TEAMBIRTH

# TeamBirth Postpartum Huddle Facilitator Guide

**Objectives:**

- Practice conducting a huddle using the TeamBirth model.
- Focus on ensuring team communication, inclusion, patient preferences, shared decision-making, and future planning.

**Resources Needed:**

- Current Postpartum Boards for practice (print-outs or actual boards)
- TeamBirth Discussion Guides

## Group Setup:

- Each facilitator will have approximately 5-6 **participants**.
- Go over **four key components of a huddle** with group before practicing (The Facilitator should read aloud the prompts below.)
- Orient teams to **how they will use your existing postpartum boards** to document TeamBirth core components.
- Debrief with the **huddle questions** then transition to the 2nd huddle. Debrief the 2nd huddle as well.

## Role Assignments:

For each group, assign the following roles:

- **Patient**
- **Support Person (assign more support persons if there are additional participants)**
- **Provider**
- **Nurse**
- **Huddle Observer**

**Read out loud after assignments have been made for first huddle:**

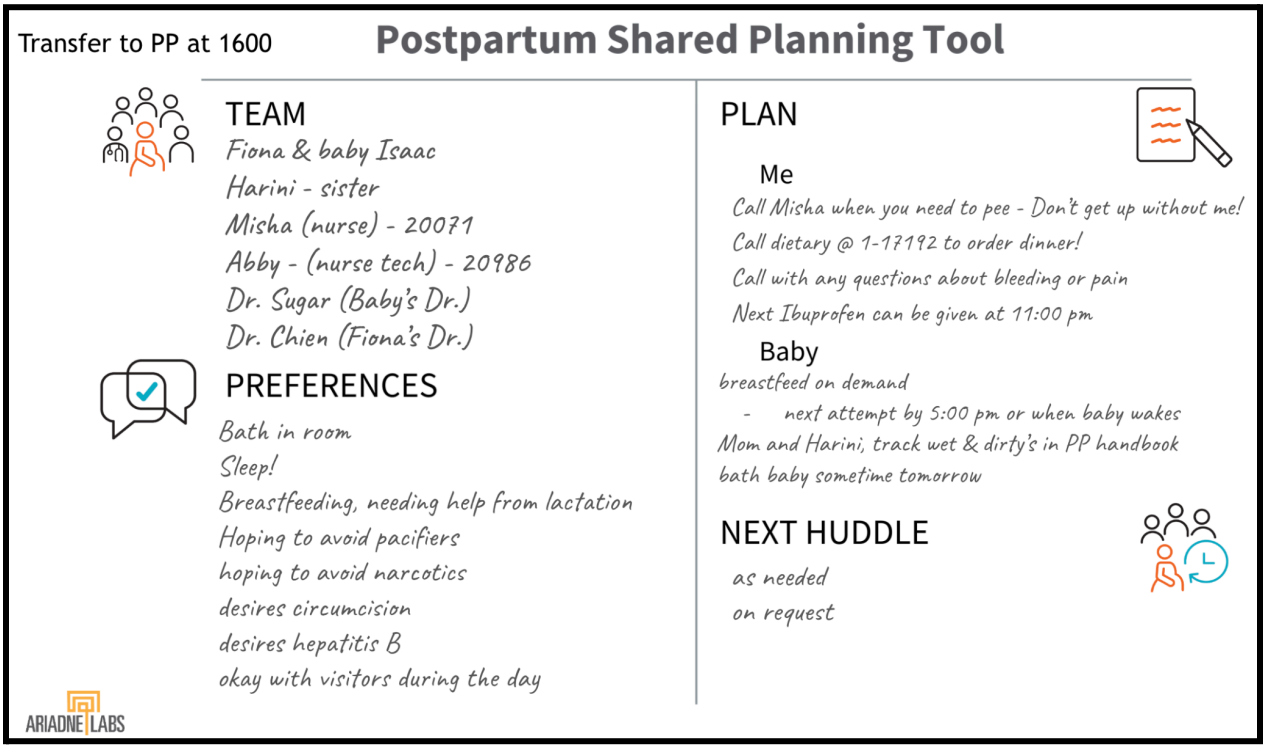
*Fiona delivered a baby boy vaginally on Friday, October 25th at 0843.*
Baby Isaac report:

- Baby boy Isaac weighed 7 lbs 6 ozs
- Apgars 8/9
- Mom is planning to breastfeed
- Vitamin K and Erythromycin was given
- Parents do want circumcision
- Desires Hepatitis B Vaccine
- Baby latched at 1410 for 15 minutes

Maternal Fiona report:

- 1st-degree laceration
- QBL 287 ml
- A positive blood type
- GBS negative
- Hoping to avoid narcotics - ibuprofen for pain management
- Epidural removed at 1445
- She has not yet stood, and her legs are still heavy

To begin, how would a nurse update this board to reflect routine orders ***outside of a huddle?***

