The impact of compassionate care on patient satisfaction with the care provided

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ABSTRACT:

Objectives: This study investigated the relationship between quality of nursing care, compassionate care, and patient satisfaction. It identifies key factors that contribute to patient satisfaction, allowing nursing managers to develop a targeted model that enhances the quality of care and improves the patient experience.

Research Subjects: The study involved 266 patients hospitalized for a minimum of 72 hours at hospital in Vietnam, selected from the General Internal Medicine and General Surgery departments.

Research Results: Overall patient satisfaction ratings for nursing care, quality of nursing care, and compassionate care were positive, with mean scores of 3.54 ± 0.69, 3.46 ± 0.86, and 3.54 ± 0.67, respectively. Results showed that 71.1% of patients received compassionate care at the level of "Sometimes", with 22.9% at the level of "Always". The relationship between the level of compassionate care and patient satisfaction was statistically significant ($p < 0.001$), with patient expectations being the main predictor of satisfaction ($\beta = 0.661$, $p = 0.003$).

Conclusion: Research highlights the importance of maintaining quality of nursing care and incorporating compassionate care attributes to enhance patient satisfaction. Healthcare organizations should focus on improvement quality of nursing care and foster a culture of compassionate care to optimize patient experiences and outcomes.

Keywords: Compassionate care, patient satisfaction.

INTRODUCTION

Patient satisfaction with the care provided is a crucial aspect to consider when evaluating hospital quality[1]. Patient satisfaction serves as a key indicator of how patients perceive the services they receive, encompassing their evaluation of care outcomes and the extent to which their expectations are met. When patients are satisfied with nursing care, they are more likely to comply with treatment plans, emphasizing the importance of satisfaction in promoting overall health and well-being. Conversely, patient dissatisfaction

can lead to premature discharge or non-adherence to treatment plans [2]. Furthermore, patients who express satisfaction with the care provided are more inclined to strictly adhere to their treatment regimens, resulting in positive health outcomes and reduced hospital stays [3].

Besides, compassion is the essence and core of nursing care. The nature of nursing work is inherently infused with affection and emotions, which give rise to numerous caring behaviors that form the foundation of providing compassionate care[4]. Through the application of care skills, including compassionate care and emotional support, nurses contribute greatly to enhancing the well-being of patients [5]. Compassion can directly impact the quality of care delivered to patients, as they often evaluate service quality based on the level of compassion displayed by nurses. Delivering compassionate nursing care can result in increased patient satisfaction, improved safety in care provision, time and cost savings, enhanced staff satisfaction and effectiveness, and increased confidence and coping skills among healthcare professionals [6].

The landscape of healthcare research in Vietnam lacks any substantial examination of compassionate care practices and their impact on patient satisfaction. Despite the recognized importance of compassion in enhancing the patient experience, there remains a conspicuous void of academic inquiry into this critical domain. Recognizing this significant gap, the present research endeavors to rigorously investigate the compelling question: 'The Impact Of Compassionate Care On Patient Satisfaction With The Care Provided.'"

Statement of the problem:

1. What is compassionate care and patient satisfaction with the care provided according to the patients?

2. What is the impact of compassionate care on patient satisfaction with care provided?

Hypothesis:

There is no significant correlation between compassionate care and patient satisfaction with the care provided.

MATERIALS AND METHODS
Study design
Cross sectional study. The data of the study was collected from two questionnaires.
Research Locale
My Thien Hospital, Ho Chi Minh city.
Population and Sample
This study uses the formula to determine the average score to calculate sample size:

$n = Z^2 * p(1-p) / d^2$ Where:

n is the required sample size

Z is the Z-value corresponding to the desired confidence level (typically 90%, Z=1.645)

p is the expected proportion or outcome (there is no prior research, chosen p=0.5)

d is the desired margin of error (chosen 6%)

Applying the formula:

$n = (1.645)^2 * 0.5(1-0.5) / (0.06)^2$

$n = 2.7025 * 0.25 / 0.0036$

$n = 0.675625 / 0.0036$

$n = 265.97 \sim 266$

This study would require 266 participants.

