

# The Improvement Of Knowledge And Attitude Of Nurses Through SBAR Communication Training

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**Abstract:** The situation-background-assessment-recommendation (SBAR) communication is the right choice for nurses to communicate and transfer information about the condition of patients. Effective SBAR communication will improve patient safety, and nurses' positive attitudes to perform the SBAR communication can impact patient satisfaction. This study aimed to determine the effects of SBAR communication training on nurse associates' knowledge and attitude in inpatient units of the Regional General Hospital of Aceh. This quantitative research employed a quasi-experimental design with a pretest-posttest design without a control group. The sample size was determined by using the formula test of two means of the pair groups. The samples of this study were 49 nurses with the SBAR communication training interventions. This study employed the probability sampling technique. The tool of data collection was questionnaires. This study employed the statistical, descriptive, and inferential tests with the paired t-test, Wilcoxon test, Pearson's test, and Spearman test. The results revealed that there were several effects of the SBAR communication training on the knowledge of nurses ( $p=0.0001$ ), there were influences of the training on the attitudes of nurses ( $p=0.008$ ), and there was a correlation between educational levels and knowledge ( $p=0.02$ ). The SBAR communication training could increase the knowledge and attitude of the nurses. The nursing manager should make efforts to improve and maintain the nurses' knowledge and attitude on the SBAR communication. Consequently, patient safety and satisfaction from nursing care can be achieved.

**Index Terms:** Communication, training, SBAR, attitude

## 1 INTRODUCTION

Communication is one of the determinants of patient safety in a hospital. Several incidents of patient safety frequently occur in the hospital and impact the quality of hospital services. The number of incidents related to patient safety becomes crucial information about events and situations affecting patient safety [1]. According to the World Health Organization (WHO), most of the reported incidents of patient safety only detect a small portion of errors and audit of medication errors by 0.12%. This condition leads to only half of the incidents are reported although the medical staff can detect approximately 22% of clinically fatal errors [2]. Some of the incidents in hospitals occurred due to communication errors. The 2011 report on the number of patient safety incidents in Indonesia discovered that the case reporting of KTD (14.41%) and KNC (18.53%) were caused by a clinical process or procedure (9.26%), medication (9.26%), and patient falls (5.15%) [3]. Patient safety is a system that makes safer patient care [4]. One of the causes of the patient safety incident is service providers' unprofessional behavior of communication. Effective communication is an important factor to provide safe patient care [5]. This statement is supported by the rule that effective communication is one of the patient safety goals [6]. The situation-background-assessment-recommendation (SBAR) is the right choice to apply for nurses to communicate and transfer information more consistently [7]. The main purpose of using the SBAR is to reveal the arising conditions and receive feedback-oriented solutions [8]. The SBAR is claimed to be a communication technique that can reduce and avoid mistakes in delivering important information to patients. Therefore, nurses necessarily improve compliance in communication with the SBAR technique. The nurses' attitudes in communication become a determinant factor in the successful delivery of information about the patients' conditions and a non-separable part from the nurses' nursing care that impacts patient satisfaction and safety. Factors affecting compliance are education, age, and motivation [9]. The nurses' success in implementing the SBAR communication in regular health care requires a willingness to improve communication and mutual respect of all health care team

members [10].

## 2. METHOD

This quantitative study employed a quasi-experimental design with a pretest-posttest design without control groups. The researcher intervened in the group without a comparison group. This design was conducted by comparing the score of prior measurement results (pretest) before the treatment and after the remeasurement (posttest) to successfully test changes in knowledge and attitudes after the intervention [9]. The population of this study was 526 nurse associates in the inpatient room of the Regional Public Hospital of dr. Zainal Abidin. The criteria of the sample were determined by using the inclusion and exclusion criteria designed by the researchers. The inclusion criteria included ward nurse associates whose schedule was three shifts, minimally holding a nursing diploma III, and participants who filled out the informed consent to be a research respondent. The exclusion criterion was nurses who took leave, were sick, performed outside-hospital duties, or took work permits. The sample calculation of this study was the formula test of two means of the pair groups with the level of significance was 5% and the power of the test was 90% [11]. This study employed 49 samples who were selected using the probability sampling technique in which the samples were selected randomly (random sampling). The researchers employed a questionnaire as the data collection tool. Meanwhile, the data were analyzed by univariate and bivariate analyses. The bivariate analysis used a statistical paired test on the knowledge because the data distribution was normal. Meanwhile, the Wilcoxon test was employed to analyze the attitude because the data distribution was abnormal. In addition, the Pearson Correlation and Spearman Correlation tests were employed to investigate correlation.

