

# Welcome to *Cracking the Healthcare Leadership Code; How Purpose, Humility, and Accessibility Can Transform Your Organization* Tool Kit

## Breaking down the power gradient Introduction

This is a companion piece meant to be used as a supplement to *Chapter Six: Breaking Down the Power Gradient*, in the book titled, *Cracking the Healthcare Leadership Code: How Purpose, Humility, and Accessibility Can Transform Your Organization*. In healthcare, mistakes and errors that are potentially harmful, even fatal, to patients are often the results of poor communication among team members. Leaders should not underestimate the magnitude of impact that a steep power gradient can have on a highly competent professional's decision-making process. Specifically affected is their willingness to speak-up even when they know or strongly suspect that something is wrong.

While chapter 6 itself is full of self-reflection, personal examples, and practical examples to “breakdown” the power gradient, this toolkit is designed as a comprehensive (*everyone has a role*) yet simplified approach for reducing the power gradient in your organization.

### Inside you will find the following:

1. A list of [key concept definitions](#) related to the topic of “power gradient”
2. An [introduction](#) highlighting the impact and consequences of steep power gradients including an outline of a three-tiered comprehensive framework to “breaking down” the power gradient (Organization, Leaders, Team members).
3. [Six calls to action](#) – Activities supported by researchers, field engineers, and healthcare practitioners to reduce the power gradient in an organization. Simple Tools are aligned within each of the Six calls to action to start you on your journey towards “breaking down” your organization's power gradient.

### Use this mini-toolkit in the way that works best for you:

- As a resource for your leadership team to gain situational awareness of the impact of power gradients.
- As a snapshot, highlighting where your organization is with each call to action and what to do next - or as a blueprint to guide you in choosing your next priorities.
- As an orientation piece for new leaders
- As a refresher for your leadership team

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## Key Definitions

**Power Gradient:** A term referring to the *feeling* of inferiority or superiority between individuals. This feeling can originate from formal (chief executive officer and manager) or informal (disparity in age, organizational tenure, strength in personality, etc.) differences in power. It is the perceived difference in the importance between one person and another. (note: the term power gradient is often used synonymously with the term authority gradient).

**Authority Gradient:** A term defined in 1970's and 1980's in aviation when failure analysis of aircraft accidents identified human factors as a leading cause of loss events. Specifically identified were first officers' failures to challenge the incorrect and dangerous decisions of their captains despite their recognition of danger to self and others because of the difference in authority.

**Horizontal culture:** A culture in an organization that has minimized the power gradient between individuals. People relate and interact as equals, regardless of formal or informal differences.

**Vertical culture:** A culture in an organization that accepts and depends upon large power gradients between individuals.

**Hierarchical leadership:** A clearly delineated ranking of individuals within an organization from the lowest to the highest levels of authority. Employs top-down pyramid shaped structure with a narrow center of power that trickles down to widening based of subordinate levels. Often reflects the organization's decision-making structure.

**Rapid Chain of Command:** A simple chain of command defined clearly to reduce the time to get a decision when an individual is expressing a concern.

**Non-technical Skills (NTS):** Non-technical skills (NTS) are a set of social and cognitive skills used to improve performance. Traditional categories of NTS include situational awareness, decision-making, communication, teamwork, and leadership. Non-technical skills enable team members throughout the organization to exchange information about their perceptions on how to support error detection, share critical information, and generate a team-level, shared mental model of understanding. The failure of NTS has been linked as causes of harm, including deaths, in healthcare as well as other industries such as aviation and nuclear power.

