

NURSING AND PATIENT SATISFACTION: FIVE YEARS OF EXPERIENCE IN A PRIVATE HEALTHCARE GROUP (2018–2023)

*HEMŞİRELİK VE HASTA MEMNUNİYETİ: ÖZEL BİR SAĞLIK GRUBUNDA BEŞ YILLIK
DENEYİM (2018–2023)*

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ABSTRACT

Objective: This study evaluated the impact of nursing care on patient satisfaction in inpatient, outpatient, and emergency departments of a private healthcare institution between 2018 and 2023.

Materials and Methods: A retrospective, descriptive design was employed using satisfaction data from 23 hospitals. Standardised surveys were distributed via secure online links sent by telephone message following care episodes. Questionnaires assessed domains including nurse–patient interaction, clinical competence, privacy protection, discharge communication, and overall satisfaction. Positive response percentages and Net Promoter Scores (NPS) were calculated. Descriptive statistics were used to analyse six-year trends.

Results: Inpatient satisfaction remained consistently high (>94%), with attentiveness, privacy, and discharge communication scoring highest. NPS temporarily declined during the pandemic (75.3 in 2020–2021) but recovered to 87.9 in 2023. Outpatient satisfaction rose from 87.5% in 2018 to 92.2% in 2023, with NPS increasing from 48.4 to 67.2. Emergency department satisfaction showed the largest gains, improving from 88.1% to 95.1%, with marked progress in waiting time communication, discharge clarity, and perceived nursing competence.

Conclusion: This study showed consistently high patient satisfaction with nursing care from 2018 to 2023, with notable improvements.

Key Words: Patient satisfaction, Nursing care, Net promoter score, Inpatient, Outpatient

ÖZET

Amaç: Bu çalışmada, 2018-2023 yılları arasında özel bir sağlık kuruluşunun yatan hasta, ayaktan hasta ve acil servislerinde hemşirelik bakımının hasta memnuniyetine etkisi değerlendirilmiştir.

Materyal ve Metot: 23 hastaneden alınan memnuniyet verileri kullanılarak retrospektif, tanımlayıcı bir tasarım kullanıldı. Standart anketler, bakım süreçlerinin ardından telefon mesajıyla gönderilen güvenli çevrimiçi bağlantılar aracılığıyla dağıtıldı. Anketler, hemşire-hasta etkileşimi, klinik yeterlilik, mahremiyetin korunması, taburcu iletişimi ve genel memnuniyet gibi alanları değerlendirdi. Olumlu yanıt yüzdeleri ve Net Tavsiye Puanları (NPS) hesaplandı. Altı yıllık eğilimleri analiz etmek için tanımlayıcı istatistikler kullanıldı.

Bulgular: Yatan hasta memnuniyeti sürekli olarak yüksek kaldı (%94'ten fazla), dikkat, gizlilik ve taburcu iletişimi en yüksek puanları aldı. NPS pandemi sırasında geçici olarak düştü (2020-2021'de 75,3) ancak 2023'te 87,9'a yükseldi. Ayakta tedavi memnuniyeti 2018'deki %87,5'ten 2023'te %92,2'ye yükselirken, NPS 48,4'ten 67,2'ye çıktı. Acil servis memnuniyeti en büyük kazanımı gösterdi ve %88,1'den %95,1'e yükseldi; bekleme süresi iletişiminde, taburcu netliğinde ve algılanan hemşirelik yeterliliğinde belirgin ilerleme kaydedildi.

Sonuç: Bu çalışma, 2018'den 2023'e kadar hemşirelik bakımıyla ilgili hastaların memnuniyetinin sürekli olarak yüksek olduğunu ve kayda değer gelişmeler olduğunu göstermiştir.

Anahtar Kelimeler: Hasta memnuniyeti, Hemşirelik bakımı, Net tavsiye puanı, Yatan hasta, Ayaktan hasta

INTRODUCTION

Patient satisfaction has emerged as a central indicator of healthcare quality, reflecting not only clinical effectiveness but also patient-centeredness, efficiency, and responsiveness. As healthcare systems worldwide adopt more patient-focused approaches, measuring and understanding patient satisfaction has become essential for guiding service improvement and ensuring high-quality care^{1,2,3}. Patient feedback serves as a catalyst for quality improvement by highlighting areas of strength and identifying opportunities for targeted interventions^{4,5}.

