

## INFLUENCE OF AIDET COMMUNICATION MODE ON NURSING QUALITY OF PEDIATRICS DEPARTMENT

FEI WANG<sup>#</sup>, SHUPING LUO<sup>#</sup>, XIAOYUN ZHAO, WEIPING LI, LINMEI GUO<sup>\*</sup>

The 940th Hospital of the PLA Joint Logistic Support Force, Lanzhou, Gansu

<sup>#</sup>co-first author

### ABSTRACT

**Introduction:** To study the clinical value of AIDET communication mode in the nursing process of Pediatrics.

**Materials and methods:** 120 children with Henoch Schonlein purpura in our hospital from August 2020 to April 2022 were selected and randomly divided into control group and observation group with 60 cases in each group. The control group was treated with conventional communication mode, while the observation group was treated with AIDET communication mode. Patients were followed up for half a year to record the recurrence of the disease.

**Results:** Compared with the control group, the incidence of adverse events and disputes in the observation group were significantly lower, the improvement time of digestive tract symptoms and the disappearance time of rash and joint pain symptoms were significantly shorter, the recurrence cases of symptoms in the follow-up of 3 months and 6 months were less, and the indicators of nursing quality were significantly higher. The observation group of children and their guardians of nursing work satisfaction was also significantly higher, and the above differences were statistically significant ( $P < 0.05$ ).

**Conclusion:** AIDET communication mode can significantly improve the nursing treatment and nursing satisfaction in pediatric internal medicine nursing, which is conducive to the clinical prognosis of children, and is worthy of wide clinical application.

**Keywords:** AIDET communication mode, department of pediatrics, allergic purpura, nursing quality.

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### Introduction

At present, with the continuous development of medical model, modern nursing puts forwards higher requirements for nursing staff, especially for nursing staff in the Department of Pediatrics.

As it is difficult for children to describe their conditions in detail and their parents have more anxiety, there will be poor communication between nurses and their families, which intensifies the contradiction between nurses and patients and affects nursing satisfaction<sup>(1-3)</sup>. According to literature, medical disputes caused by inadequate communication in clinical work can be

as high as 80%<sup>(4)</sup>. A domestic survey shows that the communication ability of nurses in China generally needs to be improved<sup>(5)</sup>. Therefore, to improve the quality of nursing service in the Department of Pediatrics, our hospital based on the nursing management system in the Department of Pediatrics included 120 children with allergic purpura to promote the AIDET communication mode, which mainly includes Acknowledge, Introduce, Duration, Explanation and Thank you, basically covering all standard terms and communication procedures in the communication between nurses and patients. The implementation results are summarized and reported as follows.

## Materials and methods

### General data

120 children with allergic purpura in our hospital from August 2020 to April 2022 were selected and randomly divided into control group and observation group with 60 cases in each group. The control group was treated with conventional communication mode, while the observation group was treated with AIDET communication mode.

#### Inclusion criteria:

- School-age children;
- The children had symptoms of varying degrees of bleeding and skin purpura, and were diagnosed as allergic purpura by laboratory examination;
- All the families of the children expressed their understanding of the purpose of this study and signed the consent form;
- Family members or their guardians have no communication barriers, and their education was junior high school or above.

#### Exclusion criteria:

- Children with severe cardiopulmonary disease;
- Children with speech or hearing impairment;
- Children with psychological or mental problems;
- Family members do not cooperate or have medical disputes.

This study has been filed with the Ethics Committee of our hospital. In the control group, there were 36 males and 24 females, with an average age of  $8.96 \pm 1.34$  years and an average course of disease of  $2.07 \pm 1.12$  years. In the observation group, there were 34 males and 26 females, with an average age of  $8.75 \pm 1.18$  years and an average course of disease of  $2.15 \pm 1.06$  years. There was no significant statistical difference between the general data of the two groups, which was comparable ( $P > 0.05$ ). See Table 1 for details.

Grouping	Gender (male/female)	Average age (years)	Average course of disease (years)
Control group	36/24	$8.96 \pm 1.34$	$2.07 \pm 1.12$
Observation group	34/26	$8.75 \pm 1.18$	$2.15 \pm 1.06$
t/X <sup>2</sup> value	0.137	0.911	0.402
P value	0.711	0.364	0.688

**Table 1:** Comparison of general data of two groups of children.

### Research method

All patients were actively treated for the primary disease. The control group was treated

with conventional communication mode, while the observation group was treated with AIDET communication mode. This mode mainly refers to Acknowledge, Introduce, Duration, Explanation and Thank you<sup>(6,7)</sup>.

