

What is the ‘Good Nurse’?: An Integrative Literature Review

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ABSTRACT

Background/Objectives: This study aimed to investigate the attributes of the ‘good nurse’ from patients’ and nurses’ perspectives in the literature.

Method: A total of 11 studies were identified from literature search. The data relevant to the characteristics of good nurses was extracted and categorized into two subsets of personality traits and professional competence according to conceptual distinction.

Finding: The characteristics of regardful, humanistic, supportive, and faithful were the most frequently identified personality trait of ‘good nurses.’ The attributes of professional manner, practical competence, patient-centered care, and communication were regarded as the essential professional competence for ‘good nurses.’

Improvements/Applications: The characteristics of ‘good nurses’ identified in this study, including not only the professional competence but also the personality traits, indicate the need to make comprehensive and balanced approach of nursing education for training ‘good nurses.’

Keywords: *character, nurse, perceptions, patient preference, systematic review*

Introduction

The social recognition and role expectations for the profession of nursing have changed since the beginning of nursing history^[1]. The essentials of a good nurse early in the twentieth century included the traditional roles of being a diligent observer and loyal assistant to the doctor^[2]. Conventional wisdom, that all women had a calling in life to take care of others, was associated with the idea of the nurse-as-woman and pervaded society in earlier times^[3]. Until the end of the twentieth century, in the public mind, theoretical knowledge or university-based education was not necessary for nurses, as more importance was placed on nurses’ technical skills^[4].

However, recently, nurses’ roles have greatly expanded from the direct bedside care-giver to the healthcare manager, including acting as a researcher, educator, and healthcare policy participant in promoting patients’ health and well-being^[1].

While the role of a nurse has changed and developed over the past few decades, intrinsic concepts, such as having respect for life, being an advocate for human rights, promoting health, and relieving suffering, remain unchanged as the core obligations and missions of a nurse^[5]. To fulfill those values, a nurse is required to possess inherent personality traits and qualities. According to Park^[6], a nurse who had a desirable personality was usually referred to as a good nurse, and it was important to possess not only practical proficiency but also moral and ethical values. Pfefferkoron^[7] stressed that a nurse who had excellent technical skills could be a good technician but not a good nurse, and asserted the importance of having gracious courtesy in order to be a good nurse.

However, a discussion of what makes a good nurse has not been highlighted in recent years when considering that consumer-oriented nursing services

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have been greatly emphasized within the profession of nursing. Several previous studies mainly explored the level of patient satisfaction regarding nursing services, patient care needs and priorities, or differences in patients' and nurses' perceptions of nursing care^[8,9]. In determining the essential requirements necessary for quality nursing care, the discourse surrounding *good nurses* will play a significant part as a key factor. Patients are experiencing nursing care service within the context of direct nurse-patient relationships and in that, nurses' inherent personal traits can be a remarkable factor that affects patients' satisfaction level with nursing care services^[10,11].

Therefore, it is important to clarify professional competence and personality traits that are required for nurses in accordance with the changing needs of the society in addition to the unique fundamental characteristics of nurses that do not change over time. Clinical environments in recent years have become more complex, and an increasing dependency on medical technology has taken root in the contemporary healthcare system. By investigating patients' and nurses' perceptions of a good nurse, nurses' qualifications that meet the needs of changing society can be identified. Accordingly, this study aims to identify the specific characteristics and qualifications of a good nurse through an integrative review, using the method by Whitemore and Knaff^[12]. The research question of this study was as follows: What are the personality traits and professional competence needs of a good nurse as perceived by patients and nurses?

