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Staff Education to Address Communication in Correctional Healthcare

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This is to certify that the doctoral study by

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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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Executive Summary: Staff Education Project

Staff Education to Address Communication in Correctional Healthcare

by

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Summary

This doctoral project was a staff education initiative focused on enhancing staff knowledge of Situation Background Assessment Recommendations (SBAR) communication through structured educational intervention in correctional healthcare settings. The practice problem centered on significant deficiencies in standardized communication. The practice-focused question was, Will implementing staff education on SBAR communication increase staff knowledge and confidence? I aimed to enhance staff communication and knowledge through SBAR implementation using live sessions, hands-on practice, and reference materials.

Analytical strategies included a PowerPoint presentation and pre- and postsurveys measuring knowledge and confidence. Findings demonstrated significant improvements across all metrics. The data from the pre- and postsurveys were evaluated using descriptive statistics. All area measurements increased in confidence assessment measures from presurvey (48%) to postsurvey (84%). There was an increase from presurvey (28%) to postsurveys (90%) on practice assessment measures. Major products included PowerPoint presentations, pre-post surveys, and reference materials. Key recommendations include implementing regular refresher sessions and developing targeted strategies to improve mental health staff participation. The project demonstrated potential for positive social change through standardized communication that promotes quality healthcare delivery. The educational framework accommodates diverse learning needs while fostering inclusive nursing practices in healthcare communication, contributing to improved patient care and professional development in correctional healthcare settings.

Background

Healthcare communication represents a critical challenge in modern medical settings, with communication failures contributing to approximately 70% of critical incidents (Keshtkar et al., 2024). A significant practice gap was identified in structured communication protocols and practices within healthcare units at a correctional setting. The practice-focused question was, Will implementing staff education on SBAR communication increase staff knowledge and confidence? I aimed to enhance staff knowledge and confidence in communication through SBAR.

The evidence supporting this practice change is robust and comprehensive, drawing from multiple levels of research (Toumi et al., 2024). The Johns Hopkins Nursing Evidence-Based Practice Rating Scale provides a comprehensive overview of the evidence hierarchy, demonstrating a multitiered approach to supporting the implementation strategy (Dang & Dearholt, 2018). Details revealed a strategic distribution of evidence sources across four levels. Level I evidence, consisting of three systematic reviews, provided strong foundational support with high-quality research showing significant improvements in patient outcomes. Recent systematic reviews by Suraya et al. (2024) demonstrated that SBAR implementation led to measurable improvements in communication accuracy and patient safety outcomes across various healthcare settings. Five Level II randomized controlled trials offered robust scientific validation, demonstrating concrete reductions in medical errors and communication breakdowns. Notable among these is the work of Toumi et al. (2024), who conducted a pilot study showing significant improvements in healthcare team communication following SBAR implementation. Four additional Level III controlled trials without

randomization and six Level IV case-control studies strengthened the evidence base, providing consistent and supportive findings across different research methodologies. A comprehensive literature review by Shinta and Bunga (2024) further validated these findings, showing that SBAR implementation consistently reduced communication errors and enhanced patient safety across diverse healthcare environments.

Staff Education Project Development

The staff education project engaged 45 correctional healthcare staff members, comprising 15 registered nurses, eight licensed practical nurses, 10 mental health staff, and 12 support staff members. Project development began with informal interviews with staff to identify knowledge gaps in SBAR communication practices. A live session with PowerPoint was created to engage staff who learn better with visuals and keep them engaged with the knowledge. Pre- and postsurveys were created to analyze whether staff had gained knowledge from the material. SBAR pocket reference cards were created to help staff retain the knowledge they have learned with a reminder of how to do an SBAR. A blank SBAR sheet was given as another reminder and for use in class to do scenarios to help gain knowledge of SBAR and understand its importance in communication with providers or each other. Content created consists of three primary components: live training sessions with PowerPoint, distribution of SBAR pocket reference cards, and hands-on practice opportunities. Staff members participated in scheduled educational sessions over a 4-to-6-week period, with flexible timing to accommodate various shifts and schedules.

