

COMPASSIONATE CARE IN NURSING: A CONCEPT ANALYSIS

*Marivic Ilarde

**Ma. Theresa Salinda

***Francis Vincent Acena

****Maria Criselda Celon

*****Melanie B. Tan

Paper Received: 10.11.2021 / **Paper Accepted:** 30.11.2021 / **Paper Published:** 04.12.2021**Corresponding Author:** Marivic Ilarde; Email: emck.maverick@gmail.com; doi:10.46360/globus.met.320212014**Abstract**

Background: Compassion is the heart of nursing care. The concept of compassionate care is used frequently in the health care setting and in the nursing practice. It has been advocated as a fundamental element in nursing practice and it may be nursing's most precious strong point. However, defining, perceptions and translating compassion into caring practice by nurses vary and it remains remarkably absent from nursing scholarship and the practicalities related to contemporary care delivery models.

Purpose: The aim of the study is to clarify approach for a compassionate care. The concepts of compassion (or compassionate care) remain remarkably absent from nursing scholarship and the practicalities. Provision of compassionate care is more than a professional mandate or a hallmark of a model expressed in theoretical terms; it is the consequence of a genuine connection between a nurse and a patient.

Methods: The method use is a case analysis. This is explored concepts and framework in integrity The eight steps of this method are: 1) Selecting a concept; 2) Determining the aims or purposes of analysis; 3) Identifying all uses of the concept; 4) Determining the defining attributes of the concept; 5) Constructing a model case; 6) Constructing borderline, contrary, invented, and illegitimate cases; 7) Identifying antecedents and consequences; and 8) Defining empirical referent

Result: Compassion is the fundamental characteristic in the quality of nursing care. It is considered as an essential principle of patient-centered care (Nolan, 2013) Compassion is how care is given through relationships based on empathy, respect and dignity. It can also be described as intelligent kindness and is central to how people perceive their care

Conclusion: The concept of compassion inherent in the nursing profession is a significant value. It motivates nurses to act ethically and in a sensitive way while providing care. Compassion is an essential element of good nursing care. Thus, compassionate care is not only a significant part of modern patient care but also a vital function of professional nursing. As with the concept of compassion, there are difficulties with the exact definition of compassionate care, what compassionate care behaviors include, and how provision of compassionate care can be proven or measured. "As a human being, many a nurse will say that it was compassion for others that inspired her to become a nurse" (Schantz, 2007 [32]).

Keywords: Compassion, Compassionate Care, Patient-centered Care, Nursing.

Background

Compassion is customarily referenced as a hallmark of quality care by patients, health care providers, health care administrators, and policy makers. Despite its putative centrality, including its institution in recent health care reform, an empirical understanding based on the perspectives of patients, the recipients of compassion, is lacking-making compassion one of the most referenced yet poorly understood elements of quality care.

Delivering care with compassion and empathy is vital to all healthcare workers, regardless of their specific field. Compassion is a virtue and a necessary trait of nursing and being a nurse (Papadopoulos, 2016 [24]). It is a feeling evoked by witnessing others pain that leads to taking measures to help them (Desteno, 2015 [11]). Compassion is the human and moral part of care, and according to many nursing literatures, compassion is the philosophical foundation and centerpiece of the nursing profession. Being compassionately responsive to the care needs of patients is one of the professional standards of nursing (Papadopoulos, 2016 [26]). Advance practice nurses hold the goal of improving the quality of nursing care by delivering compassionate care to their patients but the vague nature of this term leads to a lack of clarity on how this should be accomplished. An awareness and understanding of the definitions, meanings, attributes, and uses of compassionate care as well as the challenges and changing nature of compassion are essential to develop worthwhile nursing intervention and empirical knowledge for the use during the flight path of patient's illness experience and related treatment and it is hoped that nurses' capacity to provide compassionate care will be enhanced.

Objective

The study aims to understand concepts of

*Graduate School, St. Paul University Philippines, Tuguegarao City, Philippines;

Faculty, College of Nursing, Our Lady of Fatima University, Valenzuela, Philippines.

