Experiences in Teaching and Learning

Integration and assessment of the situation-background-assessment-recommendation framework into a pharmacotherapy skills laboratory for interprofessional communication and documentation

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ABSTRACT

Background and purpose: The situation-background-assessment-recommendation (SBAR) framework is a commonly used method to structure verbal communication in the nursing and medicine disciplines and increases the effectiveness of interprofessional communication. The purpose of this manuscript is to describe how the SBAR framework is integrated into a pharmacotherapy skills laboratory for interprofessional communication and to report on student agreement of perceived realism, preparedness, and fairness of assessment relating to simulated SBAR activities.
Educational activity and setting: Simulated, authentic interactions with healthcare providers were incorporated into a pharmacotherapy skills laboratory using the SBAR framework. Activities culminated with a performance-based assessment (PBA) exam which included verbal and written SBAR stations. Students completed a PBA exit survey reporting level of agreement with perceived realism, preparedness, and fairness of assessment related to the exam and answered open-ended questions reporting what they most and least liked.
Findings: After completion of the PBA exam, students reported they agreed or strongly agreed (78%) the PBA was realistic to practice. Students reported increased agreement they were prepared to verbally communicate recommendations compared to document recommendations in the written SBAR framework (64% and 52% agreed or strongly agreed, respectively). Thematic content analysis revealed students preferred to document in the SBAR format and felt it was more realistic than the subjective-objective-assessment-plan (SOAP) note format.
Discussion and summary: The SBAR framework is relevant for pharmacist verbal communication and written documentation. Incorporation of the SBAR framework into a skills laboratory appears to prepare students for a PBA that was perceived as both realistic and fair.

Background and purpose

Interprofessional communication is an essential component to increasing patient safety and quality throughout the healthcare process. The Joint Commission identified ineffective communication among the top three root causes of sentinel event data for adverse medical events reported from 2004 to 2014.[1] The Joint Commission's 2008 annual report on quality and safety reported

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Table 1
Overview of situation, background, assessment, recommendation (SBAR) framework.[5]

Situation	– Briefly introduce the patient.
	– Provide a synopsis of the current issue(s) that the listener needs to be informed of.
Background	– Describe the pertinent history of present illness for the patient.
	– Summarize the relevant events leading up to the present issue.
Assessment	– Provide your perspective on the issue(s) [what you think is happening and what can potentially be done to correct the issue(s)].
Recommendation	– Provide a recommended course of action to correct each issue identified.

improving the effectiveness of communication by "implementing a standardized approach" as a national patient safety goal.[2] Colleges/schools of pharmacy should evaluate current instructional methods of interprofessional communication to ensure a standardized format is used with a goal of increasing the quality of care provided to patients.

Interprofessional communication is one of four core competencies identified under the interprofessional collaboration domain, proposed by the Interprofessional Education Collaborative. The intent of this competency is to educate students in various professional programs together to "communicate with…professionals in health and other fields in a responsive and responsible manner that supports a team approach to the promotion and maintenance of health and the prevention and treatment of disease."[3] In addition, the Accreditation Council for Pharmacy Education (ACPE) outlines specific requirements for students in order to satisfy accreditation standards for the advanced pharmacy practice experience (APPE) curriculum in a colleges/school of pharmacy.[4] Accreditation Standards state that pharmacy students must be prepared to be a contributing member of an interprofessional team and must "demonstrate effective verbal and written communications to staff, patients, and healthcare team members…."[4]

One common and widely known method used to structure communication is the Situation, Background, Assessment, Recommendation (SBAR) framework.[5] The use of the SBAR framework is endorsed by the Institute for Healthcare Improvement[6] and Team Strategies and Tools to Enhance Performance and Patient Safety (TeamSTEPPS)[7] as a structured model of communication to relay important information between members of the health care team to increase patient safety. It is a simple tool used as either a verbal framework for communication or as a written tool for documentation in clinical practice. It highlights an identified area of concern within the care of a patient in a direct, succinct, and straight-forward manner. An overview and explanation of the components of SBAR when used as a structured method for communication can be found in Table 1.

Verbal communication using the SBAR framework has been shown to increase the effectiveness of interprofessional communication.[8,9] Beckett and colleagues[8] evaluated an intervention that introduced SBAR collaborative verbal communication in a pediatrics department. Comparing pre- and post-SBAR implementation, nurses and physicians reported increased satisfaction with the quality of collaborative communication (p = 0.02 and p = 0.001, respectively). Additionally, De Meester et al.[9] evaluated the impact of SBAR on mortality within 16 hospital wards. Nurses were trained to verbally use the SBAR framework for handoff communication on shift changes and when notifying a physician that a patient's clinical status was declining. After implementation of the SBAR framework, unexpected patient deaths decreased from 0.99 to 0.34 per 1000 admissions (p < 0.001).

Like the disciplines of medicine and nursing, pharmacists have a need to succinctly and effectively communicate with other healthcare providers in verbal and written formats. Due to the increasing complexity of the healthcare system, the roles of pharmacists are expanding. Pharmacists are integrating themselves into healthcare teams and asserting themselves as the medication expert. Pharmacists make pharmaceutical care recommendations in many settings that can affect patient outcomes. For this reason, the American Society of Health-System Pharmacists (ASHP) published guidelines on information that should be documented within a patient's permanent medical record after providing pharmaceutical care.[10] These guidelines do not endorse a specific communication framework, but clearly state that pharmacists should use an appropriate standardized format. Although no single communication framework is recommended, SBAR is a logical choice for academic pharmacists to adopt and teach to students, as data exist to support its use and our nursing and medicine colleagues are already accustomed to this framework.

In pharmacy education, the need for SBAR framework incorporation into curricula has been increasingly recognized in an effort to enhance patient safety and improve interprofessional verbal communication in a manner similar to other healthcare professionals.[11–15] After incorporating pharmacist-physician interprofessional simulations using the SBAR framework for verbal communication into a clinical assessment course at the University of Kansas School of Pharmacy, students (n = 171) reported significantly increased confidence in interprofessional communication in inpatient (p < 0.0001) and outpatient settings (p < 0.0001).[16] Objectively measured student communication skills improved in both settings as well (p < 0.0001). In addition, healthcare professional schools strive to train students to be competent in interprofessional communication. Multiple colleges/schools of pharmacy have therefore developed interprofessional education activities surrounding the verbal use of SBAR to foster a common framework for communication during interprofessional education.[17,18]

Unlike with verbal communication, a paucity of data exists within the pharmacy education literature describing the use of SBAR as a framework for written documentation. Only two pharmacy education-related abstracts were found which required SBAR notes for written documentation of pharmaceutical care activities; however, SBAR was not the focus and was not included in any analyses, implications of results, or discussion sections.[19,20] As a promising mechanism to advance interprofessional verbal communication and written documentation, SBAR has been incorporated into the pharmacotherapy skills sequence at the University of Wisconsin-Madison School of Pharmacy. The purpose of this article is to describe how the SBAR framework has been integrated into the pharmacotherapy skills laboratory to prepare students for successful interprofessional communication and documentation and to report on student agreement of realism, preparedness to perform, and fairness of assessment of simulated SBAR activities.