

TFN EXAM REVIEWER

I. INTRODUCTION TO NURSING THEORY

Nursing Philosophies

1. Florence Nightingale (Mother of Mother Nurses)
 - Nightingale's (1859) "Notes on Nursing" presents the First nursing theory that focuses on the manipulation of the environment for the benefit of the patient.
 - Environmental Philosophy
 - Mother of Modern Nursing
 - Notes on Nursing: What it is and What is not
 - Provided the nursing profession "Legacy of Caring"
2. Jean Watson
 - Human Caring Model
 - Nursing is the application of the art and science of human caring
 - "We are the light in institutional darkness, and in this model we get to return to the light of our humanity"
3. Patricia Benner
 - Nursing: From Novice to Expert Model
 - Five stages of skill acquisition in nursing practice (Novice, Advanced Beginner, Competent, Proficient, Expert)
4. Katie Eriksson
 - Theory of Caritative Caring
 - The act of caring contains the caring elements (faith, hope, love, tending, playing, learning)

Nursing Conceptual Models

1. Martha Rogers
 - Science of Unitary Human Beings
 - "Man is an energy field, in constant contact with the environment"
 - "Man is more than different from the sum of his parts"
2. Dorothea Orem
 - Self-care and Self-care Deficit Model
 - The Three Nursing Systems
 - Wholly Compensatory
 - Partially Compensatory
 - Supportive-educative
3. Imogene King
 - Goal Attainment Theory

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- “Nursing is an interaction process between client and nurse whereby during perceiving, setting goals, and acting on them, transactions occur and goals are achieved”

- 4. Sr. Callista Roy
 - Adaptation Model
 - “Man is a bio-psycho-social system in constant interaction with the changing environment”

- 5. Dorothy Johnson
 - Behavioral System Model
 - The seven subsystems are:
 - Ingestive
 - Eliminative
 - Attachment-Affiliative
 - Dependence
 - Achievement
 - Sexual and Role Identity

- 6. Myra Estrin Levine
 - Conservation Principles: A Model for Health
 - “Holism is maintained by conserving integrity”
 - Four conservation principles
 - Energy
 - Structural Integrity
 - Personals Integrity
 - Social Integrity

Nursing Theories

- 7. Hildegard Peplau
 - The Mother of Psychiatric Nursing
 - Theory of Interpersonal Relationship
 - “Nursing is interpersonal process of therapeutic interaction of between the patient and the nurses”

- 8. Ida Jean Orlando
 - Theory of Deliberative Nursing Process
 - “ The nurse helps patients meet a perceived need that the patients cannot meet for themselves”

- 9. Joyce Travelbee
 - Theory of Human-to-Human Relationship
 - “ Nurses and patients go through several stages to achieve the goal of established nurse-patient relationships

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10. Lydia Hall

- CORE, CARE, CURE Model
 - CORE – therapeutic use of self
 - CARE – nurturance
 - CURE – seeing the patient and family through medical care

11. Faye Glenn Abdellah

- Twenty-One Nursing Problems
- Nursing is an art and a science
- “Nursing is service to individuals, families, society, sick or well”.

12. Virginia Henderson

- Need Theory
- Proposed 14 basic human needs on which nursing care is based

13. Nola Pender

- Health Promotion Model
- “Health promotion involves activities that promote healthful lifestyles, activities, directed toward increasing the level of well-being and self-actualization and ultimately improve quality of life”.