With this project, I collected evidence through pre- and postsurveys measuring SBAR knowledge and confidence. To keep confidentiality, surveys were given to

preceptors or staff on the psychiatry team. The evaluation process measured three key components: confidence assessment and practice assessment. Initial confidence ratings varied across measures. The data from the pre- and postsurveys were evaluated using descriptive statistics. All area measurements increased in confidence assessment measures from presurvey (48%) to postsurvey (84%). There was also an increase from presurvey (28%) to postsurveys (90%) on practice assessment measures.

Results

All area measurements increased in confidence assessment measures from presurvey (48%) to postsurvey (84%). There was also an increase from presurvey (28%) to postsurveys (90%) on practice assessment measures. The SBAR education project significantly improved staff communication, knowledge, and confidence, evidenced by specific metrics across confidence ratings and practice assessments. Figure 1 depicts detailed results of confidence assessment ratings. Figure 2 depicts the results of practice assessment ratings.

Figure 1

Confidence Assessment (Rating Scale 1-5)

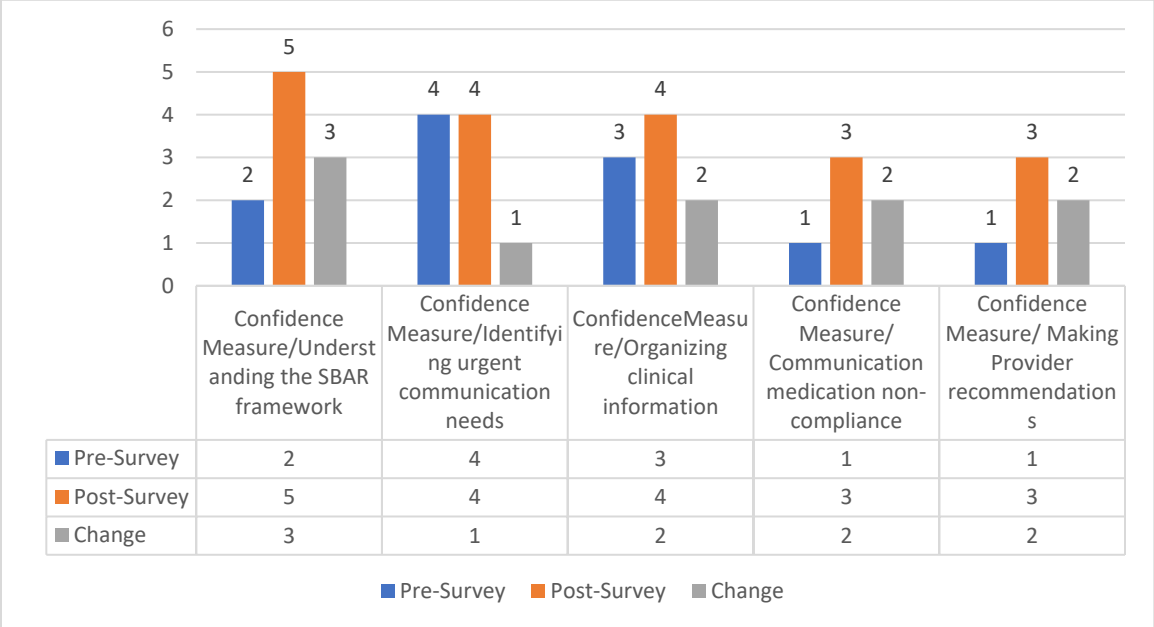
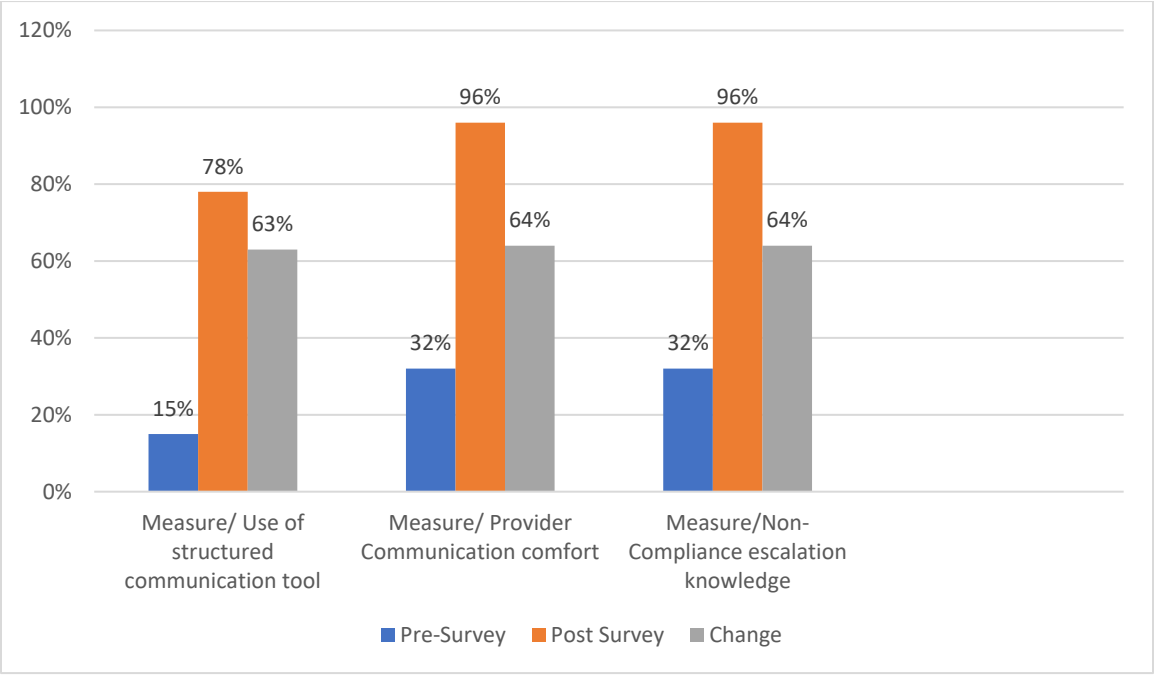


