Care, Compassion, and Communication in Professional Nursing: Art, Science, or Both

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Debate continues as to whether nursing is a science, art, or a combination of the two. Given the recent growing emphasis in the current healthcare environment to deliver patient-centered care, the art of nursing and its impact on patient outcomes is being re-examined. The current article discusses a case narrative to provide a venue for self-reflection in nursing practice.

Professional nursing is more multifaceted and stimulating than ever. Uncertainties and changes in the healthcare system contribute to the complexity of the scientific knowledge and technical expertise required of modern nurses. Nurses are expected to provide competent evidence-based, patient-centered care. These expectations require that nurses have “up-to-date knowledge, clinical, technical, and communicative skills, and the ability to problem solve through the use of clinical judgment” (Schroeter, 2008, p. 9). However, patients and their families also expect nurses and other healthcare providers to give compassionate care that maintains patients’ dignity and humanity.

The American Nurses Association (ANA, 2010) defined professional nursing as “the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities, and populations” (p. 8). Embedded in this definition is the need to regard nursing as a science and an art, which is a source of ongoing debate among nurses who may stress one attribute over another (e.g., a nurse who emphasizes the role of technology and minimizes the role of emotional support in caring for a patient).

The Science of Nursing

The science of nursing is a combination of performance, skills, knowledge, and attitudes. Current models of nursing focus on the rapid expansion of scientific discoveries being made in medicine and technology. A broad range of academic and clinical experience is required to become a competent nurse. In addition, nurses are responsible for having knowledge and skills in critical thinking, clinical decision making, and evidence-based practice. Nurses must understand how to use these skills to achieve optimal outcomes. To maintain clinical competency and stay current with the scientific advances being made across the cancer continuum, nurses must engage in lifelong learning and continuing competency. According to the Oncology Nursing Society (ONS, 2013), lifelong learning to achieve continuing competency is a fundamental tenet of professional oncology nursing. ONS’s commitment to these core concepts is reflected by the educational initiatives offered to oncology nurses around the world. The commitment to lifelong learning also is supported in other areas of professional nursing. The tools to handle the science of nursing are readily available.

The Art of Nursing

In the contemporary healthcare environment, the public recognizes that competent nursing requires a strong knowledge base and technical skills. However, patients and their families also expect nurses to be caring, compassionate, and communicative. These qualities often are referred to as the art of nursing and are highly valued by patients and essential to providing patient-centered care. Few tools are available to teach nurses and guide healthcare systems on how to acquire those qualities. Nurses often are overwhelmed by competing demands and have limited time to practice the art of nursing, but taking the time to demonstrate caring, compassion, and effective communication along with clinical competence can contribute to patient safety and satisfaction. According to recent studies (Dempsey, Reilly, & Buhlman, 2014; Lusk & Fater, 2013), the concepts of care and compassion are difficult to define and measure, but they are driving forces in nursing, and they can enhance the quality of the patient experience. Achieving a balance between the science and art of nursing can make a difference in people’s lives.

Case Narrative

A 32-year-old man named J.P. was hospitalized for a bowel obstruction in a