

Heart Failure Monthly Educational Series

Improving Patient Safety & Teamwork

Through

Effective Communication



Learner Objectives

By the end of this session, staff will be able to:

1. Explain the importance of effective communication in healthcare.
2. Identify key elements of clear, concise, and respectful team communication.
3. Describe common breakdowns in communication that lead to poor outcomes.
4. Use **SBAR** to structure reporting, handoffs, and escalations.
5. Understand how each discipline contributes to communication and patient safety.
6. Recognize the role of communication in promoting health equity.



Why Communication Matters

- **Backbone of safe, effective care**
- **Lifesaving in heart failure**
- **Ensures patient needs are understood and addressed**

Bottom Line:

Communication Errors Cause Harm and Readmissions!

Over 60% of hospital mistakes involve communication!!



Team Collaboration in Healthcare

- Teamwork is essential in caring for complex patients, like those with heart failure.
- Each discipline brings unique expertise and insights.
- Collaboration ensures shared decision-making and coordinated care.
- Clear communication = safer care and better outcomes.



Key Elements of Effective Communication

- Respect each team member's role and perspective.
- Shared critical information promptly and clearly.
- Use structured tools (SBAR, huddles, briefs, debriefs).
- Encourage active listening and closed-loop communication.
- Foster a culture of mutual support.



Let's Watch a Quick *Video*



Please click on the video to play. YouTube will open in a browser window



Common Breakdowns

- Patient Care Handoffs
- Misunderstood Orders
- Missing updates or unclear instructions





On the next slide, you will watch a video of an interdisciplinary team meeting. As you watch, take note of any “missed opportunities” or communication breakdowns you observe. You will use your observations to answer the reflection question.



Let's Watch a Quick *Video*



Please click on the video to play. YouTube will open in a browser window.



How Good Communication Helps *(especially in Heart Failure)*

- Safer care, fewer readmissions
- Patients and Caregivers understand medications and warning signs



Better Teamwork = Better Outcomes



Why Interdisciplinary Communication *Matters* in Heart Failure

- Heart Failure care is complex and requires input from nursing, therapy, aides, social
- Clear, consistent communication across disciplines prevents gaps and delays
- Effective handoffs and updates reduce readmissions and emergency visits
- Coordinated communication helps patients understand their care plan and stay safe at home
- Strong teamwork = better patient outcomes and fewer avoidable complications

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Benefits of Collaboration & Communication

- Fewer errors and avoidable readmissions.
- Faster recognition of changes in patient condition.
- Improved patient and staff satisfaction.
- Promotes health equity by addressing barriers as a team.
- Builds trust within the team and with patients/families.



Mini-Scenario – Choose Your Answer

Which tool uses Situation, Background, Assessment, and Recommendation to structure communication in healthcare?

Answer (pick one)

- A. Teach-Back**
- B. SBAR**
- C. Closed-Loop Communication**
- D. I-PASS**

A

B

C

D



A. Teach-Back Incorrect

Teach-Back is when you ask the patient to explain information in their own words, to confirm understanding. It focuses on patient education, not team handoffs.



Mini-Scenario

Which tool uses Situation, Background, Assessment, and Recommendation to structure communication in healthcare?

- A. Teach-Back**
- B. SBAR**
- C. Closed-Loop Communication**
- D. I-PASS**

Answer (pick one)

A

B

C

D



C. Closed-Loop Communication

Incorrect

This is when the listener repeats back what was said to confirm accuracy. It helps to avoid misunderstandings but doesn't follow the SBAR format.



Mini-Scenario

Which tool uses Situation, Background, Assessment, and Recommendation to structure communication in healthcare?

- A. Teach-Back**
- B. SBAR**
- C. Closed-Loop Communication**
- D. I-PASS**

Answer (pick one)

A

B

C

D



D. I-Pass Incorrect

I-Pass is another structured tool (Illness severity, Patient summary, Action list, Situational awareness, Synthesis by receiver) used mostly in hospital handoffs, but it is not SBAR



Mini-Scenario

Which tool uses Situation, Background, Assessment, and Recommendation to structure communication in healthcare?

