RESEARCH ARTICLE

DOI: 10.53555/jptcp.v31i4.5301

INFLUENCE OF NURSES' INTERPERSONAL COMMUNICATION ON THE QUALITY OF CARE IN THE HOSPITAL OF LAHORE, PAKISTAN

Tanzeel Ul Rahman¹, Maroof Kousar², Sidra Batool³, Kinza Iqbal⁴, Yasir Rahim^{5*}

¹Assistant Professor, University of Health Sciences, Lahore, Pakistan Email: mr.tanxeel@gmail.com

²Charge Nurse, Mayo Hospital, Lahore, Pakistan Email: maroofkousar@gmail.com

³Registered Nurse, Shalamar Nursing College, Lahore, Pakistan

Email: sidrabatool55121272@gmail.com

⁴Nursing Instructor, Aligarh College of Nursing, Lahore, Pakistan

Email: kinzaiqbal64@gmail.com

⁵*Senior Research Associate, Research Wing, Population Welfare Department, Punjab, Pakistan Email: yasirrahim709@gmail.com

*Corresponding Author: Yasir Rahim

*Senior Research Associate, Research Wing, Population Welfare Department, Punjab, Pakistan Email: yasirrahim709@gmail.com

Abstract

Background: In a nurse-patient interaction, communication skills are considered important and can affect the outcome of high-quality care.

Objective: This research aims to evaluate the relationship between patient satisfaction and the quality of treatment provided in hospitals and the interpersonal communication abilities of nurses.

Methodology: The present study was done from January 21, 2024, to March 15, 2024, using a descriptive design study conducted at Jinnah Hospital, Lahore. Two hundred nurses and two hundred patients make up a convenience sample that was picked from the hospital using a non-probability purposive sampling technique. The data acquired by the questionnaire is divided into two sections, which are discussed below. Section I: Demographic information and data about nurses: There are two sections in this section, which are organized as follows: Section (A): Healthcare Professionals Information about Demography Nurses in Section (B) Interpersonal Communication Abilities Section II: Healthcare Quality. There are two sections in this section, which are organized as follows: Patients in Section (A) Statistics by Category; Section (B): This section presents five domains to assess patients' satisfaction with the quality of care they received in the Jinnah Hospital, Lahore.

Results: The study results reveal that there is a significant association between interpersonal communication skills and patients' perspective on the quality of health care (Chi Square= 9.60; P =0.047).

Conclusion: It can be concluded that there is a need to introduce on-job training and refresher courses to build interpersonal communication skills among nurses to improve the quality of care in hospitals.

Keywords: Nurses, Interpersonal Communication, Quality of Care, Patient's Satisfaction

Introduction

Interpersonal skills are demonstrated in the healthcare sector by nurses when they communicate with patients and colleagues using theory- and evidence-based approaches. They can also be viewed as actions that facilitate the accomplishment of a goal. Strong interpersonal abilities are typically valued more in both personal and professional contexts (Villela, 2013). The Latin word "communis," which means common, is where the term "communication" originates. The definition emphasizes that there can be no communication until there is a shared understanding due to information sharing. Transmitting information and understanding from one person to another is communication. (Mahvar et al., 2020). Effective communication between nurses and patients can result in several benefits, including better vital signs, decreased pain and anxiety, increased satisfaction, and increased engagement in therapy programs. Conversely, poor communication can result in an inaccurate diagnosis and a decrease in the patient's involvement in the treatment plan (Siamian et al., 2014). Building and sustaining relationships as well as social engagement depend on having effective interpersonal communication abilities. Ineffective communication can destroy relationships irreversibly and hurt morale, productivity, performance, satisfaction, trust, respect, self-confidence, and even physical health (Ibrahim, 2019). The nature of connections between nurses and patients, viewing each patient individually, the implications of poor nursing care, nursing care, an effective care process, patients feeling secure in their care and not feeling worthless, and receiving care from a team (Literate & Indonesia, 2020). Patients' satisfaction is a crucial indicator of the quality of healthcare because it reflects not only their expectations and preconceptions about the services they receive but also the outcomes of the care they receive. Lastly, it is a vital component of ongoing treatment because it encourages the patient to work with the doctor to address any issues related to their health (Cook & Testa, 2012).

