## Patient Safety Toolbox Talks

### Procedural Guidance for Line Managers

<table>
<thead>
<tr>
<th>Document reference number</th>
<th>QPS-GD-002</th>
<th>Document developed by</th>
<th>QPS DNE</th>
</tr>
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<tbody>
<tr>
<td>Revision number</td>
<td>2</td>
<td>Document approved by</td>
<td>Cornelia Stuart, Regional QPS Manager DNE</td>
</tr>
<tr>
<td>Approval date</td>
<td>March 2013</td>
<td>Responsibility for implementation</td>
<td>QPS DNE</td>
</tr>
<tr>
<td>Revision date</td>
<td>March 2015</td>
<td>Responsibility for review and audit</td>
<td>QPS DNE</td>
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Prior to outlining the Guidance in relation to the application of Toolbox Talks it is important to be clear about what the purpose of these talks is and what it is not.

- **It is** a mechanism to reinforce key safety messages in the workplace. **It is not** a substitute for programmes required for training in specific areas of practice.

- Whereas the talks are designed to be delivered by non subject specialists i.e. line managers any queries raised in the course of delivery which are beyond the content of the talk **must be** referred to the relevant specialist for addressing and clarified subsequently with staff.
1.0 Policy

This procedural guidance is aligned to the HSE Quality and Risk Management Standard.

2.0 Purpose

Patient and Staff Safety Toolbox Talks© are intended to assist line managers to deliver patient safety advice and instructions to employees so as to enable them to improve safety and prevent incidents.

3.0 Scope

This guidance applies to line managers in areas of service delivery to support them to deliver relevant Patient Safety Toolbox Talks© to all staff working in the service regardless of whether they are permanent/temporary/agency.

4.0 Linkages with National Standards

A common feature of national health, social care, mental health and health and safety standards and guidance is the importance of continuous professional development and workplace learning. This approach to delivering critical information in the workplace will provide a source of evidence for demonstrating compliance. A listing of standards is referenced in Section 9.0.

5.0 Roles and Responsibilities

It is the responsibility of the line manager to ensure that these talks are carried out on a regular basis and to either deliver them or nominate an appropriate member of the team as responsible for ensuring that tool box talks take place.
6.0 Glossary of Terms and Definitions

**Toolbox Talks** - Toolbox talks are short, discussions or presentations by line managers or a designated staff member to staff in the workplace which is generally focused on one specific topic which it addresses in simple terms. While it need not be about a safety topic, it is not uncommon for safety to be the topic.

**Patient** - Intended to include all people who use health and social care services (Building a Culture of Patient Safety – Report of the Commission on Patient Safety and Quality Assurance DOHC 2008)

**Patient Safety** - Actions undertaken by individuals and organizations to protect health care recipients from being harmed by the effects of health care services. (WHO – International Classification for Patient Safety 2009)

7.0 Procedure/Protocol/Guideline

7.1 Introduction

Toolbox Talks were first developed by manufacturing and construction industries for on the job learning where it is common that participants gather around the tool box for the session, hence the name.

In the same way Patient Safety Toolbox Talks® provide an opportunity for a line manager to emphasize the importance of a particular patient safety issue or procedure within the workplace, and for staff to ask questions or make constructive comment.

Talks should be conducted regularly (weekly/monthly) or after a learning event. They should be delivered in the context of the work environment and be given by
the line manager or a nominated experienced member of the team. The length of a talk will be dependent upon the topic covered but typical duration should be 10 minutes including questions. Although detailed specialist knowledge is not required to deliver the talk, experience of the activity relating to the talk is necessary together with an adequate appreciation of safety matters. The talks should be concise and punchy, in order to get the message across.

The following guidance it is intended to provide line managers with advice on how best to prepare and deliver tool box talks to staff.

**7.2 Guidance for the successful delivery of a talk**

**7.2.1 Prepare in advance**

Think about what preparation is required before the talk.

Prior to the talk, consider practical application of the subject to your work context.

Consider effective aids you can use to enhance the talk e.g. examples from your workplace, visual aids (equipment/signage etc).

Allow yourself time to read through the relevant Toolbox Talks Prompt Sheet and decide which points are relevant for the people at your particular workplace. The Prompt Sheet is not a script it contains key reference information on the subject matter on which the talk is aimed.

