

Huddle Checklist & Feedback Form

Team Observed: _____ Observer: _____ Date: _____

Team members attending: Clerical Associate _____ RN _____

LVN _____ NP Student _____ Resident(s) _____

CHECK THIS BOX IF HUDDLE DID NOT OCCUR

SET UP	
	Met in the usual room
	All teamlet members had space / a chair
PREP	
	Nurse scrubbed the chart prior to the huddle
	Trainees were prepared (e.g. scrubbed charts if nurse could not; familiar with patients and had items to discuss)
CHECK IN WITH TEAM MEMBERS	
	How's everyone doing? Anyone not okay?
	Issues for the day?
	Is anyone on the team out / planning to leave early / upcoming vacation?
SEQUENCE OF SESSION	
	LVN presented cases of the clinic session for the day
	Agendas of patients are reviewed
	Identified whether or not patient was contacted
	Trainees/Nurse added concerns about patients (care coordination issues, MSA to update contact information, vaccine to be given @ check-in)
	RN or Trainee led the discussion of patients in upcoming wks
	RN or Trainee led the discussion of any active patients who need care outside of a scheduled visit
	Special needs required prior to the visit are discussed (e.g. fasting labs, outside records, pre-planning visit can be with spouse)
	Interprofessional practice partners from SW, MH, or nutrition need to see the patient for a same day visit? collaborative visit next week?
	Patients are triaged to telephone clinic if indicated
	Practice partner patients are triaged: Do they need to be seen or can partner see the patient when next on block?
	Dashboard review once per month
	All hospitalized patients or recent discharges are discussed with RN.
	Documents for faxing, mailing, etc. are handed to clerical associate.
Wrap-up	
	Did huddle start and stop on time?

List at least 1 specific feedback point (constructive or reinforcing):

Comment team member interaction (e.g. all team members engaged throughout the entire huddle, everyone speaks during the huddle):