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Effective Communication Strategies between Nurses and Patients with Altered Airways in the Intensive Care Unit

Angela Carrato, RN, Rachel Daniel, RN, Beverly Merkel, RN, and Jon Myers, RN

Significance and Purpose

- To improve communication between nurses and patients with altered airways
- To better understand the perceptions of nurses regarding communication

PICO QUESTION

In adult ICU patients with altered airways, how does the use of a communication tool kit compared to current practices affect how nurses percieve communciation with patients?

Iowa Model Trigger

- **Problem Focused trigger**
 - Identification of Clinical Problem
 - Identified a clinical problem regarding communication with patient's with altered airways.
 - Important for patient satisfaction and patient outcomes.

EVIDENCE

- **Search Engine**= CINAHL Plus with Full Text
- **Key words**= communication, tool, scale, assess, total communication methods, instrument validation, clinical assessment tools, patient assessment, nurse-patient relations, patient-family relations, nurse attitudes, patient attitudes, nonverbal communication, communication aids for disabled, impaired verbal communication, communication barriers, ventilator patients, promoting effective communication for patients

EVIDENCE

- There is a need for unit based communication programs (Happ et al., 2015).
- Nurses feel that knowing the patient, the patient's ability to interact and use of communication devices as well as family presence facilitated communication (Happ, 2001).
- Picture boards improved communication between nurses and patients (Happ, 2001).
- Communication boards greatly decrease frustration levels compared to attempts to communicate without a communication board (Patak et al., 2006).
- In order to ensure continuity of care, nurses can pass on helpful communication techniques during shift report (Chlan et al., 2011).
- Gestures typically improve nonverbal communication; however gestures are inhibited due to restraints (Happ, 2001).

EVIDENCE

- The Critical care Pain Observation Tool (CPOT) has positive effects on pain assessment and management nursing practices in the ICU (Arbour et al., 2011).
- Healthcare professionals tend to interpret greater pain for verbal as opposed to nonverbal patients (Happ, 2001).
- Most common unrecognized symptoms in ICU are thirst, dry mouth, sadness and worry, hunger, lack of energy, insomnia, SOB, and pain (Happ & Harrington, 2006).
- The most common stressful experience in mechanically ventilated patients is being nonvocal. This leads to increased feelings of anger and fear (Khalaila et al., 2011).
- The sense of being loved and belonging was the most common need in the intubated patients (Liu et al., 2009).

EVIDENCE

- Patients felt comforted and less anxious when nurses communicated what they were doing to the patient, even if the patient was under sedation (Clukey et al., 2014).
- Slightly more than half of mechanically ventilated patients are awake and alert, or attempting to communicate (Happ et al., 2015).
- Families were not ready for and became upset by the challenges of communication and that although families were open to using AAC and the instruments were accessible, these methods were not utilized fully (Broyles et al., 2012).
- Found that during intubation patients were more satisfied with planned AAC rather than unplanned (Stovsky et al., 1988).

EVIDENCE

- Need for competency-based training and annual review of communication skills as well as a training program referred to as “vent camp” (Chlan et al., 2011).
- When nurses were educated on basic communication skills, the frequency of communication and positive nurse communication with intubated patients increased (Happ et al., 2013).
- Nurses need to be provided with education about communication and the negative consequences of failures in communication as well as instruction in how to utilize AAC in order to improve communication with nonverbal patient. Importance of telling the patient when the nurse does not know what the patient is trying to communicate. (Finke et al., 2008).
- Functional nursing assessment needs to be performed in order to determine the patient’s auditory acuity, visual acuity, handedness, muscle strength, language, and literacy (Grossbach et al., 2011).

EVIDENCE

- Phase 1: no additional training for nurses, usual care, little to know communication tools available
- Phase 2: 4 hour communication skill class, communication cart
- Phase 3: 4 hour communication skill class, 2 hour class on electronic AAC devices for nurses, communication cart, Speech Language Pathologist assessment and care plan
- Successfulness of communication exchanges were significantly greater in phase 2 and 3.
- Phase 3 patients perceived less difficulty with communication most-likely due to Speech Language Pathologist.

(Happ et al., 2014)

Nurse-Patient Communication Interactions in the ICU

- Descriptive observational study
- Video taped nurses and patients communicating. Patients were conscious and responsive but could not talk.
- Results: Nurses started 86.2% of communication. The best nurse behavior was eye contact. The concern was lack of success in 37.7% of exchanges regarding pain. There was also a lack of assistive communication tool utilization.

