

# Patient-Centered Care as an Optimal Solution for Enhancing the Quality of Healthcare Delivery

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**Abstract:-** The measurement of patients' satisfaction with the quality of treatment hinges on the extent to which their intended expectations, objectives, and preferences are met through interactions with healthcare professionals, including nurses. The paradigm of patient-centered care is increasingly recognized as pivotal for delivering high-quality nursing services. Evolving health information, technological advancements, shifting perceptions of care, greater patient engagement, and heightened competition within healthcare drive the pursuit of enhanced care quality. Assessing patients' perspectives is integral to improving healthcare quality, ensuring that services effectively align with patients' needs. This paper explores factors influencing patient-centered care and delves into the concept's tenets and implications for nursing practice.

**Keywords:-** Patient-Centred Care, Optimal Solution, Quality Healthcare Delivery.

## I. INTRODUCTION

The measurement of patients' satisfaction with the quality of treatment is based on the degree to which their intended expectations, objectives, and preferences are met via their interactions with healthcare professionals, including nurses (Reck, 2013). According to Erah (2017), a crucial aspect of nursing care services is the provision of high-quality care to patients. The recognition of the necessity for enhanced quality of care services has been prompted by advancements in health-related information and technology, shifts in expectations and perceptions regarding nursing care, an increase in individuals' engagement in their own health matters, and heightened cost and competition within the healthcare industry (Reck, 2013). The evaluation of patients' perspectives on the care and treatment they get is a crucial step in enhancing the quality of healthcare. This procedure aids in ascertaining if healthcare services effectively satisfy the requirements of patients.

The importance of nursing care in affecting patient satisfaction has been well acknowledged. The nurse establishes a genuine and productive rapport with the patient in order to provide high-quality nursing care, with the aim of meeting the patient's needs and promoting their maximum level of self-efficacy. In order to accomplish this objective, it is imperative for the nurse to demonstrate responsiveness,

empathy, the provision of emotional support, as well as the ability to monitor and grasp both the patient's verbal and nonverbal cues. The presence of psychological and emotional nurses involves attentiveness to patients and their needs, as well as the ability to discern when therapeutic contact is necessary, which can significantly impact patients' satisfaction levels.

The provision of nursing care assumes a pivotal role in the delivery of health care services. Patients require an increased degree of care due to a variety of potential consequences, heightened susceptibility, probable cardio-pulmonary impairment, and general concerns (Karaca & Durna 2019). The effective management of these issues necessitates a comprehensive comprehension of preoperative circumstances, meticulous intra-operative management, and prompt diagnosis and treatment of any postoperative difficulties. The provision of care that is delayed and inappropriate can result in unfavourable results and preventable fatalities. There is an increasing recognition within modern nursing care of the imperative nature of patient-centered care in the provision of nursing services. According to Karaca and Durna (2019), patients who express satisfaction with their healthcare experience tend to be easier to manage and provide a more gratifying caregiving experience. This is due to their reduced reliance on nurses' time and increased adherence to prescribed drugs and follow-up treatment.

## II. CONCEPT OF PATIENT CENTERED CARE

Patient-centered care, alternatively referred to as client-centered care, is a strategy that prioritises the needs and preferences of patients in the context of medicine, healthcare, and related practises and technologies. This phenomenon signifies a significant shift in the cognitive framework of patients, healthcare practitioners, and other stakeholders regarding the conceptualization and implementation of therapy and the facilitation of recovery (Jayadevappa, 2017). Patient-centered care, as defined by the Institute of Medicine, encompasses the provision of healthcare services that demonstrate respect for and responsiveness to the individual preferences, needs, and values of patients. This approach emphasises the importance of ensuring that patient values serve as the guiding principles for all clinical decisions. Key elements of patient-centered care include transparency,

compassion, and empowerment. The growing emphasis on patient-centered care has paved the way for a healthcare system that aims to enhance the autonomy and convenience of the key stakeholders involved, namely patients, their families, and their communities. Patient-centered care is a multifaceted and comprehensive notion within the realm of healthcare that defies easy categorization. However, there exist several prevailing viewpoints that inform this novel approach to healthcare (Neoteryx, 2018).

