# **Editorial**





Lynne Harrison - joint editor

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# **Meeting Patient and Family Needs** Pat Moloney-Harmon, Associate Editor

Nurses have been challenged over the years to demonstrate the unique contribution that we make to the patient care experience. Even though we know that we make an important contribution, we have not always been successful in identifying it. However, there is data that shows that nurses truly make a difference in patient outcomes. A landmark study in the United States demonstrated that in hospitals with high patient-to-nurse ratios, surgical patients were more likely to experience higher risk-adjusted mortality and failure to rescue rates (Aiken et al., 2002). Failure to rescue is defined as deterioration in a patient's condition that could have been prevented or mediated had a nurse acted early and appropriately. Even though failure to rescue cannot always be prevented, an experienced and knowledgeable nurse who can identify significant symptoms and intervene accordingly is essential to ensuring optimal outcomes for critically ill patients and their families (AACN, 2002). Another study in the United States found that a higher number of hours of care provided by a registered nurse resulted in better outcomes for hospitalized patients (Needleman et al., 2002). The study results demonstrated an association between the total hours of care provided by registered nurses and six nurse-sensitive outcomes: urinary tract infections, upper gastrointestinal bleeding, hospital-acquired pneumonia, shock or cardiac arrest and failure to rescue (Needleman et al., 2002). These studies show what we as nurses have always known - that having the right mix and number of experienced nurses makes a difference for patients and families worldwide.

With the challenges posed by the current healthcare environment, we as critical care nurses need to reconsider our practice. No longer can we look at nursing in terms of clinical practice dimensions designed by our role, the clinical setting, and a patient's diagnosis - with that mindset we are overlooking patients' needs as the driving force for our practice. The American Association of Critical Care Nurses (AACN) Certification Corporation has articulated a model that redefines nursing practice based on the needs of patients and the demands of the healthcare environment. This model, the Synergy Model, illustrates nursing practice based on the needs and characteristics of patients-that the characteristics of patients, that is, the characteristic of patients and their families determine the competencies of the nurses who care for them (Curley, 1998). It speaks to what patients need and want. (For more information about the Synergy Model, go to www.certcorp.org and click on Synergy Model).

We, as professional nurses, need to look to patient and family needs as our driving force. The future of nursing practice is ours to own. We must develop and implement models of practice that demonstrate our unique contribution in a quickly changing health care environment. We must put our energies into the development of a health care system driven by the needs of patients and families.

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