

The Art of Communication in Healthcare: Building Stronger Teams

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**Primary Care
Strategic Forum**

The Path Ahead

Disclosure of Financial Support

This program has not received any financial or in-kind support.



Mitigating Potential Bias

- Scientific Planning Committee

Contributed to the consideration of:

- learning needs
- the determination of learning objectives
- the development of program content
- choice of speakers or presenters

- No Sponsorship

No funds received

- Content Reviewed

The scientific planning committee has reviewed presentations and ensured it's evidence-based and free of undue influence.



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Introductions

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Presenter Disclosure



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Dr. Elaine Bland

Relationships with financial sponsors:

- Grants/research support
- Speakers Bureau/Honoraria
- Consulting Fees
- Other: ACTT Physician Lead, CFPCN, Crowfoot Village Family Practice, Intercare Corp Group



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Relationships with financial sponsors:

- Grants/research support
- Speakers Bureau/Honoraria
- Consulting Fees
- Other: AMA-ACTT employee,
University of Calgary Cumming
School of Medicine

Objectives

1

Participants will understand the benefits of clear communication in team-based care and the positive impact on patients

2

Participants will learn about and have an opportunity to practice various communication frameworks

3

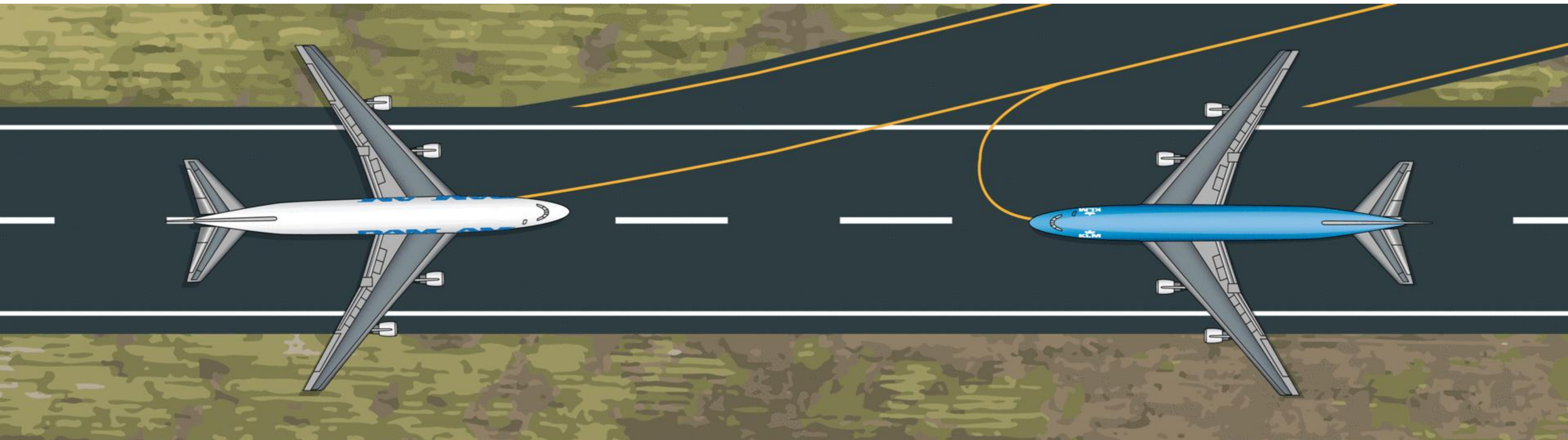
Generate solutions to existing communication challenges

One of the world's deadliest air disasters

March 27, 1977

2 planes collided on the runway in the Canary Islands

Tragic loss of 583 lives





To Err is Human

—  INSTITUTE OF MEDICINE
OF THE NATIONAL ACADEMIES

44,000 - 98,000 deaths
per year in the US due
to medical error = 1 jumbo jet per day

Benefits of Optimized Communication

- ✓ Improved communication across clinical and administrative roles
- ✓ Increased patient safety
- ✓ Increased staff satisfaction
- ✓ Increased staff engagement and collaboration
- ✓ Improved problem-solving
- ✓ Strengthens workplace trust relationships



Team Communication

Name all the ways
your team currently
communicates



Team Communication

Which
communication
methods are
ineffective and why?