Method

Literature Search: We conducted a literature search to identify articles published between 2000 and 2017 using databases of PubMed, CINAHL, MEDLINE, research Information Sharing Service. We performed a wide range of search with combinations of key words based on the research questions: *patients, good nurse, nurse, professionalism, character, characteristic, trait, perception, patient preference, perspectives, view, description, and expectations*. Inclusion criteria were as follows: studies that (a) focused on *good nurse* or the characteristics of good nurse from patients' and/or nurses' perspectives; (b) were published in peer-reviewed journals between January 2000 and June 2017, and (c) were published in English or Korean. We

excluded studies about patients' satisfaction, service evaluation, theses or dissertations. We retrieved 76 studies from the databases search and removed 10 studies for duplicates. By reviewing the title and abstract, we removed the irrelevant studies and selected 8 studies for satisfying inclusion criteria by reading the full text of the studies. We added two studies by searching the references manually and selected a total of 11 studies for the systematic review [Figure 1].

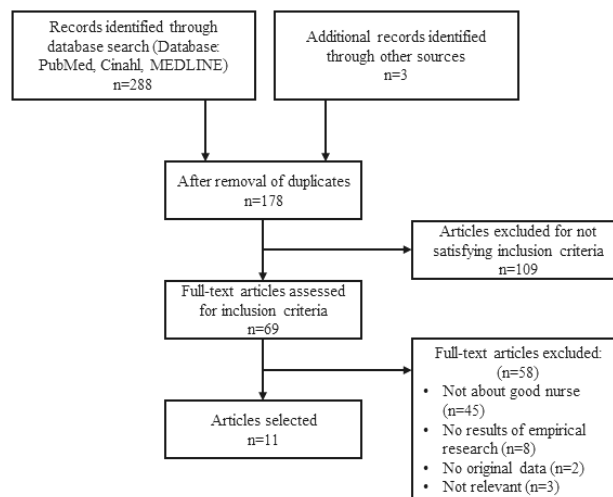


Figure 1: Flow chart of study selection

Data Evaluation: We appraised the study quality using the Mixed Method Appraisal Tool^[13]. The answers to the four criteria applied for each type of study design were summed and converted into a score ranging from 0% to 100%. The final evaluation results were derived from adjusting of the results from the two researchers.

Data Analysis and Presentation

From the final list of selected studies (n=11), we extracted relevant data and categorized them into personality traits and professional competence. This categorization was based on Sumner's description of the nurse self, which is separated into personal self and professional self.^[14] In this study, personality trait was defined as a person's inherent nature or unique characteristic. Professional competence was defined as the ability and power to do something successfully within a profession by using a large amount of experience and knowledge^[15]. We created four subcategories under each of the two groups of data using conceptual similarity. Concepts from each group of data relevant to personality traits and professional competence was depicted using Wordle, which generates an image giving greater prominence to words that appear more frequently in the source text [Figure 2].

Results

Of the 11 included studies, eight studies were conducted on patients while only two studies on nurses. Regarding the study design, eight studies used qualitative study designs, two studies used quantitative study designs, and one study used a mixed method study design. The quality assessment score ranged from 50% to 100%, in which all except two studies had score $\geq 75\%$ ^[A1-A3, A5-A6, A8-A11].

Personality Traits of Good Nurse: Personality traits of a good nurse described in a total of 11 studies were categorized as *regardful* (n=11), *humanistic* (n=9), *supportive* (n=8), *faithful* (n=7). *Regardful* was mentioned most frequently as personality trait of a good nurse and it was described in 11 of the studies [Figure 2]. The attributes of a *regardful* nurse were identified as *respectful*^[A1-A11], *considerate*^[A3, A4, A7, A10], *courteous*^[A1, A3], and *polite*^[A1]. *Humanistic* was important personality trait of a good nurse in nine of the studies. The attributes of a *humanistic* nurse were described as *compassionate*^[A2-A4, A8, A10, A11], *warm*^[A1-A4, A7, A11], *kind*^[A1-A3, A8, A10], *caring*^[A2, A6, A8, A11], *empathetic*^[A1, A2, A10, A11], *selfless*^[A2, A7], *accepting*^[A11], *intimate*^[A2], *friendly*^[A1], *sincere*^[A10], *sympathetic*^[A3], and *willing to help*^[A2].

