



Knowledge Regarding Sbar Communication Among Student Nurses In A Selected College Of Nursing, Kannur District.

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INTRODUCTION

Communication is a part of everything that is done within the healthcare system. The major goal of staff communication is the effective exchange of information that assists staff in meeting outcomes. Communication, a key to successful team work, is a complex process that should never be ignored. Communication is best described as a complementary process with sender and receiver roles and such, is a process that happens between and within people. Communication is a two way process of sharing and transmitting ideas, information and messages between two or more individual. Effective communication requires knowledge of the symbols, the uses, stimulate to which other persons will react.

SBAR is an acronym for Situation, Background, Assessment, Recommendation; a technique that can be used to facilitate prompt and appropriate communication. This communication model has gained popularity in healthcare settings, especially among professionals such as physicians and nurses. It is a way for health care professionals to communicate effectively with one another, and also allows for important information to be transferred accurately. The format of SBAR allows for short, organized and predictable flow of information between professionals. A few things are necessary for a health care professional to know before beginning an SBAR conversation. A thorough assessment of the patient should be done. The patient's chart should be on hand with a list of current medications, allergies, IV fluids, and laboratory investigations. Vital signs should be completed before making the call, and the patient's code status should be known and reported.

Situation

This part of SBAR determines what is going on and why health care professionals are needed. Health care professionals become familiar with the environment and the patient. Identify the problem and concern and provide a brief description of it. Be able to describe what is going on with the patient and why they are experiencing what is going on. During this stage of the communication the main goal is to communicate what is happening. It is recommended that this element be brief and last no more than 10 seconds

Background

The goal of background is to be able to identify and provide the diagnosis or reason for the patient's admission, their medical status, and history. The background is also the place to determine the reason or context of the patient's visit. During this stage the patient's chart is ready and as much important medical-based information is provided to set up the assessment of data.

Assessment

At this stage, the situation is surveyed to determine the most appropriate course of action. Here the medical professional states what they believe the problem is based on current assessments and medical findings. The assessment should include a focused assessment of problem areas, all lines coming in and out of the patient's body, input and output, bowel and bladder, nutrition, and pain status.

Recommendation

Health care professionals give very precise and descriptive explanations on exactly what they need during that time frame. Possible solutions that could correct the situation at hand are discussed between health care professionals.

BACKGROUND OF THE STUDY

SBAR was originally developed by US navy as a way to communicate information on nuclear submarines. However the healthcare system adopted it in the 1990s and now it is used worldwide. Michael Leonard, MD, Physician Leader for Patient Safety, along with colleagues Doug Bonacum and Suzanne Graham at Kaiser Permanente of Colorado (Evergreen, Colorado, USA) introduced this technique to investigate patient safety. The SBAR technique has been implemented widely at health care systems such as Kaiser Permanente.

Structured communication tools have been widely implemented in hospitals to streamline communication between healthcare workers. These tools have been shown to increase patient safety, reduce unexpected deaths and decrease incidents due to communication errors (De Meester et al., 2013; Müller et al., 2018; Randmaa et al., 2014). Moreover, these structured tools may improve the perceptions of communication and bridge the gap in communication styles between professions (Achrekar et al., 2016; Randmaa et al., 2014; Raymond & Harrison, 2014).

Handoffs have been formally defined as “the real-time process of passing patient specific information from one caregiver to another, or from one team of caregivers to another for the purpose of ensuring the continuity and safety of a patient’s care” (TJC,2008, p. 65). Handoff of information can occur between various members of the patient care team including nurses and physicians, the nurses of inter-unit or inter-facility transfers, and nurses of the same unit at shift-change. Despite being intended to provide the information necessary for the delivery of safe patient care, patient handoffs are particularly prone to communication errors, due to the frequent presence of communication barriers. Common barriers to effective handoff communication in the healthcare field include the hierarchical nature of the field, organizational culture, differences in the practiced communication style of healthcare professions, the lack of a standardized process, and an increasingly complex care environment. In addition to these barriers, the varying parties involved and the large amount of complex information included in handoff reports frequently result in informational gaps and omissions in the handoff report, ultimately ending in sentinel events and patient harm (Staggers &Blaz, 2013). Effective communication is therefore central to safe and effective patient care. The Joint Commission reviewed a total of 936 sentinel events during the year of 2015; communication was identified as the root cause in more than 70% of serious medical errors. The consequences of failed communication during handoff are medication errors, inaccurate patient plans, delay in transfer of a patient to critical care, delay in hospital discharge, and repetitive tests among others. The Joint Commission has introduced the National Patient Safety Goal to improve the communication among caregivers. The aim identified by the Institute of Medicine (IOM) is to provide a safe, patient-centered, timely, effective, efficient, and equitable health care.

SBAR is based on a statement of the situation, background, assessment, and recommendations related to a critical issue. By following this script, the reason for contact, relevant medical history of the patient and the current situation, the vital parameters, and the callers plan of action are efficiently communicated. The structure of the tool ensures that the caller can pass on all information that the other person needs to know, to answer a question or devise a plan essential for patient care. The SBAR tool can be used in different settings to effectively communicate patient information, be it in person, per telephone, on paper or in the digital patient file. As a result, critical patient information can be communicated effectively.

The handoff from one health care provider to another is recognized to be vulnerable to communication failures. Effective communication is therefore central to safe and effective patient care. The Joint Commission reviewed a total of 936 sentinel events during the year of 2015; communication was identified as the root cause in more than 70% of serious medical errors. The consequences of failed communication during handoff are medication errors, inaccurate patient plans, delay in transfer of a patient to critical care, delay in hospital discharge, and repetitive tests among others. The Joint Commission has introduced the National Patient Safety Goal to improve the communication among caregivers. The aim identified by the Institute of Medicine (IOM) is to provide a safe, patient-centered, timely, effective, efficient, and equitable health care.

