Lydia E. Hall Theory
Core, Care and Cure Model

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Introduction-

- Lydia Hall began her prestigious career in nursing as a graduate of the York Hospital School of Nursing in York, Pennsylvania.
- She earned B.S. and M.A. degrees from Teachers College, Columbia University, in New York.
- Had faculty position at the York Hospital School of Nursing and Fordham Hospital School of Nursing.
- Became consultant in Nursing Education to the Nursing Faculty at the State University of New York, Upstate Medical Center. She also was an instructor of nursing education at Teachers College.
- Authored 21 publications and the bulk of the articles and addresses regarding her nursing theory were published in the early to middle 1960s.
- In the 1967, she received the award for Distinguished Achievement in Nursing Practice from Columbia University.
- Greatest Achievements: Hall design and develop Loeb Center for Nursing at Montefiore Hospital in New York City and apply her theory to nursing practice. Opened at January 1963. A 80 bed capacity for persons aged 16 years or older who were no longer having acute biological disturbances. Patients were recommended by their physicians and had favourable potential for recovery and subsequent return to their community. Hall served as administrative director of the Loeb Center for Nursing for from its opening until her death in February 1969.

Hall’s theory define Nursing as the “participation in care, core and cure aspects of patient care, where CARE is the sole function of nurses, whereas the CORE and CURE are shared with other members of the health team.” The major purpose of care is to achieve an interpersonal relationship with the individual that will facilitate the development of the core.

As Hall says; “To look at and listen to self is often too difficult without the help of a significant figure (nurturer) who has learned how to hold up a mirror and sounding board to invite the behaver to look and listen to himself. If he accepts the invitation, he will explore the concerns in his acts and as he listens to his exploration through the reflection of the nurse, he may uncover in sequence his difficulties, the problem area, his problem, and eventually the threat which is dictating his out-of-control behavior.”

Assumptions
The assumptions of Hall’s Care, Cure, Core Theory are as follows:

1. The motivation and energy necessary for healing exist within the patient, rather than in the healthcare team.

2. The three aspects of nursing should not be viewed as functioning independently but as interrelated. And lastly,

3. The three aspects interact, and the circles representing them change size, depending on the patient’s total course of progress.

MAJOR CONCEPTS
Individual
The individual human who is 16 years of age or older and past the acute stage of a long-term illness is the focus of nursing care in Hall’s work. The source of energy and motivation for healing is the individual care recipient, not the health care provider. Hall emphasizes the importance of the individual as unique, capable of growth and learning, and requiring a total person approach.

Health
Health can be inferred to be a state of self-awareness with conscious selection of behaviors that are optimal for that individual. Hall stresses the need to help the person explore the meaning of his or her behavior to identify and overcome problems through developing self-identity and maturity.

Society and Environment
The concept of society or environment is dealt with in relation to the individual. Hall is credited with developing the concept of Loeb Center because she assumed that the hospital environment during treatment of acute illness creates a difficult psychological experience for the ill individual. Loeb Center focuses on providing an environment that is conducive to self-development. In such a setting, the focus of the action of the nurses is the individual, so that any actions taken in relation to society or environment are for the purpose of assisting the individual in attaining a personal goal.
**Nursing**
Nursing is identified as consisting of participation in the care, core, and cure aspects of patient care.

**SUBCONCEPTS**
Hall’s theory has three components which are represented by three independent but interconnected circles. The three circles are: the core, the care, and the cure. The size of each circle constantly varies and depends on the state of the patient.

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**Hall’s Three Aspects of Nursing**

**The Person**
*Therapeutic use of self*

**The Body**
*Intimate bodily care*

**The Disease**
*Seeing the patient and family through medical care*

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**THREE ASPECTS OF NURSING**
Theoretical Assertions

1. Nursing functions differently in the three interlocking circles that constitute the aspects of the patient. These three circles are interrelated and are influenced by each other. The three circles are: the patient’s Body, the Disease affecting the body, and the Person of the patient, which is affected by each of the other circles. Nursing operates in all three circles, but it shares then with the other professions to different degrees. Pathological conditions are treated with medical care (Cure); therefore nursing shares this with the physicians. The Person aspect (Core) is cared for by therapeutic use of self. Therefore this area is shared with psychiatry, psychology, social work, and religious ministry. The body of the patient is cared for exclusively by nursing (Care). The Care circle includes all intimate bodily care such as feeding, bathing, and toileting. The care component is the exclusive domain of nursing.

2. Hall’s second assertion relates to the Core postulate of her theory. As the patient needs less medical care, he or she needs more professional nursing care and teaching. This inversely proportional relationship alters the ratio of nursing care in the three circles. Patients in the second stage of illness (nonacute phase) are primarily in need of rehabilitation through learning; therefore the Care and Core circles predominate the Cure circle.