Methodology

Data are gathered using the study questionnaire and structured interviews with nurses and patients who were scheduled at predetermined times for care. All nurses and patients were interviewed using the same questionnaire for the study sample in the hospitals, which was not a likely sample (purposive sample).

The current investigation was carried out at Jinnah Hospital in Lahore between January 21, 2024, and March 15, 2024, utilizing a descriptive design study. A non-probability purposive sampling strategy was used to select a convenience sample of 200 patients and 200 nurses from the hospital. Two sections comprise the data collected by the questionnaire; these are covered in more detail below. Section I: Data and demographics about nurses: This section is divided into two sections, which are arranged as follows: Healthcare Professionals in Section (A) Details regarding the demographics of nurses are provided in Section (B): Interpersonal Communication Skills Section II: Quality of Healthcare. This section is divided into two sections, which are arranged as follows: Patients in Statistics by Category in Section (A); in Section (B): Five domains are presented in this section to gauge how satisfied patients are with the level of care they received at Jinnah Hospital in Lahore.

Results

Table 1. Demographic Characteristics of the Patients

Demographic Data	Sub-groups	Frequency (N=200)	Percentage
Age/years	33-42	144	72.0
	43-52	37	18.5
	53-62	17	8.5
	63-72	2	1.0
Gender	Male	94	47.0
	Female	106	53.0
Marital	Single	30	15.0

Status	Married	143	71.5
	Widowed		9.0
	Divorced	7	3.5
	Separated	2	1.0
Educational	Do not Read and	38	19.0
Level	Write		
	Read and Write	159	79.5
	Primary	3	1.5
	school and		
	above		
Residence	Rural	19	9.5
	Urban	181	90.5
Occupation	Free Job	40	20.0
	Employee	47	23.5
	Retired	20	10.0
	Housewife	78	39.0
	Jobless	15	7.5

Table 2. Demographic Characteristics of the Nurses

Demographic data	Sub-groups	Frequency (N=200)	Percentage
	21-34	161	80.5
Age/years	35-48	32	16
	49-62	7	3.5
Gender	Male	80	40.0
Gender	Female	120	60.0
	Single	128	64.0
Marital Status	Married	70	35.0
Waritai Status	Widowed	1	0.5
	Divorced	1	0.5
Educational Level	Diploma	77	38.5
Educational Level	B.S Nursing	123	61.5
Residence	Urban	193	96.5
Residence	Rural	7	3.5
	1-15	176	88.0
Years of Experience	16-30	20	10.0
	31-45	4	2.0
	Morning	136	68.0
Work Shift	Evening	53	26.5
	24 hours	11	5.5
Participation in	Yes	64	32.0
communication skills training	No	136	68.0

Table 3. Level of Interpersonal Communication Skills among Nurses

	Table 3. Level of interpersonal Communication Skins among Nurses					
No.	Items	MS	SD	Assessment		
1	Your words come out the way you would like them to in conversation.	2.56	0.55	Good		
2	When you are asked a question that is not clear, do you ask the person to explain what he means?	2.45	0.57	Good		