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## Introduction

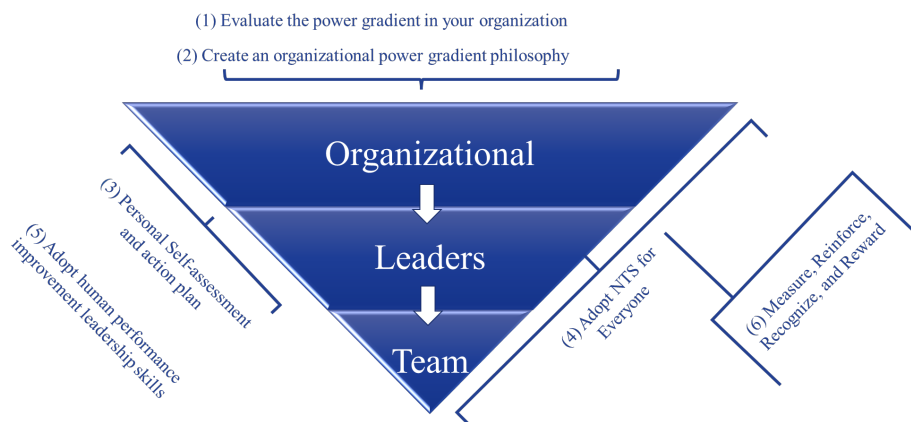
Despite evidence highlighting the negative impact of steep power gradients on the success of organizations in all industries, it is still prevalent in healthcare. This unfortunately results in harm events (both patient and team member injuries), increased burnout, loss of productivity, decreased engagement, high turnover, and lack of innovation, leading to financial and cultural challenges. Although the decision to speak-up is complex, dynamic, and situation-dependent (Hubbard & Chicca, 2022), steep power gradients have a strong correlation to individual decision making, including the decision to speak-up when an individual perceives a safety risk.

In healthcare, the failure to speak-up and/or to communicate effectively has also led to significant harm events world-wide. In Japan, a 3-year retrospective review of fatal medical accidents submitted to a third-party safety organization found roughly 50% of the fatalities were due to failures of not using non-technical skills, most often related to situational awareness, teamwork, and decision-making (Johnson & Aggarwal, 2020), all which are strongly related to steep power gradients. A different study that reviewed trauma and orthopedic-related adverse events from a national reporting and learning system found many to be related to loss of situational awareness (52%), communication/teamwork (21%), leadership (16%), and decision making (12%). Addressing cultural influencers such as steep power gradients and non-technical skills are essential for delivering safe care (Johnson & Aggarwal, 2020).

Poor patient outcomes are not the only consequences of a steep power gradient. Caregiver shortages are becoming an epidemic in healthcare and one of the top causes of stress that is contributing to the shortage are the pressures associated with steep power gradients. Healthy organizations that foster environments of purpose, mutual respect, inclusivity, communication, and integrity, founded upon the elimination of a power gradient, will not only overcome the myriad challenges of healthcare, but will thrive.

A comprehensive framework that engages the entire healthcare system is necessary for an organization to “break down” the power gradient. The system model by David D Woods considers how decisions made at the administrative level impact the delivery of care. We, as leaders, are responsible for creating policies and procedures, designing efficient and effective processes, providing technology and healthy work environments, and removing obstacles and providing resources to achieve goals. However, most importantly, we are responsible for shaping the culture of our organizations.

Flattening the power gradient begins with senior leadership. Their attitudes, beliefs, and actions will influence the next level of leaders, and in turn their attitudes, beliefs, and actions will cascade to the “sharp end” of the system to shape the attitudes, beliefs, and behaviors of the team caring directly for patients, residents, or clients. This toolkit highlights **Six Calls to Action** to help “break down” an organizations power gradient. They are arranged to cascade from the organizational level to the operational leadership levels (*administrative and medical hierarchies*) to be inclusive of EVERYONE in the organization.