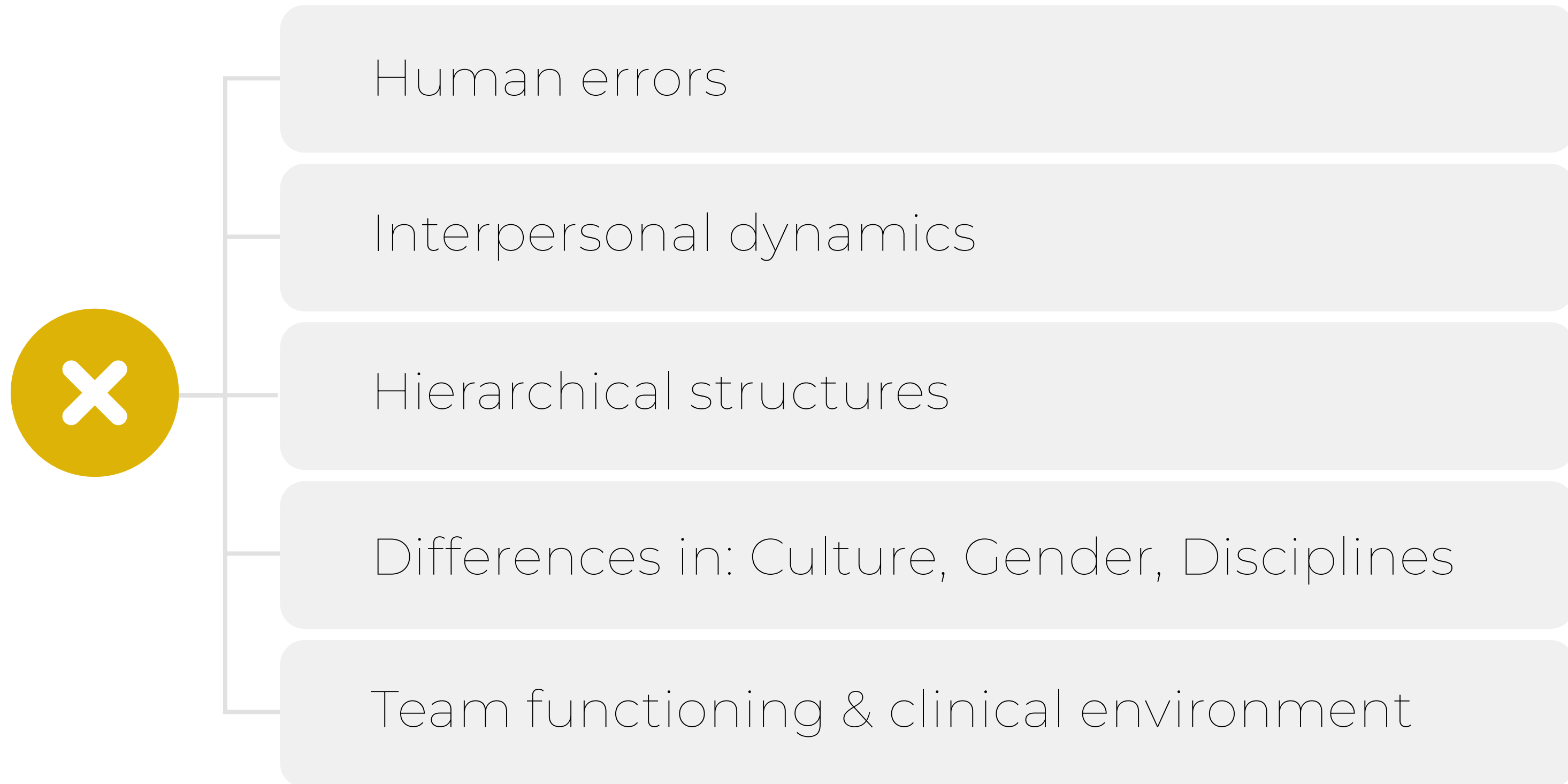


Addressing Barriers

ACTT

What is your team doing to improve effective team communication or remove barriers?

What causes communication errors?



Team Huddles



Do you have team huddles in your clinic?

Team Huddles

What are Team Huddles?

- ✓ Brief (2-30 minutes)
- ✓ Focused
- ✓ Done while standing
- ✓ Standardized (same time and place) every day
- ✓ Scheduled 'as needed'
- ✓ Inclusive

Purpose of Team Huddles



Engage team members to think and talk about their work



Identify issues that need immediate attention



Update team members about quality and safety issues



Review critical incidents



Quality improvement initiatives

Benefits of Team Huddles

- 29% reported increased staff satisfaction & engagement
- 67% reported positive impact on team process outcomes (efficiency, communication)
- 44% reported huddles boost clinical care outcomes
- 24% reported decreased medical errors & adverse drug events

Getting Started

HUDDLE WORKSHEET

What are the reasons for holding a daily huddle?

What topics will be discussed?

What prep does it require?

What are some potential solutions?

What are some potential hurdles?

What preparation needs to be done and by whom?

We will spend ___ minutes huddling.
We will huddle at ___ (time) ___ (place)

Huddle start date ___

BC PATIENT SAFETY & QUALITY COUNCIL
Working Together. Accelerating Improvement.

Use this worksheet to:

- ▶ Introduce the idea of huddles
- ▶ Help the team discuss what they might get out of huddles
- ▶ Plan for challenges and solutions

Team Huddles Guide

Huddle Checklist

This sample checklist can be adapted to suit the specific needs of your clinic.

MORNING HUDDLE (before 1 st patient of the day)	
Team Check-in	Notes
How is everyone feeling today?	
Are there any external team members here today? <i>(e.g. PCN team, residents, etc.)</i>	
Is anyone away? How will we manage that?	
Is anyone leaving early? How will we manage that?	
Is there anything else we should know today?	
<i>Other clinic-specific items</i>	
Schedule Review	
Who is coming in today? Cancellations? Squeeze-ins?	
Is there anything that the team should know about? <i>(e.g., patient grieving, will be receiving a difficult diagnosis, often late or no shows, etc.)</i>	
Can we offer opportunistic care while they're here? <i>(e.g., screening due, requisitions, prescription renewal, care plan update, etc.)</i>	
Can we get anything ready in advance? <i>(e.g., Netcare results, print requisitions, administer screen/self-assessment, pap prep, etc.)</i>	
Are we doing any PDSAs today? What's the plan?	
<i>Other clinic-specific items</i>	
AFTERNOON HUDDLE (before 1st patient of the afternoon) --- OPTIONAL	
Any change in team status? <i>(e.g. leaving early, gone home sick, etc.)</i>	
Any change in the schedule? <i>(e.g. running late, new cancellations, squeeze-ins, etc.)</i>	
Does anyone need help?	
PDSA update <i>(if applicable)</i>	
<i>Other clinic-specific items</i>	
END OF DAY HUDDLE --- OPTIONAL	
Brief review of incident(s)	
What went well?	
What could we have handled differently?	
Actions required?	
<i>Other clinic-specific items</i>	

Strategies for quickly planning and re-planning daily activities to maximize:

- ▶ Communication
- ▶ Coordination



Reflection Moment

How confident are you that your team will implement huddles?

