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Improving Nurse-patient Communication Through Motivational Interviewing in a Step-Down Unit

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Walden University

College of Nursing

This is to certify that the doctoral study by

Ana Becker

has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

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Walden University
2023

Abstract

Improving Nurse-patient Communication Through Motivational Interviewing in a
Step-Down Unit

by

Ana G. Becker

MS, University of Phoenix, 2016

BS, Barry University, 2001

Project Submitted in Partial Fulfillment
of the Requirements for the Degree of
Doctor of Nursing Practice

Walden University

May 2023

Abstract

Patient satisfaction is an essential component in assessing the quality of nursing care. Often monitored through patient satisfaction surveys, this doctorate in nursing practice project (DNP) was developed to improve the problem of low Press Ganey nurse-patient communication scores for a medical-surgical step-down unit. The aim of the project was to develop a staff education program for the purpose of introducing motivational interviewing as an intervention to improve nurse-patient satisfaction scores. Lewin's change model, Knowles' adult learning theory, and the analysis, design, develop, implement, and evaluate (ADDIE) model were used to guide the development of the DNP project. Conducted over three different sessions, a total of 15 staff nurses participated in the staff education program. Pretest and posttest exams were administered before and after the program. A paired t test showed a significant improvement from a pretest mean score of 46.97 to a posttest mean score of 62.33. Summative evaluation feedback provided by participants indicated all excellent and positive engagements. Potential implications for positive social change include raising awareness among nursing staff on how communication with patients influences quality of care and patient satisfaction.

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Dedication

I want to thank my family and God for making it possible for me to complete this project, but most of it I want to thank my preceptor and the facility where I can finish my project. I dedicate this project to my mother and father that have made it possible for me to finish my education and grow in my profession by assisting me through challenging times through my education and profession. My parents are the ones that gave me a foundation for me to go through my education and grow my profession.

I want to mention and thank my significant other. You have been an excellent supporter and assistant for me to go through all the challenges that life has put on my way to challenge my education and profession. As those challenges got harder to make it possible for me to break through them and meet the goal I had, and I want to thank you for that. You are my biggest supporter and thank you for everything you have done for our family.

My motivation to grow my education has always been my daughter and making it better for her to grow professionally and personally. My daughter would have to understand that the motivation I had was to achieve my goal in my nursing career as a leader or educator to make sure that she also achieves the goal that she desires. Remember sweet daughter of mine that you can achieve anything that you want in this world, and that nothing is impossible. There is always a solution to everything.

Acknowledgments

I want to acknowledge my chair, Dr. Edna B. Hull, for being my supporter and guiding me through this project. Thank you for giving me all the time you have on our phone calls and leading me through this process of becoming a Doctorate in Nursing. You have been an excellent mentor and chair for this project. I also want to acknowledge my second committee member Dr. Mirella Brooks for also leading me through the final steps of this project. Thank you for the time that was given to me to develop in becoming a Doctorate in Nursing. I also want to thank university research reviewer, Dr. Jody Minnick and our Program coordinator, Dr. Dianne Whitehead for their input and advice during the final steps of this project. I will always be immensely grateful to you all for what you have done and never forget it.

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Section 1: Nature of the Project

Introduction

I designed this Doctor of Nursing practice (DNP) project to address the practice problem of low Press Ganey scores occurring on a step-down unit. While patient satisfaction scores were routinely monitored by the step-down unit staff, scores that were dropping consistently were Press Ganey nurse-patient communication scores. As reported in the literature, Press Ganey surveys indicated that strong nurse communication was a major factor driving the patient care experience (Ryan, et al., 2017). Motivational interviewing (MI) is an intervention that has been shown to improve nurse-patient communication through the process of listening, affirming, reflecting, summarizing, and providing information or advising (Östlund et al., 2016). As an intervention, MI has the potential to improve nurse-patient communication ensuring positive Press Ganey survey scores.

This DNP project has the potential for impacting positive social change by raising awareness on how motivational interviewing as an evidence-based approach was used to change negative behavior. Defined as a person-centered strategy, motivational interviewing is used to help others explore their feelings in search of their own motivations (Östlund et al., 2016). Motivational interviewing was applied to this DNP project by the staff nurses practicing this intervention to help find the motivation needed to make a positive change. This change will improve patient satisfaction which in turn will improve nurse-patient communication. This capstone project correlated with DNP Essentials I and II, which are the scientific underpinnings for practice and organizational

and systems leadership for quality improvement and systems thinking (American Association of Colleges of Nursing [AACN], 2006).

I designed this DNP project to address the practice problem of low patient satisfaction survey scores. Reported through Press Ganey patient satisfaction surveys, scores for the last year for this step-down unit had been consistently low. This was particularly true for survey scores measuring nurse-patient communication. With a facility benchmark that was set to achieve a minimum score of 75% for patient satisfaction scores, the past surveys for the step-down unit indicated 33% for the criterion of *'nurses listen carefully to you'* and a rating score of 0% for the hospital metric *'nurses explain in ways you understand'* (D. Beljin, personal communication, October 19, 2021). In addition to the quantitative findings, narrative survey results had included patient comments such as "The discharge medications were not explained to me and I do not know what to take," "The nurses do not know what they are doing," "Some of the nurses come in and give medications and do not explain what they are for," "Some of the nurses do not explain what the plan is for us," (Y. Rodriguez, personal communication, May 22, 2022). Findings from the past survey results indicated a need to improve patient satisfaction scores and in particular measures to improve nurse-patient communication. Poor nurse-patient communication negatively affects health outcomes and results in patient dissatisfaction with care delivery.

An increasingly key factor in explaining patient expectations of care, it was important to assess and monitor nurse-patient satisfaction for several reasons. For example, evidence indicates that improving communication between nurses and patients

and involving patients more closely in their care resulted in greater adherence to the patient plan of care (Ali et al., 2016). Additionally, strengthening nurse-patient communication is associated with fewer hospital readmissions (Maatman et al., 2020) and thus, patient health improvement. Focusing on nurse-patient communication has the potential for improving other hospital performance measures such as discharge planning and the hospital environment (Maatman et al., 2020). Last, nurse-patient communication has been shown to be a characteristic of high performing hospitals (Riley et al., 2010).

Patient satisfaction is an important phenomenon in healthcare with nursing services playing a significant role. Recognizing this factor, I designed this DNP project for the purpose of developing and implementing a staff education program on the use of motivational interviewing as an evidence-based, patient-centered approach for improving nurse-patient communication scores. Motivational interviewing is defined as a collaborative, goal-oriented style of communication with attention given to the language of change (Östlund et al., 2016). With the goal of achieving positive patient care outcomes, motivational interviewing uses open-ended questions, affirmations and reflective listening as techniques used by nurses to build supportive relationships between patients and their healthcare providers. Motivational interviewing also empowers patients for effective management of their health condition (Östlund et al., 2016). Engaging patients using motivational interviewing creates an opportunity for the nurse to hear the patient's voice while the patient's behavior changes by becoming a more active participant in their healthcare.

Purpose Statement

Related to the problem of low Press Ganey nurse-patient communication scores, the purpose of this DNP project was to develop, implement and evaluate a staff education program on motivational interviewing. The practice question guiding this project was: ‘Will an instructional program improve the knowledge of staff nurses on the process of motivational interviewing?’ The low Press Ganey scores can affect the quality of care and negative patient outcomes related to nurse-patient communication. MI is an intervention that addresses nurse-patient communication skills and behaviors recognizing feelings, compassion, and empathy by the nurse and patient working together towards one goal which was improving nurse-patient communication. Nurse-patient communication then improves patient satisfaction scores.

In this DNP project, I had the potential to address the gap in practice in the step-down unit concerning low Press Ganey scores related to nurse-patient communication. Using MI as an intervention, I developed an educational program to assist the staff in understanding the importance of nurse-patient communication. Developing communication skills to build nurse-patient communication is crucial for the improvement of the Press Ganey survey scores and scores related to nurse-patient communication. An educational program based on improving Press Ganey scores based on the key components of compassion and empathy by treating patients with courtesy and making them feel comfortable and welcomed to their surroundings is therapeutic to patients.

