# Simulation en santé et innovations pédagogiques

# Crisis resource management

# **Erreurs humaines**

## Incidence élevée

- Urgences
- Soins intensifs
- Bloc opératoire

# **Erreurs humaines**

# Facteurs de risque

- Complexité
- Intervenants
- Multidisciplinarité
- Criticité

# **Erreurs humaines**

- Travail d'équipe
- Gestion quotidienne des crises



Opérationnalisation des compétences non techniques



CRM crisis resource management

# CRM & CRM

- Cockpit resource management
- Crew resource management
- Company resource management
- Crisis resource management

Ensemble des compétences non techniques, nécessaires à la gestion d'une situation de crise



Coordonner, utiliser et intégrer toutes les ressources disponibles, pour assurer la sécurité du patient

# Compétences non techniques

# Habiletés inter-personnelles

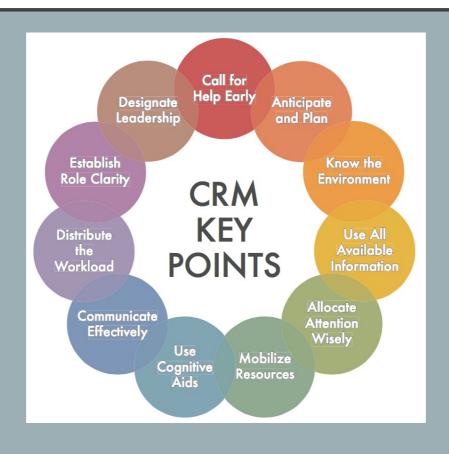
- Leadership
- Communication
- Attribution des rôles

# Habiletés cognitives

- Anticipation
- Planification
- Conscience/situation







- I. Appeler à l'aide précocement
- 2. Anticiper et planifier
- 3. Connaître l'environnement
- 4. Utiliser toutes les informations disponibles
- 5. Allouer judicieusement l'attention
- 6. Mobiliser les ressources

- 7. Utiliser les aides cognitives
- 8. Communiquer efficacement
- 9. Répartir la charge du travail
- 10. Établir des rôles clairs
- II. Désigner un leader

## CRISIS RESOURCE MANAGEMENT

## Call for Help Early

- · Call for help early enough to make a difference
- . Err on the side of getting more help
- . Mobilize early personnel with special skills if they may be needed

## Designate Leadership

- · Establish clear leadership
- Inform team members who is in charge
   'Followers' should be active in asking who is leading

## Establish Role Clarity

- · Determine who will do what
- · Assign areas of responsibility appropriate to knowledge, skills, and training
- · Active followers may offer specific roles

## Anticipate and Plan

- . Plan & prepare for high work-load periods during low work-load periods
- . Know where you are likely headed during the crisis and make backup plans early

### Know the Environment

- · Maintain situational awareness
- . Know how things work and where things are
- . Be aware of strengths and vulnerabilities of environment

### Use All Available Information

- · Monitor multiple streams of data and information
- · Check and cross check information

## Distribute the Workload

- · Assign specific tasks to team members according to their abilities
- · Revise the distribution if there is task overload or failure

## Allocate Attention Wisely

- · Eliminate or reduce distractions
- · Monitor for task saturation & data overload
- · Avoid getting fixated
- · Recruit others to help w/ monitoring

## Communicate Effectively

- · Command and request clearly
- . Seek confirmation of request (close the loop)
- · Avoid "thin air" statements
- · Foster input and atmosphere of open information exchange among all personnel

## Mobilize Resources

· Activate all helpful resources including equipment and additional personnel

## Use Cognitive Aids

- · Be familiar with content, format, and
- . Support the effective use of cognitive aids

## **TEACHING THAT COUNTS**

# **CRISIS RESOURCE** MANAGEMENT (CRM) IN MEDICAL SIMULATION

3 Key Principles to Teach **Your Learners** 

#### WHY IS CRM IMPORTANT?



- Optimizes team performance in high-stakes environments, like the ED
- Reduces medical error
- Improves patient safety

#### 3 Key Principles of CRM

## 1. Closed Loop Communication

- Transmitter sends message
- Receiver acknowledges receipt
- Receiver confirms task was completed, closing loop









### 2. Role Clarity

- Each team member has a role explicitly delegated by the team lead
- Ex. Team lead, Recorder, Airway Manager, Medication Administration
- Roles will differ with each unique clinical scenario
  - Ex. In an academic ED an RT might be airway manager. In a rural ED the physician may take this role.







#### Assign a single task to a team member at a time

- E.g. say "Give 2 mg lorazepam IV now" vs "Give 2 mg IV lorazepam now, and if the patient doesn't stop seizing then give another 2 mg IV"
- Start with the most critical task (e.g. epinephrine first in anaphylaxis before solumedrol)

#### 3. Situational Awareness



• Be aware of changes in the patient's condition. Ex. Reassess ABCDEs, repeat vitals and physical exam.



· Share your mental model.

Ex. "This patient is having a STEMI."



· Gather feedback from your team.

Ex. "What else could we do?". "What am I missing?"

https://litfl.com/crisis-resource-management-crm/ https://emsimcases.com/2015/04/07/crisis-resource-management/ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4803430/

