Huddles Intervention Manual



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Section I:

Guidance on introducing and implementing huddles in long-term care homes

This section consists of components sourced from the literature that have been found useful for initiating and facilitating huddles. It includes ground rules, communication strategies, strategies to identify huddle topics, and tools to reflect on the huddles and the discussed topics.



Introduction

Team huddles are brief multidisciplinary meetings that occur at regularly scheduled intervals among unit staff. They permit staff to engage in discussions on topics relevant to their workplace, to evaluate crisis situations (experienced by residents and/or staff) and plan for their resolution. Results of a scoping and a systematic review and two studies support the effectiveness of huddles in:

- Improving staff outcomes, including communication, situational awareness, satisfaction, supportive climate, and self-efficacy.³
- Encouraging safety culture and patient outcomes through standardized constructive interactions among all staff.⁴
- Promoting information sharing in relation to safety. It is an opportunity to discuss safety situations that occurred or can be anticipated within 24 hours.



Ground Rules

The rules for conducting huddles were generated from a list of recommended practices identified from a structured systematic review recently conducted by Ryan et al.⁴



1. Team huddles should be carried out at the same time.



2. Team huddles should be carried out at the same location.

The location should provide privacy when sensitive information is shared.



3. Team huddles should last no longer than 15 minutes.



4. Team huddles should follow the same structure.



5. Ensure that a facilitator is present to carry out the huddles.



6. Ensure that the aim of the huddle is clearly stated at the beginning of each huddle.



7. Ensure that at least one positive event that occurred in the last 24 hours is shared at the start of each huddle.



8. Model and encourage respectful behaviour.

Huddle Strategies

The structure for choosing huddle topics is inspired by "Gemba" walks in which those seeking to improve a process learn how to do so through a walk about, gathering feedback from staff, and observing the day-to-day operations first-hand. This walk will produce concrete notes for you to use in steering the direction of the meeting. It will also allow you to check-in briefly one-on-one and assess the atmosphere, feelings, and priorities prior to the meeting based on your interactions.

1. Gather topics of interest early.



- Do a very brief walk around of the unit prior to the huddle with the purpose of gathering a sense of what staff would like to discuss in the huddle.
- Hand out pieces of paper to staff on the unit and ask them to write down anything important they would like to discuss and address the issues raised over the course of several huddles.
- Using this method, it may be more effective to gather ideas in intervals (i.e., once a week).

2. Choose topics of interest for 'Look now' section of the huddle.



- Look through papers for themes, common questions, and concerns.
- Choose one theme that seem appropriate based on staff responses and information gathered from your interactions. Set aside the rest of the themes for later huddles.

3. Address topics using strategies to maximize communication.



- Ensure you have set the proper tone and expectations at the beginning of this intervention to encourage best communication practices.
- Implement guidelines for taking turns speaking, time taken by each staff member, redirection of huddle focus, etc.
- In the 'Look now' section of huddle structure, introduce the chosen topic for this huddle. This intervention is meant to remain flexible and serve staff's pressing needs first, so use feedback from staff in the moment to decide whether to continue with this topic in the huddle.
- When diversions from your agreed-upon focus arise, or individuals are not communicating efficiently or effectively, employ strategies to keep discussion focused.

Proactive Communication Strategies

These strategies for effective huddle communication have been sourced from white and grey literature, citing anecdotal experiences of leaders from a variety of fields. These strategies can be implemented to facilitate huddle discussion and to address any issues that may arise.

