

Effect of Nurse's Therapeutic Communication and Protecting Patient's Rights on Patient's Satisfaction

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Abstract:

Back ground; Emphasis puts today's on nurse's therapeutic communication as a key variable to relieve patients from psychological stress, and familiarize them with hospital environment.

Aim; determine the effect of nurse's therapeutic communication and protecting patient's rights on patient's satisfaction. **Setting;** Assiut University Main Hospital. **Subjects;**

Convenient sample of nurses (No.=172) and representative number of patients (No.= 200) based on formula to calculate study subjects. **Tools;** 1) Structure questionnaire sheet

consisted of a) Demographic characteristics b) Communication skills, c) Patients right and 2) Patients satisfaction scale **Results;** nurses achieve highest mean score in understanding the

emotions, and feelings they experienced in hospital environment with their illness, and the needs they want to satisfy and the lowest mean score for attention to patients verbal and non

verbal expressions. There were a highly statistical significant difference regarding departments, years of experience, residence and nurse's therapeutic communication skill and

protecting patient's right. The majority of patients were satisfied regarding nurse's communication skill and protection of their right. **Conclusion;** the majority of nurses were

communicate in therapeutic way. The majority of patients were satisfied regarding nurse's therapeutic communication skills but patients admitted to private sector were achieve highest

satisfaction score. **Recommendations:** based on research results the following recommendations are drawn; in-services training for nurses who not communicate in

therapeutic way. Orient patients to increase their awareness regarding their rights.

Key Words: Therapeutic Communication, nurses, Patient's, Rights, Satisfaction

Introduction

Communications skills is a very important concept in all life areas, but therapeutic communication is the needed one for medical and nursing professions even with all staff working at any health care agency because patients and customers has physical pain as well as spiritual emotions, and psychological discomfort from change their familiar environment by hospital environment, so if nurses and health care teams are communicate in therapeutic way the optimal health care outcomes can be attainable easily¹.

Therapeutic communication can be defined as the exchange of ideas, health instructions, information, a choice of care and feelings to achieve desirable objectives and strengthen interpersonal relationships with patients / customers and health care providers². In therapeutic communication process; nurses should clarify the meanings of the message to her/his patients /customers, and be sure that this meaning was understood by them using multiple strategies like clarifying expectations, direct questions, and repeating what they said³. In the health care organization therapeutic communication can be achieved if the information shared between its members enhances achieving both patients, customers, health care team and organizational objectives⁴.

When peoples communicating with each other's the focus was putted on what peoples should say. However, in therapeutic communication the focus more putted on listening to the patients and customer's needs, ideas, and thought^{5&6}. Good listening means not only understanding the words or the information patients and customers said but also understanding the emotions, and feelings they experienced in hospital environment with their illness, and the needs they wants to satisfy so, health care team especially nurses who spend a long time with patients try to convey this feelings, and emotions into here/his care priority which can be displayed by nurses with respecting and achieving patient's needs⁷.

Therapeutic and effective communication actually affect patient progress positively, patient compliance to health care team instructions, and treatment plan^{8&9}. Intelligent nurses can read and understand their patients emotions as well as their superiors and peers so, she/he can communicate in therapeutic way which will reflect appreciations from others so, nurses become satisfied with work environment which was reflect positive attitude toward her/his patients from this point patients satisfaction and compliance with treatment provided will be increased¹⁰. If health care team

communicate with patients and customers in therapeutic way it mean that they have emotional intelligence as they become able to understand and recognize patients emotions and become able to cope with their patients as well as their colleges¹¹.

Non therapeutic communication can has negative effect on patient's satisfaction, safety, and quality of care, and has adverse effects on patient's compliance with recommended treatment regimens. Also lack of use of therapeutic communication skills may influence patients' participation in his/her treatment plans that will inversely affect the nurses' ability to manage patients' needs effectively. Therapeutic relationship is the core of quality nursing care and patient's satisfaction^{12,13,14}.

Patient's satisfaction can be defined as the patients reaction to all aspects of services provided which they experienced from health care members. If a patient's perception of their hospital experience meets or exceeds patient's expectation, there will be equal degree of satisfaction¹⁵. Patients satisfaction refers to what patients think about their treatment plan, evaluating past experience which has focus on the presence of protocol of care coordination, communication with caregivers, and staff responsiveness¹⁶.

