

AACN Essentials

Domain 1 *Knowledge for Nursing Practice*

Foundational Assumptions

- Knowledge for nursing practice is comprised of nursing knowledge and knowledge from other disciplines. In this toolkit, nursing knowledge is privileged and should be predominant in nursing education and in practice. Nursing knowledge, or nursingology, is that which is specific to the discipline of nursing, consisting of the theories related to the disciplinary focus (Donaldson & Crowley, 1978; Newman et al., 1991; Smith, 2019) at the grand, middle range and practice or situation-specific levels, the research testing or generating those theories, and the practice models and approaches guided by those theories. All patterns of knowing - empirical, ethical, aesthetic, personal and emancipatory knowing - are essential for nursing practice (Chinn, et al 2021). Knowledge from the physical, biological, and social sciences, humanities and arts informs competencies essential for nursing practice at both entry and advanced levels.
- Nursing knowledge for practice must be integrated throughout the curriculum and evident in competencies across all domains and concepts. Foundational courses in the discipline of nursing at both the entry and advanced levels ground students in this body of knowledge which must be threaded in the competencies for practice at both levels. Teaching nursing knowledge in one course without the application of the knowledge in practice separates knowledge from practice, renders nursing knowledge useless, and diminishes the distinctive contributions of nursing practice to the health and wellbeing of those we serve.
- Meeting the competencies related to integrating nursing knowledge in nursing practice requires integrative teaching-learning experiences that connect didactic and practice experiences (Benner, et al., 2010). This can be accomplished through a) the use of practice exemplars, paradigm cases, case studies, practice stories or nursing situations (Barry et al., 2015) in didactic learning situations; b) raising questions in debriefing that invite the integration of nursing knowledge in simulation learning; and c) integrating nursing knowledge into preparation for and reflection on care of persons (families and communities) in clinical/practice learning situations (in pre and post conferences).
- Nursing knowledge, like in many other disciplines, has been formed from a predominant western, Eurocentric worldview. The diversity of knowledge from indigenous, African, Asian, Latinx peoples and cultures is minimal or absent. It is imperative to seek out and amplify the knowledge (philosophies, theories, research approaches, practices) from these sources in all levels of nursing curricula.

Integrative Learning Strategies

These strategies serve as examples of both clinical and didactic learning experiences that can be included in the curriculum for preparing graduates with the expected *Essentials* Domain 1 competencies and sub-competencies. Some strategies may cross more than one domain, which will be indicated.

Entry-level nursing education

In didactic learning environments, contextualize knowledge for practice within practice stories, case studies or nursing situations using all patterns of knowing as the framework for uncovering the relevant knowledge for the situation. Four essential shifts for integration are: a) shift from covering decontextualized knowledge to an emphasis on teaching from a sense of salience, situated cognition and action in particular situations; b) shift from separation of clinical and classroom teaching to integration of classroom and clinical teaching; c) shift from an emphasis on critical thinking to an emphasis on practice reasoning and multiple ways of thinking; d) shift from an emphasis on socialization and role taking to an emphasis on formation (Benner et al., 2010).

The following questions may spark dialogue and analysis of the practice story, nursing situation or case study:

- What empirical knowing guides nursing practice in this situation?
 - nursing theories,
 - nursing research,
 - theories and research from other disciplines
- What ethical and moral knowing guide nursing practice in this situation?
 - ethical principles,
 - professional Code of Ethics,
 - values, professional comportment,
 - nursing as “art” or “acts”
- What personal knowing guides nursing practice in this situation?
 - discovery of self and other through personal reflection,
 - synthesis and connecting with what is known
 - examples of spiritual knowing and unknowing
 - *How can I nurture my personal knowing and formation as nurse?*
- What aesthetic knowing guides nursing practice in this situation?
 - nursing as art/act,
 - creating healing environments

- envisioning/rehearsing,
- inspiration
- What emancipatory knowing guides nursing practice in this situation?
 - political-social-economic structures that impact health and care,
 - facilitating humanization,
 - disrupting existing inequities in health and care,
 - ways of engaging with communities to support change

Key Points

In simulation and clinical practice environments the same pattern of contextualizing knowledge for practice is used. The student presents the nursing situation in pre-conference, and knowledge needed for nursing practice is uncovered through the questions above. In post conference or debriefing students participate in analysis of the knowledge for practice that guided the actions and “way of being” in the situation.

