Mad Libs IDT Huddles: A Try-Storm for Change Acceleration

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Introduction

- Interprofessional collaboration is essential to develop a safe discharge plan for patients. Healthcare teams should work together to develop a treatment plan aimed to achieve patient's identified health goals.

- Documentation in an electronic medical record has allowed for real-time review of a patient's condition and progression of goals by the interprofessional team. Consequently, it can also reduce the face-to-face interactions that different team members have with one another, secondary to the increased patient care demands (Bochatay, 2019).

- In response to changes in communication patterns, hospital team members have developed daily, in-person, interdisciplinary (IDT) discharge planning huddles to improve communication and coordination of care (Šanc & Prosen, 2022).

- IDT huddles are composed of nursing leadership, physicians, advance practice providers, bedside nurses, RN case managers, social workers, and physical and occupational therapists.
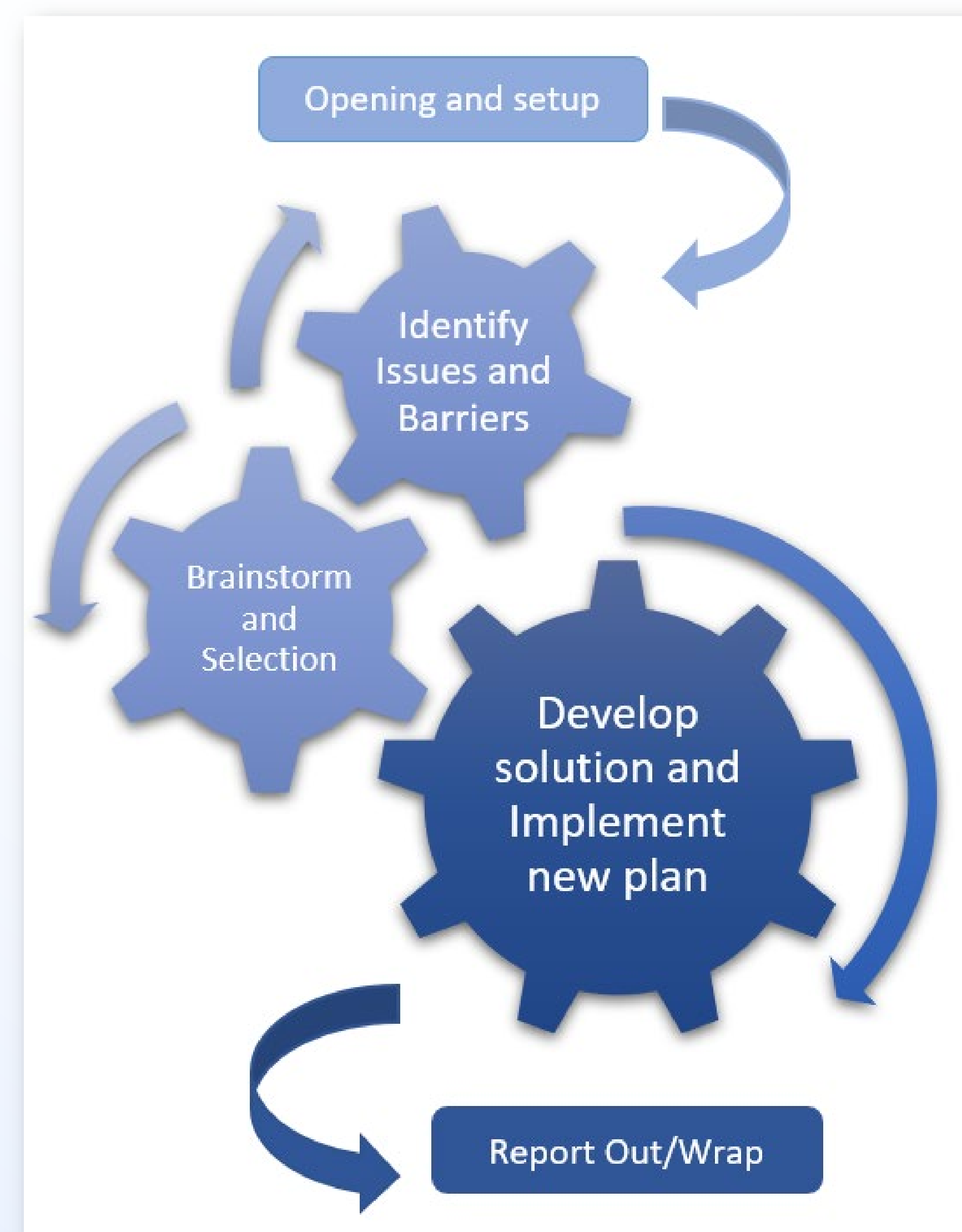
References