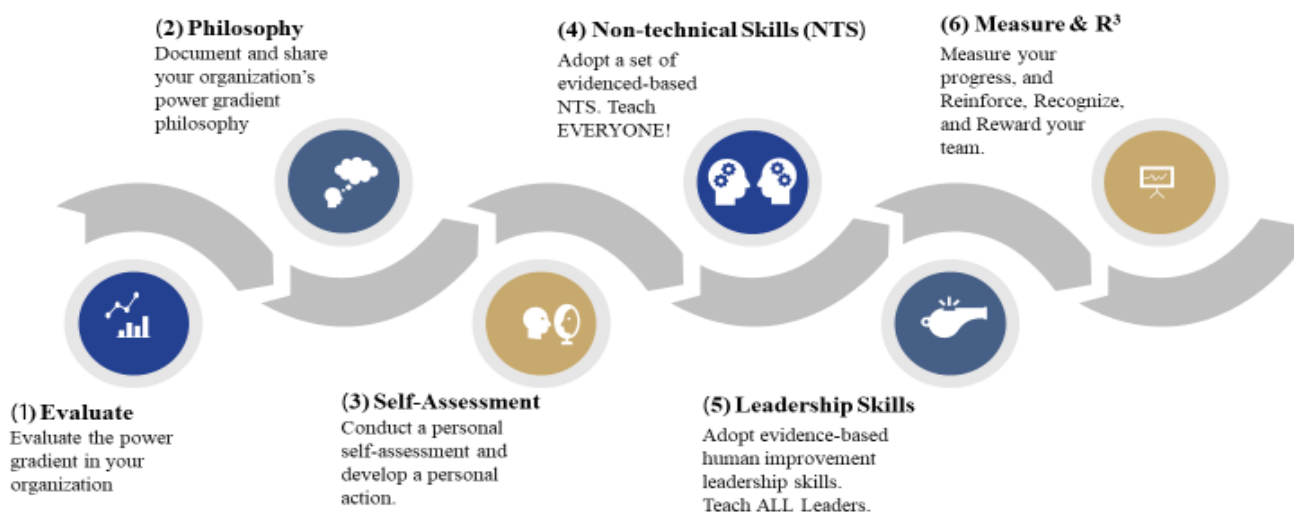
Adapted from Woods and Cook, The model for blunt end to sharp end (1999)

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## Overview of the Six Calls to Action with Supportive Tools

### Six Calls to Action: “Breaking Down” the Power Gradient in Your Organization



TOOLS

1

Evaluate the power gradient in your organization

**TOOL: Metric/Intervention Timeline Graph**

2

Document and share your organization's power gradient philosophy

**TOOL: Power Gradient Philosophy Statement**

3

Conduct a personal self-reflective assessment and develop a personal action plan

**TOOL: Self-Assessment**

4

Adopt evidence-based non-technical skills to improve individual and team performance. Teach Everyone!

**TOOL: Create a NTS and Leader Skill One Page Summary**

Adopt evidence-based human performance improvement leadership skills. Teach ALL Leaders

5

**TOOL: Messaging**

6

Measure your progress, Reinforce, Recognize, and Reward your Team

**TOOL: Non-technical Skill Simulation**





# Evaluate the power gradient in your organization

## TOOL: Metric / Intervention Timeline Graph

### Call to action Overview:

#### Evaluate the power gradient in your organization:

Senior leadership teams need to have situational awareness of the extent to which the power gradient is impacting the performance of the organization, including understanding of team psychometrics (perception of safety culture) and operational experience (lessons learned) from previous events of harm.

## TOOL: Metric / Intervention Timeline Graph Instructions

A metric / intervention timeline graph is an approach that helps leaders track their efforts (initiatives) to improve performance. Most healthcare organizations use a survey instrument to assess their safety culture which will include specific questions capturing the team's thoughts related to teamwork, leadership support, and willingness to speak-up.

**Step 1:** The senior executive team initiates a review of the most recent survey results with a focus on the questions related to power gradient. (Example questions and findings on next page)

**Step 2:** Draw conclusions from the data which should include the overall performance of the organization, the performance of each department, the performance of various roles (clinical such as physicians, nurses, and therapists and non-clinical such as information technology, human resources, and plant operations) and the performance at different ranks (vice-president, director, manager, etc. ). Keep in mind that leadership will less often recognize power gradient issues since, by definition, the steepness of the power gradient is determined by the perception of subordinates.

**Step 3:** Capture a baseline result for each question and track annually. Shaping culture takes time; years in fact.

**Step 4:** As you complete each "Call to Action" activity targeting the power gradient, document the date of implementation on the graph.

**Step 5:** Although the survey is most often annual, there are surrogate markers for improvement in flattening the power gradient. For example, measurement of the percent of incident reports that are filed anonymously; the lower the percentage, the more comfortable people feel in speaking up.

# Evaluate the power gradient in your organization

## TOOL: Metric/Intervention Timeline Graph

### Example:

The AHRQ Survey on Patient Safety Culture™ (SOPS ®) assesses the safety culture of an organization. The questions enable leaders to identify the extent to which the power gradient may be affecting team decision making at a macro level (organizational) and at a micro level (unit, role, and rank).