Inclusion criteria:

The patient consents to participate in the study.

Patients who have been hospitalized for at least 3 days or more.

Patients who are in a stable condition at the time of data collection.

Patients who have received a discharge order on the day of data collection.

Patients or who are 18 years of age or older (representative of the patient or parent).

Exclusion criteria:

Patients diagnosed with dementia.

Patients who are critically ill.

Patients who are unable to listen, speak, or read.

Sampling Technique

This study employed a convenience sampling technique. Participants were recruited from My Thien hospital over a period of 2 month. All patients who met the inclusion criteria and were present in the hospital during the data collection period were invited to participate in the study.

Research Instrument

The study employed two questionnaire to gather data on compassionate care and patient satisfaction with care provided.

The patient satisfaction with nursing care questionnaire (PSNCQQ) is a 19-item scale designed to measure patient satisfaction with various aspects of nursing care, including attention, kindness, respect, skill, and responsiveness. It was originally developed by Laschinger et al. in 2005 and has been used in multiple countries, including Turkey, Ethiopia, and Vietnam, with high reliability (Cronbach's α = 0.97-0.98) . The questionnaire employs a 5-point Likert scale, with scores ranging from 19 to 95. Higher scores indicate greater patient satisfaction, with the following interpretation: ≤19: poor, 20–38: fair, 39–57: good, 58–76: very good, 77–95: excellent.

Compassionate Care: 20 Items

This study employed the concept of Compassionate Care introduced by Burnell (2011), who evaluated compassionate nursing care for cancer patients. In 2013, Burnell developed the Compassionate Care Assessment Tool and adapted it for use in a study by Asghar Dalvandi [6,7]. The tool encompasses four factors, each with specific statements: (a) Meaningful connection (8 statements, Cronbach's α=0.867), (b) Patients' expectations (5 statements, Cronbach's α=0.801), (c) Caring attributes (4 statements, Cronbach›s α=0.774), (d) Capable practitioner (3 statements, Cronbach›s α=0.781)

Using the questionnaires is done as follows:

The author granted the researchers permission to use the two sets of questionnaires in their investigation. This permission was granted via email correspondence between the researchers and the original author. A certified translator then expertly translated the questionnaires into Vietnamese from the original language. A second independent translator then performed a back-translation of the Vietnamese translations into the original tongue to guarantee accuracy.

Ethical Safeguards

The study included several ethical safeguards to protect participant rights and wellbeing. Informed consent was obtained from all participants after they were provided with a detailed explanation of the study purpose, procedures, potential risks and benefits, and their right to withdraw at any time without penalty. To maintain confidentiality, participant names and other identifying information were removed from all data, and each participant was assigned a unique code number. The institutional Ethics Review Committee of Trinity University review board carefully reviewed and approved the study protocol to ensure it met all relevant ethical guidelines and regulations.

Data Analysis

Jamovi was utilized to enter and analyze data

Descriptive statistics were used to summarize patient satisfaction, compassionate care. Pearson's correlation coefficient analysis was then conducted to examine the associations between these variables. To further explore these relationships, the researchers utilized multiple regression analysis.

RESULTS

The study conducted a survey on 266 healthy patients, the results are as follows:

Table 1. The compassionate care according to the patients

Compassionate care items		Mean ± STD
Meaningful connection		**3.52 ± 0.46**
1.	Having a sense of humor	3.56 ± 0.59
2.	Providing unconditional love/respect	3.54 ± 0.60
3.	Providing outside connection	3.45 ± 0.66
4.	Including in plan of care	3.52 ± 0.60
Patient expectation		**3.51 ± 0.45**
5.	Supporting spiritual beliefs	3.35 ± 0.62
6.	Providing access to spiritual support	3.39 ± 0.61
7.	Excusing shortcomings	3.41 ± 0.63
8.	Dealing with difficult issues	3.56 ± 0.67
9.	Controlling pain	3.55 ± 0.68
10.	Giving timely treatments	3.65 ± 0.68
11.	Checking frequently	3.60 ± 0.65

