

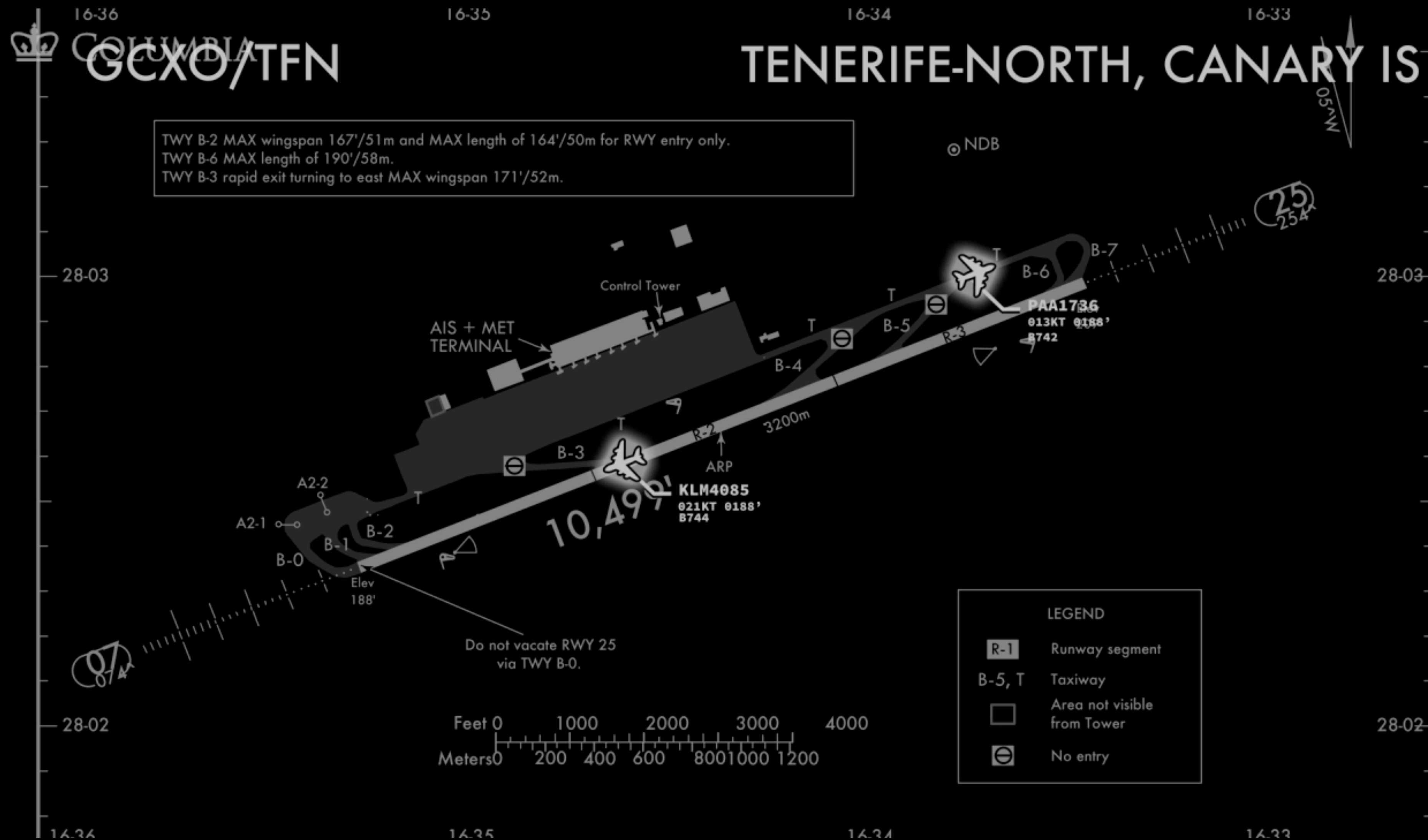
vivek moitra
columbia u

<teaming and psychological safety>

through the lens of crisis

through the lens of crisis

run time: 20 minutes



crew didn't challenge captain

**captain didn't accept input
crew wasn't assertive**

WE

WE

CRISIS

CRISIS

SHOUTING

SHOUTING

ALARMS

WEWUWUWU

UNFAMILIAR

UNFAMILIAR

STAKES

STAKES

TIME

LEAVE

DEATH

DEATH

STRESS

STRESS

RACE

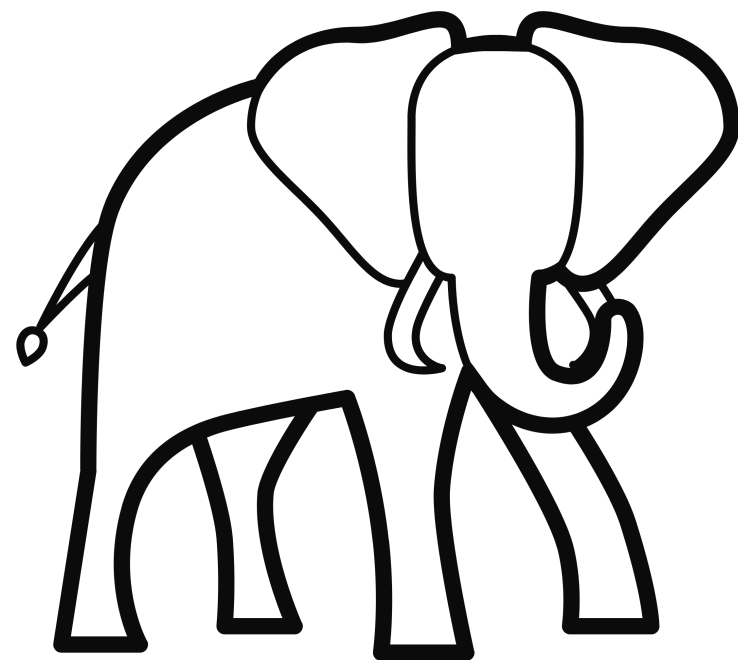
RACE

FOG

FOG

ELEPHANTS

ELEPHANTS



CHAOS WE CHAOS

CHAOS

WE

CHAOS

CRISIS

CRISIS

REALITY

REVEREND

SENSE

SENSE

PANDEMIC

PANDEMIC

PERFORMANCE

PERFORMANCE

NONTECHNICAL

NONTECHNICAL

TEAMWORK

PREPARATION

COMMUNICATION

DECISION

PREPARATION

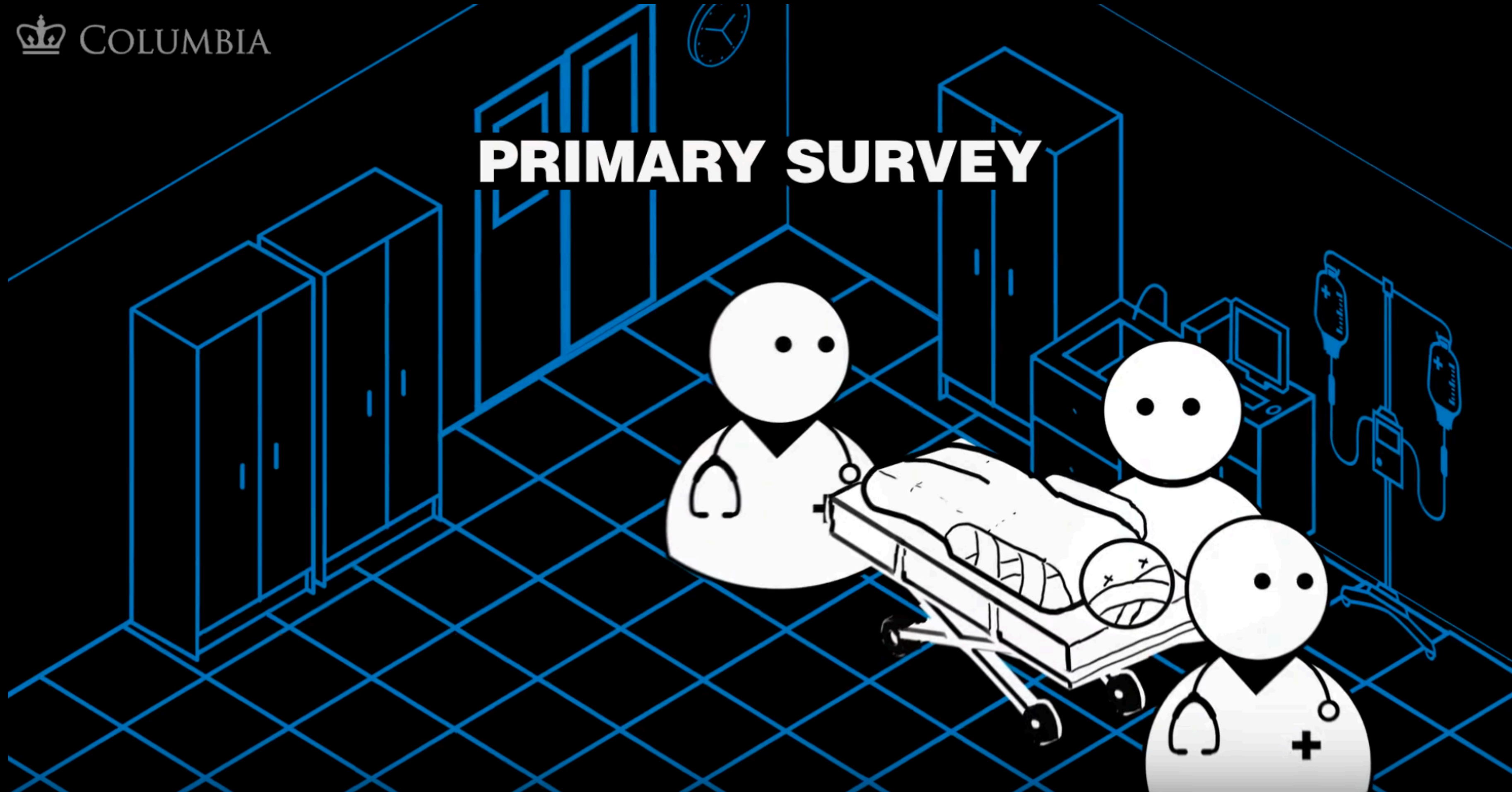
What individual factors affect **your performance?**