**Faculty, Institute of Nursing, Far Eastern University, Manila, Philippines.

***Faculty, College of Nursing, Our Lady of Fatima University, Valenzuela, Philippines.

****University of Makati, Makati, Philippines.

*****Faculty, Institute of Nursing, Far Eastern University, Manila, Philippines.

compassionate care are used frequently in the health care setting and in the nursing practice. It has been advocated as a fundamental element in nursing practice and it may be nursing's most precious strong point. However, defining, perceptions and translating compassion into caring practice by nurses vary and it remains remarkably absent from nursing scholarship and the practicalities related to contemporary care delivery models

Methods

This concept analysis was conducted using the Walker and Avant's (2010) eight-step method. This method was used because it is one of the easiest and understandable methods for concept analysis, particularly for beginners. The eight steps of this method are: 1) Selecting a concept; 2) Determining the aims or purposes of analysis; 3) Identifying all uses of the concept; 4) Determining the defining attributes of the concept; 5) Constructing a model case; 6) Constructing borderline, contrary, invented, and illegitimate cases; 7) Identifying antecedents and consequences; and 8) Defining empirical referent (Walker and Avant, 2010).

Results

Uses of Concept

Compassion is the fundamental characteristic in the quality of nursing care. It is considered as an essential principle of patient-centered care (Nolan, 2013) Compassion is how care is given through relationships based on empathy, respect and dignity. It can also be described as intelligent kindness and is central to how people perceive their care. The first item of the code of ethics determined by the American Nurses Association (2001) [1] summons nurses to work with compassion in a way that respects each patient. The ANA code of ethics states, "The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.

Compassion

Compassion, a word derived from the Latin meaning 'to suffer with' has, like empathy, varied and confusing definitions in the literature. The term compassion to mean the sensitivity shown in order to understand another person's suffering combined with a willingness to help and to promote the wellbeing of that person, in order to find a solution to their situation. Compassion is an indispensable part of nursing and patient care. Nurses should feel compelled to exhibit compassion towards patients; its absence can lead to patients feeling devalued

and emotionally precarious. The Turkish word *Merhamet* (Compassion) is derived from the Arabic base *rhm*. The Turkish Language Association (*Türk Dil Kurumu, TDK*) (2006) dictionary defines it as "feeling sadness or pity for someone or another living being when they encounter a bad situation," whereas (Chochinov 2007 [9]) defines it as awareness of the pain of others and the desire to relieve their pain. Compassion requires personally understanding the others' pain. Deeply loyal feelings developed upon seeing the pain experienced by another person create a moral response, desiring to ease the situation of the person. Because of this moral response, the individual suffering from pain receives the care that brings relief. Compassion, which is a response to the pain of the other person, inherently motivates people by creating the desire to act on behalf of someone else. Compassion is essential in the care of vulnerable people. Being compassionate involves recognizing and responding to a vulnerable individual with empathy, while maintaining the dignity of both those receiving care and providing care (Burrige, et. al., 2017 [8]). The humane Noquality of understanding suffering in others and wanting to do something about it. Compassion involves demonstrating characteristics such as empathy, sensitivity, kindness and warmth-and when these are lacking, all too frequently one of the factors that underpins poor care is an attitude to care that is task based rather than person centered care. Task based care is frequently impersonal and not what people want. Instead, they want to be treated with respect, dignity and compassion attributes that cost nothing.

Compassionate Care

In the world of nursing, compassionate care isn't simply about relieving suffering but "entering into a patient's experience and enabling them to retain their independence and dignity."

Wikipedia defines the adjective "compassionate," which implies pitying someone, as "an understanding about the emotional state of someone else or a person." Some other common definitions of the concept of compassionate are "a deep awareness of sympathizing with the pain of others" and "humane characteristic that understands others' pain and tries to do something regarding this subject. Baccalaureate Chinese nursing students defined and characterized compassionate care as a union of "empathy" related to a nurse's desire to "alleviate patients' suffering," "address individualized care needs," "use therapeutic communication," and "promote mutual benefits with patients." Students recognized that the "practice environment" was characterized by nurse leaders' interpersonal relations, role modeling by

nurses and workloads which influenced the practice of compassionate care by nursing personnel.