## 3. FINDINGS AND DISCUSSION

The findings of this research are as follows:

**TABLE 1.**  
**The Distribution of Nurse Associates' Age and Length of Working Period in the Regional General Hospital of dr. Zainal Abidin in 2020**

Variables	Mean	SD	Minimum-Maximum	95%CI
Age	30	3.45	24-45	28.97 - 31.03
Length of Working Period	4.69	2.83	1-12	3.88-5.51

Table 1 shows that the average age of the nurse associates is 30 years old and the average length of nurse employment is 4.69 years. The older a person is, the better he will perform all things. It is assumed that the increase in people's age will increase their life experience, knowledge, more specific expertise, and better comprehension and wisdom to face life; thus, they will always make good decisions to act [12]. In other words, the increasing age of nurses is expected to bring better insights, skills, responsibilities to their job, and ability to behave better. These findings of age are nearly similar to the findings of an investigation in some hospitals that the length of employment of most nurses ranges from 1-5 years [13]

**TABLE 2.**  
**The Distribution of Nurse Associates' Genders and Education in the Regional General Hospital of dr. Zainal Abidin in 2020**

Variables	Categories	Respondents (n=49)	
		n	%
Genders	Male	19	38.8
	Female	30	61.2
Level of Education	Diploma in Nursi	35	71.4
	Bachelor Nursing	14	28.6

Table 2 shows that the majority of the nurse associates' gender is female (61.2%), and the majority of educational background is diploma in nursing (35 respondents or 71.4%). This study agrees with the research by Reid et al. [13], [14] who discovered that a nurse is identical to a female. The Infodatin data strengthen the statement and explain that 71% of nurses are women, while 29% of them are men [15]. The result of this study illustrates that the educational background of most nurses is Nursing Diploma III (35 respondents or 71.4%). This result is strengthened by the Infodatin data showing that the educational level of most nurses in Indonesia is Nursing Diploma III (77.56%) [15]. In addition, other studies have discovered that the educational level of most nurses is Diploma III [13]. The findings of this study are different from those by Carol Reid [14] who discovers that the educational level of most nurses is a bachelor in nursing .

**TABLE 3.**  
**The Distribution of the Average Scores of the Nurses' Knowledge**

Variables	Mean	SD	Minimum-Maximum	95% CI
Knowledge (Pretest)	11.63	1.83	7-16	11.11 - 12.16
Knowledge (Posttest I)	14.69	1.59	12-17	14.24 - 15.15
Knowledge (Posttest II)	13.39	1.89	9-16	12.84 - 13.93

before and after Attending the SBAR Communication Training in the Regional General Hospital of dr. Zainoel Abidin in 2020 Table 3 concludes that the knowledge of the nurse associates before the SBAR communication training is 11.63 (73%) and increases after posttest I by 14.69 (86%). However, it decreases after the post-test II by 13.39 (84%). These findings agree with several studies discovering that health workers' knowledge increases after the SBAR training [16], [17]. Another study by Randmaa et al. also supports the findings that health workers' knowledge about the SBAR communication significantly improves after the second and fourth week of the training [18], [19]. The implementation of the SBAR communication is greatly influenced by the knowledge of the nurses. This statement agrees with research results by Suardana who proclaims that ineffective SBAR communication is influenced by several factors, such as knowledge, education, and age of nurses [20]. This statement means that the successful implementation of SBAR highly depends on the knowledge of the nurse associates. It can be concluded that knowledge greatly influences the ability to apply SBAR communication. In this case, knowledge refers to a person's point of view on something as the perception produced by the five senses that affect his ability to understand a problem; thus, he can adapt well [21].