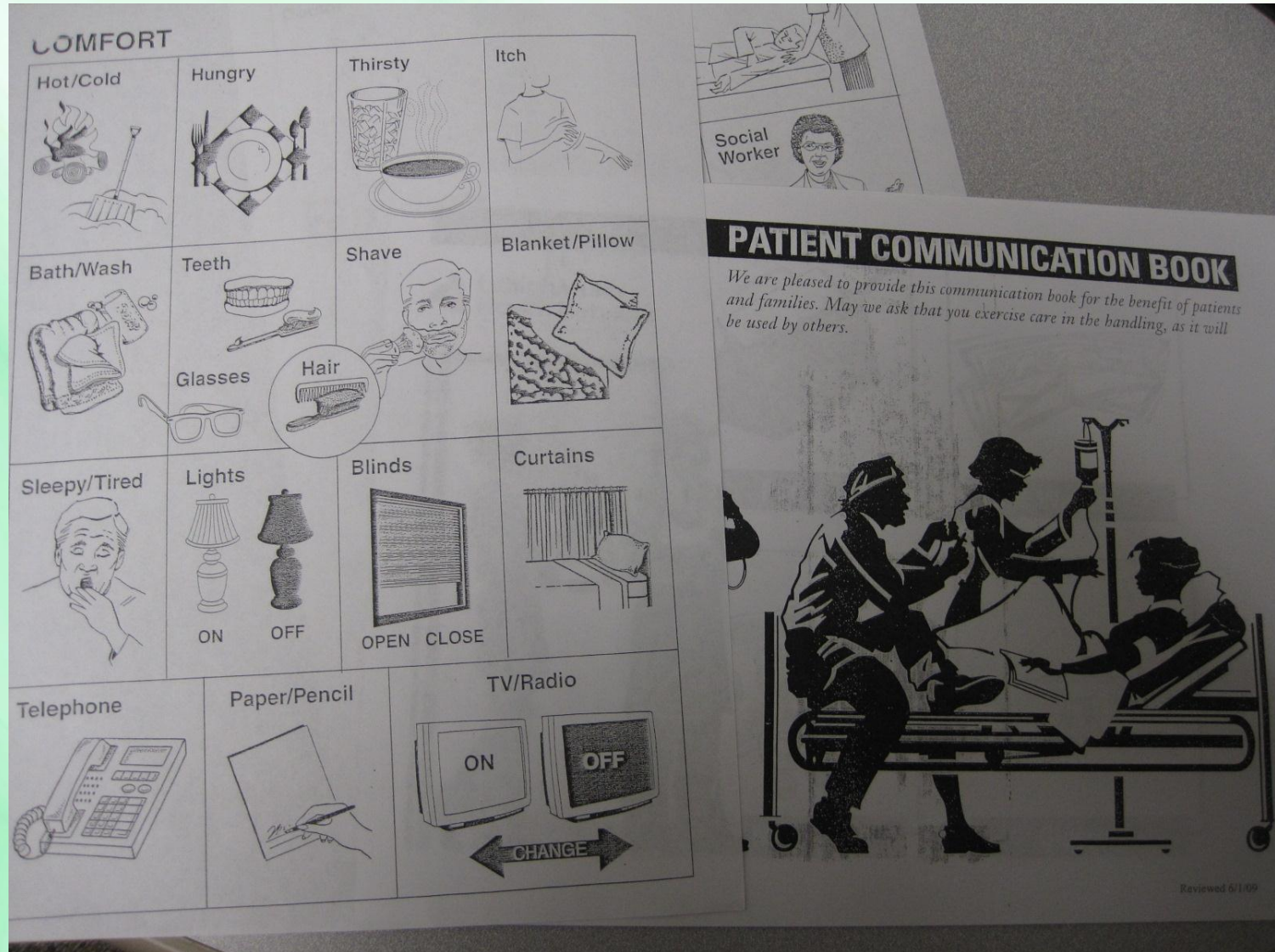
SPEACS

- Quasi-experimental three-phase sequential cohort design
- Studied and rated interactions between 10 nurses and 30 patients in the ICU through different stages which involved the Basic Communication Skills Training program, extra training with electronic assistive communication tools, and a speech-language pathologist.
- Results: The quasi-experimental sequential cohort design is a feasible substitute to the randomized control trial in the ICU environment.
- This study and the data gathered during it have been referenced and utilized in subsequent studies to further understand ICU communication.

Synthesis of Evidence

- General themes throughout the evidence include the need to assess pt's regarding their ability to and barriers with communication, the importance of tools to aid in communication, and the need to provide nurses with both education and tools regarding communication.
- Augmentative and alternative communication tools involve any methods used to communicate other than talking. Examples include electronics and communication boards (Broyles, Tate, and Happ, 2012).
- Communication tool kits have been developed and generally involve an assessment and assistive devices to aid in communication.

Current Practice at LVHN



Survey

- A survey regarding perceptions of current communication practices was completed by 52 nurses on MICU/SICU and 2KS.

RESULTS: Key Findings

- 58% of participants agreed or strongly agreed to the statement “I am often frustrated by communication with patients with altered airways.”
- 86% of participants agreed or strongly agreed that “Improving communication techniques would improve overall patient care and patient outcomes.”
- 62% of participants disagreed or strongly disagreed that “Changing communication techniques would not improve overall patient satisfaction.”
- 60% of participants disagreed or strongly disagreed that “Communication tools are not accessible on my unit.”
- 87% of participants agreed or strongly agreed that “If there was a communication tool in each patient room, I would be more likely to use it.”
- 90% of participants agreed or strongly agreed that “I would readily participate in a change to improve patient communication practices.”

Conclusions from Survey

- There is a level of frustration among the nurses due to ineffective nurse-patient communication.
- There is a need for a readily available and easy to use tool.
- There is a belief among nurses that better communication would result in better patient outcomes.
- Nurses appear to be receptive to a new practice change.

Implement Practice change

- Future change will involve adapting the current communication board to incorporate a separate board that can be removed to help patients with altered airways communicate.
- It will be important to keep the change simple and add to what we currently have in order to maximize the potential for success.

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