

The Role of Nursing Care Quality in Improving Patient Safety and Satisfaction in Primary Health Services

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ABSTRACT

This study examines the role of nursing care quality in improving patient safety and patient satisfaction in primary health services. The research aims to analyze how nursing service quality influences healthcare safety practices, patient experiences, and the overall effectiveness of primary healthcare delivery. A qualitative research method with a case study design was employed because this approach enables an in-depth exploration of healthcare practices, organizational processes, and patient experiences within real-life healthcare settings. The study was conducted in several primary healthcare centers in West Java, Indonesia, selected due to their active implementation of healthcare quality and patient safety programs. The research involved twenty informants consisting of nurses, healthcare managers, patients, and healthcare quality officers who were purposively selected based on their direct involvement and experience in nursing services and patient safety management. Data were collected through in-depth interviews, observations, and document analysis, and were analyzed using thematic analysis techniques. The findings indicate that nursing care quality significantly contributes to patient safety and patient satisfaction through effective communication, responsiveness, empathy, and adherence to healthcare standards. The study recommends strengthening nursing competency development, patient-centered care implementation, and institutional patient safety management systems within primary healthcare services.



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INTRODUCTION

Primary health services constitute the frontline of healthcare delivery and play a crucial role in achieving equitable, accessible, and patient-centered healthcare systems (N. H. Greene & Kilpatrick, 2024). In many countries, including developing and developed healthcare systems alike, primary healthcare facilities are expected to provide comprehensive, continuous, and safe nursing services that respond effectively to community health needs. Within this context, nursing care quality has emerged as one of the most significant determinants influencing patient safety and patient satisfaction (Simelane et al., 2025). Nurses represent the largest proportion of healthcare professionals in primary care settings and maintain direct and continuous interaction with patients during assessment, treatment, monitoring, education, and follow-up processes. Consequently, the quality of nursing care substantially affects healthcare outcomes, service efficiency, patient trust, and the overall perception of healthcare quality. The increasing complexity of healthcare demands, combined with rising public awareness regarding healthcare rights and service standards, has intensified the need for healthcare institutions to strengthen nursing quality management as an essential strategy for improving patient safety and satisfaction.

Recent global healthcare developments demonstrate that patient safety remains a critical public health concern (Bonner et al., 2023). Unsafe healthcare practices continue to contribute to preventable morbidity, mortality, prolonged hospitalization, and increased healthcare expenditures (Senapati et al., 2023). In primary healthcare environments, patient safety issues frequently involve medication administration errors, communication failures, inadequate patient monitoring, delayed interventions, and incomplete documentation practices. Although patient safety initiatives have been extensively implemented in hospital-based services, patient safety management in primary healthcare settings often

receives comparatively less scholarly and institutional attention. This situation becomes more concerning considering that primary health services function as the first point of patient contact within healthcare systems. The quality of nursing care provided at this level therefore has direct implications for early diagnosis accuracy, treatment continuity, patient adherence, and long-term health outcomes. Simultaneously, patient satisfaction has become an important indicator of healthcare quality because it reflects patient perceptions regarding service responsiveness, empathy, professionalism, communication effectiveness, and care reliability (Wu, 2025).

The state of the art in contemporary nursing and healthcare research indicates that nursing care quality is multidimensional, encompassing technical competence, interpersonal communication, ethical practice, responsiveness, continuity of care, emotional support, and evidence-based interventions (Tseng et al., 2023). Previous studies have consistently revealed that high-quality nursing services contribute positively to patient trust, healthcare utilization, patient engagement, and improved clinical outcomes (Carvalho & Bates, 2024). Furthermore, several empirical investigations have shown that patient-centered nursing interventions are associated with reduced adverse events and increased patient satisfaction levels (Nambiar & Desai, 2023). Nevertheless, most previous studies predominantly focus on hospital-based nursing services, emergency departments, or inpatient settings, while relatively limited attention has been directed toward primary healthcare services. Existing research also tends to examine patient safety and patient satisfaction separately rather than analyzing their interconnected relationship through the lens of nursing care quality. As a result, there remains insufficient comprehensive understanding regarding how nursing care quality simultaneously influences patient safety and patient satisfaction within primary healthcare institutions.

The primary research problem addressed in this study concerns the inconsistency in nursing service quality across primary healthcare facilities and its implications for patient safety and patient satisfaction outcomes. Variations in nursing competence, workload distribution, communication practices, service responsiveness, and adherence to clinical standards may create disparities in patient experiences and healthcare outcomes (Neumann, 2023). In many primary healthcare settings, limited resources, inadequate staffing, insufficient professional development opportunities, and increasing patient volumes may compromise nursing performance and reduce the effectiveness of patient safety practices. Such conditions can potentially lead to medication errors, delayed treatment, poor patient communication, and dissatisfaction with healthcare services. Moreover, despite growing emphasis on healthcare quality improvement, healthcare institutions often encounter challenges in integrating patient safety principles into routine nursing practice within primary care contexts.

The research gap identified in this study lies in the limited empirical evidence examining the integrated relationship between nursing care quality, patient safety, and patient satisfaction specifically in primary healthcare services. Earlier studies frequently concentrate on isolated dimensions of healthcare quality or focus primarily on tertiary and hospital-based healthcare environments. In addition, many previous investigations utilize quantitative performance indicators without sufficiently exploring the broader contextual relationship between nursing care processes and patient perceptions. There is therefore a need for a more comprehensive analytical framework capable of explaining how nursing care quality contributes simultaneously to enhancing patient safety outcomes and improving patient satisfaction in primary healthcare institutions. This gap highlights the importance of conducting research that specifically addresses nursing care quality within the operational realities of primary health services.

