



Evidence-Based Practice in Action

The meaning of spiritual care in a pediatric setting *

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Abstract

In the previous issue of the *Journal of Pediatric Nursing*, one type of evidence-based practice (EBP) format was provided for potential nurse scholars who utilize the EBP process [MacPhee, M. (2002). *Journal of Pediatric Nursing*, 17(4);313-20]. There are, however, many potential formats to present evidence-based clinical practice innovations. I am eager to work with nurses who have been involved in promoting evidence-based nursing practice. The *Journal of Pediatric Nursing* will use this column as a forum for sharing evidence-based clinical practice innovations, such as case studies, clinical teaching exemplars, and interdisciplinary programs highlighting collaborative practice among nurses and other health care professionals. Please contact me at maura80521@yahoo.com ↗ for editorial advice and assistance. The following article is a clinical contribution from a nurse on the Neurosurgery-Rehabilitation Unit of The Children's Hospital, Denver. This evidence-based clinical project evolved from a nurse's recognition of the importance of spiritual care for families of children with serious brain injuries. It is an example of how an EBP formula can facilitate change and innovation. Start with a clinical problem; get help; look to the rature for best research evidence; look to other clinical sources for best practice ideas; evaluate

what you have; and make a decision to maintain the status quo, gather more data, or change practice. This clinical project is an example of the collaborative, interdisciplinary nature of EBP, and it is also an example of the collaborative work among differently skilled nurses. In this instance, a clinically based nurse identified a practice problem and recruited a nurse researcher to help design, analyze, and evaluate the findings from an interview study. The results are being implemented via nursing leadership to change practice.—*Maura MacPhee, RN, PhD, Associate Editor Copyright 2002, Elsevier Science (USA). All rights reserved.*

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Section snippets

The clinical problem

Despite growing interest in spiritual care, the spiritual dimension of nursing care is poorly understood. This may be because of its subjective and deeply personal nature (McSherry, 1998). The purpose of this clinically based project was to better understand what spiritual care means to nurses and parents or guardians of children hospitalized with seriously debilitating or permanent brain injury. This project focused on a specific population of children where the pediatric nursing staff was...

Best research evidence

The author began with a search of the literature to clarify definitions of major concepts associated with spirituality, to identify potential theories or conceptual frameworks to adopt for nursing practice on the Neurosurgery-Rehabilitation Unit, to locate standardized spiritual assessment tools for this specific patient population, and to determine what types of spiritual care interventions might be suitable for these patients' families.

Over the past 2 decades, considerable research has been...

Best practice evidence

The author consulted interdisciplinary team members about ways to best assess the spiritual needs of families of brain-injured children. In addition to nursing, team specialties on the Neurosurgery-Rehabilitation Unit include neurology, rehabilitation medicine, neurosurgery, nutrition, occupation and physical therapies, social services, child life, pharmacy, and case management. Although questions could have been included to ask families about other team members, the focus of the clinical...

The clinical project

With the assistance of a nurse researcher at TCH, an interview study was developed, based on the rature findings, suggestions from interdisciplinary team members of the Neurosurgery-Rehabilitation Unit, and the Director of Pastoral Care Services. Institutional review board approval was obtained....

Participants

There were 6 parents and 8 nurses included in the study. All parents were white, with a mean age of 41 years. Only one parent participant was the father. The patients' diagnoses included 4 head injuries and 2 brain tumors. Of the 8 nurses, 7 were women and all were white, with a mean age of 43 years and a mean of 18 years in nursing practice.

Question 1: "How Do You Define Spiritual Care?"...

Clinical project results discussion

All of the parents of brain-injured children had definitions for spirituality and understood spiritual care in terms of their spirituality. All parent participants believed that nurses provide spiritual care, with the exception of one parent who felt that spiritual care should be provided by religious leaders only. All of the parents had specific concrete examples of what types of nursing spiritual care they most appreciated.

All of the nurses identified spiritual care as an important part of...

Implications for practice

Results from this project were shared with the Neurosurgery-Rehabilitation Unit nursing staff, other interdisciplinary team members, and the chaplain. Although this was a small sample of parents and nurses, the findings were consistent with published reports, and the

findings concurred with health care providers' professional experiences with brain-injured patients and their families.

On the basis of the findings, the following practice changes are being pursued:

(a) The nurses will work with...

Acknowledgements

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[The Effect of an Educational Session on Pediatric Nurses' Perspectives Toward Providing Spiritual Care](#)

2011, *Journal of Pediatric Nursing*

Citation Excerpt :

...Spiritual assessment scales were presented, followed by a review of the NANDA diagnoses Spiritual Distress and Potential for Enhanced Spiritual Well-being (NANDA, 2005). Examples of therapeutic interventions for parents and children were offered, including results from several pediatric research studies (Dell'Orfano, 2002; Feudtner *et al.*, 2003; Fry, 1995; Fulton & Moore, 1995; Heller & Solomon, 2005; Rushton, 2005). Lastly, evaluation of the pediatric spiritual nursing care plan was explained....

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[Psychosocial and Spiritual Needs of Children Living with a Life-Limiting Illness](#)

2007, *Pediatric Clinics of North America*

Citation Excerpt :

...In the context of caring for seriously ill and dying children and their families, it is vital that the definition of spirituality remain broad and include a focus on the individual's views on life, search for meaning and purpose, and self-awareness. Several survey studies reveal that parents of children who have serious illnesses believe that their religious or spiritual beliefs were important factors in their coping efforts and decision-making [29,46–48]. Additionally, in a qualitative study, parents of children in the pediatric intensive care unit identified four spiritual/religious themes: (1) faith, (2) access to clergy, (3) care from clergy, and (4) belief in the transcendent quality of the parent–child relationship that endures beyond death....

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[Nurses' models of spiritual care: A cross-sectional survey of American nurses ↗](#)

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[Spiritual needs and practice in chronically ill children and their families in the Isan region of Thailand ↗](#)

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