



# NMNEC Concept: **Individual**

**Mega Concept:** Participant Attribute Concepts

**Category:** Health Care Participant

**Concept Name:** Individual

**Concept Definition:**

An individual who is receiving needed professional services that are directed by a licensed practitioner of the healing arts toward maintenance, improvement or protection of health or lessening of illness, disability or pain. (US Centers for Medicare & Medicaid Services)

**Scope:**

The scope of the individual in healthcare relates across the lifespan. The individual is a bio-psycho-social being who exists in their unique environment. They are in continuous interaction with that unique and changing environment. How the individual interacts within their environment is influenced by multiple stimuli and their developmental stage in life. Identifying terms for the individual in healthcare include care participant, client, resident, member, and patient.

**Attributes:**

The individual is central to the plan of care. The individual is the source of control and a full partner in health care based on preferences, values and needs. Essential attributes that are common to individual healthcare participants across the lifespan include aspects listed below:

- Self-awareness
- Healthcare seeker
- Active care participant
- Informed healthcare consumer
- Self determination

Individual health care participants demonstrate varying degrees of these aspects.

**Theoretical Links:**

- **Adaptation Model:** Sr. Callista Roy recognizes the individual as a holistic being that must adapt to their environment in response to various stimuli (Sitzman & Wright Eichelberger (2011). Adaptation is achieved through self-concept, role function, interdependence, and, meeting physiologic needs. Health is a process of becoming integrated within the environment, positively adapting to internal and external stimuli. The charge to nurses is to identify the behaviors and stimuli that influence the individual's environment and collaborate with them to set goals for positive adaptation.
- **Self-Care Deficit Model:** According to Dorothea Orem, individuals want to learn and participate in self-care. When the individual is able to provide self-care at a level that



## NMNEC Concept: **Individual**

meets their identified needs, they are in a state of health. Self-care deficits exist when the individual can no longer meet their identified needs. She further defines individuals as being uniquely human and existing within their defined environments. They influence others and are influenced by others. Nurses play a key role in identifying those deficits and creating an individualized plan of care that promotes a return to self-care.

- **Developmental Models:** Developmental theorists provide guidelines for nurses in determining how to assess, plan, implement, and evaluate care delivered to the individual. Common theorists identified in nursing include, Freud's theory of psychosexual development, Erikson's theory of psychosocial development, Piaget's theory of cognitive development, and Kohlberg's theory of moral development.

### **Context to Nursing/Healthcare:**

Nurses are central to the coordination of care for the individual. To effectively coordinate this care, nurses must demonstrate knowledge, skills, and attributes consistent with

#### **Knowledge**

- **Nursing Process:** Nursing promotes the holistic approach necessary to promote adaptation that maintains or leads to health. The nursing process is the framework for developing individualized plans of care.
- **Cultural Competence:** Culture includes that of the individual as well as that of the healthcare environment. Nurses must demonstrate understanding of the individual's values, beliefs, and cultural influences in order to effectively coordinate care. In addition, they need to understand the culture of the healthcare environment (i.e. access to care and financial barriers) as it relates to the delivery of care.

#### **Skills**

- **Application of the Nursing Process:**
  - Assessment of the individual's behavior based on stimuli and self-care deficit
  - Nursing diagnosis represents an interpretation of how well the human system is adapting to whatever condition or situation brought them to the point of assessment
  - Planning is done in collaboration with the individual to develop care participant centered goals
  - Interventions are provided that maintain and improve health or lessen disability
  - Evaluation assesses the effectiveness of the interventions and involves active input from both the healthcare provider and the care participant
- **Communication Competence:** Nurses must be skilled in effective communication to coordinate care that results in the most positive outcome possible for the individual. In addition, effective communication is necessary in collaboration with the healthcare team to ensure the individual's needs are met.



## NMNEC Concept: **Individual**

- Active listening
- Eye contact
- Engage the individual

### **Attitudes**

- Recognize the individual's preferences, beliefs, values, and fears.
- Support the individual's decisions regarding their own care.
- Focus on individual-centered outcomes
- Provide holistic care

### **Interrelated Concepts:**

- Development: The developmental stage determines the level of care and participation.
- Spirituality: Beliefs and values provide a framework for the individual in the delivery of care.
- Health promotion: Optimal health is the goal of the healthcare providers for the individual.
- Patient education: Making informed decisions requires accurate information.
- Culture: Cultural rituals or limitations are considered in meeting the goal of optimal health for the individual.
- Communication: Effective communication between the individual and healthcare providers is essential.

### **Exemplars:**

#### **New Mexico Nursing Education Consortium (NMNEC) Required Exemplars:**

- Patient-centered care



## NMNEC Concept: **Individual**

### **References:**

Sitzman, K. & Wright Eichelberger, L. (2011). Sister Callista Roy's Adaptation Model. In *Understanding the work of nurse theorists: a creative beginning* (2<sup>nd</sup> ed). Sudbury, MA: Jones and Bartlett.

### **Resources:**

Banfield, B. (2008). Philosophic position on nature of human beings foundational to Orem's self-care deficit nursing theory. *Care, Dependent-Care & Nursing*, 16(1), 33-40.

Flagg, A.J. (2015). The role of patient-centered care in nursing. *Nursing Clinics of North America*, 50(1), 75-86.

Hohdorf, M. (2010) Self-care deficit nursing theory in Ingolstadt-an approach to practice development In nursing care. *Care, Dependent-Care & Nursing*, 18(1), 19-25.

Kalaldehy, M.A., & Shosha, G.A. (2012). A critical analysis of using Roy's adaptation model in nursing research. *International Journal of Academic Research*, 4(4), 26-31.

Mahoney, K.J. (2011). Person-centered planning and participant decision making. *Health & Social Work*, 36(3), 233-235.

Small, L. (2017). Development. In J.F. Giddens (Ed.), *Concepts for nursing practice* (2<sup>nd</sup> ed.) (pp. 2-12). St. Louis, MO: Elsevier.

### **Website Resources:**

*Intermediate care facility for individuals with intellectual disabilities glossary*. Retrieved from [http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/downloads/ICFMR\\_Glossary.pdf](http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/downloads/ICFMR_Glossary.pdf)

Quality and Safety Education for Nurses (QSEN). (2019). *QSEN competencies*. Retrieved from [http://qsen.org/competencies/pre-licensure-ksas/#patient-centered\\_care](http://qsen.org/competencies/pre-licensure-ksas/#patient-centered_care)