Patient satisfaction represents the subjective assessment of care based on individual perceptions, expectations, and preferences. It extends beyond technical outcomes to encompass dimensions such as empathy, accessibility, communication, and the hospital environment⁶. Structured satisfaction surveys capture these perspectives, offering valuable insights into service quality and supporting evidence-based improvement strategies⁷. When prioritised, patient satisfaction not only enhances care delivery but also fosters trust, strengthens patient loyalty and contributes to improved health outcomes at both individual and community levels³.

The emergency department (ED) presents a unique context for examining patient satisfaction, as it is characterised by high acuity, time pressure, and emotional intensity. In such environments, the quality of nursing care -including compassion, expertise, and communication- plays a decisive role in shaping patient experiences^{8,9}. Consistent research findings indicate that patient satisfaction in emergency department care is impacted by various factors, which include communication quality, responsiveness, pain management, waiting times, and the sense of being treated with respect and dignity^{10,11}. Interactions between patients and nurses also significantly influence patients' overall views of the care they receive and whether they would recommend the services to others, highlighting the significance of patient-focused communication and compassionate nursing approaches^{12,13}.

In our institution, patient satisfaction has been systematically monitored as part of the nursing coordinatorship's quality improvement initiatives. Analysis of return surveys between 2019 and 2020 revealed several priority areas for improvement, with patient satisfaction identified as a critical focus. In response, the hospital organised workshops to engage the frontline staff, incorporating feedback from patient testimonials, survey results and manager perspectives. This process culminated in the development of the "8 Steps to Patient Satisfaction" framework in 2020, which was subsequently implemented through structured training programmes for emergency department nurses. Between October and December 2021, 300 nurses participated in training sessions, and by the end of 2023, 60 training programmes had been delivered to 4,185 participants. Continuous monitoring of satisfaction data during 2023, reported quarterly to the Directorate of Nursing Services, demonstrated the integration of patient feedback into organisational learning and improvement.

This article reports on patient satisfaction trends from 2018 to 2023 in inpatient, outpatient, and emergency department settings within a large private healthcare group in Turkey. This study provides insights into the evolving role of nursing in shaping patient satisfaction by combining longitudinal survey data with institutional quality improvement efforts, and it highlights strategies for sustaining patient-centred care of high quality.

This study assessed the influence of nursing care on patient satisfaction across inpatient, outpatient, and emergency departments in a private healthcare institution from 2018 to 2023.

Study Questions

1. What are the overall satisfaction levels with nursing care in inpatient, outpatient, and emergency department settings between 2018 and 2023?
2. How did nursing care influence patient satisfaction in different care settings (inpatient, outpatient, and emergency)?
3. Which specific aspects of nursing care (e.g., communication, competence, pain management, discharge education, and privacy) were most strongly associated with patient satisfaction?
4. Were there differences in satisfaction and the Net Promoter Score (NPS) between inpatient, outpatient, and emergency department patients during the study period?

MATERIAL-METHOD

Study Design

This study employed a retrospective, descriptive design and was conducted across a private healthcare group in Turkey. The study analysed patient satisfaction data collected between 2018 and 2023. This study employed a retrospective and descriptive design aimed at identifying trends in patient satisfaction over time. Because this design is observational, causal relationships between nursing care variables and satisfaction outcomes cannot be established. The findings should therefore be interpreted as correlational rather than causal.

Setting

The research was carried out in a private healthcare group that operates 23 healthcare organisations, including tertiary and secondary care hospitals as well as outpatient clinics. All hospitals employed the same standardized patient satisfaction system, thereby achieving uniformity in measurement and reporting across different settings.

Sample

All available surveys from patients who voluntarily returned to the hospital were included in the analysis; no sample selection method was applied.

