

Using Safety Huddles during COVID 19



COVID19 has brought with it rapid changes to our workplaces and work teams. During these times all staff need to practice behaviours to ensure the team is 'on the same page' and up-to-date with priorities and risks.

Adapt or adopt the safety huddle as a vital communication tool.

How often should they occur?

At a regular scheduled time at the beginning of each shift. And ad hoc as changes occur.

Who attends?

While we experience the pandemic limit the number of staff who attend. Every member present plays an important role to share information from their work area. A mix of clinical (multidisciplinary representation) and non-clinical is ideal. Identify members who will share the information.

Social distancing

Social distancing refers to a range of strategies to stop or slow the spread of infectious diseases. It means less contact between people with the aim of reducing the potential for transmission.

Here are some strategies for you to implement now

Where?

- In the same place each time which has enough space for team members to observe social distancing
- Close to a quality board is preferable
- Phone or skype access will allow other members to participate.

How?

- Standing and ensure an arm's length distance is maintained
- Maintain good hand hygiene and use of hand sanitisers
- Follow the suggested guide in the box to maintain focus and keep to time (5-10 minutes). Adapt the guide as needed
 - The key message is to keep to significant or anticipated safety issues on the current and next shift and resolve
- Create an environment which ensures each member feels psychologically safe to voice their observations and concerns

Check in with each other – are you OK?

We know that the work experiences of staff can impact directly on patient care experience. During this time it is important that all staff members take the time to check in with, and demonstrate compassion and trust, to ourselves and the people we work with.



SAFETY HUDDLE SCRIPT GUIDE

Start with a positive story from the previous 24 hours

Look back (over the last shift)

- What safety incidents occurred?
- How have we resolved them and prevented it/them from being repeated?
- Address PPE amount in stock; appropriate use; donning and doffing training; and concerns related to availability

Look now (this shift):

Patients

- Those with COVID 19 or emerging symptoms; prescribed high risk medications; increased falls risk; same/similar surname; behavioural/cognition concerns; delirium
- Are there any patients who pose a risk to staff (aggressive patients or relatives)?

Flow

- Beds and capacity to receive new patients

Staff

- Introduce Agency staff/new staff deployed to the unit; skill mix; shortages in other areas impacting care such as medication supplies

Equipment

- Outages (IIMS; eMR); PPE supplies

Environment

- Isolation requirements, air conditioning; thefts

Duress alarms

- Are duress alarms working?
- Personal duress alarms are being used as appropriate

Wellbeing

- Check that all staff feel safe and are confident caring for the patients allocated
- Encourage staff to take a pause at the end of shift to bring their attention to going home

Planning - Assign accountability using closed loop communication

- Recap and include current state issues and significant safety focus for the shift
- Agree information to be shared and person to share with other team members
- Recognise teamwork and express appreciation
- Final questions and close

As the leader you might not have all of the answers. Let staff know you will follow up and get back to them

Where can I find more information about safety huddles?

Visit <http://www.cec.health.nsw.gov.au/improve-quality/Safety-Fundamentals-for-Teams>

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