The NANDA International contribution to Standardised nursing communication

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Objectives for today

- Explore the concept of Nursing Diagnosis and their development and application
- A brief overview of NANDA International
- NANDA International vision for the future
- Trans-cultural challenges
- Answer questions
NANDA International

NANDA International was formed as the North American Nursing Diagnosis Association in the USA in the 1970’s. It became NANDA-I in 2002 to reflect a growing international interest in nursing language development. NANDA was developed by a group of leading nurse theorists at the first conference on classification of nursing in 1973.

NANDA has collaborative links with ACENDIO, AENTDE, AFIDI, JSND and other regional groups.
NANDA-I

- NANDA-I is nurse member led and the leadership are selected by election.

- NANDA-I provides a number of products but is best known for its’ evidence-based classification of Nursing Diagnoses for use in practice and to determine interventions and outcomes.
NANDA-I produces the NANDA classification every two years. This is an evidence-based classification of nursing terms and is translated into languages including:

- Chinese
- Danish
- Dutch
- English (British)
- French
- German
- Icelandic
- Italian
- Japanese
- Norwegian
- Portugese
- Spanish
NANDA–I is managed by a Board of Directors and a number of committees including a Diagnostic Review Committee, Informatics Committee and Taxonomy Committee.

The way that NANDA-I is managed and governed was under review in order to make the organisation more internationally accountable and applicable. These new arrangements come into force in 2008.
There are three European Directors on the NANDA Board. One from Norway, one from Wales and the President-Elect from the UK.

Professor Weir-Hughes was the first non-USA based elected Director and will be the first non-USA based President from 2008 – 2010.

The values and beliefs of nurses and the humanistic philosophy of nursing transcends national and cultural boundaries. Whilst valuing different cultures and cultural approaches to nursing it is now more important than ever that nurses work together worldwide and actively seek areas of common understanding.
Nursing Diagnosis is a clinical judgment about individual, family or community responses to actual or potential health problems / life processes. Nursing Diagnoses provide the basis for the selection of nursing interventions to achieve the outcomes for which the nurse is accountable.

Shoemaker, J 1984 (NANDA Delphi Study)
Benefits of Using Nursing Diagnosis

- Consistency
- Visibility
- Efficiency
WHY?

If you can’t name it, you can’t control it, finance it, teach it, or put it into public policy.

(Lang 1993:9)
WHY?

- Risk Management
- Evidence based care
- Provides research base for nursing
- Efficiency
- Communication
- Electronic patient record facilitation
- Audit and evaluation
How a Nursing Diagnosis is Structured…

- **Label**: Acute pain
- **Definition**: An unpleasant sensory and emotional experience associated with actual or potential tissue damage; sudden or slow onset of any intensity from mild to severe with an anticipated or predictable end and a duration of less than six months

- **Defining characteristics**
  - The patient states they have pain:
  - Observed evidence
  - Protective behaviour
  - Sleep disturbance

- **Related Factors**:
  - Injury agents: biological chemical physical psychological
Research and Nursing Diagnosis

- The Diagnostic Review Committee are rigorous about examining the source of each proposed diagnosis.
- The research methods used include: expert consensus, concept analysis and criterion validation.
- The level of research evidence is indicated by each diagnosis listed in the classification.
- Our challenges include lack of large scale funding, lack of expertise in concept analysis and all of the challenges faced by all member led nursing groups.

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Common Criticisms of Nursing Diagnosis

- Language is not very user friendly
- Distracts from Individualized Patient Care
- Closely Linked to the Medical Model
- Not patient friendly reducing the potential for patient participation in care
- It is sometimes viewed as reductionist (but interestingly not by many experts in holistic nursing and holism generally)
As example of an assessment structure is Functional Health Patterns (Gordon, 1994)

- Health Perception - Health Management
- Activity - Exercise
- Cognitive - Perceptual
- Coping - Stress tolerance
- Elimination
- Nutrition - Metabolic
- Role - Relationship
- Self Perception - Self Concept
- Sexuality - Reproduction
- Sleep - Rest
- Value – Belief

Gordon’s Functional Health Patterns provide an excellent way of assessing in a structured manner. Gordon’s structure is not a nursing theory or model, so many nurse leaders and nurses find it useful as it does not confuse the issue of nursing theory with assessment.
America versus Europe!

- Patients are patients!
- Nursing transcends numerous cultural boundaries, but it is recognised that there are key differences
- The NANDA Classification was originally developed in the USA and we must thank those original developers. It is now time for nurses world wide to contribute and to engage, recognising that standardised nursing language is essential for informatics.
Trans-cultural issues and NANDA International: Conceptual Differences

- For example “Fatigue” (France)
- “Anticipatory Grieving” (Numerous countries)
- “Family Process” (Japan)
- “Religiosity” (USA)
- “Energy Field Disturbance” (UK)

Nursing challenges in a multicultural society, especially in large cities in the developed world
NANDA International is a Membership Organisation

• We welcome your contributions as members

• We especially welcome suggestions for new or revised Nursing Diagnoses. These can be submitted in any language and can be culturally or country specific. Submission details can be found at www.nanda.org

• Your contributions will help to make NANDA a more culturally sensitive organisation and the NANDA classification an internationally useable tool for improving nursing practice
The future...

- Nursing Diagnosis will become increasingly important worldwide, apart from anything else because it is fundamental to electronic patient records.

- It is important that we (nurses) understand nursing science and that we verbalise our phenomena of concern and our understanding of our work in a consistent and cohesive manner. Nursing Diagnosis enables us.
The future...

Please join me in taking forward the science of nursing through the study and use of Nursing Diagnosis for the benefit of patients present and future!
Thank you for listening

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