Discussions regarding compassionate care in nursing are increasing in today's literature (Bivins, et. al., 2017 [5]) scanned the words "compassionate care" in health services literature and found that the concept draws more attention in nursing literature than in a medical journal. Also, compassionate care discussions are generally associated with nursing in popular literature (Harrison, 2009). Providing compassionate care is inherent in the nursing profession, and compassion is a code of conduct guiding professional behaviors. The role of compassion-based care has become important between nurse and patient in recent decades. In literature, compassion is defined as mercy and sympathy along with action and caress. Furthermore, compassion is more than just the necessary care and includes empathy, respect, and recognition of personal characteristics. For nurses and care giving organizations, this means to determine and respect patients' opinions, values, and beliefs. (Willams, 2003)

Compassionate Behaviors

Compassionate behavior requires understanding others' value, establishing a relationship with them, and responding in a way that is meaningful for that person. By nature, compassion is felt during relationships with other people. It is not about the things we choose to do for others but about the things we choose to do with them (Dewar, 2014 [12]). Namely, it requires involving patients in their care, asking their preferences, and acting accordingly. (Roach, 2007) indicated that compassionate care includes acting to help with their aches, fragilities, fears, and pains, even though we do not know those people. (Nussbaum 2001) also stated that compassionate behavior starts with the realization of someone's being in severe pain.

Compassion Satisfaction

Compassion satisfaction is the pleasure and satisfying feeling that comes from helping others. Many people enter these types of fields because they have empathetic attitudes for others difficulties as well as a strong desire to assist in alleviating the difficulties. They are providing healing, encouragement, and support to others who are facing anguish. Examples of these professions include: doctors, nurses, health care workers, pharmacists, teachers, paramedics, police, operators, therapists and many more professions that have continued to attend to their jobs day to day during all that is going on in our world. Compassion satisfaction is coming home from work feeling good about the work we did and

spreading the positivity and encouragement of ongoing work life.

Compassion Fatigue

When workers are faced with constant exposure to stress and traumatic experiences this can contribute to a feeling of reduced job satisfaction. Frontline workers are empathetic which means that whether dealing with good or bad, they are connected to the feelings that others are experiencing. More often than not, especially now, frontline workers find themselves walking alongside more difficult situations, more uncertainty, and less outlets to release those feelings. They are stored within and taken past the time when the job is done. This can lead to both compassion fatigue which in turn can lead to burnout and vicarious trauma. Burnout is the physical feelings of exhaustion, emptiness, and inability to cope with work demands. Vicarious trauma is the emotional residue that is left after working in difficult situations. Compassion fatigue through overwork and excessive demand, and lack of continuity leading to a failure to see the patient as a full human being may all play a part. Support for staff and colleagues are something that everyone working in healthcare can contribute to, and compassionate leaders create compassionate organizations.

Self-Compassion (Inner Compassion)

Self-compassion is a positive attitude we can have towards ourselves, and it's also an empirically measurable construct. Having self-compassion means being able to relate to you in a way that's forgiving, accepting, and loving when situations might be less than optimal. We know that it's similar to (yet less permanent than) self-love and that it's distinct from self-esteem. We practice self-compassion by self-kindness, mindfulness and common humanity. Self-kindness is about showing kindness and understanding toward ourselves when we fail at something, or when we are hurt adapted from the Self-Compassion Scale (SCS), include (Neff, 2010): Giving yourself the tenderness and care you need when you're going through a tough time; Trying to understand and show patience regarding your own perceived personality flaws; and being tolerant of your own shortcomings. Being part of something bigger' is a pervasive concept in positive psychology literature, and it's long been argued that the need for connections is part of human nature. Having Common Humanity means viewing our own individual experiences as embedded in the broader human experience, rather than seeing ourselves as isolated or separate from others (Neff, 2019 [30]). Mindfulness is seen as the opposite of avoidance or over-identification in self-compassion theory-it entails acknowledging and labeling our own thoughts as opposed to reacting to them (Neff, 2016 [29]). When we have self-

compassion, we are aware of our own hurtful thoughts and emotions without blowing up their significance through rumination. Instead, we adopt a positive balance between this over-identification at one extreme, and completely avoiding painful emotions and experiences at the other (Neff, 2016).