Figure 2

Practice Assessment Results



The implementation created measurable changes in knowledge throughout the organization, as evidenced by project results. Additional education outcomes demonstrated effectiveness, with clarity of education materials, SBAR template practicality rated at 4/5, and overall communication preparedness achieving 4.5/5.

Several limitations affected implementation and outcomes, including the varying participation rates among different staff roles and the impact of staff scheduling conflicts, staff reassignment, time restrictions, days off, being augmented (mandatory overtime), and emergencies on consistent engagement. Due to limitations, I tried to get 45 staff members and ended up with 28. Time was restricted due to the implementation of live sessions, which took 4-6 weeks.

The project demonstrated significant improvements across all measured metrics. Beyond the local setting, the project is easily replicated. The successful implementation provides a replicable model, supported by concrete improvements in communication metrics and staff confidence measures. These evidence-based outcomes suggest potential benefits for implementing structured communication education across correctional healthcare systems.

Conclusions

The SBAR education project transformed communication knowledge within the organization, demonstrating significant improvements across multiple performance metrics. Based on project outcomes, several recommendations emerge for continued improvement. Quarterly refresher training sessions should be implemented to maintain knowledge retention and reinforce SBAR practices. A mentorship program could support new staff members and strengthen communication skills across all roles, with particular

attention to the 40% participation rate among mental health staff. Amara et al. (2024) stated that developing targeted communication interventions would enhance staff interactions in mental health settings. Additional focus should target increasing participation rates among mental health staff through role-specific approaches. Continuous monitoring mechanisms should ensure sustained adherence to communication protocols and ongoing skill development.

The educational initiative extends beyond fundamental communication improvement to impact broader nursing practice and social change. The project demonstrated how structured education can enhance professional communication competencies across diverse healthcare roles, supporting findings from recent studies in correctional healthcare settings. Shinta and Bunga (2024) highlighted how implementing standardized communication protocols promotes equity in healthcare delivery by ensuring consistent information exchange regardless of staff roles or backgrounds.

The educational framework accommodated diverse learning needs and cultural perspectives, supporting inclusive practices in healthcare communication. These improvements in communication competencies contribute to professional development while fostering a more equitable and inclusive healthcare environment, aligning with current healthcare education standards.

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