

# Video-Based Simulation: Facilitator Guide

Mutual Support
Task Assistance

**TeamSTEPPS Training Curriculum** 



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# SECTION I: INTRODUCTION TO VIDEO-BASED SIMULATION TRAINING

#### **TeamSTEPPS**

TeamSTEPPS<sup>®</sup> is a teamwork system designed for healthcare professionals that is rooted in more than 20 years of research and training experience. It aims to improve healthcare quality and safety by helping teams work more effectively together.

# **Video-Based Simulation Training**

Video-based simulation training is an easy-to-use method for teams to practice applying TeamSTEPPS principles to real scenarios. The goal of this training is for teams to learn to identify TeamSTEPPS principles and tools that promote effective teamwork and then apply these principles in day-to-day clinical work.

The training is composed of four core parts and one optional part:

- 1. Welcome and Introduction
- 2. Video Scenario
- 3. Small Group Debriefing
- 4. Video Scenario Recap and Summation
- 5. Followup With Participants (optional)

# **Advantages of Video-Based Simulation Training**

HOUR	It can be delivered in 1-hour sessions to conveniently fit into routinely available protected time for professional development.
	No formal training is needed to facilitate or deliver this teamwork training.  This guide will help you successfully facilitate this teamwork training.
\$	It can be delivered in any setting and only requires basic audiovisual capabilities for in-person training or a video conferencing platform for virtual training.





# **Recommendations for Preparing for This Training**

Facilitators should become familiar with this guide and the videos before the training session to maximize the learning experience for participants. The supplementary resources section of this guide includes a <u>facilitator checklist</u> to help you prepare for the training session. (Accessible materials can be found here.)

Try to include participants from multiple disciplines and roles in the program. Hospital leadership, such as department chairs or executive leadership, can help achieve broad-based participation in the program. Including patients and caregivers can add an important perspective to the exercise.

Facilitators *and* participants should review the <u>TeamSTEPPS Pocket Guide</u> before the session. It provides a handy overview of the program and the learning objectives of this training. Relevant excerpts are included in the Participant Worksheet.

# **Encouraging Attendance**

To strengthen attendance at the session, assess whether it is possible to offer continuing education credit for this session. Your institution's professional education staff may be able to help you obtain CME/CEU<sup>i</sup> accreditation. In addition, providing food at the event can be an easy way to encourage participation and create a casual environment that can foster small group participation during the debriefing. Even something small, such as donuts or cookies, can draw participants.

## **Resource Requirements for Video-Based Simulation Training**

- 1. 55 minutes of protected time to conduct the training.
- 2. Meeting space with an appropriate amount of room for participants to work in groups of 4-5 during the breakout debriefing discussions OR a secure video conferencing platform with the capability to create breakout rooms. If your internet connection may be unreliable, download video files to your device (computer or storage device) to avoid risk of internet failure during the training session.
- 3. Facilitator to lead the session who can dedicate 1-2 hours of preparatory work to review the guide and video. Consider adding a second facilitator for groups larger than 20 participants.
- 4. Computer, speakers, and screen to show the video segments (if presented in person).
- 5. Three participants at a minimum; the maximum is limited by available space.
- 6. Participant materials (printed if in person or shared in advance by email if virtual).
- 7. Facilitator materials (printed if in person).
- 8. Facilitator-initiated participant followup emails after the session (optional).

For information on facilitation and debriefing skills, refer to the list of resources available in the

<sup>&</sup>lt;sup>i</sup> CME = continuing medical education; CEU = continuing education units. Other types of credit may be available for various professions.





Supplemental Resources section of this guide.

# **SECTION II: MODULE OVERVIEW**

#### **Mutual Support - Task Assistance**

#### **Learning Objectives:**

- 1. Recognize the importance of seeking support when needed.
- 2. Discuss the causes of reluctance or failure to seek support when needed.
- 3. Describe how to integrate deliberate and strategic use of help (task assistance) into team functions.

**TeamSTEPPS Tools and Concepts:** Cross-monitoring, task assistance, advocacy and assertion **Video Scenario:** 

A patient and their spouse come in to register for a clinic visit. During intake, the patient collapses and falls to the floor. Clerk summons a passing medical student who initially tries to manage the scenario themselves. They have a registrar and medical assistant from the clinic who can assist, but they don't know how to manage their resources well. The code team physician who was called arrives and starts to take over the management of the patient. Scenario ends when they have arranged a transfer to the emergency department.

