A NEED ANALYSIS FOR A COMMUNICATIVE ENGLISH MOBILE LEARNING MODULE FOR HEALTHCARE PROFESSIONALS

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ABSTRACT

The ability to communicate efficiently in English is a highly sought after skill for healthcare professionals. Training for this skill is usually done in a traditional classroom setting and requires time and a venue to be allocated for the learners to participate in the training sessions. Working adults in the healthcare industry find this a constraint due to their hectic scheduling in the hospital. This study aims to identify the most suitable content for an English language communication course that caters to the specific language functions in the hospital, and to determine the feasibility of offering the course on a mobile platform. A total of 38 questionnaires were administered and a focus group discussion was conducted with 5 representatives of each healthcare profession in a private hospital namely nurses, radiographers, physiotherapists, pharmacists and hospital administrators. Descriptive statistics were used to analyse the survey data and a thematic analysis was performed to derive the themes emerging from the interview. The results demonstrated that the adult learners were able to identify their preferred content based on their own work experiences. Moreover, the preference of using a mobile device for a language course appealed to them. According to the results obtained from this needs analysis, it can be concluded that an English language communication course conducted on a mobile learning platform could be the answer to these working adults’ need for English language training at the workplace.
Keywords: adult learners, communication skills, English for specific purposes, healthcare professionals, mobile learning.

INTRODUCTION

Communication skills are considered a valuable skill to navigate in the workplace. Hence, there has been an increase in workplaces that have placed an emphasis on this soft skill as it enables its users to have an edge in specific working situations. Proficiency in English is a crucial skill in the field of science, technology, engineering and mathematics. In the field of healthcare, communication in English between the healthcare professionals and patients has always been highlighted as a critical component for evaluating the quality of service (Wong et al., 2014) and to ensure patients’ safety (Hull, 2015).

A poor command of English communication skills has been highlighted recently in several studies involving non-native English speaking healthcare professionals in countries such as Australia, Japan, Taiwan, Thailand and Singapore. Although healthcare professionals in Malaysia have gone through university academic programs where the medium of instruction is English, a lack of competency is apparent especially when communicating in English with patients who do not speak the national language (Jebunnesa & Abdullah, 2013). The nature of the career-specific environment of healthcare professionals require them to be proficient in English since it is the “primary lingua franca” in both private and public hospital settings in Malaysia (Arumugam & Kaur, 2011). A study done on the phenomenon of unemployment among nurses in Malaysia revealed that competence in the English language is vital for employment and to perform their duties in the hospital (Arumugam et al., 2014).

Thus, a collaborative effort between healthcare professionals and English language educators to develop courses and design materials suitable for use in the medical field was recommended (Hull, 2015). The trainings provided for healthcare professionals in traditional settings required them to be present at a particular place and time, which takes up either their work or leisure time. In order to minimize such unnecessary time utilization, the use of technology especially mobile devices is seen as one of the ways to
facilitate the adult’s language learning process without being too invasive on their restricted time.

Mobile learning, as defined by O’Malley et al. (2003) is any sort of learning that happens when the learner is not at a fixed, predetermined location, or learning that happens when the learner takes advantage of learning opportunities offered by mobile technologies. It has paved the way for adult learners who are time-constrained to attend traditional face-to-face classroom sessions and eliminated the need to be in a specific place and time to attend training. Ruey (2010) highlights the benefits of online learning through collaboration and interaction which has helped adult learners support one another’s learning, as well as becoming self-directed and responsible learners.

Due to the nature of the job specificity of English language communication in the hospital setting, it has been categorized into English for Specific Purposes (ESP) which is separate from general English (Hull, 2015). ESP is an approach to language teaching in which all decisions as to content and method are based on the learner’s reason for learning (Hutchinson & Waters, 1987). The categorisation of English language as having a specific purpose and function in a specific workplace setting shows the importance of the usage of the language within its specific context. Richards (2001) says that the ESP approach to language teaching is a response to a number of practical concerns: the need to prepare materials to teach learners who have already mastered general English but now need English for use in employment.

