A Review of Communication and Patient Safety

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ABSTRACT

Background: Addressing and improving communication skills among healthcare professionals is crucial not only for enhancing patient satisfaction but also for promoting positive health outcomes and overall healthcare quality. Therefore, this review aims to understand the communication skills among nursing and healthcare personnel.

Methods: The PICO format is employed to articulate the components of a well-structured clinical question, guiding the exploration of pertinent evidence for the literature review.

Results: A collective of 25 literature subjects relevant to the research topic were identified. The review yielded four main themes: (1) Establishing the definition of poor communication, (2) Underscoring the significance of communication skills, (3) Examining the impact of poor communication on patient safety, and (4) Identifying factors associated with inadequate communication.

Conclusion: In summary, this review highlights the crucial need to understand the communication level of the nursing and healthcare personnel in ensuring patient safety.

Keywords: Communication; Safety; Nursing; Healthcare

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INTRODUCTION

Inadequate communication skills have the potential to negatively impact patient well-being, leading to adverse effects. Examples of poor communication encompass various forms such as verbal abuse, disrespect, and denial when patients seek information. This kind of communication can result in a negative perception of healthcare (1). Patient-provider communication is often a significant factor contributing to adverse effects, causing delays in treatment, fostering a negative image, and creating unpleasant experiences during treatment.

Addressing and improving communication skills among healthcare professionals is crucial not only for enhancing patient satisfaction but also for promoting positive health outcomes and overall healthcare quality. Training programs focused on communication strategies, empathy, and active listening can significantly contribute to a more patient-centred approach, fostering a healthcare environment that prioritizes both physical and emotional well-being. Therefore, a review with aims to understand the communication skills among nursing and healthcare personnel was conducted.

METHOD

The researcher emphasizes key terms crucial for literature searching to ensure the selection of a dependable database. The PICO format (Table 1) is employed to articulate the components of a well-structured clinical question, guiding the exploration of pertinent evidence for the literature review.

To ensure a comprehensive approach to exclusion and inclusion, the researcher considers specific factors while searching for literature evidence, aiding in the identification of relevant articles. The researcher establishes priorities that must be assessed before conducting a thorough search in the database. The criteria for inclusion and exclusion are outlined as follows:

Inclusion:

1. Articles must be in the English language.
2. Full-text articles are required.
3. The articles must be published between 2018 and 2023.

4. The focus should be on healthcare providers.
5. Inclusion of articles related to healthcare undergraduate students.

Exclusion:

1. Studies with clinical setting experience less than the first week.
2. Studies lacking experience in collaboration with a clinical instructor.
3. Exclusion of studies conducted among professionals from other fields.

<table>
<thead>
<tr>
<th>Table 1: Summary of PICO used in the study</th>
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<tr>
<td><strong>P</strong> Population, Patient, Problems</td>
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<tr>
<td><strong>I</strong> Intervention, prognostic Factor or Exposure</td>
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<tr>
<td><strong>C</strong> Comparison or Intervention</td>
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<td><strong>O</strong> Outcome that you would like to measure or achieve</td>
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RESULT

For this review, the researcher collected data from Proquest, and Pubmed. A systematic literature review as a type of review that systematically gathers, critically appraises, and synthesizes the findings of primary studies in an integrative manner, aiding in comprehending the concept of evidence (2, 3).

The researcher independently screened the evidence using inclusion and exclusion terms to meticulously verify all the articles. In cases where insufficient information was provided in the title and abstract to determine eligibility, full-text papers were retrieved for further
consideration. During this process, articles were categorized as review articles, research studies, or opinions based on their titles and abstracts. The researcher reviewed all the inclusion criteria and selected potential studies obtained from the database. A total of n=25 literature topics related to the research topic were identified. Subsequently, the researcher analysed the abstracts of seven research topics to determine the most appropriate database for the study. The literature articles were organized using Mendeley to facilitate the citation process. The details of the data extraction process are tabulated in Figure 1.

Figure 1: PRISMA flow diagram visually summarises the screening process
Initially, the title and abstract of each article were reviewed to categorize them based on relevant themes. The articles were further assessed against inclusion and exclusion criteria. Each individual article was selected and evaluated by comparing aims, objectives, data collection, data analysis, sample, methodology, and the study summary. Finally, the two best articles were chosen for the review. For critical appraisal, the researcher utilized the Critical Appraisal Skills Programme (CASP) and a freestyle checklist to validate the quality of the studies.