Here are the terms related to compassionate care: sensitivity, sympathy, empathy, caring, distress tolerance, and non-judgment.

Sympathy and Empathy

Sympathy is a response to a person's circumstance. Sympathy is a desire to see a patient free from distress and the hope that they can overcome their affliction. Sympathy alienates patients and makes the doctor-patient relationship one-sided, unfriendly and less trustworthy. Sympathy is an emotion caused by the realization that something bad has happened to another person. The triggers of sympathy can be mild discomfort to serious suffering. Sympathy may slide into a feeling of pity or feeling sorry for the other person. Sympathy takes a 'self-orientated' perspective which may arise from an egoistic motivation to help the other person in order to relieve one's own distress. In taking such a self-orientated perspective, the doctor risks being distressed or overwhelmed. (Gladkova, 2010 [18])

Empathy is a complex, multifaceted, dynamic concept which has been described in the literature in many different ways. So, it appears that empathy means different things to different people.

Caring

Caring requires nurses who focus on the relationship with the human being by seeing, understanding and taking responsibility. In professional nursing practice, a common understanding of nursing, caring and an awareness of ethical inner values are necessary. It is therefore important to highlight ideas of caring in nursing that can strengthen nurses' self-reflection on ethical inner values and promote a deeper understanding of caring in nursing practice.

Critical Attributes

The critical attributes are the core of concept analysis is to determine the defining attributes of the concept, i.e. a group of attributes which have the strongest relationship with the concept and allows analyzer to obtain a deep insight. These attributes differentiate the intended concept from similar or related concepts (Walker and Avant, 2010). The literature examined identified compassion in healthcare as comprising of five defining attributes. Although these occur sequentially and each attribute needs to occur, the

individual who is to display compassion may need to move between the attributes depending on the situation. Recognition, connection, altruistic desire, Humanistic Response, and Action.

Recognition

Recognition affirms the value of that employee's action and sets an example for other team members. Receiving recognition can improve job satisfaction, which can reduce turnover and related costs. Recognition can also improve productivity, further reducing costs and improving patient care (Barajas, 2020 [4]).

Compassionate Connection

Creating meaningful, compassionate connections with patients can improve outcomes, promote trust, and help patients feel safe while they're hospitalized. Patients want to feel valued and respected by healthcare providers and we can accomplish this by establishing caring, empathetic, patient-centered relationships. Effective communication happens when we listen carefully to patients, treat them with courtesy and respect, and share information in a way that's understandable (Difiore, 2019 [16]).

Altruism

Altruism is concern for the welfare and well-being of others. In professional practice, altruism is reflected by the nurse's concern and advocacy for the welfare of patients, other nurses, and healthcare providers. Autonomy is the right to self-determination.

Humanistic Response

The humanistic response focuses on the personal worth of the individual, the centrality of human values, and the creative, active nature of human beings. The approach is optimistic and focuses on the noble human capacity to overcome hardship, pain and despair. It looking at the whole individual and stresses concepts such as free will, self-efficacy, and self-actualization. Rather than concentrating on dysfunction, humanistic psychology strives to help people fulfill their potential and maximize their well-being.

Compassion in Action

Compassion in action is the understanding of a problem or the suffering of another and acting to solve the problem or alleviate the suffering. Compassion in action is stepping outside you to do something to connect with and help others.

Model Case

A model case is a "real life" example of the use of the concept that includes all the critical attributes (Walker and Avant 1995). An example of this is

the experience of Kate WHI was deteriorating; she had been diagnosed with advanced cancer and had been admitted to hospital, very ill with a serious infection. Kate was distressed and felt very poorly. The nurse who was looking after her could see how vulnerable and frightened Kate was, so he gently placed his hand on her arm, knelt down beside her bed and said to Kate we're going to look after you. Kate relayed her experiences to her friends and followers on Twitter, tweeting about a number of similar events over the course of her stay as an inpatient. She recalled her nurse ran her bath it was a hot, deep, bubbly bath, just the way she liked it. On another evening she mentioned to the nurse that she had been struggling to sleep to which the nurse had replied don't sit awake in the night, just buzz me and I'll come and sit with you until you fall back to sleep (DOH London, 2013). This case of Kate represents how important a nurse should apply compassionate care to her. Making Kate aware that the nurse will be there every time she needs her and the assurance given to her that she will look after her will definitely give her peace of mind that she will never be alone as she goes through her procedures and her illness as well.