Who on your team needs to be involved?

Communication Frameworks

SBAR Tool

- ✓ Originally developed for use in the US Navy
- ✓ Concrete framework for framing focused and/or critical conversations
- ✓ Easy to remember
- ✓ Fosters a culture of patient safety

<https://www.ihi.org/resources/tools/sbar-tool-situation-background-assessment-recommendation>



Situation

concise statement of the problem



Background

pertinent, brief information



Assessment

team member's analysis and options to consider



Recommendation

team member's request or recommendation

Scenario: Let's practice!

Patient tripped on the curb outside the clinic,
coming in for routine BP check

Patient presentation:

- ▶ Mrs. Smith - 80 years old
- ▶ Hx: CHF, COPD, OA.
- ▶ VS: BP - 101/88, P 112 atrial fib. A&O x 3.
- ▶ Patient doesn't want to make a fuss, feels silly.
- ▶ Goals of care M1. No LOC, Bruise to right forehead.
- ▶ Meds: Tiotropium Bromide 2.5 mcg daily, Daily warfarin 3 mg, last INR 2.5 2 weeks ago. Furosemide 60 mg OD. Bisoprolol 2.5 mg daily.

S

Briefly state problem, what it is, when it happened or started, and how severe

B

Diagnosis, Meds, Allergies, Recent VS, Labs, Code Status, other clinical information

A

Share your assessment of the situation

R

What is your recommendation or what do you want?

SBAR: An Example for Primary Care

Example 2: SBAR Report to a Primary Care Physician	
S	Situation Patient arrived for appointment on wrong day.
B	Background <ul style="list-style-type: none">• Patient arrived for 11:00AM appointment today.• Appointment is scheduled for 11:00AM tomorrow.• Patient comes from 40 miles away and needed to have friend drive them to appointment.• Doctor has 1+ appointment available on schedule.• Doctor's hall partner has some open times.• We don't know if the mistake was with the patient or the call center.
A	Assessment We should see the patient today.
R	Recommendation I recommend that we use the 1+ time or have your hall partner see this patient.

When to use SBAR

- ✓ Critical or time-sensitive situations
- ✓ During phone calls to physicians or other team members
- ✓ During transitions of care
- ✓ During hand-offs
- ✓ When you need clarity

Speaking Up

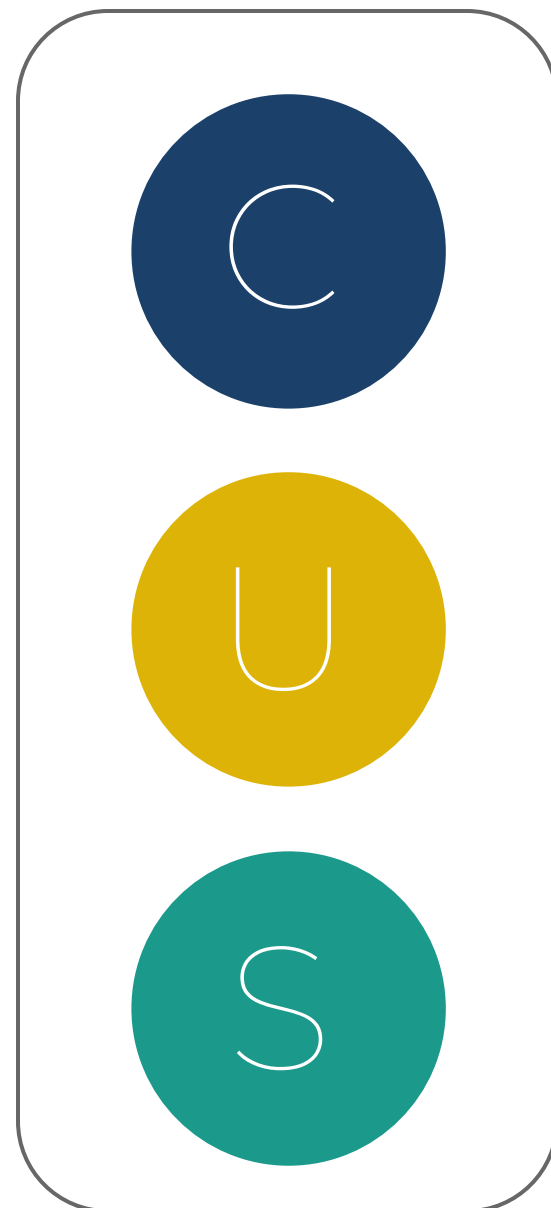
Using critical language within your team is an important skill

Why is it so hard for people to be assertive?

