

Huddles: The 'Engine' of Quality Control

Benefits of the Daily Huddle

Benefit of Huddle	Expected Frequency
Engage team in thinking and talking about standard work use (e.g., safety checklist), related communication behaviors	Expected to arise in a huddle every day
Recognize issues in standard work use, to address by training, coaching, and revising tools and methods	Expected to arise in huddle one or more times each week
Identify issues that need escalation and resolution beyond the team and supervisor	Expected to arise in huddle typically less than once per week



Why Huddles Provide an “Anchor” for Other Elements of the System

Visual Management

Huddle takes place in front of the visual display that provides status of current issues and data on performance

Standard Work Observation

Observation report occurs in huddle

Integration

Invite senior leaders to participate in the huddle to observe huddle skills and learn about issues raised

Escalation

Issues that cannot be resolved immediately may be escalated to next level per agreed-upon procedure

Problem Solving

Unresolved issues become problems to solve



A Standard Huddle Agenda: Central to Planning

Introduction of Huddles

P3

Standard Agenda:

1. Concerns, problems observed in past day:
 - Patients
 - Staff
 - Physicians
2. Anticipated issues for today
3. Review of tracked problems
4. Input from staff
5. Announcements



Level of Performance for Huddles: Getting from 'A' to 'B'

Level 1

Daily huddles in which you regularly discuss the safety performance of your unit

Level 2

You have a standing written agenda for your huddle that enables you to efficiently review performance of previous day and anticipate issues for current day

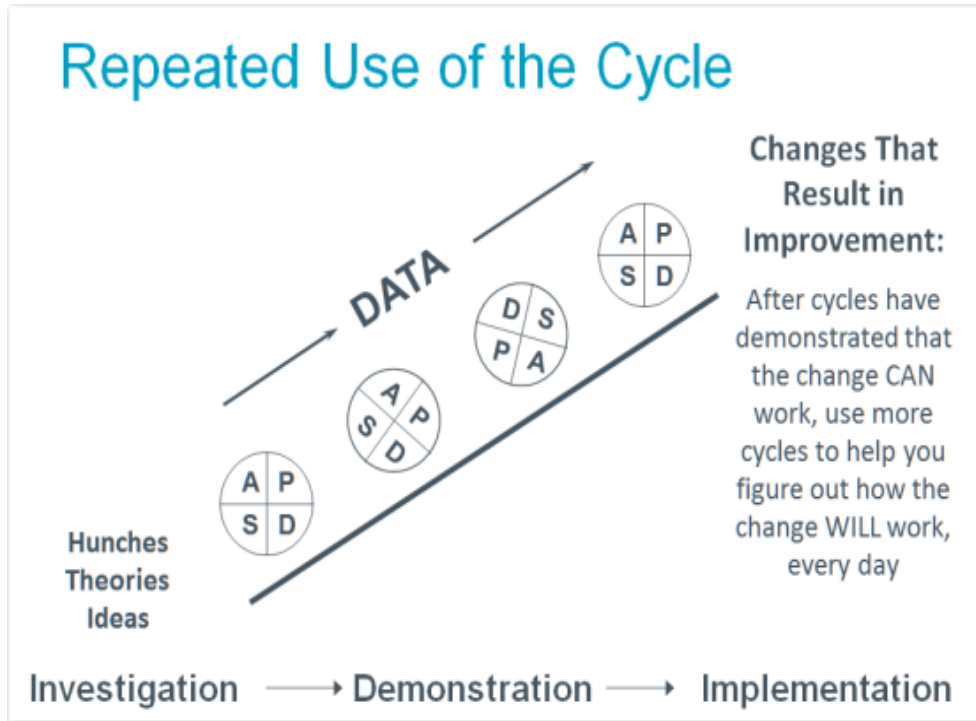
Level 3

Daily huddles happen when the supervisor is not present. Team members see the value and have the skills to run the huddle themselves.



