
Assessing the Level of Communication and Patient Safety among Nurses in Selected Hospitals in Quezon City

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ABSTRACT

This study assessed the level of communication efficiency in nurse-to-nurse handovers and its relationship with the demographic profile and workload-related factors among nurses in the surgical ward of a selected hospital. A quantitative descriptive–correlational research design was employed, involving 27 registered nurses selected through a total sampling approach. Data were collected using a validated, researcher-made questionnaire covering demographic characteristics, communication efficiency, and workload factors such as nurse–patient ratio and shift transitions. Statistical tools, including frequency, percentage, mean, standard deviation, t-test, and ANOVA, were used for analysis. Findings revealed that communication efficiency was generally good ($M = 4.22$), indicating that nurses effectively exchange patient information during handovers. However, workload-related factors, particularly high nurse–patient ratios and demanding shift transitions, were found to significantly influence communication quality and patient safety ($M = 3.96$ and $M = 4.01$, respectively). Furthermore, no significant relationship was found between communication efficiency and demographic variables, including age, sex, and years of experience ($p > 0.05$). The study concludes that communication effectiveness is more influenced by organizational and workload factors rather than individual characteristics. An action plan focusing on structured communication, workload management, and staffing improvement was recommended.

Keywords: *Communication efficiency; demographic profile; nurse-to-nurse handover; nurse–patient ratio; patient safety; shift transitions; workload factors*

INTRODUCTION

Patient safety depended largely on effective communication, especially during nurse-to-nurse handovers. This process ensured continuity of care and reduced clinical errors. However, communication failures still occurred in high-acuity areas such as surgical wards.

Although structured communication tools had been introduced, challenges persisted due to workload, staffing conditions, and workplace demands. Limited studies have examined the combined effect of demographic and workload factors on communication efficiency in actual clinical settings.

This study assessed communication efficiency among nurses and its relationship with selected demographic and workload-related factors to support improvements in patient safety practices.

STATEMENT OF THE PROBLEM

This study determined communication efficiency and patient safety among nurses in a surgical ward. Specifically, it sought to:

1. Describe the demographic profile of respondents in terms of age, sex, and years of experience.
2. Determine the level of communication efficiency in nurse-to-nurse handovers.
3. Assess workload-related factors such as nurse–patient ratio and shift transitions.
4. Test the relationship between communication efficiency and demographic profile.
5. Propose an action plan to improve communication and patient safety.

REVIEW RELATED LITERATURE

The reviewed literature emphasized that communication efficiency was a critical component of patient safety and quality care in healthcare settings. Studies by Hou et al. (2020), Howick et al. (2024), and Jang et al. (2022) showed that structured nurse-to-nurse handovers improved continuity of care, reduced errors, and supported clinical decision-making. Research also indicated that demographic factors such as age, sex, and years of experience could influence communication ability, while workload factors such as nurse–patient ratio and fatigue during shift transitions negatively affected information transfer (Trammell & Aguilar, 2021). Overall, the literature highlighted the need to examine both individual and organizational factors to improve communication efficiency and patient safety.

THEORETICAL FRAMEWORK

The study was anchored in Peplau's Interpersonal Relations Theory (1952) and Locsin's Theory of Technological Competency as Caring in Nursing (2005). Peplau emphasized communication as a therapeutic process, while Locsin highlighted nursing care as a combination of competence and communication.

Both theories supported the idea that effective communication during handovers was essential for safe and continuous patient care.

CONCEPTUAL FRAMEWORK

The conceptual framework of the study illustrated the relationship among demographic profile, workload-related factors, communication efficiency, and patient safety. Demographic profile and workload-related factors served as the independent variables. Communication efficiency functioned as the mediating variable. Patient safety was identified as the dependent variable. The framework showed that workload conditions and nurse characteristics influenced communication efficiency, which in turn affected patient safety outcomes.

Figure 1. Conceptual Framework Showing Factors Influencing Communication Efficiency in Nurse-to-Nurse Handover and Its Effect on Patient Safety



METHODOLOGY

The study employed a quantitative descriptive–correlational design to assess communication efficiency in nurse-to-nurse handovers and its relationship with demographic and workload-related factors in a surgical ward. It followed systematic procedures in data collection and analysis, ensuring accuracy, reliability, and ethical compliance throughout the research.

