

Training teamwork and communication for patient safety: In-situ CRM training in the emergency department with professional trainers using a high fidelity human patient simulator

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Goal of project:

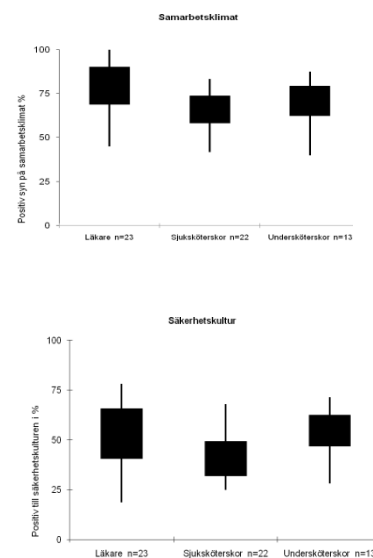
- Explore the staff's perceptions to teamwork and safety-climate.
- To explore the feasibility of in-situ crew resource management (CRM) training in an emergency department using full scale patient scenarios in an emergency room with a high fidelity human patient simulator.

Research method: The staff's perception to teamwork and safety in the emergency department was explored using the Team and Safety Questionnaire (TSQ). An extensive exit questionnaire was used to explore participants' reactions to systematic training.

Results: Physicians' (n = 23) had a more positive perception of the team work climate in the emergency department than the nurses (n = 22, P < 0.001) and the assistant nurses (n = 13, P = 0.02) had. No difference between nurses and assistant nurses was registered.

Nurses had a more negative perception of the safety climate in the emergency department than the physicians (P = 0.03) and the assistant nurses (P = 0.02) had. No difference between physicians and assistant nurses was registered.

The team training was possible to carry out without any significant interference with the ongoing patient care. If necessary, the emergency room allocated for training could be restored within 15 minutes to origin. Participants in the CRM-training (17 physicians, 25 nurses, 13 assistant nurses) appreciated the training highly (median 6, range 5 – 6). Of the participants 15 thought that one day of training was too short. All participants recommended the training strongly to peers and wanted to train repeatedly during their future professional career. No physician wanted to train more than once a year in contrast to the nurses and assistant nurses who wanted to train at least once a year.



Participant highly appreciated to train communication and leadership: "Focus was on communication. It's obvious that we must train communication". "To understand leadership. The impact of communication." A large number of the participants welcomed the interprofessional training that for the first time offered several professions to train team work together.

Unfortunately, staff turn-over in the emergency department prevented a meaningful follow-up one year after the first data sampling.

Conclusions: Lessons learned from this project are that systematic in-situ teamwork training using a human patient simulator is feasible to carry out in the emergency department and highly appreciated among participants. The nurses and the assistant nurses advocated that the need for cooperation between the professions could be constructively met by a reliable strategy for team training located at the working area.