



Patient Safety Essentials Toolkit: Huddles

A huddle is a short, stand-up meeting — 10 minutes or less — that is typically used once at the start of each workday or shift in a clinical setting.

In ambulatory surgery centers, huddles occur once per day in each unit (for example, with the operating room staff). In primary care, staff can huddle in the morning to discuss scheduled patients as a team.

The daily huddle gives teams a way to proactively manage quality and safety, including a review of important standard work such as checklists. Often, standard work will be the output of previous quality improvement projects, and huddles provide a way to ensure process improvements stick. Huddles enable teams to look back to review performance and to look ahead to flag concerns proactively.

IHI's Patient Safety Essentials Toolkit is a helpful companion for you and your organization on the journey to delivering safe, reliable care every time, for every patient. Each of the nine tools in the toolkit includes a short description, instructions, an example, and a blank template. **NOTE:** Before filling out the template, first save the file on your computer. Then open and use that version of the tool. Otherwise, your changes will not be saved.

- Action Hierarchy (part of RCA²)
- Ask Me 3[®]
- Cause & Effect
- Developing Reliable Processes
- Five Whys
- Flowchart
- FMEA
- **Huddles**
- SBAR

Instructions

Teams can adapt the following standard five-item huddle agenda to their own needs and choose the flow that works best for them. See the last page for a blank template.

- 1) Safety and quality concerns and successes in the past day or shift
 - The huddle leader shares and invites successes from the team to celebrate.
 - The huddle leader invites concerns from the team related to patients, staff, or physicians while everyone else listens. This includes report-outs on the use of safety and quality tools, such as checklists or structured communication techniques for speaking up about safety.
 - The designated recorder notes any concerns that need follow-up on the visual management board, and the team strikes through items as they are completed during the day. The board includes any follow-up with physicians.
 - If the supervisor observed standard work the previous day, she or he provides feedback on what went well and what can be improved.
- 2) Safety and quality issues for patients on today's schedule
 - One person previews patients for the day, identifying any issues and the plans to address them. Review is faster and easier to reference during the shift if there is a list of patients and issues noted on the visual management board. (Be sure to adhere to the patient privacy standards in your health care system.)
 - The team notes any issues about equipment or patient rooms that affect quality and safety.
- 3) Review of tracked issues
 - The team provides updates on previously identified issues that are tracked on the visual management board.
- 4) Inputs on other safety and quality issues
 - The huddle leader invites the team to raise any other issues that may affect quality or safety today.
- 5) Announcements and information to share
 - The huddle leader and team identify safety and quality issues relevant to other areas that the huddle leader will share with appropriate individuals (e.g., head of another unit). Consider holding huddles among relevant leadership groups (e.g., department heads, organizational leadership) to review such concerns.
 - Close with critical announcements and schedule changes. You can save time if announcements and schedule changes are posted on the visual management board for staff reference, and the supervisor can simply point out changes and direct staff to read the announcement.

Note: An approach similar to huddles involves convening staff for safety briefings (beginning of the shift) as well as debriefings (end of the shift). Like huddles, safety briefings and debriefings consist of short, frequent meetings to discuss safety and quality concerns in a nonpunitive manner.

Example: Huddles

- 1) Safety and quality concerns and successes in the past day
 - The designated recorder points out that yesterday a nurse reported she planned to follow up with two physicians about whether their patients with urinary catheters were ready to have them removed. The team learns that the physicians indicated that all these patients should have their catheters removed. After confirming that the catheters were discontinued, the team updates the visual management board.
- 2) Safety and quality issues for patients on today's schedule
 - A nurse notes that two patients on the unit are receiving medications that may make them drowsy. She asks the team to be on the alert for increased fall risks.
 - A nursing assistant notes that the call button in Room 3A is in the process of being repaired.
- 3) Review of tracked issues
 - The team reviews the visual management board and reminds everyone that there are still two patients with similar last names on the unit, but one of them is scheduled for discharge later in the day.
- 4) Inputs on other safety and quality issues
 - The huddle leader notes that the nursing staff identified that they are receiving a lot of orders for medications that must be cut in half, increasing the risk of incorrect doses. The huddle leader will share this information with the pharmacy so they can order tablets in the dosages that are needed to eliminate the need for splitting.
- 5) Announcements and information to share
 - A list of high-alert medications is now available on all the unit's medication carts. The latest schedule changes are on the visual management board.

Template: Huddles

Print this huddle agenda and post it on your visual management board as a reminder to the huddle team.

- 1) Safety and quality concerns and successes in the past day
 - Patients
 - Staff
 - Physicians
- 2) Safety and quality issues for patients on today's schedule
- 3) Review of tracked issues
- 4) Inputs on other safety and quality issues
- 5) Announcements and information to share