Patient-centered care focuses on prioritising the needs and preferences of the patient, taking into account their unique healthcare requirements. The primary objective of patient-centered healthcare is to facilitate the active engagement of patients in their own treatment. It is imperative that physicians, radiologic technologists, and other healthcare personnel cultivate proficient interpersonal abilities and successfully attend to the requirements of patients. According to Jayadevappa (2017), the provision of patient-centered care necessitates the health care professional assuming the role of a patient advocate and making efforts to deliver treatment that is both effective and safe.

It is advised that doctors engage with patients, as well as their family and friends when appropriate, in order to effectively communicate information, facilitate shared decision making, enhance patient awareness, and provide guidance on self-management skills and preventative behaviours (Joshi et al., 2013). The patient expresses a desire for assistance from proficient and well-informed healthcare practitioners in order to address their physiological and psychological requirements. The successful implementation of this method necessitates a genuine collaboration between individuals and their healthcare professionals, wherein the individual's needs and ambitions serve as the guiding force behind healthcare choices and the evaluation of outcomes (Jayadevappa, 2017).

The General Director Circular (2013), stated the Israeli Ministry of Health released a circular titled "Enhancing the Patient's Experience in the Healthcare System." This circular highlighted the significance of patient-centered care as a crucial component of providing high-quality healthcare. Patient-centered care was defined as the provision of healthcare services that prioritise the patient's preferences, needs, and values, thereby demonstrating respect for the patient. The concept encompasses a range of elements, including but not limited to emotional support, a courteous demeanour, physical assistance, the exchange of information and effective communication, the seamless and coordinated provision of care, active involvement of patients and their families in the care process, and the availability of healthcare services.

The Institute of Medicine's approach emphasises the need of establishing a genuine partnership between patients and healthcare professionals. This relationship is characterised by a mutual understanding and consideration of the individual's needs and goals, which in turn inform healthcare decisions and the evaluation of outcomes. In accordance with a patient-centered approach, healthcare teams strive to acquire a deep understanding of the patient's condition and provide personalised, all-encompassing care plans that prioritise mental health and social requirements alongside conventional medical interventions. According to the overview provided by NEJM Catalyst, the implementation of patient- or family-centered care plans necessitates health systems to reevaluate their healthcare delivery method, hence fostering a more deliberate emphasis on collaborative cooperation and shared decision-making with patients. According to Delaney (2018).

The major aim of a patient-centered care plan is to enhance individual health outcomes. However, healthcare providers can also benefit from several positive outcomes, such as increased patient satisfaction scores, enhanced staff productivity and morale, reduced total cost of treatment, and other advantages (Joshi et al., 2023). The adoption of patient- or family-centered care emerges as a promising avenue for investigation across various healthcare delivery settings.

According to Delaney (2018), the researchers from Harvard Medical School, in collaboration with the Picker Institute and The Commonwealth Fund, conducted a comprehensive study to identify the key dimensions of patient-centered care. This study involved the participation of various stakeholders, including focus groups, recently discharged patients, family members, physicians, and non-physician hospital staff. Additionally, a thorough review of relevant literature was undertaken to supplement the findings. As a result, the researchers identified seven primary dimensions that encompass the concept of patient-centered care. Subsequently, an additional concept, namely access to care, was incorporated into the existing set of principles. The researchers made a discovery regarding practices that contribute to a positive patient experience. This discovery led to the formulation of Picker's Eight Principles of Patient Centred Care. These principles include: respecting the values, preferences, and expressed needs of patients; coordinating and integrating care; providing information and education; ensuring physical comfort; offering emotional support and reducing anxiety; involving the patient's family; ensuring continuity and smooth transitions in care; and facilitating access to healthcare services (O'Neil, 2017).

Patient-centered care is predicated on a comprehensive approach to healthcare that takes into consideration the entirety of the individual rather than adopting a limited viewpoint that focuses just on the sickness or symptoms. The patient-centered approach encompasses several aspects such as the individual's capabilities, resources, preferences, health

and well-being, and social and cultural influences (Dutton, 2018).

In essence, the word 'patient-centered care' encompasses a range of ideas and actions, and there is a lack of consensus over a singular, universally accepted definition for this notion. The reason for this phenomenon is that patient-centered care continues to be a developing and dynamic field. The significance of some aspects in one individual's healthcare may vary, rendering them insignificant or even undesirable to another individual. The individual's demands may also undergo modifications as time progresses (Joshi, Purani & Kartha, 2013).

