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#### **ENSAYOS**

# Theories and models in clinical nursing practice. An impossible relationship?

Teorías y modelos en la práctica enfermera. ¿Un binomio imposible?

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#### **ABSTRACT**

**Introduction**: In the last few decades, Spanish Nursing has suffered several changes that have contributed to a lesser or greater extent to the development of this discipline. However, today there is still a barrier that hinders and delays this development: the equation consisting of theory and practice.

**Development of the subject**. There are several factors which influence the feedback between these two elements and have an impact on the growth that nursing itself undergoes. Nowadays, we are in a period of inflection in which it is necessary to combine both aspects with a dual objective: to put into daily practice the current theoretical models which are available and to base the clinical decisions on scientific evidence which can support our proceedings. Moreover, it is intended that nursing uses its own corpus of knowledge to learn and profit from it in order to develop in all its areas.

**Conclusions**: Nowadays, nursing is immersed in a complex process of conceptualization of its own discipline. There is a wide range of possibilities which must inevitably be accompanied by the acceptance of certain challenges for which individuals must be trained.

#### RESUMEN

**Introducción**. En las últimas décadas la Enfermería española ha sufrido numerosos cambios que han contribuido en mayor o menor medida al desarrollo de la disciplina. No obstante sigue existiendo en la actualidad una barrera que dificulta y retrasa este desarrollo: la ecuación compuesta por teoría y práctica.

<u>Desarrollo del tema</u>. Son diversos los factores que influyen en la retroalimentación entre estos dos elementos, y que repercuten en el crecimiento que experimenta la propia Enfermería. Estamos en la actualidad en un periodo de inflexión en el que es necesario imbricar de una forma efectiva estas dos vertientes, y todo ello con un doble objetivo: aplicar a la práctica diaria los modelos teóricos existentes y disponibles, y fundamentar las

decisiones clínicas en evidencias científicas que respalden nuestras actuaciones. Con todo ello se pretende que la Enfermería utilice su *corpus* propio de conocimientos y sea capaz de nutrirse y de aprovecharlos para su desarrollo en todos sus ámbitos competenciales.

**Conclusiones**: En estos momentos la Enfermería se halla inmersa en un complejo proceso de reconceptualización de la propia disciplina, y se abre un abanico de posibilidades que deberán ir acompañadas inevitablemente de la asunción de ciertos desafíos para los cuales será necesario estar correctamente formados.

#### INTRODUCTION

We tend to define the Nursing practice as a science, in the sense of acquiring knowledge through observation and experimentation, with the practice based in the scientific evidence. It is also considered an art and philosophy, compatible with this scientific conception <sup>[1,2]</sup>.

There is a direct and immediate relationship between the binomial theory and practice, and this is a question that is being widely discussed today as a reference point to place epistemologically Nursing  $^{[2,3]}$ 

In the development of our profession, there are factors related with the theory and the practice that can be problematic and need to be thought, for example, the chronic detachment of these two aspects (some authors [4,5] talk about a divorce between knowledge and practice), and the reality versus the idea of Nursing.

In this sense, it is essential to unify theory and practice to be able to base both in the objective reality and scientific evidences. There are many authors nowadays that stand up for considering Nursing practice as a key piece along the theory for the development of nurses [4-6]. The gap between theory and practice, between researcher and researched subject produces a descontextualizing effect that disables the actions form the point of view of efficiency essential [7]

There is a lack of epistemological concision in Nursing leading to overlapping or to the incorrect location of the discipline in the scientific taxonomy. The main challenge presented is the professional and scientific consolidation, which is intimately linked with the epistemological indefinition and the adoption of methods that contradict the discipline essence's object [8,9].

The Evidence-based Nursing (EBN) makes us think over the epistemological and methodological references in which the clinical practice is based.

Colliere <sup>[1]</sup> stated: tell me what knowledge you apply and I will tell you what type of care you give. It is necessary the research of thinking scenarios around the nursing profession and the institutions where they develop their work. However, transforming the investigation into practice, is a demanding task that requires intellectual strictness and discipline, creativity, clinical judgment, dexterity, organizational intelligence and patience <sup>[10]</sup>.

## **DEVELOPMENT OF THE SUBJECT**

Initially we might wonder about the reason for the need of theories and models for the Nursing practice as a previous step to put them into practice.

The theory provides a scientific knowledge base to be able put into practice our work, and it teaches us to act with common sense.

