Descriptions of Facilitation Videos

UW Faculty Development:
IPE Facilitation Skills Training for “IPE Facilitation Challenges”
University of Washington

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Facilitation Skills Training using Error Disclosure

Case 1: Medical Error and Disclosure
These scenes depict faculty facilitating a small group of pre-licensure health professional students from Medicine, Nursing, Pharmacy and Healthcare Administration (MHA) who have gathered together for the first time for a team training exercise involving medical error and disclosure. The various scenes show a team planning how they will disclose a medical error to a family member in an upcoming simulation and a debriefing for how the simulation went.

Facilitation Challenge: Medical Error Scene 1

| Current Vimeo title and URL: | Facilitation Challenge: Medical Error Scene 1  
| Time: | 0:47  
| Description of scene: | Students enter in groups from their respective professions. They sit down in segregated groups, talking only with those from their own school. Students without a ‘partner’ look lost, shuffle through email messages. How do you get this session off to a good start?  
| What went well: | • One of the students reached out to another student she doesn’t know  
| IPE Challenges: | • Students are not in interprofessional teams and have never met each other. How are you going to get this session off on the right foot?  
| Discussion questions/issues: | • How to get students to sit together  
| | • Role of introductions and icebreakers  
| | • Ground rules for participation  
| | • Students know very little about each other

Facilitation Challenge: Medical Error Scene 2

| Current Vimeo title and URL: | Facilitation Challenge: Medical Error Scene 2  
| Time: | 0:49  
| Description of scene: | A co-facilitator has been sitting and chatting with students. Second facilitator enters the room and begins the session. Example of hierarchy.  
| What went well: | • Enthusiastic facilitators  
| | • One facilitator sits at the table on same level as the students  
| IPE Challenges: | • Second facilitator creates hierarchy between the other facilitator and students by:  
| | o Standing, creating power deferential  
| | o Introducing the second facilitator  
| Discussion questions/issues: | • How could co-facilitator join group without inferring superiority/power over rest of group?  
| | • How do you set up an interprofessional session?

Facilitation Challenge: Medical Error Scene 3

| Current Vimeo title and URL: | Facilitation Challenge: Medical Error Scene 2  
| Time: | 2:17  
| Description of scene: | Students are discussing a medical error that happened to an elderly patient from a nursing home facility. The patient was brought to the ED the night before in anaphylactic shock from a missed medication allergy to penicillin. Two students dominate conversation, leaving out the perspectives of other professions.  
| What went well: | • All team members appear engaged in the activity and want to participate  
| | • Respectful communication between nursing and medicine
- Passionate about the subject matter

### Some IPE challenges:
- Two students dominate the conversation – thus, not all voices are being heard, creating exclusion of all professions’ perspectives.
- Respectful communication should include respectful listening.
- All parties should have the opportunity to question or seek a better understanding of their own role in the event.

### Discussion questions/issues:
- What can be done when certain personalities dominate a small group discussion/conversation?
- What is the best way to get others involved in discussion and integrate the knowledge and experience of other professions?
- How can we ensure all voices are heard? What are some nonthreatening invitations to participate in the conversation (not calling people’s names out)?

### Facilitation Challenge: Medical Error Scene 4
**Current Vimeo title and URL:** Facilitation Challenge: Medical Error Scene 4  
https://vimeo.com/188729793

**Time:** 1:01

**Description of scene:** Students are discussing a medical error that happened to an elderly patient from a nursing home facility. The patient was brought to the ED the night before in anaphylactic shock from a missed medication allergy to penicillin. Example of use of discipline-specific terminology.

**What went well:**
- All team members appear engaged in the activity and want to participate
- Passionate about the subject matter

**IPE Challenges:**
- One profession using discipline-specific terminology that is not understandable to other professions
- Communication excludes some participants; their knowledge and experience is not being engaged in problem-solving
- Facilitators dominating the discussion, not giving students the opportunity for group discussion and interaction
- Team does not have a shared mental model.

**Discussion questions/issues:**
- As a facilitator, what should you do if your co-facilitator is dominating the discussion?
- As a facilitator, what should you do if your co-facilitator is using profession-specific terminology not familiar to everyone?
- How do you get everyone on the same page during a discussion?

