



Welcome

Welcome to the Long-Term Care version of TeamSTEPPS. This module was created specifically for nursing homes but can be easily adapted and applied to other long-term care settings such as assisted living and continuing care retirement communities. The core concepts of the TeamSTEPPS program—fostering teamwork and communication skills to improve care quality and patient safety—have not changed. What has changed are the examples, discussions, and exercises, which have been adapted to reflect the unique environment of nursing homes.

The curriculum contains not only new examples tailored to the long-term care environment, but also numerous other supplemental teaching materials available under Tab I, Specialty Scenarios. Most important, instructors are encouraged to customize the curriculum by sharing their real-world stories and motivating their audiences to relate their own experiences. We are excited to bring this evidence-based training curriculum to long-term care and hope that it proves useful in staff development and training.

A Few Notes About the Long-Term Care Version

- In nursing homes, the word “**resident safety**” can evoke thoughts of clutter-free hallways and the absence of scatter rugs. References to the home’s safety committee also may come to mind. However, resident safety means so much more than just physical plant or environmental safety precautions. TeamSTEPPS is about the processes and systems that can support resident safety during care delivery. TeamSTEPPS promotes the effectiveness of teams and team performance to reduce the likelihood of medical errors. Although TeamSTEPPS is referred to as a “program,” it is important to recognize that attention to resident safety is a continuous approach to delivering care and not a program with a start and end date.
- **Transformational change** refers to the recent movement to place the needs, interests, and choices of residents at the center of care practices, which is also known as “culture change,” “resident-centered care,” “resident-directed care,” and “person-centered care”. The TeamSTEPPS program also discusses culture change, but the focus here is on improving teamwork and communication skills in order to promote the delivery of safe patient care. To avoid confusion, within the Long-Term Care version, we have taken the position that safe resident care practices, including those taught as part of the TeamSTEPPS program, are considered a critical component within person-centered care and associated culture change activities.
- Throughout this Long-Term Care version of TeamSTEPPS are **language changes** that instructors should be aware of and should discuss with their audience. The most notable is the change from “patient” to “resident.” Typically, individuals living in nursing homes are referred to as residents. This label change evolved as patients were living in nursing homes over longer terms, especially as permanent residents in the last years of life. However, we are aware that some individuals in nursing homes prefer to be called patients, not residents. Usually subacute and short-term nursing home “guests” prefer to be identified as patients, reinforcing that their stay is short term. Instructors should use the term that best applies to the audience they are teaching.



- Throughout the Long-Term Care version of TeamSTEPPS, we reference **residents and their families**. We realize that the word “family” is unique to each person and defined in accordance with their personal experiences and lifestyle. We recognize and honor the role that friends and significant others can play in residents’ lives. When “family” is mentioned throughout this manual, it is meant as an all-inclusive term. It is also important to note that residents of nursing homes and other long-term care settings may have formal or legal designations for persons appointed to make health care decisions on their behalf. The reference to family will apply to a legally appointed health care proxy, agent, or other formal designee as well.

Note to Instructors

We encourage instructors to consider the above-mentioned changes in the context of the audience. It may be necessary, for example, to lead a discussion about the changes to help correct misconceptions and preconceived notions. Discussions can also help prepare the trainee audience to acknowledge a new way of interpreting their work environment and accept new ideas for an improved and expanded culture. Good luck and enjoy.