The attributes of a *supportive* nurse were described as *cheerful*^[A1-A4, A10], *humorous*^[A1-A4, A6], *helpful*^[A1, A2, A11], *positive*^[A2, A10, A11], *fun*^[A1, A6], *reassuring*^[A1, A11], *courageous*^[A2, A6], *giving hope*, and *giving praise*. *Faithful* was represented as personality trait of a good nurse in seven of the studies. The attributes of *faithful* were described as *responsible*^[A2, A3, A8, A9], *honest*^[A1, A2, A9], *trustworthy*^[A1, A10], *ethical*^[A2, A8], *virtuous*^[A4], and *loyal*^[A2].

Professional Competence of Good Nurse: Professional competence of a good nurse described in a total of 11 studies were categorized as *professional manner* (n=11), *practical quality* (n=10), *patient-centered care* (n=10), and *communication* (n=9). Of the subcategories of professional competence, participants emphasized the subcategory *professional manner* most frequently as it appeared in all 11 studies. The attributes of professional manner identified were *calmness*^[A1, A2, A4, A6, A11], *pride*^[A2, A6, A11], *patience*^[A3, A4, A10], *cleanliness*^[A1, A5, A7], *gentleness*^[A1, A3], *dressing in appropriate attire*^[A1, A5], *being a role model*, and *following standards of profession's code of ethics*.

Practical quality was derived from ten studies and included attributes in this category were *knowledge*^[A1-A10],

technical skill^[A1-A4, A6-A8, A11], *experience*^[A2, A4, A6], and *critical thinking*^[A2, A8]. *Knowledge* was most frequently mentioned above all other attributes as it appeared in all 10 studies [Figure 2]. "Critical thinking" was reported in two studies conducted on nurses only^[A2, A8].

Patient-centered care was elicited from 10 studies and identified attributes of patient-centered care were *fulfilling patient's needs*^[A2-A4, A8, A11], *explaining*^[A4, A7, A9-A11], *providing timely care*^[A4-A6, A9], *providing patient education*^[A4, A8, A9], *providing empowerment*^[A9, A11], and *preserving patient's rights*^[A6, A7].

Communication was reported as professional competence in nine of the studies, and its specific attributes were identified as *listening*^[A1, A6-9, A11], *having conversation*^[A1-A3, A7, A9, A11], *establishing rapport*^[A2, A5, A6, A9], and *communicating among healthcare team*^[A3, A5, A9].



Personality traits Professional competence
Figure 2: Characteristics of good nurses perceived by patients and nurses

Discussion

Personality Traits of Good Nurse: The personality trait of a good nurse that carried the most emphasis was *regardful*, and the most important attribute of a *regardful* nurse was *respectful*. Patients stated that they had experienced the loss of identity and existence in hospitals, expressing their strong desire to be respected as a human being^[16]. They felt respected when nurses did not see them as the disease itself and classify them by numbers or symbols, but acknowledged the diversity of individual culture and guaranteed patients' participation in the decision-making process. This is consistent with the fundamental principles of nursing, that the respect for patients is respect for dignity and fundamental rights to life, suggesting that the respect for patients is a moral right granted to patients and a concept that must be upheld in the field^[17].

The second most emphasized trait of a good nurse was *humanistic* and the most important attributes of a *humanistic* nurse were identified as *warm*, *compassionate*

and *kind*. As the concept of marketing increasingly applies to hospital services in recent years, *kindness* is often requested from nurses^[18]. Unlike others in the service sector from whom simple *kindness* is required, being *warm-hearted* and *compassionate* seem to be the more essential and significant qualities for nurses who customarily deal with patients and human lives at work. Patients are exposed to an unfamiliar hospital environment to overcome their medical conditions, and satisfying their basic needs is ensuring psychological stability, which also affects the extent of recovery^[19].

