



ความต้องการและสภาพปัญหาการจัดการเรียนการสอนทางการพยาบาลเพื่อคุณภาพ  
และความปลอดภัยของผู้ป่วย: มิติการสื่อสารในการปฏิบัติการพยาบาล<sup>1</sup>  
THE NEEDS AND PROBLEMS OF NURSING EDUCATION FOR QUALITY AND  
PATIENT SAFETY: COMMUNICATION IN NURSING PRACTICE

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### บทคัดย่อ

การสื่อสารในการปฏิบัติการพยาบาลมีความสำคัญต่อประสิทธิภาพของการดูแลผู้ป่วย เนื่องจากการปฏิบัติงานตามบทบาทและหน้าที่ของพยาบาลมีผลโดยตรงต่อคุณภาพการดูแลผู้ป่วยและการฟื้นฟูของโรคพยาบาลจำเป็นต้องได้รับการพัฒนาความสามารถสื่อสารในการปฏิบัติการพยาบาลตั้งแต่เป็นนักศึกษาพยาบาลเพื่อให้สามารถประยุกต์ใช้ความรู้และทักษะในการปฏิบัติการพยาบาลได้อย่างมีประสิทธิภาพ ลดความเสี่ยงและข้อผิดพลาดที่เกิดจากการสื่อสาร นำไปสู่คุณภาพและปลอดภัยของผู้ป่วย การสอนทางการพยาบาล จึงควรให้ความสำคัญและออกแบบให้ผู้เรียนเกิดการเรียนรู้และได้ฝึกทักษะการสื่อสาร การศึกษาวิจัยนี้มีวัตถุประสงค์เพื่อ

- 1) ศึกษาและวิเคราะห์ความต้องการจำเป็น และสภาพปัญหาการเรียนการสอนการสื่อสารในการปฏิบัติการพยาบาล
- 2) รวบรวมข้อมูลเกี่ยวกับวิธีการจัดการเรียนการสอนสำหรับเป็นแนวทางส่งเสริมความสามารถสื่อสารใน

การปฏิบัติการพยาบาลของนักศึกษาพยาบาล วิธีดำเนินการวิจัย ใช้การวิจัยเชิงคุณภาพ เก็บรวบรวมข้อมูลจากผู้ให้ข้อมูลสำคัญที่ได้จากการเลือกแบบเจาะจงจำนวน 30 คน โดยการสนทนากลุ่มกับพยาบาลวิชาชีพที่เป็นครูที่เลี้ยง 11 คน พยาบาลวิชาชีพที่ทำหน้าที่ฝึกอบรม 9 คน และการสัมภาษณ์เชิงลึกกับอาจารย์พยาบาล 5 คน ผู้เชี่ยวชาญด้านการศึกษาและการประกันคุณภาพการดูแลผู้ป่วย 2 คน และผู้เชี่ยวชาญด้านเทคโนโลยีและสื่อสารการศึกษา 3 คน วิเคราะห์ข้อมูล โดยการวิเคราะห์เนื้อหาและการจัดลำดับความต้องการจำเป็น

ผลการวิจัย พบว่า 1) นักศึกษาพยาบาลมีปัญหาการสื่อสารในการปฏิบัติการพยาบาล ไม่รู้หลักการและเทคนิคการสื่อสารที่ดี จึงไม่มั่นใจและไม่สามารถสื่อสารได้อย่างมีประสิทธิภาพ มีสาเหตุจากขาดความรู้ ทักษะ และประสบการณ์การสื่อสารในการดูแลผู้ป่วยและการทำงานร่วมกับสหวิชาชีพ 2) แนวทางการจัดการเรียนการสอนเพื่อส่งเสริมความสามารถสื่อสารในการปฏิบัติการพยาบาล โดยผู้สอนเป็นผู้กระตุ้นให้ผู้เรียนตระหนักถึงความสำคัญ ให้ความรู้พื้นฐาน สนับสนุนให้ผู้เรียนศึกษาค้นคว้าด้วยตนเอง และจัดประสบการณ์ให้ผู้เรียนเผชิญสถานการณ์จริง หรือสถานการณ์จำลองในคลินิกเพื่อฝึกทักษะการสื่อสารในการปฏิบัติการพยาบาล แล้วมีระยะเวลาให้ได้ทบทวนและฝึกซ้ำ โดยใช้คอมพิวเตอร์สนับสนุนและเพิ่มช่องทางให้ผู้เรียนได้สะท้อนคิด แลกเปลี่ยนเรียนรู้ร่วมกัน สรุปและเชื่อมโยงความรู้ที่ได้เพื่อสามารถประยุกต์ใช้กับสถานการณ์ใหม่ในการสื่อสารกับผู้ป่วยและญาติ รวมทั้งเพื่อนร่วมงานในทีมสุขภาพอย่างมีประสิทธิภาพ