#### **Debriefing Focus:**

Examine the student's management of necessary tasks and the resources - registrar and medical assistant - available to her. Consider why she didn't initiate a request for help independently. How did the registrar and medical assistant support one another, the student, and the patient's needs?

#### **Optional Topics to Explore**:

How does hierarchy play into this scenario? Does it impede people who might be good team leaders from stepping up? What about task assistance and mutual support? Have you been in a similar scenario in your clinical work? How did you navigate those challenges?

How might you give feedback to this student/intern if you were on their team?

How did the code team leader assign tasks? Was this an effective way of leading a team?



# SECTION III: FACILITATOR GUIDE

#### **Facilitator Guide Overview**

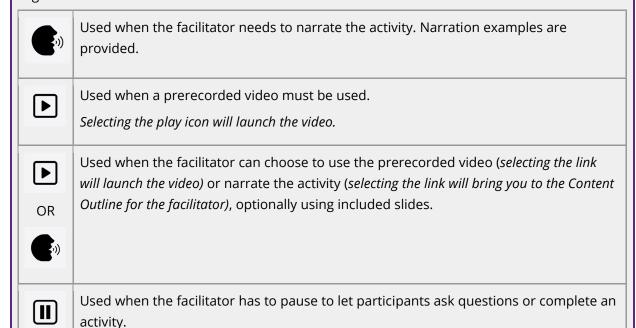
This training module is primarily designed to be used with a series of prerecorded videos to introduce the session activities, in addition to the video scenarios. However, except for the "Video Scenario" and the "Video Scenario Recap" segments that must be used, the facilitator can choose to use the prerecorded videos to introduce the segments or narrate those introductions using the Content Outlines provided for each segment.

Each module has four mandatory parts and one optional part:

- 1. Welcome and Introduction
- 2. Video Scenario
- 3. Small Group Debriefing
- 4. Video Scenario Recap and Summation
- 5. Followup With Participants (optional)

The training session is composed of several video segments and several group activities as shown on the visual representation on the next page.

Legend of the icons used in the activities:



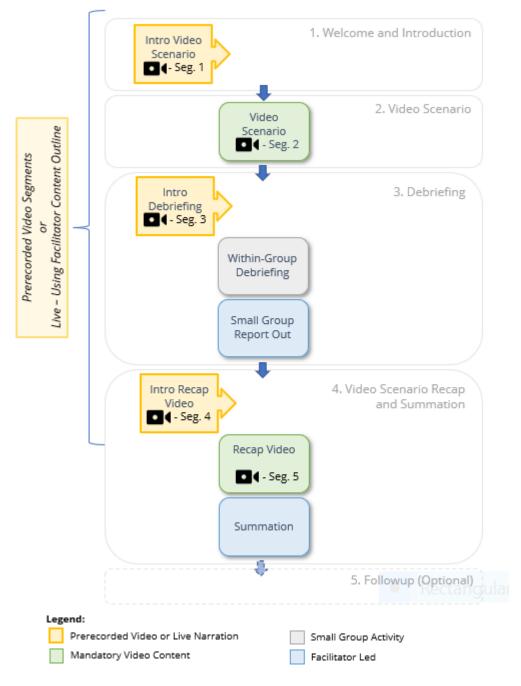


# Team**STEPPS**®

Used when the facilitator has to check in or interact with participants.



# Team**STEPPS**®



Visual representation of the training module





Note: Each video segment is provided as a separate video file. A compiled video of all the segments is also available. If you decide to use the compiled video, refer to the Facilitator Worksheet to identify time stamps for each segment.



# **Training Module Activities**

#### 1) Welcome and Introduction (~5 minutes)

Welcome participants.

Play the video - segment 1 (select here)

OR

(if virtual, share screen too).



or

Discuss importance of TeamSTEPPS video-based scenario team training and the learning objectives and agenda for the session (select <u>here</u> to access a content outline).



Pause and answer questions participants have on the learning objectives or agenda.

# 2) Video Scenario (~5 minutes)



(If in person) Hand out participant worksheets.

