Implementation of Patient Safety Huddles in an Ambulatory Care Setting at an Integrated Safety-Set System

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HARRISHEALTH SYSTEM

Background

To promote the flow of information between stakeholders and ensure that each day runs smoothly, many inpatient units conduct daily huddles at the beginning of each day. In the ambulatory care setting, huddles may occur at each individual clinic; however, for large integrated health systems with geographically disperse clinics, it can be difficult for those in leadership to understand key issues that each faces. For example, Harris Health System, one of the nation's largest safety-net health organizations, operates 33 ambulatory care locations throughout the third largest county in the United States.
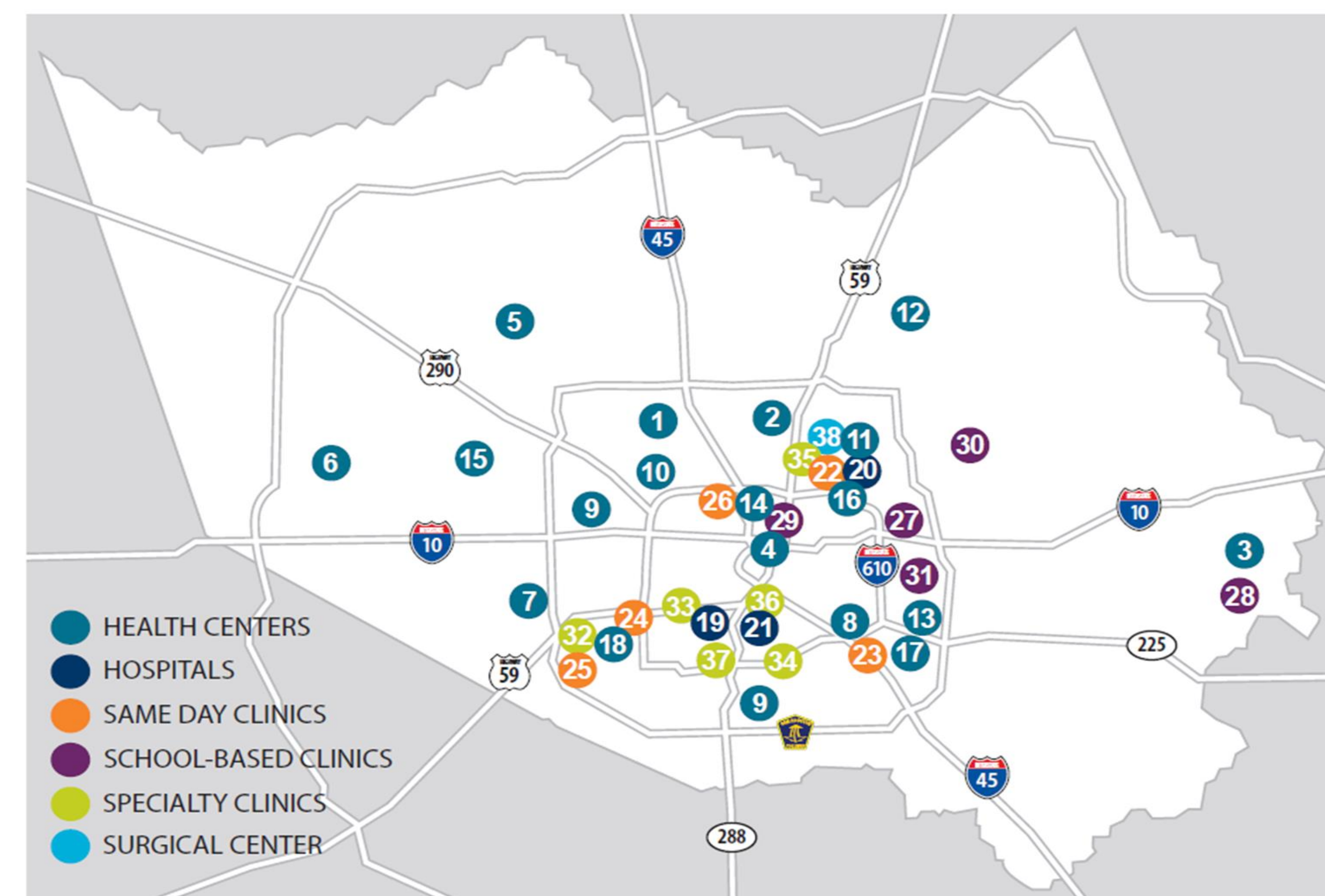

