

Slide Presentations: Tuesday, October 25, 2011 | October 2011

Team Performance Assessment During Rapid Response Events

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Chest. 2011;140(4_MeetingAbstracts):980A. doi:10.1378/chest.1120089

Abstract

PURPOSE: Rapid response teams (RRT's) rescue patients in imminent danger of progressing to cardio-pulmonary arrest. RRT leaders are dependent on coordinated assistance from multiple members of the patients care team. Perfect execution of each members assigned tasks is the goal, although rarely achieved. We assessed the individual execution of assigned tasks as a measure of RRT performance.

METHODS: Internet-based survey study of all doctors (MD's), nurses (RN's), patient care associates (PCA's), and nurse managers (RNM'S) assigned to RRT's at Beth Israel Medical Center, NY, an 850 bed urban teaching hospital. Respondents were asked to grade the performance of tasks by other team members during RRT's. Assigned tasks were as follows: 1) MD's identified themselves as leader, utilized crew resource management principles in communication, and behaved professionally, 2) RNM's controlled crowd, directed the RN's and PCA's and arranged rapid transfer, 3) RN's prepared medicines and charted events, 4)PCA's brought crash cart, non-invasive monitor, and specimen labels. Survey questions estimated the frequency of individual task completion by team members. Primary outcome was the mean task completion rate, calculated as the average of the frequency estimates from all other team members.

RESULTS: 371 responses were collected, MD's 37%, RN's 32%, and others (RRT, RNM, PCA) 31% The PCA's perceived they performed assigned duties adequately however team members disagreed (PCA 94%, MD62% and RN65% with $p<0.005$). Perceived performance of assigned roles by nurses (PCA92%, MD68% and RN91% with $p<0.005$) and nursing supervisors (PCA85%, MD70% and RN72%) statistically differed compared to that observed by the physicians. There was uniform agreement that the environment was stressful (PCA57%,MD55% and RN60%) and chaotic both before (PCA55%, MD63% and RN67%) and after (PCA63%, MD69% and RN60%) the arrival of the RRT team.

CONCLUSIONS: Rapid response team members demonstrate imperfect execution of assigned tasks despite self-perception of high performance. Routine, objective measurements of team performance should be recorded to guide training programs directed at improving performance in RRT events.

CLINICAL IMPLICATIONS: Rapid response are stressful infrequent events and objective measurement of team performance and multidisciplinary training is crucial to successful team work

DISCLOSURE: The following authors have nothing to disclose: Samuel Acquah, Cres Pellecchia, Pierre Kory, Calvin Hwang

No Product/Research Disclosure Information

11:30 AM - 12:45 PM