- ▶ Power differences
- ▶ Lack of common mental model
- ▶ Not sure that you're right

Helping Team Members Speak Up

Try assertive statements:

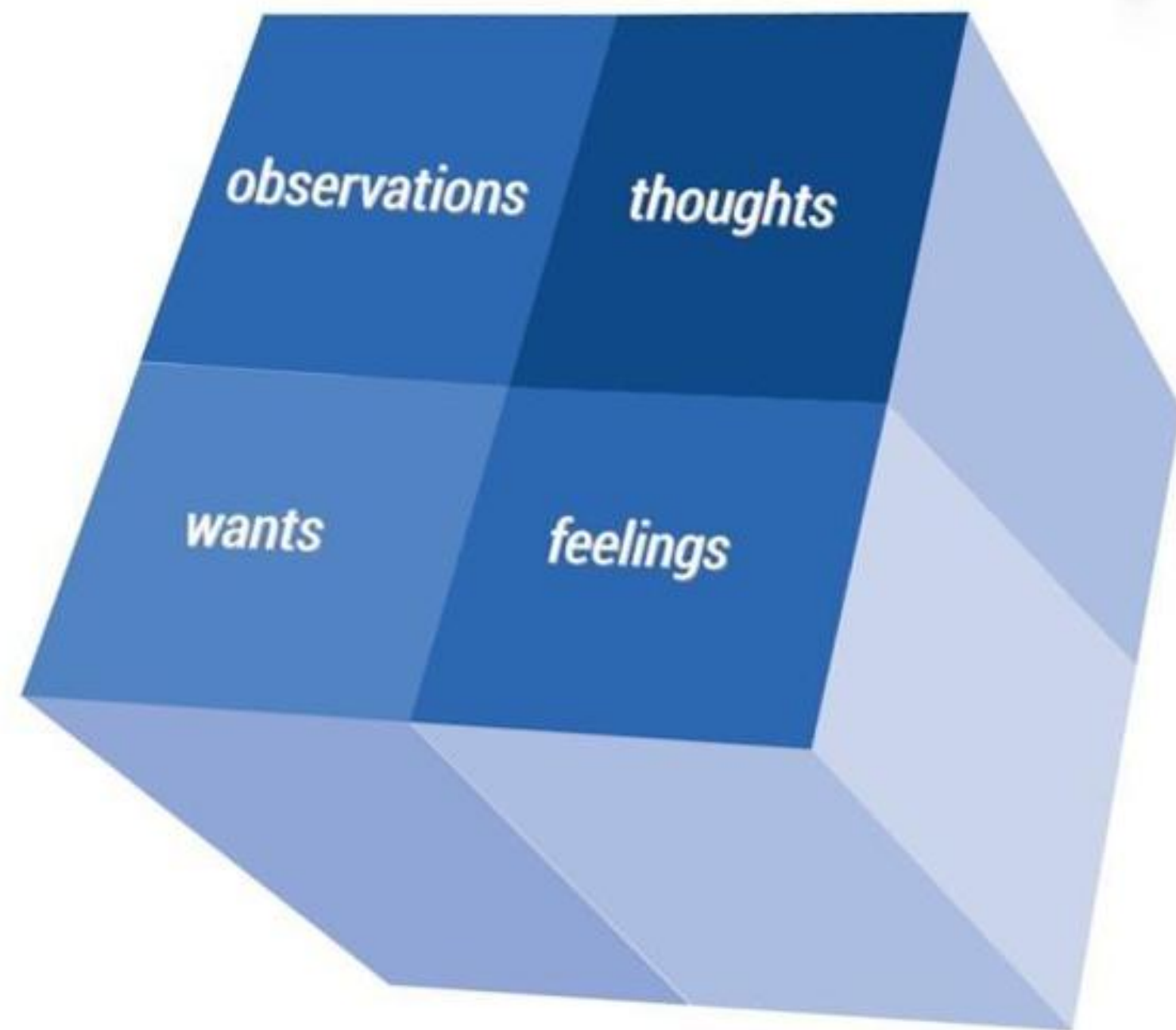


I am concerned.

I am uncomfortable.

This is a safety issue.

The Experience Cube



A model that allows you to:

- ▶ explore your own experience
- ▶ get curious about the experience of others

Key Assumptions

1

We're sense-making beings

- We develop narratives
- The narratives are often more negative than reality
- We treat these stories as truth

