

# SBAR Training for Laboratory Associate

# Definition of SBAR

**SBAR** is an acronym that stands for Situation, Background, Assessment, and Recommendation.

- It is a standardized way of communicating a problem across the organization.
- Associates and providers can use SBAR to share patient information in a concise and structured format.
- It improves efficiency and accuracy in the care of patients and workplace environment.

# Definition of SBAR

- ***Situation***-Who you are and who, what, and where is the immediate problem
- ***Background***-A brief description of relevant history related to the current situation or condition
- ***Assessment***-Your view of the situation and your perception of the urgency of action
- ***Recommendation***-Your suggestion about the action that should be taken to solve the problem or your request for guidance on what the action should be

# History of SBAR

- SBAR was originally developed by the US Navy as a communication technique that could be used on nuclear submarines.
- The airline industries began to use SBAR in the 1980s after a series of airline crashes in which investigators determined that communication was contributing factor.

# SBAR Communication

- Saint Agnes Hospital has adopted this form of communication for all associates. (Please reference hospital policy SYS HOS 68 Hand-off Communication).
- SBAR can be used:
  - During change of shift
  - Notification of alert lab values to providers
  - Notification of discrepant laboratory results/information
  - Communication regarding instrument downtime
  - Communication of unacceptable specimens to providers

# Why is SBAR Important

- A program that facilitates effective communication is mandated by regulatory and accrediting agencies such as The Joint Commission and CAP.
- Identify patients correctly.
- Efficient communication between associates.
- Identify patient safety risks.

## Error Prevention Technique: SBAR - Non-Clinical

**SBAR** is a communication tool for planning and structuring information about a problem in both clinical and non-clinical situations. Each letter represents information that is important to communicate.

Definition	Expectation	Error Prevention Focus
<ul style="list-style-type: none"> <li>• Situation</li> <li>• Background</li> <li>• Assessment</li> <li>• Recommendation</li> </ul>	<p><b>Clear and Complete Communications:</b></p> <p>"I am personally responsible for professional, accurate, clear, and timely verbal and written communication."</p>	<ul style="list-style-type: none"> <li>• Critical thinking</li> <li>• Communication</li> </ul>

<b>S</b>	<b>Situation:</b> Who you are and who, what, and where is the immediate problem.
<b>B</b>	<b>Background:</b> A brief description of relevant history related to the current situation or condition.
<b>A</b>	<b>Assessment:</b> Your view of the situation (i.e. "I think the problem is..." or "I am not sure what the problem is.") and your perception of the urgency of action ("The patient is deteriorating rapidly." or "We will not be able to continue service without more supplies.").
<b>R</b>	<b>Recommendation or Request:</b> Your suggestion about the action that should be taken to solve the problem or your Request for guidance on what action to take.

Have *all* information *available* when reporting: Chart, allergies, medication list, pharmacy number, and pertinent lab results.

### Scenario:

**Situation:** George Smithton is a trauma patient in the critical care unit. He has fourteen family members waiting to visit.

**Background:** Only two visitors are allowed in the room at one time, which the family does not understand. It is already 7:30 p.m.

**Assessment:** George is in critical condition and is not expected to live. In the lobby area, George's family members are loudly expressing their grief and are very anxious. This is upsetting some of the other people waiting to see patients. George's family continues to ask Terry, the volunteer at the reception desk, about George's status. Terry uses SBAR when calling Logan, the nursing supervisor in George's unit.

**Recommendation:** Terry recommends that Logan come down to speak with the family.

**Result:** Logan comes down, moves George's family members to a Quiet Room near the chapel, and allows three people to visit George at a time.

<b>S</b>	<p><b>Situation</b></p> <p>My name is _____.</p> <p>I work in _____.</p> <p>The <b>situation</b> I am calling about is: _____.</p> <p>(state the <b>problem</b>, when it started, and how <b>severe</b> it is)</p> <p>I am calling about: _____.</p> <p>(name of the person whom you are calling about, if applicable)</p>
<b>B</b>	<p><b>Background</b></p> <p>The <b>background</b> of the situation is: _____.</p> <p>Relay pertinent <b>details</b>: _____.</p> <p>State the <b>location</b> of the situation: _____.</p>
<b>A</b>	<p><b>Assessment</b></p> <p>My <b>assessment</b> of the situation is: _____.</p> <p>Explain your <b>impression</b> of what is happening: _____.</p> <p>State any <b>danger</b> that may be associated with the situation: _____.</p>
<b>R</b>	<p><b>Recommend</b></p> <p>I <b>recommend</b>: _____.</p> <p>Provide your <b>suggestion</b> to remedy the issue: _____.</p>

# Example Scenario

31 y/o L&D patient [identifier] admitted for induction delivery. Type and Screen was tested and found to be positive. Patient subsequently has labor complications and doctor orders two units of RBCs to be ready for emergency c-section.



# Use of SBAR

- Situation: Hi, this is [name] from the Transfusion Services. There is a request for two units of blood for [patient identifiers] but the patient has a positive antibody screen.
- Background: Patient is going for an emergency section. Patient's prenatal testing was negative and an antibody identification would be required to identify and test for compatible blood.
- Assessment: Antibody identification and the finding and testing of compatible blood could take several hours.
- Recommendation: I recommend that the physician be made aware of the circumstances and be prepared for emergency released blood if necessary.