

The Professional Nurse: An Examination of My Philosophy of Nursing

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Author Note

I have neither given nor received, nor will I tolerate others' use of unauthorized aid.

The Professional Nurse

This work serves as an exploration of my concept of what it means to be a professional nurse. More specifically, I explicate my philosophy of nursing and consider how I see myself practicing nursing in the year 2025 in a way that is consistent with this philosophy. In writing this paper, I draw guidance from my experience as a Licensed Practical Nurse, material from cited references, and reflection on the sort of professional I would like to become.

Motive

I believe that it is insufficient to say that those drawn to nursing as a profession, myself included, are so drawn by a sense of altruism and finding fulfillment in serving the needs of others. While this is hopefully true, there are a variety of careers and opportunities where one could help others both in and outside of healthcare. One could work, for example, as an attorney, politician, or as a dental hygienist -- each of these careers offer an opportunity to serve public need. The question, then, is what apart from altruism draws a person to become a professional nurse? My answer is that I find myself in agreeance with the principles of patient advocacy, evidence-based practice, and a holistic approach to patient care central to the practice of nursing and believe that nurses play a unique and integral role in promoting those principles.

Role

What I have learned during my career as a licensed practical nurse is that to be a nurse encompasses so much more than merely offering a skillset. While nurses indeed perform tasks that the general public associates with nursing like starting IVs, changing catheters, administering medications, or changing dressings, these things represent only a fraction of what I do. Hood, I think, does a fine job of drawing attention to the broad nature of the nurse's function and enumerating the roles of the nurse as caregivers, client advocates, teachers, change agents,

coordinators, counselors, and colleagues (Hood 2018a). I believe that the function of the nurse, distilled, is to be whatever it is, within their scope of practice and ethical boundaries, that their client needs them to be. Sometimes that means that I act as my client's liaison with the healthcare system at large. Other times it means offering a hand on a client's shoulder and a listening ear when they need a confidant or help translating technical information in to terms they find more accessible. Occasionally it means unclogging a client's toilet or getting their wife to work. At all times it means maintaining integrity and acting in good faith to be not only a positive force for the well-being of my clients, but a valuable and dependable member of the team my clients depend on to care for them.

In my transition from practice as a licensed practical nurse to practicing as a registered nurse, just as I anticipate my knowledge base to expand I also anticipate an expansion in the roles I am expected to be able to fill. Within an interdisciplinary healthcare team, the professional nurse has the unique opportunity to serve simultaneously as a leader to, collaborator with, and coordinator of the components of that team. As an example, in my own workplace, we have a single RN supervisor overseeing a department of LPNs. While the LPN staff performs the majority of direct client care, the RN supervisor fills other essential roles – forming care plans, overseeing the education of nursing staff and clients, instituting facility policy and protocol for nursing staff, and coordinating the needs and goals of the facility nursing staff with those of other departments within the facility, physicians, and visiting services like physical therapy or hospice. A final essential role of the professional nurse worth considering is that of the student. Hood asserts that effective performance of the variety of roles the nurse fulfills depends on a commitment to lifelong learning (Hood 2018a). I find myself in agreeance with this sentiment. From the beginnings of my nursing education a point that was always stressed by my instructors

was that evidence-based practice is integral to nursing. It thus seems obvious that keeping current and well informed with respect to developments in technology, research on best practices, and changes in law or public policy is imperative to the end of fulfilling the roles of a nurse to the best of the nurse's ability.

The Nursing Metaparadigm

I believe that it is prudent, if one is to contemplate their philosophy of any subject, to give attention to the conceptual basis of that subject. The nursing metaparadigm is an account of four core concepts that constitute the foundation of nursing theory: people, health, environment, and nursing (Hood 2018c). My view is that a nurse's concept of nursing as a profession and the decisions that they make as a clinician ought to be informed by an understanding of these principles. A key part of that understanding is that the nursing metaparadigm represents a complex system, and as such its constituent concepts are better understood as interrelated and variable rather than discrete abstractions (Black 2017). An appreciation of this fact, I believe, lends itself to a heightened appreciation of the utility of holistic models of client care. That is to say, when it is appreciated by the nurse that the metaparadigm is comprised of dynamic systems and designed to be applied adaptively it is natural to appreciate why it is useful to have an adaptable set of core elements – because the objects of our care are individuals and the broader circumstances under which care is delivered are variable, effective delivery of care involves planning that care on an individual basis. While it is important to be cognizant of the concepts of the metaparadigm as parts of a whole, it is useful for the purposes of this paper to give individual consideration to each.

Person/Human Beings. In my view, the scope of the term human beings for the purposes of the nursing metaparadigm is situationally dependent. The component is briefly explained by

Hood as the “recipients of nursing care.” (Hood 2018c, p.132). While this is accurate, it does not, in my view, capture the full significance of the concept. If we understand human beings as open systems, as asserted by Black, we acknowledge the whole person is a sum of all their parts which include the psychological, spiritual, social and cultural aspects of the self (Black 2017). These elements do not occur in a vacuum, nor does the whole person exist in one. Therefore, in my view, when the nurse cares for a patient he or she must evaluate their approach and interventions with consideration of not just the client, but with consideration toward, for instance, the client’s loved ones. For example, suppose you had a client that who would benefit from a low sodium diet but is dependent on their spouse for meal preparation. An effective approach to caring for this patient might then involve providing their spouse with education on reducing dietary sodium.