The theory is capable of describing, explaining, predicting and controlling the phenomena <sup>[11]</sup>. Going deeper in the question, we can observe that the theory helps to analyse the facts as well as enhancing and adapting the care practice and research in nursing.

The professor Zabalegui <sup>[2]</sup> states that "the facts that cannot be experimentally verified are not considered as theoretical facts", so those qualitative aspects of the health and person concept such as attitude and values are immediately discarded because are neither quantifiable nor measurable.

The solution to the conflict points to a coordination between theorist and clinical professionals making the clinical professionals participate in the conceptual development with the purpose of reducing the separation between those two fields. The experience is also necessary to reinterpret the findings and modify the theories, so we insist in the necessity that the theories in nursing should integrate knowledge and practice with two purposes:

- ♣ To involve as many professionals in the development of body of knowledge of the discipline itself.
- ♣ To eliminate the gap between what is learned in the Universities and what is experienced in the daily practise.

Alaf Meleis, during the VII Nursing Investigation Pan-American Colloquium that was held in Bogotá in 2000 <sup>[12]</sup>, defended the idea that until Nursing did not accomplish to harmonize theory and practice, there will be cracks in the knowledge of this discipline.

When we assess the health status of a subject, we find different models that address the interaction between the subject and their environment (Orlando, Kim), evolutionists models centred in the development theory (Peplau), models of human needs (Henderson, Rogers, Orem) or system models (Roy, Newman) [12-14].

In the diagnostic stage there are different taxonomies: NANDA, OMAHA... In the implementation of the Care Plan, we have other taxonomies: NOC, CIPE for the result criteria, NIC, SIGNO project...

From the theoretical point of view, these variety of taxonomies to organize the knowledge body, exalt the discipline, but in the real and daily practice, it can involve confusion that brings on the wrong usage of these tools or the non usage of them. The language that reflects the practice is needed, the practice that frames the theory is needed and the philosophy that guides the caring direction is needed as well.

The professor Sanjuan<sup>[15]</sup> describes some questions that emerge from the relationship between theory and practice:

- Does the practice establish an adequate frame for learning from the experience?
- Does learning from experience enable the professional development and the innovation?
- What theoretical practical base is needed in a professional future to be able to settle
  on it, as it moves on in its path, new knowledge, new skills but also new ways of
  understanding its caring function?

For Schon <sup>[16]</sup> the practice is a privileged space that allows the experiential learning. This learning is produced by the integration of the experience after a period of reflexion and it is distinguished by being individually interpreted, cannot be generalized and is implicit.

The frame that allowed this type of learning is called action investigation, that it can be summarized as a reflexion process in the practice [17-19]. This way, the efficient nursing professional is the one who uses his knowledge, skills and attitude to give clinical judgments and solve problems joining them with the nursing theories with its application to the practice. Therefore what nurses do is based in what nurses know.

The excellence of caring needs frames or reference, it also needs professionals willing to engage and values and power to be able to perform those changes <sup>[20]</sup>. The XXIth century Nursing is immersed in this.

#### SITUATION ANALYSIS. WHAT IS THE SITUATION OF NURSING?

If the science uses the investigation to produce new knowledge, theories, the investigation is preceded by paradigmatic approaches. In the historical evolution of the investigation in Nursing, Polit and Hungler [19] registered its appearance in 1859 with the studies of Florence Nightingale who analysed data about environmental factors that stimulate the physical and environmental media, contributing this way the configuration of quantitative aspects as from substantives or qualitative like the environment or wellbeing.

Between 1900-1923, the Comitee of Studies for the Nursing Education in the USA released the Golmark report <sup>[19]</sup>, which is the historical evidence of observation and investigation. In this decade of 1900 the investigation in Nursing is boosted with the Center of Nursing Investigations in the Walter Reed Army Institute of Research and others.

The investigation in Nursing took a vital turn during this period: nurses started to research themselves, about what is Nursing, what does it do... Liderman <sup>[19,20]</sup> registered the change in orientation in the investigation. A consciousness emerges to generate scientific base for the practice. There is the convincement actually that the bases for the transformation and knowledge are also based from the practice.

What is the biggest challenge that our discipline is facing? It is to strengthen the base of knowledge for the practice of the discipline. Nursing is facing now the challenge to set up its own knowledge through investigation and build its reality from its own perspective. This is its practice and discipline object that is the nursing care [10].

