

## Neurosurgery Morning Huddle Reduces Costs and Increases Patient Satisfaction

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### Introduction

Morning discharge huddles consist of multiple members of the inpatient care team and are used to improve communication and patient care and to facilitate patient flow through the hospital. However, the effect of huddles on hospital costs and patient satisfaction has not been clearly elucidated. The authors investigated how a neurosurgeryled interdisciplinary daily morning huddle affected various costs of patient care and patient satisfaction.

### Methods

Huddles were conducted at 8:30 am Monday through Friday, and lasted approximately 30 minutes. The authors retrospectively looked at the average monthly costs per patient for a variety of variables (e.g., average ICU days, average step-down days, average direct cost, average laboratory costs, average pharmacy costs, hospital ratings, and hospital recommendations) and compared the results from before and after implementation of the huddle.

### Huddle Initiation and Associated Cost Saving and Patient Satisfaction

TABLE 1. Summary of results in the pre- and posthuddle periods				
Variable	Prehuddle	Posthuddle	p Value	Effect Size
Cases	82.75 ± 6.412	83.267 ± 4.413	0.883	NA
ICU days	3.303 ± 0.345	2.771 ± 0.409	<b>0.048</b>	1.406
Step-down days	1.685 ± 0.282	2.523 ± 0.233	<b>&lt;0.001</b>	3.240
Direct cost per patient	\$29,154.17 ± \$2,547.24	\$29,596.87 ± \$1,717.59	0.749	NA
Laboratory costs	\$1,272.67 ± \$112.34	\$1,087.93 ± \$95.21	<b>0.011</b>	1.774
Pharmacy costs	\$3,277.00 ± \$513.97	\$2,334.40 ± \$356.44	<b>0.002</b>	2.131
% discharged by noon	12.742% ± 2.664%	18.073% ± 2.712%	<b>0.006</b>	1.983
Rate hospital a 9 or 10	72.050% ± 7.198%	85.165% ± 5.826%	<b>0.005</b>	0.707
"Strongly agree"—definitely recommend hospital	76.425% ± 6.33%	86.612% ± 7.147%	<b>0.039</b>	0.602
"Strongly agree"—understood disease	47.492% ± 7.815%	56.588% ± 6.786%	0.071	NA
"Strongly agree"—understood purpose of medication	58.175% ± 9.022%	66.429% ± 6.684%	0.117	NA
NA = not applicable. Boldface type indicates statistical significance. Values are expressed as the mean ± SD.				

### Results

There was a significant decrease in the number of ICU days, average laboratory costs, and average pharmacy costs per patient after the huddle was implemented; decreased laboratory and pharmacy costs produced \$1,408,047.66 in savings. There was no significant difference found for the average direct cost. The percentage of patients who rated the hospital as a 9 or 10 significantly increased. The percentage who answered “strongly agree” when asked whether they would recommend the hospital also significantly increased.

### Conclusions

A short morning huddle consisting of key members of the inpatient team may result in substantial hospital savings derived from reduced ICU days and laboratory and pharmacy costs as well as increased patient satisfaction.

### Learning Objectives

By the conclusion of this session, participants should be able to do the following: 1) Describe the importance of team based patient care; 2) Discuss in small groups how morning discharge huddles could be or are beneficial in their own institutions; 3) Identify the benefits and drawbacks to morning discharge huddle implementation.

### References

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