



# TeamSTEPPS Plus LifeWings

**Halted Dire RN Turnover,  
Saved More Than \$500K,  
And Reduced Mortality.**

**How St. Mary's Good Samaritan Inc., Saved Lives, Money,  
And Morale By Thinking Outside the TeamSTEPPS Box.**

**It's no secret that communication problems between physicians and nurses can have an enormous impact on the operational effectiveness of a facility. But one health care system found that poor communication at its centers affected its bottom line as much as its safety record.**

In the Fall of 2009, the leaders of St. Mary's Good Samaritan, Inc. (SMGSI) committed to "reducing the incidence of preventable harm to zero" with improved teamwork and communications through use of the TeamSTEPPS program.

SMSGI, one of the largest systems in Southern Illinois, is comprised of two mid-sized hospitals: St. Mary's Hospital in Centralia and Good Samaritan Regional Health Center in Mt. Vernon. SMSGI provides critical services to the area including emergency care, medical/surgical, oncology, neurology, mental health, obstetric, cardiology, orthopedic, pediatric, and rehabilitation. The leaders at SMSGI realized that to fully address their weak areas and see real improvements, they needed more than just an out-of-the-box program. Their foresight resulted in several measurable improvements and a clearer path to greater safety in the future.

## The Need for Improvement

In 2008, despite a good record on quality, leaders of the two hospitals acknowledged that their sentinel event baseline, AHRQ results, and risk assessment all pointed to a critical need for change. Nurse retention was dangerously low, staff morale was concerning, and only a very small percentage of staff reported feeling comfortable “speaking up” if they had a concern. Additionally the majority of the hospitals’ error cases occurred due to communication problems. Not content to simply throw resources at the problem, their forward-thinking leaders engaged LifeWings, the leader in patient safety improvement programs, to help ensure the success of their TeamSTEPPS program.

## The Program

The hospital started working with the Intensive Care Units in January 2010. All non-physician staff training was mandatory. The teams embarked on a customized program based on the LifeWings’ five-step process including:

- Leadership Development
- Risk Assessment
- Teamwork Skills
- Hardwired Safety Tools
- Measurement.

During the Leadership Development phase, hospital leaders focused on developing a shared mental model and teamwork among its influencers as well as establishing criteria for measuring the program’s success. The Risk Assessment phase resulted in a documented analysis of the hospitals’ weak areas and discrepancies, as well as written criteria to determine which processes should be changed. Tool creation skills and teamwork skills were covered in additional phases.

Pete Caulk, the LifeWings project manager, oversaw the program at both hospitals, and after a thorough assessment, developed customized plans for both based on their unique hurdles to better patient safety. At Good Samaritan, he placed a priority on improving relationships. He stated that, “after assessing the communication-related

problems, we changed the focus of the program to affect what we determined was the root-cause of the issues there—personnel relationships and the staff and physicians’ perception of quality at the hospital.”

Although there was much work to be done, acceptance and enthusiasm for the program was high. Dr. Daniel R. Hoffman, Administrative Medical Director for Good Samaritan Regional Health Center and SSM Healthcare, stated that, “Everyone got behind the training. With the less-than-optimal environment, everyone knew we had to do something. We could not contain the nurses’ enthusiasm and when we received 99% positive feedback on the first phase of the training from physicians, we knew we were on the right track.”

The hospitals trained a total of 1014 staff and physicians usually between 80-110 per quarter. They started with the ICU department then moved on to Surgery, OB, and other departments.

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A cornerstone of the LifeWings training is ensuring that hospitals have the knowledge and skills needed for sustained improvements within their own leadership. So in addition to receiving training from LifeWings on-site, the hospital designated a CRM Coordinator and sent their Medical Director, RN educator, a CRNA, and ICU director to the LifeWings Train-the-Trainer program in Memphis, TN. The CRM Coordinator also attended the Memphis training to become more familiar with the

LifeWings process and provided invaluable inputs on the training process. The in-house, cross-department expertise enabled them to bring the new methodologies and procedures to all the departments consistently and reliably.

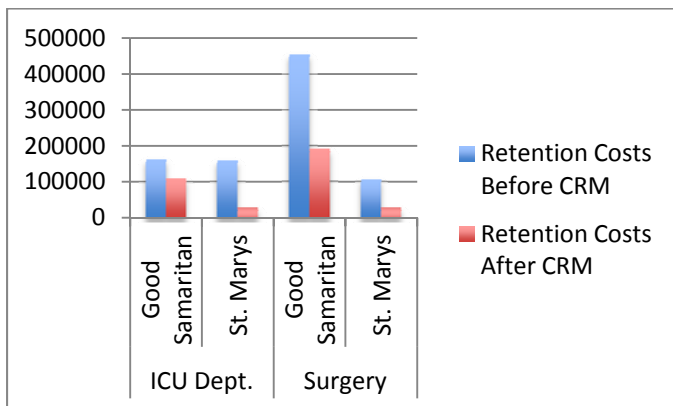
## Results

Although there is still much work to be done, hospital leadership is thrilled with the results of the program.

### Reduced RN Turnover

The most impressive results of the program so far can be seen in the reduction in RN turnover and the resulting financial savings. Dr. Hoffman stated that prior to TeamSTEPPs the hospital had a difficult time recruiting nurses but now that the culture has improved, “nurses are anxious to join us.”