Compassionate care items		Mean ± STD
12.	Presenting professional image	3.54 ± 0.65
13.	Appreciating patient and family	3.57 ± 0.67
14.	Considering of personal needs	3.54 ± 0.69
Caring attributes		**3.50 ± 0.51**
15.	Possessing inner beauty	3.45 ± 0.63
16.	Encouraging	3.48 ± 0.67
17.	Being empathetic	3.58 ± 0.66
Capable practitioner		**3.61 ± 0.63**
18.	Appearing competent	3.58 ± 0.66
19.	Displaying confidence	3.68 ± 0.66
20.	Showing skill	3.58 ± 0.77
Overall Mean of Compassionate care		**3.53 ± 0.44**

Legend: 4.21 – 5.00: Often; 3.41 – 4.20: Always; 2.61-3.40: Sometimes; 1.81 – 2.60: Rarely; 1.00 – 1.80: Never

The overall Mean of Compassionate care is 3.53 ± 0.44 within " Always" range and the overall scores for the Compassionate Care items are generally high, with most factors falling within the "Always" range (3.41 - 4.20).

However, there are a few items that scored slightly lower, falling within the "Sometimes" range (2.61 - 3.40). These include "Supporting spiritual beliefs" (3.35 ± 0.62) and "Providing access to spiritual support" (3.39 ± 0.61) under the "Patient expectation" factor. Additionally, the item "Possessing inner beauty" under the "Caring attributes" factor scored 3.45 ± 0.63, which is also on the lower end of the "Always" range.

Table 2. The respondent's patient satisfaction with care provided

Patient satisfaction with care provided items		Mean ± STD
Provide health information		**3.50 ± 0.55**
1.	Information you were given: how clear and complete the nurses' explanations were about tests, treatments, and what to expect.	3.46 ± 0.68
2.	Instructions: how well nurses explained how to prepare for tests and operations.	3.55 ± 0.69
3.	Ease of getting information: willingness of nurses to answer your questions.	3.50 ± 0.67
4.	Information given by nurses: how well nurses communicated with patients, families, and doctors.	3.52 ± 0.70
5.	Discharge instructions: how clearly and completely the nurses told you what to do and what to expect when you left the hospital.	3.50 ± 0.69
Counseling and care		**3.49 ± 0.50**
6.	Informing family or friends: how well the nurses kept them informed about your condition and needs.	3.47 ± 0.67
7.	Involving family or friends in your care: how much they were allowed to help in your care.	3.50 ± 0.66
8.	Concern and caring by nurses: courtesy and respect you were given; friendliness and kindness.	3.42 ± 0.67
9.	Recognition of your opinions: how much nurses ask you what you think is important and give you choices.	3.52 ± 0.64
10.	Consideration of your needs: willingness of the nurses to be flexible in meeting your needs.	3.55 ± 0.67
11.	The daily routine of the nurses: how well they adjusted their schedules to your needs.	3.45 ± 0.63
12.	Helpfulness: ability of the nurses to make you comfortable and reassure you.	3.51 ± 0.66
Attending the emotional needs of the patients		**3.53 ± 0.51**
13.	Attention of nurses to your condition: how often nurses checked on you and how well they kept track of how you were doing.	3.56 ± 0.64
14.	Restful atmosphere provided by nurses: amount of peace and quiet.	3.56 ± 0.68
15.	Privacy: provisions for your privacy by nurses.	3.56 ± 0.69

Patient satisfaction with care provided items		Mean ± STD
Professional-technical competencies		**3.47 ± 0.63**
16.	Nursing staff response to your calls: how quick they were to help.	3.50 ± 0.67
17.	Skill and competence of nurses: how well things were done, like giving medicine and handling ivs.	3.54 ± 0.66
18.	Coordination of care: the teamwork between nurses and other hospital staff who took care of you.	3.50 ± 0.65
Advice and guidance on care when discharged from the hospital		**3.47 ± 0.63**
19.	Coordination of care after discharge: nurses' efforts to provide for your needs after you left the hospital.	3.47 ± 0.63
Overall mean of patient satisfaction with care provided		**3.50 ± 0.49**

Legend: *4.21 – 5.00: Excellent; 3.41 – 4.20: Very Good; 2.61 – 3.40: Good; 1.81 – 2.60: Fair; 1.00 – 1.80: Poor*

Overall mean of patient satisfaction with care provided: 3.50 ± 0.49.