The principal objective and advantage of patient-centered care is to enhance individual health outcomes, with the potential for concurrent improvements in community health outcomes. Not only do patients experience benefits, but providers and health care systems also derive advantages. These include improved satisfaction scores among patients and their families, enhanced reputation of providers among health care consumers, increased morale and productivity among clinicians and ancillary staff, greater allocation of resources, reduced expenses, and improved financial margins across the continuum of care (Welkin, 2021).

### III. THE FUNDAMENTAL TENETS OF PATIENT-CENTERED CARE

Patient-centered care is predicated upon a collection of fundamental ideas that govern its methodology in the provision of healthcare services. These principles are crucial in guaranteeing that the provision of care is centred on the specific requirements, values, and preferences of each individual patient.

Fundamentally, patient-centered care encompasses a profound reverence for the values and preferences of every individual patient. This entails recognising and taking into consideration an individual's cultural heritage, personal convictions, and distinct contextual factors. This idea underscores the significance of customising treatments and decisions to correspond with the patient's core values and priorities.

The seamless coordination and integration of healthcare services are fundamental aspects of patient-centered care. This practise guarantees that individuals seeking medical treatment have thorough and effectively coordinated healthcare services from various providers and facilities, therefore fostering a complete approach to their overall health and wellness. The importance of transparency and effective communication cannot be overstated in the context of patient-centered care. Patients possess the entitlement to be provided with truthful and comprehensible information pertaining to their health status, available treatment alternatives, and prospective results.

The establishment of open discussion fosters a sense of trust and enables patients to make well-informed decisions regarding their healthcare.

The inclusion of family and friends is an additional fundamental principle. Acknowledging the significant impact exerted by a patient's support network, the concept of patient-centered care promotes the active involvement of those close to the patient in dialogues and determinations pertaining to the patient's healthcare trajectory.

The establishment of patient-centered care is predicated upon the principles of collaboration and shared decision-making. The collaborative engagement of patients, their families, and healthcare practitioners is crucial in establishing a partnership where valuable ideas and knowledge are exchanged. This collaborative approach facilitates the development of treatment programmes that align with the patient's individual values and ambitions.

The importance of education in fostering empowerment cannot be overstated. The provision of patient-centered care involves empowering patients with the necessary information and resources to effectively manage their health, therefore fostering self-care, prevention, and informed decision-making. The incorporation of both physical comfort and emotional well-being is a fundamental component of patient-centered care. This encompasses the management of pain, the mitigation of anxiety, and the establishment of a supportive atmosphere that encompasses both patients and their families.

The provision of continuous and accessible care is crucial in ensuring sustained assistance for patients throughout their healthcare trajectory. Patient-centered care acknowledges the significance of providing ongoing advice and support.

The ethical dimension of care delivery is underscored by the importance placed on respecting patient rights. Ensuring the preservation of privacy, confidentiality, and the patient's autonomy in decision-making are fundamental components of patient-centered approaches (Health Foundation, 2016). Finally, patient-centered care upholds a dedication to the provision of high-quality and safe healthcare. While placing patient preferences as a priority, it maintains a commitment to providing evidence-based, high-quality healthcare that is consistent with the patient's beliefs and goals.

The aforementioned fundamental principles collectively establish the concept of patient-centered care, which entails a transformation of healthcare from a paradigm centred on healthcare providers to one that revolves around the specific needs and preferences of each individual patient. This approach fosters a collaborative relationship between healthcare providers and patients, acknowledging and valuing their distinct characteristics and prioritising their overall welfare.

#### IV. NURSES' RELATED FACTORS INFLUENCING PATIENT CENTERED CARE

Nurses assume a pivotal position in the provision of patient-centered care; yet, several circumstances might exert an influence on their capacity to execute this responsibility with optimal effectiveness (Lyngkhai & Brindha 2015). One crucial determinant is the individual's educational attainment and training. Nurses that possess extensive training in communication skills, empathy, and patient involvement are more proficient in delivering care that upholds and attends to the unique needs and preferences of patients (McCormack & McCance 2011). The considerations of workload and time restrictions are also significant in this context. Nurses frequently encounter challenging workloads that impose restrictions on the amount of time they are able to provide to individual patients. This can provide a significant obstacle to the facilitation of substantive dialogues, the cultivation of rapport, and the active inclusion of patients in the decision-making procedures.

