Implementing Daily Management System Huddle Boards to Improve Communication Across Satellite Laboratories

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In a laboratory setting with fast-paced changes and heavy demands on staff, day-to-day communication across departments is challenging, yet paramount to resource sharing and near-real problem solving. Children’s Mercy Hospital Kansas City (CMH) has implemented system-wide lean practices focused on clinical and operational excellence. Our laboratory mission, or True North, is to produce clinically relevant laboratory results and information to assist in the diagnosis, treatment and prognosis of patients in a timely manner, by:

- Reducing Errors – Pre-analytical, Analytical & Post-analytical
- Making encounters with the laboratory extraordinary
- Reducing turnaround times
- Reducing waste
- Maximizing employee engagement and productivity
- Reducing taxes

A multi-tiered system would include huddle boards from individual department levels (i.e. Chemistry, Microbiology, or satellite department), one overall for the lab (pictured below), and the hospital as a whole. Each tier would report up to the next tier daily at the same time. Huddles are kept to five minutes or less.

CMS allows departments to identify MESS (alerts) that affect patient care. All information should be displayed in a simple, clear format where any employee walking by would understand how patient care is being delivered for that day. All huddle boards are dry erase for easy documentation and use red/green magnets to identify abnormalities “at a glance.” Huddles take place at the beginning of each shift with all stakeholders present to ensure clear communication between staffing changes.

2. Situation Awareness Notifications (abnormalities that need special attention that day)
3. Recognition (employees who go above and beyond contributions from previous day)
4. Announcements (department or institutional changes taking place that day)
5. Daily Workload (reported in patient volumes and previous day test volume)
6. Quick Hits and Big Issues (problem-solving; OH completed within 3 days/check-in dates for each)
7. Problem solving is a daily occurrence. These issues are documented as “Quick Hits” (being completed within the department in three days or less) or “Big Issues” (taking additional time, resources, and possibly external departments). Each problem is assigned to a lead and given a due date to report back. Progress is reviewed during huddles and documented using Harvey Balls showing progress. These sheets can be used to show inspectors documentation of issues resolved in the department.

Every department is required to identify situations that could cause delays in patient care. This can include, but is not limited to, IT downtime, courier delays, weather concerns, construction, or surges in patient volume. This information is followed up with Announcements and Employee Recognition.

Background

The Daily Management System (DMS) was implemented to improve communication and patient outcomes daily helps build a highly reliable organization focused on continuous improvement. In this continuously changing healthcare environment, institutions must become more efficient with limited resources, focused on clinical improvement, and empowering staff to think outside the box. DMS is an effective lean tool for organizations wanting to break down silos, improve communication between departments, and strive towards clinical and operational excellence.

Summary

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The Daily Management System has allowed for improved communication between shift exchange and departments throughout the hospital. The standardized process empowers frontline employees to identify abnormalities in staffing and equipment, resolution of issues, and efficiencies in process improvement. This bottom-up approach aligns with the True North mission allowing employees to become engaged and more solution-driven.

Health systems with multiple satellite locations are able to connect via telecommunication technology, allowing for near-real-time reporting and deployment of resources. This ensures optimal utilization of resources that can be reallocated based on volume drivers within the department. Aligning department readiness and metrics with patient outcomes daily helps build a highly reliable organization focused on continuous improvement.

Larger health systems often have satellite facilities in different geographical locations than the main hospital. Timely communication of department readiness across a health system is vital to ensure continual patient care when distance can affect distribution of additional resources. Telecommunications allows for huddles to take place online where information can be shared in real-time. This allows for administration to allocate additional resources quickly when necessary. CMH uses Polycom RealPresence to video conference huddles at the Tier 2 Laboratory Management huddle, as well as the hospital Tier 3 level. WebEx and Skype are other options for teleconferencing.

Conclusion

In this continuously changing healthcare environment, institutions must become more efficient with limited resources, focused on clinical improvement, and empowering staff to think outside the box. DMS is an effective lean tool for organizations wanting to break down silos, improve communication between departments, and strive towards clinical and operational excellence.

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