

Nurses' attitude towards communication with intubated conscious patients: an online survey

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ABSTRACT

The lack of communication causes dissatisfaction and distress among conscious intubated patients, which may result in treatment refusal. This preliminary study sought to identify attitudes of nurses towards communication with conscious intubated patients. Thus, possible solutions to improve the communication challenges if exist by finding the attitude of nurses on communication with conscious intubated patients may be explored. Preliminary survey was conducted among selected nurses through convenient sampling method. Questionnaire self-developed, validated were distributed and analyzed descriptively. Almost all respondents believed that conscious patients do want to communicate during intubated period and eighty two percent of the respondents agreed that communication with conscious intubated patients is possible. Seventy five percent respondents have tried to communicate using both verbal and non-verbal methods but 70% have faced challenges. Though only thirty seven percent of the respondents have been taught how to communicate with the intubated conscious patients, sixty four percent of respondents have never asked for any tools for communication. To overcome the communication challenges majority 103 (82.4%) of the respondents stated the requirement of standardized communication tool. The result indicates a need to develop standardized communication tool to ease communication with conscious intubated patients.

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1. INTRODUCTION

Health care is a unique field which is both emotional and personal. It is a field where communication is, literally, everything. And nurses are the ones who are engaged continuously in the verbal communication process of the patient's care. At times verbal communication is not possible due to patient conditions and treatment processes. Intubation is one such lifesaving device which hampers verbal communication. Critically ill patients experience extreme difficulties in communication because of intubation and associated cognitive, sensory and language deficits. Effective communication is fundamental to nurse patient relationships which is hampered due to intubation [1]. The communication difficulties not only leave patients frustrated, hopeless, anxious and depressed, it affects nurses' satisfaction too [2]–[5]. So, the nurses strive to accomplish fruitful communication but due to lack of suitable communication tools nurses often fail to achieve effective communication [6]. Many studies have reported the use of various communication methods like reading the mouthing words, gestures, communication cart and communication champions

(resource nurses) to aid in communication with intubated patients [7]–[9]. But practically the use of communication aids has not been fully implemented in clinical practice, probably due to the complexities of the aids and the use of communication aids is found situational and mostly no attempt is taken at all to communicate [10]–[14]. But nurses caring the COVID -19 patients have used many improvised techniques to keep the communication channel open [15]. So mixed reports are available on the communication pattern of nurses with intubated conscious patients.

Often the communication difficulties distance patients from their caregivers and loved ones. Difficulty in communication affects nurse patient relationship which may cause stress, anxiety and depression among intubated conscious patients and eventually prognosis becomes poor [5], [16]. Nurse-patient communication in conscious intubated patients is characterized by a common experience-frustration. The nurses and other healthcare workers experience communication issues, demanding patients, and inability to provide adequate patient comfort which requires symptom assessment and improved communication tools [17]. Studies have reported that when patients are unable to respond verbally, nurses often do not find it important to talk with them, and nursing interventions are based on the nurses' own ideas, assumptions and previous experience about patients' non-verbal communications, which might be erroneous or insufficient [18]. Studies reflect varied results on attitude towards communication by nurses with conscious intubated patients and unanimously project difficulties faced by nurses during communication. Thus, understanding nurses' attitude on communication with intubated patient is felt. Understanding their attitude will help to alleviate the difficulties faced by them.

The researcher during her experience as in charge nurse too found that the nurses respond more to those patients who try to communicate and neglect the ones who don't. This leads to less communicative patients' need being unaddressed. Literatures reflected various reasons on nurses' part for inability to establish effective communications. One such study revealed that the majority of the nurses had attitude in speaking with conscious intubated patients but also concluded that it is vital to improve the quality and quantity of communication with patients with speech problems by implementing management strategies [18]. Another study found unsatisfactory level of satisfaction with communication among nurses, and concluded that effective use of communication aid can lead to understanding and satisfying the needs of patients [19]. Attitude toward learning communication skills is a complicated process that includes both internal (e.g., personality traits, empathic tendencies) and external elements (e.g., environmental, such as seniority) [10].

Studies reflect that since the physiological parameters for life saving treatment and care takes precedence over communication need, divergent views exist among nurses regarding the utility and preferences of the communication aids [14], [15]. Thus, mixed attitude is documented till date on conscious intubated patients and nurses' communication in terms of communication need, use of communication aid and attitude towards learning communication techniques is available. So, the present study takes initiative to describe further the nurses' attitude to communicate with conscious intubated patients, their difficulties and the methods they adopt to do so. The study result may help to develop proper communication strategies to ease the communication difficulties faced by nurses and the patients both. The study's findings might aid decision-makers by shedding light on the problem of communication and assisting them in putting policies in place to help conscious intubated patients who are having communication issues. Nurses will be able to communicate with conscious intubated patients more effectively.