What Method did we use to Introduce Huddles? P5

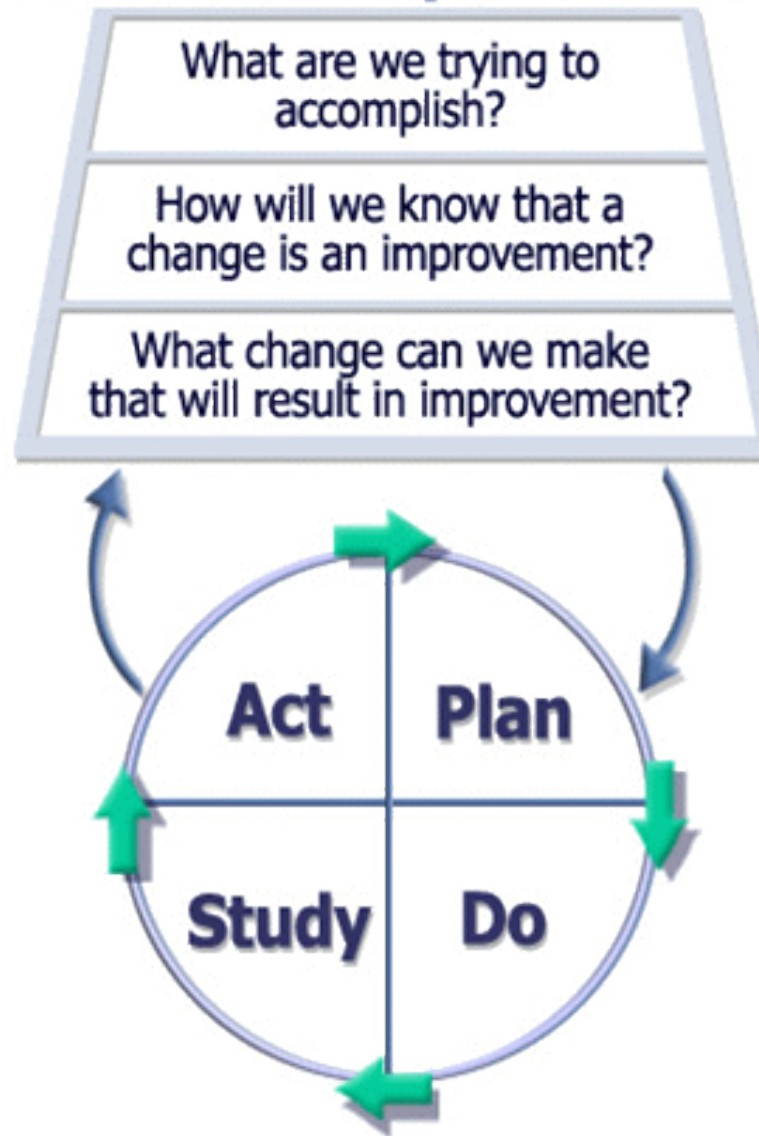
PDSA Thinking!



Series of PDSAs

- **For one day:** Can we huddle for no more than 10 minutes at the start of the day to look back and look ahead?
- **For one week:** Can we huddle for no more than 10 minutes at the start of the day for 5 consecutive days using a standard agenda?
- **For one month:** Can we huddle for no more than 10 minutes at the start of the day for 4 weeks using a standard agenda?

The Model for Improvement



Planning One PDSA

For each task, answer three questions (and record the answers):

Who is responsible?



When to be done?



Where to be done?



1. Give overview to those whose supported is needed to lead the project
2. Determine who will attend the first huddle? First, which unit, and then, who from the unit should be there; distinguish between “need to have” vs. “nice to have”
3. Who leads the huddle? Select a facilitator.
4. When? When will you start the huddle (what day) At what time?
5. What? Agree to the standard agenda (Modify IHI template if you want)
6. Where? Select a location that will be convenient for clinical staff while also preserving any privacy you would like; don't let ‘perfect’ be the enemy of the good



Planning One PDSA – 2

For each task, answer three questions (and record the answers):

7. Identify a recorder; who will record any follow-up items and who will be responsible for making sure that follow-up happens
8. Give the team a final ‘heads-up’ to remind them that the huddle will be happening, not more than 48 hours before-hand
9. Schedule a 10-minute debrief with the project leaders to discuss “plus/delta” and plan your next PDSA



Activity

Take five minutes at your desk and use the PDSA form you have to brainstorm one PDSA you could introduce related to huddles in your department.