The ability to develop a compassionate, therapeutic communication with patients nurses engage patients as partners is critical aspect as healthcare standards to day require all patients to be fully informed and active participants in self-care management¹⁷. To improve patient's satisfaction regarding nurse's therapeutic communication skills and make patients more adhere to follow-up care plan nurse's awareness regarding therapeutic communication and how to protect patient's rights should be spread among all nurses¹⁸

Human being has mental, physical, and spiritual dimensions and hold rights during the health and illness people have to differentiate between human rights and rights to health. The rights of patients are the expectations that must be observed in every health care service. These encompass his/her physical, mental, spiritual and social needs which are manifested as standards, and rules¹⁹. With advancing technologies patient's education, and awareness regarding to their rights has been increased²⁰.

Important talent of nursing is respecting and protecting the human rights and dignity of all patients. The priority of healthcare organizations must be protection of patient's rights. The patient's

bill of rights was created in order to defend human rights, preserve patients' dignity, and ensure that in case of sickness, and especially in emergencies, patients will receive competent care without discrimination²¹.

Therefore, if the patient's rights and welfare at risk, it is necessary that a nurses undertake their protection. Protection of patient is defined as the process of informing patients who seek health care, but there are still ignore the methods nurses' learned regarding their role to protect him/her²². Nurses must protecting patients against unethical and illegal acts was only a part of patient advocacy, although supporting the patients is a major goal of nurses and all health care professionals^{23,24}.

Significance of the study:

Therapeutic communications has important role in improving patients emotional, and psychological status which in return can affect patients progress and outcomes so, studying nurses therapeutic communication skills and to what extend nurses protect patient's rights is very essential and if it has effect on patient's satisfaction will give an insight about its importance. No studies were done about the three variables together nationally and internationally

Aim of the study: This study aimed to determine the effect of nurse's therapeutic communication skills and protecting patient's rights on patient's satisfaction.

Specific objectives

- 1- Determine nurse's therapeutic communication skills.
- 2- Measure to what extend nurses protects patient's rights.
- 3- Assess patient's satisfaction regarding nurse's therapeutic communication skill and protecting his/her rights.

Research Questions:

- 1- What are nurse's communication skills?
- 2- Are nurses protecting patient's rights?
- 3- Are patients satisfied with nurse's therapeutic communication skills?

Subjects and Methods

Technical design:

a- Research design: Descriptive study design was used in the present research.

b- Setting: The present study was conducted at Assiut University Main Hospital at private sector and general in patients departments (medical & surgical).

C-Subjects: Convenient sample of nurses (No.=172) and representative number of patients (No.= 200) based on²⁵ formula to calculate study subjects which were required randomly selected .

$$(2n^2)^2 p (1-p)$$

$$N = \frac{\dots}{D^2}$$

D²

Where:

N=sample size

P= 0.50

D= 0.50x10% =0.005

The selected participant distributed as follows

Unit	Nurses No.	Patient No.
General medical units	44	70
General surgical units	55	70
Private sector	73	60

d- Tools of data collection: It consisted of two tools

-Tool one structure questionnaire sheet which developed ²⁶ and modified by²⁷ which includes three main parts; *part one*, nurses demographic characteristics to gather data regarding; name of the department, gender, age, marital status, years of experience, and residence.

Part two Nurse's therapeutic communication skills which includes 16 items classified into four dimensions as follow; Preliminary relationship includes (4items), Attention (4 items), understanding (4 items), and job duties (4 items)

Scoring interpretation the evaluator (head nurses) will give a score for the nurse based on three points Likert scale ranged from 1= disagree to 3= agree, all scores will summed up from > 60% and above, the nurse communicate in therapeutic way and below < 60% nurse not communicate in therapeutic way. *part three* nurses protection of patient's right which consists of (14 items) **Scoring interpretation** the evaluator (head nurse) will give a score for the nurse based on three points Likert scale ranged from 1= not protecting patients right to 3= protecting patient's rights. Every nurse score will be totaled or summed up from

60% and above mean that the nurse protect patient's rights and below 60% mean that the nurse not protect patient's rights.