**TABLE 4.**  
**The Distribution of the Average Values of Attitude of the Nurses**

Variables	Median	SD	Min-Max	95% CI
Attitude (Pretest)	39	4.68	32 - 54	38.41 - 41.10
Attitude (Posttest I)	42	4.69	35 - 58	40.45 - 43.14
Attitude (Posttest II)	41	5.44	30 - 57	40.93 - 44.05

before and after Attending the SBAR Communication Training in the Regional General Hospital of dr. Zainoel Abidin in 2020

Table 4 concludes that the knowledge of the nurse associates before the SBAR communication training is 39 (72%), and increases after the posttest I by 42 (75%). However, it decreases after the posttest II by 41 (72%). These findings agree with the interview data of head nurses and nurses in several private hospitals in the Western regions of Indonesia. The data revealed that the nurses did not conduct the SBAR communication following the SOP, and there was a relationship between the nurses' attitude and the implementation of the SBAR

communication techniques [22]. The results of this study show that the nurse associates' attitude increases significantly with the value  $p = 0.008$  ( $\alpha = 0.05$ ) before and after attending the SBAR communication training for three weeks. This finding is supported by Surbakti [23] who discovers that the nurses' knowledge, attitude, and behavior significantly change after three days of training. This finding indicates that training brings great impacts on the previously expected changes. The nurses' attitude toward patient safety and the SBAR communication also plays an important role. Nurses who have applied the SBAR communication method feel the increased satisfaction from communication with the doctor ( $p = 0.001$ ), the attitude towards the working conditions ( $p = .001$ ), safety climate ( $p = .001$ ), the teamwork climate ( $p = .001$ ), and their jobs ( $p = .012$ ) [24]. The previous studies conclude that the nurses' attitude will change better and more meaningfully after they attend training in the SBAR communication techniques. This conclusion is also supported by Sukesih et al. [25] who assert that there is a significant difference in the attitude of nurses after receiving the SBAR communication training with a  $p$ -value = 0.000 .

**TABLE 5.*****The Difference of Knowledge of Nurses***

before and after Attending the SBAR Communication Training in the Regional General Hospital of dr. Zainoel Abidin in 2020

Knowledge of the SB/ Communication Base on Training Time	Mean	SD	Difference	p-value
Pretest – Posttest 1				
Pretest	11.63	1.83	3.06	0.0001*
Posttest 1	14.69	1.59		
Pretest – Posttest 2				
Pretest	11.63	1.83	2.06	0.0001*
Posttest 2	13.69	1.89		
Posttest 1 – Posttest 2				
Posttest 1	14.69	1.59	-1.30	0.0001*
Posttest 2	13.39	1.89		

Table 5 shows a significant increase in knowledge by 2.06 before (pretest) and after the SBAR communication training (posttest I) with a  $p$ -value = 0.0001 ( $\alpha = 0.05$ ). The mean of nurse associates' knowledge changes before (pretest) and after three weeks of the SBAR communication training (posttest II) and significantly changes by 2.06 with  $p = 0.0001$  ( $\alpha = 0.05$ ). However, the average knowledge after the training (post-test I) and after three weeks of the SBAR communication training declines significantly by -1.30 with a  $p$ -value = 0.0001 ( $\alpha = 0.05$ ). The nurses' knowledge about the SBAR communication has increased after attending the effective SBAR communication techniques. This finding agrees with the research discovering that health workers' knowledge increases after the SBAR training [16], [17]. Another study by Sari et al. also discovers better changes in knowledge and an increasing level of comprehension after

the training in the SBAR communication techniques [26].