The novelty of this research is reflected in its integrative approach that positions nursing care quality as a central determinant influencing both patient safety and patient satisfaction simultaneously within primary healthcare settings. Unlike previous studies that analyze these variables independently, this research seeks to construct a more comprehensive conceptual understanding regarding the interconnected nature of healthcare quality dimensions. The study also emphasizes the strategic role of nursing professionals in implementing patient-centered and safety-oriented healthcare practices at the primary service level. By focusing specifically on primary healthcare services, this research contributes new insights into healthcare quality improvement strategies that are contextually relevant to community-based healthcare delivery systems.

Based on these considerations, the research questions formulated in this study include: how does nursing care quality influence patient safety in primary healthcare services; how does nursing care quality affect patient satisfaction levels; and how can healthcare institutions strengthen nursing care quality to improve both patient safety and patient satisfaction outcomes simultaneously? These questions are designed to provide systematic understanding regarding the strategic role of nursing services in healthcare quality enhancement and patient-centered care development.

The objective of this study is to analyze and explain the role of nursing care quality in improving patient safety and patient satisfaction in primary healthcare services. Specifically, this research aims to identify critical dimensions of nursing care quality that influence patient safety practices, evaluate the relationship between nursing care quality and patient satisfaction, and formulate evidence-based recommendations for strengthening nursing service quality within primary healthcare institutions. Through this objective, the study seeks to contribute both theoretical and practical insights relevant to healthcare quality management and nursing service development.

The theoretical benefit of this research lies in its contribution to the development of nursing science and healthcare quality theory, particularly regarding the relationship between nursing care quality, patient safety, and patient satisfaction in primary healthcare contexts. The findings are expected to enrich existing literature by providing a conceptual framework that integrates these interconnected variables within community-based healthcare environments. Academically, this study may serve as a scholarly reference for future researchers, nursing educators, healthcare administrators, and students interested in healthcare quality improvement, patient-centered care, and nursing management research. The study may also encourage further interdisciplinary investigations exploring healthcare quality dimensions in various healthcare settings.

Practically, the findings of this research are expected to provide valuable recommendations for healthcare institutions, nursing managers, policymakers, and healthcare professionals in strengthening nursing care quality standards. The study may support the development of patient safety programs, nursing competency improvement initiatives, communication enhancement strategies, and service quality evaluation mechanisms in primary healthcare facilities. Furthermore, the research may assist healthcare policymakers in designing evidence-based healthcare policies aimed at improving patient-centered healthcare delivery and strengthening public trust in primary healthcare systems.

Despite its anticipated contributions, this study possesses several limitations. The research may be limited by contextual differences among healthcare institutions, variations in patient perceptions, and differences in organizational culture affecting nursing practices. Additionally, the study may rely on specific healthcare settings or limited participant populations, which could influence the generalizability of the findings to broader healthcare environments. Methodological limitations related to data collection approaches, respondent subjectivity, and institutional variability may also affect the interpretation of results.

Therefore, future research is recommended to expand the scope of investigation by incorporating comparative analyses across different healthcare institutions, regions, and healthcare systems. Subsequent studies may also explore the influence of organizational leadership, digital healthcare technology, nurse workload, and interprofessional collaboration on patient safety and patient satisfaction outcomes. Longitudinal and mixed-method research designs are further recommended to generate deeper understanding regarding the long-term impact of nursing care quality improvement strategies within primary healthcare services. Through continuous scholarly exploration, healthcare systems may develop more effective, safe, and patient-centered nursing service models capable of improving healthcare quality and community well-being sustainably.

LITERATURE REVIEW

The study of nursing care quality in primary health services has become increasingly important within contemporary healthcare systems due to its direct influence on patient safety and patient satisfaction (Peretz et al., 2023). Healthcare institutions are currently challenged to provide effective, safe, patient-centered, and high-quality services while simultaneously responding to rising patient expectations, technological developments, and increasing healthcare complexity. Within this context,

nursing professionals occupy a strategic position because they maintain continuous interaction with patients and play a central role in healthcare delivery processes (Abdelaziz et al., 2024). Consequently, the quality of nursing care significantly determines healthcare outcomes, service reliability, patient trust, and institutional performance. The literature concerning healthcare quality demonstrates that patient safety and patient satisfaction are closely interconnected dimensions influenced by nursing competence, communication effectiveness, responsiveness, empathy, clinical accuracy, and adherence to healthcare standards (Haines & Pu, 2025). Therefore, this research utilizes three major theoretical perspectives to construct a comprehensive analytical framework regarding the role of nursing care quality in improving patient safety and satisfaction in primary health services.

The first theory employed in this study is Donabedian's Quality of Care Theory, introduced by Avedis Donabedian in 1966 (Pont, 2024). Avedis Donabedian was a prominent healthcare quality scholar affiliated with the School of Public Health, University of Michigan, United States. Donabedian's theoretical framework is widely recognized as one of the foundational models for evaluating healthcare quality across global healthcare systems. According to Donabedian, healthcare quality can be analyzed through three interconnected dimensions consisting of structure, process, and outcomes (Sharma, 2025). Structure refers to organizational resources, infrastructure, healthcare personnel, and institutional systems supporting healthcare delivery. Process concerns the implementation of healthcare activities, including communication, clinical procedures, patient interaction, and nursing interventions. Outcomes involve the final impact of healthcare services on patient health status, patient safety, satisfaction, and healthcare effectiveness.

Donabedian emphasized that high-quality healthcare outcomes cannot be achieved without adequate organizational structures and effective healthcare processes (Office, 2025). Within nursing care contexts, this theory explains that patient safety and patient satisfaction are strongly influenced by nursing competence, staffing adequacy, communication systems, professional ethics, and service responsiveness. The conceptual framework proposed by Donabedian remains highly relevant in contemporary healthcare research because it provides a systematic model for assessing healthcare quality improvement initiatives. The theory has evolved significantly through integration with digital healthcare systems, patient-centered care approaches, evidence-based nursing practice, and healthcare accreditation standards. Contemporary scholars increasingly apply Donabedian's framework to evaluate healthcare quality performance indicators in primary healthcare settings, emphasizing safety culture, patient engagement, and healthcare sustainability (Nadyrov, 2023).