Nature of the Doctoral Project

Sources of evidence to answer the practice question were generated through a review of the literature on the topic of motivational interviewing. Major databases searched for the project included Medline, PubMed, Cumulative Index to Nursing and Allied Health Literature (CINAHL), and Google Scholar. To ensure currency, the search was limited to sources published between 2017 to 2022. Additionally, the selection of sources included sources published in English and those defined as primary and secondary sources. Primary sources were broadly defined as the information received directly from the author (Al-Jundi & Sakka, 2017). Examples of primary sources included scholarly articles, studies, clinical reports, dissertations, and case studies. Similarly, secondary sources included information gathered from sources other than the author (Al-Jundi & Sakka, 2017). Examples of secondary sources included articles, expert opinions, biographies, eBooks, and literature reviews. Key search terms used to locate sources included motivational interviewing, patient experience, patient satisfaction, compassion, empathy, nurse-patient communication, motivational interviewing in the acute care setting and/or in a step-down unit.

In consultation with the university library liaison, specific procedural steps for conducting the literature review included refinement of the practice question, identification of the scope of the evaluation, definition of explicit inclusion and exclusion criteria for selecting sources, and performance of a comprehensive search of the literature that located relevant studies using electronic search engines. Additionally, the review included analyzing, synthesizing, and reporting findings to answer the practice-focused

question. Content from the review was used to develop a staff education program as well as pretest and posttest exams on motivational interviewing.

Significance

Stakeholders for this DNP project included patients, family members, management and leadership, and nurses on the step-down unit. The patient's experience impacted through the relationship and trust is created through nurse-patient communication. The patients and family members encounter a relationship with their nurse through communication-related to the patient's plan of care and improved the patient's outcomes. Management and leadership improve nurse-patient communication by providing the necessary resources or education needed to improve patient satisfaction in the step-down unit. Finally, the nurses assigned to the step-down unit will develop better trusting relationships with their patients and families using MI to improve nurse-patient communication.

The stakeholder's involvement is crucial for the implementation and success of the MI intervention for nurse-patient communication. Every project has the potential for changing practice. Findings from this DNP project have the potential to show that MI can improve nurse-patient communication. The DNP project shows the significance in nursing practice using evidence-based sources to improve Press Ganey scores which in turn improves nurse-patient communication in the step-down unit. Improving nurse-patient communication in the step-down unit through MI as an intervention learned by staff improves the quality of care through this DNP project.

In this project, I used motivational interviewing as an intervention to address the problem of low Press Ganey nurse-patient communication scores. MI is used as an empathetic approach for obtaining positive social change (Lange & Tigges, 2005), so I used MI for improving nurse-patient communication in the step-down unit. Through the intervention of MI, nurses who built a relationship with the patient that improved nurse-patient communication showed empathy, compassion, and positive outcomes. The approach that the nurse took when communicating with a patient about their behavior is important for achieving a positive outcome (Gary et al., 2022). According to Tobase et al., (2021), it is essential that nurses have empathetic listening skills, which helps the patient see the changes that are needed. Using motivational interviewing, the nurse expresses empathy which helps the patient gain trust in the nurse-patient relationship. MI intervention has the potential to impact patient satisfaction scores through better nurse-patient communications.

Summary

In this first section, I described the practice problem, purpose and nature of the doctoral project, and significance of the educational program for MI to increase Press Ganey nurse-patient communication scores on the step-down unit. Nurse communication plays a critical role in patient satisfaction and as a result can improve Press Ganey satisfaction scores. Section 2 of this project includes models and theories that I used to guide the DNP project and I will explain, the relevance and the development of this project.

Section 2: Background and Context

Introduction

Patient satisfaction is an important indicator of quality of care and service delivery. I designed this DNP project to address the practice problem of low Press Ganey patient satisfaction scores on a step-down unit. I focused on the problem of low nurse-patient communication survey scores. Using motivation interviewing as an intervention, I answered the question: Will a staff education program improve the knowledge of staff nurses on the process of motivational interviewing? Section 2 of this DNP project includes the concepts, models and theories informing the project. Additionally, this section includes the relevance of the project to nursing practice, a summary describing the background of the problem, and details describing me.

Concepts, Models, and Theories

Theories and models guiding this project included Kurt Lewin's three stage change model (Roşca, 2020), concepts from Malcolm Knowles' theory on adult learning (Knight, 2020), and the ADDIE (analysis, design, develop, implement, evaluate) model (Jeffreery, et al. 2016). Concepts from Lewin's change model and Knowles' adult learning theory served as visual maps for understanding the broader practice problem and thus the need for a practice change. This DNP project used the ADDIE model support the design of the staff education program.

According to Roşca (2020), the rationale behind using Lewin's change model is that there was a need to be a purposeful change in the step-down unit to improve nurse-patient communication. This model is used to assess potential changes that build a solid

foundation and consistency in the step-down unit through the stages of unfreezing, changing, and refreezing (Roşca, 2020). According to Burnes (2020), by applying Lewin's model, the focus is on "driving forces (those forces supporting the change), restraining forces (those forces against the change), and achieving equilibrium (decreasing the restraining forces and increasing the driving forces)" (p.34). These concepts promote positive changes such as the integration of motivational interviewing as an intervention to improve nurse-patient communication.

Lewin's model includes the unfreezing change, the change phase, and the refreezing change as indicated in Table 1. The unfreezing change in the step-down unit focused on the instructional stage of motivational interviewing with nursing staff understanding of the needed change in nurse patient communication. The change phase focuses on validation of the use of motivational interviewing with nurses using listening skills along with compassion and empathy when caring for patients. The refreezing phase focuses on sustaining the change with the use of motivational interviewing as an intervention.

Table 1*Stages of Lewin's Change Model as Applied to the DNP Project*

Stages	Actions to be Taken
Unfreezing	A major action to be taken is to provide an educational program influencing the need of change. The change requires understanding why using motivational interviewing and engaging high involvement of staff through incentives, motivating, and explaining the why towards the change are needed.
Change	This stage involves validating behaviors in the use of motivational interviewing through compliance and cooperation, and building champions of MI
Refreezing	This stage involves validating behaviors in the use of motivational interviewing through compliance and cooperation, and building champions of MI

Note. Adapted from Roşca, 2020 Table 1: Stages of Lewin's Change Model as Applied to the DNP Project

I used Malcolm Knowles' adult learning theory because it served as a lens for viewing the nurse as a learner in this DNP project. Knowles' theory when applied to this practice problem, supported the need for the nurse to improve their existing skills or learn new skills that can build on their existing knowledge base. According to Knight (2020), Knowles' adult learning theory was used in Knight's research as a guide for meeting the learning needs of the staff nurses as adult learners. Knight (2020) stated that adults have a self-directed framework that involves the adults having control of their learning.

Table 2 reflects principles of adult learning by Malcolm Knowles (Knight, 2020) and how these principles were applied to this DNP project. Knowles' theory focuses on adult learner's need to know, building self-concept, and their readiness to learn (Twaddell, 2019). Nurses are constantly learning, and increasing their knowledge through continuing education, certification, achieving advanced degrees, and other learning

methods. Knowles' theory also includes other elements: a readiness or applicability of the information to one's life situation, motivation to learn, and problem-centered learning with real-life problems that contribute to a change in behavior (Kang et al., 2022).

Table 2

Knowles' Adult Learning Principles as Applied to the DNP Project

Knowles's Adult Learning Principles	Application to Staff Education Program on Motivational Interviewing
Adults need to be involved in the planning and evaluation of their instruction	A pretest will be done to assess the needs of the staff on nurse-patient communication, and MI
Experience, including mistakes, provides the basis for learning activities	Building on previous experience, I will ask the staff at the end of the pretest what their experience has been with nurse-patient communication? I will also ask the staff on why they think there is a problem behind the experience they had with low patient satisfaction scores?
Adults are most interested in learning content that has immediate relevance to their job or personal life	I will ask the staff how we can apply MI? How can MI help in their everyday clinical practice?
Adult learning is problem-centered rather than content-oriented	Describe the problem with the staff, and ask them what experience have driven the negative outcome in the nurse-patient relationship in the step-down unit and/or give them a case where the nurse-patient relationship had a negative outcome

Note. Adapted from Knight 2020 Table 2 Knowles's Adult Learning Principles Applied to the DNP Project

Lewin's change model and concepts from Knowles' theory on adult learning focused on the adoption of motivation interviewing as an intervention to improve nurse patient communication. Lewin's model and Knowles' theory were used to direct the staff's understanding on the practice problem of low nurse-patient communication scores and on how motivational intervention improves nurse-patient communication. The staff

education program addressed the support the staff needed to understand measures to improve nurse-patient communication. Lewin's model motivated a change in a process that needed to be unfrozen , and then refrozen to continue consistency. The motivation in the staff assisted in making the change that was needed to improve the Press Ganey scores related to nurse-patient communication using MI.