Meanwhile, Santi et al.[23] reveal a fact that nurses' knowledge has increased after three days of training, but it decreases after three weeks of training. This finding indicates the importance of providing information regularly and continuously to maintain the knowledge. Increased knowledge is an undeniably positive impact. The increased performance is also expected to achieve along with the increasing knowledge. This statement is supported by an opinion stating that the training program has a great influence on employees' performances [27]. Every manager has responsibilities to improve and develop employees' potential. Thus, the demands for staff development are pivotal because the public increasingly demands quality health services and technological science rapidly develops. Training is an effective effort to develop and improve the productivity of nurses [28]. Moreover, it can transform the understanding and mindset of a person, so that that he will be motivated to perform a better action. Training has a positive impact in influencing one's motivation and performance that will be interpreted when performing a work [29], [30], [31], [32]. A short one-hour training can increase motivation, knowledge, confidence, and perception [33]. Training programs have a great influence on the performance of employees [27]. This statement agrees with another study deploying that besides emotional intelligence, training has a great role in determining an individual's performance [34]. Training can increase employees' motivation to improve their skills at work and escalate a company's productivity [30]. Moreover, it can change an individual's perception that will affect his behavior. This statement agrees with an opinion stating that human behavior is parallel to the perception, which will form an individual's beliefs in the value of being and behaving [12]. This opinion confirms that to change knowledge, perception, attitude, motivation, and behavior requires training.

**TABLE 6.*****The Difference in the Attitude of Nurses***

before and after Attending the SBAR Communication Training in the Regional General Hospital of dr. Zainal Abidin in 2020

Time Observation-Based Behavior	Median (Minimum-Maximum)	p-value
Pretest	39 (32-54)	0.008*
Posttest 1	42 (30 - 57)	
Posttest 2	41 (35 - 56)	

Table 6 shows that the nurse associates' attitude increases significantly with a  $p$ -value = 0.008 ( $\alpha = 0.05$ ) before and after attending the SBAR communication training for three weeks. This finding implies that the training could give a positive impact to create a change. Training programs have a great influence on the performance of employees [27]. This statement agrees with another study stating that besides emotional intelligence, training has a great role in determining an individual's performance [34]. Training can increase employees' motivation to improve their skills at work

and escalate a company's productivity [30]. Moreover, training can change an individual's perception that will affect his behavior. This statement agrees with an opinion stating that human behavior is parallel to the perception, which will form an individual's beliefs in the value of being and behaving [35]. Another study mention that the respondents show positive attitudes after receiving the SBAR communication training [36]. A positive attitude will impact nurses' behavior to ensure patient safety while providing nursing services. A nursing manager plays an important role to prevent the declining quality and quantity of implementing the SBAR communication techniques in nursing. He should think about possible efforts to implement, and thus the nurses' implementation of the SBAR communication remains significant and can become an organizational culture in a hospital. Involving policymakers in the hospital is one of the ways to convince them that the nurses' implementation of the SBAR communication techniques highly determines patient safety. The policy-making of implementing the SBAR communication techniques can be a basis that every nurse compulsorily applies the SBAR communication techniques well. Meanwhile, inserting elements of the implementation of the SBAR communication techniques into the assessment of nurses' achievement can maintain the organizational culture built from this implementation. Meanwhile, to anticipate the declining implementation of the SBAR communication techniques, the nurses along with supervisors or each head of the room can perform supervision to assess and monitor the implementation of SBAR communication techniques. This statement agrees with an opinion stating that supervision is an attempt to retain staff's knowledge and behavior, and thus, they can do their tasks effectively and efficiently [37]. The SBAR communication techniques not implemented in all nurses can decrease the quality of services. Consequently, the hospital accreditation assessment score, primarily the element of patient safety, will be badly influenced. This notion agrees with the statement that the preparation of accreditation on a hospital is implemented with a top-down approach using not comprehensive socialization and training [38]. Such a condition makes the information is not delivered to all staff. Therefore, efforts to increase the implementation of SBAR communication techniques in a well-structured plan for all staff is necessarily considered because good planning will bring a positive impact on the accreditation process [38], [39].