Proactive Communication Strategies



- At the beginning of the intervention, set expectations for the purpose of huddles, (i.e., to voice and address chosen topic, not solve large problems requiring separate meetings).⁸
- Set expectations for attendance, being prompt, and starting on time regardless of who is late.⁹
- You can encourage staff to flag when there are issues occurring within the huddle, in terms of structure, participation or content. Having multiple team members keeping the discussion on track will ensure its effectiveness.¹⁰
- It may be helpful to remind everyone to stand the stand up component keeps the quick nature of the huddle in the forefront of staff's minds.¹¹

It may improve communication to implement some sort of system to ensure everybody speaks:

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- 1. Take turns going around in your circle¹²
- 2. Throw something, like a ball, to each team member to speak¹²
- 3. Allot one minute for each person to share
- 4. Use the Rule of "3"13
 - If you have already spoken, you cannot speak again until 3 others have spoken, or it has been at least 3 minutes since you talked.
- 5. Last come, first serve¹²
 - Have the last staff member to join the meeting speak first, and so on in reverse order of arrival. This may create an incentive to arrive on time.
- 6. Make sure everyone has a chance to speak by directly asking if anyone has anything else to bring up before moving on to another topic.8

"If you launch it, land it." When an issue or question is raised, take the time to follow it through to a resolution before moving on to another topic.

Reactive Communication Strategies

You can establish some sort of signal to bring attention to any tangents and redirect focus. For example, it could be a funny sound on your phone or computer to play when someone goes off topic.¹⁴

Call ELMO¹³:

- ELMO stands for Enough, Let's Move On. Calling ELMO implies that the topic has run its course in the discussion and should be placed aside for further discussion at a later time.
- You can print a picture of Elmo and show it at the huddle when it is time to move on.

Use a tool such as a "parking lot"15:

- When a conversation is identified as off-topic, it is placed in the "parking lot", to be addressed at a later time. The "parking lot" could entail a corner of the whiteboard where these topics are listed to be discussed after the huddle or at the next huddle.
- "Let's park this topic for now. We can discuss the items in the parking lot in the next huddle."

Other useful phrases15-17:

- "OK, you're absolutely right and is it ok if we talk about that later?" (Getting their buy-in will ensure that they don't return to their point at the next opportunity)
- "This sounds like an interesting idea. Can you tell me more about it after this meeting?"
- "Could you email that to me so I can spend more time digesting it?"
- "You seem distracted. Is there a problem?"
- "It looks like we've departed a bit from the agenda."
- "Since our time today is limited, let's go back to our agenda. We can discuss in tomorrow's huddle"

For someone whose tendency is to dominate the conversation, talk with them ahead of time or throughout the day.

"I noticed not a lot of people were participating in the huddle today. What did you notice? How
do you think we could get others to participate? I wonder if you might allow some space in the
huddles for others who may prefer to process ideas internally to speak."

Remember: This intervention is meant to improve team communication. In implementing clear guidelines at all levels, and continuing to foster a collaborative, safe environment for staff, issues with communication will ideally decrease over time.

Recording and Reflecting on Team Huddles

A Huddle Observation Tool (HOT), developed and validated by Edbrooke-Childs and colleagues¹⁸, was designed to aid facilitators of team huddles in recording and reflecting on the conduct and the information exchanges during huddles in a structured manner. The HOT was adapted to better suit the context of long-term care. Use this tool to track the huddles and the topics discussed, as well as reflect on the team processes of the huddles.

| Leader Initials: | | | | | Event name:(e.g., 'SBAR Communication Framework') | | | | | |
|--|------------|---------|----------------------|------------|---|-------------------------------|------------|-----------|----------------|--|
| Unit Bed | | | | | Number | of attendees by r | ole• | | Completed by | |
| Occupancy | | | | | Number of attendees by role: In-house / Agency | | | | (please tick) | |
| Date | Pate / / | | | | NP | | | | | |
| Start time | : AM / PM | | | | RN | | | | | |
| End time | : | | | | RPN | | | | | |
| | | | | | PSW | | | | | |
| Were the following discussed? | | Yes | No | | Other: | | | | | |
| Aim of the huddl | le | | | | | | | | | |
| A positive event | | | | | | | | | | |
| Looking back | | | | | | | | | | |
| Looking now | | | | | | | | | | |
| Planning | | | | | | | | | | |
| | | | | | | | | | | |
| If you would like to add to or expand on these categori the additional notes sections. | | | utegories, please us | е | | | | | | |
| During today's Huddle | | | | | | | | | | |
| Was a clear leader identified? | | | | | | | | | | |
| | | | | | | | | | | |
| To | what exten | d would | | | ith the follo atement for | owing statements each row. | s about to | day's hud | dle? | |
| | | | Strongly disagree | D | isagree | Neither agree nor disagree | Ag | gree | Strongly agree | |
| Structure The huddle followed a clear structure | | ; | | | | | | | | |
| | | | Notes on obse | rvations : | and reasons | for rating given | 1 | | | |
| Structure: | | | | | Environment: | | | | | |
| Collaborative culture: | | | | | Risk management: | | | | | |
| Additional notes | s: | | | | | | | | | |