The attitude and mindset of nurses play a crucial role. Individuals who possess a favourable disposition towards patient-centered care and place importance on fostering collaborative relationships with patients are more inclined to integrate patients' viewpoints into their care plans. Conversely, adverse attitudes or insufficient recognition of the significance of patient participation may impede the adoption of patient-centered methodologies. The ability of nurses to deliver patient-centered care is significantly influenced by leadership and organisational support. Nurturing leadership that places importance on patient-centered care has the potential to provide a positive environment for nurses to adopt and embody these practises. On the other hand, the absence of sufficient organisational support or the presence of conflicting goals may hinder nurses from effectively incorporating patient preferences into their care practises.

Effective communication skills play a key role in the provision of patient-centered care. Nurses that possess proficient communication abilities have the capacity to actively engage in patient-centered listening, comprehend their problems, and articulate treatment alternatives in a manner that is readily comprehensible. Inadequate communication abilities can result in misinterpretations, diminished confidence, and obstacles to collaborative decision-making.

Nurses have a crucial role as primary carers, providing essential care to patients inside the hospital setting. Nurses provide a crucial function in engaging with individuals who are seeking healthcare services (Joshi et al., 2013). Effective communication by nurses plays a crucial part in the provision of patient care within healthcare settings. Effective and appropriate communication with patients is a crucial skill required in professional nursing practise. There exists a correlation between the calibre of interpersonal

communication and health outcomes, including aspects such as quality of life and patient satisfaction (Owumi, 2016).

The assessment of patient satisfaction about the quality of nursing care is an essential measure for evaluating the provision of care within hospital settings. In their study, Messina and Zipp (2016) expanded upon the existing research on patient care experience and patient perceptions. They explored the link between these factors and the enhancement of interpersonal continuity of care, a well recognised objective in the field of primary care. According to Ogunfowakun (2017), a conducted study revealed that helpless patients expressed a satisfactory degree of contentment with the physical and psychological care they received. However, they expressed dissatisfaction with the spiritual part of the treatment. Consequently, the author recommended the necessity for enhancing nurses' provision of spiritual care.

Nurse communication pertains to the patient's view of the nurse's contact, which ideally should involve therapeutic communication and validation elements as integral components of the nurse's provision of care in the outpatient department. The provision of compassionate and individualised care, together with the dissemination of information and support to patients and their carers, has been identified as a significant factor contributing to patients' overall satisfaction with nursing care (Erah, 2017).

The patient may take into account factors such as the nurse's expertise and experience, recommendations for self-care, clarification of the diagnosis, and the provision of treatment during their visit. Effective communication has a pivotal and indispensable role in all aspects of healthcare operations. Communication is a fundamental process by which information is sent and comprehended by the intended recipient. Communication refers to the process through which nurses and patients engage in the creation or interchange of thoughts, perspectives, emotions, and comprehension. Establishing and sustaining connectivity in the workplace is of paramount importance. While nurses dedicate a significant portion of their time to communication, it cannot be assumed that every interaction results in meaningful communication (Lyngkhai & Brindha, 2015). Furthermore, effective communication is heavily influenced by factors such as culture, social position, and reciprocal connections among patients. The primary attribute of communication is the sharing of information with the intention of achieving comprehension (Dutton, 2018).

Therapeutic connections and the presence of nurses are ongoing processes of communication. Therefore, communication may be considered a necessary condition for establishing and maintaining these relationships (Owumi, 2017). Communication is composed of both verbal and nonverbal expressions, with verbal expressions, namely in the form of language, being considered fundamental. In the

context of interpersonal exchanges, many forms of conduct may be seen as communicative, and the transmission of messages occurs between healthcare professionals, such as nurses, and those receiving care, commonly referred to as patients (Owumi, 2017). Karaca and Durna (2019) assert that communication may be facilitated by several means, including facial expression, eye contact, body posture, physical contact, and spoken language.

Patient-centred communication is characterised by a polite and prompt approach that addresses the needs, beliefs, values, and preferences of those seeking healthcare services. The importance of patient-centred communication cannot be overstated in the context of ethical and high-quality healthcare. The correlation between excellent communication and high-quality health care is frequently observed as a matter of convenience. According to Erah (2017), patient satisfaction is positively correlated with effective communication that is characterised by coherence, comprehensibility, and respect. Conversely, deficiencies in communication between healthcare practitioners and patients, as well as among healthcare practitioners themselves, can lead to medical mistakes, unforeseen patient consequences, and potential legal action against the healthcare provider.