14. Madeleine Leininger

- Theory of Culture Care Diversity and Universality
- “Caring is universal and varies transculturally

15. Margaret Newman

- Theory of Health as Expanding Consciousness
- “Caring is a Moral imperative for nursing. The nurse is a partner with the client rather than the goal setter and outcome predictor”

16. Rosemarie Rizzo Parse

- Theory of Human-Becoming
- “Each choice opens certain opportunities while closing others”
- “The nurse guides the patient in decision-making – not as decision maker”

Theoriest from Other Disciplines

- Abraham Maslow
- Henry Stack Sullivan
- Ludwig Von Bertalanffy
- Kurt Lewin
- Sigmund Freud
- Jean Piaget
- Erik Erikson
- Lawrence Kohlberg

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HIGHLIGHTS OF SIGNIFICANT EVENTS

1. Florence Nightingale
2. The Columbia School
3. The Yale School
4. The 1970's
5. The 1980's
6. The 1990's

2. The Columbia School (The 1950's)

- The need to prepare nurses at the graduate level for administrative and faculty positions was recognized
- The First Graduate
 - Peplaw (1954,1988)
 - Henderson (1955)
 - Hall (1959)
 - Abdellah (1960)

3. The Yale School

- Theoretical thinking focus moved from a problem and functional role to the relationship between the nurse and the patient
- Influenced by the Columbia Teacher's College graduates (Henderson, Orlando, Wiedenbach)
- Theorist of this School
 - Orlando
 - Wiedenbach
 - Levine

4. The 1970's

- It was in this decade that many nursing theories were first presented

5. The 1980's

- Many nursing theories were revised based on the research findings that expanded them.

6. The 1990's

- Research studies that tested and expanded nursing theory were numerous
 - Parse – “Nursing Science Quarterly)
 - Rogers – “Nursing: Science of Unitary, Irreducible Human Beings”
 - Boykin and Schoenhofer – “Nursing as Caring”

Eras of Nursing Knowledge

- Early in the 20th century, nurses saw the need and began to transition from vocation to profession (Alligood, 1994)
- The movement toward professionalism provides a context to understand the emphases of the eras

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Curriculum Era (1900-1940's)

- This era emphasizes on courses included in nursing programs
- The goal is to develop specialized knowledge on higher education

Research Era (1950-1970's)

- This era emphasizes role of nurses and what to research
- The emerging goal is recognition that isolated knowledge do not yield unified knowledge

Graduate Education Era (1960-1970's)

- Emphasizes is caving out an advanced role and basis for nursing practice
- The emerging goal is to focus graduate education on knowledge development

Theory Era (1980-1990's)

- The emphasis is that there are many ways to think about nursing
- The emerging goal is that theories guide nursing research and practice

Theory Utilization Era (21st Century)

- The emphasis is that, nursing theory guides research, practice, education, and administration
- The emerging goal, nursing frameworks produce knowledge (evidence for quality care)

The Meaning of a Discipline versus a Profession

- Discipline
 - Specific to academia
 - Branch of education, a department of leaning
 - Domain of knowledge
- Profession
 - Specialized field of practice founded on the theoretical structure of the science or knowledge of that discipline and accompanying practice abilities

Significance of Nursing Theory for the Discipline

- Dependent on theory for its continued existence
- Taken nursing to higher levels of education and practice
- Knowledge of persons, health and environment forms the basis of recognition of nursing as a discipline

Significance of Nursing Theory for the Profession

- Guides systematic and knowledgeable care
- Quality nursing practice
- Amplifies knowledge development
- Enhances quality of nursing care

Significance of Nursing Theory

- Led to the the recognition of nursing as an academic discipline and a profession.
- Ushered the development of a body of substantive knowledge
- Play vital role in guiding critical thinking in nursing practice
- Informs practice and also that practice informs theory
- Backbone of clinical care
- Quality nursing practice

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II. HISTORY AND PHILOSOPHY OF SCIENCE

- Observation
- Question
- Hypothesis
- Experiment
- Conclusion

Why is Science Important?