Health. In discerning a working meaning for the concept of health, Black (2017) asserts that health is best viewed as a continuum and offers the World Health Organization’s 1947 definition of health: “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.” (World Health Organization, 1947, as cited in Black, 2017, p.161). I would suggest these concepts can be adequately combined by describing health, as it pertains to humans, as a continuum of well-being across all constituent facets of the human being. I believe that when we set goals that pertain to health for our patients, when possible or when it is not critical to achieve a particular objective metric under the domain of health, we should avoid thinking of health in a comparative sense. For example, instead of telling clients I would like them to achieve some physical fitness metric relative to other people, I see myself as better serving my clients by setting fitness goals that are realistic for them. I believe this because it has been my experience that patients are easier to motivate when they perceive their goals as

attainable, and it is preferable to me that a client improves their health relative to where they were than makes no improvement or further declines because they were too intimidated to try.

Environment. When considering the concept of environment, it is tempting to think in terms of common usage about the immediate surroundings wherein care is delivered. For the purposes of the nursing metaparadigm the concept is highly context dependent and can be far broader or narrower than immediate surroundings:

Environment includes all circumstances, influences, and conditions that surround and affect individuals, families, and groups. The environment can be as small and controlled as a premature infant's isolette or as large and uncontrollable as the universe. Included in environment are the social and cultural attitudes that profoundly shape human experience.

(Black, 2017, p. 155)

To touch on how this concept benefits the practice of nursing, we again return to the topics of adaptability and holistic care. Consider how we might utilize different concepts of environment while formulating a care plan for a single client. Suppose the client would benefit from increasing cardiovascular activity and reports enjoying jogging in the past. What if the client presently lives in an area where they do not feel safe jogging at night, and is a student without disposable income for a gym membership? Now suppose that you happen to know that the college the student attends has a gymnasium on campus that students may use for free. Having a more complete picture of a client's circumstances, including the different environments a single client may occupy, allows a nurse to generate interventions that are more likely to be effective and beneficial to their clients.

Nursing. Nursing, to me, means the application of the collective body of skills and knowledge that nurses have accumulated to the end of furthering the well-being of their clients.

Far more coherently than I am capable of, Hood describes the science of nursing as follows:

The science of nursing incorporates the study of relationships among nurses, clients, and environments within the context of health. It is also the result of the interrelationships among theory, practice, research, and education. (Hood 2018b, p. 116)

In light of this description, it is perhaps more accurate to define practicing nursing as the act of serving client needs through application of the body of knowledge and technique gleaned from the process of the science of nursing. Whatever the most precise definition of nursing may be, I feel that for my purposes in this paper to ruminate on semantics is to miss the point. My perception of the concept of nursing as it pertains to the nursing metaparadigm can be distilled with a metaphor – if promoting wellness and favorable client outcomes were to play a game of chess, and human beings, environments, and health represent the conditions and factors under which the game is played, to practice nursing is to try to make the best move available under those conditions. Discerning what that hand is under those circumstances is a matter of both knowledge (knowing the rules, what moves you are allowed to make) and experience (which allows the recognition of patterns and likely outcomes, heightens situational awareness, and improves capacity to make effective and efficient decisions).

My Vision of 2025

I would like to say that I have a concrete concept of what my future in nursing will look like – what specialty or environment I may be working in -- but the truth is that I do not, and not for lack of contemplation toward that end. Perhaps, then, it is to my benefit that a career in nursing provides great opportunity for me to change my area of practice if I find that I am

wanting for new challenges and experiences. Throughout my practice as a licensed practical nurse, my background has been in the long term care setting. While my experiences in long term care, and particularly in memory care, have been deeply rewarding, I also feel ready to move on and explore practice in acute care. The best picture I can paint of where I would like to be in 2025 is to be practicing as a registered nurse, and to have a much better idea of where I would like to be in 2030 informed by a few years of experience working in acute care. None of this is to say that I lack any firm ideas about my future practice. For example, I firmly believe that both the area and environment I select to practice in should be selected based on my ability to practice in accordance with my philosophy of nursing within that setting. In other words, I believe that rather than stumbling in to a career course based on a vague notion of what I might like to do and finding a way to integrate my philosophy of nursing in to that role that I should instead start with what I believe and search for opportunities consistent with those beliefs. To that end, I believe I would serve myself well by considering pursuing an advanced practice role – greater autonomy affords a greater ability to shape my practice in a way that is consistent with my values.

Conclusion

To summarize my philosophy of nursing concisely, it would be that I believe nursing should be practiced not merely by a person who has a desire to satisfy their altruism, but by a person who believes in the efficacy of promoting wellness and improving client outcomes through a holistic approach to care. Furthermore, a person who wants to enter the profession of nursing should do so with an understanding that their role is dynamic and multifaceted. Accordingly, they should be prepared to practice adaptively in order to meet challenges effectively and better serve their client as a whole person. Finally, a nurse will enhance their ability to practice and make better decisions as clinicians by basing their philosophy and practice

on an understanding of the nursing metaparadigm. I do not know what my future in nursing looks like yet, but whatever it may be, I have every intention of letting my concept of what a professional nurse is and how they should behave guide me in to a career track that is congruent with that concept.

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References

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