Table 1. Patient Volumes by Care Setting (2018–2023)

Year	Emergency	Inpatient	Outpatient	Sum
2018	8721	28914	55666	93301
2019	9152	37325	58543	10502
2020	6737	13546	4911	69393
2021	8357	9436	67665	85458
2022	10658	22119	60156	92933
2023	11704	31868	49564	93136
Total	55329	143208	340704	539241

Between 2018 and 2023, a total of 539,241 patient were returned survey across emergency, inpatient, and outpatient settings. Outpatient services represented the largest share, with 340,704 visits (63.2% of the total), followed by inpatient admissions (26.6%) and emergency department care visits (10.2%).

Data Sources and Measurements

Data Collection Tools: Patient satisfaction was measured using structured questionnaires tailored for inpatient units, outpatient clinics, and emergency departments. Following the completion of care, the patients received a phone message containing a secure link to the survey. Participation was voluntary, and responses were submitted online. All results were reported as percentages of positive responses. In addition, the Net Promoter Score (NPS) values were calculated using the standard method: percentage of promoters (scores of 9–10) minus percentage of detractors (scores of 0–6).

Inpatient Satisfaction Survey: The inpatient questionnaire provided a comprehensive assessment of nursing care and the hospital environment. Domains included:

- Nurse–Patient Interaction: Courtesy and attentiveness, professional knowledge and skills, clarity in explaining care.
- Clinical Support: Adequacy of pain relief and information about medications.
- Patient Rights and Environment: Protection of privacy and maintenance of a quiet environment.
- Discharge and Transition: Clarity of discharge instructions.
- Overall Evaluation: Satisfaction rate, NPS, and global rating of nursing services.

Outpatient Satisfaction Survey: The outpatient questionnaire was designed as a concise tool focused on the following key quality indicators:

- Patient Rights: Privacy protection.
- Overall Evaluation: satisfaction rate.
- Patient Loyalty: NPS.
- Nursing Services: Overall assessment of nursing services.

Emergency Department Satisfaction Survey: The emergency department questionnaire emphasised the following emergency department-care-specific dimensions:

- Access and Communication: Information provided about possible waiting times.
- Nurse–Patient Interaction: Courtesy, attentiveness, and professional knowledge and skills.
- Discharge and Transition: Clarity of the discharge instructions.
- Patient Rights: Privacy protection.
- Overall Evaluation: Satisfaction rate and overall nursing services.

By tailoring the questionnaires to the unique characteristics of each setting, the hospital obtained a comprehensive and context-specific assessment of patient satisfaction. Common indicators (satisfaction rate, NPS, and nursing services) allowed for comparability across settings, while setting-specific domains (e.g., waiting time communication in the ED, medication information for inpatients) enabled targeted quality improvement. All outcome variables were extracted directly from the hospital administrative records. The patient satisfaction surveys were institutionally standardized tools developed by the Quality Department and routinely implemented across all hospitals in the healthcare group. These surveys were designed for ongoing quality monitoring rather than psychometric research purposes; therefore, internal consistency coefficients such as Cronbach’s Alpha were not calculated. Prior to implementation, the questionnaires underwent institutional validation for content clarity, relevance, and usability to ensure consistent measurement and comparability across years and care settings.

Data Collection

Patient experience data were collected using multiple standardized approaches to ensure comprehensive coverage across inpatient, outpatient, and emergency department services.

Survey

- Outpatient Satisfaction Survey: Distributed via email on the second day following the patient’s visit.
- Emergency Department Satisfaction Survey: Distributed via email on the second day after discharge from the emergency department.
- Inpatient Satisfaction Survey: Sent via email on the second day following discharge. Patients who preferred to complete the survey during hospitalization were provided with a tablet by the Patient Communication Manager/Officer/Specialist.
- E-surveys: Sent to patients directly via secure email links.
- Tablet surveys: Conducted in-person after discharge, with the Patient Communication Manager/Officer/Specialist assisting patients or family members in completing and saving the survey on a tablet device.

Net Promoter Score (NPS) Calls: Patients who rated the likelihood of recommending the hospital between 0 and 6 on the inpatient or outpatient surveys were contacted by telephone for follow-up. Any complaints reported during these calls were entered into the hospital’s quality monitoring system. Scores of 9–10 were classified as “recommenders.”