NEED AND SIGNIFICANCE OF THE STUDY

Interprofessional communication is essential for the coordination and collaboration of healthcare team members during patient care, especially in critical situations. Therefore, nursing students must learn and practice interprofessional communication skills throughout their education and clinical training. Previous studies evaluating standardized communication frameworks in the United States (e.g: ISBARR identify, situation, background, assessment, recommendation, and repeat]) suggest that nursing students feel more confident about interprofessional communication and collaboration through familiarity with these frameworks.

It's important to communicate patient information clearly, quickly and effectively. To improve the communication techniques in nursing, consider using the SBAR technique in interactions with patients, other nurses and physicians. This technique helps in communicating all relevant information clearly. A structured communication tool would be beneficial to effectively communicate the patient information, reduce the adverse events, promote patient safety, improve the quality of care, and increase health care provider satisfaction.

Nurses are required to be trained about effective communication skills even after graduation and began to work independently in clinical settings. The proper use of SBAR technique reduces the unwanted hospital accidents and losing patients' information. Studies reported that proper use of communication methods decrease the errors in the site of surgery; improve the transfer process; and increase patient safety.

The Institute for Healthcare Improvement says, "SBAR is an easy-to-remember, concrete mechanism useful for framing any conversation, especially critical ones, requiring a clinician's immediate attention and action." It gives a specific, unambiguous way to communicate critical information to one another, leaving little room for error and minimizing the chance that a miscommunication will cause patient deterioration.

Dr. Renz's study revealed that 87.5 percent of nurses working in a nursing home setting found SBAR to be a useful tool for organizing and communicating information. Though some nurses cited time constraints and existing communication barriers as obstacles to SBAR, "physicians reported that the quality of communication with nurses about change in resident condition had improved since the project implementation." This study will assist to improve the knowledge regarding SBAR communication.

PROBLEM STATEMENT

A Study to assess the knowledge regarding SBAR communication among student nurses in a selected College of Nursing, Kannur District.

OBJECTIVES

- Assess the level of knowledge regarding SBAR communication among student nurses
- Find the association between the level of knowledge and the selected socio-demographic variables of student nurses

OPERATIONAL DEFINITION

Assess: refers to organized systematic and continuous process of collecting data about the knowledge of student nurses on SBAR communication.

Knowledge: refers to understanding of student nurses regarding SBAR communication as measured by a structured questionnaire.

SBAR Communication: refers to an acronym for situation, background, assessment, and recommendation. It is a technique that can be used to facilitate prompt and appropriate communication.

Student nurses: refers to 4th year B.Sc. nursing students

HYPOTHESIS

H1: There will be significant association between the level of knowledge regarding SBAR communication and selected socio demographic variables of student nurses.

H0: There will be no significant association between the level of knowledge regarding SBAR communication and selected socio demographic variables of student nurses.

ASSUMPTION

Student nurses may have some knowledge on SBAR communication.

REVIEW OF LITERATURE

A literature review is an account of previous effect and achievement of scholars and researchers on phenomena. It is a description and analysis of literature relevant to a particular field or topic. It provides an overview of a work that was already have been carried out, who are the key researchers , who did that work, what method and methodologies were used. According to ANA 2000, a literature review is a body of test that aims to review the critical points of knowledge or a particular topic on research.

Literature relevant to the present study is mentioned under the following headings.

- Studies related to communication.
- Studies related to SBAR communication.

STUDIES RELATED TO COMMUNICATION

Linda Wieke et-al(2021) conducted a study on exploring the relationship between nurses' communication satisfaction and patient safety culture. This was a cross sectional design with the proportional random sampling used to collect data from 51 nurses, majority of them were females between 20-30 years old with 1-5 years working experience. The study showed that there was significant relationship between nurse' communication satisfaction and the quality of patient safety culture. Therefore, the higher the level of nurse's communication satisfaction, the better the patient safety culture. ($p=0.015$; $r = 0.338$).

Laura J et-al(2018) conducted a study on improving patient centered care through a tailored intervention addressing nursing clinical handover communication in its organizational and cultural content. This was a qualitative ethnographic design with the proportional random sampling method used to collect the data. The study showed that there was a reduction of 48% in patient falls ($M=3.9$); a decrease of 20% in the number of hospital acquired pressure injuries ($M=0.6$) and 43% reduction in medication errors ($M=0.8$) following intervention prior to the average rate of 4 patient falls per month.

Bio Gyeong Jin et-al (2022) conducted a study on Korean nurses perception and performance on communication with physicians in clinical deterioration. A descriptive research design with a survey of 250 ward nurses was used for this study. The study showed a mean perceived communication score was 2.88 ± 0.51 of 5. By domain the score was the highest for timelines (3.58 ± 0.60) followed by accuracy (2.80 ± 0.59) interdisciplinary understanding (2.79 ± 0.59) satisfaction (2.74 ± 0.92) and openness (2.64 ± 0.79). The mean communication practice score was 3.79 ± 0.45 of 5. The study showed that the accuracy, understanding, satisfaction, and openness, and their performance was highest for preparation, followed by situation, background, assessment, and recommendation. It also improved mutual understanding between physicians and nurses for patient safety.

