Nursing staff surveys revealed that there was a need to improve communication about our medically acute patients with our Hospitalists in the Psychiatric setting. Communication between nursing and hospitalists did not meet collaborative communication needs of the healthcare team or the needs of the medically acute patient. Nursing staff, not being continuously immersed in the medical environment, lacked a communication structure concentrated on the detailed needs of the patient. On the other hand, the hospitalists did not recognize the limitations of a locked inpatient psychiatric unit in relation to patient assessment and available interventions, leaving both parties frustrated. There were boundaries in the aptitude to efficiently communicate about the psychiatric patient with medical needs due to nursing not being immersed continuously in the medically acute environment resulting in frustrated nurses as well as medical providers. The Virtual Education and Simulation Training lab, Behavioral Health nursing staff, and Hospitalists arranged to simulate medical emergencies in order to assess both sides of communication. Simulation scenarios were developed for the nurses to assess a decompensating medically acute psychiatric patient and communicate their findings with the hospitalist behind the scenes who was unaware of the situation. Both parties were then debriefed in the same room after the exercise and discussed areas of strengths as well as room for improvements as seen from either side. A pre and post implementation survey was conducted among nursing staff and the hospitalists. Physicians reported a vastly better understanding of the limitations nurses face on a locked psychiatric unit while nurses subsequently reported an improved understanding in regards to the limitations of the hospitalists. Both nurses and physicians agreed that since training, there has been improved communications in regards to the medically acute psychiatric patient. The goal of improving communication and partnership between members of the medical team as well as Behavioral Health Nurses was met with the utilization of a simulated setting.

Title:
Two Sides to the Story: Utilizing Simulation to Improve Communication

Keywords:
Interdisciplinary, Psychiatric and Simulation

References:


Abstract Summary:
Simulated scenarios were developed for Behavioral Health Nurses, who were to assess the decompensating medically acute psychiatric patient. Medical providers were behind the scenes unaware of the scenarios. By the nurses utilizing the SBAR communication format, partnership between members of the medical team as well as Nursing was vastly improved.

Content Outline:

1. Goal
   1. The goal of this project was to improve performance, communication and efficiency in the Behavioral Health Clinical setting among both Nursing staff as well as Hospitalists, as the department is transitioning to a more medically acute psychiatric model.

2. Introduction
   1. There were boundaries in the aptitude to efficiently communicate about the psychiatric patient with medical needs due to nursing not being immersed continuously in the medically acute environment.
   2. The current form of communication was not meeting shared communication needs among nursing or the hospitalists.
   3. When calls were made to the hospitalist about the medically acute patient, the contents of the information given required structure and focus on the specific needs of the patient.
   4. Lack of communicative guidance was evidenced by performing a Learning Needs Assessment of the Behavioral Health Nurses exploring the need for further education.
   5. Results displayed a need for utilization of the SBAR (Situation Background Assessment Recommendation) format and improved prioritization of the information communicated to the hospitalists
   6. Our current medical providers only had one hospitalist covering the inpatient Behavioral Health unit so it was imperative that nursing staff understand their limitations, as providers, thus better prioritizing calls, while maintaining patient safety.

3. Action Plan
   1. The simulation lab staff toured the Behavioral Health Unit to get a better understanding of our environmental layout. This was then used to model the scenario rooms.
   2. Scenarios were created from past medical emergency situations that had occurred on the unit.
   3. Medical Provider leadership was contacted to participate in 1:1 Behavioral Health Critical Skills scenarios.
   4. The assessment of the scenarios were based upon the RN’s ability to do a physical head to toe assessment taking both psychiatric diagnosis as well as possible medical diagnosis into consideration and then being able to communicate that information effectively to the provider.
   5. With that information, the RN was to establish whether to call the provider or not, and utilizing the SBAR form of communication, convey the information to the provider who was blind to the actual scenario.

4. Solutions Implemented
   1. Communication between RN and Provider was then discussed during a debriefing held in a separate room. Here, both RN and Provider were able to verbalize what they obtained and what they did not obtain from the phone exchange as well as how they can possibly do things differently.
   2. Identified barriers to reaching expectations needed for the patient scenarios from a physician standpoint as well as nursing.
   3. We identified the need to implement the SBAR framework of communication in both Crisis as well as the inpatient unit, from the nursing standpoint immediately, as this is an existing format utilized on medical floors systemwide.
   4. Elicited feedback from nursing and provider staff based on the SBAR style of communication and the quality of the information conveyed after Critical Skills was completed.

5. Conclusion
1. Upon completion of this simulation activity, staff began to prioritize information that should be communicated to medical providers utilizing the SBAR format. Now the nurses can discern the medical complications that can occur within our psychiatric population and take the appropriate measures in order to address these concerns.

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