When you are trying to explain something, do other people tend to put words in your mouth?	2.21	0.66	Moderate
You assume the other person knows what you are	1.98	0.63	Moderate
Have you ever asked others to tell you how they feel	2.09	0.63	Moderate
	2.44	0.65	Good
			Moderate
,	2.33	0.07	Wioderate
You find it difficult to express your ideas when they	2.04	0.64	Moderate
In conversation, you try to put yourself in the other	2.06	0.76	Moderate
In conversation, you tend to do more talking than	2.05	0.75	Moderate
You are aware of how your tone of voice may affect	2.55	0.61	Good
You refrain from saying something you know will	2.57	0.67	Good
It is very difficult for you to accept constructive	2.21	0.76	Moderate
When someone has hurt your feelings do you	2.09	0.73	Moderate
You later apologize to someone whose feelings you	2.47	0.62	Good
It upsets you a great deal when someone disagrees	1.91	0.70	Moderate
You find it difficult to think clearly when you are	1.77	0.67	Moderate
You avoid disagreeing with others because you are	2.14	0.73	Moderate
When a problem arises between you and another person, are you able to discuss it without getting wm.	2.22	0.61	Moderate
Are you satisfied with the way you settle differences with others?	2.28	0.64	Moderate
You pout and sulk for a long time when someone upsets you.	1.96	0.72	Moderate
You become very uneasy when someone pays you a compliment.	1.75	0.77	Moderate
Generally, you can trust other people.	1.98	0.64	Moderate
You find it difficult to compliment and praise others.	2.29	0.74	Moderate
You deliberately try to conceal your faults from others.	2.08	0.70	Moderate
You help others to understand you by saying how	2.47	0.62	Good
It is difficult for you to confide in people.	2.13	0.66	Moderate
You tend to change the subject when your feelings enter into a discussion.	1.84	0.64	Moderate
	people tend to put words in your mouth? You assume the other person knows what you are trying to say instead of explaining what you meant. Have you ever asked others to tell you how they feel about the point you try to make? Difficult for you to talk with other people. In conversation, you talk about things that are of interest to both people. You find it difficult to express your ideas when they differ from those around you. In conversation, you try to put yourself in the other person's shoes. In conversation, you tend to do more talking than the other person You are aware of how your tone of voice may affect others. You refrain from saying something you know will hurt others or make matters worse. It is very difficult for you to accept constructive criticism from others. When someone has hurt your feelings do you discuss this with them? You later apologize to someone whose feelings you may have hurt. It upsets you a great deal when someone disagrees with you. You find it difficult to think clearly when you are angry with someone. You avoid disagreeing with others because you are afraid they will get angry. When a problem arises between you and another person, are you able to discuss it without getting wm. Are you satisfied with the way you settle differences with others? You pout and sulk for a long time when someone upsets you. You become very uneasy when someone pays you a compliment. Generally, you can trust other people. You find it difficult to compliment and praise others. You help others to understand you by saying how you think, feel, and believe. It is difficult for you to confide in people. You tend to change the subject when your feelings	people tend to put words in your mouth? You assume the other person knows what you are trying to say instead of explaining what you meant. Have you ever asked others to tell you how they feel about the point you try to make? Difficult for you to talk with other people. In conversation, you talk about things that are of interest to both people. You find it difficult to express your ideas when they differ from those around you. In conversation, you try to put yourself in the other person's shoes. In conversation, you tend to do more talking than the other person You are aware of how your tone of voice may affect others. You refrain from saying something you know will hurt others or make matters worse. It is very difficult for you to accept constructive criticism from others. When someone has hurt your feelings do you discuss this with them? You later apologize to someone whose feelings you may have hurt. It upsets you a great deal when someone disagrees with you. You find it difficult to think clearly when you are angry with someone. You avoid disagreeing with others because you are afraid they will get angry. When a problem arises between you and another person, are you able to discuss it without getting wm. Are you satisfied with the way you settle differences with others? You pout and sulk for a long time when someone upsets you. You become very uneasy when someone pays you a compliment. Generally, you can trust other people. You deliberately try to conceal your faults from others. You help others to understand you by saying how you think, feel, and believe. It is difficult for you to confide in people. It is difficult for you to confide in people. It is difficult to change the subject when your feelings	people tend to put words in your mouth? You assume the other person knows what you are trying to say instead of explaining what you meant. Have you ever asked others to tell you how they feel about the point you try to make? Difficult for you to talk with other people. In conversation, you talk about things that are of interest to both people. You find it difficult to express your ideas when they differ from those around you. In conversation, you try to put yourself in the other person's shoes. In conversation, you tend to do more talking than the other person you are aware of how your tone of voice may affect others. You refrain from saying something you know will hurt others or make matters worse. It is very difficult for you to accept constructive criticism from others. When someone has hurt your feelings do you discuss this with them? You later apologize to someone whose feelings you and yhave hurt. It upsets you a great deal when someone disagrees with you. You find it difficult to think clearly when you are angry with someone. You avoid disagreeing with others because you are afraid they will get angry. When a problem arises between you and another person, are you able to discuss it without getting wm. Are you satisfied with the way you settle differences with others? You pout and sulk for a long time when someone upsets you. You pout and sulk for a long time when someone upsets you. You become very uneasy when someone pays you 1.75 0.77 a compliment. Generally, you can trust other people. You deliberately try to conceal your faults from others. You help others to understand you by saying how you think, feel, and believe. It is difficult to change the subject when your feelings 1.84 0.64

