DAILY HUDDLE | QUICK-REFERENCE GUIDE

DIRECTIONS

Use this quick-reference guide to help you quickly refresh your knowledge of a daily huddle. More in-depth knowledge about this topic can be found in the **Meetings Course** lesson "**Daily Huddles**".

ESSENTIAL BASICS

WHAT IS THE PURPOSE?

To get everyone informed of the patient appointments and procedures scheduled for that day and to go over any specific coordination between areas of the office that might be needed.

WHEN SHOULD IT BE?

Daily, about 15 minutes before the start of the workday, or at the end of the workday to go over the next day's patients.

WHO SHOULD ATTEND?

All staff scheduled to work that day.

WHAT INFORMATION TO BRING?

- The patient treatment schedule and procedures for the day.
- New patients and/or consultations scheduled.
- Any known special circumstances or unique needs of patients.
- Anticipated needs that may require assistance from team members.
- Referral source information for new patients and consultations.
- Data on anyone referred by any patient who is scheduled for that day.

MEETING INFORMATION:

A daily huddle is a meeting to handle the "intersections" – the places where back office/treatment areas and front office (scheduling, insurance, payments, internal marketing) will run into each other throughout the day and to coordinate their activities. This meeting is intended to be short and snappy. It's not there to review every detail about each patient such as going over charts, health histories, case planning, insurance plans, patient intake forms or general practice business. If it goes too long, it will become unpopular and fall out of favor with staff.

TOPICS FOR DISCUSSION:

- An overbooked schedule due to an emergency patient and figuring out the best way to handle it.
- Unexpected changes or holes in the schedule.
- In-take forms for a new patient need to be finished before the patient is taken to the treatment area.
- Patient likely needing an extra procedure and coordinating with the financial area for expected payments and/or pre-authorization.
- Finance/insurance area needs to see a patient before they leave.
- Additional scheduling with patients that will need to occur.
- Special/unique needs of certain patients.
- Which staff will thank a patient for a recent referral.