#### The specific methods are as follows:

- Acknowledge. The nursing staff should master the basic situation of the child, actively greet the child with a kind attitude and a smile, and make eye contact with the child to reduce the sense of strangeness. The nursing staff should use the honorific names when communicating with the family members of the children, and timely understand the needs of the children and their guardians and their opinions on treatment.

- Introduce. In addition to introducing themselves to the children and their families (paying attention to highlighting the characteristics of each nurse), nurses also need to introduce the precautions in the ward, the hospitalization environment and instructions during hospitalization to the children and their families, so as to effectively establish a good nurse-patient relationship.

- Duration. The nursing group should sort out and summarize the inspection process, treatment and medication, dietary care and other precautions related to a child's disease, and formulate a volume. When communicating with the child and his guardian, the nursing group should help the child and his guardian understand the whole treatment and nursing process in detail.

- Explanation. Nurses need to be patient with every problem and treatment doubt raised by the child's guardian, and fully explain the purpose and significance of each step of nursing work in the nursing process, so that the child and his guardian can understand the precautions of each operation, possible adverse reactions and relevant countermeasures, and timely dredge the adverse emotions of the child and his guardian.

- Thank you. In the process of nurse patient communication, the nursing staff should thank the children and their guardians for their cooperation, as well as for their suggestions and the choice of treatment in our hospital.

### Observation indexes

#### Clinical symptom indexes:

The duration of improvement of digestive tract symptoms and the duration of disappearance of rash and joint pain symptoms were recorded.

*Recurrence of clinical symptoms after hospital discharge:*

The hospital should follow up the patients for half a year after discharge, and record the recurrence of children’s diseases at 3rd and 6th month after discharge.

*Nursing quality indexes:*

The incidence of adverse events, the incidence of disputes and the qualified rate of nursing quality were mainly investigated.

*The qualified rate of nursing quality included 6 items:*

writing of nursing documents, basic nursing work, aseptic disinfection, management of rescue equipment and drugs, nursing skill operation and safety improvement, a total of 100 points. The higher the score, the better the quality of nursing.

*Nursing satisfaction survey:*

When the children were discharged from the hospital, their guardians should fill out the nursing satisfaction questionnaire during hospitalization, including great satisfaction, satisfaction and dissatisfaction.

**Data analysis**

SPSS21.0 statistical software was used. The measurement data conformed to the normal distribution and were expressed as mean ± standard deviation ( $\bar{x} \pm s$ ). t-test was used for the comparison between groups,  $X^2$  test was used for the counting data, and Pearson correlation analysis was used for the correlation analysis between variables. It was considered that  $P < 0.05$  was statistically significant.

**Results**

**Comparison of clinical symptom indexes between the two groups**

Compared with the children in the control group, the duration of the improvement of digestive tract symptoms and the duration of the disappearance of rash and joint pain symptoms in the observation group were significantly shorter, and the difference was statistically significant ( $P < 0.05$ ). See Table 2 for details.

**Comparison of recurrence between the two groups**

Compared with the control group, the number of recurrence cases in the observation group was

significantly less at 3rd and 6th month after discharge, and the difference was statistically significant ( $P < 0.05$ ). See Table 3 for details.

Grouping	Cases	Duration of the improvement of digestive tract symptoms (d)	Duration of the disappearance of rash symptoms (d)	Duration of the disappearance of joint pain symptoms (d)
Control group	60	5.02±0.21	7.46±0.26	9.04±0.31
Observation group	60	4.75±0.18	6.78±0.31	8.16±0.22
t value		7.561	13.018	17.931
P value		0.000	0.000	0.000

**Table 2:** Comparison of clinical indexes between the two groups.

Grouping	Cases	Third month (%)	Sixth month (%)
Control group	60	9(15.00%)	12(20.00%)
Observation group	60	1(1.67%)	4(6.67%)
$X^2$ value		5.345	4.615
P value		0.021	0.000

**Table 3:** Comparison of general data of two groups of children.

**Comparison of nursing quality indexes between the two groups**

Compared with the control group, the incidence of adverse events and disputes in the observation group were significantly lower, while the indexes of nursing quality were significantly higher, and the difference was statistically significant ( $P < 0.05$ ). See Table 4 for details.

