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Research Paper

Nurses' practices regarding communication strategy at critical care units in Al-Diwaniyah Teaching Hospital

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ABSTRACT

Background: Situation, background, assessment and recommendation (SBAR) is a standardized strategy that is created to enhance the efficiency of communication between health care providers, enhance the state of cooperation, and increase patient satisfaction, as well as to reach satisfactory results for the patient's condition.
Objectives: To evaluating nurses' practices regarding communication strategy and investigate the correlation between the practices of nurses and their demographic factors.
Methods: A research study with an descriptive design has been conducted. A non-probability sampling, purposive sample was chosen for (50) nurses working in critical care unit (CCU) in Al-Diweniya Teaching Hospital. The researcher employs a two-part instrument consisting of a demographic data form for study participation and a knowledge assessment about communication strategy form included (23) items
Results: The findings the findings of this study reveal that 82% of the nurses in the sample demonstrate a moderate level of proficiency in their nursing practices. in mean (1.57).
Conclusion: The current study determined that nurses have fair practices regarding communication strategy.
Recommendations: The researcher suggests that nurses working in critical care unit need to attend specialized training courses.

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1. INTRODUCTION

Critical care Nursing is a specialized area of healthcare that prioritizes the highest level of attention for patients who are severely ill or unstable due to severe injuries, an operation, or deadly illnesses. [1] Intensive care Nurses can be found working in diverse surroundings and specialized areas, including critical care units, respiratory care units, and cardiac care units. [2] Several key aspects contribute to the enhancement of critical care nursing, including the acquisition of practical expertise, attainment of advanced education, effective teamwork, analytical abilities, prompt decision-making, and exceptional abilities to communicate. [3] Effective nurse collaboration is crucial in critical care units to guarantee the safety of patients. Collaboration between and among health care practitioners benefits from the implementation of an official communication program, which enhances clarity, happiness with education, and overall optimism. [4] Situation, context, appraisal, and recommendation method is a widely recognized standardized interaction approach designed to enhance the effectiveness of interactions between nurses and physicians. It has been widely utilized in educational and healthcare settings, particularly in critical care units. [5] Situational awareness, a key component of the communication strategy known as SBAR, has been shown to be crucial in facilitating successful patient care and decision-making among healthcare providers, especially in high-stress critical care environments. [6] It aids in the comprehension and management of knowledge pertaining to the current situation. Although clinical processes are intricate and allow minimal room for mistakes, healthcare professionals have paid little attention to situational information. [7] Efficient and clear interaction among staff members is crucial in the intensive care unit (ICU) along with the operating theatre. A breakdown in communication might cause a delay in the activation of the rapid reaction group, leading to an increase in mortality that occur within the hospital. [8] The quantity of SBAR components in the critical message CM exhibits a clear correlation to the likelihood of survival throughout the patient's stay in the hospital. Consequently, providing nurses with education on utilizing the SBAR tool to convey crucial information to physicians will enhance their awareness of the condition and potentially enhance outcomes for patients. [9] The communication gap between nurses and physicians in critical care settings can significantly affect the treatment of critically ill patients and the working circumstances of both nurses and physicians. [10] The SBAR technique is both practical and beneficial for long-term care settings, and its impact on nurse-to-medical-provider communication has improved by more than 80%. The tool proved to be beneficial in structuring clinical information for residents and providing substantiation for what has to be communicated to care professionals [11].

2. RELATED WORK

Situation this stage provides a concise description of the patient's present complaint, including the nurse's name, the unit where the nurse works, the patient's name, and a brief statement of the problem, its kind, timing, and severity. Background the stage that offers ample information regarding the patient's present concern. The information comprises medical diagnosis, patient's cause for admission, allergies, and medical and surgical history [12] Assessment is the phase where the nurse evaluates the patient's condition, including the underlying cause of the emergency, laboratory findings, abnormal vital signs, disruptions in bodily functions, and administration of intravenous fluids. Recommendation the nurse advises performing a medical procedure, administering treatment, doing a specific examination, preparing the operating room, or preparing the patient for surgery based on their assessment of the patient's condition [13]. Efficient communication is crucial for ensuring the delivery of secure patient care. Research has demonstrated that employing structured communication techniques, including the Situation, Background, Assessment, and Recommendation (SBAR) style, can enhance patient safety, particularly during telephone handovers. The use of SBAR as a standardized technique of handover has been widely recommended. [14] Failure to communicate may result in a delay in the activation of the fast response team, which has been linked to an increase in deaths that occur within the hospital. Researchers found a significant correlation between the amount of SBAR components in critical care units and in-hospital survival. The authors suggest that imparting training to nurses regarding the utilisation of the SBAR

