Huddles to Increase Nurse Collaboration and Awareness

Brooke Nobles, RN, BSN, CPN
Rebekah Goodman, RN, BSN, CPN
Nurses in a 14-bed inpatient pediatric endocrine unit recognized the following problems with bedside shift report:

- **↓ collective awareness/teamwork**
- **↓ sense of community among nurses**
- **↑ nurse frustration**
- **↑ patient risk for harm**
- Longer shifts
- Late/missed medication administrations
PICO Question:

What are best practices to enhance communication of all patient needs to all inpatient unit staff using bedside shift report?
A literature search of CINAHL, PubMed, and EBSCO produced 15 relevant articles:

<table>
<thead>
<tr>
<th>Search terms</th>
<th>Results:</th>
</tr>
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<tbody>
<tr>
<td>Huddle</td>
<td>Two non-experimental research</td>
</tr>
<tr>
<td>Communication</td>
<td></td>
</tr>
<tr>
<td>Nursing handoff</td>
<td>13 clinical articles</td>
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</table>
Methods/Change Strategy

Evidence strongly supports use of huddles to improve:

• Communication
• Collective awareness
• Collaboration/teamwork
• Safety

Pictured above and left: Endocrine nurses during beginning of shift huddle
Methods/Change Strategy

Used IOWA model (Titler et al., 2001)
• Pre/post surveys assessing nurse perceptions of teamwork/collaboration and communication
• Tracking of late clock-outs and late/missed medications
• Involving stakeholders
• Developing unit-specific huddle process
  --Change-of-shift huddles
  --Mid-shift huddles
• Developing huddle form
• Educating staff
• Piloting for 9 weeks
Methods/Change Strategy

Example of Information on Huddle Form

Room: 3101
Dx: _____________________________
1:1/ 1:3
Isolation: _________
PEWS: ______________
CVL/ PICC/ PIV/ Port
O2/ POX/ CAM
Diabetic/ Fast/ NPO/
Diet ________
CPS/ Alone
Restraint/ Sitter
BS Q____
Outcomes

Post-pilot survey:
• Change-of-shift huddles helpful
• Mid-shift huddles difficult to implement
• Brevity of huddle is key
• Too much information overwheels nurses

![Bar chart showing percentage of nurses with positive, neutral or negative comments regarding huddles.]

Percentage of nurses with positive, neutral or negative comments regarding huddles.
Outcomes

A change in staffing from 1:4 to 1:5 nurse/patient ratios impacted the project after three weeks of the pilot.

An increase in late/missed meds and an increase in late clock-outs occurred by week three of the pilot due to an unexpected increase in nurse/patient ratio.
Implications

Practice changes:
• ✅ change-of-shift huddles
• ☞ routine mid-shift huddles
• Streamlining of huddle form
• Re-education of staff
• Follow-up evaluation
Huddles to Increase Nurse Collaboration and Awareness

Rebekah Goodman, RN, BSN, CPN & Brooke Nobles, RN, BSN, CPN
Cook Children’s Medical Center

Purpose:
Nurses in a 14-bed inpatient pediatric endocrine unit recognized the following problems with bedside shift report:
• Decreased collective awareness/teamwork
• Decreased sense of community among nurses
• Increased nurse frustration
• Increased patient risk for harm
• Longer shifts
• Late/missed medication administrations

Evidence/Background:
A literature search of CINAHL, PubMed, and EBSCO produced 15 relevant articles:

Search terms: Results:
• Huddle
• Communication
• Nursing handoff
• Two non-experimental research
• 13 clinical articles

Evidence strongly supports use of huddles to improve:
• Communication
• Collective awareness
• Collaboration/teamwork
• Safety

Methods/Change Strategy:
The IOWA model (Titler et al., 2001) guided this project. The process included:
• Pre/post surveys assessing nurse perceptions of teamwork/collaboration and communication
• Tracking of late clock-outs and late/missed medications
• Involving stakeholders
• Developing unit-specific huddle process
  --Change-of-shift huddles
  --Mid-shift huddles
• Developing huddle form
• Educating staff
• Piloting for 9 weeks

Outcomes:
At the end of the pilot survey responses show:
• Change-of-shift huddles are helpful
• Mid-shift huddles are difficult to implement
• Brevity of huddle is key
• Too much information overwhelms nurses

A change in staffing from 1:4 to 1:5 nurse/patient ratios impacted the project after three weeks of the pilot

Implications:
The following practice changes are being made:
• Continuation of change-of-shift huddles
• Elimination of routine mid-shift huddles
• Streamlining of huddle form to include only highly pertinent information
• Re-education of staff
• Follow-up evaluation of streamlined huddle form

PICO Question:
What are best practices to enhance communication of all patient needs to all inpatient unit staff using bedside shift report?