

TEAMSTEPPS FROM IMPLEMENTATION TO SUSTAINABILITY: THE METROHEALTH EXPERIENCE

AHA Team Training Monthly Webinar

September 12, 2018





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



2019 AHA Team TrainingNational Conference

June 12-14 San Antonio aha.org/teamtraining



Grab your cowboy boots and block your calendar - AHA Team Training is heading to San Antonio next June for our annual conference! We'll be sharing more conference information over the coming months, but first get ready to answer our Call for Proposals. Registration will open in January 2019.

UPCOMING TEAM TRAINING EVENTS

"Gaming in TeamSTEPPS: Where to Begin?"

November 9, 2018 | Orlando, FL | \$400 registration fee

Learn how TeamSTEPPS tools can be applied to a group of activities to develop and implement team strategies that will achieve the successful transfer of knowledge. This specialty course is designed around active participation and is meant to provide TeamSTEPPS facilitators with alternative ways to deliver in-

person TeamSTEPPS training and education.

Click Here to Register



UPCOMING TEAM TRAINING EVENTS

We have spots available in our <u>Master Training Courses</u>:

- September 20-21 in Centennial, CO with University of Washington
- October 4-5 in Cleveland, OH with MetroHealth
- November 8-9 in Durham, NC with Duke University
- December 6-7 in New Orleans, LA with Tulane University just added!

Our next free webinar will be October 10 at 12:00 pm CT

- "Optimizing Tar Heel Trauma Care: Hardwiring TeamSTEPPS into Trauma Resuscitations"
- Registration coming soon watch for an email announcement!



CONTACT INFORMATION

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Presenters



- Anne Aulisio, MSN, RN, Patient Safety Officer
- Ann Fiorta, BSN, RN, PCCN, Medical Step Down Unit
- Joseph Karban, BS, CNMT, RT(N)(AART), Radiology
- Robert L. Smith, PhD, Director, Medical Staff Assistance Programs and TeamSTEPPS











One Billion in Operating Revenue

Over 1,200,000 Ambulatory visits

Over 125,000 Emergency Department visits

Over 7,500 employees

Over 5,000 trauma activations

Over 3,000 births

Twenty-three Health Centers

Nine Pharmacies

Five Metro ExpressCare

Four Discount Drug Mart Clinics

Three Community EDs







TeamSTEPPS

Initiated Program in 2013:

- Identified TeamSTEPPS Champion
- Established TeamSTEPPS Change Team
- Prepared Master Trainers
- Developed Steering Committee
- Agreed to Implement System-wide
- Developed Instructor Training Course







Organizational Change Team

- Quality Department
- OB/GYN
- Emergency Medicine
- Surgery
- Trauma / Burn Units
- Medicine
- Pediatrics
- Geriatrics
- PM&R

- Ambulatory Care
- Medical ICU
- Organizational Develop
- Simulation Center
- Communication
- Diversity and Inclusion
- Marketing
- MetroHealth Union





MetroHealth's Mission

"Leading the way to a healthier you and a healthier community through service, teaching, discovery and teamwork."









MetroHealth's Values STRRIQ



Service to Others

Teamwork

Accountability

Respect

nclusion and Diversity

Quest for Excellence





TeamSTEPPS Action Council "TAC"

- Part of Sustainability
- Clinical and Non-Clinical Areas
- Goals:
 - Improve Patient Safety/ Customer Service (Quality)
 - Improve Patient/Customer Satisfaction (Patient Experience)
 - Improve Employee Engagement (Human Resources)
 - Improve Processes and Increase Efficiencies (Lean/ Six Sigma)





Structure of the TACs

- Action Council has Two Co-Chairs
 - Co-Chairs are not part of leadership. They are line staff.
 - Master Trainer sits on the Action Council to support the Chairs.
- One Person Representing every Discipline or Job Category working on the Unit
- Includes Patient and Family Advisors
- One Administrator serves on the Council to address barriers





