Spirituality in nursing care:

a pocket guide

Introduction

This is a guide to enable nursing staff to address questions about the spiritual part of care. Media headlines have brought attention to the potential conflict that can exist between personal spiritual values/beliefs of nursing staff and their practice.

The Nursing and Midwifery Council expects newly qualified graduate nurses to be able to:

" In partnership with the person, their carers and their families, makes a holistic, person centred and systematic assessment of physical, emotional, psychological, social, cultural and spiritual needs, including risk, and together, develops a comprehensive personalised plan of nursing care."

In 2010, the RCN commissioned a survey on spirituality. It revealed that members wanted:

- more education and guidance about spiritual care
- clarification about personal and professional boundaries
- support in dealing with spiritual issues.

Spiritual care definition

That care which recognises and responds to the needs of the human spirit when faced with trauma, ill health or sadness and can include the need for meaning, for self worth, to express oneself, for faith support, perhaps for rites or prayer or sacrament, or simply for a sensitive listener. Spiritual care begins with encouraging human contact in compassionate relationship, and moves in whatever direction need requires' (NHS Education for Scotland, 2009).

Spirituality during a time of crisis

It has been said that 'Often it is not until crisis, illness…or suffering occurs that the illusion (of security) is shattered…illness, suffering…and ultimately death…become spiritual encounters as well as physical and emotional experiences' (Ganstrom in Hitchins, 1988).

Spirituality is about:

- hope and strength

- trust

- meaning and purpose

- forgiveness

- belief and faith in self, others, and for some this includes a belief in a deity/higher power

- peoples' values

- love and relationships

- morality

- creativity and self expression.

Spiritual care is not:

- just about religious beliefs and practices

- about imposing your own beliefs and values on another

- using your position to convert

- a specialist activity

- the sole responsibility of the chaplain.

Practising spiritual care

In our survey a member said *"Spiritual care is a fundamental part of nursing currently much neglected through ignorance and misunderstanding"*.

- The practice of spiritual care is about meeting people at the point of deepest need.

- It is about not just 'doing to' but 'being with' them.

- It is about our attitudes, behaviours and our personal qualities i.e. how we are with people.

- It is about treating spiritual needs with the same level of attention as physical needs.

What is needed from me?

- Adopting a caring attitude and disposition.

- Recognising and responding appropriately to people's needs.

- Using observation to identify clues that may be indicative of underlying spiritual need e.g. peoples' disposition (sad/withdrawn), personal artefacts (photographs, religious/meditational books and symbols).

- Giving time to listen and attend to individual need.

- Being aware of when it is appropriate to refer to another source of support e.g. chaplain, counsellor, another staff member, family or friend.

Preparing to give spiritual care

Just as you would assess your patients' physical needs, an initial assessment of their spiritual concerns is also important. You may find questions such as these helpful:

- do you have a way of making sense of the things that happen to you?

- what sources of support/help do you look to when life is difficult?

- would you like to see someone who can help you?

- would you like to see someone who can help you talk or think through the impact of this illness/life event? (You don't have to be religious to talk to them).

Integrating personal beliefs and professional practice

It may become apparent that the client requires some intervention to support them with their spiritual or religious beliefs. Before taking any action you should consider the following:

- has the intervention been initiated by the patient/client?

- has clear consent been given?

- does it comply with your professional codes of practice?

- does it comply with your employer's codes of practice?

- is it safe and appropriate?

- is it likely to cause offence?

- do you feel comfortable?

- do you have sufficient knowledge and skills?

- is there adequate support and supervision for you and your patient/client?

Where do I go when I feel out of my depth?

It is about knowing your strengths, limitations and when to seek help. You may consider the following:

- another colleague, someone you trust (mentor or preceptor)

- the Chaplaincy team (who are there for staff and patients of all faiths and none)

- local contacts specific to your workplace

- psychosocial team (e.g. social worker, counsellor, psychologist)

- your own faith groups and/or other support networks.

Some helpful resources

Association for Children's Spirituality
www.childrenspirituality.org

Department of Health (2009) *Religion or belief: a practical guide for the NHS*, London: Crown.

Mental Health Foundation
www.mentalhealth.org.uk

Spirituality and Psychiatry Special Interest Group
www.rcpsych.ac.uk

Centre for Spirituality, Health and Disability
www.abdn.ac.uk

References

Hitchens E W (1988) *Stages of faith and values development and their implications for dealing with spiritual care in the student nurse-patient relationship*. Unpublished Ed.D Thesis, Seattle: University of Seattle.

Nursing and midwifery Council (2010) *Standards for preregistration education Nursing and Midwifery Council*, London: NMC.

NHS Education for Scotland (2009) *Spiritual care matters: an introductory resource for all NHS Scotland staff*, Edinburgh: NES.

Royal College of Nursing (2011)
RCN spirituality survey 2010, London: RCN.

The RCN represents nurses and nursing, promotes excellence in practice and shapes health policies.