Rolfe, et. al., (2011) [31], state the important of providing care that provides a framework in delivering health care one strategies is to empowers to think critically about their practice and roles in providing care and services that will address the needs of patient.

Borderline Case

Borderline cases contain some of critical attributes of the concept being examined but not all of them (Walker and Avant, 1995). The following is an example of boarder line case "Clive, a therapy radiographer for 20 years, was chatting with a 19-year-old patient called John who was about to start radical radiotherapy for testicular cancer. John was telling him that he'd already had the tumor and his left testicle removed and how he'd had to make the difficult decision as to whether to have his sperm frozen or not before he started radiotherapy. John told Clive that it has sparked him and his girlfriend to think about their futures together and decided to get married. He confessed he was worried and kept on stressing over whether the sperm banking process may not have worked and that he was worried how his fiancé would take the news if this was the case. Clive sat and listened to the young man's fears, ensuring that he knew he was there for him to talk to. Clive fully understood how John was feeling, not only had he treated many patients like John over his professional career, but when he was 22 he had received the same diagnosis so knew what John must have been going through.

Being compassionate is to suffer together with the person, understanding the dilemma, the mockery and ridicule that the person may go through after the procedure. He must realize that he is not alone and somebody understands his situation. And that person who understands him most is a person who experienced the same condition. According to Galvin & Todres (2013) [17], nurse must do everyday practice as nurse must have incorporate patient and relatives at heart of caring and the most important is respect and in the decision making value as human beings.

Antecedent

Antecedents are events which happen before the intended concept (Walker and Avant, 2010). Schantz (2007) [32] succinctly described the primary antecedent of compassionate care in her concept analysis: "for compassion to be realized, suffering must be identified and acknowledged". According to the Dalai Lama, compassion came through morning meditation, dwelling on it throughout the day, and reflecting on it in the evening (Barbauta, 2007). A Christian commentator identified the precursor to compassion simply as "willingness to leave one's comfort zone" (Bloom, 2002). The major antecedent to self-compassion is suffering (Ladner, 2004 [28]). Suffering has been described as "what cannot be put into words but is screaming to be disclosed" (Ferrell & Coyle, 2008). Although the experience of suffering is universal, suffering is also uniquely individual. To list all the permutations of suffering is beyond the scope of this concept analysis. Suffering is an experience characterized by a loss of control that creates insecurity and a feeling of being trapped in the circumstances of suffering (Wada & Park, 2009 [38]). The loss may be evident only in the mind of the suffering person, but it still results in feelings of sadness, despair, loneliness, or anguish (Ferrell & Coyle, 2008). Non acknowledgment that suffering is a part of life increases the nature and intensity of suffering (Thompson & Waltz, 2008 [37]). The six realms of suffering are "states of being" or "life worlds" permeated by suffering and experienced as an event, a situation, an emotional reaction, a psychological condition, spiritual alienation, or a physical response to illness or pain. Examples of events that comprise suffering are loss, death, and abandonment. Situations of suffering include conflict and victimization because of torment, hatred, or anger. Emotional reactions that result in suffering include anxiety, fear, regret, or guilt (Ladner, 2004 [28]). Mental illness is a form of psychological suffering. Inability to cope or loss of autonomy also results in psychological suffering. Spiritual suffering is a result of the individual's feelings of isolation from loved ones, the community, and the person's higher power

(Ladner, 2004 [28]; Wada & Park, 2009 [38]). Loss of personal meaning is another form of spiritual suffering (Ferrell & Coyle, 2008). Physical suffering results from disease, pain, and illness. Physical pain may be associated with the realms of psychological, social, and spiritual distress, but pain is not synonymous with suffering (Ferrell & Coyle, 2008).