2

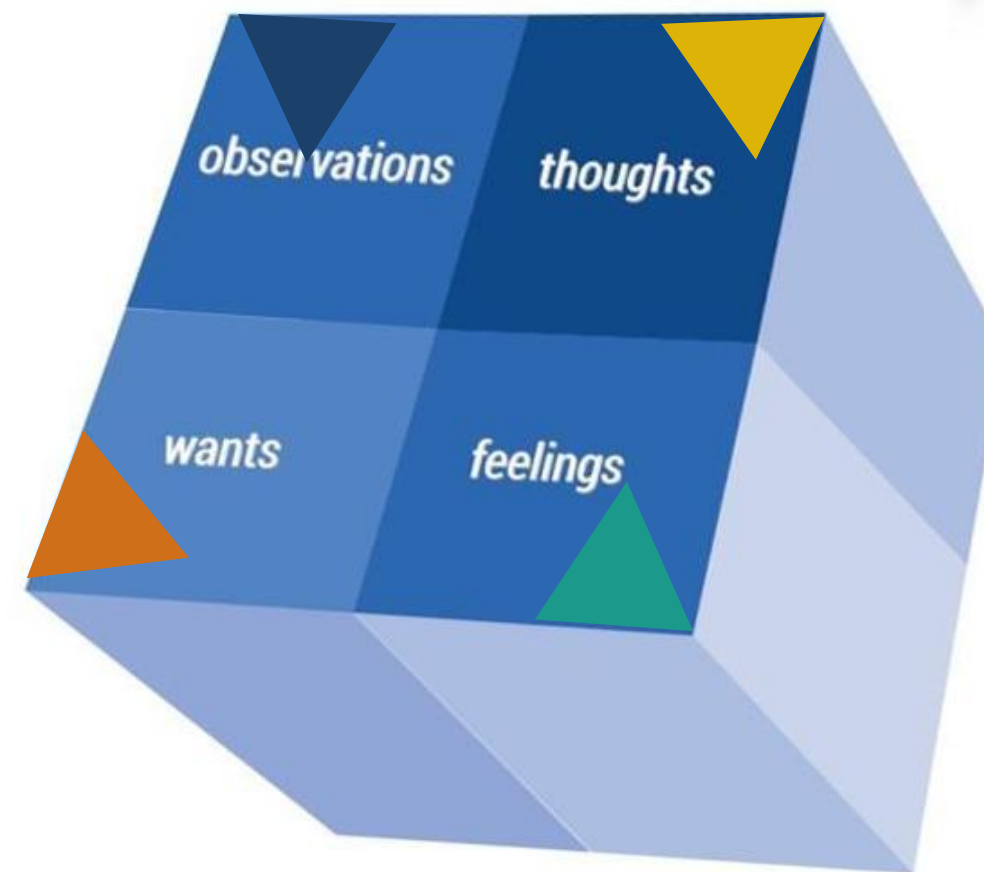
Everyone has a different experience of the same event

- Based on our world perspective, past experiences and beliefs

Our experience has four elements:

