TeamSTEPPS Debrief to Improve Frontline Performance during Rapid Response
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Problem:
Rapid Response Team (RRT) calls are utilized when patients show signs of clinical
decompensation in non-ICU patient units. The unit staff/primary care RN play an integral
role during RRT calls. The RN Clinician has identified these areas for staff improvement on
non-ICU patient care units:
1. Clinical skills required during the RRT call.
2. Communication skills during the RRT call.

Evidence:
Literature suggests TeamSTEPPS as a methodology to improve quality and safety in
healthcare. Debrief is a TeamSTEPPS strategy allowing an informal exchange session to
improve team performance and effectiveness in a non-punitive environment.

Strategy: The RN clinician utilizes a Debrief with the unit staff immediately following a RRT
call to discuss their performance. The unit staff and clinician consider what went well, what
could have been better, and areas in need of improvement. The clinician uses a template to
record performance during the RRT and feedback from the Debrief. This data identifies trends
of learning needs and the areas for practice change.

Practice Changes:
1. Announcing RRT overhead on non-ICU units to engage staff, “don’t come empty
   handed”, “put your hands on”, defibrillator competency to improve clinical skills.
2. TeamSTEPPS SBAR, Call Out, Check-Back, Task Assistance and Cross Monitoring to
   improve communication skills.

Evaluation:
Clinical and communication skills data is collected during RRT and Debrief and recorded on a
tool developed by clinician. This allows the clinician to evaluate changes in performance and
outcomes as new strategies are implemented.

Results:
Early findings show clear signs of improvement in the area of clinical skills and some increase
use of TeamSTEPPS communication.

Recommendations:
Continuation of the Debrief technique after RRT and clinician implementation of new
strategies for improvement appears warranted. Additional data collection is necessary to fully
assess the outcomes.

Lessons Learned:
The Debrief after RRT call allows the RN Clinician to discuss performance and implement
improvement strategies with non-ICU staff. This creates a non-punitive methodology for
practice improvement.
References:


Institute for Healthcare Improvement; (2008) Protecting 5 million lives from harm. Available at: http://www.ihi.org