 COLUMBIA

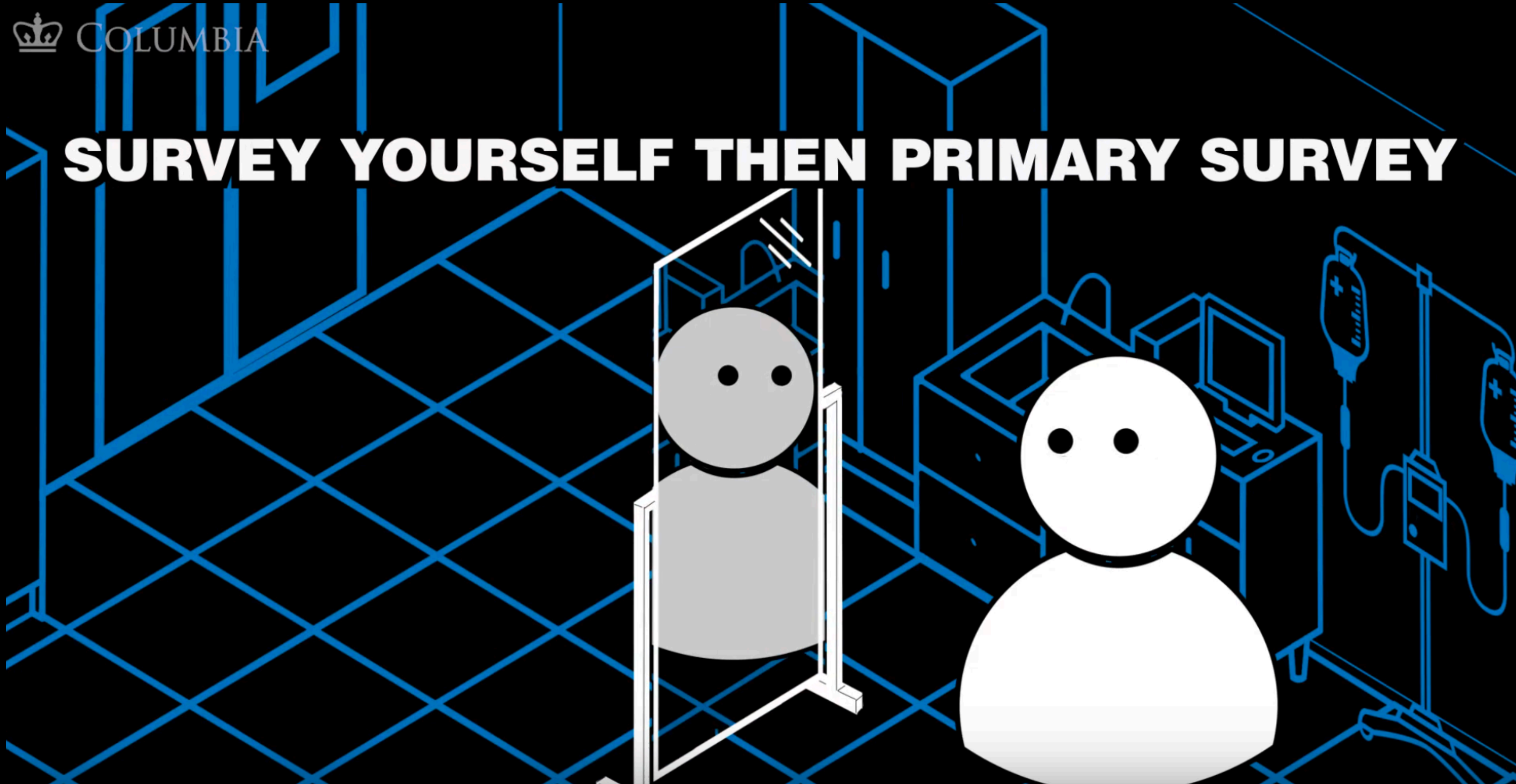
PRIMARY SURVEY





 COLUMBIA

SURVEY YOURSELF THEN PRIMARY SURVEY





 COLUMBIA

ZERO POINT SURVEY

S
T
E
P
U
P

Reid C, Brindles P, Hicks C, et al. Zero point survey: a multidisciplinary idea to STEP UP resuscitation effectiveness. Clin Exp Emerg Med 2018;5(3):139-143

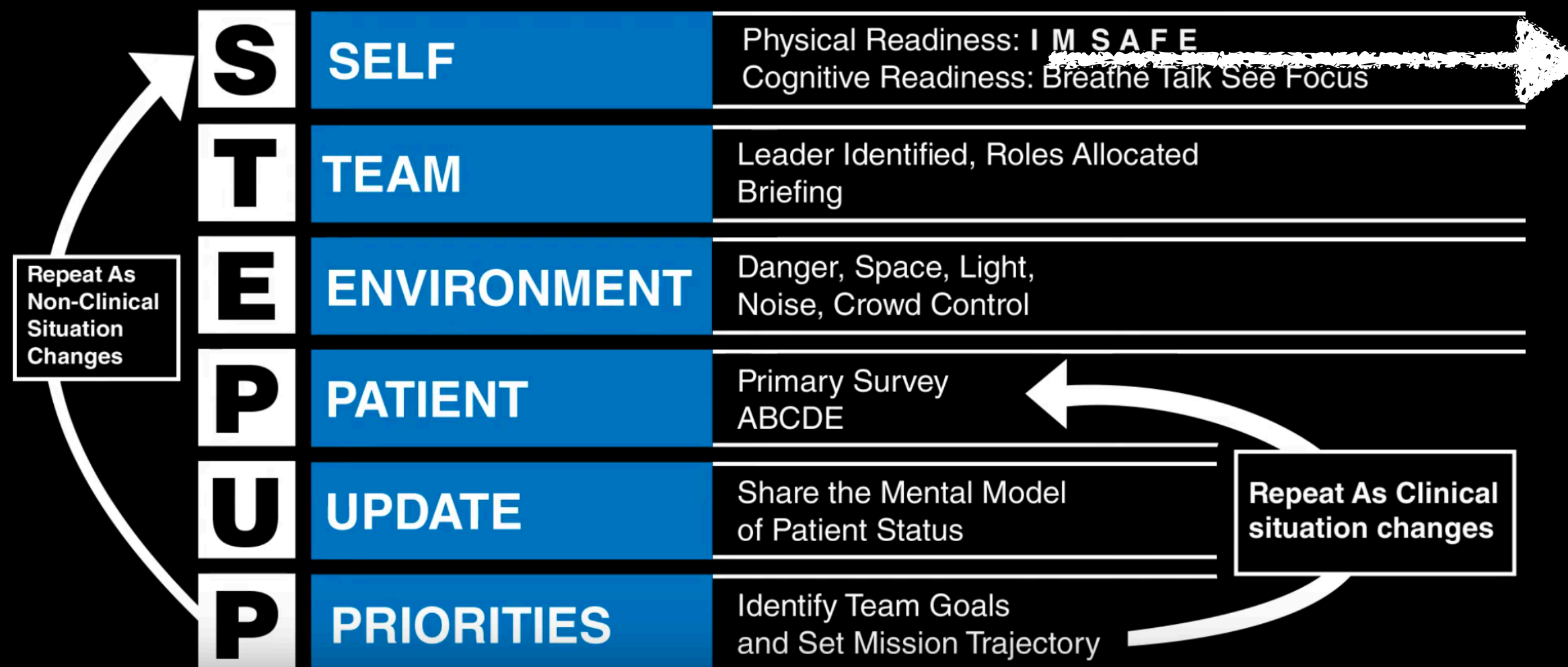
Samuels M, Wieteska S; Advanced Life Support Group. Advanced paediatric life support: a practical approach to emergencies. 6th ed. Chichester: Wiley-Blackwell; 2016.



AM I PHYSICALLY READY?

COLUMBIA

ZERO POINT SURVEY



ILLNESS
MEDICATIONS/OTHER DRUGS
STRESS
ALCOHOL
FATIGUE
EATING/ELIMINATION



READY?

Hungry

Angry

Late

Tired

Stressed

Review article: Crisis resource management in emergency medicine

Belinda Carne,^{1,2,3} Marcus Kennedy^{3,4} and Tim Gray^{3,5,6}

¹Emergency Department, Geelong Hospital, ²School of Medicine, Deakin University, Geelong, ³Adult Retrieval Victoria, Ambulance Victoria, ⁴Department of Community Emergency Health and Paramedic Practice and ⁵Central Clinical School, Monash University, and ⁶Australian Centre for Health Innovation, Alfred Hospital, Melbourne, Victoria, Australia

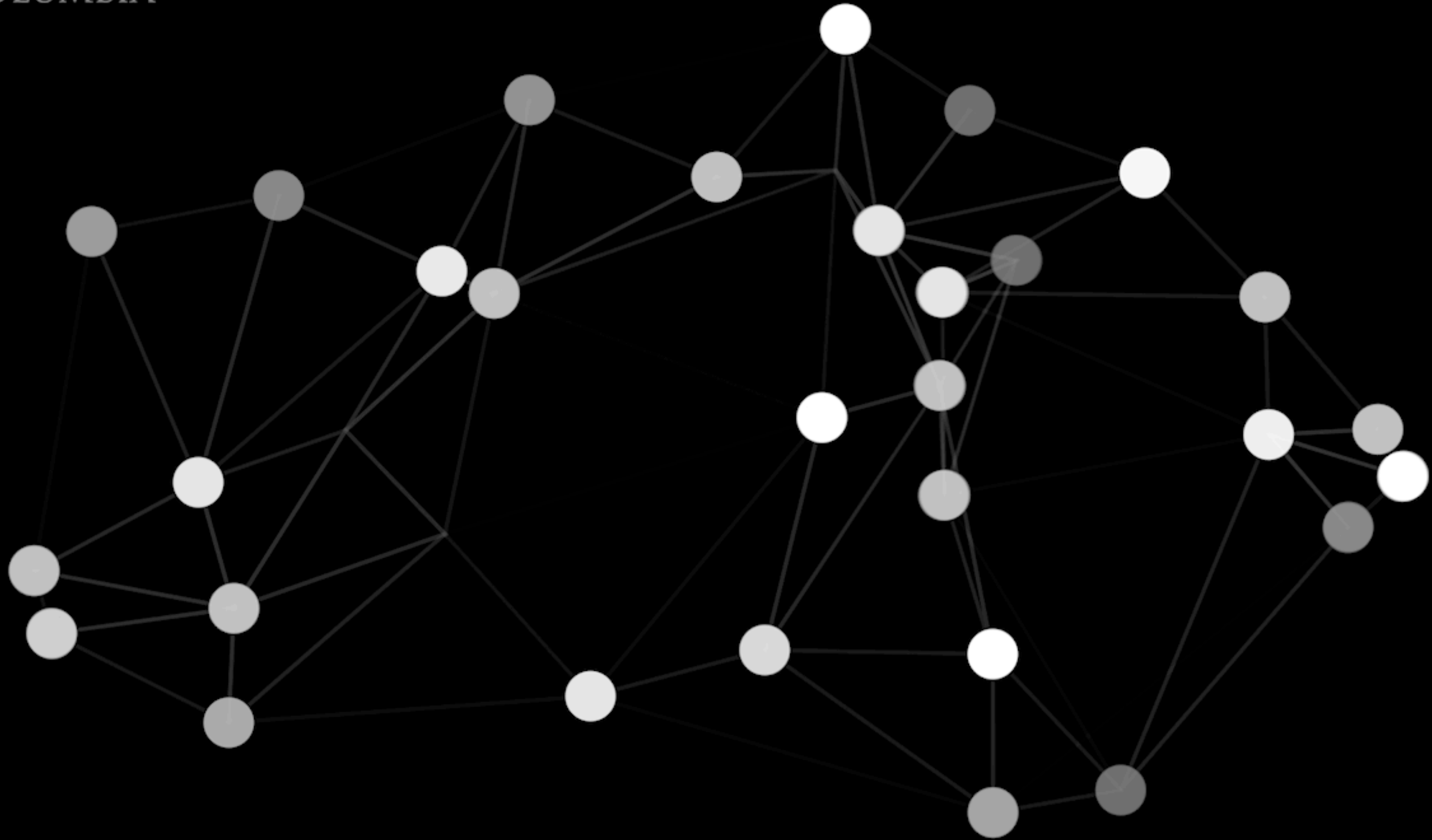


**HALTS
IM SAFE**

PREPARATION

KNOW YOURSELF





PREPARATION

Who would **you want on your team?**





TEAM

Where's the "I"?



 COLUMBIA



How do you create the ideal team?