observations

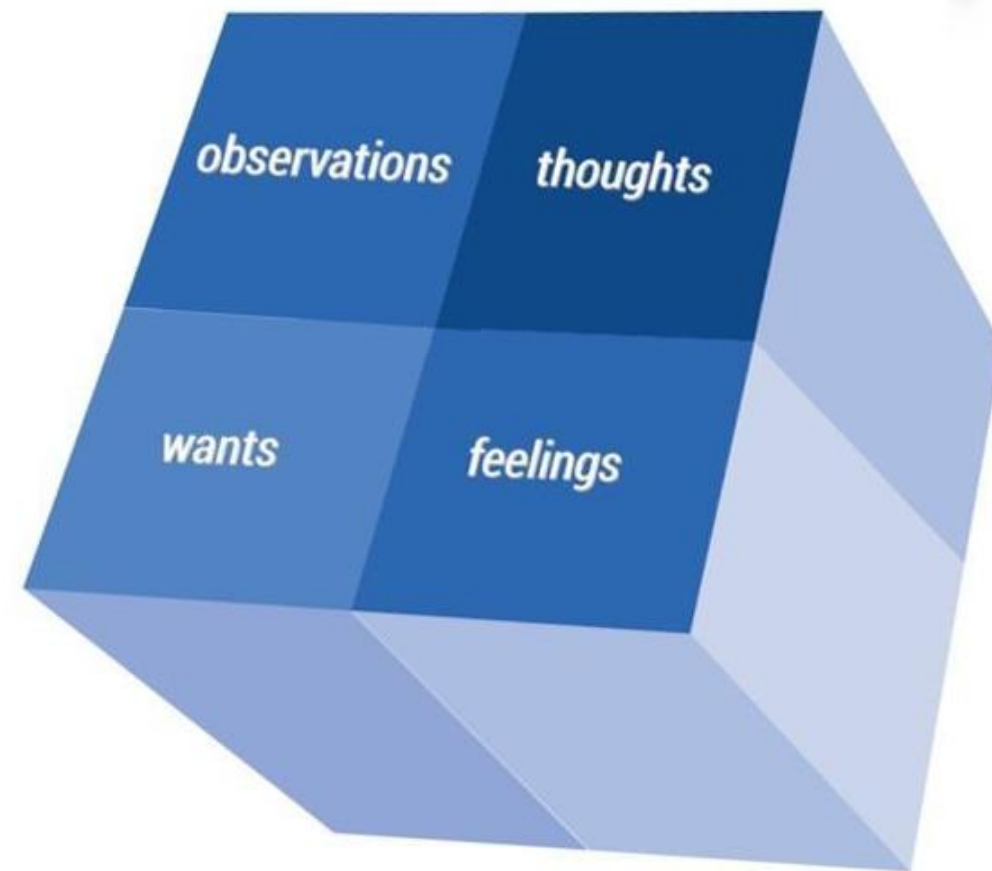
thoughts



wants

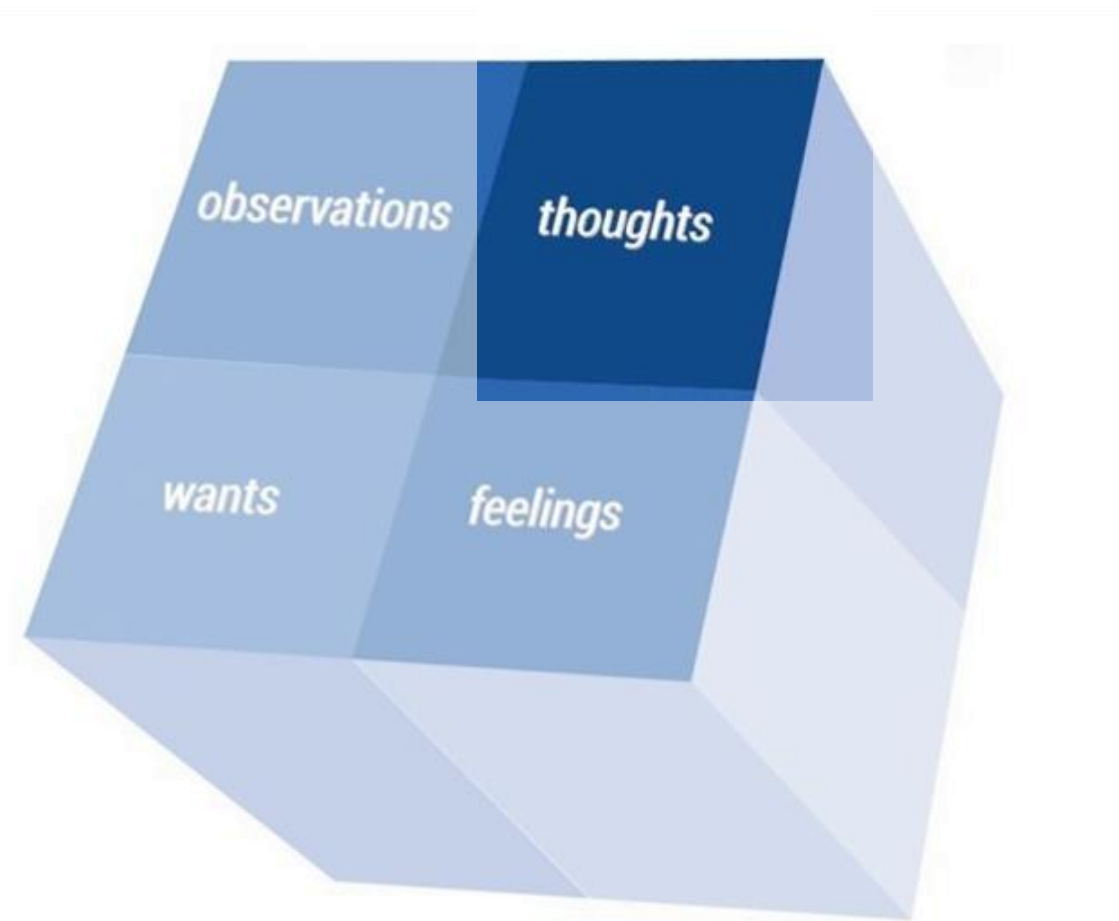
feelings

Observations



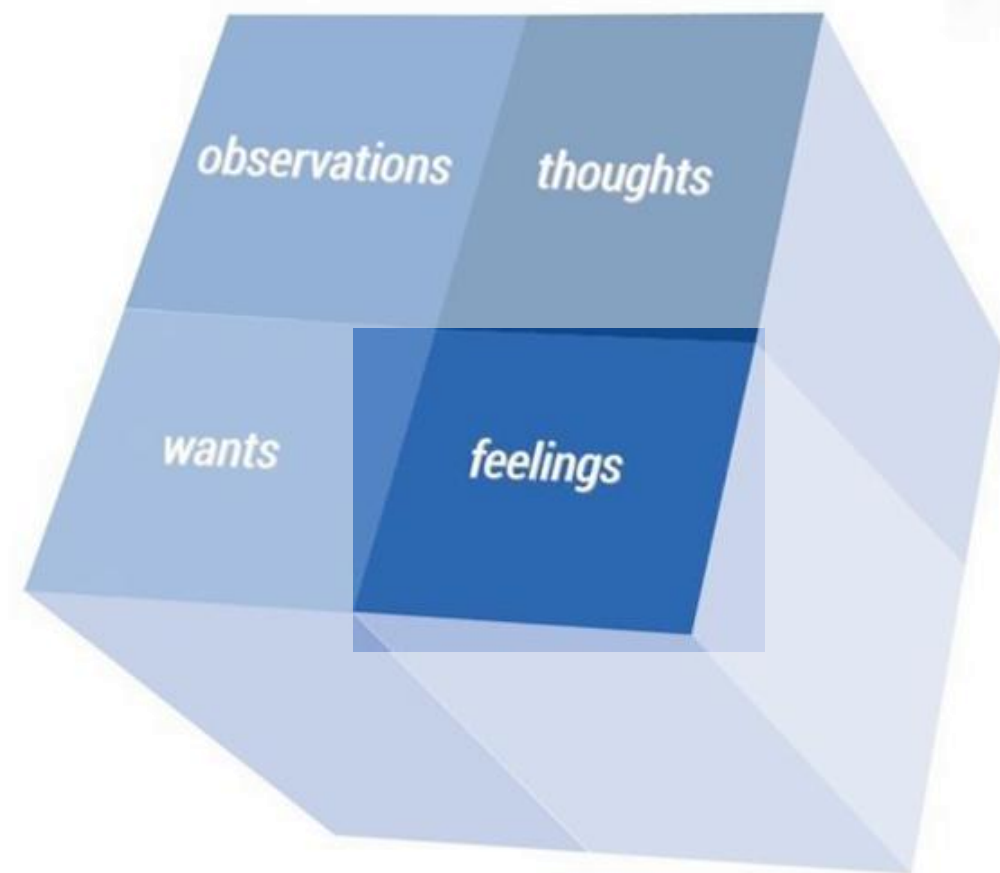
- ▶ Objective
- ▶ What you see or hear
- ▶ What a video would record