### Facilitation Challenge: Medical Error Scene 5
**Current Vimeo title and URL:** Facilitation Challenge: Medical Error Scene 5  
https://vimeo.com/188736789

**Time:** 1:08

**Description of scene:** Students are discussing a medical error that happened to an elderly patient from a nursing home facility. The patient was brought to the ED the night before in anaphylactic shock from a missed medication allergy to penicillin. Example of some conflict/inflammatory conversation.

**What went well:**
- All of the health professional students are listening actively
- All members of the team are expressing their opinions to team members

**IPE Challenges:**
- Discussion is stuck on who’s responsible for the error rather than sharing accountability for patient care
- Team is not constructively managing disagreements about actions of various members of the team
Inflammatory remarks/tone – students are not all using respectful language

Discussion questions/issues:
• How do you effectively manage disagreements during a discussion?
• How can you turn the discussion around to more constructive dialogue?

Facilitation Skills Training Using Troubled Teen Case

Case 2: “Typical or Troubled Teen?” Case
These scenes depict faculty facilitating a small group of pre-licensure health professional students from Healthcare Administration (MHA), Medicine, Nursing, and Pharmacy who have gathered together for the first time to work through an unfolding case involving a 15-year-old teenager named Elizabeth. Elizabeth has multiple psycho-social issues and is in the process of establishing care with a new primary care provider. Students in the scenes will have just watched videos of Elizabeth interacting with her mother and new provider and are asked as a team to develop a plan of care.

Facilitation Challenge: Teen Case Scene 1
Current video title and URL
Facilitation Challenge: Teen Case Scene 1
https://vimeo.com/188855237

Time: 1:09

Description of scene:
Facilitators are debriefing after conclusion of an interprofessional case discussion involving pre-licensure health professional students from Healthcare Administration (MHA), Medicine, Nursing, and Pharmacy. Example of facilitator providing negative feedback.

What went well:
• All members of the team are listening actively
• Facilitator thanks all for being there
• Facilitator is giving timely feedback

IPE Challenges:
• Facilitator is not constructively managing disagreement with a colleague
• While the feedback is timely, it’s not sensitive or instructive

Discussion questions/issues:
• How could the facilitator give feedback in a timely, sensitive and instructive way?
• How can this issue/disagreement being managed more constructively?

Facilitation Challenge: Teen Case Scene 2
Current video title and URL
Facilitation Challenge: Teen Case Scene 2
https://vimeo.com/188729109

Time: 2:55

Description of scene:
Students discuss an unfolding case involving a 15-year-old teenager named Elizabeth. Elizabeth has multiple psycho-social issues and is in the process of establishing care with a new primary care provider. Students have just watched videos of Elizabeth interacting with her mother and new provider and are asked as a team to develop a plan of care. Example of disengaged facilitators.

What went well:
• Facilitator does a nice job with introduction and instructions.
• Students appear engaged and listen actively to the discussion.