Figure 1. Harris Health System Locations

Objective

Patient safety is a top priority at Harris Health System. The objective of the Ambulatory Care Services (ACS) Operational and Patient Safety Daily Huddle call is to bring awareness of any urgent threats to ambulatory operations that impact patient safety and quality of care, and create an open forum for these threats to be appropriately handled in a collaborative environment.

Planning Methods

ACS leadership determined the time frame (30 mins) and agenda for the call. The agenda begins with announcements and/or critical concerns, as well as staffing variances that need immediate attention. Next, the Risk Department reviews significant incidents from the previous day. Leadership then solicits any issues in pharmaceuticals and medical supplies, information systems and equipment, facilities, security and restraints, communication, patient and employee injuries, and any accreditation or regulatory concerns. Clinics are encouraged to speak up about any of these issues in their own clinics. Additionally, a quality focus of the day and the current overall patient satisfaction is reported. The call ends with an inspirational quote/charge to begin the day.

Implementation Methods

The calls began on June 17, 2019 and occur at 8:30 AM each weekday morning. The calls are led by various ACS leaders (VP's, Administrators, Associate Administrators, and Directors). All Operations Directors, Managers, Nurse Managers, and Assistant Nurse Managers are requested to join the call. Medical Directors will join the call based on their schedule and availability, as schedules are not blocked during this time. Additionally, stakeholders from essential ancillary and support departments, such as Pharmacy, Supply Chain Management, Facilities, Biomedical Engineering, and IT participate in the call to ensure that any of the issues reported are addressed in a timely manner.

The first half of the call goes through the complete agenda. The second half of the call is designated as the "project management portion." This portion allows the reported issues to be discussed in detail with clinic and operational leadership and follow-up assignments are delegated. Additionally, resolutions are made, actions are taken, and recommendations are given regarding any open issues.

