# nthe know with HRO ZERO 100% RELIABILITY

## SBAR: Situation, Background, Assessment, Recommendation

When a complex situation arises, it can be difficult to communicate important details and takeaways in a manner that's easy for others to digest. SBAR provides an organized framework for communicating completely and succinctly. This tool can be applied in both written and verbal communications.

(S) Situation	The situation, problem or issue
(B) Background	Important information that others need to know
(A) Assessment	How you read the situation
(R) Recommendation	The course of action for you and/or the others to take

Healthcare team members should use SBAR to communicate about a patient's condition and medical history, scheduling and admittance issues, lab results, or any unique situation that arises. Non-clinical staff can also use it to effectively discuss safety and security issues, projects, computer/internet outages, and changes in protocols, to name a few.

Enhancing communication with SBAR increases our understanding of situations, and in turn, creates a safer environment for all. Below and on the reverse side are some examples of SBAR communication.

#### **SBAR Report (Hospital – Clinical):**

- A 78-year-old inpatient on a ventilator is undergoing a spontaneous breathing trial (SBT) and presents abnormally rapid breathing and hypertension.
- The patient has a history of COPD and was admitted 3 days ago with an acute exacerbation. The patient B: has shown improvement with the help of antibiotics. During the SBT, the patient's heart rate and respiratory rate increased.
- The patient is not ready for extubation. A:
- Stop the SBT and continue intubation. Restart sedation, and evaluate Readiness R: Criteria for Weaning Protocol Initiation in 12 hours.



#### **SBAR Report (Hospital – Non-Clinical):**

- **S:** Patients and families have been getting frustrated with long wait times in the ED and overcrowding.
- B: There is a highly contagious flu going around this season, resulting in a 20% increase in patients going to the ED than normal for this time of year. The ED has been fully staffed and has been meeting benchmark turnaround times. Even so, patients have given feedback that they are waiting much longer than they expected to.
- A: Increase communication with patients on what to expect and reassure them that they will be seen ASAP. Patients may not be aware of Valley's ED Online Scheduler or urgent care centers.
- The Communications & Marketing team should promote Valley's Online ED scheduler and urgent care centers in all communication platforms.
   Patient/Family Relations and the Emergency Department should implement scripting to ease natients.
  - Patient/Family Relations and the Emergency Department should implement scripting to ease patients
    about wait times. Service Recovery should be initiated if wait time is unreasonably excessive or results
    in a negative consequence to the patient's health.

#### **SBAR Report (Valley Medical Group):**

- **S:** A patient's blood work showed a significantly higher level of LDL at about 232.
- **B:** The patient's past blood work has consistently shown LDL levels of less than 200 for the past two years. The patient is not on medications that would've raised the LDL.
- A: It's possible that something the patient ate within the last 12-24 hours significantly raised the LDL. Another health condition could be affecting their cholesterol level.
- **R:** Ask the patient if they fasted and/or what they ate in the 12 hours before the test. Assess the patient's overall diet, lifestyle and any other health issues that could be affecting their LDL levels. Repeat lab work in 3 months.

### **SBAR Report (Valley Home Care):**

- **S:** A Valley Home Care patient expressed frustration with not understanding their treatment plan.
- B: The patient is an 80-year-old woman who had been in good health until she was treated for a wound in her leg. She has no cognitive impairments, is able to care for herself, and has always lived an independent lifestyle. However, she didn't realize that multiple clinicians would be visiting the home on a daily basis. She said that she was constantly updating each clinician on what other clinicians performed in days prior.
- A: After speaking with the patient, it seems that the home care nurses and therapists assigned to this patient need to communicate and share information with each other more often so that everyone is on the same page.
- The home care nursing team dedicated to this patient should coordinate handoffs.
  All clinicians should share the purpose of their visit and summarize progress and next steps to the patient at every visit.