approach for conveying crucial information to doctors will enhance scenario recognition and hence improve patient outcomes. The citation [15] Communication difficulties, such as errors in clinical handoff or clinical handover, are responsible for 80% of all significant preventable adverse events annually. The SBAR strategy and action plan are essential pieces of information that are communicated during clinical handoff. Incorporating handoff synthesis is an essential component of handoff training in critical care units. [16] The foundation of nurse-patient communication is built upon robust interpersonal connections. Establishing meaningful relationships would facilitate nurses in efficiently performing their clinical duties while ensuring active patient involvement in their healthcare. The method of SBAR is employed to effectively convey pertinent information by providing precise and unambiguous details. Prioritising the organisation of information to ensure clarity and only conveying pertinent information during conversation. Engaging in conversation with a patient, even for a short duration, might enhance patient satisfaction ratings [17]. Collaborate with another nurse to ensure compliance with the necessary protocols. Provides clear and concise information to the recipients. Allocate a specific period of time to engage in discussions with the team regarding any issues that may arise, with the aim of exploring potential enhancements to the product. Utilises open-ended dialogues between patients and nurses to establish robust connections that frequently extend beyond clinical necessities. Gaining insight into the patient's identity enables the nurse to establish a rapport with the patient and enhance their sense of ease throughout the SBAR information-gathering process. Disseminating the implementation of the SBAR strategy to other units with the aim of proliferating its advantages [18]. The SBAR approach faces challenges in specific circumstances. If the recipient lacks familiarity with the SBAR strategy. Mastering the SBAR technique is a complex task that necessitates comprehensive education on the topic and subsequent reinforcement. To facilitate the process, it may be beneficial to create a nurturing atmosphere, engage in role-playing activities, and conduct a thorough evaluation of one's abilities. Additional focus should be placed on recommendations, as it has been observed that the "R" in the SBAR strategy is a weak area for nurses. Some nurses find it intimidating to provide guidance to physicians on appropriate actions [17].

3. METHODOLOGY

This part discusses the methodology employed to direct the studies, encompassing the study design, administrative arrangement, ethical considerations, study setting, sample selection, and statistical information analysis. A study design utilizing quantitative descriptive methods has been implemented. A purposive sample of (50) nurse working at CCU in Al-Diweniya Teaching Hospital was selected using non-probability sampling. Ethical Considerations following the acquisition of official consent from the administration of Al-Diwaniya Teaching Hospital, both verbal and written consent were obtained from the nurses. The search tool in order to evaluate the communication method employed by nurses and determine the association between their practices and demographic variables, the researcher developed a self-administered questionnaire comprising of two sections:

- The nurse’s demographic characteristics, including the information required includes the individual's age, sex, education level, years of experts in nursing, experts in Critical Care Units (CCU), and any education or training courses connected to nursing documentation.
- Self-administered questionnaire regarding nurses' practices about communication strategy currently in the coronary care unit (CCU). The assessment comprised a total of 23 questions, all of which were in the format of multiple-choice. This practice test comprehensively addressed the salient aspects of the primary content research issue. In this study, the level of practices for each nurse was measured using the number of correct answers. The rating score for correct answers was (2), while erroneous responses were given a score of (1). The duration of this knowledge test was approximately 20 to 30 minutes.

3.1 Data Collection and Analysis

The sample was collected from nurses who work in Al-Diweniya Teaching Hospital. The sample collection period began from 1/4/2024 until 1/7/2024 for a sample consisting of (50) nurses. The statistical analysis was done using the SPSS 25 program.

4. RESULTS AND DISCUSSION

Table 1. The Demographic Data of the Study Sample

Demographic Data	Rating	Frequency	Percent
Age / years	20-25	34	68.0
	26-30	13	26.0
	31-35	2	4.0
	36-40	1	2.0
	Total	50	100.0
sex	Male	24	48.0
	Female	26	52.0
	Total	50	100.0
Education Level	Secondary School of Nursing	5	10.0
	Diploma in Nursing	25	50.0
	Bachelor in Nursing	20	40.0
	Total	50	100.0
Years of experts in nursing	1-5	46	92.0
	6-10	3	6.0
	11-15	1	2.0
	Total	50	100.0
Years of Experts in CCU	1-5	49	98.0
	6-10	1	2.0
	Total	50	100
Work Shift	Morning	42	84.0
	Evening	8	16.0
	Total	50	100.0

F = frequency, % = percent

Table 1 displays the demographic statistics of the study's sample. The study's findings indicate that the majority of nurses, accounting for 68.0%, belong to the age range of 20-25 years old. Regarding sex, the table shows that 52.5% of nurses were female. The table's findings indicate that the more of nurses (50%) held a diploma in nursing. Regarding nursing experts, 92.0% of nurses have 1-5 years of experts. In the Critical Care Unit (CCU), 98.0% of nurses have 1-5 years of experience, with 84.0% working the morning shift.