**TABLE 7.**

*The Relationship of Age and Length of Working Period with Knowledge of Nurse Associates after Attending SBAR Communication Training in the Regional General Hospital of dr. Zainal Abidin in 2020*

Behavior	R	p-value
Age	0.04	0.78
Length of working period	-0.11	0.43

The results show that there is no relationship between age and knowledge of the nurses, but there is a weak correlation between the length of working period and knowledge. This finding agrees with a study by Mairoso who

states that age does not influence knowledge [40]. This study is also supported by another study by Santi et al. who discover that nurses' age and length of the working period do not have a meaningful relationship with their knowledge [23]. This statement confirms that the mature age and length of working period do not guarantee nurses' good knowledge. Another study disagrees with the results of this study and reveals that a person's level of maturity affects his attitude and behavior. In general, a person whose age is young acts more carelessly than the older [41], [34]. Attitudes are formed from knowledge gained through our sensory experiences. To manipulate the knowledge into a better direction, each manager has a responsibility to improve and develop their employees' potentials. The demands for staff development are important because the public increasingly demands quality health services and technological sciences rapidly develop. This statement is supported by an opinion deploying that a training program has a great influence on the performance of employees [27]. Learning through a training program can influence nurses' patterns of thinking and behaving when providing nursing care to the patients [42]. The training in SBAR communication techniques could improve the implementation of the SBAR communication techniques while providing nursing care. Moreover, training could change the nurses' perception and perspective about strategies to convey information precisely, accurately, and efficiently.

**TABLE 8.**

*The Relationship of Genders and Education with Knowledge of Nurse Associates after Attending the SBAR Communication Training in the Regional General Hospital of dr. Zainal Abidin in 2020*

Variables	Means	SD	p-value
<b>Genders</b>			
Male	14.32	1.45	0.19
Female	14.93	1.66	
<b>Level of Education</b>			
Diploma III	14.37	1.61	0.02*
Bachelor of Nursing	15.50	1.28	

The results show that gender has an insignificant relationship with the knowledge of nursing, but the level of education has a significant relationship with the knowledge of nursing. These findings agree with Robbins who opines that gender does not significantly contribute to people's level of knowledge [35]. Another study by Achrekar also reinforces that gender does not affect knowledge. He explains that 65% of nurses in his hospital are women, but this gender domination does not affect their quality of services and knowledge [43]. Another opinion confirms that gender does not determine a person's knowledge, but the level of education upgrades his knowledge. Education also differentiates each individual's knowledge that can change

his perception, attitude, and behavior [5], [23], [43]. Since education is important to change the knowledge, perception, attitude, and behavior the nursing manager must think of a strategy to let nurses have adequate education. The strategies start from determining who will finance the education, either the nurse or the hospital/scholarship. The increase in nurse education will not occur if the nurses and the management are not aware that the organization has a crisis of knowledge. A nursing manager must remain aware of all public demands and can follow the development of science and technology. Moreover, he must be able to improve the nurses' quality to make them confident with their actions and convinced to apply their knowledge during caring for patients. Nurses can increase their knowledge of the SBAR communication techniques through various training programs designed by the nursing manager. The manager must regard the employees as an important asset for the company, and thus the employee development continuously runs to achieve organizational goals [44]. Nursing is a valuable asset that requires an optimal selection to get the best nurses with capacity and dedication. The manager is responsible for adapting to the development of science and technology and the public demands for quality services by performing internal changes. Moreover, the manager must be able to estimate his implications for the organization if changes are needed [45]. Nurses' behavioral changes become one of workforce aspect changes that can be optimized through staff development programs and training.

**TABLE 9.**

**The Relationship between Length of Working Period and Knowledge of Nurse Associates after Receiving SBAR Communication Training in the Regional General Hospital of dr. Zainal Abidin in 2020**

Behavior	R	p-value
Age	0.15	0.30
Length of Working Period	-0.09	0.51

The results show that there is no relationship between the nurses' age and attitude ( $r = 0.15$ ), and there is an insignificant relationship with a  $p$ -value = 0.30. Moreover, the results conclude that there is no relationship between the nurse associates' age and attitude about the SBAR communication. Table 9 also shows that there is no relationship between the length of the working period and knowledge ( $r = -0.09$ ), and the relationship is insignificant with  $p = 0.51$ . It can be concluded that the length of the working period does not relate to the nurses' attitude about the SBAR communication. This conclusion agrees with a study by Santi et al. who discovered that nurses' age has no significant relationship with their attitude and length of the working period [23]. This finding indicates that a more mature age and length of working period do not guarantee a better attitude.

