Discussion post



Personal Nursing Philosophy

Student's Name
Institutional Affiliation
Course Name and Number
Professor's Name
Date Due



Personal Nursing Philosophy

My nursing philosophy involves acknowledging patients as crucial participants in treatment and recovery processes. This approach allows healthcare practitioners to treat patients with dignity, kindness, and respect while catering to their safety. In my experience, most healthcare institutions consider patients to be passive participants in their care. With this philosophy, practitioners control the care and recovery processes regarding decision–making while patients align with their recommendations. The approach's main advantage is shortened decision–making durations (Blaiss et al., 2019). However, it does create risks affecting the effectiveness of care and patient satisfaction. For instance, patients are likely to resist adopting some interventions, even when the interventions are likely to yield expected outcomes (Ankolekar et al., 2018). There are various reasons for such resistance, including feelings of neglect and losing control over decision–making processes. My nursing philosophy reduces the chances of resistance by making the patient a pertinent player in the entire care process.

One of the strategies applicable in my philosophy includes the patient's involvement during the exploration of options before selecting an intervention. A patient's participation in the process gives them all relevant information on their problem and available options. The patient's participation in the process also makes it possible to volunteer information about their practices that may affect the options' efficiency.

My ethical principles have mainly contributed to my inclusion of informed consent as a critical part of decision-making during care delivery. I believe that every patient's right to self-determination hinges on the ability of healthcare practitioners to offer sufficient information on risks, benefits, and possible outcomes. Empowerment allows nurses to reduce burnout by sharing the care burden with patients (Hert, 2020). The consideration is significant for patients with chronic or terminal illnesses requiring intensive interventions likely to affect their daily activities, as is the case with cancer patients and those dealing with heart disease. Transferring some decision-making power also shifts some responsibility from practitioners to patients as they are better equipped to manage their conditions on their own. Overall, the patient's participation enhances their acceptance and fosters the achievement of informed consent when carrying out risky procedures.



References

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