Promoting the Spread and Integration of Huddle Boards at the James A. Haley Veterans (JAHVH) Hospital
Lisa Murchison DNP, ARNP, WHNP - BC, FNP-C

Purpose
- Promote spread & integration of Huddle Boards at JAHVH
- Develop plan for future DNP projects & enhance academic-practice partnership between USF CON & JAHVH

Background
- VHA provides comprehensive care to 21.8 Million Veterans
- 170 hospitals
- 1,065 outpatient clinics
- JAHVH provides comprehensive care to 227,635 veterans
- 504-bed inpatient facility
- 100-bed Spinal Cord Injury/Disorder Center
- 4 outpatient clinics & a dental clinic
- JAHVH turned to Huddle Boards
  - increase efficiency
  - boost safety
  - improve the quality of care.
- Huddle Boards are visual displays
  - Help team members better conceptualize QI ideas
  - Implement suggestions for improvement
  - Track improvement process through to final outcomes.
- Each military member enters into a contractual agreement with the U.S. government for their service.
  - The U.S. has a mandated duty to provide accessible, quality and safe healthcare to those members.

VHA = Veterans Health Administration  
USF = University of South Florida  
CON = College of Nursing

Framework
- Lean 6 Sigma is quickly attaining superiority among healthcare visionaries
- The 3 phases of Lewin's Change Theory seamlessly correspond to the phases of the Lean Six Sigma model.
- Lean Six Sigma and Lewin’s change theory combined
  - Defines then quantifies the problem
  - Analyzes the cause and confounding factors
  - Eliminates waste, develops and implements a solution and cultivates a means for sustainability
- Used in the development of the operational protocol

Mitchell, 2013; Shirey, 2013; Yaduvanshi & Sharma, 2017

Findings
- Strong parallels found in barrier and facilitating factors gathered from interviews and expressed in the literature

The most common overriding barrier themes
- Lack of dedicated time (#1 barrier consistently expressed by staff & the literature)
- Acute levels & staffing fluctuations
- Insufficient leadership/mentorship.

The most common facilitating factors/mitigating strategies
- Allocation of designated work time for improvement projects
- Increased mentoring
- Increased educational training.
- Obtaining staff buy-in

BARRIER FACTORS

Barrier Factor Themes of the 8 Acute Care Units

Barrier Factor Themes from the Literature

Combined Barrier Factor Themes
- Lack/Missing resources
- Staffing fluctuations/acuity levels
- Staff resistance to change

LEWIN’S CHANGE THEORY

UNFREEZE
- Examine status quo
- Evaluate driving & restraining forces
- Assess desire for change

MOVING
- Select clear objectives
- Implement plan
- Verify

REFREEZE
- Create sustainability

LEAN SIX SIGMA

DEFINE
- Define Measure
- Quantity
- Measure
- Identify the cause

IMPROVE
- Develop plan
- Future projects

CONTROL
- Maintain the solution

OPERATIONAL PROTOCOL

Identify
- promotor & barrier factors
- Literature review
- Presentations

Operational Protocol

Lewin’s Change Theory and Lean Six Sigma’s overlapping relationship to the operational protocol of the DNP project

Methods

1. Face-to-face Interview questionnaire developed
   - All nurse managers of the 8 acute care units interviewed
   - Data obtained on perceptions regarding promoting and barrier factors affecting Huddle Board and QI

2. A comprehensive literature review performed
   - Barrier and promoting factors studied
   - Mitigating strategies used to negotiate barriers evaluated

3. Complied comprehensive summary of results from 1 & 2
   - Recommendations developed for promoting the spread of Huddle Boards & quality improvement in the 8 acute care units

4. Companion presentation based on the results was developed

Recommendations

1. Establishing consistently dedicated time for staff to work on the Huddle Boards
2. Consistent and reliable manager buy-in & mentoring. Managers to initially be the “Driver” of the Huddle Boards to assist with its adoption until it is routine
3. Managers develop a routine to engage with the staff on SAIL measures. Discuss those metrics & mentor staff to promote changes on their units that affect their unit as well as VA hospital metrics
4. Develop a system such as SharePoint, so the staff can see the benefits/contributions the Huddle Boards make toward patient outcomes
5. Insertion of USF DNP students on each of the 8 acute care units to be a consistent and reliable dynamism promoting sustainability

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University of South Florida College of Nursing  
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