

## Collaborative Learning Approach: a Safety Huddle

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### Abstract

*To change behaviours regarding Patient Safety (PS), it is important to select the right pedagogical strategy to promote it. The PS huddle strategy, implemented was based in a role-play situation, based on a topic included in the Portuguese National Patient Safety Plan. This strategy seems to have contributed to raising twelve students' of first edition of postgraduate course in clinical supervision awareness and interest in the PS subject. All the students indicated the strategy as a methodology that facilitates learning in class, promote creativity, critical mind and emotional intelligence development. It was also described as easily replicable for the various healthcare scenarios, regardless of the level of action. The use of new active teaching approaches in higher education are an important way to help student's developing them soft and hard skills and should be integrated more often in the postgraduate courses. They indicated the importance of replicating in future editions.*

**Keywords:** Patient Safety; Huddle; Clinical Supervision; Collaboration

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### 1. Introduction

To change views and behaviours regarding patient safety, it is important to select the right pedagogical strategy to promote it (Paulo & Mendes, 2019). Care will only be safe if it considers the preferences and vulnerability of the patient in other words if the right care be provided at the right time (Barroso et al., 2021). In this way, and according to Paulo and Mendes (2019, p. 265), patient safety is a topic that is highlighted by health systems around the world, only possible of reach with address educational processes, allowing construction, consolidation and growth.

Among possible pedagogical methodologies to be applied by Higher Education Institutions, it is important to reflect on and apply active learning methodologies in learning Patient Safety (PS). In this context, the teacher should take a role more mediation-oriented, as a facilitator of

learning, in which the protagonist of the method is the student themselves. This is a methodology that is based on meaningful learning, uses pedagogical activities to build knowledge and acquire skills, attitudes and behaviours that are essential for the future professional (Paulo & Mendes, 2019; Soares, 2021).

It is known that when it comes to teaching the PS thematic, it is entirely different to take part in a simulation or role-play about an hypothetic error in patient care - a moment in which students experience strong emotions and feelings - than to passively listen to a lesson on the subject (Paulo & Mendes, 2019). It is also, recommended that learning integrates case control studies, case reports, small groups activities, with simulation and role-playing taking pride of place among the recommended strategies (WHO, 2011).

The main pedagogical activities that consider the principles listed above, as well as their challenges and benefits, are those that bring the most benefits and effects, both to teaching and to practice in the daily context of health institutions (Paulo & Mendes, 2019; WHO, 2011).

However, and especially in postgraduate training, teaching based on active methodologies is highly recommended. Namely, the use of role-playing stands which allows students to improvise/write dialogues and actions in a predetermined or selected scenario, interpreting roles and dialogues in a situation or case control study. Actors, patients and/or the students themselves can be used for the role-play (Paulo & Mendes, 2019). However, the main challenges identified are: (1) writing the scripts; (2) developing situations that provoke choices, decisions, and conflicts; (3) some students may take on the role of passive spectators and (4) the performance may lose its rhythm. Although the recognized benefits are: (1) low cost; (2) be interactive and empirical once it introduces and sensitizes students to the roles that patients, families, health professionals and administrators play in clinical setting; and (3) it is ideal for exploring interprofessional work factors and communication in error prevention in clinical care (Paulo & Mendes, 2019).

The PS Huddle strategy aims to increase situational awareness and anticipate possible unsafe conditions. It is a method that increases safety awareness at the operational level, or even at the front line, and helps the organization to develop a safety culture. These consist in quick, periodic meetings that allow work to be aligned and points of situation to be assessed, promoting teamwork and systematized action for continuous improvement (Institute Healthcare Improvement, 2004; Taylor et al., 2014).

The Huddles strategies can be held for a number of purposes, namely: 1) concerns about quality and safety from the previous day or shift; 2) quality and patient safety issues from the day; 3) review of problems identified by the team or one of its members; 4) input on issues related to quality and patient safety; 5) announcements and information that needs to be shared within a team, as the use of new drugs or scheduling procedures, among others (Institute Healthcare Improvement, 2004; Kolb, 2105; Paulo & Mendes, 2019; Taylor et al, 2014).