- Science 'scientia' meaning knowledge
- It is a method for describing, explaining, and predicting causes or outcomes of interventions
- Scientific activity has helped to establish the evidence we use to guide practice in the delivery of nursing care

Two competing Philosophical perspectives used in science are:

- Rationalism
- Empiricism

Rationalism

- Regards reason as the chief sources and test of knowledge
- The criterion of truth is not sensory but intellectual and deductive. (cause and effect)

Empiricism

- The origin of all knowledge is sensory experience.
- It emphasizes the role of experience and evidence, especially sensory perception in the formation of ideas, and argues that the only knowledge humans have is a posteriori
- Inductive reasoning

The major comparison of rationalism and empiricism

- Rationalism holds that reason is the source of all knowledge.
- Empiricism advocates that senses are the sources of all knowledge

The Early 20th Century views of science and theory:

- Positivism which supports that empirical research and logical analysis were two approaches that would produce scientific knowledge
- Objective truth exists independently of the researcher, and task of science is to discover it – inductive method

Emergent views of science and theory in the Late 20th Century

- Brown (1997) emphasized the history of science was replacing formal logic as the major analytical tool in the philosophy of science.
- Science was a process of continuously building research rather than a products of findings.
- Role of nurses become clearer during the contemporary period
- Nurse now has a vital role in the maintenance of health and survival of the sick

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STRUCTURE AND ANALYSIS OF NURSING KNOWLEDGE

Concept

- Building blocks of theories
- Enhances one's capacity to understand phenomena as it helps define the meaning of a word
- Two Types of Concept:
 - Abstract - indirectly observed or intangible
 - Concrete – directly observed or tangible

Metaparadigm

- Greek “meta” with “paradeigma” – pattern
- Patterns or models to show a clear relationship among the existing theoretical works in nursing
- Metaparadigm for the discipline of nursing:
 - Person – Recipient of nursing care
 - Environment – external and internal aspects of life that influence the person
 - Health – holistic level of wellness that the person experiences
 - Nursing – the actions taken by the nurses on behalf of or in conjunction with human beings

Philosophies of Nursing

- Next knowledge level after metaparadigm
- Set forth the general meaning of nursing and nursing phenomena through reasoning and the logical presentation of ideas.
- Address questions such as the ff:
 - What is nursing?
 - What is the nature of human caring
 - What is the nature of nursing practice
 - What is the social purpose of nursing practice

Examples of Philosophies in Nursing

1. Nightingales's Philosophy of Nursing (1946)

- Provides an answer to the question “What is Nursing?” in her work “Nursing: What it is and What is not”

2. Watson's Philosophy of Nursing (1979)

- Provides a unique approach to nursing in her work, “Nursing: The Philosophy of Science of Caring”

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3. Benner's Philosophy of Nursing (1984)

- Provides a philosophical view of nursing practice that is focused on how the knowledge of practice is acquired and how it is developed overtime.

Conceptual Models of Nursing

- Representation of an idea or body of knowledge based on the own understanding or perception of a person
- Represented thru diagram or in narrative form

Examples of Nursing Models

- Johnsons's Behavioral Systme Model (1980)
- King's Conceptual Model
- Levine's Conceptual Model

What is a Theory

- Meleis (2014), "a conceptualization of some aspect of reality that pertains to nursing, for the purpose of describing, explaining, predicting, or prescribing nursing care.
- Organized system of accepted knowledge that is composed of concepts, propositions, definitions, and assumptions intended to explain a fact, event or phenomena.

Charateristics of a Theory

- Interrelation concepts
- Logical in nature
- Simple but generally broad in nature
- Basis for hypothesis that can be tested
- Increasing the general body of knowledge
- Use by practitioners to guide and improve practice

Components of a theory

- Phenomenon – Describes an idea or responses about an event, a situation, a process, a group of events or a group of situations
- Concept – Helps describe or label phenomena
- Definition – Used to communicate the general meaning of the concepts of the theory
- Assumption – Explains the nature of the concepts, definitions, purpose relationships and structure of a theory

Types of Theories

- Metatheories – are theories whose subject matters are some other theories
- Grand theories – broad in scope and complex require research
- Middle-range theories – more limited scope, less abstraction
- Descriptive theories – first level of theory development
- Prescriptive theories – address nursing interventions and predict