Establishing The Definition of Poor Communication

Communication is the process of transmitting information and fostering mutual understanding among individuals through various means such as signs, signals, gestures, and written forms. Effective communication within the nursing profession is crucial for creating an environment where all nurses feel comfortable expressing their views on optimal nursing care practices (4). For instance, during the COVID-19 pandemic, patients experience fear and anxiety as they are unable to see their hospitalized loved ones, exacerbated by news reports of a continuously rising death toll (5).

Ensuring effective communication between staff and leaders is essential for knowledge sharing and fostering discussions (6). In the Intensive Care Unit (ICU), successful communication between nurses and patients goes beyond information exchange; it involves building trust, providing support, and ensuring satisfaction for both patients and their families. This is particularly crucial in communicating challenging prognoses (7). For example, during critical decision-making situations like end-of-life considerations, healthcare providers should engage in conversations with family members, offering not just medical details but also crucial moral support (8).

In essence, inadequate communication is characterized by an ineffective exchange of knowledge, often stemming from unclear information about diseases, medication prescriptions, and treatment options, leading to adverse effects on patients (9). This is evident, for example, during the COVID-19 pandemic, where challenges in effective communication during code status discussions between families and physicians contributed to heightened anxiety among family members (10).

Miscommunication during clinical handovers among staff nurses can result in incorrect or missing patient diagnoses (11). Failed communication can significantly impact patients emotionally and psychosocially, leading to negative treatment experiences (12). Moreover, novice nurses may experience interpersonal conflicts when unable to apply their knowledge of nursing care, resulting in anxiety that affects patient care (4). Language barriers, stemming from cultural, racial, and ethnic differences, can contribute to biased communication toward patients (13). Some healthcare professionals may use medical jargon without adequately explaining the diagnosis due to a lack of knowledge, leaving patients with vague information about their condition (14).

Underscoring The Significance of Communication Skills

Effective communication holds utmost importance in healthcare, particularly in conveying information and delivering care. Successful communication is evident when patients can freely inquire about their health, and healthcare providers utilize comprehensive and straightforward terms during discussions with patients (13). Approximately 83% of evidence-based practice indicates that communication with relatives significantly improves end-of-life decisions, a point emphasized by the National Institute for Health and Excellence (NICE). Patients are more likely to engage in discussions if they are well-informed about their disease (15). Simultaneously, fostering trust and rapport between healthcare providers and patients contributes to patient satisfaction with the received treatments (7).

Furthermore, healthcare providers must ensure that patients have a clear understanding of the physiology of their disease, medication prescriptions, and treatment choices by regularly assessing their knowledge (9). Delivering news to family members about a patient's deteriorating health can be challenging for healthcare providers. Effective communication is essential in explaining treatment choices and providing moral support to calm family members,
reflecting the humanity of the healthcare provider (10). In critical care settings like the Intensive Care Unit (ICU), effective communication is crucial for mechanically ventilated patients (MVP) to express their feelings and fulfill their wishes, given their inability to speak and potential frustration due to communication limitations (12).

Enhancing effective communication is pivotal in bolstering treatment and care plans, improving satisfaction for both patients and healthcare professionals. It also plays a significant role in enhancing the performance, creativity, and shared responsibility among healthcare professionals, potentially reducing conflicts among colleagues (4). Open communication between leaders and frontline staff, normalized in healthcare settings, promotes a safety culture where staff can freely share their thoughts and engage in discussions about best practices. This practice increases awareness of current issues, builds trust, and instils confidence in decision-making (6).

Examining The Impact of Poor Communication on Patient Safety

According to the World Health Organization (WHO) (16), patient safety involves "the absence of preventable harm to a patient and the reduction of the risk of unnecessary harm associated with health care to an acceptable minimum." Shockingly, one in ten patients' experiences harm in healthcare, leading to more than 3 million deaths annually due to unsafe care. In low-to-middle-income nations, four out of every 100 individuals succumb to unsafe care, and communication breakdown among healthcare workers is identified as a contributing factor.

