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Tiara Benson

Providence St. Joseph Health

Ma Fe Chase

Providence St. Joseph Health

Amanda Miles

Providence St. Vincent Medical Center

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Novel Tool Used for Measuring Team Resilience Among Caregivers in a Hospital Setting: Resilient Team Traits Identified

Tiara Benson, MSIO, BSN, CMSRN, MaFe Chase, BSN, & Amanda Miles, BSN, RN, MA April 2022

Background

Resilience is “the acquired ability to recover, adapt, and grow from stress”(Wu et. al., 2013).

Healthcare workers frequently are exposed to death and suffering while managing critical situations and multiple priorities. These obstacles have a psychological impact, however, caregivers are not often trained in or given the tools needed to build resilience in the face of these challenges.

- *Burnout, moral injury, substance use, and suicide have increased since the pandemic started (WSHA, 2020).*
- *The Joint Commission (2019) and American Nurses Association (2017) called for integration of practices that build resilience.*

Individual versus Team Resilience

While strategies for enhancing resilience of individuals are prevalent, caregivers are still experiencing emotional distress. Since care is delivered in a team setting, we look to team resilience as a strategy to help caregivers thrive despite challenging circumstances.

The Washington State Healthcare Association (WSHA) (2020) and the American Association of Critical Care Nurses (AACN) (2020) published work on building team resilience. While they offer insight, no valid and reliable tool currently exists to measure this concept.

*We describe **Team Resilience** as “homeostasis (maintaining balance and equilibrium) among the healthcare team while experiencing continuous change” (Benson et. al., 2019)*

Purpose

- Trial a novel tool to measure and help build and maintain resilience among caregivers in a hospital setting while facing multiple challenges or changes.
- Understand traits that are common among a team who could be defined as “highly resilient.”

Methods

The team resilience assessment tool consists of five domains.

- **Foundation:** behaviors and attitudes underpin the unit.
- **Structure:** shared views of workflow, expectations, roles and accountability;
- **Atmosphere:** department culture and behaviors;
- **Community:** spirit of collaboration and engagement;
- **Maintenance:** planned, scheduled cycles of process improvement;

Team Resilience Assessment: Domains Defined

Each domain has six questions answered on a Likert-like scale, ranging from Never (1) to Always (5).

Aggregated raw scores are totaled for each domain and averaged (possible range: 6-30).

Higher scores indicate greater team resilience.

A pilot test was conducted at Providence St. Vincent Medical Center on a 38-bed medical-surgical unit. This department was chosen because they are a “highly engaged” and “high-functioning team” with strong support by nursing leadership. In addition, the unit reports higher patient satisfaction and caregiver engagement scores when compared to other similar units.

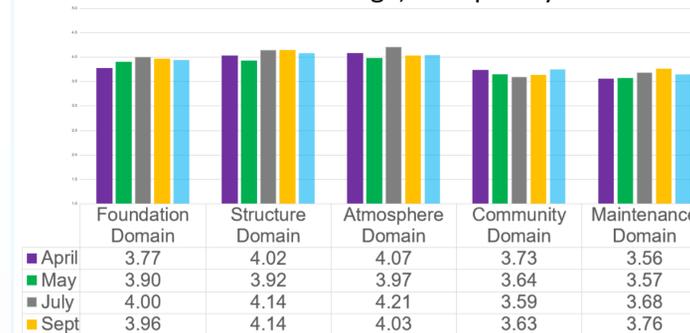
Caregivers were invited to complete the team resilience assessment anonymously five times. The first was to establish a baseline. Caregivers also completed the assessment at 1,3,5 and 7 months later, respectively. Results were analyzed during the four cycles, after which unit charge nurses used the results to analyze, brainstorm, and develop interventions to improve department-specific interventions. These interventions were devoted to recognizing individuals who upheld professional practice, encouraging self-care, team building, and supporting and uplifting teammates.

