

# The nursing process and patient teaching

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The nursing process is the most frequently used process to guide nursing care. It's taught to nursing students during their first year in nursing schools across the world. Different countries use different formats of the nursing process. For example, in the United Kingdom, the nursing process comprises four steps: assessment, planning, implementation, and evaluation. In the United States, the nursing process has five steps: assessment, diagnosis, outcomes/planning, implementation, and evaluation. Despite different formats, the main purpose of the nursing process is to deliver standardized, holistic, and patient-focused care, and to record and determine the efficacy of provided care.

Simply put, the nursing process is a cyclic approach that requires us to use our problem-solving and critical-thinking skills to develop a holistic patient care plan. Patient teaching is one of the essential components of holistic nursing care. This article describes the use of a five-step nursing process for developing a teaching plan to deliver effective patient teaching in clinical settings.

## Follow the five steps

### Assessment

During assessment, you collect the patient's data to identify his or her needs through a comprehensive assessment comprising two steps: objective and subjective assessment. In the objective assessment, you collect measurable and observable information about your patient's demographics, vital signs, labs, intake/output, and other objective findings. Upon collection of objective data, you interview the patient to explore his or her needs, feelings, thoughts, and perceptions regarding

health and illness. The subjective assessment also includes the patient's physical, psychological, sociologic, and spiritual data. You complete both objective and subjective assessments, validate them, and make sure that they're consistent.

### Diagnosis

Based on the assessment findings, you categorize and prioritize the patient's needs and formulate a nursing diagnosis, which is based on the NANDA International guidelines. The common format that you use for developing a nursing diagnosis is problem, etiology, and signs/symptoms.

### Outcomes/planning

In the planning stage, you collaborate with the patient to develop short- and long-term goals to meet his or her identified needs. Bloom's taxonomy can be used to develop SMART (specific, measurable, achievable, realistic, and time bound) goals. This taxonomy orders learning



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goals into three domains: affective, cognitive, and psychomotor. Each goal is measured by specific outcome criteria, which designate the goal as met, unmet, or partially met. The outcome criteria should be consistent with the goals.

### Implementation

After the goals are finalized, you design and implement nursing interventions to

achieve these goals. Each intervention may be dependent, independent, or interdependent, given its nature and the patient's condition. A dependent intervention is one for which the patient is completely dependent on the nurse; for example, providing a sponge bath to a patient with paralysis. An independent intervention is one that the patient can perform without any assistance; for example,

## Example of a nursing process based teaching plan

### Assessment

**Subjective:** The patient stated, "I want to learn how to care for myself at home."

✓ **Tip:** During discussion with the patient, identify his learning needs. Validate your observations with the patient.

**Objective:** The patient doesn't have a caregiver; he's dependent on nurses for care.

✓ **Tip:** Identify objective findings supporting the subjective assessment.

### Teaching need

Post CABG home care.

✓ **Tip:** Prioritize the patient's needs and develop a separate teaching plan for each need.

### Teaching objectives

**Short-term objective:** By the end of this 30-minute teaching session, the patient will be able to discuss home care for CABG entailing the following objectives:

- incision care
- exercise
- heart-healthy diet
- smoking
- medication compliance
- emergency signs of when to seek care.

**Long-term objective:** By the end of the next follow-up visit, the patient will verify use of the home care plan and verbalize the challenges associated with its implementation.

### Outcome

At the end of the teaching session, the patient will verbalize at least three teaching points from the content delivered and demonstrate the procedure of incision care.

### Criteria

- Verbalized five points + demonstrated incision care = goal met.
- Verbalized three points + didn't demonstrate wound care correctly = partially met.
- Neither verbalized three points nor demonstrated wound care = goals unmet.

### Content

Keep the teaching content simple and consistent with the patient's needs, and present it in plain language. Use the patient's native language. Cover practical information and avoid jargon.

✓ **Tip:** Assign time for each objective and the demonstration of the objective.

### Strategies and procedures

For teaching incision care, verbalization, demonstration, and audio-visual aids can be used. For exercise, verbalization and demonstration can be used. For teaching about diet, brochures or pamphlets can be used.

✓ **Tip:** Use multiple teaching strategies and a different teaching strategy for each objective.

### Evaluation

The patient should reverbalize learned content and redemonstrate the skills in accordance with the outcome criteria.

✓ **Tip:** Evaluate your teaching during the session and immediately after teaching. During teaching, encourage the patient to ask questions. Don't forget to summarize your teaching points before evaluation.

brushing one's teeth. An interdependent intervention is one that the patient carries out with the nurse's assistance; for example, changing position for a patient with a leg cast.

### Evaluation

Finally, in the evaluation stage, you evaluate the patient's progress regarding the established goals, the outcome criteria, and the provided nursing care. Based on this evaluation, you modify your nursing care plan.

### Developing the plan

Keeping in mind the aforementioned steps, the following case study will help you understand how to use the nursing process to develop an effective teaching plan (see *Example of a nursing process based teaching plan*).

A 65-year-old patient was admitted with the chief complaints of severe chest pain, diaphoresis, and progressive dyspnea. Based on the initial nursing assessment and diagnostic evaluation, the patient was diagnosed with triple vessel coronary artery disease and underwent coronary artery bypass grafting (CABG). After CABG, he was transferred to the ICU. After being cared for in the ICU for over a week, he was then transferred to the coronary care unit (CCU) in a fully conscious state. The patient stayed in the CCU for 3 days. He was then told he would be discharged from the hospital.