Adakku et-al(2021) conducted a study on use of standardized hand of communication tool in post-acute rehabilitation unit. The study was quantitative quasi experimental design. The total sample size was 79, $n = 37$ in the comparative group and $n = 42$ in the implementation group. Data was retrieved from the facility's MIDAS reporting system. A chi-squared test showed a statistical and clinically significant decrease in the medication error rates $\chi^2(1, N = 79) = 32.331$, $p = .001$. The findings suggest that the IHI's SBAR tool may improve medication error rates when used in this setting and population. Therefore, it is recommended that the project is sustained at the project site and disseminated in ways that share gained knowledge to improve population health outcomes. A chi-squared test was conducted to ascertain whether the difference in medication error rate between comparative and implementation groups was statistically significant. The reduction in medication error rate between the comparative group (10.8%) and the implementation group (2.4%), was statistically significant, $X^2=32.331$, $p = .001$. The implication of the project was to improve communication among the nurses during handoff, thereby decreasing the medication error rate.

L Mendonca(2014) conducted a study on effectiveness of information education and communication(IEC) package on life style practices of adolescent. This was an experimental research and the research design is pretest posttest control group. The study was conducted in 2 selected high schools of manglore consisting a sample of 40 adolescents. The higher percentages (40%) of them were males and age group of 5-10 years(50%). Majority of the experiments(65%) and in control group(70%) were from nuclear family.Highest percentage of them had income in between Rs.1000-15000. Highest percentage of them watching TV for 2-4 hours, whereas in control group highest percentages were watching TV less than 2 hours(55%).The study revealed that in the experimental group the mean pretest lifestyle practice pretest score was 95.70 ± 16.93 and in posttest it increased to 110.10 ± 15.51 where as in the control group the pretest score was 94.70 ± 12.92 and in the post test it decreased to 92.50 ± 12.08 . The findings also revealed that there was a significant difference in the mean posttest lifestyle practice scores between experimental and control group. IEC package was effective in improving the lifestyle practices of adolescents.

BinjuRaju(2016) conducted a study on self-instructional module on knowledge regarding the use of communication board in communicating with mechanical ventilated patients among ICU staff nurses. Materials and methods used are evaluation of knowledge regarding use of communication board in communicating with mechanical ventilated patients,to meet his or her basic needs and activities of daily living among ICU staff nurses.The study showed that majority of respondents 85(14%) were between 21-25 years,122(58%) were male,112(53%) were GNM:85(40%) had below 1year of working experience, 94(46%) had working experience in SICU ; 114 (54%) had urban residence ; 108(52%) received information from mass media; 73(35%) had not attended any seminar or workshop or conference regarding communication board. Majority 132(63%) of ICU staff nurses had adequate knowledge regarding use of communication board in communicating with mechanical ventilated patients in the post test than the pretest 00(00%)

Ackel(2021) conducted a study on implementation of structured nurse to nurse handoff in a long term care facility. The study was pretest and posttest design and likert scale was used to collect the data from the samples,i.e. people who were work with long term care facility. The five domains of effective supervision, meaningful work, growth opportunities, feedback and recognition, and effective management comprise the total engagement score for the Align Employee Engagement Survey. Responses from each domain were analyzed separately and compared. Overall, no results were found to be statistically significant. The domain of effective supervision included responses from all survey participants. Five survey items comprise the domain of effective supervision. Although not statistically significant, ($p = 0.55$) the mean score did improve by 0.19. The domain of meaningful work includes two survey items and received responses from all survey participants. The mean score fell by 0.10 in the post-survey, but the decline was not statistically significant ($p = 0.8$).The domain of growth opportunities included two survey items and received responses from ten participants. The mean score fell by 0.42 in the post-survey, but the decline was not statistically significant ($p = 0.34$). The study showed that there was a reduction in 26% in acute hospitalization.

STUDIES RELATED TO SBAR COMMUNICATION

Meera s. achreker et-al(2016) conducted a prospective study on introduction of SBAR into nursing practice. A systematic random sampling technique was used to select individual participants. 20 nurses who were actively involved in bed side care were the samples. The studies revealed that majority of nurses were females (65%) and the age group of 21-30 years (80%). There was a significant association ($p=0.019$) between overall audit score and graduate nurses. Significant improvement ($p=0.043$) was seen in overall score between A1 (Mean = 23.20) and A2 (mean=24.26) and also in “situation” domain $P=0.045$ as compared to other domain. There was only a marginal improvement in documentation related to patient allergies and relevant past history (7%) while identifying co-morbidities decreased by 40%. Only 70% of nurses had documented plan of care. Most (76%) of nurses expressed that SBAR form was useful, but 24% nurses felt SBAR documentation was time consuming. The assessment was easy (53%) to document while recommendation was the difficult (53%).

Abadi et-al(2021) conducted a study on instruction programme for nurses knowledge about applying communication strategies (SBAR) in critical care unit. A pre experimental study design was carry out to determine effectiveness of instruction programme on nurses knowledge regarding communication strategies (SBAR) and find out association between effectiveness of SBAR programme and nurses level of education, year of experience , year of experience in ICU and training course. A pre experimental study was carried out in the CCU of Imam-Al-Husiein medical city. Samples of 25 nurses were selected through purposive sampling technique. The study result indicated that there were high statistical difference between the pre and post test instructions programme related to communication strategy and the instruction programme had a positive effect on nurses knowledge concerning communication strategies (SBAR).