Knowledge for nursing practice is integrated throughout the curriculum. It is not in one course, although an introductory course is important early in the nursing curriculum. For example, students learning about caring for an older adult after a stroke transitioning from a rehabilitation facility to home would study a situation and draw on knowledge such as :

- Meleis’ theory of transitions; Roy’s theory of adaptive systems
- research on transitions in the nursing literature,
- pathophysiology of stroke,
- pharmacotherapeutics of drugs prescribed,
- health disparities related to stroke in the US, reasons for those disparities and how to address them,
- lived experiences of loss of independence, self-concept, etc.
- caregiver stress and support,
- ethics related to autonomy, etc.

Suggested Resources

- Examples can include case studies, simulations, webinars, websites, and online learning modules. Examples of course outlines, learning activities, and several examples of ongoing teaching strategies for teaching nursing theories are given on Nursology.net - <https://nursology.net/resources/teaching-strategies/>
- The [Nursology.net](https://nursology.net) website itself is a rich resource, where over 70 nursing theories are summarized with links to the original sources (see <https://nursology.net/nurse-theories/>)
- In addition, the website provides a Directory of current textbooks that can be used to teach nursing knowledge - <https://nursology.net/resources/books/>

- A description of the 12 journals that focus primarily on nursing theory and philosophy <https://nursology.net/resources/nursing-journals/>
- Links to organizations dedicated to the development of nursing theory and nursing research - <https://nursology.net/resources/organizations/>
- A database of Nurse Leaders of Color who have contributed to the development of the discipline. This database can be used to recognize, honor and connect with nurse leaders of color.

Suggested Textbooks - Entry Level

- Alligood, M.R. (2018). *Nursing theorists and their work* 9th ed. St. Louis: Elsevier.
- Alligood, M.R. (2013). *Nursing theory utilization and application* 5th ed. St. Louis: Elsevier.
- Chinn, P.L., Kramer, M. & Sitzman, K. (2022). *Knowledge development in nursing*. 11th ed. St. Louis: Elsevier.
- Fawcett, J. & DeSanto-Madeya, S. (2013). *Contemporary nursing knowledge: Analysis and evaluation*. 3rd ed. Philadelphia: F.A. Davis.
- Kagan, P., Smith, M.C., & Chinn (2014). *Philosophies and practices of emancipatory nursing: Social justice as praxis*. New York: Routledge.
- McKenna, H.P., Pajnkihar, M. & Murphy, F. (2014). *Fundamentals of Nursing Models, Theories and Practice*, 2nd Ed. New York: Wiley.
- Meleis, A.I. (2017). *Theoretical nursing: Development and Progress* 6th ed. Philadelphia: Wolters Kluwer.
- Smith, M.C. (2020). *Nursing theory for nursing practice* 5th ed. Philadelphia: F.A. Davis.

Suggested Textbooks - Advanced Level

- Butts, J.B. & Rich, K. L. (2017) – *Philosophies and Theories for Advanced Nursing Practice*. 3rd ed. Burlington, MA: Jones & Bartlett.
- Chinn, P.L., Kramer, M. & Sitzman, K. (2022). *Knowledge development in nursing*. 11th ed. St. Louis: Elsevier.
- Im, Eun-Ok and Meleis, A.I. (2021) – *Situation Specific Theories: Development, Utilization, and Evaluation in Nursing*. New York: Springer.
- Kagan, P., Smith, M.C., & Chinn (2014). *Philosophies and practices of emancipatory nursing: Social justice as praxis*. New York: Routledge.
- King, I. & Fawcett, J. (2005) – *The Language of Nursing Theory and Metatheory*. Indianapolis, IN: Sigma Theta Tau.
- Meleis, A.I. (2017). *Theoretical nursing: Development and Progress* 6th ed. Philadelphia: Wolters Kluwer.
- Polifroni, C.E & Welch, M. (1999). – *Perspectives on Philosophy of Science in Nursing: An Historical and Contemporary Anthology*. Philadelphia: Lippincott.

Reed, P.G. & Shearer, N. (2017) – *Nursing Knowledge and Theory Innovation: Advancing the Science of Practice*, 2nd Ed. New York: Springer.

Roy, C. (2014). *Generating Middle Range Theory: From Evidence to Practice*. New York: Springer.

Smith, M.C. (2020). *Nursing theory for nursing practice* 5th ed. Philadelphia: F.A. Davis.

Smith, M.J. & Liehr, P. (2018). *Middle range theory for nursing* 4th ed. New York: Springer.

Walker, L. & Avant, K. (2018). *Strategies for theory construction in nursing*. 6th Ed. New York: Pearson.

