Using SBAR for effective communication in interprofessional rehabilitation teams

GTA Rehab
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Link between communication and patient safety

- Majority of adverse events involve communication errors
- Stuck in the “hint and hope” model

(JCAHO, 2004; Leonard et al., 2004)
SBAR communication tool

- **Situation – Background – Assessment – Recommendation**
- Sets up expectation for **what** and **how** a safety issue is communicated by team members
- Growing support for SBAR effectiveness in high-risk care settings
- Primarily between nurses and physicians
Adapted SBAR Tool

**S** Describe SITUATION
- My name is ..... and I work ..... (your service).
- I need to talk to you about:
  - an urgent safety issue regarding ..... (name of client)
  - a quality of care issue regarding ..... (name of client)
- I need about ..... (minutes) to talk to you if not now, when can we talk?
- I need you to know about:
  - changes to a patient status
  - changes to treatment plan, procedures or protocols
  - environmental/organizational issues related to patient care

**B** Provide BACKGROUND
- Are you aware of ..... (specific problem)
- The patient is ..... (age) and has a diagnosis of ..... (diagnosis) as well as ..... (diagnosis)
- He/She was admitted on ..... (date) and is scheduled for discharge on ..... (date)
- His/Her treatment plans related to this issue to date include ..... (treatment)
- He/She is being monitored by ..... (specialist) and has appointments for ..... (procedure)
- This patient/family/staff are requesting that ..... (request)

**A** Provide client ASSESSMENT
- I think the key underlying problem/concern is ..... (describe)
- The key changes since the last assessment related to the specific concern are:
  - **Person Level Changes**
    - Vital Signs/GI
    - Cardio-Renal
    - Neurological
    - Musculoskeletal/Skin
    - Pain
    - Medications
    - Psychosocial/Spiritual
    - Sleep
    - Cognitive/Mental Status/Behavioral
    - Nutrition/Hydration
  - **Activity/Participation/Functional Changes**
    - ADL
    - Transfers
    - Home/Community Safety
  - **Environmental Changes**
    - Organizational/Unit Protocols/Procedures
    - Discharge Destination
    - Social/Family Support

**R** Make RECOMMENDATION
- Based on this assessment, I request that:
  - we discontinue/continue with ..... (activity)
  - we prepare for discharge CR extend discharge date
  - you approve recommended changes to treatment plans/goals including ..... (procedure)
  - you reassess the patient’s ..... (condition)
  - the following tests/assessments be completed by ..... (date)
  - the patient be transferred to/... be moved to ..... (destination)
  - you inform other team members/family/patients about change in plans
  - I recommend that we modify protocols in the following ways ..... (details)
- To be clear, we have agreed to... Are you ok with this plan?
- I would like to hear back from you by ..... (date)
- I will be in contact with you about this issue by ..... (date)
Enhancing effective team communication for patient safety: An adapted SBAR communication tool for rehabilitation

Principal Investigators
Dr. Karima Velji and Dr. Ross Baker

Co-investigators
Carol Fancott, Nancy Boaro, Elaine Aimone, Lynne Sinclair, Dr. Gaetan Tardif, Bonnie Fernie
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*Hospital survey on patient safety culture (AHRQ, 2002)
Key learnings

- Widely and effectively used among interprofessional team
- Clinical and non-clinical situations
- Improvements in team safety culture, particularly related to communication
- Target SBAR use for high priority safety situations
Using SBAR to communicate falls risk and management in interprofessional rehabilitation teams

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Carol Fancott, Angie Andreoli, Sherra Solway, Elaine Aimone, Dr. Gaetan Tardif
## Study teams pre v post (HSPSC*)

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Key learnings

- SBAR useful part of a broader program of activities
- Urgent and non-urgent safety issues
- Positive impact on uptake of falls best practices and effective team processes
Challenges and next steps

- Uptake and sustainability
- Not the panacea - but beyond pilot studies
- Including SBAR as part of usual care
SBAR: A Shared Structure for Team Communication
Adapted for Rehabilitation and Complex Continuing Care

An Implementation Toolkit

Prepared by Toronto Rehabilitation Institute as part of a CFHI-funded research study

Effectiveness of an adapted SBAR communication tool for a rehabilitation setting.

Using SBAR to improve communication in interprofessional rehabilitation teams

“SBAR gives people a place to begin.”
Contact information

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