 COLUMBIA





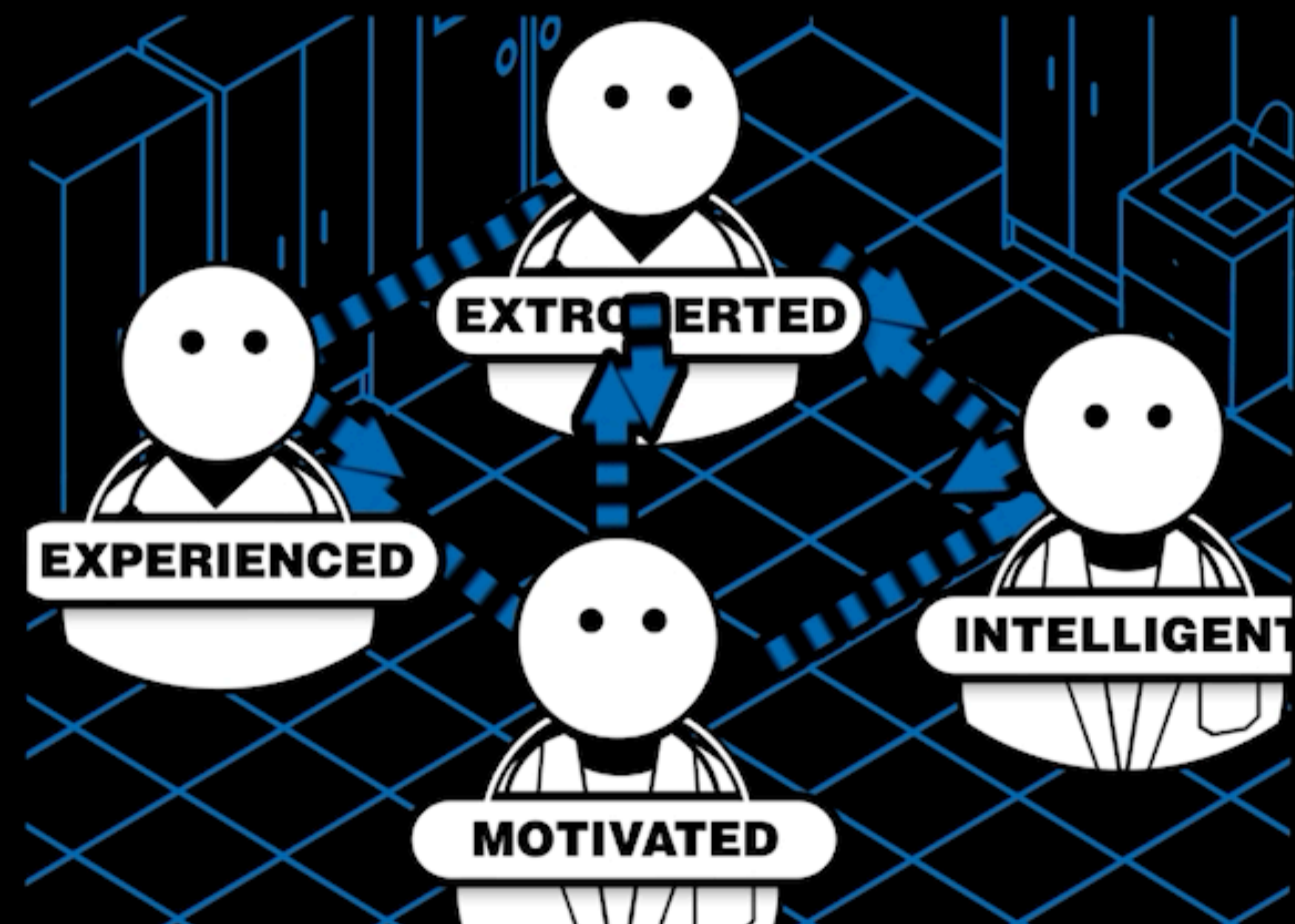
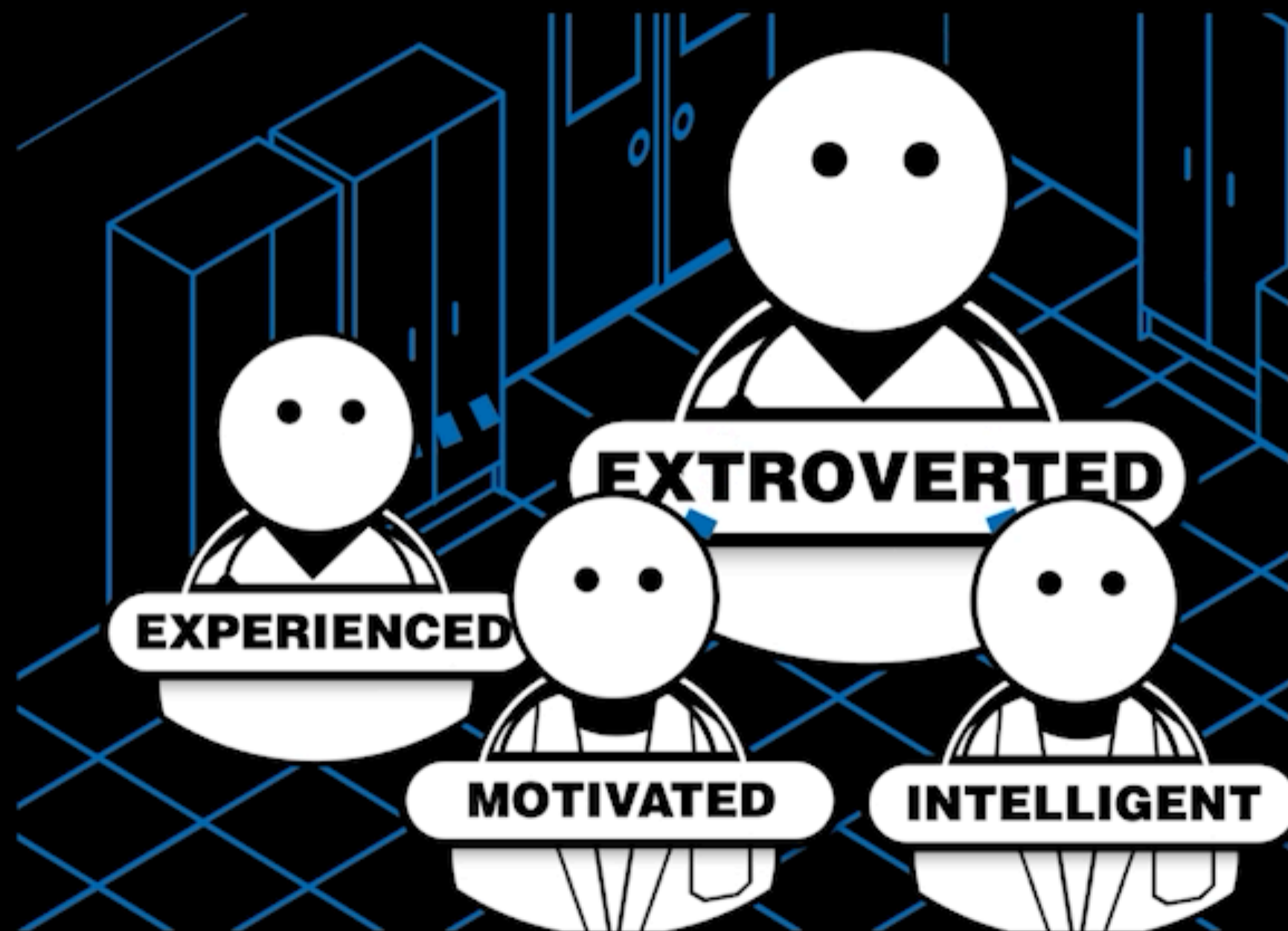
Google



TALENT < TREATMENT

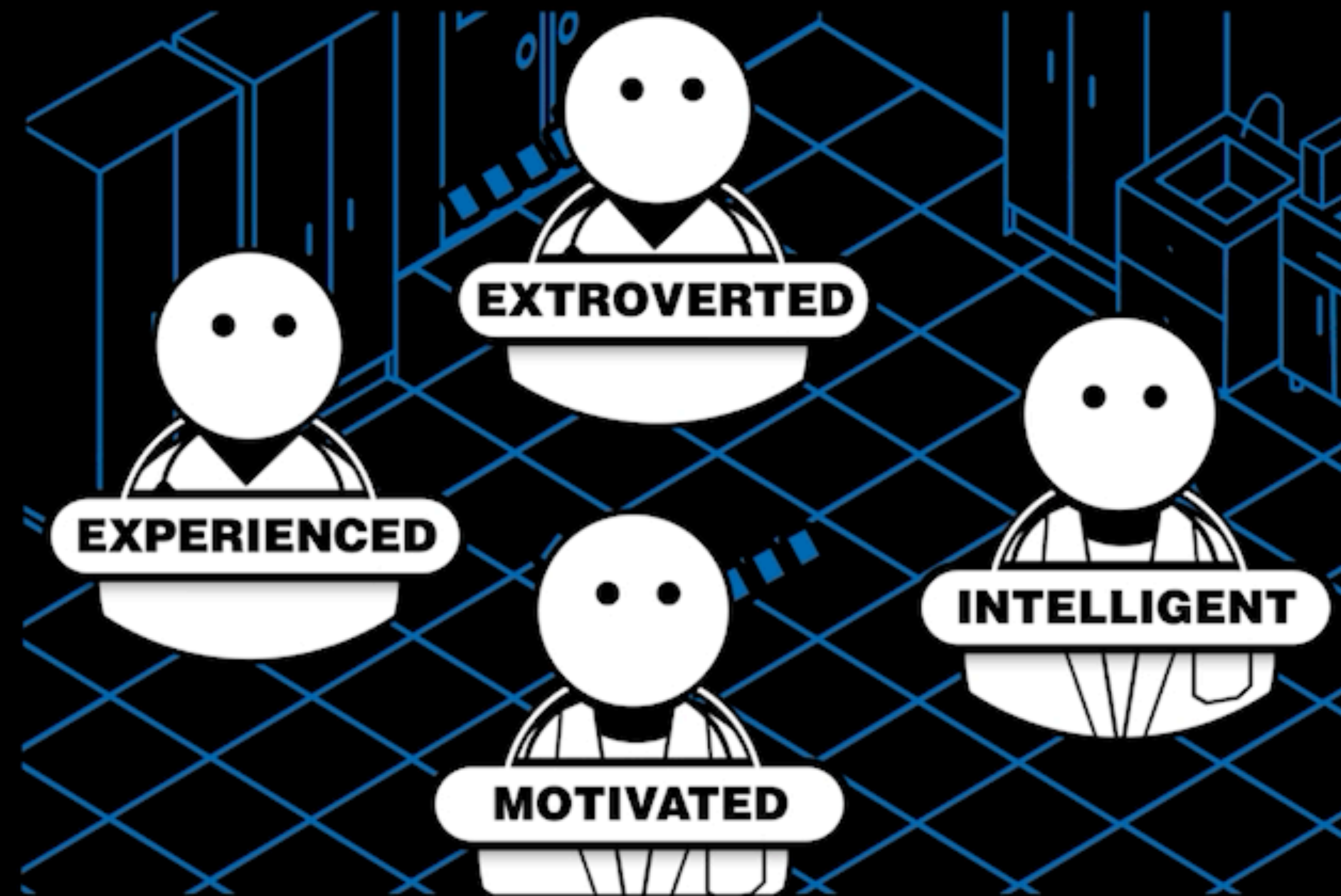
 COLUMBIA

What Makes a Good Team?





What Makes a Good Team?

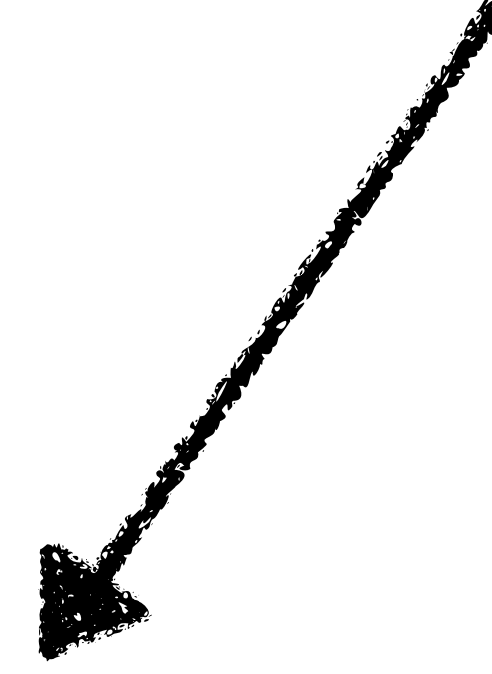
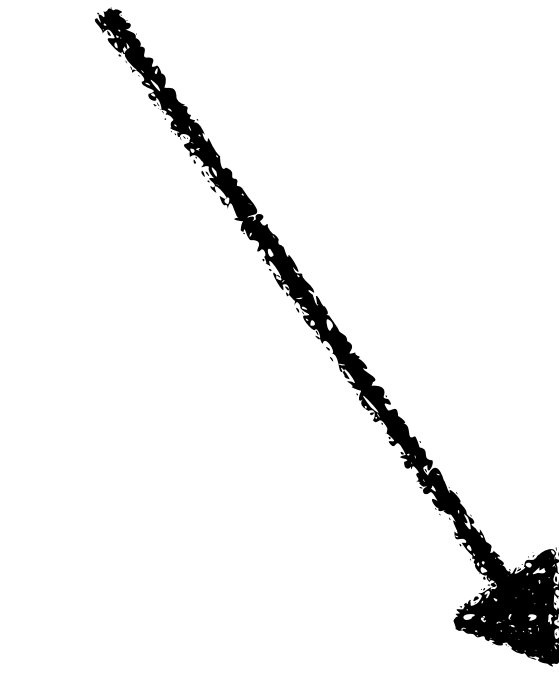




**equal
conversation**

+

**social
sensitivity**



PSYCHOLOGICAL SAFETY

“A team climate characterized by interpersonal trust and mutual respect in which people are comfortable being themselves.”

