

Gloria Okorley BSN, RN-BC1, Callie L. Rzasa, MD<sup>2</sup>

1. Department of Pediatrics, University of Kentucky 2. Division of Pediatric Cardiology, University of Kentucky

## Introduction

### Background:

Communication and staff engagement are priorities in the health care setting. Our ambulatory specialty clinic had grown over the past year, servicing 10,000 patients per year at 8 locations across the region. As our clinical service expanded, we noted an opportunity to improve communication with our staff and providers on a daily basis. Also, as we grew both geographically and staffing wise, maintaining communication and engagement became a challenge. Zoom provided a platform that connected all members of the team, wherever they were. We needed a way to update everyone on any changes to the schedule due to illness or other unforeseen events. It was imperative to get together briefly each day to focus on operational, patient safety, and quality improvement.

## Benefits

- ❖ Improves patient workflow
- ❖ Keeps the entire team informed
- ❖ Time to strategize to prevent barriers
- ❖ Improve team dynamics and communication
- ❖ Discuss census of the day at every location
- ❖ Enforces accountability as everyone knows what everyone else is working on
- ❖ Extra information such as daily magnet question keeps everyone updated (see Figure 3)
- ❖ Role responsibility remains on view so everyone understands their tasks

## Pediatric Cardiology Clinic Demographics

- 8 physical locations throughout the state
- 2 locations in Lexington, KY
  - Corbin, KY
  - Somerset, KY
  - Morehead, KY
  - Ashland, KY
  - Pikeville, KY
  - Rockcastle, KY
  - More than 10,000 office visits per year

## Huddle participants

Clinic RNs  
 Medical Assistants  
 Sonographers  
 Front desk registration staff  
 Clinic Social Workers  
 Patient Services Coordinator Sr  
 Nurse Manager

## Visual Huddle

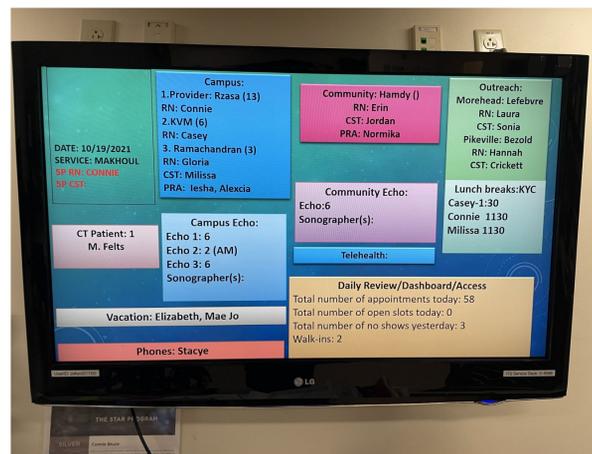


Figure 1. Example of Visual Huddle which is displayed within the clinic Pod daily

Essential Clinic KYC 1: Hayman (13 patients) RN : Erin 8:00AM-5:00PM	Community: Rzasa (12 patients) RN: Connie 8:00AM-4:30PM CST: Jordan 7:45AM-4:15PM
Essential Clinic KYC 2: Lefebvre (13 patients) RN: Laura 8:00AM-4:30PM	Outreach- Ashland: Keller (11 patients) RN: Hannah CST: Sonia PRA: Iesha
Essential Clinic KYC 3: KC (7 patients) RN: Casey 8:00AM-4:30PM	Call processing: Stacye 8:00AM-5:00PM
Add on: Ramachandran 2:30 RN: Gloria	Elizabeth VL Mae Jo VL
CT Surgery: 1 patient 12:00	For huddle: • Echo 1 – 8 patients • Echo 2 – 0 patients • Echo 3 – 8 patients • Community echo- 7 • Ashland Echo- 5 patients • Total of 57 patients scheduled • 4 no shows 10/21
CST: Crickett 7:30AM-4:00PM CST: Milissa 7:30AM-4:00PM PRA: Alexcia/Normika	

Figure 2 Example of Daily email with updates and statistics from the day before



Figure 3 Example of slide showing nursing magnet facts

## Discussion

Intervention/Tool/etc: We developed a template to organize daily staffing and census. This is displayed electronically and reviewed with a daily morning huddle. Team members who are off campus call in using Zoom to participate in the huddle. Staff are given opportunity to review areas for concern during the clinical day at all of our locations in one setting.

An RN or a Medical Assistant typically leads the huddle by reading out the census of the day, and where each staff member will be located. Thereafter, the team gives an overview of the previous day (see Figure 2) and quickly troubleshoots how to make the day better. An example is, calling a patient that has been hard to reach to ensure their presence at the appointment that day. In addition, the team discusses late additions and quickly makes plans if special accommodation is needed. Nurse manager appoints a team member to take ownership of urgent matters if responsible person is out of the office.

In the interest of time at the time of huddle, a daily staffing email is sent to the clinic team the previous day (see Figure 2). The email contains the number of clinics, patient census, statics from day before, staff members out of office, and Zoom link for the huddle for those not physically on main campus. Announcements for staff are displayed on the Virtual Huddle Board which rotates them throughout the day. The clinic monthly newsletter is also displayed on the virtual board.

## Outcomes

Since implementation of this model, we have seen our employee engagement scores improve drastically. Pediatric Cardiology received the highest Employee Engagement Scores in Pediatrics (leader index 96/100). Our patient experience scores have remained elevated at 98-100%. Although these scores are multifactorial, we believe that the organizational foundation of the daily global huddle has had a significant factor in our clinical success.

## Conclusion

A clinic morning huddle for a division with many locations is the single most effective meeting that a team can have. Participants know that they can log in from anywhere and it will take less than 10 minutes of their busy day.

## Next Steps

Virtual meetings have simplified participation compliance caused by clinical obligations and our commitment to communities throughout the state. We hope to incorporate mid-day or end of day global touch base huddle as our operations grow and we bring in new team members. Future state looking at new clinics such as a multidisciplinary clinic, or collaboration with Adult Congenital clinic and CT Surgery, may necessitate a huddle to include all team members.