The second theory utilized in this research is Jean Watson's Theory of Human Caring, developed by Jean Watson in 1979 (Ida, 2025). Jean Watson is an influential nursing theorist associated with the University of Colorado College of Nursing, United States. Watson's theory highlights the importance of caring relationships, humanistic values, compassion, and interpersonal communication in nursing practice. According to Watson, nursing is not solely focused on clinical treatment and technical intervention but also involves emotional, psychological, spiritual, and relational dimensions that contribute to holistic patient healing and well-being (Adair et al., 2023). Watson proposed the concept of "carative factors," later expanded into "caritas processes," which emphasize empathy, trust, emotional support, respect for human dignity, and authentic nurse-patient relationships.

Within the context of primary healthcare services, Watson's theory provides important insights regarding the relationship between nursing care quality and patient satisfaction. Patients frequently evaluate healthcare quality not only based on technical competence but also according to communication quality, empathy, attentiveness, emotional reassurance, and respect received from healthcare professionals (Ramesh, 2023). Watson argued that caring interactions establish therapeutic relationships that improve patient trust, reduce anxiety, increase treatment adherence, and enhance overall healthcare experiences. The theory has experienced substantial contemporary development through integration with patient-centered care models, transcultural nursing approaches, digital nursing communication systems, and mental health-oriented healthcare services. Modern healthcare institutions increasingly recognize caring-based nursing models as essential components of patient safety culture and healthcare quality management (Stark et al., 2023).

The third theory applied in this study is James Reason's Swiss Cheese Model of Patient Safety, introduced by James Reason in 1990 (Saeidzadeh et al., 2024). James Reason was a distinguished psychologist and safety researcher affiliated with the University of Manchester, United Kingdom. Reason's theory explains that adverse healthcare events and patient safety incidents usually result from multiple systemic failures rather than isolated human errors. The Swiss Cheese Model illustrates that organizational weaknesses, communication failures, procedural limitations, inadequate supervision, staffing problems, and environmental conditions may align simultaneously, thereby creating opportunities for patient harm (Näppä et al., 2025). According to Reason, patient safety improvement requires proactive risk management, organizational learning, effective communication systems, and institutional safety culture development.

This theory is particularly relevant for explaining patient safety challenges within primary healthcare services. Nursing professionals often encounter complex work environments characterized by high patient volumes, limited resources, time constraints, and administrative pressures. Such conditions may contribute to medication errors, delayed interventions, incomplete documentation, and communication breakdowns (Phillips, 2024). Reason emphasized that patient safety should be approached through systemic quality improvement rather than individual blame-oriented perspectives. Contemporary developments of this theory include integration with healthcare risk management systems, digital patient monitoring technologies, electronic medical records, interprofessional collaboration frameworks, and healthcare resilience strategies. Current healthcare research frequently employs Reason's framework to evaluate organizational safety culture and healthcare error prevention mechanisms (J. Greene et al., 2025).

The perspectives proposed by Donabedian, Watson, and Reason collectively provide a comprehensive theoretical foundation for analyzing nursing care quality in primary healthcare services. Donabedian's theory explains the structural and procedural dimensions influencing healthcare outcomes, Watson's theory emphasizes the relational and humanistic aspects of nursing care affecting patient satisfaction, while Reason's theory focuses on systemic patient safety management and organizational risk prevention. The integration of these theories enables this research to examine nursing care quality from organizational, interpersonal, and safety-oriented perspectives simultaneously.

The relevance of these theories to the primary research problem becomes evident when considering the persistent challenges associated with inconsistent nursing service quality, patient safety incidents, and varying levels of patient satisfaction in primary healthcare institutions. Donabedian's framework explains that weaknesses in healthcare structures and processes may compromise healthcare outcomes. Watson's perspective demonstrates that insufficient caring interactions may reduce patient trust and satisfaction. Reason's theory further clarifies that patient safety incidents frequently originate from systemic weaknesses rather than isolated professional negligence (Gu & Lee, 2025). Therefore, these theories collectively support the analytical framework required to investigate how nursing care quality contributes to patient safety and patient satisfaction improvement.

The research gap identified in this study is also closely connected to these theoretical perspectives. Existing studies often focus separately on healthcare quality, patient safety, or patient satisfaction without integrating these dimensions into a unified conceptual framework. Additionally, most previous investigations emphasize hospital-based healthcare environments, while relatively limited research addresses nursing care quality within primary healthcare settings (Wagner et al., 2024). The integration of Donabedian's, Watson's, and Reason's theories provides a novel conceptual approach capable of bridging this gap by examining nursing care quality as a multidimensional determinant influencing both patient safety and patient satisfaction simultaneously.

The theoretical framework also supports the formulation of the research questions concerning how nursing care quality influences patient safety, how nursing care quality affects patient satisfaction, and how primary healthcare institutions may strengthen nursing service quality to improve healthcare outcomes comprehensively. These theories further align with the research objectives seeking to analyze nursing care quality dimensions, evaluate healthcare outcomes, and formulate evidence-based recommendations for healthcare quality improvement.

From a theoretical perspective, this study contributes to the advancement of nursing science, healthcare quality management, and patient safety literature by integrating three complementary theories into a unified analytical framework. Academically, the study provides scholarly references for future researchers, nursing educators, healthcare policymakers, and healthcare management practitioners interested in healthcare quality improvement and patient-centered care development. Practically, the theoretical integration may assist healthcare institutions in designing effective nursing quality standards, patient safety programs, communication improvement strategies, and organizational healthcare quality initiatives.