Finally, incorporating the ADDIE instructional model in this DNP project supported the design of the staff education program (Jeffrery, et al. 2016). The ADDIE instructional model includes five stages: analysis, design, develop, implement, and evaluate. Using the stages of the ADDIE model to guide development of the DNP educational project represented each component to represent a stage used in the design of the staff education program on motivational interviewing. Table 3 reflects each stage of the model and specific actions applied in developing, implementing, and evaluating the staff education program (Hasfal, 2018).

Table 3

Steps of the ADDIE Model as Applied to the DNP Project

ADDIE Model Step	Actions to be Carried Out
Analysis	Analyze sources justifying need for the project
Design	Design proposal, conduct literature review, identify program objectives
Develop	Create oral presentation, program flyer, pretest, posttest, and summative evaluation
Implement	Delver PowerPoint Oral Presentation
Evaluation	Conduct Pretest and posttest Distribute summative evaluation tool

Note. Adapted from Jeffery (2006) Table 3 Steps of the ADDIE model Applied to the DNP Project

Relevance to Nursing Practice

Press Ganey surveys were started in 1985 by Dr. Irwin Press and Dr. Rod Ganey. With the goal of improving clinical outcomes, Press Ganey surveys were mailed to patients within a few days following a hospital visit. The survey questions were aimed at gaining insights regarding the patient care experience and care rendered. After the start of the Press Ganey surveys, healthcare organizations used surveys to improve care of patients and satisfaction. Since development, responses were provided through surveys that had been used by healthcare providers to improve patient care and satisfaction. Collecting data on patient satisfaction was the key to improving outcomes in healthcare. As nurses spend more time with patients than other providers, the patient experience with the nurse served as a major factor contributing to Press Ganey patient satisfaction scores.

This process was particularly true in measuring and monitoring survey scores that were used to improve nurse-patient communication.

A review of current literature published in the last 5 years were from evidence based studies in recent publications written by nurses addressing the issue of improving nurse-patient satisfaction. In a 2021 study, Happ (2021) described how nurses used their own or the patient's mobile devices, markers and paper or dry-erase boards, and messages posted on glass windows to facilitate communication. Granados-Gamez et al. (2022) designed and evaluated the psychometric properties of an instrument that analyzed the communication of nurses in nurse-patient communication. Outcomes from the study produced a valid and reliable instrument that can be used to measure nurse communication with patients in the clinical setting (Granados-Gamez, 2022).

Strategies that were used previously to improve nurse-patient communication included validations of the bedside shift report due to the positive outcomes that focused on patient safety and the centered care approach (Bressan, 2019). Bedside shift report was defined as a chance to build a partnership with the nurse developing physical and psychological safety (Bressan et al., 2019). In another study, hourly rounds had a positive impact with answering call lights and the strategy employed improving patient satisfaction (Mulugeta et al., 2020). An additional strategy had been the use of engagement, one-to-one with leadership, and involvement of staff trying to participate in gatherings to take care of the patients with a smile on their face (Kang, et al., 2019). Safety huddles were used in a study that the beginning of the shift showed some inconsistency in the patient satisfaction scores, but consistently the study showed that

patient satisfaction scores stayed between 80 and 88% (Lampman et al., 2021). Bunce (2018) asserts that for nurses to understand the meaning of nurse-patient communication, the nurse needed to begin by understanding the patient's needs, habits, and patterns. While cited in the literature, these strategies were not consistently implemented in the step-down unit. Due to the recent pandemic, implementation of these strategies was challenging resulting in delays for any initiative aimed at improving Press Ganey nurse-patient satisfaction scores on the step-down unit.

In summary, the combination of relational and technical components included in MI showed empathy, and compassion assuring the patient's trust and a safe environment. Schumacher and Madson (2015), described MI as a counseling approach. In this capacity MI is person-centered, collaborative, and focuses on strengthening a patients' motivation and commitment to change behavior. MI focuses on the patient's perception of the problem, the patient's concerns, and gives the patient the autonomy to reach a solution to their problems.

Local Background and Context

Low Press Ganey patient satisfaction scores had been a persistent problem on this step-down unit. This was particularly true in survey scores related to nurse-patient communication. It was important to address nurse-patient communication because it gave the nurse the opportunity to connect with the patient, gave patients the opportunity to be involved in their own plan of care, and maintain positive outcomes. Nurse-patient communication is fundamental for the trust that is earned by the nurse to care for the patient (Dempsey et al, 2014). Effective nurse-patient communication contributes to a

safe and better quality of care with positive outcomes. As related to this project, effective nurse-patient communication has the potential to improve patient satisfaction survey scores related to the needs of the patients for empathy, compassion, and feeling like they were important. Granados-Gamez et al. (2022) asserted that MI assisted with therapeutic communication because it took on the characteristics involving collaboration, evocation, acceptance, and compassion.

The facility's guidelines for the evaluation of the context of nurse-patient communication required some consistency making that connection with the patient and making sure that the patients were being informed of their plan of care. Based on the previous Press Ganey scores, the nurses were not being consistent with nurse-patient communication. Press Ganey patient satisfaction scores had consistently shown that nurse-patient communication was in the first percentile rank. Specifically, nurse-patient communication scores showed consistency in the first quarter of 2021 at 65% (D. Beljin, personal communication, May 10, 2022). The scores later dropped to 35% in the first quarter of 2022. Again, the consistency of the personal connection between patient and nurses affected the nursing communication scores in 2021 of the first quarter with a 55% percentile rank and a decrease in the first percentile rank in 2022. A critical note was that the decline in nurse-patient communication scores for the step-down unit was the lowest score for the facility.

Role of the DNP Student

This DNP student served as former director of the step-down unit and leader of the doctorate project. As the former director there seemed to be some questions about

being biased, but due to the turnover in the unit all staff in the step-down unit are new nurses. Section 2 of this DNP project includes the concepts, models and theories informing the project. Working with Walden University's library and Writing Center staff I searched for evidence-based sources. The evidence-based sources were used to identify the best MI practices to improve nurse-patient communication. Additional responsibilities included achieving ethical approval of the project. In conclusion, as the project leader, I was responsible for submitting the Institutional Review Boards (IRB) application and applying all the necessary resources needed for development, implementation, and evaluation of the educational program for improving nurse-patient communication through motivational interviewing on the step-down unit.

As the leader of the DNP project and the former director of the step-down unit my role included educating, mentoring, and evaluating the use of MI for the improvement of nurse-patient communication to increase patient satisfaction scores. I had a direct responsibility to support the nurses and the organization through a transition of change to improve and increase nurse-patient communication scores that have been declining consistently and ranked in the first percentile level. This problem had been a concern that compromises the step-down unit and the self-confidence of the staff working on the unit to keep our patients safe. This DNP project had the potential to improve the confidence of the nurses and the staff to increase positive health care outcomes and patient satisfaction in the step-down unit.

Summary

Nurse-patient communication was a challenge for this step-down unit. Lack of nurse-patient communication skills had led to the patient satisfaction scores consistently being in the first percentile rank for the past two years. Section 2 discussed Lewin's model as a guide for changing practice. Knowles' theory guided the education program through its focus on facilitating nurses through self-direction. The ADDIE model served as a guide for developing and implementing the staff education program. Implementing the educational program in the step-down unit affected nurse-patient communication in a positive way by improving patient satisfaction scores. This DNP project assisted staff nurses to practice to their full potential and bring job satisfaction to the unit staff. Section 3 of this project addressed the development of this DNP evidence-based educational program, and analysis of evidence that was used to answer the practice-focused question for this project.

Section 3: Collection and Analysis of Evidence

Introduction

Patient assessment and evaluation of care are important as these factors provide an opportunity to improve patient outcomes and service delivery. This DNP project addressed the problem of low Press Ganey nurse-patient communication scores for a step-down unit. Section 3 of the project focuses on the collection and analysis of data. More specifically, this section includes a statement of the practice-focused question, identification, and discussion of sources of evidence generated to answer the practice-focused question. Also included in this section are the methods that were used to collect, analyze, and synthesize data to answer the practice focus question³.