Table 2. Evaluation of Nursing Practices' Distribution and Overall Assessment

Level of Nurses' Practices	Frequency	Percent	Mean	Std. Deviation	Evaluating
Poor	2	4.0	1.57	.127	Fair
Moderate	41	82.0			
Good	7	14.0			
Total	50	100.0			

The ratings can be categorized as follows: good (with a mean between 1.68 and 2), fair (with a mean between 1.34 and 1.67), and low (with a mean between 1 and 1.33). F represents frequency, while % represents percent. Ass. stands for Assessment, MS represents Mean Score, and Sd stands for Standard Deviation.

Table 2 shows the mean of level of nurses' practices was (1.57), the more of the study sample was (82.0%) a fair level of nurse practic.

Table 3. Correlation among the Comprehensive Evaluation of Nurses' Practices and their Demographic Information

Demographic Data	Chi-Square Value	D.F.	P-Value	Sig
Age/Years	2.387	6	.881	NS
sex	3.235	2	.198	NS
Education Levels	4.115	4	.391	NS
Years of Experience in Nursing	.954	4	.917	NS
Years of Experience in ccu	.224	2	.894	NS
work shift	11.890	2	.003	HS

A result is considered significant (S) if the P-value is less than 0.05, and it is considered nonsignificant (NS) if the P-value is more than 0.05.

The Table 3 Demonstrate that there is no correlation between the general practices of nurses and their demographic data in most items, with p-values exceeding 0.05. However, there is a significant link between the item "work shift" and nurse practice, with a p-value of 0.003.

4.1 Discussion

The study included a sample aged (20-25) years old, accounting for (68.0%)) of the all participants. The findings were consistent with the study appley by (16), which report that the largest proportion (39.8%) of nurses fell between the age range of (18-27) years old. This study reveals that the majority of the samples, specifically (52.0 %), consist of female participants. This study corroborated the findings of (14), which indicated that the majority of participants were female, accounting for (58.5%) of the total responses. In the present study, the highest proportion of participants have attained a diploma in nursing in the field of nursing, accounting for (50.0%). The results of this study corroborated the findings of (15), which reported that (56.7%) of the nurse included in the research had a diploma in nursing. The results of this research show that (92.0%) nurses employed in nursing and (98.0%) in the CCU had between 1 to 5 years of experience. The findings are consistent with the study conducted by (13), which indicates that over 50% of the participants have (1-5) years of experience. The results of the current study indicate that a substantial majority (82.0%) of the participants have a moderate level of expertise (mean score of 1.57) in communication strategy.

5. CONCLUSION

1. The more of the nurses involved in this research fair the knowledge related to communication strategy.
2. No discernible difference among demographic variables (such as age, sex, education level, and years of experts in nursing, and CCU) and nurses' level of knowledge about communication strategy. Except item (work shift) there is association at p-value (0.003)
3. The study revealed that the prevailing demographic of participating nurses were females aged between (20-25) years. These nurses had completed a bachelor in nursing and had 1 to 5 years of experts in nursing and CCU.

5.1 Recommendation

The researcher suggests the following actions based on the discoveries made in the current investigation:

1. Offering educational programs for nurses to enhance their understanding of communication strategy.
2. These nurses should be provided with training courses to improve their comprehension. of communication strategy, associated problems, and the nursing care required.
3. The researcher suggested conducting further investigations on communication strategy due to the lack of studies on this subject in Iraq.

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Author Contributions Statement

Name of Author	C	M	So	Va	Fo	I	R	D	O	E	Vi	Su	P	Fu
Bahaa Mirza Skal	✓	✓	✓	✓		✓		✓	✓	✓	✓			
Amjed Abdulabbas Shraida		✓	✓	✓		✓			✓	✓		✓	✓	
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C : **C**onceptualization
M : **M**ethodology
So : **So**ftware
Va : **Va**lidation
Fo : **Fo**rmal analysis
I : **I**nvestigation
R : **R**esources
D : **D**ata Curation
O : Writing - **O**riginal Draft
E : Writing - Review & **E**diting
Vi : **Vi**sualization
Su : **Su**pervision
P : **P**roject administration
Fu : **Fu**nding acquisition

Conflict of Interest Statement

The authors declare that there are no conflicts of interest regarding the publication of this paper.

Informed Consent

All participants were informed about the purpose of the study, and their voluntary consent was obtained prior to data collection.

Ethical Approval

Not Applicable.

Data Availability

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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