Implementing Daily Team Huddles

Exercise time: 10 minutes

Background

A daily team huddle (sometimes referred to as a daily stand up or daily scrum) is a brief and focussed team discussion, designed to bring the team together and help to plan the day ahead. They are short meetings, usually 10 minutes or less, which are typically conducted once at the start of each day, or each shift.

The daily huddle gives you and your team a way to maintain a focus on safety day by day, such as reviewing risks of harm, or patients of interest. It provides a setting to look back at the previous day’s work to review the safety performance, and to look ahead to patients for the day and flag safety concerns proactively.

What are the principles of an effective huddle?

Patient safety huddles are clinically led and locally owned. Key content for discussions are tested and adapted by the team to fit their local context. Examples include which patients are most at risk from falls and pressure ulcers. Huddles are:

- Clinically led by the most senior clinician
- Involve the multi-professional team of all levels including support staff such as ward clerks, housekeepers and domestics
- Happen every day at an allocated time in a timely efficient manner
- Are brief (5-15 minutes)
- Focus on safety issues “what might stop us keeping our patients safe?”

Healthcare teams in Yorkshire have successfully implemented daily huddles into their ward routine, resulting in significantly reduced harm, such as falls, and improved scores in their team safety culture surveys. Click here to watch a short video on how they do it.
Below is a suggested agenda for a patient safety huddle which can be adapted to your needs and the types of harm or interests you are considering.

**Example Daily Huddle Agenda for Falls**

1. How many days since our last fall?

2. Celebrate milestones since last harm (e.g. 10, 20, 30 days). If recent, what was the learning and could we have done anything differently?

3. Who are we really worried about falling today?

4. What are we going to do as a team to prevent the patient falling?

5. Review the “bigger picture” – location of patients, staffing, cohorting

6. Are there any other concerns today?

Remember to keep huddles visual. They work best when supported with displays of achievements and useful information for all to see. Below are some examples from other Trusts.
Yorkshire huddles checklist

About Safety Huddles

What are the Key Elements of a Patient Safety Huddle?

1. Non-judgemental environment
2. All ward staff are empowered to speak up
3. Flexibility on approach when starting huddles
4. Led by the most senior clinician, (nurse, or allied health professional)
5. All ward staff including non-clinical invited to attend
6. Happens at the same time/place (Mon-Fri minimum)
7. Are brief (5-15 minutes)
8. Ward staff agree on focus of harm for example: falls, pressure ulcers, 222 calls
9. Would suggest one harm and build in further harms once huddles become more established
10. Review of days since last harm – keeps staff motivated
11. Only discuss those patients at highest risk
12. Consider ways to input patient and carer concerns

In every case we want to consider:

- What is the plan for this patient?
- Does everyone know what the plan is and is everyone happy with the plan?
- Have any interventions been agreed?

What are the things the huddle might cover?

- What might stop us keeping our patients safe?
- Are there are any other patients or safety issues we might be worried about?

For example:

Falls – who are we worried about falling today?
Pressure Ulcers – whose skin are we worried about today?
Deteriorating Patients - Has anyone for a high National Early Warning Score? (NEWS)
Nutrition – whose nutritional intake are we worried about today?

Bespoke examples include: safeguarding, antibiotics review, oxygen prescribing

How do Safety Huddles work best?

- Teams design and agree how it will work in their area
- The leaders embrace it
- The whole multi-professional team is involved
- Huddles work practically for the area
- The team are empowered
- Huddles are held in the spirit of learning and improvement
- Visualisation of patient harm via display boards “days between” and Statistical Process Control (SPC) charts
- Staff celebration with certificates upon reaching patient harm milestones. For example: 10 days without a fall (Bronze)

What other elements work well with a safety huddle?

- A safety huddle on its own is good but added to a set is even better; for example – MDT ward round

(Source: http://www.improvementacademy.org)