Facilitator Guide for Hospital AIM Team Leads

# What Is This Guide?

This guide is intended as a complement to the online training modules of the Safety Program for Perinatal Care II (SPPC-II) Teamwork Toolkit. It provides helpful information about scheduling and conducting in-person facilitation sessions for frontline providers and staff members who have completed the SPPC-II Teamwork Toolkit online training modules. The in-person facilitation sessions are intended to serve as an opportunity for frontline providers and staff members to have an interactive discussion, offer additional clarity about the teamwork concepts, discuss modes of application of the teamwork tools to the local work environment, and provide bilateral feedback. They should be made mandatory for all frontline providers and staff members who are asked to adopt the SPPC-II Teamwork Tools.

# Who Should Use This Guide?

This guide is written for those persons responsible for implementing the Alliance for Innovation on Maternal Health (AIM) maternal safety bundles at their local institutions. We refer to these individuals as “Hospital AIM Team Leads” throughout this guide. They are tasked with helping the frontline providers and staff in their home organizations adhere to the technical (i.e., clinical practice) and adaptive (i.e., teamwork and communication) best practices taught in the AIM Clinical Safety Bundles and SPPC‑II Teamwork Toolkit, respectively. Hospital AIM Team Leads will have attended a 1-day in-person teamwork training workshop that will provide them with the competencies needed to structure the rollout of the SPPC-II Teamwork Toolkit online modules to the frontline providers and staff at their local institutions; facilitate understanding of teamwork concepts among the frontline providers and staff in their home organizations via formal practice sessions; and support the staff’s adoption and regular use of the tools and strategies taught in the modules through on-the-job coaching.

# What Is a Facilitation Session and Why Hold Them?

Facilitation sessions are scheduled, in-person, semistructured, interdisciplinary conversations and practice opportunities with frontline providers and staff members who have completed the SPPC-II Teamwork Toolkit online training modules. The goals of these structured sessions are to:

1. Reinforce and practice the competencies, tools, and strategies presented in the online training modules,
2. Provide a forum for staff members to discuss ways that the tools and strategies can be applied or modified to be better used in their local units, and
3. Reinforce the alignment of the teamwork tools and competencies presented in the SPPC-II modules with the AIM Safety Bundles’ 4R framework.

# Preparing for In-Person Facilitation Sessions

We recommend Hospital AIM Team Leads follow the steps below to achieve the greatest benefits from the SPPC-II Teamwork Training modules and to observe the most significant improvement to frontline teamwork. Questions about these steps can be directed to the State-level AIM coordinator.

**Step 1:** If you have not done so already, complete the in-person SPPC-II 1-day workshop for Hospital AIM Team Leads. This workshop will instruct you on the teamwork concepts and tools that will support application of principles from the AIM Clinical Safety Bundle (Obstetric Hemorrhage or Severe Hypertension) your team is implementing.

**Step 2:** Identify which AIM clinical bundle your organization will be adopting (e.g., Obstetric Hemorrhage, Severe Hypertension, or both).

**Tip!** Whether your facility has completed one AIM Clinical Safety Bundle previously and is starting another bundle now or whether you are adopting multiple bundles simultaneously, we propose your frontline providers and staff complete the SPPC-II Teamwork Toolkit training modules associated with each bundle. While some information will be redundant, some is bundle-specific, and the case study scenarios will demonstrate the use of each teamwork tool or strategy within an example relevant to the associated AIM clinical bundle.

**Step 2:** Gather names with roles of all frontline providers and staff members at your home organization who need to participate in the online SPPC-II training modules tailored to frontline providers and staff members.

**Tip!** Track your staff using a spreadsheet that includes staff members’ first and last names, email addresses, dates of correspondence, session attendance, and self- reported module completion.

**Step 3:** Decide on the order in which you will ask your staff to complete the online modules.

**Tip!** Use a wave-based rollout schedule, focusing on (i.e., “spotlighting”) two or three modules during each wave. Fit the wave launches to your preferred completion deadline. For example, if your goal is to complete rollout within 3 months, you may want to spotlight two new modules every 3 weeks. New hires may need to play catchup and complete all modules over an abbreviated timeline until they have completed all.