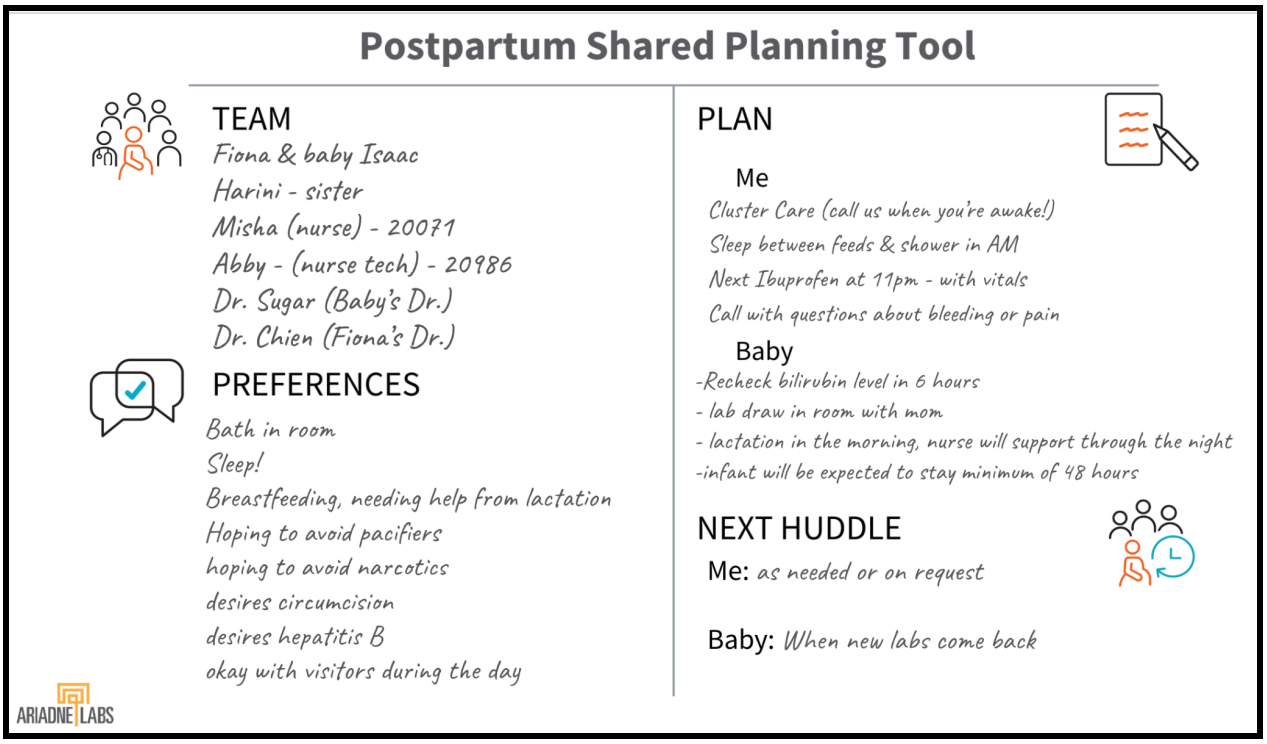



*This board is here as a reference for what a filled out board could like based on the above scenario.

## Once the board is updated and the team agrees, move forward with a pediatric team huddle.

The nurse calls the provider because the Infant's Bilirubin results are back, and Baby Isaac is in the High-Risk Zone. The nurse must call and demonstrate a good SBAR report on speaker phone to the pediatrician. This can be modeled in person.

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*This board is here as a reference for what a filled out board could like based on the above scenario

## FOUR KEY COMPONENTS OF A HUDDLE

| | |
|---|---|
| **1. TEAM** | • Establish **psychological safety** by inviting every team member to actively participate in the huddle.<br>• **Identify** and **document** the team members (including patient, support persons, doula, provider, nurse).<br>***EMPHASIZE:***<br>• Verbally announce that a **huddle is happening** to the entire team.<br>• Encourage a **team-based approach**, rather than a top-down approach from clinicians. |
| **2. PREFERENCES** | • Ask **open-ended questions** to learn what is important to the patient right now.<br>Examples:<br>○ "What is important to you right now?"<br>○ "What do you need us to know?"<br>○ "What are you most concerned about?"<br>• Reference the **birth plan** when applicable, and update it as needed throughout care. |