Examples of Nursing Theories

- Orlando's Theory of Nursing Process
- Leininger's Theory of Culture Care Diversity and Universality
- Parse's Theory of Human Becoming
- Newman's Theory of Health as Expaning Consciousness

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Importance of Nursing Theories

- Aim to describe, predict, and explain, the phenomenon of nursing.
- Provide the foundations of nursing practice
- Help to distinguish what should form the basis of practice
- Help provide better patient care, enhanced professional status for nurses, improved communication between nurses, and guidance for research and education.

Purposes of Theories

- In practice
 - Assist Nurses to describe, explain and predict everyday experiences
 - Serve to guide assessment, intervention and evaluation of nursing care
 - Provide a rationale for collecting reliable and valid data
 - Help establish criteria to measure the quality of nursing care
 - Help build a common nursing terminology
 - Enhance autonomy
- In Education
 - Provide a general focus for curriculum design
 - Guide curriculum decisions
- In Research
 - Framework for generating knowledge and new ideas
 - Assist in discovering knowledge gaps in specific field of study

Analysis and Evaluation of Theoretical knowledge in Nursing

- The criteria that are used for analysis of nursing conceptual models and theories
 - Clarity – (How clear is the theory?) refers to the consistency in terms of terminology and structure, diagrams and examples
 - Simplicity – (How simple is the theory) Nurse in practice need simple theory, such as middle range theory to guide practice, the most useful theory provides the greatest sense of understanding
 - Generality – (How general is the theory?) scopes of concepts and purpose within the theory are examined, the broader the scope - the greater the significance of the theory
 - Accessibility – (How accessible is the theory?) addresses the extent to which empiric indicators for the concepts can be identified and what to extent the purpose of the theory can be attained
 - Importance – (How important is this theory?) create understanding that is important to nursing
- Clarity – Is it easy to understand?
- Simplicity – Is it practical?
- Generality – Can it be applied to many situations?
- Accessibility – Can we use it in real nursing practice?
- Importance – Does it really help nursing care?

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Florence Nightingale

- May 12, 1820 in Florence, Italy
- Beautiful, Victorian Lady
- Parents are wealthy and well-travelled
- She was called into service by God (young age)
- 1851 (age 31) – Kaiserwerth, Germany (study nursing)
- Studied for 3 months
- Served the wounded soldiers (Crimean War)
- November 1854 (age 34) – arrived at Scutari, Turkey
- Accompanied by 34 newly recruited nurses
- Died by Typhus or Brucellosis
- She was able to work into her 80's until she lost her vision
- Died in her sleep on August 13, 1910 (90 years of age)

Theoretical Sources for Theory Development (Florence Nightingale)

- Personal, societal, and professional values
- Education
- Aristocratic social status
- Societal changes
- Religious affiliations

Major Concepts and Definitions (Florence Nightingale)

- Defined the following aspects as major areas of physical, social, and psychological environment that the nurses could control
- Viewed the manipulation of the physical environment as a major component of nursing care (use the term surroundings)

Major Concepts and Definitions

1. Health of houses
2. Ventilation and warming
3. Light
4. Noise
5. Variety
6. Bed and bedding
7. Cleanliness of rooms and walls
8. Personal cleanliness
9. Nutrition and taking of food
10. Chattering hopes and advices
11. Observation of the sick
12. Petty management

Health of Houses

- Related to presence of pure air, pure water, efficient drainage, cleanliness, and light

Ventilation and Warming

- Believed that the person who repeatedly breathed his/her own air would be sick or remain sick
- “noxious air” or “effluvia” affect the client’s health
- Offensive source not the smell must be removed
- Room temperature

Light

- The sick needs both fresh air and light – direct sunlight

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- Light has “quiet real and tangible effects upon the human body”
- Lack of environmental stimuli can lead to confusion or “intensive care psychosis”

Noise

- Patients should never be waked intentionally or accidentally during the first part of sleep
- Noises may irritate patients are jewelries worn by nurse, keys, snapping of rubber, gloves, clank of steth against metal bedrails, etc...

