



Health Quality Innovation Network

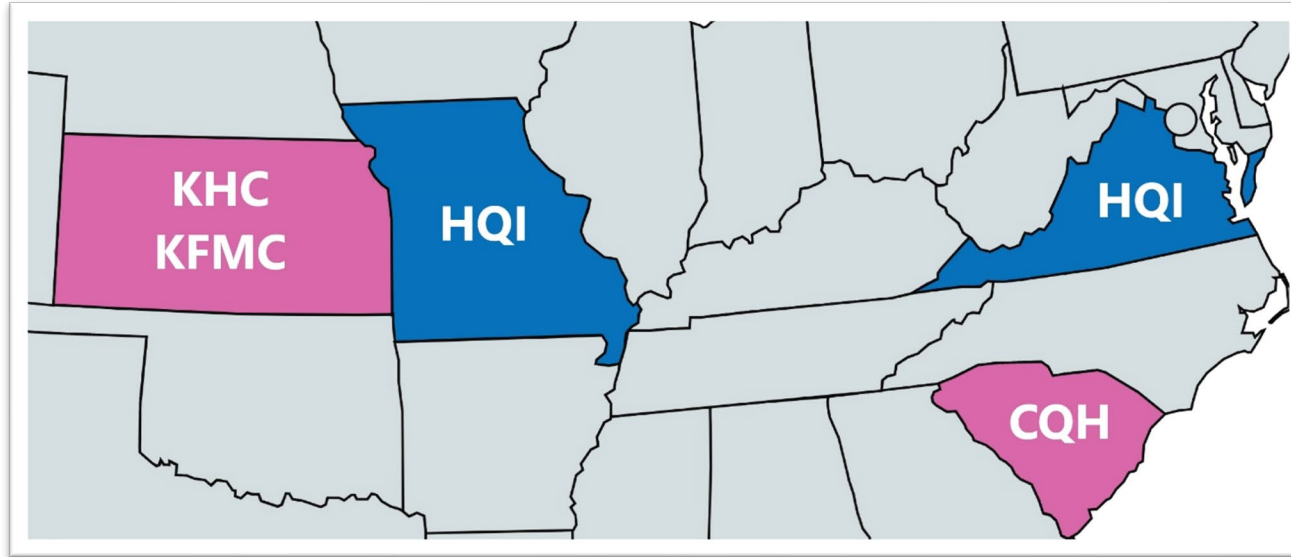


Health Quality Innovation Network

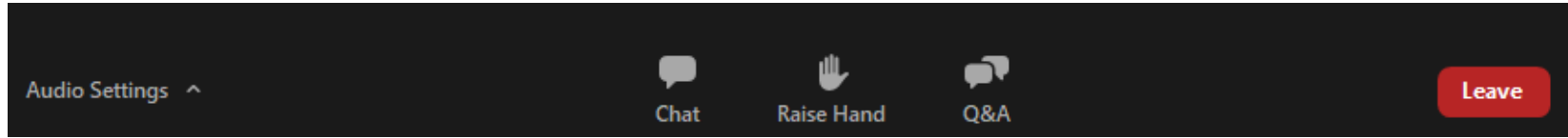
Recognize and Respond: Communication Strategies

September 26, 2023

Health Quality Innovation Network



Logistics – Zoom Webinar



To ask a question, click on the **Q&A** icon.

Raise your hand if you want to verbally ask a question.

Resources from today's session will be posted in **Chat**.

You may adjust your audio by clicking **Audio Settings**.

You have been automatically muted with video turned off.

