

SAFER COMMUNICATION IN HEALTHCARE SECTOR

SBAR IS THE WAY FORWARD



SBAR

- S**ituation
- B**ackground
- A**ssessment
- R**ecommendation

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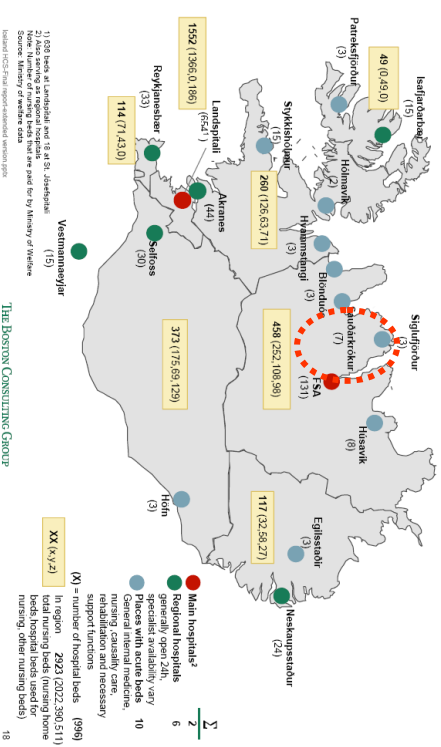
5th Nordic Conference on Research in patient safety and
quality in healthcare



AKUREYRI HOSPITAL

- Provides general and specialized health care services
- A teaching hospital and university affiliated
- Total beds are 138
 - Inpatients 110
 - Ambulatory 28
- Employees
 - ✓ FTE 490 -Total heads 630
 - ✓ Specialist doctors 50
 - ✓ Nurses 180
 - ✓ Midwives 18
 - ✓ Biomedical scientist 23
 - ✓ Radiology technicians 13
 - ✓ Others

Current structure consists of 7 health care regions
All with one main/regional hospital, additional general hospital institutions and primary care



BACKGROUND

- 65% - 90% serious incidents can be linked to communication failure
- Communication is often disorganized and not standardized
- Communication differences among professions
- SBAR is an effective way to improve communication techniques and strengthen interprofessional teamwork

SAFER COMMUNICATION - SBAR IS THE WAY FORWARD!



Respect the report process.

Be prepared.

Listen attentively.

Do not disturb the report process.

Save your questions for last.

S
Situation
What is the situation?

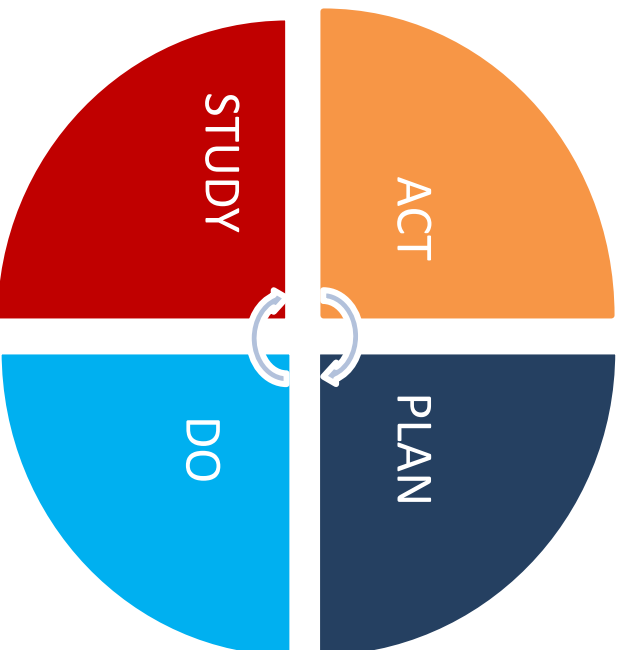
B
Background
What is the background?
Patient history?

A
Assessment
of the situation and what is your opinion on it?

R
Recommendations
What do you recommend?

