Background

- There was a perceived need stated by Task Supervisors at the Benedictine Living Community (BLC) to improve communication and team cohesion
- A 2010 Family Satisfaction Survey completed by 33 BLC family members had 13 comments about improving communication

Purpose

- The purpose of this Capstone project was to provide a staff development training that was research-based and educational
- The training focused primarily on communication with a secondary emphasis on team cohesion
- Training aimed to equip staff with skills and knowledge useful for working within various systems

Hypothesis

- By conducting a staff development training:
  - A higher level of care may be delivered to the residents at the Benedictine Living Community (BLC) of St. Peter, as staff develop improved communication skills
  - A decrease in staff turnover rates may be experienced as job satisfaction levels are increased
  - The financial impact to the BLC may be decreased as there may be less staff turnover

Literature Review

- Effective communication is fundamental to quality nursing practice—it is linked to patient satisfaction, adherence, and recovery (Mullan & Kothe, 2010)
- Effective communication can reduce staff feelings of resistance / anger that lead to lower morale, satisfaction, & productivity (Rubin, Balaji, & Barcikowski (2009)
- High staff turnover rates (see Figure 2)
- Inadequate communication and ineffective interdisciplinary teams have been associated with poor resident outcomes (Majerovitz, Molot, & Rudder, 2009; Krzys, 1996)
- In 2005, Hoffman estimated that costs to recruit & train CNAs was $4,000 (Deutschman, 2005)
- Training should be participatory and utilize experiential methods; role playing, small group activities & visual aids (Chant, Jenkinson, Randle, Russell, & Webb, 2002)
- Time spent on communication skills training in private settings were found to be short in duration; several hours over a few days (Chant, et al., 2002)
- Effective communication model: (see Figure 1)

Methodology

Step 1: Interviewed professional staff at BLC to determine need
- Visits and interviews conducted at 2 Long Term Care Facilities

Step 2: Conducted a literature review
- Found evidence to support conducting training
- No specific communication trainings were applicable

Step 3: Original training developed—(see Figure 3)
- Research from the literature review was incorporated
- 24 Slide Power Point
- Recruited Carol Gunderson, RN with 30 years experience

Step 4: Met with staff to determine training date/time
- July 8, 2011 from 1:30-2:30
- Non-mandatory training

Results/Limitations

- 23 staff from various positions attending the staff development training
- Staff participation was active in small groups
- Staff participation decreased during large group discussion and direct questioning
- All staff received a handout of the power point presentation
- Staff were given a Communication Style Test (Santo Pietro & Ostuni, 1997) to complete and turn in to co-facilitator
- No pre or post test was administered

Ethics/Diversity/Rural Communities

- Staff need to maintain the resident’s confidentiality
- Project was believed to help an ethical concern, (residents not receiving the highest level of care)
- Staff need to adhere to laws that protect the residents/Vulnerable Adults from abuse & neglect
- Research showed that there are a higher proportion of elderly living in rural areas with poorer health conditions & higher poverty= a growing need for services
- How diversity can impact communication was discussed in the training

Recommendations

- Co-facilitator or other vested participant to continue training
- Develop a pre & post test
- Continue to monitor residents/families for improvements

References

Available upon request

Figure 1

Communication Model: Rubin, Balaji, & Barcikowski (2009)

Figure 2

Turnover Rates in Long Term Care Facilities

Figure 3

Communicating with individuals with Alzheimer’s Disease

- Show a warm, loving manner of fact
- Hold the person’s hand
- Be open to concerns, even if they are hard to express
- Let the person make decisions and stay involved
- Be patient with angry outbursts, remember it is the illness talking
- Take time for yourself when feeling overwhelmed

(From: Alzheimer’s Disease National Institute on Aging. 2016)

Available at: www.nia.nih.gov/Alzheimer's

“Improving Communication and Team Cohesion in a Long Term Care Facility”

Jen Watson, LSW

Department of Social Work

Minnesota State University, Mankato