

# Nursing theorist grid

[Health & Medicine](#), [Nursing](#)



NursingTheorist Grid Use grid below to complete the Week 4-Nursing Theorists assignment. Please see the “ Nursing Theorists’ Grading Criteria” document, located on the Materials page of the student Web site. Name: Thomas Miller Theorist Selected: Ida Orlando Description of Theory: “ Orlando’s theory is a reflective practice that is based on discovering and resolving problematic situations” (Alligood, 2010, p. 339). This theory is focused on defining the nurse-patient relationship. According to Orlando, the main function of nursing is to determine the needs of the patient and ensure that these needs are met, whether by the nurse or by others.

The patient will have verbal and nonverbal behaviors that clue the nurse into the nature of his or her problems. The nurse must explore these behaviors with the patient to determine the needs that must be met to resolve the problematic situation that the patient presents with. The nurse must also be aware of his or her reactions to the cues the patient presents and must validate these reactions with the patient. It is always possible for the nurse to misinterpret the behaviors of a patient, and form incorrect ideas about what the patient needs.

Validating the behaviors with the patient ensures that the nurse can fulfill the function of nursing, which is to find and meet the patient’s immediate need for help in the immediate situation which results in improvement (Alligood, 2010). The success of the help provided can be evaluated by observing for improvement in the patient’s verbal and nonverbal behavior. These behaviors must also be validated with the patient. This makes this theory dynamic and collaborative. Theory’s Historical background: Orlando

developed her theory in the 1950s after receiving grants for studies integrating mental health concepts into nursing education.

This was the first inductively developed nursing theory. Orlando recorded nurse patient interactions over three years and categorized her records as “good” or “bad” nursing (Alligood, 2010). Orlando conducted a second study where she “assessed the relevance of earlier formulations, educated and evaluated nurses in the use of her formulations, and tested the validity of the theory formulations” (Alligood, 2010, p. 338). This helped her validate her original observations and to extend “her theory to include the entire nursing practice system” (Alligood, 2010, p. 338).

Major theory assumptions related to: Define according to theorist: | How does this concept relate to nursing practice? | How does this concept relate to nursing education? | Person To Orlando, a person is a unique individual with his or her own behaviors and perceptions that are related to the context in which those behaviors and perceptions occur. Each person has his or her own needs that must be met and these needs change depending on the context and perceptions of that person. Each person is also the only one able to verify if his or her behavior means what it appears to mean.

In the context of the nurse-patient relationship, a person is an individual who needs help in order to have his or her needs met. The unique patient behavior provides cues to indicate the needs that must be met. | “Improvement, according to Orlando (1990), is the goal of the nursing process” (Faust, 2002, p. 15). Because the individual is unique, each patient must be approached for validation of his or her behaviors separately. The

nurse cannot make assumptions of one person's behaviors based on what they learned from another patient with the same behaviors.

It also means that " patient behavior requires assessment at the time it occurs" (Faust, 2002, p. 15). It is possible that the same behavior occurring at different times means different things. The nurse must always validate the meaning of behaviors with the patient before attempting to meet the needs of the patient to ensure the correct needs are being met. | This is an important concept for nursing education. Nurses are educated on how to plan for the care of a patient. The goal of nursing is patient improvement by meeting the needs of the patient.

It is impossible to meet the needs of the patient if the nurse does not know the needs of the patient. Nurses must be educated to validate patient behaviors with the patient. Nurses must also be educated to be aware of their own feelings about patient behaviors and how to avoid making assumption about the needs of the patient. Nurses must learn to recognize the uniqueness of every individual and how behaviors can mean different things in different contexts. | HealthOrlando did not clearly define health. It is possible to infer what Orlando considered health to be from her writings.

According to Faust (2002, p. 15), " health is the result of a patient's needs being met. " This means that for a person to be healthy, they must be in a state where all their needs are met or are capable of being met. If their needs are not met, they are in a problematic situation and have an immediate need for help from the nurse. Improvement of this problematic situation results in the patient being restored to a state of health. This is the

goal of the nurse-patient relationship. | Improving the patient's problematic situation and restoring the patient to a state of health is the goal of nursing.

This can only be done by finding and meeting the patient's immediate needs.

