



(SHORT COMMUNICATION)



Nursing theory-driven practice

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Abstract

Theories are a collection of connected ideas that provide an organized, explanatory, and predictive perspective of a phenomenon (an observable fact or event). Concepts, definitions, models, assertions, and assumptions form the basis of theories. They are derived using deductive and inductive reasoning as their two primary methodologies. Nursing thinkers use these two approaches. "A creative and rigorous structuring of ideas that projects an intentional, purposeful, and systematic view of phenomena" is what is meant by a theory. By putting together how ideas relate to each other, a theory lets you "describe, explain, predict, and control practice."

Keywords: Knowledge Nursing; Practice; Skills; Theory

1. Overview

It is also crucial to recognize what first moved nursing beyond mechanisms of practice to become a knowledge-based force in healthcare: That force is a nursing theory, as well as the theoretical reasoning and research on that theory. Nursing is a complicated and in-depth field, represented in the structure of knowledge, which contains components unique to the area, including philosophies, ideas, and research and practice approaches. The nursing theories, which range in abstraction level, scope, and substantive focus, form the core of this system. However, the dynamic relationship between theory and practice creates the knowledge nurses consider applying to their work. A symposium on nursing theory-guided trial was sponsored by the Expert Panel on Nursing Theory during the American Academy of Nursing's 32nd meeting in November 2005 [1]. The panel's view that we now need to keep developing nursing-specific knowledge to communicate what nursing has to offer society served as a driving force behind the event. The symposium's goals were to discuss knowledge growth for the nursing discipline and to present actual applications of the leading nursing theories. The Scholarly Dialogue Column of Nursing Science Quarterly will summarize the papers from numerous nursing theory specialists who presented practice applications of critical nursing theories at the American Academy of Nursing Symposium in this issue and the following. Their presentations educate us about the variety of nursing procedures that support human health and establish the field [2]. The processes covered in this article include Rogers' stabilizer and innovator coping mechanisms, King's trans-action and conceptions of goal accomplishment, and trust as a pattern manifestation of Rogers' human-environment process. Each of the authors listed below has provided a concise summary of the theory and a description of specific practice applications. May the discussion sparked by their views regarding the role of ideas in the framework of nursing knowledge and the implications for teaching nurses and nursing students about nursing theories that develop through and inform nursing practice be helpful. The nursing profession is built on the foundations of the practice, research, and theory. These three pillars' interaction is reciprocal and cyclical. Clinical practice generates knowledge for theory as well as research topics. Our practice is influenced by research, and

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theory growth furthers our understanding. Research and training are improved by approach. In this editorial, I'll explain how the three pillars of nursing—practice, research, and theory—relate to one another and discuss the theory-practice divide as a barrier to theory-based practice. Applying knowledge, skills, compassion, and artistic ability to provide patients with effective, efficient, and thoughtful care is a necessary component of excellent nursing practice. Research findings create a significant portion of the knowledge to guide clinical nursing decisions. Research findings should ideally support all decisions about patient treatment. A protocol is designed using research findings, and it is then followed in regular nursing practice [3].

Science in any field arises from the interaction between the method of inquiry (research) and the information it produces (theory). The study aims to further knowledge in a field by developing or testing hypotheses and directing nursing practice. Research has more knowledge and theory. Hence the relationship between research and theory is reciprocal. Using theory as a framework to give the research study perspective and direction is essential to the research process. Theory can also be utilized to direct the research process by creating and evaluating hypotheses. The main goal of theory in nursing is to enhance practice by favorably affecting patients' health and quality of life. Theory and practice are mutually supportive of one another. Nursing theory is developed based on tradition, but nursing theory also needs to be validated in practice [4].

Nurses frequently believe there is a "gap" between theory and practice, despite the recent growth, evolution, and study of nursing theory. Except when accrediting agencies require, practicing nurses hardly utilize nursing theory terminology. The theory-practice gap is a result of several variables. The creation of theories has traditionally been seen as the responsibility of nurse educators and academics rather than the concerns of working nurses. Nursing theory and practice have traditionally been seen as two distinct nursing tasks. Before using them in practice, nursing theories comprise concepts and constructs that need to be defined. Additionally, knowledge of theory is not a guarantee of excellent practice. Practice frequently develops independently of theory. The need to link theory, practice, and research has been expressed often. The profession triangle is still dispersed and unacknowledged, though. The interaction between theory, training, and research needs to be continual, reciprocal, and cyclical to support the nursing profession's capacity to fulfill societal commitments. This will encourage theory-guided practice and aid in bridging the perceived "gap" between theory and practice [5].

By bridging the "gap" between theory and practice, nursing leaders must seek to maintain the reciprocal and cyclical interaction between theory, training, and research. These can be accomplished by ongoing communication between nursing researchers, academics, and working nurses. Second, we must expose more undergraduate and graduate nursing students to theoretical concepts. Following the conclusion of formal schooling, we also need to emphasize theoretical notions, constructions, and principles. To reduce the gap between the world of nursing theorists and scholars and the world of practicing nurses, we must offer nursing theorists/scholars and researchers the chance for practical involvement. Finally, we must examine current nursing and healthcare concerns from theoretical angles [6]. The future of nursing is the theory-guided practice or practice theory. Practice theories are unique, constrained ideas for a certain kind of practice. Nurse academics, scientists, researchers, and practitioners must make theory-guided practice the cornerstone of nursing as we move into the twenty-first century. Nurses' development and execution of the care plan must be based on solid theoretical ideas to deliver effective, efficient, and holistic care [7].

2. Conclusion

Regardless of nursing beliefs, nurses will always show compassion for the "ill and troubled." If this is the case, perhaps nurses are "nursing" without understanding theories. Therefore, theories do not matter. However, theory and practice are linked, and if nursing is to move forward, the theory idea needs to be looked at. If the nursing theory does not drive its evolution, it will follow the path taken by other sciences, including medicine.

Compliance with ethical standards

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