Practice-Focused Question(s)

This DNP project was designed to focus on the problem of nurse-patient communication in a step-down unit in a large medical center. More specifically, Press Ganey nurse-patient communication scores for the unit were below the facility's set expected goal requirement. This deficit can compromise quality of care and negatively impact patient outcomes. Using motivational interviewing as an intervention to address the low survey scores, the practice-focused question guiding this DNP project was: *will a staff education program improve the knowledge of staff nurses on the process of motivational interviewing?* Broadly speaking, motivational interviewing (MI) is defined as "an effective technique to positively impact behavior change" (Breckenridge et al., 2021, p. 618). Recognizing the gap in practice on the need to improve patient satisfaction scores, motivational interviewing served as an intervention to improve nurse-patient

communication. Simply put, there needs to be awareness among staff nurses on how communication with patients influences quality of care and patient satisfaction.

The purpose of this DNP project was to design and implement a staff education program on motivational interviewing – an intervention designed to improve nurse-patient communication in the step-down unit. The staff education program on MI aligned with the practice focus question as MI had been shown to promote behavior change (Newman-Casey, 2018). This DNP project promoted the delivery of important communication processes through MI with the goal of achieving positive outcomes in patient satisfaction scores.

Sources of Evidence

This project was designed to develop a staff education program for nurses on the use of motivational interviewing – an intervention that was used to improve Press Ganey nurse-patient communication scores. Beginning with a search of the literature to locate content for the staff education program, primary and secondary sources of evidence were selected from multiple databases including Medline, PubMed, CINAHL and Google Scholar. Additionally, concepts from Lewin’s change model, Knowles’ adult learning theory, and the ADDIE model were used as sources of evidence to meet the aim of this DNP project. Sources of evidence included a review of evidence-based journals and peer reviewed journals that included editorials, position statements, and professional organizational websites. Specifically, these sources were used to guide the collection and analysis of literature on the topic of motivational interviewing. These sources were also used to design the instructional program and used in the creation of a pretest, posttest,

and summative evaluation tool. Collectively, these sources were used to close the gap in practice on low Press Ganey scores and needed improvement of nurse-patient communication scores.

Evidence Generated for the Project

Evidence generated for this DNP proposal were presented and discussed under the headings: participants, procedures, and protections. More specifically, using the ADDIE model as a guide, plans for developing and implementing the staff education program are discussed.

Participants

Participants for this DNP project consisted of all staff nurses who worked on the step-down unit in a Southwestern organization. Registered Nurses (RNs) were selected because they were the target audience responsible for care delivered and later evaluated by patients through patient satisfaction surveys. An announcement (Appendix A) and a flyer (Appendix B) to recruit staff for the program were given to the director and manager to post in the nurse's lounge on the step-down unit. Staff nurses as participants had a direct impact on nurse-patient communication to improve patient satisfaction scores.

Procedures (Planning, Implementation, and Evaluation)

Procedures for this DNP project included the following: (1) conducting a literature review on motivational interviewing and Press Ganey patient satisfaction surveys, (2) creating a staff education PowerPoint presentation, (3) developing a pretest/posttest exam, (4) and creating a summative evaluation tool. These procedures

assisted with the development of the staff educational program to improve nurse-patient communication with the use of MI. The literature review served as a foundation for the education program on MI. More specifically, the evidence-based sources generated from the literature review supported development of the pretest, PowerPoint presentation, posttest, and the summative evaluation tool.

The pretest/posttest exams were used to assess knowledge attainment of the nurses on the step-down unit with nurse-patient communication improvement using MI. Appendix C (Pretest), Appendix D (Posttest) and Appendix E (summative evaluation) were used to assess knowledge gains and overall satisfaction with the staff education program. Beginning with a pretest, a PowerPoint education program followed and was delivered over a 1-hour period. Open discussion and a question-and-answer period followed the presentation. Both pretest and posttest exams included 10 questions each focusing on the educational program based on nurse-patient communication through MI. Each question was worth 10 points totaling 100 points. At the end of the posttest, participants also completed a summative evaluation.

The purpose of this DNP project was to design and implement a staff education program on motivational interviewing – an intervention designed to improve nurse-patient communication in the step-down unit. The staff education program was conducted in the unit conference room. The conference room was reserved for a period of 2 hours. The conference room had rectangular tables sitting 2 nurses per table for the presentation with the assistance of the clinical nurse managers. At the beginning of the educational program copies of the presentation were available for the staff nurses to use during the

presentation. Copies of the pretest, posttest and summative evaluation were also available for the staff nurse participants.

Protection

To move forward with the staff education program on the step-down unit, Walden University Institutional Review Board (IRB) approved the project following the proposal approval by the DNP committee (approval # 03-03-23-1019930). The staff education program for improving nurse-patient communication using MI on the step-down unit was announced for the unit staff nurses. Steps were taken to ensure the anonymity and confidentiality of participants and the organization. The chief nursing officer granted permission to implement a staff education program on the step-down unit for all RNs. In conclusion, all data collected during this DNP project was disposed of appropriately as per the policy of the university. All participant exams and evaluations were stored appropriately as per the policy of the university. Electronic data or files were stored appropriately on my personal computer hard drive that is password protected

Analysis and Synthesis

According to the American Association of Critical-Care Nurses (AACN), a DNP project is a data driven process (2015). Data collected for this project was generated through a literature review and the collection of pretests and posttest scores and summative evaluation findings. Sources of evidence generated from the literature review were collected, analyzed, and presented in a matrix table (Table 4). Results of the literature review were synthesized and then reported in narrative and table format. Pretest and posttest scores were analyzed using the Statistical Package for the Social Sciences

(SPSS), version 28. Exam scores were reported in narrative and table format to explain the changes in pretest and posttest scores. Differences between pretest and posttest exams were used to demonstrate knowledge gains resulting from the staff education program. Additionally, summative evaluation feedback provided by participants was reported in narrative format. And while the short-term goal was to improve knowledge gains of the staff nurses on the topic of motivational interviewing, the long-term goal was to improve Press Ganey surveys and in particular, nurse-patient communication.

Table 4

Literature Review Matrix Table

Author / Publication	Type of Source	Population / Sample	Intervention	Findings / Level of Evidence

Summary

Section 3 provided details of the evidence to be collected and analyzed to answer the practice-focused question for this project. The DNP project is an educational program developed for the step-down unit with the goal of improving nurse-patient communication skills using MI as an intervention. Section 4 of the DNP project provides a report of the findings and recommendations derived from the analysis and synthesis of data collected for this project.

Section 4: Findings and Recommendations

Introduction

This DNP project was undertaken to address the problem of low Press Ganey nurse- patient communication scores on a busy nursing step-down unit. In recent years, there has been an increased emphasis in measuring patient satisfaction in the United States. Historically Press Ganey surveys have been used to gather information about nursing care from patients with the goal of improving quality, safety, and experience of patient care. Adopting motivational interviewing (MI) as a strategy, a staff education program was developed to improve the knowledge of the unit nurses on the use of MI as an intervention to improve nurse-patient communication scores. Closing the gap between low Press Ganey nurse-patient communication scores and the need to improve the patient care experience, this DNP project was designed to answer the practice-focused question, *will a staff education program improve the knowledge of staff nurses on the process of motivational interviewing?*

Section 4 of the project includes findings and implications generated from the analysis and synthesis of evidence collected to answer the practice-focus question. Also included in section 4 are recommendations to narrow the gap-in-practice. Last, section 4 ends with a discussion addressing strengths and limitations of the project.

Findings and Implications

As stated previously, the practice-focused question guiding this DNP project was *will a staff program education improve the knowledge of staff nurses on the process of motivational interviewing?* Evidence gathered to answer the practice-focused question

originated from two (2) primary sources: an analysis and synthesis of the literature on motivational interviewing and scores generated from pretest and posttest exams. Findings resulting from the DNP project are presented under the headings of analysis and synthesis of the literature and pretest/posttest scores.

Analysis and Synthesis of the Literature

Sources of evidence addressing the topic of motivational interviewing were collected, analyzed, and synthesized. These sources of evidence were used to create content for the staff education program. Thus, focusing on the goal of locating current evidenced-based strategies on motivational interviewing, sources of evidence were collected that had been published between the years 2017 and 2022. Major databases searched for the project included Medline, PubMed, Cumulative Index to Nursing and Allied Health Literature (CINAHL), and Google Scholar. Searching primary and secondary sources, key terms used to search the literature included motivational interviewing, patient experience, patient satisfaction, compassion, empathy, nurse-patient communication, motivational interviewing in the acute care setting and/or in a step-down unit.