In this sense, it is important to know, the key areas recommended to be worked on PS, on World Health Organization (WHO) perspective and from a national perspective, through the health national polities in the different countries.

Globally, the issue was analysed at the seventy-fourth World Health Assembly in 2021, with the vision of “a world in which no one is harmed in healthcare and all patients receive safe and respectful care, always and everywhere”. Thus, the Global Action Plan for PS (2021) emerged, with the aim of providing strategic guidance to all stakeholders to eliminate avoidable errors in healthcare and improve patient safety in different domains of practice, through policy actions on safety and quality of health services, as well as for the implementation of recommendations at the point of care. The plan integrates a framework made available to countries, allowing them to develop their respective national action plans on patient safety, as well as aligning existing strategic instruments to improve patient safety in all clinical and health-related programs (WHO, 2011).

Still in this context, and namely in Portugal, the health policies are provided by the Ministry of Health through the National Patient Safety Plan developed to the years of 2021-2026 (PNSD 2021-2026), approved on September 24<sup>th</sup> of 2021, and published in Order no. 9390/2021. ° 9390/2021, which is structured and based on five strategic pillars which should play a prominent role for healthcare professionals, namely: 1 - Safety culture; 2 - Leadership and governance; 3 - Communication; 4 - Prevention and management of patient safety incidents; 5 - Safe practices in safe environments.

### **1.1. Aim**

This study aimed: to explore the students’ points of view, reactions as well as how they felt and adjusted to the huddles strategy in which they actively participated - (role-playing and dramatization) about PS; to assess in student perspective, the teaching methodology implemented (Huddle strategy). These aims try to answer some previous questions as: i) what are the students’ points of view, reactions as well as how they felt and adjusted to the huddles strategy?; ii) How is accessed the huddle strategy in students perspective?; iii) Does huddle strategy capable to contribute for a new student’s prespective about PS?

## **2. Methodology**

### **2.1. Study Desgin**

Integrated in the first edition of postgraduate course in clinical supervision, in academic year of 2022/2023, of Health of Sciences School in Portugal, it was developed an exploratory study based on qualitative approach with twelve nursing students enrolled in the course and attends the safety and risk management discipline.

The participants were invited to create a PS huddle. To minimize the challenges of the methodology, we considered some aspects to carrying out the work, including: i) creating groups of four elements, and invited to identify/create a situation based on the selection of one major topic included in the Portuguese National Patient Safety Plan (Republic Diary no. 187/2021, Series II of 2021-09-24); ii) the students have to write the huddle script (where they identify one clinical setting; stakeholders; problem in focus and a solution for it) during ten minutes. iii) all participants in the groups must play a defined and active role in the process; iv) the students should play a role from a different professional group, as much as possible, to be able to take on roles from a multi-professional perspective.

The fact that the time limit was set at 10 minutes ensured that the role-play would not lose pace and everyone in the group had to actively participate.

The final presentation took place online. All groups also submitted their work in written format, where it was possible to indicate the conclusions of each group, regarding the work they did throughout the curricular unit.

As data collection it was developed an individual online survey with 4 open questions, self-completed. The conclusions of the written work were also analysed in order to find out the groups' perception of the work and their perspective on learning. It was analysed the information with a content analysis (Bardin, 2020).

Fulfilled the ethic assumptions, all students signed informed consent.

### **3. Findings**

The class was made up of 3 female participants and male nurses.

All the groups complied the huddle time and were easily able to select the key area to be worked on, as well as the clinical setting, where it would take place.

It was developed four projects in PS: one in Primary Health Care setting; three in the hospital setting. Concerning to the thematic developed: two were in PS Culture and two on Safe Practices in Safe Environments. Of the projects developed to the hospital setting, involves different medical speciality: paediatric emergency; adult emergency; orthopaedics service articulation with imaging service. In the context of primary healthcare, the work was done to prepare an audit for the certification of functional units.

In terms of the professionals chosen, there were several different areas of health professionals, namely: nursing, doctors, senior radiology, psychology, and physiotherapy technicians. Health assistants and clinical secretaries were also selected to join the huddles. No group was made up of patients.