Nurse Theorist Resources (Fitne, Inc. is the sole source of 31 video interviews with nursing theorists)

- Volume 1: *Nurse theorists: Portraits of Excellence* - Dr. Jacqueline Fawcett interviewer.
 - Dorothy Johnson
 - Imogene King
 - Myra Levine
 - Betty Neuman
 - Dorothea Orem
 - Martha Rogers
 - Callista Roy
 - Virginia Henderson
 - Madeleine Leininger
 - Margaret Newman
 - Rosemarie Parse
 - Ida Jean Orlando
 - Hildegard Peplau
 - Reva Rubin
 - Jean Watson
 - Florence Nightingale (historical)

- Volume 2 & 3 - Dr. Martha Alligood interviewer.
 - Helen Erickson
 - Merle Mishel
 - Pamela Reed
 - Nola Pender
 - Afaf Meleis
 - Patricia Benner
 - Elizabeth Barrett
 - Cheryl Beck
 - Marilyn Ray
 - Katherine Kolcaba

- Savina Schoenhofer (Anne Boykin)
- Excellence in Action Series
 - Patricia Benner
 - Dorothea Orem
 - Callista Roy

Suggested content for entry-level and advanced-level competencies that provides guidance for faculty in deciding what areas of content are recommended for each domain, competency, and sub-competency.

Recommended Content - Entry Level

- Nursing as a Professional Discipline
 - Characteristics of a professional discipline
 - Classifications of disciplines: sciences (natural, behavioral/social, human sciences), humanities, arts.
 - Basic and applied sciences
 - Models of science (Empirical-analytic, human science, critical/emancipatory)
 - The critical importance of identifying nursing as a professional discipline
- Focus of the discipline of nursing
 - Nursing is the study of...
 - Importance of disciplinary focus in interprofessional practice and interdisciplinary research
 - Nursing or nursology?
- Theory as essential to a discipline
 - Definitions of theory
 - Purpose of theory in a professional discipline
 - Relationships of theory - research - practice in a professional discipline
- Patterns of knowing in the professional discipline
 - Empiric, aesthetic, ethical, personal, spiritual, sociopolitical, emancipatory
 - Nursing as science and art
 - Integration of patterns of knowing in practice
- Evolution of nursing as a professional discipline
 - Early beginnings of caring for the sick (Greek, Middle Ages)
 - Caring for the sick in homes, midwifery
 - Professionalization of nursing (Nightingale, Mary Seacole, Katherine MacCauley)
 - Medicalization of nursing (medical model vs. nursing model)
 - Reclaiming nursing as a profession and discipline
 - Scientific evolution through theory development and research

- Structure of nursing knowledge - Levels of theories (ladder of abstraction)
 - Disciplinary focus/Metaparadigm
 - Paradigms - different worldviews that shape the pursuit of scholarly inquiry
 - Particulate-deterministic
 - Integrative-interactive
 - Unitary-transformative
 - Other schemas of paradigms in nursing
 - Philosophy in nursing knowledge
 - Nursing conceptual frameworks and grand theories
 - Middle range theories
 - Practice theories/practice models
 - Research traditions
- Critical reflections on nursing theories
 - Review frameworks for critique of various levels of nursing theory
 - Survey, analysis, critique of selected conceptual models and grand theories
 - Review of a range of nursing conceptual models and theories
 - Research supporting/refuting them
 - Examples of their use in practice
 - Survey, analysis, critique of selected middle range theories in nursing
 - Survey, analysis, critique of selected practice theories in nursing
- Nursing knowledge: Unique and Borrowed
 - Theories from other disciplines
 - Integration of theories from other disciplines in nursing practice
- Nursing practice: Theory-guided, evidence-informed, reflective, ethical, relationship-based, person-centered, creative,
- A model for integration of knowledge for nursing practice (Chinn & Kramer)

Recommended Content - Advanced Level

- Advanced Practice in the Professional Discipline of Nursing
 - Analysis of the professional discipline of nursing
 - Barriers to practicing from nursing's unique disciplinary perspective
 - Structure of advanced practice in nursing
 - Analyzing the burgeoning knowledge in nursing/nursology
 - Historical evolution of advanced practice in nursing education
 - Early focus of Masters education in nursing
 - Clinical specialties
 - Nurse midwifery
 - Nurse practitioners
 - Nurse anesthesia

