Exploring the Impact of Nurse-Patient Communication on Patient Satisfaction and Health Outcomes in Oncology Settings

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Abstract

Introduction: In the field of oncology, productive communication between nurses and patients is critical for achieving the highest possible patient outcomes and satisfaction. Patient perspectives on nurse-patient communication in oncology contexts, as well as its effect on patient satisfaction and healthcare experiences, are the subjects of this research.

Objective: To examine the impact of patient satisfaction and healthcare experiences on their perceptions of nurse-patient communication in oncology care is the principal objective of this research endeavor. The evaluation of distinct facets of nurse-patient communication is among the specific objectives. These include the assessment of listening abilities, the provision of information, empathy, participation in care decision-making, and assistance with symptom management.

Methodology: A cross-sectional survey was used to gather data from hospitalized oncology patients. The researcher utilized a validated questionnaire to evaluate patients' perspectives on nurse-patient communication in various domains. Descriptive statistics and mean ratings were employed in the data analysis to assess patient responses and discern patterns of communication.

Results: In oncology care, patients had typically favorable perceptions of nurse-patient communication, according to the study's findings. Elevated average scores were noted in multiple domains of communication, encompassing symptom management assistance, information dissemination, empathy, participation in care decision-making, and listening proficiency. The patients' sense of being listened to, assisted, and engaged in their own treatment contributed to their overall satisfaction with the standard of nursing care.

Conclusions: it is imperative to emphasize the significance of nurse-patient communication in oncology settings as it significantly impacts patient experiences, satisfaction levels, and health outcomes. Patients hold nurses in high regard who demonstrate attentive listening, deliver unambiguous information, exhibit empathy, engage them in care decision-making, and offer assistance with symptom management. Through the promotion of patient-centered care approaches and the implementation of effective communication strategies, nurses have the capacity to significantly influence patient outcomes and enhance the overall healthcare experience within oncology settings.

Keywords: Oncology care, nurse-patient communication, patient satisfaction.
Introduction

Communication between nurses and patients is of the utmost importance for the provision of high-quality healthcare, especially in oncology settings where patients are confronted with life-threatening and frequently complex conditions. Research has demonstrated that enhanced communication between nurses and patients contributes to improved health outcomes, increased patient satisfaction, and adherence to treatment plans. However, research on the precise effect of nurse-patient communication in oncology settings on patient satisfaction and health outcomes remains limited.

The communication between nurses and individuals with cancer is a well-acknowledged and persistent challenge, with considerable emphasis on the execution of challenging dialogues (Banerjee et al., 2016). In light of the regular patient interactions that nurses engage in, it is anticipated that they undertake this critical responsibility. It has been shown that cancer patients have a significant demand for knowledge and psychological assistance delivered via efficient communication (Hack et al., 2012). A considerable body of research, predominantly employing quantitative methodologies, has examined the efficacy of nurse-patient interaction with respect to mental health. However, recent research by Kullberg et al. (2015) revealed that oncology patients evaluated nurses' supply of data less favorably than that of physicians, with nurses placing greater emphasis on their scientific and relationships proficiencies. Furthermore, the existing body of evidence regarding the impact of a time-constrained environment on patients is quite limited.

The research of Chan et al. (2012) revealed that, due to limited time, nurses resorted to routines when conversing with patients. Similarly, the results of Thorne et al. (2009) identified the negative impacts of time demands on patients' perceptions of poor communication and time mishandling. Although attempts have been made to incorporate the results of traditional research into communication education at both the introductory and ongoing professional growth levels, the progress made has been, at best, gradual (Bernard et al., 2010). This can be primarily attributed to a narrow focus on the viewpoint of healthcare providers, neglecting that of individuals (Brundage et al., 2010).

In light of the reciprocal nature of interpersonal relationships, there is a need for research that goes beyond the patients' portion of the discourse as has been the case thus far (Fleischer et al., 2009). The research conducted by Thorne et al. (2013) regarding patients' perceptions of healthcare provider-patient communication breakdown patterns revealed that there are still differences across cultures, situations, and circumstances. In essence, the cultural change regarding patient-centeredness necessitates that we comprehend the practical realities of patient-nurse communication, which is critical for delivering comprehensive cancer care, especially in Asian contexts (Tay et al., 2011).

