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Staff Education Project to Train Providers on the Use of the SBAR Communication Tool to Improve Reimbursement Rates

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Executive Summary: Staff Education Project to Train Providers on the Use of the SBAR Communication Tool to Improve Reimbursement Rates

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Summary

In this doctoral project, I focused on educating healthcare staff on using the situation-background-assessment-recommendation (SBAR) communication tool to improve documentation practices and reimbursement rates from Medicare, Medicaid, and private insurance companies. My goal for the project was to determine if training on the SBAR tool would improve healthcare providers' knowledge of how to use it for documentation. The facility had experienced significant financial losses, exceeding $1 million in the last two quarters of 2023, due to inadequate documentation. Inaccurate or incomplete documentation, particularly in medical records, hinders the ability to bill appropriately for services rendered, impacting patient care and financial sustainability. An educational training on the SBAR tool was developed. The training included a pretest, a PowerPoint presentation, two role-play scenarios, and a posttest. Data from the pre-and posttests were compared using a paired *t* test. The result suggested that the intervention did not produce a significant measurable impact on posttest results.

This project highlighted the importance of improving communication and documentation practices to address financial losses and enhance patient care. The SBAR tool can improve reimbursement processes and strengthen teamwork, staff morale, and patient outcomes. The project has significant implications for promoting diversity, equity, and inclusion (DEI) by fostering more precise communication across diverse teams and ensuring equitable care delivery. The recommendation includes ongoing staff training on SBAR to improve reimbursement.

Background

The need for improving communication and documentation practices in healthcare facilities has become urgent due to the growing financial pressures on hospitals to maintain compliance with reimbursement protocols (Bhati et al., 2023). My goal for the project was to address a significant gap in practice: the facility's loss of over $1 million in three months related to inadequate documentation practices. These financial losses threatened the facility's ability to provide high-quality care and impacted staffing, resource allocation, and overall operational efficiency, vital to meeting community healthcare needs (Akinleye et al., 2019). Evidence in the literature showed that improving documentation can enhance compliance with Medicare and Medicaid requirements, mitigating financial risks and improving care delivery (Flaubert, 2021).

One effective strategy for addressing documentation deficits is using structured communication tools, such as the SBAR tool (Etemadifar et al., 2021). The SBAR tool is designed to standardize how healthcare professionals communicate, particularly during critical transitions of care, which are prone to errors and inconsistencies (Cornell et al., 2020). Recent studies demonstrated that implementing SBAR can significantly improve communication clarity and documentation accuracy, which are critical for securing proper reimbursement (Fernández et al., 2022). Moreover, a structured communication tool like SBAR promotes collaboration, reduces communication-related errors, and fosters a safety culture (Lyle-Edrosolo & Waxman, 2020). Proper communication is known to reduce delays in care, mitigate adverse events, and ensure that clinicians can provide safe, efficient care (Sharkiya, 2023). Evidence shows inaccurate documentation

can lead to miscommunication, errors, and suboptimal patient outcomes (Howick et al., 2024), whereas proper documentation ensures legal compliance, particularly during audits and reviews. Inadequate documentation can lead to missed reimbursement opportunities at the project site. Tools like SBAR standardize communication, reduce errors, and enhance interdisciplinary collaboration (Fernández et al., 2022).

Several studies demonstrated the SBAR tool's effectiveness in enhancing communication, clinical decision-making, and patient care, which are critical factors in ensuring accurate and thorough documentation. For instance, Ghonem and El-Husany (2023) reported significant improvements in nurses' communication perceptions, knowledge, and satisfaction after SBAR training. Their quasi-experimental study highlighted that inadequate communication during handovers, often resulting from poor training, can be addressed by using the SBAR tool. Similarly, Kay et al. (2023) found that training on the SBAR tool significantly improved communication and job satisfaction among ICU nurses. Their findings showed posttest improvements in nursing knowledge and practice, suggesting that standardized communication tools like SBAR promote more accurate documentation by organizing patient information systematically.

Accurate documentation is essential for appropriate reimbursement, ensuring the care provided is recorded and billed correctly. Abbaszade et al. (2020) demonstrated that using the SBAR tool significantly improves the quality of patient care. Improved care quality, linked to clear and accurate communication, is directly tied to financial outcomes in healthcare settings (Akinleye et al., 2019). Further, Fernández et al. (2022) emphasized the role of SBAR in enhancing clinical decision-making skills among anesthesiology

nursing students in their pre-and posttest study. The positive study results highlighted the potential of SBAR training to systematically improve the accuracy and completeness of clinical documentation. The randomized clinical trial by Raurell-Torredà et al. (2021) also demonstrated that SBAR training helped nursing students develop teamwork and communication skills. Given the close link between clinical decision-making and documentation practices, SBAR tool training can significantly impact reimbursement by reducing errors and omissions in documentation processes. Overall, the evidence strongly supports the implementation of SBAR tool training to improve communication and documentation accuracy at the project site.

