

APPENDIX C

TeamSTEPPS® Outline for Faculty Teachers

TeamSTEPPS is an evidence-based set of teamwork tools, aimed at optimizing patient outcomes by improving communication and teamwork skills among health care professionals. Various online tools and courses are available at: <https://www.ahrq.gov/teamstepps/index.html>

Sites and teams will benefit from leaders completing courses such as:

TeamSTEPPS® 2.0

TeamSTEPPS® for Office-Based Care Version

The following checklist provides a brief overview of topics students will cover through completing the module, and through practical clinical experiences.

Introduction:

TeamSTEPPS (Team Strategies and Tools to Enhance Performance and Patient Safety) allows teams to engage in evidence-based practices that optimize functioning in delivering health care services.

The framework is based on developing the skills:

1. LEADERSHIP
2. SITUATION MONITORING
3. MUTUAL SUPPORT
4. COMMUNICATION

These skills combine with the team competency outcomes: knowledge, attitude and performance to improve outcomes for patients.

1. Leadership:

Any team member can assume leadership role based on needed skills for the situation (Leaders can be situational or designated).

Organizes team through following roles:

- Communicating clear goals
- Solicits member input for decision-making
- Encourages appropriate speaking up and challenging of decisions by all members
- Models and enables good teamwork
- Negotiates conflict resolution

Leader Responsibilities:

Brief (Planning): occurs before starting activity, a short meeting to build team, clarify roles and expectations, predict outcomes and plan contingencies

Huddle (Problem Solving): occurs as needed while performing activity, consider adjusting plan or reinforce existing plan based on situation awareness

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Debrief (Feedback): occurs informally at event conclusion for team to assess performance and consider future improvements

2. Situation Monitoring Skills:

Situation monitoring: continual reevaluation of events occurring around you to maintain awareness

STEP: (Status of patient, Team members, Environment, Progress toward goals)

Shared mental model: sharing of situational awareness among team members to help team members be on the same page

Cross monitoring: team members observe the actions of others to watch for mistakes and protect each other from errors

3. Mutual Support through Task Assistance:

Team members monitor the workload of one another, encourage an environment where help is requested or offered in the context of patient safety.

4. Communication Tools:

Complete, clear, timely and brief for effective communication.

SBARQ: conveys critical information requiring immediate action for a patient

SITUATION: What is happening to the patient?

BACKGROUND: Context or clinical background?

ASSESSMENT: My understanding of the problem?

RECOMMENDATION AND REQUEST: Needed action for resolution?

QUESTIONS: Allow and respond to any uncertainties.

CUS: stops the current course and notifies team that there is a potential issue

I AM CONCERNED

I AM UNCOMFORTABLE

THIS IS NOT SAFE

Two Challenge Rule: when an initial concern is ignored, team members should express their question twice to make sure team members acknowledge concern. If not resolved can use chain of command.

Call outs: simultaneously share critical information with all team members

Check backs: verify information transmitted by sender is clear to receiver by having them restate, closes communication loop