# Foster a Culture of Safety in Women's Hospital through Standardized SBAR communication

## A Best Care Always Collaborative

### Introduction

'Situation, Background, Assessment, Recommendation' known as an 'SBAR' is a communications tool that is used as a situational briefing model, appropriate assertion, critical language, and awareness and education regarding the fact that nurses, physicians, and other clinicians are taught to communicate in very different styles.

Many factors contribute to communication failures. First and foremost, doctors and nurses are trained to communicate quite differently. Nurses are taught to be very broad and narrative in their descriptions of clinical situations, whereas physicians learn to be very concise, and get to the "headlines" quite quickly.

### Background:

Communication failures have long been cited as the leading cause of inadvertent patient harm (Joint Commission on Accreditation of Health Care Organizations, 2005). Analysis of sentinel events reported to the Joint Commission for Hospital Accreditation revealed that the primary root cause in over 70% was communication failure. Reflecting the seriousness of these occurrences, approximately 75% of these patients died.

Effective communication and teamwork is aimed at creating a common mental model, or "getting everyone in the same page". Equally important is creating an environment that feels "safe" to team members so they will speak up when they have safety concerns.

**Our Aim:**

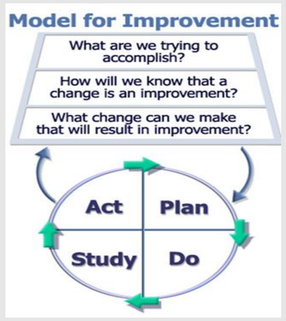
- ✓ **To achieve 100% compliance of sampled staffs who completed RN-RN handover using standardized SBAR communications tool by the end of December 2017.**
- ✓ **To achieve 100% compliance of NICU physicians who completed Physician-Physician handover using standardized SBAR communications tool by the end of December 2017.**
- ✓ **To achieve 100% compliance of L&D physicians who completed Physician-Physician handover using standardized SBAR communications tool by the end of December 2017.**
- ✓ **To achieve 100% of compliance with RN-doctor exchanges about patient during change in condition using standardized SBAR communications tool by the end of December 2017.**

**Quality Improvement Measures:**

*Process measures:*

- ❖ Percent compliance of RN-RN SBAR handover
- ❖ Percent compliance of Physician-Physician SBAR handover
- ❖ Percent compliance of RN-Physician SBAR handover

### Quality Improvement Methodology




Developed by Associates in Process Improvement

- ❑ Utilized the Model for Improvement Methodology
- ❑ Formed a multidisciplinary team, setting specific aim, identified measures, introduced change in and monitored compliance
- ❑ Continued small tests of change utilizing the SBAR Communications tool
- ❑ Tested improvement strategies in pilot areas: RN-RN (NICU & East 2); Physician-Physician (NICU); RN-Physician (East 6)
- ❑ Implemented and spread in all Antenatal, Postnatal and HDU areas.

### Improvement Strategies Tested & Implemented In The Unit

RN-RN SBAR in East 2

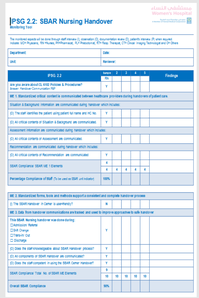
S

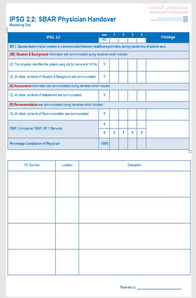
B

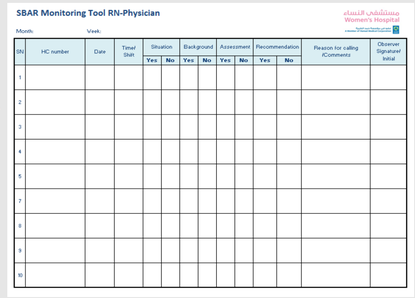
RN-Physician SBAR in East 6

A

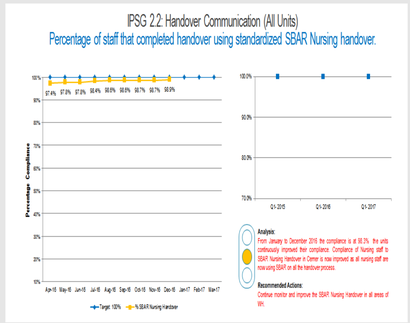
R

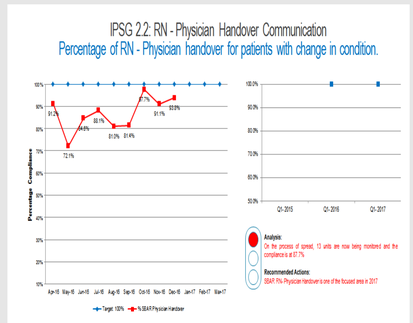



### Results





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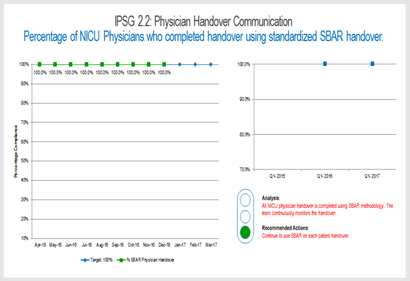
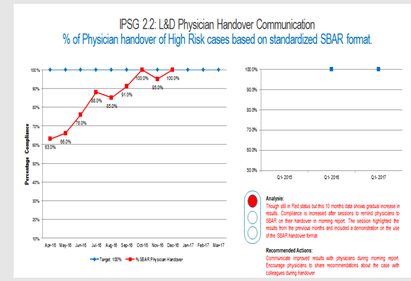
### Results cont…




### Critical Success Factor

Active involvement of all frontline staff using the SBAR Communications Tool is an integral part in the success. Keeping in mind that the frontline staff is our No. 1 key stakeholders as they are the ones utilizing and applying the changes that was being introduced in the units.

### Acknowledgement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