SBAR IMPLEMENTATION AT AKUREYRI HOSPITAL

PDSA Cycle



All clinical healthcare workers
Evidence-based knowledge

Project management methodology

Tasks breakdown jan - dec 2018	Assigned to	Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Okt	Nov	Dec
PLAN PHASE													
- SBAR Communication Card	IT												
- SBAR Writing Pad	IT												
- SBAR Steps Marking	IT												
- SBAR Posters	IT												
- SBAR Pens	IT												
- SBAR orientation and educational material	HU, HR												
- SBAR Mouse Pads	IT												
- Electronic questionnaire	HR/HU/IT												
DO PHASE -													
- Coaching for nurse's managers	EBB, HU, HR												
- Coaching for doctors at the educational meeting	EBB, HU, HR												
- Coaching and training for staff	HR												
- Scenarios	HU, BSI												
STUDY PHASE													
- Contacts on every wards - Is SBAR tool being used?	HR												
- Clinical staff's perception of SBAR	IT/HR												
- Action/observation research	HU, BSI												
- Focus groups	IT, HR												
ACT PHASE													

EDUCATION AND TRAINING

- SBAR communication card
- SBAR writing Pad
- SBAR steps marking
- SBAR posters
- SBAR pens
- SBAR mouse mats
- Educational material
- Coaching and training



SBAR - Report, clinical responsibility

Keep medical records and recent information at hand as needed.

S Situation

What is the situation?

Report the patient's name, age and location.
The situation and reason(s) for admission.
Is the patient stable or not?

B Background

Patient history/
background?

History of the problem/issue, and current status.
Put the situation into perspective.

A Assessment

of the situation
and what is your
opinion on it?

Report information on recent:
» Symptoms.
» Vital signs.
» NEWS-score.
Resent lab reports and planned tests.

R Recommendations

What is to be done?

What are the goals of treatment?
Suggestions for treatment.

Do not interrupt during report - remember to record!
Ask questions after SBAR report process.

SBAR - Report on a patient or a patient is deteriorating

Assess the patient and his/her medical history.
Have all papers and recent information at hand as needed.

S Situation

What is the situation?

Your name, profession and reasons for communication?
Who is the patient and where is he located.
What is the situation, NEWS-score and vital signs.

B Background

What is the background?
Patient history?

Define facts that are relevant.
Any events/incidents that have led to the situation.
Put the situation into perspective.
Any treatments? (FM, FME, LLM).

A Assessment

of the situation
and what is your
opinion on it?

Report information on recent:
» Patient's condition.
» Lab results.
» Treatment received.
What do you think the problem is?

R Recommendations

What do you recommend?

Provide or request suggestions for a plan.
Consultation for a following treatment.
Confirm the communication.

Do not interrupt during report - remember to record!
Ask questions after SBAR report process.

Situation - Status - Environment
WHAT IS THE PROBLEM?

Introduce yourself with name - profession - location.
The patient's name and id number.
Reason for contact (e.g. ↑ NEWS, increased pain, need for admission, consultation, hunch that s-g is wrong, end of shift etc.).

Before reporting:
ASSESS THE PATIENT - LOOK INTO THE PATIENT'S HISTORY



Keep medical records and recent information at hand as needed.
Do not interrupt during report.
Ask questions after SBAR report process.

S

Background - Antecedent - Condition on arrival
WHAT IS THE BACKGROUND/HISTORY?

Date of admission and reasons if applicable (why is the patient here).
Primary health problems (e.g. diabetes, cardio and/or vascular diseases; pulmonary diseases, former surgeries).
Level of treatment (e.g. FM, FME, LLM).
Drug allergies? Prescription drugs.
ADL abilities and social circumstances (e.g. risk of falls, orientation).

B

Assessment - Evaluations - Tests
WHAT IS THE MAIN ISSUE AND YOUR PRESUMPTION?

Lab results and tests (e.g. blood, EKG, NEWS, MRI, GCS).
Special circumstances (e.g. isolation, O₂-need, bipap, monitor).
Define what you think is the problem, diagnoses.
Define any concerns you may have.

A

Recommendations - Plans - Consultation
WHAT IS TO BE DONE?

What should I do (e.g. I recommend a patient exam, instructions, treatment, medication, tests)?
When should I talk again (e.g. if NEWS ↑, if hgb ↓, tests are completed)?

