Case Study: American Academy of Orthopaedic Surgeons

“Patient Care Quality and Safety, Communication, and Teamwork Initiatives”

Name of Organization: (AAOS) American Academy of Orthopaedic Surgeons
Type of Organization: Medical Professional Society
Location: Rosemont, IL
Web address: http://www.aaos.org/

Description of project(s): Engaging Orthopaedic Surgeons as leaders in surgical patient safety
Key members and leaders of AAOS have long been engaged in projects and initiatives to improve patient care outcomes, including quality and safety. This set of projects increased the focus on quality and safety, with particular emphasis on surgeons becoming Master Trainers for TeamSTEPPS and Champions in their home organizations and regions to train and implement evidence-based strategies and tools to improve team effectiveness in surgery, offices, and clinics.

Location of Implementation:
Operating Rooms, Perioperative Care, Ambulatory Surgery Centers, Offices, and Clinics delivering musculoskeletal care.

Number of People Trained in TeamSTEPPS:
20-plus AAOS Board Members and the Presidential Line
44 Surgeons as Master Trainers (two sessions)
Agreement for each Master Trainer to teach four Train-the-Staff sessions at their home institutions
60 Participants at the AAOS Annual Meeting (New Orleans) TeamSTEPPS Fundamentals (two sessions)
1000 TeamSTEPPS Fundamentals workshop participants (multidisciplinary)

The Problem and Innovative Approach: Committed volunteer surgeons as Master Trainers
Often, surgeons are considered the primary barrier to the implementation of TeamSTEPPS in the surgical/perioperative environment. Creating surgeon “champions” to lead the training and implementation efforts in their home and regional areas is our innovation to overcome some of the resistance to change necessary in moving toward a culture of safety. Surgeons have every ability to rise to the leadership and role modeling opportunities presented in TeamSTEPPS and be the required change agents for implementation.

The Solutions and Information about the Initiatives:
1) Dr. John Tongue, who was in the AAOS Presidential Line, had the vision that we could leverage two important initiatives to create interest and knowledge in key committee chairs and board members focused on patient safety: First, the AAOS “Sign-Your-Site” program which began in 1995 and engaged the membership....and later The Joint Commission and greater patient safety community....in avoidance of wrong site surgery; and Second, the Clinician-Patient Communication Program, an
evidence based program very similar in many ways to TeamSTEPPS, which engages surgeon volunteers to train colleagues and residents in effective communication skills to improve patient outcomes. This initiative has been successful over the past decade and across the country. Over 6000 surgeons have participated in four-hour workshops (350 CME sessions over 13 years) and gained competence in communication skills.

2) We did a full day of educational focus for the AAOS Board of Directors, with a TeamSTEPPS Fundamentals course followed by presentations by Eduardo Salas on the science of teamwork. Additional presentations included colleagues from the American College of Surgeons on the data collection and change driver system embodied in the National Surgical Quality Improvement Program (NSQIP) http://site.acsnsqip.org/ and orthopaedic colleagues with extensive experience in the Surgical Care and Outcomes Assessment Program (SCOAP) in the State of Washington http://www.scoap.org/ to gain additional information on the metrics that could be helpful in driving changes in surgeons’ practices to improve quality and safety.

3) The board approved three years of financial support for two to three cohorts of TeamSTEPPS Master Trainers who would act as change leaders, instructors, coaches, and influencers.

4) We trained a cohort TeamSTEPPS Master Trainers in Rosemont, IL primarily for orthopaedic surgeons who were already “Mentors” in the Clinician-Patient Communication Program with additional representatives from Anesthesia, Nursing, and Orthopaedic Physician Assistants, to create a multi-professional atmosphere.

5) We trained a second cohort of Master Trainers, including an AAOS First Vice President and key board member to help sustain focus on TeamSTEPPS in quarterly board meetings and multiple committee meetings.

6) The Academy (and leadership) revitalized the Patient Safety Committee and appointed a Chair who was very involved in the wide application of patient care quality and safety principles across the full spectrum of musculoskeletal care. This committee sponsored a Patient Safety Summit, with participants from AHRQ, most of the orthopaedic subspecialty organizations, Johns Hopkins leaders of the Comprehensive Unit-Based Safety Program (CUSP) with the objectives of increasing knowledge, setting an agenda to create specific patient safety goals for each of the key subspecialty organizations.