Using the AHRQ survey for Hospitals as our example, below is a list of specific questions to help leaders assess an organization's power gradient. The survey is organized into culture composites which are intended to represent important groupings (*Teamwork, Leader Support, Organizational Support, Communication Openness, etc.*)

### Teamwork

- ❖ There is a problem with disrespectful behaviors by those working in this unit
- ❖ In this unit, we work together as an effective team

### Supervisor, Manager, or Clinical Leader Support for Patient Safety

- ❖ My supervisor, manager, or clinical leader takes actions to address patient safety concerns that are brought to their attention...

### Communication openness:

- ❖ In this unit, staff speak-up if they see something that may negatively affect patient care
- ❖ When staff in this unit see someone with more authority doing something unsafe for patients, they speak up
- ❖ When staff in this unit speak up, those with more authority are open to their patient safety concerns.
- ❖ In this unit, staff are afraid to ask questions when something does not seem right

### Hospital Management Support for Patient Safety

- ❖ The actions of hospital management show that patient safety is a top priority

Note that these questions are from a safety survey and thus they are worded with that focus. However, similar questions can be created to assess other areas of focus or to assess culture more globally.



# Document and share your organization's power gradient philosophy

## TOOL: Power Gradient Philosophy Statement

### Call to action Overview:

**Prepare an Organizational Power Gradient Philosophy.** Position statements that outline the philosophy of the organization on a particular essential topic have been found to influence team members decisions during critical situations. For example, organizations with strong cultures of psychological safety often include a position statement on 'just culture' as a part of a comprehensive management system (Clapper, 2019). Creating an organizational statement that outlines the philosophy on power gradients will establish a direction with expectations for those working in the organization.

## TOOL: Power Gradient Philosophy Instructions

**Step 1:** Form a core group of leaders representing all disciplines, roles, and ranks

**Step 2:** Capture key points representing the organization's position toward the power gradient to then create a position statement

**Step 3:** Develop your plan for sharing the statement with all team members, making it widely visible in multiple formats and locations (intranet, newsletters, computer backgrounds, meeting agenda templates, etc.)

**Step 4:** Continuously refer to the statement during messaging, daily briefs, teaching, and coaching.

**Step 5:** Hold everyone accountable to working in accordance with the statement

## Example Power Gradient Philosophy Statement

*Power gradient is an organizational psychology term defined by the person who perceives themselves as less important than or inferior to another person. Power gradients exist in all organizations and cultures. Our organizational hierarchy, our titles, years of experience, educational degrees, and special privileges all influence our perceptions of others and create steepness within our power gradient. We intend to "break down" the steepness of our power gradient for the benefit of our patients, our organization, and each other.*

*Our organization believes the following...*

- ❖ Everyone in our organization has an important role in serving our patients. No role holds more importance than another.*
- ❖ Every team member deserves to be respected and provided an opportunity to be heard whenever they feel uncomfortable or have a concern*
- ❖ Leaders will always support those who voice a concern.*
- ❖ We will thank each other for asking clarifying questions, expressing concerns, and asserting through our rapid chain of command when feeling unheard (Inquiry, Advocacy, and Assertion).*