Figure 2. ACS Operational and Patient Safety Huddle Agenda

Results

All issues that are brought up during the call are logged in the ACS Daily Huddle tracker on the Harris Health System SharePoint site by the project manager. This site is shared with all stakeholders. Issues are divided by the topics that are listed on the agenda and are assigned attributes for further classification. Daily reports are combined with those of the two hospitals and then submitted to all executive leadership. As of December 31st, 628 issues have been reported. Overall, 95.9% of these issues have been completed and marked as resolved with an average time to completion of 8 days. Generally, the most common issues reported each month are Incidents/Near Misses (attributed mostly to employees and patients) and Facilities (attributed mostly to air quality and water damage) related. Each month, the ACS Daily Huddle data is reported at the ACS Quality Review Council.
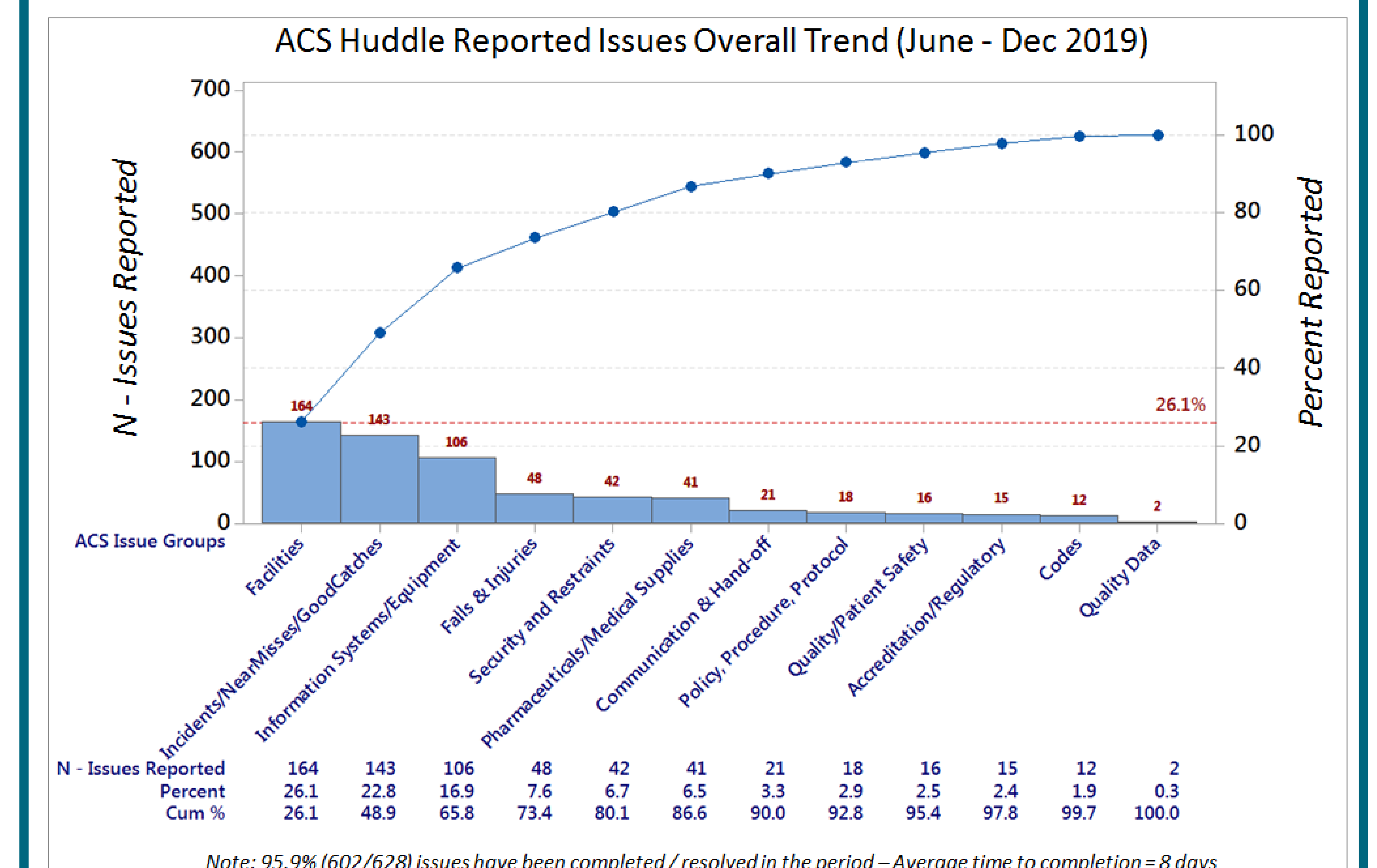
Results (Continued)

