Chapter – 6
SUMMARY AND CONCLUSIONS

The present study was aimed to evaluate the effectiveness of communication skills training program among undergraduate student nurses. Quasi experimental-control group pretest post test research design was adopted. The variables of the study were Independent variable as Communication skills training program, four Dependent variables like Knowledge of nurse-patient communication skill, Attitude towards nurse-patient communication skill, Self perceived Nurse-patient communication skills and Observed nurse-patient communication skills and Demographic variables like Age, Year of course, Domicile, Religion, Socioeconomic status, Type of family, Number of siblings, Birth order, Person responsible for choosing nursing course, Health worker in family, Chronically ill person in family, and Previous exposure to communication training of the student nurses were included in the study. Six research hypotheses were formulated and they were

\[ H_0 \] Selected demographic variables have no influence on knowledge, attitude, self-perceived communication skills and observed communication skills of I year and IV year undergraduate student nurses in the Experimental and Control group.

\[ H_{01} \] Communication skills training program has no effect on knowledge of nurse-patient communication skills of I year and IV year undergraduate student nurses in the Experimental and Control group.

\[ H_{02} \] Communication skills training program has no effect on attitude towards nurse-patient communication skills of I year and IV year undergraduate student nurses in the Experimental and Control group.

\[ H_{03} \] Communication skills training program has no effect on self-perceived nurse-patient communication skills of I year and IV year undergraduate student nurses in the Experimental and Control group.

\[ H_{04} \] Communication skills training program has no effect on observed nurse-patient communication skills of I year and IV year undergraduate student nurses in the Experimental and Control group.

\[ H_{05} \] There is no relationship between knowledge, attitude, self-perceived and observed nurse-patient communication skills of I year and IV year undergraduate student nurses.
The student nurses were enrolled in the study using two-step of the sampling process. The first step involved the selection of two colleges using convenient sampling and allotting them into experimental and control group. The second step of sampling involved the exact selection of sampling for the study through simple random technique, who satisfied the inclusion criteria. 60 student nurses were allotted for the experimental group and among them, 30 were from the first year and 30 from the final year of their undergraduate nursing course. In the same way 60 student nurses were allotted to the control group, with 30 each from the first year and the final year of their undergraduate nursing course.

Data collection was done in two stages. Stage 1 included distribution of a set of four questionnaires to the student nurses before the training program both in Experimental and Control group separately. The set of four questionnaires included the 1. Socio Demographic Data Sheet (14 questions on basic details of the participant), 2. Knowledge Questionnaire – (Devi & Manickam, 2014) comprising 30 questions. 3. 26 item Modified Communication Skills Attitude Scale (Rees, et.al, 2002), and 4. 26 item scale on Self perceived communication skills (Devi & Manickam, 2014). The students took around 45 minutes to complete the set of four questionnaires. Then the student nurses were asked to interview the simulated patient and the session was video recorded. The video recorded conversation was shuffled and was rated using Kalamazoo Essential Elements of Communication Checklist (Bayer-Fetzer Group, 2001). In Stage 2, participants who were assigned as Experimental group were subjected to nurse-patient communication skills training program for 5 days (10 hours – 2 hour session/day) which was developed by the researcher after several rounds of consultation with different experts. For the Experimental group, post test was done with all the tools and video recording were done after 10 days of the communication skills training program. After 10 days of the initial evaluation, the questionnaires were re-administered to the participants belonging to the Control group and a repeat, video recording of the nurse patient communication was conducted with all of them.

After the recording, the experimenter shuffled all the recordings using a computer generated random numbering. The raters were blind to the shuffling and did not know whether the interviewed they evaluated were communicating to the patient before or after the training or which participant was from the Experimental or Control group. The
video segments were projected onto the screen, was frozen at the end of each individual segment and the four raters, who had established high inter-rater reliability (Kappa – 0.78) observed the video and rated independently. The obtained data from the participants were analyzed using SPSS version 16. The analyses of data were done using Descriptive statistics, Chi square test, Paired t test, Independent t test, and Pearson’s correlation.

**Conclusions:**
In both the Experimental and Control group the majority of the student nurses were in the age of 18 and 22 years. The mean age for first year group was 18.63 and for fourth year were 21.7. Majority of the student nurses in the first year were from rural domicile in both the experimental and control group whereas in fourth year, majority were from urban domicile. Majority of the participants from both first and fourth year of experimental group were Christians and in control group majority of first years were Hindus and majority of fourth years were Christians. Majority of the participants from both first and fourth year of Experimental and Control group spoke Malayalam as their mother tongue. Majority of the participants from both first and fourth year of Experimental and Control group were from nuclear family. Majority of the participants from both first and fourth year of Experimental and Control group had only one sibling. Majority of the participants from both first and fourth year of Experimental and Control group were first born. Majority of the participants from both first and fourth year of Experimental and Control group had opted the nursing course by themselves. Majority of the participants from both first and fourth year of Experimental and Control group had no health worker in their family. Majority of the participants from both first and fourth year of experimental and control group had no chronic illness person in their family. Majority of the participants from both first and fourth year of experimental and control group had not attended any previous communication training program.

On comparison of knowledge, attitude, self perceived and observed nurse-patient communication skills within the Experimental group and between the Experimental and Control group found to be significantly different suggesting the effectiveness of the communication skills training program. However, the control group also had showed significantly higher scores in observed nurse-patient communication skills.
The second aim of the study to compare the first years and fourth year’s communication skills revealed the following findings.

On comparing the first year and fourth year for the knowledge regarding nurse-patient communication skills the first year student nurses were found to have a better knowledge than the fourth year.