# Conduct a personal self assessment and develop a personal action plan.

## TOOL: Self-Assessment

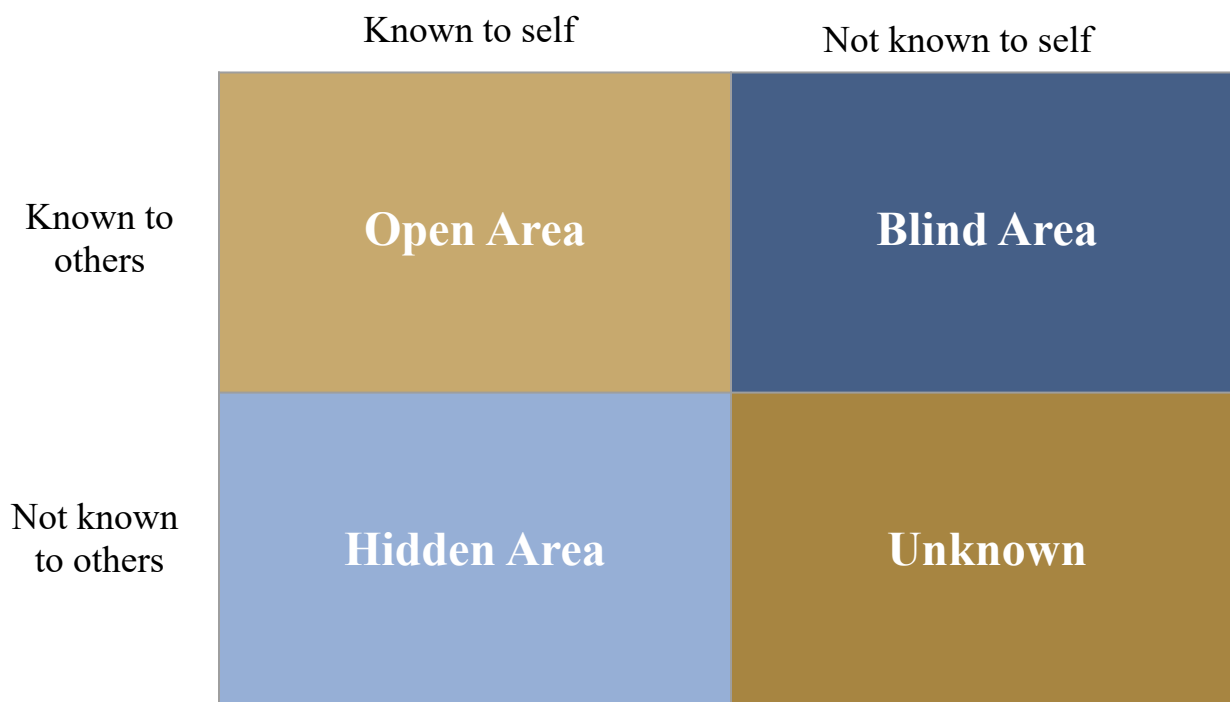
### Call to action Overview:

**Conduct a personal, self assessment and develop a personal action plan.** Once leaders (*clinical and non-clinical*) throughout the organization understand the concepts and the impact of a steep power gradient on the patients, the organization, and each other, ask each leader to conduct a personal, self-assessment to identify attitudes and behaviors that may be contributing to steep power gradients.

Self-assessments are valuable personal investments that will greatly benefit yourself, those you lead, your organization, and ultimately the patients. The Johari Window, created by psychologists Luft and Ingham, is an effective framework to organize a self-assessment. It is based upon how someone is perceived by others, as well as how someone is perceived by themselves. As it pertains to power gradient, the self assessment will be focused on attitudes, behaviors, motivations, values, communication, interpersonal interaction, leadership style, and actions, to understand how these may be contributing to steep power gradients around you (not on technical skills or knowledge).

A self-assessment is critical for leaders to be successful as it is common for those in a position of authority (either formal or informal) to not realize how they are contributing to a power gradient. Ironically, it is even more common for leaders who create large power gradients to have even less personal insight. This personal assessment should be repeated from time to time.

### Johari Window





# Conduct a personal self-reflective assessment and develop a personal action plan.

## TOOL: Self-Reflection Assessment Instruction (Cont.)

**Step 1:** Review the twelve questions below to provide a starting point for a self assessment. Consider personalizing the questions, adding additional questions, or removing questions that are less relevant.

**Step 2:** Ask leaders to take the time to deeply reflect and answer each question.

**Step 3:** Ask others to provide feedback as well. Colleagues who you work with closely, colleagues that report to you, and colleagues who you report to.