The overall scores for the Patient Satisfaction with Care Provided items are quite high, with most factors falling within the "Very Good" range (3.41 - 4.20).

However, there are a few items that scored slightly lower, falling within the upper end of the "Good" range (2.61 - 3.40). These include: "Concern and caring by nurses: courtesy and respect you were given; friendliness and kindness" (3.42 ± 0.67). "The daily routine of the nurses: how well they adjusted their schedules to your needs" (3.45 ± 0.63)

Additionally, the "Professional-technical competencies" and "Advice and guidance on care when discharged from the hospital" factors both scored 3.47 ± 0.63, which is at the lower end of the "Very Good" range.

Table 3*. The Relationship between Compassionate Care and Patient Satisfaction with care provied*

			Patient satisfaction with care provided			Total
			Good	Very good	Excellent	
Compassionate care	Rarely	Frequency	5	1	0	6
		Percent	11.6%	0.5%	0.0%	2.3%
	Sometimes	Frequency	31	149	9	189
		Percent	72.1%	78.8%	26.5%	71.1%
	Always	Frequency	6	38	17	61
		Percent	14.0%	20.1%	50.0%	22.9%
	Often	Frequency	1	1	8	10
		Percent	2.3%	0.5%	23.5%	3,8%
Total		Frequency	43	189	34	266
		Percent	16.2%	71.1%	12.8%	100.0%

With p< 0.001, Cramer's = 0.4

The distribution suggests that the majority of patients (71.1%) received "Sometimes" rated compassionate care, while a significant proportion (22.9%) received the highest "Always" rated compassionate care. A small percentage (2.3%) received the lowest "Rarely" rated compassionate care, and 3.8% received "Often" rated compassionate care.

The distribution of patient satisfaction levels, reveals that the majority of patients (71.1%) reported "Very Good" satisfaction with the care provided. A smaller proportion of patients reported "Excellent" (12.8%) or "Good" (16.2%) satisfaction levels.

When looking at the "Good" level of patient

satisfaction, 11.6% of patients received "Rarely" compassionate care, 72.1% received "Sometimes" compassionate care, 14.0% received "Always" compassionate care, and 2.3% received "Often" compassionate care.

For "Very Good" patient satisfaction, 0.5% of patients received "Rarely" compassionate care, 78.8% received "Sometimes" compassionate care, 20.1% received "Always" compassionate care, and 0.5% received "Often" compassionate care.

At the "Excellent" level of patient satisfaction, 0.0% received "Rarely" compassionate care, 26.5% received "Sometimes" compassionate care, 50.0% received "Always" compassionate care, and 23.5% received "Often" compassionate care.

Overall, the results show a statistically significant ($p < 0.001$) and moderately strong (Cramer's V = 0.4) relationship between the level of compassionate care and patient satisfaction with the care provided.

Table 4. Regression Analysis on The Significant Relationship on the the compassionate care and patient satisfaction with care provided

Predictors	β	SE	T	p	Pearson's r
Intercept	28.713	4.013	7.155	<.001	
Meaningful connection	0.438	0.464	0.943	0.346	0.45
Patient expectation	0.661	0.221	2.991	0.003	0.50
Caring attributes	0.289	0.595	0.486	0.627	0.45
Capable practitioner	0.507	0.386	1.314	0.190	0.41

R= 0.571, R2=0.26, F=23.8, P ≤ 0.01

≥0.7: Very Strong Correlation; ± 0.40-0.69: Strong Correlation; ± 0.30-0.39: Moderate Correlation; ± 0.20-0.29: Weak Correlation; ± 0.01-0.19: No/Negligible Correlation

Patient satisfaction with care provided = 28.713 + 0.661 Patient expectation

The baseline level of patient satisfaction is 28.713 and is statistically significant ($p < 0.001$). Looking at the four predictors of patient satisfaction, the data indicates that patient expectation has a statistically significant relationship with patient satisfaction (β = 0.661, SE = 0.221, t = 2.991, p = 0.003). The other three predictors - meaningful connection (β = 0.438, SE = 0.464, t = 0.943, p = 0.346), caring attributes (β = 0.289, SE = 0.595, t = 0.486, p = 0.627), and capable practitioner (β = 0.507, SE = 0.386, t = 1.314, p = 0.190) - were not statistically significant, meaning their relationships with patient satisfaction were not strong enough to be considered meaningful.