R

Pending treatment/tests (e.g. bloodtest, drip, fasting/feeding, BAS, fall prevention, elevation, thromboses prevention, discharge).

Repeat main issues for confirmation .

CLINICAL STAFF'S PERCEPTION OF SBAR

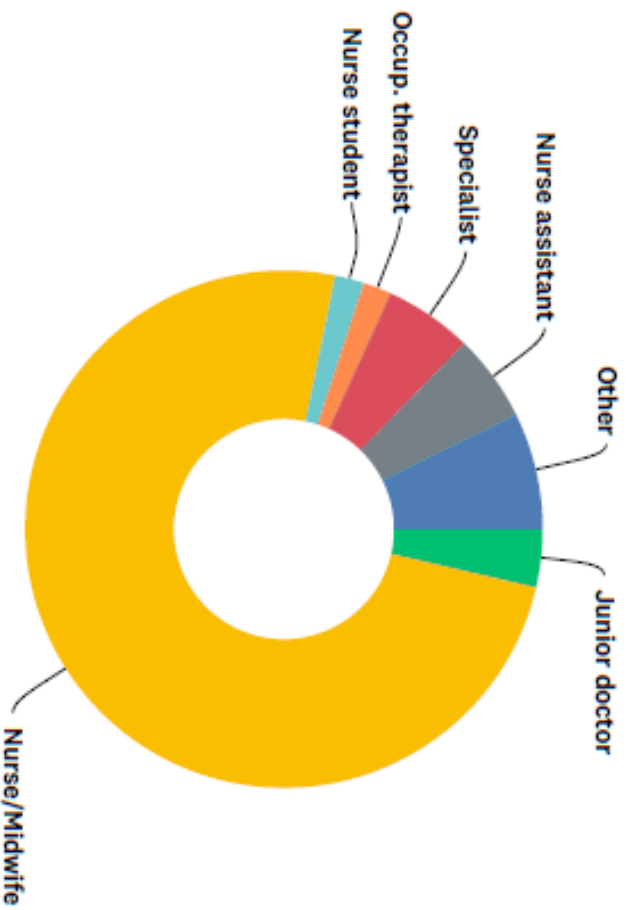
- 1. Have you any knowledge of the SBAR tool? (heard of or recognised)*
- 2. Have you used the SBAR communication technique at work?*

Sample: Clinical staff and students at Akureyri hospital

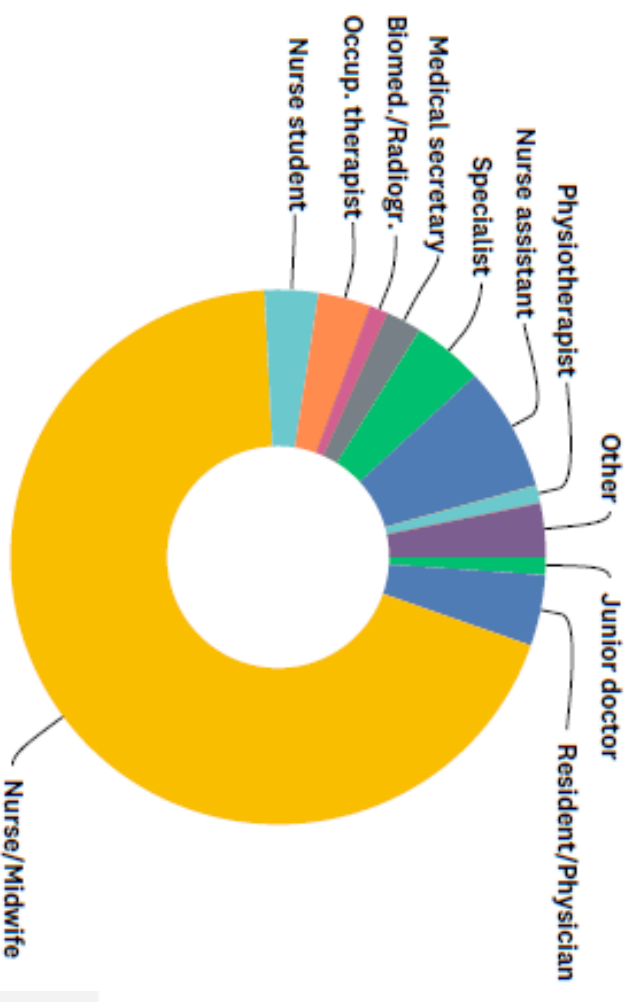
- **Results in February (n=103) - before implementation**
 - 54% had knowledge of SBAR
 - 21% had used the SBAR technique
- **Results in May (n= 133) – after implementation**
 - 87% had knowledge of SBAR
 - 75% had used the SBAR technique

