Service Priorities and Programmes

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Fast Quasi Communication - Verbal Report from private old aged home using SBAR model - a Pilot Program

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Introduction

Communication failure between health care professions and Private Old Aged Homes' (POAH) staff may lead to fatal consequences for the elderly living in the residential care. The Ambulatory Geriatric Service (AGS) nurses and POAH's staff often enquired about the residents' brittle health over the phone in order to provide appropriate and prompt care management. The concise and precise report from the POAHs' staff was a crucial element to make a right decision to the right resident at the right time. In order to improve verbal report between AGS nurses and POAHs' staff, a Pilot Program using the best evidence available adopted the SBAR model (Situation, Background, Assessment and Recommendation) in the residential care.

Objectives

(1) To integrate the evidence based intervention on verbal report. (2) To improve POAHs 'staff communication through SBAR model.

Methodology

This pilot program began in 2014 at POAH in Kwun Tong area. Nine POAHs were assigned to be the pilot sites. Totally thirty POAHs' staff including registered nurses, enrolled nurses, and health workers were trained with lectures and demonstration. A "Quick SBAR reference" was posted in their working station and a handy "checklist" provided with structural and logical reporting mechanism. A satisfaction survey and the pre-post comparison of verbal report time were also evaluated. Data were analyzed and the program utilization for POAHs' staff was determined.

Result

In the retrospective analysis, 80% of POAH' staff used SBAR model during phone consultation. They agreed the reference and checklist were useful and practical. Over 80 % of them expressed SBAR model could be enhanced their confidence in clinical management and well-organization the essential information before reporting. Approximately 60 % of mean verbal report time was reduced in comparison of pre and post time logging.The AGS nurses evinced the SBAR model could be guided the POAH's staff the reporting in a systematic and structural method to reduce frequency disturbance and wrong information received. Conclusion: The encouraging result showed SBAR model could be adopted in private residential care setting to enhance optimized effective communication among POAHs' staff and AGS nurses and also provide pertinent information about the residents.