

Education and Standardized Discussion Guides to Enhance Nurses' Spiritual Care Practices in the Medical Intensive Care Unit

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Background

Spiritual care is recognized as an essential component of holistic nursing care that is linked to improved health outcomes. Elements of spiritual care include giving consideration to patients' spiritual practices that may impact their medical treatment, asking about the patient's past and present spiritual practices, and participating in their spiritual or religious practices. Despite the acknowledgement of spiritual care as a requisite of quality nursing practice, only 12% of nurses report receiving spiritual care training. As many as 88% of acute care nurses fail to provide spiritual care, and as few as 6% of patients report receiving it.

Purpose

To determine how introduction of spirituality education and spiritual care discussion guides for use by clinicians affect nurses' behaviors and attitudes towards providing spiritual support to patients in the Medical Intensive Care Unit.

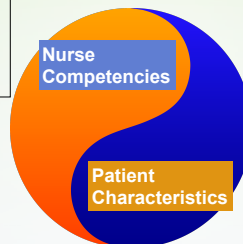
Methods

- ❖ Pre-Post Quasi-Experimental Pilot study design using the Spiritual Care Practice Questionnaire
- ❖ 12 MICU nurses in a 25-bed unit at a large, midwestern hospital
- ❖ 20 minute education session
- ❖ Use of Spiritual Care Discussion Guides and Pocket-guide resource
- ❖ 3 week implementation

Theoretical Framework

American Association of Critical Care Nurses (AACN) Synergy Theory

-Nurse's spiritual competence
-Knowledge and awareness
-Nurse's comfort level



BODY, MIND and SPIRIT
-Spiritual needs
-Level of spiritual distress
-Religious practices

Spiritual Care Discussion Guides

Discussion Guide Upon Admission and PRN

- S** What are the **S**ources of meaning, support or connection in your life?
- O** Would you describe yourself as a religious and/**O**r spiritual person? If so, explain.
- U** Are there any religious or spiritual practices or restrictions that you **U**se to guide your healthcare decisions?
- L** Can you **L**ist any religious or spiritual needs that you have, or resources that you need assistance accessing?
- S** Would you like to **S**peak with a chaplain or someone from spiritual care?

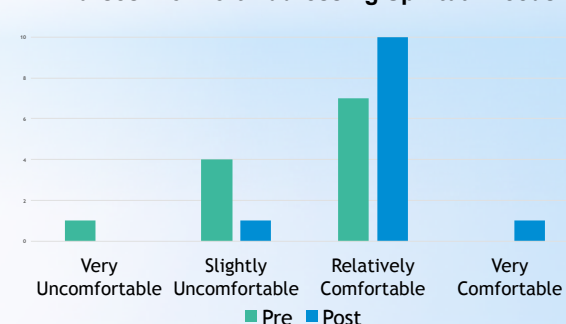
End-of-Life Discussion Guide

- D** How would you describe a good **D**eath?
- N** Are there religious or spiritual **N**eeds, that if met, would ease this process?
- R** Are there certain **R**ituals or rites that you would like us to observe or help facilitate?
- C** Would you like to speak with a **C**haplain or someone from spiritual care?
- C** Regarding patient care: How can we **C**ontinue to honor your wishes after death?
Regarding family: How can we best **C**are for you after the death?

Results

- ❖ Significant improvement in comfort assessing and addressing patients' spiritual needs ($p=.05$).
- ❖ Nurses reported more frequently providing therapeutic communication to help patients reflect on their spirituality, making arrangements for patients to participate in spiritual practices, and personally participating in spiritual care after the intervention ($p < .05$).
- ❖ 91.6% found the SOULS discussion guide useful, and 83% found DNRCC useful for practice 83%.
- ❖ The discussion guides facilitated open, honest conversations with patients and families.
- ❖ Identified words the nurse can use to approach the topic.
- ❖ Nurses requested more institutional and physician support for integration of spiritual care.

Nurses' Comfort Addressing Spiritual Needs



Implications for Practice

- ❖ Validates use of standardized spiritual care discussion guides
- ❖ Expounds on literature by identifying an intervention to enhance nurses' comfort
- ❖ Further investigation of barrier mitigation needed

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