MTL Session 1 – FACILITATOR SAY GUIDE

## Today we’re modeling to learn how to align our team vision.

## Done/Do (15 minutes)

## Done

We have all logged in to mtl.how/live for screen-sharing in the team meeting and called in to the VANTS for audio.

Facilitator Introductions

* Name, affiliation, expertise, role in MTL

Team Introductions

* Name, discipline, role in clinic
* Missing team members?

Technology Issues

* Were there any technology issues with joining the audio or the video for this session?
* Tips and troubleshooting
* How to get help

## Do

Today we are excited to launch *Modeling to Learn* (*MTL*) with Team \_\_\_\_\_\_\_\_\_\_\_ and select a Team Vision for *MTL*.

## Learning Objectives

1. Describe your own vision for what you would like your team to get from *Modeling to Learn.*
2. Test out your thinking with your team about what your shared vision is for becoming a “dream team.”
3. Identify a shared team vision for learning from *Modeling to Learn.*

## Introduction: Shared Interim Vision (5 minutes)

We learn best when we seek to accomplish things that matter to us. Today we will clarify what we are trying to accomplish together with “Modeling to Learn.” This learning process will be something you commit to because it reflects a key part your own vision for care in this team.

Identifying a shared purpose can be deeply motivating. Shared purpose requires mutual respect to find common ground and it is something to be created over time together.

That said, we want to identify a shared purpose about what we are trying to achieve as a team participating in *Modeling to Learn*. The team learning goal provides the focus and energy for committing to learning together over time. We have limited time, we want to identify what is most central to team learning goals and connect this to daily team care delivery.

* Team learning is all about ‘alignment’ and getting people working in synch with one another to meet the needs of our Veteran patients.
* We will explore “What is” (retrospective data) and vision forward to “what we would like it to be” (future oriented).

With a shared vision everyone has a common destination and a common picture. The goal is to move from “my vision” to “our vision” and to shift your paradigm towards how things could be done. Together, the clinic team lead and facilitation team will explore “What’s can be done better?” in a way that reflects common team aspirations.

# In-session Exercise (30 minutes)

### Prior Team Learning Prompt (5 minutes)

First, we want to set ground rules for our learning sessions.

1. *Think of a good learning experience in your team*. It can be in a meeting or an informal exchange with a colleague. It can be when you learned a clinic procedure, an idea for treatment with a difficult patient, or when a team member unlocked a mystery of CPRS for you. Try to think of a time when you had an “aha!” Something finally made sense, or you could finally do something you couldn’t before.
2. *Jot down on scratch paper what it was that made it a good learning experience*. What were the characteristics of the experience? Compile a team list.

[Examples that may be shared by learners are listed below.]

*Most likely the following is true:*

* The learning was hands-on and experiential.
* The learning connected to the real world.
* The learning experience was personally relevant, interesting, useful, or meaningful to the learner.
* The learner had choices, shared authority, control, and responsibility.
* The learner learned from and taught others.
* The learner had the support he or she needed.
* The learning was individualized. If there were standards for the work, the learner could meet them in his or her own way.
* It was fun or left the learner feeling good.
* The experience helped the learner understand him- or herself.
* The learner experienced success and accomplishment with challenging work.

### Best Case Scenario (5 minutes)

It is important to create a team language for learning; for aligning team decisions when there are roadblocks to consensus.

Start by picturing Veteran mental health care in this team as you experience it now. The interactions and communications within the team, in and out of team meetings. The key people you rely on outside the team. The information and data you use to coordinate care plans, and the feelings you associate with it.

Now picture the team learning over the next 6 months in a \**best case*\* scenario, where things are happening in the team the way that you would ideally like them to. This is your \**dream team*\* situation.

### Personal Vision (5 minutes)

* What is team communication like?
* How does the team relate to one another?
* How is VA data used?
* How are decisions, plans and changes made?

### Review in Team (5 minutes)

* What stands out to you?
* Why did we choose these?
* What makes them so relevant or important to us?
* Can we address them all (bearing in mind our resources and time)?
* If not, which would we most like to address (align around), and why?

### Putting it Together (10 minutes)

Overall \**Modeling to Learn*\* objectives include activities and competencies that:

1. Are meaningful for you and align your learning goals with your team.
2. Develop systems thinking skills and help you to see how several things fit together and understand causes that are hard to see without data and modeling resources.
3. Make VA data, initiatives and standards transparent to you.
4. Empower you to realize ongoing improvements in team quality of care and team quality of work life.

### Select the Team Vision

The team can further wordsmith their Team Vision after the session if they want to. We will hold this vision up as a reminder of our shared goals to orient our learning throughout the *MTL* program.

## Done/Do (10 minutes)

## Done

We selected a Team Vision to orient our learning throughout the MTL program. We will hold this vision up as a reminder of our shared goals to orient our learning throughout MTL.

## DO

Select a team lead and email Team PSD to set up our standing team meeting time.

Role of Team Lead

* Main point of contact between clinic team and \*Modeling to Learn\* team for scheduling MTL-related team meetings
* Develops knowledge of \*MTL\* tool use (especially those tools used most frequently mtl.how/live, mtl.how/data, mtl.how/sim)
* Provides leadership during MTL sessions including encouraging team participation in discussions and serving as computer simulation lead (once familiarity with tools is established)

Characteristics of Team Lead

* Strong relationships with fellow clinic team members
* Organized
* Basic computer knowledge, Excel experience helpful
* Attention to detail
* Committed to process improvement and use of data to improve care

Standing meeting time considerations

* Central location vs. geographically dispersed
* Clinic schedule

Whom to notify of these decisions and by when

* List