Grouping		Control group	Observation group	t/ $X^2$ value	P value
Cases		60	60		
Incidence of adverse events		10(16.67%)	2(3.33%)	4.537	0.033
Dispute occurrence rate		8(13.33%)	1(1.67%)	4.324	0.037
Nursing quality	Nursing document writing	84.26±5.24	95.23±5.53	11.154	0.000
	Basic nursing	83.35±6.22	92.32±6.27	7.867	0.000
	Aseptic disinfection	87.27±5.52	95.69±6.14	7.899	0.000
	Management of rescue equipment and drugs	84.51±6.04	92.06±6.17	6.773	0.000
	Nursing skill operation	84.16±6.22	95.78±6.35	10.126	0.000
	Safety improvement	82.73±5.16	94.25±6.04	11.232	0.000

**Table 4:** Comparison of nursing quality indexes between the two groups.

**Comparison of nursing satisfaction between the two groups**

Compared with the control group, the satisfaction of children and their guardians in the

observation group was significantly higher, and the difference was significant ( $P < 0.05$ ).

Grouping	Cases	Great satisfaction	Satisfaction	Dissatisfaction	Total satisfaction (%)
Control group	60	26	25	9	85.00%
Observation group	60	31	27	2	96.67%
X <sup>2</sup> value		-	-	-	4.904
P value		-	-	-	0.026

**Table 5:** Comparison of nursing satisfaction between the two groups.

## Discussions

Children have weak resistance to external diseases, which can easily induce various respiratory and gastrointestinal diseases, causing great trouble to children and their families<sup>(8,9)</sup>. Henoch Schonlein purpura in children is one of the common diseases in pediatrics, and its clinical treatment principles often focus on analgesia, hemostasis and anti infection. However, due to the younger children and poor coordination, nursing work is often difficult to carry out smoothly. At the same time, the family members of the children will also increase the difficulty of nursing out of their concern for the children, resulting in the failure of diagnosis and treatment activities and the reduction of their satisfaction with nursing work<sup>(10-13)</sup>. Based on the occurrence of such problems, the Department of Pediatrics of our hospital took the lead in applying the AIDET communication mode in clinical nursing in 2020, and achieved remarkable results.

The results of this study showed that the duration of improvement of digestive tract symptoms and disappearance of rash and joint pain symptoms in the observation group were shorter than those in the control group ( $P < 0.05$ ), and the number of recurrence cases in the observation group was significantly less at 3rd and 6th month after discharge ( $P < 0.05$ ). The above results suggest that the application of AIDET communication mode in nurse-patient communication can significantly benefit the prognosis of children. The reason may be that AIDET communication mode emphasizes the characteristics of each nursing member, which can fully mobilize the enthusiasm of each member, and full communication within team members can also timely solve the problems of children and their families<sup>(14,15)</sup>. Good communication between nursing staff and children and their families can increase

mutual trust and gradually improve the compliance of children and their families<sup>(16,17)</sup>. The family members of the children can take the initiative to state their worries, concerns, and questions about the children's diseases, reducing their anxiety<sup>(18)</sup>. The above advantages of AIDET communication mode are conducive to the rehabilitation of children's diseases and reducing the risk of disease recurrence. In addition, studies have shown that a big factor affecting the satisfaction of nursing quality is whether the patients or their families think that the nursing staff have enough professional skills, have compassion and really care about the patients<sup>(19)</sup>. At the same time, this study also found that compared with the control group, the incidence of adverse events and disputes in the observation group were significantly lower, while the indexes of nursing quality were significantly higher, and the satisfaction of children in the observation group and their guardians with nursing work was also significantly higher. The above differences were statistically significant ( $P < 0.05$ ). AIDET communication mode reduced the strangeness between nurses and patients by expressing cordial greetings, professional self-introduction and heartfelt sincere thanks to the children, emphasized the sympathy and care of nurses for the children and their families, systematically sorted out the precautions for each common disease and made full communication between nurses and patients. Through explanation, the families of children changed some wrong understandings of the disease, reduced unnecessary worries, increased the cooperation of children and their families, and improved the satisfaction of nursing work to a certain extent<sup>(20-23)</sup>.

In conclusion, the application of AIDET communication mode in the Department of Pediatrics is simple and effective, which is conducive to establishing a good nurse-patient relationship and improving the satisfaction of children's families with nursing work, and is worthy of extensive clinical application.

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*Corresponding Author:*

LINMEI GUO

The 940th Hospital of the PLA Joint Logistic Support Force, Lanzhou, Gansu

Email: guolinmei9999@163.com

(China)