



Practice models: A concept analysis

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The members of the Organization of Nurse Executives of New Jersey Research Committee discussed the need to clarify the meaning of a professional practice model in nursing. Confusion regarding the meaning of this term and its essential elements exists. All disciplines use jargon, and nursing is no exception. Terms such as patient care delivery model, professional practice model, care delivery model, professional care model, con-

temporary care delivery model, integrated delivery system, nursing professional practice model, and professional nursing practice model are common in the nursing community, particularly at Magnet® organizations. These terms are often used interchangeably or have overlapping elements. Nurses are often unsure of the definitions of these terms, and so can't speak to them with clarity and confidence, although

they know the theoretical concepts. And different organizations may not have the same understanding and definition of a particular term.

The members of the committee completed a literature review spanning the years 1990 to 2010 and a synopsis of the articles. The goal of this concept analysis is to establish clarification of professional practice models and propose a definition using Rodgers' and Knaf'l's method.¹ We concluded that the term *professional practice model* can be used to describe "any practice model that relies upon the professionalism of the care delivery term to improve patient outcomes."²

Uses of a practice model

Nursing care delivery has changed tremendously in the last two decades. Hospitals from the 1970s to the 1990s functioned in a fragmented system that

increased nurse frustration, job dissatisfaction, and an exodus from nursing.³ Nurses left the bedside because of obstacles to providing care, such as lack of supplies, lack of ability to advocate for patients, and lack of participation in developing care plans.

As the science of nursing builds its knowledge base, professional frameworks and models of care are used to guide practice. Practice models, as a blend of professional behaviors and clinical leadership, are a foundation that allows for mutual goal setting and facilitates the prioritization of patient care by the entire healthcare team.

When a clear model guides practice, nurses can articulate the impact of nursing care. Use of such structures helps foster autonomous decision making; professional identity; job satisfaction; high-quality, consistent nursing care; improved patient and family outcomes; and interdisciplinary communication.⁴⁻⁷

Practice model attributes

A practice model reflects nursing values that exemplify the culture of an organization. The dominant attributes shared among models and featured in Magnet organizations include nursing autonomy; empowerment; and cost-effective, quality care.

The primary goal of a practice model is to support the relationship between the nurse and the patient. Nurses' participation in decision making improves the quality of care, enhances patient and family satisfaction, and contributes to overall nursing satisfaction. These attributes are also associated with increased nurse engagement, retention, and recruitment.⁸ Nurse autonomy and empowerment are complex and crucial factors in promoting quality patient care.

Whether discussing professional practice models, care models, or nursing models, the literature supports that there are numerous antecedents to these models. The movement to managed care with hospital downsizing, cost containment, and the use of unlicensed assistive personnel was the impetus for the use of professional models.⁴ Nurses possess an

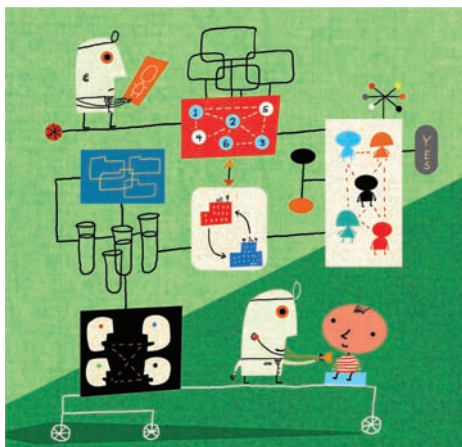


Table 1: Four surrogate terms

Surrogate terms	Related concepts in the literature	Common themes
Professional practice model	<ul style="list-style-type: none"> • Standards of practice • Professional development • Control over nursing practice • Increased job satisfaction • Accountability • Understanding of scope of practice • Shared vision/values • Practice changes • Evidence-based practice • Developing clinical expertise • Collegueship • Foster professional identity 	<ul style="list-style-type: none"> • Change • Empowerment • Improving nursing practice • Improving outcomes • Strengthening practice • Collegueship
Care model	<ul style="list-style-type: none"> • Framework • Structure • Cost containment • Functional perspective • Response to downsizing and change in staffing 	
Care delivery model/system	<ul style="list-style-type: none"> • Structure • Framework • Cost containment • Functional perspective • Response to downsizing and change in staffing • Continuity of care • Guides daily work and nursing practice • Decentralization/flattening of levels • Systems model (involves many elements) 	
Shared governance model	<ul style="list-style-type: none"> • Mostly used at Magnet organizations • Participative management • Self-managed teams • Collaborative, interdisciplinary teams • Control over nursing practice • Increased job satisfaction • Autonomous nursing practice • Decentralized organizational models • Practice changes • Evidence-based practice • High patient satisfaction • Transformational leadership skills • Collegueship 	

understanding of professional practice and a broad knowledge base to provide quality care to patients.⁹

If a nurse or an organization subscribes to a practice model, then the positive consequences for patients are healing, comfort, health promotion, wellness, and prevention, leading to increased satisfaction.¹⁰ For nurses, the positive consequences are improved practice and communication, shared governance, autonomy, empowerment, engagement, powerful work teams,

and increased job satisfaction—all of which promote increased nurse satisfaction.^{11,12} Additionally, staff members report high satisfaction when they're able to determine the daily work flow, self-schedule, and respond to patient volume and acuity with shift-to-shift unit staffing.

Practice models may be found in any area where nurses are practicing and providing care: home care, long-term care, acute care, and psychiatric and community settings.^{5,7} All of these practice areas

involve the nurse interacting with patients.

Related concepts

The literature referenced the model structure with similar terms, which were all related to the concept of care delivery by nurses in their practice. The umbrella terms used to convey the same attributes of nursing practice were the councilor model, nursing professional practice model, shared governance, organizational framework, and accountability-based

practice model. Inherent to these umbrella terms is independent decision making, autonomy, and empowerment.

These behaviors garner respect from physicians, patients, and families for care coordination and communication, whether in person or through enhanced technology. Congruence between information systems, organizational care delivery, governance structure, and transformational leadership was mentioned as a key concept for implementation of a practice model.

As nursing practice models have evolved, a progression of interchangeably used terms has also grown, resulting in confusion. Four surrogate terms have emerged: professional practice model, care model, care delivery model/system, and shared governance model. (See *Table 1.*)

A care umbrella

The professional practice model is the overarching umbrella term for guiding care delivery. The organization begins by choosing a theorist who reflects the philosophy on which nursing care is based, such as autocratic versus autonomous and centralized versus decentralized. An example of a professional practice model is Watson's Theory of Caring, which includes 10 carative factors.¹³ To carry on this example, Watson's theory would lead the organization to select a care delivery model (such as relationship-based care) integrating the carative factors. Nurses design structures and processes to operationalize and support elements of the care delivery model, which include unit organization, staff member roles, communication tools, patient and family education, documentation, unit governance, and staffing.

Organizations should employ a formal process to select a nurse theorist

who reflects their mission, vision, and values. Each organization must clearly define the terms of a professional practice model and care delivery system that's congruent with its philosophy. Due to the vague, interchangeable use of terms, staff must be educated in the definitions of models and care delivery systems.

Systems working in harmony

A professional practice model is defined as the total system in which nurses provide care. It's made up of the care delivery model (structure and processes), teamwork (relationships), and values that facilitate nurses' contributions to both patient outcomes and the environment.¹⁴ Each element in the model strengthens the other components, making the whole greater than the sum of its parts. Practice models require the integrated system to function efficiently and effectively in today's practice environment. Analysis of the professional model concept is meaningful to nurses everywhere. **NM**

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