**คำสำคัญ :** การสื่อสารในการปฏิบัติการพยาบาล, การศึกษาทางการพยาบาล, คุณภาพและความปลอดภัยของผู้ป่วย

### Abstract

Communication in nursing practice is essential for the efficiency of patient care because the performance of the role and duty of a nurse has a direct effect on the quality of patient care and recovery. Nurses need to develop the ability to communicate in nursing practice since the start of being a nursing student in order to be able to apply their knowledge and skills to the nursing practice more efficiently, which can reduce the risk and errors caused by communication, and lead to better nursing quality and patient safety. Therefore, teaching in nursing should pay attention to and cultivate students' communication skills. The objectives of this study were 1) to study and analyze the needs and the state teaching and communication problems in nursing practice. 2) To gather information about teaching and learning methods, including case study and computer-supported collaborative learning, as a guideline to enhance nursing students' communication abilities in the nursing practice. This research was a qualitative study that its data were collected by using group discussions and in-depth interviews. The key informants were thirty people, purposively selected from professional nurses who were eleven mentors, nine nurse educators, five nursing instructors, two experts in education and quality assurance, and three technology and media experts. Qualitative data were analyzed using content analysis and the Priority Needs Index.

The research findings were: 1) Nursing students currently lack an understanding of the principles and techniques of excellent communication resulting in lower confidence and often unable to effectively communicate when caring for patients and working with multidisciplinary professionals, caused by a scarcity of knowledge, skill, and experience in nursing communication and interprofessional collaborative practice. 2) Teaching approaches to enhance nursing students' communication ability involves instructors motivating learners to realize the importance of effective nursing communication, which was performed through instruction and the use of real or simulated clinical scenarios. Moreover, allocating sufficient opportunity for nursing students to be able to

repeatedly practice, review, reflect, summarize, share, and integrate knowledge applicable to their new communication situations in nursing practice along with the use of technology also helps supporting communication and collaboration among nursing students.

**Keywords :** nursing communication, nursing education, quality and patient safety

### **Background and significance**

The World Health Organization (WHO) has designated patient safety as a critical fundamental principle in health care and promotes international standards and guidelines for quality and patient safety. Aspects of modern society have negatively impacted human health, even with advances in medicine, allowing people with good health to live longer. Adverse events inpatient care, 4 to 16 percent of (or about 1 in every 10) patients are likely to be exposed to hazards to their safety in developing countries; this number is seven times higher than that of developed countries (WHO, 2011). These adverse events result in the loss of life or significant financial loss to the patient and damage the image of the hospital. As a result, the safety of patients in hospitals is necessary for not only the patients but also their relatives and the medical staff; therefore, quality care standards need to be developed and continued to evolve (Chaleoykitti, Kamprow, & Promdet, 2014; Jogerst et al., 2015; Institute of Medicine, 2010; WHO, 2006). Nurses are the group of hospital personnel with the primary role of integrating knowledge and coordinating health care services from the multi-disciplinary team; as such, they have to learn to reduce mistakes that threaten patients' lives (IOM, 2010; Jogerst et al.,

2015). To increase nursing quality and patient safety, nurses require knowledge of nursing science, skill in the application of the nursing process, and the ability to operate as part of a performance-oriented multi-disciplinary team, including effective communication and teamwork skills (Foronda, MacWilliams, & McArthur, 2016).