Two reported incidents highlight healthcare providers' failure to adequately explain medication prescriptions and treatment choices, resulting in adverse effects and emergency department admissions for both patients (9). These cases illustrate that inadequate or inaccurate information due to unclear communication among healthcare professionals can jeopardize patient safety and erode trust in the medical system (17).

The global challenge of COVID-19 has further complicated verbal communication, with the use of Personal Protective Equipment (PPE) acting as a barrier in communicating with patients and family members. This situation has implications for the effective delivery of information about patient prognosis (5).

Insufficient information about a patient's health status contributes to anxiety in 90% of Intensive Care Unit (ICU) family members, with 57% experiencing post-traumatic stress. Poor communication is identified as a major factor in 70% of adverse effects in healthcare, with 50% occurring during handover reports, leading to misinformation (11). Between 2009 and 2014, communication breakdowns within critical care teams resulted in 394 incidents, causing harm in 96 cases. Incidents caused by communication issues with other teams amounted to 1194, leading to harm in 243 instances. Among these incidents, 357 involved more than one communication method (18).

In China, an investigation revealed deficient communication among physicians at primary health centres due to a lack of training programs focusing on patient-centred communication skills and fostering physician-patient relationships within the healthcare system. In these settings, doctors often neglect to allow patients to describe their signs and symptoms, potentially resulting in misdiagnoses. Notably, a significant proportion of primary care physicians refrained from participating in any training programs in 2015 (19).

Identifying Factors Associated with Inadequate Communication

Numerous factors contribute to ineffective communication within critical healthcare settings, including interpersonal conflicts among colleagues, feelings of resentment, and a sense of non-acceptance within the group. These issues can lead to emotional distress, such as sadness and exhaustion, negatively impacting communication and diminishing the quality of care provided by nursing professionals (4). This challenge extends to healthcare students who, due to organizational hierarchies, may feel restrained from expressing their opinions about incorrect actions during their clinical placements (20).

Moreover, the use of medical terminology presents a hurdle, as patients may struggle to grasp the physiological aspects of their
illnesses. Language barriers and cultural differences further complicate communication, potentially making patients feel unfamiliar with the language and culture used by healthcare providers, leading to dissatisfaction in the nurse-patient relationship (21). In rural settings, people may use their local dialects, making it challenging to exchange knowledge about their health conditions (22).

Workload is another contributing factor, hindering nurses from engaging in effective communication due to time constraints (21). The limited time allocation between healthcare professionals and patients may prevent in-depth discussions about health issues. Unsuitable environments, such as busyness and a lack of privacy, can also hinder patients from expressing their concerns. Additionally, inadequate training for healthcare providers contributes to this issue (23).

From a doctor's perspective, undergraduate nurses face communication barriers due to a lack of knowledge. Some students excel in theoretical aspects but lack passion for their job and struggle with communication during assessments. Novice nurses may lack confidence due to language fluency, knowledge gaps, and challenging working environments, all of which contribute to poor communication (24). Nurses have acknowledged that insufficient knowledge can affect their ability to explain patients' queries adequately (22).

Furthermore, a lack of empathy and emotional intelligence contributes to communication failures. Some students with extensive clinical practice may appear unfeeling when communicating with patients, resulting in difficulties in building a strong nurse-patient relationship. This, in turn, may lead to patient doubts about the healthcare profession (25).

CONCLUSION

In conclusion, the exploration of poor communication within the healthcare context underscores its multifaceted impact on patient safety. The identification of themes such as defining poor communication, emphasizing the importance of communication skills, assessing the incidence of compromised patient safety due to poor communication, and recognizing associated factors illuminates the intricate nature of this issue. As healthcare systems strive for excellence, it becomes increasingly evident that addressing communication challenges among nursing and healthcare personnel is paramount. Enhancing communication skills not only promotes positive health outcomes but also contributes significantly to overall healthcare quality. Moving forward, interventions and training programs aimed at improving communication within healthcare settings are imperative to mitigate the risks associated with poor communication, ultimately ensuring a safer and more patient-centred healthcare environment.

CONFLICT OF INTEREST

The authors declared no potential conflicts of interest regarding this article's research, authorship, and publication.

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AUTHOR CONTRIBUTIONS

SNDA: drafted the manuscript and contributes to the concept development and design of the article through data collection, analysis and data interpretation for the article. RR: revised the manuscript critically with intellectual contents and approved the final version of the manuscript.

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