

Development and Evaluation of a Nurse Practitioner Huddles Toolkit for Long Term Care Homes

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INTRODUCTION & AIMS

- The health and wellbeing of Long-Term Care (LTC) employees needs to be supported¹
- Huddles lead to improvements in team outcomes²
- Nurse Practitioners (NPs) have unique clinical and leadership experience to build capacity and support LTC staff
- Aims: Develop a toolkit for NP-led huddle implementation, adapt it to the context of a LTC home, and evaluate its acceptability

METHODS

1. Guided by community-based participatory approach to research, intervention was developed based on a LTC home's COVID-19 experience (n=1)
2. The study followed a four-step development, adaptation and evaluation process (figure 1)
3. Manifest content analysis was utilized for qualitative data (n=10)

RESULTS

- Toolkit is made up of two sections consisting of components sourced from the literature
- First section contains huddle description, ground rules, communication strategies, and tools for record keeping and reflection
- Second part of the toolkit contains six huddle guides to aid the NP in facilitating huddle discussions (Table 1). Guide structure was adapted from the Clinical Excellence Commission³
- Overall acceptability of the toolkit was rated as high (n=6)

CONCLUSION

- Co-design with community stakeholders is essential to develop and adapt an intervention to the needs of the community
- The toolkit may be utilized by NPs and other leaders to implement huddles into their daily practice in LTC homes

Interviewees spoke favourably of toolkit components

Tools for record keeping (whiteboards and opportunity for improvement cards) were particularly embraced

“You look at [the whiteboard] and it stays in your head, and you think” (RPN)

Challenges with workload and timing to engaged all staff were discussed

Recommendations to increase participation of managers in huddles were made

“It would be really beneficial to just show the staff that they're here” (RPN)

Figure 1. Stages of intervention development, adaptation, and evaluation

I. Stakeholder engagement and capacity building
○ Finding and engaging a community stakeholder (NP and LTC home)
○ Forming a project team within the LTC home representing all groups of staff
○ Identifying an area for improvement based on the stakeholders' experiences
II. Developing the intervention
○ Mapping the identified areas for improvement onto recommendations ¹ to support the workforce
○ Reviewing the literature and summarizing the intervention goals and components
III. Adaptation of the intervention
○ The intervention is introduced to the project team in a 2-hour workshop
○ In the workshop discussions related to acceptability, feasibility, and need for changes ensued
IV. Acceptability evaluation
○ Treatment acceptability questionnaire ⁴ completed by the project team at the end of the workshop
○ Interviews were conducted with staff participating in huddles

Table 1. Summary of toolkit guides and their aims.

Guide Topic	Aim
Team communication	To help the facilitator improve interdisciplinary team communication and coordination by reviewing risk situations and discussing how they can be addressed and prevented in the future.
Addressing COVID-19 fatigue	To review safety practices to prevent the spread of COVID-19, identify gaps and review personal protective equipment practices, share strategies for reducing COVID-19 spread and alleviating COVID-19 fatigue.
Improving resident assessment and reporting	To build staff capacity in assessing and reporting changes in residents' condition using the Situation, Background, Assessment, Recommendation (SBAR) framework, which can facilitate rapid information sharing and improve staff communication. ⁵
Addressing death through discussion	To aid the facilitator in starting a group-discussion related to resident death with the goal of addressing staff burnout. Modeled after Death Cafes, a practice of initiating mindful discussions of shared experiences. ⁶
Addressing moral distress	To provide emotional and informational support to staff to address experiences of moral distress.
Guided mindfulness meditation	To practice mindfulness and meditation. Based on the guidance script to briefly practice mindfulness with night nursing staff, ⁷ which can improve stress handling, ability to provide care, and teamwork.

DISCLOSURES

- This study was approved by the UHN Research Ethics Board (REB #20-6298)
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REFERENCES



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