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Implementation Of Sbar Communication In Nursing Practice To Improve Patient Safety

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ABSTRACT

Patient safety (*patient Patient safety*) is a top priority in healthcare. One contributing factor to patient safety incidents is ineffective communication between healthcare workers. The SBAR (Situation, Background, Assessment, Recommendation) communication method was developed as a structured communication tool to improve the clarity and accuracy of clinical information. This study aims to analyze the implementation of SBAR communication in nursing practice and its impact on improving *patient safety*. The study used a quantitative design with a *cross-sectional approach*. The study sample consisted of 60 nurses working in the inpatient ward of Hospital X, selected using a purposive sampling technique. Data were collected using an SBAR implementation questionnaire and a patient safety incident observation sheet. Data analysis was performed univariately and bivariately using the Chi-Square test. The results showed that good SBAR communication implementation was significantly associated with increased patient safety ($p < 0.05$). It was concluded that SBAR communication is effective in supporting safe and quality nursing practices.

Keywords: SBAR Communication, Nursing, Patient Safety





1. Introduction

Patient safety is a fundamental component of the quality of healthcare services. Various reports indicate that the majority of adverse *events events*) in hospitals are caused by communication failures between health workers, especially during patient handovers and clinical decision-making.

Nurses, as healthcare workers with the most intense contact with patients, play a strategic role in ensuring patient safety. However, unstructured, incomplete, or unclear communication often leads to errors in nursing practice, such as medication errors, delayed interventions, and miscommunication. interprofessional.

SBAR (*Situation, Background, Assessment, Recommendation*) communication is a structured communication method recommended in the *patient care system. Safety*. SBAR helps nurses convey clinical information concisely, clearly, and systematically, making it easier for other healthcare workers to understand the patient's condition and make appropriate decisions.

Although SBAR has been widely recommended, its implementation in nursing practice is uneven. Some nurses have not consistently implemented SBAR due to limited knowledge, old habits, and lack of supervision. Therefore, this study is important to analyze the implementation of SBAR communication in nursing practice and its relationship to improved *patient outcomes. safety*.

2. Research Methods

a. Types and Design of Research

This research is a quantitative analytical study with a cross-sectional design. This design was used to analyze the relationship between the implementation of SBAR communication in nursing practice and the level of *patient satisfaction. safety* at a single observation point. This approach is suitable for assessing relationships between variables without providing direct intervention.

b. Research Conceptual Framework

This study is based on the concept that effective communication is one of the main pillars of patient safety. The implementation of SBAR communication as an independent variable is assumed to influence the reduction in the risk of patient safety incidents as the dependent variable.

c. Location and Time of Research

The study was conducted in the Inpatient Ward of Hospital X, which has a high level of service complexity and requires effective clinical communication between healthcare professionals. The study was conducted in April-June 2025, covering the stages of preparation, data collection, processing, and data analysis.

d. Population and Research Sample





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a) Population

The research population was all implementing nurses working in the inpatient ward of Hospital X.

b) Sample

The research sample consisted of 60 nurses, who were selected using purposive sampling techniques, namely selecting respondents based on certain criteria relevant to the research objectives.

c) Inclusion Criteria

- Implementing nurse with a minimum work period of 1 year
- Working in the inpatient room
- Willing to be a research respondent

d) Exclusion Criteria

- Nurses on leave or education
- Nurses who were not present during data collection

e. Research Variables

- Independent variable: Implementation of SBAR communication
- Dependent variable: *Patient safety*

f. Operational Definition of Variables

Variables	Operational Definition	Measuring instrument	Scale
SBAR Implementation	The level of implementation of SBAR communication by nurses in handover and clinical communication	SBAR Questionnaire	Ordinal
Patient safety	Level of implementation of patient safety incident prevention efforts	Observation sheet / questionnaire	Ordinal

g. Research Instruments

The instruments used in this study include:

- 1) SBAR implementation questionnaire, which assesses *the Situation, Background, Assessment, and Recommendation aspects*.
- 2) Patient observation sheet safety, to record patient safety practices such as patient identification, effective communication, and incident reporting.

The instrument has undergone validity and reliability testing before use.

h. Data Collection Procedures

Data collection is carried out through the following stages:

- 1) Processing research permits to hospitals and ethics committees
- 2) Explanation of research objectives and procedures to respondents
- 3) Informed signing consent





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- 4) Completion of questionnaire by nurse
- 5) Observation of SBAR communication practices and patient safety
- 6) Data completeness check

i. Data Processing Techniques

Data processing is carried out in several stages:

- 1) Editing – checking data for completeness and consistency
- 2) Coding – assigning a code to each variable
- 3) Data entry – entering data into statistical software
- 4) Cleaning – ensuring there are no input errors

j. Data Analysis Techniques

- 1) Univariate Analysis

Used to describe the frequency distribution and percentage of SBAR communication implementation and *patient level. safety*.

