

CAI Resource Guide for the Webinar: *The Importance of Psychological Safety*

Webinar Learning Overview

- Understand the connection between psychological safety and both clinician wellbeing and patient safety
- Delineate the barriers that leaders face in holding powerful people accountable for their behaviors that undermine psychological safety
- Establish an organizational program to support psychological safety through education and a fair accountability process

PRESENTERS

- Jo Shapiro, MD, FACS, *Associate Professor, Otolaryngology Head and Neck Surgery Harvard Medical School; Massachusetts General Hospital, Department of Anesthesia, Critical Care and Pain Medicine; Principal Faculty, Center for Medical Simulation, Boston, MA*
- Allan Frankel, MD, *Co-Founder and CEO, Safe & Reliable Healthcare; Senior Faculty for IHI and Intermountain Advanced Training Program*

WATCH THE WEBINAR AND DOWNLOAD THE SLIDES

- Watch the webinar: <http://bit.ly/thecaiyoutube>
- Download the slides: <https://bit.ly/CAIJulyWebinar2021>

Publications

INSTITUTING A CULTURE OF PROFESSIONALISM: THE ESTABLISHMENT OF A CENTER FOR PROFESSIONALISM AND PEER SUPPORT

Jo Shapiro, MD, FACS; Anthony Whittemore, MD, FACS; Lawrence C. Tsen, MD

ARTICLE SUMMARY

An environment in which professionalism is not embraced, or where expectations of acceptable behaviors are not clear and enforced, can result in medical errors, adverse events, and unsafe work conditions. This article describes the development of the Center for Professionalism and Peer Support, shares results of the initiatives to educate the hospital community regarding professionalism, and highlights the process for managing unprofessional behavior. The findings of Shapiro et al. indicated that mandatory education sessions on professional development are successful in engaging physicians and scientists in discussing and participating in an enhanced professionalism culture. They found that the processes for responding to professionalism concerns have been able to address, and most often alter, repetitive unprofessional behavior in a substantive and beneficial manner.

Read the Article:

[https://doi.org/10.1016/S1553-7250\(14\)40022-9](https://doi.org/10.1016/S1553-7250(14)40022-9)

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HOW CAN LEADERS INFLUENCE A SAFETY CULTURE?

Michael Leonard and Allan Frankel

ARTICLE SUMMARY

Dr. Leonard and Dr. Frankel explore how effective leadership and organizational fairness are essential for patient safety within healthcare services. They discuss how leaders can influence their organizations to help create a robust safety culture—the combination of attitudes and behaviors that best manages the inevitable dangers created when humans work in extraordinarily complex environments. Great leaders know how to wield attitudinal and behavioral norms to best protect against these risks, which include:

- Psychological safety that ensures speaking up is not associated with being perceived as ignorant, incompetent, critical or disruptive
- Organizational fairness, where caregivers know that they are accountable for being capable, conscientious, and not engaging in unsafe behavior, but are not held accountable for system failures
- A learning system where engaged leaders hear patients and front-line caregivers' concerns regarding defects that interfere with the delivery of safe care, and promote improvement to increase safety and reduce waste

Read the Article:

<https://www.hptinstitute.com/wp-content/uploads/2014/01/How-can-leaders-influence-a-safety-culture-thought-paper-Michael-Leonard-Allan-Frankel.pdf>

PSYCHOLOGICAL SAFETY AND LEARNING BEHAVIOR IN WORK TEAMS

Amy Edmonson

ARTICLE SUMMARY

This paper presents a model of team learning and tests it in a multimethod field study. It introduces the construct of team psychological safety—a shared belief held by members of a team that the team is safe for interpersonal risk taking—and models the effects of team psychological safety and team efficacy together on learning and performance in organizational work teams.

Edmonson studied 51 work teams in a manufacturing company, measuring antecedent, process, and outcome variables, and found that team psychological safety is associated with learning behavior, but team efficacy is not, when controlling for team psychological safety. As she predicted, learning behavior mediates between team psychological safety and team performance. The results support an integrative perspective in which both team structures, such as context support and team leader coaching, and shared beliefs shape team outcomes.