The objective of this study is to find the attitude of nurses on need of communication with conscious intubated patients. Communication is essential for establishing a trustworthy, therapeutic connection between nurses and patients. For patients admitted in an intensive care unit (ICU), in especially, the quality of patient communication with health care staff is linked with their prognosis. This study's theoretical approach is guided by classic nursing communication theories [20] and incorporates aspects from the collaborative interpersonal communication model [21], which recognizes nurse feedback as a vital component for the correctness of verbal and nonverbal communication.

2. METHOD

2.1. Research approach

In this study, a quantitative research approach was chosen and utilized. The study had a descriptive design applying reliable and validated structured questionnaire using a survey method to collect data through online mode. A survey was chosen because the target study populations were studying in the institution. The survey was undertaken in May 2021, among 125 respondents from Peerless Institute of Nursing, Kolkata, West Bengal, India. Previous studies to find the attitude of nurses have been conducted using fewer sample size of as low 121 [22].

2.2. Sample

The respondents were in-service staff nurses enrolled for post basic bachelor's degree after completion of diploma in nursing with the work experience in critical care units on conscious intubated patients. The respondents were stratified across age and years of work experience with education level of diploma in Nursing. All nurses who were on active duty in critical care area during the data collection were enrolled for the survey. The respondents were in service staff nurses enrolled for post basic bachelor's degree after completion of diploma in nursing with the work experience in critical care units on conscious intubated patients. The sample size was calculated at 95% CI, where margin of error or precision rate decided by researcher is 5% for finite sample of 160 staff nurses studying for in-service education at the institute also considering 10% drop out of study participants. A survey with sample size on 116 nurses to find the attitude on skin injury could yield successful result analysis previously [23].

The formula used for calculation of sample size was $n = N / 1 + (N \times d^2)$. The formula is based on finite sample of study as the total number of enrolled working staff nurses for Post Basic diploma education course is 160 with work experience in critical care units on conscious intubated patients [24]. Where n is required sample size. N is finite population=160, d is margin of error 5%, $n = 160 / 1 + (160 * 0.05 * 0.05) = 114$, with 10% attrition sample size was taken as 125.

2.3. Data collection tool

In this study, the instrument was structured questionnaire on attitude regarding communication with conscious in tubated patients containing 10 close-ended questions. A similar study has employed 10 questionnaires to assess the attitude of nurses on communication with decreased level of consciousness [25]. The present study had two sections in the instrument of the study namely Part A and part B. Part A contained demographic information of the respondents like gender, age, marital status, total years of nursing service and years of experience in critical care nursing. Part B contained the items to assess the attitude on need of communication with conscious in- tubated patients. It employed a 3-point Likert scale with responses ranging from 1 (never), 2 (sometimes), and 3 (always).

2.4. Validity and reliability

The tool was validated by 5 experts from nursing fraternity and content validity index was found to be 0.9 with 100 percent agreement in all areas except minor language modifications suggested by the validators on two items. Necessary modifications were made as per validators' suggestions. Reliability was obtained by Cronbach's alpha and was found to be 0.8 which shows the internal consistency of the tool was reliable. Pre testing of the tool was done on 20 samples who were not included in the final data collection.

2.5. Ethical consideration

Voluntary participation from the participants were obtained without any coercion. Informed consent was obtained from all the respondents. Formal institutional ethics committee permission was sought. Anonymity of the participants and confidentiality of the data were maintained. The study posed no harm to the participants. As per international standard or university standard ethical approval has been collected and preserved by the author. Institutional ethics committee approval was obtained from Peerless Hospitex Hospital and Research Center limited on 1st July 2021 with Ref no. PHH & RCLCREC/3370/2021

2.6. Data analysis

Descriptive statistics were used to analyze the data. The data were entered into Microsoft Office Excel 2007 spreadsheets and cross-checked for accuracy before data analysis. For descriptive analysis, frequency and proportion were used to present the distribution categorical variables. All quantitative variables were examined for normal probability distribution by skewness and kurtosis test before analysis.

