

Huddle Tip Sheet

Workbook Reference: [Section 5.2](#)

Ever thought...

- “No one tells me anything?”
- “You just never know what is going to happen around here!”
- “I don’t want to disturb anyone, but I am going to have to leave early.”
- “I wonder if the team knows that Mr Jones has died.”
- “If I had known that, we could have planned better.”

Sound familiar? Implementing a huddle in your daily routine keeps the team informed, builds team collaboration, and allows the team to plan for the unexpected.

What is a huddle? A huddle is a rapid daily communication meeting. It’s an opportunity to look at planned work, avoid roadblocks, review schedule changes, and plan for patient visits. Planned, brief, daily communication allows teams to develop strategies for dealing with last-minute surprises and proactively plan to match supply and demand for the day.

How can this help my practice? Daily communication in the form of a huddle reduces surprises, bottlenecks, and interruptions by ensuring that teams are aware of schedules, equipment, and specialty needs of patients, staff shortages, and unexpected events. It’s also a time to share successes and insights learned from the previous day.

How do we begin?

- Be collaborative. Discuss the concept with your team.
- Discuss who should be at the huddle meetings.
- Agree to try a huddle daily at a specific time and stick to it.
- Find a location that is convenient, confidential, and allows access to information.
- Have a clear set of objectives and make sure the team knows what they are.
- Stand, don’t sit. Stay brief and focused; seven minutes is recommended.
- After a week of huddles, check in and see what you need to adjust.
- Develop a huddle agenda that meets the needs of your team.

What do we talk about?

- ☐ Which patients will take extra time and what is our strategy to manage this and reduce delays?
- ☐ How many appointments are available (openings to be filled or chronic no shows that can be anticipated) and what proactive measures can be implemented?
- ☐ What procedures are booked? Are we waiting for results?
- ☐ Who requires pre-orders, forms, or protocols?
- ☐ What activities are going on today (e.g., meetings, visitors)?
- ☐ What messages need to be responded to now?
- ☐ Have any of the physician’s clinic shifts changed?
- ☐ Are there any conflicts with personnel, space, and equipment?
- ☐ Do we need to consider any contingency plans for today or tomorrow?

Adapted from the [Advanced Access and Efficiency Workbook for Primary Care](#) created by Health Quality Ontario (July 2011) and the *Office Practice Redesign in Primary Health Care: Advanced Access and Office Efficiency Workbook* created by British Columbia’s General Practice Services Committee Practice Support Program.