Eight hospitals joined the Community Call.
March 20 1400 CST, April 16 1100 CST, May 14 1400 CST, June 19 1100 CST

1. Eight hospitals joined the Community Call.

2. Announcements
   a. The National Implementation of TeamSTEPPS
      Katherine Jones shared her experience using the HSOPS to evaluate the impact of TeamSTEPPS as part of the webinars used by the National Implementation of TeamSTEPPS. The National Implementation of TeamSTEPPS conducts webinars monthly. You can read a transcript of this webinar, register for future webinars, and access other resources and previous webinars via the TeamSTEPPS User Support Portal. To access the portal go to http://teamsteppsportal.org.
   b. The 2014 TeamSTEPPS National Conference will be held June 11 – 12 in Minneapolis. You can register to attend the conference free of charge through the portal http://teamsteppsportal.org

3. Factors that affect transfer of new knowledge to behaviors on the job. There are three categories of factors:
   1) Trainee/Learner
      a. Cognitive Ability…has to be able to learn the material
      b. Self-Efficacy…has to believe that he/she can make a difference
      c. Motivation…has to want to learn and change
      d. Perceived utility of training…has to believe that the training is useful
   2) Training
      a. Behavior focus…what you do differently
      b. Error management…what you do differently that will prevent and help to manage errors
      c. Realistic environment…this is why we use simulation and role play
   3) Work Environment
      a. Support…is the environment supportive of new behaviors? Do leaders role model the behaviors?
      b. Practice…are there opportunities to practice new behaviors and get feedback?
      c. Follow-up…are there follow up opportunities to learn the new behaviors such as refresher courses, new employee orientation, and periodic reviews?


4. TeamSTEPPS Tools of the Month: An Opportunity for Staff to Learn TeamSTEPPS Tools Beyond Initial Training…discussed by a TeamSTEPPS Master Trainer from western Nebraska.

This Master Trainer is an administrative assistant. She had been exposed to TeamSTEPPS for three years prior to becoming a Master Trainer in September 2013. Their team developed the Tool of the Month to support review of the tools across the whole facility. For example, posters of the tools are displayed on bulletin boards and managers review the same tool of the month across all departments. Their team matched tools to the time of year, for example in September (start of football season) they review briefs, huddles and debriefs. The entire Tool of the Month initiative includes the following:
   • Posters – created using Pocket Guide graphics and information
   • Display posters on bulletin boards
   • Tool becomes an agenda item in monthly department meetings
• Master Trainers and coaches make random visits to units with treats/candy for correct answers to TeamSTEPPS questions.

Examples used in Tool of the Month initiative are not always in a health care context, but show that TeamSTEPPS tools are applicable whenever we work together to achieve a goal. The posters are available on the Patient Safety website: http://www.unmc.edu/patient-safety/teamstepps_toolkit.htm

5. Barriers and successes in implementation

One TeamSTEPPS Master Trainer shared her experience presenting an overview of TeamSTEPPS targeted to the specific needs of radiologic technologists at a conference of the Nebraska Society of Radiologic Technologists. This Master Trainer addressed the issues of advocacy and assertion and hand-offs.

a. Advocacy and assertion: orders are not clear.

b. Handoffs: the handoff of responsibility and accountability for the patient occurs twice when patients receive a radiologic exam: (1) when patient arrives in radiology, nursing needs to handoff information about the patient’s status and any safety concerns; when patient returns to the floor, radiology needs to handoff information about the patient’s status and how they tolerated the procedure.

One TeamSTEPPS Master Trainer shared their hospital’s experience training employees at outside care facilities from which they receive patients and to which they transfer patients (i.e., nursing homes and assisted living facilities) to use SBAR to structure their transfers. They conducted the Teamwork Perceptions Questionnaire to assess perceptions of teamwork before the intervention and will reassess attitudes 6 months after the intervention. These facilities are now using the same SBAR tool when a patient returns to the hospital. Their ultimate goals are to decrease adverse events during transfers and decrease 30 day readmissions.

6. In the Literature…request hard copies if interested.


These researchers conducted semi-structured interviews and focus groups to obtain a deeper understanding of the huddle system and its outcomes as implemented in an academic tertiary care children’s hospital with 539 inpatient beds. They found five themes indicating that implementation of huddles leads to improved efficiencies and quality of information sharing, increased levels of accountability, empowerment, and sense of community. Together these five themes indicate that huddles support a culture of collaboration and collegiality that increases the staff’s quality of collective awareness and enhanced capacity for eliminating patient harm.