Verbal and non-verbal communication play a significant role in mediating the nurse-patient interaction. Communication relationships in healthcare settings are characterised by their distinctiveness and the reciprocal nature of their development, whereby the professional nurse-patient interaction is both responsive and inter-subjective (Owumi, 2016). The distinction between nursing and caring lies on the nature of the interpersonal relationship involved. The fundamental element of nursing relationships is predicated upon the nurse's proficiency in non-judgmental listening and the capacity to convey empathy and comprehension. The significance of communication and interaction within the nursing profession has been an often emphasised topic among nurses and nursing scholars, dating back to the era of Florence Nightingale in the 19th century and through to the present day.

The primary objective of patient-nurse communication and contact is to influence the patient's health condition or overall well-being. Dutton (2018) underscored the existence of a connection between nurse-patient communication and patient satisfaction with nursing care. Furthermore, the study revealed a statistically significant correlation between the sex variable and patients' degree of satisfaction.

Furthermore, the ability to communicate effectively is a crucial component of nursing care, playing a vital role in delivering high-quality patient care. The quality of life is significantly influenced by social connection that is facilitated by efficient communication. Socialisation opportunities for those staying in long-term care (LTC) and complex continuing care (CCC) institutions are generally facilitated through

interactions and contact with staff members. The efficacy of communication lies in its ability to enhance nurse-patient interactions, hence fostering enhanced nurse-patient relationships and boosting patient satisfaction (Reck, 2013).

Relational communication encompasses seven characteristics, namely calmness, comfort, care, interest, sincerity, acceptance, and respect (Dutton, 2018). While it was not feasible to incorporate all seven communication aspects in the context of patients' perspectives on nurse-patient communication, patients did express higher levels of satisfaction when nurses displayed composure, immediacy, receptiveness, and shared values. In the context of healthcare, nurse-patient interactions frequently confront several impediments. Messina and Zipp (2016) have categorised the barriers into two distinct groups, namely environmental barriers and human barriers. One of the environmental barriers that might impede effective communication between nurses and patients is the presence of competing demands for attention and time.

The presence of many and concurrent obligations might lead to the misinterpretation of communications. The individual perceives the auditory stimulus, however fails to fully understand its meaning. The patient's lack of attentive engagement with the message indicates a limited capacity for active listening. The act of listening involves the assimilation of sensory, affective, and cognitive stimuli in the pursuit of comprehension and interpretation. Conversely, personal obstacles manifest as a result of an individual's cognitive framework or their system of ideas and values. Individuals may engage in selective perception, whether consciously or subconsciously, and may also be susceptible to the impact of fear or jealousy. A significant obstacle that individuals may encounter is a deficiency in empathy, which refers to a lack of sensitivity towards the emotional well-being of both nurses and patients (Erah, 2017).

Consensus was reached about the significance of communication as a primary factor influencing patient satisfaction. According to Reck (2013), patient satisfaction ratings in the outpatient department are significantly influenced by effective communication and follow-up treatment. The fundamental attributes that emerge as crucial include communication, accessibility, interpersonal abilities, care coordination, and follow-up care. The relevance of medical care procedures, healthcare facility quality, and employee quality is of paramount importance.

When drawing a conclusion, communication is considered a helpful indication of the quality of healthcare services as perceived by patients. Effective communication by nurses is an essential component of effective healthcare services, since it significantly impacts patient satisfaction with the healthcare experience. The therapeutic utilisation of communication by nurses refers to the display of interpersonal

behaviours that assist patients in attaining favourable emotional and behavioural results. This involves demonstrating empathy, respect, and validation towards patients. Validation factors encompass attentive listening and ensuring that the nurse's services in the outpatient department align with the patient's intentions.

In brief, the capacity of nurses to deliver patient-centered care is impacted by several aspects, including their level of education and training, the demands of their workload and time limitations, their attitude and mentality, the support provided by leadership, their communication skills, and the general work environment. By implementing strategies such as education, training, organisational support, and improvements in communication, nurses may effectively strengthen their patient-centered care practises.

