

Anita Finkelman

PROFESSIONAL NURSING CONCEPTS

Competencies for Quality Leadership

FOURTH EDITION

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Cover Design: Kristin E. Parker
Rights & Media Specialist: Wes DeShano
Media Development Editor: Troy Liston
Cover Image (Title Page, Part Opener, Chapter Opener): © Galyna Andrushko/Shutterstock
Printing and Binding: LSC Communications
Cover Printing: LSC Communications

Library of Congress Cataloging-in-Publication Data

Names: Finkelman, Anita, author.

Title: Professional nursing concepts : competencies for quality leadership / Anita Finkelman.

Description: Fourth edition. | Burlington, MA : Jones & Bartlett Learning, [2019] | Includes bibliographical references and index.

Identifiers: LCCN 2017035478 | ISBN 9781284127270

Subjects: | MESH: Nursing | Nursing Care | Nurse's Role | Leadership | United States

Classification: LCC RT82 | NLM WY 100 AA1 | DDC 610.7306/9--dc23 LC record available at https://secure-web.cisco.com/1aggs8pi5mUEqly613RVf_WVhGTTZCTb8ozdujPkEnmUl7dix7plygZ713LJI-IPGwq_gtOWCLeN5TU78nsjU7JgH5XUTjla897Ngq4wGiL46PHe57zj-Nglq04HoujvRhfGPaXKtXhIRnrvLqmj9zPwQO5_jYAVtDB1gwnfAhWM1-dlZINzLZ713h_mx3rwUhShOANt-sQd85Cfkv5f3B64FuMcR TkXcL1UvUnMe_PFFHMDiUMHVhTKpgBrCYrZY09a4lK_rFHwOHLJ5xQ/https%3A%2F%2Floc.gov%2F2017035478

6048

Printed in the United States of America

21 20 19 18 17 10 9 8 7 6 5 4 3 2 1

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Appendix A *Quality Improvement Measurement and Analysis Methods*

Appendix B *Staffing and a Healthy Work Environment*

Appendix C *Getting the Right Position*

Glossary

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Acknowledgments

I thank my family for all of their support of my writing: Fred, Shoshannah, and Deborah. Thank you to Elisabeth Garofalo for her role as developmental editor; Amanda Martin for her guidance in the ongoing editions of this text; Emma Huggard for her hands on management of the project; Wes Deshano for his guidance regarding copyright; the editing team; all the team at JBL who have participated in

this project; and the production team. I also want to recognize all students and faculty I have worked with who taught me so much about what students need to know to practice competently and guidance faculty need to provide effective learning experiences for students in the classroom, simulation, and clinical settings.

Preface

The development of this text is motivated by the need to provide students who are beginning their nursing education or working toward their baccalaureate degree for career development with background information about the nursing profession and the critical healthcare delivery issues that affect our profession. This goal has been the same for all of its editions, but it is even more imperative today as we have experienced changes due to healthcare legislation and as we experience more changes with a new presidential administration. Change is part of health care, and we need to understand where we came from and update ourselves so we can effectively engage in the change process that lies ahead of us. We hear much about healthcare reimbursement in the news, and this is important—but we cannot ignore that we have a healthcare system that needs repair and improvement. Thus, this fourth edition continues to emphasize quality improvement and the nurse's role in quality improvement, ensuring patient-centered care.

Nursing students today are asked to cover much information in their courses and develop clinical competencies in a short period of time. It is critical that each student recognize that nursing does not happen in isolation, but rather it is part of the entire

healthcare experience. Nurses need to assume critical roles in this experience through their unique professional expertise and leadership. They are also members of the interprofessional healthcare team; they must work with others to provide and improve care in a healthcare environment that provides a healthy workplace and a positive patient experience.

This text consists of 14 chapters, divided into four sections. **Section 1** focuses on the profession of nursing. In these chapters, students will learn about the dynamic history of nursing and how the profession developed; the complex essence of nursing (knowledge and caring); nursing education, accreditation, and regulation; and how to succeed as nursing students.

Section 2 explores the healthcare context in which nursing is practiced. Health policy and political action are very important today in health care and in nursing. Students need to know about ethical and legal issues that currently apply to their practice and issues that might apply in the future as registered nurses. Students typically think most about caring for the acutely ill, but the health context is broader than this and includes health promotion, disease prevention, and illness across the continuum of care in the community. Though

nursing is practiced in many different settings and healthcare organizations, the final chapter in this section focuses on acute care organizations, providing students with an in-depth exploration of one type of healthcare organization.

Section 3 moves the discussion to the core healthcare professions competencies that are expected for all healthcare professions. Each chapter in this section focuses on one of the core competencies. Though this section covers these competencies in depth, the competencies are relevant to all the content in this text. The five competencies are (Institute of Medicine, 2003):

1. Provide patient-centered care.
2. Work in interprofessional teams.
3. Employ evidence-based practice.
4. Apply quality improvement.
5. Utilize informatics.

