

ABOUT THIS MODULE



RISK AND SAFETY MANAGEMENT AT TEAM LEVEL



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What is the goal of this module?

This module will help teams explore the nature of risk and safety, and reflect on past, current, and future safety practices. At the end of the session they will have created a list of measures being gathered on quality and safety of care, as well as any additional processes that may require measurement.

What is the collective leadership focus of this module?

- Cooperation and coordination between members
- Engagement of all team members
- Recognising and valuing contribution of others
- Sharing leadership roles and responsibilities

What areas of team behaviour does this module focus on?

- Motivation towards goals
- Cooperation between team members
- Cohesion and coordination
- Cross-monitoring



Who is this module for?

All team members. Input from diverse team members can contribute to risk management and patient safety improvement.

What is the patient safety impact of this module?

Through undertaking this module, teams will build upon their existing awareness of risks and safety. By developing a common understanding of existing risks and action areas, teams will collaboratively improve the patient safety environment.



SESSION OUTLINE



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SESSION OVERVIEW

Purpose: This session will help create an understanding of the nature

of risk and safety as a team and how to understand if care has been safe in the past, is safe in the present, and will be

safe in the future.

Timing: 60 min.

Setup: Introduction > Exercise > Feedback > Homework

Outcomes: A list of all current measures being gathered on the quality

and safety of care we provide as a team and a list of any

additional processes that require measurement.

Facilitators: 1-2 team members to facilitate; 1 team member to act as a

scribe to record ideas, discussion points, and outputs.

ADVANCE PREPARATION



Materials: OUTCOME template handouts to be sent out via email.

Equipment: Stable internet connection.

Room: Zoom (Premium Account for security) or Skype.

Attendees: Team members will be invited to participate remotely via

teleconference. If they can't, session materials should be shared in advance via email. Divide your group (if large) into multidisciplinary sub-groups and invite sub-group leaders to

be prepared with separate Zoom/Skype sessions for

discussion.





RISK AND SAFETY MANAGEMENT AT TEAM LEVEL

START OF SESSION

1) Welcome and introduction (10 min.)

Welcome and re-cap on Co-Lead (aims, sharing of leadership across team, etc.), give introductions if new people in attendance and update team on progress on previous session outcomes.

Highlight the relevance of the topic to practice: To improve patient safety we need to first discuss what "safety" means for the team and know what methods, tools and indicators are being used, and should be used, to measure safety.

Note that the aim of today's session is to create an understanding of the nature of risk and safety as a team and how to understand if care has been safe in the past, is safe in the present and will be safe in the future.

Outline the 6 key questions (Health Foundation 2016) that will be central to the team's discussion:

- 1. What are we doing well in terms of safety as a team?
- 2. Has the patient care we've provided been safe in the past?
- 3. Are our team's clinical systems and processes reliable?
- 4. Is the team's care safe today?
- 5. Will the team's care be safe in the future?
- 6. Are we as a team responding and improving?

2) Icebreaker (5 min.)

Take a minute of personal reflection to think about the questions below and then share your thoughts with your colleagues.

- 1. What does safety mean to me?
- 2. How would I describe the safety culture within the team?

Facilitator should invite contributions from each member of the team.

3) Group exercise (20 min.)

If possible get into sub-groups that are multi-disciplinary (as planned). Ask each sub-group to discuss the OUTCOME template and use it to answer the six key questions outlined in the introduction; identifying current safety measures and potential risks that may require measurement **within the team**. Each sub-group should fill in the template to summarise their discussion.

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RISK AND SAFETY MANAGEMENT AT TEAM LEVEL

4) Group Feedback (20 min.)

Get everyone back to the Group teleconference. Facilitators should lead a whole-group discussion and ask each subgroup to feedback their points. The scribe should list the measures discussed. Facilitators can use the prompts below to help generate discussion if required.

1. What are we doing well in terms of safety as a team?

Look at the positives in terms of safety; what areas in particular work well in terms of measurement? What can the team learn from these areas?

2. Has the patient care we have provided been safe in the past?

Explore what data your team measures to know if and how care has been unsafe in the past few months, years.

- > Possible Examples:
- Hospital mortality statistics can these be broken down by area for your team?
- Systematic chart review- can look at any harm that may have arisen.
- What type and number of incident reports were raised from your team in the last few months? Have they been responded to? Has the person who raised the incident report been kept informed of progress on what is happening to that report?

3. Are our team's clinical systems and processes reliable?

Reliability is defined as a reflection of how well a measure provides consistent results in different circumstances.

What standardised processes do we use as a team? How are they measured?

- > Possible Examples:
- As a team are we carrying out audits of how we do things in order to learn and improve (and not simply carrying out audits in order to comply with regulations)?
- Do we regularly carry out checks on equipment to ensure all is functioning as it should be, checks on materials, stocks etc. at local level to ensure supplies are adequate.

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RISK AND SAFETY MANAGEMENT AT TEAM LEVEL

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4. Is the team's care safe today?

How do we know if the care provided by our team is safe? What are we measuring as a team to know our care is safe today?

- > Possible Examples:
- Are all team members able to speak up about safety concerns? (If you think this needs to be improved then see the intervention `TALKING ABOUT SAFETY/PLAYDECIDE PATIENT SAFETY GAME')
- Does the team follow and apply the HSE Open Disclosure Policy?
- Have any patient experience surveys been carried out? Can you get the results of these broken down to the team level and discuss the results together as a team?
- Are safety huddles carried out by the team? (If you think this would be beneficial for the team, see 'SAFETY PAUSE HUDDLE" intervention)

5. Will the team's care be safe in the future?

What do we measure to know as a team if our care will be safe in the future?

- > Possible Examples:
- Does the team plan and anticipate when care might be at risk from a safety perspective (e.g. staff shortages, seasonal increase in patients, patient transfer)?
- Is there a way of reporting and removing frustrations for team members (frustrations can often signal hazards)? (If you think this would be beneficial for your team, consider the 'REMOVING FRUSTRATIONS/DEALING WITH SUGGESTIONS' intervention)?
- Are team indicators of safety explored e.g. team injury rates, team absenteeism rates?
- If organisational level/national surveys are carried out, is it possible to obtain results for your team?

6. Are we as a team responding and improving?

Have we learned as a team from previous incidents?

- > Possible examples
- What, if any, of this data do we feedback to team members to give them
 a sense of how well the team is performing in terms of safety? (This will
 be explored at the next session 'MONITORING AND COMMUNICATING
 SAFETY PERFORMANCE at the TEAM LEVEL' intervention)

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RISK AND SAFETY MANAGEMENT AT TEAM LEVEL

5) Homework (or 5 min. if time allows)

The information gathered from today's session will feed into the team's next safety-focused intervention on MONITORING AND COMMUNICATING SAFETY PERFORMANCE AT THE TEAM LEVEL.

Prior to that session, ask the team to reflect and note what additional measures are recorded by the hospital in terms of risk and safety that are relevant to the team.

6) Close of session (5 min.)

Give brief feedback on the session. Notes can be collected and collated by one individual to maintain record of discussion.