**Step 4:** Based on the self assessment, leaders should create a list of things they would like to improve.

**Step 5:** Share the list with others with a request for them to provide ongoing feedback and accountability.

## TOOL: Self Assessment Questions

1. Other than a formal position with a title, how else may I be considered a person of authority? (For example: a surgeon in the operating room, a hospitalist running a code, a leader of a committee, etc.)
2. Are there personal characteristics that may cause others to perceive me as a person of authority? (For example: educational level, organizational tenure, years of experience, strength of personality, age, etc.)
3. Do I have position related 'perks' that may be perceived by others as being superior? (For example: a large corner office, a designated parking spot, etc.)
4. Are there non-verbal habits that may convey a message that I am more important than someone else? (For example: crossing arms during a conversation, don't engage eye contact, checking mobile devices during a conversation or meeting, etc.)
5. Are there verbal habits that may convey a message that I am more important than someone else? (For example: interrupting others, using the word "I" instead of "we", etc.)
6. Am I cognizant of the where and how I meet with others? (For example: having one-on-one meetings where I sit across a desk from someone in my office, instead of across from a table in a small conference room)
7. Do I have a title that formalizes a relationship? (For example: do I have colleagues call me Dr. Joseph, or Kevin)
8. Do I actively encourage inquiry? (For example: do I ask others "what questions may I answer for you" or do I ask others if I communicated my thoughts in a way that was clear)
9. What is my response to constructive feedback? (For example: am I grateful, defensive, upset, etc.)
10. How do I respond when someone raises a concern? (For example: do I thank them for speaking up or do I make them feel inferior if their concern was not valid)
11. Do I close the loop? (For example: do I ignore emails or text messages, do I follow up on concerns that were raised, do I provide situational updates when actions are delayed, etc.)
12. What leadership practices have I adopted to create an atmosphere of inclusivity and appreciation for the unique thoughts, perceptions, and expertise of all others? (For example: daily huddles, rounding, feedback sessions, etc.)



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## Non-technical skill (NTS)

### **Call to action Overview:**

**Adopt evidence-based social and cognitive non-technical skills to improve individual and team performance. Teach Everyone!**

Failure of non-technical skills have been linked to poor quality and safety of care including death. Adopting NTS in both clinical AND non-clinical support services is essential to the reliability of organizational performance and to breaking down the power gradient. It is essential that for everyone in the organization to understand and be engaged in using and reinforcing NTS.

Internal dynamics among people influence decision making, including the decision to take a *risk (a feeling of psychologically safety)* by asking a question or speaking up to someone perceived as having more power. It is human nature to manage risk in order to minimize harm to ourselves, including “self-image.” This is especially true in relationships with leaders and others considered important. If the risk is perceived to be high, evidence has shown that our instinct to protect ourself can be strong enough to override our choice to speak-up, even when there is potential for others, or even ourself, to be harmed.

Since the Institute of Medicine (IOM) in the USA issued “To Error is Human” in 1999, much effort has been made to improve patient safety. The importance of NTS in preventing medical error has gradually become more obvious since the 2000s with the realization that it is not sufficient to rely solely on equipment and technical skills.

Industries that understand and focus on non-technical skills have shown that 70% of human errors are preventable using bundles of NTS. In 1999, NTS was introduced to healthcare as a part of human performance improvement within safety management systems (Clapper, Johnson, Chui, PII). Since 1999, healthcare systems that have adopted NTS have achieved 50-80% reductions in significant harm events. The first healthcare book to capture the progress associated with NTS usage within a safety management system was published in 2019, *ZERO Harm: How to Achieve Patient And Workforce Safety in Healthcare*, by Craig Clapper et al.

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## Tool Kit

### Social and Cognitive NTS Overview

Although there is no standard set of NTS for healthcare organizations, there are NTS that target the reduction of the power gradient. There are also leadership tools to help reinforce and hardwire NTS throughout an organization. It is recommended that organizations start with a small set of skills for individuals, teams, and leaders. Once mastered, then expand the the NTS with the additional of other skills.