(If virtual) Share the participant worksheet via email or in the chat.



Play the video scenario - segment 2 (select here)

(if virtual, share screen too).



Pause for participants to finish notes (on the worksheet or other medium).

## 3) Debriefing (~30 minutes)



Introduce the debriefing session.

Play the video - segment 3 (select here)

OR

(if virtual, share screen too).



or



Introduce the debriefing small group discussions (select <u>here</u> to access a Content outline).



Break into groups (in person or in virtual breakout rooms) for 20 minutes of discussion.

Note: Groups can be preassigned when possible. We suggest 4-5 interdisciplinary participants per group with a range of seniority and patients and caregivers when possible.

Refer to the facilitator worksheet for instructions.

As the facilitator, you will monitor the discussions in small groups as a roving observer and time-keeper

(if in person) walk around, pausing at each group.

(If virtual) go into each group's breakout room at least once.

Keep in mind that the small groups should think about the scenario through the lens of TeamSTEPPS principles. Be prepared to help groups that have fallen silent or strayed into unrelated discussions. Consider guiding them: (1) Ask them to describe their own experiences related to the scenario, (2) Direct them to the optional topics highlighted earlier, and (3) Ask the participants to review the <u>Pocket Guide</u> excerpt in their Participant Worksheet to see how its content relates to the scenario.



Remind participants when it's time to begin discussing key takeaways and that they will report out to the larger group. Ask everyone to wrap up their discussions.

"Please finish your discussions and make sure that you have someone from your group ready to present the key takeaways" (in chat or orally if virtual).



Small Group Sharing - Call on the spokesperson from each small group to share their group's key takeaways.

If you have a large group, consider having groups put their key takeaways on a whiteboard or sticky notes (or in chat if virtual); then the facilitator can pick some or all to review with the group during the Summation.

"Let's have each small group share their key takeaways and how TeamSTEPPS principles and tools could have been used to improve communication in the video scenario."

#### 4) Video Scenario Recap and Summation (~15 minutes)







Play the video - segment 4 (select here)

(if virtual, share screen too).

OR

or



Introduce the Video Scenario Recap (select <u>here</u> to access a Content outline).



Play the Video Scenario Recap - segment 5 (select here).

"We will now watch an example of the healthcare team working together and exemplifying good teamwork and communication. Consider how the application of the TeamSTEPPS skill improves communication and patient care."



Summation - draw the conversation to a close by summarizing common themes reported out by the small groups and highlighting how TeamSTEPPS principles and tools could have improved communication. The facilitator must keep the group focused on the following task:

"Please think of one or two changes that you could work on beginning today that would make you a better communicator with your teammates using cross-monitoring, task assistance, and advocacy and assertion."



Provide closing remarks.

"Thank you for participating in today's training. (Optional) I will touch base by email soon to share the key takeaways we heard today and ask you to think about what today's lessons have meant in your work between now and then."

#### 5) Followup With Participants (optional)

After the session, you may want to follow up with the participants to reinforce what they learned. Consider sending an email within 2 weeks after the session revisiting the key takeaways and TeamSTEPPS principles/tools discussed during the wrap up discussion (template email is available in the supplemental resources section of this guide).





# SUPPLEMENTARY RESOURCES

# **Facilitator Preparation Checklist**

- Read through the Facilitator Guide and TeamSTEPPS Pocket Guide and watch the videos.
- **Determine the best format for training (in person or virtual)**. There are benefits to both formats. Consider the format of other well-attended meetings in your department, as well as participant access to and comfort-level with video conferencing technology.
- **Schedule the session.** Grand rounds or continuing education conferences are good opportunities. A mix of clinical backgrounds and experiences is ideal but not necessary.

(If the session is in person)

- **Book a room** that is an appropriate size with audiovisual equipment (can play a video with audio from a computer or speakers) and seating for your group.
- If you might not have access to a stable Internet connection during the training session, download the videos from the link in this Guide to your computer or flash drive. (Note: they are large files and may take time to download.)
- **Test the audiovisual equipment and video** the day before the session.

(If the session is virtual, obtain expert support for use of the video conferencing platform if needed.)