-Tool two structure questionnaire sheet which developed by¹ it includes two main parts: ***part one*** patients personal data which gather data regarding; gender, age, marital status, and numbers of patient hospitalization. ***Part two*** patient's satisfaction regarding nurses communication skills which includes 20 statements all of them will be assessed using three point Likert scale ranged from satisfied = 3 to dissatisfied = 1

scoring interpretation will be varying according to the 20 statements, highest score possible equal 60 and the lowest score equal 20. The researcher ask for patient's responses which will be summed up and if the patients obtain from 20-35 considered dissatisfied and if obtained from 36-60 considered satisfied.

IV. Administrative Design: An official permission was obtained from the dean of Nursing Faculty- Assiut University, medical and nursing directors at Assiut University Main Hospital, and all departmental heads of all selected departments.

V. Operational Design: This design explains the steps of actual implementation of the study, including preparatory phase, pilot study, and the field work.

Preparatory phase: This phase took about two months from October to November 2017 this period used to review the available literature concerning to the study topic, also study tools were prepared, and translated. The draft of the questionnaire was reviewed for face validity by taking experts opinions to revise comprehension of each statement through a jury which comprised from 5 experts (2 professors from Nursing Administration Department and 2 professors from Community Health Department and 1 professor from Psychiatric Nursing Department,) Faculty of Nursing Assiut University. Also content validity was tested using confirmatory factor analysis and all items of the tools used were confirmed and obtain score 1.9 and more.

Pilot study: Was conducted to detect the obstacles and problems that may be encountered during data collection phase. Also it helps to estimate time needed to fill the questionnaire form. It was carried out on 10% of patients (20 patients) and (nurses No. =17) every questionnaire took from 20 minutes to half an hour to be filed. The total period for collection of data in the pilot study takes about 5 days the participants chosen for the pilot study were excluded from the total study sample

Reliability was ensured by measuring

internal consistency using Cronbach's Alpha Coefficients methods and its result revealed that all statements of study questionnaire α were ≥ 0.88

Fieldwork: After ensuring the clarity and understandability of the study tools, the actual data collection was started in December 2017 up to February 2018. Patient's satisfaction with nursing therapeutic communication skills was filled by the researchers through patient interview one at a time after explaining the purpose of the study. Each interview took about 20 minutes. Also researchers met with all participated head nurses at Nursing Administration Office affiliated to Assiut University Main Hospital. 10 head nurses were interviewed at a time for a day to explain the purpose of the study and then all items of the tool were explained and discussed with them to clarify how head-nurses can evaluate nurse's therapeutic communication skill and how head-nurses can assess to what extend nurses protecting patient's rights from her/his observation and past experience using the predetermined tool and then the researchers distributed the questionnaire form for head nurses and the researchers were available during distributing and receiving the questionnaire, the questionnaires were given to only head nurses who expressed interest in

participation. All study tools were filled in the morning shift.

Ethical considerations: The researchers obtaining approval from the ethical committees at Faculty of Nursing Assiut University. Oral agreement was obtained from all participants after informing them about their rights to participate, refuse, or withdraw at any time. Total confidentiality of any obtained information was ensured. The steps of the study could not entail any harmful effects on participants.

Statistical design: collected data were verified before computerized data entries were done using statistical software package for social science (SPSS v.g. 20). Data were presented using descriptive statistics in the form of frequencies and percentages for qualitative variables. Mean and standard deviation for quantitative variables, Pearson correlation analysis and multiple regression analysis were used for assessment of the inter-relationships and ANove test were used $P \leq 0.05$ (Significance).