- Bochatay, N. (2019). Discussing teamwork in health care: From interprofessional collaboration to coordination and cooperation. *Health Information & Libraries Journal*, *36*(4), 367–371. https://doi.org/10.1111/hir.12282
- Šanc, P., & Prosen, M. (2022). Interprofessional collaboration in interdisciplinary healthcare teams: A quantitative descriptive study. *Obzornik Zdravstvene Nege*, *56*(1), 9–21. Retrieved September 11, 2022, from https://doi.org/10.14528/snr.2022.56.1.3106

Try-Storm Fundamentals

What is a Try-Storm?

A Try-Storm is a 6-hour concentrated team-based decision making and empowerment process used to resolve issues, improve processes rapidly, and implement new process within 60 days.

Opening and setup → Identify Issues and Barriers → Brainstorm and Selection → Develop solution and Implement new plan → Report Out/Wrap

IDT Try-Storm Objectives

Standardize IDT Huddles
Communicate changes
Train team members new content
Develop sustainability plan

Mad Libs Huddle Script

IDT Huddle Lead
Join me in a prayer to kickoff IDT Huddle.
"I pray I do my part to lift each downcast spirit and to soothe each heavy heart. May my touch bring reassurance. May my voice be soothing too; may my gentle care remind them of the love they have in you. Amen."
Let's start with ___ PATIENT NAME ___ in room ___ ROOM # ___.

IDT Huddle Nurse
The patient is here for ___ PATIENT'S CURRENT PROBLEM ___. They normally ___ and their current mobility score is ___ PATIENT'S PRIOR MOBILITY / HLM SCORE ___ with a goal of ___ AMPAC SCORE ___. The patient ___ DOES OR DOES NOT ___ require oxygen. They ___ DO OR DO NOT ___ have tube/line/drain issues (*state issues if present*). The patient ___ IS OR IS NOT ___ tolerating their diet. They ___ DO OR DO NOT ___ have output issues (*state issues if present*).

IDT Huddle Therapy
The patient ___ DOES OR DOES NOT ___ have ambulation issues (state issues if present).

IDT Huddle Care Management
The patient will be discharged on ___ ESTIMATED DISCHARGE DATE ___. They will be going to ___ DISCHARGE DISPOSITION ___. The patient ___ DOES OR DOES NOT ___ have discharge needs.

IDT Huddle Lead – Prompt at the End of Each Patient Discussion
Do we have any other discharge barriers to discuss?

Does the patient require oxygen?
If the answer is "YES", consider the below questions:
- Has the oxygen been weaned?
- Can the oxygen be weaned?

Is the patient being discharged home?
If the answer is "YES", consider the below questions:
- Is the patient appropriate for discharge center?
- Is the patient/family aware of the discharge date? Are there any concerns?
- Who is transporting the patient?
- When will patient transportation be here?
- Does the patient have a discharge appointment?
- Does the patient have or need DME to go home
- Does the patient have Home Health?
- Does the patient have Home Support?
If the answer is "No", consider the below questions:
- Is authorization pending or authorization needed?
- Who are payors?

Does the patient have tube/line/drain issues?
If the answer is "YES", consider the below questions:
- Does the patient have a foley needing removal?
- Does the patient need PICC for IV Antibiotics to discharge?
- Can PICC/CVC be discharged?
- Does the patient have diet issues? Does the diet need to be advanced?
- When was the patients last bowel movement?
- Does the patient need a suppository or enema?
- Does the patient have IV pain meds to ween?

Other Questions to Consider:
- Does the patient have any family issues?
- Did the patient have a clinical status change or significant clinical event?
- Is the patient status inpatient or observation? (*state if observation*)
- What level of care did the patient come from?
- Does the patient have any medication issues?
- Does the patient have any radiology scans scheduled or pending?
- Does the patient have any lab issues?
- Is the patient being telemonitored? Can the telemonitoring be discharged?