- Nursing administration
 - Emerging roles in advanced nursing practice
 - From Master of Science in Nursing to the Doctor of Nursing Practice
- Creating advanced practice models based on nursing's disciplinary perspective.
 - Beyond the medical model, business model
- Framing advanced practice through integrated knowledge development (integrating patterns of knowing).
 - Review of nursing theories and the research and practice related to them in selected focus in advanced practice.
- Critical reflections on existing innovative advanced practice models.
 - Are they nursing theory-guided, evidence-informed, reflective, ethical, relationship-based, person-centered, innovative?
- Developing advanced nursing practice models based in nursing theories and relevant theories from other disciplines.
 - Process of developing a practice model guided by nursing theory
- Examining the value of advanced practice models based on nursing knowledge.
 - Evaluation research based on foundations of integrated knowledge development
 - Advanced practice beyond evidence-based practice
 - Advanced practice that is grounded in the discipline of nursing
 - Interprofessional practice and advanced practice based on nursing knowledge
- Role of the advanced practice nursing in knowledge development
 - Doctor of Nursing Practice and PhD in Nursing - What are the differences in knowledge development
 - Boyers' model of scholarship - place of advanced practice nurses in this model
 - DNP-PhD teams to develop knowledge for advanced practice.

Content of specific theories should be integrated within other Domains and Concepts. Table 1 depicts examples of nursing theories that are relevant to a specific Domain or Concept.

Table 1

Domain or Concept	Knowledge for Nursing Practice
Domain	
D2 Person-Centered Care	Middle range theory of caring (Swanson); Travelbee, Orlando, Peplau, Unitary Caring (Smith), Health as expanding consciousness (Newman); Story theory (Smith & Liehr); Human becoming (Parse); Care, Core, Cure model (Hall)
D3 Population Health	Upstream model for population health (Butterfield), Theory of Critical Caring (Falk-Rafael); Community Nursing Practice Model (Parker, Barry & King); Science of unitary human beings (Rogers); Conceptual model of nursing and population health (Fawcett & Ellenbecker) Rural nursing theory (Winters & Lee)
D4 Scholarship for Nursing Practice	Integrated Expression of Knowledge in Practice (Chinn, Kramer & Sitzman)
D5 Quality and Safety	Quality-Caring model (Duffy)
D6 Interprofessional Partnerships	Role Based Practice Theory (O'Rourke) Bureaucratic caring (Ray)
D7 Systems-based Practice	Theory of bureaucratic caring (Ray); Peace and power theory (Chinn); AACN Synergy Model
D8 Informatics and Healthcare Technology	Theory of technological competency as caring in nursing (Locsin)
D9 Professionalism	Role-based Practice theory (O'Rourke); Attributes of caring (Roach)
D10 Personal, professional and leadership development	Theory of bureaucratic caring (Ray); Theory of human caring (self-care); From novice to expert (Benner); Nurses' psychological trauma (Foli); Strengths-based nursing and healthcare (Gottlieb).

Concept	
C1 Clinical judgment	Clinical power (Polifrioni); Patterns of knowing (Carper, Chinn & Kramer, Willis, White, Munhall); Primacy of caring (Benner).
C2 Communication	Modeling and Role Modeling (Erickson); Theory of human caring (Watson), Peace & Power theory (Chinn); Health as expanding consciousness (Newman); Story theory (Smith & Liehr); Human becoming theory (Parse); Deliberative nursing process (Orlando).
C3 Compassionate care	Watson's theory of human caring; Nursing as Caring (Boykin & Schoenhofer); Comfort theory (Kolcaba); Theory of unitary caring (Smith); Emancipatory theory of compassion for nursing (Georges),
C4 Diversity, equity and inclusivity	Theory of self-reliance (Lowe); Theory of cultural marginality (Choi); Theory of transcultural caring (Leininger); Emancipatory nursing practice (Walter) Transcultural caring dynamics (Ray); Theory of cultural humility (Foronda)
C5 Ethics	Theory of moral reckoning (Nathaniel)
C6 Evidence-based practice	Knowledge for Nursing Practice: Beyond Evidence Alone (Smith, Chinn, Nicoll); Evidence-Based Practice and Nursing Theory (Karnick)
C7 Health policy	Conceptual model of nursing and health policy (Fawcett & Russell)
C8 Social determinants of health	Critical caring theory (Falk-Rafael)
Curriculum Content	