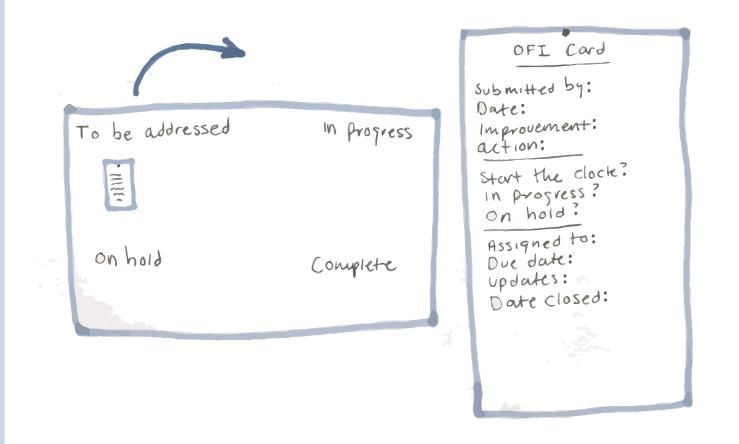
Tracking Huddle Topics

Placing a white board on the unit where the huddles are occurring can help visualize progress on opportunities for improvement discussed in the huddles and permit staff to introduce topics they would like to discuss in the huddles. Below are presented two variations on how the white boards can be set up.

1. White boards summarizing topic, priority, action to take, progress state, and comments can be set up. Staff can write down topics of interest to them (anonymously if they wish). The board will need to be updated by the huddle facilitator or a huddle participant after each huddle.

| DATE | TOPIC THAT NEEDS TO BE DISCUSSED | PRIORITY High Moderate Low | ADDRESSED AT THE HUDDLE? | | ACTION TO TAKE | STATE Completed In progress Needs time | COMMENTS |
|------|--|----------------------------|--------------------------------|----|----------------|---|----------|
| | | | Yes | No | | reeds time | |
| | | | | | | | |
| | | | | | | | |

2. Opportunity for Improvement (OFI) cards can be made available to staff on the unit. Using OFIs, staff can describe the opportunity for improvement and suggest an action for it. A white board divided into four sections can be used to visually track progress of OFI cards.



Section II:

Guides for initiating and steering discussions during huddles

These guides were created to help with initiating huddles on a variety of topics. A general guide that can be adapted to the needs of the huddle participants in the moment in included. Additional pre-developed guides address improving communication, addressing COVID-19 fatigue, improving resident assessment, addressing death through discussion, addressing moral distress, and initiating guided mindfulness meditation.



)verview

The structure for the huddles was adapted from the The Clinical Excellence Commission¹⁹. Each guide follows the main activities (and allotted time) listed below. Following this general outline, the facilitator can adapt the huddle to discuss topics not contained in this toolkit.

Opening (2 min)



Introduce the huddle and its aim: "Welcome to the huddle for [date]. The aim of today's huddle is [aim]"



 Start by sharing a positive occurrence that happened in the last 24 hours

Look back (3 mins)



Recap topics, incidents, concerns, and/or crisis situations that will be discussed in the huddle



Look now (7 mins)



Brainstorm how the topic can be addressed or resolved



Planning (3 mins)



- Recap focus for the shift
- If any items need follow-up, assign accountability
- Provide positive reinforcement to staff and recognize their contributions



Reflecting



As the facilitator, reflect on the huddle and record it using the Huddle Observation Tool¹⁹



Note: As the leader or facilitator of the huddle, you might not have all of the answers. Let staff know you will follow up and get back to them.