29	In conversation, you let the other person finish	2.19	0.78	Moderate
	talking before reacting.			
30	You find yourself not paying attention	2.42	0.66	Good
	while in conversation with others.			
31	Have you ever tried to listen for meaning when	2.45	0.60	Good
	someone is talking?			
32	Others seem to be listening when you are talking.	2.57	0.56	Good
33	In a discussion, it is difficult for you to see things	2.08	0.57	Moderate
	from the other person's point of view.			
34	You pretend you are listening to others when you	2.26	0.64	Moderate
	are not.			
35	In conversation, can you tell the difference between	2.34	0.55	Good
	what a person is saying and what he may be feeling?			
36	While speaking, are you aware of how others are	2.37	0.58	Good
	reacting to what you are saying?			
37	You feel other people wish that you were a different	1.72	0.68	Moderate
	kind of person.			
38	Other people understand your feelings.	2.07	0.60	Moderate
39	Others remark that you always seem to think you	1.92	0.64	Moderate
	are right.			
40	You admit that you are wrong when you know you	2.41	0.63	Good
	are wrong about something.			
Overa	all nurses' interpersonal communication skills	2.19	0.66	Moderate

MS: Mean of Scores; SD: Standard Deviation; Poor: MS = 1-1.66; Moderate: MS=1.67-2.33; Good: MS≥0.2.3

Table 4. Percentage of Nurses with the Level of Interpersonal Communication Skills

Descriptive Statistics	Interpersonal Communication Skills				
	Poor	Good			
Frequency	1	160	39		
Percentage	0.5	80	19.5		

Table 5. Status of Quality of Care according to the Patients

No.	Items	MS	SD	Assessment
Tangi	ibility			
1	In Hospital units, all amenities are provided (i.e. continuous electricity, water, sanitation, ventilation, and pleasant odors).	2.51	1.09	Moderate
2	Hospital units (waiting rooms, clinical testing rooms) are integrated and well-furnished.	2.53	1.05	Moderate
3	There is a medical and health staff for all medical departments in the hospital	2.84	1.00	Moderate
4	Hospital units have up-to-date Instruments, equipment, and medical supplies.	2.33	0.97	Moderate
5	nurses explain to patients what the complications are before giving treatment	2.53	0.93	Moderate
6	Nurses inform patients of their health	2.74	0.89	Moderate
7	Nurses in the hospital unit are excellent, and they have a neat appearance.	3.41	0.80	Good
Relial	bility		·	