Below is a sample of NTS used across multiple industries, including healthcare. Highlighted in **BLUE** are skills that individuals and team members can use to break down the power gradient. Skills and leadership tools in **RED** are **essential** for reducing the power gradient AND reinforcing good practices going forward to sustain your gains. *To learn more about each skill see "Reference List".*

NTS for Individual Performance	NTS for Team Performance	Leadership Tools to Reinforce Human Performance Improvement
Self-check with STAR (Stop, Think, Act, Review)	Repeat-backs & Read Backs (closed loop 3-way communication)	<b>Daily briefs (huddles) – Atmosphere of inclusivity</b>
<b>Questioning Attitude (AKA: Validate and Verify, Qualify Validate and Verify)</b>	Phonetic clarification	System huddles (tiered)
Task Review	Numeric clarification	<b>Story telling &amp; Messaging</b>
Situational Awareness	<b>Clarifying Questions</b>	Safety First Decision Making
Procedure/Work Instruction Use and Adherence	SBAR (Situation, Background, Assessment, Request/Recommendation)	<b>Standing up for those who speak-up for safety</b>
Verify and Validate (self-check)	Peer Coaching	<b>Local Learning Systems – Deference to Expertise (Meaningful Work)</b>
Place keeping	<b>Cross checking</b>	Provide Feedback
Flagging/Robust Barriers	Pre-job brief	<b>Human Performance Assessments – Teaching NTS Every Day</b>
<b>Connect and Greet</b>	Reverse briefs	Rounding
<b>Introduce yourself and provide role clarity</b>	Two-minute drill	Just Culture Guide (Culpability management)
<b>Expect and invite clarifying questions</b>	Post Job briefs	Top 10 list
<b>Communicate positive intent of your actions</b>	Concurrent verification	Unit TOP 2
<b>Active listening to learn</b>	Independent Verification	Action Planning
	<b>Inquiry, advocacy, assertion</b>	<b>Establish a Rapid Chain of Command</b>
	<b>Follow Rapid Chain of Command</b>	
	<b>Speak-up with PACE (Probe, Alert, Challenge, Emergency)</b>	
	<b>Speak-up with CUS (Concerned, Uncomfortable, Scared)</b>	
	<b>Speak-up with ARCC (Ask, Request, Concern, Chain of Command)</b>	
	Two Challenge rule	
	<b>Brief, Execute, Debrief (Pre-job brief and Post job brief with feedback)</b>	
	Readiness Checks (Leader Authorization, Brief, Task, Debrief, Sign-off (competency check)	
	Decision making (STEP)	
	Handovers/Hand-offs	
	<b>Insitu Simulation (NTS)</b>	
	Big lens/Little Lens	
	Call-out	

# Adopt a set of evidence-based non-technical skills. Teach EVERYONE!

## TOOL: Create a One-Page Summary

**Step 1:** Review the results of the organizational survey (discussed in the first tool Evaluate) with a focus on results and feedback related to power gradient

**Step 2:** Invest in learning the intricacies of NTS – specifically those “highlighted in **BLUE** and **RED**”

**Step 3:** Choose 3 to 5 social NTS and 3 to 5 cognitive NTS from the list below and create a one-page summary of the chosen skills. Consider adding the power gradient philosophy statement to the summary.

**Step 4:** Develop an education plan to teach the chosen NTS to EVERYONE in your organization

**Step 5:** Reinforce NTS by adding visual artifacts (posters, screen-savers, etc.), practicing messaging, and training with lower fidelity simulation

## Tool: NTS and Leader Tool One Page Summary

# NTS and Leader Tool Prototype



*Power gradient is an organizational psychology term defined by the person who perceives themselves as less important than another person. Power gradients exist in all organizations and cultures. Our organizational hierarchy, our titles, years of experience, educational degrees, and special privileges all influence our perceptions of others and create steepness within a power gradient. We desire to “break down” the steepness of the power gradient for the safety of our people, patients, and guests. And we will use the power of our gradient for the good of life when crisis demands it.*

*Our organization believes the following...*

- ❖ *Everyone in our organization has an important role in serving our patients. No role holds more importance than another.*
- ❖ *Every team member deserves to be respected and provided an opportunity to be heard whenever they feel uncomfortable and concerned about the safety of another person.*
- ❖ *Leaders will always support those who speak-up for safety even when unfounded.*
- ❖ *We will thank each other for asking, clarifying questions, expressing concerns, and asserting up the rapid chain of command when feeling unheard (Inquiry, Advocacy, and Assertion).*

### Social NTS

Social NTS are good hygiene factors to build and maintain a culture of teamwork.

