

Start With a Focus

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Harborview Medical Center



Harborview Medical Center is owned by King County, governed by the Harborview Board of Trustees, and managed under contract by the University of Washington

WAMI Region

- Only Level I adult and pediatric trauma and burn center in region
 - ◆ Washington, Alaska, Montana and Idaho.

Harborview Medical Center

● Licensed beds	413
● Employees	4,432
● Physicians	1,216
● Admissions	19,424
● ED visits	65,515
● Clinic visits	224,769
● Surgery cases	13,455

Approximately \$220 million in charity care in 2012

Regional Burn Center

- 45 bed Burn Center
 - ◆ 18 Critical Care
 - ◆ 27 Acute Care
- Approximately 200 staff/MDs
 - ◆ RNs, Social Work, Residents, Dietitians, pharmacists, PT/OT, housekeepers, CNAs, rehabilitation psychologists

The crew

➤ Jeff Skiles, FP



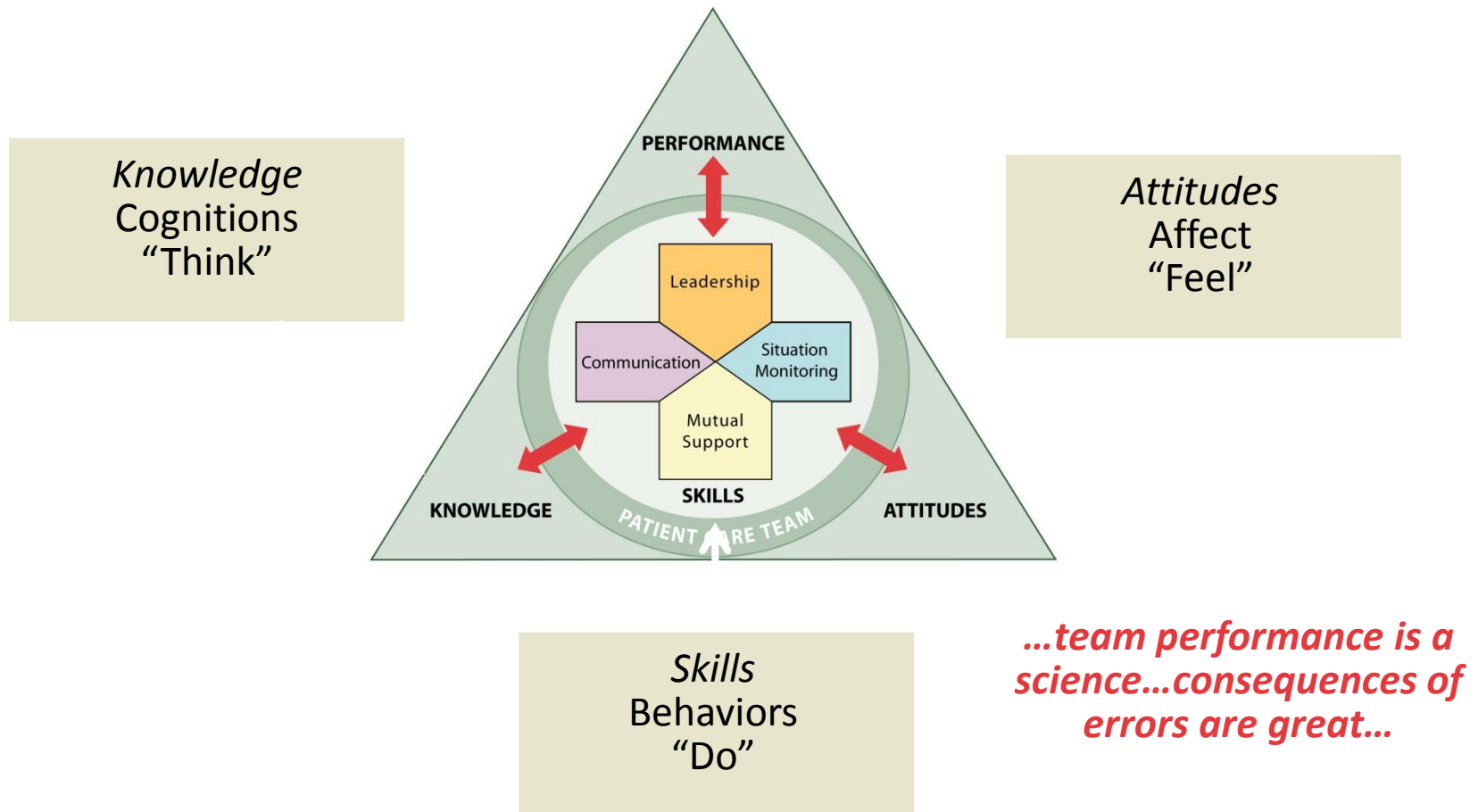
15,000 hrs – only Boeing Experience
1st Paxs Flight on A-320