Your Team



**Allison Spangler, BSN,
RN, RAC-CT, QCP**
Consulting Manager



**Elizabeth Nugent,
LNHA, CDP**
Consultant



April Faulkner
Communications Specialist

Objectives

- Describe how communication affects team processes and outcomes
- Define effective communication
- Identify communication challenges
- Identify TeamSTEPPS® tools and strategies that can improve a team's communication



Communication

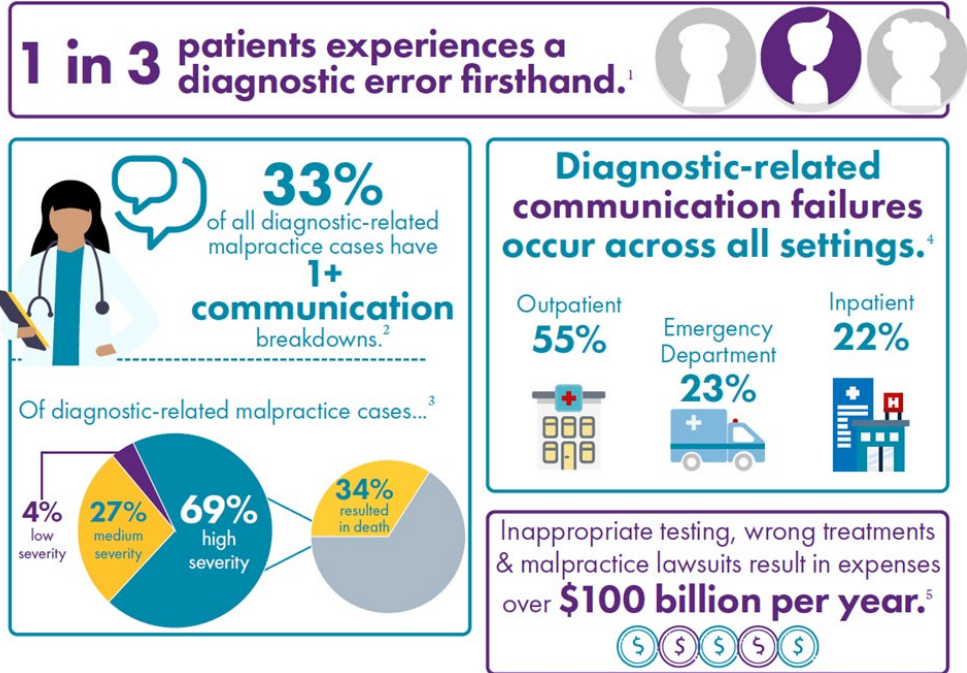
Effective communication skills:

- Are vital for resident safety
- Enable team members to effectively relay information, build trust and provide reassurance and emotional support
- Are the mechanism by which most TeamSTEPPS® strategies and tools are executed



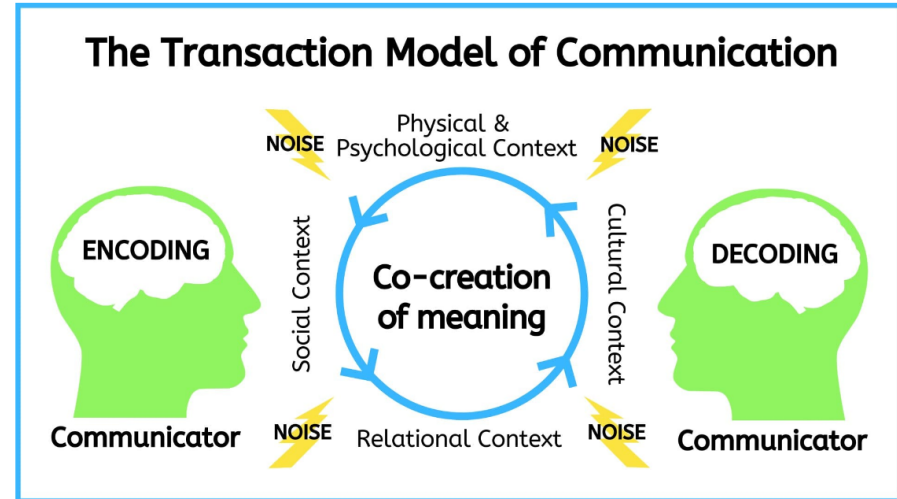
Importance of Communication

- Joint Commission data identify communication failures as a common cause of sentinel events
- AHRQ-funded research identifies communication and inadequate information transfer as the top two causes of medical errors
- Diagnostic errors are common, harmful and often the result of communication breakdowns



Communication Is...