Due to early identification and advancements in medical therapy, several cancer individuals have been managing their condition for an extended period, undergoing either therapeutic or supportive cancer care. Throughout their cancer journey, individuals may face physical signs and anguish caused by the illness or its therapy. Nevertheless, the results indicate that over half of newly identified cancer patients as well as those with recurring illness do not get sufficient psychological assistance and exhibit a notable degree of distress (Mahendran et al., 2017). Approximately 26 million new cases of cancer occur each year globally, highlighting the need for psychological support and care to be recognized as the sixth health indicator in conventional cancer nursing care. Although there is much global data supporting the need of enhancing psychosocial treatment for cancer patients, obstacles and deficiencies in its implementation persist. Barriers in effective communication between nurses and patients include patients' refusal to disclose their problems, nurses' difficulty in
recognizing signals or managing feelings of patients, and nurses’ concentration on job completion, influenced by time restrictions.

Time-constrained nurses who focus primarily on their routines rather than patient interaction are a well-recognized and extensively studied occurrence. Time constraints, linked to high workloads and insufficient personnel, might prevent patients from sharing their worries and voicing adverse feelings to medical professionals. Nurses are limited in their ability to provide mental assistance to patients via efficient interactions due to time constraints (Zamanzadeh et al., 2014). Creating more time in a busy cancer care setting with increasing complexity may not be feasible. Inadequate psychosocial care is often caused by a lack of dialogue and efficient interaction among patients and nurses on emotional matters.

Andersen and Risør (2014) emphasized the significance of contextualization in relation to the concept of causation for therapeutic applicability. A research on individuals suffering from malignant lymphoma found that impediments to successful interaction included patients' qualities, healthcare personnel' traits, and outside factors. A different research recognized traits of individuals, healthcare workers, and the surroundings as overall factors affecting communication (Tay et al., 2012). Patient qualities such as unpleasant emotions, limited disease-specific information, and poor communication skills may diminish patients' trust in interacting with healthcare personnel (Dong et al., 2016).

Some individuals struggled to comprehend and retain what to inquire about. They used a sheet of paper to write down their queries as a form of interaction. Patients who saw their doctor as a prominent figure in their treatment were more likely to comply with orders without seeking clarification. Prior unpleasant encounters, including being neglected, may impede patients’ future interactions with healthcare providers. Patients would find it more convenient to ask inquiries or express concerns if they knew their healthcare providers well and had established a good connection with them (Fisher et al., 2014; O'Hagan et al., 2014). Furthermore, how patients perceive the emotions and behavior of nurses might impact the development of rapport, thereby influencing their willingness to communicate their emotions and requirements.

Studies have examined variables affecting interaction with cancer patients, but no research have focused on gathering qualitative information from patients about the administration of psychological assistance in ordinary nursing care. Kleinman (2020)'s descriptive theory offers valuable insights into patients' priorities and views sickness, culture, treatment, and medical care as abstract ideas instead of concrete realities. The humanity of sickness is frequently overlooked despite the biopsychosocial focus in our healthcare system. A patient's explanation framework and perception of clinical reality may diverge significantly from a trained clinical paradigm. Healthcare practitioners may become more conscious of significant difficulties that are consistently overlooked in their clinical work by moving away from ethnocentric along with medicocentric perspectives (Mak, 2016).

Thus, the primary goal of this research is to investigate the effects of nurse-patient communication on patient satisfaction and health outcomes in cancer settings. Healthcare providers can ultimately enhance the quality of care delivered to oncology patients by formulating strategies to improve communication practices, which are informed by an awareness of the correlation between communication and patient outcomes.
METHODOLOGY

Study design and sample selection

The research employs a quantitative approach to data collection. Quantitative data is gathered via a questionnaire employing a 5-point Likert scale (Appendix A). This instrument evaluates patient satisfaction, health outcomes, and perceptions of nurse-patient communication.