3. RESULTS AND DISCUSSION

3.1. The age information of the respondents

A total of 125 participants including in-service education nurses responded to online survey. Among them 71% were from the age group 19-25 while 29% were from the age group 26-32 and 10% were from above 32 years. Thus, the majority of the survey respondents were from the age group 19-25 years.

3.2. Attitude of nurses on communication needs with conscious intubated patients

Attitude of nurses on communication with conscious intubated patients are reflected through questionnaires with responses in Likert scale are described in table and figures. Table 1 shows the frequency and percentage on statement of attitude of nurses on communication needs with conscious intubated patients.

Seventy five percent respondents have tried to communicate with conscious intubated patients although almost 70% have faced challenges to communicate with them.

This result is supported by a study that in spite of nurses' high levels of knowledge, attitude and skills [26]; they often face difficulty in communicating with intubated patients in critical care areas. A similar study has also stated that nurses caring for patients who are lightly sedated during mechanical ventilation is quite challenging in terms of communication [9]. Data in Table 1 also revealed that only thirty seven percent of the respondents have been taught how to communicate with the intubated conscious patients and almost forty six percent have used communication tools for the same. A study showed moderate performance and short-term education can improve the nurses' communication behaviors with conscious intubated patients [27]. Another pilot study also supported the role of education to improve nurse patients' communication [28].

The present study found sixty four percent of respondents have never asked for any tools for communication and forty nine percent of the respondent never used any tool to communicate with intubated conscious patients. A similar study reflected that though many alternative methods of communication are available and about 50 % of the conscious intubated patients could potentially be served by simple assistive communication tools, caregivers currently make little to no effort to ask for such tools or devices for patients in the critical care units [3].

Table 1. Frequency and percentage on statement of attitude of nurses on communication need

Sl.No.	Statement	Response in frequency (%) (n=125)		
		Never	Sometimes	Always
1	Have you ever tried to communicate with conscious intubated patients?	24 (19.2)	7 (5.6)	94 (75.2)
2	Did you face any challenges to communicate with conscious intubated patients?	23 (18.4)	15 (12)	87 (69.6)
3	Had been taught how to communicate with conscious intubated patients?	71 (56.8)	8 (6.4)	46 (36.8)
4	Have you ever asked anyone regarding tools to communicate with conscious intubated patients?	80 (64)	3 (2.4)	42 (33.6)
5	Did you ever use any communication tool to communicate with conscious intubated patients?	61 (48.8)	6 (4.8)	58 (46.4)

Figure 1 describes that almost eighty two percent of the respondents agreed that communication with conscious intubated patients is possible. A systematic review suggested that combination methods of augmentative and alternative communication (AACs) methods may be effective in improving patient–healthcare professional communication with mechanically ventilated patients [3]. Figure 2 shows maximum of the respondents that is 73% have adopted both methods of communication (verbal and non-verbal). Most of the respondent mentioned non-verbal communication techniques used were with pen and paper, visual symbols, and cues. A study has revealed similar result where critical care nurses often use different ways to interpret nonverbal forms of communication (such as gesturing), while most guess the need [29].

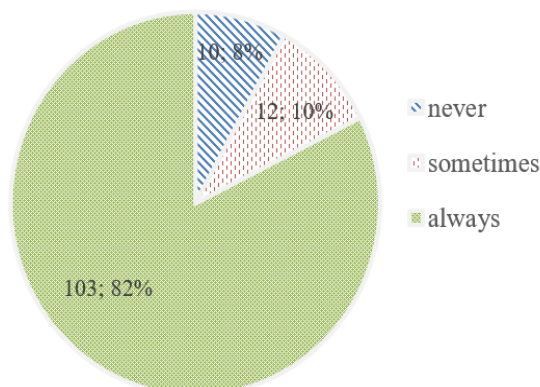


Figure1. Response frequency on statement "is it possible to communicate with conscious intubated patients"

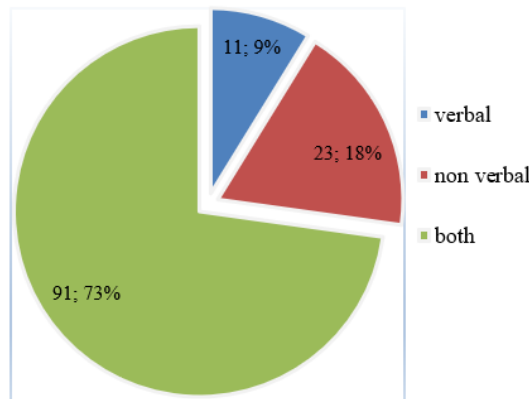


Figure 2. Frequency on response “what methods did you adopt to communicate with conscious intubated patients?”