#### **V. ASPECTS OF THE PATIENT THAT INFLUENCE PATIENT-CENTERED CARE**

There is a growing trend among patients to seek more knowledge about their health issues and actively engage in the planning, organisation, and decision-making processes pertaining to their healthcare services. The presence of patient engagement was seen to be discernible in the context of nursing care inside hospital environments, albeit to a limited extent. The study conducted by Kolovos et al., (2015) revealed that paternalism was the prevailing approach in the decision-making process, while it was determined that interpersonal connection between the individuals involved was essential for the planning of nursing care. The impact of hospitalisation on the nursing care experience scale was shown to be significant, even when considered separately. Additionally, the kind of ward, gender, wealth, and education were found to have independent effects on satisfaction with the nursing care scale. The study found that those who had undergone surgical operations, namely male patients within the age range of 40 to 59 years, exhibited higher levels of satisfaction. Additionally, patients with lower levels of education or income, as well as those who had longer hospital stays, also reported higher levels of satisfaction. The satisfaction of patients with nursing care was influenced by several significant characteristics, including age, sex, wealth, and ward type (Morris & Weiss, 2015).

Several writers have indicated in their study that variables such as age, religion, income, source of health information, stage of sickness upon diagnosis, and duration of Internet usage are significant factors influencing patients' happiness. In their study, Karaca and Durna (2019) found that patients who were 80 years of age or older, identified as female, and were located in elderly care wards placed a higher importance on the physical components of nursing care compared to patients who were between the ages of 65 and 80, identified as male, and were located in medical wards. The findings of the study indicate that elderly individuals and those

residing in aged care wards had higher levels of satisfaction with regards to physical care. According to Reck's (2013) research on the influence of gender on patient satisfaction with the quality of nursing care, it was determined that there was no statistically significant difference between genders in terms of patients' experiences with the continuity of care ( $p = 0.117$ ). There were no statistically significant variations seen between genders in terms of the average age within any of the three categories.

#### **VI. THE IMPEDIMENTS TO THE IMPLEMENTATION OF PATIENT-CENTERED CARE**

There are many different variables that might make it difficult to put patient-centered care into practise. Transitioning to a paradigm in which people have a more active part in their healthcare decisions can be challenging for practitioners due to the traditional medical culture's deeply ingrained focus on a physician-centered approach to patient care. The dynamics between health care professionals and patients must be rethought in order to accommodate this cultural transformation. The lack of knowledge and education regarding patient-centered care is another barrier that has to be overcome. It's possible that healthcare professionals and patients don't completely comprehend the concept, let alone the potential benefits it offers. Because of this lack of awareness, the readiness to adopt new practises and ideas might be hindered, which makes it more difficult to include patient preferences into the care process (Lotfi et al., 2019).

Time restraints are another key challenge that must be overcome. Providers of healthcare services frequently labour under stressful conditions, including packed schedules and hefty patient loads. Incorporating patient-centered care necessitates devoting more time to having meaningful dialogues with patients, including them in decision-making processes, and gaining a better comprehension of their unique requirements and priorities. Finding a happy medium between all of these competing time demands and constraints may be a very difficult task. In addition, patient-centered care might be more difficult to adopt inside healthcare systems because of the structural hurdles that exist within such institutions. There is a possibility that the concepts of patient participation and shared decision-making do not connect with the administrative procedures, protocols, and workflows. In order to overcome these structural impediments, there is a need for systemic reforms that will enable care delivery that is more adaptable and focused on the patient.

In summary, making the shift to patient-centered care requires overcoming these obstacles, confronting cultural norms, enhancing education, redistributing time and resource allocations, and redesigning healthcare institutions in order to create an environment in which patients are actual participants in their own healthcare journeys.

## VII. CONCLUSION

Patient-centered care embodies a transformative approach, placing patients and their unique needs at the forefront of healthcare delivery. Nurses play a central role in actualizing patient-centered care, but various factors can either enable or hinder its successful implementation. Effective communication, education, and fostering a collaborative environment are pivotal for nurses to provide care that respects individual preferences and values. This care approach improves patient satisfaction, treatment adherence, and overall health outcomes. As the healthcare landscape continues to evolve, embracing patient-centered care becomes paramount in achieving holistic, patient-focused healthcare experiences. This shift requires continuous education, organizational support, and a commitment to cultivating empathetic, responsive, and patient-centric nursing practices.

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