



Team Communication: Key Terms and Concepts		
Teamwork	Definition	Behavioral Examples
Team Structure	Delineates fundamentals such as team size, membership, leadership, composition, identification and distribution.	<ul style="list-style-type: none"> Identifies goals Assigns roles and responsibilities Holds members accountable
Leadership	Ability to coordinate the activities of other team members by ensuring team actions are understood, changes in information are shared, and that team members have the necessary resources. Characteristics include: assess team performance, assign tasks, develop team KSAs, motivate team members, plan and organize, and establish a positive atmosphere.	<ul style="list-style-type: none"> Utilizes resources Delegates tasks and balances workload, Conducts <u>briefs, huddles, and debriefs</u> Empowers members to speak freely Facilitate team problem solving. Seek and evaluate information that impacts team functioning. Clarify team member roles. Engage in preparatory meetings and feedback sessions with the team.
Situation Monitoring (aka: Mutual Performance Monitoring)	<p>Process of actively scanning and assessing situational elements to gain information, understanding, or maintain awareness to support functioning of the team.</p> <p>Overall, the ability to develop common understandings of the team environment and apply appropriate task strategies in order to accurately monitor teammate performance.</p>	<ul style="list-style-type: none"> Includes patient/family in communication Cross monitors members and applies <u>STEP process</u> Fosters communication Provides feedback regarding team member actions in order to facilitate self-correction.
Mutual Support (aka: Back-up Behavior)	<p>Ability to anticipate and support other team member's needs through accurate knowledge about their responsibilities and workload.</p> <p>The ability to shift workload among members to achieve balance during high periods of workload or pressure.</p>	<ul style="list-style-type: none"> Advocates for the patient Resolves conflict using <u>Two-Challenge rule, CUS, and DESC script</u> Works collaboratively Recognition by potential back-up providers that there is a workload distribution problem involving their team. Shifting of work responsibilities to underutilized team members. Completion of the whole task or parts of tasks by other team members.
Communication	<p>Process by which information is clearly and accurately exchanged among team members.</p> <p>The exchange of information between a sender and a receiver, irrespective of the medium.</p>	<ul style="list-style-type: none"> Providing brief, clear, specific and timely information Seeking and communicating information from all available sources Using <u>SBAR, call-outs, check-backs, and handoff techniques</u> Following up with team members to ensure message was received. Acknowledging that a message was received. Clarifying with the sender of the message that the message received is the same as the intended message sent.



Definitions of Key Team Communication Terms:

Brief: Short planning session prior to start to discuss team formation; assign essential roles; establish expectations and climate; anticipate outcomes and likely contingencies

Huddle: Ad hoc problem solving planning to reestablish situation awareness; reinforcing plans already in place; and assessing the need to adjust the plan.

Debrief: Informal information exchange session designed to improve team performance and effectiveness; after action review.

Step Process: A tool for monitoring situations in the delivery of health care. Components of STEP situation monitoring include:

- 1) Status of the patient (S): patient history, vital signs, medications, physical exam, plan of care, psychosocial
- 2) Team members (T): fatigue, workload, task performance, skill, stress
- 3) Environment (E): facility information, administrative information, human resources, triage acuity, equipment
- 4) Progress toward goal (P): status of team's patients, established goals of team, tasks/actions of team, plan still appropriate.

Two-Challenge Rule: When an initial assertion is ignored it is your responsibility to assertively voice concern at least two times to ensure it has been heard. The team member being challenged must acknowledge. If outcome still not acceptable take a stronger course of action or use chain of command.

CUS: Statement of: I am Concerned, I am Uncomfortable, This is a Safety Issue!

DESC Script: Approach to managing and resolving conflict.

- 1) Describe the specific situation or behavior; provide concrete data
- 2) Express how the situation makes you feel/what your concerns are
- 3) Suggest other alternatives and seek agreement
- 4) Consequences should be stated in terms of impact on established team goals; strive for consensus

SBAR: Technique for communicating critical information that requires immediate attention and action concerning a patient's condition: 1) Situation (what is going on with the patient?), 2) Background (what is the clinical background or context?), 3) Assessment (what do you think the problem is?), 4) Recommendation and Request (what would I do to correct it?).

Call-Out: Strategy used to communicate important or critical information. E.g. Team Leader Calls out = "Airway status?", Assessing Clinician Response= "Airway status clear"

Check Back: Process of employing closed-loop communication to ensure that information conveyed by the sender is understood by the receiver as intended. E.g. Team leader "Give 25 mg Benadryl IV push", Clinician: "25 mg Benadryl IV push", Team Leader "That's correct"

Hand-Off Techniques: Transfer of information (along with authority and responsibility) during transitions in care across the continuum; to include an opportunity to ask questions, clarify, and confirm.