

CHI Learning & Development System (CHILD)

Project Title

Effects of Spiritual Care Education on Nurses' Knowledge of Spirituality and Spiritual Care

Project Lead and Members

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Organisation(s) Involved

National University Hospital; Ang Mo Kio- Thye Hua Kwan Hospital; Alice Lee Centre for Nursing Studies, Yong Loo Lin School of Medicine, National University of Singapore

Aims

To assess nurses' knowledge and perceptions regarding spirituality and spiritual care before and after spiritual-care education in an acute care hospital

Background

See poster appended/below

Methods

See poster appended/below

Results

See poster appended/ below

Conclusion

See poster appended/ below

Project Category

Care & Process Redesign, Healthcare Training & Education



CHI Learning & Development System (CHILD)

Keywords

Care & Process Redesign, Healthcare Training & Education, Applied Research, Nursing, National University Hospital, Ang Mo Kio- Thye Hua Kwan Hospital, Alice Lee Centre for Nursing Studies, Yong Loo Lin School of Medicine, National University of Singapore

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Effects of spiritual care education on nurses' knowledge of spirituality and spiritual care



A member of the NUHS

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P0718

BACKGROUND

- Spirituality is an important aspect of human Accordingly, caring of patients' health. spiritual well-being is important regardless of age group and illnesses.
- and cope with their health issues.
- their time providing bedside care.
- Recognizing spiritual needs and appropriate spiritual care are important.
- Studies reported varied
 - understanding spiritual care provision among different settings.
 - spirituality understanding amongst healthcare professionals.

AIM

The study aimed to assess nurses' knowledge and perceptions regarding spirituality and spiritual care before and after spiritual-care education in an acute care hospital.



RESULTS

- three surveys at different time interval for this study was 86.25% (n=138) (Table 1).
- as part of nursing care.
- Nursing staff in the wards spend most of
 The mean total Spiritual Care-Giving Scale after the workshop were 162.41 (SD=17.70), respectively out of a total score of 210
 - There were statistical significance in the perceptions of spirituality and spiritual care before, immediately (p<0.05) and one month after (p<0.05) attending the educational workshop.
 - Significant relationships were observed between nurses' spirituality and spiritual

- Response rate for nurses who completed all
- In general the nurses had positive attitudes Spiritual care enables patients to better face and accepting spirituality and spiritual care
 - scores from pre-workshop to one month 182.62 (SD=18.85) and 176.49 (SD =18.38)

 - care with ethnicity, gender and age group.

CONCLUSION

- Providing educational Spiritual Care workshop improved nurses' attitudes, knowledge and perceptions of spirituality, thereby enhancing holistic patient care.
- The study revealed that the multi-ethnic nursing staffs viewed spirituality and spiritual care as significant and necessary.
- As this study did not explore the type of support to reinforce nurses' spiritual care knowledge and application, future indepth studies might be required.
- Recommendation for future studies include exploring how nurses provide spiritual care to patients in the wards