DISCUSSION

The overall results of this study indicate that patients generally perceive a high level of compassionate care and satisfaction with the care provided. The mean score for compassionate care was 3.53 ± 0.44. The findings of the current study are consistent with the results reported in previous research of Asghar Dalvandi, et al. in 2019 with Mean compassionate care score of 3.27 ± 0.52 [6]. Further analysis of the compassionate care factors revealed that most items were scored within the "Always" range, demonstrating that healthcare providers are successfully meeting patient expectations in areas such as emotional support, attentiveness, and demonstrating caring attributes. However, a few items related to supporting spiritual beliefs and providing access to spiritual support fell slightly lower, within the "Sometimes" range.

Similarly, the overall patient satisfaction with the care provided was quite high, with a mean score of 3.50 ± 0.49, indicating that patients perceive the care they receive as "Very Good." The research results are similar to previous study of Karaca, and higher than in the study of Esraa Mohammed Alhussin [2,9]. While most

factors were scored within the "Very Good" range, a few items related to nurses' courtesy, respect, and adjusting their schedules to patient needs were rated slightly lower, within the upper end of the "Good" range. In the research by author Nguyen Thi Nguyet, only 1.96% of patients assessed their satisfaction with nursing care as average; 71.51% of patients rated it as good or very good, and 26.54% as good [10].

These findings suggest that the healthcare organization is generally providing high-quality, compassionate care that meets or exceeds patient expectations. However, there are opportunities for improvement, particularly in addressing patients' spiritual needs and ensuring consistently excellent communication and coordination of care by nursing staff [11].

The distribution of compassionate care levels shows that the majority of patients (71.1%) received "Sometimes" rated compassionate care, while a significant proportion (22.9%) received the highest "Always" rated compassionate care. A small percentage (2.3%) received the lowest "Rarely" rated compassionate care, and 3.8% received "Often" rated compassionate care. The distribution of patient satisfaction levels reveals that the majority of patients (71.1%) reported "Very Good" satisfaction with the care provided, with a smaller proportion of patients reporting "Excellent" (12.8%) or "Good" (16.2%) satisfaction levels. However, it is worth noting that the level of perceived good compassionate care in this study (22.9%) is lower than that reported in a study by Agmas Wassie Abate, which found the level of perceived good compassionate care to be 47.5% [12].

When examining the relationship between compassionate care and patient satisfaction, the data indicates that for patients with "Good" satisfaction, the majority (72.1%) received "Sometimes" compassionate care, while 11.6% received "Rarely" compassionate care. For "Very Good" satisfaction, the majority (78.8%) received "Sometimes" compassionate care, while 20.1% received "Always" compassionate care. At the "Excellent" satisfaction level, 50.0% received "Always" compassionate care, and 23.5% received "Often"

compassionate care. The statistical analysis shows a statistically significant ($p < 0.001$) and moderately strong (Cramer's V = 0.4) relationship between the level of compassionate care and patient satisfaction.

Regarding the predictors of patient satisfaction, the baseline level of patient satisfaction is 28.713 and is statistically significant ($p < 0.001$). Among the four predictors of patient satisfaction, only patient expectation has a statistically significant relationship ($\beta = 0.661$, SE = 0.221, t = 2.991, $p = 0.003$).

These findings highlight the importance of compassionate care in shaping patient satisfaction, with patient expectations emerging as a key factor in driving overall satisfaction [6]. The results provide valuable insights for healthcare organizations to focus on improving compassionate care, particularly in areas where patients currently experience lower levels, to enhance the overall patient experience and satisfaction [9].