Section 4 brings us to the end of this text, although not to the end of learning. The chapter in this section focuses on the transformation of nursing practice through leadership, connecting the key concepts in the text.

This fourth edition also includes three appendices. The first focuses on quality improvement measurement and analysis methods, providing students with a quick reference for information about quality improvement that can be used throughout the nursing program and to develop their expertise in quality improvement. The other appendices provide students with important information related to staffing and healthy work environments, as well as finding the right job.

Each chapter includes objectives, an outline of the chapter to help organize students' reading, key terms that are found in the chapter and defined in the Glossary, content with headers that apply to the chapter outline, and chapter highlights. A new chapter feature is the Stop and Consider statement found after each major section in a chapter. This statement asks the student to take a break from reading and to reflect on some aspect of the content

just covered. This is not meant to be a question or a summary statement of the preceding content. The end-of-chapter section, Engaging in the Content, includes a number of features to augment student learning. This section expands on features found in the third edition. Discussion Questions, Critical Thinking Activities, and Case Studies provide a variety of methods to examine the chapter content. Some of these may be done by individual students, and others by student teams, either in the classroom or online. The *Electronic Reflection Journal* directs students to develop a log or diary over the course of using the text. The journal can be maintained in students' computers or tablets and updated throughout the course; it can also be expanded as students progress in their nursing program, encouraging them to keep a professional journal for reflection. This process provides students with opportunities to reflect on content, supporting the development of professional self-awareness. Each chapter has two Case Studies with questions. A new feature in this edition is Working Backward to Develop a Case, which allows students to be creative in applying chapter content by using the questions provided to develop a case scenario. Individual students or student teams may develop the case scenario and then exchange the case scenario with other students to use in a traditional case experience—reviewing the scenario and responding to the questions. Above all, this text is patient centered—its content and learning activities for students. Nurses care for and about patients.

Special Note: The Affordable Care Act of 2010 (ACA) is discussed in this text because it has been a major factor in healthcare delivery since 2010. Due to the change in presidential administrations and possible changes in healthcare policy and laws that guide healthcare policy, some of the information in this text about the ACA may change. This is a good example of the need for nurses to remain vigilant to changes in healthcare policy because these changes usually affect nurses and nursing practice.

Information up through June 2017 is accurate, but after this date, the information about ACA may be reflective of past healthcare policy. It is important to understand health policy from past to current policy, and with the ACA and subsequent policy we have a living experience of this need.

Reference

Institute of Medicine. (2003). *Health professions education: A bridge to quality*. Retrieved from <http://www.iom.edu/Reports/2003/Health-Professions-Education-A-Bridge-to-Quality.aspx>

Section 1

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The Profession of Nursing

The first section of this text introduces the nursing student to the profession of nursing. The Development of Professional Nursing: History, Development, and the Nursing Profession chapter reviews the history and development of the nursing profession and what it means for nursing to be a profession. The Essence of Nursing: Knowledge and Caring chapter discusses the essence of nursing, focusing on the need for knowledge and caring and how nursing students develop throughout the nursing education program to be knowledgeable, competent, and caring. The Nursing Education, Accreditation, and Regulation chapter examines nursing education, accreditation of nursing education programs, and regulation of the practice of nursing. The Success in Your Nursing Education Program chapter provides information about the nursing student experience.



Chapter 1

Professional Nursing: History and Development of the Nursing Profession

CHAPTER OBJECTIVES

At the conclusion of this chapter, the learner will be able to:

- Examine key figures, events in nursing history, and critical nursing historical themes within the sociopolitical context of the time.
- Discuss critical professional concepts, professionalism in nursing, and relevance of standards and professional organizations to the nursing profession.
- Describe the current and past image of nursing and related critical issues.

CHAPTER OUTLINE

- Introduction
- From Past to Present: Nursing History
 - The History Surrounding the Development of Nursing as a Profession
 - Early History
 - Rise of Christianity and the Middle Ages
 - Renaissance and the Enlightenment
 - Industrial Revolution
 - Colonization of America and the Growth of Nursing in the United States
 - Nurse Leaders: History in the Making
 - Themes: Looking into the Nursing Profession's History
- Professionalism: Critical Professional Concepts and Activities
 - Nursing as a Profession
 - Sources of Professional Direction
 - Professional Nursing Associations
 - Major Nursing Associations
 - Why Belong to a Nursing Professional Association?
 - Nursing Workforce
 - The Image of Nursing
 - Chapter Highlights
 - Engaging in the Content
 - Discussion Questions
 - Critical Thinking Activities
 - Electronic Reflection Journal
 - Case Studies
 - Working Backward to Develop a Case
 - References

KEY TERMS

Accountability
Autonomy
Code of ethics
Collegueship

Nursing
Professional organization
Professionalism
Responsibility

Scope of practice
Social policy statement
Standards

Introduction

This text presents an introduction to the nursing profession and critical aspects of nursing care and the delivery of health care. To begin the journey to graduation, licensure, and then practice, it is important to understand several aspects of the nursing profession. What is professional nursing? How did it develop? What factors influence the view of the profession? This chapter addresses these questions.