In order to specify as closely as possible what exactly it is that students have to do using the medium of English, a needs analysis has to be conducted (Robinson, 1991). A needs analysis is a process of establishing the what and how of a course (Dudley-Evans and St. John, 1998). In Thailand, Gass (2012) utilised a questionnaire, observation and interview in her needs analysis and situational analysis to prepare an ESP curriculum for Thai nurses. Billingham et al. (2013) mentions the importance of finding out the feasibility of a course to answer the question “Can this study be done?”

There are two objectives of this preliminary study. Firstly, to identify the most suitable content for an English language communication course
that caters to the specific language functions in the hospital as used by healthcare professionals. Secondly, this research is conducted to determine the feasibility of offering the English language communication course for healthcare professionals on a mobile platform.

METHOD

Questionnaire

A multi-method approach which involved both quantitative study and qualitative research methods were adopted in this needs analysis. Data were collected through a questionnaire for the healthcare professionals and a focus group discussion was conducted with senior healthcare professionals to support the findings. The questionnaire contains 21 questions and was developed by the researchers to gain insights into the potential learners. The questionnaire was adapted from several literatures (Gass, 2012; Johnston et al., 2012) and questions deemed necessary were added by the researchers based on the objectives of the study.

The participants involved in the study were 38 healthcare professionals who were randomly selected from the different departments in a private hospital located in Kuala Lumpur. The participants comprised healthcare professionals from the departments of nursing, radiography, physiotherapy, pharmacy and hospital administration.

Focus Group Discussion

Focus group discussions are frequently used to obtain knowledge, perspectives, and attitudes of respondents about issues as well as to seek explanations for behaviours in a way that would be less easily accessible in responses to direct questions, as in one-to-one interviews (Kreuger, 1988; Kitzinger, 1995). Due to the relaxed nature of the interaction between the moderator and the participants during group discussions, attitudes and perceptions are developed through interaction with others in the groups (Kreuger, 1988). In order to show dimensions of understanding that often remain untapped or inaccessible, focus group discussions are a form of data collection utilised by the researchers to fulfill the study objectives.
In the focus group discussion, 5 participants representing each department in the hospital were asked to provide their opinion on the types of scenarios that require them to use English, the type of contents necessary in an English communication course for healthcare professionals, and their willingness to participate in an English communication course if it is offered for their training on their mobile devices. One of the researchers acted as the moderator for the group and the discussion was recorded on an audio recorder and later transcribed.

The participants from the focus group discussion were seniors in the department with at least 5 years of working experience. The focus group session was conducted in a meeting room in one of the branches of a private hospital in Kuala Lumpur and lasted 45 minutes.

RESULTS AND DISCUSSION

Results from the Questionnaire

The study respondents were 38 healthcare professionals, working in 5 different departments in a private hospital in Kuala Lumpur. The majority were from the nursing department and the pharmacy department. A complete profile of the respondents is described in Table 1 below.

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<th>Table 1: Demographic Information</th>
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Based on Table 1, the respondents consisted of 89.5% females and 10.5% males. The majority of the healthcare professionals were aged between 26 to 30 years (34.2%), followed by the age group 31 to 35 years (18.4%). The study found that the highest academic qualification among the healthcare professionals made up 34.2% of SPM holders, and 31.6% diploma holders. Only one respondent had a Masters degree. In terms of department, an equal proportion of nurses and pharmacists (23.7%) provided their responses, while the medical imaging and administration staff was also equal in numbers of respondents at 13.2% respectively. The majority of respondents have been working for more than 7 years, while the rest have less than 7 years of work experience.
Figure 1 shows that of the four language skills frequently used by the respondents in their workplace, speaking skills were the most frequently used at 78.9% when communicating in English. Listening skills were identified as the second most important skill at 52.6% while reading skills were least frequently used in their work environment. This finding is concurrent with Tavil’s (2010) finding that language skills such as speaking and listening should be taught in an integrated manner to improve oral communicative competence in English. Practicing these skills in isolation is counterproductive due to the nature of interaction where one would have to listen before one can produce an appropriate response. However, this does not mean reading and writing skills are unimportant. It only means that there is an urgency to respond to the need of the healthcare professionals in utilising the most critical skills used in their workplace.

