving team building and patient safety

Procedure for Presentation:

Objective 1: Summarize and bring closure to the session
- Recall each section of the program: "we started the day with…"

- Recount specific teachings and insights that impacted the class ("the most interesting thing…")
  - ❍ This can also be a way to engage the audience

Objective 2: Restate the training objectives
- Effective communication reduces the likelihood of error and patient harm.

- Involving the patient and family as team members is beneficial to the team as a whole and for improved patient care

- Teamwork can reduce the likelihood and severity of error

Objective 3: Prepare the participants for their next steps towards improving team building and patient safety

- Take action: take the skills learned today and put them into action tomorrow

- Individuals make up the system and changing individual practices contributes to changing the culture and the system

- Change can be very unsettling for some people, remember to have patience with yourself and others while this culture change takes place

- Articulate specific interventions taking place at your site
  - ❍ e.g. UCSF: Patient Care Conferences, TOPS unit teams, using patient stories to affect change

Pitfalls to watch for

- going overtime—leave enough time for participants to complete the class evaluation

- overpromising—keep the concept of "next steps" simple and concrete

Appendix: Preparing for the 4-hour Training Session

Sample Training Class Check List

Class: TOPS 4 Hour Training   Date: Time:

Location:

Contacts:

Handouts and Supplies			
Item	**Comment**	**Person Responsible**	**✓ when complete**
Participant Name tags	With letter designating group		
Participant Sign-in sheets			
3 x 5 cards- (2) yellow & green SBAR/CUS	Have at each table for facilitators		
HSOPSC (patient safety culture surveys)	numbered on back corresponding to name on master tracking sheet		
cover sheets for surveys w/ name			
Box/basket receptacle for survey			
Assorted pens/markers			
Hematoma - handouts	Have at each table for facilitators		
Registration desk signs			
Breakout table signs (DR, , LR, lota room, foyer)	Have at each table/room		
Class evaluations			
Anatomy of a Med Error - handouts	Have at each table for facilitators		
Agenda –(green)	_____ copies		
Clipboards-nametag, coversheet, survey, agenda			
Roles/Assigned Task			
Action Item/Assignment	**Comment**	**Person Responsible**	**✓ when complete**
MC			
Opening Remarks			
Facilitate- "First Do No Harm" video			
Healthcare Team Behaviors			
Facilitators – for small groups			
Laptop (who is bringing) AV setup – including queing up presentation, test video & remote			
Wrap-up at end of training			
Time keeper			
Compile entire presentation on flashdrive			
Person(s) to handle Registration Desk			
Hematoma – edits/copies			
Pharmacy – edits/copies			

Equipment & Food
Item
LCD projector
Screen for projection
Laptop computer
Easel & flipchart
"First, Do No Harm" DVD & backup copies
Portable easel
Speakers (2) – for laptop
Breakfasts, Lunches, Snacks

Appendix: Survey Administration

General Comments:

There are two opportunities for survey administration—-at the beginning prior to "Laying the Foundation, Section I" and at the end after the "Foundation Training Wrap-up, Section V." At initial training sessions, a desire may exist to capture current perceptions of safety culture using a validated tool such as the AHRQ Hospital Survey on Patient Safety Culture (HSOPSC). If Foundation Training Sessions are repeated in the future, such a tool may not be required and the focus will remain on obtaining course evaluations at the end of each session to drive continued improvements. We discuss administration of both surveys below.

Resources:

- AHRQ Hospital Survey on Patient Safety Culture (HSOPSC)

- TOPS Course Evaluation

- Clipboards for surveys

- Pencils for survey completion

- Spreadsheet for entry of HSOPSC responses
  (Available at: http://www.premierinc.com/all/safety/culture/data-tool.jsp)

- Spreadsheet for entry of Course Evaluations responses

Process for Administration of AHRQ Hospital Survey on Patient Safety Culture:

Print out and copy enough course evaluations to capture all training participants
Each survey should contain a cover sheet that includes the following information:

AHRQ Hospital Survey on Patient Safety Culture Instructions

1. *Please complete the attached survey reflecting on your experiences in caring for patients on [Insert Unit Here]*
2. *Upon completion, please remove this cover page and discard it as the survey responses remain anonymous*
3. *Please pass the completed survey to the end of the aisle where they will be collected*

