

Pioneer Implementation of Simulation-Based Crew Resource Management in Hong Kong Public Hospitals

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Background of Crew Resource Management

1979

1994

2001

2009

The concept of **CRM** originated from the -**National Aeronautics Space** and **Administration** air safety workshop.

CRM was first | The Institute of CRM was first | applied the operating room of the University Hospital Basel, Switzerland.

in Medicine (IOM) introduced in healthcare in recommended Hong Kong that the **CRM** I healthcare I training should setting. used be to in improve patient safety.





New Territories West Cluster Simulation-Based CRM Journey



4Q 2012

NTWC CRM Committee with representatives from various departments was established.







1Q 2013

Kick-off ceremony on CRM Training Program was held.



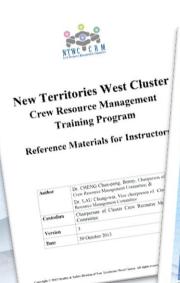


2Q 2013

A group of healthcare professionals were equipped to become Simulation-based CRM instructors.

A Simulation-based CRM curriculum was formulated.







3Q 2013 – 1Q 2014

13 Simulation-based CRM workshops with nearly 200 participants were held.













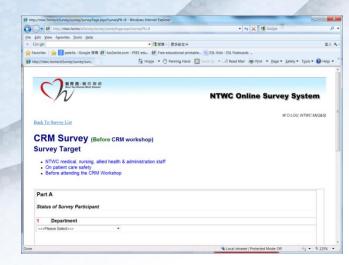


Objective

 To investigate the impact of locally adopted Simulation-based training on improving teamwork and communication skills for frontline healthcare professionals.

Methodology

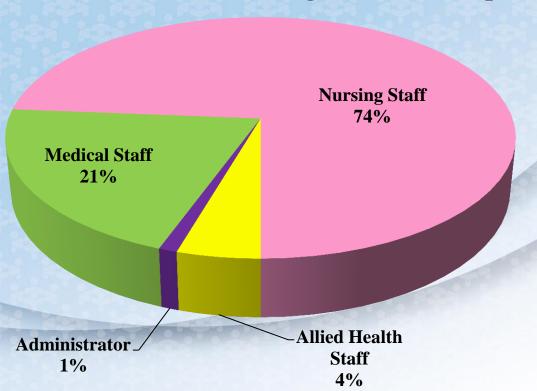
- A 12-item standardized questionnaire was used to assess participants' satisfaction with the course.
- A 32-item standardized questionnaire was administered before and after the workshop to assess the changes in participants' perception of
 - Their current work situation;
 - CRM knowledge &
 - Competency



Demographics

• From May 2013 to FEB 2014, **198** professional staff joined the Simulation-based CRM workshops.

Categories of Participants





Completion Rate of Pre & Post Questionnaires

• 168 / 198 (85%) completed pre and post questionnaires were collected at 16.6 days on average after attending the workshop.

Categories of Staff	No of Participants	No of Pre & Post Questionnaires were collected	Completion Rate (%)
Medical Staff	41	38	93
Nursing Staff	146	119	82
Allied Health Staff	9	9	100
Administrator	2	2	100
Total	198	168	85



Participants' Satisfaction Rate with the Course

Items	Satisfaction Rate (%)
Scenarios are realistic	99
Scenarios are able to facilitate decision making	98
Debriefing session is useful	98
Simulation is more powerful than lecture-based training for this program	97







Competent Level

• Participants felt **more competent** to be a team leader and a team member after joining the workshop.

	Pre- workshop Score		Post- workshop Score		
Items	Mean	SD	Mean	SD	P- value [†]
Competence as a Clinical Team Leader	5.94	1.76	7.67	1.11	<0.001
Competence as a Clinical Team Member	6.68	1.87	8.08	1.04	<0.001



[†] P-value obtained from Wilcoxon signed rank test (non-parametric test for comparing median difference of two related samples).

CRM Knowledge

• Overall, increment in CRM knowledge was statistically significant (p<0.001).

	Pre- workshop Score	Post- workshop Score	
Items	Correct %		P- value [†]
In Team Briefings , which combination best describes its major functions?	21.4	63.1	<0.001
In Team Debriefings , which is the most correct option?	79.2	80.4	0.860
Which of the following is least related to Situational Awareness ?	46.4	65.5	<0.001



[†] P-value obtained from McNemar's test (equivalent to chi-square test for repeated measures).

Attitude towards CRM Concept

 Participants' attitude towards the key elements of CRM was statistically improved.

	Pre- workshop Score		Post- workshop Score		
Items	Mean	SD	Mean	SD	P- value [†]
Team work is usually less productive than the same number of staff working alone	3.71	1.81	3.37	1.88	0.005
Hospital management provides a work climate that promotes patient safety	6.70	1.79	7.23	1.58	0.001
Your Unit encourages you to speak up to other staff about work-related problems	6.86	1.75	7.25	1.66	0.003



[†] *P*-value obtained from Wilcoxon signed rank test (non-parametric test for comparing median difference of two related samples).

Video

from Patient Safety

to High Reliability



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POH HCE / NTWC SD(P&CHC)

TMH CON(A&IC)

- TMH AC(A&IC)

TMH AC(A&IC)

- TMH / POH AC(A&E)

- TMH AC(O&G)

NTWC D(CSTC) / TMH CON(A&E)

NTWC CC(Q&S) / TMH AC(A&IC)

POH AC(M&G)

TMH AC(SURG)

NTWC O(CSTC / Q&S)

NTWC DOM(ICU)

- TMH APN(OT)

NTWC M(Q&S)



Thank You