Health-illness related experiences	<p>Theory of meaning (Ritchie, Walter & Starck); Theory of symptom management (Bender, Janson, Franck & Lee)</p> <p>Theory of unpleasant symptoms (Lenz & Pugh); Theory of self-efficacy (Resnick); Theory of transitions (Meleis & Im); Theory of self-care of chronic illness (Riegel, Jaarsma & Stromberg); Expanded Chronic Care Model (Barr); Theories of uncertainty in illness (Clayton, Dean & Mishel)</p>
Transitions in the Life Process	<p>Theory of self-transcendence (Reed); Theory of Successful Aging (Troutman-Jordan); Child health assessment interaction theory (Barnard); Middle range theory of caring (Swanson); Middle range theory of parental post adoption depression (Foil)</p>
Illness-related transitions	<p>Transitions Theory (Meleis); Facilitating Resilience (Szanton and Gill)</p> <p>Illness experience (Morse & Johnson)</p>
Healing and healing environments	<p>Nightingale's theory; Theory of human caring (Watson); Dossey's theory of integral nursing; Process model of wholistic healing and personal transformation (Rosa)</p>
Promoting health, well-being and quality of living and dying	<p>Theory of Power as knowing participation in change (Barrett); Theory of health as expanding consciousness (Newman); Theory of health promotion (Pender)</p> <p>Theory of self-care (Orem); Theory of integrative nurse coaching (Dossey, Luck & Schaub); Situation-specific theory of heart failure self-care (Riegle & Dickson)</p>
Stress, coping and adaptation throughout the life process	<p>Roy Adaptation Model; Newman Systems Model</p>
Cultural Care	<p>Transcultural nursing (Leininger); Transcultural caring dynamics (Ray)</p>

Human-environment energy field patterning	Rogers Science of Unitary Human Beings, Power as knowing participation in change (Barrett), Theory of Pandimensional awareness/integral presence (Phillips), Kaleidoscoping in change (Butcher)
Consciousness and health	Health as expanding consciousness (Newman)

Recommended Assessment Strategies

These strategies are recommended as options for faculty to assess students' competencies in a particular area. Instruments may not be valid, reliable standardized assessment tools, except where noted. Some of the recommended strategies, particularly if generalizable, may be featured in this section and in the curricular mapping tool included in the tool kit.

Entry Level (Level 1) Assessment Strategies

The student will

- Dialogue with the assessor to articulate the disciplinary focus of her/his/their practice.
- Dialogue with the assessor about the knowledge that informs practice decisions (theories, evidence, ethics, personal, emancipatory, etc.).
- Self-assess knowledge of nursing theories that guide practice.
- Self-assess strengths and limitations of current practice based on theoretical knowledge.
- Test relevant nursing theories in practice.
- Evaluate the value of selected nursing theories for practice situations.
- Develop a plan of care that integrates theory, evidence, and other patterns of knowing.
- Assess health and well-being of persons/families/communities based on theoretical/conceptual frameworks and patterns of knowing.
- Develop an approach to assessment that includes all patterns of knowing.
- Compose a philosophy of practice that integrates the disciplinary focus of nursing, values and patterns of knowing.
- Dialogue with peers about the philosophical and theoretical foundations of their practice.
- Evaluate outcomes of care based on concepts/constructs from theoretical models.
- Explains nursing's unique disciplinary perspective to interprofessional team members in the context of patient care.

Advanced (Level 2) Assessment Strategies

The student will

- Dialogue with the assessor to differentiate her/his/their practice as an advanced practice nurse from other primary care providers (physicians, physician assistants) based on the focus of the discipline of nursing.
- Dialogue with the assessor about the knowledge that informs advanced practice decisions (theories, evidence, ethics, personal, emancipatory, etc.).
- Self-assess knowledge of nursing theories that guide advanced practice.
- Self-assess strengths and limitations of current nursing practice based on theoretical knowledge.
- Test relevant nursing theories in advanced practice.
- Innovate models for advanced nursing practice based on nursing theories.
- Evaluate the value of selected nursing theories for advanced practice situations.
- Develop plans of care for persons, families, populations, communities that integrate theory, evidence, and other patterns of knowing.
- Assess health and well-being of persons, families, populations, communities based on theoretical/conceptual frameworks and patterns of knowing.
- Develop an approach to assessment that is holistic and includes all patterns of knowing.
- Compose a philosophy of advanced practice that integrates the disciplinary focus of nursing, values, and patterns of knowing.
- Dialogue with peers about the philosophical and theoretical foundations of their practice.
- Evaluate outcomes of care based on concepts/constructs from theoretical models.
- Contributes nursing's unique disciplinary perspective to interprofessional team meetings related to patient, family, population, community care.

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