	Assess how often your team does the following:
Foundation	Reflects mission and values in all actions
	Finds joy in their work
	Strives for excellence not perfection
	Strong sense of team ownership and engagement
	Bounces back quickly from changes, tough situations
	Departmental goals are sustained
Structure	Agrees on flow of work (uses standard work)
	Understands expectations
	Works together like a well-oiled machine
	Understands roles
	Utilizes crucial conversations and chain of command when needed
	Holds each other accountable
Atmosphere	Experiences a positive team atmosphere
	Acts with integrity and professionalism
	Celebrates success
	Uses HRO tools for patient safety, shares safety concerns, near misses
	Creates a therapeutic milieu for patient healing
	Provides psychological safety for staff
Community	Engages in professional collaboration with other departments
	Resolves disagreements with other departments
	Utilizes clear line of communication with other departments
	Engages in process improvement with other departments
	Understands expectations of other departments
	Participates in cross training with other departments
Maintenance	Practices Self-Care
	Engages in teambuilding-knows each other
	Utilizes Lean or efficient practices
	Engages in process improvement
	Incorporates evidence based practices
	Engages in developing their own professionalism

Results

- Twenty-one med-surg caregivers completed the initial assessment. At repeat assessments taken one, three, five, and seven months later, a total of 12 (15%), 11 (14%), 26 (33%), and 12 (15%) caregivers participated, respectively.
- The table below shows that resilience scores maintained or improved in most domains while the pandemic was ongoing, even while the team underwent multiple changes.
- While the sample was too small to measure statistical significance, the monitoring of the resilience scores was clinically significant as it assisted the direction of unit interventions.

Resilience Score Average, Grouped by Domain



- The table below shows the traits which averaged the highest scores throughout the study.

Team Traits With Highest Scores (4.0 and higher)

Average Score	Team Traits
4.34	Act with integrity and professionalism
4.27	Understand roles
4.26	Use HRO tools for patient safety, share safety concerns, and near misses
4.16	Demonstrate a strong sense of team ownership and engagement
4.13	Understand expectations
4.12	Work together like a well-oiled machine
4.09	Incorporate Mission and Values into actions
4.08	Create an environment for patient healing
4.06	Create a positive team atmosphere
4.05	Hold each other accountable
4.04	Incorporate evidence-based practices
4.00	Utilize crucial conversations and chain of command when needed

Discussion

Potential characteristics possessed by highly resilient teams have been identified: “acting with integrity and professionalism,” “Understanding Roles,” “Using HRO tools for patient safety, sharing safety concerns, and near misses,” and “demonstrating a strong sense of team ownership and engagement.”

During this study, challenges such as the Delta COVID surge, staffing and supply shortages, practice and leadership changes ensued. Even so, the team either maintained or improved most of their domain scores (maintained homeostasis).

The charge nurses were engaged and had organizational support, which encouraged their participation. The use of this tool provided feedback for their intervention planning.

In a previous study the Unit Partnership Council (UPC) had led the team resilience work and saw a notable increase in their team’s resilience. It is unclear if the leadership of the UPC enlisted greater team engagement than the charge nurses.

A potential limitation was an Institutional Review Board (IRB) requirement to minimize leadership promotion of the survey to avoid coercion. However, we believe that the tool would be more effective for building team resilience if leaders are actively engaged with the caregivers regardless of their title.

Next steps: partner with nursing leadership and shared governance to utilize the tool across multiple specialties. IRB request to study the engagement of the team alongside the tool. More studies are needed to compare and validate the tool and understand which characteristics highly resilient teams tend to demonstrate most strongly.

Conclusion

Highly resilient teams are needed to withstand the ongoing challenges that are seen among caregivers in the hospital setting. Real time data should be used to make decisions that will impact the team’s resilience. Additionally, knowledge of resilient team traits and team resilience measurement tools should be imbedded into the unit infrastructure and utilized in collaboration with non-formal and formal department leadership to anticipate, mitigate, and navigate continuous changes and challenges.

Early indications are that this tool is beneficial and expanded trials are needed to establish reliability and validity.

References