Different disciplines frequently use the SWOT matrix, which can be used to improve the situation, analysing the Strengths, Weaknesses, Opportunities and Threats. In Nursing this is an unpublished concept because it is not used to analyse the situation, but as we are a discipline that nourishes from others, and take advantage of the resources for the professional enrichment, it seems interesting to include this method to assess where we are and where we are going to. This is what is known as marketing of the health care services<sup>[12]</sup>.

#### Weaknesses

- In the health care scope: Dedication almost exclusively to a supply of health care orientated in the resolution of the problem. There is a lack of awareness from the nursing professionals about the necessity of overlaying theory and practice. There is an excessive dominance of the technical biomedical approach that prevents a bigger development of our discipline.
- In teaching: there is a small number of doctorate professionals that can teach future nurses. There is a lack of Nursing professionals that can offer a training from and for Nursing.

- In investigation: there a lack of researching consciousness as an engine that can boost the Nursing science's growth. There is little involvement of the government in the existing research projects. Disconnection between the researched evidence and its application in practice. Lack of interest of the professionals who consider it unnecessary.
- In management: A greater development of the nursing professional as a promoter of the people's health care is needed. There is a lack of consciousness from the professionals about what is and what we are allowed to do with the managing.

#### **Threats**

- In the assistance scope: Coexistence in the daily practice of three figures as care providers: the RGN (Registered General Nurse), medical assistant and Nurse. There is no implication from the Institutions, lack of independence from the classical biomedical model, there is a lack of the implication of the politicians in the nursing claims.
- In teaching: Capturing correctly the EEES philosophy (European Space of superior Education) centred in the pupil and meaningful learning. Misunderstanding of what this change means to the Nursing profession. Uncertain development of the new EEES framework.
- In investigation: Insufficient economical help and government grants for the development of the investigation projects.
- In managing: Low motivation of professionals to undertake uncertain tasks and paths.
  Refusal of certain professional groups to develop Nursing in the field of managing.
  Little involvement of governments and political bodies. Little interest from politicians to strengthen Nursing in this field.

# **Strenghts**

- In the health care scope: Unification of criteria in the comprehensive management of patient care. Development of an own competence framework that guides the care plans. Awareness of the importance of the communication process with the patient and their family in developing the care plan. Management of nursing record systems developed and validated by nurses.
  - Development of protocols and procedures by the nurses themselves, adapting them to the real situation and the environment of the patient. Awareness of the importance of ongoing training as a tool for constant update for a science that changes at breakneck speed.
- In teaching: It has been accomplished an academic Nursing of high level, and there
  are more nurses to contribute to the training of future professionals. Development of
  nursing specialities that pursue a specific vision of certain situations without forgetting
  holism in care.
- In researching: Significant increase in publications by the professional nursing. Awareness of the importance that researching has in the discipline development.
- In management: The nursing management in the centres are at the same level of discussion in the Management Committees that the administrative or medical managers. Modernization of working methods that enable the training of professionals capable of making changes, promoting quality policies ...

### **Opportunities**

- In caring: the patient has to be involved in his health process, making him a participant in his own care plan. Consideration of communication as a basic tool that must guide the Nursing practice in the relationship with the patient and his environment, so it is necessary to develop skills that improve the teamwork. Real and effective integration of a conceptual framework in Nursing practice that underpins the provision of a care plan from the holistic point of view.
- In teaching: Nursing involvement in the training of future professionals, for this is necessary to increase the group of graduate students that are directed to study PHD. Including taking advantage of the new EHEA these concerns in nursing curriculum, so that nursing students take early awareness of the importance of a coherent training based on some evidence and oriented to the integral management of knowledge.
- In researching: Evaluation of the performance of nursing care. Development and validation of actions aimed at health promotion. Full research capabilities that will give us the new EHEA..
- In management: Design, planning and implementation of clinical care units. Correct and continuous training of professionals to offer a better quality of care. Improving the quality of nursing care through the evaluation.

#### CONCLUSIONS

It is observed now a growing awareness of the potential development of nursing science although it is still incipient. It is evident the need for an effective integration between theoretical conceptions or assumptions and its projections about the daily practice. The Evidence-Based Nursing is a response to these concerns and as a solution that seeks to justify the actions of nursing professionals to objectively scientific evidence. The future is full of challenges for our profession, those challenges will structure a Nursing that will not know bounds. The question is whether we are willing to take on these challenges.

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