



# Flash of brilliance

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## Aim: What were you trying to achieve?

Our Primary Care Network (PCN) had one serious incident (SI) in 2021 involving a deteriorating patient. The SI investigation action plan stated that we needed to produce and implement a SBAR (Situation, Background, Assessment, Recommendation) template for all transfer of care and to communicate with other services.

Community Nursing Teams (CNTs) would either send a general email, or phone the GP surgery to communicate concerns about patients. Getting through to the GP via telephone could be difficult due to the long wait times for calls to be answered.

We wanted to use a tool for emails which included all of the clinical information a GP would need, highlight the importance of the communication from the CNT and ensure a timely response to our concerns. This would also reduce the need to make phone calls.

## Change ideas: What changes did you make?

Our change idea was to use the SBAR tool for our emails. The SBAR tool would be emailed to the GP surgery for appropriate action to be taken in a timely manner. Contact details for the senior nurse on duty would be provided, should the GP wish to discuss the patient with the CNT.

The teams discussed how the SBAR communication tool could be set as an email signature on everyone's NHS email. This would be completed and sent to the GP. A copy of this would be attached to the RIO documents.

Tweaks were made along the way, such as adding a visible box with clinical observations as CNTs would not always include all of these in their communication. These are vital to show the patient's current condition. We wanted to make sure GPs understood what was being asked of them and therefore, appropriate action would be taken in the required timescale.

We set up a survey with Communications Team to ask questions to the CNTs within west Kent around the use of the SBAR tool and how they felt it was working.

## Measures/results: What was the impact of the changes?

We had 25 responses to our survey.

Communication prior to the introduction of the SBAR tool was rated at 2.92/10 (zero being very hard and 10 being easy).

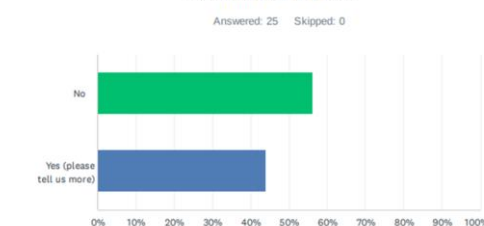
Response time from GPs prior to the introduction of the SBAR tool was rated at 2.4/10.

The response time rating improved very slightly to 3/10 following the introduction of the SBAR tool.

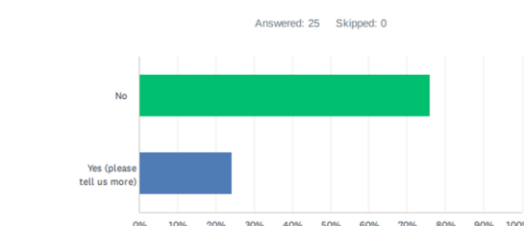
Now the SBAR communication tool is in use, the CNT team rated the requests being actioned as instructed as 3.36/10.

We asked the team if there was anything that could be improved with the SBAR communication tool and 44 per cent suggested it could be improved. We also asked if anyone had any other feedback to make and 24 per cent did.

Q5 Is there anything which could be improved in the SBAR communication tool?



Q6 Do you have any other feedback about the SBAR communication tool?



We received 11 comments with ideas for improvement and six other comments which were constructive from the CNTs. Two of the comments were really positive which was encouraging.

"I find it helps structure the information required to send to the GP."

"The tool is helpful when structuring an email to the GPs."

## Lessons learned and what's next?

What happens next: -

- Comments from the CNTs regarding improvement, included that we should "increase staff awareness about the tool", therefore, the SBAR communication tool has been shared with all PCNs in west Kent for all staff to use.
- The majority of feedback from colleagues was that using the SBAR tool is time consuming to populate with the patient's information:

"Takes some time to complete all of the sections as if saved as a signature, you cannot copy and paste into it (for demographic information). Would be much better if there was a letter on RIO as this could pre-populate information and would be much quicker to add the pertinent information. Ideally it should be 'being easily accessed through Rio'"

"Add to RIO to make this quicker to complete."

"Sometimes it is too long. If it could be simplified, so it could be more of a tick box tool, it would make it quicker to fill in."

"It's quite long. Sometimes difficult to find to copy and paste."

"Simplify too many areas to complete."

Therefore, listening to our colleagues, our next steps are to add to RIO which will allow this to be populated with the information in a much timelier manner. This can then be emailed directly to the GP for action.

- Another comment was to be able to attach photographs. This would be wound care related and therefore we will investigate how to share Wound Matrix photographs and relay this back to the teams.
- "More feedback from the GPs would be helpful" was also a comment and we note from the survey results that communication is still an issue. Therefore, we will raise the CNTs feelings about communication at the appropriate organisational meetings, aiming to stimulate ideas regarding future joint communication improvements.