After gaining an idea of what it means to think critically, solve problems, and make decisions, you must become aware of your own thinking style and abilities. Acquiring critical-thinking skills and an attitude of inquiry then becomes a matter of practice. Critical thinking is not an either–or phenomenon; it exists on a continuum, along which people develop and use the process of inquiry. Solving problems and making decisions are risky. Sometimes the outcome is not what was desired. With effort, however, everyone can achieve some level of critical thinking in order to become effective problem solvers and decision makers (Kozier, Erb, Blais, Wilkinson, & Van Leuven, 2003).

### Table 1.7 Characteristics of Critical Thinking

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Description</th>
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<tbody>
<tr>
<td>Rational</td>
<td>Based on logic rather than prejudice or fear</td>
</tr>
<tr>
<td>Reflective</td>
<td>Collect data; think through in disciplined manner</td>
</tr>
<tr>
<td>Inquiring</td>
<td>Examine claims; determine truth and validity</td>
</tr>
<tr>
<td>Analytical</td>
<td>Analyze issues for understanding; decide which authorities are credible</td>
</tr>
<tr>
<td>Objective</td>
<td>Attempt to remove bias from own and others’ thinking; aware of own values and feelings</td>
</tr>
<tr>
<td>Evaluative</td>
<td>Evaluate arguments; decide on course of action; solve problems; use accepted standards</td>
</tr>
</tbody>
</table>

The Nursing Process

The nursing process is the same in all clinical areas of professional practice. In the 2000 Scope and Standards of Psychiatric–Mental Health Nursing Practice, the American Nurses Association (ANA) delineates the standards to which nurses are held, both legally and ethically. These standards, based on the steps of the nursing process, are covered in Box 1.4. Such data can also be viewed on the American Nurses Association Web site.

### Standard I: Assessment

Assessment in mental health nursing is based on the collection of data from multiple sources, such as the client, family and friends, other health care providers, medical records, and community agencies. The client’s immediate condition or needs determine the order in which assessment data are collected. Clinical skills include observation, psychosocial history taking, neuropsychiatric assessment, and physical assessment. The assessment process provides the database for clinical decision making: diagnosis, outcomes, interventions, and evaluation.

**Interview** The interview is often the initial step in the assessment process. The setting for the interview and the length of time are determined by the client’s mental and physical status. Prior to meeting the client, nurses should ask themselves: What assumptions do I have about this person, by virtue of her/his diagnosis, history, and lifestyle? Nurses must first recognize their assumptions and predictions in order to put them aside and be fully present to the situation and the individual.

All nurses, no matter which field they choose as a specialty, must be able to gain the client’s cooperation and collaboration. Thus, one of the first goals of the initial interview is to establish and maintain rapport with clients. Clients should not feel as if they are “being interviewed” but rather that they are “talking to someone” who is sensitive and compassionate. As you gather information, you must constantly attend to rapport with the client.

**Observation** Careful, accurate observation is vital during the assessment process. Begin to observe the moment of meeting clients and their families. Observation involves all the senses, but seeing and hearing are the most critical. The chapters on disorders (units 4 and 5) discuss how to assess clients for the behavioral, affective, cognitive, sociocultural, and physiologic characteristics of each disorder. In general, here is how observations are used in each of those categories.

When observing clients **behaviorally**, answer the following questions:

- Where is the client, and what is she or he doing?
- Is the behavior appropriate to the setting (own home, public place)?
- Is the client dangerous to self or others?
- Is any bizarre or unusual behavior occurring?

When observing for **affective** characteristics, answer the following questions:

- Is there evidence of intense emotions, such as loud laughter, crying, yelling, or screaming?
- Is the affect appropriate to the situation?

When observing for **cognitive** characteristics, answer the following questions:

- Is the client going over and over the same topic (ruminating)?