**Resource Acquisition-SBAR**

**Executive Summary**

* The incidence rate of hypertension among the facility’s renal patients is high
* The rate has been increasing in the facility but is decreasing in other facilities
* The problem is a threat to the facility’s income and sustainability because of the competitive environment
* A transformational leadership approach for training personnel on evidence-based practice and influencing the practice is recommended, together with the cost of developing or hiring the leaders

**Situation**

The incidence of hypertension among patients with renal problems remains high in the facility and is believed to be higher than reported rates from surrounding facilities. Personnel, as well as patients and their relatives, have raised concerns over cases of uncontrolled high blood pressure with a few instances of requests for referrals. Client satisfaction with management of health conditions is fundamental to the moral obligation of caregivers and care facilities, and this requires measures for improving outcomes in the segment of patients.

**Background**

The incidence of hypertension among patients with the renal condition has been high over the past decades, but it has increased over the past few months. The significance of the problem also emerges from the trend in the condition’s incidence rate in comparable facilities. Some of the competitors have succeeded in managing hypertension in their renal patients, and the success has contributed to the facilities’ positive corporate image. The resultant image has made both patients and caregivers at the facility to be critical about the facility’s ability to manage hypertension among its patients with renal conditions.

**Assessment**

Two facts are evident on the facility’s management of hypertension among its patients with renal conditions. The first is the increase in the number of patients with hypertension. In addition, the mean systolic and diastolic blood pressure of the hypertensive patients has increased and these indicate reduced efficiency and effectiveness in the management of hypertension among renal patients in the facility. Another fact is the increasing success of other facilities in the management of hypertension among the category of patients that identifies the facilities’ competitive edge in the market. Facilities need money to finance their resources, such as equipment and human resource. Patients are the source of the finances and their lack of satisfaction, that opinions and requests for referrals have demonstrated, means a threat to the facility’s number of patients. Income and sustainability of the facility are threatened, but improving the situation can solve this.

**Recommendation**

A transformational leadership approach for a transition to the use of evidence-based practice for managing the problem is recommended and finances for training an existing manager, or remunerating an additional manager is necessary. Evidence-based practice solves the problem of low levels of satisfaction, lack of satisfaction, and a gap between research results and practice (Maheady, Rafferty, Patti, & Budin, 2016). Training caregivers into researchers and on the use of scientific evidence in practice is the first step to the recommended solution. A multi-level coaching (Wood, Goodnight, Bethune, Preston, & Cleaver, 2016) should further be integrated to promote the practice towards improved patient outcomes. Training, development of human resource teams that accept change, and support to personnel are consistent with aspects of transformational and transactional leadership styles (Guerreeo, Padwa, Fenwick, Harris, & Aarons, 2016), and improve organizational performance. Investment in a transformational leader for the training and coaching of the facility’s personnel on use of evidence based-practice and a transition to evidence-based practice, promises the desired improvement. Developing one of the facility’s leaders for the role or hiring a leader may induce a cost but the anticipated benefits of patient and personnel satisfaction are likely to improve the facility’s image and economic performance.

**Reference**

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Maheady, L., Rafferty, L., Patti, A., & Budin, S. (2016). Leveraging change: Influencing the implementation of evidence-based practice to improve outcomes for students with disabilities. *The Learning Disabilities*, *14*(2), 109-120.

Wood, C., Goodnight, C., Bethune, K., Preston, A., & Cleaver, S. (2016). Role of professional development and multi-level coaching in promoting evidence-based practice in education. *The Learning Disability*, *14*(2), 159-170.