➤ C Sullenberger, NFP



19,000 hrs – Designated Captain
Had never before met Jeff Skiles

Components of Team Performance



Leadership

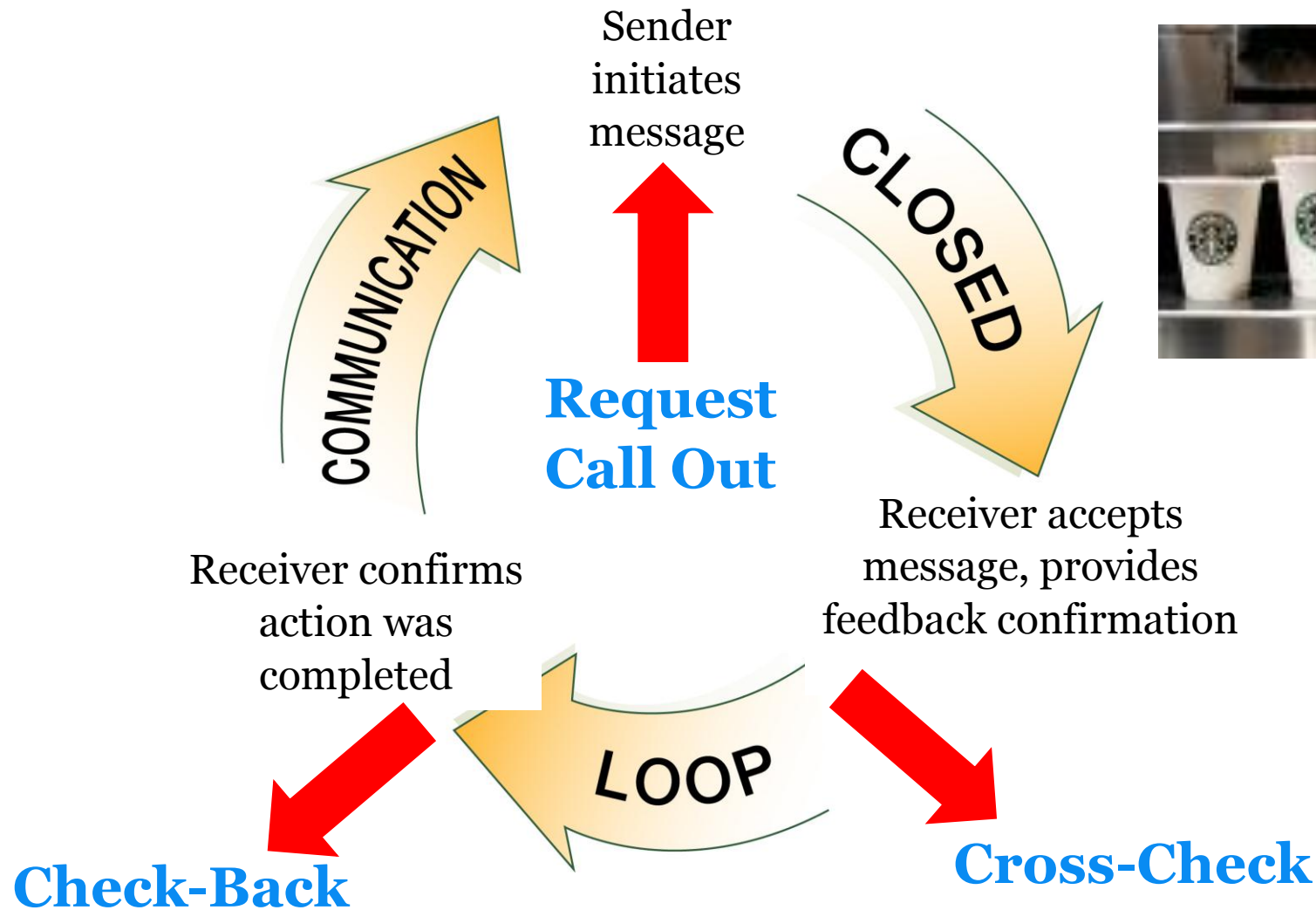
**SHARED
MENTAL
MODEL**

Communication

Situation
Monitoring

Mutual
Support

Closed Loop Communication





‘Team of Experts’