- ❖ Connect and Greet
- ❖ Introduce (using preferred name) and provide role clarity
- ❖ Expect and invite Clarifying Questions
- ❖ Provide Positive judgement FREE communication...communication positive intent of actions and assume positive intent
- ❖ Listen actively to learn

### Cognitive NTS

Cognitive NTS help to reduce communication and thinking errors associated with power gradient.

- ❖ Ask Clarifying Questions
- ❖ Have a Questioning Attitude
- ❖ Cross-check each other
- ❖ Speak-up with inquiry, advocacy, and assertion – Two Rule Challenge
- ❖ Brief and Debrief

### Leader Tools

Leader tools help support human performance and reinforce teamwork.

- ❖ Shape behaviors with Daily Messaging
- ❖ Always support those who speak-up
- ❖ Create an inclusive atmosphere with Daily Briefing
- ❖ Reinforce NTS with lower fidelity simulation
- ❖ Teach NTS Every day



# Adopt evidence-based human performance improvement leadership skills. Teach ALL Leaders.

## TOOL: Messaging

### Call to action Overview:

Leaders messaging directly or within a story is highly effective at shaping the culture of the organization. Messages communicate expectations to the team and reinforce habit formation of non-technical skills (NTS). Messaging is an example of a leadership teaching people (consciously and unconsciously) how to perceive, think, feel, and behave toward safety challenges. (Clapper & Strong, 2022).

## TOOL: Messaging Instructions

Use a simple structure to relay a message (reinforce a behavioral expectation) in short and concise manner.

**Step 1: Open:** (Tell the team what the message is about)

Example: “I am going to tell you why asking clarifying questions are important for reliable performance”

**Step 2: Body:** (Tell the Team your message...be short and concise)

Example: “Asking one to two clarifying questions when information is incomplete or when you sense risk can reduce the probability of an error 2 ½ times. Simply State... “May I ask a clarifying question?.”

**Step 3: Close:** (Tell the team what you told them)

Example: “And that’s why it is important to ask clarifying questions”.



# Measure Progress, Reinforce, Recognize, and Reward Your Team

## TOOL: Reinforce With NTS Simulation

### Call to action Overview:

**Measure, Reinforce, Recognize, and Reward.** Measure and transparently report the performance and progress in reducing the power gradient. Correlate with the measurements capturing the knowledge and skill development of the team. Establishing ways to celebrate healthy cultural changes and sharing success stories are essential to reinforce behaviors and sustain improvements.

Team simulation of NTS across various industries has proven to be a highly effective technique to reinforce NTS habit formation and improve team performance. NTS simulation efforts are designed to improve the team's use of non-technical skills. NTS are critical to the success of any "clinical scenario." Simulation not only reinforces NTS, is also breaks down the power gradient through the creation of a safe learning environment, 360 degree feedback, and relationship building through the simulation events. Organizations adopting NTS as an element of their management system traditionally count on large-scale training activities with subsequent reinforcement using micro-learnings using video, handouts, factsheets, memory, joggers, and other learning strategies to educate and train team members.

A very effective option for NTS simulation is to lead small simulations in their real work environments (insitu simulation) instead of taking individuals outside of their daily work environment to a different location. Leaders can conduct these simulations to practice a single skill between themselves and a team member in real time (*takes a few minutes <5 min*) or plan for 15–30-minute simulations with a small team practicing a mini-scenario highlighting a few of the NTS.

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## TOOL: NTS Simulations Instructions

### Step 1: Prepare:

- Prepare the team for the simulations by talking about the purpose and benefits of practicing NTS together. Communicate during daily briefings, team meetings, and on huddle boards.
- When planning the simulation
  - Start with very simple scenarios.
  - Identify the type of simulation (1:1, team, etc.)
  - Consider which non-technical skills to reinforce with the simulation. Consider the psychological components, such as the anxiety some learners can feel during a simulation, especially if there is a power gradient with others involved in the simulation
  - A practice run using a “tabletop” simulation can relax learners. Simply talk through a scenario: what would we do in this situation? What could we do in this situation? Etc.

### Step 2: Do

- Review the simulation scenario with those who will be involved
- Run the simulation with video recording

### Step 3: Review and Get feedback

- Review the recording together and provide 360-degree feedback.
- Repeat Step 2. Optimal learning is affirming 5 good practices for every practice you change.

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