



“Achieving High Reliability by Putting the Team FIRST”

The University of Texas Southwestern Medical Center

*Quality Enhancement Plan for the
Southern Association of Colleges and Schools Commission on Colleges*

On-Site Review
March 26 – 28, 2019

Using Handover Training for Students to Promote Critical Team-Based
Communication Behaviors that Reduce Harms by Putting the “Team FIRST”

Team FIRST

Face-to-face Feedback

Inter-professional & Interactive

Reliability & Resiliency

Safe Climate for Synthesis

Team Training

Executive Summary

The 2019 QEP proposal for the University of Texas Southwestern Medical Center is named “**Team FIRST**”. The name underscores the importance of teams in healthcare by implicitly accepting that humans can and will error, yet *teams* can be flawless. Further, it emphasizes the essential conditions needed for safe, effective team-based communication during handovers in the clinical arena: 1. **Face-to-face Feedback**, 2. **Inter-professional and Interactive**, 3. **Reliability and Resiliency**, 4. **Safe climate for Synthesis** and 5. **Team Training**.

The progressive series of educational experiences in the **Team FIRST curriculum ensures our students will have the skills needed to advance teamwork and communication as future trainees, faculty and staff at our institution and well as those nationwide. In doing so, we are building the foundation for the team-based practice of medicine for the 21st Century.

The **Team FIRST** approach is innovative in several dimensions. First and most importantly, it is driven *by and for students*. The Offices of Quality, Safety and Outcomes Education in conjunction with Office of Undergraduate Education has already engaged over 20 students in scholarly activities related to team based care during handovers. Second, **Team FIRST** provides an opportunity for student and faculty development, leadership and scholarship by creating team with complimentary skills within each of its major components. Third, its conceptual framework provides a model for discovery and generation of generalizable knowledge. Fourth, its design and execution are built on the foundations of team, implementation and safety science. Finally, its successful execution has the potential to produce national and international leaders in simulation-based education, patient safety and quality improvement.

The development of team-based communication and care coordination is the key to reducing preventable harms and creating joy-in-work by medical teams. The inclusion of experts in organizational psychology and human factors and ergonomics provides us the tools that have been so successful in other high-reliability industries, like the aviation. **Team FIRST** utilizes the most ubiquitous teaming event in healthcare to teach and reinforce behaviors critical to teamwork, like honesty, discipline, humility, curiosity, and creativity. These educational experiences will build a foundation for learners to apply these skills upon graduation for not only exchanging information and responsibility for a wide range of care transfer and handover within and between hospital, but to compel learners to serve as leaders and change agents in the national effort to address communication failures which are the leading cause for harms in healthcare. We believe this plan leverages the strengths of our academic medical center by making the teaching and learning of team-based communication a priority for the Academic and Health System Affairs at our institution.

After the selection of a topic, the next task was ensuring that the most experienced and successful faculty members constituted an Implementation Steering Committee. Dr. Philip Greilich, a practicing cardiovascular anesthesiologist involved in quality, safety and health services research, was the unanimous choice to lead the group. Dr. Greilich's research focuses on understanding the influence of patient, provider and organizational ergonomics on outcomes when implementing and diffusing best practices.

Individuals from the QEP Development Steering Committee and related Six-Year Plan committees comprise the remainder of UT Southwestern's members. Because the Six-Year Plan defines our institutional priorities and goals and undergoes continual review and updating, there will be constant alignment between the QEP and institutional planning efforts, External consultants providing substantial input are members of the QEP Implementation Steering Committee also.

Table VI-1: Quality Enhancement Plan Implementation Steering Committee

Individual	Position	Role
Philip Greilich, M.D., Chair	Professor, Anesthesiology and Pain Management	QEP Director
Kim Hoggatt-Krumwiede, Ph.D.	Professor, Health Professions	CONVERGENCE, Office of Interprofessional Education
Joseph Keebler, Ph.D.	Assoc. Professor, Human Factors and Behavioral Neurobiology	Clinical Learning Environment
Elizabeth Lazzara, Ph.D.	Asst. Professor, Human Factors and Behavioral Neurobiology	Distinction and Scholarly activity projects
Brad Marple, M.D.	Professor, Otolaryngology / Head and Neck Surgery	Resident scholarly activity projects, Assoc. Dean Graduate Medical Education
Angela Mihalic, M.D.	Professor, Pediatrics	Transitions to Clerkship course director
Robert Rege, M.D.	Professor, Surgery	Development Committee chair, Assoc. Dean Undergraduate Medical Education
Eduardo Salas, Ph.D.	Professor, Psychological Sciences	Distinction and Scholarly activity projects
Dorothy Sendelbach, M.D.	Professor, Pediatrics	Transitions to Clinical Training course director, Asst. Dean Undergraduate Medical Education
James Wagner, M.D.	Professor, Internal Medicine	Faculty Development lead
David Weigle, Ph.D.	Asst. Professor, Family and Community Medicine	Resident scholarly activity projects, Asst. Dean Graduate Medical Education
James Drake	<i>ex officio</i>	Asst. Vice President, Office of Academic Planning and Assessment
Ramona Dorough	<i>ex officio</i>	