Examples of TeamSTEPPS

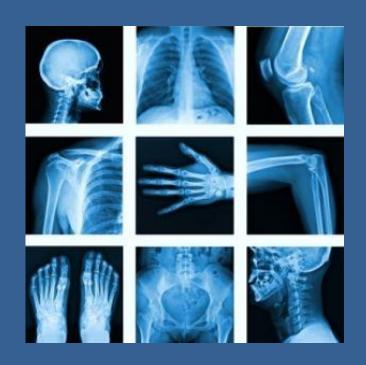
Implementation and TAC

Formation





TeamSTEPPS Program for Radiology



Joseph Karban, BS, CNMT, RT (N)(ARRT)

TeamSTEPPS Radiology Chair
Nuclear Medicine Technologist
Radiation Dosimetry Lead
Special Projects Coordinator for Radiology





Program Development

- Radiology department:
 - -24/7/365 shifts
 - Mix of clinical and non-clinical personnel
 - Full-time, Part-time, and PRN designations
- How to accomplish educating the staff members on the tools and techniques of TeamSTEPPS?
- How did we have time to do this?









Program Development

- Spread courses over the course of four months
 - Month 1: Intro/Leadership
 - Month 2: Communication
 - Month 3: Mutual Support
 - Month 4: Situational Monitoring/TAC Development
- 10 courses per month at various times and days to allow for all three shifts to attend







Program Development

- Supervisors and Managers responsible for assigning staff members from each area to limit the burden of missing staff members
 - They know their departments better than we do!
- Courses taught by 2 members of Radiology Techs, Physicians, Nurses, Support Staff, etc.
 - TeamSTEPPS curriculum that focused on real examples/discussion from Radiology – Less lecture, more engagement!





TAC Development

- During the final month's session, we explained the program in detail and how we would like to sustain it
- TAC representation consisted of each area of radiology
 - Nursing
 - CT
 - Scheduling
 - Physician
 - Ambulatory X-Ray
 - Interventional Radiology
 - MRI

- Radiation Safety/Medical Physics
- Ultrasound
- Management/Compliance
- Breast Imaging
- Informatics
- Nuclear Medicine





- Filled out the TAC with other members of the organization as well
 - Patient Family Advisor
 - Office of Patient Experience Representative
 - TeamSTEPPS Master Trainer
- TAC meets once per month with an agenda, but also allows for open discussion
 - Meetings not exclusive to TAC members creates higher departmental engagement and sustainability





- Early sessions focused on giving each member a way to voice a concern and to address that concern with the tools of TeamSTEPPS
- Pinpointed a mix of potential projects that would be easy to accomplish, while also being effective – little victories!





- Radiology TAC has been meeting each month for over a year
- Tremendous success with various projects, despite barriers
 - Some projects evolved when facing barriers and found better success
- Communication tools allowed for our TAC to not only voice concerns, but come up with solutions





- Worked with other areas of the hospital to come up with common goals of increased patient satisfaction, safety, and efficiency
 - Lab/Pathology
 - Patient Experience
 - Facilities Management
 - Environmental Services
 - Patient Transportation
 - Information Services
 - Infection Control
 - Logistics
 - Supply Chain Management





Radiology Project Examples

- Point of care testing
- Patient Satisfaction Surveys
- Added 600+ providers and their contact information to intranet and Radiology Information Systems software
- Provided masks, sanitizer, and signage to waiting rooms during cold and flu season





Radiology Project Examples

- Changed the reminder message process for patients at satellite facilities so that they were better aware of areas to register
- Provided an FAQ to all departments for IS common questions/solutions
- Provided phone chargers for high volume patient waiting areas





Radiology and Transportation

- Radiology seeing increased wait times for patient transportation during certain hours of the day – patient experience/efficiency concern
- Invited members of logistics/patient transportation to a TAC meeting to discuss this concern
- Prior to meeting, worked with IS to pull data from all patient transport requests, and then created an analysis of this work to determine peak usage times, when wait times were longer than average, etc.





