

IMPROVING ACUTE CORONARY SYNDROMES MANAGEMENT:

A Hospital-Specific, CME/CE-Certified Quality Improvement Initiative



Crew Resource Management

E-brief #4

Not long ago, Med-IQ and the Johns Hopkins University School of Medicine offered the live educational activity “Improving Acute Coronary Syndromes Management: A Hospital-Specific, CME/CE-Certified Quality Improvement Initiative” at your institution. This training provided specialized education on Crew Resource Management (CRM) techniques, an aviation-industry–based approach to quality improvement, and focused on applying these techniques in the healthcare setting to reduce medical errors.

In the spirit of continuous learning and periodic reinforcement, your CRM leaders, **Captains Jack Barker, PhD**, and **Jeff Cyr**, have developed six short e-briefs that will be delivered to your in-box on a monthly basis. These e-briefs are designed to serve as refreshers on key CRM concepts. Below, you’ll find the fourth of these e-briefs, which focuses on briefing and debriefing. Be sure to stay tuned for future installments.

Improving Teamwork With Briefing and Debriefing



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As noted above, the purpose of CRM is to reduce errors and improve the quality of patient care by increasing the level of safety throughout an organization. We do this by improving communication skills and building an enhanced level of teamwork in each workgroup. Yet when all the skills, tools, and tips have been taught and incorporated into your daily routine, one large, overriding element is still critical to the entire process: the team briefing. And nothing can strengthen a team more than thorough, concise briefings. Yet—oddly enough—this opportunity is routinely missed in the healthcare setting.

Every airline pilot conducts hundreds, if not thousands, of takeoffs and landings each year. Despite this repetition, you will never find a crew that fails to conduct a briefing before each takeoff or landing. In the aviation industry, we have learned the value of discussing contingencies before starting a process and accept the tenant that even if something different happens, a briefing makes us better able to handle other problems when they occur. For these reasons, a crew briefing always precedes every takeoff and landing.

Briefing in Healthcare

Why is this opportunity routinely missed in healthcare? We’ve heard a number of reasons: we don’t have the time, I have six other patients, it seems senseless to brief a routine procedure. But when you consider how easily briefings can be implemented and the value they provide, these reasons just don’t hold up.

Briefings don’t have to be long, and you don’t need to sound like George Patton rallying the troops. You simply need to:

- Summarize the tasks at hand
- Review the plan for any contingencies
- Stress the importance of speaking up if anyone is uncomfortable
- Ensure that there are no lingering questions BEFORE you begin

Briefings can be carried out before a shift, before a central line is inserted, just prior to a code arriving in the ED, or any time a team assembles to provide care.

It can take as few as 30 seconds to conduct a briefing, but those 30 seconds will be the most important of the day if things fall apart. And, as those of you in the business of providing healthcare know, there's a pretty good chance that eventually things will fall apart. Having a strong sense of teamwork in place will be invaluable in getting the procedure back on the right track.

Doctors, it is your job to conduct the briefing. Nurses, pharmacists, and technicians, it is your job to expect the briefing and—if it is part of the protocol—insist that it be done.

Don't Miss the Opportunity to Debrief

A briefing is only the first part of team building. An equally valuable but less-often-used tool is the debriefing, and many opportunities to learn are lost when we fail to conduct a debriefing following a procedure or other aspect of patient care, such as a code or patient transfer.

There are many reasons why medical teams fail to conduct a debrief: some members have to leave with the patient, others are called to adjacent rooms for assistance, some are required to prep the next patient, the procedure ran late and little Johnny needs to be picked up at school, staff only has 2 minutes to get a bite to eat...the list goes on. Perhaps one of the most difficult barriers to cross is the reluctance to suggest to others that something could have been done better.

While all of these issues present real reasons for not accomplishing a debriefing, perhaps the most compelling of all reasons TO conduct a debriefing is that your team will become stronger, and your patient outcomes will improve. During the debrief, the leader should point out strengths and weaknesses in a positive forum where everyone understands that the only goal is to enhance future performance. This step will provide necessary feedback to team members and is crucial in enhancing team performance. This strategy will help correct bad habits, improve team efficiency, reward good behaviors, and—in the end—enhance the safety culture within the department.

Building a strong team lays the foundation for effectively and consistently using one of medicine's latest advancements—the one we'll talk about next month.



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