

Team Huddles

Huddles can occur anytime and in any location as a quick meeting to discuss critical information. They are a vehicle for real time problem solving on the unit and elsewhere in the facility to exchange information and address resident and staff needs quickly. Huddles are an important quality improvement tool that staff can use to improve their communication and problem solving.

Interventions

1. Use a shift huddle at the start and end of the shift to gather nurses and nursing assistants together to share information and provide resident updates. Do it on the unit or as a walking round from room to room.
2. Use a huddle to update staff on a new admission. Bring unit staff together to review important elements of care and needs. This can happen before the resident arrives so that staff can prepare for individual issues. Include other staff such as the social worker and dietician.
3. Conduct a post incident huddle to review the event, conduct root cause analysis, and plan interventions.
4. Huddle using the Stop and Watch tool from INTERACT to discuss a change in condition and what follow-up assessment is needed.
5. Make the huddle stationary or round from room to room or walk through on the unit.
6. Do a post fall huddle using the 10 questions from Empira. Re-enact the fall. Make a sketch or take a picture to capture details.
7. Use a Learning Circle as a huddle at shift change. Include frontline staff and family members. Be flexible with time.
8. Do hands on learning in a huddle when there are questions about types of care. Demonstrate elements of care that staff need explained.
9. Expand huddles from just nursing assistants to housekeeping, dietary, and all other departments.
10. Med techs can huddle to discuss resident medication needs and changes.
11. Use a form for staff to record resident changes and needs at the beginning of the shift. Use that content for the huddle at the end of the shift.
12. Conduct a restorative huddle with residents to hear what they want to say about their rehab progress, meals, and any needs. Use three restorative aides per 12 residents to gather input from residents before starting exercises.
13. Put chocolate out on the desk to keep people in a nearby huddle. Have tea and coffee as an incentive to come together.
14. Remember a huddle can be initiated by anyone. Encourage all staff to call a huddle whenever they need to discuss an important situation or change.
15. Form a huddle with just two people on the unit. Allow huddles to occur naturally.
16. Huddle to share the 24 hour report. Get frontline staff involved.
17. Use the huddle to organize the director of nursing's communication with staff. Keep the director of nursing visible during huddles.

Challenges and How To Overcome Them

1. Difficult to get people together and fitting huddles into the day to day workflow - Keep doing it. Practice. Educate staff and help them to recognize the benefits of huddles. "Everyone needs to hear the same story." Point out situations where the huddle really made a difference.
2. Hard for staff to break away from resident care and seen as an interruption - Hold the huddle on the unit close to residents. Be flexible with times. Keep it short. Provide coverage on the unit during the huddle time. Management can answer lights and respond to resident needs.
3. Resistance to change, a new way of doing things, and stuck in routines - Keep it positive. "Let's talk about our day today." Be encouraging and turn negative into positive. Take any blame out of the huddle. Focus on process not individuals. Timing is everything.
4. Tardiness - Be flexible with times. Hold huddles on the unit. Keep doing it. Model being on time.
5. Confusion about roles - Build the huddle team before the crisis arises. Be clear about who should attend. Form a hallway team that knows when to huddle.

Lessons Learned and Advice to Others

1. Huddle promptly after an incident.
2. Keep the huddle short and conduct it on the unit.
3. Use nurse leadership to lead the huddle.
4. Huddle at the beginning and end of each shift.
5. Keep huddle times flexible.
6. Engage staff and respond to their input and preferences.
7. Use huddles to connect with staff and exchange information quickly and effectively.
8. Keep it positive with staff and make it constructive. If staff begin to blame or be negative, redirect the comments to address the topic or resident concern.
9. Keep doing it. It takes practice. Eventually most huddles will shorten in length. They can last between 5 and 15 minutes.
10. Educate staff about the benefits of huddles (i.e., prompt exchange of information, resident updates, real time problem solving, efficiency, involvement of frontline staff, everyone on the same page, continuity of care, early catches).
11. Use incentives for participation. Reward those who come. Recognize and point out successful cooperation and better communication. Showcase when huddles improve care, save time, or prevent an unnecessary event such as hospital transfer.
12. Use a whiteboard or other means to record ideas and information.
13. Encourage discussion instead of using just a checklist. Nurse leaders should include all those present. Ask, "What do you think?"
14. Make sure the environment is conducive to the process of asking questions and having a discussion.
15. Begin using huddles with your strongest charge nurse and nursing assistant team. Start small as a pilot project. Once these staff members have mastered the use of huddles, they can help other units begin using them.