IPE Challenges:
• Facilitators are disengaged in discussion and using their phones
  o Ideas and opinions of other team members are not being encouraged.
  o The students’ conversation is not facilitated – not all of the knowledge and experience of the other students are being integrated into the discussion.
  o Facilitators are not applying leadership practices that support collaborative practice and team effectiveness
<table>
<thead>
<tr>
<th>Discussion questions/issues:</th>
<th>• Some of the conversation is not organized in a way that is understandable to other professions.</th>
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<tbody>
<tr>
<td>Facilitation Challenge: Teen Case Scene 3</td>
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</table>
| Current video title and URL | Facilitation Challenge: Teen Case Scene 3  
https://vimeo.com/188729526 |
| Time: | 2:43 |
| Description of scene: | Students discuss an unfolding case involving a 15-year-old teenager named Elizabeth. Elizabeth has multiple psycho-social issues and is in the process of establishing care with a new primary care provider. Students have just watched videos of Elizabeth interacting with her mother and new provider and are asked as a team to develop a plan of care. This scene is a better practice example of how to improve facilitation techniques (use in conjunction with Teen Case Scene 2). |
| What went well: | • Facilitators model collaborative behavior by sitting level with students, listen active and encourage ideas and opinions of other students.  
• Students have a better collaborative discussion. |
| IPE Challenges: | • Need a list of priorities for this patient in order to clarify each member’s responsibility in executing the components of the treatment plan. |
| Discussion questions/issues: | • Who is the leader on this team? |
| Facilitation Challenge: Teen Case Debriefing Scene 4 | |
| Current video title and URL | Facilitation Challenge: Teen Case Debriefing Scene 4  
https://vimeo.com/188730209 |
| Time: | 0:47 |
| Description of scene: | Facilitator leads debrief and students give one word answers. Example of inexperienced debrief. |
| IPE Challenges: | • Quiet discussion panel  
• One word answers  
• Not all students shared their voice |
| What went well: | • Good questions were asked and the facilitator waited for answers |
| Discussion questions/issues: | • How could you get students to elaborate?  
• What can facilitators do to increase the level of discussion and interest during an after session? |
| Facilitation Challenge: Teen Case Scene 4 | |
| Current video title and URL | Facilitation Challenge: Teen Case Scene 4  
https://vimeo.com/188730570 |
| Time: | 1:40 |
| Description of scene: | Facilitators give their opinions about the case and don’t allow students the opportunity to talk. Example of facilitator talking too much and not engaging students. |
| IPE Challenges: | • Facilitators talking too much and taking over students’ time.  
• Students are together to interact and learn from each other  
• Facilitators need to listen and probe more, talk less.  
• Why is one facilitator standing and the other one sitting? |
| What went well: | • Facilitator introduces herself and Mayumi  
• Facilitators are knowledgeable and share good information |
| Discussion questions/issues: | • How do you recognize when you’re off track or talking too much?  
• How can facilitator engage student in discussion?  
• What is the role of the facilitator? |

**Facilitation Challenge: Teen Case Scene 5**

| Current video title and URL | Facilitation Challenge: Teen Case Scene 5  
https://vimeo.com/188730581 |
| Time | 1:23 |
| Description of scene: | A student speaks out and says the case is abuse. Other students agree with the exception of one who tries to share his perspective. The students ignore him and the facilitators don’t speak up. Example of not all student perspective’s being acknowledged and discussed. |
| IPE Challenges: | • Student with a different opinion is ignored  
• Facilitators don’t intervene in the disagreement |
| What went well: | • Clear instructions  
• The option of the case not being abused is recognized for a couple seconds |
| Discussion questions/issues: | • What does good facilitation look like when small group opinions are in conflict?  
• How could facilitator intervene or follow-up with the student offering a different opinion or viewpoint?  
• How do we ensure all parties feel comfortable questioning or seeking a better understanding of their own role in the event? |

**Facilitation Challenge: Teen Case Scene 6a**

| Current video title and URL | Facilitation Challenge: Teen Case Scene 6a  
https://vimeo.com/188730589 |
| Time | 0:36 |
| Description of scene: | Students have just watched videos of Elizabeth interacting with her mother and new provider and are asked as a team to develop a plan of care. While discussing the case, a medical student is dismissive of a student from another profession's opinion. Example of disrespect of another profession's opinion. |
| IPE Challenges: | • Facilitators missed a teachable moment/learning opportunity  
• Dismissive response by fellow student in the group is not respectful of other people's opinions/ideas |
| What went well: | • Students are engaged in the discussion  
• Facilitators are sitting down with students and actively watching conversation |
| Discussion questions/issues: | • How can a facilitator address a student in a group that is not respectful of other people’s opinions or ideas?  
• How can a facilitator take an awkward situation and turn it into a teachable moment/learning opportunity?  
• How do we ensure all parties feel comfortable questioning or seeking a better understanding of their own role in the event? |

**Facilitation Challenge: Teen Case Scene 6b**

| Current video title and URL | Facilitation Challenge: Teen Case Scene 6b  
https://vimeo.com/188730589 |
| Time | 0:56 |
| Description of scene: | Students have just watched videos of Elizabeth interacting with her mother and new provider and are asked as a team to develop a plan of care. While discussing the case, a |
medical student is dismissive of a student from another profession's opinion; however, in this scene the facilitator turns the experience into a teachable moment.