- 2) Bivariate Analysis

Square test was used to determine the relationship between the implementation of SBAR communication and *patient safety*. The significance value is set at $\alpha = 0.05$. (*Optional continuation*)

Odds Analysis The ratio (OR) can be used to determine the extent of the patient safety risk for nurses who do not apply SBAR optimally.

k. Bias Control

Bias control is done by:

- 1) Standardization of research instruments
- 2) Short training for enumerators
- 3) Clear inclusion and exclusion criteria

l. Research Ethics

This research was conducted by paying attention to the ethical principles of health research, including:

- 1) Informed consent
- 2) Confidentiality of respondent identity
- 3) Anonymity
- 4) Nonmaleficence (do not harm the respondent)

3. Research Results And Discussion

a. Research Result

This study involved 60 implementing nurses who worked in the inpatient ward of Hospital X. The analysis of the research results included the characteristics of the respondents, the level of implementation of SBAR communication, the level of *patient safety*, as well as the relationship between the two variables.

- 1) Respondent Characteristics





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a) Nurse Age

Age (years)	f	%
20–30	18	30.0
31–40	26	43.3
>40	16	26.7
Total	60	100

The majority of respondents were of productive age with sufficient clinical experience in nursing practice.

b) Last education

Education	f	%
D3 Nursing	24	40.0
Bachelor of Nursing	30	50.0
Nurses	6	10.0
Total	60	100

c) Length of working

Length of working	f	%
1–5 years	20	33.3
6–10 years	22	36.7
>10 years	18	30.0
Total	60	100

d) SBAR Communication Implementation Level

SBAR Implementation	f	%
Good	38	63.3
Enough	15	25.0
Not enough	7	11.7
Total	60	100

Interpretation:

Most nurses have implemented SBAR communication well, especially during patient handovers and communication with doctors.

e) Patient Level Safety





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Patient Safety	f	%
Good	40	66.7
Not enough	20	33.3
Total	60	100

Patient indicators *the safety* assessed includes accurate patient identification, effective communication, and prevention of errors in action.

f) The Relationship between SBAR Implementation and *Patients Safety*

SBAR Implementation	Patient Good Safety	Patient Lack of Safety	Total
Good	32	6	38
Enough	6	9	15
Not enough	2	5	7
Total	40	20	60

The Chi- Square test show a p value = 0.002 (< 0.05).

Statistical Interpretation:

There is a significant relationship between the implementation of SBAR communication and the level of *patient Safety*. Nurses who implement SBAR well tend to have more optimal patient safety practices.

g) Summary of Research Findings

- 1) The majority of nurses are of productive age and have a minimum education of D3 in nursing.
- 2) The implementation of SBAR communication is mostly in the good category.
- 3) *Patient level safety* is higher in nurses who apply SBAR optimally.
- 4) There is a significant relationship between SBAR implementation and *patient safety*.

b. Discussion

1) Implementation of SBAR as an Effective Communication Strategy

The results of the study showed that the implementation of SBAR communication was significantly related to increased *patient Safety*. SBAR provides a structured communication framework so that clinical information can be conveyed systematically, clearly, and without fragmentation.

In nursing practice, the SBAR structure helps nurses convey patient conditions concisely yet comprehensively, especially in critical situations such as patient handovers and reporting emergency conditions.





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2) The Role of SBAR in Preventing Patient Safety Incidents

Nurses who effectively implement SBAR tend to be more thorough in conveying *situations* and *assessments*, and are more willing to provide clear *recommendations*. This reduces the risk of miscommunication, which often leads to medication errors, delayed interventions, and other clinical errors.

This finding is in line with the concept of *patient safety* which emphasizes that effective communication is one of the international patient safety goals.

3) The Influence of Nurse Characteristics on SBAR Implementation

Nurse's age, education, and length of service contribute to their ability to implement SBAR. Nurses with higher education and longer work experience tend to be more confident in conveying clinical recommendations to other healthcare professionals.

This research also shows that without training and policy reinforcement, even nurses with long experience can revert to unstructured communication patterns.

4) SBAR and Patient Safety Culture

Implementing SBAR not only impacts the technical aspects of communication but also contributes to the development of a patient safety culture. The use of SBAR encourages openness, accountability, and interprofessional teamwork.

When SBAR is applied consistently, nurses feel more secure in conveying information and recommendations, so clinical decisions can be made collaboratively and in a timely manner.

5) Challenges of SBAR Implementation in the Field

Although most nurses have implemented SBAR effectively, some nurses still apply it inconsistently. Inhibiting factors include high workloads, time constraints, and suboptimal supervision.

This shows that SBAR implementation requires systemic support, including hospital policies, routine training, and ongoing monitoring.

6) Implications for Nursing Practice

The results of this study confirm that SBAR communication should be standardized in nursing practice. Consistent implementation of SBAR can improve communication quality, reduce patient safety incidents, and enhance the overall quality of healthcare.

7) Research Limitations

Some of the limitations of this study include:

- a) *Cross-sectional* design so cannot assess cause-effect relationships.
- b) *Patient assessment safety* is partly observational.





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c) The research was conducted in only one hospital.

Further research is recommended to use an experimental or *pre-post design* intervention.

4. Conclusion And Suggestions

a. Conclusion

There is a significant relationship between the implementation of SBAR communication in nursing practice and the improvement of *patient Safety*. SBAR communication is effective in supporting safe and quality nursing practice.

b. Suggestion

- 1) Hospitals are advised to make SBAR the standard for nursing communication.
- 2) Nurses need to improve the consistency of using SBAR in every handover and clinical communication.
- 3) Further research is recommended using an experimental design to assess the effectiveness of SBAR training.

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