

Appendix 4 – Safety Huddle Guidance (CG20 – Handover Clinical Guideline)

Safety Huddle Guidance

A Safety Huddle is a short, stand-up meeting – 10 minutes or less to provide teams a way to actively manage quality and safety, including reviewing risks and sharing important information. Huddles can be impromptu and requested by any staff when there is a safety and risk concern. They provide a quick process to share important information quickly and effectively with the team. Huddles allow the team to review performance and look ahead to flag concerns proactively promoting patient safety.

This does not replace the electronic Covid-19 Safety Huddle, but is to support proactive management of emerging and changing risks for patients and the ward environment. They are used to support patient safety during the shift. They should be regular practice as routine and impromptu to changing or emerging risks.

Key steps and elements of effective safety huddles:

- Huddles are short quick meetings, so start on time and make sure everyone is standing up. Holding them at a consistent time during the shift helps people plan their work and attend promptly, and standing makes the huddle go more quickly.
- An impromptu Safety huddle can be requested when anyone has a safety and risk concern to improve communication and risk awareness for the whole team.
- For an impromptu safety huddle where there is an escalating or emerging risk, inform staff where and when it is giving them a time to finish what they are doing to arrive safely and prepared.
- Post the agenda (see next page) on notice board. Point to the agenda; don't read it. This gives the team practice with visual information.
- Prompt each team member to share one concern or success; everyone else listens. Have a method to go through the team (e.g., go clockwise) to avoid fumbling for order, and try passing a "talking object" to each person in turn to encourage others to listen. Note issues for follow-up on the notice board, and escalate concerns for resolution as needed. Document the actions. To keep the huddle brief, it's important to only identify problems for later resolution, not to try to solve them in the huddle.
- Preview patients for the day. Identify patients who could have quality and safety issues arise; listing the patients and procedures on the notice board makes this step more efficient. The goal is not to review every patient, but to identify potential safety concerns, manage and mitigate, keeping the meeting short.
- Close the huddle with announcements or other messages. Be sure to thank the team and say, "the huddle is now over." Courtesy promotes respect, and closing words give a clear signal for the team to move to the next task.

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Example Safety Huddle Agenda

Display on wall where the Safety Huddle will be held so staff can refer to it

Ward: *Ward Name*

Planned Daily Time for Safety Huddle: *Time huddle held each day*

Where Safety Huddle is held on the ward: *Where huddle is held*

1. Staff well-being – how is everyone?
 - a. Do allocations need changing to support staff need, breaks, etc?
 - b. Are there any concerns?
2. How are the patients?
 - a. Has anyone shown signs of deterioration or escalation in behaviours/risks?
 - b. Who has the most needs?
 - c. include recent falls/high risk of falls – follow falls risk assessment process
 - d. include patients with high risks to self or others
 - e. include patients changes/escalation in risks since handover
3. Physical Health concerns?
 - a. MEWS scores over 3 = what action taken
 - b. Any escalation or concerns regarding patient's physical health
 - c. Include Covid-19
 - d. Medication compliance, PRN or side effects
 - e. Concerns from monitoring charts such as food/fluid/bowels
4. Observations & Engagement concerns/issues
 - a. Any gaps or difficulties with Obs & Engagement?
 - b. Levels adequate or changed to maintain risks and patient safety?
5. Ward Environment
 - a. Is it safe and clean?
 - b. Escalate and report concerns
6. Identify who will update the Patient Record and other documentation/actions following the Safety Huddle?
 - a. Staff member is responsible for documenting the discussion, decisions and actions.
 - b. Other actions e.g. contact estates, book transport, etc