Thoughts



- ▶ Subjective
- ▶ The meaning you add to your observations
- ▶ Essential to know the difference between observations and thoughts

Feelings



- ▶ Your emotional or physiological response
- ▶ Influence our actions and our sense-making

Our Emotions

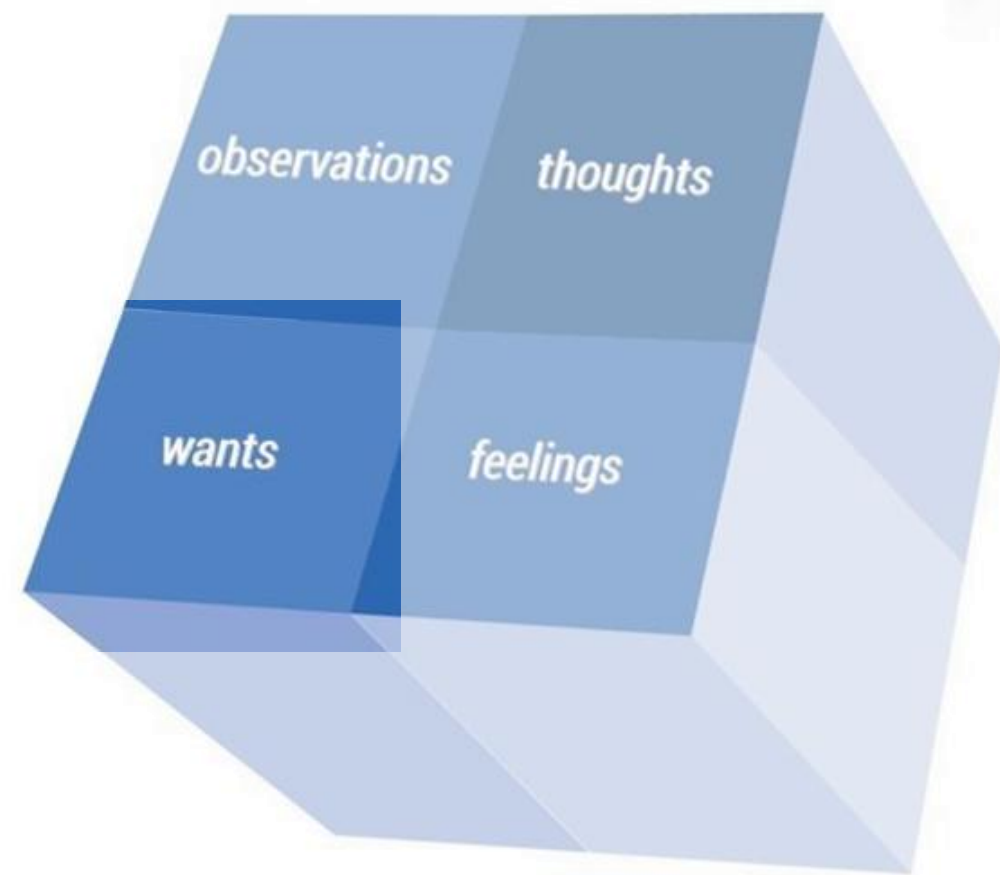


Be aware of what you are feeling



Pay attention to sensations in your body

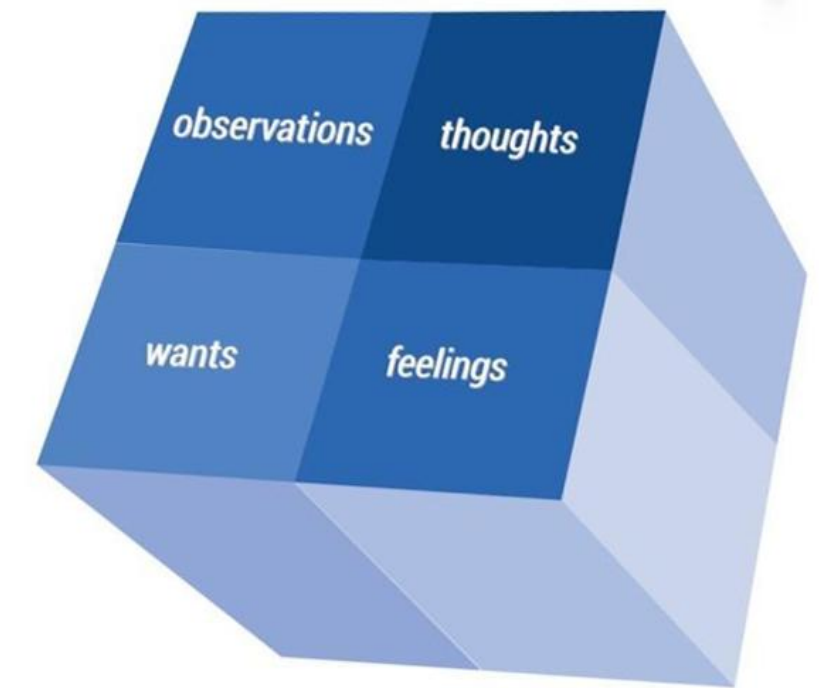
Wants



- ▶ The outcome you seek
- ▶ We assume people want what we want
- ▶ We assume people know what we want

Benefits of Using the Cube

- ✓ We start taking responsibility for our own experiences
- ✓ We can become more aware of our experience in the moment
- ✓ The cube is practical and simple to use, but allows one to go deep
- ✓ Increases our capacity for empathy, connectedness and appreciation



Interactive Exercise

Observation or Thought?

