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## Study on the development of quality of communication for elderly (QOCE) Scale

Yasuko Fukaya<sup>1</sup>, Ritsuko Wakabayashi<sup>1</sup>, Kanako Yamakuma<sup>1</sup>, Sumie Tomehata<sup>1</sup>, Shinobu Sato<sup>2</sup> and Takanori Kitamura<sup>3</sup>

<sup>1</sup>Kanto Gakuin University

<sup>2</sup>Dokkyo Medical University

<sup>3</sup>Tokai University, Japan

**Purpose:** Verbal communication between elderly person and caregivers are of two types: Type I, associated with nursing care tasks, and Type II, daily conversations in social life. This study aimed to develop a QOCE scale for evaluating type-II communication

**Study Method:** The survey participants were 56 persons from geriatric health care facilities and home care. The average age was 84.6 years (SD 7.26). The survey contents were basic participant attributes, utterance duration type per day by older adults, QOCE, motor function (FIM), cognitive function (HDSR), depression score (CESD), and life satisfaction (PGC). We used the statistical software SPSS ver. 21 for analysis.

**Results:** As the interim QOCE, we chose 16 items consisting of topic (9), older adult spontaneity (3), and conversation prompt by staff (4) and created a four-point Likert scale. We excluded two items and made a 14-item QOCE scale following item analysis by item distribution, inter-item correlation, and item-total correlation. Internal consistency was observed, and Cronbach's  $\alpha = .87$ . However, the stability of test-retest ( $r = .55, p < .001$ ) was poor. Construct validity was examined by factor analysis, from which three factors were extracted, and the cumulative contribution was 59.6%. For criterion-related validity, significant correlations between QOCE and type-II utterance duration ( $r = .53, p < .001$ ) and between QOCE and type-II spontaneous utterance ( $r = .48, p < .01$ ) were observed and confirmed.

**Discussion:** Although internal consistency was observed in QOCE reliability, a few problems were observed in stability.

[yafukaya@kanto-gakuin.ac.jp](mailto:yafukaya@kanto-gakuin.ac.jp)

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