Amy Edmondson



High social sensitivity

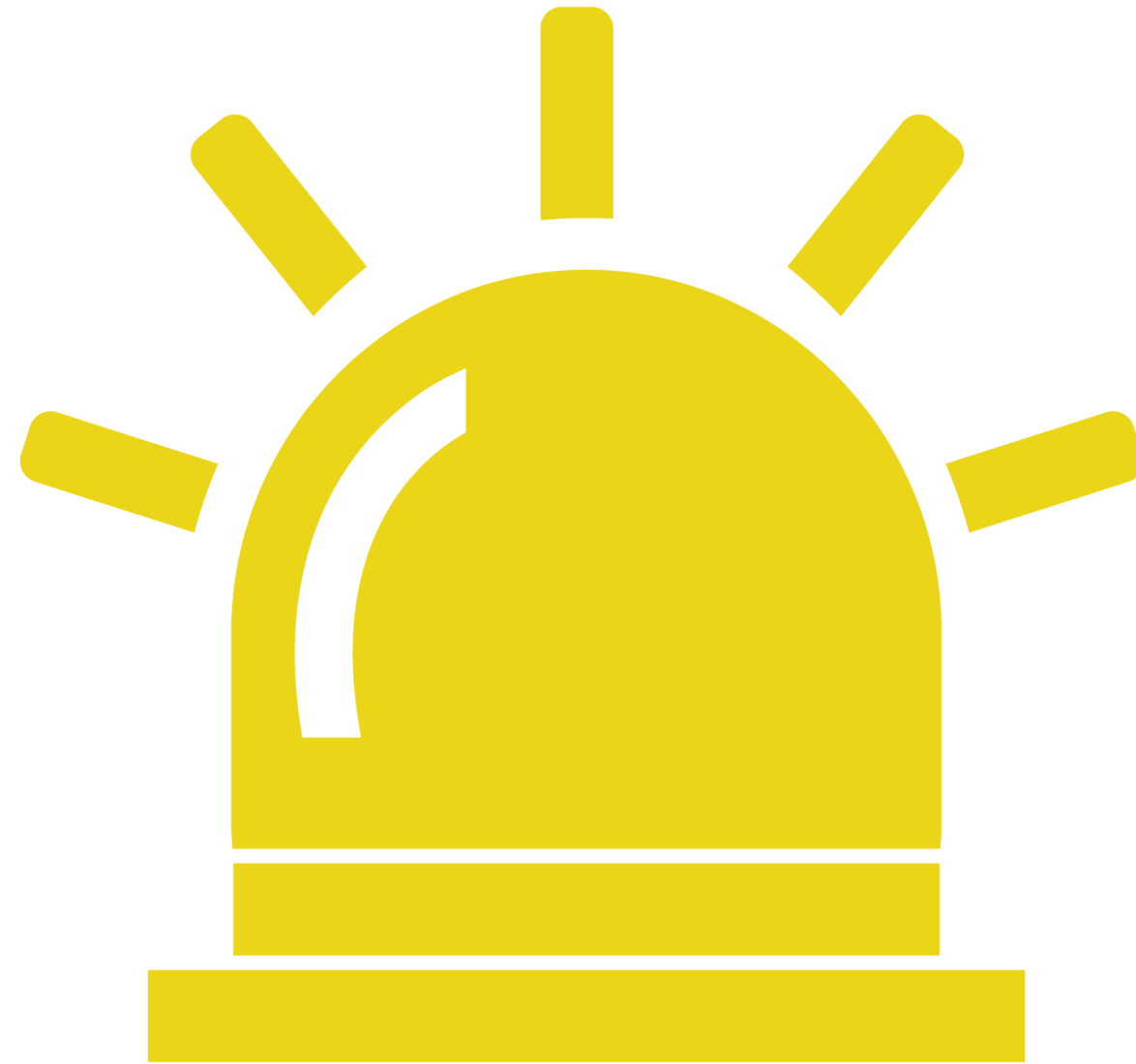
**Be curious with
direct language**

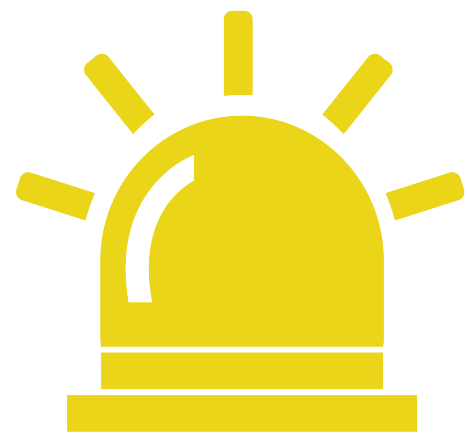


**Skills
Weaknesses
Strengths**

COMMUNICATION

When do **YOU** call for help early to make your team stronger ?





FEAR

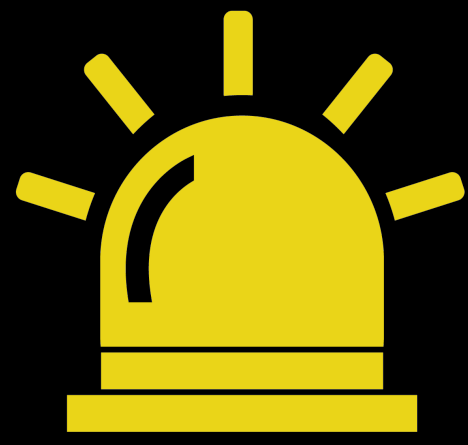
JR: CRITICISM

SR: INCAPABILITY

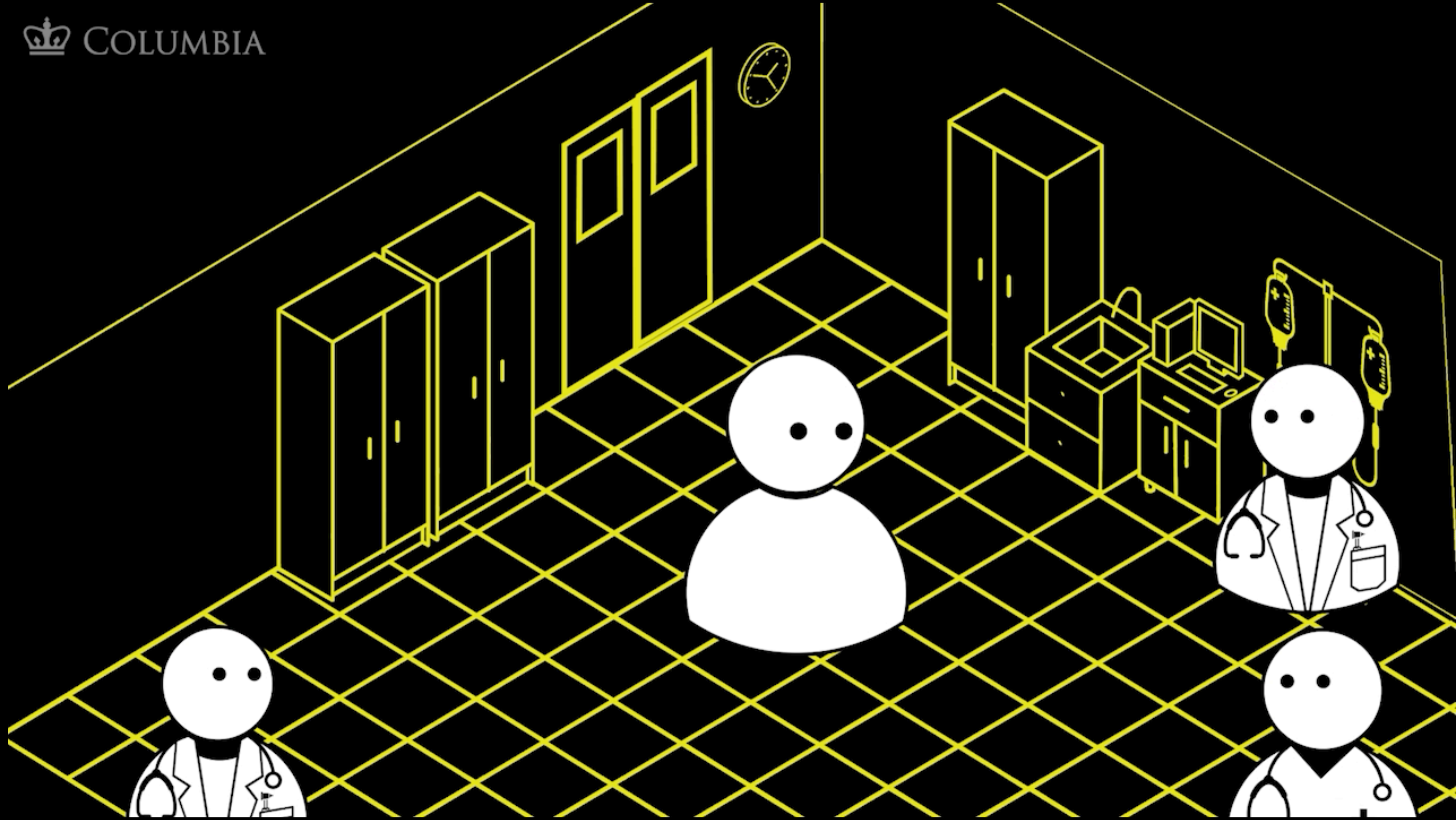
should we have triggers to call for help?