1	The nurses' unit is interested in recording information about patients and their health status in the records accurately.	3.26	0.86	Good
2	When a patient has problems, the nurses will show a sincere interest in solving them.	2.62	0.79	Moderate
3	The nurses provide promised services at the appointed time.	2.48	0.92	Moderate
4	The nurses attempt to deliver Services in the right way the first time	2.98	0.87	Moderate
5	The nurses provide services with a high degree of accuracy and reliability.	2.89	0.83	Moderate
Respo	onsiveness		1	- L
1	The nurses of the hospital's unit are telling patients exactly when the services will be provided.	2.65	0.80	Moderate
2	The nurses are too busy to respond to the patient's requests immediately.	2.86	1.03	Moderate
3	The nurses of the hospital's unit simplified the work procedure as much as possible to ensure speed and ease in providing health service.	2.82	0.92	Moderate
4	The Hospital organizes continuous shifts to ensure the provision of health services at all times of the day.	3.10	0.83	Good
Empa	•	1		•
1	Nurses put the patient's best interests at the introduction of their work.	2.37	0.87	Good
2	Nurses in this hospital interested in understanding the requirements of the patient and giving him individual attention.	2.26	0.92	Moderate
3	Nurses have the knowledge to answer patients 'questions understandably.	2.92	0.80	Moderate
4	Nurses in the Hospital units give enough time to caring for their patients.	2.61	0.89	Moderate
5	Nurses consider and respect the habits and customs of patients.	3.24	0.79	Good
Assur	1.4	· I	l .	
1	Patients feel secure while receiving health care.	2.89	0.87	Moderate
2	The patient trusts the experience, skills, and qualifications of medical and nursing staff in Hospital units.	2.95	0.87	Moderate
3	Nurses were courteous and treated patients with dignity and respect.	3.38	0.75	Good
4	Nurses in hospital units are willing to help patients permanently.	3.23	0.74	Good

MS: Mean of Scores; SD: Standard Deviation; Poor: MS= 1-1.99; Moderate: MS=2-2.99; Good: MS≥3

Table 6. Overall Quality of Care According to Patients

No.	Items	MS	SD	Assessment
1	Tangibility	2.70	0.96	Moderate
2	Reliability	2.84	0.85	Moderate
3	Responsiveness	2.85	0.89	Moderate
4	Empathy	2.68	0.85	Moderate
5	Assurance	3.11	0.81	Good
Over	all Quality of Health Care	2.84	0.87	Moderate

MS: Mean of Scores; SD: Standard Deviation; Poor: MS = 1-1.99; Moderate: MS =2--2.99; Good: MS≥3

Table 7. Relationship between Nurses' Interpersonal Communication and Quality of Care in Hospital according to Patients

Contingency Table		Interpersonal Communication Skills			Chi-Square (P value)	
Quality	of		Poor	Moderate	Good	
Health Care		Poor	0	3	2	9.60
		Moderate	1	98	32	(0.047) S
		Good	0	59	5	

S: Significant association at p < 0.05

Discussion

1. Demographic Characteristics of the Patients

The results of the study's demographic data collection for 200 patients are shown in (Table 1). The bulk of the patients' categories, as indicated by this table in the study's results, are those whose ages range from (33–42) years (72%). This is in line with studies by Diab (2016), which found that over half of the subjects were between the ages of 20 and 24. On the other hand, a study on the quality of patient care undertaken by (Bakhtiar Aman, 2016) revealed that the majority of patients were between the ages of 40 and 45. This finding may have been caused by demographic disparities between the populations of Ghana and Iraq. This table presents the study's findings, which indicate that 53% of the patient subgroups are female. These results are consistent with those of Al-Delhi (2017), which reported that 57.5% of the patient population was female.

The study conducted by Diab (2016) (Bakhtiar Aman, 2016) titled "Measuring the Dimensions of the Quality of Medical Services in Jordanian Government Hospitals: A Staff and Patients Perspective" differs from the data presented in this paper. The study's goal was to assess the quality of medical services at Jordanian government hospitals from the viewpoints of the personnel and the patients. Out of the 200 patients the authors documented, 105 (67%) were men and 52 (33%) were women. According to the study, patients had a high level of trust in public hospitals due to their highly skilled and experienced medical staff. Regarding the patients' mother status, the current study's findings show that the largest proportion of patients who got married was (71.5%). Researchers in Kirkuk City concur with the aforementioned findings on the maternal status of patients in this study sample, since 87.5 percent of them were married. (AL- Ibrahim & Rahman Abdullah, 2016).