**Tip!** Have all staff members focus on the same two or three modules simultaneously. This will help ensure the strongest adoption of each tool as staff members can model and reinforce the tool’s use to each other.

**Tip!** If easiest, you can follow our suggested rollout order:

1. Introduction (always first)
2. Check-Back and Callouts
3. SBAR
4. Handoffs
5. Two-Challenge & Power Words
6. Briefs & Huddles
7. Debriefs
8. DESCR Script

**Step 4:** Inform frontline providers and staff members when and how to complete the SPPC-II Teamwork Toolkit modules using a communication mechanism (e.g., email) familiar to your staff. Set clear deadlines for completing the material (based on Step 3), communicate expectations for how often staff members are required to participate in the training, and inform the staff regarding when and where the next facilitation session will be held. Information you may want to communicate might include:

1. The purpose of using the SPPC-II Teamwork Toolkit. Clarify that individuals are participating in a synchronous and asynchronous training, meaning that they are learning on their own through the recorded Toolkit modules and then discussing/dissecting as a training team during the facilitation sessions.

Asynchronous material will allow participants to take their own time to go through the modules.

Synchronous group learning will occur during facilitation sessions for each section. They will solidify knowledge, provide an open forum for questions about content, offer opportunities to apply the section material to individuals’ real-life situations, and, most importantly, hold everyone accountable for completing each module. Routinely meeting (over the 18‑month period) will not only create a learning network but will also help open lines of communication among frontline providers and staff members.

1. That all modules should be reviewed before attending an in-person facilitation session. Establish a system within your facility to track who has completed each module.
2. That, as a Hospital AIM Team Lead, you are available to answer questions related to the material being discussed during each session.
3. That the more people who participate and attend the facilitation sessions, the better the team will perform (and the more lives your team will save!).

**Tip!** Provide a sufficiently broad time window to allow frontline staff members the opportunity to complete the online modules at a convenient time.

**Tip!** If possible, offer to provide pay for training time, provide opportunities for staff members to complete the modules while on the clock, and/or piggyback on other scheduled training sessions (e.g., ACLS or PALS).

**Step 5:** Schedule regular mandatory facilitation sessions (conducted by you, the Hospital AIM Team Lead) to complement the online modules. We recognize you are working with busy professionals who have other job responsibilities and priorities and it is not always easy to get their time. Therefore, these sessions can follow the schedule that is most useful and actionable within your organization, although a short-term, high-frequency schedule is preferred. However, frontline providers and staff members are expected to complete the spotlighted modules prior to participating in the session.

**Tip!** You will need to conduct multiple sessions during each wave of the online module rollout to capture all your staff members. Focus each session on the two or three tools spotlighted by your organization for that wave (see Step 3).

**Tip!** Keep the sessions short and concise. Ensure they are interactive; frontline providers and staff members are expected to participate in discussions and practice exercises.

**Tip!** Limit the session size so that no more than 15 frontline providers and staff members are in attendance for each Hospital AIM Team Lead present.

**Tip!** Schedule facilitation sessions not to exceed 40 minutes.

**Tip!** If feasible within your setting, staff above the patient needs to accommodate for the time spent by the frontline providers and staff members in the facilitation meeting.

**Tip!** Require staff members to attend a minimum of one session per wave as a reinforcer of desired teamwork behaviors. Consider hosting a minimum of one session per year thereafter to refresh frontline providers and staff members.

**Step 6:** Host your facilitation sessions.

1. Use this guide to help structure your session.
2. Always review the online modules or your slides from the SPPC-II 1-day workshop yourself before you assign them to the frontline providers and staff.
3. Check in with participants over the course of the rollout to ensure each member is able to complete the learning in time—hold them accountable.
4. Encourage participants to use their newly acquired knowledge and skills on the job.
5. Celebrate victories and learn from challenges!