CONCLUSION

The study found high levels of patient satisfaction with nursing care and compassionate care. Patient satisfaction was strongly correlated with both quality of care and compassionate care, with compassionate care explaining a significant portion of the variance in satisfaction. These results highlight the importance of delivering high-quality, compassionate nursing care to achieve positive patient outcomes.

RECOMMENDATION

Based on the specific findings of the study, the following recommendations are proposed:

Maintain a high level of compassionate care: The study found that a high level of compassionate care was strongly correlated with increased patient satisfaction. Therefore, it is recommended that healthcare organizations prioritize the delivery of compassionate, patient-centered care as a key strategy to enhance overall patient satisfaction.

Strengthen spiritual, emotional, and psychological support: The results suggest that there is room for improvement in the area of providing spiritual,

emotional, and psychological support to patients. Healthcare providers, especially nurses, should be encouraged to increase their efforts in addressing the patients' holistic needs, including their spiritual, emotional, and psychological well-being.

REFERENCES

1. Wardah, Usman S, Wardani E. An Evaluation of Patient Satisfaction with Nursing Care: A Qualitative Study in an Indonesian Hospital. Ethiop J Health Sci. 2020;30(6):1011-1016. doi:10.4314/ejhs.v30i6.20

2. Karaca A, Durna Z. Patient satisfaction with the quality of nursing care. Nurs Open. 2019;6(2):535-545. doi:10.1002/nop2.237

3. Alharbi HF, Alzahrani NS, Almarwani AM, et al. Patients' satisfaction with nursing care quality and associated factors: A cross-section study. Nurs Open. 2023;10(5):3253-3262. doi:10.1002/nop2.1577

4. Babaei S, Taleghani F, Farzi S. Components of Compassionate Care in Nurses Working in the Cardiac Wards: A Descriptive Qualitative Study. J Caring Sci. 2022;11(4):239-245. doi:10.34172/jcs.2022.24

5. Rasheed MA, Bharuchi V, Mughis W, et al. Development and feasibility testing of a play-based psychosocial intervention for reduced patient stress in a pediatric care setting: experiences from Pakistan. Pilot Feasibility Stud. 2021;7(1):63. doi:10.1186/s40814-021-00781-8

6. Dalvandi A, Vaisi-Raygani A, Nourozi K, et al. The Importance and Extent of Providing Compassionate Nursing Care from The Viewpoint of Patients Hospitalized in Educational Hospitals in Kermanshah - Iran 2017. Open Access Maced J Med Sci. 2019;7(6):1047-1052. doi:10.3889/oamjms.2019.204

7. Burnell L. Compassionate Care, the Patient Perspective. Dissertations. 2011. doi:10.22371/07.2011.004

8. Laschinger HS, Hall LM, Pedersen C, et al. A psychometric analysis of the patient satisfaction with nursing care quality questionnaire: an actionable approach to measuring patient satisfaction. J Nurs Care Qual. 2005;20(3):220-230. doi:10.1097/00001786-200507000-00006

9. Alhussin EM, Mohamed SA, Hassan AA, et al. Patients' Satisfaction with the Quality of Nursing Care: A Cross-Section Study. 2023. doi:10.21203/rs.3.rs-3106384/v1

10. Nguyet NT, Hang DT, Nga NTV, et al. Survey on satisfaction of inpatients with nursing care and some related factors at Saint Paul General Hospital. JNS. 2022;5(02). doi:10.54436/jns.2022.02.426

11. Malenfant S, Jaggi P, Hayden KA, Sinclair S. Compassion in healthcare: an updated scoping review of the literature. BMC Palliat Care. 2022;21(1):80. doi:10.1186/s12904-022-00942-3

12. Abate AW, Menberu M, Belete H, et al. Perceived compassionate care and associated factors among patients with mental illness at Tibebe Ghion specialized and Felege Hiwot comprehensive specialized hospital, Northwest Ethiopia. BMC Health Serv Res. 2023;23(1):650. doi:10.1186/s12913-023-09665-4