Communication in nursing practice involves sending information to and receiving data from colleagues, patients, and the patient's relatives, and is an essential component of nursing care. Effective communication between health care providers and patients and their families is essential to safe, and quality care, increased team satisfaction, and a reduction in gaps and deferrals between team members. On the contrary, inadequate or missing communication between providers and patients might cause misunderstandings, indecisions, conflicts, and complaints, which lead to patient harm or even death, that declining health care quality and patient safety. The prevention and decrease of the risks and adverse events in nursing practice may reduce the cost of care. That can increase the quality and capability for positive outcomes by nurses and associated health care teams (Boonnun & Chayaput, 2009; Dhevapithak, 2016; Foronda et al., 2016; Kongkakul & Wanpiroon, 2012; Kourkouta &

Papathanasiou, 2014; Scotten, Manos, Malicoat, & Paolo, 2015). Joint Commission International (JCI) (2018) provides a high-level overview of common communication challenges and shortcomings. They are 1) inadequate handovers or transitions of care, 2) poor discharge planning and inadequate or unclear patient instructions, 3) language problems, 4) cultural barriers and misunderstandings, 5) age-related challenges, and 6) errors in test results and medical orders. Some studies have shown that nurses experience a high probability of ethical or legal professional mistakes caused by communication with patients and relatives. As well as the health care team, either intentionally or unintentionally, due to factors such as workload, differing levels of experience, and applied nursing abilities, these factors all affect a nurse's performance communicating. In the case of nursing students, the problem is that they lack professional communication skills and confidence because they are limited to clinical experience, which must be performed under supervision by a licensed registered instructor or nurse to ensure patient safety.

Additionally, students' practice of communication skills often neglected due to the lack of links between education management and training programs and a shortage of learning resources. Nursing students usually have been taught communication techniques through the use of lectures with a few hands-on practices. Clinical learning management cannot guarantee that all nursing students

will have the same level of experience (Shafakhah, Zarshenas, Sharif, & Sarvestani, 2015; Wagner, Liston & Miller, 2011; Xie, Ding, Wang, & Liu, 2013). In addition to the knowledge and skills of health sciences, nurses should be continually evolving in their professional performance. They should be provided with learning and training, starting at the undergraduate level. The preparation of communication skills in nursing practice help reduce the gap between the relevant professions and increase the quality of patient care (Bressler & Persico, 2015; MacDonald, Bally, Ferguson, Murray, Fowler-Kerry, & Anonson, 2010). The Health care provider can improve communications with patients during a critical moment in their relationships, from admission to discharge to follow-up care, by understanding common communications challenges and implementing solutions shown by evidence to improve communication outcomes. **JCI requires the use of standardized methods, forms, or tools** to facilitate consistent and complete handovers of patient care, including: 1) I PASS THE BATON, 2) SBAR, and 3) The Joint Commission's Universal Protocol for Preventing Wrong Site, Wrong Procedure, and Wrong Person Surgery (JCI, 2018).

Nowadays, with the rapid changes and unexpected violent reversals, nursing students and professionals need to be adaptive and active learners. Communication and collaboration are some of the skills that need to be learned and practiced in the 21<sup>st</sup> century (Panich, 2012). The development of practical communication

skills among nurses with patients and their relatives and health care professionals is essential for the planning and advancement of nursing education management. It is a considerable part of nursing education for quality and patient safety (Jeerapaet & Jeerapaet, 2007; Sherrill, 2012; Wagner et al., 2011; WHO, 2011). As such, nursing courses and instruction should be prioritized and designed for learners to learn and practice communication skills. To improve the effectiveness and quality of nursing practice communication ability, it is necessary for nursing students. Therefore, the researcher is interested in studying and gathering the information relevant to existing teaching problems, and the methods of teaching to promote the nursing practice ability of nursing students.

### Research questions

1) What are the characteristics of teaching problems that promote knowledge and practical communication skills among nursing students?