ArezoKhaksar et-al(2020) conducted a study on impact of SBAR communication model and observants on patient safety culture by nurses of the emergency department. Data was collected by a safety culture questionnaire. In this semi-experimental study, 64 nurses from the emergency department of ShahidBeheshti Medical Center in Qom in 1396 were selected and randomly assigned to two groups of 32 intervention and control group 32. Comparison of the subscales of safety culture and the total score of safety culture in intervention and control groups did not show any significant difference before intervention in nurses ($P=0/120$) . But after the intervention, the mean of safety culture and safety culture in the intervention group was significantly more than the control group, which was statistically significant ($p < 0.001$). The results showed that, two weeks after the intervention, the safety culture score in the intervention group was increased in comparison with the control group. The study revealed that interventions over time had increased the patient's safety culture in emergency nurses, So using this type of training along with other patient safety enhancements would improve the safety culture and ultimately enhance the quality of care and reduce unwanted injuries.

JuYeonUhm et-al(2020) conducted a study on implementation of SBAR communication programme based on experimental learning theory in pediatric nursing practicum. The study employed a non-

equivalent control group quasi-experimental design and implemented the tool in the pediatric nursing practicum of a nursing school. The experimental group demonstrated significantly higher SBAR communication ($p < .001$), communication clarity ($p < .001$), and handover confidence ($p < .001$) than the control group. Clinical practice self-efficacy, perceived nurse–physician collaboration, and practicum satisfaction did not differ. The SBAR program in a pediatric nursing practicum improved SBAR communication, communication clarity, and perceived handover confidence in senior-year nursing students.

Maureen marray(2016) conducted a study on implementing SBAR training with acute care nurses to achieve increased knowledge about SBAR and to achieve greater satisfaction with interprofessional communication and to achieve increased knowledge about SBAR. 27 nurses were educated on SBAR using didactic plus role-playing. Prior to the education, a multiple choice knowledge test (MCKT) was administered and a short version survey of communication satisfaction was administered (the ICUNPQ-SV, nurse version). After four weeks, the same MCKT and ICUNPQ-SV were administered to the nurses. The study showed that the objective of educating nurses on SBAR, the first goal was to increase knowledge. Means from the posttest were higher than the pre-test, but not significant $p = .55$. The second goal of increasing satisfaction was met, difference in means was $p = .049$ and individual item analyses of means demonstrated that overall job satisfaction increased significantly $p = .024$. Knowledge of the nurses regarding SBAR communication has increased and nurses are introduced to SBAR as part of their curriculum and the initial scores indicated familiarity with the tool.

Ian Walsh et-al(2019) conducted a study on the influence of training and handover based SBAR communication for improving patient safety. The purpose of this study was to determine the effect of training on the implementation of nursing hand over based on SBAR communication. A study was done with quasi-experimental design, with intervention and control groups. The Statistical test used Wilcoxon and Mann Whitney test. The study revealed that z value is -2.093 and $p = 0.05$. This showed that there is an effect of training on the leadership of the standard implementation of the head of the department on the commitment of nurses in implementing SBAR Communication Based Handover nursing. There is a difference in the level of commitment of nurses in implementing nursing hand over based on SBAR communication in the control group and in the intervention group in terms of implementing SBAR communication-based Nursing Hand Over.

Min-JeongChae(2018) conducted a study on effects of the simulation based on SBAR education programme for nursing students. This research was based on a nonequivalent control group pre-post design. 60 students attending the clinical nursing practice course at S Nursing College participated in the study. To analyze the program effects, paired t -test and t -test were used. Communication clarity score increased by 0.31 point for the simulation-based SBAR-educated group and 0.03 point for the control group. There was significant difference between the two groups ($t = -2.49$, $p = .020$). Self-leadership score increased by 0.29 point for the simulation-based SBAR-educated group and decreased by 0.03 point for the control group.

There was significant difference between the two groups ($t=11.75$, $p=.001$). Therefore, it was shown that using Simulation-based SBAR education learning for nursing students was effective teaching method.

Vatanetal (2021) conducted a study on nurses awareness on SBAR communication model and SBAR training. It was done with descriptive design and a sample consisting of 138 nurses serving in surgical units of the hospital involved in the study. A session of 45-minute training, which has been delivered to surgery nurses, consisted of example scenarios and practices based on SBAR communication model as well as the user guide and some video shots related to communication settings in compliance with SBAR Model. The data was collected during pre-training, immediately after post-training and one-month after the posttraining sessions via face-to face interviews conducted with surgery nurses. Results: Mean values of nurses' SBAR communication model awareness had been calculated for all 18 questions in the form. Those mean values had been displayed as 62.76 ± 28.52 during pre-training, 95.05 ± 7.56 during immediate post-training and 90.90 ± 13.89 during a-month later session of post-training. Comparisons of pre-training and post-training scores had displayed a statistically significant increase in mean values, both after the training and one month later ($p < 0.05$). The findings observed in the study showed that trainings had a positive effect on raising awareness with respect to SBAR communication model to measure the effectiveness of SBAR training on it.

METHODOLOGY

Research methodology is the specific procedure or techniques used to identify, select, process and analyse information about a topic. It is an investigative way of obtaining, organizing and analyzing the data. Methodological studies address the development, validation and evaluation of research tool and method. It may be understood as a sequence of studying how research is done scientifically.

This chapter deals with research approach, research design, schematic representation, variables, setting of the study, population, sample, sample size, sampling technique, criteria for sample selection, development & description of tool, validity, data analysis, and ethical consideration.

The present study was aimed at assessing the level of knowledge regarding SBAR communication among student nurses in Canossa College of nursing in cherukunnu Kannur.

