

Lean Daily Improvement Huddle – Key Steps

Purpose: The Daily Improvement Huddle is focused on using the team’s collective knowledge to improve our processes for both staff and patients

	Major Steps	Details
1.	Gather at huddle board	Standard Day(s) and Time. Set timer 15 minutes.
2.	<p>Manager or Designate starts the huddle by <u>briefly</u> reviewing “Work in Progress” section of the board.</p> <ol style="list-style-type: none"> 1. Just Do Its 2. Projects / PDSAs / bigger improvements 3. Almost Done 	<ol style="list-style-type: none"> 1. Asking someone at your huddle to be the recorder for the update section of the tickets 2. The person(s) working on the improvement updates the team on the progress. 3. Facilitator asks: “What is the next step for this improvement?” Ensure team is clear on the next step to move the ticket closer to being “done” & record in the status update section. - “Do you have any barriers that you need help with to get the next step completed?” 4. If the next step belong to another department, move the ticket to the <i>Almost Done (out of department)</i> section of the board and assign someone to notify the other department for what is needed. 5. If no update ask : <ul style="list-style-type: none"> • “Who could touch base with the leader to let them know we need an update for our next huddle or ask if they need some help to complete the work on this ticket?” 6. Is the ticket on track? green magnet on ticket /If work is delayed - red magnet on ticket 7. Is all of the work complete for the improvement? If yes, move ticket to “Our Success / Done” column on the board & check tracking sheet for implemented improvements for that month.
3.	Review Almost Done(out of department) section of the board (atleast bi-weekly/monthly)	

	<p>Review the “New Ideas” section of the board</p> <p>Do you have new improvement opportunity tickets? <u>Yes</u> - prioritize in your PICK chart & check the number of new tickets on the tracking sheet for new ideas</p> <p>No – discuss with the group possible ideas for improvement</p>	<p>1. If the person is present who posted the new improvement idea ticket ask them to discuss the problem and their idea for improvement & validate with group this is something to work on</p> <p>2. If the person is not present ask if anyone at the huddle is aware of the problem and could discuss. If not, wait for the staff member to attend the huddle or ask if there is someone at the huddle today who could connect with them to have a better understanding of the issue and be prepared to present at the next huddle.</p> <p>This is a group discussion about prioritization, what change should we work on first, how difficult will it be to make the change, how much impact will it have on our processes. Prioritization of new tickets – is this a Quality and Safety improvement? Does it need to move into the Work in Progress Section now? What is the impact if we wait to work on this?</p> <table><tr><td>Implement easy to do and high impact on our process for our patients / for our department</td><td>Challenge difficult to do, many steps, more than just my department, high impact on my process for our patients / for our department</td></tr><tr><td>Possible easy to do, lower impact but still worthwhile to make this change to our process</td><td>Kibosh out of my control, this process does not belong to my department, bring to the manager of department who is the owner of this process, do not keep these tickets on your huddle board</td></tr></table> <p>Questions to guide the discussion about possible improvement opportunities:</p> <ul style="list-style-type: none">• “What have you heard from our patients and families today / yesterday about their experience on our unit? Are there any things that come to mind for improvement? Have there been any patient complaints?”• “Tell me about any safety concerns (patients, ourselves) today or over the past few days? “• Think about any opportunities that may have been identified at the status update today / or over the past few days. Any trends to discuss with the group? <p>What barriers / challenges are you encountering in the day? / over the past week?</p>	Implement easy to do and high impact on our process for our patients / for our department	Challenge difficult to do, many steps, more than just my department, high impact on my process for our patients / for our department	Possible easy to do, lower impact but still worthwhile to make this change to our process	Kibosh out of my control, this process does not belong to my department, bring to the manager of department who is the owner of this process, do not keep these tickets on your huddle board
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5.	<p>Is there is capacity for new work? Is there an empty spot in the “Work In Progress” Section?</p>	<p>Decide as a group what to move from the PICK chart into Work in Progress. Write on the ticket who will be helping to work on this change and mark the start date that the opportunity ticket was placed in the “work in progress” section</p>				
6.	<p>Review QIP & Department Drivers, projects & PDSA’s & alignment</p>	<p>Reinforce the connection between the improvement work the team is doing with the QIP & Departmental Drivers .’</p>				

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	with Quadruple Aim (at least bi-weekly or 1X per month)	Update the team and get input on any countermeasures that the team is working on towards the QIP or Departmental Drivers Only if applicable: <i>Briefly</i> review PDSAs / projects / bigger improvements
7.	Celebration & Recognition: As a group identify reasons to celebrate / recognize someone or something at the beginning or the end of every huddle	Always finish your daily huddle on a positive note – recognize someone, something that has made the day or the previous day better for our patients / for ourselves. <i>Patient / provider comments! Accomplishments! Thanks! What went well / is going well today? Contributions to waste reduction! Defect removal! Anything else worth celebrating! Celebrate both successes and efforts even if they were not successful. It is all about our learning!</i> If not already completed, Record this on the celebration ticket.