- ▶ I see she is upset.
- ▶ I see her working hard.
- ▶ I see he is happy.
- ▶ I see they are uninterested in this discussion.
- ▶ I see they are tired.

Use the Cube for Effective Feedback



Using the cube is not a linear process

Remain curious

Ask questions

Check in for understanding

Agree on next steps

Find your Voice

I Observe:

- I've noticed
- I saw that
- I heard you say

I think:

- I believe that was
- I think it is
- My story is

I feel:

- I'm really pleased
- It concerned me when
- I appreciate your commitment to
- It troubled me when

I want:

- I want to
- I need
- I wish
- I hope

Use the Cube for Effective Feedback

Examples

1

I'm really pleased (**Feelings**) to see your efforts to communicate more with the team (**Observations**).

2

I think the communication methods are improving (**Thoughts**).

3

I want you to continue building relationships with everyone on the team (**Wants**). Well done!

Wrap-up



Healthcare teams should learn how to communicate effectively in different settings:

- ▶ Routine daily work
- ▶ During critical situations
- ▶ Giving feedback

Wrap-up

ACTT

Wrap-up

1

Team Huddles

- Routine daily work
- QI initiatives

2

SBAR & CUS

- During critical situations

3

Experience Cube

- Giving feedback

Thank you
for attending



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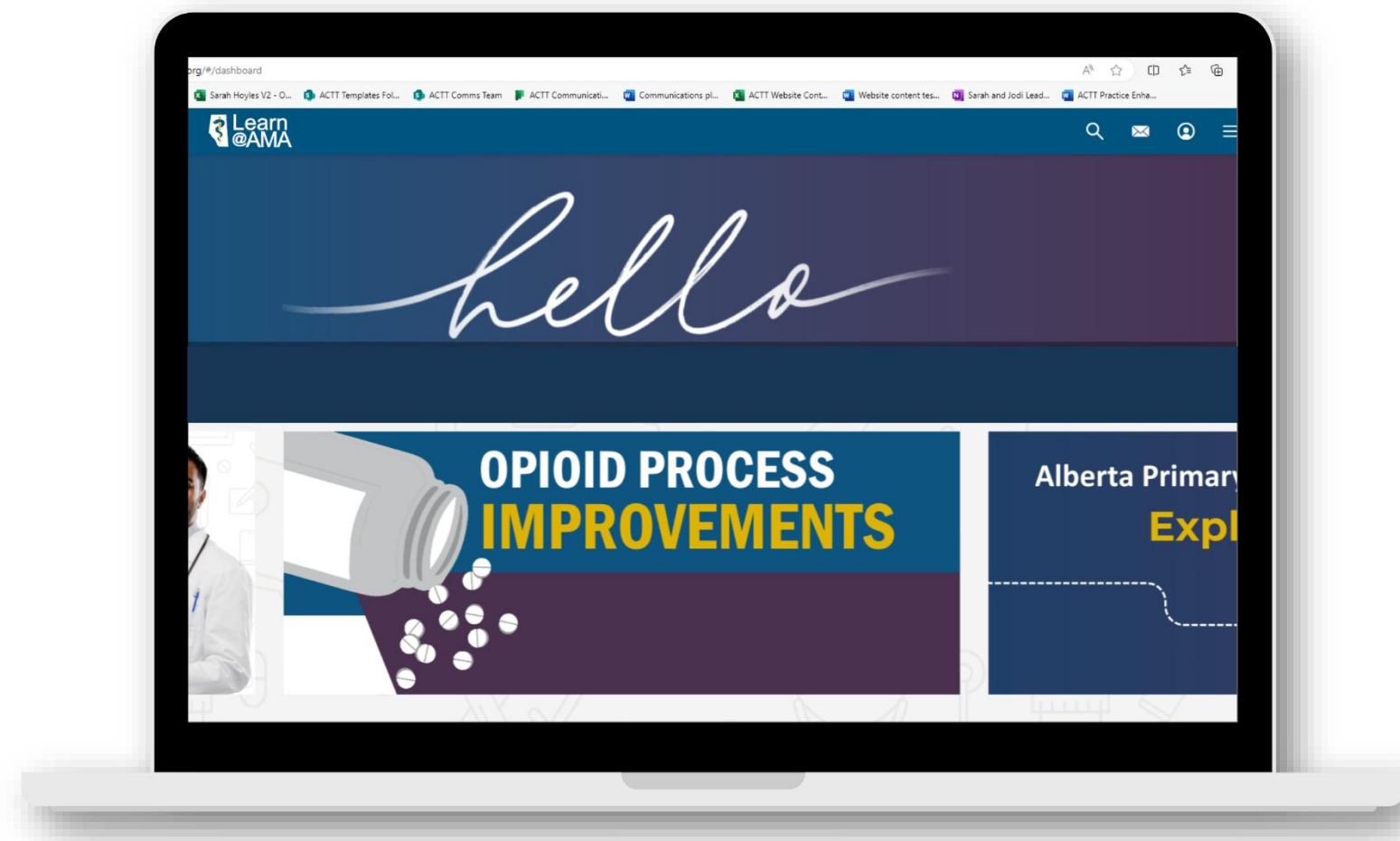
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Network Connections



- Visit learn.albertadoctors.org for discussion boards and resources.
- Recordings and resources will be posted by the end of the week.
- Weekly discussion board summary emails come from noreply@myabsorb.ca.
Please add this to your safe list!