Results:

Table (1): Distribution of Nurses Demographic Data at Assiut University Main Hospital (No. = 172)

Nurses Demographic data		No. (172)	%	Mean ± SD	
Age	< 30	47	27.3	34.49 ± 8.18 Range (19.0 – 56.0)	
	30 - 40	73	42.5		
	> 40	52	30.2		
Gender:	Male	20	11.6		
	Female	152	88.4		
Department:	General Medicine	44	25.5		
	General Surgery	55	32		
	Private sector	73	42.5		
Marital status	Single	31	18		
	Ever Married	141	82		
Years of exp.	≤10	30	17.4		15.60 ± 7.7 (Range 1.0 – 35.0)
	> 10	142	82.6		
Residence:	Rural	116	67.4		
	Urban	56	32.6		

Table (2): Distribution of Nurse's Therapeutic Communication Dimensions for at Assiut University Main Hospital (No. = 172)

Dimensions	Therapeutic		Non Therapeutic		Mean±SD
	No	%	No	%	
• Preliminary relation	134	77.9	38	22.1	10.24 ± 1.87
• Attention	112	65.1	60	34.9	9.59 ± 2.06
• Understanding	141	82.0	31	18.0	10.33 ± 1.92
• Job duties	139	80.8	33	19.2	10.30 ± 1.72

Table (3): Distribution of Nurses Demographic Data and Communication Skills at Assiut University Main Hospital (No.= 172)

Personal characteristics		Communication skills				P-value
		Therapeutic		Non Therapeutic		
		No	%	No	%	
Gender	Male	16	9.3	4	2.3	0.48
	Female	132	76.7	20	11.7	
Age	< 30	37	21.5	10	5.8	0.29
	30 - < 40	66	38.4	7	4.1	
	≥ 40	45	26.1	7	4.1	
Department	General Medicine	31	18	13	7.5	0.003**
	General Surgery	49	28.5	6	3.6	
	Private sector	68	39.5	5	2.9	
Marital status	Single	27	15.7	4	2.3	0.781
	Ever married	121	70.3	20	11.7	
Years of ex.	≤10	20	11.6	10	5.8	0.003**
	> 10	128	74.4	14	8.2	
Residence	Rural	98	56.9	18	16.4	0.002**
	Urban	50	29.1	6	3.6	
Total Communication		148	86.0	24	14.0	0.000**

(*) significance difference (**) highly statistical significance difference (***) highly statistical significance difference

Table (4): Distribution of Nurses Demographic Data and Protection of Patient's Right at Assiut University Main Hospital n= 172

Personal characteristics		Patients				P-value
		Protect		Ignore		
		No.	%	No.	%	
Gender	Male	14	8.2	6	3.5	0.083
	Female	133	77.3	19	11	
Age	< 30	35	20.3	12	6.9	0.40
	30 - < 40	66	38.4	7	4.1	
	≥ 40	46	26.8	6	3.5	
Department	General Medicine	27	15.7	17	9.9	0.000***
	General Surgery	48	27.9	7	4.1	
	Private sector	72	41.9	1	0.5	
Marital status	Single	26	15.1	5	2.9	0.781
	Ever married	121	70.4	20	11.6	
Years of ex.	≤10	23	13.4	7	4.1	0.003**
	> 10	124	72.1	18	10.4	
Residence	Rural	100	58.2	9	5.2	0.005**
	Urban	47	27.3	16	9.3	
Protect patient rights total		147	85.5	25	14.5	0.000**

(*) significance difference (**) highly statistical significance difference (***) highly statistical significance difference

Table (5): Distribution of Patients Personal Characteristics at Assiut University Main Hospital (No.= 200)

Personal characteristics		No.	%
Gender	Male	92	46.0
	Female	108	54.0
Age	< 40	81	40.5
	40 - < 50	34	17.0
	50 and more	85	42.5
Department:	General Medicine	70	35.0
	General Surgery	70	35.0
	Private sector	60	30.0
Marital status	Single	35	17.5
	Ever Married	165	82.5
No. of admissions	1 st admission	112	56.0
	2 nd admission and more	88	44

Table (6): Distribution of Patients Personal Data and Satisfaction regarding nurse's therapeutic communication skills at Assiut University Main Hospital (No.= 200)

Personal data		Patients Satisfaction				P- value
		Satisfied		dissatisfied		
		No.	%	No.	%	
Gender:	Male	82	41	10	5	0.33
	Female	84	42	24	12	
Age	< 40	65	32.5	16	8	0.353
	40 - < 50	31	15.5	3	1.5	
	50 and more	70	35	15	7.5	
Departments	General Medicine	58	29	12	6	0.000** *
	General Surgery	48	24	22	11	
	Private sector	60	30	0	0	
Marital status	Single	31	15.5	4	2	0.334
	Ever-married	135	67.5	30	15	
Admissions no.	1 st admission	94	47	18	9	0.537
	2 nd admission and more	72	36	16	8	
Total satisfaction		166	83	34	17	0.000** *

