

# Visible Leadership, (Visit Pyramid) & Quality Huddles

## Questions and Answers

### 1. What is a visit pyramid?

- A visit pyramid is a schedule of visits to a site that leadership will be making on a continuous basis. This includes all levels of leadership from the CEO, Executive Director, Directors and Chief Administrative Officers, to managers and supervisors. The frequency of visits changes for each level of leadership. See link: <http://healthpei.ltsee.com/category/visit-pyramids>

### 2. Why is the visit pyramid important?

- Provides an opportunity for leaders to engage with those we serve -- Patients, Clients, and Residents.
- Provides the leaders an opportunity to discuss the strategic priorities of Health PEI and how the work in the service area relates to the strategic priorities.
- Allows discussions to take place at the quality board between leaders and front line staff of the service area.
- Provides an opportunity for leaders to share with front line staff what you consider is important from a quality/ safety perspective to you, as a leader.
- Provides an opportunity for you to hear from front line staff, what is considered important to them, from a quality and safety perspective.
- Assists managers/ staff in priority setting at the site.
- Enables leaders to offer support and recognition to front line staff for continuous quality improvement (CQI) and patient safety efforts, as well as discuss barriers and challenges.

### 3. How as a manager do I prepare to host a Quality Board huddle within my program area?

- Ensure that the Quality Board is up and meets the HPEI standard. <http://healthpei.ltsee.com/category/program-resources/>
- Advise staff of the purpose of the Quality Board Huddle; link the purpose of the QB huddle to the big picture for potential improvements in patient/ client, resident quality and safety; establish a consistent time for the weekly huddle, outline contributions staff can make to ensure the purpose of the QB huddle is achieved.
- Identify that occasionally, according to the visit schedule leaders from Health PEI will be joining the program area huddle.
- *One on one support* from Lean Six Sigma resources is available (Black Belts and Green Belts), Quality Risk Coordinators, and Health Information Specialists. Supports include: QB Design, Hosting 1<sup>st</sup> QB huddle, identification of quality data to display on your board.

- Health PEI Pursuing Quality & Excellence Website contains numerous resources including: Pursuing Quality & Excellence Quality Huddle Video, leadership standard work, final report out for PQ&E Initiatives. <http://healthpei.ltsee.com>
- Communicate, communicate, and communicate. Ensure front line staff is aware of the purpose of the site visit, who will be visiting the site, when and for how long.

**4. Does the manager or clinical lead, need to meet the site leader, ED/ CEO on site?**

- It is important that the manager or at least one member of the leadership of the service be available to participate in the visit.

**5. Should someone from the PQ&E project team carried out in the area attend as well if a project has been done?**

- The site visits are an important opportunity to recognize and acknowledge on-site quality champions and the hard work necessary to bring about change for improved patient/client/resident care.
- The Yellow Belt(s) certainly can enhance the visit as they can speak to specific QI achievements as well as challenges that were / are encountered.
- It is an opportunity to discuss the project status, potential for spread and sustainability.

**6. What is the expected length of time for each visit?**

- It is anticipated that the site visit usually lasts approximately 15-20 minutes maximum, although initial visits may take a bit longer.

**7. What is a safety cross?**

- A safety cross is a calendar in the shape of a cross in which we can record a metric and the number of occurrences.
- A safety cross is a visual data collection tool to allow the site to immediately identify areas for improvement in real time. It also allows the team an opportunity to openly discuss issues, and to plan for improvements to reduce the number of occurrences for patients, clients, residents and staff.

<http://healthpei.ltsee.com/category/templates>

**8. What is a Quality Board Huddle?**

- In conjunction with Quality Boards, Quality Huddles are a quick standup meeting for all staff in the area to communication about the overall performance of the area and to update on any PQ&E quality improvement initiatives or specific projects.
- A video is also available on the PQ&E Website outlining the Quality Board Huddle; <http://healthpei.ltsee.com/category/training-videos>
- *To conduct a Quality Huddle, all staff meet around the Quality Board.*
- *The Manager, Clinical Lead or Clinical Educator lead the discussion.*

## Huddle Agenda

1. Discuss and share the information necessary for the week/ day (as appropriate) in an exception reporting format
2. Discuss the safety cross:
  - Discuss Safety Cross target and progress
  - Reasons the measures or targets are not met on either the measures or safety cross
3. Discuss any and all projects that are taking place. What is going on, who is doing what etc.
  - Overview of the A3 to highlight and updates and/or changes
  - Overview of the Communication Plan to highlight and updates and/or changes
  - Progress update on project, measures
  - Review current PDSA cycles and the action plans for each PDSA and update accordingly
  - The Quality Board Standard document is available:  
<http://healthpei.ltsee.com/category/program-resources/>

## 9. Who can I call for support in creating my Quality Board or to answer further questions?

For additional information or support for this work please contact or call Lauren Kelly, Systems Optimization Analyst, [lekelly@gov.pe.ca](mailto:lekelly@gov.pe.ca), or by phone: (902) 569-7712, or your Quality Risk Coordinator.