- Both sending and receiving messages
- The co-creation of meaning that may differ from the intended meaning
- Affected by noise, context and communicator assumptions
- The mode by which most TeamSTEPPS® strategies and tools are executed



Standards of Effective Communication



Complete

Communicate all relevant information



Clear

Convey information in plain language



Brief

Communicate information in a concise manner



Timely

Offer and request information in an appropriate timeframe



Respectful

Use communication to foster psychological safety and affirm other team members, not just to give instructions or share information

Communication Challenges

- Language barriers
- Distractions, stress and fatigue
- Physical proximity
- Personalities
- Workload
- Differing backgrounds, vocabularies and priorities
- Varying communication styles
- Conflict
- Lack of information verification
- Shift changes



AHRQ's Limited English Proficiency materials

Polling Question

Self-evaluate your own communication and pick one area in which you will consciously work to improve over the next month.

- A. Language barriers
- B. Distractions, stress and fatigue
- C. Physical proximity
- D. Personalities
- E. Workload
- F. Differing backgrounds, vocabularies and priorities
- G. Varying communication styles
- H. Conflict
- I. Lack of information verification
- J. Shift changes



Information Exchange Tools

- Situation – Background – Assessment – Recommendation or Request (SBAR)
- Call-Out
- Check-Back
- Teach-Back
- Handoffs (including I-PASS)



Polling Question

Do staff in your nursing home use SBAR communication consistently?

- A. Yes
- B. No



SBAR

A framework for team members to effectively communicate information to one another.



Situation

What is going on with the patient?



Background

What is the clinical background and context?



Assessment

What do I think the problem is?



Recommendation or Request

What would I recommend?

What do I need from you?

SBAR Tools

SBAR Communication for Possible Sepsis

SITUATION
My name is _____
I'm calling from (facility) _____
Name of Physician/Prescriber contacted _____
I need to speak with you about resident name: _____
Resident Age: _____

BACKGROUND
The resident was admitted on _____ date with the diagnosis of _____
The resident also has the following co-morbid conditions/diagnoses _____
The resident is now showing these signs of possible infection _____
(describe the signs and potential source of infection)
This started on _____ date
The resident is currently on, or recently completed PO or IV Antibiotics:
- Antibiotic Name, Dose, Route _____
- Antibiotic Name, Dose, Route _____
The resident is allergic to _____
The resident's advance care directive is _____

ASSESSMENT (describe key findings)
My assessment of the situation is that the resident may be experiencing a severe worsening infection. Here are my findings:
Vital Signs
Temp: _____ Heart Rate: _____ BP: _____
Respiratory Rate: _____ SpO2 %/Pulse Ox: _____
Current Weight: _____
Other Factors
Blood Sugar: _____ Foley (Y/N): _____ Last BM Date: _____
Current Labo/Recent Culture: _____
Mental status is (changed OR unchanged from baseline): _____
Possible source of infection: _____
(e.g., lung source, wound abscess, urine characteristics, other)

RECOMMENDATION (REVIEW AND NOTIFY)
I am concerned that this resident may have sepsis.
Would you like to order any labs, IV fluids or treatments?
How often should vital signs be performed?
What vital signs parameters would initiate an immediate notification to you?
If no improvement, when would you want us to call you again?
Additional Orders received _____

Quality Improvement Organizations
HQRN

SBAR Communication for Possible Sepsis | HQRN

Suspected UTI SBAR

Complete this form before contacting the resident's physician.
Date/Time _____
Nursing Home Name _____
Resident Name _____ Date of Birth _____
Physician/NP/PA _____ Phone _____
Nurse _____ Fax _____
Facility Phone _____
Submitted by Phone Fax In Person Other _____

I Situation
I am contacting you about a suspected UTI for the above resident.
Vital Signs BP _____ HR _____ Resp. rate _____ Temp _____

II Background
Active diagnosis or other symptoms (especially, bladder, kidney/genitourinary conditions)
Specify _____
 No Yes This resident has an indwelling catheter
 No Yes Patient is on dialysis
 No Yes The resident is incontinent **if yes, new/worsening?** No Yes
 No Yes Advance directives for limiting treatment related to antibiotics and/or hospitalizations
Specify _____
 No Yes Medication Allergies
Specify _____
 No Yes The resident is on Warfarin (Coumadin®)