(*) significance difference (**) highly statistical significance difference (***) highly statistical significance difference

Table (7): Correlation Matrix between Nurse's Therapeutic Communication Skills, and Protecting Patient's Rights and Patient's Satisfaction at Assiut University Main Hospital (No.= 172)

Therapeutic communication dimension		Preliminary relation	Attention	Understanding	Job duties	Communication skills score	Protect Patient Rights
Preliminary Relation	r-value	1					
	P-value						
Attention	r-value	.571	1				
	P-value	0.000*					
Understanding	r-value	0.526	0.624	1			
	P-value	0.000*	0.000*				
Job duties	r-value	0.590	0.561	0.619	1		
	P-value	0.000*	0.000*	0.000*			
Communication skills score	r-value	0.798	0.843	0.840	0.832	1	
	P-value	0.000*	0.000*	0.000*	0.000*		
Protect Patient rights	r-value	0.483	0.514	0.616	0.450	0.624	1
	P-value	0.000*	0.000*	0.000*	0.000*	0.000*	

Table(8): Multiple Linear Regression Analysis between Patient's Satisfaction, Nurse's Therapeutic Communication Skills, and Protecting Patient's Right at Assiut University Main Hospital (No.=200)

Therapeutic communication dimension	Unstandardized coefficients		Standardized coefficients	t	P-value	95.0% CI	
	B	SE	Beta			Lower	Upper
Preliminary relation	0.713	0.612	0.120	1.164	0.246	-0.496	1.921
Attention	0.251	0.529	0.051	0.475	0.635	-0.792	1.295
Understanding	-0.002	0.617	0.000	-0.003	0.997	-1.219	1.215
Job duties	0.390	0.583	0.071	0.668	0.505	-0.762	1.541
Patient rights	0.041	0.255	0.016	0.162	0.871	-0.462	0.544

Dependent Variable: Patient satisfaction score

Table (1); Showed that highest percentage (**42.5%**) of nurses aged from (30- 40) years old and working at private departments. The majority of study subject were female, married, and had more than ten years of experience (**88.4%, 82%, and 82.6%**) respectively. Also more than two third of nurses were lived in rural area (**67.4%**).

Table (2); Displayed that nurses working at Assiut university Main hospital achieve highest mean score for understanding dimension and the lowest mean score for attention dimension.

Table (3); Revealed that there were a highly statistical significant difference regarding departments, years of experience, residence and nurse's therapeutic communication skill (**0.003**** , **0.003****,**0.002**** and **0.000****) respectively.

Table (4); Ddisplayed that there were a statistical significant difference regarding department, years of experience, residence, and nurse's protection of patient's rights (**0.000*****,**0.003****,**0.005****,**0.000****) respectively.

Table (5); Illustrated that, more than half of patients were female and admitted to the hospital for the first time (**54.0%**, **56%**) respectively. Less than half of them aged less than 40 years old, the majority of them were married and more than two third of

them admitted to general medical and surgical units(**70%**).

Table (6); Revealed the majority of patients (**83%**) were satisfied with nurse's therapeutic communication skills. There were a statistical significance difference regarding departments and patient's satisfaction

Table (7); Depicted that there are positive correlation between nurse's therapeutic communication dimensions as follows; (Preliminary relationship, attention, understanding, and job duties), protection of patient's rights and patient's satisfaction with highly significant difference (**P-value 0.000***).

Table(8): Illustrated the order of nurse's therapeutic communication dimension and protecting patient's rights which impacted positively on patient's satisfaction as follow highest satisfaction level with preliminary relationship followed by job duties, attention, patient rights, lastly understanding (**P-value 0.246, 0.505, 0.635, 0.871, 0.997**) respectively.

Discussion:

Most studies focused entirely on the nurse's perception regarding their therapeutic communication skills and neglecting the patients' perception of the nurses' communication skills²⁸. Although nurses had the clinical and practical

competencies, patients still complaints of communication failure with nurses' because nurses were given patient care but experienced inability to adequately convey a sense of care ²⁹. A lot of nurses not interesting in protecting patient's rights in health care facilities ¹⁸.