Figure 3 depicts that majority 103 (82.4 %) of the respondents stated the requirement of standardized communication tool. In a similar focus group study and in-depth interview on the critical care nurses, the theme of recognizing communication aids for patients as being essential for care was emerged [30]. Figure 3 highlights that 118 respondents that is eighty eight percent agreed that it is necessary to communicate with conscious intubated patients. This is supported in a study that the nursing professionals are required to advocate their own voices and the voices of the patients they are caring for, who may be incapable of speaking or advocating for themselves [31]. Another study echoes the need of communication in conscious intubated patients of ICUs to be of great importance with their increased level of arousal [16]. Thus, nurses affirm the necessity to communicate with intubated conscious patients.

In Figure 3, survey revealed that 111 nurses experienced difficulty to understand the communication desire of the conscious intubated patients due to their inability to respond verbally. Study reports that communication with the patients is a challenge in the ICU, inadequate comprehension of patients by health care teams may negatively impact nursing care and impede patient responsiveness [27]. The understanding of need or desires by patients is difficult and nurses face hurdle in delivering care.

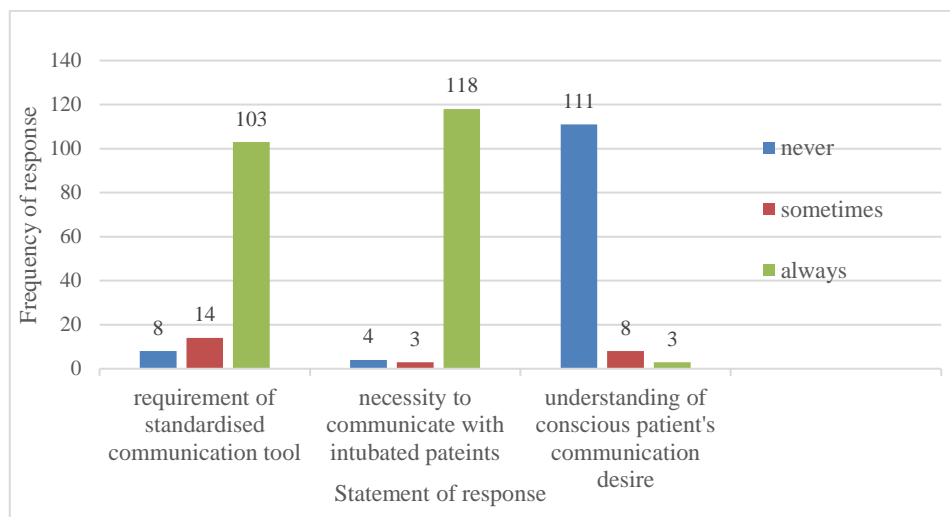


Figure 3. Frequency distribution of nurses' attitude towards communication with intubated conscious patients

Contextual results were based solely on descriptive statistical data. The study's findings provide insight into nurses' attitude on conscious intubated patients' communication demands. The large percentage of respondents indicated communication difficulties. The comparatively low percentage of nurses who have had formal training or who have used communication tools highlights the need of providing nurses with appropriate training and resources for efficient communication with conscious intubated patients.

Nursing leaders in critical care areas may contribute to manage communication difficulties experienced by nurses and patients by adopting a culture to use easy and available communication tools [30]. A thorough knowledge of the attitude of nurses and the barriers faced by conscious intubated patients will help to develop a suitable communication tool [32]–[34]. The use of communication tools may significantly reduce miscommunications and help to develop more successful nurse patient communication [25], [28].

4. CONCLUSION

To communicate and establish a therapeutic relationship with the intubated patients is challenging but not impossible. The findings of the study would help to develop effective communication tool to be undertaken in other hospitals and settings to ease the professional's communication skills. Since nurses could contribute a lot towards holistic health in the work situation, studies of this sort would help improve the quality of nursing services in critical care area. Use of effective communication technique to communicate with conscious intubated patients may be included in the curriculum of various nursing programmes to orient the student nurses to this area of nursing practice. Moreover, the administrator may create good working environment and provide effective communication tool to the clinical nurses for communicating with conscious intubated patients. Also, how the intubated patients prefer to communicate is needed to be explored and thereby improve the therapeutic communication relationship between nurses and the patients by developing a communication tool. A study may be undertaken further to develop communication tool based on nurses and patients' communication need.

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