TABLES

| N=160 n=138 | Table 1: Demographic Of The Participants Attended Education (N=160) | | | | | | | |
|---|---|----------------|-------|------|--------|-----------|----------|---------|
| N=160 N=138 N=160 N=1 | | | Befo | ore | Immedi | ate after | One n | nonth |
| Sender Male | Domographic | n /9/\ | educa | tion | Educ | ation | after ed | ucation |
| Gender Male 8(5.0) 6.460 .012 4.077 .045 2.672 .105 Female 152(95.0) 6.460 .012 4.077 .045 2.672 .105 Age (years) 21-30 102(63.8) 2.298 .105 3.599 .030 .619 .540 31-40 39(24.4) 41-50 19(11.9) 190 190 .000 3.599 .030 .619 .540 41-50 19(11.9) 190 .000 3.502 .009 3.470 .010 Malay 12(7.5) 10dan 11(8.9) .000 3.502 .009 3.470 .010 Marital Status 16(10) .000 .000 .009 3.470 .010 Married 51(31.9) .05(65.6) 1.770 .174 1.644 .197 .192 .825 Years Of Experience (Nursing) < 5 | Demographic | 11 (70) | | N: | =160 | | n=1 | 38 |
| Male 8(5.0) 6.460 .012 4.077 .045 2.672 .105 Female 152(95.0) Age (years) 2.298 .105 3.599 .030 .619 .540 21-30 39(24.4) 39(24.4) 41-50 19(11.9) 19(11.9) 19 105 105 100 3.502 .009 3.470 .010 Malay 12(7.5) 101 0.00 3.502 .009 3.470 .010 Marial Status 11(6.9) 5.736 .000 3.502 .009 3.470 .010 Marial Status 16(10) 17.70 .174 1.644 .197 .192 .825 Married 51(31.9) 0.01 1.770 .174 1.644 .197 .192 .825 Years Of Experience (Nursing) 2.5 83(51.9) 2.072 .130 2.327 .101 3.012 .053 6 to 10 49(30.6) 211 28(17.5) 28(17.5) 28(17.5) 28(17.5) 28(17.5) 28(17.5) 28(17.5) 28(17.5) 28(17.5) 28(17.5) <th></th> <th></th> <th>F</th> <th>р</th> <th>F</th> <th>р</th> <th>F</th> <th>p</th> | | | F | р | F | р | F | p |
| Female 152(95.0) Age (years) 21-30 102(63.8) 2.298 .105 3.599 .030 .619 .540 31-40 39(24.4) 441-50 19(11.9) Ethnicity Chinese 76(47.5) 5.736 .000 3.502 .009 3.470 .010 Malay 12(7.5) 110 116(9.9) .010 .000 3.502 .009 3.470 .010 Malay 12(7.5) .010 .000 3.502 .009 3.470 .010 Malay 12(7.5) .010 .000 .009 3.470 .010 Mariad .05(65.6) 1.770 .174 1.644 .197 .192 .825 Married 51(31.9) .072 .130 2.327 .101 3.012 .053 6 to 10 49(30.6) .211 28(17.5) Faith-based groups Buddhism 27(16.9) <th< td=""><td>Gender</td><td>- 27</td><td></td><td></td><td></td><td></td><td>** = :</td><td></td></th<> | Gender | - 27 | | | | | ** = : | |
| Age (years) 21-30 | Male | 8(5.0) | 6.460 | .012 | 4.077 | .045 | 2.672 | .105 |
| 21-30 | Female | 152(95.0) | | | | | | |
| 31-40 39(24.4) 41-50 19(11.9) Ethnicity Chinese 76(47.5) 5.736 .000 3.502 .009 3.470 .010 Malay 12(7.5) Indian 11(6.9) Filipino 45(28.1) Others 16(10) Marital Status Single 105(65.6) 1.770 .174 1.644 .197 .192 .825 Married 51(31.9) Others 4(2.5) Years Of Experience (Nursing) < 5 83(51.9) 2.072 .130 2.327 .101 3.012 .053 6 to 10 49(30.6) ≥11 28(17.5) Faith-based groups Buddhism 27(16.9) 2.146 .078 1.560 .188 .435 .783 Christianity& Roman 24(4.3) Catholic 82(41.3) Islam 16(10.0) Hinduism 7(4.4) Others 28(17.5) Attend religious/spiritual care activities Yes 73(45.9) 8.402 .004 .000 .989 .854 .357 No 86(54.1) Provide spiritual care activities Rarely 89(56.0) 8.552 .000 .070 .932 2.748 .068 Occasionally 54(34.0) Frequently 16(10.1) | Age (years) | | | | | | | |
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| | | | | | | | | |
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| Occasionally 54(34.0) Frequently 16(10.1) | Provide spiritual care activ | ities | | | | | | |
| Frequently 16(10.1) | Rarely | 89(56.0) | 8.552 | .000 | .070 | .932 | 2.748 | .068 |
| | Occasionally | 54(34.0) | | | | | | |
| Statistically significant when p value < 0.05 | Frequently | 16(10.1) | | | | | | |
| | Statistically significant when | p value < 0.0 | 05 | | | | 140 | |
| | | | | | | | | |

| Table 2: Spiritual Care Giving Scale (SCGS) | | | | | |
|---|----------------------------|-------------------|--|------|--|
| Factor: | Before educately education | after | Before education and one month after education | | |
| | t(df) | p | t(df) | p | |
| I. Spirituality Perspectives | -12.14(148) | .000 | -6.61(129) | .000 | |
| II.Attributes for Spiritual Care | -9.81(154) | .000 | -9.54(134) | .000 | |
| III.Defining Spiritual Care | -10.01(148) | .000 | -6.03(128) | .000 | |
| IV.Spiritual Care Values | -13.80(157) | .000 | -8.87(134) | .000 | |
| Total Score | -12.75(133) | .000 | -8.55(117) | .000 | |
| Two-tailed paired sample t-test, sta | tistically significant | when <i>p</i> <.0 | 5 | | |
| | | | | | |

METHODS

| Study design | A quasi-experimental research design |
|--------------|---|
| Setting | Singapore acute care hospital |
| Sample | Nurses from the general wards |
| Intervention | Attend education workshop |
| Data | Well-validated 35-item |
| collection | Spiritual Care-Giving Scale |
| instrument | (SCGS) |
| | The SCGS uses a 6-point |
| | Likert scale with responses |
| | ranging from one (strongly |
| | disagree) to six (strongly |
| | agree). |
| | SCGS is developed in an |
| | ethno-culturally diverse Asian |
| | society |
| | Cronbach's alpha was 0.86 |
| | and with test-retest |
| | reliability was at (r = 0.811). |
| Data | Self reported questionnaire |
| collection | 1.Pre-training |
| | 2.Immediately post training |
| | 3.One month after training |
| Ethics | Study approval obtained from |
| | the National Healthcare Group |

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Domain Specific Review Board