RESEARCH DESIGN

This study employed a quantitative descriptive–correlational design to determine the levels of communication efficiency and workload-related factors and to examine their relationships with the demographic profile. It described existing conditions and analyzed relationships among variables without manipulation.

RESEARCH STEPS

The research design was developed after reviewing the related literature and identifying key variables, including demographic profiles, workload factors, and communication efficiency. A validated researcher-made questionnaire was prepared and pilot-tested for reliability. Ethical approval and institutional permission were secured before data collection, and responses were organized for statistical analysis.

DATA COLLECTION AND SAMPLE SELECTION

Data were collected after securing ethical approval and institutional permission. Twenty-seven (27) registered nurses in the surgical ward were selected through total sampling. All participants met the inclusion criteria, gave informed consent, and participated voluntarily and confidentially.

DATA ANALYSIS METHODS

Data were analyzed using descriptive and inferential statistics. Frequency, percentage, mean, and standard deviation were used to describe variables, while Pearson r , t -test, and ANOVA were used to test relationships and differences among variables.

RESEARCH HYPOTHESIS AND VALIDATION

The study tested the null hypothesis that there was no significant relationship between the demographic profile and communication efficiency. Pearson r , t -test, and ANOVA were used at a 0.05 level of significance to determine whether to accept or reject the hypothesis.

STUDY LIMITATION AND ETHICAL CONSIDERATIONS

The study was limited to 27 nurses in a single surgical ward, which affected generalizability. It relied on self-reported data, which may have introduced bias and did not directly measure actual communication behavior. Ethical standards were observed, including informed consent, confidentiality, voluntary participation, and secure data handling.

RESULTS AND DISCUSSION

SOP 1. What is the demographic profile of the nurse respondents in terms of age, sex, and years of experience?

Most respondents were aged 36–40, predominantly female, and had 1–3 years of experience, with a smaller share having over 10 years of experience. The findings indicated a mix of early-career and experienced nurses, suggesting workforce diversity in the surgical ward.

SOP 2. What is the level of communication efficiency in nurse-to-nurse handover?

Communication efficiency was rated good ($M = 4.22$). Nurses reported effective transfer of patient information during handovers, with timeliness receiving the lowest rating but still acceptable. Overall, structured communication supported continuity of care and patient safety.

SOP 3. What is the level of workload-related factors such as nurse–patient ratio and shift transitions?

Nurse–patient ratio ($M = 3.96$) and shift transitions ($M = 4.01$) indicated agreement that workload affected communication. High patient load and fatigue were reported to reduce handover quality and patient safety.

SOP 4. Is there a significant relationship between communication efficiency and demographic profile?

No significant relationship was found between communication efficiency and the demographic profile (age: $p = 0.351$; sex: $p = 0.811$; years of experience: $p = 0.627$). This indicated that demographic factors did not influence communication efficiency.

SOP 5. Based on the findings, what action plan can be proposed to improve communication and patient safety in the surgery ward?

An action plan was proposed focusing on structured communication (SBAR), workload management, improved staffing ratios, and enhanced shift scheduling. Continuous training was recommended to improve handover quality and patient safety.

SUMMARY

The study found that nurses had good communication efficiency despite workload challenges. Demographic variables showed no significant effect, while workload-related factors influenced communication and patient safety.

CONCLUSIONS

Communication efficiency was consistent across demographic groups and was more affected by workload and organizational conditions. Effective handovers depended more on staffing and system factors than on individual characteristics.

RECOMMENDATIONS

Hospital management should improve staffing ratios and workload distribution. Nurses should consistently use structured communication tools such as SBAR. Regular training should be conducted, and future studies should include larger sample sizes and additional variables, such as organizational culture and communication systems.

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AI DECLARATION STATEMENT

AI-supported tools helped with grammar and structure in creating this article. No AI tools were used to collect, analyze, or interpret data; all authors are credited for their academic contributions.

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