Quality Improvement Organizations
AHRQ
www.IPIQs.org/NA-ASP/Guide June 2014
AHRQ Pub. No. 14-00132-EF

Suspected UTI SBAR | AHRQ

SBAR Communication Form and Progress Note for RNs/LPN/LVNs

Before Calling the Physician /NP/PA/other Healthcare Professional:
 Evaluate the Resident/Patient: Complete relevant aspects of the SBAR form below.
 Check vital signs (if able), and/or check heart rate, temperature, respiratory rate, O₂ saturation and finger stick glucose for diabetes.
 Review Recent Record progress notes, labs, medications, other orders.
 Review an INTERACT Care Path - Acute Changes in Condition (The Care-4-Individual)
 Have Relevant Information Available when Reporting (e.g., medical record, vital signs, advance directives such as DNR and other care preferences, allergies, medications)

SITUATION
The change in condition, symptoms, or signs observed and evaluated is/are _____
This started on _____ Since this started it has gotten Worse Better Stayed the same
Things that make the condition or symptom worse are _____
Things that make the condition or symptom better are _____
This condition, symptom, or sign has occurred before Yes No
Treatment for last episode of episode(s) _____
Other relevant information _____

BACKGROUND
Resident/Patient Description
This resident/patient is on the facility for Long Term Care Post-Acute Care Other _____
Primary diagnosis _____
Other pertinent history (e.g., medical diagnosis of CME, DM, COPD, diabetes for infection or communicable disease) _____
Medication Alerts
 Changes in the last week (date): _____
 Discontinued patient is on (antibiotic/Coumadin/level of care) _____ Date _____
 Discontinued patient is on other antipsychotic (direct thrombin inhibitor or plasmin inhibitor)
Rehydration is on enteral/parenteral (direct thrombin inhibitor or plasmin inhibitor)
Allergies _____
Vital Signs
SpO₂ _____ Pulse _____ RR _____ Temp _____ Weight _____ by date _____
For all vitals, or weight loss less weight before the current one was _____ on _____
Pulse Oximetry (if available) _____ % on _____
Blood Sugar (if/when) _____
Resident/Patient Name _____

Quality Improvement Organizations
INTERACT
www.IPIQs.org/NA-ASP/Guide June 2014
AHRQ Pub. No. 14-00132-EF