Team Communication

Session aim: The goal of the huddle is to improve multi-disciplinary team communication and coordination by discussing risk situations that occurred in the past 24 hours, how to address them and what situations can be anticipated in the future.

Opening (2 min)



• Introduce the huddle and its aim: "Welcome to the huddle for [date]. The aim of today's huddle is to improve team communication by sharing up-to date information and discussing any risk situations that occurred in the last 24 hours and that can be anticipated during today's shift"



Start by sharing a positive occurrence that happened in the last 24 hours

Look back (3 mins)



- Safety incidents or communication concerns that occurred in the past 24 hours
- How have they been resolved?
- How can they be prevented from being repeated?

Look now (7 mins)

- Identify any resident concerns that may need addressing:
 - COVID-19 or emerging symptoms
 - · Prescribed high risk medications
 - Increased falls risk
 - Behavioural/cognition concerns
 - Delirium
- Are there any residents who pose a risk to staff (residents or relatives)?
- Identify any family/caregiver concerns
- Address any staffing concerns for the shift
- Introduce any new agency staff
- Address PPE amount in stock
- Share any new COVID-19 related policies that have been introduced recently

Planning (3 mins)



- Recap and include current state issues and significant safety focus for the shift
- Assign accountability for any items that need follow-up
- Provide positive reinforcement to staff and recognize their contributions



- As the facilitator, reflect on the huddle and record it using the Huddle Observation
- As the leader you might not have all of the answers. Let staff know you will follow up and get back to them



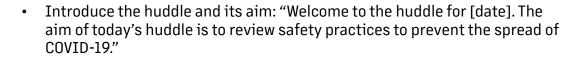


Addressing COVID-19 Fatigue

Session aim: The goal of the huddle is to discuss situations that make following IPAC guidelines a challenge, identify gaps and concerns related to PPE, recap appropriate PPE use.

Opening (2 min)







Start by sharing a positive occurrence that happened in the last 24 hours

Look back (3 mins)



- Discuss any concerns in relation to PPE supplies or IPAC guidelines
- Ask the staff to share any barriers in following IPAC guidelines

Look now (7 mins)



- Share any changes in IPAC guidelines and/or protocols
- Discuss safe practices for staff to don and doff PPE
- Encourage staff to practice peer evaluation by giving feedback in a respectful, non-threatening way on proper PPE wear
- Outline strategies for reducing the spread of COVID-19^{20, 21}:
- 1. Practice social distancing
- 2. Avoid touching your eyes, nose and mouth
- 3. Use respiratory etiquette (cough/sneeze into a tissue or bent elbow)
- 4. Clean and disinfect frequently touched surfaces
- 5. Remove your uniform at work and change into clean clothing to travel home
- 6. Leave your work shoes at work and change into clean shoes to travel home
- 7. Launder in hot water and dry thoroughly
- 8. Shower as soon as possible once home
- 9. Avoid public spaces and large gatherings wherever possible
- 10. Practice good self-care practices (i.e., sleep, healthy nutrition, physical activity, social well-being)
- 11. Monitor self and others for respiratory symptoms (fever, cough or difficulty breathing), seek medical care and self-isolate as indicated by employer

Planning (3 mins)



- Validate staff's feelings of fatigue, a natural feeling of becoming tired of the rules and guidance they need to follow to prevent COVID-19 spread
- Provide positive reinforcement to staff and recognize their contributions in preventing the spread of COVID-19





- As the facilitator, reflect on the huddle and record it using the Huddle Observation Tool
- As the leader you might not have all of the answers. Let staff know you will follow up and get back to them



Optimizing Resident Assessment

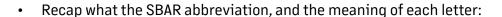
Session aim: The goal of the huddle is to build staff capacity in assessing and reporting changes in residents' conditions using the SBAR communication framework. It can be beneficial for staff by saving their time, and decreasing frustration related to communication especially when working with new and/or agency staff.²² SBAR framework permits rapid information sharing, and can lead to improvements in staff communication and satisfaction.²³ It allows not only to discuss residents' history, but also express concerns and observations.