‘Expert Team’



100 Level Skills

**Call-outs
Cross-checks
Check-backs
Briefs
Huddles**

200 Level Skills

**Briefs
Debriefs
Huddles
SBAR**

300 Level Skills

**Handoffs
Debriefs
CUS
2-Challenge**

Communication Breakdowns

- Culture of Safety identified communication and nonpunitive environment as barriers to good teamwork
 - Utilized Team Perception Questionnaire that measures five areas of teamwork/communication
 - ◆ Leadership, communication, mutual support, situation monitoring, team structure
 - ◆ Further review found a breakdown in communication between disciplines
 - ◆ Had tried other solutions
 - Consulting companies

Will TeamSTEPPS Help Change the Culture?

- Medical Director of Burn Center met with PSO, who is a Master Trainer about implementing TeamSTEPPS
- After initial discussions, a meeting was set up with Burn Team Leadership along with hospital administration
 - ◆ The goal was to get commitment from administration and BTL

Development of the Change Team

- Staff RNs
- Physical Therapist
- Occupational Therapist
- Pharmacist
- MD
- Nurse Manager
- Nurse Practitioner

SWOT Analysis

STRENGTHS (i.e. Attributes of our team and our systems that should assist in achieving our project goal)	WEAKNESSES (i.e. Attributes of our team and our systems that could deter us in achieving our project goal & may need to be addressed)
<ul style="list-style-type: none"> • “Can do” attitude • Rounds 2X per week • Familiarity of staff & MDs Clinic \geq 8E ICU > 8E • Expectations of positive patient outcomes • International reputation • MD buy-in with splinting • Patient Advocacy – patients have many strong advocates • Interdisciplinary/Multi-disciplinary approach • Exposure to Attendings • Pride in our work 	<ul style="list-style-type: none"> • Stress during wound rounds – difficulty in communication <ul style="list-style-type: none"> ○ Focus on wounds ○ Effects on patient ○ Discomfort with asking questions • Staffing Level & Experience (insufficient critical thinking skills) • Openness to new ideas • Paternalistic attitudes toward DC – “bomb proof” • Inconsistency of treatment providers • Unclear expectations during grand rounds • Welcomeness of new information during grand rounds • RN buy-in – splinting • Comparison of MD personality and practice • Increased expectations of MDs (due to a lot of presence) • Inflexible older staff • Feedback perceived as negative – also opportunity • Inconsistent practice standards
OPPORTUNITIES (Conditions that can be leveraged to assist in achieving our project goal)	THREATS (Conditions that can deter us in achieving our project goal & may need to be addressed)
<ul style="list-style-type: none"> • RN introduction during wound rounds • More team building opportunities • Ongoing education – splinting/wound care • Improve critical thinking skills • Provide feedback to “close the loop” with bedside staff • Improve cross discipline communication 	<ul style="list-style-type: none"> • Peoples’ (i.e. staffs’) anxiety to get their priorities met – interrupts other priorities brought up with wound rounds • Ongoing educational needs • Staffing matrix on 8E different • Staff worn out - compassion, fatigue, burns/kids is emotionally draining

Burn Center – TeamSTEPPS Implementation Project Goal

To improve trust and communication across disciplines in order to
 nt outcomes; and improve patient and staff satisfaction.

