## Needs of English Skills of Thai Nurses Working in International Hospitals Accredited by JCI in Bangkok Area

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#### Abstract

As the demand of turning Thailand to be the center of Medical Hub of ASEAN Economic Community (AEC), English skills have been playing a vital role to designate the successful career path of many healthcare personnel especially nurses (Pandey and Sinhaneti, 2013). This study was aimed at investigating the current needs of English skills of Thai nurses working in 5 JCI-accredited hospitals in Bangkok namely Bangkok Hospital, Samitivej Sukhumvit Hospital, Vejthani Hospital, BNH, and Phayathai2 International Hospital. 20 copies of the ethics approved questionnaire were randomly distributed to nurses in each hospital. After the process of accidental sampling, arithmetic means of 100 participants in terms of hours communicating in English per week ( $\bar{x} \ge 42.6$ ) or number of English speaking patients they talk to per week ( $\bar{x} \ge 22.6$ ) or other qualifications which are defiable as 'good English skills' were applied for selecting samples of the study. Needs of English skills from 63 samples who met the criteria were analyzed by arithmetic means, standard deviation, and interpreted by 5-point Likert scale. The study revealed that nurses who were considered the primary medical coordinator between patients and physicians had rated listening as the communicative skill most needed and 'listening to patient's history, symptoms, and requests' was the function highest needed of this modality. Other skills including speaking, reading, and writing were also needed at 'high' level in which 'asking patients about their chief complaints and symptoms, 'reading physician's orders' and 'writing various medical forms' were functions needed highest of each modality respectively. By looking at needs of the course book, the participants needed all skills to be focused in the book as each function in nursing profession requires different skill to be performed.

Keywords: ENP, Thai nurses, needs analysis

#### Introduction

The Board of Investment (2016) (cited in Chalauisaeng, 2017) stated that Thailand is well-positioned to be the medical hub of Asia with the outstanding medical foundation including premium medical services, qualified healthcare specialists, and various internationally accredited medical facilities. This country, thus, became one of top destinations for the world leader of medical tourism and over a million international patients have been traveling to the country on medical travel reasons since 2008 (Department of International Trade Promotion, Ministry of Commerce, Thailand: Healthydietbase, 2015).

In healthcare settings, the U.S. Department of Healthcare and Humanity Services (2001) and the Joint Commission International (JCI) (2017) all point that nurses are the major workforce who need to communicate understandably and holistically in various forms with patients who are from different social values, different languages, and different religions in order to provide the satisfied healthcare services and to create mutual understanding between patients and their healthcare providers (Putsch, 1985; Eggly, 2002; Frampton et al, 2008; Chapman, 2009; Waidarp, 2011). Such holistic communication requires the art of sharing emotional as well as factual information involving letting go of judgments and appreciating the patient's point of view beginning with attentive nonverbal communication (i.e., warm,

accepting eye contact, and facing the patient with arms uncrossed and an inviting facial expression) and follows with a willingness to listen to the patient's inner experience could bring a beneficial effect on their physical healing and well-being (Klagsbrun, 2012).

As the demand of making Thailand a medical center as aforementioned, effective English communication skills will be essential in delivering the utmost satisfied healthcare services to foreign patients or poor communication can lessen satisfaction, break patient trust, affect diagnosis and treatment plans (Lee, 1997 and Pandey and Sinhaneti, 2013). Wong (2004) summarized that despite Thai nurses had been provided many English courses before they graduated, they seemed to use their English reluctantly when communicate with foreign patients as chances to use English in their daily life were considered low. Jamshidnejad (2010) further mentioned that nurses working in private international hospitals would become easily frustrated for being unable to speak fluently with correct grammar and a native-like accent.

Tongvivat (2008) and Waidarp (2011) discussed in their research that working in private international hospitals could not guarantee the high proficiency of using English. Those working in outpatient departments or OPD gained more chances to communicate in English during their working hours because it was the primary department of the hospital where patients need to consult their health problems. None the less, many nurses were unsure what skills of English they should enrich and what skills should be acquired since their demands of English skills were not analyzed. These situations, therefore, seem to be underlying reasons explaining why many Thai EFL nurses still cannot communicate in English effectively even though the high scores of standardized English test such as TOEIC was presented when applying for the job.

Drawing upon prior research, the updated needs of English skills from viewpoints of nurses in private JCI-accredited international hospitals would be an essential tool to promote the insights of professional skills demanded for communicating with English speaking patients. The results of the study should yield practice for those who wish to pursue their careers in the international healthcare industry and to the preparation of the English for nursing courses as results of needs analysis can be used to determine suitable teaching techniques for classrooms (Brumfit & Roberts, 1987)

#### **Research Question**

To what extent do nurses working in international hospitals accredited by JCI in Bangkok have needs for English skills?

#### **Research Objective**

To explore the needs of English skills of nurses working in international hospitals accredited by JCI in Bangkok area.

# Literature Review

English for Nursing Purposes (ENP)

According to Celik, Yildiz, Mart, & Bingol (2014), English for Nursing Purposes (ENP) is rather related to English for Medical Purposes (EMP) and under English for Specific Purposes (ESP) as illustrated in an adaptation figure 1. Its target audiences are those who need career-specific language that is useful for their work-related duties.

