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Evaluating culture in your unit or network

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Perinatal care alongside other areas of medicine has become increasingly complex. Within any complex system, preventable harm occurs. National reports have highlighted preventable harm alongside recommendations to improve safety. Care in the acute setting involves complex planning and procedures by skilled individuals often from different professional teams. Coordination and delivery of care is underpinned by reliable teamwork, which in turn is associated with improved outcomes. Communication has been identified as a significant factor in error within the acute setting. For perinatal teams, the nature of work demands clear communication, intense rapid change requiring response,

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team working within healthcare remains in its infancy, however there are a number of options to undertake assessment of team working. It is important when measuring teamwork to examine a) the structure of the team, b) attributes of team members, c) trust between team members and d) organisational culture. Furthermore, it is also important to measure clinical outcomes following any initiative to improve team performance.

There is a wealth of information available that can inform discussions regarding the current view of culture in our services. Within the MatNeoSIP programme in England, a comprehensive safety culture (SCORE- Safety, Communication, Organisational Reliability and Engagement) survey took place across all maternity and neonatal services between 2017 and 2018/9. There are plans in place to repeat these surveys across all services during 2022. The results from these surveys can provide a key set of insights into the perceived culture within the service. A key component of any source is that it provides robust, reliable and timely views of culture. Information from SCORE also can be broken down by role type and care setting to allow this information to be tailored further. SCORE is clearly not the only tool to be used for undertaking culture surveys. Culture surveys are also not the only tools that can and should be used to assess local cultures.

Safe working environments are critical for creating opportunities where people can learn from mistakes. Organisational culture is also important to assess as culture provides operating conditions to promote effective teamwork. Surveys on psychological safety can assess team trust, the ability of team members to speak up and organisational culture. The RCPCH website has a safety survey and BAPM Neonatal Service Quality Indicators (NSQI) recommend an annual psychological survey for teams.

Trainee feedback surveys also provide valuable information for team leaders and educators. Training can be associated with beneficial change within organisations with positive training experiences leading to greater learning and engagement and ultimately improved teamwork. Teamwork competencies are often assessed through multisource feedback by educational and professional regulators. These can highlight areas for improvement with questions covering domains to assess individual attributes as well as ability to work within teams.

Robust reporting mechanisms for identifying harm can demonstrate communication errors. The latter are more common in acute areas of medicine such as surgery (almost 30% incidents relate to communication issues). Perinatal Teams also work within an extremely acute context.

Observational approaches can measure team performance in real time during acute clinical care or simulation eg resuscitation. There are limitations around accurate assessment which relate to the validity of raters' assessment. Assessing steps or an algorithm through using a checklist or standardised assessment proforma can go some

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