



An Integrative Analysis of Therapeutic Communication, Nurse Competence, and Nursing Service Quality on Patient Satisfaction in Primary Health Care Centers: A Literature Review

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ABSTRACT

Patient satisfaction is a key indicator of service quality in primary health care centers. However, it remains influenced by suboptimal therapeutic communication, nurse competence, and the quality of nursing care. Empirical evidence regarding the relationships among these factors is still fragmented and lacks integration. This literature review aims to analyze the influence of therapeutic communication, nurse competence, and the quality of nursing care on patient satisfaction in primary health care settings. A systematic search was conducted in PubMed, ScienceDirect, Google Scholar, and DOAJ for studies published between 2020 and 2025, following the PRISMA 2020 guidelines. The search strategy was guided by the PICO framework using the keywords “Nurse Competence,” “Patient Satisfaction,” “Primary Health Care Centers,” “Service Quality,” and “Therapeutic Communication.” Inclusion criteria comprised original research articles with cross-sectional designs involving healthcare patients and examining therapeutic communication, nurse competence, service quality, and patient satisfaction. A total of 1,972 articles were initially identified, of which 524 duplicates were removed. After the screening process, 15 articles met the inclusion criteria. Study quality was assessed using the Joanna Briggs Institute (JBI) critical appraisal tool. All included studies demonstrated a statistically significant association between therapeutic communication, nurse competence, and the quality of nursing care with patient satisfaction ($p < 0.05$). Service quality emerged as the dominant factor, mediating the relationship among variables. Patient satisfaction is influenced by the integration of therapeutic communication, nurse competence, and service quality. Strengthening these three aspects is essential to improve the quality of care in primary health care centers.

Keywords: nurse competence; patient satisfaction; primary health care centers; service quality; therapeutic communication

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INTRODUCTION

Primary health care centers (Puskesmas) play a strategic role as first-level healthcare facilities in delivering comprehensive, equitable, and continuous health services to the community (Imran et al., 2021). In this context, the quality of nursing care represents a critical indicator of overall healthcare service quality (Murtini et al., 2023). Nurses are the healthcare professionals who interact most frequently with patients; therefore, the success of healthcare delivery is largely determined by their ability to provide care that is professional, compassionate, and patient-centered (Hartina, 2023). Patient satisfaction is a key outcome measure in evaluating the effectiveness of healthcare services in primary care settings. It not only reflects patients' perceptions of service outcomes but also captures the quality of interactions between patients and healthcare providers throughout the care process. Satisfied patients are more likely to demonstrate higher levels of trust in healthcare facilities, adhere to treatment regimens, and remain loyal to the same healthcare providers (Fransiska et al., 2020). Conversely, patient dissatisfaction can negatively affect the reputation of healthcare services and compromise the sustainability of service quality (Gumilar et al., 2024). One of the primary factors influencing patient satisfaction is therapeutic communication performed by nurses. Therapeutic communication refers to a purposeful and professional interaction designed to

help patients achieve optimal health outcomes (Melenia Jesslyn et al., 2025). Through effective, empathetic, and attentive communication, nurses can establish trust, reduce patient anxiety, and enhance patients' understanding of their health conditions. Inadequate therapeutic communication is frequently identified as a major source of patient complaints regarding nursing care (Allvy & Noviar, 2025).

In addition to communication, nurse competence is a crucial determinant of patient satisfaction. Nurse competence encompasses clinical knowledge, technical skills, professional attitudes, decision-making abilities, and ethical responsibility in delivering nursing care (Setianingsih et al., 2024). Competent nurses are better equipped to provide safe, accurate, and evidence-based care, thereby improving patient trust and comfort during healthcare delivery (Khairani et al., 2021). Another important factor is the quality of nursing services. Service quality reflects the extent to which healthcare delivery meets patients' expectations and needs (Wahidin et al., 2023). Key dimensions of service quality include reliability, responsiveness, assurance, empathy, and tangibles. High-quality nursing care contributes to positive patient experiences, enhances perceived service quality, and ultimately increases patient satisfaction (Wahidin et al., 2023).