Instrument

Participating patients were administered a 5-Likert scale questionnaire to evaluate patient satisfaction, health outcomes, and perceptions of nurse-patient communication.

Statistical Analysis

Descriptive statistics are applied to the quantitative data obtained via the Likert scale questionnaire in order to ascertain the response frequencies and distributions. In order to evaluate the correlation and regression between patient satisfaction, health outcomes, and nurse-patient communication, inferential statistics are applied.

Results

Analysis of the questionnaire

The table displays the findings of a study that evaluated patient opinions on nurse-patient communication, satisfaction levels, and health outcomes using a 5-point Likert scale questionnaire. The poll sought to assess several elements of nurse-patient interactions in cancer environments, such as communication efficacy, empathy, participation in decision-making and overall satisfaction with treatment.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Significance</th>
<th>Arrangement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. My nurse effectively listens to my concerns and questions.</td>
<td>4.5</td>
<td>0.7</td>
<td>High</td>
<td>Agree</td>
</tr>
<tr>
<td>2. The information provided by my nurse is clear and understandable.</td>
<td>4.2</td>
<td>0.8</td>
<td>Moderate</td>
<td>Agree</td>
</tr>
<tr>
<td>3. I feel comfortable discussing my health issues with my nurse.</td>
<td>4.6</td>
<td>0.6</td>
<td>High</td>
<td>Agree</td>
</tr>
<tr>
<td>4. My nurse shows empathy and understanding towards my emotional needs.</td>
<td>4.4</td>
<td>0.7</td>
<td>High</td>
<td>Agree</td>
</tr>
<tr>
<td>5. I am satisfied with the amount of time my nurse spends with me.</td>
<td>4.0</td>
<td>0.9</td>
<td>Moderate</td>
<td>Agree</td>
</tr>
<tr>
<td>6. My nurse involves me in decision-making regarding my treatment plan.</td>
<td>4.3</td>
<td>0.8</td>
<td>High</td>
<td>Agree</td>
</tr>
<tr>
<td>7. I feel supported by my nurse in managing my symptoms and side effects.</td>
<td>4.5</td>
<td>0.6</td>
<td>High</td>
<td>Agree</td>
</tr>
<tr>
<td>8. My nurse provides me with the necessary information for informed decisions.</td>
<td>4.1</td>
<td>0.8</td>
<td>Moderate</td>
<td>Agree</td>
</tr>
<tr>
<td>9. I feel confident in my nurse's ability to address my healthcare needs.</td>
<td>4.4</td>
<td>0.7</td>
<td>High</td>
<td>Agree</td>
</tr>
<tr>
<td>10. My nurse communicates effectively with other members of my healthcare team.</td>
<td>4.2</td>
<td>0.8</td>
<td>Moderate</td>
<td>Agree</td>
</tr>
<tr>
<td>11. I am satisfied with the overall quality of care provided by my nurse.</td>
<td>4.3</td>
<td>0.7</td>
<td>High</td>
<td>Agree</td>
</tr>
<tr>
<td>12. I feel that my nurse values my input and preferences in my care.</td>
<td>4.4</td>
<td>0.6</td>
<td>High</td>
<td>Agree</td>
</tr>
<tr>
<td>13. My nurse encourages me to ask questions and seek clarification.</td>
<td>4.5</td>
<td>0.6</td>
<td>High</td>
<td>Agree</td>
</tr>
<tr>
<td>14. I feel that my nurse respects my privacy and confidentiality.</td>
<td>4.6</td>
<td>0.5</td>
<td>High</td>
<td>Agree</td>
</tr>
<tr>
<td>15. Overall, I am satisfied with the level of communication and care provided by my nurse.</td>
<td>4.3</td>
<td>0.7</td>
<td>High</td>
<td>Agree</td>
</tr>
</tbody>
</table>
The average scores for all assertions varied from 4.0 to 4.6, suggesting a strong consensus on favorable views about nurse-patient communication and care. The standard deviations varied between 0.5 to 0.9, indicating a very low level of heterogeneity in answers across individuals.

Statements varied in their level of relevance, but most expressed a high degree of agreement with favorable opinions on the care and communication between nurses and patients.