- Ensure participants have access to the video conferencing platform.
- Create a meeting invite on the video conferencing platform.
- Test the video link, screen sharing, and creating breakout rooms functions before to the session.
- Consider ways to increase participation, such as offering continuing education credits or snacks.
- Constitute the groups for the debriefing (Optional). Assign 4-5 people per group. A mix of different members of the healthcare team with varying levels of seniority is ideal. If your group is small, you can likely skip this step and make the teams during the session. If the session is virtual, you can create breakout room groups in advance, or you may assign a second person to create and assign people to the breakout rooms during the introductory section.
- **Prepare materials.** Print these for in-person sessions or send them in advance via email for virtual sessions:
  - Facilitator materials
  - o Participant materials 1 per participant
    - Participant Worksheet
    - Pocket Guide

Return to Recommendations for Preparing for This Training



# Facilitator Content Guide: Bullet Points for Narration by an Onsite Facilitator Slides for this content

#### 1) Welcome and Introduction



Background on TeamSTEPPS program:

- History
- Purpose
- Importance of teamwork and communication in healthcare quality and safety

Describe simulation video scenario.

Recommendations for observing team interactions. Assume team members are capable and well intentioned: focus on their behavior, not their character.

- Who is responsible for the multiple interventions required?
- When and how is additional help summoned and how are they directed when they arrive?

Orient participants to the Participant Worksheet:

• Notes should be taken during video.

Prepare participants for the small group discussions to follow:

• Expectation that all participants contribute to the discussion.

Return to Facilitator Guide (Welcome and Introduction)

#### 3) Debriefing



Intro to the Debriefing session

Ground rules for small groups

Assume that the individuals portrayed in the scenario are intelligent, capable, and caring professionals who are doing their best.

• This statement encourages respectful discussion, curiosity, and open dialogue among participants. You can learn more about it <a href="here">here</a>.





Begin by reviewing notes and formulating thoughts.

Spend specified time discussing the following:

- What was your overall impression of this video? What went well? Where did things start to go "less well"?
- How did the clinicians organize their work, such as sharing and assigning tasks?
- Did the staff appear to function as an organized team?
- What might cause reluctance or failure to seek support when it is needed?

Rotate role of discussion leader for each topic, by name alphabetically or by seating position.

Allow time after discussing these questions for the group to identify priority behaviors and skills for daily practice to share with large group.

Return to Facilitator Guide (Debriefing)

## 4) Video Scenario Recap and Summation



Recap video shows good use of TeamSTEPPS tools.

Consider content of recap video and small group discussion key takeaways during summation.

Goal of summation is to identify specific ways for each participant to improve teamwork skills in their own work.

Return to Facilitator Guide (Video Scenario Recap and Summation)





#### **Facilitator Worksheet**

We recommend keeping this agenda close by when conducting the session. The facilitator should keep the session running on time.

# Learning Objectives:

- 1. Recognize the importance of seeking support when needed.
- 2. Discuss the causes of reluctance or failure to seek support when needed.
- 3. Describe how to integrate deliberate and strategic use of help (task assistance) into team functions.

(hh:mm)	Facilitator using prerecorded narratives	Facilitator narrating themselves (refer to <u>Facilitator Content Guide</u> and related slides)
Welcome	and Introduction (5 min)	
00:00	Facilitator welcome  Play the prerecorded introduction- segment 1 (link)	Facilitator welcome Why we are here Objectives of the session Overview *Facilitator: Distribute agenda* Provide Video Scenario instructions
00:05	Questions from participants?	
Video Sce	nario (5 min)	
00:05	*Facilitator: Distribute Participant Workshee Play the Video scenario - segment 2 (link) Provide time to participants to take notes	et*
00:10	Play the prerecorded debriefing introduction - segment 3 (link)	Provide debriefing instructions
00:15	Groups break-out and discuss:	_





	<ol> <li>What was your overall impression of this video? What went well? Where did things start to go "less well"?</li> <li>How did the clinicians organize their work, such as sharing and assigning tasks?</li> <li>Did the staff appear to function as an organized team?</li> <li>What might cause reluctance or failure to seek support when it is needed?</li> <li>Facilitator monitors group discussions, assists as needed.</li> </ol>
00:35	Small group sharing
Video Sce	nario Recap and Summation (15 min)
	nano kecap ana bannadan (15 mm)
00:40	Play the prerecorded intro to Recap Video - segment 4 (link)  Introduce the Recap Video
00:42	Play Recap Video - segment 5 <u>(link)</u>
00:45	Summation
00:55	Session concludes