Six publications met the inclusion criteria for the review. Using Fineout-Overholt et al. (2010) as a resource to critically appraise evidence for integration into clinical practice, all six sources were reviewed and assigned a level of evidence. For example, five out of six sources ranked as Level V, systematic review of qualitative or descriptive studies (Carr, 2017; James, 2021; Kennedy, et al., 2016; Mallisham & Sherrod, 2017; Sawyer & McManus, 2021). One study reviewed was ranked as Level 1, systematic

review, or meta-analysis (Self, et al., 2022). A literature review matrix table (Table 5) was used to analyze sources of evidence on motivational interviewing as an intervention. These sources of evidence guided development of the teaching content and instructional strategies for the staff education program on motivational interviewing.

Table 5

A Sample Table Showing Correct Formatting

Author(s)	Level of Evidence	Type of Evidence	Methodology & Participants
Self, et al., 2022	Level I	Systematic Review	10 publications reviewed
Carr, 2017	Level V	Descriptive Study/Evidence implementation project	Care managers & nurses through a training program in motivational interviewing
James, 2021	Level V	Descriptive Study/Evidence implementation project	11 staff nurses in a cardiovascular unit through a staff education program
Kennedy, et al., 2016	Level V	Descriptive Project	Staff education program for nursing staff
Self, et al., 2022	Level I	Systematic Review	10 publications reviewed
Carr, 2017	Level V	Descriptive Study/Evidence implementation project	Care managers & nurses through a training program in motivational interviewing

Following review and analysis of the six sources of evidence, a synthesis of the literature was conducted. With the goal of developing a staff education program on motivational interviewing as an intervention to address low Press Ganey nurse-patient communication scores, a PowerPoint lecture presentation was developed. A major theme generated from synthesis of the literature led to development of program objectives and teaching content for the staff education program. Participants were taught key principles of motivation interviewing as an intervention, specific techniques unique to motivational interviewing, and the importance of reflective listening. Additionally, using the ADDIE model (Jeffery et al. 2016) as a guide and Knowles adult learning principles (Knight, 2020), participants engaged in role playing on the use of open-ended questions when communicating with patients and family members. Last, elements to align motivational interviewing to nurse-patient communication scores, participants were introduced to essential elements of Press Ganey patient satisfaction surveys.

Analysis of Pretest and Posttest Exams

This DNP project was designed to answer practice-focused question. Evidence to answer this question was generated through a pretest and posttest exam conducted before and after the staff education program. The staff education program was designed to introduce staff nurses assigned to the step unit to the basic principles of motivational interviewing as an intervention to improve nurse-patient communication. The content that follows is organized and presented under the subheadings of participant demographics, instrumentation, the program procedure, pretest/posttest scores, summative evaluation of the staff education program and last, strengths and limitations of the DNP project.

Participant Demographics

At the time of the staff education program, the step-down unit employed 30 full-time staff nurses. A total of 15 nurses participated in the staff education program. Collecting demographic data (Appendix F), findings indicate that all participants were female with 8 ranging in age between 21 to 40 years old and 7 between the age of 41 to 60 years old. Three (3) educational sessions were conducted with five nurses participating in the first session, five nurses attending the second session, and five nurses participating in the last session. Each nurse participant completed the pretest, actively engaged in the presentation, and completed the posttest and provided feedback on the presentation by completing a summative evaluation of the program.

Instrumentation

Pretest (Appendix C) and posttest (Appendix D) exams were used to answer the practice-focused question, *Will a staff education program improve the knowledge of staff nurses on the process of motivational interviewing?* As the DNP project leader, I designed the exams. A doctorate-prepared nurse provided face validity for the exams. Using a multiple question format, the pretest and posttest exam included fill in the blank, multiple choice and select all that apply questions. With a total of 10 questions included on each exam, 10 points were awarded for each correct answer. A maximum score of 100 points could be earned for each exam. Additionally, a summative evaluation tool (Appendix E) was developed and administered to assess effectiveness and efficacy of the educational program.

Program Procedure

A staff education program addressing motivational interviewing served as the intervention for this project. Using a lecture format, the presentation was based on a PowerPoint titled Improving Nurse-Patient Communication Through Motivational Interviewing in a Step-Down Unit. The content presented was based on content generated through a literature review on strategies for improving nurse-patient communication using motivational interviewing. The program was conducted in the staff conference room. The agenda for the program included a pretest, lecture presentation and posttest. The program ended with completion of a summative evaluation by participants.

Pretest and Posttest Exams Scores

A paired samples t-test was conducted to compare mean pretest and mean posttest scores of nurse participants to determine if the evidence-based staff education program improved the knowledge on using motivational interviewing to improve nurse-patient communication. With a mean pretest score of 46.97 (SD 17.16) to a posttest mean score of 62.33 (SD 13.61), the paired samples t-test revealed that there was sufficient evidence indicating that the educational intervention improved the knowledge of nurse participants on motivational interviewing as an intervention to improve nurse-patient communication. Table 6 reflects the paired sample t-test results for the pretest and posttest exams. Figure 1 depicts the change in pretest and posttest mean exam scores.

Table 6*Paired Samples t-test for Pretest and Posttest Exams*

	Stub heading	<i>N</i>	Mean	Std. Deviation	Paired t-test
Pair 1	Pretest	15	46.86	17.07	
	Posttest	15	62.33	13.61	-8.674

Figures 1 below illustrates the gain in mean score from pretest to posttest based on scores of nurse participants to determine if the evidence-based staff education was effective.

Figure 1*Mean Pretest and Posttest Scores*

Patient Satisfaction scores before the staff educational program were consistently always in the first percentile rank under nurse patient communication. After the staff educational program the patient satisfaction scores started going up, and is currently at the 92nd percentile rank with the assistance of the leadership team. Of course, there is placement for improvement like the unit having an increase in new staff and the turnover in nurses. In the other hand, the weaknesses were that there was only a very limited

number of registered nurses that were actually staff nurses and not agency or travel nurses.

An analysis of questions was conducted of the pretest and posttest exams. Some of most missed questions were at least 2 out of 10 questions by at all staff that took the pretest and posttest with no point earned. More specific, question #3: Motivational interviewing consists of five specific techniques. Choose all that apply affirmations, summarizations, open-ended questions, and reflective listening. This question resulted in all the staff registered nurses receiving zero or no points for this question in the pretest and posttest. The other question #8: Which of the following are key principles of Motivational Interviewing? Only one staff registered nurse got this question correct on the posttest. The only reason that these questions were missed the most was because of the new nurses that attended the staff educational program that had not heard of MI. All staff nurses expressed the concern that there has been a lack of education during COVID 19 pandemic within the organization.

Summative Evaluation of the Staff Education Program

Participants were asked to provide feedback on the effectiveness of the staff education program (Appendix E). Completed anonymously and submitted at the end of the program, all participants reported that objectives of the program were met, and the information presented was relevant to the needs of the organization and step-down unit. Participants also reported that the presenter was knowledgeable and clear about the topic and information presented. Last, participants agreed that this learning opportunity should be shared with other members of the nursing staff.

Strengths and Limitations of the DNP Project

A major strength of this project is that it was designed as an evidence-based project to address a practice problem – low Press Ganey nurse-patient communication survey scores. Concepts, models, and sources from the literature guided development of the staff education program. Additionally, findings from this project suggest that implementation of a staff education program on motivational interviewing represents one strategy that can be used to improve the patient care experience. Another strength is that this project can be implemented successfully at the unit, departmental, and system levels.

Although this project presented strengths, there were also limitations. For example, the small sample size led to findings that are beneficial to the host organization but have limited generalization potential that can be applied to other healthcare settings. Thus, caution is suggested when considering the findings from this project.

Another limitation is the use of data collection instruments that were not psychometrically tested. I created the pretest and posttest exams as well as the summative evaluation tool. While the pretest and posttest exams were assessed for face validity, these exams and the summative evaluation tool were not assessed for reliability. This limitation indicates the need for consideration when reflecting on how evidence from this project can be applied to other healthcare settings.

Despite limitations, facilitating a staff education program on motivational interviewing appears to be an effective method for teaching participants knowledge on MI as well as helping nurses develop communication skills when interacting with patients and family members. Additionally, given the current emphasis on consumerism,

motivational interviewing is a strategy that has the potential of resolving problem areas and improving the patient care experience. Findings from this project have the potential for raising awareness among nursing staff on how communication with patients influences quality of care and patient satisfaction.