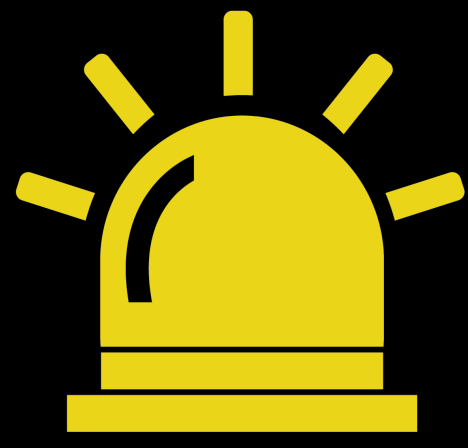
take home message: don't be a hero



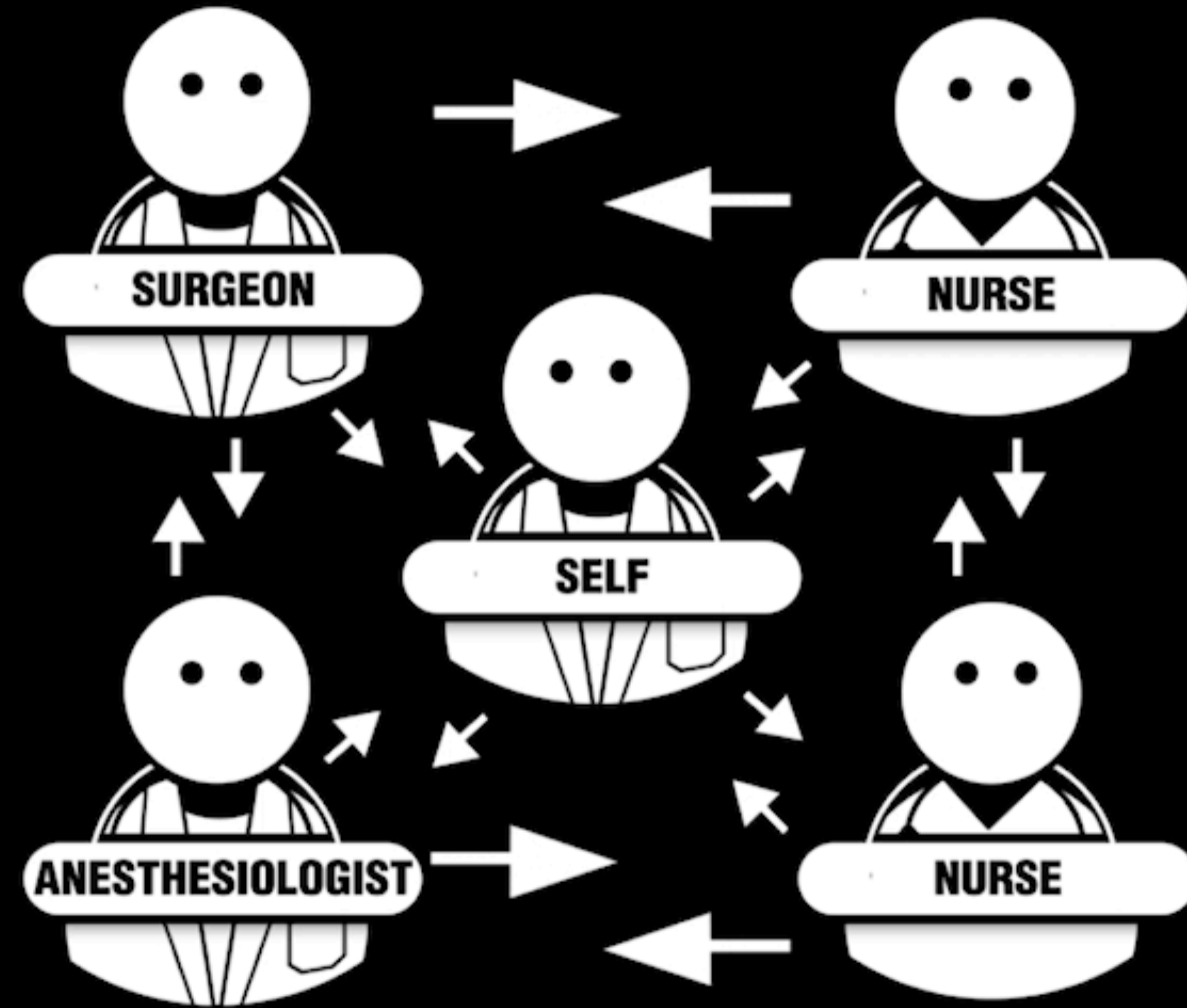


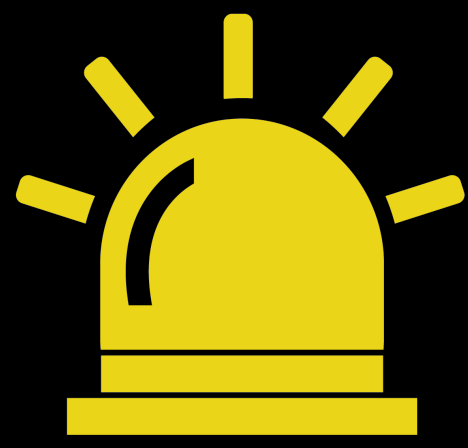
COLUMBIA



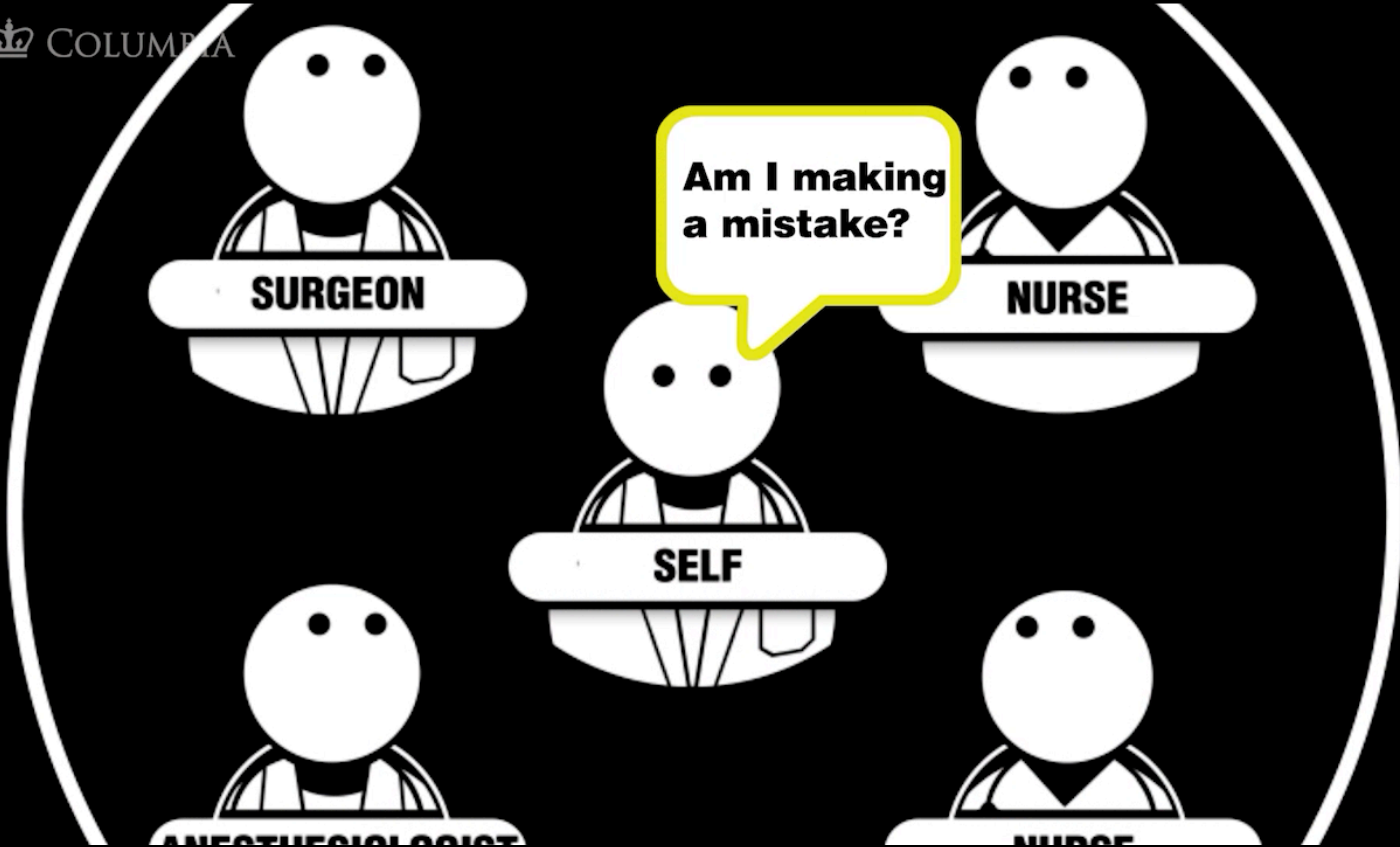


COLUMBIA





 COLUMBIA



**Am I making
a mistake?**

SURGEON

NURSE

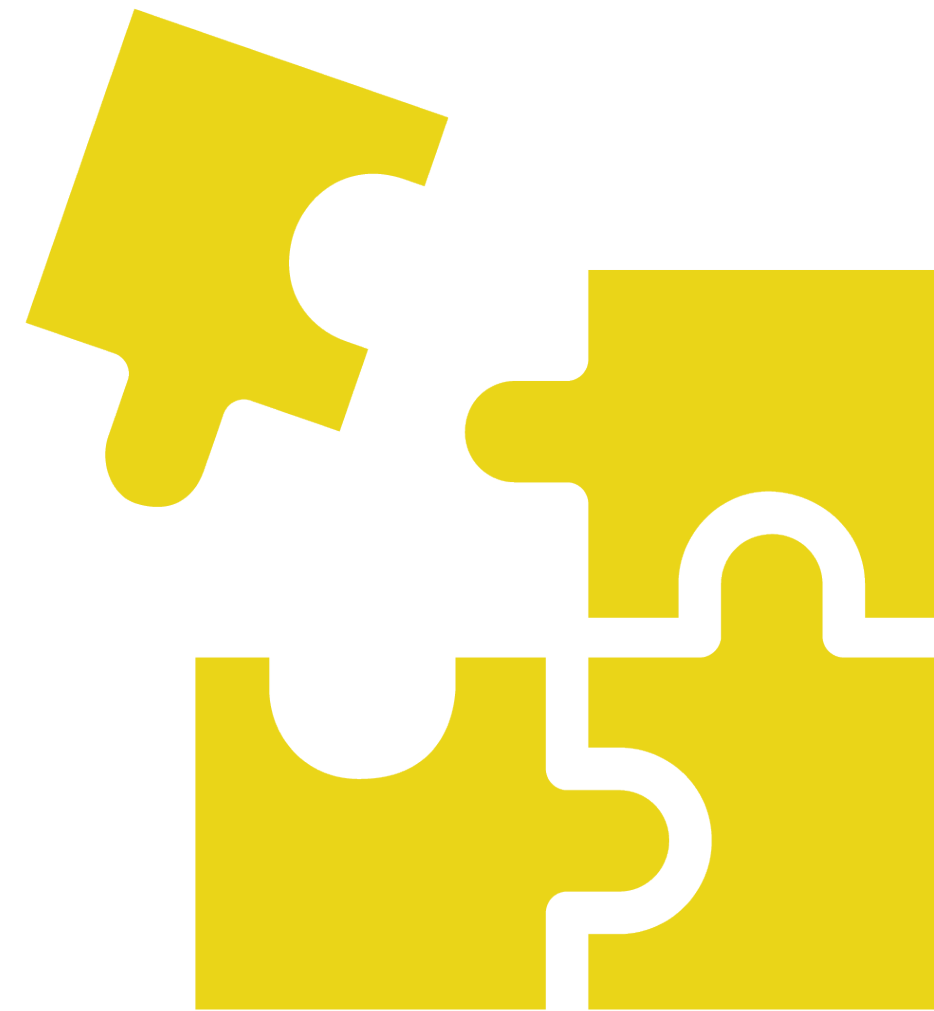
SELF

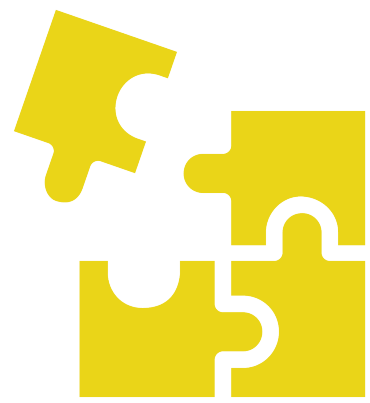
ANESTHESIOLOGIST

NURSE

COMMUNICATION

How do **YOU** get everyone on the same page?