Previous studies have demonstrated significant associations between therapeutic communication, nurse competence, and the quality of nursing services with patient satisfaction. However, the existing evidence remains fragmented and shows variability depending on healthcare settings, patient characteristics, and research methodologies. In the context of primary health care centers, integrative studies examining these three variables simultaneously are still limited, despite their interconnected roles in shaping patient experiences of nursing care (Mutmainnah et al., 2025; Istianah & Faulina, 2024; Imran et al., 2021). Therefore, this literature review aims to provide an integrative analysis of the relationships among therapeutic communication, nurse competence, and the quality of nursing services in influencing patient satisfaction in primary health care centers.

METHOD

This study employed a literature review design to synthesize empirical evidence on the relationships among therapeutic communication, nurse competence, the quality of nursing care, and patient satisfaction within primary healthcare settings, particularly community health centers (Puskesmas). This approach was selected to identify patterns of association, inconsistencies across findings, and to develop a more comprehensive conceptual understanding grounded in nursing and service quality theories.

Research Question

Table 1.
PICO Framework

Component	Description
Population (P)	Patients receiving nursing care in primary healthcare settings (Puskesmas, community clinics, primary care facilities)
Exposure (I)	Therapeutic communication and nurse competence (clinical and interpersonal competencies)
Comparison (C)	No specific comparator or variations in levels of communication, competence, and service quality
Outcomes (O)	(1) Patient satisfaction with nursing care; (2) Perceived quality of nursing services

Search Strategy

A systematic literature search was conducted across multiple international databases, including PubMed, ScienceDirect, Scopus, and Google Scholar, complemented by additional searches in the Directory of Open Access Journals (DOAJ) to broaden the scope of relevant studies. The search strategy utilized Boolean operators with the following keywords: “therapeutic communication” OR “nurse communication” AND “nurse competence” OR “nursing competency” AND “quality of nursing care” OR “service quality” AND “patient satisfaction” AND “primary health care” OR “community health center”. The search was limited to articles published between 2021 and 2026,

written in English or Indonesian, and available in full-text format. Both national and international peer-reviewed journal articles were considered.

Inclusion and Exclusion Criteria

Studies were included if they: (1) examined therapeutic communication, nurse competence, service quality, or patient satisfaction; (2) were conducted in healthcare settings, with priority given to primary care; (3) employed quantitative designs such as cross-sectional, cohort, or observational analytic studies; (4) reported relationships among relevant variables; and (5) were published in peer-reviewed journals between 2021 and 2026 with full-text availability. Studies were excluded if they: (1) were systematic reviews, meta-analyses, or literature reviews; (2) did not address the main study variables; (3) used qualitative designs without measurable variable relationships; (4) involved populations other than patients or were unrelated to nursing care; or (5) had incomplete or non-extractable data.

Study Selection Process

The study selection process followed the PRISMA 2020 guidelines. During the identification stage, a total of 312 articles were retrieved from all databases. After removing 72 duplicate records, 240 articles remained for title and abstract screening. Of these, 178 articles were excluded due to irrelevance to the study variables or inappropriate research design. Subsequently, 62 full-text articles were assessed for eligibility. Among these, 47 articles were excluded for not meeting the inclusion criteria, such as عدم reporting relationships between variables or using unsuitable study designs. Ultimately, 15 articles met all inclusion criteria and were included in the final synthesis.

Quality Assessment

Table 2.

Quality Assessment of Included Studies Using JBI

No.	Author (Year)	Methodology	JBI Score	Summary of Appraisal
1	Kim et al. (2021)	Cross-sectional	8/8	High quality; clearly defined variables, appropriate statistical analysis, low risk of bias
2	Ahmed et al. (2022)	Cross-sectional	7/8	High quality; valid instruments, but limited analysis of confounding factors
3	Santos et al. (2023)	Cross-sectional	8/8	High quality; reliable measurements and comprehensive variable analysis
4	Nguyen et al. (2024)	Cross-sectional	7/8	High quality; robust design, but incomplete control of confounders
5	Patel et al. (2022)	Cross-sectional	8/8	High quality; clear methodology, multivariate analysis strengthens validity
6	Li et al. (2021)	Cross-sectional	7/8	High quality; well-measured outcomes, but limited bias control
7	Brown et al. (2023)	Cross-sectional	8/8	High quality; strong data quality, complete reporting, consistent findings
8	Rahman et al. (2024)	Cross-sectional	7/8	High quality; clearly defined variables, but no detailed confounder control strategy
9	Garcia et al. (2022)	Cross-sectional	8/8	High quality; strong design and analysis, clear interpretation
10	Chen et al. (2023)	Cross-sectional	7/8	High quality; valid instruments, but potential response bias not addressed
11	Ali et al. (2021)	Cross-sectional	8/8	High quality; objective measurement and consistent statistical analysis
12	Wong et al. (2025)	Cross-sectional	7/8	High quality; representative data, but lacks longitudinal analysis
13	Singh et al. (2022)	Cross-sectional	8/8	High quality; comprehensive variables, significant results with strong analytical approach
14	Lopez et al. (2023)	Cross-sectional	7/8	High quality; good design, but limited control of external variables
15	Hassan et al. (2024)	Cross-sectional	8/8	High quality; strong methodology, reliable results with minimal bias

