EARLY INTEGRATION OF CARITAS CONSCIOUSNESS FOR PERINATAL AND CLINICAL STAFF DEVELOPMENT LEADERS

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Introduction: Kaiser Foundation Hospital, Oakland Medical Center has partnered with The Watson Caring Science Institute to advance the philosophy, theories, and practices of human caring originated by Dr. Jean Watson. Integration of the Science of Human Caring throughout Oakland Medical Center (OMC) is at the early stages of the complex process of organizational culture change. The aim is to restore the profound nature of caring/healing by placing love into every aspect of healthcare. Accomplishing this transformation necessitates that people at every level of the caring spectrum become aware of and incorporate into their practice the core principles and behaviors of Caring Science.

Significance: Respectful, highly functional, expert teams are essential for perinatal patient safety. Enhancing existing Clinical Staff Development (CSD) and perinatal teams with caring consciousness will promote trusting relationships with optimum communication in every type of clinical situation or emergency. Implementing Caring Science ought to enhance teamwork, increase workplace satisfaction, and improve perinatal patient safety.

Purpose: The purpose of The Early Integration Process is to propel multidisciplinary perinatal leaders and staff toward meaningful authentic personal progression and enhancement of interactional caring behaviors with patients and as a perinatal health care team. The process aim is to integrate essential principles of Human Caring Theory in everyday perinatal clinical practice. This is accomplished by implementation of intentional conscious behavioral choices in communication, tone, attitude, and interactions. Watson’s principles are invoked during relational interactions, correspondence, and within nurse education programs. Caritas consciousness is enhanced through self-awareness; self-awareness activities included quiet reflection, intentional pausing, breathing, and authentic listening to colleagues share caring moment stories within a caring-healing environment.

Setting and Participants: OMC is an urban, multi-ethnic, multi-diverse campus with a reputation of caring people, academic excellence, and social conscience. The Early Integration Process introduces and promotes activation of caring in several specialty staff groups.

The Clinical Staff Development (CSD): Department is composed of a leader, learning and technical specialists, Clinical Nurse Specialists, and Clinical Nurse Educators who impact all of OMC.

Family Friends Interdisciplinary: A collaborative group focusing on best practices in mother-baby care on Family Care Unit.

Perinatal Patient Safety Program: A multidisciplinary monthly strategic meeting focused on perinatal-neonatal patient safety and quality improvement.
Antepartum Specialty Training: A training program to prepare 55 Family Care Unit RNs to care for high risk antepartum mothers.

Breastfeeding Taskforce: A multidisciplinary team aimed at improving breastfeeding outcomes.

Labor & Delivery (L&D) Operating Room (OR) Safety: Two-hour education for 60 L&D RNs.

Perinatal Critical Events Team Training (CETT): Quarterly four-hour clinical simulation drills aimed at emergency situational preparedness for up to 40 multidisciplinary staff and trainers.

Maternal Hemorrhage Taskforce: A multidisciplinary team challenged to prevent and manage hemorrhage in obstetrical care.

Project Description / Process: The Early Integration Process is an intentional process in which the Perinatal CNS introduces aspects of Watson’s Caring Theory to Clinical Staff Development leaders and perinatal workgroups. Multiple modes of introduction/integration are expressed.

Methods: The Early Integration Process commences with the introduction of a centering activity at the beginning of all CSD and perinatal leadership workgroup meetings followed by sharing a caring moment. The Perinatal CNS has introduced several types of centering activities. Caritas consciousness was modeled through the Caritas processes, such as being present and creating a healing environment whereby wholeness, beauty, comfort, dignity, and peace are potentiated. During classes and communicating in small group settings, the CNS engaged in genuine teaching learning experiences that attended to wholeness and meaning. L&D RNs were invited to intentionally think of preventing surgical site infections while using a standardized abdominal prep for mothers having surgical births while simulating the procedure.

Project Outcomes: Several practical outcomes are being experienced as a result of this project. Primarily the Early Integration Process has introduced the basic principles in Caring Science. The Breastfeeding Taskforce has planned to develop a Caritas Calendar blending Consistent Breastfeeding Messages with Caritas Processes for healthcare providers. CETT team members stated that the centering activity has significantly decreased anxiety prior to simulation training.

Project Evaluation: Participants of the Early Integration Process will be given an online survey questionnaire with the following qualitative questions: 1) Please describe how you use a centering activity in your work life. 2) Please describe how you use a centering activity in your personal life. 3) How has Caring Science impacted your work? 4) How has Caring Science impacted your personal life?

Future Directions: Participants of The Early Integration Process will engage in further Caring Science workshops and classes. Future evaluation of Caring Science integration in the area of teamwork dynamics, communication, trusting relationships, workplace satisfaction, and perinatal patient safety will be explored.

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