Recommendations

Based on findings from this DNP project, three recommendations were identified. First, this project was designed as an educational program to improve nurse-patient satisfaction scores using motivational interviewing. While this project served as a needed intervention to address the problem of low Press Ganey nurse-patient communication scores, additional research is needed to determine if the educational intervention made a difference on whether motivational interviewing impacted patient-satisfaction survey scores.

Previous literature addressing Press Ganey and Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey results indicate that patient satisfaction scores can improve with attention given to nurse-patient communication. Based on this finding it is recommended that regular collection of data on patient care experience be continued to assess improvements and address gaps in practice.

Last, this project used motivational interviewing as an intervention to improve nurse-patient satisfaction scores. As motivational interviewing represents one intervention, it is essential to explore new interventions that have the potential to improve nurse-patient satisfaction scores and thus the patient care experience.

Finally, as with all evidence-based projects, consideration should be given to sustainability. A recommendation is to consider Press Ganey surveys using Hospital Consumer Assessment of Healthcare Providers and Systems Surveys (HCAHPS) data. HCAHPS survey results allow organizations to target areas for improvement that are closely tied to Medicare reimbursements. HCAHPS data is a way to make sure that quality of care is given and that there is no missed care (Orique et al., 2017).

Summary

Section 4 addressed findings generated from this DNP staff education program. Findings from the literature review that were evidence-based techniques or interventions concluded that an education program can improve the knowledge of staff nurses to improve nurse-patient communication with the use of MI intervention. Results from the education program pretest and posttest exams showed an improvement in the knowledge of the staff nurses. Section 5 of this DNP project is based on the dissemination plan which includes the analysis of self

Section 5: Dissemination Plan

The dissemination plan allows stakeholders to view outcomes of the project along with the staff education program results. A staff education program was designed to increase the knowledge of the staff nurses Press Ganey nurse-patient communication with the use of motivational interviewing (MI) as an intervention. The evidence from this DNP project indicates the improvement in the staff nurse's knowledge in nurse-patient communication with the use of MI interventions. The findings of this staff education program will allow stakeholders to decide if the use of motivational interviewing as an intervention can improve nurse-patient communication and thereby increase Press Ganey scores. The plan is to share the results of this project with the leadership of the step-down unit and the Chief Nursing officer (CNO) of the organization. Along with the organization, the DNP project results can be shared with other associations to benefit the nursing profession and improve patient satisfaction scores across the board. In Section 5, the dissemination plan, analysis of self, and a summary are provided.

Findings from this DNP project will be disseminated to multiple groups. For example, once this DNP project is completed and published, I plan to disseminate the project to other health care professions and/or healthcare organizations. The evidence and results of this DNP project have the potential to improve nurse-patient communication using MI intervention. Thus, dissemination will include poster and podium presentations during upcoming nursing conference workshops and seminars. Additionally, my plans include creation of a manuscript for publication to a peer-reviewed journal.

Analysis of Self

My roles in this capstone project included healthcare professional, project administrator, doctorate student, and practitioner scholar. The involvement in this DNP project has been very educational and challenging. This DNP project has increased my knowledge of interacting with different stakeholders in the organization, and staff. The project has also given me an opportunity to engage staff in developing an evidence-based project. Another outcome of the project is that it improved my analytical skills and writing skills. This DNP project has also given me the opportunity to identify unit safety issues and quality improvement problems that can be identified on a unit in this facility or any other facility. As a previous director of a step-down unit, I made sure that I did not let any other personal biases interfere with this capstone, increasing my development and skills as a DNP practitioner-scholar.

There were a few challenges experienced in completing the project. For example, there was a turnover of staff with the use of agency nurses staffing the unit and the hiring of new registered nurses. These challenges made implementation of this project somewhat challenging because some of these nurses were not completely knowledgeable or committed to Press Ganey patient satisfaction scores. There were only about 30 nurses staffed on the unit at the time of implementation of the DNP project. Insights gained on the scholarly journey were that some of the challenges that I encountered taught me on how to develop my skills to complete the DNP project and obtain my doctorate degree.

Summary

Designed to improve Press Ganey nurse-patient surveys, the purpose of this project was to develop, implement and evaluate a staff education program on motivational interviewing. This DNP project was developed for the nurses to start effectively communicating with patients and families. The most effective way to educate the nurses in the step-down unit was to set up an educational program to teach how to effectively communicate with the patients and families. A literature review matrix table was created to analyze and synthesize data for the project. The practice focused question was: *Will a staff educational program increase Press Ganey scores improving nurse-patient communication through MI intervention?* The ADDIE model was used to develop the staff education program along with a literature review to design the presentation and evaluation tools. Using the pretest and the posttest to collect the data necessary before and after the implementation of the DNP project showed evidence-based results that can effectively help the nursing profession.

The impact of this project is to improve positive social change with the use of MI intervention. This DNP project showed that it benefits the patients because of the increased knowledge that builds on practice skills of nurse-patient communication. “MI has a positive effect on behavioral outcomes” (Berman, Beckman & Lindqvist, 2020, p, 661). The findings identified a mean score of 46.97% on the pretest, and a mean score on the posttest of 62.33%. Findings generated from the pretest and posttest of the staff educational program showed an increase in the mean score of 16% after implementation of the staff educational program. The analysis of this DNP project has showed a social

change for nurse-patient communication. Increasing the knowledge in the staff nurses about the use of MI intervention can also empower the nurses to effectively communicate with their families and patients, increasing patient satisfaction scores.

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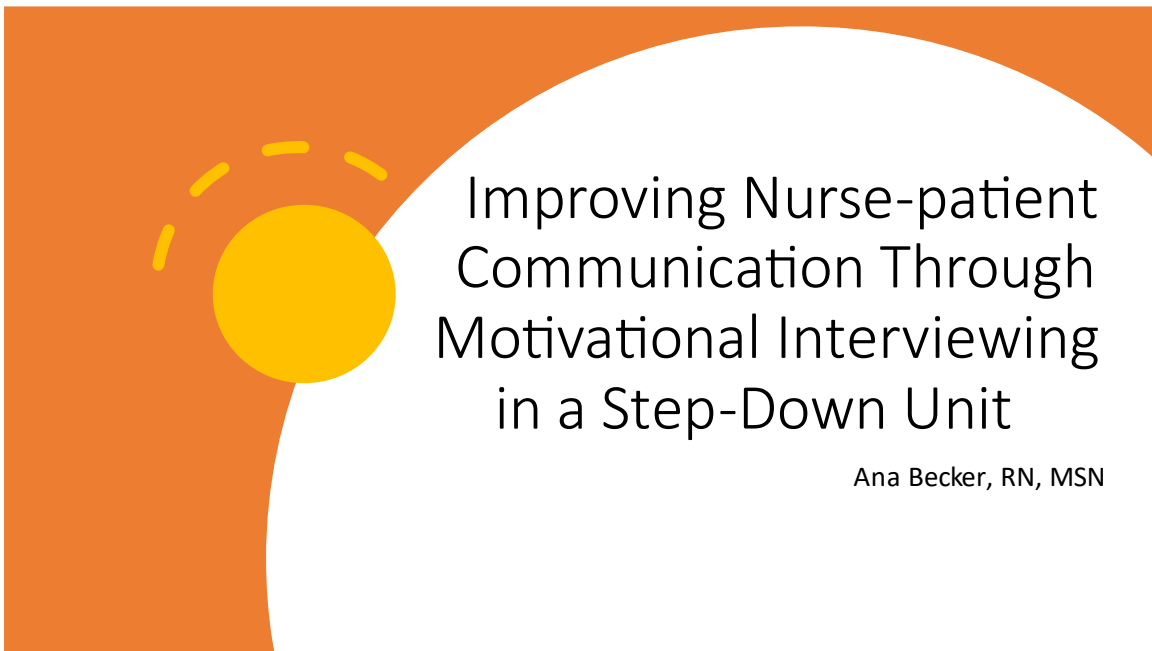
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Improving Nurse-patient
Communication Through
Motivational Interviewing
in a Step-Down Unit

Ana Becker, RN, MSN

The slide features a large orange semi-circle on the left side containing a yellow sun with a dashed orange arc above it. The title and author information are positioned to the right of the sun.



Introduction


The slide is decorated with several geometric elements: a blue circle, a green checkmark, a yellow semi-circle, a green square, a yellow dashed arc, and a yellow vertical dashed line.