Consider:

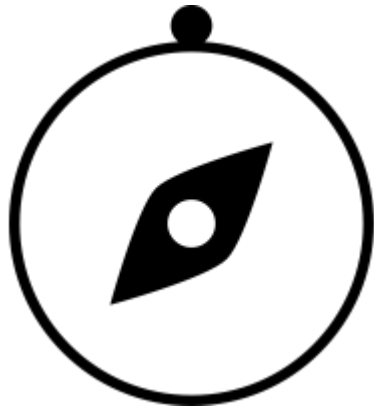
- You might already have daily huddles; how could you make them incrementally better?
- What is a realistic PDSA?
- What barriers do you anticipate, and how could you structure solutions to those barriers into your planning tool?



Huddles: Some Troubleshooting

Problem #1: Huddles don't take place when facilitator is absent or busy	Problem #2: Staff turnover has made sustaining the huddle difficult	Problem #3: Staff seem to not see the benefit of the huddle
Solution #1: Cross-train multiple staff	Solution #2: Ensure that understanding of purpose and structure of huddle is part of staff onboarding materials	Solution #3: Be sure to follow through on problems identified during huddle; over time, solved problems will win staff over





Why Visual Management?

- You and your team can benefit from a wall display that guides your daily and weekly standard work
- The display helps you, your staff, and leaders see at-a-glance current status and performance trends
- The wall display also provides view of work for daily stand-up huddles

Visual Management: Links to Other Drivers P12

Driver/Practice	Tie to Visual Management
Daily Huddle (Leader Standard Work)	Daily huddle takes place at the wall display
Checklist observation (Accountability)	Score of checklist observation or other standard work observation can be element of the display
Escalation	You can track escalation events so you don't forget to close the loop
Integration	Senior leaders (and other team leaders) can ask questions based on the display



A Few Simple Rules...

1. Keep the aim of the Visual Management board in mind: performance at a glance
2. The main users are you and your staff
3. Choose just a few items to start off
4. Choose items you can update regularly
5. Choose a space convenient for daily huddles to keep your board
6. A dedicated whiteboard proves convenient, but you can start with paper if easier

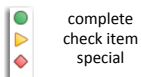


A Visual Management Board Format

Daily Visual Management Board example

Today's Date 14 March 2016

2	Today's Pt Name	Procedure	Start Time	Safety Check
	Sol Monday	B	7:00	◆
	Mitsuko Michalak	A	7:00	◆
	Estefana Younts	C	7:00	◆
	Carmen Calbedo	A	8:00	●
	Aleisha Cunha	A	8:00	●
	Shanta Otwell	B	8:00	●
	Jenee Hilt	B	9:30	▲
	Karisa Santillane	D	9:30	●
	Ruby Peavler	B	10:00	●
	Merlene Primmer	B	10:00	●
	Leola Starke	A	10:00	●
	Denita Bokart	A	11:30	▲
	Alise Castleman	A	11:30	●
	Louisa Epperson	D	11:30	●
	Velia Trotter	A	13:00	●
	Vesta Hipple	A	13:00	●
	Meri Carmody	C	15:00	●
	Dian Sutera	C	15:00	●
	Melynda Jessen	A	16:00	▲
	Ardella Ruffo	A	16:00	●



1 Our Surgery Center "Excellence in Safety: No Harm For Our Patients"

3 Number of Procedures since last harm incident
1,635

Number of Procedures since last near miss
245

5	Staff Name	Checklist Education	CUS Training	Checklist Observer Training
	Marilou	○	○	○
	Jenny	○	○	○
	Hye	●	●	●
	Sanora	○	○	○
	Jacinda	●	●	●
	Moshe	●	●	●
	Rolanda	●	●	●
	Cassie	●	●	○
	Werner	○	○	○
	Carletta	●	●	○

Safety training chart Date Revised

6						
March 14	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					HRRT call 10 am	
●	●	▲	●			

Calendar to record days with daily huddles ●, checklist observations ▲ and any training or safety meetings ■