Meantime, the attribute of *ethical* within the category *faithful* was commented by nurses only. This seems to be because nurses are subject to basic training on the principles, concept, and rules of ethics as part of the university curriculum and their compliance with professional ethics is emphasized via code of ethics. Nurses are required to participate as professionals in the decision-making process that can affect the life of patient and be responsible in their actions as the actual advocate for patients^[20].

Professional Competence of Good Nurse: Within professional competence of a good nurse, most emphasis was given to *professional manner* and its representative attribute was *calmness*. A cancer patient indicated that nurses who stayed calm and rational despite the patient's state of panic reassured that the patient could trust the nurses. This implies that patients may be negatively influenced if nurses are emotionally affected by patients or guardians, fail to control their emotion or show anger or tears in their presence^[21], or fail to restrain emotional response by both patients and themselves because they are excessively steered by positive or negation emotions^[19]. To help patients who experience various diseases and instability, nurses will need to find a balance between humanitarianism, *compassion for patients* and *calm, professional manners*.

Practical quality was the second most important competence of a good nurse, only except for a study conducted on psychiatric patients. The representative attribute within *practical quality* was nursing knowledge and skills. This supports today's phenomena^[22] in which nursing education underlines the importance of nursing students acquiring the knowledge and skills. In a study on psychiatric patients, however, it was found that the professional competencies of a *good nurse* included *explanation, ensuring patient participation in the treatment process, attentiveness, and conversation*^[23].

Patient-centered care was identified as professional competence of a good nurse and its specific attributes were *fulfilling patient's needs*, and *explaining*. For patients whose independence has been compromised by the disease, demands for daily life assistance were as important as their demands for professional nursing skills. *Fulfilling patient's needs* was closely related to another attribute, *timely care*. Patients considered it a professional competency when nurses responded immediately to their minor/major demands and were willing to resolve issues.

Of many nursing care activities that fall under patient advocacy, patients prioritized nurses' explanation. Explanation by nurses also ranked top in a study in 1979 on general demands made by inpatients^[24]. The findings of the studies conducted in the 1970s are consistent with those of this study based on recent studies, indicating that patient demands for nurses' explanation have been important to this day.

Lastly, *communication* was derived as professional competence of a good nurse and *listening* was reported as important attribute within *communication*. While many patients wished to engage in personal communication or wanted nurses to expose their personal stories in the process of engaging in patient-nurse conversation or building rapport, the same was not mentioned by nurses. This was similar to previous studies^[15] that reported how nurses believed it to be safe to not reveal their personal stories or life to patients. If nurses could enhance their skills^[25] to take advantage of self-exposure and demonstrate humanitarian empathy and communication for treatment purposes, it could be possible to provide a therapeutic environment in which nurses can build rapport with patients.

Based on the findings of this study, *good nurses* will need to find balance between their character and professional competency and have a mix of nursing qualities, perceived differently by nurses and patients. Therefore, introducing an organic framework for nursing education covering character-building and professional classes in the curriculum is the most important. Meanwhile, the chronic shortage of nurses and other such constraints in Korea prevent nurses, even the ones with all the required qualities, from practicing what they learn in real life. It is therefore imperative that studies be performed to explore the range of practical character-

building education and system and the structural aspect of the clinical settings that undermines the quality of nursing care. Further studies are also required, considering that the perception of a *good nurse* may change by the severity of disease or cultural background.

The limitations of this study are as follows: the number of nurses studied in this paper was smaller than that of the patients, which necessitates additional studies on the comparison between nurses' and patients' perceptions. Additionally, it is necessary to conduct an in-depth study on the comparison of nurses' and patients' perceptions regarding what makes a good nurse by their disease and department as there are only a few studies on this particular topic. Despite its limitations, this paper comprehensively reviewed the studies conducted on participants with specific diseases or in specific wards or departments to better understand the concept of *good nurses* as perceived by patients and nurses. The findings are direct attention to the general trends in the expectations and demands of society and the qualities unique to nurses who deal with patients with specific diseases or in specific wards/departments.