RESEARCH APPROACH

The research approach is a plan and procedure that consist of the steps of broad assumption to detailed methods of data collection, analysis and interpretation.

In this study a quantitative research approach was used to assess knowledge of student nurses regarding SBAR communication.

RESEARCH DESIGN

A research design is the overall plan for obtaining answers to the questions be studied and for handling some of the difficulties encountered during the research process.

In this study a descriptive, non-experimental research design was used

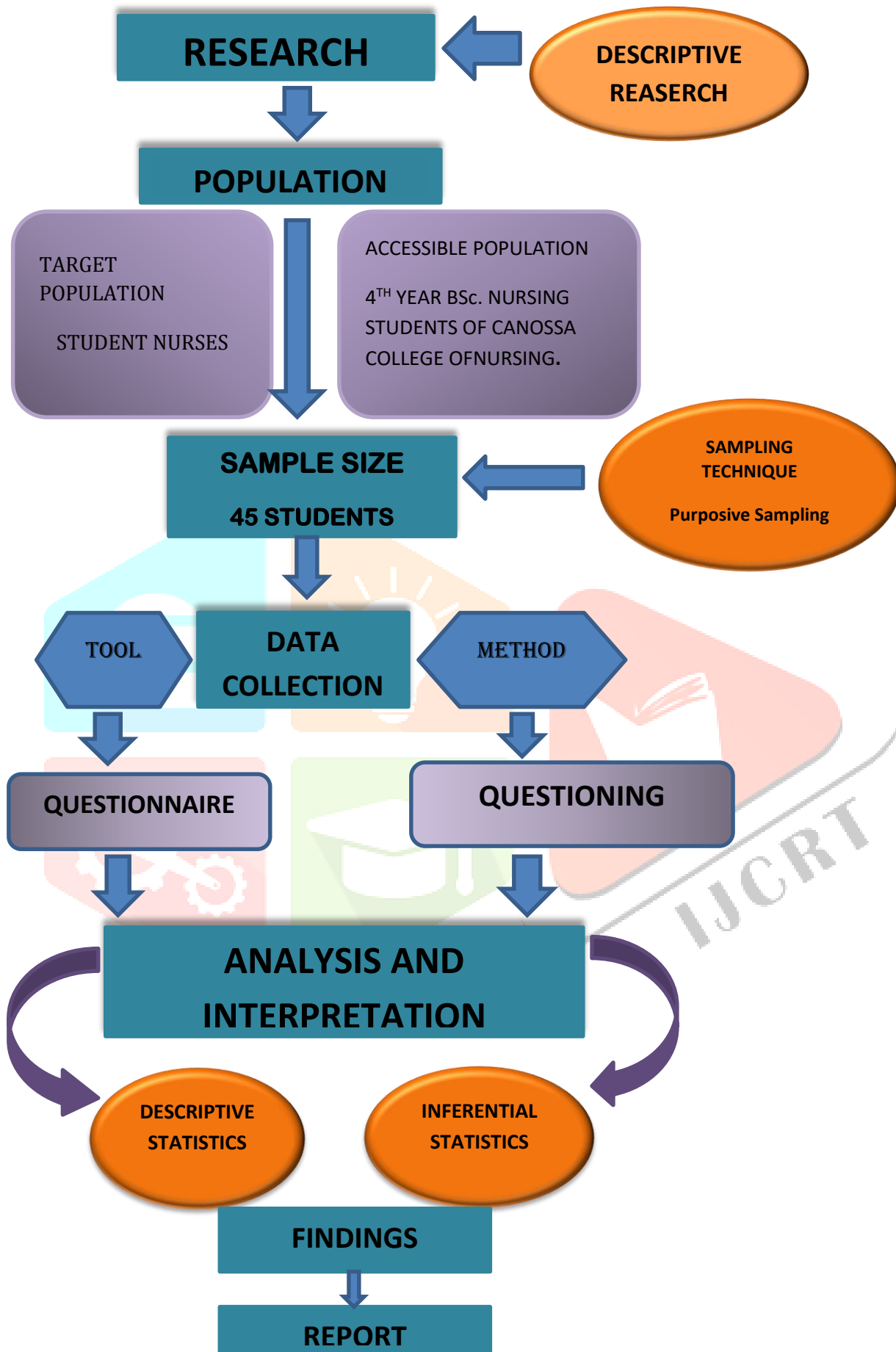


Figure 1: Schematic Representation of Research Design

VARIABLES

Variables are qualities, quantities, properties or characteristics of people, things or situation that change or vary

DEMOGRAPHIC VARIABLE

Demographic variables are attributes of subjects that also collected to describe the sample.

In this study the demographic variables are age, gender, religion, permanent residence, type of family, participation in school clubs, board of examination, and number of siblings.

RESEARCH VARIABLE

These are qualities, attributes, properties or characteristics that are observed or measured in natural settings, without manipulating and establishing cause and effect relationship.

In this study the research variable is the knowledge regarding SBAR communication among student nurses

SETTING

Setting means, location for conducting research. It can be natural, partially controlled or highly controlled.

This study was conducted at Canossa college of Nursing in Cherukunnu, Kannur district

POPULATION

The entire set of individuals or objects having some common characteristics selected for a research study to which researcher would generalize the study finding.

TARGET POPULATION

It is a population in which researcher is interested and to which they would like to generalize the research finding.

In this study target population was student nurses.

ACCESSIBLE POPULATION

Accessible population is the population from which the researcher can realistically select subjects.

In this study 4th year B.Sc. Nursing students of Canossa College of Nursing, Cherukunnu, Kannur were the accessible population.