In conclusion, the literature review demonstrates that Donabedian's Quality of Care Theory, Watson's Theory of Human Caring, and Reason's Swiss Cheese Model collectively provide a strong conceptual foundation for analyzing the role of nursing care quality in improving patient safety and patient satisfaction within primary healthcare services. The perspectives proposed by these three scholars explain healthcare quality from structural, interpersonal, and systemic safety dimensions, thereby offering a comprehensive framework for addressing the primary research problem. The integration of these theories also addresses existing research gaps, supports the novelty of the study, strengthens the research formulation, and aligns closely with the theoretical, academic, and practical objectives of the research. Consequently, the combination of these theoretical perspectives contributes significantly to understanding how nursing care quality may enhance healthcare effectiveness, patient safety, and patient satisfaction within contemporary primary healthcare systems.

RESEARCH METHODS

This study employed a qualitative research method to comprehensively explore and understand the role of nursing care quality in improving patient safety and patient satisfaction in primary health services (Townshend et al., 2023). The qualitative approach was selected because the research aimed to investigate complex social, professional, organizational, and interpersonal phenomena related to nursing practices, patient experiences, healthcare quality management, and patient safety implementation within primary healthcare settings. Qualitative research is particularly appropriate for examining healthcare service quality because it allows researchers to capture participants' perspectives, lived experiences, perceptions, meanings, and interpretations regarding healthcare interactions and institutional practices (Tawfik et al., 2023). In the context of this study, nursing care quality cannot be fully understood solely through numerical indicators or statistical measurements, since healthcare quality also involves communication effectiveness, empathy, professional attitudes, organizational culture, ethical practice, patient trust, and contextual healthcare realities. Therefore, a qualitative method provided deeper analytical insights into the multidimensional relationship between nursing care quality, patient safety, and patient satisfaction.

The research design applied in this study was a qualitative case study design (Chen et al., 2024). The case study approach was chosen because it enables an in-depth exploration of specific healthcare phenomena occurring within real-life institutional contexts. This design is highly relevant for investigating nursing care quality practices in primary healthcare services because it facilitates comprehensive analysis of organizational processes, professional interactions, institutional culture, patient experiences, and healthcare delivery systems. The case study design also allows researchers to integrate multiple sources of evidence, including interviews, observations, institutional documentation, and field notes, thereby strengthening the credibility and richness of the research findings. Furthermore, the case study approach supports contextual interpretation regarding how nursing care quality contributes to patient safety improvement and patient satisfaction enhancement in primary healthcare institutions. The use of qualitative case study methodology is consistent with international healthcare research standards emphasizing contextual understanding, interpretive analysis, and evidence-based healthcare quality evaluation.

The research was conducted in several primary healthcare centers located in West Java Province, Indonesia. Specifically, the study focused on community health centers providing outpatient nursing services, preventive healthcare programs, maternal and child healthcare services, chronic disease management, and health promotion activities. The selection of West Java as the research location was based on several important considerations. First, West Java represents one of the most

populous provinces in Indonesia, characterized by diverse demographic, socioeconomic, and healthcare service conditions. Such diversity provides valuable contextual variation for analyzing nursing care quality practices and healthcare delivery challenges. Second, primary healthcare centers in West Java encounter increasing patient demands, limited healthcare resources, staffing constraints, and organizational pressures that directly influence nursing service quality, patient safety management, and patient satisfaction outcomes. Third, the selected healthcare centers have implemented patient safety and healthcare quality improvement programs, thereby providing a relevant setting for examining nursing care practices and institutional quality management processes. The selection of these research locations was therefore considered appropriate for generating comprehensive and contextually meaningful findings concerning nursing care quality in primary healthcare environments.

The participants involved in this study consisted of nurses, healthcare managers, patients, and healthcare quality officers working within or receiving services from the selected primary healthcare centers. Since this study employed a qualitative methodology, the selection of participants was conducted using purposive sampling techniques (Ishak et al., 2025). Purposive sampling was chosen because it allows researchers to intentionally select participants possessing relevant knowledge, professional experience, and direct involvement in nursing care quality implementation, patient safety practices, and healthcare service delivery. The purposive approach also ensures that the collected data reflect rich, meaningful, and information-intensive perspectives relevant to the research objectives.

The study involved approximately twenty participants categorized into several groups. The first participant category consisted of registered nurses directly responsible for patient care services in primary healthcare centers. These participants included Nurse “Alya,” serving as a senior outpatient nurse; Nurse “Rendra,” functioning as a maternal and child healthcare nurse; Nurse “Sinta,” working in chronic disease management services; Nurse “Bima,” assigned to emergency response services; and Nurse “Nadia,” responsible for preventive healthcare and health education programs. These nursing participants were selected because they possessed extensive practical experience in delivering direct patient care, implementing patient safety protocols, managing healthcare communication, and interacting continuously with patients and families. Their professional experiences provided valuable insights into the operational realities of nursing care quality within primary healthcare settings.

The second participant category consisted of healthcare managers and institutional administrators responsible for healthcare quality management and organizational supervision. These participants included “Dr. Arif,” serving as the head of the community health center; “Ms. Laras,” functioning as healthcare quality coordinator; and “Mr. Dito,” acting as patient safety committee supervisor. These managerial participants were selected because they possessed institutional authority and strategic understanding regarding healthcare quality policies, nursing performance evaluation, patient safety implementation, staffing management, and organizational healthcare improvement initiatives. Their perspectives contributed significantly to understanding institutional factors influencing nursing care quality and patient safety culture.

The third participant category consisted of patients receiving healthcare services from the selected primary healthcare centers. These participants included Patient “Mira,” a chronic disease patient regularly attending outpatient services; Patient “Rafi,” receiving maternal healthcare services; Patient “Tina,” participating in preventive healthcare programs; and Patient “Hendra,” utilizing general outpatient nursing services. Patients were selected based on their direct experiences interacting with nursing professionals and healthcare systems within the selected healthcare facilities. Their perspectives were considered essential for evaluating patient satisfaction, communication quality, healthcare responsiveness, and perceptions regarding patient safety practices. The inclusion of patients as participants strengthened the credibility of the study by incorporating service-user experiences into the analysis of nursing care quality.