There are certain factors nurses may encounter which makes them communicate in non-therapeutic way such as heavy workload, hard and complex nursing tasks, lack of recreation at work, cultural in compatibility, and sex differences between nurses and patients successful and effective healing process requires that all health care team especially nurses who spend the majority of time with patients must develop and maintain therapeutic relationship with patients and must protect patient's rights from any violence³⁰.

The present study results revealed that the highest percentage of nurses aged from (30- 40) years old and working at private sectors (**42.5%**). Also the majority of nurses were female, married, and had more than ten years of experience (**88.4%**, **82%**, **and 82.6%**) respectively. Finally more than two third of them were lived in rural area (**67.4%**). More than half of patients were female and admitted to the hospital for the first time (**54.0%**, **56%**) respectively. Less than half of them aged less than 40 years old, the majority of them

were married, and more than two third of them admitted to general medical and surgical units (**70%**).

As shown in the present study results regarding nurses therapeutic communication dimensions nurses' achieve the highest mean score for understanding dimension while lowest mean score for attention dimension this result go in the same line with³¹ who found that greater understanding were present between nurses and patients with highly significant effect on nurses and patient satisfaction also⁷ agreed with this finding as they found that nurses achieve highest mean score in understanding what patients said and lowest mean score for giving full attention to patients problems and demands.

This result in contrast with study done by³² as they concluded that nurses achieve highest mean score in demonstrating attending behavior and lowest mean score with preliminary relationship.

The results of the present study may be due to nurses try to understand patient's complains, culture, values and needs by a combination of the following behavior; asking patients about well-being, become a good listener to the patient's words, emotion, and body language focuses on the patient perception and preference, not try to judging them, and try to understand his/her needs and problems,

According to the present research finding there were statistical significant effect of departments where nurses works in, nurses years of experience, and nurses residence on nurse's therapeutic communication skills, and protecting patient's rights (table 3,4) this result was congruent with³³ who found that from factors that affect nurses protection of patient rights was years of experience, and work position. Also ³⁴ agreed with the present study as he examined therapeutic communication experienced by nursing students and found that place of residence has significant effect on student's therapeutic communication. Similarly,³⁵ they founded that hospitals department (private and non-private) in Tehran (Iran) have significant statistical differences in protecting patient's rights.

Also this result inconsistent with study done by³⁶as they found that only sex difference between nurses and patients has negative significant effect on nurse's therapeutic communication skills⁸ was in-agreement with the present study as he founded that only culture has significant effect on nurses protection of patient's rights

The results of the present study may due to there's a different in nurses personality at Assiut University Main Hospital as depicted by the present study the more the

years of experiences nurses have the more therapeutic communication skills were developed as nurses become more wiser and good relationship with hospital staff makes nurses satisfied, which in return was reflected in dealing with patients also nurses in private sector achieve higher score than other nurses in developing therapeutic communication skills and protecting patient's rights this may due to in private sector nurses deals with upper and middle social class so they needs special strategies when dealing with them, also regulations and rules which were applied in private sector, finally work load in private sector less than non-private sector, as regard place of residence nurses comes from rural areas communicate more therapeutically and protecting patient's rights than nurses come from urban areas.

As indicated by the research findings there was statistical significant differences regarding departments and patient satisfaction this finding was consistent with ^{37,38} as they founded that patient satisfaction in government hospitals at primary, secondary, and tertiary level less than patient satisfaction in private hospitals. Those finding may due to nurses supervisors and head nurses regularly assess patients satisfaction level in private sector so nurses modify behavior which not acceptable by patients' as any patient

complaint will be considered also, nurses work load were less when compared with non-private sector (free sector) in which nurses experienced high work load which may leads to neglecting patients emotions leads to lower patient satisfaction rate than private sector.

The present study results depicted that there were positive correlation between nurse's therapeutic communication dimensions, protection of patient's rights and patient's satisfaction with highly significant difference. Found that there were congruent with the present study findings as they found nurse's therapeutic communication affect patient's satisfaction with highly statistical significant difference³⁹. Also the result go in the same line with the present study as the author found that there is a positive correlation between nurse's therapeutic communication skills and patient's satisfaction in the emergency unit of the Islamic Hospital Surabaya with highly significant difference⁴⁰. Nurse's therapeutic communication affect positively patient's satisfaction with highly statistical effect⁴¹.