Conclusion

Our study indicated the personality traits and professional competence needs of a good nurse as perceived by patients and nurses. For being a good nurse, it is important to balance personality traits and professional competence. These findings of our study provide a better understanding of the direction of nursing education as well as the structural environments of clinical nursing field.

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Conflict of Interest: Nil

REFERENCES

1. Jeong HS, Yoo YS. Image of nurses as perceived by nursing students and image determinants. *J Korean Acad of Public Health Nurs.* 2010;24(1):29-38. DOI:10.5932/JKPHN.2010.24.1.029
2. Fealy GM. 'The good nurse': Visions and values in images of the nurse. *J Adv Nurs.* 2004;46(6):649-56. DOI:10.1111/j.1365-2648.2004.03056.x

3. Choi SO. The change of nurse's status according to the status of women II: From the post medieval epoche to late modern epoche. *J Korean Acad Nurs.* 1999;29(1):139-49. DOI:10.4040/jkan.1999.29.1.139
4. Scanlan P. *The Irish nurse: A study of nursing in Ireland, history and education 1718-1981.* Ireland: Drumlin Publication; 1991. p.445.
5. Korean Nurses Association. Korean nurses' declaration of ethics [Internet]. Seoul: Korean Nurses Association; 2013[cited 2018 June 21]. Available from: http://en.koreanurse.or.kr/about_KNA/ethical.php (website).
6. Park JH. Need of character education in nursing education. *J Korean Data Anal Soc.* 2013;15(6):3321-32.
7. Pfefferkorn B. The good nurse. *Am J Nurs.* 1932:983-85.
8. Oh SH. A survey on nursing care requirement and nursing service satisfaction of inpatients of comprehensive nursing care service wards [master's thesis]. Busan: Silla University;2017.
9. Yoon SH. A study on the difference in perception of patient and nurse on nursing service [master's thesis]. Ulsan: Ulsan University;2011.
10. Jang OJ, Kim KS. Client's perceptual type on nursing services at positive moment of truth. *J Korean Clin Nurs Res.* 2001;7(2):103-22.
11. Hong SH, Park KS. A study on the personality and job satisfaction of nurses. *J Korean Acad Nurs Adm.* 2002;8(3):489-500.
12. Whittemore R, Knaff K. The integrative review: Updated methodology. *J Adv Nurs.* 2005;52(5):546-53.
13. Pluye P, Robert E, Cargo M, Bartlett G, O'Cathain A, Griffiths S. et al. Proposal: A mixed methods appraisal tool for systematic mixed studies reviews [Internet]. 2011 [updated 2011; cited 2018 July 13]; Available from <http://mixed methods appraisal tool public.pbworks.com> (website).
14. Sumner J. Caring in nursing: a different interpretation. *J Adv Nurs.* 2001;35(6):926-32. DOI:10.1046/j.1365-2648.2001.01930.x

