

Emergency department safety huddle

Script template



Time	To be confirmed
Location	Emergency department (ED) close to clinical area
Duration	5-10 minutes
Frequency	Every shift
Huddle Leader	Rotating
Introductions	
<ul style="list-style-type: none"> Huddle leader is decided locally (an opportunity for development). 	<ul style="list-style-type: none"> Leader to introduce themselves and invites any new attendees to introduce themselves.
Membership: to include (but not limited to) the below	
<ul style="list-style-type: none"> ED nursing management ED medical officers ED nurses Administration staff Patient experience officers 	<ul style="list-style-type: none"> ED clinical nurse consultants ED nurse educators ED pharmacist ED radiology team member
Looking back: since the previous ED safety huddle	
<p>What did we do well? Come prepared with an ED example, e.g. compliments and good news stories</p> <p>What could be better or improved? Come prepared with an example. Include an emergency care assessment and treatment (ECAT) related question, e.g. How many ECAT protocols have been used?</p>	Add examples here:

Looking forward: are our patients and staff safe?	
Predictions over the next shift: <ul style="list-style-type: none">• Challenges• Capacity, occupancy and access• Clinical risk and acuity• Workforce, skill mix and staffing Any other safety concerns? <ul style="list-style-type: none">• Unsafe practices and processes• Equipment and stock	To prepare, we will: <ul style="list-style-type: none">• plan interventions to reduce the risk of patient deterioration• escalate all identified issues early.
Finalise	
<ul style="list-style-type: none">• Follow the unit-specific plan for following up safety concerns, and assign accountability.• Ensure closed loop communication in allocating actions to mitigate risk.	
Finish: End the safety huddle and thank attendees.	

Acknowledgement

This document has been adapted from the [NSW Clinical Excellence Commission Safety huddles: Implementation guide 2017](#).