USE OF SBAR - ACCORDING TO PROFESSION

FEBRUARY

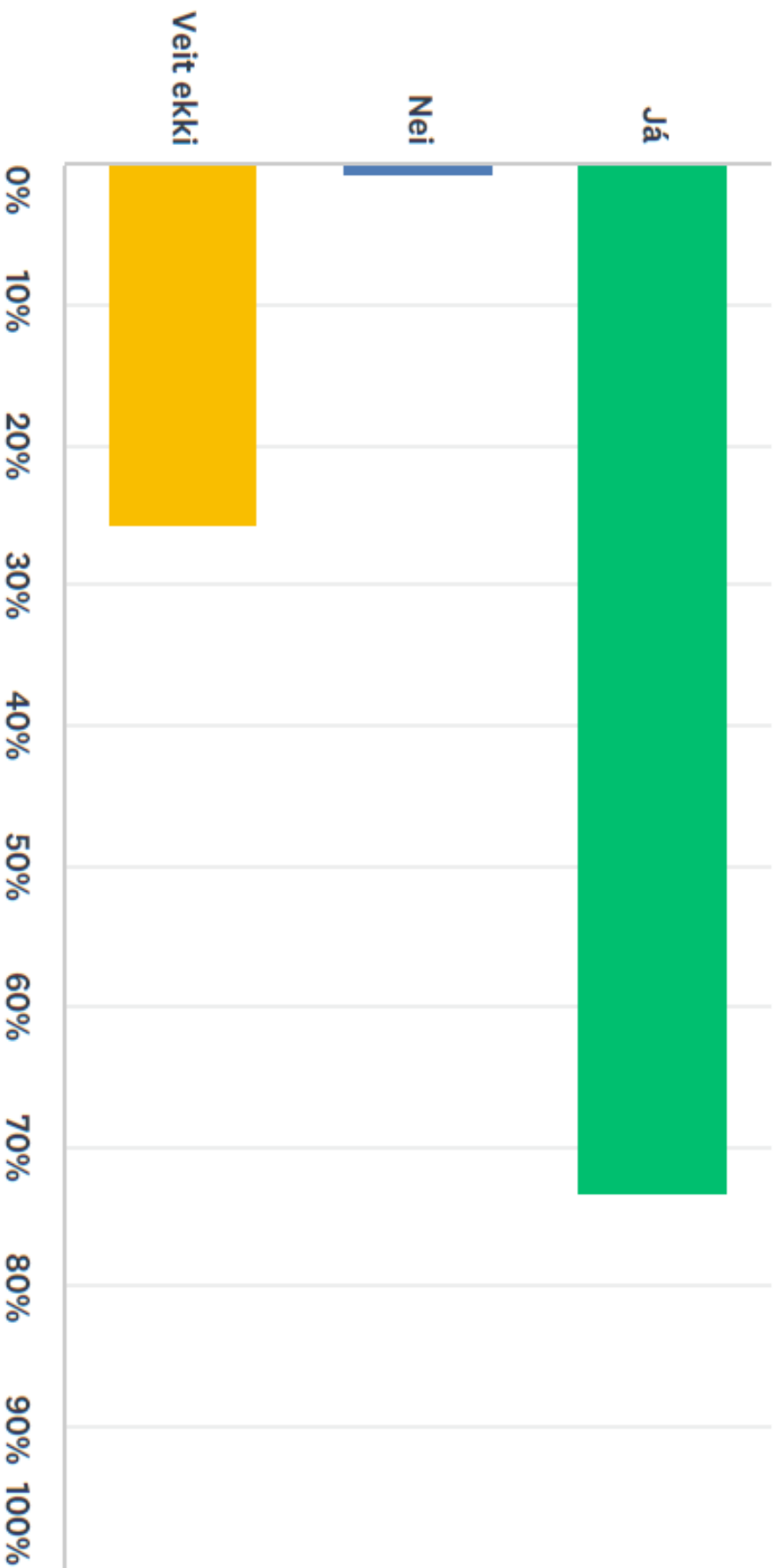


MAY



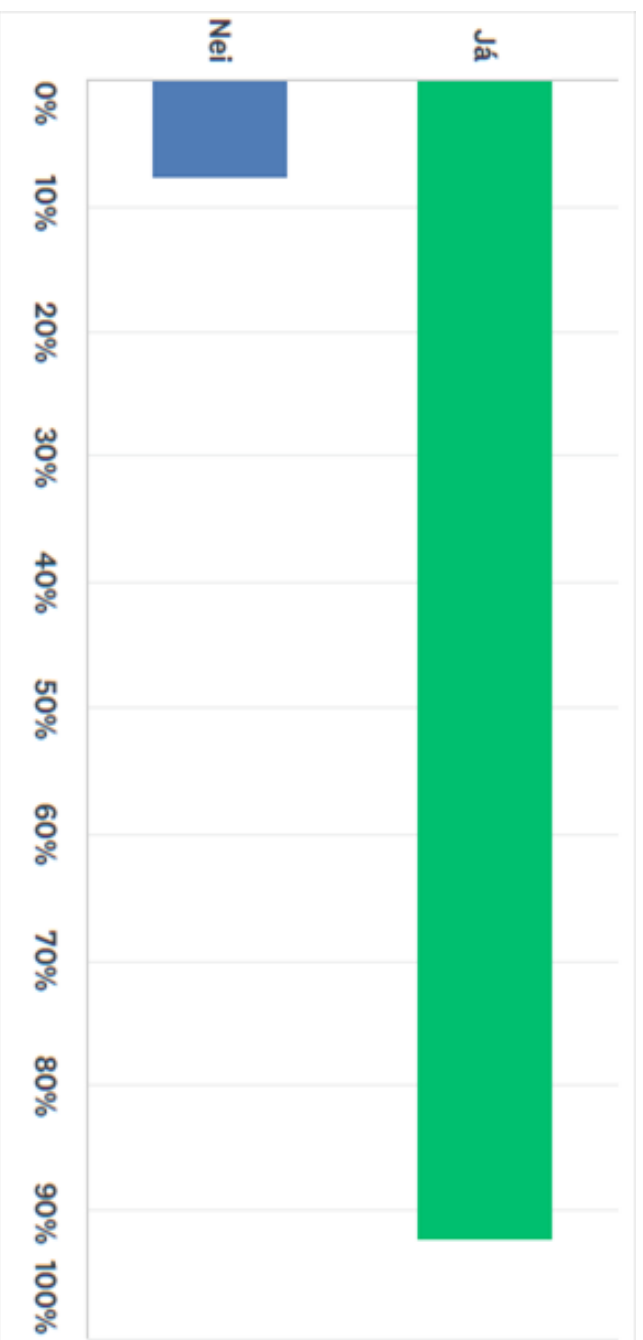
DO YOU BELIEVE THAT SBAR CAN INCREASE/IMPROVE PATIENT SAFETY?

May 2018 – After implementation



DO YOU BELIEVE THAT SBAR CAN FACILITATE COMMUNICATION BETWEEN CO-WORKERS

May 2018 – *After implementation*



CONCLUSIONS AND FUTURE PERSPECTIVES

- Knowledge and use of SBAR have increased
- SBAR can improve patient safety and facilitate communication between co-workers
- Re - evaluate perception of staff regarding
 - Clinical staff's perception of SBAR
 - Action/observation research
 - Focus-groups
 - Incident reports
- Examine the impact on patient safety



TAKK FYRIR

