

Speaking Up for Safety

Speaking Up for Foley Removal – Nurse Perspective

Introduction: Using the SBAR and DESC script

This activity walks you through a simulated interaction between a nurse and a physician regarding timely Foley removal. You will play the role of the nurse who is recommending a patient's Foley be removed. To get the most out of this exercise, choose the responses that you feel you **WOULD** do, not what you think the best answer is.

After the simulation exercise, you will be presented with two scripted communication techniques that can empower you to speak up in situations like this:

- SBAR (Situation, Background, Assessment, and Recommendation) and
- DESC (Describe, Express, Suggest, and Consequences) script

These techniques have their roots in AHRQ's TeamSTEPPS® program, but are contextualized here for the HAI prevention context.

1. What do you do?

You are a nurse on an inpatient unit with a 55-year-old female patient, Mrs. Li, whose chief complaint is lower extremity edema. Mrs. Li has had a Foley catheter in place for four days and she no longer has any indication for its use. Your manager has repeatedly emphasized the importance of removing Foleys in a timely manner, after your unit's CAUTI rate was revealed to be the highest in the hospital. However, recently, physicians you work with have indicated they want to be consulted before Foley removal.

Option 1: Do nothing – if it was so important, the physician would have ordered the removal already. It's not your problem.

Option 2: Submit an anonymous patient safety report.

Option 3: Discuss with the physician this afternoon in multidisciplinary rounds.

1. Answer key



Option 1: The longer the Foley is in, the higher the chances of a patient getting a CAUTI. If the Foley is no longer indicated it is important to bring this up with the physician as it is a patient safety issue.



Option 2: The situation should be discussed with the physician, which can allow an opportunity to remove the Foley in a timely manner. A patient safety report may not be timely and does not give the team the opportunity to discuss the pros and cons of Foley removal for Mrs. Li.



Option 3: Great! This is assertive communication, helping to reduce the risk of unnecessary Foleys by bringing it to the physician’s attention.

2. What do you do next?

You are talking with the physician and have the following exchange:

Nurse: “Dr. Garcia, our unit has an extremely high CAUTI rate and we are trying to remove Foley catheters that are no longer indicated. Can I take out Mrs. Li’s Foley?”

Physician: “Mrs. Li? Why?”

Nurse: “We are trying to reduce our rates. I think she can have hers removed.”

Physician: “I disagree. Keep it in.”

Option 1: Say, “Fine, I tried,” and report back to your nurse manager.

Option 2: Walk away and seek consolation in your work friends about Dr. Garcia’s attitude.

Option 3: Say, “Dr. Garcia, allow me to better clarify my concern.”

2. Answer key



Option 1: This is a patient safety issue, It is important to reassert your concern to Dr. Garcia in this situation.



Option 2: This is a patient safety issue, It is important to reassert your concern to Dr. Garcia in this situation.



Option 3: Great! This is assertive communication. Dr. Garcia may not understand your concern; providing additional information about the patient is beneficial to clarify your concern.

3. What do you say next?

Dr. Garcia says she is busy, but is willing to hear you out briefly. You convey crucial information on the patient – that she has had a Foley for 4 days and no longer has clinical indications for it. You mention your concern that this is putting her at risk for a CAUTI. Dr. Garcia responds that she needs to measure Mrs. Li's ins and outs accurately and therefore wants to keep the Foley in. You think to yourself that Mrs. Li is alert and oriented and you can therefore measure her urine output in other ways.

Option 1: Say, "Fine. When Mrs. Li gets a CAUTI, it's on your hands."

Option 2: Say, "OK, you know best."

Option 3: Say, "Dr. Garcia, I respectfully disagree that a Foley is the only way to measure her urine output."

3. Answer key



Option 1: While it is important reassert your concern about CAUTIs, the manner in which this is brought up would be more effective if framed another way.



Option 2: Although Dr. Garcia is pushing back, it is important to advocate for patient safety when necessary.



Option 3: Great! This is assertive communication. It is beneficial to state that you have a different perspective.

4. How do you respond?

Dr. Garcia says her main priority is accurately measuring Mrs. Li's urine output, and Mrs. Li was not alert when she saw her yesterday. She is therefore adamant about keeping the Foley in, is beginning to sound tense, and is being called away to another meeting.

Option 1: Say, "You seem busy. That's fine. Let's just keep her Foley in then."

Option 2: Say, "You don't need to be rude. I'm trying to help you avoid an infection. In any case, I'll notate in the chart you'd like to keep the Foley in. I'm sure my manager will make me ask you again tomorrow, FYI."

Option 3: Say, "I am confident we can measure Mrs. Li's ins and outs in another way, and here's why."

4. Answer key



Option 1: Although Dr. Garcia is pushing back, and seems busy, it is important to advocate for patient safety when necessary. Sharing information about Mrs. Li's status could help clarify this safety concern.



Option 2: It is important to advocate for patient safety; however, communicating respectfully about Mrs. Li's status would likely be more successful.



Option 3: Great! This is assertive communication. It is important to convey everything that you know that may impact Dr. Garcia's perspective.

Case conclusion

You tell Dr. Garcia, "I do recall Mrs. Li being confused a few days ago; however, I have taken care of her the past three days and she has markedly improved. I am concerned that the Foley is unnecessary and putting her at risk of a CAUTI. If you'd like, I can go re-assess her confusion and sleepiness to be sure. Would that make you more comfortable about removing her Foley?"

Dr. Garcia responds, "Oh, I did not realize that. In that case, I agree; let's remove her Foley. Thank you for bringing this to my attention. Patient safety is always my greatest concern!"

Communicate safety concerns

Now that we have worked through this case example, let's go over a couple tools that can help you in a similar situation on the job.

Consider using communication tools to help you assertively communicate your safety concerns.

SBAR: A structured communication technique to provide critical patient information.

Structuring your communication via SBAR can be done at the beginning of the encounter to introduce your concern.

SBAR technique

Situation	What is going on with the patient?	“I want to discuss Mrs. Li (Room 431). She is a 55-year-old female who was admitted with heart failure and I’d like to talk about removing her Foley.”
Background	What is the clinical background or context?	“She had a Foley placed for urine output measuring. The Foley has been in place for four days.”
Assessment	What do I think the problem is?	“Mrs. Li is now alert and oriented and we can measure her fluid status in other ways. She meets criteria for Foley removal.”
Recommendation and Request	What would I do to correct it?	“I recommend we remove the Foley. Is it OK to go ahead and do that?”

Manage and resolve conflict

Consider using conflict resolution tools when in disagreement.

DESC Script: An approach to manage and resolve conflict.

The DESC script, a TeamSTEPPS® tool, can be helpful at a point of disagreement, such as when Dr. Garcia pushed back.

DESC script

Describe the specific situation or behavior; provide concrete data.	“Mrs. Li has shown significant improvement in sleepiness and confusion in the past three days.”
Express how the situation makes you feel/what your concerns are.	“I am concerned that continuing the Foley is putting the patient at risk and is not necessary.”
Suggest other alternatives and seek agreement.	“If you’d like, I can re-check Mrs. Li to ensure she is still alert and oriented, and report back the results to you within the hour. Would that make you more comfortable with removing her Foley?”
Consequences should be stated in terms of impact on shared goals; strive for consensus.	“If we don’t remove her Foley, she is at risk of developing a CAUTI.”