Opening (2 min)



- Introduce the huddle and its aim: "Welcome to the huddle for [date]. The aim
 of today's huddle is to empower staff in formulating recommendations to each
 other and other clinician, including but not limited to managers, NPs, MDs, BSO
 personnel, palliative care teams."
- Start by sharing a positive occurrence that happened in the last 24 hours

Look back (3 mins)





- **S**ituation: What is the situation? Why are you calling a clinician?
- Background: What is the background information? What is the resident's history?
- Assessment: What is your assessment of the problem? What is going on?
- Recommendation: How can the problem be corrected? Is there anything you need to do?

Look now (7 mins)



- Encourage staff to share concerns using the framework. If staff have no concerns to share, encourage practice using a scenario:
- Example: Ms. M is a 90-year-old woman with no-code, no allergies, and no previous falls. Ms. M had a fall in her room and has a history of dementia. She is reporting a sharp pain in her right hip.



Encourage staff to re-state the situation using the SBAR framework



Planning (3 mins)

- Recap and encourage staff to use the SBAR framework throughout the day
- If any concerns were shared during the huddle follow-up once they huddle ends
- Provide positive reinforcement to staff and recognize their contributions



- As the facilitator, reflect on the huddle and record it using the Huddle Observation
- As the leader you might not have all of the answers. Let staff know you will follow up and get back to them



Dealing with Death and Dying

Session aim: The goal of the huddle is to start a group discussion related to death with the goal of reducing staff burnout and depersonalisation. The huddle is modeled fter Death Cafés, the aim of which is to encourage mindful discussions of shared experiences in a safe environment. The goal is not to educate on death and dying, but to initiate discussions about death without expectation.²⁴ If possible, **consider inviting a social worker to the huddle**, in case any difficult situations arise. Consider hosting the huddle at the end of the shift, in case staff feel challenging emotions.

Opening (2 min)



 Introduce the huddle and its aim: "Welcome to the huddle for [date]. The aim of today's huddle is to have an open discussion about death during the pandemic."





Look back (3 mins)

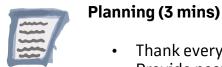
• Think back to residents and/or staff members who passed away throughout the COVID-19 pandemic.



Look now (7 mins)



- Remind staff that this is a safe environment, and that other's views must be tolerated
- Invite anyone who wants to speak to share any experiences, reflections, and/or thoughts
- As the facilitator, you are invited to participate in the discussion



- Thank everyone for sharing their experiences
 - Provide positive reinforcement to staff and recognize their work





- As the facilitator, reflect on the huddle and record it using the Huddle Observation Tool
- As the leader you might not have all of the answers. Let staff know you will follow up and get back to them
- If mental health resources are available through your organization, remind staff of them
- Refer to the following resources for additional information in facilitating discussions around loss developed by the The Palliative Approach in Long-Term Care Community of Practice:
 - 1. Information on Grief and Loss
 - 2. Resources on bereavement, grief and loss



Discussing Moral Distress

Session overview/Goal: The goal of the huddle is to promote wellbeing of staff and address their fear and fatigue by providing emotional and informational support. Moral distress is the impact that moral decision making has over time on the professional while moral stress refers to the awareness that competing values are at play and that they cannot be resolved due to external constraints. Moral stress refers to situations in which the professional knows the right thing to do but is prevented from engaging in what they have defined as the right course of action.²⁵

Opening (2 min)



 Introduce the huddle and its aim: "Welcome to the huddle for [date]. The aim of today's huddle is to build team resilience through emotional support"



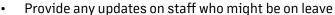
Start by sharing a positive occurrence that happened in the last 24 hours