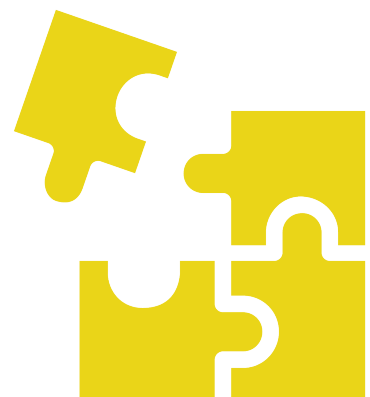
MENTAL MODEL

Understanding the situation in front of us, the tasks that need to be done, and the resources available

Brindley PG, Reynolds SF. Improving verbal communication in critical care medicine. *Journal of Critical Care* (2011) 26, 155–159*

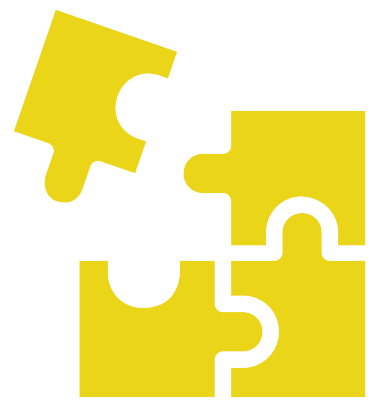
Lauria MJ, Ghobrial MK, Hicks CM. Force of habit. Developing situation awareness in critical care transport. *Air Medical Journal* 38: 45-50, 2019





OUR BEST INTENTIONS



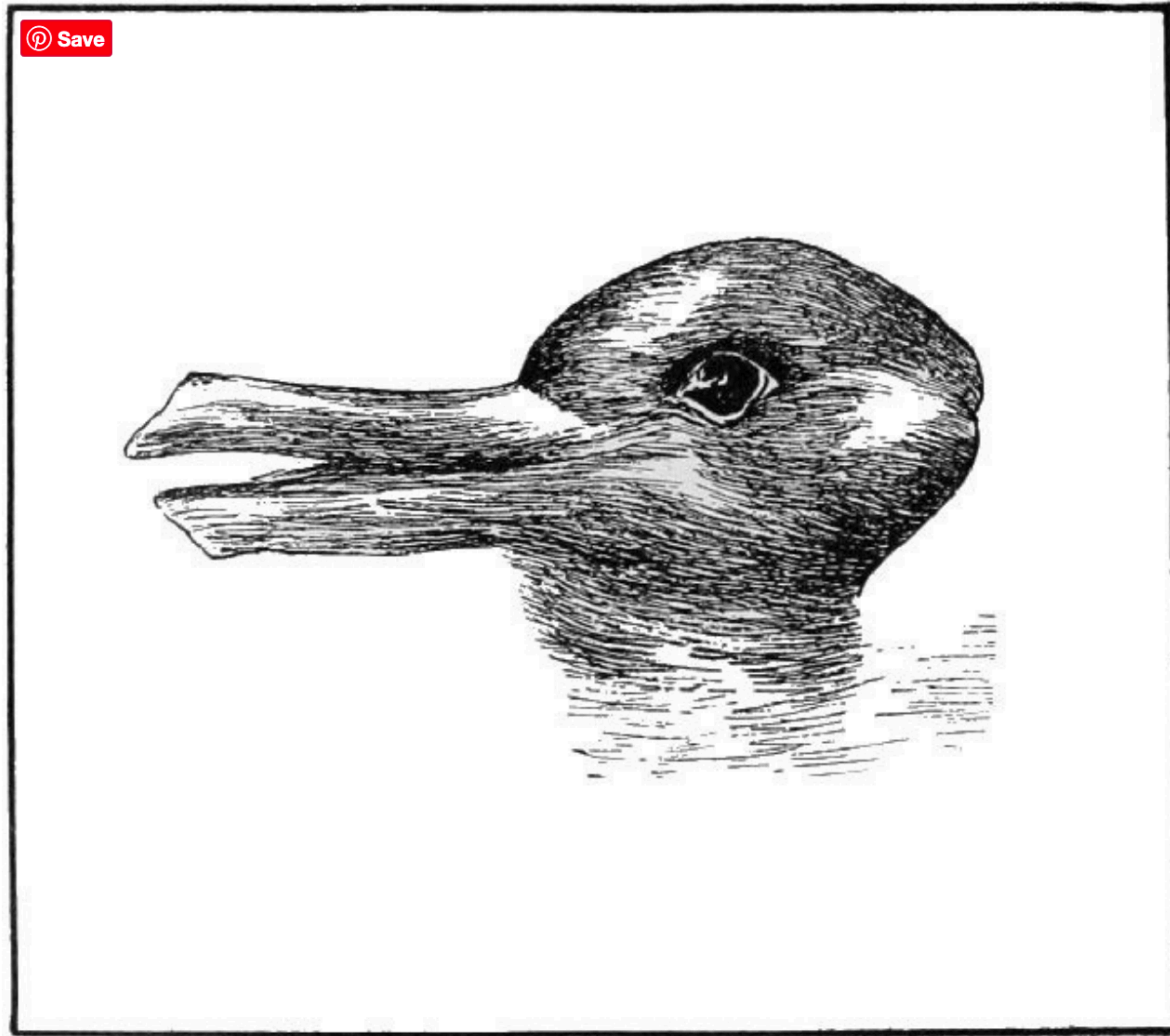
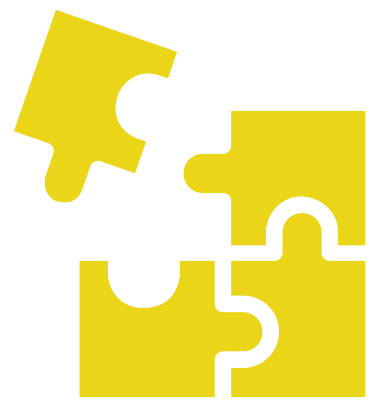


Puck

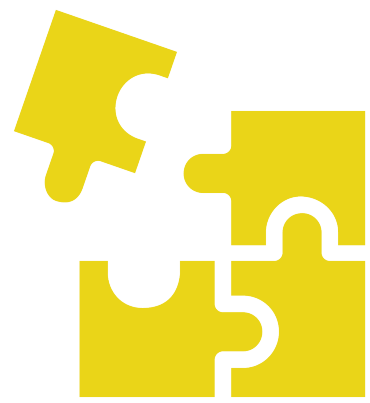


Drawn by W. E. Hill

MY WIFE AND MY MOTHER-IN-LAW
They are both in this picture — Find them



This 'reversible image' first appeared in a German humor magazine. (Photo: Wikimedia Commons)

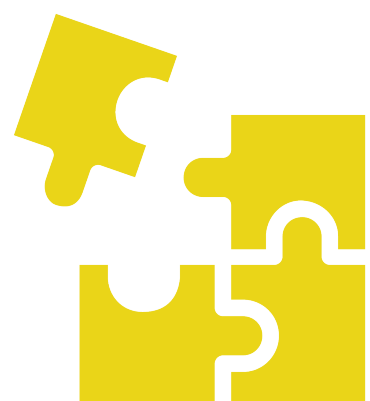


Sharing the mental model
AKA
Are we on the same page?

TEAM

Brindley PG, Reynolds SF. Improving verbal communication in critical care medicine. *Journal of Critical Care* (2011) 26, 155–159

Brindles PG. Improving teamwork in anesthesia and critical care: many lessons still to learn. *BJA* 112: 399-401, 2014

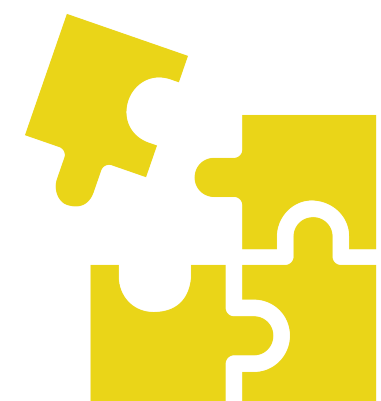


MENTAL MODEL

Understanding the situation in front of us, the tasks that need to be done, and the resources available

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Lauria MJ, Ghobrial MK, Hicks CM. Force of habit. Developing situation awareness in critical care transport. *Air Medical Journal* 38: 45-50, 2019



MENTAL MODEL

RESUSCITATE **EVERYONE'S** VOICE

ASK: WHAT'S GOING ON?
ANY THOUGHTS?
WHAT ELSE?

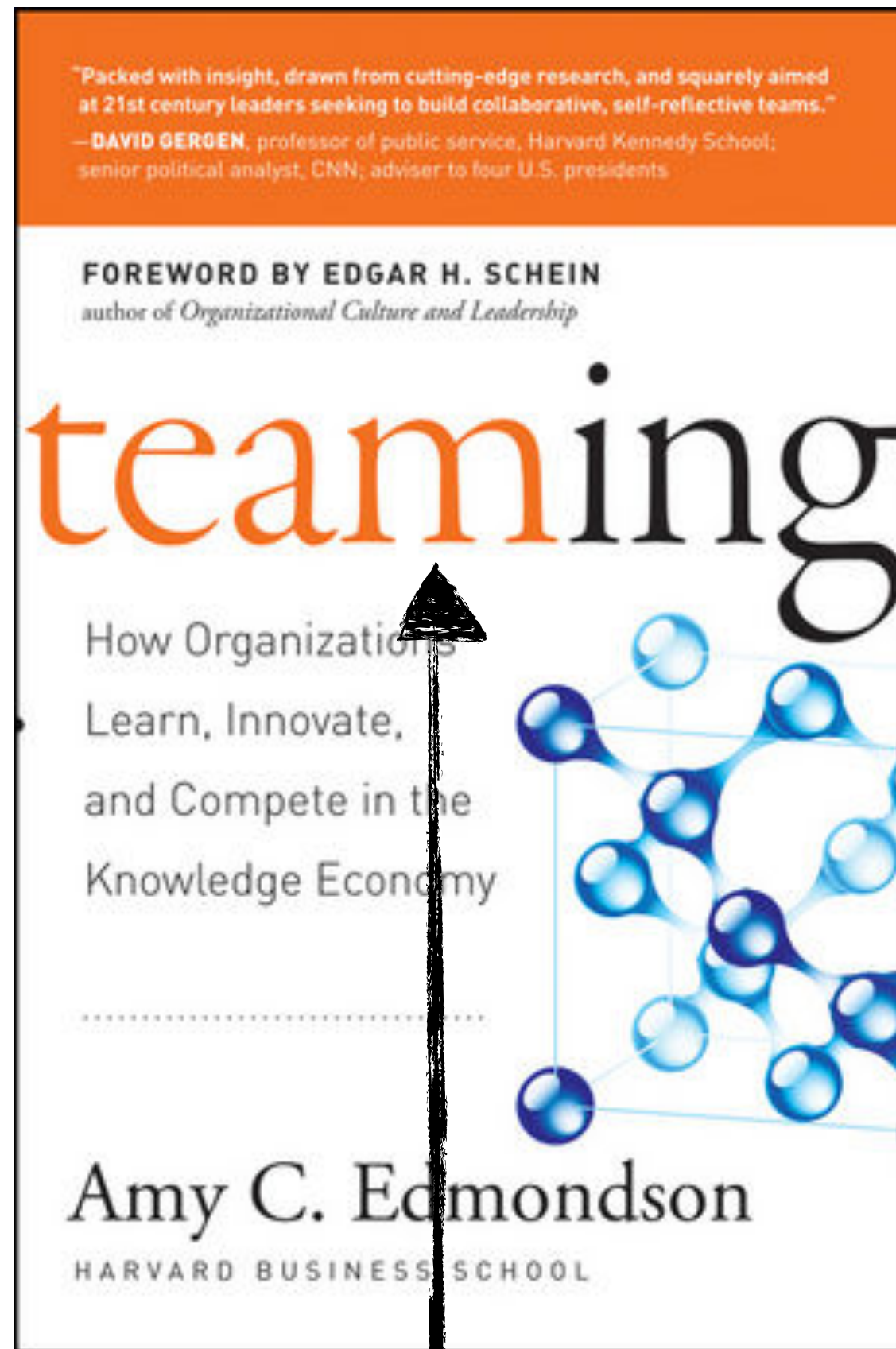
Brindley PG, Reynolds SF. Improving verbal communication in critical care medicine. *Journal of Critical Care* (2011) 26, 155–159*

Lauria MJ, Ghobrial MK, Hicks CM. Force of habit. Developing situation awareness in critical care transport. *Air Medical Journal* 38: 45-50, 2019

DECISION

How do **YOU** organize a team of strangers?