Social Media Feedback: Additional feedback was collected from external digital platforms, including Twitter, Facebook, Instagram, Google My Business, and sikayetvar.com. These data were systematically reviewed and integrated into the overall patient satisfaction monitoring process.

Statistical Methods

Data analysis was performed using SPSS version 25 (IBM Corp., Armonk, NY). Descriptive statistics, including means, standard deviations, and percentages, were used to summarise patient satisfaction across years and care settings.

Ethical Considerations

The study was approved by the hospital administration as part of an institutional quality improvement initiative. In accordance with local regulations, no formal ethics committee review was required. Written permission was obtained from the hospital management before data collection. No identifiable personal data were used, and participant anonymity was preserved throughout the study. All data were stored securely and analysed exclusively for research. The study was conducted in accordance with the principles of the Declaration of Helsinki.

RESULTS

Between 2018 and 2023, a total of 539,241 patient were returned survey across emergency, inpatient, and outpatient settings. Patient volumes demonstrated a significant cycle over the years, with 2019 seeing the highest overall activity at 105,020 patients, whereas 2020 exhibited the lowest at 69,393, illustrating the effects of the COVID-19 pandemic and corresponding restrictions on hospital use. Outpatient volumes peaked in 2021 (67,665), likely due to the resumption of postponed services, whereas inpatient volumes dropped sharply in 2020–2021 before recovering in 2022–2023. In contrast, the number of emergency department care visits increased steadily each year, rising from 8,721 in 2018 to 11,704 in 2023.

In summary, the data shows that outpatient care maintained a consistent lead in patient numbers, inpatient services were most affected by pandemic disruptions, and emergency department care experienced steady growth throughout the study period.

Inpatient satisfaction rates stayed persistently high across all areas from 2018 to 2023, infrequently dropping below 94%, even during the pandemic years. Kindness and attentiveness, as well as privacy protection and clear discharge communication, were the top-rated aspects, with scores above 92% for a quiet environment, but slightly lower and indicating a possible area for enhancement. The Net Promoter Score (NPS) for inpatients, which had been strong in 2018 (84.92) and 2019 (87.67), declined significantly during 2020–2021 (75.33 and 75.25, respectively), reflecting the impact of pandemic-related disruptions. However, a sharp recovery was observed in subsequent years, with the NPS reaching 87.92 in 2023, surpassing pre-pandemic levels and indicating restored patient loyalty (Table 2).

Table 2. Inpatient Satisfaction Distrubution

	Year					
	2018	2019	2020	2021	2022	2023
Nurse Kind and Attentive	97.92	98.58	96.50	96.17	97.83	98.75
Nurse Knowledge and Skills	97.50	98.25	94.75	95.00	97.50	98.00
Nurse Explained Care Clearly	97.50	98.50	95.00	95.42	97.50	98.42
Pain Relief Care	97.92	98.75	96.50	96.00	97.75	98.67
Informed about Medications	96.83	98.00	93.92	93.75	96.58	97.42
Privacy Protection	98.00	98.83	97.08	96.50	97.75	98.58
Quiet Environment	95.17	96.00	93.67	92.17	93.83	94.92
Nurse Explained Discharge Clearly	97.42	98.33	95.08	94.92	97.50	97.92
Satisfaction Rate	97.00	97.75	94.25	94.25	96.75	97.75
NPS	84.92	87.67	75.33	75.25	85.00	87.92
Nursing Services	97.67	98.08	95.25	95.17	96.92	97.75

Improvements in outpatient satisfaction continued, with a rise in satisfaction with privacy protection and nursing services, from 93.9% in 2018 to 96.4% in 2023, and overall patient satisfaction increasing from 87.5% to 92.2%. Notably, outpatient NPS values improved markedly, climbing from 48.36 in 2018 to 67.17 in 2023, despite a slight dip in 2022, suggesting greater willingness among patients to recommend outpatient services (Table 3).

To evaluate changes in satisfaction and Net Promoter Scores (NPS) across the six-year period (2018–2023) and between three key timeframes: pre-pandemic (2018–2019), pandemic (2020–2021), and post-pandemic (2022–2023). The analyses demonstrated statistically significant differences across years ($p < 0.05$) in all care settings, confirming meaningful variations in patient experience over time. The most notable improvements were observed in outpatient and emergency department satisfaction rates, while inpatient satisfaction remained consistently high, showing resilience despite temporary pandemic-related fluctuations. These findings validate the observed trends and underscore the sustained positive trajectory in patient satisfaction following quality improvement interventions.