A good beginning and a good end are important – people will remember them so they must contain good points

People will start thinking when you ask a question so use questions during your talk, don’t just wait until the end

The talks do not assume that you have all the knowledge or information on the subject, questions will show that you are open to gathering additional information from the group. Such questions should be referred to the relevant subject specialist
e.g. Clinical Nurse Specialist with the answers brought back to the group subsequently.

Many people try to include too much information in their talk. The aim of these talks is to get people to remember a few critical points.

You need to make it easy for people to be able to remember the key messages.

### 7.2.2 Delivering a Patient Safety Toolbox Talks©

#### Choosing the best time to deliver the Patient Safety Toolbox Talks©

Choose the right time to do the talk. First thing in the morning, when there is time, and when people are more likely to devote attention, is generally thought to be a good choice. End-of-day talks fail to hold the attention of staff who are eager to get home.

Choose the right place. Avoid locations where distractions are likely. Make sure you can be heard and you will not be interrupted. Make sure phone calls and visitors will be intercepted by someone else so that you and your listeners can concentrate on the talk.

Your attitude is important; it will show by the way you present yourself. You believe it’s important so you have to convey your sense of enthusiasm for the subject.

- Be positive - This will come through preparation
- Be firm - Get the message across – don’t get side tracked
- Be confident - Look at people, involve them in the talk
- Be serious - Safety is a serious subject, the overall approach should be serious.

You must communicate the message as clearly as possible.
**Introducing the talk**

Staff are generally information proof; they filter out what they can ignore. In giving a talk you have to make sure that you grab their interest from the start. You won’t get the attention of your people by saying "Well its time for another safety talk..."

Look for interesting opening lines. Use your own experience where necessary; consider telling a story related to the subject, perhaps something read in the press, or an incident that occurred within the hospital.

Where statistics are available for the ward/hospital that relate to the area under discussion use these e.g. incidence of HCAI, no. of reported falls etc

**Consider why anyone should listen to you**

Staff won’t listen simply because you are the line manager or their nominee. You have to demonstrate you are both interested and concerned for the safety of patients.

A toolbox talk shouldn’t be just ONE WAY. It’s important to engage people in discussion, especially when talking to experienced people.

**Outline the key aspects of the proposed talk**

Early in the talk indicate the major issues you will concentrate on. Decide on the major key points you want to make, choose those points that are relevant to your work area.

People will only be able to cope with about 4 or 5 pieces of information in each stage so concentrate only on relevant information at every stage.

Don’t think that you have to mention every piece of information on the Patient Safety Tool Box Talks® Prompt Sheets, choose information that is relevant to your work place.
Ask and invite questions

Remember to ask staff questions during the course of the talk, pause to give people time to think and finally, make sure as many people as possible get to answer questions.

If an answer is incorrect, don’t ridicule, put down or laugh. Restate the question to make sure it is clear and give people time to think of a reply, but avoid simply giving the answer yourself.

If there is an awkward silence, rephrase the question and allow people to a reasonable amount of thinking time.

Repeat the reply so that the whole group can hear. You can then check your understanding of the answer given.

Apart from asking questions it is important to invite questions from the group – you may know the answers to many or if it is an area you are not sure about admit this and invite the group to contribute to answering the question. If it is not possible to provide a satisfactory answer then agree to source the required information from a relevant subject specialist and revert to staff.

7.2.3 Recording Patient Safety Toolbox Talks© Sessions

In each work location a record should be maintained of Patient Safety Tool Box Talks© delivered with information regarding the title, the date, the presenter and any relevant comments. (See 10.0 Appendix) All staff attending Patient Safety Tool Box Talks© should sign the attendance sheet supplied as part of the Toolbox at the end of the session to confirm their attendance. These records should be held by the line manager.

8.0 Revision and Audit

This guidance will be reviewed in March 2015 and will be carried out in conjunction with the evaluation of its application in a range of health and social care settings.
9.0 References

3. Toolbox Talks; The Belfry Group Revision 1.1 [http://www.belfrygroup.co.uk/PDF/Toolbox%20Talks%20Booklet.pdf](http://www.belfrygroup.co.uk/PDF/Toolbox%20Talks%20Booklet.pdf)
## 10.0 Appendix – Toolbox Talk Record Sheet

**Toolbox Talk Record Sheet**

Date:  
Title of Talk:  
Name of Presenter:  

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<th>Attendee List</th>
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Presenters Comments: