

**COMMUNITY COLLEGE OF RHODE ISLAND
NURSING 1010 / 1020**

NURSING CARE PLAN GUIDELINES

1. State a **NANDA NURSING DIAGNOSIS** with etiology/risk factors in the first column. If the nursing diagnosis is an **ACTUAL** nursing diagnosis, specify the subjective and objective data validating the nursing diagnosis under **DEFINING CHARACTERISTICS**. **RISK** nursing diagnoses do not have defining characteristics.
2. In the second column, select an appropriate **NOC OUTCOME LABEL** for the nursing diagnosis specified. You may use a suggested NOC (Nursing Outcome Classification) label (i.e., one suggested in the Ackley textbook) or one of your own choosing. Also state the related scale. To identify the related scale, refer to the handout “**NOC Outcome Labels and Related Measurement Scales.**” Most scales are constructed using a 1-5 rating with 5 reflecting the most desirable condition relative to the outcome. Note on the backside of the **CCRI NURSING CARE PLAN FORM, MEASUREMENT SCALES USED IN NOC**. Rate your patient’s status relative to the NOC outcome, as concluded from your initial assessment and enter this Initial Rating, Date and Time in the space provided. In column two, also state a specific Client/Patient Outcome. Include a target date/time for achievement of the client/patient outcome. Remember that the client/patient outcome is derived from the problem statement, which is the first part of the nursing diagnosis. If achieved, it should demonstrate significant or complete resolution of the problem.
3. Proceed to column three. Select a suggested **NIC (NURSING INTERVENTIONS CLASSIFICATIONS) LABEL**, or one of your choosing, that is appropriate for the stated **NOC LABEL AND PATIENT OUTCOME**. Determine and list interventions that are specific and individualized for your patient. Remember that nursing interventions are derived from the second part of the nursing diagnosis - specifically the etiology/risk factors, and therefore strive to deal with factors that cause or contribute to the problem.
4. In column four, specify **RATIONALES** for your nursing interventions.
5. Implement the Nursing Care Plan, i.e., carry out the individualized interventions.
6. Return to column two at the target date/time to complete evaluation of the Nursing Care Plan. Review the Client/Patient Outcome and (in collaboration with the patient, family, primary nurse - as appropriate) determine to what degree the outcome has been achieved (met, partially met, unmet.) Review the Initial Rating on the NOC Scale and determine progression, if any, along the scale. In column two, specify an **END RATING & DATE/TIME** on the NOC scale and write an **EVALUATIVE STATEMENT** which describes outcome achievement and whether the plan should be continued, revised, etc. . . . If the plan is to be continued, state a subsequent evaluation date/time.
7. In column five, reflect on the experience of writing and implementing this Nursing Care Plan. Contemplate and please share your sense of accomplishment, learning, frustration and degree of satisfaction achieved during this process.