Simulation for multidisciplinary team training to promote teamwork and communication

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Objectives

1. Demonstrate the use of simulation to train multidisciplinary teams (MDT) in teamwork and communication skills to enhance patient safety

2. Identify teamwork and communication skills that are characteristic of effective teams

3. Identify areas for improvement in teamwork and communication that can be applied to your own everyday practice
Additional objectives

4. Recognize challenges and keys to success with using simulation for multidisciplinary team training

5. Share ideas regarding use of simulation to enhance team training and patient safety
Agenda

1. Our experience with Team STEPPS, Structured interdisciplinary bedside rounds (SIBR)
2. Role of simulation in MDT
3. Participate in simulation and debriefing
4. Discussion of lessons learned and impact
5. Open discussion/questions
6. Resources
Our journey towards building effective teams on inpatient units
Set the Stage

- Hospital leadership support
- Multidisciplinary group sent for TeamStepps (AHRQ evidence based team training)
- Identified champions
- Obtained administrative and data support
- Performed an initial needs assessment of the unit by distributing and analyzing the safety survey
- Pizza parties
Decide what to do

- Multiple brain storming sessions with the champions and unit leadership
- Goal: Improving Nurse physician communication at the patient’s bedside
- Skepticism towards achieving the desired goal
- SIBR video
- Multiple meetings to plan execution
- Developed a unit TeamStepps logo
Our Logo

Every One, Every Time

Team STEPPS
Make it happen

- Monthly email to all inpatient providers
- Nurses assigned per pod on the unit
- Senior resident to text message nurses notifying them of their arrival at patient’s bedside
- Nurse and physicians round at patient’s bedside
- Monitored outcomes
Outcomes

- Patient satisfaction survey
- Provider culture of safety survey
- Rate of nurse physician communication at patient’s bedside validated by the patient’s nurse by signing the data collection tool
- Follow up phone calls
- Every 2 weeks results shared with teams and benchmarked against each other
- Winning teams received a “golden boot” filled with candy
Make it stick

- Team STEPPs champions participated in Simulation training course
- Developed and implemented inter-professional simulation scenario to train all staff work on 6RC in concepts of TeamSTEPPS and SIBR
- Trained 128 staff (nurses, doctors, pharmacists, social workers, others)
- Training Internal Medicine residents and staff each month
Why simulation for MDT?
Simulation & Team Work

- Team skills are developed through practice and feedback
- Practice team skills and strategies in a safe learning environment
- Ensure proper scenario design
  - Focus on learning objectives
  - Provide more than one opportunity to practice team behaviors
- Accurate measurement
  - Include process and outcome measures
  - Capture behaviors
- Debriefing
  - Learning happens in the debrief
  - Include feedback on how to improve performance
Successful simulation

- Set the tone - clear objectives
- “Realism”
- Emphasize teamwork and team processes over task work
- Debriefing
- Reinforce - ongoing coaching and performance evaluation
Evidence-Based Principles for MDT

1. Focus training content on critical teamwork competences
2. Emphasize teamwork and team processes over task work
3. Training based on desired team-based learning outcomes and organizational resources
4. Incorporate hands-on, guided practice
5. Match similar on-the-job mental processes and simulation-based training content
6. Provide both outcome and behavior-based feedback
7. Evaluate training impact through clinical outcomes and work behaviors
8. Reinforce desired teamwork behaviors through coaching and performance evaluation
Limitations

• Cost

• Resources
  • Lack of facilitator time
  • Lack of trained staff in simulation
  • Access to the simulator
  • Equipment fidelity

• Time
  • Scheduling a common time for MDT members is challenging
Development of a case

- Based on real-life case
- Communication between team members and patient were critical
- Developed roles with scripts
- Set the scene
- Feedback from participants on fidelity
- Debriefing guidelines
Time for simulation!
What themes emerged in your simulation today?
Simulation Training

Our experience
Survey Responses

- Simulation scenario and the debriefing was educational: 90%
- Simulation training will change the way they practice: 75%
- Simulation was well organized: 70%
- Objectives of the simulation were met at the end of the session: 80%
- Orientation to the simulation scenarios was adequate: 80%
Additional Comments from Staff

• It was helpful to learn how other professionals deal with communication errors.
• It reinforced the importance of communication with the entire team. The content wasn't really novel, but the session inspired me to try to do better with the tools I have.
• This part of the workshop was directly related to a patient encounter on 6RC, therefore it was much more interesting and I feel that we got more out of this experience. It is much better to be part of a demonstration than to just be talked at.
• Simulation more useful than didactic session.
• The simulation section was great and very helpful. Loved this.
• Simulation more useful than didactic session.
Additional Comments from Staff

- The debrief session after the simulation was the most helpful because we were all able to verbalize our concerns and how we will all apply the session to our daily routines.
- Simulation provided a better perspective for the content. I really enjoyed the simulation debriefing; it provided more insight on the topic.
- It was nice to see how members interacted and to simulate handoffs. It was useful to discuss areas of opportunity for improvement.
- The debriefing session was the most helpful because people were able to use real-life examples, and we were able to walk through them together.
- Interaction with all staff is one of the most important qualities we must utilize to ensure the safety of our patients. Teamwork is paramount!
- Yes, I will focus on having the nurse at bedside rounds. This is very helpful.
Safety Culture & Patient Level Outcomes
Simulation: Our Experience

- Everyone wants an active role in caring for patient.
- Team members felt both they and the patient benefitted from communicating with each other.
- Doctors often stated they did not want to bother/interrupt nurses - Nurses want to be bothered!
- Usually someone “stopped the line”.
- Participants found the debriefing very useful to hear others’ views and approaches.
- Made participants aware of patient and family member perceptions.
<table>
<thead>
<tr>
<th>Lessons learned</th>
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<tr>
<td><strong>What Worked</strong></td>
<td><strong>What We Changed</strong></td>
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<tr>
<td>• Involve all in simulation</td>
<td>• Included more specifics in orientation</td>
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<td>• Emphasize safe learning environment</td>
<td>• Added to nursing assistants role - take vitals</td>
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<td>• Debriefing based on advocacy and inquiry</td>
<td>• Made patient ageless, no specific gender</td>
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<td>• Try to include all in debriefing</td>
<td>• Used “invisible” labels to cut down on questions directed to us during simulation</td>
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<td>• Have participants identify something they learned/want to try on 6RC and commit</td>
<td>• Simplified handouts</td>
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<td>• Eliminated handoffs for residents</td>
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Ongoing challenges

• Every simulation is different which is interesting but challenging
• Logistics often have to be adjusted at last minute
• Time and resource intensive
• Sometimes participants get bogged down in medical details
• Buy-in is crucial
• Measuring outcomes
Simulation to Implementation

- Bedside rounding beneficial but can be time consuming
- Benefits of being on same page and patient knows team members are talking
- Nursing staff felt more involved and well informed about plan of care compared to pre-SIBR days
- Introduce all team members
- Cuts down on pages, follow-up later in day
- Logistics can be challenging
- Measuring Outcomes
- Sustainability
References


