

OB/GYN Ambulatory Team Training

The Problem

The concept of “Team Training” has been successfully utilized in the military to develop a non-hierarchical method of communication to facilitate safety. Team Training was further developed and successfully implemented at BIDMC on our L&D unit in 2002. Their success in improving safety for patients was recently recognized by the Joint Commission when the L&D team was presented with the Eisenberg Award for Patient Safety. As our patients are most often introduced to our facility in the ambulatory setting, it made sense to expand this key safety concept to the OB/GYN clinic.

Aim/Goal

To adopt the largely successful inpatient team training program to the outpatient setting in pursuit of ensuring patient safety, as well as patient and staff satisfaction.

The Team

OB/GYN Ambulatory Clinic Medical Director
OB/GYN Quality Improvement Specialist
OB/GYN Ambulatory Clinic RNs
OB/GYN Ambulatory Clinic Practice Managers

The Interventions

- The above team met to discuss the adaptation of team training to the ambulatory setting.
- Small multidisciplinary group meetings were held to introduce the “Team” concept to staff. All staff members were required to attend the two hour trainings.
- The “Pod” team was introduced as being the patient care team consisting of the physician or nurse practitioner with the patient care assistant.
- The “Coordinating” team was introduced as the real time problem solvers to assist the Pod teams in their pursuit of timely, safe and efficient patient care.
- The “Contingency” team was introduced as those who would respond to manage emergency situations on the unit.

The Results/Progress to Date

“Ambulatory Teams” went live on April 2, 2007. Staff report feeling empowered as participating, responsible members of the patient care team.

- The Pod teams meet before the start of each session to make a “game plan” and identify potential challenges to the smooth running of the session.
- A member of the Coordinating team checks in with each Pod team at the start of the session to assist in real time problem solving.
- The full Coordinating team meets weekly to review any issues from the prior week and to anticipate potential challenges for the upcoming week (i.e. staffing issues, supply and equipment needs, scheduling and space issues, etc.)
- A mailbox address was established for the Coordinating team to facilitate better communication between team members.
- Staff educational needs were identified and addressed through workshops and development of “Best Practices” for staff to share skills.
- The Contingency team has been successfully activated in emergency situations ensuring coordinated, efficient care for the patient in crisis while maintaining the safe operation of the clinic.
- Staff report improved relationships among team members.

Lessons Learned

Small group “Team Training Refresher” classes were held in January and February of 2008 allowing staff members to review the communication concepts learned in the original trainings, assess challenges to functioning as a team and to share successes. It is important to reinforce the communication concepts so that we empower staff to engage in the process and to feel the responsibility of supporting all team members so that we are successful in ensuring patient safety.

Next Steps/What Should Happen Next:

To assist staff in the communication necessary for good teamwork, we will institute a “Resource” position in the clinic to monitor the real time “pulse” of the unit.



**Beth Israel Deaconess
Medical Center**



A teaching hospital of
Harvard Medical School

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For More Information Contact
Dorothy McWeeney, RN OB/GYN QA/QI Specialist