# Planning Facilitation Sessions

Use the table below to help you plan your facilitation sessions.

| DECISION POINT | PLAN |
| --- | --- |
| How many sessions need to be held?  Tip: Consider when staff members are most likely to be available. Sometimes it’s helpful to host multiple sessions at different times to enable staff members from different shifts to attend. | (enter your plan here) |
| When and where will each session take place?  Tip: Hosting meetings close to frontline providers and the staff’s typical work setting increases the likelihood of their attendance. | (enter your plan here) |
| Who will facilitate each session?  Tip: Aim for a ratio of 1 Hospital AIM Team Lead per 15 staff members. | (enter your plan here) |
| How will you promote attendance? What are communication channels to inform all frontline providers and staff members? | (enter your plan here) |
| Who is responsible for attendance tracking, note taking, and recording ideas and feedback from each session? | (enter your plan here) |
| Who is responsible for collating notes and ideas across all sessions? | (enter your plan here) |
| How will the team ensure there is followup on any action items? | (enter your plan here) |

# Conducting Facilitation Sessions

# Ground Rules

1. **Staff members should have completed all the assigned modules** prior to attending a facilitation session. Decide on a way to track this based on your facility’s technical or other capabilities (see Step 2 above).
2. Sessions should be predicated on **interactivity** between the facilitator and staff members.
3. Communication should be **open, transparent, and interactive**.
4. Sessions should provide all staff members an opportunity to **practice, challenge, and discuss the value** of the tools and strategies trained.
5. Staff members should feel **ownership** and **responsibility** for supporting patient safety by applying the strategies and tools taught in the SPPC-II Teamwork Toolkit to their clinical practice.

# Managing a Facilitation Session

There are a number of ways you can host a facilitation session, and we encourage you to make it your own. The process outlined below is designed to help you be able to meet the unique needs of your staff.

The process is simple:

1. **Summarize the tools and strategies** the staff learned in the modules **(5 minutes)**.
2. **Role play and practice the strategies (10–15 minutes).** Have staff members practice using one or more of the tools and strategies with each other. You can break them into groups or dyads for this exercise and then reconvene and let them discuss as a larger group their experiences in the practice session. What was working and what wasn’t working? Do they have any concerns about using these tools in their everyday practice?

**Tip!** Ask staff members to act out segments from the prewritten SPPC-II case scenarios related to the clinical bundle (hemorrhage or hypertension) they are working to implement. Alternatively, ask them to write their own short script. Not all groups need to work on the same tool or strategy. One way to maximize the opportunity may be to have different small groups separately plan a script and then act out the use of the tool for the larger class.

1. **Ask staff members to share their opinions and experiences** using the tools and strategies **(5–10 minutes)**.
   * Have they had an opportunity to use any of the tools or strategies? Which ones?
   * Have them share recent examples from their own experience when using one of the tools or strategies they have learned could have been (or was) useful.
   * Did they find the tools and strategies useful? Why or why not? Encourage the staff to discuss openly what might be some pitfalls of the tools and strategies and offer suggestions for how to overcome these pitfalls.
   * Which strategies have they not personally used? Why not? What would make it easier for them to adopt these strategies in their regular practice?
   * Was there a time they tried to use a tool and it was not helpful? How did they handle it?
   * Do they recognize when colleagues are using the tools? How do they show their colleagues support for adopting these teamwork strategies?
   * How do these tools map onto the 4 Rs of the AIM clinical bundles?
2. **Set individual and collective goals and improvement plans** for using the teamwork tools and strategies **(5–10 minutes)**.
   * Which tools are priority for the clinical bundle stage (4 Rs) they’re currently working on?
   * What is their goal for the next week? Month? Year?
   * How will they help each other integrate these tools into everyday practice?

# Additional Tips for Successful Facilitation Sessions

1. Schedule more staff members than needed on days facilitation sessions occur so staff members can rotate to attend the session.
2. Provide pay for training time.
3. Combine facilitation sessions with scheduled simulation training required on the units (e.g., ACLS or PALS).
4. Consider modeling your format after ACLS or PALS and use a half-day session to provide time for frontline providers and staff members to complete the online modules (~2 hours total) and participate in a facilitation session (~40 minutes).

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