The study also involved several key informants selected based on their specialized expertise and strategic institutional roles. The informants included “Dr. Maya,” a regional healthcare policy consultant; “Prof. Rahmat,” a nursing education specialist affiliated with a public university; and “Mrs. Vina,” a healthcare accreditation and patient safety evaluator. These informants were selected because they possessed broader professional knowledge regarding healthcare quality management, nursing

standards, patient safety systems, and healthcare policy implementation. Their insights contributed to the interpretation of organizational healthcare challenges, healthcare quality standards, and policy-related implications relevant to nursing care quality improvement.

Data collection in this study was conducted through several qualitative techniques, including in-depth interviews, participant observation, and document analysis (Giffels & McCaulley, 2024). In-depth interviews constituted the primary data collection method because they enabled researchers to explore participants' experiences, perceptions, attitudes, and interpretations comprehensively. Semi-structured interview guides were employed to maintain consistency while allowing flexibility for participants to elaborate on relevant issues. Interview questions focused on nursing care quality practices, patient safety implementation, communication experiences, institutional challenges, healthcare responsiveness, and patient satisfaction perceptions.

Participant observation was conducted within primary healthcare facilities to examine nursing interactions, healthcare service delivery processes, communication practices, patient handling procedures, and patient safety implementation directly. Observational data provided contextual understanding regarding actual nursing practices and organizational healthcare environments. Document analysis was also utilized to review institutional patient safety guidelines, healthcare quality reports, nursing service protocols, accreditation documents, and healthcare performance evaluations. The integration of these multiple data collection techniques strengthened methodological triangulation and enhanced research credibility (Agrawal & Dutta, 2025).

The data analysis process employed thematic analysis techniques. Thematic analysis was selected because it enables systematic identification, interpretation, and categorization of recurring themes emerging from qualitative data. The analysis process began with data transcription, repeated reading of interview materials, coding procedures, category development, theme identification, and interpretive analysis. The researchers carefully examined relationships between nursing care quality, patient safety practices, communication patterns, institutional management, and patient satisfaction experiences. Themes were continuously refined through analytical comparison and contextual interpretation to ensure conceptual consistency and analytical depth.

To ensure research trustworthiness, the study applied several qualitative validation strategies, including credibility, transferability, dependability, and confirmability procedures (Tul-Noor et al., 2025). Credibility was strengthened through prolonged engagement, data triangulation, member checking, and participant validation. Transferability was enhanced by providing detailed contextual descriptions regarding research settings, participants, and healthcare environments. Dependability was ensured through systematic documentation of research procedures, interview processes, coding systems, and analytical decisions. Confirmability was maintained by minimizing researcher bias through reflective analysis and transparent methodological reporting.

Ethical considerations were carefully addressed throughout the research process (Gunawan, 2023). Ethical approval was obtained from the relevant institutional ethics committee before data collection commenced. All participants received detailed explanations regarding research objectives, participation procedures, confidentiality protections, and voluntary participation rights. Written informed consent was obtained from all participants prior to interviews and observations. Participants' identities were protected through the use of pseudonyms to ensure confidentiality and privacy. The researchers also ensured that data collection procedures did not interfere with healthcare service delivery or compromise patient safety.

The technique for drawing research conclusions in this study involved interpretive synthesis and inductive reasoning (Christi et al., 2024). Conclusions were formulated through systematic interpretation of recurring themes, participant experiences, observational findings, and institutional documentation. The researchers analyzed patterns, relationships, and contextual meanings emerging from the qualitative data to construct comprehensive explanations regarding the role of nursing care quality in improving patient safety and patient satisfaction. Inductive reasoning allowed conclusions to emerge directly from empirical findings rather than being predetermined by rigid theoretical

assumptions. This analytical approach ensured that the study findings reflected authentic healthcare realities and participant experiences within primary healthcare environments.

Overall, the qualitative case study methodology employed in this research provided a comprehensive and contextually rich framework for analyzing nursing care quality in primary healthcare services. Through in-depth exploration of participant experiences, organizational healthcare processes, patient safety practices, and patient satisfaction perceptions, the study generated meaningful insights relevant to nursing science, healthcare quality management, patient-centered care development, and healthcare policy improvement. The methodological approach also aligned with international scholarly standards emphasizing rigor, contextual interpretation, ethical integrity, and evidence-based healthcare research.

RESULTS AND DISCUSSION

The findings of this study demonstrate that nursing care quality plays a central role in improving patient safety and patient satisfaction within primary health services (Samost-Williams et al., 2023). The research identified that the quality of nursing services is influenced by several interconnected dimensions, including professional competence, communication effectiveness, responsiveness, empathy, adherence to patient safety standards, continuity of care, and organizational support systems. These dimensions significantly affect patients' perceptions regarding healthcare reliability, safety, trustworthiness, and overall healthcare experiences (Bennasar-Veny & Castro-Sánchez, 2025). The study further revealed that healthcare institutions with stronger nursing quality management systems tend to demonstrate more effective patient safety practices and higher levels of patient satisfaction. The findings also confirm that nursing professionals occupy a strategic position in ensuring healthcare effectiveness because they serve as the primary interface between healthcare institutions and patients.

The results indicate that one of the primary problems affecting healthcare quality in primary health services concerns inconsistency in nursing care practices across healthcare units. Several participants reported variations in communication quality, responsiveness, documentation procedures, and implementation of patient safety protocols. These inconsistencies were frequently associated with workload pressures, staffing limitations, administrative burdens, and insufficient institutional supervision (Fiałkowska-Filipek et al., 2025). Nurses working within high patient-volume environments experienced challenges in maintaining comprehensive communication and patient monitoring procedures. Patients similarly reported that service quality often depended on the availability and attentiveness of nursing personnel rather than standardized institutional procedures. Such findings demonstrate that nursing care quality remains highly dependent on organizational structures and healthcare process management.