3. The third assertion of the theory is that wholly professional nursing care will hasten recovery. Hall descried the concept of team nursing, which gives the care of less complicated cases to caregivers with less training. Nurses are complex people using a complex process of teaching and learning in caring for complex patients with complex diseases. Only professional nurses are inherently qualifies, to provide the teaching, counseling, and nurturing needed in the second stage of illness.

The Care Circle

According to the theory, nurses are focused on performing the noble task of nurturing patients. This circle solely represents the role of nurses, and is focused on performing the task of nurturing patients. Nurturing involves using the factors that make up the concept of mothering (care and comfort of the person) and provide for teaching-learning activities.

The care circle defines the primary role of a professional nurse such as providing bodily care for the patient and helping the patient complete such basic daily biological functions as eating, bathing, elimination, and dressing. When providing this care, the nurse’s goal is the comfort of the patient.

Moreover, the role of the nurse also includes educating patients, and helping a patient meet any needs he or she is unable to meet alone. This presents the nurse and patient with an opportunity for closeness. As closeness develops, the patient can share and explore feelings with the nurse.

The Core Circle

The core, according to Hall’s theory, is the patient receiving nursing care. The core has goals set by him or herself rather than by any other person, and behaves according to his or her feelings and values. This involves the therapeutic use of self, and is shared with other members of the health team.

This area emphasizes the social, emotional, spiritual, and intellectual needs of the patient in relation to family, institution, community and the world. This is able to help the patient verbally express feelings regarding the disease process and its effects by the use of reflective technique. Through such expression, the patient is able to gain self-identity and further develop maturity.

Reflective technique is used by the professional nurse in a way he or she acts as a mirror to the patient to help the latter explore his or her own feelings regarding his or her current health status and related potential changes in lifestyle.

Motivations are discovered through the process of bringing into awareness the feelings being experienced. With this awareness, the patient is now able to make conscious decisions based on understood and accepted feelings and motivation.

The Cure Circle

The cure as explained in this theory is the aspect of nursing which involves the administration of medications and treatments. Hall explains in the model that the cure circle is shared by the nurse with other health professionals, such as physicians or physical therapists.

In short, these are the interventions or actions geared toward treating the patient for whatever illness or disease he or she is suffering from. During this aspect of nursing care, the nurse is an active advocate of the patient.
As seen in the figure above, the three interlocking circles may change in size and overlap in relation to the patient’s phase in the disease process. A nurse functions in all three circles but to different degrees.

For example, in the care phase, the nurse gives hands-on bodily care to the patient in relation to the activities of daily living such as toileting and bathing. In the cure phase, the nurse applies medical knowledge to treatment of the person, and in the core phase, the nurse addresses the social and emotional needs of the patient for effective communication and a comfortable environment.

**STRENGTHS**

Hall’s model appears to be completely and simply logical. Her work may be viewed as the philosophy of nursing. The three Cs (care, core, and cure) in this theory were unique. In all the circles of the model, the nurse is present, although focus of the nurse’s role is on the care circle.

**WEAKNESSES**

Hall’s model is considered to be plain and simple in its presentation. However, the receptiveness and resilience necessary for its utilization and function may not be so simple for nurses whose personality, educational preparation, and experience have not prepared them to function with minimal structure. This and the self-imposed age and illness requirements limit the generalizability.

The age requirement for the application of her theory which is 16 years of age and above limits the theory since it cannot be disregarded that nurses are faced with pediatric clients every now and then.
The concept of a patient aggregate such as having families and communities as the focus of nursing practice was not tackled. It is purely on the individual himself. Although, the role of the family or the community within the patient’s environment was modestly discussed.

CONCLUSION

Hall used her knowledge of psychiatry and nursing experiences in the Loeb Center as a framework for formulating the Care, Core and Cure Theory. Her model contains three independent but interconnected circles. The three circles are: the core, the care, and the cure.

The core is the patient, the cure refers to the medical and nursing interventions and the care is the nurturing provided by nurses. Nursing functions in all three of the circles but shares them to different degrees with other disciplines.

Even though Hall confined her concepts for patients with the age of 16 years and above, the concepts of care, core and cure can still be applied to every age group but again, none was specified.

This theory puts emphasis on the importance of the total patient rather than looking at one part or aspect. There is also emphasis put on all three aspects of the theory, the three Cs, functioning together.

And for a nurse to successfully apply Hall’s theory, the individual must pass an acute stage of illness. In this theory, no nursing contact with healthy individuals, families, or communities, contradicts the concept of health maintenance and disease prevention.

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