The healthcare professionals identified the most common content based on their experience in Figure 2 as giving opinions (21.2%), telephoning skills (18.4%), greetings (18.4%) and showing appreciation (15.8%). Organisational communication, writing documents and dealing with
conflicts were also favoured as suitable content. Showing empathy and meeting management seems to be less important when communicating in English.

In Figure 3, the healthcare professionals mentioned the devices that they own with smartphones topping the list at 84.2%, followed by laptops and tablet PC at 31.6% and 28.9% respectively. Most of the respondents mentioned they owned more than 2 devices.

The respondents demonstrated their interest in participating in the course on a mobile platform as shown in Figure 4 with 94.7% saying ‘yes’ to indicate their agreement to participating in an English language communication course using a mobile platform while the remaining 5.3% were unsure.
Results from the Focus Group Discussion

Based on the findings of the focus group discussion conducted with the 5 representatives, the types of scenarios that require them to use English language were identified as the reception area at the entrance, accidents and emergency, ward area, pharmacy counter and admissions and discharge. The areas highlighted were the ones with high level of interaction between the healthcare professional and patients. The group agreed that a high level of communication occurred whenever there are large numbers of patients waiting to be served in the hospital. Liaw et al. (2014) used the different scenarios as they appear in the daily interaction with patients and physicians in designing her curriculum on interprofessional communication. The healthcare professionals involved rated the training program highly due to its usage of scenario modeled after the different situations occurring in a day ward. Although her findings were related to interprofessional communication, it sets the basis for the learning context to occur as it happens in the workplace.

Members of the focus group identified the areas mentioned as critically in need of improved communication skills in English since more foreigners are coming to hospitals, while some educated and urban Malaysians prefer to speak in English. The group agreed that the type of content suited for an English communication course should reflect the skills of speaking, listening and writing. Reading skills were not their main concern due to the nature of their jobs that do not require a lot of reading. One respondent from the pharmacy department said the only reading he does is reading doctor’s prescriptions. When presented with the list of content suggested for them in the questionnaire (Figure 2), they agreed on the speaking and listening skills namely, greetings, telephoning skills, giving opinions, and showing appreciation. Other speaking skills identified on the list related to organizational communication were seen as not practical in their work environment. Most agreed that practicality in terms of highest usage of the content was valued as necessary for them to learn.

Finally, all the healthcare professionals agreed that they would like to participate in an English communication course if it is offered for their training as a module available on their mobile devices. When asked the reason, all of them highlighted the device in their possession as the main
factor to consider learning using mobile devices. Time constraint to attend traditional classes was also mentioned as a factor for their preference to have the module readily available on their mobile devices. Only the nurses were concerned about not being allowed to use mobile devices in their working environment due to the possibility of spreading bacteria when using the devices. However, although they are not allowed to use their devices during work, they can still access their devices during their break time.

CONCLUSION

This paper has reported a needs analysis to identify the contents for an English language communication module for healthcare professionals. When the overall results were considered, the study shows that speaking and listening skills are essential in English language communication among healthcare professionals due to the constant interaction they have with patients in the departments of the hospital that they are working in. Their training needs to incorporate contents related to the scenarios familiar to their workplace and practical enough to accomplish their tasks. These findings indicate the practicality of mobile learning for adult learners in the hospital setting. The module is to be offered on a mobile platform utilising the healthcare professional’s personal devices. Due to the availability of the devices and their time constraints to attend a classroom based training, it is recommended that the English language communication content be offered as a mobile learning module. The implication of this needs analysis is on the design process and development of a mobile learning module for English communication for healthcare professionals, incorporating the skills to be practiced and the most suitable contents as identified.

REFERENCES