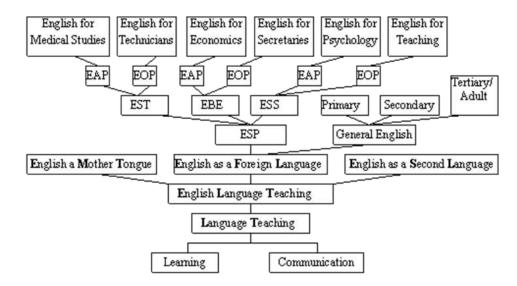


Figure 1 English language teaching tree (Hutchinson & Waters, 2002:17)

Dudley-Evan and St. John (1998) summarize that in ESP there is always a particular text written according to specific requirements or needs of the environments namely stakeholders. The language of the hospital setting, likewise, comprises advanced contents rather be taught in a specific English classroom not in the general and the language is learnt not for its own sake or for the sake of gaining a general education, but to smooth the path to entry or greater linguistic efficiency in academic and professional or workplace environments (Hull, 2015; Basturkmen, 2006). The role of ESP is to help language learners to build up the needed abilities in order to use them in a specific field of inquiry, occupation, or workplace. Moreover, ESP depicts skills and competency level beyond that of general English. Thus, English for nursing purposes should be taught to achieve specific language skills using in hospital settings or to comprehend English discourse related to such specific area.

English would definitely elicit power of understanding when communicating with patients who speak English primarily. However, language for the nursing profession poses a challenge as there are different requirements for specific situations and within specialist units (Allen, Chapman, O'Connor, & Francis, 2007). Within the realm of healthcare services, Medlin (2009) suggests that the use of Greek and Latin elements is obvious. Many medical terminology and textbooks where roots and affixes that form medical nouns, adjectives, and verbs are frequently seen. For example, *hepatitis* is formed from the root hepat-, pertaining to the liver, and the suffix –itis, meaning inflammation. The adjective *myocardial* comes from myo-, muscle, and cardio-, heart. Thus, a medical language should not be confused with the general English. English for nurses, thus, should require its own course materials, examinations, and benchmarks which must be designed and written not only by professional material designers but professionals in that specific career (Nor Puteh and Nor Mohammad, 2017).

#### Needs analysis

Nowadays, communication in English represents an inevitable part of one's education in order to be able to develop international co-operation in various fields e.g sciences, research, or even nursing hospitality. Through needs analysis and questionnaires, ESP practitioner can obtain various valuable information including personal information of respondents, language information about their current skills and language use, the gap between the present situation and professional information about them, their needs from course, effective ways of learning the skills and language determined by lacks, and tasks and activities they are or will be using English for target situations (Songhori, 2007).

Graves (2000) presents the process of needs analysis and comes up with a set of decision, actions, and reflections, which is cyclical in nature as follows:

- 1. Deciding what information to gather and why;
- 2. Deciding the best way to gather such information: when, how, and from whom;
- 3. Gathering the information;
- 4. Interpreting the information;
- 5. Acting on the information interpreted;
- 6. Evaluating the effect and effectiveness of the action; and (Back to 1) deciding on further or new information to gather. TheSE cyclical processes are illustrated in Figure 2.

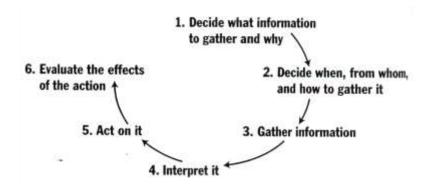


Figure 2 The Needs Analysis Cycle (Graves, 2000)

Siriwong (1984) surveyed the needs of English from nursing students of Mahidol University in Thailand and found that reading skills were needed extensively. Besides, aspects related to reading skills i.e. vocabulary, medical terminology, and medical jargons were main factors that Lee (1999) had raised in the needs analysis of making an ENP courses from Taiwanese nursing students' perspectives.

In working organizations, Suwaroporn (1998) conducted a research to determine needs and problems in using English among nurses in King Chulalongkorn Memorial Hospital and found that reading skills were most necessary for nursing professionals since the hospital was one of the largest Thailand's leading medical school affiliates which required both physicians and nurses to improve their professional knowledge through reading textbooks and journals. Alharby (2005), likewise, investigated the English language communicative needs of health professionals in different hospitals in Riyadh area of Saudi Arabia by investigating their language use in the workplace and found that listening and speaking were most extensively used and played an important role in the careers of Arabic healthcare professionals.

There are also other studies that reveal the languages used and patterns of interactions needed in the hospital settings between nurses and foreign patients specifically in Thailand. Waidarp (2011) examined nurses' needs of using English with English speaking patients in an international hospital in Silom area of Thailand. The results showed that the participating nurses needed listening skills highest. As a result, Waidarp (2011) highlighted the necessity to emphasize the teaching of English oral communication skills namely listening and speaking skills for Thai nurses.

Another study that demonstrated the use of English and skills needed for the healthcare industry in Thailand was conducted by Pandey and Sinhaneti (2013). The researchers explored the use of English as a medium of communication in two different international hospitals in Bangkok. In accordance with Waidarp (2011), their findings also pointed that listening and speaking were skills extensively needed for healthcare personnel.

From what each study highlighted it should be noted that specific group of English users requires different English skills, albeit the same medical orientation. Needs analysis also was an important approach in planning professional development activities as it provided valuable discrepancies between actual needs and actual gain, demonstrated the present situation, promoted appropriate decision making for improvement. Therefore, to comprehend actual English skills needed by Thai nurses working in private JCI-accredited international hospitals in Bangkok, needs analysis would be a significant tool to elicit those information and showcase what English skills are actually needed for nurses who wish to communicate in English successfully when providing services to English speaking patients in those organizations.

#### **Research Methodology**

#### **Research design**

This human ethics approved study applied the questionnaire to retrieve the quantitative data namely English skills that were needed by Thai nurses working in private international hospitals accredited by JCI in Bangkok.

#### **Population of the study**

As the study was aimed at finding the needs of nurses in private international hospitals in Bangkok area alone, the researcher had looked into www.findthaiproperty.com and found that Silom, Sukhumvit, Bangkapi, Petchaburi, and Victory Monument were five main metropolitan areas of Bangkok where expats and foreign visitors largely gathering. The researcher, thus, chose them to be areas studied.