These findings strongly align with Avedis Donabedian's Quality of Care Theory, which explains that healthcare outcomes are determined by the interaction between healthcare structures, healthcare processes, and healthcare outcomes (Marsall et al., 2024). The findings reveal that inadequate staffing systems, limited institutional resources, and inconsistent procedural supervision negatively influence nursing care processes and eventually affect patient safety and satisfaction outcomes. The study confirms Donabedian's argument that healthcare quality improvement requires organizational support systems capable of strengthening healthcare delivery processes. Within the context of primary healthcare services, institutional structure was found to significantly influence nursing responsiveness, communication quality, and patient-centered service delivery.

The study also revealed that patient satisfaction was strongly associated with interpersonal nursing behaviors rather than merely technical healthcare procedures. Patients consistently emphasized the importance of empathy, respectful communication, emotional reassurance, responsiveness, and caring attitudes demonstrated by nurses (Childs et al., 2023). Participants explained that patients often evaluated healthcare quality based on how they were treated emotionally and socially during healthcare interactions. Patients expressed higher satisfaction levels when nurses provided clear explanations, listened attentively, demonstrated patience, and maintained respectful communication practices. Conversely, poor communication, rushed consultations, and limited emotional engagement contributed to dissatisfaction even when technical treatment procedures were completed appropriately.

These findings support Jean Watson's Theory of Human Caring, which emphasizes that nursing care involves holistic interpersonal relationships integrating emotional, psychological, and humanistic dimensions (Zehra et al., 2025). Watson argued that caring interactions establish therapeutic environments capable of enhancing patient trust, emotional comfort, and healthcare satisfaction. The results of this study confirm that caring-oriented nursing practices contribute positively to patient perceptions regarding healthcare quality and institutional trustworthiness. In primary healthcare settings, where long-term patient relationships frequently occur, caring interactions become especially important for strengthening patient engagement and healthcare continuity.

The research further identified that patient safety implementation remains uneven across several healthcare units. Although institutional patient safety guidelines existed within all research locations, practical implementation frequently depended on nursing awareness, institutional leadership, and communication coordination among healthcare staff. Some nurses reported difficulties maintaining complete patient documentation due to time limitations and administrative pressures. Others indicated that patient safety monitoring systems were not always consistently evaluated by institutional management. Several participants also highlighted communication gaps between healthcare units, which occasionally created risks related to medication administration, referral coordination, and follow-up treatment continuity (Rathnayake et al., 2025).

These findings are closely connected with James Reason's Swiss Cheese Model of Patient Safety, which explains that patient safety incidents commonly emerge from systemic organizational weaknesses rather than isolated individual negligence (Ross et al., 2023). The results demonstrate that staffing shortages, communication failures, procedural inconsistencies, and organizational workload pressures collectively contribute to patient safety vulnerabilities within primary healthcare services. Reason emphasized that healthcare institutions should strengthen safety culture, institutional supervision, and organizational communication systems to reduce healthcare risks. The findings therefore confirm that patient safety improvement requires systemic institutional intervention rather than solely focusing on individual healthcare performance.

Table

Table 1 Main Findings on Nursing Care Quality, Patient Safety, and Patient Satisfaction

Research Dimension	Main Findings	Theoretical Relationship	Practical Implication
Nursing Communication Quality	Effective communication increased patient trust and healthcare understanding	Watson's Human Caring Theory	Strengthening therapeutic communication training
Patient Safety Implementation	Safety procedures varied across healthcare units	Reason's Swiss Cheese Model	Improving institutional safety monitoring systems
Nursing Responsiveness	Responsive care improved patient satisfaction levels	Donabedian's Process Dimension	Enhancing staffing adequacy and workflow management
Emotional Support and Empathy	Patients valued caring and respectful interactions	Watson's Caring Framework	Developing patient-centered nursing practices
Organizational Support	Institutional structure influenced healthcare consistency	Donabedian's Structure Dimension	Strengthening healthcare management systems

Research Dimension	Main Findings	Theoretical Relationship	Practical Implication
Documentation and Monitoring	Inconsistent documentation affected patient safety practices	Reason's Systemic Risk Perspective	Standardizing patient safety documentation procedures

The findings presented in Table 1 indicate that nursing care quality operates as a multidimensional factor affecting both patient safety and patient satisfaction simultaneously. The results demonstrate that communication quality, organizational support, safety implementation, and emotional care collectively contribute to healthcare effectiveness within primary healthcare institutions. These findings further confirm the interconnected relationship between structural healthcare systems, interpersonal nursing behaviors, and institutional patient safety management.

The implementation of nursing care quality improvement programs within the observed healthcare institutions demonstrated varying levels of effectiveness. Several healthcare centers implemented regular nursing evaluations, patient safety training sessions, communication workshops, and healthcare quality monitoring systems. Institutions with stronger managerial commitment generally exhibited more consistent nursing performance and more effective patient safety implementation (Al-Balas et al., 2024). Conversely, healthcare facilities with limited managerial supervision experienced greater inconsistency in healthcare delivery and patient satisfaction outcomes. This finding highlights the importance of leadership support and organizational culture in strengthening nursing care quality.

The study also identified an important research gap concerning the limited integration between patient safety initiatives and patient-centered nursing practices within primary healthcare institutions. Previous healthcare quality programs frequently focused on technical procedural compliance without adequately emphasizing emotional communication and patient engagement dimensions. Consequently, several healthcare institutions succeeded in implementing procedural safety standards but still encountered patient dissatisfaction related to communication quality and interpersonal healthcare experiences. This finding demonstrates that patient safety and patient satisfaction should not be treated as separate healthcare objectives but rather as interconnected dimensions of healthcare quality.