In terms of the patients' educational attainment, the current study's results show that the largest proportion of patients who met the required reading and writing proficiency was (79.5%). Researchers from Fishtail Hospital and Research Centre in Pokhara, Nepal concur with the aforementioned findings about the patients' educational backgrounds. In 2020, Ghimire et al. According to the results of the current study, 90.5% of the patients live in an urban region. Obtained findings that were comparable to ours, namely that the majority of patients (90.5%) in Al-Hilla City Hospitals were from urban areas (Al-Taee & Al-Harbawi, 2020). Additionally, the current data showed that 39% of patients in the entire sample were housewives. Considering that the majority of Iraqis have experienced an increase in unemployment over the past ten years and a lack of job opportunities for recent graduates in government organizations, this situation may appear commonplace. Researchers in Kirkuk City concur with the aforementioned findings about the fact that 40.0% of the study sample's patients were housewives. Ibrahim & AL-Rahman Abdullah, 2016)

2. Demographic Characteristics of the Nurses

The study's demographic data for the 200 nurses who took part is included in (Table 2). This table presents the study's findings, which indicate that 80.5% of the study sample's participants are between the ages of 21 and 34. This is because younger people are more effective and proactive when interacting with patients, whereas elderly people are more involved in organizing and handling paperwork. According to the survey, 61% of the nurses in AL-Nasiriya City were between the ages of 21 and 25 (Aziz and Mansi, 2018). This table in the data indicates that, at 60%, women make up

the majority of the nurse subgroups, and the results are consistent with this finding. According to

Maheshwari & Kaur (2015), 95% of nurses employed in Punjabi hospitals in India were women. Toward the maternal status of the nurses; the result of the present study reveals that the highest percentage of single nurses was (64%). Bangalore working at NIMHANS researchers agree with the above results regarding the maternal status of nurses in this study Most of them (64.7%) were unmarried. (Banu & Lalitha, 2014). Regarding the educational level of the nurses; the result of the current study reveals that the highest percentage of nurses who BS Nursing (61.5%) in Jordan researchers agree with the above results regarding the educational status of nurses in this study (Al-

Damen, 2017). According to the results of the current study, 96.5% of nurses live in metropolitan areas. However, (Aziz & Mansi, 2018) found similar things to our study: 99% of the sample lived in an urban region, and most nurses in AL-Nasiriya City came from urban areas.

Moreover, 88% of nurses with 1 to 15 years of experience were found in the current data. Considering that the majority of employees are more accommodating and patient during their initial years of employment, this scenario might seem commonplace. According to survey results in Erbil City (Qadir & Younis, 2015), approximately one-third of the population falls into the category of individuals with one to eight years of experience. These findings align with the findings of the current investigation. Additionally, the majority of personnel (68%) work the morning shift to handle the increased number of patients and clients and to deliver high-quality healthcare services. However, (Dehaghani et al., 2012) found comparable results to ours, with the majority of nurses in the sample (approximately 40%) working shifts just mornings at Al-Zahra Hospital in Isfahan, Iran. The findings indicated that 68% of the nurses did not take part in the communication skills training programs. Comparable results to our Jordanian research roughly 78% of respondents didn't enroll in a specific interpersonal communication skills course. The findings contradict the findings of (Naheeda, 2019), which indicated that 94% of nurses in Faisalabad had received training in communication skills.

3. Level of Interpersonal Communication Skills among Nurses

Except for a few items with (good) assessments, the study's results show in Table (3) that the majority of nurses have (moderate) levels of interpersonal communication. The results shown here are in line with a study conducted by (Agha et al., 2018). The relationship between interpersonal communication abilities and personality traits among nurses at Iran's Rafsanjan University of Medical Sciences Using a stratified random selection technique, 223 nurses were chosen for this descriptive study, and they filled out the Revised NEO Personality Inventory and the Burton ICSs. Outcomes 9.9%, 75.8%, and 14.3% of the nurses that were chosen had low, moderate, and high communication abilities, respectively.