<table>
<thead>
<tr>
<th>IPE Challenges:</th>
<th>• Dismissive response by fellow student in the group is not respectful of other people’s opinions/ideas</th>
</tr>
</thead>
</table>
| What went well: | • Students are engaged in the discussion  
• Facilitators are sitting down with students and actively watching conversation  
• Facilitators turn negative interaction into a teachable moment/learning opportunity |
| Discussion questions/issues: | • How can a facilitator address a student in a group that is not respectful of other people’s opinions or ideas?  
• How can a facilitator take an awkward situation and turn it into a teachable moment/learning opportunity?  
• How do we ensure all parties feel comfortable questioning or seeking a better understanding of their own role in the event? |

**IPE Facilitation Skills Training using Mr. Kim Case**

**Case 3: “Mr. Kim” Geriatric Oral Health Case**

These scenes depict faculty facilitating a small group of advanced practice health professional trainees from Healthcare Administration (MHA), the Physician Assistant Program, Nursing, Pharmacy and Social Work as they discuss a strategy of care for Mr. Kim, a 71-year-old Korean-American male with multiple health issues. Most recently, a new medication was added to his daily routine that may be causing additive effects for xerostomia with existing medications. Three months later, the patient presents with multiple dental carious lesions that were not present at his last dental checkup.

**Facilitation Challenge: Geriatric Case Scene 1**

| Current video title and URL: | Facilitation Challenges: Geriatric Case Scene 1  
https://vimeo.com/225625729 |
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<tbody>
<tr>
<td>Time:</td>
<td>1:25</td>
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<tr>
<td>Description of scene:</td>
<td>Students enter room and sit with their profession. Physician assistant asks social work student what she does and facilitator jumps in middle of conversation to begin activity. Example of not kicking off activity well – segregated professions, no introductions.</td>
</tr>
</tbody>
</table>
| What went well:             | • The student made the effort to engage in conversation with someone other than in his profession.  
• Clear firm introduction and plan laid out |
| IPE Challenges:             | • No introduction or icebreaker offered to begin activity.  
• Room not set up to promote group discussion.  
• Students all sit with their profession, clickish.  
• When students get to know each other, they are interrupted. |
| Discussion questions/issues:| • What is ideal room set up to encourage intraprofessional conversation?  
• Why is it important to have introductions?  
• How important is it to begin group activity with an icebreaker?  
• What are the ground rules and common courtesy expectations? Why is that important? |
There are issues when the facilitator interrupts interprofessional bonding, but what issues might come up if the facilitators delayed starting the activity and let everyone “chat” for too long?

**Facilitation Challenge: Geriatric Case Scene 2**

| Current video title and URL | Facilitation Challenge: Geriatric Case Scene 2  
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<tr>
<td>Time:</td>
<td>1:48</td>
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<tr>
<td>Description of scene:</td>
<td>Student asks facilitator a question and then dominates rest of discussion. Assumes all residents are physician residents. Example of physician monopolizing the conversation, interjecting bias.</td>
</tr>
</tbody>
</table>
| What went well:             | • It's good to share information with whole group if it is important them, so her interjection started out well...  
|                            | • Interested in students’ plans and ambitions |
| IPE Challenges:            | • At the beginning when the facilitator says "how are you doing with the case?" the students say "good".... Students often say this even when they have misunderstandings/questions. Probe them more if you really want to know how they're progressing.  
|                            | • Facilitator needs to listen more, talk less  
|                            | • Facilitator should not inject her personal opinion or put a negative spin on different residency programs. Bias is too strong.  
|                            | • Room is not really set up for group discussion, facilitator does brief check in with groups spread out in room.  
|                            | • There is someone in the background not in a group  
| Discussion questions/issues: | • How can you get facilitator to recognize they are dominating group discussion?  
|                             | • How could the facilitator have redirected this question to the group to promote a larger discussion?  
|                             | • How could facilitator set up room to encourage group discussion and participation? |