Overall, patients in cancer settings had good impressions of nurse-patient communication, satisfaction levels, and health outcomes. The elevated average ratings and statistical significance indicate that patients perceived being heard, supported, and engaged in their treatment, which influenced their satisfaction with the quality of care delivered by their nurses.

1. "The mean score of 4.5 for "My nurse effectively attends to my concerns and questions" suggests that patients held the perception that their nurses successfully attended to their concerns and inquiries. This indicates that nurses fostered open communication by being attentive and responsive to the requirements of their patients.

2. "The information provided by my nurse is clear and understandable" Notwithstanding a marginally diminished average score of 4.2, the moderate standard deviation of 0.8 indicates the presence of some dispersion in patient perspectives. Despite this, the majority of patients regarded the information delivered by their nurses as lucid and comprehensible, which is indicative of successful communication.

3. "I am at ease when discussing my health concerns with my nurse" - Patients expressed a sense of ease when discussing their health concerns with their nurses, as evidenced by the mean score of 4.6. This implies that nurses established a nurturing and impartial atmosphere that encouraged patients to candidly discuss their health issues.

4. "The nurse demonstrates empathy and understanding for my emotional needs"—The mean score of 4.4 suggests that patients held the perception that their nurses possessed these qualities. Undoubtedly, this empathetic methodology played a role in fostering a favorable patient experience.

5. "The duration of the time my nurse dedicates to me is satisfactory." Although the average score of 4.0 is marginally below the mean, the moderate standard deviation of 0.9 indicates that there is some dispersion in the level of patient satisfaction regarding the time allocated to them by their nurses. This observation could suggest an opportunity to enhance the allocation of time for patient interactions throughout consultations.

6. "My nurse actively engages me in the decision-making process concerning my treatment plan" – The mean score of 4.3 indicates that patients perceived a high level of involvement from their nurses in this regard. By fostering collaboration, this method enables patients to take an active role in their healthcare, resulting in decisions that are better informed.

7. "My nurse provides me with support in managing my symptoms and side effects" - Patients expressed a strong sense of support from their nurses in this regard, as evidenced by the mean score of 4.5. It is probable that this support factored into enhanced symptom management and general welfare.

8. "My nurse provides me with the necessary information for informed decisions" Notwithstanding a marginally diminished average score of 4.1, the majority of patients expressed that their nurses furnished them with essential information to facilitate well-informed decision-making. This underscores the significance of effective and thorough communication in enabling patients to develop knowledgeable decisions regarding their healthcare.

9. The patient-reported mean score of 4.4 for "I feel confident in my nurse's ability to
address my healthcare needs" suggests that this sentiment was shared by the majority of respondents. The confidence placed in the nurse's expertise almost certainly had a beneficial effect on patient outcomes and satisfaction.

10. "The nurse effectively communicates with other members of the healthcare team"—Patients perceived the communication skills of their nurses to be satisfactory, as evidenced by the moderate mean score of 4.2. This communication and collaboration among healthcare providers is vital for the delivery of coordinated care.

11. "The quality of care delivered by my nurse is satisfactory in its entirety" - The mean score of 4.3 indicates that the patient is content with the standard of care provided by nurses. Maintaining a positive perception is of utmost importance in fostering patient trust and promoting treatment plan adherence.

12. "I perceive that my nurse appreciates my input and preferences in my care"—Patients held this perception regarding the value of their nurses' input and preferences in care, as indicated by the mean score of 4.4. Adopting a patient-centered approach in the nurse-patient relationship cultivates an atmosphere of collaboration and reciprocal regard.

13. "The nurse promotes inquiry and seeks clarification; I am encouraged to ask questions"—The mean score of 4.5 suggests that nurses actively encouraged patients to seek clarification and pose inquiries. This manner of transparent communication encourages patient participation and comprehension of their care.

14. "I perceive my nurse to be trustworthy with regard to my privacy and confidentiality"—Patients held this view, as evidenced by the mean score of 4.6. The establishment of trust in the nurse-patient relationship is critical for upholding the dignity and confidentiality of the patient.

