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THE NURSED PASSAGE: A THEORETICAL FRAMEWORK FOR
THE NURSE-PATIENT PARTNERSHIP

A thesis presented in partial
fulfilment of the requirements for the degree
of Doctor of Philosophy
in Nursing at
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ABSTRACT

This study focused on nursing in action. The research goal was to identify nursing-relevant dimensions within a person's experience of being a hospital patient undergoing elective surgery. In order to discover and conceptualise the underlying processes which are present as patients are nursed through this experience, an open question was posed - What is happening here? A qualitative research method was the most appropriate means of discovering an answer to this question.

The particular method chosen was the grounded theory approach developed by Glaser and Strauss. Data were collected in five surgical wards of a large city hospital over a period of five months. The research participants were twenty-one patients and the nurses involved in their care. Primary sources of data were interviews and the nursing records. These were augmented by field notes and accounts of observed incidents relating to the care of each patient.

Using the inductive strategies of the grounded theory method, numerous descriptive concepts were generated during data analysis. These were ordered within an

integrating social process derived from anthropology. By this means a grounded theory in the form of a theoretical framework - the Nursed Passage - was developed. Within this passage the patient is the passagee and nursing is translated into action through the agency of the nurse.

The Nursed Passage is a patterned partnership with three key elements. Firstly, the temporal element, characterised by ongoing movement and constant change, is conveyed in the sequence of phases or stages. Secondly, the participative element is portrayed as a patterned relationship in which both nurse and patient are actively involved in progressing the patient through the passage. Finally, the contextual element recognises complex factors within the nursing environment which have an impact on the shape of the relationship between patient and nurse.

This theoretical framework, generated from the reality of nursing as it occurs in one setting, assigns a specific shape to the encounter between nurse and patient. It identifies the contribution nursing alone can make to optimise each patient's hospital experience. In this way it both complements and facilitates the work of medical and other colleagues with whom nurses work. Thus, it serves to revalue nursing in terms that can maximally utilise the registered nurse's knowledge and skill for the benefit of all concerned, but particularly the patient and the nurse. Consequently, it has potential value for nursing practice, education and research.

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