One JCI-accredited hospital of each area was purposively chosen based on the current information in www.jointcommissioninternational.org, National Statistical Office, Ministry of Information and Communication Strategy in 2012, the business report from Krungsri Bank, and Government Savings Bank in 2016 which all are informing details of the international reputation and service image in terms of accommodation, facilities, and their state of art equipment. The five selected hospitals include Bangkok Hospital, Samitivej Sukhumvit Hospital, Phayathai2 International Hospital, Vejthani Hospital, and Bangkok Nursing Home (BNH) assuming that fulltime professional nurses in these hospitals had more

chances to communicate in English with divert English speaking patients and families through the use of both receptive and expressive skills.

#### Sample size

According to the latest private hospital survey by National Statistical Office, Ministry of Information and Communication Strategy in 2012, there were approximately 4,369 fulltime professional nurses in private hospitals in Bangkok whose patient bed are more than 250.

The researcher applied the simplified formula of Yamane (1967) to calculate sample size of the population at 95% confidence interval with level of precision 10%. 98 samples, therefore, would be sample proportion to represent the population of the study theoretically. However, the researcher was rounding off number of samples to 100 for an easiness of statistical evaluation.

#### Participants of the study

The researcher also applied the quota sampling together with accidental sampling to launch the questionnaire to 20 nurses in each hospital during their lunch time to avoid disturbance in the hospital. The respondent who was qualified with one of the following criteria was recruited and his/her responds were analyzed. Criteria were as follows.

- 1. Number of foreign patients per week whom they communicate in English was equal or above the average number of total 100 participants of this study, or
- 2. Number of hours per week that they communicate in English was equal or above the average number of total 100 participants of this study, or
- 3. Used to take the English standardized tests e.g. TOEIC and IELTS and received minimum score of 550 in TOEIC or 4.0-5.0 in all bands of IELTS, or
- 4. Graduated with Bachelor degree in Nursing Science in international program, or
- 5. Used to study or live abroad where English is an official language at least one year, or
- 6. Graduated with secondary diploma in international program or equivalent e.g. GED, IGCSC, or O-level.

#### **Research instrument**

A questionnaire approved by the human ethics unit of university of Phayao was an instrument in the study as it required minimal time from respondents and provided a flexible and convenient way to respond. Details of developing the research instrument are as follow.

The questionnaire was initially constructed and developed based on a variety of related research, books, and journals concerning needs analysis functions. English skills or tasks specifications to be rated in the questionnaire were also adapted from Tongvivat (2008) and Waidarp (2011) in which demands of 'real' linguistic performances of nurses were reflected. This initial version of the questionnaire was administered to three experts to evaluate the content validity (IOC): one expert was from the ESP arena, another expert was a nursing lecturer at tertiary level, and the last expert was a fulltime registered nurse in a private hospital. The item of questions rated  $\geq 0.5$  was valid and used in the questionnaire whilst those rated lower than 0.5 were revised and/or modified based on the expert's comments and suggestions.

The questionnaire was later piloted with 10 nursing staffs from Samitivej Srinakarin Hospital as this hospital also was considered a JCI-accredited international hospital in Bangkok and nursing staffs there shared some common characteristics as of the participants in five hospitals mentioned earlier. They were asked to fill out, identify ambiguous words and statements, and provide some comments, suggestions, and opinions. The data obtained from the pilot study and the draft questionnaire was evaluated for reliability by using Cronbach's alpha coefficient. The Cronbach's alpha reliability coefficient of the questionnaire was 0.95.

Later, the revised version of the questionnaire was sent to the human ethics unit of the university of Phayao to be approved its qualifications as final.

The final version of the questionnaire fell into three parts. The first part required the respondent either to fill or to choose the information relevant to their biographic data. The second part applied five-point Likert Scale to help seek information about the extent to which the four English language skills were needed in their work places. The last part was also a five-point Likert Scale format that asked respondents to rate their needs for the specification of English learning course book.

#### **Data collection**

Participants of the study were selected by quota sampling plus accidental sampling methods. They were informed about the purpose and methodology of the study and given a consent form. After each participant completed the questionnaire, those who met the criteria were recruited and their responds were analyzed.

#### **Data Analysis**

#### Data analysis of part 1 in the questionnaire

- 1. Frequency distribution and percentage were applied in the analysis of answers concerning gender, and work department of the participants of each hospital.
- 2. Arithmetic means and standard deviation were applied to summarize age, number of hours and number of foreign patients per week that the participants of each hospital communicate in English with.
- 3. Percentage and frequency distribution were also applied to analyze numbers of participants who met the aforementioned recruiting criteria. Moreover, the cut point of the number of hours and the number of foreign patients, were retrieved from the arithmetic means of themselves.

#### Data analysis of part 2-3 in the questionnaire

The five-point Likert Scale with Cronbach's alpha coefficient interpretation was used to illustrate the levels of the needs of English skills in four different modalities and functions. The specific scale was assigned for each specific criterion as in the following table.

Scale	Interpretation	Mean range
5	Highest	4.21-5.00
4	High	3.41-4.20
3	Moderate	2.61-3.40
2	Low	1.81-2.60
1	Lowest	1.00-1.80

#### Table 1: Scale interpretation

#### Findings

This section presents the finding data from the questionnaire. The findings are reported to answer the research question: to what extent do nurses working in international hospitals accredited by JCI in Bangkok have needs for English skills? The results are presented based on the item of questions appear in the questionnaire.