From Past to Present:

Nursing History

It is important for nursing students to learn about nursing history. Nursing's history provides a framework for understanding how nursing is practiced today and the societal trends shaping the profession. The characteristics of nursing as a profession and what nurses do today have their roots in the past, not only in the history of nursing, but also in the history of health care and society in general. Today, health care is highly complex; diagnostic methods and therapies have been developed that offer many opportunities for prevention, treatment, and cures that did not exist even a few years ago. Understanding this development is part of this discussion; it helps us to appreciate where nursing is today and may provide stimulus for changes in the future. "Nursing is conceptualized as a practice discipline with a mandate from society to enhance the health and well-being of humanity" (Shaw, 1993, p. 1654).

The past portrayal of nurses as handmaidens and assistants to physicians has its roots in the profession's religious beginnings, but over time this view of nurses changed. The following sections examine the story of nursing and explore how it developed as a profession.

The History Surrounding the Development of Nursing as a Profession

When nursing history is described, distinct historical periods typically are discussed: early history (AD 1–500), rise of Christianity and the Middle Ages (500–1500), Renaissance (mid-1300s–1600s), and the Industrial Revolution (mid-1700s–mid-1800s). In addition, the historical perspective must include the different regions and environments in which the historical events took place. Early history focuses on Africa, the Mediterranean, Asia, and the Middle East. The focus then turns to Europe, with the rise of Christianity and subsequent major changes that span several centuries. Nursing history expands as British colonists arrive in America, and a new country and environment helped to slowly develop the nursing profession, which at the time was not a profession. Throughout all these periods and locations, wars had an impact on nursing. As a consequence of the varied places and times in which nursing has existed, major historical events, different cultures and languages, varying views on what constitutes disease and illness, roles of women, political issues, and location and environment have influenced these professions. Nursing has probably

existed for as long as humans have been ill; someone always took care of the sick. This does not mean that there was a formal nursing position; rather, in most early cases, the nurse was a woman who cared for ill family members. This discussion begins with this group and then expands to the development and implementation of a formal nursing position and then later to multiple roles and different healthcare settings and recognition of nursing as a profession.

Early History

Early history of nursing focused on the Ancient Egyptians and Hebrews, Greeks, and Romans. During this time, communities often had women who assisted with childbearing as a form of nursing care, and some physicians had assistants. The Egyptians had physicians, and sick persons looking for magical answers would go to them or to priests or sorcerers.

Hebrew (Jewish) physicians kept records and developed a hygiene code that examined issues such as personal and community hygiene, contagion, disinfection, and preparation of food and water (Masters, 2005). This occurred at a time when hygiene was very poor—a condition that continued for several centuries. Disease and disability were viewed as curses and related to sins, which meant that afflicted persons had to change or follow the religious statutes (Bullough & Bullough, 1978).

Greek mythology recognized health issues and physicians in its gods. Hippocrates, a Greek physician, is known as the father of medicine. He contributed to health care by writing a medical textbook that was used for centuries, and he developed an approach to disease that would later be referred to as epidemiology. Hippocrates wrote the Hippocratic Oath (Bullough & Bullough, 1978), which is still recited by new physicians and also influenced the writing of the Nightingale Pledge (see [Exhibit 1-1](#)). The Greeks viewed health as a balance between body and mind—a different perspective from earlier views of health that focused on curses and sins.

Throughout this entire period, the wounded and ill in the armies required care. Generally, during

this period—which represents thousands of years and involved several major cultures that rose and fell—nursing care was provided, but not nursing as it is thought of today. People took care of those who were sick and those going through childbirth, representing an early nursing role.

Rise of Christianity and the Middle Ages

The rise of Christianity led to more structured nursing care, but still it was far from professional nursing. Women continued to carry most of the burden of caring for the poor and the sick. The church set up a system for care that included the role of the deaconess, who provided care in homes. Women who served in these roles had to follow strict rules set by the church. This role eventually evolved into that of nuns, who began to live and work in convents. The convent was considered a safe place for women. The sick came to the convents for nursing care and also received spiritual care (Wall, 2003). The establishment of convents and the nursing care provided there formed the seed for what, hundreds of years later, would become the Catholic system of hospitals that still exists today.

Men were also involved in nursing at this time. For example, men in the Crusades cared for the sick and injured. These men wore large red crosses on their uniforms to distinguish them from the fighting soldiers. The “red cross” later became the symbol for the International Committee of the Red Cross.

Altruism and connecting care to religion were major themes during this period. Even Nightingale continued with these themes in developing her view of nursing. Disease was common and spread quickly, and medical care had little to offer in the way of prevention or cure. Institutions that were called hospitals were not like modern hospitals; they primarily served travelers and sometimes the sick (Kalisch & Kalisch, 1986, 2005).

The Protestant Reformation had a major impact on some of the care given to the sick and injured. The Catholic Church’s loss of power in some areas