Radiology and Transportation

- Led to the development of a new zoning program for Transport which placed multiple porters in our areas during peak usage times
 - This also limited distances traveled for porters because they would be "stationed" to certain areas
 - Created an electronic transport request function in our charting software to eliminate hand-off issues





Radiology TAC Sustainability

- Limited turn-over for TAC members
 - Keeping members engaged by assigning them to projects that they are passionate about
 - Allowing other members from each area to contribute to the TAC prevents burnout
 - When facing barriers, not giving up
- Our TAC has been successful because of the stake it has developed in Radiology





Radiology TAC Sustainability

- Administration continues to see the value and meets with chair to debrief following monthly meetings/project completion
- TAC doesn't just focus on "what's wrong"
 - Work on other engagement projects such as Radiology Tech Week: games, prizes, parties, etc.
 - When members feel like they can make a difference and influence positive change, everyone wins





TeamSTEPPS Pulmonary / Medical Step Down Unit



Presented by Ann Fiorta, BSN, RN, PCCN





Pulmonary Medical Step Down TeamSTEPPS Integration and TAC Formation

- Organization adopted TeamSTEPPS model
- All employees to be trained
- Staff attended training sessions together.
- Training conducted by TeamSTEPPS Instructors from the Step Down unit.
- Development of the TAC occurred once the training of staff was completed.
- Early physician buy-in, including the Pulmonary Director who was an Instructor
- TAC Formation: Pulmonary Director volunteered to be the TAC Administrator.
- Emails sent to Pulmonary Physician group, Nursing, Clinical support staff, and Respiratory Therapy asking for volunteer representation on the TAC





Pulmonary/Medical Step Down TAC (PMSD TAC)

- Interdisciplinary representation from Nursing, Medicine, Nutrition,
 Clinical support staff, Pharmacy, and Respiratory Therapy.
- Voluntary membership
- Meets monthly
- First TAC met December 20, 2017







First PMSD TAC Project: Multidisciplinary Communication

- Brainstorming to identify issues
- Multi voting done to determine first project
- Interdisciplinary communication received most votes.
- Barriers to communication identified.
- Interdisciplinary Team Rounds project piloted.





Interdisciplinary Rounds Pilot

Steps:

- 1. Critical Incidents reviewed
- 2. Barriers to rounds identified
- 3. Inconsistencies in communication between physicians and nurses identified.
- 4. Checklist developed to guide nurses to provide clear, concise, focused information during rounds.





Physicians

Challenges

- Attitude of some physician towards multidisciplinary rounds
- Timing with rounding schedules and physician work flow
- Time: Teaching responsibilities during rounds
- Demands for throughput

Solutions

- Physician champion encouraged peers
- Department Chair supported project
- Nurses worked to provide focused report
- Improved process to call nurse to bedside to reduce delay in rounding





Nurses

Challenges

- Concise and focused information
- Greater percentage of nurses with less than 2 years experience
- Timing of rounds/interruptions

Solutions

- Topical outline for rounds
- Education and senior nurse support
- Attitudinal change to nurse participation in team rounds





Nursing Focused Information Template



Status:

- Hemodynamic
- Mental: CAM ICU/CIWA/RASS
- Oxygen/Ventilation
- Activity Tolerance

Medication:

- •Issues
- Pain control
- Order reconciliation

IV:

- Access
- Orders

Labs

- Blood cultures
- Critical values

Intake/Output Issues

- Urine output
- •Exfoleyate?

New Orders

Go

- Orders for discharge/transfers
- Home meds/services
- Goldenrod
- Off unit tests/procedures







Implementation

- Weekly orientation given to Residents on unit specific items.
- Daily assignment sheet given to Physicians.
- Nursing called to bedside during rounds to provide focused information and updated on plan of care.





Progress

- Process implemented
- Questionnaire developed to obtain feedback from physicians and nurses.
- Plan to incorporate Multidisciplinary Simulation to educate and reinforce Multidisciplinary Rounding process.





Ongoing Commitment

- The PMSD TAC continues to meet monthly.
- Evaluate ongoing projects and continue to brainstorm ideas.









Questions





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Visit www.aha.org/teamtraining or email us at teamtraining@aha.org!