Objectives:

At the completion of the presentation, participants should be able to:

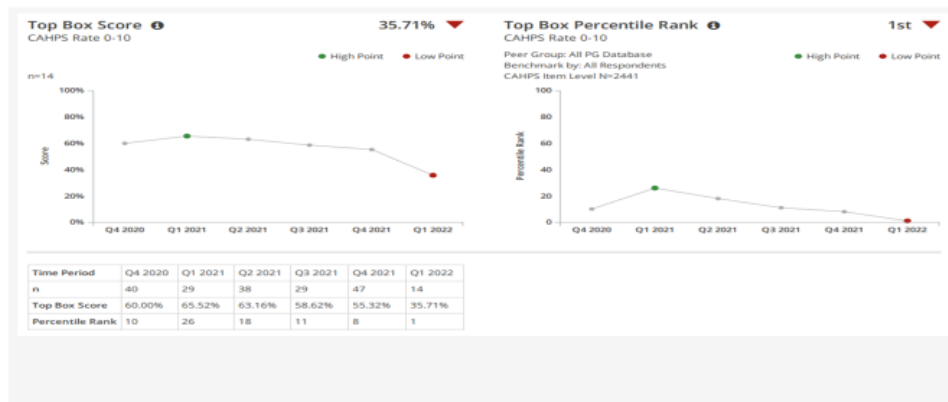
- Discuss Press Ganey Scores in the Step-Down Unit
- Explain the purpose, and nature of the educational project
- Explain what PCU goal for Press Ganey Scores are
- Review specifics of the PCU Action Plan
- Define Motivational Interviewing
- Review the principles and techniques of MI
- Using program activities, demonstrate MI techniques

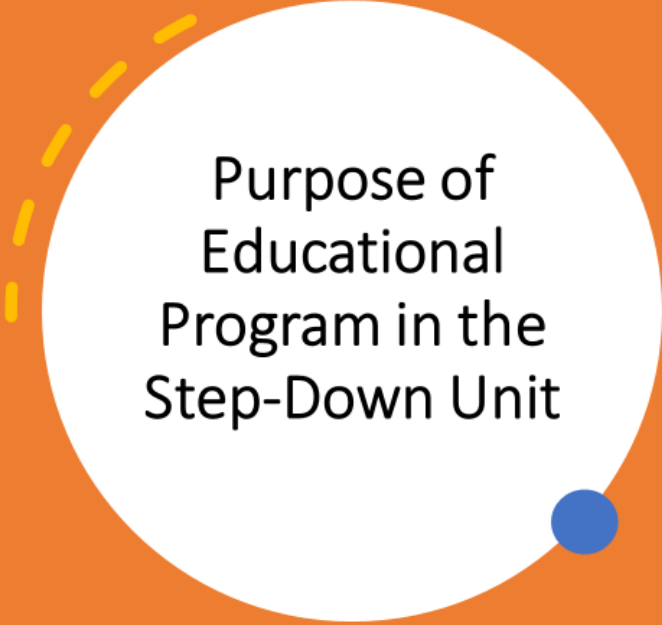
Topics

- **Background of Press Ganey Scores in the Step-Down Unit**
 - **Purpose of Educational Program in the Step-Down Unit**
 - **Nature of the Project**
 - **Vision of Concerns**
 - **Goal of Press Ganey Scores in the Step-Down Unit**
 - **PCU action Plan**
 - **Definition of Motivational Interviewing**
 - **Key Principles of Motivational Interviewing**
 - **Positive health behavior changes**
 - **MI Techniques**
 - **Samples of Open-ended Questions**
 - **Reflective Listening**
 - **Affirmations**
- 



1ST QUARTER PCU






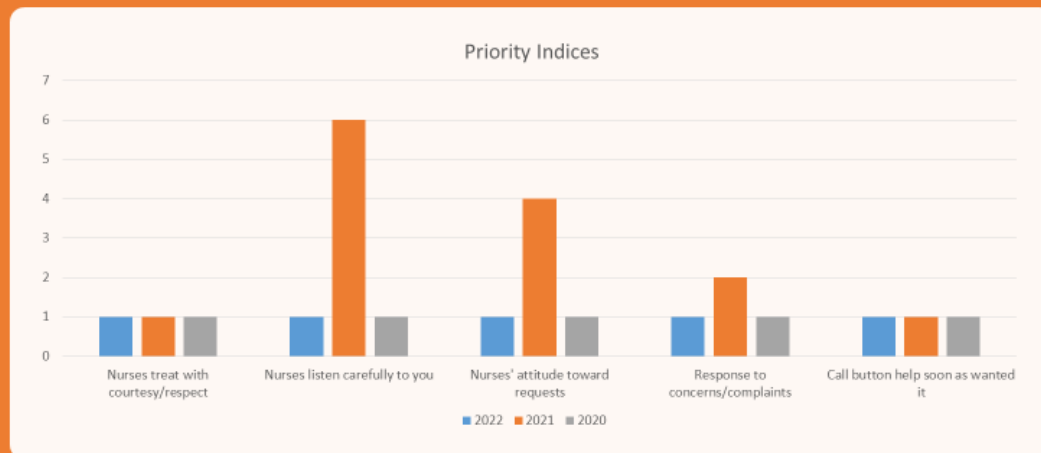
Purpose of Educational Program in the Step-Down Unit



PRIORITY
INDICES IN
1ST
PERCENTILE

- 
- NURSES TREAT WITH COURTESY/RESPECT
 - NURSES LISTEN CAREFULLY TO YOU
 - NURSES EXPL IN WAY YOU UNDERSTAND
 - CALL BUTTON HELP SOON AS WANTED IT
 - UNDERSTOOD PURPOSE OF TAKING MEDS
 - NURSES' ATTITUDE TOWARD REQUESTS
 - NURSES KEEP YOU INFORM
 - RESPONSE TO CONCERNS/COMPLAINTS
 - STAFF INCLUDE DECISIONS RE:TRTMNT
 - CONSISTENCY OF INFO FROM STAFF

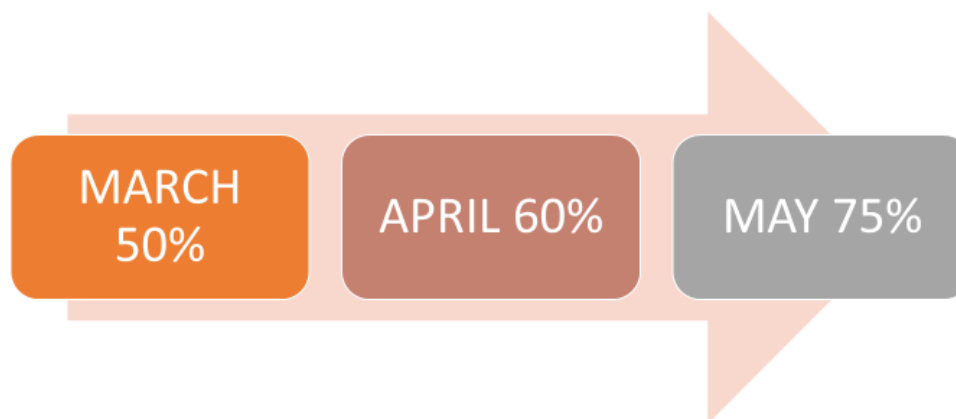
Vision of Concerns



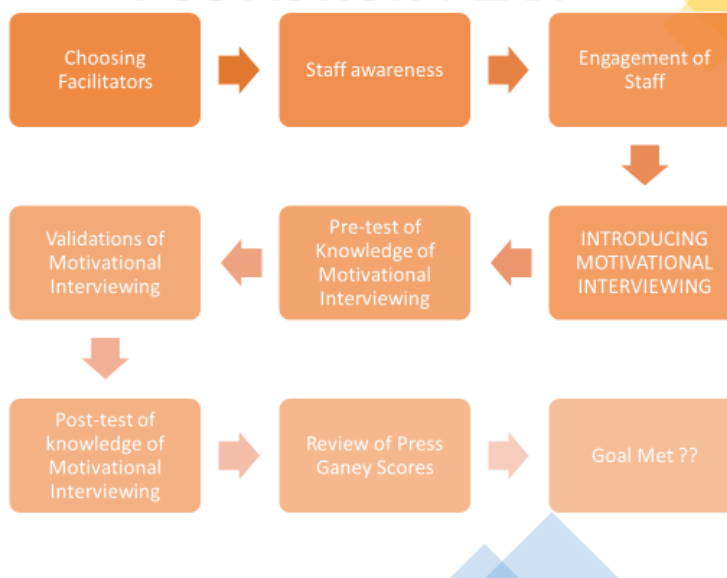
Nature of the Project

- Relationship and trust that can be created through nurse-patient communication.
- The patients and family members will encounter a relationship with their nurse through communication related to the patient's plan of care and improving the patient's outcomes.
- Management and leadership can improve nurse-patient communication with the necessary resources or education
- The nurses assigned to the step-down unit can develop better trusting relationships with their patients and families using MI to improve nurse-patient communication.