Staff Education Project Development

The participants in this project included licensed healthcare providers who worked at an inpatient psychiatric hospital. Participants completed a pre-test of 10 multiple-choice questions before the training. This assessment gauged their initial understanding of the SBAR tool and current documentation practices. The training then involved a comprehensive PowerPoint presentation on the SBAR tool, including its importance for effective communication and accurate documentation. The training ended with two role-play scenarios to examine participants' communication skills using the SBAR tool. After the training, participants retook the 10-item assessment. Pre- and posttest scores were compared to measure changes in participants' understanding of the SBAR tool. SPSS, Microsoft Excel, and Word were used to perform statistical testing. A paired *t* test was used to compare pre-and posttest results.

Results

Forty-two nursing professionals participated in the training. The median years of nursing experience was 10 years. The average pretest score was 8.79, while the posttest score increased slightly to 9.02. Although there was a slight improvement, a paired *t* test indicated that the difference between the two scores was not statistically significant ($t = -1.30$, $p = 0.20$; Table 1). This result suggests that the intervention did not produce a significant measurable impact on overall documentation performance. There was a slight decrease ($M = -0.24$) in scores after the intervention, but individual outcomes varied significantly (Table 1). Although the mean percentage improvement was 4.60%, there was considerable variation, ranging from -30% to 80% (Table 1). The mean pretest score was 8.79, slightly increasing to 9.02 on the posttest.

Table 1

Descriptive Statistics: Pre- and Posttest SBAR Results

Variable	*M*	*SD*	Min.	25th Percentile	50th Percentile (Median)	75th Percentile	Max.
Participant ID	22.38	13.51	1.00	11.25	21.50	33.50	52.00
Years as a nurse	12.35	9.75	0.50	6.25	10.00	18.00	38.00
Pre-test scores	8.79	1.18	5.0	8.00	9.00	10.00	10.00
Post-test scores	9.02	0.81	7.00	8.25	9.00	10.00	10.00
Differences in scores	-0.24	1.19	-4.00	-1.00	0.00	0.00	3.00
Percentage improvement	4.60	17.54	-30.00	0.00	0.00	12.75	80.00

Data were aggregated by gender for comparison; however, male and female participants showed little difference in posttest performance. Males experienced a slight

improvement (average percentage improvement of 8.00%), while females exhibited a more modest improvement (average percentage improvement of 3.23%). These findings suggest that the intervention's effect did not significantly differ by gender. Data were also aggregated by years of nursing experience for comparison. There was a weak negative correlation (-0.11) between years of nursing experience and percentage improvement, indicating that nurses with more years of experience did not necessarily show more significant improvement after the intervention. This result suggests that experience alone does not predict enhanced performance outcomes.

Although there was a slight improvement in the average posttest scores, the lack of statistically significant results indicates that the intervention may need to be reevaluated or supplemented with additional strategies. Factors such as program design, duration, or participant engagement may have contributed to the limited observed effects. Table 1 illustrates the slight difference between the pre-and posttest scores, reinforcing the conclusion that no substantial improvement was observed across the participant cohort. By identifying which groups of healthcare staff benefit most from educational interventions, hospital management can better support their staff. Individualizing education to specific staff populations could improve patient outcomes as healthcare workers who are more knowledgeable and confident are more likely to provide higher-quality care (Flaubert et al., 2021). The results of this project help identify groups (such as male or newer nurses) who may require additional support. Using these results, the facility can tailor educational programs to meet the needs of all nurses. Offering targeted education and professional development opportunities can address some reasons why

healthcare staff leave the profession, such as lack of growth or inadequate support. These professional development opportunities could result in a more satisfied workforce, reducing turnover and burnout.

Incorporating the findings from this project into staff training could raise awareness about the importance of DEI in nursing practice. Prioritizing DEI in education and practice will ensure a more supportive and empowering environment for all nurses, leading to a more engaged and effective workforce capable of driving positive social change (Stanford, 2020). When healthcare organizations foster inclusive learning environments where every nurse's needs are considered, they promote and demonstrate a commitment to supporting diverse learning needs and fostering equitable professional growth. Further investigation is needed to assess the intervention's effectiveness and potentially tailor it more closely to the nursing staff's needs. Additional factors like motivation, work environment, or specific learning needs should be considered in future program iterations. The SBAR tool training was implemented to improve communication and clinical decision-making among healthcare workers. Although the training did not result in statistically significant performance improvements, it can enhance the organizational culture and patient outcomes. By standardizing communication, the SBAR tool fosters clear, concise exchanges of critical patient information, reducing the likelihood of errors and improving patient safety and reimbursement. Even without significant changes in test scores, the long-term impact could manifest in improved teamwork, patient satisfaction, and reduced adverse events.

