

# Effectiveness of Standard of Care Protocol on Patient Satisfaction and Perceived Staff Caring

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**Background:** Nurse caring has been linked to many clinical outcomes, including patient satisfaction, well-being, and healing. In addition, it is valued by nursing staff and viewed as being essential to clinical practice.

**Objectives:** The purpose of this program evaluation study was to determine the difference in patient satisfaction with overall nursing care and perceived nurse caring when a nursing staff standard of care protocol, which included caring activities, was implemented within a nursing department at a National Cancer Institute–designated comprehensive cancer center.

**Methods:** A pre-experimental pre-/post-test design with comparison group and a post-test–only design were used to test the effect of the caring protocol on patient satisfaction with nursing care and perceived nurse caring. The study was conducted on seven inpatient units.

**Findings:** Patient satisfaction with nursing care increased for some items, and perceived nurse caring was ranked highly immediately before discharge. Additional program evaluation studies involving a modified caring protocol may improve satisfaction with nursing care in other settings.

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The case has been made for the field of professional nursing to investigate caring behaviors, lifestyles, processes, and consequences, as well as to consider caring to be a critical essence of nursing (Leininger, 1977/2012). Likewise, nurses have asserted that human caring is a central focus of study for professional nursing practice (Roach, 2002; Smith, Turkel, & Wolf, 2013; Werner et al., 2002). Theorists and researchers alike have connected nurse caring to various clinical outcomes, such as patient satisfaction (Duffy, 1990; Werner et al., 2002), well-being, and healing (Watson, 1988b).

Investigators have conducted qualitative studies on nurse caring (Fagerström, Eriksson, & Engberg, 1999; Halldorsdottir, 1991; Henderson et al., 2007; Radwin, Farquhar, Knowles, & Virchick, 2005). Others have developed inductively and deductively derived theories on caring (Boykin & Schoenhofer, 1997; Halldorsdottir, 1991; Swanson, 1991; Watson, 1988a, 1999), and

created and tested instruments to measure nurse caring using patient and nurse samples (Brown, 1986; Cronin & Harrison, 1988; Duffy, Hoskins, & Seifert, 2007; Larson, 1984; Mayer, 1987; Watson, 2009; Wolf, Miller, & Devine, 2003). Researchers have also addressed patient-centered care (McCance, Slater, & McCormack, 2008), good nursing care (Rehnström, Christensson, Leino-Kilpi, & Unosson, 2003), and satisfaction with nursing care (González-Valentin, Padin-López, & de Ramón-Garrido, 2005).

The association between patients' perceptions of nurse caring and patients' satisfaction with hospital services, as well as its predictive ability, have also been studied (Duffy, 1990; Larrabee et al., 2004; Wolf et al., 1998; Wolf, Miller, & Devine, 2003). Duffy (1992) linked nurse caring with patient satisfaction, health status, length of stay, and healthcare costs. Studies testing the correlation between adult patients' perceptions of nurse caring and patient satisfaction (Burt, 2007; Duffy, 1990; Green, 2002; McEvoy, 1996; Palese et al., 2011; Rafii, Hajinezhad, & Haghani, 2008;