PCU GOAL



PCU ACTION PLAN



MOTIVATIONAL INTERVIEWING (MI)

- A collaborative, person-centered approach to communication aimed at eliciting and strengthening motivation for change
- Person-Centered technique
- Promotes personal motivation for behavioral change
- Used to engage patient & healthcare providers around different topics in health care
- “MI demands that the RNs interact with the patients and listen to their opinions about why they want the change, why a change might be good and how they can succeed”



Key Principles of Motivational Interviewing



MI Positive Health Behavior Changes

- MI has been shown to positively affect health behavior change related to:
 - Smoking
 - Diabetes management
 - oral health



MI Techniques

MI consists of five specific techniques:

- open-ended questions
- reflective listening
- Affirmations
- summarizing
- eliciting



Samples of Open-ended Questions

- What questions can I answer for you now?
- What do you like to do outside of here?
- How can we meet your needs?
- How do you feel about....?
- What did you understand about our bedside shift report?
- How about you repeating what we explained to you?
- How responsive is our staff?

Basic Reflective Listening Formula

Reflective Listening

Tentative Opening	+ Feeling	+ About/Because/When	+ Thought
It sounds like	you feel mad	about	
I hear you saying that	you feel sad	because of	
If I hear you correctly	you feel glad	when	
You seem to be saying	you feel afraid	about	
I think I hear you saying	you feel confused	because of	
I'm not sure I am follow	you feel ashamed	about	
Am I hearing you say	you feel lonely	when	

Affirmations



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ADVERBS OF AFFIRMATION

These adverbs show that the speaker is absolutely sure something will go the way they say it will.

- yes
- by all means.
- certainly.
- surely.
- verily.
- definitely.
- indeed.
- obviously.
- truly.



Example:

- We are **obviously** going to make a lot of money with this investment.

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ADVERBS OF NEGATION

Adverbs of negation are completely opposite from affirmation. They show that the speaker doesn't believe there is any chance things will go the way they say.

- any.
- never.
- no.
- not



Example:

- There's no chance they're going to win tonight. **Especially not** since they lost their start player.

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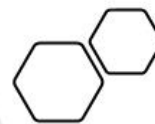
ELICIT
INFORMATION

“What do you think?”

How do you think you might...?”


“What do you think about that?”

“Is that something you would be willing to try?”





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Appendix B: Pretest

Improving Nurse-patient Communication Through Motivational Interviewing in a Step-Down Unit

Directions: Circle the letter for the correct answer to the questions.

1. An intervention that is collaborative, person-centered to communication that elicits and strengths motivation for change is known as _____.
 - a. Active listening
 - b. clear and direct communication
 - c. motivational interviewing
 - d. learning ladder

2. What are the most important priority indices looked at in the Press Ganey survey? (Choose all that apply)
 - a. Nurses treat with courtesy/respect
 - b. Nurses listen carefully to you
 - c. Call buttons help
 - d. Nurses do not keep you informed
 - e. All the above

3. Motivational interviewing consists of five specific techniques. Choose all that apply:
 - a. Affirmations
 - b. Summarizations
 - c. Open-ended questions
 - d. 'Magic questions'
 - e. Reflective Listening

4. The specific techniques for motivational interviewing are:
 - a. Open-ended questions
 - b. Affirmations
 - c. Eliciting
 - d. Summarizing
 - e. All the above

5. Which of these statements expressed by the nurse can be defined as an open-ended question (Circle all that apply)
 - a. "How do you feel about...?"
 - b. "How responsive is our staff?"
 - c. "Do not repeat what we explained to you?"
 - d. "What do you like to do outside of here?"

6. Choose all the examples of reflective listening (choose all that apply):
 - a. "It sounds like...."
 - b. "I hear you saying that..."
 - c. "You fell what?"
 - d. "You feel lonely...."

7. The nurse verbalizes the following statement, "You're very determined, even in the face of discouragement. This change must really be important to you." is an example of _____.
 - a. an open-ended question
 - b. a reflection
 - c. affirmation
 - d. change talk

8. Which of the following are key principles of Motivational Interviewing?
 - a. Develop Discrepancy, Roll with Resistance, Support Self-Efficacy and Optimism, & Express Empathy
 - b. Expressing empathy, rolling with resistance, & empower your patient
 - c. Righting reflex, acceptance, listening, & change
 - d. rolling with resistance, skillful reflective listening, acceptance, & changing

9. What is a basic reflective listening formula used in motivational interviewing?
 - a. "It sounds like..."
 - b. "If I hear you correctly..."
 - c. "You feel afraid about..."
 - d. All the above

10. Some of the affirmation that are needed to be used that shows that the speaker is sure something will go the way they say it will: (Choose all that apply)
 - a. Yes
 - b. Any
 - c. Never
 - d. Definitely

Appendix C: Posttest

Improving Nurse-patient Communication Through Motivational Interviewing in a Step-Down Unit

Directions: Circle the letter for the correct answer to the questions.

6. An intervention that is collaborative, person-centered to communication that elicits and strengths motivation for change is known as _____.
 - a. Active listening
 - b. clear and direct communication
 - c. motivational interviewing
 - d. learning ladder

7. What are the most important priority indices looked at in the Press Ganey survey? (Choose all that apply)
 - a. Nurses treat with courtesy/respect
 - b. Nurses listen carefully to you
 - c. Call buttons help
 - d. Nurses do not keep you informed
 - e. All the above

8. Motivational interviewing consists of five specific techniques. Choose all that apply:
 - a. Affirmations
 - b. Summarizations
 - c. Open-ended questions
 - d. 'Magic questions'
 - e. Reflective Listening

9. The specific techniques for motivational interviewing are:
 - a. Open-ended questions
 - b. Affirmations
 - c. Eliciting
 - d. Summarizing
 - e. All the above

10. Which of these statements expressed by the nurse can be defined as an open-ended question (Circle all that apply)
 - a. "How do you feel about...?"
 - b. "How responsive is our staff?"
 - c. "Do not repeat what we explained to you?"
 - d. "What do you like to do outside of here?"

11. Choose all the examples of reflective listening (choose all that apply):
- "It sounds like...."
 - "I hear you saying that..."
 - "You fell what?"
 - "You feel lonely...."
12. The nurse verbalizes the following statement, "You're very determined, even in the face of discouragement. This change must really be important to you." is an example of _____.
- an open-ended question
 - a reflection
 - affirmation
 - change talk
13. Which of the following are key principles of Motivational Interviewing?
- Develop Discrepancy, Roll with Resistance, Support Self-Efficacy and Optimism, & Express Empathy
 - Expressing empathy, rolling with resistance, & empower your patient
 - Righting reflex, acceptance, listening, & change
 - rolling with resistance, skillful reflective listening, acceptance, & changing
14. What is a basic reflective listening formula used in motivational interviewing?
- "It sounds like..."
 - "If I hear you correctly..."
 - "You feel afraid about..."
 - All the above
15. Some of the affirmation that are needed to be used that shows that the speaker is sure something will go the way they say it will: (Choose all that apply)
- Yes
 - Any
 - Never
 - Definitely

Appendix D: Summative Evaluation

Improving Nurse-patient Communication Through Motivational Interviewing in a Step-Down Unit

1) Were the learning objectives clearly explained during the presentation?

YES ___ NO ___

2) Were the learner's outcomes met?

YES ___ NO ___

3) Was the presenter, Ana Becker, knowledgeable in presenting the topic?

Very Knowledgeable ___ Somewhat Knowledgeable ___ Not Very Knowledgeable ___

4) Was the information presented relevant to the needs of the organization?

Relevant ___ Irrelevant ___ Indifferent ___

5) Would you recommend this educational program to the other staff in your team?

Very Likely ___ Somewhat Likely ___ Not Likely ___

6) Can you summarize how the material presented today will improve your nursing practice and practice care?

7) Any other suggestions for future staff educational programs?

8) How do you rate this learning educational program?

Excellent ___ Average ___ Poor ___