If you use the <u>full-length video</u>, below are timestamp references for each segment:

Segment	Timestamp start (m:ss)	Timestamp end (m:ss)	Description
1	0:00	3:36	Intro to Video Scenario
2	3:37	5:42	Video Scenario





3	5:45	8:00	Intro to Debriefing
4	8:02	8:35	Intro to Video Recap and Summation
5	8:37	End	Recap Video





# **Participant Worksheet**

Learning objectives:

- 1. Recognize the importance of seeking support when needed.
- 2. Discuss the causes of reluctance or failure to seek support when needed.
- 3. Describe how to integrate deliberate and strategic use of help (task assistance) into team functions.

Welcome and In	ntroduction
5 minutes	Welcome & Why we are here
	Goals and Overview
	Video Scenario instructions
Video Scenario	
5 minutes	Video Scenario
Debriefing	
30 minutes	Individual reflections
	Small group discussions
	Small group sharing - Key takeaways reported from each group
Video Scenario	Recap and Summation
15 minutes	Video Scenario Recap
	Summation
	Closing

Record your thoughts as you watch the video. Pay special attention to how the clinicians in the video share information and speak up, as these topics will be discussed in small groups after the video.

## **Simulation Observations** (for your notes)

Who is responsible for the multiple interventions required?





When and how is additional help summoned and how are they directed when they arr	rive?
Small Group Discussion Recommended Total Duration:	~20 minutes
Share general reactions	~2 minutes
<ul> <li>Share general reactions</li> <li>What are everyone's initial reactions to the video scenario?</li> <li>What went well? Where did things start to go "less well"?</li> </ul>	~2 minutes
What are everyone's initial reactions to the video scenario?	~2 minutes ~3 minutes
<ul> <li>What are everyone's initial reactions to the video scenario?</li> <li>What went well? Where did things start to go "less well"?</li> </ul>	
<ul> <li>What are everyone's initial reactions to the video scenario?</li> <li>What went well? Where did things start to go "less well"?</li> </ul> Discuss	
<ul> <li>What are everyone's initial reactions to the video scenario?</li> <li>What went well? Where did things start to go "less well"?</li> <li>Discuss</li> <li>How did the clinicians organize their work, such as sharing and assigning tasks?</li> </ul>	~3 minutes
<ul> <li>What are everyone's initial reactions to the video scenario?</li> <li>What went well? Where did things start to go "less well"?</li> <li>Discuss</li> <li>How did the clinicians organize their work, such as sharing and assigning tasks?</li> <li>Discuss</li> </ul>	~3 minutes
<ul> <li>What are everyone's initial reactions to the video scenario?</li> <li>What went well? Where did things start to go "less well"?</li> <li>Discuss</li> <li>How did the clinicians organize their work, such as sharing and assigning tasks?</li> <li>Discuss</li> <li>Did the staff appear to function as an organized team?</li> </ul>	~3 minutes ~3 minutes
<ul> <li>What are everyone's initial reactions to the video scenario?</li> <li>What went well? Where did things start to go "less well"?</li> <li>Discuss</li> <li>How did the clinicians organize their work, such as sharing and assigning tasks?</li> <li>Discuss</li> <li>Did the staff appear to function as an organized team?</li> <li>Discuss</li> </ul>	~3 minutes ~3 minutes

Agency for Healthcare Research and Quality



• How do you plan to apply these in your daily work?

#### Optional topics to explore:

How does hierarchy play into this scenario? Does that impede people who might be good team leaders from stepping up? What about task assistance and mutual support? Have you been in a similar scenario in your clinical work? How did you navigate those challenges?

How might you give feedback to this student if you were on their team?

How did the code team leader assign tasks? Was this an effective way of leading a team?

# **Key TeamSTEPPS Tools Related to This Module**

**Mutual Support** is one of the four essential skills for safe, effective, and patient-centered care.



Sustained knowledge, attitudes, and behaviors are needed for mutual support and the other three activities to maximize the safe, effective, and patient-focused care that all patients deserve.

