Military’s team-training tools now available to ORs, others

A 63-year-old patient is having cataract surgery. The surgeon calls for the lens, and the circulating nurse, just returning from lunch, presents what he thinks is the correct lens. Without checking, the surgeon asks the nurse to open the lens container. The lens he inserts turns out to be the one intended for the next patient. The error is discovered by the circulator just after the lens is inserted, and he promptly informs the surgeon.

Teams can use this scenario and others as part of a new training program offered by the Department of Defense and Agency for Healthcare Research and Quality (AHRQ). The agencies say the multi-media program can help build communication and teamwork skills.

The program, called TeamSTEPPS, was developed by the defense department using principles from aviation and private industry. STEPPS stands for Strategies and Tools to Enhance Performance and Patient Safety. The department says the program is backed by 20 years of research plus lessons from high-reliability organizations. High-reliability organizations are those that have been able to conduct their activities basically error free for a long period of time.

AHRQ notes that communication breakdowns have been linked to errors such as wrong-site surgery. There’s also a growing body of evidence that team skills can be taught, says AHRQ’s director, Carol M. Clancy, MD.

Extensive testing

The program’s goal is to improve the ability of teams to respond quickly and effectively, whatever the situation. The agency says TeamSTEPPS has been through extensive field testing in the military as well as in several civilian health care organizations.

“The program is more than just a one-shot training session,” says Deborah Milne, RN, MPA, of AHRQ. The initiative is meant to take place in 3 phases:
• assessment
• planning, training, and implementation
• sustaining the gains.

The program can be introduced either in full or in part, and some modules can stand alone.

Training is necessary for TeamSTEPPS to be implemented successfully, Milne says. AHRQ is developing a train-the-trainer program, which ideally will involve physician-nurse teams from the same organization.

Top-level support is necessary.

“This is not going to work unless you have champions from medicine, the administration, and nursing,” Milne says. “There has to be signup from all 3 groups to have it adopted and supported.”

Learning tools

TeamSTEPPS is based on 4 core competencies:
• team leadership
• situation monitoring—the capacity to develop common understandings of the team environment and monitor team performance
• mutual support—the ability to anticipate other team members’ needs and shift workloads to achieve balance
• communication—including efficient exchange of information and consultation with other team members.

Among the teaching tools, which are free or low cost, is a DVD with 9 video vignettes illustrating the right and wrong way to communicate in different situations. Other tools include:
• an instructor guide for assessing needs, conducting the training, and managing change as well as background on the research evidence
• electronic tools, including a CD with the instructor guide and printable files and the DVD
• a pocket guide with tips and reminders
• a PowerPoint on the TeamSTEPPS principles
• a poster.

More information is at www.ahrq.gov/qual/teamstepps/.