

# Perinatal Quality Collaborative of North Carolina

## North Carolina AIM Obstetric Hemorrhage (AIM OBH)

Each of the exercises below are designed to improve team and individual skills involved in postpartum hemorrhage (PPH) control and patient family support. Teams should put systems in place that allow all staff members to use the following exercises to practice communication skills and debriefing each month.



### INDIVIDUAL TRAINING DRILLS

- 1. Print and Laminate Floor Plan for OB Suite (Individual, 10 min)**
  - a. On clean sheet of laminate, have team mark locations of important resuscitation items (rapid infusers, lab slips, extra fluids, Pt warmers, etc.)
  - b. Have laminated floor plan with locations already marked for comparison
  - c. Time event; have fastest/ most accurate team member win prize
- 2. Blood Bank Race (Individual, 30 min)**
  - a. Have team members to go to blood bank, check out fake blood, come back, set-up for delivery and crosscheck to administer
  - b. Time event; have fastest/most accurate team member win prize
- 3. Pyxis (Individual, 20 min)**
  - a. Read the checklist while your teammate goes after the items in the Pyxis
  - b. Do they know how to use the “hemorrhage” code to get access?
  - c. Have pharmacy available to help debrief access, as well as describe restocking and replacement of unused materials
- 4. Blood Loss Estimation Exercise (Individual, 20 min)**
  - a. Take known volume of fake blood and inject/ pour on various collections of sponges and towels on the floor
  - b. Have the team estimate, then weigh the samples
  - c. Time event; have fastest/most accurate team member win prize
- 5. Patient Education Resources (Individual, 10 min)**
  - a. Have team members locate patient education and support resources related to hemorrhage and bring paper copies to instructor
  - b. Time event; have fastest/most thorough team member win prize

### TEAM TRAINING DRILLS

- 1. Hemorrhage Cart Scavenger Hunt (Team, 20 min)**
  - a. Learning Phase:
    - Time the team pulling items from the cart in order of the checklist
    - Remove time for team that formally assigns roles and applies closed loop communication
  - b. Testing Phase:
    - Remove an item or two from the cart and measure time to completion
    - Remove time for team that formally assigns roles and applies closed loop communication
  - c. Have fastest/ most accurate team member win prize
- 2. Cart Restocking Scavenger Hunt (Team, 20 min)**
  - a. Longer resuscitations require more supplies and initial response sequences start to break down
  - b. Have the team compete to restock an empty Hemorrhage Cart
  - c. Alternative to this is a repeat of the Hemorrhage Cart Scavenger Hunt with the floor code cart
- 3. Ask Me Three™ Drill (Team, 30 min)**
  - a. The Ask Me Three™ program was created by the National Patient Safety Foundation (NPSF)
  - b. Create cards for each team member, including the role of a patient support person, that give a basic SBAR of the patient’s situation (use general OB problems with at least one including “heavy bleeding”)
  - c. Ask Me Three™ questions are then presented to the provider to answer given the background they were provided
    - What is my main problem?
    - What do I need to do?
    - Why is it important for me to do this?
  - d. Debrief the answers provided (for the “heavy bleeding” case, did they tell the patient it was a “hemorrhage”?)

- e. Provide a reward for the person that the team decides gave the best answers to the questions

## TEAM COMMUNICATION DRILLS

- 1. Helium Stick Teamwork Exercise (Team, 30 min)**
  - a. Build communication skills by performing the helium stick exercise with a tent rod as described here: <https://www.leadersinstitute.com/helium-stick-team-building-game/> (Hula Hoops are a bit easier to find and work fine as well)
- 2. Communication Debrief (Team, 30-40 min)**
  - a. Set up a computer or iPad with the following video: <https://www.youtube.com/watch?v=XyI82tu44Iw> (There are tons of videos similar to this one available on YouTube; feel free to get one that you find interesting. The video does not even need to be a PPH event. The fire drill episode of “The Office” provides an extraordinary opportunity for your team to be entertained and practice situational debriefing. [https://www.youtube.com/watch?v=gO8N3L\\_aERg](https://www.youtube.com/watch?v=gO8N3L_aERg) )
  - b. Have the team watch the video and record different types of communication tools they see used by the team
  - c. Assign each team member to play a role that was included in the video and debrief following the event
  - d. Have the team communicate with a family member
- 3. Non-verbal Communication Grid (Team, 30 min)**
  - a. Set up a grid with tape using one foot blocks on the floor, as described here: <http://paradigmshiftleadership.com/gridwalk-a-group-problem-solving-and-team-building-initiative/>
  - b. Use directions for the “game,” including debrief instructions, here: <http://www.toobeez.com/teambuilding-book/12-Maze-Activity.html> (the grid takes less time to set up than the more complicated instructions for a grid included here)
- 4. OR Transport (Team, 20 min)**
  - a. Have team assemble in the room and assign roles
  - b. Start the timer at a decision to roll to the OR; use a person in the bed so they are practicing communication with the patient (when this goes well, add another family member)
  - c. The end time is when the OR doors close
  - d. Have the team evaluate and debrief their communications and transport
  - e. The fastest team to respond with the fewest errors wins a prize
- 5. Blindfolded Code Leader (Team, 20-30 min)**
  - a. Have the team assemble and pre-brief them that this will be a postpartum hemorrhage
  - b. After they complete assigning roles, including the role of patient and family member; have the leader stand at the foot of the bed and blindfold them
  - c. Once the code begins, the leader is completely dependent on their team communicating events and changes in the patient status verbally
  - d. Debrief should focus on verbal communication skills
- 6. Family Support During Care Escalation (to ICU) (Team, 30-40 min)**
  - a. Provide teams with the PQCNC Patient & Family Support Checklist to review prior to drill
  - b. Each team should assign roles, such as: patient, family, mother/baby, ICU staff, NICU, etc.
  - c. Focus on a single section of the Checklist (i.e., “Immediately Following Event” or “If the Patient is in Critical Care”) and act out the scenarios
  - d. Have each team walk through the support items, paying close attention to handoffs, information exchange and language
  - e. Debrief should focus on completion of support items and verbal communication skills
- 7. Teach-back Drill (Team, 20 min)**
  - a. Ask team members to pair up; one person will be providing discharge education, the other will be playing the patient (if odd numbers, consider including a “family member” role)
  - b. Have staff member educate a “patient” using your patient discharge materials for PPH
  - c. Using teach-back techniques, have the “patient” reflect how well the staff member communicated the information, including recognition of the trauma
  - d. Teach-back techniques can be found at AHRQ: <https://www.ahrq.gov/professionals/quality-patient-safety/quality-resources/tools/literacy-toolkit/healthlittoolkit2-tool5.html>

