



Community Hospital McCook, Nebraska

Background

Community Hospital formed a Define, Measure, Analyze, Improve, and Control (DMAIC) team to identify the root causes of low ratings from our hospital staff, focused on less-than-excellent interdepartmental teamwork. An internal survey revealed that poor perception of teamwork was not isolated to difficult departments but was widespread across the organization. Primary concerns included lack of information sharing and rude behavior. A 5-Why root cause analysis was conducted and highlighted two concerns: lack of standardized tools for communication and lack of training. Previously, TeamSTEPPS training was completed in the organization over 10 years ago, but with staff and department director turnover, sustainment of previous efforts had not been met.

Situation

Community Hospital implemented TeamSTEPPS as part of its strategic plan to sustain its position of being the employer of choice in the region. A key driver for how employees rate the facility as a place to work is on their perception of teamwork between departments. The 2023 employee survey, administered by a third-party company, indicated that only 19.5% of employees rated “teamwork between departments” as excellent. This put Community Hospital in the 57th percentile when measured against peers. In addition to employee satisfaction, poor teamwork has the potential to negatively impact patient safety, satisfaction and overall quality of care.

Actions Taken

Community Hospital partnered with the American Hospital Association (AHA) to complete on-site training for about 30 participants. Every department identified one person to initially participate in training to gain a foothold in each department. Department champions and facilitators were then identified from these initial trainees. Facilitators worked to train the rest of the workforce through a 4-hour training required for all employees. Leadership also provided visible administrative support by introducing each training session and attending the beginning of every champions meeting to emphasize that TeamSTEPPS was a leadership-endorsed initiative. This training was completed over a two-month period and allowed departments to complete training without leaving them understaffed. Department Champions were utilized to roll out a “tool of the month,” which included a short verbal training. They then met monthly to discuss the tools and review any barriers they might be seeing in their departments around utilizing the tools.

To ensure that all staff are trained, those responsible for new hire training have ensured that all new staff members receive the 4-hour training. These trainings are conducted quarterly.

For detailed information, visit: www.aha.org/center/team-training



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Results & Recommendations

Following the re-implementation of TeamSTEPPS, Community Hospital observed a measurable improvement in interdepartmental teamwork. The percentage of staff who rated “teamwork between departments” as excellent increased from 19.5% to 25.6% in 2024. The shift from the 57.6th percentile to the 76.4th percentile is a significant leap, reflecting meaningful change within the hospital.

The training was met with rave reviews, many stating it was the best training they have attended.

“I’m excited about TeamSTEPPS because it provides simple and applicable tools that the entire Community Hospital staff can apply to improve how we treat each other and patients. It seems truly achievable to become a team where each of us can proudly take ownership for our role in the hospital culture and in making every patient’s experience the best possible.”

“...I found [it] really powerful when she said, ‘do not let your teammate fail.’ From my perspective we can be great about protecting our department teams but shifting the mentality to the entire hospital team that we will not LET each other fail.”

There were many lessons learned during this implementation. First, the facilitators were front-line staff, which was very well received by staff, but was a huge ask of their time and required that they engage in public speaking, a common fear, making it even more challenging. The leadership team provided the facilitators with support and encouragement. Second, the department champions had to be reminded that they were not the accountability structure for TeamSTEPPS. They had to understand that they were instrumental to making TeamSTEPPS psychologically safe for staff to use, and that they were the eyes and ears in their departments — allowing them to identify barriers so that leadership had the information needed to respond. Third, it was important to take a multi-dimensional approach to continue the progress after training. Everybody came out of the training energized, but keeping the energy and applying the tools can be difficult.