

**Appendix B – TeamSTEPPS® Team Assessment Tool for Improving Diagnosis**

# TeamSTEPPS® Team Assessment Tool for Improving Diagnosis - *Instructions*

## How to use this Team Assessment Tool

This tool assesses the maturity level of your health care setting in five critical teamwork domains: Team Structure, Communication, Leadership, Situation Monitoring, and Mutual Support. It can help identify strengths and opportunities to increase teamwork, set priorities, develop action plans, and enhance communication for diagnostic improvement. This should be **completed individually by all members in your setting after Module 1: Introduction of TeamSTEPPS for Diagnosis Improvement** course. The survey should be administered **anonymously** and can be done via paper-based (e.g., printouts) or electronic (e.g., survey monkey) administration.

### 1. All individual team members will complete the self-assessment ratings.

- a. **Step 1: Rate each question.** For each question, select a number that best describes how often the behavior occurs in your setting. Each question has a 0 to 5-point range (0 points = Never and 5 points = Always).
- b. **Step 2: Add your ratings.** Add your Overall Ratings into a Summary Score at the end of the assessment, the range is from 0 to 125 points.

### 2. The course facilitators will identify strengths and opportunities to improve.

- a. **Create an average Summary Score.** From the results of all the assessments completed in your setting, calculate the average Summary Score by adding the Overall Rating of each domain.
- b. **Set priorities.** Using the results of all domains, select specific areas on which to focus your setting's improvement efforts.
- c. **Assess your improvement over time.** Readminister this assessment periodically to prioritize and guide initiatives in the five critical teamwork domains, with safer diagnoses as an overarching objective.


# TeamSTEPPS® Team Assessment Tool for Improving Diagnosis\*

\*Adapted from TeamSTEPPS Performance Observation Tool

**Rating:** Select a number that fits your setting on a scale of **0 = Never to 5 = Always** for each question.

**Overall Rating:** Add your Ratings together for each domain.

**Summary Score:** Add your Overall Rating for each domain into a total score at the end.

 <b>Team Structure</b> (understanding the team structures that support a <b>diagnostic team</b> )	Rating
a. Each team member can identify all <b>members of the diagnostic team</b> (e.g., patients, families, providers, radiology and lab personnel, other staff, and support services).	
b. All team members recognize the <b>roles and responsibilities</b> of each member of the diagnostic team.	
c. Team members use <b>defined communication tools</b> (e.g., SBAR, call-outs, check-backs, and handoff techniques) to facilitate the diagnostic process.	
d. Team members use <b>daily/weekly huddles and briefs</b> to stay informed, address issues, share unexpected events, and celebrate successes throughout the diagnostic process.	
e. Team members <b>appropriately use all available</b> methods of diagnostic communication (e.g., electronic health record, face-to-face communication).	
Comments:  <div style="text-align: right;"><b>Overall Rating – Team Structure Domain</b></div>	
<b>Communication</b> (team engagement in setting goals and using standard communication tools)	Rating
a. Team members <b>actively exchange information</b> (e.g., brief, clear, specific, timely, communication, confirmed by check-backs) that support effective communication in the diagnostic process.	
b. Team members work collaboratively with other members, and <b>access information</b> (e.g., electronic health record) when needed, to inform the diagnostic process.	
c. Team members within our setting hold one another accountable for using <b>structured communication tools</b> (e.g., SBAR, call-outs, check-backs, handoff techniques) to facilitate communication.	
d. When communicating with external team specialists, providers and staff consistently use <b>standard referral tools</b> (e.g., check-backs, handoff techniques)	
e. <b>Reflective practice</b> (e.g., ask, listen, act) is used consistently in the diagnostic process during interactions (e.g., patient-provider, provider-provider, provider-staff).	
Comments:  <div style="text-align: right;"><b>Overall Rating – Communication Domain</b></div>	



## Leadership (role of leadership in supporting effective team communication)

Rating

a. Leaders **ensure all team members understand the goals and vision** for effective communication in the diagnostic process (e.g., patient goals, shared model for plan of care), and hold each other accountable (e.g., use metrics for tracking improvement, debriefs, huddles).

b. Leaders **provide resources** for the diagnostic team to effectively facilitate communication both internally and externally.

c. Leaders support a **balanced workload** within the team and delegates tasks consistent with roles and responsibilities of team members.

d. Leaders **act as liaisons** for resolving team issues, system issues, and any breakdown in communication.

e. Leaders **set expectations for participation** in effective communication practices (e.g., briefs, huddles, debriefs) in the diagnostic process.

f. Leaders reinforce good practices by **celebrating diagnostic team successes**.

g. Leaders **model** teamwork behaviors (e.g., use structured tools when communicating, provide constructive and timely feedback, open to ideas from team members, fosters a culture of safety).

Comments:

**Overall Rating – Leadership Domain**

Rating

a. Team members **routinely assess** communication practices to identify opportunities for improvement (e.g., this survey tool, debriefing events, safety culture surveys).

b. Team members regularly **review systems** intended to support the diagnostic process (e.g., scheduling, test results, consultations) for gaps and improvement opportunities.

c. Team members have a systematic process in place to capture and **learn from near-misses and no-harm adverse events** that occur because of communication gaps.

d. Team members **establish goals, share** with diagnostic team, and implement **action plans** following assessments.

Comments:

**Overall Rating – Situation Monitoring Domain**

## Mutual Support (supporting each other and resolving challenges and conflict)

Rating

a. Team members are held accountable for **proactively assisting** one another in the diagnostic process (e.g., catching, and correcting communication failures, task assistance).

b. Team members freely **provide timely and constructive feedback** to each other to improve the diagnostic process.

c. Team members feel **safe raising issues**, concerns, and advocating for patient needs.

d. Team members attempt to **resolve conflicts** using structured communication tools (e.g., Assertive Statements, Two-Challenge Rule, DESC Script).

Comments:

**Overall Rating – Mutual Support Domain**

**Summary Score**

This survey is authorized under 42 U.S.C. 299a. The confidentiality of your responses to this survey is protected by Sections 944(c) and 308(d) of the Public Health Service Act [42 U.S.C. 299c-3(c) and 42 U.S.C. 242m(d)]. Information that could identify you will not be disclosed unless you have consented to that disclosure. Public reporting burden for this collection of information is estimated to average 60 minutes per response, the estimated time required to complete the survey. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: AHRQ Reports Clearance Officer Attention: PRA, Paperwork Reduction Project (0935-XXXX) AHRQ, 5600 Fishers Lane, Room #07W42, Rockville, MD 20857.