TeamSTEPPS™

Strategies & Tools to Enhance Performance and Patient Safety
TeamSTEPPS™

Team Competency Outcomes

Knowledge
• Shared Mental Model
Attitudes
• Mutual Trust
• Team Orientation
Performance
• Adaptability
• Accuracy
• Productivity
• Efficiency
• Safety

TeamSTEPPS is comprised of four teachable-learnable skills: Leadership, Situation Monitoring, Mutual Support, and Communication, the core of the TeamSTEPPS framework. The red arrows depict a two-way dynamic interplay between the four skills and the team-related outcomes. Interaction between the outcomes and skills is the basis of a team striving to deliver safe, quality care. Encircling the four skills is the patient care team which not only represents the patient and direct caregivers, but those who play a supportive role within the healthcare delivery system.
Key Principles

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
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Leadership

The art of getting someone else to do something you want done because he wants to do it...

—Dwight D. Eisenhower
Leadership

Effective Team Leaders

• Organize the team

• Articulate clear goals

• Make decisions through collective input of members

• Empower members to speak up and challenge, when appropriate

• Actively promote and facilitate good teamwork

• Skillful at conflict resolution
Team Events

Planning

• **Brief** - Short session prior to start to discuss team formation; assign essential roles; establish expectations and climate; anticipate outcomes and likely contingencies

Problem Solving

• **Huddle** - Ad hoc planning to reestablish situation awareness; reinforcing plans already in place; and assessing the need to adjust the plan

Process Improvement

• **Debrief** - Informal information exchange session designed to improve team performance and effectiveness; after action review
Brief Checklist

During the brief, the team should address the following questions:

☐ Who is on the team?

☐ All members understand and agree upon goals?

☐ Roles and responsibilities are understood?

☐ What is our plan of care?

☐ Staff and provider’s availability throughout the shift?

☐ Workload among team members?

☐ Availability of resources?
Debrief Checklist

The team should address the following questions during a debrief:

☐ Communication clear?

☐ Roles and responsibilities understood?

☐ Situation awareness maintained?

☐ Workload distribution equitable?

☐ Task assistance requested or offered?

☐ Were errors made or avoided? Availability of resources?

☐ What went well, what should change, what should improve?
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Situation Monitoring

Attention to detail is one of the most important details...
—Author Unknown
Situation monitoring is the process of continually scanning and assessing what’s going on around you to maintain situation awareness.

Situation awareness is “knowing what is going on around you.”

With a shared mental model, all team members are “on the same page.”
Cross Monitoring

An error reduction strategy that involves:

- Monitoring actions of other team members
- Providing a safety net within the team
- Ensuring mistakes or oversights are caught quickly and easily
- “Watching each other’s back”
Situation Monitoring

I’M SAFE Checklist

✓ I = Illness
✓ M = Medication
✓ S = Stress
✓ A = Alcohol and Drugs
✓ F = Fatigue
✓ E = Eating and Elimination

An individual team member’s responsibility...
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Mutual Support

A chain is only as strong as its weakest link...

—Author Unknown
Mutual Support

Task Assistance

A form of mutual support:

- 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

In support of patient safety, it’s expected!
Two-Challenge Rule

When an initial assertion 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.
- If the outcome is still not acceptable:
  - Take a stronger course of action
  - Utilize supervisor or chain of command

Empowers all team members to “stop the line” if they sense or discover an essential safety breach.
I am concerned!
I am uncomfortable!
This is a safety issue!

“Stop the Line”
Communication is the response you get from the message you sent regardless of its intent

—Author Unknown
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?

“I am calling about Mrs. Joseph in room 251. Chief complaint is shortness of breath of new onset.”

**Background** – What is the clinical background or context?

“Patient is a 62 year old female post-op day one from abdominal surgery. No prior history of cardiac or lung disease.”

**Assessment** – What do I think the problem is?

“Breath sounds are decreased on the right side with acknowledgement of pain. Would like to rule-out pneumothorax.”

**Recommendation and Request** – What would I do to correct it?

“I feel strongly the patient should be assessed now. Are you available to come in?”
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

Example during an incoming trauma:

Leader: “Airway status?”
Resident: “Airway clear”
Leader: “Breath sounds?”
Resident: “Breath sounds decreased on right”
Leader: “Blood pressure?”
Nurse: “BP is 96/62”
Communication

Check-Back

Process of employing closed-loop communication to ensure that information conveyed by the sender is understood by the receiver as intended.

The steps include the following:

1. Sender initiates the message
2. Receiver accepts the message and provides feedback
3. Sender double-checks to ensure that the message was received

Example:

Doctor: “Give 25 mg Benadryl IV push”
Nurse: “25 mg Benadryl IV push”
Doctor: “That’s correct”
Handoff

The transfer of information (along with authority and responsibility) during transitions in care across the continuum; to include an opportunity to ask questions, clarify, and confirm.

Examples of transitions in care include shift changes, physicians transferring complete responsibility, and patient transfers.
### Team Performance Observation Tool

<table>
<thead>
<tr>
<th><strong>Team Structure</strong></th>
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<tbody>
<tr>
<td>Assembles team</td>
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<td>Establishes leader</td>
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<tr>
<td>Identifies team goals and vision</td>
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<tr>
<td>Assigns roles and responsibilities</td>
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<tr>
<td>Holds team accountable</td>
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<tr>
<td>Actively shares information</td>
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<thead>
<tr>
<th><strong>Leadership</strong></th>
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<tr>
<td>Utilizes resources to maximize performance</td>
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<tr>
<td>Balances workload within the team</td>
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<tr>
<td>Delegates tasks or assignments, as appropriate</td>
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<tr>
<td>Conducts briefs, huddles, and debriefs</td>
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<tr>
<td>Empowers team to speak freely and ask questions</td>
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<thead>
<tr>
<th><strong>Situation Monitoring</strong></th>
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<tr>
<td>Includes patient/family in communication</td>
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<tr>
<td>Cross monitors team members</td>
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<tr>
<td>Applies the STEP process</td>
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<tr>
<td>Fosters communication to ensure a shared mental model</td>
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<tr>
<th><strong>Mutual Support</strong></th>
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<tr>
<td>Provides task-related support</td>
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<td>Provides timely and constructive feedback</td>
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<tr>
<td>Effectively advocates for the patient</td>
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<tr>
<td>Uses the Two-Challenge rule, CUS, and DESC script to resolve conflict</td>
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<td>Collaborates with team</td>
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<tr>
<th><strong>Communication</strong></th>
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<tr>
<td>Coaching feedback routinely provided to team members when appropriate</td>
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<tr>
<td>Provides brief, clear, specific, and timely information</td>
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<tr>
<td>Seeks information from all available sources</td>
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<tr>
<td>Verifies information that is communicated</td>
</tr>
<tr>
<td>Uses SBAR, call-outs, check-backs, and handoff techniques</td>
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**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 Follow-Up with Co-Workers
- Distractions
- Fatigue
- Workload
- Misinterpretation of Cues
- Lack of Role Clarity

**TOOLS & STRATEGIES**
- Brief
- Huddle
- Debrief
- STEP
- Cross Monitoring
- Feedback
- Advocacy and Assertion
- Two-Challenge Rule
- CUS
- DESC Script
- Collaboration
- SBAR
- Call-Out
- Check-Back
- Handoff

**OUTCOMES**
- Shared Mental Model
- Adaptability
- Team Orientation
- Mutual Trust
- Team Performance
- Patient Safety!!
TeamSTEPPS Coaches
(list coaches and contact info for your institution)