

Nursing Interventions: Need for Clarity

Capturing the work of nurses is key to demonstrating the value of nursing. The work of nurses comprises an interrelated set of tasks and judgements that are designed to meet individualized patient goals. These tasks consist of assessments, including ongoing monitoring of the patient and interventions aimed at effecting a change in the patient condition (American Nurses Association [ANA], 2016). Being able to demonstrate impact on patient outcomes reflects a critical aspect of nurses' work. In addition, teaching future nurses how to produce positive patient outcomes is a primary goal of nurse educators.

Often, nurse educators help students learn these tasks and judgments within the frame of a clinical reasoning model that requires students to select appropriate nursing interventions for patients based on their assessments and the patient context. However, a brief review of clinical reasoning models indicates that what constitutes a nursing intervention varies. The distinction of what nurses physically do to the patient and what they do to improve the outcome of the patient is sometimes muddled and may be confusing to nursing students.

For example, many faculty use a nursing model that emphasizes the nursing process, defined by the National Council of State Boards of Nursing (2015) as "a scientific, clinical reasoning approach to client care that includes assessment, analysis, planning, implementation and evaluation" (p. 5). The nursing care to be delivered is determined during the outcomes or planning phase of the nursing process, where assessment data, diagnoses, and measurable goals drive interven-

tion planning. *Implementation* is defined as the nursing care delivered according to the care plan (ANA, 2016).

Another model is the outcome-present state-testing (OPT) reasoning model (Pesut & Herman, 1998). This model postulates that the nurse assesses cues, frames these cues through reflection, and constructs a set of decisions or interventions that will be used as a test of whether the nurse was successful in moving the patient from the present state to the desired outcome state. The analysis of the patient's state requires a judgement on whether the interventions were effective, and evaluation parameters are more commonly known to nurses as the assessments we make.

Not only is there an inconsistency in the use of the nursing models that faculty use, but the Nursing Interventions Classifications also include a variety of nursing activities that contain assessment functions, as well as functions that are direct interventions (Bulechek, Butcher, Dochterman, & Wagner, 2013). Adding to the confusion in terminology is that many nursing textbooks also list nursing assessments as interventions.

So what constitutes an intervention? As is evident from the preceding discussion, interventions connote different things depending on perspective. One could define a nursing intervention as any task that a nurse does to or for the patient, where others may be more specific determining that a nursing intervention is something that directly leads to a patient outcome.

Consider the example of a patient with an impaired gas exchange. Patient goals or outcomes may be stated as: Pulse oximetry oxygen (SpO₂) level to be 95% or greater, a respiratory rate between 12 and 20

breaths per minute, and unlabored respiratory effort. A nurse might plan to assess and monitor oxygenation status, respiratory rate, and respiratory effort. However, if assessing and monitoring are the only actions the nurse takes for this patient, will the patient be likely to have a successful outcome? If the patient does have a successful outcome, it certainly would not be because of the nurse's actions. Rather, the outcome would be contingent on the nurse administering oxygen, encouraging deep breathing, and administering the appropriate medications. These actions would be interventions.

Words, such as *monitor*, *check*, *auscultate*, *observe*, and *assess*, although important, signal how the nurse will determine whether a specific patient outcome is achieved. However, they do not indicate how to achieve the outcome. In contrast, interventions that serve to improve a patient outcome are discernible by using words such as *provide*, *educate*, *administer*, and *position*.

Nursing's Social Policy Statement (ANA, 2010) compels the nursing profession to demonstrate nurses' contributions to health through interventions that produce beneficial outcomes in the human response. If faculty are to prepare nursing students to meet the societal mandate of meeting health needs, then nursing students would benefit from a consistent and deliberate approach to isolate and select nursing interventions that have the potential to directly change a patient outcome. This approach does not minimize actions such as monitoring and observing, which are critical nursing functions, but serves to highlight the value of each step of the nursing process and to recognize the im-

pact of nursing interventions. Will nurse educators accept the challenge to be clearer about what constitutes nursing interventions? Will nurse authors do the same? If we, as nurse educators, do not, then have we abdicated to meet our social mandate? Only time will tell.

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