2) What teaching methods promote the communication ability of nursing students in actual practice, and How can they use the case study and computer-supported collaborative learning to manage to teach?

### Research objectives

1) To study and analyze the needs and state of problems, teaching, and communication in nursing practice;

2) To research and gather information about teaching and learning methods,

including the use of case study and computer-supported collaborative learning, as a guideline to enhance communication abilities in the nursing students' practice.

### Methods

This study was the qualitative research collected data by using focus groups and in-depth interviews.

**The key informants** were 30 who selected by using purposive selection from nine of the training hospitals and educational institutions in Thailand, consist of professional nurses who are eleven mentors and nine nurse educators for focus groups. Additionally, experts in the nursing faculty for in-depth interviews consisting of five nurse instructors, two experts in education and quality assurance, and three specialists in education technology and communication.

#### Research instruments:

1) Non-structured interviews were used for the focus groups, and

2) semi-structured interviews were used for the in-depth interviews. To assess the validity of the content, using the index of item-objective congruence (IOC), that performed by three experts in nursing instruction, one expert in communication technology and education, including one expert in educational research and evaluation, was useful to very good, with the values between .7-1.

**Ethics:** Researchers ask for approval to the Human Ethics and Research Committee, the Police General Hospital.

The certificate number is 106/2562. Data collection was approved by the Commander, Police Nursing College, and the Chief nursing, Police General Hospital. Researchers made an appointment for clarification purposes and consented to provide information to participants.

**Data collection:** The data collection process had run on setting the time and place of the meetings in advance and making invitations to the experts for interviews. The interviewees were informed consent for the focus groups and in-depth interviews using an audio recorder and took notes during the conversations, each of which lasted within 60-90 minutes.

**Data analyses:** The qualitative data consisted of content analysis, and a step-by-step Priority Needs Index. The data were collected from the interviews and used the inductive study by interpreting, analyzing and summarizing the main problems. Defined units and the method of enumeration were classified. The focus groups and interviews were employed for analysis of the intensity of opinions, either the size or quantity of messages. The data were prioritized with the Priority Needs Index by a group of experts in nurse instructor according to the formula ( $PNI_{\text{modified}} = (I-D) / D$ ).

## Results

Nursing students had problems in communication skills in nursing practice due to a lack of understanding of the principles and techniques of excellent communication skills. This makes them

unable to talk to colleagues, patients, and patients' relatives. Students do not know how to use verbal and non-verbal communication, especially in-patient care, to open the nurse-patient interaction effectively; examples of these forms of communication include how to talk, smile at, greet and touch the patient in an appropriate manner. Each student dares to decide whether to touch or not touch the patient; however, some students fear touching patients, especially those who are of the opposite sex. As a result, in actual nursing practice, they cannot communicate correctly and appropriately in situations where these skills are necessary. Additionally, as nurses may receive incorrect data and information due to misunderstandings, errors, or repetitive or discontinuous work, this lack of practical communication skills may lead to adverse events, like as delay treatment or medication errors. The findings show that a lack of knowledge and expertise, including experience in how to communicate and collaborate professionally, caused the communication ability of nursing students.

Regarding the problems and obstacles in managing the teaching of nursing communication, we found that: (a) nursing students lack the opportunity or ability to deal with specific situations. Some of these situations cannot be arranged for a large group of participants, such as critical care and emergencies. As a result, students learn different communication skills according to their experiences in clinical settings of nursing care; (b) there is a lack of appropriate, clear teaching media that makes it possible

for learners to understand useful communication patterns. The availability of appropriate situation-based media would enhance students' understanding and reduce teaching time, especially media involving real-life situations; And (c) knowledge, experience, and professional expertise in nursing communication are essential characteristics instructors require to be able to advise and provide feedback to learners.