Stress during wound rounds – difficulty in communication

- Focus on wounds
- Effects on patient
- Discomfort with asking questions

Analysis (Focus on Splints and Wound Rounds)

WEAKNESSES

(i.e. Attributes of our team and our systems could deter us in achieving our project goal & may need to be addressed)

Stress during wound rounds – difficulty in communication

- Focus on wounds
- Effects on patient
- Discomfort with asking questions

Staffing Level & Experience (insufficient critical thinking skills)

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OPPORTUNITIES

(Conditions that can be leveraged to assist in achieving our project goal)

RN introduction during wound rounds

- More team building opportunities
- Ongoing education – splinting/wound care
- Improve critical thinking skills
- Provide feedback to “close the loop” with bedside staff

(Conditions that & may need to be addressed)

Peoples' (i.e. staffs') anxiety to get their priorities met – interrupts other priorities brought up with wound rounds

- Ongoing educational needs
- Staffing matrix on 8E different
- Staff worn out - compassion, fatigue, burns/kids is emotionally draining

Team Structure

Delineates fundamentals such as team size, membership, leadership, composition, identification and distribution

Leadership

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

Situation Monitoring

Process of actively scanning and assessing situational elements to gain information, understanding, or maintain awareness to support functioning of the team

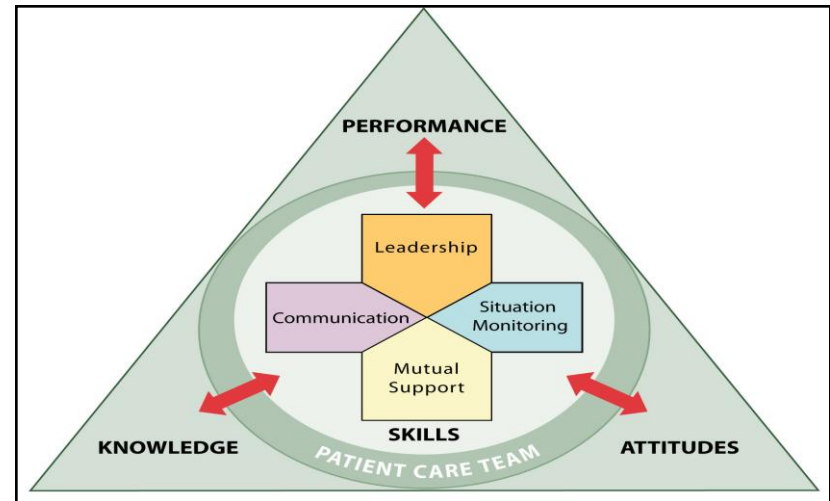
Mutual Support

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

Communication

Process by which information is clearly and accurately exchanged among team members

Coming to the Burn Center



***TeamSTEPPS – Team Strategies & Tools to Enhance Performance
& Patient Safety***

TeamSTEPPS

Scenario Development

Scenario #1

- Pt Smith is scheduled to have his wound care at 1000 this morning but is complaining of increased pain and is saying he won't allow the RN to provide wound care or activity unless he gets more pain medication. Upon asking the ARNP for more pain medicine, the RN is asked for some more info regarding the patient's pain
- On the "bad scenario," the RN tells the NP the patient says he's hurting and just needs more pain medication and she asks for an order so "the RN can keep on schedule"
- Good Scenario – RN uses SBAR tool to discuss patient with ARNP-
- S = Mr. Smith is complaining of more pain on his burn and is asking for more pain meds before wound care
- B = He's the patient six days post chest/arm burn from a radiator explosion and is starting to develop some skin buds.
- A = I think the skin buds are leading to increased pain and leading to inactivity and resistance to wound care which may cause a delay in healing
- R = He has tolerated his pain medication well to this point, so I would like to recommend we increase his dose for wound care and then assess his wounds on rounds as well as assess his prn pain meds.

Initial Tools implemented

- Briefs
- Huddles
- Debriefs
- SBAR
- Call outs
- Check backs
- Cross checks

With Early Success

- The momentum gave us an opportunity to:
 - ◆ Improve “close the loop” communication and improve splint therapy
 - Call out
 - Check back
 - Cross check
 - ◆ Implement debriefs for post burn resuscitations
 - ◆ Reintroduce SBAR
 - ◆ Introduced CUS/Two Challenge
 - ◆ Include family and patients in TeamSTEPPS training for hand hygiene

Follow Up Results

- Improvement in 80% of scores in Team Perception Questionnaire
 - Leadership
 - Situation Monitoring
 - Mutual Support
 - Communication
- Scores stayed the same in Team Structure

Take Home Message

- Identify one area/project and focus with a few tools
 - ◆ Expand from these successes
- Utilize culture of safety data to identify specific areas for improvement
- Recruit leadership champion (i.e. Medical Director of Burn Center)
- Encourage completion of SWOT analysis early on to help establish a focus

Questions Discussion