Hospitals	No. of	Ger	nder	Working departments							
	Participants	Μ	F	ER	OPD	IPD	LR	OR	RR	NR	Others
		(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)	(%)
Bangkok	20	3	17	2	8	3	4	0	0	3	0
Hospital		(15)	(85)	(10)	(40)	(15)	(20)	(0)	(0)	(15)	(0)
Samitivej	20	2	18	3	7	4	1	1	2	0	2
Sukhumvit		(10)	(90)	(15)	(35)	(20)	(5)	(5)	(10)	(0)	(10)
Phayathai 2	20	1	19	2	6	7	0	0	0	1	4
International		(5)	(95)	(10)	(30)	(35)	(0)	(0)	(0)	(1)	(20)
Vejthani	20	1	19	0	9	7	0	0	0	0	4
		(5)	(95)	(0)	(45)	(35)	(0)	(0)	(0)	(0)	(20)
BNH	20	1	19	1	3	1	2	3	4	0	6
		(5)	(95)	(5)	(15)	(5)	(10)	(15)	(20)	(0)	(30)
Total	100	8	92	8	33	22	7	4	6	4	16
	(100%)	(8)	(92)	(8)	(33)	(22)	(7)	(4)	(6)	(4)	(16)

#### **Table 2:** Demographic Data

As presented in Table 2, twenty participants from each hospital have completed the questionnaire due to the quota sampling. Total number of the respondents in the study is 100, 92 respondents (92%) were female while the rest 8 (8%) were male. The majority of the respondents were nurses from outpatient department (OPD) 33% and inpatient department (IPD) 22% respectively.

Hospitals	No. of respondents	Age	Age (year)No. of foreign patients per weekNo. of hours of English per w				
		x	<b>S.D</b> .	Ā	S.D.	$\overline{\mathbf{x}}$	S.D.
Bangkok Hospital	20	35.2	6.44	56	1.97	28	2.42
Samitivej Sukhumvit	20	32.1	5.09	50	1.53	24	2.31
Phayathai 2 International	20	30.7	6.03	31	1.78	19	2.14
Vejthani	20	37.4	5.59	27	1.43	13	2.15
BNH	20	31.8	5.13	49	1.32	20	2.06
Total	100	33.44	5.65	42.6	1.60	20.8	2.21

#### Table 3: Demographic Data (Cont.)

Table 3 summarizes the arithmetic means of age of respondents which was 33.44 years of age with standard deviation 5.65. Average numbers of foreign patients to whom participating nurse communicated in English was 42.6 persons per week with standard deviation 1.60. Finally, average amount of hours that they communicated in English was 20.8 hours per week with standard deviation 2.21. These two arithmetic means were the initial cut-off criteria to select the samples for the study.

The respondents who met one of the following criteria were, therefore, recruited as 'good' English samples of the study. The reason why the researcher aimed to retrieve data from these samples was because real English professional skills required for working in an

organization accredited by world standardized organization namely JCI could be reflected. Criteria were as follows.

1) communicate with foreign patients equal or more than 42.6 persons per week, 2) communicate with foreign patients equal or more than 20.8 hours per week, 3) receive the score of English standardized tests or equivalent more than the minimum requirement e.g. 550 in TOEIC or 4.0-5.0 in all bands of IELTs, 4) graduate with Bachelor degree in Nursing Science in international program, 5) study or live abroad where English is its official language at least one year, and 6) obtain secondary degree in international program or equivalent e.g. GED,IGCSC, or O-level. The percentage and the frequency distribution of the samples who met the above selective criteria were demonstrated in Table 4.

Hospitals	No. of	No. of samples in each hospital meeting each criterion*						
	Samples, (%)	Criteria 1	Criteria 2	Criteria 3	Criteria 4	Criteria 5	Criteria 6	
Bangkok	18,(28.57)	18	18	12	4	1	1	
Samitivej Sukhumvit	15,(23.81)	14	15	10	3	1	1	
Phayathai 2 International	9,(14.29)	7	9	5	1	0	0	
Vejthani	7,(11.11)	6	7	4	0	0	0	
BNH	14,(22.22)	13	14	9	3	1	1	
Total	63	58	63	40	11	3	3	

 Table 4: Data of sample in each criterion

\*One sample can meet more than one criterion

In Table 4, there were 63 samples out of 100 participants from five hospitals who met the criteria of this study. The most samples were from Bangkok Hospital (28.57%) followed by Samitivej Sukhumvit (23.81%), BNH (22.22%), Phayathai2 International Hospital (14.29%), and Vejthani Hospital (11.11%) respectively. However, it should be noted that one sample was able to possess more than one qualification. Hence, it was found that the majority of samples in this study spent time communicating with foreign patients equally or more than 20.8 hours per week.

Table 5: Needs	of English	skills during	the working time	•

	Level of needs						
Skills	$\overline{x}$	S.D.	Interpretation				
Listening	4.18	1.44	High				
Speaking	4.03	1.49	High				
Reading	3.80	1.46	High				
Writing	3.47	1.52	High				

After the recruitment process, needs of English skills of 63 samples were analyzed as presented in Table 5. There was not any skill rated highest according to the interpretation of five-point Likert Scale (equal or more than 4.21) yet all skills were still needed at *'high'* level (equal or more than 3.41). These findings revealed that the nurses who work in these five JCI accredited international hospitals needed all English skills at extensive level.

Functions of each skills or modalities were also analyzed by five-point Likert Scale and presented based on their level of needs. Functions of listening skills are presented in Table 6. It was found that 'Listening to patient's history, symptoms, and requests' and 'Listening to physician's orders and diagnosis' are two functions rated 'highest'. And in Table 7, 'Asking patients about their chief complaints and symptoms' and 'Giving information of treatment plans or diagnosis' are two functions of speaking skills rated 'highest'. For reading skills in Table 8, there was only one function rated 'highest': 'Reading physician's orders'. On the other hand, there was not any writing functions rated highest. Most functions of writing skills are rated 'high' while only three functions are rated 'moderate' i.e. 'Writing medical histories' and 'Writing medical treatment plan' as presented in Table 9.