" It is the nurse's responsibility to meet the patient's need for help either by supplying it directly or by calling on the services of others" (Schmieding, 1987, p. 432). The important thing about this for the nursing process is to take this in a systematic approach. The nurse must first determine what needs the patient has before planning how to meet those needs. The nurse plans the appropriate activities to help the patient and return him or her to a state of health. This concept of health means that nurses must be educated to focus on the needs of the patient and validating these needs with the patient. Nurse education for restoring a state of health should not be focused on tasks to perform, but on forming relationships to discover what the patient needs to maintain his or her health or to return to a healthy state. Although the tasks are important, nursing education must focus on how nurses choose the correct tasks to help the patient. Nurses must also be educated on how to recognize whether the patient has an immediate need for help or not. Nursing " Nursing is an interaction with people who have an immediate need for help - the subsequent relief of distress. Stress relief provides improvement, leading to a sense of well-being" (Faust, 2002, p. 16). The goal of nursing is to discover and meet the patient's immediate needs for help. Nursing is "...concerned with providing direct assistance to individuals in whatever setting they are found, for the purpose of avoiding, relieving, diminishing, or curing the individual's sense of helplessness" (Alligood, 2010, p. 339).

Nursing is a process in which the nurse determines if the patient has an immediate need, what that need truly is, and plans actions to meet that need. | The nurse must develop a therapeutic relationship with the patient by validating the patient's behaviors and not making assumptions about the behaviors. " In Orlando's theory, nurse-patient interaction involves reciprocity; making the relationship dynamic and collaborative" (Sheldon & Ellington, 2008, p. 390). This means the nurse must evaluate constantly and validate patient behaviors.

It is imperative for the nurse to determine what the patient actually needs in order to plan interventions to meet the needs. The nurse must also be aware that each behavior is unique within the context in which it occurs. This means that each behavior must be assessed and validated when it happens to avoid making assumptions about the patient's needs. | Learning to perform this process correctly should start early in the education process. It takes practice to do this correctly. " Finding out and meeting the patient's immediate needs for help becomes an acquired way of thinking" (Schmieding, 1987, p. 32). This process needs to become automatic for the nurse. He or she must be able to recognize their own internal feelings and overcome them to avoid making assumptions. Nursing education needs to take this into account and help student nurses practice this concept early and often. Nursing education must also teach proper communication techniques so that nurses will be comfortable and able to validate patient behaviors with the patient. | Environment The environment is the context in which the patient's problem exists and his or her behavior manifests.

Orlando does not clearly define environment, but relates it to the immediate situation. " A disruption in the environment creates a problematic situation. At that moment the person experiences an organic response" (Schmieding, 1987, p. 434). Orlando calls this an immediate reaction. This immediate reaction to the environment causes the problematic situation that the patient needs help with. The patient may have needs based on his or her environment that is not being met that result in the problematic situation. This results in the patient seeking help. " Environment is part of any nurse-patient interaction, because it is involved in all nursing situations. To help a patient, it may be necessary to take action related to the environment" (Faust, 2002, p. 16). The nurse may have to educate the patient to avoid things in his or her environment. This has implications for Orlando's theory because this will involve fully assessing the patient's needs and validating his or her behaviors relating to their environment. The nurse must determine if the environment is interfering with meeting the patient's needs. If this is the case, the nurse must act to deal with the environmental problem.

This may involve educating the patient or enlisting the aid of others to help the patient overcome his or her environmental barriers. | This is another case in which nurses need early and frequent practice. Nurses do not often consider the patient's environment when planning care. Many patients do not consider their environment as a cause of their problems, either. It is the responsibility of the nurse to determine if this is a problem. Nurses must learn how to validate patient behaviors appropriately and assess the needs of the patient. Nurses must learn how to interact with patients to draw this information out.

This takes practice and should be done early in an educational setting. Practicing this skill is important so that it will become a habit for the nurse. |

References Alligood, M. R. (2010). *Nursing theory: Utilization ; application* (4th ed. ). Retrieved from The University of Phoenix eBook Collection database Faust, C. (2002). Orlando's deliberative nursing process theory: A practice application in an extended care facility. *Journal of Gerontological Nursing*, 28(7), 14-18. Retrieved from [http://search.proquest.com/docview/204155222?accountid=35812; http://linksource.ebsco.com/linking.aspx? genre= article&issn= 00989134&volume= 28&issue= 7&date= 2002-07-01&spage= 14&title= Journal+of+Gerontological+Nursing&atitle= Orlando %27s+deliberative+nursing+process+t](http://search.proquest.com/docview/204155222?accountid=35812;http://linksource.ebsco.com/linking.aspx?genre=article&issn=00989134&volume=28&issue=7&date=2002-07-01&spage=14&title=Journal+of+Gerontological+Nursing&atitle=Orlando%27s+deliberative+nursing+process+t) Schmieding, N. (1987). Problematic situations in nursing: analysis of Orlando's theory based on Dewey's theory of inquiry. *Journal Of Advanced Nursing*, 12(4), 431-440. doi: 10. 1111/1365-2648. ep13107529 Sheldon, L. , & Ellington, L. (2008). Application of a model of social information processing to nursing theory: how nurses respond to patients. *Journal Of Advanced Nursing*, 64(4),