**Facilitation Challenge: Geriatric Case Scene 3**

| Current video title and URL | Facilitation Challenge: Geriatric Case Scene 3  
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<tr>
<td>Time:</td>
<td>0:44</td>
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<tr>
<td>Description of scene:</td>
<td>Medical student refers to others by their profession and not their name. Confuses roles.</td>
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</tbody>
</table>
| What went well:             | • Students were sitting with professions other than their friends.  
|                            | • Students appear engaged and friendly. |
| IPE Challenges:            | • Introductions occur in non-facilitated groups.  
|                            | • Miss the opportunity to clarify role (nurse vs nurse practitioner)  
|                            | • Student refers to other students by profession and not their name.  
|                            | • Medical student seemed surprised pharmacy student had a stethoscope – missed opportunity to talk about skill overlap. |
| Discussion questions/issues: | • Is there a more positive way for students’ to introduce themselves and gain a greater understanding of what they do in their profession? |

**Facilitation Challenge: Geriatric Case Scene 4**

| Current video title and URL | Facilitation Challenge: Geriatric Case Scene 4  
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<tr>
<td>Time:</td>
<td>1:40</td>
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<tr>
<td>Description of Scene:</td>
<td>Faculty enters room, physician sits at head of table setting stage for power position. Example of hierarchy, disrespectful communication.</td>
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</table>
| What went well:      | • Good example of how hierarchy in group can shut down discussion.  
                        • Introductions are done.  
                        • Group members shared nice points. Many voices were heard. |
| IPE Challenges:      | • Facilitator acts hierarchical, preoccupied, rushed. Makes this meeting seem like an inconvenience for him.  
                        • Dismissive of other professions  
                        • Cuts off other speakers in midsentence.  
                        • Insults the roles of the other health professionals. |
| Discussion questions/issues: | • How can multiple health professions collaborate on equal ground? How can power differential be diffused?  
                        • How can facilitators make all participants from diverse intraprofessional groups feel their opinions and contributions are important?  
                        • How do you respond to people in meetings that do not want to be there? |

**IPE Facilitation Skills Training using Team Communication Challenges Videos**

These scenes depict clinical staff working together in hospital-based scenarios.

<table>
<thead>
<tr>
<th>Team Communication Challenge: IP Rounding Scene A</th>
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</table>
| **Current video title and URL:** Team Communication Challenge: IP Rounding Scene A  
https://vimeo.com/188731295 |
| **Time:** 3:36 |
| **Description of Scene:** A medical team in the advanced heart failure unit of a hospital conducts rounds. Example of non-patient-centered care. |
| **What went well:**  
• Some IP team members are rounding together!  
• Attending physician introduces himself to the patient and tries to explain why the team is there.  
• The team addresses the patient respectfully. |
| **IPE Challenges:**  
• Team does not introduce themselves to the patient  
• Team does not disinfect hands before entering patient’s room.  
• Team does not ask who the patient’s advocate is (who happens to be sitting right next to her)  
• The patient/family member is not directly included in the conversation.  
• The nurse, who was not present for rounds, relies on the patient to relay the plan for the day which the patient clearly does not understand  
• Team ends rounds without giving the patient an opportunity to ask questions |
| **Discussion questions/issues:**  
Where is the best place for the team to round?  
How should the team introduce themselves properly to the patient?  
Which team members are missing during rounds and what issues might arise from their absence? |

<table>
<thead>
<tr>
<th>Team Communication Challenge: IP Rounding Scene A (better example)</th>
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</table>
| **Current video title and URL:** Team Communication Challenge: IP Rounding Scene A (better example)  
https://vimeo.com/188733497 |
<p>| <strong>Time:</strong> 5:07 |</p>
<table>
<thead>
<tr>
<th>Description of Scene:</th>
<th>A medical team in the advanced heart failure unit of a hospital conducts rounds. Better example of patient-centered care.</th>
</tr>
</thead>
</table>
| **What went better this time?** | • Team disinfects hands before entering patient room.  
• Team introduces themselves to the patient and advocate/family.  
• Nurse is included this time.  
• Patient's plan is written on a board for all of the team to see.  
• Patient is included in discussion of the day's plan.  
• Team gives the patient/family member time to ask questions. |
| **What could be improved even further?** | Not all of the team members have information to present. Not clear that patient understands the function of all of the team members. |