SAMPLE

It is the representative unit of a population selected to participate in the research study.

In this study the samples were the 4th year B.Sc. Nursing students of Canossa College of nursing Cherukunnu, Kannur.

SAMPLE SIZE

Sample size is the number of members who participate in the study.

In this study sample size was 45.

SAMPLING TECHNIQUE

It is the process of selecting a portion of the population to represent the entire population.

In this study purposive sampling technique was used to select samples for the study.

CRITERIA FOR SAMPLE SELECTION

INCLUSION CRITERIA

Students who were:

- Willing to participate in the study
- Available during the period of data collection

EXCLUSION CRITERIA

Students who were:

- Absent during data collection
- Not willing to participate in the study

DEVELOPMENT AND DESCRIPTION OF TOOL

In the present study structured questionnaire was used to assess the knowledge regarding SBAR communication. It consists of two sections:

Section A: Socio Demographic variables

This section sort information like age, gender, religion, permanent residence, type of family, participation in school clubs, board of education, number of siblings and previous knowledge.

Section B: Structured questionnaire to assess the knowledge regarding SBAR communication among student nurses

It was developed by researchers and it consists of 40 questions to assess the level of knowledge regarding SBAR communication among student nurses.

Scoring

SL.NO	LEVEL OF KNOWLEDGE	SCORE	PERCENTAGE
1.	GOOD	31-40	76 - 100
2.	AVERAGE	21-30	51 - 75
3.	POOR	0-20	0 - 50

- Score of 1 was given for the correct option
- Score of 0 was given for wrong option
- Maximum score was 40
- Minimum score was 0

VALIDITY

Validity refers to the degree to which an instrument measures what it is supposed to be measuring.

The tool was validated by three nursing experts. As per their suggestion and opinion the tool was modified after discussing with the guide.

DATA COLLECTION PROCEDURE

A formal written permission was obtained from the principal of Canossa College of Nursing, Cherukunnu Kannur. The study was conducted among 4th year BSc nursing students. Samples were collected by purposive sampling technique. The data was collected on 19/11/2022. The data was collected by the researchers after obtaining informed consent from the subjects to ensure ethical aspects. A structured questionnaire was used to assess the level of knowledge regarding SBAR communication among student nurses.

PLAN FOR THE DATA ANALYSIS

- The data collected will be analyzed using descriptive and inferential statistics based on the objective and hypothesis.
- Socio-demographic variables will be analyzed using frequency and percentage.
- The association between the socio demographic variables and the level of knowledge will be analyzed using the chi-square test.

ETHICAL CONSIDERATION

Ethical clearance from research committee of Canossa College of Nursing and informed consent from the study subjects were obtained. Each subject was informed about the purpose of the study and the confidentiality was promised. The ethical clearance was ensured in the study.

ANALYSIS AND INTERPRETATION OF DATA

ANALYSIS OF DATA

Analysis of data is referred to as a method of organizing data in such a way that research questions can be answered and hypothesis can be tested.

This chapter deals with analysis and interpretation of data to assess the knowledge regarding SBAR communication among student nurses in a selected college of nursing Kannur district.

The obtained data was classified, grouped, analysed statistically based on objectives of the study.

OBJECTIVES OF THE STUDY

- Assess the level of knowledge regarding SBAR communication among student nurses.
- Find the association between the level of knowledge and the selected socio demographic variables of student nurses

HYPOTHESIS

H1: There will be significant association between the level of knowledge regarding SBAR communication and selected socio demographic variables of student nurses.

H0: There will be no significant association between the level of knowledge regarding SBAR communication and selected socio demographic variables of student nurses.

The organization of finding is as follows:-

SECTION 1: Data on demographic variables of student nurses.

SECTION 2: Data on level of knowledge of student nurses regarding SBAR communication

SECTION 3: Data on association between the level of knowledge regarding SBAR communication and selected socio demographic variables of student nurses

SECTION 1: DATA ON DEMOGRAPHIC VARIABLES OF STUDENT NURSES

This section deals with analysis and interpretation of data on the demographic variables of student nurses

TABLE 1: Frequency and percentage distribution of student nurses according to demographic variables n=45

SI NO	DEMOGRAPHIC VARIABLES	FREQUENCY	PERCENTAGE
1	GENDER		
	a) MALE	2	4.4%
	b) FEMALE	43	95.5%
2	RELIGION		
	a) MUSLIM	1	2.2%
	b) HINDU	8	17.7%
	c) CHRISTIAN	36	80%
3	BOARD OF EDUCATION		
	a) CBSE	3	6.6%
	b) ICSE	5	11.1%
	c) STATE	34	75.5%
	d) OTHERS	3	6.6%
4	PARTICIPATION IN SCHOOL CLUBS		
	a) NSS	14	31.1%
	b) JRC	5	11.1%
	c) SCOUT AND GUIDE	6	13.3%
	d) NONE	20	44.4%
5	TYPE OF FAMILY		
	a) NUCLEAR	37	82.2%
	b) JOINT	4	8.8%
	c) EXTENDED	4	8.8%

6 NUMBER OF SIBLINGS

a) 0	0	0%
b) 1	23	51.1%
c) 2 AND ABOVE	22	48.8%

7 PERMANENT RESIDENCE

a) URBAN	13	28.8%
b) RURAL	32	71.1%

8 PREVIOUS KNOWLEDGE

a) YES	1	2.2%
b) NO	44	97.7%

INFERENCE

Table 1 reveals that according to gender majority 43(95%) of student nurses were females and most 36(80%) of them were Christians. 34(75.5%) had state board of education. Majority 20(44.4%) of the student nurses were not the members of any school clubs. 37(82.2%) of student nurses belong to nuclear family. 23(51.1%) had only one sibling and 32(71.1%) of the student nurses were from rural area. Majority 44(97.7%) had no previous knowledge about SBAR communication.