		Level of needs				
Functions	x	S.D.	Interpretation			
Listening to general information of daily routines	3.87	1.66	High			
Listening to patient's history, symptoms, and requests	4.44	1.46	Highest			
Listening to physician's orders and diagnosis	4.32	1.51	Highest			
Listening to academic lectures, conferences, or presentation	3.52	1.71	High			
Listening to native English speakers' accents	3.81	1.74	High			
Listening to non-native English speakers' accents	3.98	1.67	High			
Listening through telephone	3.83	1.81	High			

#### **Table 6:** Needs of listening skills in English

	Level of needs		
Functions	x	S.D.	Interpretation
Talking about general issues of daily routines	3.80	1.85	High
Asking patients about their chief complaints and symptoms	4.26	1.86	Highest
Giving information of treatment plans or diagnosis	4.24	1.85	Highest
Giving bad news	3.16	2.10	Moderate
Explaining drug's usage	3.86	1.95	High
Explaining the medical preparation before, during, and after the treatment	4.09	1.88	High
Explaining the treatment procedures	4.02	1.97	High
Making a presentation or giving a lecture on various occasions	3.33	2.02	Moderate
Teaching tasks to visiting nurses	3.02	2.08	Moderate
Explaining nurse notes	2.90	2.05	Moderate
Talking on the phone	3.54	2.04	High

#### **Table 8:** Needs of reading skills in English

		Level of needs		
Functions	$\overline{\mathbf{x}}$	S.D.	Interpretation	
Reading general publications e.g. signs, newspaper, magazine	3.69	1.89	High	
Reading textbooks or academic journals	3.85	1.97	High	
Reading medical charts	4.16	1.86	High	
Reading drug prescriptions	4.09	1.91	High	
Reading physician's orders	4.35	1.85	Highest	
Reading emails	4.19	1.92	High	

		Level of needs		
Functions	x	S.D.	Interpretation	
Writing medical histories	3.27	2.15	Moderate	
Writing medical treatment plan	3.30	2.12	Moderate	
Writing email	3.80	2.18	High	
Writing preparations for medical treatment	3.75	2.16	High	
Writing a medicine instruction	3.71	2.22	High	
Writing various medical forms	3.89	2.14	High	
Writing for publication	3.43	2.28	High	
Writing a memorandum	3.41	2.26	High	
Writing an incident	3.60	2.30	High	
Writing a resume	3.69	2.13	High	

#### Table 9: Needs of writing skills in English

The last part of this study also investigates the needs of course book of English for Nursing Purposes (ENP). The needs of contents are analyzed via five-point Likert Scale. Every contents is needed at *'highest'* level except *'Using characters and role-plays to move the contents'* was needed at *'high'* level. As shown in Table 10, it could be implied that 'good English' nurses in this study highest need three contents as follows: *'general vocabulary and medical terminology are provided'* ( $\bar{x} = 4.70$ ); *'the contents are modern, various, and appropriate'* ( $\bar{x} = 4.60$ ); and *'listening skills are emphasized most'* ( $\bar{x} = 4.56$ ).

#### **Table 10:** Needs of English course book

Contents		Level of needs			
Contents		S.D.	Interpretation		
Every communicative skills are emphasized equally	4.37	2.06	Highest		
Listening skills are emphasized most	4.56	2.01	Highest		
Speaking skills are emphasized most	4.53	2.04	Highest		
Reading skills are emphasized most	4.35	2.12	Highest		
Writing skills are emphasized most	4.25	2.17	Highest		
General vocabulary and medical terminology are provided	4.70	2.07	Highest		
English grammar is also focused	4.36	2.23	Highest		
Using characters and role-plays to move the contents	4.05	2.28	High		
The contents are modern, various, and appropriate	4.60	2.16	Highest		
Pretest and posttest are provided	4.45	2.06	Highest		

#### **Discussion of the study**

Based on the results of the study, it was found that the majority of respondents were female nurses and males' responds were relatively small compared to those of females. According to Chirawatkul, Chinlumprasert, Songwatana, Deoisres, Fongkhaew, & Rungreonkulkij (2011), male nurses possess only 10% of nurses' population in Thailand and this figure, hence, would affect needs in this study that seem to be reflected from the feminine point of views. However, this incident is of no significance as the survey was intended to study the needs of English skills among nursing professionals regardless of the gender of respondents. Moreover, it should be noted that not all nurses from all subspecialties in the participating hospitals are able to participate in the study. OPD seems to hold the biggest number of respondents as this department requires a large workforce to serve the primary health care functions for patients and is the first department of contact between the patient and other hospital staffs.

#### Nurses and the role of English in nursing career

As all participating hospitals were accredited by JCI, one of its standards is that staffs must use an understandable language to provide patients education and instruction of healthcare (the Access to Care and the Continuity of Care's item 4.3.1). The ability to communicate in English is, thus, necessary for nurses who work in private international hospitals where English speaking patients come to use their services (Kajermo, Nordstrom, Krusebrant, & Bjorvell, 1998, NaRanong and NaRanong, 2011).

Based on the results shown in Table 5, the respondents considered all four English skills highly needed for their nursing profession. This can generally imply that nurses in these JCI accredited hospitals realized the significance of the language with their career and perceived that it could reflect their nursing performance at global standard and guarantee better quality care and result in a better reputation for the organization.