15. "In general, the communication and care rendered by my nurse are satisfactory." The mean score of 4.3 indicates a high level of satisfaction regarding the communication and care provided by nurses. This holistic metric encompasses the favorable opinions that patients hold regarding their interactions with nurses and their experiences receiving care.

Discussion

The results of this research emphasize the criticality of proficient communication between nurses and patients receiving oncology care. Patients expressed favourable encounters and notable levels of contentment when nurses exhibited effective listening abilities, delivered unambiguous and thorough information, displayed empathy, engaged them in care decision-making, and provided assistance for symptom management. The obtained outcomes are consistent with the tenets of patient-centered care, which prioritize the integration and coordination of care, education and respect for patients' preferences, provision of physical comfort, emotional support, and engagement of family and friends.

Consistent patterns become apparent when these findings are juxtaposed with those of prior research. As an illustration, a focused ethnographic study carried out in two oncology units of a Hong Kong hospital revealed that patients valued the nurses' attentiveness to their physical and physiological requirements (Chan et al., 2018). The research also identified two primary themes: the burden and environment of nurses, and the partnership between nurses and patients, as well as role expectations. Particularly concerning the significance of nurse-patient partnerships in cancer care and the capacity of efficient communication to alleviate the potential burden of nurses, these themes align with the results of our research.

Four major themes were identified in another qualitative study that examined the communication experiences of adult patients with nurses in cancer care settings in Saudi Arabia: the significance of patient-nurse relationships, the provision of accurate information to patients, the addressing of patients' emotional needs, and verbal communication between nurses and cancer patients (Alshammari et al., 2022). The
The aforementioned themes are in strong accordance with the results of our research, which serves to underscore the paramount importance of proficient nurse-patient communication in improving oncology patients' experiences and outcomes.

As a consequence of this study's findings and prior research, the critical importance of effective nurse-patient communication in oncology settings is underscored. Nurses have the capacity to greatly improve patient satisfaction and healthcare experiences through the following strategies: cultivating robust nurse-patient relationships, furnishing plain and exhaustive information, attending to emotional needs, and involving patients in care decision-making. Additional investigations are warranted to examine methods by which nurse-patient communication in oncology can be further optimized.

Conclusions

In summary, the findings of this research underscore the substantial influence that nurse-patient communication has on health outcomes, patient satisfaction, and patient perceptions within the context of oncology. In accordance with the results, patients viewed nurse-patient communication favorably on the whole, as evidenced by the high means scores on a variety of communication and care provision dimensions. The patients' sense of being listened to, supported, and engaged in their care was indicative of a nursing practice that was patient-centered.

In oncology care, effective communication between nurses and patients is of the utmost importance, as it facilitates the development of trust, promotes collaboration, and improves patient outcomes. The results of the study indicate that nurses who demonstrate empathy, actively engage patients in decision-making, attentively address patient concerns, deliver unambiguous information, and assist with symptom management are instrumental in fostering favorable patient experiences and care satisfaction.

In addition, the study emphasizes the significance of fostering an environment that is empowering and supportive, encouraging patients to engage in dialogue regarding their health concerns, communicate their preferences, and actively contribute to their healthcare. Patients hold nurses in high regard who demonstrate the following qualities: privacy stewardship, active questioning, input appreciation, and effective communication with other members of the healthcare team. These facets of communication are integral to a comprehensive approach to patient care, which attends to their emotional and informational requirements in addition to their physical well-being.

The significance of effective communication in shaping patient outcomes and overall healthcare experiences is underscored by the considerable levels of patient satisfaction that are observed in relation to nurse-patient communication and care quality. Patients who perceive their nurses as listening, comprehending, and providing support are inclined to comply with prescribed treatments, encounter enhanced management of symptoms, and express greater levels of contentment with their healthcare.

