

Module 8: Facilitator Guide for Zoom session

Facilitator Instructions: Complete the 2 activities below using these instructions and the Module 8 Zoom facilitation slides.

Suggested time: 30-40 minutes

Activity 1: Multidisciplinary discussion (*advance on slide 2*)

Objective: Apply clinical and community-based strategies in the management and prevention of sepsis using a team-based approach (IPE/QI)

1. Remind learners of the topic: (*advance on slide 3*)

In module 8, we learned about Francis, a 28-year-old man admitted to the hospital with headache and neck stiffness who was newly diagnosed with HIV and cryptococcal meningitis. He initially was doing well, but on day 5 of admission developed a fever of 39.7C and HR of 126 beats/minute, which were concerning for sepsis.

2. Explain the activity:

(*Advance to slide 4*) You will now have the opportunity to discuss a collaborative team-based approach to the management of sepsis. You will be moved to breakout rooms to discuss the following scenario in small groups.

You have been notified of an incoming patient with sepsis. Before the patient arrives, you would like to discuss the briefing checklist below (on the next slide), which has been modified from Team STEPPS.

(*Advance to slide 5*) You will have ten minutes to discuss the questions below in small groups and then return to the large group to share your answers:

- What resources are available in your hospital or clinic?
- What is our plan of care when the patient arrives? Do all members understand and agree upon goals?
- What are the roles and responsibilities of each team member (doctor, nurse, pharmacist, lab tech, etc) when the patient arrives?
- What are some effective communication techniques that team members can employ with each other during the care of this patient?
- Consider a collaborative approach to decrease bad outcomes in sepsis at your place of practice. What can each role do to improve outcomes either when sepsis is initially suspected or throughout sepsis management?

3. Move students into breakout rooms for 10-minute discussion

4. Close breakout rooms and return students to large group

5. Guide learner reflection on the activity: (*advance on slide 7*)

- The plan of care should follow the 1-hour sepsis bundle as outlined above.

- For communication techniques, discuss the importance of closed-loop communication (having team members repeat their roles/responsibilities in real-time) to create a shared mental model among providers.
- (*Advance to slide 8*) Roles and responsibilities should be divided among the team members—there are no clear right or wrong answers, but teams should be able to defend their reasoning for how they delegated tasks.

Activity 2: CUS and 2-Challenge Rule role play (*advance to slide 9*)

Objective: Demonstrate use of CUS or the two-challenge rule to bring attention to clinical safety breaches (IPE/Patient Safety)

1. Review topic:

(*advance to slide 10*) The management of sepsis is complex and issues may arise that could potentially impact patient safety. In module 8, we reviewed techniques for intervening to prevent harm to patients, including CUS and the 2-challenge rule.

As a reminder, **CUS** is a TEAM STEPPS acronym for language and words used for individuals to ‘stop the line’ if they sense or discover a safety breach. These are meant to be assertive statements to empower all team members and include:

- “I am Concerned”
- “I am Uncomfortable”
- “This is a Safety issue”

(*advance to slide 11*) The 2-challenge rule is a technique meant to empower team members to ‘stop the line’ if they sense or discover a safety breach. The two challenges may come from the same person or from two different people. The first challenge should be in the form of an assertive statement whereas the second provides support for the concern.

2. Explain the activity: (*advance to slide 12*)

We will now have the opportunity to take part in a role play activity in breakout rooms, where learners may practice both communication techniques. In Scenario A, you will choose the role of the nurse or doctor and then run through Scenario A to practice the CUS technique. After 5 minutes, switch roles for Scenario B and practice the 2-challenge technique.

After 10 minutes, learners will be returned to the large group to debrief how it felt to use each technique.

3. Move students into breakout rooms for 10-minute role play.

4. Close breakout rooms and return students back to large group.

5. Guide learner reflection on the activity. (*advance to slide 14*)

Debrief with learners how it felt to use each technique.