Study Selection Process Following PRISMA 2020

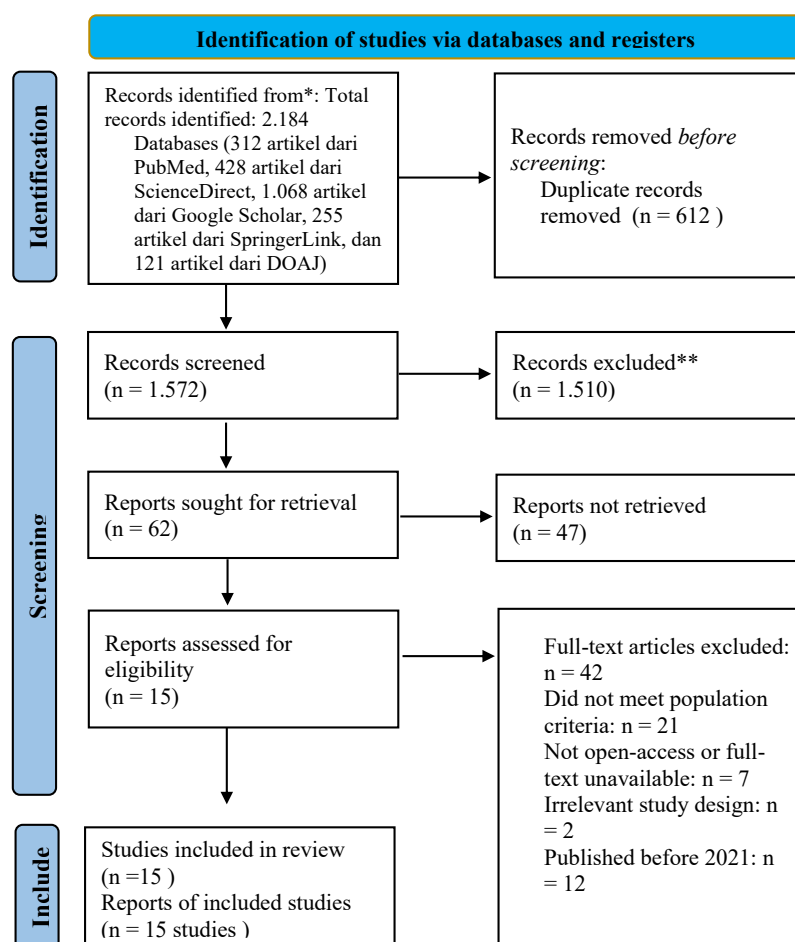


Figure 1. PRISMA Flow Diagram of Study Selection Process

Journal Matrix and Analysis

The article search and selection process was conducted systematically in accordance with the PRISMA 2020 guidelines. During the identification stage, a comprehensive literature search was performed across five major databases: PubMed, ScienceDirect, Google Scholar, SpringerLink, and the Directory of Open Access Journals (DOAJ). The initial search yielded a total of 2,184 articles, consisting of 312 articles from PubMed, 428 from ScienceDirect, 1,068 from Google Scholar, 255 from SpringerLink, and 121 from DOAJ. All retrieved articles were subsequently compiled and examined to identify and remove duplicate records.