#### **Task Assistance**

Helping others with tasks builds a strong, trusting team that can improve performance by as much as 20 percent. Key strategies include:

- Team members protect each other from work overload situations.
- Effective teams place all offers and requests for assistance in the context of patient safety.





- Team members foster a climate where it is expected that assistance will be actively sought and offered.
- Assistance is sought from and provided to patients and family caregivers.

#### **Feedback**

Information provided to team members, either intentionally or unintentionally. Formative feedback is an investment in the team and should be used to help improve performance.

#### Feedback should be:

- *Timely*—given soon after the target behavior has occurred.
- Respectful—focuses on behaviors, not personal attributes.
- *Specific*—relates to a specific task or behavior that requires correction or improvement.
- *Directed toward improvement*—provides directions for future improvement.
- *Considerate*—considers a team member's feelings and delivers negative information with fairness and respect.
- Patient focused—addresses impact of the behavior on the patient's well-being.

#### **Advocacy and Assertion**

Advocate for the patient:

• Invoked when team members' viewpoints don't coincide with that of the decision maker.

Assert a corrective action in a firm and respectful manner:

- Make an opening.
- State the concern.
- State the problem (real or perceived).
- Offer a solution.
- Reach agreement on next steps.





# **Facilitator Followup Sample Email**

Send within approximately 2 weeks after the session. Customize the portions as indicated.

Dear [Participants/Colleagues/Team],

Thank you for participating in the TeamSTEPPS video simulation training session. I appreciate that you took the time out of your busy schedule to join the training.

I trust that you have been able to use some of the strategies we learned in the training session. The objectives for the session were to understand the key tactics for mutual support and to apply these in our day-to-day clinical work.

The common themes from our session were [summarize key takeaways from the small group discussions].

Please take time to consider whether you have observed any of these strategies used since our session. Have you been able to apply these tactics to improve patient care? Think about whether you have been able to draw on the training and apply the strategies in clinical practice.

Your feedback on this training is valuable.

Thank you,

[your name]





# **Resources for Developing Facilitator and Debriefing Skills**

#### **Memory aids**

#### Free

Promoting Excellence and Reflective Learning in Simulation (PEARLS) is a debriefing framework available on a physical or electronic pocket card that can serve as a cognitive aid to augment debriefing skills. PEARLS is available free of charge and is open source.

Estimated time commitment: <30 mins

https://debrief2learn.org/pearls-debriefing-tool/

#### **Handbooks**

#### Fee required

The *Pocket Book for Simulation Debriefing in Healthcare* offers a thorough review of the simulation facilitator literature in an accessible, reader-friendly format. Authored by leading international simulation experts, Dr. Denis Oriot and Dr. Guillaume Alinier, this book shares valuable tips and tricks that can help new debriefers acquire new skills and expert debriefers to hone their craft.

**Estimated time commitment: Varies** 

Available in print or ebook through Amazon, Springer, and several others.

#### Informational digital resources

#### **Free**

Demian Szyld, M.D., Ed.M. is a practicing emergency medicine physician at Brigham and Women's Hospital and Senior Director for the Institute for Medical Simulation, Center for Medical Simulation, in Boston, Massachusetts. On this episode of the American Thoracic Society's Section on Medical Education Podcast, he covers a variety of topics, including the phases of a debriefing, strategies for communicating with participants, ways to create a psychologically safe learning environment, and the subtle nuances of debriefing language.





#### **Estimated time commitment: 50 mins**

Structured Simulation Debriefings: An Interview With Demian Szyld

Free

The University of Washington provides an online tutorial for training new facilitators to deliver simulation-based education. This lesson provides a basic overview of debriefing, considerations in debriefing, and examples of techniques used in debriefing. It is not meant to be comprehensive but will familiarize a novice debriefer to the role and responsibility of a debriefer. You will need to register to gain access. Registration is free of charge.

**Estimated time commitment: 30-40 mins** 

https://collaborate.uw.edu/course/sim-104-briefing-and-debriefing-the-key-to-learning-in-simulation/

#### **Online courses**

**Fee required** Sim One Online Course (in-person options available as well)

https://www.healthysimulation.com/medical-simulation/organizations/simulation-canada/

## In-person courses and fellowship programs

Fee required

The Society for Simulation in Healthcare houses an up-to-date directory on available courses and fellowship programs.

https://www.ssih.org/