However, these findings contradict Farida who argues that age and maturity will increase someone's work commitment. Meanwhile, another article deploys that the older a person is, the less disobedient and more

discipline he will be; this is shown by his more regular attendance to work [46]. A study by Farida shows that a more mature age leads to a better attitude to improve the quality of work. However, this statement contradicts the results of this study. Therefore, the nursing manager can make these contradictory findings as comparative data to determine further policy. A study by Robbins [35] discovers that the longer a person works, the better his behavior, professionalism, or skills will be. Moreover, the factor of age can affect the factor of productivity. However, another study disputes these findings and deploys that an individual's length of the working period does not guarantee his productivity because there is no reason that a longer period of working will make someone more productive [47]. Sometimes productivity limits exist in which someone in a certain working period can maintain his job better. However, the ability to produce quality work can decline along with the length of the working period. Working productivity is one of the products of attitude, performance, and loyalty. The results of the previous studies, either supporting or contradicting this study, are expected to provide more data for the nursing manager. Consequently, he can consider the advantages and disadvantages of his policy-making better to overcome all problems, especially the problem of implementing the SBAR communication techniques in the hospital.

**TABLE 10.**

**The Relationship of Genders and Education with Knowledge of Nurse Associates after Attending the SBAR Communication Training in the Regional General Hospital of dr. Zainal Abidin in 2020**

Variables	Means	SD	p-value
<b>Genders</b>			
Male	43.42	6.29	0.34
Female	41.90	4.85	
<b>Level of Education</b>			
Diploma III	42.94	6	0.36
Bachelor of Nursing	41.36	3.62	

Table 10 shows that the average attitude of the male nurses is greater than that of female nurses. However, the statistical numbers show that the relationship between genders and attitudes is insignificant with a  $p$ -value = 0.34 ( $\alpha = 0.05$ ). The same result is demonstrated by the level of education. The average attitude of nurses holding a diploma III is greater than that of nurses holding a bachelor of nursing. However, the statistical results show that the nurses' levels of education do not significantly relate their attitude with  $p$ -value = 0.36 ( $\alpha = 0.05$ ). This finding agrees with a study by Santi et al. who reveal that nurses' gender and educational levels do not affect their attitude reflected in the implementation of the SBAR communication while providing nursing care [23].

However, gender differences at work strongly influence the types of work to do; women show better obedience and compliance at work than men [48]. This condition confirms that the quality of work has a relationship with the gender that determines types of work. Knowledge can affect attitude that influences action responses on work performed [49]. This statement means that nurses' knowledge literally can affect their attitude and ability to implement the SBAR communication techniques during providing nursing care. Such a phenomenon is found in the intervention group whose quality and knowledge of SBAR communication techniques increased after receiving the training [50]. Education has an important role to change a person's behavior. According to Carter, education is an effort to develop a person's attitude and behavior in social life [51]. This definition indicates that education can be used as a way to change people's behavior through skill and personality development that is expected to change the nature, behavior, and proficiency in the form of intelligence, knowledge, and skills. The efforts to change the character and behavior accompanied with intelligence, knowledge, and skills can be obtained through formal education and informal education, such as training.

#### 4 CONCLUSIONS

This study concludes that the training could increase the knowledge and attitude of nurse associates in the Regional Public Hospital of dr. Zainal Abidin. The results of this study signify four applicable suggestions to maintain the SBAR communication. The first is to discuss the importance of implementing the SBAR communication techniques with policymakers to create better hospital services. The second is to convince the policymakers that the implementation of the SBAR communication techniques can be improved through multiple efforts to increase knowledge. The third is to train some of the nurse representatives in every room to become a coach and supervisor of the implementation of the SBAR communication techniques. The fourth is to maintain the behavior improvement through several methods, such as composing guidance of the SBAR communication, discussing the importance of implementing SBAR communication techniques with the policymakers to prevent the declining implementation and strengthen the implementation in a rule, compiling guidelines, and committing to making the SBAR communication as the organization's culture for the management and staff.

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