



Overview

Welcome to TeamSTEPPS[®] 2.0 for Long-Term Care

The Agency for Healthcare Research and Quality (AHRQ) developed TeamSTEPPS 2.0. TeamSTEPPS was developed by AHRQ and the Department of Defense (DoD) as a teamwork system that offers a powerful solution to improving collaboration and communication within your institution. Teamwork has been found to be one of the key initiatives within patient safety that can transform the culture within health care. Patient safety experts agree that communication and other teamwork skills are essential for the provision of quality health care and for the prevention and mitigation of medical errors and patient injury and harm.

Provided as a flexible training kit, TeamSTEPPS 2.0 is an evidence-based program aimed at optimizing performance among teams of health care professionals, enabling them to respond quickly and effectively to whatever situations arise. This curriculum incorporates more than 30 years of scientific research that has been conducted on teams and team performance.

This curriculum is a customized version of TeamSTEPPS 2.0 for use in long-term care settings. The TeamSTEPPS 2.0 for Long-Term Care Instructor Manual is designed to help you develop and deploy a customized plan to train your staff in teamwork skills and lead a medical teamwork improvement initiative in your nursing home from initial concept development through sustainment of positive changes. Contained within the materials are comprehensive presentations and instructional guides, including short case studies and videos illustrating teamwork opportunities and successes.

The Fundamentals Course provides instruction on the core teamwork skills, along with strategies and tools. Additional materials focus on change management, coaching, measurement, and implementation. Supporting materials include a pocket guide, videos, and evaluation tools.

We are certain that you will find TeamSTEPPS 2.0 for Long-Term Care to be a valuable and essential resource in your efforts to make the delivery of health care safer for all residents and to establish a strong and lasting culture of safety within your nursing home.



A Few Notes About the Long-Term Care Version

- In nursing homes, the term “resident safety” can evoke thoughts of clutter-free hallways and the absence of scatter rugs. References to the home’s safety committee also may come to mind. However, resident safety means so much more than just physical plant or environmental safety precautions. TeamSTEPPS is about the processes and systems that can support resident safety during care delivery. TeamSTEPPS promotes the effectiveness of teams and team performance to reduce the likelihood of medical errors. Although TeamSTEPPS is referred to as a “program,” it is important to recognize that attention to resident safety is a continuous approach to delivering care and not a program with a start and end date.
- Transformational change refers to the recent movement to place the needs, interests, and choices of residents at the center of care practices, which is also known as “culture change,” “resident-centered care,” “resident-directed care,” and “person-centered care”. The TeamSTEPPS program also discusses culture change, but the focus here is on improving teamwork and communication skills in order to promote the delivery of safe patient care. To avoid confusion, within the Long-Term Care version, we have taken the position that safe resident care practices, including those taught as part of the TeamSTEPPS program, are considered a critical component within person-centered care and associated culture change activities.
- Throughout this Long-Term Care version of TeamSTEPPS are language changes that instructors should be aware of and should discuss with their audience. The most notable is the change from “patient” to “resident.” Typically, individuals living in nursing homes are referred to as residents. This label change evolved as patients were living in nursing homes over longer terms, especially as permanent residents in the last years of life. However, we are aware that some individuals in nursing homes prefer to be called patients, not residents. Usually subacute and short-term nursing home “guests” prefer to be identified as patients, reinforcing that their stay is short term. Instructors should use the term that best applies to the audience they are teaching.
- Throughout the Long-Term Care version of TeamSTEPPS, we reference residents and their families. We realize that the word “family” is unique to each person and defined in accordance with their personal experiences and lifestyle. We recognize and honor the role that friends and significant others can play in residents’ lives. When “family” is mentioned throughout this manual, it is meant as an all-inclusive term. It is also important to note that residents of nursing homes and other long-term care settings may have formal or legal designations for persons appointed to make



health care decisions on their behalf. The reference to family will apply to a legally appointed health care proxy, agent, or other formal designee as well.

- The curriculum includes and defines a number of tools and strategies; however, nursing homes may already be using the tools and strategies under different labels. For example, while TeamSTEPPS defines a “brief” as a short planning meeting at the start of a shift or task, some facilities may label this activity as a “huddle.” Because the objective is to train nursing home staff to implement and use the tools and strategies, instructors need not focus on revising a facility’s labels for the tools and strategies they use, as long as the staff have a shared understanding of each tool, its label, and its use. Instructors should work to understand the facility’s existing tools and labels and customize the training to the particular nursing home’s culture.

Note to Instructors

We encourage instructors to consider the above-mentioned changes in the context of the audience. It may be necessary, for example, to lead a discussion about the changes to help correct misconceptions and preconceived notions. Discussions can also help prepare the trainee audience to acknowledge a new way of interpreting their work environment and accept new ideas for an improved and expanded culture.