#### Needs of English listening skills in nursing career

From the findings of the study shown in Table 6, listening to patient's history, symptoms, and requests together with listening to physician's orders and diagnosis are two functions highest needed respectively in the category. The underlying reason why these two functions are highest needed is may be because when nurses listened to patient's chief complaints they would be cognizant of the patient's history and health barriers they could assess, ready for next healthcare steps, and tailor their actions with physician to support the patient's healthcare development. In addition, after they listen, they need to bring such symptoms to physician to be diagnosed and listen attentively to the physician's orders and diagnosis and bring back the message to the patient and other staff who are in charge of the case. In effect, they helped the patient be an active participant in their care and brought about the effective healthcare services. This finding is in accordance with the results of Vertino (2014) mentioning that listening skills, as receptive skills, are considered salient for communicating with patients given the nature of the medical profession that need a great level of understanding regarding different medical conditions, procedures, instructions, and the nature of medicine and diseases, nurses need to approach every patient-nurse interaction with the intent to understand the patient's concerns and experiences as well as demonstrate that they are open to truly hearing patient's input.

#### Needs of English speaking skills in nursing career

Regarding the needs of speaking skills, the results in Table 7 indicated that asking patients about their chief complaints and symptoms and giving information of treatment plans or diagnosis were two skills highest needed of the category. According to Kourkouta and Papathanasiou (2014), to provide a comprehensive care for patients, nurses must carefully ask patients their symptoms and should allow sufficient time for each patient interaction. Patients may be hesitant, nervous, upset or otherwise incapacitated to listen to what nurses try to ask or explain. Therefore, nurses who display courtesy, kindness, and security to their patients through speaking are generally more successful in their career. The finding in this part is also similar to Sursattayawong's (2006) mentioning that nurses would speak English to foreign patients with the case to give information and inform them of the nursing care plan.

#### Needs of English reading skills in nursing career

According to the results presented in Table 8, the skill of reading physician's order was needed highest in its category. According to Medlin (2009), English with Greek and Latin elements is often seen in clinical terminology that is why physicians tend to write the medical with these jargons in forms of nouns, adjectives, and verbs with Greek or Latin

affixes. Hence, nurses - as healthcare coordinator- are supposed to be capable of reading those queries so that the treatment procedure could be responded appropriately and effectively. However, this finding is different to those of Waidarp (2011) mentioning that reading medical correspondence via e-mail is most extensively needed.

#### Needs of English writing skills in nursing career

Though it was needed at high level, writing seem to be the skill least needed among other three modalities. Based on the finding presented in Table 9, skills of writing medical histories and writing medical treatment plan were needed at moderate level and were the bottom two of its category. These mentioned skills seem to belong to physician instead since medical record documentations are required to record insights of pertinent facts, findings, and observations about a veteran's health history including past and present illnesses, examinations, tests, treatments, and outcomes. In accordance to Tongvivat (2005) and Waidarp (2011), physician is the person who know those information better than nurses and they tend to use long language in medical documentation to communicate the continuity of care among physicians and other healthcare professionals involved in the patient's care. Nurses, on the other hand, are not in charge of writing those information, so they may not consider these skills necessary.

#### Needs of English course book

As shown in Table 10, the nurses would like to have all four skills focused in their ENP course book. This result correlates to the finding in Table 5 that every skills were needed at extensive level. By looking into details, listening skills and speaking skills were the top two of four communication skills which are similar to findings of Tongvivat (2008) and Waidarp (2011). However, this finding is different from those of Siriwong (1984), Suwaroporn (1998), and Lee (1999) which all were mentioned in the way that in teaching English for nurses, technical jargons, vocabularies, and reading texts should be primary skills to be focused as the clients were students. Such skills should also be applied to other professions in medical healthcare community i.e. medical students and the residents. They would consider reading skills the highest need since they are required to read various medical textbooks and journals that mostly published in English and to do research for their problem-based learning classes (Naruenatwatana and Vijchulata, 2001, Taşçi, 2007, Javid, 2011).

Therefore, nursing students and nursing professionals requires different English skills and it should be logical given the nature of nursing professional that dealing with patient's health requires primarily a great level of understanding through every communicative skills regarding different medical conditions, procedures, instructions, and the nature of medicine and diseases. The findings in this study should criticize points to be considered when making a tailored ENP course that the pedagogical implications of course book design and development should take the incorporation of workplace scenarios as the basis for activities and contents into consideration.

#### Conclusion

Due to the modern medical equipment and full-cycle health services, millions of English speaking patients have come visit Thailand for various healthcare reasons. English, undeniably, is the language that Thai professional nurses will use to communicate with them. Each purpose of using English requires its own specific language. Therefore, for Thai nurses, effective use of English communication is the premise that could bring the message of effective healthcare services and the image of the organization at international level, albeit the common qualification to be recruited into the team members. Several important aspects of the needs analysis questionnaire helped to shape the indispensable aspect of English for nursing purposes in order to link the academic needs with the needs in the prospective employment. All four skills of communication i.e. listening, speaking, reading, and writing have its own major functions to be focused both verbally and non-verbally. Thus, communicative strategies along with both medical language and standardized language should be focused in the course book to train the nurses to increase their skills in English communication and to realize how important English is in their profession.

#### Limitations and recommendation of the study

The study is a survey design in five hospitals which is randomly selected from 64 JCI accredited hospitals in Thailand so, somehow, they can represent the population. Participants of the study were B.Sc. nurses and accidentally administered the questionnaire during their break and lunch time so they can manage to give their answers and participate in the survey period. The researcher applied this approach because it is practical for nurses who are on duties, bias avoidance, and scientific randomization. Though number of representativeness in terms of population or participants in the study may be statistically considered small, the results still were from the genuine sources where target needs exist and should shed the light for all ESP practitioners to design appropriate tailor-made courses or materials for Thai EFL nurses.

To acquire better insights of communication skills needed for professional nurses, the focus group discussion where nurses and nursing lecturers with similar interests gathering together to bring up ideas or give comments on needed English communication skills is recommended.