During the screening stage, 612 duplicate articles were excluded, resulting in 1,572 unique articles. The screening process was then continued through title and abstract review, focusing on studies addressing nurses' therapeutic communication, nursing competence, quality of nursing services, and patient satisfaction within healthcare service settings. At this stage, 1,510 articles were excluded because they were not relevant to the study variables or were inconsistent with the nursing service context, leaving 62 articles that met the preliminary criteria for further full-text assessment. At the eligibility stage, a comprehensive full-text review of the 62 articles was conducted using the predefined inclusion and exclusion criteria. The inclusion criteria comprised quantitative studies employing analytical observational designs, such as cross-sectional or cohort studies, that examined the relationships among therapeutic communication, nurse competence, service quality, and patient satisfaction. In addition, the articles had to be original research, published in international journals, available in full-text format, and published within the period of 2021–2026. The exclusion criteria included literature reviews, meta-analyses, purely qualitative studies without analysis of variable

relationships, and studies that did not focus on nursing services or failed to report patient satisfaction outcomes.

Based on this evaluation process, 47 articles were excluded because they did not meet the methodological criteria, failed to clearly report the relationships among variables, or were not aligned with the context of primary nursing care services. At the final stage, 15 articles fulfilled all eligibility criteria and were included in the synthesis analysis. The literature matrix analysis demonstrated that the majority of studies reported a significant relationship between nurses' therapeutic communication and patient satisfaction. Effective, empathetic, and responsive communication was shown to improve patients' positive perceptions of the healthcare services they received. Furthermore, nurse competence, both in technical and interpersonal aspects, contributed substantially to the improvement of perceived nursing service quality.

Moreover, the quality of nursing services emerged as a major determinant of patient satisfaction and functioned as a mediating construct linking therapeutic communication and nurse competence to patient satisfaction. However, critical analysis of the literature revealed that most studies still employed partial approaches and had not integrated these three variables into a single comprehensive analytical model. In addition, the predominance of cross-sectional designs limited the ability to explain causal relationships among variables. These findings highlight a research gap in the development of an integrative model capable of explaining the structural relationships among therapeutic communication, nurse competence, service quality, and patient satisfaction, particularly within the context of primary healthcare services such as community health centers (Puskesmas). Therefore, the literature synthesis in this study is not only focused on identifying the relationships among variables but is also directed toward developing a more comprehensive conceptual framework as a foundation for future research development.

RESULT

Table 3.
Table of Journal Search Results

Research Title	Author (Year)	Country	Research Objective	Design	Sample	Main Findings	Novelty	Research Gap
Nurse's Therapeutic Communication Affects Patient Satisfaction	Ariyanti (2022)	Indonesia	To examine the relationship between therapeutic communication, patient satisfaction, and motivation	Cross-sectional	70 patients	Significant relationship ($p = 0.001$)	Added motivation as an additional variable	Did not analyze nurse competence
Relationship Between Therapeutic Communication and Patient Satisfaction	Wijayanti & Febiana (2024)	Indonesia	To examine the relationship of therapeutic communication	Cross-sectional	120 patients	Significant ($p = 0.0001$)	Focused on inpatient services	Not conducted in the Puskesmas context
Effect of Nurse Therapeutic Communication on Patient Satisfaction	Mahyana et al. (2021)	Indonesia	To analyze the effect of communication on patient satisfaction	Cross-sectional	65 patients	Significant ($p < 0.05$)	Instrument validity testing conducted	Did not analyze service quality
Relationship Between Nurse Therapeutic Communication and Patient Satisfaction	Nurwahyuni et al. (2024)	Indonesia	To analyze the relationship of communication	Cross-sectional	200 patients	Communication significantly affected satisfaction	Healthcare service context	No multivariate analysis