Similar findings by⁴² which were consistent with the present study findings as they found that there were positive correlation between nurse's protection of

patient's rights and patient's satisfaction with highly significant difference.

Conclusions; In the light of the study results, the following conclusions can be drawn:

- As regard nurse's therapeutic communication dimension highest mean score related to understanding and lowest mean score related to attention.
- There were significant effects of the department in which nurse's works in, years of experience, and residence on nurse's therapeutic communication skills.
- There were significant effects of the department in which nurses' works in, years of experience, and residence on nurse's protection of patient rights.
- The majority of patients were satisfied but patients admitted to private sector were achieving highest satisfaction score.
- There were positive correlation between nurse's therapeutic communication, protection of patient's rights and patient's satisfaction with highly significant difference.
- By ordering highest nurse's therapeutic communication dimension that will affect patient's satisfaction was preliminary relationship and the

lowest was understanding

Recommendations; Based on the forgoing conclusions, the following recommendations are proposed:

- Educational programs are necessary to counsel health-care professionals with regard to language, health literacy, and empathetic communication needs
- In-services training for nurses who not communicate in therapeutic way
- Orient patients to be increase their awareness about their rights
- Research report will be given to authorized person At Assiut University Main Hospital

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تأثير التواصل العلاجي للممرضات وحماية حقوق المريض على رضا المرضى

لمحة عامة : التركيز في هذه الايام وبشكل اساسي على التواصل العلاجي للممرضات كمتغيرات أساسية لحماية المرضى من الإجهاد النفسي ، وتعريفهم ببيئة المستشفى. **الهدف من الدراسة :** تحديد تأثير الاتصالات العلاجية للممرضة ، وحماية حقوق المريض على رضا المرضى . **مكان إجراء البحث :** أجريت هذه الدراسة في المستشفى الرئيسي بجامعة أسيوط **العينة:** واشتملت العينة المستهدفة من هذا البحث علي: كل ما هو متاح من التمريض وعددهم (١٧٢) ممرض كما تم اختيار عينة ممثلة عشوائيا من المرضى وعددهم (٢٠٠) مريض. **ادوات البحث :** تم استخدام عدد ٢ استبياناه الاولي استبانة مكونة من ثلاثة أجزاء. تضمنت **الجزء الأول:** استمارة البيانات الشخصية للممرض. **الجزء الثاني:** التواصل العلاجي للممرضات. **الجزء الثالث :** حماية حقوق المريض. الاستبانة الثانية مكونة من جزئين . تضمن **الجزء الأول:** استمارة البيانات الشخصية للمرضى. **الجزء الثاني:** رضا المريض. **النتائج الرئيسية :** حققت الممرضات أعلى متوسط حسابي لفهم مشاعر وأحاسيس المرضى والذي لديهم خبرة في بيئة المستشفى مع معاناة المرض . وكذلك لتلبية احتياجاتهم . كما حققت أقل متوسط حسابي للانتباه لتغيرات المرضى اللفظية والغير لفظية. هناك فروق فردية ذات دالة احصائية بين الاقسام ، سنوات الخبرة ، محل الإقامة ، مهارات التواصل العلاجي و حماية حقوق المرضى. كان أغلب المرضى يشعرون بالرضي في مهارات التواصل لدي الممرضات وحمايتهن لحقوقهم. **الاستنتاجات :** يتواصل معظم الممرضات بطريقة علاجية وأغلب المرضى يشعرون بالرضا عن التواصل العلاجي للممرضات لكن أعلى معدل رضا حققه المرض بقسم العلاج الخاص. **التوصيات :** بناءا علي نتائج البحث يوصي بالاتي: التدريب أثناء الخدمة للممرضين والممرضات لتطوير مهارات الاتصال العلاجي لمن لم يتواصلوا بشكل علاجي. توجيه المريض لزيادة وعيهم بحقوقهم.

الكلمات الأساسية: التواصل العلاجي ، الممرضات ، حقوق المرضى ، رضا المرضى .