Nursing models

Application to practice
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by

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with a contribution by Professor Phil Barker
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Anyone who studies history will be able to speak to the singularity of ‘in-vogue’ phenomena, concepts, and/or behaviours; and the history of nursing (or perhaps more accurately nursing science) is no exception. This notion of being ‘in vogue’ captures the idea that some things are said to be in accordance with current ‘social’ fashions or trends; or in the case of nursing, in accordance with nursing fashions or trends. One could construct a cogent case today in 2009 that one such in-vogue concept in nursing is ‘evidence-based’ (or more accurately ‘evidence-informed’) practice. In the UK in the 1980/90s it could be suggested that the so-called ‘nursing process’ was then the ‘in-vogue’ idea. Another phenomenon that might be so categorised (perhaps more so in the USA) could be the so-called ‘nursing diagnosis’. It seems that concepts, practices and phenomena such as these become an integral part of the everyday parlance of nurses and nursing; although it also seems to be the case that the ‘timespan’ of being the in-vogue concept of the day is always limited. It is difficult to examine the history of nursing without seeing evidence that nursing models once occupied the position of being the in-vogue concept of the day, although it is equally accurate to purport that the halcyon days of nursing models are behind us.

It has often been pointed out that nursing models and nursing theory are of limited value if they do not influence practice, and practice without theory is baseless. (Here the authors deliberately conflate the terms nursing theory and nursing models, although we acknowledge and recognise that some nurse theorists would not agree with this stance.) It is therefore surprising that many clinical nurses in the 21st century still do not see the importance of nursing theories. It was not always so, as we pointed out above; there are arguably at least two periods of time in the history of nursing when nursing models were in vogue. In the 1950/60s and then again in the 1980s such models were appreciated, analysed and applied. They underpinned care plans and curricula. However, they were often imposed by managers and implemented rigidly and bureaucratically. These may be some of the reasons why clinical nurses today place less value on nursing models. Whatever the reasons, it is evident that they did indeed appear to ‘fall out of favour’ (just as all in-vogue concepts do).

However, the authors of this book argue that wholesale rejection of nursing models is problematic at best and deleterious to the discipline of nursing at worst. Yet creating another book that examines nursing models, in a climate where they are not currently in vogue; and when there are already in existence some fine examples of scholarly works that appear to focus on the theoretical dimensions of nursing models, would seem the
height of folly. Therefore this book deliberately and purposefully adopts a different emphasis. The authors believe that this book can help revitalise the centrality of nursing theories/models for patient care. It does this by showing how models can influence the way nurses think and act and how the care of patients, their families and communities can be enhanced as a result. Most especially, while acknowledging and valuing the theoretical underpinnings and origins of nursing models, the book focuses on the application of nursing models in clinical practice. Given that nursing is a pragmatic, practice-orientated discipline, it is in such application that the value and utility of nursing models are best experienced.

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The demands of the 21st century challenge nurses to use knowledge to contribute to the health of individuals and the good of society. As a discipline nursing has made great strides in recent decades in knowledge-based practice as theoretical frameworks were developed to guide practice and research. Good, up-to-date literature that reflects these developments makes an important contribution to the use of knowledge in practice. This book makes a significant contribution to the available literature. First, it is a fresh conceptualisation of a book on nursing models. It initially offers a clear and direct discussion of what models are, which can be useful for the neophyte who does not have this background or for the experienced scholar searching for the words to articulate the meaning and significance of nursing models. Higher level concepts such as paradigms are explained and integrated into the reader’s understanding. A brief history provides a context for appreciating the work that has gone before and the challenges that lie ahead.

Secondly, it is a privilege to introduce this book because the design of the chapters allows for in depth applications to many areas of nursing practice. By selecting seven major models the authors succeed in describing and critiquing each model in sufficient detail and clarity for both beginners and advanced readers. By limiting the number of models covered, it is possible to go into depth both on the theoretical application to practice and to give case studies as well as pertinent literature reviews of use of the model in practice as well as in research. The authors provide a teaching instrument that is greatly needed in nursing education in both academic and clinical settings. They have managed to provide the emphasis that is needed to move theory-based practice to a new level.

The chapter authors as a group have responded to the challenge of taking a broad theoretical perspective on nursing practice for individuals, families, and communities. At the same time the details of specific theoretical approaches are addressed. The reader obtains a more comprehensive view of theory-based practice by comparing how each model approaches given clinical situations in settings from the hospital to the home and community. The authors handle issues of different healthcare systems and different cultures in a straightforward manner so that the flow of thought is not interrupted. The work can provide the basis for highlighting the role of nurses in interdisciplinary team approaches to the increasingly complex health challenges of our time.
It is a privilege to have the Roper-Logan-Tierney model for nursing, with which I am connected, included, along with six other well-known nursing models, in this book. It is now nearly a decade since I worked with the late Nancy Roper and our colleague Win Logan to write the monograph that provides a final account of our model, published in the year 2000, exactly 20 years after its original launch in *The Elements of Nursing* (1980). Over the years, this book went through several new editions, it was translated into many different languages, and our model became widely known around the world. Although we now leave others to use and develop our model in ways they find appropriate and helpful, it is still exciting to come across new references to our work.

It takes skill to produce a book that at one level is suitable for nursing students at the beginning of their studies and yet, at another, has sufficient depth and detail to satisfy more advanced students and even experienced practitioners. Each of the chapters that focuses on a particular model starts with a brief history of that model and a profile of the person/s who developed it. Then, in describing each model and analysing its essential parts, the authors draw on the opening chapters in which the nature of nursing models and nursing theory are dissected and discussed. These opening chapters are, in their own right, valuable, but their underpinning of each of the model chapters – and the iteration of nursing’s metaparadigm concepts – is one of the great strengths of the book. Each of the model chapters is brought to a close with examples and/or case studies to demonstrate application of the model and a review of contemporary literature pertaining to the model, the latter providing evidence of its clinical, empirical and theoretical impact.

However, the real challenges, for the authors of this book and for its readers, come in the final chapter, which addresses the question of how a nursing model can be critiqued. The ideas of the late 1980s and early 1990s for the evaluation of nursing models are still pertinent, in particular the ideas and framework developed by Jacqueline Fawcett. However, the authors of this book recognise that evaluation of nursing models now needs to be reconsidered in the contemporary context in which the concept of evidence-based practice has come to dominate nursing and healthcare. At the same time, as the authors describe, there is now a much wider range of research methodologies available for the purpose of evaluation, including the mixing of quantitative and qualitative methods. These advancements in research should be used to advantage, this book argues, in any contemporary evaluation of nursing models.
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