2) The Nursing Academic Institute has taught communication to most nursing students through courses related to communication; examples include the following: Thai Language for Communication; Nursing Informatics and Communication; Health Communication; and Information Technology, Health Counseling, and Nursing Communication. For some institutes, content integrated teaching is a method of teaching communication in the field of nursing, such as nursing fundamentals and specialty nursing. There were four factors contributing to the enhancement of teaching nursing communication. The first factor was the integration of communication skills in other specialized nursing courses not only comprehensive consultation, but also both on the inter-professional teams and with patients or relatives. The second factor was the teachers' requisite knowledge and experience regarding effective communication between professional teams and patients. The third factor was the learners' knowledge inquiry via the provision of an appropriate medium of selected cases, such as images or videos, in addition to teaching materials to enhance

nursing communication and the opportunity to practice these skills. The last factor was the teaching methods that could allow students to receive theoretical and applied knowledge, and comply with defined objectives. Illustrate, appropriate coaching examples would provide the student with different patient-care situations, the ability to role-play both good and bad communication in these situations, and the opportunity to share their opinions to reflect what they have learned from engaging.

The situations that nursing students should develop their communication were a) providing a guidance of health information, b) information report and the submission of calls, c) inter-professional communication and collaboration, d) managing conflict with colleagues, patients, and their relatives, e) counseling, and f) the nursing process. Students should develop their communication abilities in the above situations following the requirements of the role; examples include focusing on positive communication, use of praise, and paying attention to and understanding receivers of all communication levels. The first-year nursing students and sophomore, the studying should be focused on learning and practicing necessary communication skills with patients and family members, nurse-to-nurse communication. That creates understanding, and relationships. Junior of nursing students, the studying should be focused on advanced communication such as emergency and critical illness, end-of-life care, therapeutic communication, and

communication between members of an interdisciplinary health care team. The senior, the emphasis should be on communication in terms of community health. This approach would be beneficial as ineffective nursing students' practice is frequently caused by a lack of knowledge, skill, and experience in communication.

The approaches for developing the communication capabilities of nursing students as necessary as follows: 1) Allow the learner access to visual examples of both appropriate and inappropriate communication. Through reinforcement and progression, the students' level of communication ability can increase step by step. 2) Practical analysis of behavior and interpersonal communication (Transactional Analysis: TA) in order to be attentive and understand the emotions of those who communicate with them. 3) Motivate nursing students both intrinsically and extrinsically, to raise awareness of the importance of communication capabilities in nursing practice. One example of this could be to award students reward points or coins when students communicate effectively and appropriately. 4) Provide opportunities for nursing students to connect with professionals and observe or participate in situations where communication skills are required to recognize others' feelings; students can then reflect on what they have learned. 5) Provide nursing or team rounds to allow students to practice writing a change-of -shift report reporting the critical data of a patient to a physician or team. 6) Create effective health

communication and medium. 7) Create an instructor's handbook or guide for teaching communication. Instructors play a role in motivating learners to understand the importance of effective nursing communication by providing basic knowledge that encourages students to conduct a self-study and the experience to practice in real or simulated situations. It is necessary to allocate a period for students to practice and review repeatedly, along with the opportunity to reflect, share, summarize, and apply knowledge to new situations in actual nursing practice.

There are many strategies to develop communicative ability in nursing practice. Teachers can integrate nursing communications in various nursing courses, provide the opportunities to gain experience communicating during nursing practicum, give the instructors' reflection and feedback to learners, and create materials to practice their communication skills in both real and simulated situations.

The essential teaching topics are 1) Interpersonal communication; 2) persuasive communication; 3) conflict management; 4) clinical and therapeutic communications that encourage understanding and cooperation in health care of a patient and relative, including communication means between the health care providers; 5) health communication in hospital and community health care. The most critical communication techniques were 1) active listening, 2) observation skills, 3) giving positive feedback, 4) appropriate touch and eye contact, 5) expressing attention to

feelings, 6) the appropriate use of technical and medical terminology, and 7) the tools or technology for nursing handover and reporting the doctors such as ISBAR.