Figure 3. ACS Huddle Reported Issues Overall Trend
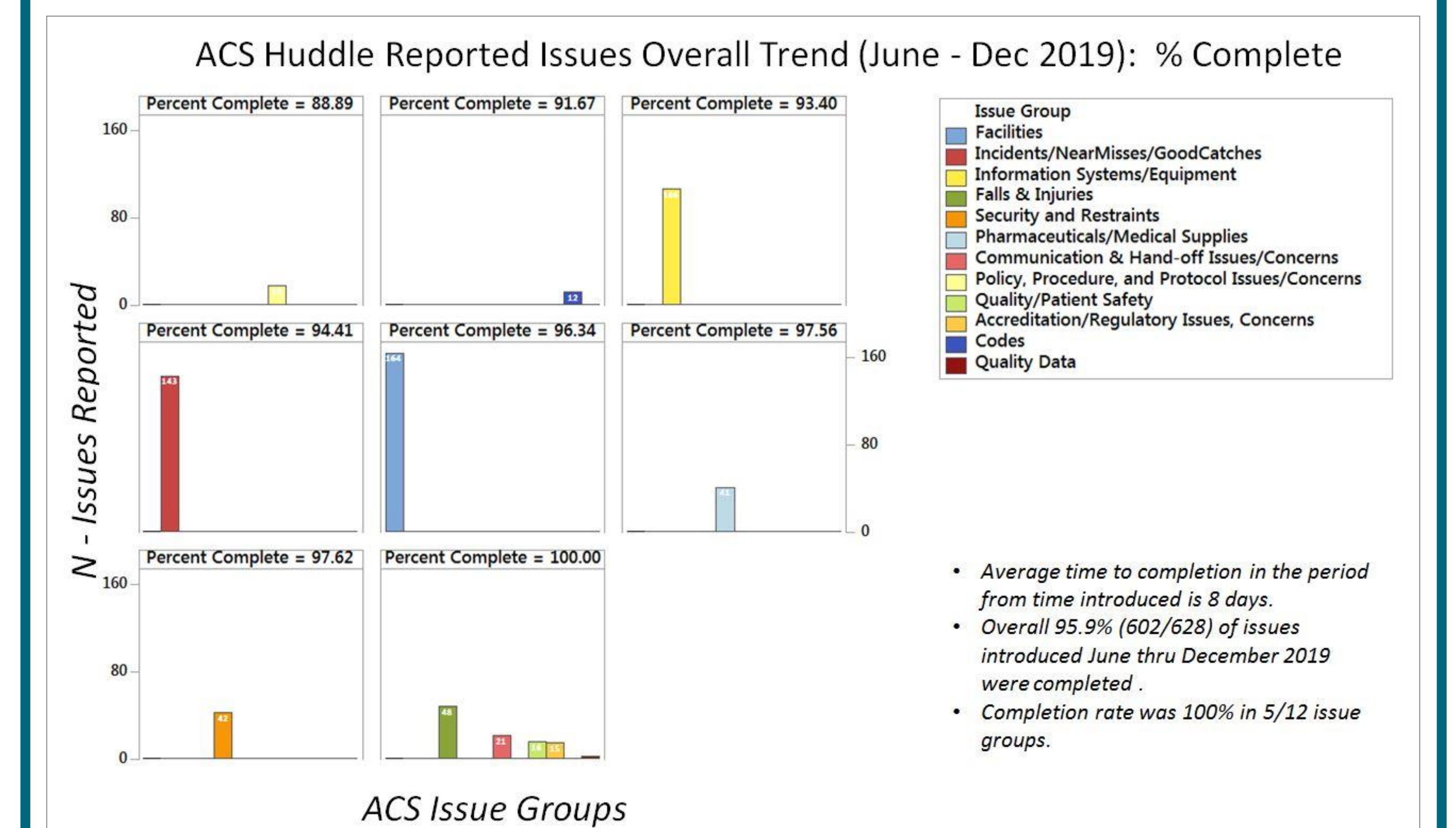
Figure 4. ACS Huddle Reported Issues Overall Trend - % Complete

Conclusions

The ACS Daily Huddle calls are different from inpatient unit huddles as the leadership team ensures that a reported issue is followed-up on until it is resolved. Additionally, the calls have led to increased collaboration and transparency amongst ACS team members, feeling of improved accountability and responsiveness of support departments, and identification and correction of non-standard practices.

In surveying 47 ACS Directors, Operations Managers, and Nurse Managers, it was determined that on a scale from 0 (No Improvement) to 5 (Strong Improvement), the average response was 4 for improved collaboration, response time to resolve items, and engagement of leadership to frontline issues since the implementation of the huddle. Additionally, the average response was 4 when answering how satisfied participants were with the call.