Improving flow by improving teamwork – a Scotland-wide approach

Laura Harvey, NHS Ayrshire & Arran, Simon Dunn, NHS Lothian, Ann Douglas, NHS Greater Glasgow & Clyde

Aim

Three health boards combined their experiences, improvement skills and shared vision to establish hospital and system-wide Safety Huddles in the paediatric and adult environment. Each created a team responsible for developing a daily site Safety Huddle to:

- Achieve a more cohesive team approach to the sites
- Show a clear link between quality, patient safety and flow management.

Methodology

An 8am huddle was held daily, led by each hospital's designated leader. A script was created to ensure consistency in information gathered from each area. A template was developed to input information. This ensured the huddle was focused, prescriptive and focused on situational awareness to address safety issues, with everyone leaving the huddles with planned actions being a priority.

Results

Successes reported by each health board focusing on key outcome and process measures, include:

- Increased performance against the 4 hour Emergency Department standard
- Improved performance in managing patients at risk of deterioration (Watchers)
- Improved performance in percentage of patients discharged in the morning.

Since their conception, the site Safety Huddles have continued to evolve and achieved the following within a focused time period:

- Galvanised the sites and brought all disciplines together working as a team, with a focus on patient safety and safe flow throughout the site
- Highlighting any safety concerns on wards and site
- Improved communication and understanding of each other's contribution to delivering health care
- Created a sense of ownership for the site
- Connected the site management team with all the staff

Outcomes

Primary Drivers

Clinical Leadership and collective responsibility for developing a safety culture

- Clearly identified Clinical Leadership at Daily Huddle and Debrief
- Development of senior leadership skills
- Mandatory attendance at Daily Huddle as identified by Tiger team
- Daily Data report
- Promote situational awareness from huddle content

Secondary Drivers

- Introduce Tiger Team as Huddle implementation group
- Revise activity predictor to include departmental activity
- Rapid rundown of all patients with LOS > 28 days
- Develop ECAT team for Frail elderly patients
- Scripted templates for Huddle Lead and all representatives to aid exchange of high quality information
- Capacity HUB with clear escalation responsibilities
- Support early discharge by ensuring correct systems in place and realistic EDD
- Consider more efficient options at peak activity times – “footprint boarding”

Conclusion

The Safety Huddle has created a forum for a situation report that captures all the essential markers for quality, patient safety, deterioration, staffing levels, patient flow and estate issues. This allows key actions to be agreed and enacted to promote and maintain smooth, effective, safe flow