This research therefore contributes novelty by integrating Donabedian's healthcare quality framework, Watson's caring perspective, and Reason's patient safety model into a unified conceptual understanding regarding nursing care quality in primary healthcare settings. Previous studies predominantly examined these variables independently or focused mainly on hospital-based healthcare environments. The present study expands existing healthcare literature by demonstrating that nursing care quality simultaneously influences healthcare safety and patient satisfaction through organizational, interpersonal, and systemic mechanisms.

The findings also directly address the research questions formulated in this study. The first research question examined how nursing care quality influences patient safety within primary healthcare services. The results indicate that nursing care quality contributes to patient safety through effective communication, accurate documentation, adherence to safety protocols, timely patient monitoring, and interprofessional coordination. Healthcare institutions demonstrating stronger nursing quality management systems generally experienced more effective patient safety implementation and reduced procedural inconsistencies.

The second research question explored how nursing care quality affects patient satisfaction. The findings reveal that patient satisfaction is significantly influenced by nursing empathy, communication clarity, responsiveness, emotional support, and respectful interpersonal interactions (Bijl et al., 2025). Patients consistently associated healthcare quality with caring-oriented nursing behaviors rather than solely technical healthcare outcomes. These findings confirm the importance of integrating humanistic nursing approaches into primary healthcare quality management systems.

The third research question investigated how healthcare institutions may strengthen nursing care quality to improve both patient safety and patient satisfaction simultaneously. The findings demonstrate that institutional leadership, continuous professional development, communication training, patient-centered care implementation, staffing adequacy, and safety monitoring systems constitute essential strategies for strengthening nursing care quality. Institutions implementing integrated healthcare quality management programs exhibited more positive healthcare outcomes across patient safety and patient satisfaction dimensions.

Table

Table 2 Integration of Research Findings with Theoretical Frameworks and Previous Studies

Research Aspect	Current Findings	Supporting Theory	Relationship with Previous Studies
Nursing Quality and Patient Safety	Strong nursing supervision reduced safety risks	Reason's Swiss Cheese Model	Consistent with studies emphasizing systemic patient safety management
Communication and Satisfaction	Therapeutic communication improved patient trust	Watson's Human Caring Theory	Supports previous findings regarding patient-centered nursing care
Organizational Structure and Service Quality	Adequate staffing improved healthcare consistency	Donabedian's Structure-Process-Outcome Model	Aligns with healthcare quality management research
Emotional Care and Patient Trust	Empathy strengthened healthcare engagement	Watson's Caring Theory	Similar to prior studies on holistic nursing practice
Institutional Safety Culture	Weak coordination increased procedural risk	Reason's Safety Framework	Confirms previous research on organizational safety culture
Healthcare Quality Integration	Patient safety and satisfaction are interconnected	Integrated Three-Theory Framework	Expands previous fragmented healthcare quality studies

Table 2 demonstrates that the findings of this study are strongly supported by existing healthcare theories and previous empirical investigations. However, the present research extends previous literature by integrating patient safety and patient satisfaction into a comprehensive nursing care quality framework specifically applicable to primary healthcare environments.

The discussion of these findings further demonstrates that the primary research problem concerning inconsistent nursing care quality remains closely associated with organizational healthcare limitations, communication challenges, staffing pressures, and uneven patient safety implementation (Obayashi et al., 2024). Previous studies similarly identified that healthcare quality inconsistency frequently emerges from inadequate organizational support, insufficient professional development opportunities, and limited institutional monitoring systems. The present study confirms these findings while additionally emphasizing the importance of caring-oriented communication and patient engagement within primary healthcare contexts.

The identified research gap concerning limited integration between patient safety and patient satisfaction is also supported by previous healthcare literature. Earlier investigations frequently examined healthcare quality dimensions separately, thereby limiting comprehensive understanding

regarding how nursing care quality simultaneously influences multiple healthcare outcomes. This study addresses that limitation by demonstrating that patient safety and patient satisfaction are interconnected dimensions shaped by nursing professionalism, organizational support, and healthcare communication systems.

The study objectives were successfully achieved through comprehensive exploration of nursing care quality dimensions affecting patient safety and patient satisfaction. The research identified critical organizational, interpersonal, and systemic factors influencing healthcare outcomes within primary healthcare services. The findings therefore contribute important theoretical, academic, and practical implications for healthcare quality improvement.

Theoretically, this study enriches nursing science and healthcare quality literature by integrating Donabedian's Quality of Care Theory, Watson's Theory of Human Caring, and Reason's Swiss Cheese Model into a unified analytical framework (Rosengren & Szemberg, 2024). The integration of these theories demonstrates that healthcare quality should be understood through structural, interpersonal, and systemic perspectives simultaneously. Previous studies often applied these theories independently, whereas the present study illustrates their complementary relationship in explaining nursing care quality within primary healthcare environments.

Academically, the findings provide valuable scholarly contributions for researchers, healthcare educators, nursing students, and healthcare policy analysts interested in patient-centered care, healthcare quality management, and patient safety systems. The study also offers a conceptual foundation for future interdisciplinary research examining healthcare quality dimensions within community-based healthcare settings.

Practically, the research findings provide actionable recommendations for healthcare institutions and policymakers. Healthcare organizations should strengthen nursing communication training, patient-centered care implementation, staffing adequacy, patient safety supervision systems, and organizational healthcare quality management strategies. Institutional leadership should also foster healthcare cultures emphasizing empathy, patient engagement, continuous professional development, and collaborative healthcare communication practices.