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### Appendix The questionnaire used in the study

JULY AND
แบบสอบถามงานวิจัย
เรื่อง ความจำเป็นในการใช้ทักษะภาษาอังกฤษของพยาบาลชาวไทยที่ทำงานในโรงพยาบาลเอกชนนานาชาติ
มาตรฐานสากล JCI ในเขตกรุงเทพมหานครฯ
โดย อาจารย์เกริก เจษฎานุวัฒน์ สาขาวิชาภาษาอังกฤษ คณะศิลปศาสตร์ มหาวิทยาลัยพะเยา
<ul> <li>วัตถุประสงค์งานวิจัย เพื่อศึกษาความจำเป็นในการใช้ภาษาอังกฤษของพยาบาลวิชาชีพชาวไทยที่ทำงานในโรงพยาบาลเอกชน</li> </ul>
นานาชาติมาตรฐานสากล JCI ซึ่งจะนำไปสู่การพัฒนาต่ำราการเรียนการสอนภาษาอังกฤษสำหรับนักศึกษาพยาบาลในอนาคตต่อไป
<ul> <li>คำชิ้นจง แบบสอบถามมี 3 ตอน ดังนี้</li> </ul>
<b>ตอนที่ 1</b> ข้อมูลทั่วไปของผู้ตอบแบบสอบถาม
<b>ตอนที่ 2</b> ระดับความจำเป็นในการใช้ภาษาอังกฤษขณะปฏิบัติงานทั้ง 4 ทักษะ คือ ฟัง พูด อ่าน และ เขียน
<b>ตอนที่ 3</b> ข้อเสนอแนะเพิ่มเติมในตำราการเรียนการสอนภาษาอังกฤษสำหรับนักศึกษาพยาบาล
<ul> <li>ข้อมูลในแบบสอบถามนี้จะเก็บเป็นความลับทุกประการ</li> </ul>
<ul> <li>คำชี้แจง : โปรดใส่เครื่องหมาย (v) ในช่องว่าง หรือ ระบุข้อมูล ที่ตรงกับท่านมากที่สุด</li> <li>เพศ () ชาย () หญิง</li> <li>อายุ (โปรดระบุ) ปี</li> <li>ปัจจุบันท่านปฏิบัติงานเป็นพยาบาลวิชาชีพใช่หรือไม่ () ไม่ใช่ () ใช่ (โปรดระบุชื่อโรงพยาบาล)</li> <li>รพ.กรุงเทพ O รพ.สมิติเวช สุขุมวิท O รพ.เวชธานี O รพ. ปีเอ็นเอช O รพ. พญาไท 2</li> <li>ปัจจุบันท่านปฏิบัติงานแผนก/ หอผู้ป่วยใด</li> <li>ผู้ป่วยฉุกเฉิน O ผู้ป่วยนอก O ผู้ป่วยใน O ห้องคลอด</li> <li>O ห้องผ่าตัด O ห้องพักพื้น ONursery O อื่นๆ (โปรดระบุ)</li> <li>ท่านใช้ภาษาอังกฤษสื่อสารกับผู้รับบริการชาวต่างชาติ โดยเฉลี่ยสัปดาห์ละ<u>ที่คน</u> (โปรดระบุ) คน /สัปดาห์</li> </ul>
<ol> <li>ท่านใช้ภาษาอังกฤษสื่อสารกับผู้รับบริการชาวต่างชาติ โดยเฉลี่ยสัปดาห์ละ<u>ก็ชั่วโมง</u> (โปรดระบุ)ชั่วโมง/สัปดาห์</li> </ol>
<ol> <li>ท่านเคยสอบวัดความรู้ความสามารถทางภาษาอังกฤษ ด้วยข้อสอบมาตรฐาน เช่น TOEIC หรือ IELTS หรือไม่         <ul> <li>() ไม่เคย () เคย (โปรดระบุ)</li> <li>OTOEIC คะแนนรวมที่ท่านทำได้ มากกว่าหรือเท่ากับ 550 หรือไม่ () ใช่ () ไม่ใช่</li> <li>OIELTS คะแนนรวมที่ท่านทำได้ อยู่ระหว่าง 4.0 – 5.0 หรือไม่ () ใช่ () ไม่ใช่</li> <li>Oğluŋ (โปรดระบุ)คะแนนที่ท่านทำได้คือ</li> </ul> </li> </ol>
<ol> <li>ท่านสำเร็จการศึกษาพยาบาลศาสตรบัณฑิตด้วยหลักสูตรภาษาอังกฤษ ใช่หรือไม่ () ใช่ () ไม่ใช่</li> </ol>
<ol> <li>ท่านเคยศึกษา ณ ประเทศที่ใช้ภาษาอังกฤษเป็นภาษาหลักในการสื่อสารอย่างน้อย 1 ปี ใช่หรือไม่ ( ) ใช่ ( ) ไม่ใช่</li> </ol>
10. ท่านสำเร็จการศึกษาระดับมัธยมศึกษาตอนปลายหลักสูตรภาษาอังกฤษ หรือเทียบเท่า เช่น GED, IGCSE, หรือ O Level ใช่หรือไม่ ( ) ใช่ ( ) ไม่ใช่ แบบสอบถามฯ/หน้าที่ 1

### ตอนที่ 2 ระดับความจำเป็นในการใช้ภาษาอังกฤษทั้ง 4 ทักษะ คือ ฟัง พูด อ่าน และ เขียน ขณะปฏิบัติงาน

**คำชี้แจง** : โปรดใส่เครื่องหมาย ( √ ) ลงในช่องสี่เหลี่ยมตามระดับความจำเป็นที่ตรงกับท่านมากที่สุด

11. ท่านมีความจำเป็นในการใช้ภาษาอังกฤษแต่ละทักษะต่อไปนี้ มาก-น้อย เพียงใด

~			ระดับความจำเป็น		
ทักษะ	มากที่สุด	มาก	ปานกลาง	น้อย	น้อยที่สุด
พึง					
พูด					
อ่าน					
เขียน					