The entire group (n=12) considered the selection of the action and evaluation methodology based on a Safety Huddle to be good (n=6) or excellent (n=6). Even those who were already familiar with its practice (n=1) validated its relevance in the context of PS and risk management.

Highlighting the individual opinions collected in the online survey, the student's opinion about the huddle methodology in the Risk Management and Patient Safety Curriculum Unit, shows a positive student's perspective. S8: "*the methodology seems extremely appropriate to me. Rather than being expository, it was interactive (through the presentation of videos and, above all, through feedback from the teacher and colleagues). This method of assessment through group work, but practical work, seems to me to be extremely pertinent and allows the student to acquire theoretical and practical knowledge related to the area of patient safety. It's more important than giving expository content to give students the tools to effectively research and explore the areas of greatest interest, so that they can then effectively apply them in clinical practice*".

S12: "*I particularly liked the methodology, it is a different kind of work, but with a dynamic of collaborative work, which mirrored the knowledge transmitted in the course*" and S6: "*I found the methodology interesting and motivating, 'escaping' a little from traditional assessment methodologies. I really liked this assessment strategy, the HUDLLE, which I already knew because this strategy was used in the dialysis clinic where I worked*".

It was either highlighted, the fact that the presentation occurred in online format, bringing cost-benefits advantages, and comfort of being in them homes.

The students (n=12) were asked about the relevance of maintaining the methodology used. All of them positively validated the appropriateness of the huddle methodology/approach to Patient Safety (they rated it adequate [n=2] and very adequate [n=10]), and they agreed that it should be maintained in future editions. As can be seen in table 1, some emotions and feelings such as 'empathy' and 'collaboration' and some opinions such as 'dynamics' or 'orientation' were summarized (see table 1).

**Table 1. Students opinions and reactions to the strategy implemented.** Source: Own Elaboration (2014).

Category	Outcome	Value
Emotions/feelings	Empathy	n=12
	Collaboration	n=9
	Curiosity	n=9
	Surprise	n=8
	Optimism	n=4
Opinions	Orientation	n=12
	Clarity	n=11
	Dynamics	n=9

Highlighting the group opinions collected in the written work, to substantiate the significant contribution of this methodology, it is important to consider the opinion of a working group (S2, S6, S9, S11) who said: *"We have concluded that we have achieved the main objective we set ourselves in carrying out this work, in line with what was recommended for the assessment of the Curricular Unit. It enabled us to develop the skills needed to design and build a Safety Huddle based on one of the five pillars that support the fourteen strategic objectives of the PNSD 2021-2026. The group highlight pillar 5, which refers: "Safe Practices in Safe Environments", one of the principles of the clinical supervisor's work. This construction exercise allowed us to understand the phases that make up a Safety Huddle and the content to be developed in each of them. Its operationalization also enabled us to develop strategies for planning, implementation and the importance of follow-up."*

#### **4. Conclusions**

The PS huddle strategy seems to have contributed to raising students' awareness and interest in the PS subject, especially in key areas (according to what they could select) that are very useful to their services of origin or other areas that are less explored by professionals.

Most of the participants addressed topics/services of interest to their current and/or future practice. Bearing in mind that the huddle makes it possible to improve situational awareness and anticipation of unsafe conditions (all the students agreed with the methodology), they indicated the importance of replicating it in future editions of the Patient Safety and Risk Management discipline.

All the students indicated that it is a methodology that facilitates learning in class, and is easily replicable for the various healthcare scenarios, regardless of the level of action, helping them to develop their creativity, critical mind and emotional intelligence. This strategy also brings to the teacher a challenge to interact in specific moments to generate some improvement stimuli in the learning process, demanding high control of time and insight, into knowing when to intervene and how.

Despite of the positive students' opinions concerning the online strategy to play the huddle, it is also perceived as a limitation, because it does not confront them in a face-to-face interaction, and the importance to deal with non-verbal communication. An aspect to consider for future editions, to promote face-to-face interactions and compare the outcomes.

The use of new active teaching approaches in higher education are an important way to help students' developing their soft and hard skills and should be integrated more often in the postgraduate courses.

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