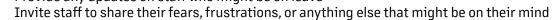
Look back (3 mins)



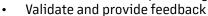
Recap incidents that occurred in the past 24 hours

Look now (7 mins)

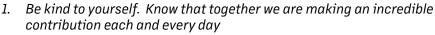


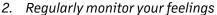






Provide tips for self-care^{26,27}







- 3. It is common to feel anxious and/or worried. Share your concerns and problem solve with a fellow team member, team leader, family, and/or friends.
- 4. Ensure to get adequate sleep and monitor for signs of overload (i.e., waking in the night, trouble falling asleep, fatigue, trouble concentrating, irritability, high stress, disconnecting with others). If signs appear, connect with your health care provider
- 5. Step away from reading every news and social media highlight. Use reputable sources of information
- 6. Physical activity can help reduce stress and boost your mood. Consider walking, biking, running, or exercise while practicing physical distancing
- 7. Integrate self-care breaks during your daily routine; even 10-minute breaks can make a big difference in your health and well-being
- 8. Work as a team, check-in, offer support to each other and foster open communication



Planning (3 mins)

- Encourage all staff to share affirmations on a positive event
- Provide positive reinforcement to staff and recognize their work



- As the facilitator, reflect on the huddle and record it using the Huddle Observation Tool
- As the leader you might not have all of the answers. Let staff know you will follow up and get back to them





Guided Mindfulness Meditation

Session overview/Goal: The goal of this huddle is to practice mindfulness meditation. Evidence suggests that meditation can reduce nurses' stress, anxiety, and depression as well as improve well-being and empathy. ^{28,29} The script for this huddle is based on a structured guidance script developed by Resnicoff and Julliard for brief mindfulness meditation with night nursing staff on a rehabilitation unit. ³⁰ The research found that although initially there was resistance to the sessions, overtime staff came to like the intervention and reported feeling calmer, better able to handle stress and provide care, as well as improved teamwork and camaraderie. ³⁰ The sessions were conducted at midnight, in a quiet place, with all participants seated on chairs. ³⁰

Opening (2 min)



Introduce the huddle and its aim: "Welcome to the daily huddle for [date]. The aim of today's huddle
is to practice mindfulness meditation. Meditation can reduce stress, anxiety, and depression,
improving wellbeing."



- Start by sharing a positive occurrence that happened in the last 24 hours.
- Invite staff to sit comfortably with a straight spine, body relaxed, legs and arms uncrossed, feet flat on the floor.

Look now (7 mins)



- Invite staff to take a deep slow breath. As they exhale, invite them to slowly close their eyes.
- During the next deep breath in to honor yourself and the sacred work that that you do to help care for residents. Gently exhale.
- Now take a deep, slow breath in to honor your colleagues. We all work together as a team, as a family, supporting each other. Gently exhale.
- Take one more deep slow breath in; this one to honor residents and their families, and our coworkers beyond our unit in the home, and also extending our thoughts and good wishes to those beyond the hospital walls, to our friends and family, and the whole world. And gently exhale.
- Continue to sit together quietly and breath.

Planning (3 mins)



- On the next breath, ask staff to become aware of their surroundings as they begin to open their eyes and bring their mind back to returning to work.
- Share a quote that will help everyone remember the importance of the work that we do and the community that we have here. [Insert quote here.]

Sample quotes:



- "Nothing is worth more than this day." (Goethe)
- "It is in the shelter of each other that the people live." (Irish proverb)
- "You have not lived until you have done something for someone who can never repay you.
- "Always keep an open mind and a compassionate heart." (Phil Jackson)
- "A person's true wealth is in the good he or she does in the world." (Mohammed)
- "The unselfish effort to bring cheer to others will be the beginning of a happier life for ourselves."
- (Helen Keller)
- Invite staff to carry this thought, as they get back to work.
- Provide positive reinforcement to staff and recognize their contributions

- · As the facilitator, reflect on the huddle and record it using the structured tool
- As the leader you might not have all of the answers. Let staff know you will follow up and get back to them



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