15. National Institute of Korean Language. Korean standard unabridged dictionary [Internet]. Seoul: National Institute of Korean Language [cited 2018 Jun 12]; Available from: http://stdweb2.korean.go.kr/search/List_dic.jsp (website)
 16. Johnson TR. Family matters: A quality initiative through the patient's eyes. *J Nurs Care Qual.* 2000;14(3):64-71. DOI:10.1097/00001786-200004000-00008
 17. Yoo MR. Concept development using hybrid model for the concept, patient respect. *Korean Acad Soc Adult Nurs.* 2003;15(1):137-45.
 18. Kim IS. The role of self-efficacy and social support in the relationship between emotional labor and burn out, turn over intention among hospital Nurses. *J Korean Acad Nurs Adm.* 2009;15(4):515-26.
 19. Park HJ, Chung BY, Kim OH, Kim YK, An HJ, Lee YN, et al. Experience on emotional support of hospital nurses. *Korean J Adult Nurs.* 2008;20(6):852-65.
 20. Jang KS, Lee MH, Kim IS, Hong YM, Ha NS, Kong BH, et al. Ethics of professional nurses. Seoul: Hyunmoonsa; 2009. p. 19-27.
 21. No JY, Ahn HR. Compassion fatigue experience of oncology nurses. *J Korea Acad Industr Coop Soc.* 2016;17(1):304-14. DOI:10.5762/KAIS.2016.17.1.304
 22. Wittig DR. Knowledge, skills, and attitudes of nursing students regarding culturally congruent care of native Americans. *J Transcult Nurs.* 2004;15(1):54-61. DOI:10.1177/1043659603260036
 23. Park SA, Park KW. Integrated study on hospitalization stress experience of schizophrenic patient. *J Korean Converg Soc.* 2018;9(4):397-408. DOI:10.15207/JKCS.2018.9.4.397
 24. Park JH, Suh SR, Jung MS. A study of the general needs of the patients in ward life. *Kyungpook University.* 1979;20(2):483-89.
 25. Kim JY. Relationship between empathic ability and self-disclosure of the psychiatric nurses [master's thesis]. Seoul: Ewha Womans University; 1995.
 26. Kumar NM, Mallick PK. Blockchain technology for security issues and challenges in IoT. *Procedia Computer Science.* 2018 Dec 31;132:1815-23.
- Appendix 1: Reviewed Paper List**
- A1. Brady M. Hospitalized children's views of the good nurse. *Nurs Ethics.* 2009;16(5):543-60. DOI:10.1177/0969733009106648
 - A2. Catlett S, Lovan SR. Being a good nurse and doing the right thing: A replication study. *Nurs Ethics.* 2011;18(1):54-63. DOI:10.1177/0969733010386162
 - A3. Izumi S, Konishi E, Yahiro M, Kodama M. Japanese patients' descriptions of "The good nurse": Personal involvement and professionalism. *Adv Nurs Sci.* 2006;29(2):E14-6. DOI:10.1097/00012272-200604000-00013
 - A4. Jo NO, Hong YS, Han SS, Eom YR. Attributes perceived by cancer patients as a good nurse. *Clin Nurs Res.* 2006;11:149-62.
 - A5. Randall D, Hill A. Consulting children and young people on what makes a good nurse. *Nurs Child Young People.* 2012;24(3):14-9. DOI:10.7748/ncyp2012.04.24.3.14.c9023
 - A6. Randall D, Brook G, Stammers P. How to make good children's nurses: Children's views. *Paediatr Nurs.* 2008;20(5):22-25. DOI:10.7748/paed2008.06.20.5.22.c8257
 - A7. Rush B, Cook J. What makes a good nurse? views of patients and carers. *Br J Nurs.* 2006;15(7):382-85. DOI:10.12968/bjon.2006.15.7.20901
 - A8. Smith KV, Godfrey NS. Being a good nurse and doing the right thing: A qualitative study. *Nurs Ethics.* 2002;9(3):301-12. DOI:10.1191/0969733002ne512 oadoi: 10.1191/0969733002ne 512oa
 - A9. Van der Elst E, Dierckx de Casterle B, Biets R, Rchaidia L, Gastmans C. Oncology patients' perceptions of "the good nurse": A descriptive study in Flanders, Belgium. *Med Health Care Philos.* 2013;16(4):719-29. DOI:10.1007/s11019-013-9469-1
 - A10. Han SS. Korean patients' conceptions of a good nurse. *Korean J Med Ethics Educ.* 2006;9(2):125-42.
 - A11. Haron Y, Tran D. Patients' perceptions of what makes a good doctor and nurse in an Israeli mental health hospital. *Issues Ment Health Nurs.* 2014;35(9):672-79. DOI:10.3109/01612840.2014.897778