In summary, the research highlights the critical significance of communication within the field of oncology nursing and accentuates the need to cultivate robust nurse-patient relationships founded upon patient-centered care, collaboration, trust, and empathy. By placing patient input and participation in care decision-making at the forefront and prioritizing effective communication strategies, nurses have the ability to improve the quality of care delivered to oncology patients, thereby making a positive contribution to their health outcomes and overall well-being. Sustained investigation and interventions aimed at augmenting nurse-patient communication within oncology environments may persistently elevate patient experiences and outcomes in the provision of cancer care.
References


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Appendix A

Questionnaire Statements

Dear participant,

Thank you for participating in our survey on your experiences with nurse-patient communication in cancer treatment. Your opinion is crucial for us to assess the quality of care delivered by nurses and the influence of communication on your healthcare encounters.

This questionnaire seeks to collect your opinions on several facets of nurse-patient communication while interacting with healthcare personnel in cancer environments. Your candid feedback will provide significant insights on how nurses can enhance their assistance in helping you manage your health conditions and treatment.

Your feedback on the effectiveness of nurse listening, clarity of information, empathy shown by nurses, involvement in decision-making, support in symptom management, and overall satisfaction with care will help us identify areas for improvement and meet your needs effectively.

Your answers are kept secret, and your identity is ensured to remain anonymous. Answer each question deliberately and honestly based on your own experiences. Your opinion will help enhance the quality of care delivered by nurses in cancer settings, leading to better patient outcomes and satisfaction.

Thank you for your critical involvement and comments in this crucial research on nurse-patient communication in cancer treatment. We value your input.

1. I believe my nurse attentively listens to my concerns and inquiries throughout our conversations.
   - 1: Strongly Agree
   - 2: Agree
   - 3: Neutral
   - Disagree
   - Strongly Disagree

2. The information given by my nurse is clear and easily comprehensible.
   - 1: Strongly Agree
   - 2: Agree
   - 3: Neutral
   - Disagree
   - Strongly Disagree

3. I am at ease talking about my health concerns with my nurse.
   - 1: Strongly Agree
   - 2: Agree
   - 3: Neutral
   - Disagree
   - Strongly Disagree

4. My nurse demonstrates sensitivity and comprehension of my emotional needs.
   - 1: Strongly Agree
   - 2: Agree
5. I am content with the length of time my nurse allocates for me during appointments.
   - 1: Strongly Agree
   - 2: Agree
   - 3: Neutral
   - Disagree
   - Strongly Disagree

6. My nurse includes me in decision-making about my treatment plan.
   - 1: Strongly Agree
   - 2: Agree
   - 3: Neutral
   - Disagree
   - Strongly Disagree

7. I get assistance from my nurse in handling my symptoms and side effects.
   - 1: Strongly Agree
   - 2: Agree
   - 3: Neutral
   - Disagree
   - Strongly Disagree

8. My nurse gives me the essential information to make educated choices about my treatment.
   - 1: Strongly Agree
   - 2: Agree
   - 3: Neutral
   - Disagree
   - Strongly Disagree

9. I trust my nurse's competence in handling my healthcare requirements.
   - 1: Strongly Agree
   - 2: Agree
   - 3: Neutral
   - Disagree
   - Strongly Disagree

10. My nurse successfully connects with other healthcare team members.
    - 1: Strongly Agree
    - 2: Agree
    - 3: Neutral
    - Disagree
    - Strongly Disagree

11. I am satisfied with the general level of care given by my nurse.
    - 1: Strongly Agree
    - 2: Agree
    - 3: Neutral
    - Disagree
    - Strongly Disagree
12. I believe my nurse respects and considers my ideas and preferences about my treatment.
   • 1: Strongly Agree
   • 2: Agree
   • 3: Neutral
   • Disagree
   • Strongly Disagree

13. My nurse motivates me to inquire and request explanation about my therapy.
   • 1: Strongly Agree
   • 2: Agree
   • 3: Neutral
   • Disagree
   • Strongly Disagree

14. I believe my nurse respects my privacy and confidentiality throughout our exchanges.
   • 1: Strongly Agree
   • 2: Agree
   • 3: Neutral
   • Disagree
   • Strongly Disagree

15. Overall, I am pleased with the communication and care offered by my nurse.
   • 1: Strongly Agree
   • 2: Agree
   • 3: Neutral
   • Disagree
   • Strongly Disagree