- A. Teach-Back**
- B. SBAR**
- C. Closed-Loop Communication**
- D. I-PASS**

Answer (pick one)

A

B

C

D



B. SBAR Correct!

SBAR stands for Situation, Background, Assessment, and Recommendation. It is a standardized tool for structured, concise, and effective communication in healthcare providers.



S

Situation:

I am (name), (X) nurse on ward (X)

I am calling about (patient X). I am calling because ...

I am concerned that ...

(eg blood pressure is low/high, pulse is XX, temperature is XX, Early Warning Score is XX)

B

Background:

Patient (X) was admitted on (XX date) with ... (eg MI/chest infection)

They have had (X operation/procedure/investigation)

Patient (X)'s condition has changed in the last (XX mins)

Their last set of observations were (XX)

Patient (X)'s normal condition is ... (eg alert/drowsy/confused, pain free)

A

Assessment:

I think the problem is (XXX)

And I have ...

(eg given O₂/analgesia, stopped the infusion)

OR

I am not sure what the problem is but patient (X) is deteriorating

OR

I don't know what is wrong but I am worried

R

Recommendation:

I need you to ...

Come to see the patient in the next (XX mins)

AND

Is there anything I need to do in the meantime?

(eg stop the fluid/repeat the observations)



Let's Watch a Quick *Video*

SBAR Tool:

S: Situation

B: Background

A: Assessment

R: Recommendation

Please click on the video to play. YouTube will open in a browser window.



Let's Reflect

- **When would you use SBAR in your daily role?**
- **How does SBAR help reduce mistakes during patient handoffs?**
- **Which part of SBAR do you think is most often left out, and why?**



Reflection: *A Patient with Heart Failure*

A patient has gained 6 lbs. in 3 days, is short of breath at rest, and oxygen saturation is 88%.

- What is the ***Situation***?
- What ***background*** details are important?
- What ***assessment*** would you share?
- What would you ***recommend*** (*should the patient be seen by the nurse, should the nurse contact the patient's provider?*)



Reflection: *Medication Error Concern*

You notice a patient has taken a double dose of diuretic.

- How would you structure this report using **SBAR**?



Knowledge Check

True or False

SBAR should only be used in emergencies.



True: **Incorrect**

SBAR is not limited to emergencies. While it is very useful during urgent changes in a patient condition, it was designed as universal communication tool to standardize the way information is shared



Knowledge Check

True or False

SBAR should only be used in emergencies.



False: **Correct!**

SBAR is helpful in urgent situations AND in routine communication (shift reports, patient updates, care coordination). It standardizes communication so that all team members are on the same page, whether the issues is urgent or not.



Knowledge Check

Which is stronger:

1. “The patient is unwell”

OR

2. “The patient’s blood pressure dropped to 82/50 in the last 10 minutes?”

1 or 2



Incorrect

“The patient is unwell” is vague and subjective. It does not tell the listener what is actually happening. Different providers may interpret “unwell” in very different ways, which can lead to delays in errors. It lacks measurable data (like vitals, timing, or observable changes) that another clinician needs to make a safe decision.

In SBAR, the Situation should be specific and objective. Using vague terms misses the purpose of SBAR, which is to provide a clear, concise, and actionable information.



Knowledge Check

Which is stronger:

1. “The patient is unwell”

OR

2. “The patient’s blood pressure dropped to 82/50 in the last 10 minutes?”

1 or 2



CORRECT

SBAR emphasizes clear, specific, and objective information. Saying “unwell” is vague and subjective. Giving actual data (blood pressure and time frame) is precise and actionable, which helps the next provider respond appropriately.



You have completed the PowerPoint portion of this training. Please return to HHVNA and click the link to provide your reflection – which serves as your attestation to participating in this month's heart failure education.



Thank You for Learning!

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