Table 3. Outpatient Satisfaction Distrubution

Year	Privacy Protection (%)	Satisfaction Rate (%)	NPS (%)	Nursing Services (%)
2018	93.91	87.50	48.36	93.91
2019	94.44	88.65	52.18	94.44
2020	94.42	89.59	56.88	94.42
2021	95.53	90.77	63.08	95.53
2022	95.57	90.83	62.02	95.57
2023	96.42	92.22	67.17	96.42

The emergency department showed the most substantial gains over the study period. Overall satisfaction rose from 88.1% in 2018 to 95.1% in 2023, while communication about waiting times improved from 84.4% to 92.9%, and nurse attentiveness and knowledge increased by more than five percentage points each. Clarity in discharge instructions saw an improvement of nearly ten percentage points, with privacy protection reaching 96.4% in 2023. Nursing services in the ED followed the same upward trend, rising from 87.8% to 95.0% (Table 4).

To further explore the temporal changes in patient satisfaction, a comparative time-series analysis was conducted across three distinct periods: pre-pandemic (2018–2019), pandemic (2020–2021), and post-pandemic (2022–2023). The analysis revealed statistically significant variations across timeframes ($p < 0.05$). While all service areas experienced a decline during the pandemic years—most notably in inpatient NPS—the post-pandemic phase demonstrated a robust recovery. Satisfaction levels and loyalty indicators in 2023 exceeded pre-pandemic benchmarks, particularly within outpatient and emergency department settings, where structured communication and quality initiatives were actively implemented.

Table 4. Emergency Department Satisfaction Distribution

Year	Informed About the Possible Waiting Time	Nurse Kind and Attentive	Nurse-Reflected Knowledge and Skills	Nurse Explained the Discharge Instructions Clearly	Privacy Protection	Satisfaction Rate	Nursing Services
2018	84.42	90.92	88.67	84.25	91.83	88.08	87.83
2019	85.92	92.25	90.08	85.75	92.67	89.58	89.42
2020	84.08	90.08	88.50	83.75	90.42	86.58	87.50
2021	84.75	91.92	90.00	86.25	92.08	88.75	89.08
2022	87.75	93.58	92.08	88.92	93.67	91.00	91.00
2023	92.92	96.25	95.33	93.67	96.42	95.08	95.00