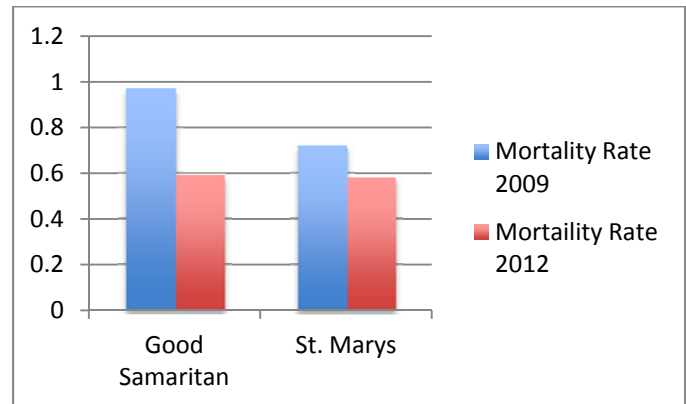
This improved retention is seen in the hospitals' bottom line. Following are the estimated reductions that occurred as a result of improved nurse retention:



**This improvement alone can be cited as saving the hospital more than \$500k– much more than the cost of the TeamSTEPPS /LifeWings program.**

### Reduced Mortality Index

Mortality rate at both hospitals has been reduced significantly since the TeamSTEPPS/LifeWings implementation. This improvement will enable enormous cost, liability, and morale savings.



### AHRQ Survey Result Improvements

Staff and leaders at SMSGI recognize that continuous improvement requires vigilance but they are encouraged and guided by the data in their most recent AHRQ Culture of Safety Survey. Highlights of the results include:

At St. Mary's:

- In 2012 93% of respondents rated physician-nurse collaboration as “excellent.”
- The survey conducted after the OB department's 2011 TeamSTEPPS implementation resulted in 90.9% of the measures being in the top percentile – almost all showing significant improvements.
- In 2009 there were three sentinel events in the ICU. To date there have been zero.

At Good Samaritan:

- The percentage of staff rating their units as “excellent” increased from 25% in 2010 to 41% in 2012.
- 73% of the measures improved in 2010-2012 vice 53% in 2009.
- In 2012 84% of respondents rated physician-nurse collaboration as “excellent.”
- There have been zero sentinel events in the ICU since 2010.

***In 2012 93% of respondents rated physician-nurse collaboration as “excellent.”***

***In 2009 there were three sentinel events in the ICU. To date there have been zero.***

## **Additional Improvements**

In addition to the numbers, hospital leaders and staff see many day-to-day results such as:

In the LifeWings Hardwired Safety Tool workshop, the team re-tooled 5-6 different forms into one standardized, combined document that makes handoffs more consistent and effective, with no loss of data. The ICU Tools workshops also resulted in a new ICU Room Set-Up checklist. The tool was initially not received warmly, but after an occasion when the department received numerous patients at one time, the staff appreciated the efficiency and improved care when every room was perfectly equipped because of the tool. Staff now rely on that checklist and insist that it be utilized every time a room is turned over. The staff now has the knowledge to create new tools on their own, and more importantly, train staff members on how to use new tools, for lifelong improvements.

Dr. Hoffman credits the training with several incidents that have had a direct and immediate impact on patients' lives. He recalled a surgery event which, because of the use of a checklist, resulted in a patient being spared a potentially harmful allergen. Dr. Hoffman stated, "...the surgeon asked the question of the patient, even though it had already been asked, hearing the question a different way made the patient understand what was being asked and revealed his potential for harm with part of the scheduled procedure. The surgeon thought to take the extra step because of the training he received." With the training, there is now a plan to train all new staff members on these skills so that these types of "good catches" will continue.

## **Factors of Success**

Dr. Hoffman stated that, "Much of the improvement we have seen can be directly related to the TeamSTEPPS/LifeWings training. I think the fact that we received top-down support and answered the 'what's in it for me' question for our physicians enabled the program to be successful." Dr. Hoffman also points to the program helping to change the mindset of many physicians that success depends entirely on them. He stated that, "In medical school, physicians are taught that ultimately, the right care is dependent entirely on them. This training helped them realize that engaging the team improved outcomes."

Michelle Darnell, VP of Systems Improvement for the hospitals, stated that, "While we were educated in the concepts embedded into the AHRQ's TeamSTEPPS materials, we lacked the structures and processes to operationalize them. The knowledge and credentials that the LifeWings initiative brought into our organization made our staff and physicians comfortable that they could understand and help with the difficult situations that our team leaders and members find themselves in on a daily basis."

## **The Future at SMSGI**

With successful implementations in Surgery and ICU completed, hospital leaders expect to see even greater improvements as the skills and tools are replicated more efficiently in additional departments. They also have a plan for new-hire and refresher training to ensure that the improvements are maintained and refined. Dr. Hoffman stated, "We are excited to see the improvements in the next couple of years when we have hit our stride with these new methodologies. The potential savings from the nurse retention alone could have a game-changing affect on our organization in light of the new and unknown changes to health care coming down the road. We are very happy to have this new foundation of skills to ensure our viability and the continued safety of our patients."

## Partners with Purpose

LifeWings, located in Collierville, TN, was founded in 2005 with the sole mission of helping health care providers improve safety with the proven teamwork, safety tools, and methodologies for communication used successfully in high-reliability industries. Their leaders, experts in health care and aviation, were the pioneers in effectively adapting tools proven in the aviation world to the health care setting. Their program succeeds where others have failed because they require their clients to measure

results and have a plan for sustainability. They teach clients how to create safer cultures and teach future employees the methods, so the improvements are systemic, not one-time quick fixes. As a result of industry-wide recognition of the LifeWings program, their team has helped providers nationwide improve service delivery, patient survey scores, and employee satisfaction. Providers that employ the methods in LifeWings programs also reduce exposure to malpractice and loss of reimbursement due to errors.



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