Case studies for the development of nursing communication should follow this pattern: 1) Create media for students to learn how to communicate more accurately and appropriately. Video is an effective medium for showing possible scenarios, along with the verbal and non-verbal communication techniques required to deal with these scenarios effectively. For scenarios involving nursing care, step up from the foundation to advance in intensive care or emergency patients, graphics or simulations should be used in place of real patients or teaching videos. 2) Use periodic questions to allow learners to practice thinking, that will allow students to conceptualize the situation, so they can learn how to communicate with patients and relatives or with a physician. 3) Motivate students to create student-based content showing their communication; students may create their own video clips using their mobile phones, which they can then post to private online media channels such as YouTube (with the correct privacy settings). 4) Select content and case studies for the preparation of teaching

materials that are based on objective criteria and goals. The materials should be at the appropriate level of difficulty, and the course platform should notify students what activities to do, what activities are synchronous or asynchronous, and what the purpose of the activities and evaluations. The design should alternate between face-to-face and online activities.

Based on the concept of experiential learning and computer supportive media, presented in Table 1, the support collaborative learning was 1) the creation of experience in video-based presentation scenarios, 2) the reflection, 3) the knowledge summary using online tools for reflection and sharing data, and 4) the application of knowledge. Video-based activities can be designed by the instructors or learners to view, discuss and reflect on what they have learned. Teachers define the situation, assign learners to find the media, which was designed to communicate with the patient, such as infographics/ clips, video/ media artifacts/hand-made media, and then post, send, and create group discussion between learners, instructors and nurse preceptors. To help facilitate learners expressing their opinions should use both systems of online chat rooms.

Table 1: The computer supported collaborative learning tools to enhance communication skills

No	Technology Tool sample	Feature	Strategic Use for Teaching and Learning Outcomes							communication		
			Remembering	understanding	applying	analyzing	Evaluating	creating	Verbal	Non-verbal		
1.	Moodle, Edmodo, Google Classroom, myCourseVile, Schoology, Blackboard	- Learning Management System: a technology tool that helps instructors manage classes, provide and manage contents, incorporate designed courses and track and assess whether learners have developed their ability to communicate according to course objectives and goals. - Cognitive Application: online mapping: collaborative mind maps	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
2.	Coggle	- Knowledge sharing, discussion, and summary: an online virtual "bulletin" board, where students and teachers can collaborate, reflect, share links and pictures	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
3.	Padlet,	- Knowledge sharing, discussion, and summary: let users and guests (with conditions) post video and pictures on a canvas via Email, and this feature may be used to create a shared picture gallery on a canvas with friends, family, and etc.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
4.	Lino-it	- share, discuss, summarize and reflect on documentation online	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
5.	Google doc	- Interactive free video software that syncs with You Tube and can be integrated with LMSs to encourage students to practice thinking.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
6.	Edpuzzle	-Presenting communication skills and opinions: an online tool for presenting short videos (no more than 5 minutes), that can be shared among members. For instructors express their opinions.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
7.	FlipGrid	- Class behavior management tools, for reinforcement of positive behaviors: an online auxiliary tool of classroom management used to strengthen and encourage classroom participation, establish common rules, and allow learners to meet online, learn in groups and share knowledge amongst themselves.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
8.	Class 1-2-3, ClassDojo, Class365	- Tools that enhance communication: listening, speaking, reading, writing, and gestures) using video media to display verbal and non-verbal communication.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
9.	Web conferencing, Virtual meeting, Instant messaging, Screen sharing, Blogs, Social media, VoiceThread		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

The measurement model of assessing communication ability standards in nursing practice assesses proficiency using knowledge tests, measuring communication skills using the Objective Structured Clinical Examination (OSCE) through observation, documentation, and participation. The OSCE and rubric scores, using technology tools, have to be designed to cover the objectives and define the criteria.

### Discussion

This study illustrates the issues that nursing students face when attempting to communicate effectively in their practice. Ineffective communication is caused by a lack of knowledge, experience, and skills regarding the principles and techniques of excellent nursing communication. Communication with patients and health care teams is the foundation of all disciplines and is involved in all nursing activities either through speech, writing, symbolic gestures, or the use of various media. Communication is one of the vital tools in nursing care to ensure the quality of care and patient safety; therefore, nursing students need the ability to communicate well (Boonnun & Chayaput, 2009; Foronda et al., 2016; Scotten et al., 2015; Shafakhah et al., 2015). Nursing education aims to integrate theoretical and applied knowledge in the field of nursing to ensure competency regarding patient care and safety.