SECTION 2 DATA ON LEVEL OF KNOWLEDGE OF STUDENT NURSE REGARDING SBAR COMMUNICATION

This section deals with analysis and interpretation of data to assess the level of knowledge o of student nurses regarding SBAR communication.

TABLE 2: Distribution of level of knowledge of student nurses regarding SBAR communication

n=45

SINO	LEVEL OF KNOWLEDGE	RANGE OF PERCENTAGE	FREQUENCY	PERCENTAGE
1	POOR	1-50%	30	66.6%
2	AVERAGE	51-75%	15	33.3%
3	GOOD	76-100%	-	-

INFERENCE

Table 2 reveals that majority 30(66.6%) of student nurses had poor knowledge regarding SBAR communication.

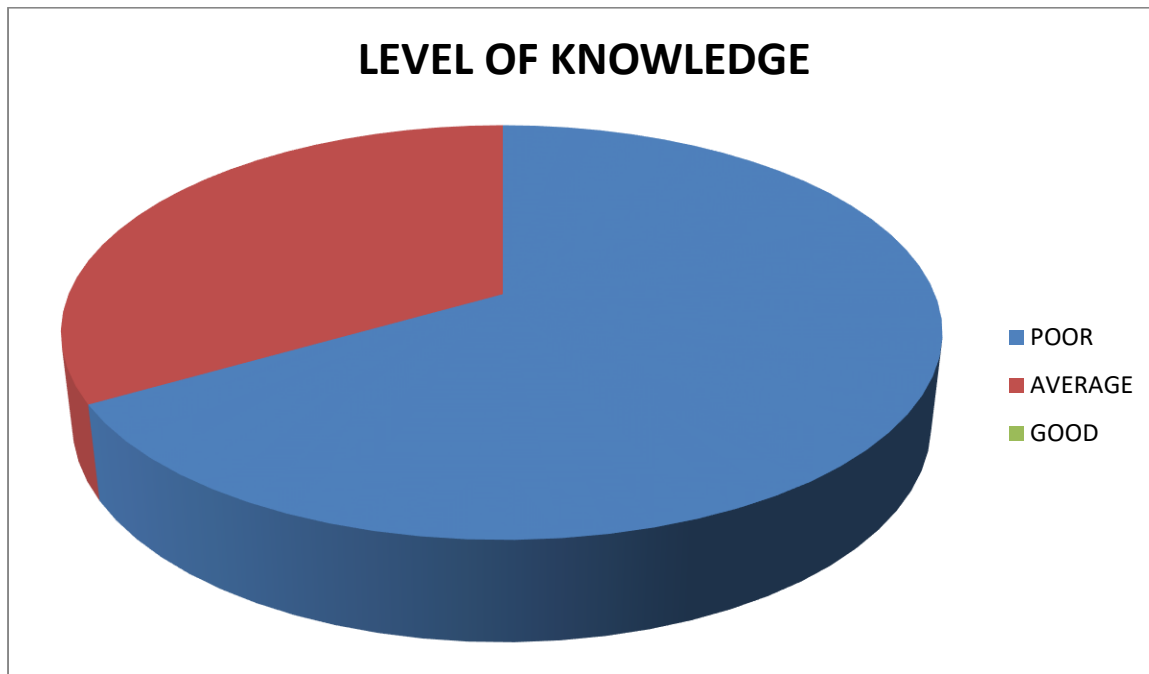


Figure 2: Level of knowledge of student nurses regarding SBAR communication

SECTION 3: DATA ON ASSOCIATION BETWEEN THE LEVEL OF KNOWLEDGE REGARDING SBAR COMMUNICATION AND THE SELECTED SOCIO DEMOGRAPHIC VARIABLES OF STUDENT NURSES

HYPOTHESIS

H₁: There will be significant association between the level of knowledge regarding SBAR communication and the selected socio demographic variables of student nurses

H₀: There will be no significant association between the level of knowledge regarding SBAR communication and the selected socio demographic variables of student nurses.

Table 3: Association between the level of knowledge regarding SBAR communication and the selected socio demographic variables of student nurses.

SI NO	DEMOGRAPHIC VARIABLES	LEVEL OF KNOWLEDGE			CHI-SQUARE CALCULATED VALUE	TABLE VALUE	INFERENCE
		P	A	G			
1. GENDER							
	MALE	1	1	0	0.331	5.49	NO SIGNIFICANCE
	FEMALE	29	14	0			
2. RELIGION							
	MUSLIM	1	0	0	0.63	9.49	NO SIGNIFICANCE
	HINDU5	3	0	0			
	CHRISTIAN	24	12	0			
3. BOARD OF EDUCATION							
	CBSE	3	0	0	2.22	12.59	NO SIGNIFICANCE
	ICSE	4	1	0			
	STATE	21	13	0			
	OTHERS	2	1	0			
4. PARTICIPATION IN SCHOOL CLUBS							
	NSS	10	4	0	1.25	12.59	NO SIGNIFICANCE
	JRC	4	1	0			
	SCOUT &GUIDE	3	3	0			
	NONE	13	7	0			

5 .PERMANENT**RESIDENCE**

URBAN	7	6	0	1.33		5.99		NO
RURAL			23	9	0			SIGNIFICANCE

6. NUMBER OF**SIBLINGS**

0		0	0	0				
1			14	9	0	0.95	9.49	NO
2& ABOVE			16	6	0			SIGNIFICANCE

7. TYPE OF**FAMILY**

NUCLEAR		24	13	0				
JOINT		2	2	0	2.59	9.49		NO
EXTENDED		4	0	0				SIGNIFICANCE

8. PREVIOUS**KNOWLEDGE**

YES		1	0	0	0.562	5.99		NO
NO		3	14	0				SIGNIFICANCE

INFERENCE

Table 3 shows the association the association between the level of knowledge regarding SBAR communication and selected socio demographic variables such as gender , religion , board of education , participation in school clubs , permanent residence , number of siblings , type of family , previous knowledge.

