

Safe Care or Care Safety? An Important Distinction for Nursing Practice

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Received March 31, 2025; Accepted August 4, 2025; Online Published September 20, 2025

Dear Editor,

Patient safety is a fundamental principle in healthcare, enshrined as a basic right of patients and a core responsibility of nurses. Negligence in ensuring safety can lead to adverse outcomes for patients and healthcare providers alike. Within the discourse on patient safety, two related yet distinct concepts emerge: "safe care" and "care safety." While these terms may appear synonymous, their differences have significant implications for nursing practice. This letter explores these concepts, contrasts their applications, and argues for the prioritization of safe care, supported by empirical evidence and practical examples.¹

1. Safe Care: A Patient-Centered Approach

Safe care refers to the delivery of nursing interventions designed to prevent harm while promoting patient well-being. It emphasizes patient-centered care, ensuring that interventions are tailored to individual needs, effective, and delivered with minimal risk. According to the World Health Organization (WHO), safe care involves avoiding unnecessary harm and fostering a culture of continuous improvement in healthcare systems. This approach integrates risk assessment, clinical practice enhancements, and interdisciplinary communication to strengthen patient safety and outcomes.²

Empirical evidence supports the efficacy of safe care. A cross-sectional study by Dutra and Guirardello found that patient-centered care practices reduced missed care

incidents and improved patient satisfaction in hospital settings. For instance, a hospital implementing safe care protocols, such as individualized pain management plans, reported a 15% reduction in medication errors and a 20% increase in patient-reported trust in nursing staff. These findings underscore the role of safe care in fostering holistic health outcomes while minimizing harm.

2. Care Safety: A Systems-Based Framework

Care safety, in contrast, focuses on the systems, protocols, and procedures designed to protect patients from preventable harm. It emphasizes adherence to standardized practices and operational mechanisms to maintain a safe environment. For example, care safety includes protocols for medication administration, infection control, and equipment sterilization. While critical, an overemphasis on care safety can lead to a compliance-driven approach that prioritizes protocol adherence over individualized patient needs.³

A systematic review by Cho and Steege highlighted that rigid adherence to safety protocols can inadvertently reduce empathetic communication, as nurses may prioritize checklist compliance over patient interaction.⁴ For example, in a surgical unit adhering strictly to care safety protocols, nurses reported reduced time for patient education, leading to lower patient satisfaction scores despite fewer adverse events. This illustrates the potential limitations of a care safety-focused approach.⁵

Table 1. Key Differences between Safe Care and Care Safety

Aspect	Safe Care	Care Safety
Definition	Patient-centered interventions to prevent harm and promote well-being	Systems and protocols to mitigate preventable harm
Focus	Holistic, individualized care	Standardized, compliance-driven practices
Key Components	Interdisciplinary communication, patient involvement, tailored interventions	Checklists, protocols, operational procedures
Strengths	Enhances patient satisfaction, trust, and outcomes	Ensures consistency and reduces systemic errors
Limitations	Resource-intensive, requires training	May overlook empathetic communication and patient-specific needs
Example	Tailored pain management plans reduce medication errors	Standardized hand hygiene protocols reduce infection rates

3. Comparative Analysis

The distinction between safe care and care safety lies in their scope and focus. Safe care is proactive, patient-centered, and holistic, aiming to enhance overall health while preventing harm. Care safety is reactive, systems-oriented, and protocol-driven, focusing on risk mitigation (Table 1).

This comparison highlights that while both concepts are essential, safe care addresses a broader spectrum of patient needs, whereas care safety ensures foundational risk management.

4. Argument for Prioritization

Given the distinctions outlined, safe care should be prioritized over care safety in nursing practice. Safe care's patient-centered approach aligns with the ethical principles of nursing, such as non-maleficence and respect for patient dignity, as outlined in the International Council of Nurses' Code of Ethics. By focusing on individualized interventions, safe care not only reduces harm but also fosters therapeutic relationships, enhancing patient trust and satisfaction. For example, a community hospital implementing safe care through patient involvement in care planning saw a 25% increase in patient-reported trust and a 10% reduction in readmissions.⁶

In contrast, an exclusive focus on care safety may lead to a mechanistic approach that overlooks emotional and psychological patient needs. While care safety protocols are critical for maintaining a baseline of safety, they are most effective when integrated into a broader safe care framework that prioritizes holistic care. Thus, safe care offers a more comprehensive approach to achieving optimal patient outcomes.¹

5. Conclusion

The distinction between safe care and care safety is

critical for nursing practice. Safe care, with its patient-centered focus, promotes holistic well-being, enhances trust, and aligns with ethical nursing principles. Care safety, while essential for risk mitigation, may inadvertently limit empathetic care if overly prioritized. By prioritizing safe care, nurses can deliver ethically sound, effective interventions that address both safety and patient needs. This approach not only improves clinical outcomes but also strengthens the therapeutic nurse-patient relationship, ensuring a robust safety culture in healthcare.

Conflict of Interest Disclosures

The authors declare no competing interests.

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