

Promoting Patients' Safety through SBAR Communication

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Introduction: SBAR is a standardized way of communication. It promotes patient safety by improving efficiency and accuracy of verbal clinical communication in a structured and concise format. Effective communication reduces harm and enhances clinical staff relationship.

Aim Statement: To increase the clinical staffs' use of SBAR as a communication tool in all verbal clinical communication to 50% by March 2014 and 100% by the end of the year.

Intervention:

- Pre-intervention - An initial observation and survey was done for one week (November 27 – December 3, 2013). Results are as follows: Doctors: 25% (awareness), 15% (definition), 7% (usage); Nurses: 87% (awareness), 39% (definition), and 20% (usage).
- SBAR educational sessions (refresher, combined doctors and nurses workshops, and role plays) were started from December 15, 2013 up to March 2014.
- Visual cues (ID cards, A4 posters, telephone cards) were distributed to the doctors and nurses from January 16, 2014 to serve as a reminder to use SBAR. It was placed in all noticeable areas of the unit.
- Team competitions were applied to encourage the clinical staffs to use SBAR. The doctors were divided into 10 teams and the nurses into 5 teams. Each team has a designated SBAR champion to help in staff motivation.
- On February 1, 2014, an initial SBAR endorsement form was introduced to help them adjust to the SBAR form of communication. This form was later modified after some suggestions from the clinical staffs.
- HGH introduced an SBAR mobile application on February 5, 2014. This served as a reminder and a resource.
- Continuous monitoring was done all throughout the project. Rotation between team members was done and charge nurses were also given the responsibility to monitor during their shifts. A monitoring tool was given to the charge nurses. This tool had several modifications with the help of the department's nurse educator.

Results to date:

- 70% of the doctors in the Department of Medicine attended at least one educational session for SBAR and the nurses, 100% There are still few more educational sessions to be conducted.
- Post-education survey result was 100% in SBAR awareness and its definition.

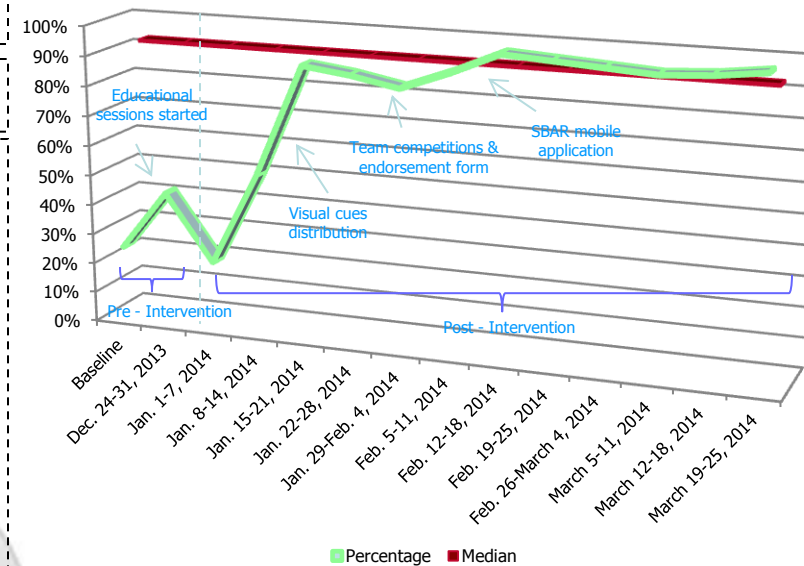
Replication Potential:

Communicating through the SBAR format is applicable to any unit and specialty.

Conclusion:

During the first few weeks of implementation, the clinical staffs had some difficulty adjusting to the SBAR format. The endorsement form was confusing for them at first but when they got used to it, the staffs found it very helpful that they do not have to look for the information that they need. They learned to endorse in an organized manner and not just endorse what they remember. It will take a little more time for the clinical staffs to get used to speaking SBAR during their shifts. The team will continue to monitor, remind (visual cues and real time feedbacks), and do quick SBAR sessions to the clinical staffs until it becomes automatic to them to speak in an SBAR format.

Weekly % of SBAR use



Note: Data only includes the pilot unit (SN1) and doctors in the Department of Medicine.

PDSA's Undertaken