| | |
|---|---|
| | ***EMPHASIZE:***<br>● Ensure **open-ended questions** are used.<br>● The patient has had enough time to **share their preferences** and ask any **questions.** |
| **3. PLAN** | ● Use shared decision-making to discuss options based on the patient's preferences and the medically appropriate choices.<br>● Develop **THREE distinct plans**:<br>○ **Plan for the patient** (e.g., rest, position changes, pain management)<br>○ **Plan for the baby** (e.g., continuous vs. intermittent monitoring)<br>○ **Plan for labor** (e.g., Pitocin, cervical ripening balloon, breaking waters)<br>***EMPHASIZE:***<br>● Encourage **patient decision and consent** and ensure the patient understands and agrees to the plan (not just doing things "to" the patient). |
| **4. NEXT HUDDLE** | ● Avoid giving exact times for the next huddle but offer general timeframes (e.g., "in 3-4 hours," "when something changes").<br>● Reassure the team that huddles can be called **at any time** if a team member has a question or there's a change in the patient's status.<br>***EMPHASIZE:***<br>● Huddles can occur whenever needed.<br>● **Any team member** can call a huddle, regardless of their role. |
| **KEY CONSIDERATIONS** | ● Encourage all team members to **write on the board** (names, preferences, plans).<br>● The **clinical team should address the patient and support persons**, not just each other.<br>● Use **non-medical, patient-friendly language** when writing or speaking.<br>● **Close the loop on the plan** by ensuring everyone has a clear understanding of the next steps. |

TEAMBIRTH

**Huddle Observation Form**

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1. Please attest to personally observing or being a part of a TeamBirth huddle by selecting your role in the huddle:
   - ◯ I was a clinical team member in the huddle
   - ◯ I was a support person (like spouse, doula, family, etc) in the huddle
   - ◯ I was an observer of the huddle

2. Which of the following instances prompted the huddle? **Select all that apply:**
   - ☐ Admission
   - ☐ Labor Progress
   - ☐ Pain Control
   - ☐ Change in care management
   - ☐ Shift change/Hand-off/Discharge
   - ☐ Prior to non-emergent intervention for **mom/birthing person**
   - ☐ Prior to non-emergent intervention for **baby**
   - ☐ Post-birth/Post-emergency Debrief
   - ☐ Other, please specify: _____

3. Did the team clearly state that this conversation was a TeamBirth huddle?
   - ◯ **Yes** *A team member stated clearly that a TeamBirth huddle was occurring*
   - ◯ **No** *The huddle occurred but was not clearly named for those present*

**TEAM**

4. Was each person introduced by name and role at the beginning of the huddle?
   - ◯ **Yes, everyone** *Including the patient and any support people*
   - ◯ **No, only some** *Some people were not introduced by name & role, please specify:* _____
   - ◯ **No** *Introductions were not done*

5. Were the team members' names & roles written on the shared planning board, either during this huddle or previously?
   - ◯ **Yes, all** *All names & roles were written on the board*
   - ◯ **No, only some** *Some names & roles were left off the board, please specify:* _____
   - ◯ **No** *No names were written on the board*

**PREFERENCES**

6. Did the team ask the patient to share preferences or concerns related to the current plan being discussed?
   - ◯ **Yes** *Patient was able to share preferences or concerns*
   - ◯ **No** *The care team did not ask the birthing person to share preferences or concerns*

7. Were any patient preferences or concerns about the current plan written on the shared planning board, either during this huddle or previously?
   - ◯ **Yes** *Preferences or concerns about the current plan were written on the board*
   - ◯ **Yes, previously** *Preferences or concerns were previously written on the board*
   - ◯ **No** *Preferences or concerns were not written on the board*

**PLAN**

8. Did the team discuss the care plan options and make decisions that incorporated or addressed the

patient's shared preferences or concerns?

◯ Yes ◯ No

9. Were the following care plans written or updated on the shared planning board?

| | Yes, board updated | No, board did not need updating | No, board left blank |
|---|---|---|---|
| Plan for Me / Mom | ◯ | ◯ | ◯ |
| Plan for Baby | ◯ | ◯ | ◯ |
| Plan for Labor Progress | ◯ | ◯ | ◯ |

**NEXT HUDDLE**

10. Did the team discuss expectations for when the next huddle may occur?
    - ◯ **Yes** *Clear expectations for the next huddle were stated*
    - ◯ **No** *The team did not discuss the next huddle*

11. Were the expectations for when the next huddle may occur written on the shared planning board?
    - ◯ **Yes** *Next huddle options were written on the board*
    - ◯ **Yes, previously** *Next huddle options were previously written on the board*
    - ◯ **No** *Next huddle options were not written on the board*

**REFLECTIONS**

*The below reflections provide opportunities for discussion and feedback with the team to support improvement!*

12. Was everything written on the board in patient friendly language?

    ◯ Yes ◯ No

13. Who wrote on the shared planning board during this huddle? **Select all that apply:**

    - ☐ Mom/Birthing person
    - ☐ Support person (doula, family, friend, partner, spouse)
    - ☐ Nurse
    - ☐ Provider (midwife/physician)
    - ☐ Other (please specify)

14. What went well during the huddle?

15. What challenges did you observe or experience?

16. How could the team improve next time?

17. Did you provide any feedback to any team members based on the above observations?

18. What else do you want to share about your experience with this TeamBirth Huddle?