There are several problems with the teaching management of nursing communication skills: 1) nursing students

lack direct experience in nursing communication; 2) instructors lack right teaching media that would increase understanding of the subject and reduce the time needed to teach the subject, especially regarding real-life situations; 3) instructors need experience and expertise in teaching communication. From previous studies, there are neglected the teaching of practical communication skills, often in some countries, which is caused by a lack of links between training programs and a lack of learning support resources. In general, nursing students are taught how to communicate without mastery practice (Wagner et al., 2011; Shafakhah et al., 2015); additionally, learning and practicing clinical skills is highly distributed and it cannot be guaranteed that all nursing students will receive equal access to information (Xie et al., 2013).

The method of developing nursing communication skill should involve four suggestions. This skill should integrate into a nursing communication course and the teaching of nursing communication during students' practicum in hospital wards. The students should individually practice in the real situations, such as bedside teaching or specific scenarios in order to gain experience communication. They should be allocated a period to review and repeatedly practice their communication skills, an opportunity to reflect on their learning, knowledge sharing with their peers, summarize what they have learned, integration applied knowledge to new situations, and both negative and positive

feedback. Teachers should create educational media for students to practice their knowledge and skills repeatedly in order to sustain what they have learned when new scenarios occur. Students will be able to draw on their experience and apply their knowledge and skills to solve the problem. Past studies have shown that nursing students are new to the practice and less likely to be trained in clinical skills and communication skills. As a result, nursing students lack the skills and confidence when communicating with patients. For this reason, instructors should arrange the learning environment to aid students' learning and provide them with experience, allowing the learners to practice their skills and integrate their knowledge, so they are prepared and confident when practicing in a modern, complex health environment (Gu, Zou, & Chen, 2017). Therefore, instructors must adjust from their original patterns or methods of teaching, and for learners play a more active role in their learning, instructors have to adapt their teaching process to provide learners with realistic experiences and to be more confident physically contacting the patient. Additionally, they must learn to take students' perspectives, knowledge, and experience into account to help them apply what they have learned into practice (Kolb, 2015).

Aside from the results of this study, experts also proposed guidelines for using assistive technology tools in the management of virtual learning environments integrated with the use of patient case studies to

support teaching and learning, giving them an opportunity to gain learning experience and to practice communication skills. Existing literature explored the use of communication networks and confirmed the effectiveness of media in communicating health information. Also, social media plays a huge role in communicating patient information and access to health services via the Internet. Mobile technology as communication tools and the influence of digital communication should be considered as the center-centered and continuous-driven procedure to meet the patients' needs (Sharma & Kaur, 2017). Additional research supports the use of computer-supported collaborative learning to develop students' ability to think critically, solve problems and provide optimal health counseling (Tresin Kaewurai, Jumpasut, & Buosonte, 2012; Finocchario-Kessler et al., 2012).

### **Conclusion**

Nursing students' problems affecting the effectiveness of their communications are a lack of knowledge, skill, and experience in clinical and professional settings. The teaching approaches to develop nursing communication ability start by providing essential knowledge, opportunities for self-study and experience practicing through real situations or simulations, which step up from the foundation to advance in nursing care for individual and community. Increasing the opportunity for learners to collaboratively

review, repeat, reflect, summarize, share, and integrate and apply their knowledge and experience. The results of this study can be applied to promote nursing students' communication ability by using computer-supported communication and collaboration based on case-based and experiential learning.

## Recommendation

The information and research gathered are compiled from professional nurses, nursing instructors, experts in teaching and nursing, and communication professionals. No data, ideas, or views from nursing students are included. Further study should gather opinions from nursing students in order to obtain complete information leading to develop the communication ability in the nursing students' practice with efficiency and effectiveness.

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