The calculated value (chi-square) of all the socio demographic variables were lower than the table value ($p>0.05$) at level of significance. Hence there was no significant association between the knowledge of

student nurses regarding SBAR communication and selected socio demographic variables. The research hypothesis was rejected for this variables and null hypothesis was accepted.

DISCUSSION, SUMMARY AND CONCLUSION

DISCUSSION

The discussion of the findings is a much more subjective section of a research report than the representation of their feeling. In the discussion of the feelings the researchers discuss aspects of the results that are in agreement and those that are not in agreement with the previous research and theoretical explanation.

The study was done to assess the knowledge regarding SBAR communication among student nurses in a selected College of Nursing Kannur district.

In the present study majority 43(95%) of student nurses were females and in the age group of (21-23) years.

Similar findings were observed in a study conducted by Meera.sAchrekerEtal (2016) on Introduction of SBAR into nursing practices. This study revealed that the majority of the nurses were female (65%) and in the age group of 21-30 years.

In the present study, majority 32(71.1%) of student nurses were from rural area. Majority 44(97.7%) had no previous knowledge about SBAR communication.

A similar study was conducted byBinjuRaju (2016) on knowledge regarding the use of communication board in communicating with mechanical ventilated patients among ICU staff nurses. The study showed that the majority of 114 (54%) nurses were from urban residence nurses.Majority 132(63%) of ICU staff nurses had adequate knowledge regarding use of communication board in communicating with mechanical ventilated patients.

In the present study majority 30(66.6%) of samples had poor knowledge so the researchers decided to prepare a pamphlet on SBAR communication for the student nurses.

SUMMARY

The present study was to assess the knowledge regarding SBAR communication among student nurses in a selected College of Nursing Kannur district.

OBJECTIVES

- ❖ Assess the level of knowledge regarding SBAR Communication among student nurses
- ❖ Find the association between the level of knowledge SBAR Communication and the selected socio-demographic variables of student nurses.

HYPOTHESIS

H₁- There will be significant association between the knowledge regarding SBAR communication and the selected socio-demographic variables of student nurses.

H₀- There will be no significant association between the knowledge regarding SBAR communication and the selected socio demographic variables of student nurses.

FINDINGS

Objective -1

The study findings show that 30(66.6%) of samples had poor knowledge and 15(33.3%) samples had average knowledge.

Objective-2

The study revealed that calculated chi square values of gender (0.331), religion (0.63), board of education (2.22), participation of school clubs (1.25), area of residence (1.33), number of siblings (0.95), type of family (2.59), previous knowledge (0.562). There is no significant association between the knowledge of student nurses regarding SBAR communication and the selected socio-demographic variables. The calculated value (chi square) of all the demographic variables were lower than table value ($p > 0.05$). The research hypothesis was rejected for this variables and null hypothesis was accepted.

IMPLICATION

Nursing Education

It consists of the theoretical and practical training provided to nurses with the purpose to prepare them for their duties as nursing care professionals. The nurse educator can orient the student nurses regarding the use of SBAR communication in clinical teaching. This technique can be included in the nursing curriculum. It is a way for health care professionals to communicate effectively with one another, and also allows for important information to be transferred accurately.

Nursing Administration

The concept of extended and expanded role of nurses offers many opportunities for administration. SBAR helps prevent breakdowns in verbal and written communication. The nurse administrator in hospital and in education institution can organize awareness programs on SBAR communication

Nursing Practice

Nurses are the key persons in the health care team who plan a vital role in the promotion and maintenance of health. SBAR communication helps the nurses to assure the quality of nursing care and it promotes patient safety and decrease the incidence due to communication errors.

Nursing Research

One of the main aims of the nursing research is to contribute the knowledge to the body of nursing and to expand and broaden the scope of nursing. SBAR is the new trend in communication technique therefore the nursing faculties should motivate the students to conduct the research on SBAR. The study's findings can be used to conduct additional research on similar topics.

LIMITATIONS

- The study was conducted only among 4th year B.Sc. nursing students of Canossa College of Nursing
- The was limited to assess the knowledge regarding SBAR communication.
- The duration of the study was two weeks.
- The generalization of study findings were limited due to small sample size

RECOMMENDATION

- A similar study can be done on a large sample in order to generalize the findings.
- A true experimental study can be conducted with structured teaching program regarding the knowledge of SBAR communication.
- A similar study can be conducted in different settings and in different age group.

CONCLUSION

The SBAR (Situation-Background-Assessment-Recommendation) technique provides a framework for communication between members of the health care team about a patient's condition. SBAR is an easy-to-remember, concrete mechanism useful for framing any conversation, especially critical ones, requiring a clinician's immediate attention and action. It allows for an easy and focused way to set expectations for what will be communicated between members of the team, which is essential for developing teamwork and fostering a culture of patient safety.

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