Challenges and Barriers in Providing Compassionate Care

Compassionate care can be affected by many factors (Babaei, 2019 [3]). Barriers to compassion in nursing may be influenced by many factors like the prevailing culture and religion of a society, determining the barriers to providing compassion-based care would help nurses to plan better and more appropriate interventions.

At the organizational level and in the context of care, these factors lead to reduction in the quality and quantity of compassionate-based care and include the four subcategories of inconsistency between workload and its allocated time, the organization's inattention to the needs of the nurse, lack of a role model for compassionate behavior, and focus on routines instead of patients. Large number of patients, presence of patients' families in wards, unstable condition of wards, along with insufficient nursing staff will lead to imbalance between the work time and workload of nurses. These factors reduce the chances of compassionate care (Babaei, 2019 [3]).

The sociocultural barriers category indicates barriers that reduce the rate of compassion-based care. This category includes the three subcategories of gender of nurse, lack of a mutual language between the nurse and the patient, and implausibility of friendly approaches in medical relations. Individual barriers show obstacles that could decrease compassionate care at individual levels. This category includes the two subcategories of the personal and professional attitudes of nurses and lack of a holistic approach toward care. From nurses' point of view, external motivations such as income and salary affect compassionate care (Babaei, 2019 [3]).

Sensitivity

Interpersonal sensitivity means being able to display appropriate behaviors and to perceive others accurately. However, if it is not used at an optimum level, it can cause problems in interpersonal relationships. High interpersonal sensitivity leads to feelings of inadequacy and humiliation, feeling unimportant and worthless and mistreated by others. It also leads to self-deprecation and over-monitoring of behaviors to

reduce the risk of public rejection and criticism. When interpersonal sensitivity is very intense and makes the person become tender, it causes one to make mistakes when assessing and judging events and causes feelings of inadequacy in individuals (Wilhelm, 2004)

Distress Tolerance

Distress tolerance is a person's ability to manage actual or perceived emotional distress. It also involves being able to make it through an emotional incident without making it worse. People who have low distress tolerance tend to become overwhelmed by stressful situations and may sometimes turn to unhealthy or even destructive ways of coping with these difficult emotions.

Non-judgment

Nurses should strive to be nonjudgmental when caring for patients. Nonjudgmental, holistic care helps promote well-being and may improve the patient's mental, physical, emotional and spiritual health. While many patients already feel vulnerable in healthcare settings, some patients may feel more vulnerable than others.

Consequences

Conversely, Walker and Avant (2005) defined a consequence resulting from a concept. Selected outcomes of compassionate care were a decrease in suffering and an increase in strength that others (e.g., patients) drew on for healing (Golberg, 1998 [19]) and its ability to bridge the human gap created through suffering. Compassionate care has positive effects on patient outcomes, improving nurses' understanding of involving patients and families in care, the ability to identify the needs of patients and families, and the ability to use appropriate approaches. The consequences of compassionate care include consequences related to care receivers, those related to care providers, and health-related consequences.

Receivers of Care

The patient-centered approach facilitates patients' and families' decision-making and reaching care goals by determining patients and relatives' values and preferences. Patients want to take part in decisions concerning their own health and to be included in their own care plans. Similarly, families also want to have a say in these decisions. Involving patients and families in care is one of the most important elements of compassionate care. Dewar (2011) [13] found that it is important to be staying informed on patients' care, to offer them choices regarding their care and to ask them what they think is important. Sharp, et. al., (2016) [33] investigated patients' perceptions and evaluations of compassionate care and determined that patients

defined compassionate care as a catalyze in their strengthening and involvement in their own care.