During the final assessment, the patient indicated his interest in learning about home care after CABG. He indicated that nurses had been providing care for him, but he didn't know how to care for himself at home. Throughout his stay, the nurses observed that no one visited him and he was totally dependent on them to provide him with the necessary care.

To develop the teaching plan, the nursing process steps are: assessment, teaching need (diagnosis), teaching objectives and outcome (outcomes/planning),

## Translating the nursing process into a teaching plan

Nursing process	Nursing process based teaching plan
Assessment (subjective and objective)	Assessment (subjective and objective)
Diagnosis	Teaching need
Outcomes/planning	Teaching objectives and outcome
Implementation	Teaching content and strategies
Evaluation	Evaluation

teaching content and strategies (implementation), and evaluation (see *Translating the nursing process into a teaching plan*).

As this patient's nurse, help him identify his perceived needs, which may be physical, emotional, or psychological. Discern the perceived needs for which he needs further education. The patient's interest in learning more about home care for CABG is considered to be a subjective assessment. Use your observations and knowledge about this patient to validate the subjective assessment. Throughout the patient's stay in hospital, the nurses observed that no one visited him and he was totally dependent on them for care. These two findings validate the patient's subjective need for more education on post CABG care.

After your subjective and objective assessments are completed, list the patient's needs based on priority and similarity. For example, this patient may inquire about physical needs, such as diet and an activity plan, and emotional needs, such as stress management. Make sure that the home care teaching plan covers all of these needs.

Now that you've determined the patient's teaching needs, the next step is

to develop short- and long-term teaching objectives. Communicate with the patient to ensure that there's a mutual agreement on the objectives. This also provides you with the opportunity to reevaluate the assessment and teaching needs. Ensure that the teaching objectives are SMART so that they're feasible and useful.

As mentioned earlier, the teaching objectives should be measurable. Develop simple and straightforward outcome criteria to help achieve this, and share them with the patient to ensure that the teaching objectives are achievable.

After finalizing the outcome criteria, the next step is to write up the teaching content. This phase is critical to effectively execute the teaching objectives. The content should be specific, practical, concise, and easily understandable. Similar to the implementation phase of the nursing process, it's important to justify the purpose of each point of the teaching content.

The effective delivery of teaching content requires designing and using multiple teaching strategies. For example, if you teach this patient about wound cleaning and dressing, explain and demonstrate the procedure. The purpose of using multiple teaching strategies for a single objective is to help the patient understand the teaching point while saving time. For example, demonstrating incision care may take more time than showing a video of a nurse performing it. However, combining these two strategies, if time permits, can help the patient better understand the teaching point. Seeking the patient's suggestions about what style of learning works best for him is one way to develop effective teaching strategies.

The final step is to evaluate the delivered teaching. Evaluation is an ongoing process, so it should be done at each of the previous phases. For example, encourage the patient to ask questions, ask him about his understanding of the content,

and look for nonverbal cues during the teaching. The final evaluation criteria should be pertinent to the outcome criteria.

Finally, it's important to remember that similar to the nursing care plan, each teaching plan is different. It's up to you to decide what kind of plan meets the patient's needs and works with available resources. However, using the nursing process can help you develop a teaching plan in a systematic and organized manner.

### Valuable information

Using the five-step nursing process for developing a patient teaching plan will help you deliver comprehensive and effective teaching. Simple teaching plans accompanied by multiple teaching strategies provide patients with valuable information. ■

#### REFERENCES

- American Nurses Association. The nursing process. [www.nursingworld.org/EspeciallyForYou/What-is-Nursing/Tools-You-Need/Thenursingprocess.html](http://www.nursingworld.org/EspeciallyForYou/What-is-Nursing/Tools-You-Need/Thenursingprocess.html).
- Ballantyne H. Developing nursing care plans. *Nurs Stand*. 2016;30(26):51-57.
- Black B. Critical thinking, the nursing process, and clinical judgment. In: *Professional Nursing: Concepts and Challenges*. 7th ed. St Louis, MO: Elsevier Health Sciences; 2014:152-168.
- Herdman TH, Kamitsuru S. NANDA International nursing diagnoses definitions and classification 2015-2017. [http://medical.iauyazd.ac.ir/files/NURSING/E-Books/Herdman2014Nursing%20Diagnoses%202015-2017%20-%20Definitions%20and%20Classification,%2010th%20Edition%20\(Nanda%20Internation\(1\).pdf](http://medical.iauyazd.ac.ir/files/NURSING/E-Books/Herdman2014Nursing%20Diagnoses%202015-2017%20-%20Definitions%20and%20Classification,%2010th%20Edition%20(Nanda%20Internation(1).pdf).
- Royal College of Nursing. Nursing assessment and older people: a Royal College of Nursing toolkit. [https://my.rcn.org.uk/\\_data/assets/pdf\\_file/0010/78616/002310.pdf](https://my.rcn.org.uk/_data/assets/pdf_file/0010/78616/002310.pdf).
- Yildirim B, Ozkahraman S. Critical thinking in nursing process and education. *Int J Humanit Soc Sci*. 2011;1(13):258-262.

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