Improving communication by using the SBAR tool can have a positive effect on the organization's reimbursement rates. More accurate and effective communication can lead to better documentation and coding, directly impacting billing accuracy and insurer reimbursement (Burks et al., 2022). This outcome aligns with financial goals and ensures that the organization is being adequately compensated for the services provided. The small sample size may have limited the ability to detect statistically significant differences. With a larger cohort, results could be more significant variability, which might show more pronounced effects of the SBAR tool training. The SBAR tool training and follow-up assessments may not have been long enough to capture the program's full impact. Behavioral change, especially regarding communication habits, can take time to solidify. More extensive training and more extended follow-up periods may yield more substantial results. Variability in participant engagement with the training could have affected the results. The use of the SBAR tool to improve reimbursement and patient outcomes extends beyond the project site. Communication breakdowns are a leading cause of medical errors and suboptimal patient care in healthcare systems across the country (Tiwary et al., 2019). Implementing a standardized communication tool like SBAR can potentially reduce national healthcare costs. The SBAR tool, when used accurately, can improve documentation and communication, contributing to more accurate billing and reducing costly reimbursement errors (Fernández et al., 2022). Additionally, the SBAR tool's structured format improves clarity during patient handoffs, reducing the risk of errors during critical transitions (Ruhomauly et al., 2019).

This SBAR training contributed to the dissemination of evidence-based communication practices that aligned with national quality improvement initiatives. Although the project did not yield statistically significant results, the potential impact of SBAR training on communication, patient safety, and reimbursement efficiency is far-reaching. Efforts to refine the training and expand its use could benefit healthcare systems nationwide, contributing to safer, higher-quality care.

Conclusion

The project has several important implications for nursing practice, particularly education, performance improvement, and professional development. The varying outcomes based on years of nursing experience suggest that educational interventions may need to be tailored to specific nursing populations. For instance, more experienced nurses may benefit from advanced or specialized training, while newer nurses may need education reinforcing foundational skills. A personalized approach to professional development would ensure that every nurse, regardless of experience level, receives relevant and practical education, fostering continuous professional growth. The data also showed that not all nurses improved after the educational intervention. This result highlights the need for ongoing education and mentorship in nursing practice. Encouraging lifelong learning can help bridge knowledge gaps and keep nursing professionals updated on evidence-based practices (Mlambo et al., 2021). The wide range of posttest results suggests that some educational programs may not be equally effective for all nurses. Recommendations include ongoing staff training on SBAR, integrating DEI principles into communication tools, and using standardized documentation to

reduce disparities in care. Products that could support this include customized SBAR templates and DEI-focused communication training modules for healthcare staff.

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Appendix: **Pre- and Posttest on SBAR Tool**

1. What does the "**S**" in SBAR stand for?
    A. Situation
    B. Summary
    C. Symptoms
    D. Strategy
    Correct answer: A) Situation
2. What information should be included in the **"Background"** section of SBAR?
    A. The current vital signs of the patient.
    B. The patient's medical history and context.
    C. The recommended treatment plans.
    D. The nurse's personal opinion about the case.
    Correct answer: B) The patient's medical history and context
3. When using the **SBAR Tool**, which section would describe your professional judgment about the patient's condition?
    A. Situation
    B. Background
    C. Assessment
    D. Recommendation
    Correct answer: C) Assessment
4. What is the primary purpose of the **"Recommendation**" section in SBAR?
    A. To summarize the situation
    B. To provide background information
    C. To suggest a course of action
    D. To list the patient's symptoms
    To suggest a course of action.
5. Which of the following is **NOT** a benefit of using the SBAR Tool?
    A. Enhances communication clarity.
    B. Reduces the likelihood of misunderstandings.
    C. Increases the time spent on patient care.
    D. Promotes consistency in information sharing.
    Correct answer: C) Increases the time spent on patient care.
6. How should the SBAR tool be used during handoff communication?
    A. Only the Situation and Background should be communicated.
    B. Each section should be addressed in sequence.
    C. Only if there is an emergency.
    D. It should replace the patient's medical chart.

Correct answer: B) Each section should be addressed in sequence.

7. Which section of SBAR is specifically designed to describe what you think the problem is?
    A. Situation
    B. Background
    C. Assessment
    D. Recommendation
    Correct answer: C) Assessment
8. In the “Situation” section of SBAR, what type of information is most important to convey?
    A. The patient’s entire medical history
    B. The immediate issue or problem at hand.
    C. Your personal feelings about the patient's condition.
    D. Possible future complications
    Correct answer: B) The immediate issue or problem at hand
9. Which of the following best describes how SBAR can improve patient safety?
    A. It allows for faster patient turnover.
    B. It ensures detailed patient documentation.
    C. It promotes clear and structured communication.
    D. It increases staff workload.
    Correct answer: C) It promotes clear and structured communication.
10. During an SBAR communication, what should you do if the receiving party does not understand your recommendation?
    A. Repeat the entire SBAR message.
    B. Clarify and elaborate on the recommendation section.
    C. Skip the assessment section again.
    D. End the communication and wait for further questions.
    Correct answer: B) Clarify and elaborate on the recommendation section.