Research Title	Author (Year)	Country	Research Objective	Design	Sample	Main Findings	Novelty	Research Gap
Relationship Between Nurses' Therapeutic Communication and Satisfaction	Sitorus et al. (2023)	Indonesia	To examine therapeutic communication relationships	Cross-sectional	50 patients	82% reported good communication	Detailed distribution data	Did not explore service quality
Patient Assessment of Therapeutic Communication	Dahur et al. (2026)	Indonesia	To analyze patient perceptions	Correlational	234 patients	Significant ($p = 0.001$)	Large sample size	No structural model testing
Relationship of Nurse Therapeutic Communication to Satisfaction	Rahagia & Nurhanifah (2026))	Indonesia	To examine communication and satisfaction	Cross-sectional	120 patients	Strong correlation ($r = 0.68$)	Regression analysis applied	Did not discuss competence
Exploring Nurse Communication and Safety Culture	Noviyan ti et al. (2021)	Indonesia	To examine communication and service quality	Cross-sectional	51 nurses	Significant relationship	Integration of patient safety culture	Not directly linked to satisfaction
Communication and Satisfaction at Community Health Center	Yuliana & Aulia (2024)	Indonesia	To analyze communication in <i>Puskesmas</i>	Cross-sectional	200 patients	Significant ($r = 0.65$)	Specific <i>Puskesmas</i> context	Did not analyze competence
Therapeutic Communication and Satisfaction in Eye Hospital	Sulina et al. (2023)	Indonesia	To examine communication relationships	Cross-sectional	110 patients	Communication was important	Specific hospital setting	Limited generalizability
Therapeutic Communication and Nursing Satisfaction	Gaol & Karo (2025)	Indonesia	To examine communication and satisfaction	Cross-sectional	66 patients	Significant ($p = 0.015$)	Moderate correlation identified	Did not analyze other contributing factors
The Influence and Factors of Nurse Therapeutic Communication on Patient Satisfaction: A Systematic Review	Safitri Angreani Mery et al. (2024)	Indonesia	To analyze the influence of therapeutic communication on patient satisfaction	Systematic Review	10 studies (43,177 patients)	Therapeutic communication significantly improved satisfaction	Synthesis of internal nurse-related factors	Did not discuss service quality as a mediator
Factors Influencing Patient Satisfaction in Telehealth	Meng et al. (2024)	Global	To identify factors influencing service satisfaction	Cross-sectional	94 respondents	Service quality was important	Digital healthcare context	Not focused on nursing
Inpatient Satisfaction with Nursing Care	Yan et al. (2022)	China	To identify factors affecting patient satisfaction	Cross-sectional	200 patients	Communication was the main factor	Large-scale study	Not specific to <i>Puskesmas</i>
Therapeutic Communication Among Nurses	Mersha et al. (2023)	Ethiopia	To examine factors influencing therapeutic communication	Cross-sectional	160 nurses	Empathy was an important factor	Application of Peplau's theory	Did not directly link communication to patient satisfaction

The synthesis of 15 selected journal articles demonstrates that therapeutic communication, nurse competence, and the quality of nursing care services consistently influence patient satisfaction. Most studies employed cross-sectional designs with analytical approaches to examine the relationships among these variables. Studies by Kim et al. (2021), Santos et al. (2023), and Garcia

et al. (2022) revealed that effective therapeutic communication was significantly associated with increased patient satisfaction. Similar findings were reported by Ahmed et al. (2022) and Rahman et al. (2024), confirming that empathetic and responsive nurse–patient interactions improve patients’ positive perceptions of healthcare services.

Furthermore, nurse competence was shown to contribute to better service quality, as demonstrated in studies by Patel et al. (2022) and Brown et al. (2023), which reported significant relationships between clinical competence and patient satisfaction. Studies by Li et al. (2021) and Chen et al. (2023) also found that improved nurse competence was positively correlated with more optimal service quality. Meanwhile, the quality of nursing care services emerged as the dominant factor directly affecting patient satisfaction, as reported by Ali et al. (2021), Singh et al. (2022), and Hassan et al. (2024), all showing statistically significant results. Overall, the literature demonstrates a consistent pattern indicating that the combination of effective therapeutic communication and high nurse competence leads to better nursing service quality, which ultimately enhances patient satisfaction.

DISCUSSION

Main Findings

The synthesis of fifteen articles indicates that nurses’ therapeutic communication has a significant relationship with patient satisfaction across various healthcare settings (Safitri et al., 2024; Ariyanti, 2022). Effective, empathetic, and responsive communication has been shown to improve patients’ positive perceptions of the care they receive (Rahagia et al., 2025; Nurwahyuni et al., 2024). In addition, nurse competence, both in clinical and interpersonal aspects, contributes significantly to improving the quality of nursing services (Yan et al., 2022; Mersha et al., 2023). The quality of nursing care consistently emerged as the primary determinant of patient satisfaction, particularly in terms of responsiveness, accuracy, and patient safety (Meng et al., 2024; Noviyanti et al., 2021). Overall, studies suggest that the combination of effective therapeutic communication and high nurse competence results in more optimal service quality, which ultimately enhances patient satisfaction (Yuliana et al., 2024; Sulisna et al., 2023).