#### 12. โปรดระบุความจำเป็นของทักษะการฟังภาษาอังกฤษ จากสถานการณ์ต่อไปนี้

		ระดั	ับควา <mark>มจ่</mark>	<b>ความจำเป็น</b>	
สถานการณ์	มาก ที่สุด	มาก	ปาน กลาง	น้อย	น้อย ที่สุด
ฟังประเด็นทั่วไปในชีวิตประจำวัน					
ฟังประวัติ อาการ และข้อชักถามต่างๆของคนไข้					
ฟังการตรวจวินิจฉัยและคำสั่งของแพทย์					
ฟังการบรรยายต่างๆ เช่น การนำเสนอผลงาน สัมมนา หรือ การประชุมวิชาการ					
ฟังสำเนียงภาษาอังกฤษ (accent) จากผู้พูดเจ้าของภาษา (native speakers)					
ฟังสำเนียงภาษาอังกฤษ (accent) จากผู้พูดที่ <u>ไม่ใช่</u> เจ้าของภาษา (non-native speakers)					
พังทางโทรศัพท์					
	_	-			

#### โปรตระบุความจำเป็นของทักษะ การพูด ภาษาอังกฤษจากสถานการณ์ต่อไปนี้

		ระดั	บความจำ	าเป็น	
สถานการณ์	มาก ที่สุด	มาก	ปาน กลาง	น้อย	น้อย ที่สุด
พูดคุยประเด็นทั่วไปในชีวิตประจำวัน					
ชักประวัติ อาการ คนไข้					
อธิบายแนวทางการรักษาและการตรวจวินิจฉัย					
แจ้งข่าวร้าย					
แนะนำวิธีการใช้ยา					
แนะนำวิธีการปฏิบัติตัว (medical preparation)					
อธิบายหัตุถการ					
พูดน้ำเสนอหรือบรรยายในวาระต่างๆ					
สอนงานพยาบาลที่มาศึกษาดูงาน					

	ระดับความจำเป็น						
สถานการณ์	มาก ที่สุด	มาก	ปาน กลาง	น้อย	น้อย ที่สุด		
<b>พูด</b> ສ່ <b>ນ</b> ເວຣ							
พูดทางโทรศัพท์							

### โปรดระบุความจำเป็นของทักษะการอ่านภาษาอังกฤษจากสถานการณ์ต่อไปนี้

		ระดับความจ					
สถานการณ์	มาก ที่สุด	มาก	ปาน กลาง	น้อย	น้อย ที่สุด		
อ่านสิ่งพิมพ์ทั่วไป เช่น ป้ายประกาศ หนังสือพิมพ์ นิตยสาร							
อ่าน ตำรา หรือ บทความวิชาการ							
อ่านแฟ้มประวัติคนไข้							
อ่านข้อกำกับการใช้ยา							
อ่านคำสั่งแพทย์							
อ่าน email							

#### โปรดระบุความจำเป็น ของทักษะการเขียนกาษาอังกฤษจากสถานการณ์ต่อไปนี้

สถานการณ์		ระดับ	เดวามจำ	เป็น	
	มาก ที่สุด	มาก	ปาน กลาง	น้อย	น้อย ที่สุด
เขียนบันทึกทางการพยาบาลต่างๆ					
เขียนแผนการพยาบาล					
เขียนจดหมายอิเล็กทรอนิกส์ (email)					
เขียนการเตรียมตัวก่อนทำหัตถการ					
เขียนอธิบายการใช้ยา					
กรอกแบบฟอร์มต่างๆ					
เขียนเพื่อน้ำเสนอผลงาน					
เขียนบันทึกข้อความ(memo)					
เขียนรายงานอุบัติการณ์ (incident)					
เขียนประวัติส่วนตัว (résumé)					

-----แบบสอบถามฯ.../หน้าที่ 3

# ตอนที่ 3 ช้อเสนอแนะเพิ่มเติมในตำราการเรียนการสอนภาษาอังกฤษสำหรับนักศึกษาพยาบาล

คำชี้แจง: โปรดใส่เครื่องหมาย (√) ในช่องสี่เหลี่ยมที่ตรงกับระดับความต้องการของท่าน

ข้อ		ระดับความต้องการ						
	ประเด็น	มาก ที่สุด	มาก	ปาน กลาง	<mark>น้อย</mark>	น้อย ที่สุด		
1.	เน้นทักษะการ ฟัง พูด อ่าน และเขียนในสัดส่วนที่เท่ากัน							
2.	เน้นทักษะ <b>การฟัง</b> มากที่สุด							
3.	เน้นทักษะ <u>การพูด</u> มากที่สุด							
4.	เน้นทักษะ <u>การอ่าน</u> มากที่สุด							
5.	เน้นทักษะ <u>การเ<b>ขียน</b></u> มากที่สุด							
6.	มีคำศัพท์ทั่วไปและคำศัพท์เฉพาะทางการแพทย์							
7.	มีเนื้อหาด้านไวยากรณ์ประกอบ							
8.	ดำเนินเนื้อหาโดยใช้ ตัวละคร และ บทบาทสมมุติ							
9.	มีเนื้อหาที่หลากหลาย ทันสมัย และกระชับ							
10.	มีแบบทดสอบ ก่อนเรียน และ หลังเรียน							
11.	อื่นๆ (โปรดระบุ)							

#### ∞ ขอขอบคุณที่ท่านให้ความร่วมมือตอบแบบสอบถาม ∞

-----แบบสอบถามฯ.../หน้าที่ 4