The implementation implications derived from this research emphasize that healthcare quality improvement should not focus exclusively on technical procedural compliance. Instead, healthcare institutions should adopt integrated approaches combining organizational support, caring-oriented nursing practice, patient safety management, and patient-centered communication systems. Such integrated healthcare quality frameworks are essential for strengthening patient trust, improving healthcare experiences, and reducing patient safety risks within primary healthcare services.

Overall, the findings and discussion demonstrate that nursing care quality represents a fundamental determinant influencing both patient safety and patient satisfaction within primary healthcare institutions (Parr, 2023). The integration of organizational healthcare quality systems, caring-oriented nursing interactions, and patient safety management strategies contributes significantly to healthcare effectiveness and patient-centered healthcare delivery. Consequently, strengthening nursing care quality should become a strategic priority for healthcare institutions seeking to improve healthcare outcomes, institutional credibility, and public trust in primary healthcare systems.

CONCLUSION

This study concludes that nursing care quality plays a fundamental and multidimensional role in improving patient safety and patient satisfaction within primary health services. The findings demonstrate that the effectiveness of nursing care is not solely determined by technical competence and clinical procedures, but also by interpersonal communication, emotional support, responsiveness, professional ethics, organizational coordination, and institutional commitment toward patient-centered healthcare delivery. Nursing professionals function as the primary healthcare providers who continuously interact with patients, thereby positioning nursing care quality as one of the most

influential determinants of healthcare outcomes in primary healthcare institutions. The results of this research confirm that healthcare facilities demonstrating stronger nursing quality management systems tend to achieve better patient safety implementation and higher patient satisfaction levels.

The study further concludes that patient safety in primary healthcare services is closely associated with the consistency of nursing practices, communication effectiveness, documentation accuracy, and institutional healthcare management systems. Although patient safety guidelines and healthcare quality standards were formally available within the observed healthcare institutions, the implementation process varied depending on staffing conditions, workload pressures, organizational supervision, and institutional support mechanisms. Several patient safety challenges identified during the study included inconsistent communication procedures, incomplete documentation practices, time constraints, and coordination difficulties among healthcare personnel. These findings indicate that patient safety cannot be maintained effectively through procedural regulations alone, but requires integrated organizational systems capable of supporting nurses in delivering safe, responsive, and high-quality healthcare services.

The findings additionally reveal that patient satisfaction is strongly influenced by caring-oriented nursing behaviors and therapeutic interpersonal interactions. Patients consistently emphasized that empathy, respectful communication, attentiveness, emotional reassurance, and responsiveness significantly shaped their perceptions regarding healthcare quality. The research demonstrates that patients evaluate healthcare experiences not only based on treatment outcomes but also according to how healthcare professionals communicate, provide emotional support, and establish trust during healthcare interactions. Consequently, caring-based nursing practices contribute substantially to strengthening patient confidence, treatment adherence, institutional trust, and overall healthcare satisfaction within primary healthcare settings.

The integration of Donabedian's Quality of Care Theory, Watson's Theory of Human Caring, and Reason's Swiss Cheese Model successfully provided a comprehensive conceptual framework for explaining the interconnected relationship between nursing care quality, patient safety, and patient satisfaction. Donabedian's framework clarified that healthcare quality outcomes are significantly affected by organizational structures and healthcare delivery processes. Watson's caring theory explained the importance of humanistic nursing interactions in strengthening patient satisfaction and emotional well-being. Meanwhile, Reason's patient safety model demonstrated that healthcare risks frequently emerge from systemic organizational weaknesses rather than isolated professional errors. The integration of these three theoretical perspectives enabled this study to analyze nursing care quality from structural, interpersonal, and systemic dimensions simultaneously.

This research also concludes that organizational support constitutes a crucial factor influencing the effectiveness of nursing care quality implementation. Healthcare institutions with stronger leadership commitment, continuous professional development programs, communication training systems, patient safety supervision mechanisms, and collaborative organizational cultures demonstrated more consistent healthcare quality performance. Conversely, healthcare facilities experiencing staffing shortages, limited managerial oversight, and inadequate professional support systems encountered greater difficulties in maintaining patient safety standards and patient satisfaction outcomes. Therefore, institutional healthcare quality improvement requires not only individual nursing competence enhancement but also organizational healthcare system strengthening.

The study successfully addressed the primary research problem concerning inconsistency in nursing care quality within primary healthcare services. The findings confirm that variations in healthcare communication, responsiveness, patient safety implementation, and organizational coordination significantly influence healthcare effectiveness and patient experiences. The research also addressed the identified research gap by demonstrating that patient safety and patient satisfaction should not be analyzed as isolated healthcare dimensions, but rather as interconnected outcomes influenced simultaneously by nursing care quality. This integrative perspective represents an important contribution to healthcare quality literature, particularly within primary healthcare contexts where limited previous studies have examined these relationships comprehensively.

From a theoretical perspective, this study contributes to the development of nursing science, healthcare quality management, and patient safety literature by integrating multiple theoretical frameworks into a unified analytical model. Academically, the findings provide valuable scholarly references for researchers, nursing educators, healthcare administrators, and policymakers interested in healthcare quality improvement and patient-centered care development. Practically, the research offers evidence-based recommendations for strengthening nursing communication systems, patient safety monitoring, staffing management, organizational healthcare quality programs, and patient-centered nursing practices within primary healthcare institutions.

In conclusion, the study demonstrates that nursing care quality represents a strategic and indispensable component of effective healthcare delivery within primary healthcare services. The integration of professional nursing competence, caring-oriented communication, organizational healthcare support, and patient safety management significantly contributes to improving healthcare quality, reducing patient safety risks, and strengthening patient satisfaction outcomes. Therefore, healthcare institutions should prioritize the development of integrated nursing quality improvement strategies capable of supporting safe, effective, compassionate, and patient-centered healthcare services. Through sustainable nursing quality enhancement, primary healthcare institutions may strengthen public trust, healthcare effectiveness, and overall community health outcomes in increasingly complex healthcare environments.

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