



HPNA Value Statement

Spiritual Care

The Hospice and Palliative Nurses Association (HPNA) support and value that:

- Hospice and palliative nurses should abide by the 4th edition of the National Consensus Project's Clinical Practice Guidelines for Quality Palliative Care's section on Spirituality, Religious, and Existential Care. 1
- Hospice and palliative nurses should consult the Joint Commission on Accreditation of Healthcare Organizations Standard's2 spiritual assessment.
- Spirituality, spiritual distress, and spiritual care are essential components of palliative and hospice care. 3
- Organizations should recognize and support the provision of spiritual care through education and allocation of resources.
- Education and resources should be utilized to enhance information for healthcare professionals on spirituality.
- It is the right of individual to decline spiritual care.

Background

Spirituality is central component to Florence Nightingale's philosophy of nursing.⁴ Humans are intrinsically spiritual, as all individuals are in relation to themselves, others, nature, and the significant or sacred. Spirituality encompasses universal human needs and often includes an abiding belief in the potential of the human spirit. It affects healthcare decision-making and healthcare outcomes, including quality of life. Spirituality may or may not include specific religious beliefs, but rather provides a philosophy or outlook that guides choices.

There are many avenues into spiritual dimensions. Spirituality may be what gives a person strength, comfort, and courage, and may become a more important concern when health is threatened and death approaches. It can hold a profoundly transformative potential for patients, families, and professional caregivers.

Unfortunately, spiritual and religious beliefs can also create distress² and increase the burdens of illnesses, especially when an individual's beliefs conflict with their family's or the culture of the healthcare system.

Spiritual care involves the interdisciplinary team assessing and responding to spiritual and religious issues that concern patients and families. Spiritual care requires the assessment and monitoring of a variety of aspects of the person and family and may include life review, hopes, fears, purpose and meaning, guilt and forgiveness, faith community, inner source of power, and beliefs about afterlife.



Spiritual care values the uniqueness of each person by recognizing and honoring their beliefs, values, practices, and rituals, and allowing openness for the discussion, expression, and experience of those beliefs. It addresses issues of life satisfaction and/or completion in a manner consistent with the patient's cultural and religious values and spiritual needs. Patients and families are encouraged to display their own spiritual and religious symbols and should be able to practice their own rituals in an accepting atmosphere. The use of religious symbols by staff or institutions should be sensitive to cultural and religious diversity.

Spiritual distress may be expressed as, or magnify the intensity of, physical or emotional symptoms, potentially occurring when an individual is faced with challenges that threaten their beliefs, meaning or purpose, or life situation. Spiritual distress has been associated with poorer outcomes, including emotional despair, depression with suicidal thoughts, and substance abuse.⁵ Anxiety may also be a symptom of spiritual distress.

Spiritual care necessitates the ability of the professional caregiver to reflect on and recognize the importance of one's own spirituality and acceptance of the validity of others' spiritual beliefs. Professional caregivers must not impose their own beliefs and values on patients and families.

Spiritual care also requires an appreciation of the importance of presence and a willingness to be fully present in providing spiritual care. Staff members need to identify their own boundaries/limitations when there is a need for more expert assistance from chaplains or spiritual care providers. Staff should offer to notify clergy of the patient's own faith tradition if mentioned. Board-certified chaplains are considered the trained spiritual care specialists.

Effective spiritual care requires:

- Recognizing spirituality as an integral component of the human experience of illness, healing, and health.
- Practicing spiritual self-care as a provider of spiritual care.
- Listening reflectively to the patient's and family's story with a compassionate presence.
- Demonstrating empathy and the ability to journey with others in their suffering.
- Recognizing and responding to spiritual distress and helping to discover meaning in the experiences of illness, suffering, grief, and loss.
- Eliciting another's key concerns with respect, including their feelings of hopelessness, loss, brokenness, and other unmet spiritual and religious needs.
- Identifying and responding to ethical issues and conflicts and assisting and supporting others in the application of their own values in decision- making.
- Willingness to create therapeutic and healing spaces in which spiritual expression can occur.



- Facilitating the use of symbols and rituals according to the needs and values of the patient and family.
- Offering prayer, music, scripture, or other readings that are meaningful to the patient and family.
- Supporting a patient's and family's sources of spiritual strength.
- Seeking additional resources as needed by the patient and family including chaplaincy or other spiritual providers.

Definition of Terms

Healing: The ability of a person to find solace, comfort, connection, meaning, and purpose in the midst of suffering, disarray, and pain. It recognizes that although a person's life may be limited or no longer socially productive, it remains full of possibility.

Religion: "the search for significance that occurs within the context of established institutions that are designed to facilitate spirituality"⁶

Spiritual distress: An individual's perception of hurt or suffering associated with that part of their person that seeks to transcend the realm of the material. Spiritual distress is manifested by a deep sense of hurt stemming from feelings of loss or separation from one's God or deity, a sense of personal inadequacy or sinfulness before God and man, or a pervasive condition of loneliness, distress, or angst of spirit. Also known as spiritual pain.

Spiritual history: The process of interviewing a patient in order to come to a better understanding of their spiritual needs and resources.

Spiritual screening: A triage or quick determination of whether a person is experiencing a serious spiritual crisis and therefore needs an immediate referral to a board-certified chaplain, helping to identify patients that may benefit from an in-depth spiritual assessment.

Spirituality: The aspect of humanity that refers to the way individuals seek and express meaning and purpose and the way they experience their connectedness to the moment, to self, to others, to nature, and to the significant or sacred.

References

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This statement reflects the best available evidence at the time of writing or revisions.

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