### Team Communication Challenge: Provider Handoff A

| Current video title and URL: | Team Communication Challenge: Handoff A  
https://vimeo.com/188733483 |
| Time: | 1:28 |
| Description of Scene: | A medical team in the advanced heart failure unit has a patient transferred to their service from a different unit. Example of an incomplete/unclear patient handoff. |
| **What went well:** | • New provider respectfully requests information from previous provider/service.  
• New provider introduces herself to the patient and tries to orient the patient on where she has been transferred. |
| **IPE Challenges:** | • There is lack of continuity of care; little information is communicated to the new unit from the old unit  
• Former provider is distracted and not fully engaged in conversation with new provider; new provider is frustrated.  
• Lack of understanding of where the patient has been and what the goals for the patient are. New provider is left in the dark and have to figure it out on her own.  
• The patient is confused about why she is being transferred and appears alarmed. |
| **Discussion questions/issues:** | • What are some of the pitfalls of a bad handoff?  
  o Lack of continuity of care.  
  o No understanding of the short and long term goals for the patient.  
  o Confusion from the patient and family. Plan of care changes, different understanding of what is happening.  
  o Things can get missed overnight like medicine, etc.  
  o Impedes the forward movement of care in a timely fashion.  
  o Increased likelihood of dangerous medical errors.  
• What does a better handoff look like? |

### Team Communication Challenge: Provider Handoff B (better example)

| Current video title and URL: | Team Communication Challenge: Handoff B (better example)  
https://vimeo.com/188733547 |
| Time: | 2:01 |
| Description of Scene: | A medical team in the advanced heart failure unit has a patient transferred to their service from a different unit. Better example of patient-centered care. |
| **What went better this time?** | • Previous provider tries to provide more information to the new provider.  
• Both providers speak with the patient and orient her to what is happening with her care; makes transition less scary. |
| **What could be improved even further?** | • Team needs a better process/plan for how the patient should communicate questions to the team. |
### Scene 5: Morning Brief Scene A

| Current video title and URL: | Team Communication Challenge: Morning Brief  
https://vimeo.com/188731339 |
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<tr>
<td>Time:</td>
<td>3:48</td>
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<tr>
<td>Description of Scene:</td>
<td>A medical team in the advanced heart failure unit of a hospital does a morning brief prior to rounding.</td>
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</table>
| What went well:               | • Team members make an effort to be present for morning brief  
• Team (eventually) assembles together for the brief.  
• Clear communication about who will contact team members when brief is ready to start. |
| IPE Challenges:               | • Attending physician arrives late.  
• Some of the team does not know the format of the brief.  
• Some of the team members do not know each other & introductions do not happen.  
• At times the brief turns into a long discussion  
• One team member is missing (charge nurse)  
• Team members are addressing each other by title (e.g., Dr. so-and-so) instead of using first names  
• Unclear who is responsible for presenting materials needed to conduct the brief (e.g. patient list) |
| Discussion questions/issues:  | • What is the purpose of a Brief?  
  a) Communicate plan for day, (2) communicate any urgent patient or staffing issues, and (3) organize the structure of rounds  
  b) Team Agreement/Ground Rules of a Brief: Limit unnecessary cell phone use, address each other using first names, all team members have the right to speak up if they have a patient safety concern  
  c) Items addressed during the brief (1) discuss urgent patients, (2) procedures, (3) discharge of patients, (4) staffing issues and/or meetings  
• What would you do to improve the functioning of this team?  
• Who is missing from this team? |

### Team Communication Challenge: Team Debrief (good example)

| Current video title and URL: | team_debrief[1]  
https://vimeo.com/188733623 |
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<tbody>
<tr>
<td>Time:</td>
<td>3:39</td>
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<tr>
<td>Description of Scene:</td>
<td>A medical team debriefs a busy clinic day. Example of good debrief.</td>
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