VERB

“Teaming is **teamwork on the fly. It involves coordination and collaboration without the benefit of stable team structures because many operations like hospitals, ...requires a level of staffing flexibility that makes stable team composition rare.”**



Organize to Team = Organize to Learn

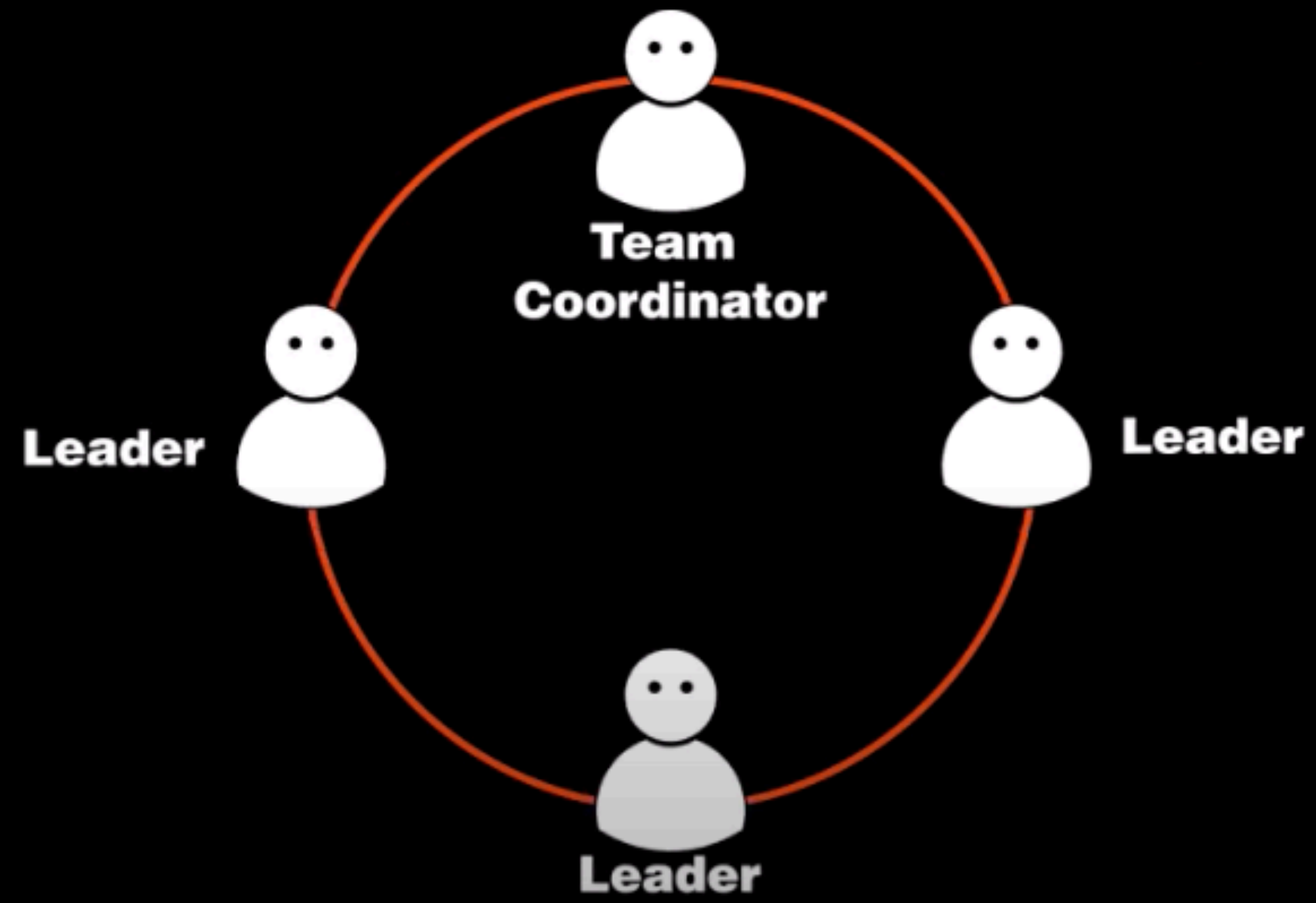
- 1. Ask questions**
- 2. Share information**
- 3. Seek help**
- 4. Experiment with unproven actions**
- 5. Talk about mistakes**
- 6. Seek feedback**



Challenge CW

~~**Leaders and Followers**~~

Leaders and Leaders





Leadership Allocation



Leader RN



Leader MD



Airway Leader



Leader MD



Leader RN



crisis



**I am leading
this code?**

**I am watching
the vital signs?**

self

**Will you lead
chest
compressions?**



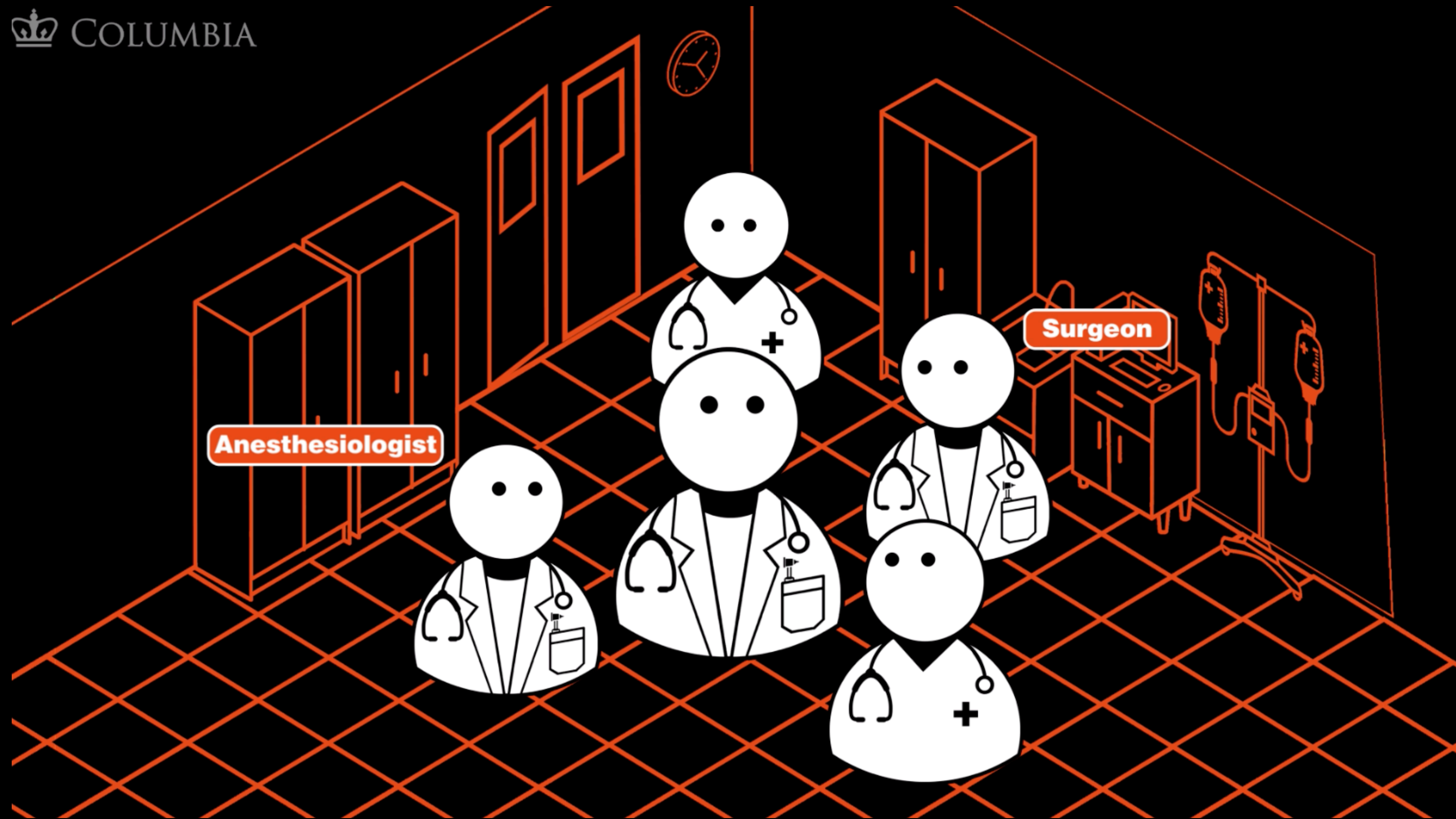
Improving verbal communication in critical care medicine[☆]

Peter G. Brindley MD, FRCPC*, Stuart F. Reynolds MD, FCCP

Division of Critical Care Medicine, University of Alberta, Edmonton, Alberta, Canada



 COLUMBIA





 COLUMBIA

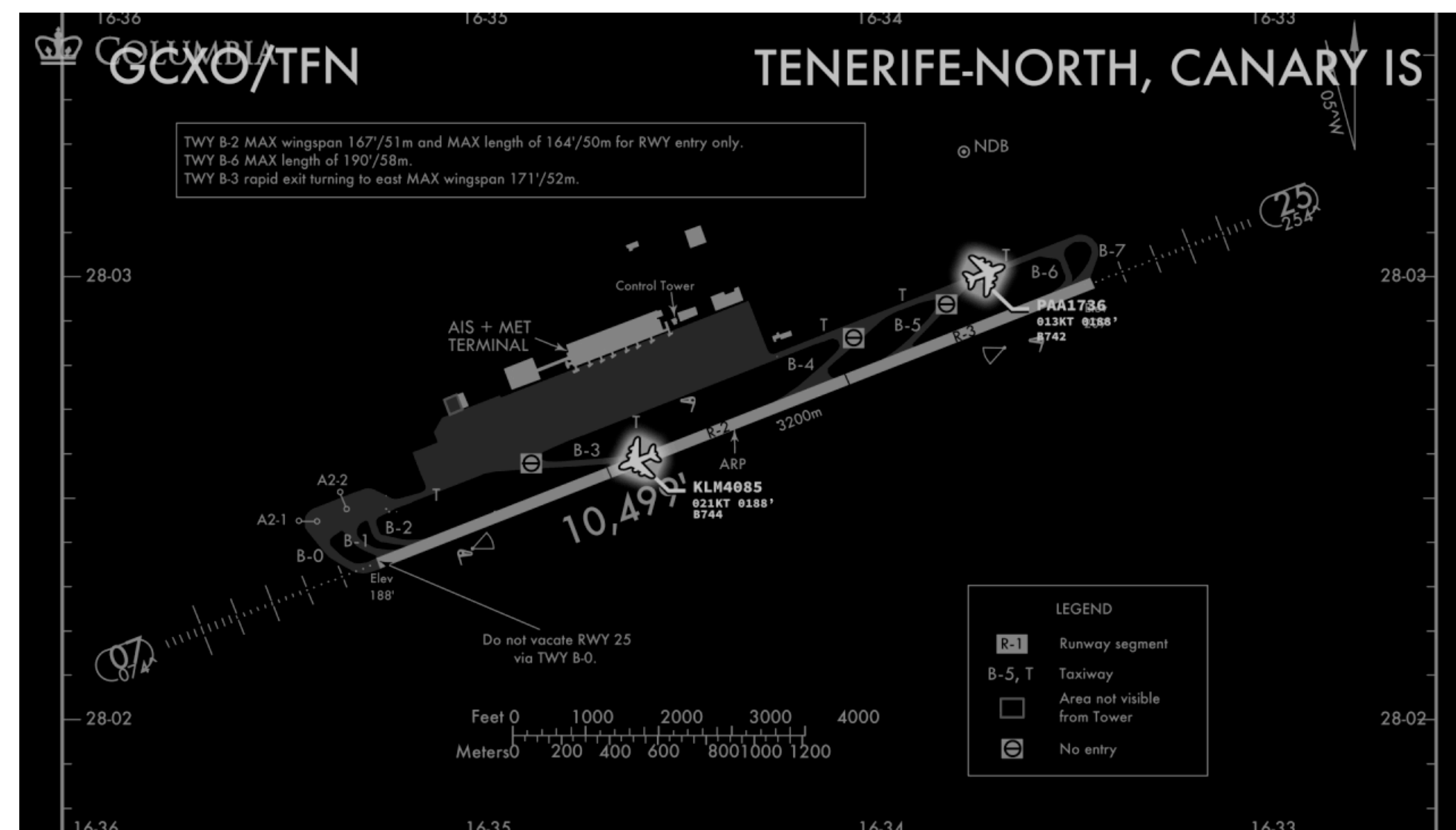


Leader

DECISION

How do **YOU** challenge authority?





583 deaths

crew didn't challenge captain



TWO
CHALLENGE
RULE



CHALLENGE
1

Advocacy:

“I noticed that you aren’t wearing a mask”

Response:

CHALLENGE
2

Advocacy:

“Ok, but I am worried about your safety.”