4. Status of Quality of Care According to Patients

With the exception of a few items with an evaluation of "good," the majority of (medium) items in this part represent the level of health care quality in practically all areas, according to the study's Table (5) results. According to earlier research (Georgiadou & Maditinos, 2017), a patient's response may differ depending on their origins and other variables. The Greek patients at Kavala Hospital were found by the writers to be dissatisfied in certain areas yet satisfied in others. They therefore said that the outcomes might be used to provide input to hospital administration so that they may enhance the facility and better meet the needs of the patients.

5. Relationship between Nurses' Interpersonal Communication and Quality of Care in Hospital

Regarding recent discoveries (Table 8) Interpersonal communication skills and patients' perceptions of the quality of healthcare were found to be related in this study (Chi Square = 9.60; P = 0.047). The findings presented align with a study conducted by Sina Hospital of Tabriz (Lotfi et al., 2019). According to the data, the majority of patients had negative experiences with nursing care. Over 80% of people didn't know their nurse. Patient satisfaction with nursing care was shown to be substantially connected with the sex variable, and there was also a linkage between patient-nurse communication

and patient satisfaction. Patients were unhappy with this type of communication, and our study clearly showed how poorly nurses communicated with their patients. The improvement of patient satisfaction is influenced by the interpersonal communication abilities of nurses (Richard, 2012).

Conclusion

All the above findings and discussion can be concluded that nurses had moderate levels of interpersonal communication skills. Most importantly, it has been proved that interpersonal communication skills play a pivotal role in improving the quality of care in hospital. Therefore, it is recommended that on-job training and sessions related to interpersonal communication should be conducted at the hospital level.

References

- 1. Agha, P., Hasani, M., Mokhtaree, M., & Fathollahi, M. S. (2018). Interpersonal communication skills and its association with personality dimensions of nurses in Rafsanjan University of Medical Sciences, Iran, in 2015. 7(4), 112–118.
- 2. Al-Damen, R. (2017). Health Care Service Quality and Its Impact on Patient Satisfaction "Case of Al-Bashir Hospital." International Journal of Business and Management, 12(9), 136. https://doi.org/10.5539/ijbm.v12n9p136
- 3. AL-Rahman Abdullah, D., & Ibrahim, R. H. (2016). Assessment of Cancer Patient's Satisfaction Regarding Nurses Communication Skills in Azadi Teaching Hospital/ Oncology unit. Mosul Journal of Nursing, 2(1), 1–1. https://doi.org/10.33899/mjn.2016.160037
- 4. Al-Taee, M. H. M., & Al-Harbawi, M. T. (2020). Assessment of referral system quality from clients' perspectives at outpatient consultancy clinics in Al-Hilla City Hospitals. Indian Journal of Forensic Medicine and Toxicology, 14(3), 1317–1322. https://doi.org/10.37506/ijfmt.v14i3.10580
- 5. Asaad, B., & Mahmoud, H. (2016). Measuring the Quality of Health Services in Lattakia Province Patients' Perspective (Field Study of Health Centers in Jableh City). Journal of Social Economics Research, 3(4), 41–56. https://doi.org/10.18488/journal.35/2016.3.4/35.4.41.56
- 6. Aziz, A. R., & Mansi, Q. H. (2018). Assessment Quality of Nursing Care Provided to Neonates with Respiratory Distress Syndrome at Intensive Care Unit in AL- Nasiriyah City Hospitals.
- 7. Bakhtiar Aman, faisal A. (2016). Patient 's perceptions about the service quality of public hospitals located at. 72–75.
- 8. Banu, M. R., & Lalitha, K. (2014). Effectiveness of Structured Teaching Programme on the Level of Knowledge of Communication Skill among Nurses Working at NIMHANS, Bangalore. 3(2), 70–75.
- 9. Cheng Lim, P., & Tang, N. K. H. (2000). A study of patients' expectations and satisfaction in Singapore hospitals. International Journal of Health Care Quality Assurance, 13(7),290–299. https://doi.org/10.1108/09526860010378735
- 10. Cook, E. A., & Testa, M. A. (2012). Quality of health care. The Diabetic Foot: Medical and Surgical Management: Third Edition, 481–501. https://doi.org/10.1007/978-1-61779-791-0_24
- 11. Dehaghani, A. R., Akhormeh, K. A., & Mehrabi, T. (2012). Assessing the effectiveness of interpersonal communication skills training on job satisfaction among nurses in Al-Zahra Hospital of Isfahan, Iran. Iranian Journal of Nursing and Midwifery Research, 17(4), 290–295.
- 12. Georgiadou, V. A., & Maditinos, D. (2017). Measuring the quality of health services provided at a Greek Public Hospital through patient satisfaction. Case Study: The General Hospital of Kavala. International Journal of Business and
- 13. Ghimire, P., Ghimire, P., & Acharya, M. (2020). SERVQUAL Questionnaire based Health Service Quality Assessment in a Private Hospital of Western Nepal. Nepal Journal of Medical Sciences, 5(1), 79–85. https://doi.org/10.3126/njms.v5i1.36958
- 14. Ibrahim, Y. (2019). INTERPERSONAL COMMUNICATION SKILLS OF NURSE MANAGERS AND NURSING PERFORMANCE. 26(1), 99–145.