SBAR Communication Form | INTERACT

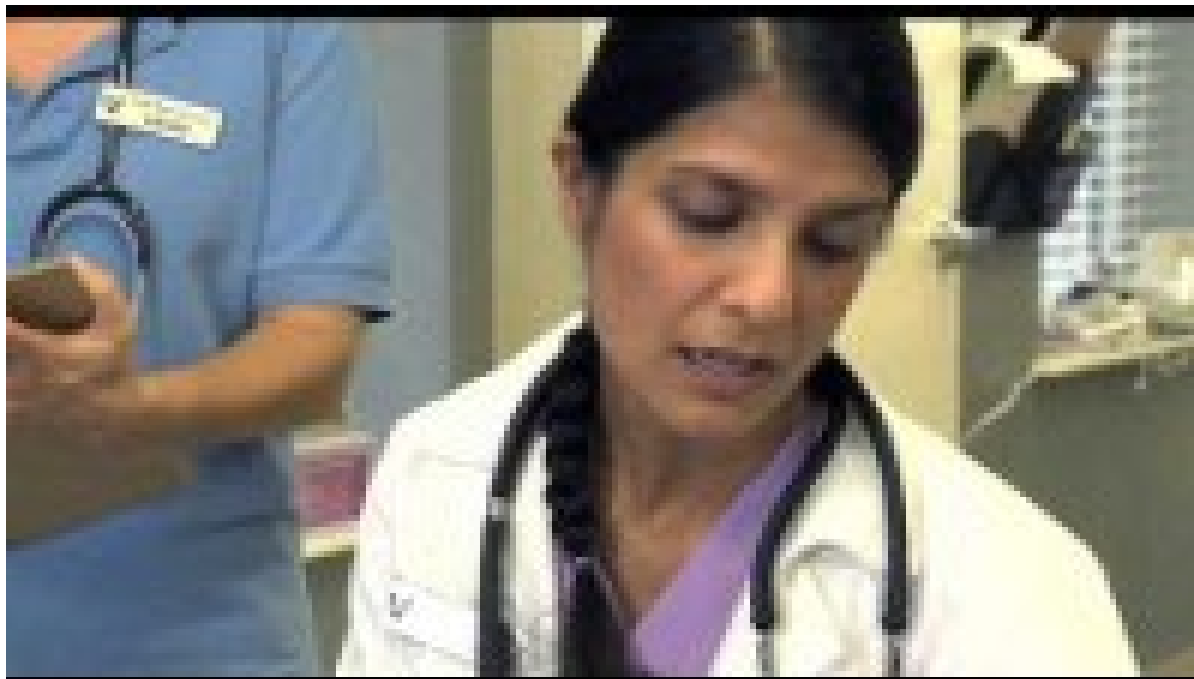
Call-Out

A strategy used to communicate important or critical information:

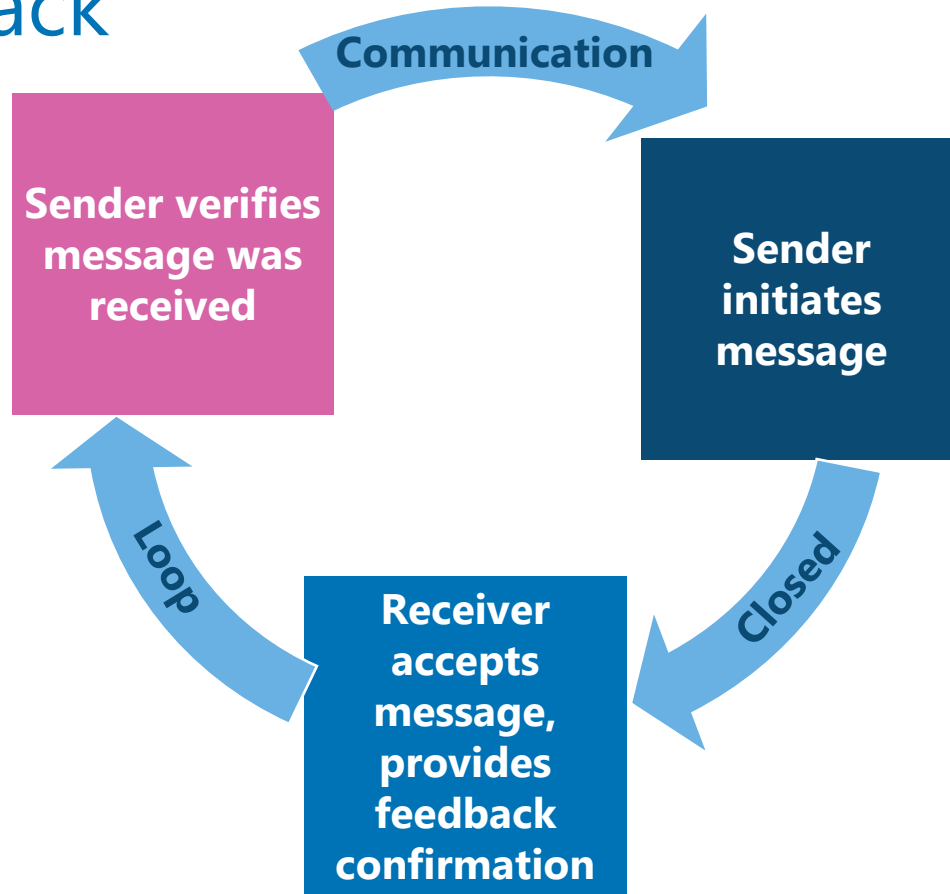
- It informs all team members simultaneously during emerging situations
- It helps team members anticipate next steps



Call-Out Subacute Care



Check-Back



Teach-Back

- A method to confirm that the sender has explained information clearly and that residents or family members have a clear understanding of what the sender has told them
- In a teach-back, the sender asks the resident or family member to explain the information they need to know or actions they need to take, in their own words



Teach-Back Tips

- ✓ Not a test of the resident's knowledge
- ✓ Plan your approach
- ✓ "Chunk and check"
- ✓ Clarify and check again
- ✓ Use the show-me method
- ✓ Use handouts along with teach-back



Suggested AHRQ Tools:

[Teach-Back Method](#)

[Use Health Education Material Effectively](#)

Handoff Is...

