

Fostering a Culture of Healthcare Quality through Localized Model of Learning Teams

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INTRODUCTION

Learning Teams, a novel concept in quality management, emphasizes operational learning to reinforce strategic understanding, distinct from traditional safety dialogues. Focused on collaborative learning among teams, it enables organizations to comprehend the complexity of work, establishing an adaptable and resilient healthcare system. Beyond issue resolution, Learning Teams strive to deeply understand contextual factors, enhancing the organization's capacity to navigate change and shape a more resilient work environment.

Our objective is to foster a sustainable and resilient healthcare culture by promoting Learning Teams. We planned to introduce localized learning teams among professionals to enhance patient care.

METHOD

Before the hospital-wide launch of Learning Teams, we conducted a pilot study with a localized approach in the Quality management Department. Prior to full-scale implementation, our Quality management Department held three internal meetings to discuss execution, review literature, and consider hospital needs and staff characteristics. Following the initial implementation, we extended our Learning Teams model to other departments. These sessions aimed to ensure a localized approach tailored to our institution's specific context and requirements.

RESULTS

We conducted three internal meetings to plan the execution, followed by an assessment of the pilot study's outcomes. The process included an internal pilot in December 2023, where initial results showed a 33.3% (4/12) willingness to express opinions openly and a 100% (12/12) commitment to ongoing implementation within the Quality management Department. In addition to continued activities in the Quality management Department, we extended Learning Teams to other units until the end of June 2024, including the Department of Psychiatry, the Operating Room, and the One-Day Hospitalization Ward. Subsequent steps involved hospital-wide educational lectures, team leader sign-ups, and quarterly workshops to facilitate group learning and refine the implementation approach. Alongside quantitative results, we received positive qualitative feedback.

Table1 Quantity and Quality Outcomes of Localized Learning Teams of TMUH (Jan 2024~June, 2024)

Unit	Quality management Department	Department of Psychiatry	Operating Room	One-Day Hospitalization Ward
Category	Everyday Learning Teams	Everyday Learning Teams	Event Learning Teams	Event Learning Teams
Number of members	>10	>10	5	5
Number of sessions	16	16	2	2
Duration of each session	13.4 mins	25.0 mins	58.5 mins	34.2 mins
Satisfaction rating by session facilitator(0~5)	5.0	5.0	5.0	5.0
Satisfaction rating by members (0~5)	4.4	5.0	4.9	5.0
Quality feedback	1.The issue is that the team itself needs to have interest (or necessity) for the initiative to continue. 2.No particular thoughts. 3.Understanding the clinical challenges caused by the mobile phone functionality restrictions in our hospital. 4.Clarifying mutual expectations in situations involving official dealings with other units. 5.In a work context, there was a communication issue with another department where they refused important presentation updates. After clarifying and confirming the relevant situation, colleagues presented the content under the other framework for the update.	1. We are able to have weekly meetings, and this model helps to keep our team cohesive and aligned consistently. 2.Everyone can freely express their thoughts.	1. We can gain a deeper understanding of the real situation and the challenges involved. 2. Understandably, the operating rooms at the other two hospitals have not yet implemented this system. 3.A very effective way of discussion. 4. Open discussions are very beneficial.	1. Great! It allows us to see things from different perspectives. 2. Understanding the unit's overall situation. 3. There are certain issues between managers and colleagues that cannot be discussed together.

CONCLUSIONS

Preliminary results from the Quality Management Department's internal pilot indicate a promising start for the Learning Teams model. There is a notable willingness among staff to express their opinions and a unanimous commitment to ongoing implementation, establishing a strong foundation for hospital-wide adoption. Subsequent feedback from other units has also been positive. As we anticipate a broader rollout, this study may offer an effective strategy to enhance professional performance, foster collaborative synergy, and maintain a steadfast commitment to high standards of care. These efforts collectively project positive future outcomes for the entire hospital.

REFERENCES

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