- 15. Jenkinson, C., Coulter, A., Bruster, S., Richards, N., & Chandola, T. (2012). Patients' experiences and satisfaction with health care: Results of a questionnaire study of specific aspects of care. Quality and Safety in Health Care, 11(4), 335–339. https://doi.org/10.1136/qhc.11.4.335
- 16. Literate, S., & Indonesia, J. I. (2020). View metadata, citation and similar papers at core.ac.uk. PENGARUH PENGGUNAAN PASTA LABU KUNING (Cucurbita Moschata) UNTUK SUBSTITUSI TEPUNG TERIGU DENGAN PENAMBAHAN TEPUNG ANGKAK DALAM PEMBUATAN MIE KERING, 274–282.
- 17. Lotfi, M., Zamanzadeh, V., Valizadeh, L., & Khajehgoodari, M. (2019). Assessment of nurse patient communication and patient satisfaction from nursing care. April, 1189–1196. https://doi.org/10.1002/nop2.316
- 18. Maheshwari, S. K., & Kaur, G. K. (2015). Correlation of Assertive Behavior with Communication Satisfaction among Nurses. 2002, 68–77.
- 19. Mahvar, T., Mohammadi, N., Seyedfatemi, N., & Vedadhir, A. (2020). Interpersonal Communication among Critical Care Nurses: an Ethnographic Study. Tabriz University of Medical Sciences, 9(1), 57–64. https://doi.org/10.34172/jcs.2020.009
- 20. Marmash, L. R., Hamdan-Mansour, A. M., Elian, R. M., & Hiarat, S. Y. (2012). Differences in perception between nurses and patients in Jordanian nurses' effectiveness in practicing communication skills. Jordan Medical Journal, 46(2), 155–164.
- 21. Qadir, D., & Younis, Y. (2015). Quality of nursing care for patients with acute myocardial infarction at coronary units of Erbil city hospitals. Zanco Journal of Medica Sciences, 19(2), 1011–1018. https://doi.org/10.15218/zjms.2015.0025
- 22. Richard, S. D. (2012). Cross Sectional. 5(2), 155–166.
- 23. Siamian, H., BagheriNesami, M., Nia, R., Nezhad, F., Akbari, H., Balaghafari, A., & Vahdei, M. (2014). Assessment of Interpersonal Communication Skills Among Sari Health Centers' Staff. Materia Socio Medica, 26(5), 324. https://doi.org/10.5455/msm.2014.26.324-328
- 24. Villela, lucia maria aversa. (2013). Student Survival Skills. In Journal of Chemical Information and Modeling (Vol. 53, Issue 9).