Response:



High **Advocacy**, high **inquiry** conversations foster:

INFORMATION TRANSFER

2 WAY COMMUNICATION

LEARNING



If a team member fails to **adequately respond to two or more challenges regarding **omissions** or **questionable actions**, the individual is assumed to have lost situational awareness.**

DECISION

How do **YOU** create psychological safety on the fly?

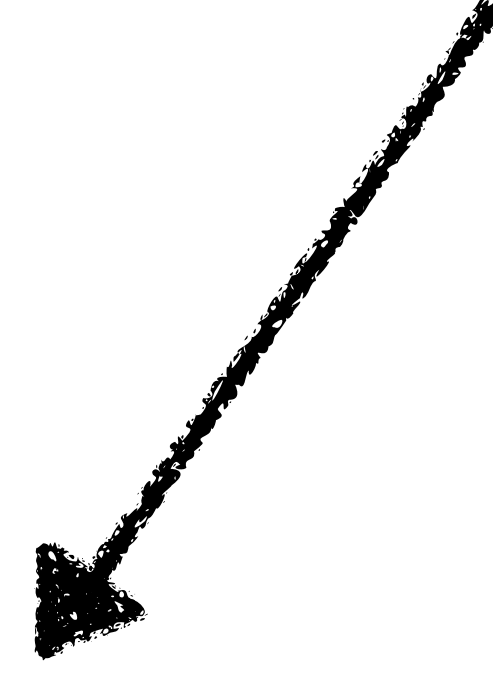
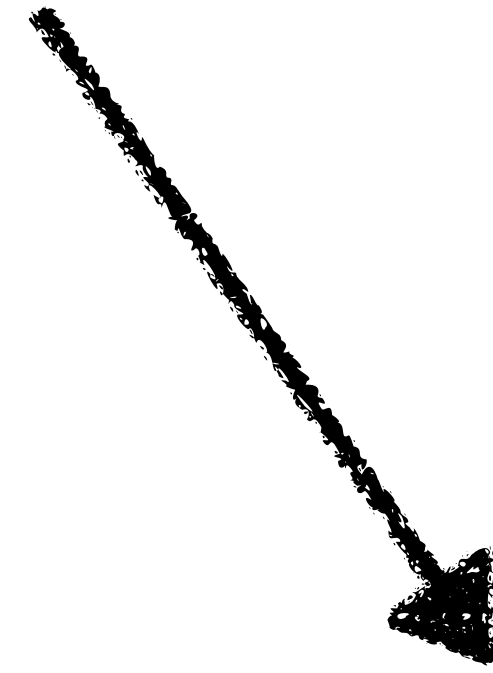




**equal
conversation**

+

**social
sensitivity**



PSYCHOLOGICAL SAFETY

“A team climate characterized by interpersonal trust and mutual respect in which people are comfortable being themselves.”

Amy Edmondson



PSYCHOLOGICAL SAFETY:

HIGH

HIGH

PERSONALITY

FUNCTIONALITY

TRUST

TRUST

LOWER STANDARDS

LOWER STANDARDS

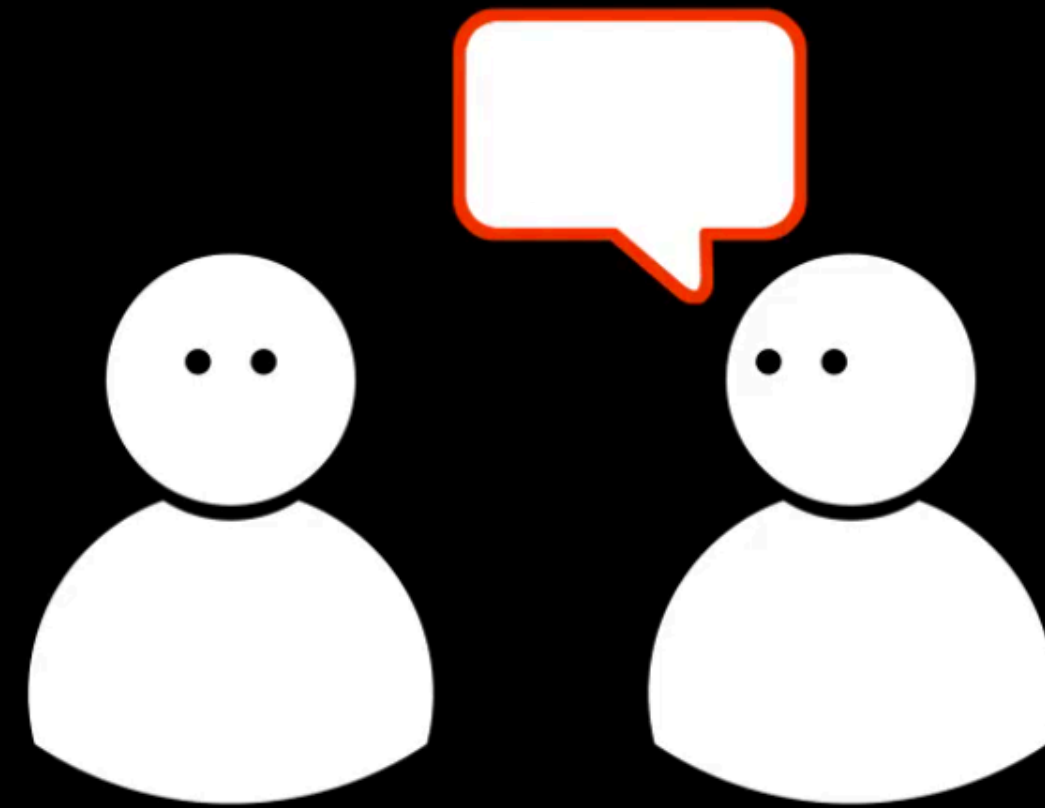


TRUST

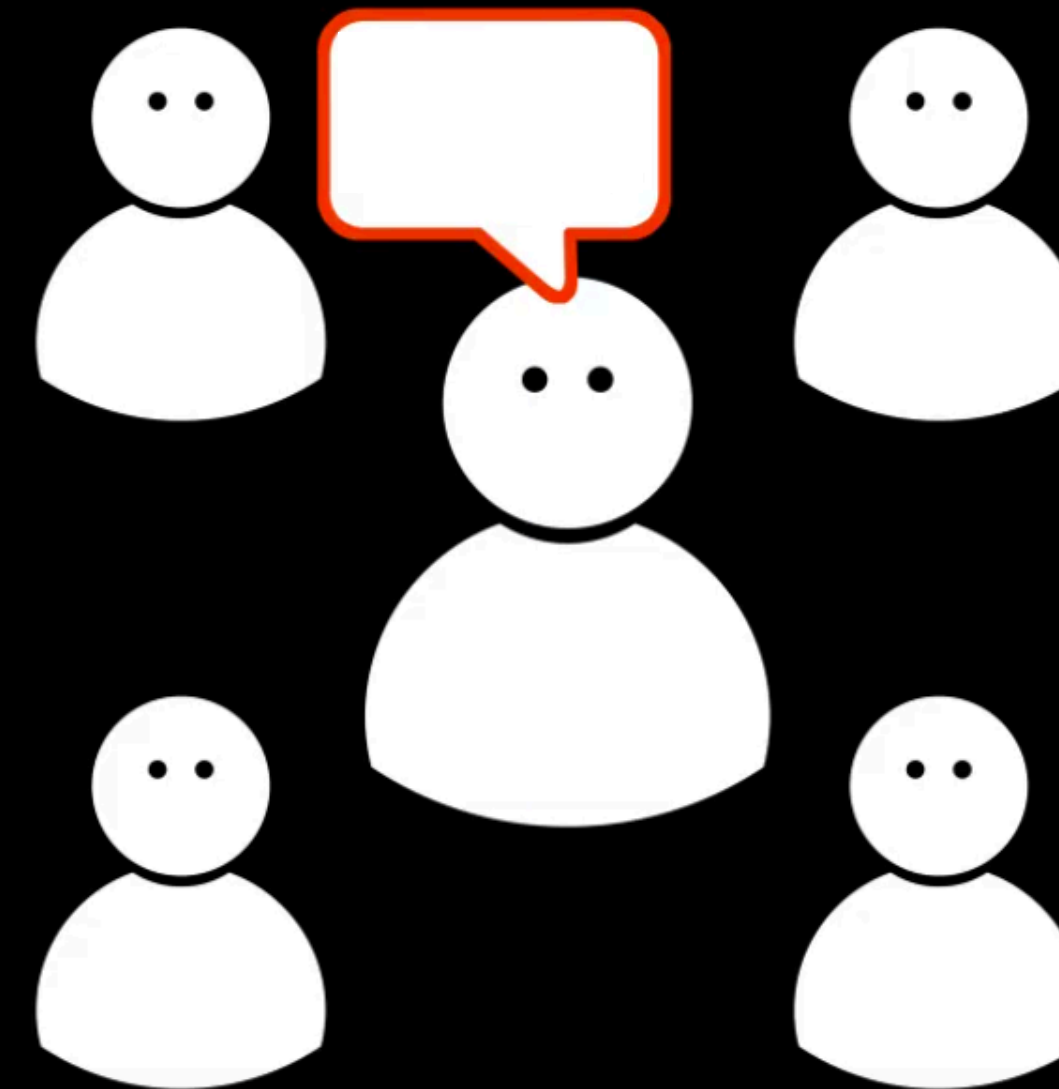
Giving others the benefit of the doubt when you take a risk.



TRUST



PSYCHOLOGICAL SAFETY





PSYCHOLOGICAL SAFETY WARNING

On our shared journey into the unknown you have

FREEDOM TO:

**Fail
Not Know
Play and laugh
Try again
Cry
Be wrong
Not be perfect
Be afraid**

**Be angry
Disagree
Be prejudiced
Be arrogant
Misunderstand
Not be likable
Be immature
Be intolerant**

As long as you :

- honestly admit your mistakes**
- constantly give and take feedback**
- forget any privilege or status**

Directions for use and contraindications:

What if your work was a place where you could show your whole self? Where you could reveal all your mistakes, failing and uncertainties without fearing that they would be held against you. Imagine just who you could become if you did not have to hide. This kind of psychological safety is immensely powerful, but it does not come easily.

Don't believe that you have this freedom because of some poster or some speech from you boss. This ability to be yourself comes from within, when you learn to judge yourself by your own values and not the praise or criticism of others. Creating an environment of psychological safety requires deep internal commitment, and a solid understanding, between all involved, that you'll work through the good and bad.

HOW TO CREATE PSYCHOLOGICAL SAFETY

BE ACCESSIBLE

INVITE PARTICIPATION

ACKNOWLEDGE LIMITS OF KNOWLEDGE

HOLD PEOPLE ACCOUNTABLE FOR TRANSGRESSIONS

SET BOUNDARIES

HIGHLIGHT FAILURES AS LEARNING OPPORTUNITIES

USE DIRECT LANGUAGE

BE WILLING TO DISPLAY FALLIBILITY

HOW TO CREATE PSYCHOLOGICAL SAFETY

BE ACCESSIBLE

INVITE PARTICIPATION

ACKNOWLEDGE LIMITS OF KNOWLEDGE

HOLD PEOPLE ACCOUNTABLE FOR TRANSGRESSIONS

SET BOUNDARIES **IN A CRISIS**

HIGHLIGHT FAILURES AS LEARNING OPPORTUNITIES

USE DIRECT LANGUAGE

BE WILLING TO DISPLAY FALLIBILITY

HOW TO CREATE PSYCHOLOGICAL SAFETY

BE ACCESSIBLE

“What can I do for you?”

INVITE PARTICIPATION

“Are we missing anything?”

ACKNOWLEDGE LIMITS OF KNOWLEDGE

“This situation is over my head.”

HOLD PEOPLE ACCOUNTABLE FOR TRANSGRESSIONS

**“Don’t speak to her like that
It’s not ok.”**

SET BOUNDARIES

“If I miss this intubation, I’ll need you to take over.”

HIGHLIGHT FAILURES AS LEARNING OPPORTUNITIES

**“What can we learn from
that near miss?”**

USE DIRECT LANGUAGE

“Jessica, please start chest compressions now.”

BE WILLING TO DISPLAY FALLIBILITY

“I missed the diagnosis. Let’s reset.”