4 Checklist Observation Table

Item	Date						
	4/4/2016	4/5/2016	4/6/2016	4/7/2016	4/8/2016	4/11/2016	4/12/2016
Pre-op	1. Circ Nurse + 1 discuss items						
	2. Pt/Family engaged						
	3. Not From memory?						
	4. Each team member speaks						
Procedure	1. Someone ensured readiness						
	2. Hard Stop for briefing						
	3. Every one speaks						
	4. Surg/proced. asks for concerns B4						
	5. Not From memory?						
Debrief	1. Someone ensured readiness						
	2. Specimen label read aloud	N/A		N/A		N/A	
	3. Not From memory?						
	4. All attentive?						
	5. Surg/proced. in room @ debrief						

Key: 1st Box (white), Mid Box (diagonal), Last Box (grey), Not Applicable (NA)

7

Date	Opportunity	Action	Results
			TBD

- Key
1. Can you connect an organization value or strategy to your visual board?
 2. Patient table with color code on completeness of pre-procedure documents promoting safe care
 3. Keep track of count of procedures since last harm incident each day update the board. Add count of procedures since last "near miss" if you have the data.
 4. Summarize your checklist observations—the table lists the items included in your maintenance observation forms.
 5. Safety skills training grid: makes it clear who on your team has had safety training and who is teed up.
 6. A calendar can show daily huddle performance if you are using daily huddles; also flag safety meetings, training, special events.
 7. A table to track opportunities to improve performance, actions and what resulted.



Applying PDSA Thinking to Visual Management ^{P15}

PDSA Cycle #	What question(s) are you trying to answer?	Preparation
1	For one day: Can we draft a visual management board?	Identify items that will work for your center. Find wall space to hang or write up. Plan to ask a couple of staff: "What do we need to know about the status of our work unit every day?"
2	For one day: Can we use the draft visual management board in a daily huddle?	Plan to refer to at least one item on the visual management board in the huddle. Default: Start using a list of patients and procedures for the day and patient "safety status."
3	For one week: Can we use the board in a daily huddle and update it daily?	Update and use the board for five consecutive days. Explore ways to fold reference to additional measures or board elements into the huddle.
4	For one month: Can we use the visual management board in a daily huddle and update it daily?	Add representation of observation of standard work to visual board. Integrate discussion into daily huddle. Are there any other items you need to add to your measure set?



Planning a Visual Management PDSA in More Detail

For each task, answer three questions (and record the answers):

Who is responsible?



When to be done?



Where to be done?



1. Describe the purpose of visual management to your team
2. Select measures for your board
3. Identify the data source for each measure
4. Identify ONE PERSON accountable for making sure all items are up-to-date on agreed-upon basis
5. Identify where the visual management board will be kept
6. Identify the date of the huddle where the board will first be used
7. Identify appropriate format for each measure/item (e.g., a bar chart? Large table?)



Visual Management Board PDSA – 2

**For each task, answer three questions
(and record the answers):**

8. Obtain poster board or reserve white board space
9. Post data to board
10. Give heads-up no more than 48 hours prior to first integration with huddle to notify team of test
11. Schedule debrief with your team and review 'plus/delta'



Activity: Evolving Your Approach to Visual Management

- Does your unit or department use visual management?
- Use the form supplied to describe the visual management approach (form includes aim of VM board, measures, regularity of update, and context of usage)
- Can you design one PDSA to evolve your board to the “next level” for (a) more relevant measures (b) more frequent updates and (c) utility in the context of a daily huddle?



Visual Management: Some Troubleshooting ^{P19}

Problem #1: Privacy and measures	Problem #2: We already have a visual board, focused on patient flow	Problem #3: The board is not updated consistently
Solution #1: Cover the board when not in use Solution #2: Keep the board in a separate, private location between huddles	Solution #1: Integrate the two boards; include flow measures together with safety measures	Solution #1: Delegate responsibility for updates to multiple staff, so no one person feels overwhelmed (rotation, and/or one measure per staff member)