Read the Article: <https://doi.org/10.2307/2666999>

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Additional Publication & Media

Fisher, H.N., Chatterjee, P., Shapiro, J. et al. "Let's Talk About What Just Happened": a Single-Site Survey Study of a Microaggression Response Workshop for Internal Medicine Residents. *J Gen Intern Med* 2020.

- View the article at: <https://doi.org/10.1007/s11606-020-06576-6>

Myers J, MD; Shapiro J., MD, FACS; Rosen I., MD, MSCE. Gotcha! Using Patient Safety Event Reports to Report People Rather Than Problems. *J Grad Med Educ* 2020;12 (5): 525-528.

- View the article at: <https://doi.org/10.4300/JGME-D-20-00165.1>

Pavlidis I, Zavlin D, Khatri AR, et al. Absence of Stressful Conditions Accelerates Dexterous Skill Acquisition in Surgery. *Scientific Reports* 2019; 9:1747.

- View the article at: <https://doi.org/10.1038/s41598-019-38727-z>

Shapiro J. We Have Enough Information To Act. *Otolaryngol Head Neck Surg* 2018; 158(6):985-986.

- View the article at: <https://doi.org/10.1177/0194599818764887>

Shapiro J. Cultural Transformation in Professionalism. In: *Medical Professionalism: Best Practices*, eds. Bynny RL, Papadakis MA, Paauw DS. Menlo Park, CA: Alpha Omega Alpha Honor Medical Society 2015.

- View the article at:
<https://alphaomegaalpha.org/pdfs/2015MedicalProfessionalism.pdf>

Rudolph J, Raemer D, Shapiro J. We Know What They Did Wrong, But Not Why: The Case For "Frame-Based" Feedback. *Clin Teach* 2013 *Fun*;10(3):186-9.

- View the article at: <https://doi.org/10.1111/j.1743-498X.2012.00636.x>

H. N. Dinesh, Ravya R. S., Sunil Kumar V. Surgical safety checklist implementation and its impact on patient safety. *Am J Surg* 2009;197(5):678-85

- View the article at: <http://dx.doi.org/10.18203/2349-2902.isj20184637>

Rosenstein AH, O'Daniel M. A survey of the impact of disruptive behaviors and communication defects on patient safety. *Jt Comm J Qual Patient Saf* 2008; 34(8):464-71.

- View the article at: [https://doi.org/10.1016/S1553-7250\(08\)34058-6](https://doi.org/10.1016/S1553-7250(08)34058-6)

Hickson GB, Pichert JW, Webb LE, Gabbe SG. A complementary approach to promoting professionalism: identifying, measuring, and addressing unprofessional behaviors. *Acad Med* 2007;82(11).

- View the article at: <https://doi.org/10.1097/ACM.0b013e31815761ee>

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Additional Publication & Media (Continued)

Davenport DL, Henderson WG, Mosca CL, Khuri SF, Mentzer RM Jr. Risk-adjusted morbidity in teaching hospitals correlates with reported levels of communication and collaboration on surgical teams but not with scale measures of teamwork climate, safety climate, or working conditions. *J Am Coll Surg* 2007;205(6):778-84.

- View the article at: <https://doi.org/10.1016/j.jamcollsurg.2007.07.039>

Hansen AM, et al. Bullying at work, health outcomes, and physiological stress response. *J Psychosom Res* 2006 Jan;60(1):63-72.

- View the article at: <https://doi.org/10.1016/j.jpsychores.2005.06.078>

Suchman, A.L. A New Theoretical Foundation for Relationship-centered Care. *Journal of General Internal Medicine* 2006;21: S40-S44.

- View the article at: <https://doi.org/10.1111/j.1525-1497.2006.00308.x>

Gittell JH, Fairfield KM, Bierbaum B, Head W, Jackson R, Kelly M, Laskin R, Lipson S, Siliski J, Thornhill T, Zuckerman J. Impact of relational coordination on quality of care, postoperative pain and functioning, and length of stay: a nine-hospital study of surgical patients. *Med Care* 2000;38(8):807-19.

- View the article at: https://journals.lww.com/lww-medicalcare/Fulltext/2000/08000/Impact_of_Relational_Coordination_on_Quality_of.5.aspx