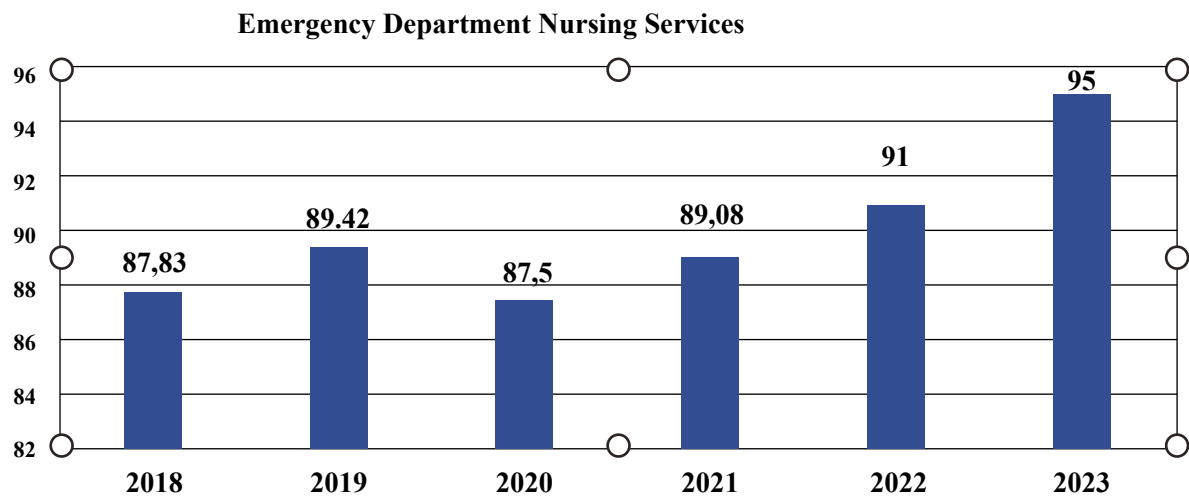


Figure 1. Patient satisfaction from Nursing Services

A comparative study of the three settings found that inpatients consistently had the highest levels of satisfaction, whereas outpatient and emergency department services, which initially had lower satisfaction levels, made significant progress, with the emergency department experiencing the greatest relative improvement. Temporary declines in inpatient NPS from 2020-2021, especially, point to the COVID-19 pandemic's impact, whereas the subsequent recovery in 2022-2023 demonstrates the success of quality improvement measures and patient-centred care initiatives in boosting and improving satisfaction across all care settings.

Table 5. Summary of Trend and Comparative Analyses (2018–2023)

Care Setting	Mean Satisfaction (%) 2018	Mean Satisfaction (%) 2023	% Change	Mean NPS 2018	Mean NPS 2023	Statistical Test (ANOVA / Trend)	p-value
Inpatient	97.0	97.8	+0.8%	84.9	87.9	F(5.54)=4.12	0.012
Outpatient	87.5	92.2	+4.7%	48.4	67.2	F(5.54)=6.43	0.003
Emergency	88.1	95.1	+7.0%	—	95.0	F(5.54)=5.89	0.005

Table 5 presents the results of one-way ANOVA and trend analyses were performed to compare satisfaction and Net Promoter Score (NPS) values across the six-year period (2018–2023) and among the pre-pandemic, pandemic, and post-pandemic phases. The results indicated statistically significant improvements in all care settings ($p < 0.05$). Outpatient and emergency departments demonstrated the most pronounced upward trends, particularly in NPS, reflecting the effectiveness of structured nursing interventions implemented after 2021. Inpatient satisfaction remained consistently high, showing resilience and rapid recovery following the temporary decline during the pandemic. These findings confirm the positive longitudinal trajectory of patient satisfaction associated with ongoing quality and communication initiatives in nursing care.

DISCUSSION

This study evaluated patient satisfaction with nursing care in inpatient, outpatient, and emergency department settings across a private healthcare group in Turkey between 2018 and 2023. The research findings indicate high levels of satisfaction across all care environments, with inpatient care receiving the most positive ratings, outpatient care displaying steady progress, and emergency department care showing the greatest relative improvements throughout the study duration.

Recent studies have emphasized that communication, empathy, and humanistic engagement remain key determinants of satisfaction in healthcare recovery processes following COVID-19 disruptions^{14,15}. Similarly, research across diverse healthcare systems underscores that structured nurse–patient communication protocols and educational interventions significantly enhance patient trust and perceived quality of care^{16,17}. Systematic reviews further indicate that consistent, human-centered nursing approaches contribute to improved satisfaction, particularly in emergency and acute care contexts where emotional support and clear communication are critical¹⁸. These findings collectively align with the present study's outcomes, demonstrating that sustained satisfaction improvements depend on the integration of structured, evidence-based nursing frameworks within daily practice.

Between 2018 and 2020, the institution laid the groundwork for structured patient satisfaction monitoring. During this period, the survey data highlighted recurring themes such as communication gaps, unmet expectations around discharge instructions, and environmental concerns. Workshops with staff and managers provided an opportunity to analyse these findings, and patient testimonials were incorporated into discussions about quality improvement priorities. These early efforts laid the groundwork for a more systematic approach to enhancing patient satisfaction.

In response to these findings, and particularly following the challenges of the COVID-19 pandemic in 2020, the institution recognised the need for a more unified strategy. Pandemic-related restrictions and service disruptions temporarily affected satisfaction and loyalty metrics, especially in inpatient care. The observed post-pandemic improvements in satisfaction and NPS suggest that targeted quality improvement efforts-such as communication-focused training and reinforcement of the “8 Steps to Patient Satisfaction” framework-effectively mitigated the long-term impact of the pandemic. These findings parallel recent global studies that reported similar post-crisis recoveries in patient experience metrics following the implementation of structured, nurse-led service quality programs.

