The climate of change and turbulence in health care and in our institutions can be disturbing and disorienting. In some instances, it prohibits us from focusing on what really matters. The essential elements which give nursing its character and strength blend both art and science. The connections and commitment which occur between nurses and patients are rarely articulated in the public or the professional domain. My focus for my daily practice is the promotion of caring in my work as a nurse. With diligence, nurses can create caring environments for themselves, their patients and their colleagues. For this message, I plan to explore a theoretical basis for caring for patients.

Nurses have always promoted human caring and have served as constant reminders to all health care providers by ‘being there’ or by ‘presence’ with patients. Nurses are increasingly challenged to remain staunch allies of human caring in acting as patient advocates. Because the technology and the intensity of care in nursing practice are increasing and will continue to increase, nurses must protect the critical care nature of nursing, which is caring. Nurses respond to this …by the heightened interest in the subject of caring, in the concept of caring as a framework in curriculum development, and in the attempts to refine the definition of nursing practice with caring articulated as the essence of nursing." (Greene, 1990)

Nursing theory can be used by nurses to guide and improve practice. Some of the work published on care and caring in nursing can enable us to identify perspectives and clarify personal theories and practices of caring. It can help renew and challenge one’s own sense of identity as a nurse. Jean Watson is a renowned nurse theorist who places great emphasis on the respect for the uniqueness and individuality of every individual. Each person has the right and responsibility to make informed choices concerning life values and health. Individual healing processes can be strengthened through authentic caring relationships. According to Watson, caring is the most valuable attribute that nursing has to offer; she described the art of nursing as a human activity which involves a union of feelings.

Conditions of this process include the nurse’s use of spirituality, individuality, and sincerity. In a professional relationship, the nurse involves her/himself fully as a person, including emotional, mental esthetic, spiritual and experiential dimensions of self.

Watson’s Carative Factors have numerous applications to perianesthesia nursing practice. Our time frames with patients may be short and action packed. If we cultivate caring attitudes and behaviors, they fit naturally into all facets of perianesthesia nursing.

**Watson’s Carative Factors**

1. Forming a humanistic-altruistic value system. The foundation of our value and belief system begins early in our lives within our families. Throughout our lives, numerous mentors influence the person, and the nurse we become. Personal beliefs and viewpoints are further developed as we experience nurse-patient interactions. Your professional integrity and ethical practice evolve from this value system. Satisfaction is enhanced through giving and extending oneself.

2. Instilling faith-hope. Perianesthesia nurses take an active role in promoting wellness. We give positive support to patients and families while we help them through the surgical experience. We develop effective nurse patient relationships in a limited time frame to help patients achieve wholeness.
3. Cultivating sensitivity to oneself and others. There are tremendous opportunities for us to show that kindness begets kindness. Softly spoken words, encouragement, active listening, touching, humor, and common courtesy are inspiring to observe and more impressive to practice. Accepting patients as they are in a non-judgmental manner shows evidence of powerful caring.

4. Developing a help-trust relationship. Perianesthesia nurses establish rapport and immediate connections with patients. We allay fear and anxieties while monitoring and assessing. We provide this care with intelligence and competence, and can do so with warmth, empathy and effective communication.

5. Promoting expression of positive and negative feelings. We encourage patients to share their worst fears, and ensure them that these are not foolish concerns, but allay their fears with honest and direct answers. We do this face to face, through pre and post op phone calls, and through surveys.

6. Systematically using the scientific problem-solving method for decision making. Perianesthesia nurses practice with intelligence, confidence and speed! We take pride in our astute assessments, and our immediate interventions to preempt problems.

7. Providing a supportive, protective or corrective mental, physical, sociocultural, and spiritual environmental. We work hard to provide comfort, privacy and safety for our patients. We coach them as necessary, "Take a deep breath, like this!" and support their efforts.

8. Assisting with gratification of human needs. There is basic nursing satisfaction in meaningful work, and in helping others. Our patients are especially vulnerable; every perianesthesia nurse should know the value of the care we provide.

9. Existential-phenomenological forces. We know that patients experiences shape their individual perceptions. Two patients can undergo the same surgical procedure, with similar physical characteristics, but have tremendous differences in analgesic and comfort needs. We look to understand patients from their own perspective.

Nurses have the ability to manipulate the environment to ensure that caring practices are promoted, valued and recognized. The challenge is to convey to patients recognition and appreciation of their worth and competency to attend to self. The promotion of comfort and calm helps patients achieve wholeness. "…Caring is both the foundation of our practice and its moral imperative."

REFERENCES