**Aim**

To improve clinic efficiency and to increase vaccination rates through the use of clinic huddles

**Background**

- Across the University of South Florida (USF) organization, resources are being invested to help implement huddles, even in high-volume subspecialty clinics. This is important as part of our certification as a Patient Centered Medical Home (PCMH).
- The Institute for Healthcare Improvement has recommended the clinic huddle as a communication strategy to improve health care outcomes.
- “Huddles” are brief meetings where the team anticipates and plans for needs during the patient session.
- The huddle can be used to improve communication, clinic efficiency, and patient-centered care using a team-based approach.
  - The huddles can be used to check on clinic stock of vaccines and share individual performance rates of vaccination per encounter the prior week.
  - With clinic huddles patients were identified who were due or overdue for influenza and pneumococcal series prior to their arrival.

**Results**

Overall, 102 forms were submitted with the average time spent in huddle being 6 minutes.

**Morsani Center:** 45 huddle forms were submitted with the average time spent in huddle being 4.85 minutes.

**Healthpark:** 57 huddle forms were submitted with the average time spent in huddle being 7 minutes.

**Vaccination Rates:**

<table>
<thead>
<tr>
<th></th>
<th>Influenza</th>
<th>Pneumococcal Series</th>
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</thead>
<tbody>
<tr>
<td>Pre-huddle</td>
<td>45%</td>
<td>Pre-huddle: 31%</td>
</tr>
<tr>
<td>Post-huddle</td>
<td>87%</td>
<td>Post-huddle: 54%</td>
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</tbody>
</table>

**Conclusions**

By implementing huddles, we wanted to improve clinic efficiency and increase vaccination rates. We were successful in increasing vaccination rates at both clinic sites. We stuck with a simple strategy to improve vaccination rates by simply reminding staff to offer vaccines to patients and sharing vaccine rate data. This supports the idea that one can improve vaccination rates by focused mentorship and team accountability.

Due to error in documentation, data regarding clinic efficiency is lacking. Better documentation and more data is needed to determine whether huddles had any impact on efficiency. With that said, many variables can impact clinic efficiency such as number of patients scheduled for each half day, number of providers, and number of support staff so if we were to examine efficiency across clinic sites those variables would need to be documented.

Overall, the use of huddles improved communication among the team and allowed us to plan for the needs of our patients better which was demonstrated through the increase in vaccinations.

**Actions Taken**

For each clinic half-day session at USF primary care clinical sites, internal medicine residents lead their teams of medical assistants and attendings in a huddle to anticipate staffing, timing, procedures, and to facilitate teamwork. We used a standardized form that also captured a balancing measure of time spent in huddles. EPIC reports were used to compare performance in vaccination rates and healthcare maintenance before versus after huddles were initiated.

**Resources**