Transfer of information during transitions in care across the continuum:

- Includes an opportunity to ask questions, clarify and confirm
- Is relevant during shift changes, transfers between departments and care team transitions
- Is sometimes done virtually or with e-handoff functions within an electronic health record

Handoffs include:

- Transfer of responsibility and accountability
- Clarity of information
- Verbal communication of information
- Acknowledgement by receiver
- Opportunity to review

I-PASS: A Common Handoff Tool

I P A S S

Illness Severity

- Stable, watcher, unstable

Patient Summary

- Summary statement
- Events leading up to admission or care transition
- Hospital course or treatment plan
- Ongoing assessment
- Contingency plan

Action List

- To-do list
- Timelines and ownership

Situation Awareness & Contingency Planning

- Know what's going on
- Plan for what might happen

Synthesis by Receiver

- Receiver summarizes what was heard
- Asks questions
- Restates key actions/to-do items

Tools and Strategies Summary

BARRIERS	TOOLS and STRATEGIES	OUTCOMES
<ul style="list-style-type: none"> • Inconsistency in Team Membership • Lack of Time • Lack of Information Sharing • Hierarchy • Defensiveness • Conventional Thinking • Complacency • Varying Communication Styles • Conflict • Lack of Coordination and Follow-Up • Distractions • Fatigue and Burnout • Workload • Misinterpretation of Cues • Lack of Role Clarity 	<ul style="list-style-type: none"> • Communication <ul style="list-style-type: none"> • SBAR • Call-Out • Check-Back • Handoff • Teach-Back • Handoff • I-PASS 	<ul style="list-style-type: none"> • Shared Mental Model • Adaptability • Team Orientation • Mutual Trust • Reduced Burnout • Psychological Safety • Effective Team Performance • Safe, Highly Reliable, Patient-Centered Care

Polling Question

Which communication tool discussed today are you most eager to use?

- A. SBAR
- B. Check-Back
- C. Handoff/I-PASS
- D. Teach-Back



Join Our Next Session

INTERACT Decision Support Tools

Tuesday, October 10, 2023

2:00 p.m. EST | 1:00 p.m. CST

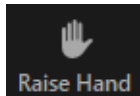


October 10th

2:00 PM EST

Register Today

Questions? Comments? Share What is Working or What is Difficult for Your Team!



Raise your hand to verbally ask a question



Type a question by clicking the **Q&A** icon

*Don't hesitate to ask a question after the webinar is over.
Email LTC@hqi.solutions or your HQIN Quality Improvement Advisor.*

Center of Excellence for Behavioral Health In Nursing Facilities

The Center of Excellence focuses on increasing the knowledge, competency and confidence of nursing facility staff to care for residents with behavioral health conditions.

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- Services are available to all CMS certified nursing facilities throughout United States
- Established by the Substance Abuse and Mental Health Services Administration (SAMHSA) in collaboration with the Centers for Medicare and Medicaid Services



For assistance, submit a request at
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Contact us:
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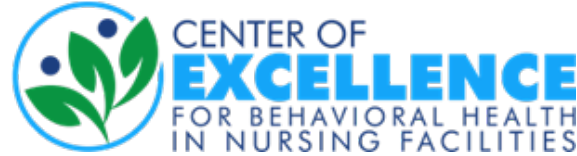
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Call 877.731.4746 or visit www.hqin.org
LTC@hqin.solutions

Kansas

Brenda Groves

Quality Improvement Advisor

bgroves@kfmc.org

785.271.4150

Virginia and Missouri

Allison Spangler

Quality Improvement Advisor

aspangler@hqi.solutions

804.289.5342

South Carolina

Kristine Williamson

Quality Specialist

kwilliamson@constellationqh.org

919.461.5525

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