On comparing the attitude between the first and fourth year they were found to have the same level of attitude towards learning the communication skills.

On analyzing the self perceived nurse patient communication skills the fourth years were found to have a better self perception regarding their ability to communicate with the patient than the first years.

The observed nurse-patient communication skills between the first year and fourth year revealed that, fourth years have exhibited better communication skills than the first years.

On analyzing the four factors of attitude within the Experimental group, there were significant differences seen for the factors of Learning, Success and Quality. However, there was no significant difference between pre and post test scores observed for the Importance Factor. On comparing the four factors within Control group, it was found that Importance factor and Success factor differed significantly in their scores whereas factors Learning and Quality did not. Further comparison of gain scores of the four factors between the Experimental and Control group showed significant differences for all the four factors at different levels of significance.

While comparing the factors self perceived nurse-patient communication skills, significant differences were observed for Initiating& building relationship, Gathering Information, and Responding & Giving Information, except Closing the conversation in the Experimental group. Likewise, when the gain scores of factors between the Experimental and Control group were compared, significant differences were observed for Initiating& building relationship, Gathering Information, and Responding & Giving Information, except in the Closing the conversation factor. In Control group, on
comparing the factors there were no significant difference found for any of the four factors.

Similarly, the comparison of the eight components of Observed nurse-patient communication skills within the Experimental group showed significant differences for all the eight components building relationship, opening discussion, Gathering Information, understanding patient’s perspective, sharing information, Reaching Agreement, Providing Closure, and Managing Flow. On comparing the eight components of observed nurse-patient communication skills between the pre test and post test in Control group, significant differences were observed for four components namely building relationship, Gathering Information, sharing information, and Providing Closure. Whereas, the remaining four components i.e. Opens discussion, Understands patient perspective, Reaches agreement, and Manages flow did not show any significant differences. The comparison of the gain scores of eight components of Observed nurse-patient communication skills between the Experimental group and Control group showed significant differences for all the eight components.

It was also found that there is a positive relationship between the Knowledge, attitude and self perceived nurse-patient communication, whereas a negative correlation was observed between the self perceived and observed nurse-patient communication skills. The findings revealed that the communication skills training program for the student nurses were proved to be very effective in improving the nurse patient communication skills of the student nurses.

Association between the year of the course and the study variables were done. It was found that the first years were found to have a better knowledge than the fourth years. Whereas the fourth years were found to have a better attitude, self perceived and observed nurse patient communication skills. It was also found that the Christian student nurses were found to have a better attitude. Student nurses who have Malayalam as their mother tongue, who comes from a joint family, and who have a chronically ill person in their family were observed to have a better self perceived nurse patient communication skills.
Limitations:

1. Student nurses from only two institutes were recruited for the study. Inclusion of student nurses, drawn from other nursing colleges would have yielded data, which could have been generalized further. However getting the permission from other institutions to spare their students is not an easy task since the institutions do have a healthy competition among them.

2. The results can be generalized only to the women nursing population since all the participants were female student nurses. Of late, male students are also entering the nursing profession. However, they could not be recruited for the study as their available number in the Mysore city was negligible.

3. Only the undergraduate student nurses were involved whereas the diploma student nurses were not included. Since the entry level qualification of diploma students is different from that of the degree students, they may require a curriculum prepared in the vernacular language of Kannada, which is their mother tongue which would make the comparison rather difficult.

4. Proportionate sample of students belonging to different religious groups, mother tongue would have helped to generalize the findings to the larger population.

5. Though studies have used standardized simulated patients for video recording of sessions, whether the acquired skills would get translated into action in real situation is not known. Video recording of the sessions with real patients would have solved this question. However, that scenario is likely to bring in other variables related to the patient characteristics, which may complicate the evaluation of the observed skills.

6. The students were prepared for video recording prior to the interview with the simulated patient. However, the fact that their communication was being recorded itself may have affected their performance. It is possible that having two groups which were more or less matched would have neutralized the impact. Even then, personality traits or other characteristics of the students like anxiety or phobia may have also impacted their performance, which was not assessed. Therefore it is not certain whether there are any other variables that are contributing to the better performance of the participants of the experimental group.
Implications of the study:
In the present scenario the communication skills in the health care plays a vital role. Being a major player in health care, it is highly important for the nurses to upgrade themselves in the nurse-patient communication skills. Research evidences strongly recommend that the skill development should be better done in the student period than during their later period of entering in to work. Instilling the skills at an early age would help them prepare both physically and mentally to handle the situation when they are exposed to the clinical situation. It also gives them self confidence, increased self efficacy in caring and lead to less burn out and stress related to the job.

1. The training module can be adopted by other institutions and the practical training session for developing communication skills need to be compulsorily arranged and demonstrated for the student nurses.
2. The practical training based on the developed curriculum can be conducted for the new nursing graduates working in the hospitals.
3. Communication training program using the module can be initiated as a workshop involving both the student nurses as well the other hospital staffs.

Suggestion for future research:
1. The components of the communication like listening skills, empathy skills, questioning skills of the student nurses can be explored.
2. The same module can be translated and adapted to be used with those speaking the vernacular language and the comparison of communication skills between the undergraduate student nursing students and diploma nursing students can be explored.
3. Patient satisfaction can be added as one of the parameters in evaluating the communication skills. The patient or the simulated patient can be asked to evaluate each student immediately after the video sessions.
4. Communication between the nursing educators and the student nurses can be investigated.
5. Gender influence on communication skills among nursing students can be explored.
6. The same research can be conducted in the real situation with the real patient in the ward.