7) Developed one course and one seminar on patient safety, including TeamSTEPPS principles for the Annual Meeting (New Orleans) and delivered two sessions of TeamSTEPPS Fundamentals, each taught by orthopaedic Master Trainers to surgeon audience/participants.

8) Planned an “Orthopaedic Surgical Team Safety CME Course” for October 3rd and 4th 2014 for an intended audience of multi-professional teams, with TeamSTEPPS principles at the core of the training.

9) Planned an Instructional Course Lecture for AAOS Annual Meeting in 2015 (March) on Patient Safety and “non-technical skills,” including communication and teamwork.

10) TeamSTEPPS on-line version in the “Practice Management Course” for graduating residents (slides and voice presentation).

**Required Resources:**

- Board Approval for three years of TeamSTEPPS financial support for Train-the-Trainer and later TeamSTEPPS Fundamentals approximately $160,000

- Except for travel reimbursements, the Master Trainers and Champions are Academy volunteers, which is an important aspect of the AAOS educational mission

- Self-sustaining courses, including Instructional Course Lectures and continuing medical education (CME) courses, based on fees for attendees

- Staff support at the Academy, approximate one FTE position

- Our timeframe extends from July 2011, when Drs. John Tongue and Dwight Burney attended a TeamSTEPPS training of musculoskeletal product line leaders and staff in Colorado Springs, through 2015, with TeamSTEPPS and Patient Safety training at the 2015 AAOS Annual meeting (Las Vegas). The financial support timeline is three years: January 2012 through the end of 2014.

- We attempted, but failed to get external grant support from for our TeamSTEPPS initiatives, based on the innovation of having the strong sponsorship (and safety integration) of our professional organization, its leaders, and members.

- Key success factors have been strong Presidential Line and Board of Director support for committee realignment, making the non-technical skills (Clinician-Patient Communication Mentoring Program and
the TeamSTEPPS curriculum) an essential part of professional development for surgeons, and integrating patient care quality, safety, and experience into the core values of the professional organization.

The Results:
The goal of facilitating 80 Fundamentals workshops in the three year time frame will not be met. However, we have exposed over 1000 workshop participants to the TeamSTEPPS strategies and tools. AAOS leaders acknowledge the critical importance of “nontechnical skills” education in the rapidly evolving health care climate. Reorganization of AAOs educational programs and development of new educational products emphasizing the non-technical skills (communication, communication, effective teamwork, etc.) is in progress. An example is our first AAOS CME Course on Surgical Patient Safety (October 2014 in Washington, DC) offering multi-professional training, including TeamSTEPPS.

Advice for Colleagues:

1) The uniqueness of this AAOS set of initiatives has been the large cadre of committed surgeon volunteers for our clinician-patient communication mentoring program and now the TeamSTEPPS focus on surgical team effectiveness. Other professional societies and organizations may well benefit from some of our lessons learned.

2) There is a substantial opportunity for professional healthcare organizations, such as the AAOS, to commit to developing non-technical skills in their members and leaders and setting expectations as to their effective use in healthcare delivery to improve patient outcomes.

3) These initiatives should not be perceived as “programs” but rather elements of culture change toward a culture of safety and enhancement of the patient experience.

4) Gain the early support of the Presidential Line, Board Members, Committee Chairs, subspecialty society leaders, and key influencers across the organization.

5) A five to ten-year time horizon is superior to the usual one/two year cycle

6) Use the experience and influence strategies of past presidents.

7) Give some emphasis to “what’s in it for me” for organizational members

8) Know that persistence is key, integrating it into the mission, vision, and values of the organization

9) Develop a comprehensive (but adaptive) implementation and integration plan for TeamSTEPPS, making it as easy as possible for members and leaders to move forward to improve quality and safety

10) For a professional organization, metrics are difficult (without access to hospital or surgery center data) and probably are limited to survey data using validated instruments from AHRQ regarding perceptions/attitudes toward patient safety and teamwork. Opportunities exist for data collected in state-wide initiatives, the NSQIP database, and organizations such as SCOAP.

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As part of the Scope of Work and Compensation in the Extended Faculty Agreement, each organization must provide a case study write-up to accompany their presentation. Case studies will be posted on either or both www.teamsteppsportal.org and www.teamstepps.ahrq.gov. Please fill in the template and submit it to AHRQTeamSTEPPS@aha.org after the conference and before June 27th. We will be able to process your honorarium after receiving this document.