Variety

- Critical aspects affecting the patients’s recover
- Need for changes in color and form
- Rotating 10-12 paintings and engravings
- Advocated reading, needlework, writing and cleaning

Bed and bedding

- The bed should be placed in the lightest part of the room
- Caregiver never to lean against, sit upon, or unnecessarily shake the bed.
- Keep bedding clean, neat and dry

Cleanliness of Rooms and Walls

- “the greater part of nursing consists in preserving cleanliness”
- Removal of dust with damp cloth rather than a feather duster
- Clean room is a healthy room

Personal Cleanliness

- Function of the skin is important
- Unwashed skin poisoned the patient
- Bathing and drying the skin provided great relief
- “every nurse ought to wash her hand frequently during the day”

Nutrition and Taking Food

- Individuals desire different foods at different times of the day
- Frequent small servings may be more beneficial to the patient
- No business be done with patient while eating

Chattering hopes and Advices

- Falsely cheer the sick is not helpful
- False hope was depressing
- Heed what is being said by visitors
- Sick persons should hear good news

Observation of the Sick

- “the most important practical lesson than can be given to nurses is to teach them what to observe”
- Obtain complete and accurate information about patients
- Observation not be an end unto itself but a means for assuring that appropriate actions are taken

Petty Management

- Ways to assure that “what you do when you are there, shall be done when you are not there”
- House and hospital needed to be well-managed

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Major Assumptions – Nursing Metaparadigm

A. Environment

- Anything that can be manipulated to place a patient in the best possible condition for nature to act
 - Physical components: ventilation, warmth, light, nutrition, medicine, stimulation, room temp and activity
 - Psychological components: avoiding chattering of hopes and advices and providing variety

B. Person

- The one who is receiving care Dynamic and complex being
 - Envisioned as comprising physical, intellectual, emotional, social, and spiritual components

C. Health

- Believed in prevention and health promotion to nursing patients from illness to health

D. Nursing

- Believed to be spiritual calling
- Nurses were to assist nature to repair the patient

Critique of Nightingale's Environmental Philosophy

Clarity

- Clear and easily understood
- Environment was the main factor that created illness in a patient
- Emphasized the benefit of a good environment
- Nurses' practice includes manipulation of the environment in a number of ways to enhance patient recovery

Simplicity

- Nightingale's objective of setting forth general rules for the practice and development of nursing was met
- Focuses on the manipulation of environment or promote good nursing care

Generality

- Applies in all situations that nursing care is provided
- The universality and timeless of her concepts remain pertinent

Accessibility

- Concepts and relationships within Nightingale's theory are presented as truths rather than as tentative or testable statements
- Practice should be based on observations and experiences

Importance

- Encompass areas of practice, research, and education
- Emphasized "nursing knowledge is distinct from medical knowledge"
- Theory and principles are relevant to the professional identity and practice of nursing

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Nightingale and the Nursing Process

Assessment

- Recommended two essential behaviors by the nurse in the area of assessment:
 - Ask the client what is needed or wanted
 - Observation – used precise and specific observations

Nursing Diagnosis

- Data should be used as the basis for forming any conclusions.
- Client's response to the environment and not the environmental problem
- Reflects the importance of environment to health and well-being of the client

Outcomes and Planning

- Identify nursing actions needed to keep clients comfortable, dry, and in the best state for nature to act on
- Planning is focused on modifying the environment

Implementation

- Takes place in the environment that affects the client and involves taking action to modify that environment
- All factors of the environment should be considered

Evaluation

- Based on the effect of the changes in the environment on the client's ability to regain his health
- Observation – primary method of data collection