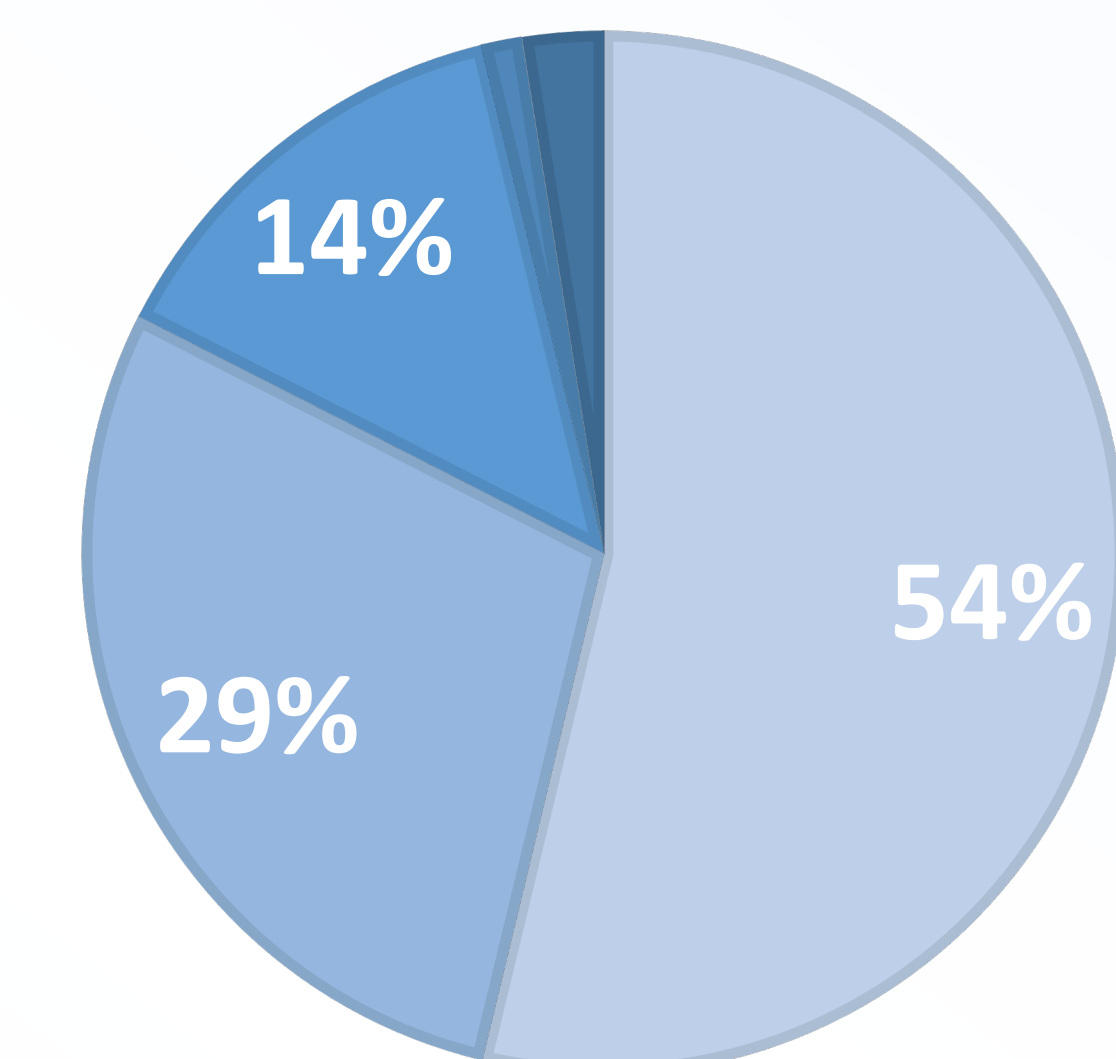## Data Collection Plan

Mad Libs IDT Huddle Feedback Survey

Weekly Survey Questions

What unit are you on?
In what ways is IDT beneficial?
Does IDT help align patient care?
In what ways can IDT committee help improve IDT huddles?

Results

Does IDT Align Patient Care? (n=80)

- 54%
- 29%
- 14%

Very Likely • Likely • Neutral • Unlikely • Very Unlikely

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