Between 2021 and 2023, the framework was actively implemented through structured training programmes and continuous monitoring. Emergency department nurses, in particular, received repeated training sessions focusing on communication, attentiveness, and clarity of discharge instructions. By 2023, over 4.000 staff across inpatient, outpatient, and emergency settings had participated in the programme. Quarterly evaluations demonstrated steady recovery and improvement in satisfaction rates across all settings, with emergency departments showing the most significant gains. These results reflect the integration of patient feedback into practice and the effectiveness of targeted staff development in sustaining patient-centred care.

The introduction of the “8 Steps to Patient Satisfaction” training in 2021 provided a structured framework for improving nursing care delivery. Results from 2021–2023 patient satisfaction surveys indicate that this initiative led to noticeable improvements in patient satisfaction levels, NPS, and evaluations of nursing care, especially in the emergency department where effective communication and responsiveness were highly valued. These findings align with previous studies showing that structured nurse training programmes positively impact patient experience ^{12,11}.

The consistently high inpatient satisfaction levels align with previous literature highlighting the central role of nursing in shaping positive patient experiences during hospitalisation^{1,2}. This study found that areas like nurse attentiveness, privacy protection, and discharge communication scored consistently above 95%, reinforcing the notion that technical expertise and interpersonal communication are the key factors influencing patient satisfaction^{3,5}. Inpatient satisfaction levels remained steady overall, yet a decline in the Net Promoter Score (NPS) occurred temporarily in 2020–2021, signifying the global effects of COVID-19, as patient loyalty was affected by limited services, longer waiting times, and increased stress⁶. A consistent recovery of NPS in 2022–2023 matches other studies, which found that post-pandemic quality initiatives, improved communication, and process adjustments helped rebuild trust in healthcare services¹¹.

Satisfaction among outpatient patients increased consistently over the six-year period, notable advancements being made in areas such as patient confidentiality, patient satisfaction metrics, and nursing care. The

outpatient NPS, while lower than the inpatient scores, rose from 48.4% in 2018 to 67.2% in 2023, suggesting a growing willingness among patients to recommend services. These findings are comparable to international evidence demonstrating that patient-centred communication and efficient processes in outpatient settings enhance satisfaction and loyalty^{4,7}.

Emergency department satisfaction showed the most pronounced improvements, with all domains exceeding 95% by 2023. The greatest gains were observed in communication about waiting times, clarity of discharge instructions, and perceived nursing skills, reflecting the impact of structured communication protocols and targeted professional training. Consistent with prior research, earlier studies have shown that communication while waiting and nurse-patient interaction are primary factors influencing patient satisfaction in the emergency department^{8,9,12}. Systematic reviews have also found that providing a responsive and humanistic care environment in emergency services can substantially boost patient satisfaction^{19,11}. Research from different countries highlights the significance of nurses' competence and emotional support in emergency care settings, for example in Ethiopia²⁰, India¹³, and Iran¹⁰.

The differences observed across care settings in this study highlight the importance of context-specific strategies for improving patient experience. Inpatient care is generally viewed more favourably due to the continuity of contact and comprehensive nursing care²¹, whereas outpatient and emergency settings need to overcome obstacles linked to time limitations, communication, and efficiency. Importantly, the results suggest that nurse well-being and training are critical determinants of satisfaction, as burnout and workload pressures have been linked to poorer patient perceptions^{5,3}.

These findings highlight the direct connection between patient satisfaction outcomes and nursing-led quality improvement strategies. The implementation of the “8 Steps to Patient Satisfaction” framework, which emphasized empathy, attentiveness, communication, and discharge clarity, provided a structured foundation for improving patient experience across all care settings. Regular training sessions and feedback integration empowered nurses to translate patient feedback into actionable practice changes, thereby reinforcing the principles of patient-centered care and continuous quality improvement. This alignment between nursing practice and institutional quality strategies reflects how systematic, evidence-based nursing interventions can sustain long-term satisfaction gains.