Thank you for your participation in today's teamwork training.
-the TOPS Project Team

- Place surveys on individual clipboards to distribute to participants at time of registration and sign-in

- The "MC" will orient participants once they're seated and remind them to complete the surveys as instructed

- Carefully collect all completed surveys and deliver them to the individual responsible for entering responses into the provided spreadsheet template

- Note: Encourage completion of surveys before the training session begins. For participants arriving late, surveys should be completed in an adjoining space prior to joining the session in progress.

Process for Administration of TOPS Course Evaluations:

- Print out and copy enough course evaluations to capture all training participants

- As the "Foundation Training Wrap-up, Section V" presentation is winding down by the project champions, they should deliver the following message:

  "We will be passing out course evaluations now and we request you take a few minutes to fill them out so we can learn about your experience and improve our training course for future sessions. We appreciate your participation and please drop the course evaluation [in the box] prior to leaving today. Thank you."

- Carefully collect all completed surveys and deliver them to the individual responsible for entering responses into the provided spreadsheet template
Generate a summary of the responses to facilitate a team debriefing of the training sessions and foster continued improvements

General Comments:

In addition to the presenters, facilitators, and administrative resources required for ensuring a flawless training session (in process as much as content), the designation of an MC is critical. The MC role can be fulfilled any of the above individuals or an entirely independent project team member. For instance, the individual providing the "Laying the Foundation, Section I" may also serve this role for continuity during the 4-hr session.

Roles and Responsibilities of the MC:

[The following is organized by time and the flow of the 4-hr session]

Before Laying the Foundation, Section I

- Assist in getting everyone seated, ensure they are registered, and encourage completion of the AHRQ surveys (if applicable)

- Housekeeping items (phones, pagers, bathrooms, etc…) may be mentioned or displayed for participants

- Initiate the 'start' of the training session by introducing the first presenter or beginning Section I if the MC is carrying both these roles

- The presenter for Section I should introduce the 'Executive' and return to present the agenda for the day before turning it back over to the MC

Before First Do No Harm, Section II
1) Introduce presenter for video facilitation
2) Coordinate with presenter as to who will take responsibility for starting video (should not be presenter as they will framing video to participants)

Before Healthcare Team Training Lecture, Section III

- If time permits, MC may pose additional question to participants: "How many of you had seen the 'Do No Harm' video before? Did you take away anything different from it this time?

- Introduce speaker and explain how participants will hear an important lecture that frames what will come in the small group scenarios. The scenarios will provide an opportunity to practice the skills discussed and presented in the next hour. Reiterate to participants that while they will get introduced the aviation world, we want them to think about application of these principles in their day to day duties. "We don't work in a cockpit and we all realize that but the material the speaker is going to share translates well into what we hope to stimulate in your minds for the next couple hours."

Before Break

- If time permits, provide an opportunity for questions and brief exchange

- Organize the group to the next steps of the day: 7-10 minute break, enjoy additional food/ beverages, and then reconvene in the designated locations for the small group scenarios. Explain how the shifting will occur in that after they complete the first scenario, they will immediately sit down for the second one. After the second one is completed, they should be told that we will bring everyone back together in the main room for the Foundation Training Wrap-up, Section V.

During Scenarios

- The MC should essentially work with other administrative resources to assist with delivering 'remaining time' notices to facilitators, ensuring course evaluations are being prepared, and helping move participants from one scenario location to the other in between sessions and into the main room after the second small group is completed.

Before Foundation Training Wrap-up, Section V

- Unless the MC is also a local project champion, only the champions at a given site should come to the front of the room to address the group and proceed with the last session.

- The MC should remind or cue the champions towards the end of their presentation to make the course evaluation request

Note: Additional responsibility throughout includes working with the designated "Timekeeper" to alert a given presenter or facilitator that their time is ending——this may be done by simply standing up next to them. In addition, if a discussion occurs during one of the presentations, the MC should be sensitive to time and move things forward if necessary by providing closure to a given discussion.