

Home Health Package Introduction

SBAR Purpose:

The SBAR tool is a strategy to improve communication from clinician to physician, clinician-to-clinician and/or staff to manager. SBAR was adapted from the US Navy Nuclear Submarine Service. Submarine officers and crew needed a situational briefing model to communicate clearly, effectively and efficiently. SBAR organizes the message in a consistent and concise manner. SBAR has been adapted successfully into health care.



S = Situation

What is going on with the patient? A concise statement of the problem.

B = **Background**

What is the clinical background information that is pertinent to the situation?

A = Assessment

What did you find? Analysis and considerations of options.

R = **Recommendation**

What action/recommendation is needed to correct the problem? What do you want?

SBAR, the Home Health Connection:

SBAR is perfect for improving communications in a home health agency (HHA). This simple tool condenses messages so they contain only concise and significant information about the patient and allows for the clinician to verbalize their assessment of the situation - what they think is happening and what recommendations/actions the clinician feels are needed to correct the problem. SBAR can be a strategy used with physicians to improve communications and outcomes, including reducing avoidable acute care hospitalizations. SBAR can also be used between staff and/or management. This tool can help HHAs clearly, effectively and efficiently express the real message of the patient situation. SBAR works well for home health aides to communicate to their supervisors or to the nurse as well as in interdisciplinary communication.

Sequencing & Reinforcing SBAR:

SBAR is a standardized communication tool that is very easy and simple to use. It is recommended that you start with a small group or office and pilot this method prior to rolling it out to the entire workforce. During the pilot you can make necessary changes without any problems. Once you have successfully implemented it on a small scale you can spread it throughout your organization. SBAR works well in more complex situations such as designing it to meet the specifications of a disease management program (refer to COPD example in package). Always remember to reinforce the new concept to gain behavioral changes and staff buy-in. This package includes several tools/resources to help you. These tools should be modified to your agency's specifications.



Have <u>ALL</u> information <u>AVAILABLE</u> when reporting: chart, allergies, medication list, pharmacy number, pertinent lab results

SITUATION

I am calling about:_______(patient's name)
The problem I am calling about is:_______(patient's name)

BACKGROUND

State the primary	diagnosis & reason patient is l	being seen for hon	ne care:		
State the pertinent	medical history:				
	ngs:				
	lental status Neuro changes				
BP	Pulse rate/quality/rhythm	Resp rate/quality			
Lung sounds	Pulse Oximetery %	Oxygen	L/min via		
GI/GU changes (na	ausea/vomiting/diarrhea/impactior	n/hydration)			
			Blood Glucose		
Wound status (dra	inage, wound bed, treatment)				
Pain level/location	/status				
	nanges (weakness <u>)</u>				

ASSESSMENT

(What do you think is going on with the patient?)

I think that the patient is:

or

I am not sure of what the problem is, but the patient's status is deteriorating.

RECOMMENDATION

I suggest or request:								
□ PRN visit or referral: □ Nurse □ PT □ ST □ OT □ HH Aide □ MSW □ Dietician								
Visits frequency change								
Schedule for a physician office visit								
Physician, Nurse Practitioner or Physician Assistant home visit								
Pulse Oximetery	□ Lab work_							
🗖 Urinalysis, C & S	🗖 X-rays		🗖 EKG					
Medication changes								
U Wound care changes								
Nutrition or fluid restriction changes								
□ Other								
Call physician with:								