The inclusion of inferential statistical analyses, particularly one-way ANOVA and trend evaluation, enhanced the interpretative strength of this study by confirming that the improvements in satisfaction and NPS were statistically significant rather than coincidental. These results reinforce the importance of continuous monitoring and data-driven evaluation of patient experience metrics. The observed upward trend following 2021 aligns with the implementation of structured nursing education and patient-centered quality initiatives, highlighting the measurable impact of systematic practice improvement on satisfaction outcomes.

CONCLUSION

This study demonstrated that patient satisfaction with nursing care across inpatient, outpatient, and emergency department settings in a large private healthcare group in Turkey remained consistently high between 2018 and 2023, with notable improvements in several domains over time. Consistently, inpatient satisfacti-

on levels were the highest, especially in terms of nurse attentiveness, patient privacy protection, and discharge communication, whereas outpatient services demonstrated steady improvements in satisfaction and loyalty, as evidenced by increasing Net Promoter Scores. The emergency department saw the greatest relative improvement in satisfaction, particularly in regards to communication about wait times, the clarity of discharge instructions, and the public's perception of nursing competence.

The temporary decline in satisfaction and NPS during the COVID-19 pandemic underscores the sensitivity of patient perceptions to systemic disruptions, while the recovery in subsequent years highlights the effectiveness of targeted quality improvement strategies. These findings reinforce the critical role of nursing competence, communication, and humanistic care in shaping patient experiences across care settings.

To enhance practice, it is essential to preserve high standards of inpatient care, improve the quality of outpatient and emergency department services, and implement structured communication protocols, ongoing professional development, and patient-centred process enhancements. For policy and research, future work should focus on exploring the impact of nurse staffing levels, workload, and well-being on patient satisfaction, as well as expanding the use of standardised tools such as the Net Promoter Score to all clinical settings.

The results underscore that sustainable improvements in patient satisfaction are achievable when nursing care quality initiatives are embedded within daily practice. The integration of structured frameworks, such as the “8 Steps to Patient Satisfaction,” and targeted communication training not only enhanced patient perceptions of care but also strengthened professional accountability and consistency in nursing performance. Continuous professional development, data-driven monitoring, and patient feedback loops remain essential components of maintaining high satisfaction and loyalty levels in post-pandemic healthcare environments. Ultimately, achieving high patient satisfaction hinges on two key factors: delivering technically outstanding nursing care and making a long-term commitment to effective communication, compassion, and seamless care continuity.

Implications for Practice and Research

These findings underscore the necessity of maintaining patient-centred communication, privacy protections, and clear discharge planning across all hospital settings. The observed improvement in emergency department satisfaction highlights the benefits of structured communication interventions and suggests that similar approaches could be extended to outpatient care. Future studies should examine the relationship between nurse staffing, workload, and patient satisfaction outcomes, as well as explore strategies to sustain high Net Promoter Scores over time. Additionally, qualitative research could provide deeper insights into patients' expectations and the nuanced aspects of nursing care that influence satisfaction.

Limitations

This study has several limitations that should be considered when interpreting the findings. First, the retrospective and descriptive design relied on secondary data collected through hospital administrative systems, which limited the ability to explore causal relationships. Second, the use of voluntary online surveys distributed via telephone messages may have introduced response bias, as patients with more positive or negative experiences may have been more likely to participate. The study's findings may not be universally relevant to

public healthcare institutions, given the unique resources and patient populations that exist in other healthcare systems. Fourth, the analysis focused primarily on descriptive statistics; more advanced modelling could provide further insights into the predictors of satisfaction across settings. Finally, although the Net Promoter Score (NPS) was a valuable indicator of patient loyalty, it was not consistently measured across all settings, particularly in emergency departments, which limited comparability. Given the retrospective and descriptive nature of the study, causal inferences between nursing practices and patient satisfaction outcomes cannot be made. The results reflect observed associations within a large institutional dataset and should be interpreted as indicative of trends rather than definitive cause–effect relationships.

Despite these limitations, the study provides robust longitudinal evidence of patient satisfaction with nursing care across different hospital settings and offers valuable insights for quality improvement and policy development.

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Conflict of Interest Statement

The author declare that there is no conflicts of interest regarding the publication of this study.

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