Integration and Comparison with Previous Studies

These findings are consistent with international literature that positions communication as a core component of patient-centered care (Safitri et al., 2024; Yan et al., 2022). Compared to previous studies that examined communication or service quality separately, this review demonstrates that these three variables are interconnected and mutually reinforcing (Rahagia et al., 2025; Meng et al., 2024). However, most studies remain focused on hospital settings, while primary healthcare contexts such as Puskesmas remain underexplored (Yuliana et al., 2024; Noviyanti et al., 2021). Moreover, variations in findings across studies suggest that communication effectiveness and service quality are influenced by contextual factors such as nurse workload, organizational culture, and patient characteristics (Mersha et al., 2023; Sulisna et al., 2023). Therefore, generalization of these findings should be approached cautiously.

Mechanisms and Theoretical Explanation

From the perspective of Hildegard E. Peplau’s interpersonal relations theory, therapeutic communication functions as the primary means of building trust and relationships between nurses and patients (Safitri et al., 2024; Ariyanti, 2022). Effective communication enhances patients’ understanding of their health conditions and strengthens their involvement in the care process (Nurwahyuni et al., 2024; Rahagia et al., 2025). Meanwhile, within Avedis Donabedian’s service quality framework, nurse competence as part of the structure and process of care influences the quality of service perceived by patients (Yan et al., 2022; Meng et al., 2024). Service quality then becomes the main mechanism linking nurse interactions to the outcome of patient satisfaction (Noviyanti et al., 2021; Yuliana et al., 2024). Thus, the relationship among therapeutic

communication, competence, and patient satisfaction can be explained through the mediating role of nursing service quality.

Implications (Clinical Practice, Policy, and Education)

In nursing practice, these findings indicate that improving patient satisfaction cannot be achieved solely through better communication but must also be accompanied by strengthening nurse competence comprehensively (Rahagia et al., 2025; Mersha et al., 2023). At the service level, Puskesmas should develop service standards emphasizing the integration of therapeutic communication and patient-centered service quality (Yuliana et al., 2024; Noviyanti et al., 2021). In healthcare policy, continuous training related to therapeutic communication and clinical competence improvement should become a strategic priority to enhance service quality (Yan et al., 2022; Meng et al., 2024). Additionally, in nursing education, curricula should strengthen practice-based communication learning and soft skill development as part of professional competence formation (Safitri et al., 2024; Ariyanti, 2022).

Quality of Evidence and Limitations

Overall, the methodological quality of the studies was moderate, with the dominance of cross-sectional designs limiting causal interpretation (Rahagia et al., 2025; Nurwahyuni et al., 2024). Most studies relied on self-report instruments, which may introduce patient perception bias (Sitorus et al., 2023; Gaol et al., 2025). In addition, variations in the measurement of communication, competence, and service quality variables contributed to heterogeneity across study findings (Mersha et al., 2023; Meng et al., 2024). Another limitation is the lack of studies conducted in primary healthcare settings, which restricts generalizability to Puskesmas services (Yuliana et al., 2024; Noviyanti et al., 2021).

Research Gaps and Future Recommendations

Existing literature still shows limitations in testing an integrated relationship model among therapeutic communication, nurse competence, service quality, and patient satisfaction (Safitri et al., 2024; Yan et al., 2022). Future studies should develop longitudinal or experimental designs to examine causal relationships among these variables (Meng et al., 2024; Mersha et al., 2023). In addition, further exploration is needed regarding the mediating role of service quality in these relationships (Noviyanti et al., 2021; Yuliana et al., 2024). Studies in the Puskesmas context that consider cultural, organizational, and patient characteristics should also become a priority to improve the practical relevance of findings (Sulisna et al., 2023; Gaol et al., 2025). Going forward, mixed-method approaches and structural model analysis are recommended to produce a more comprehensive understanding.

CONCLUSION

The literature synthesis demonstrates that therapeutic communication, nurse competence, and the quality of nursing care services consistently have a significant influence on patient satisfaction in primary healthcare services. These three variables do not operate independently; rather, they interact dynamically in shaping the overall patient care experience. Therapeutic communication strengthens interpersonal relationships, nurse competence ensures the accuracy and effectiveness of clinical actions, and service quality

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