Providers of Care

Not only does compassionate nursing care benefit patients, it also has a profound effect on the nurses who practice this vital trait. Nurses who feel a sense of concern for their patient's wellbeing typically enjoy their jobs more than those who focus less on the emotional side of the profession. They are more aware of the pain and fear patients go through, which gives them a sense of connection to their careers. The ability to relate to patients on a deeper level increases compassionate feelings and gives nurses who practice their profession in this manner self-gratification for provided emotional support he impacts of compassion on patients who were suffering was profound. Patient-reported outcomes refer to "the effect of compassion on suffering, patient well-being, and care." Patients did not regard compassion as a panacea to suffering; rather, compassion had ameliorating effects on suffering, while concurrently protecting patient well-being. Although some patients felt that compassion directly improved health outcomes, most felt it primarily enhanced their well-being and the quality of their relationship with their health care providers. In describing the impact of compassion, a number of patients noted negative outcomes resulting from the absence of compassion. These experiences had an equally enduring, albeit detrimental, effect on their well-being and the care giving relationship, often exacerbating suffering in the process.

Health-related Consequence

Research has proven time and again that when caregivers show empathy and kindness, their patients heal faster. While medicine holds the power to cure, care delivered with kindness and compassion can speed the healing process and lead to better outcomes for patients and caregivers alike. Expressing empathy is highly effective and powerful, which builds patient trust, calms anxiety, and improves health outcomes. Research has shown empathy and compassion to be associated with better adherence to medications, decreased malpractice cases, fewer mistakes, and increased patient satisfaction.

Empirical Referents

"Empirical referents are categories of an actual phenomenon that, when present, actually demonstrate the occurrence of a concept itself" (Walker & Avant, 2005, p. 73). Walker and Avant (2005) avowed that empirical referents could interchange with the defining attributes of a concept. For this analysis, the defining attributes and empirical referents of a caring presence,

including the ability to recognize distress and be sensitive to another's suffering, sharing the suffering experience, connecting spiritually, providing comfort measures, and demonstrating the qualities of the Holy Spirit are proposed as one in the same. These seven attributes, if mentioned by patients interviewed after receiving treatment in a setting that practiced compassionate care, would confirm the experience. Without descriptive accounts derived from the lens of patients, the concept of compassionate care would be difficult to articulate. Healthcare Provider Compassion Model depicts the dimensions of compassion and their relationship to one another. Compassion was conceptualized as-a virtuous and intentional response to know a person, to discern their needs and ameliorate their suffering through relational understanding and action. The Healthcare Provider Compassion Model provides a foundation that defines compassion in healthcare and its provision at the bedside. It may lead to the development of clinical tools to cultivate the requisite knowledge, skills, behaviors and qualities to enhance compassionate care to others (Sinclair 2018 [34]).

Conclusion

The concept of compassion inherent in the nursing profession is a significant value. It motivates nurses to act ethically and in a sensitive way while providing care. Compassion is an essential element of good nursing care. Thus, compassionate care is not only a significant part of modern patient care but also a vital function of professional nursing. As with the concept of compassion, there are difficulties with the exact definition of compassionate care, what compassionate care behaviors include, and how provision of compassionate care can be proven or measured. "As a human being, many a nurse will say that it was compassion for others that inspired her to become a nurse" (Schantz, 2007 [32]). The dimension of Health Provider Compassion Model was congruent with the previously developed Patient Compassion Model; further insight into compassion is now evident. The Healthcare Provider Compassion Model provides a model to guide clinical practice and research focuses on developing interventions, measures and resources to improve it. It also provides visual support to enhance understanding; it offers approach as guide in the key concepts, contexts, inter-relationship, influences and outcomes.

To sum it all being a nurse is not an easy task you must be competent, compassionate, committed and confident in what you are doing. Providing compassionate nursing care as the main element in providing quality health services to patients can lead to higher satisfaction in, safer cares, saving time and cost, a sense of satisfaction and

effectiveness in the personnel, higher confidence, and coping skills in them. The nurse must know how to listen and be a keen observant to the patient's needs, figure it out on how will it works effectively. Compassionate care maybe is the best and most valuable gift that a nurse can give the patient. That is why nurses have always tried and been interested in meeting the patient's need through demonstrating altruism and despite all limitations and hurdle.

Conflict of Interest

The authors declares that there are no significant competing financial, professional, or personal interests that might have influenced the performance or presentation of the work described in this manuscript.

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