Central Baptist Hospital in Lexington, KY is a 371-bed acute care tertiary facility with approximately 850 Registered Nurses and 50 Licensed Practical Nurses. In fiscal year 2005 over 180,000 inpatients and outpatients were served. One of five hospitals comprising Baptist Healthcare System based solely in Kentucky, Central Baptist is structured through service pathways and councils that support a shared-governance model of decision-making.

Like many hospitals, the quest for Magnet designation prompted the selection of a philosophical/theoretical framework to ground nursing services. As nursing theories were reviewed, it became important to select a theory that resonated with and lent itself to articulation by nurses and other employees. Further, the ideal theory could be incorporated across all practice environments, managerial styles and interpersonal relationships. Dr. Jean Watson’s theory of human caring was selected because her precepts satisfied aforementioned objectives and closely aligned with the organizational culture.

Promoting familiarity with Watson’s theory was the first step in intellectually engaging staff, most of whom were already manifesting the spirit of caring. In addition to books, articles, posters and classroom education, Dr. Watson visited Central Baptist on two occasions. These visits sparked incredible enthusiasm in staff. In order to sustain momentum, the expectation to manifest caring behavior was hardwired across institutional processes such as incorporating a care-related goal within the nursing strategic plan; rewriting policies and procedures, career ladder models and job descriptions with implications for performance management; adding a department-level requirement for “healing community” quality improvement initiatives reflected in department minutes; and revising orientation and leadership curricula to include caring-relevant concepts.

Following Dr. Watson’s first presentation, discussions ensued regarding the importance of caring for self and each other. The prevailing mention of the need for self-care as crucial to caring for others led to formation of a cross-discipline consultative team of “coaches” whose mission was to promote a nurturing culture of welcome, renewal, calmness and community. The team chose the name Healing Community to reflect caring-centered values and house-wide emphasis. Composed of a chaplain, nurses and respiratory therapist interested in the project, the Healing Community team planned a major celebration for employees’ accomplishments, (complete with chocolate fountain and a disco ball), arranged for shut-ins to be serenaded at Christmas, wrote testimonials of caring experiences in the employee newsletter and helped staff to humanize their workspaces. The intent of all initiatives was to promote a work culture that nourishes the caregiver as well as the patient.

Another outcome was formation of the Nursing Research Interest Group. The group’s objectives are to enhance (1) application of Watson’s ideology and other theories, (2) the acquisition, generation and utilization of knowledge to establish evidence-based practice and (3) understanding and implementation of the research process. This group provides a needed venue for enlightenment, scholarship and professional discourse. Support for research resulted in an
IRB-approved pilot study to examine the relationship between nurse caring behaviors perceived by patients and patient satisfaction.

Another source of momentum is affiliation with the *Caritas Consortium*, an international network of individuals representing about 25 hospitals at various stages of advancing the theory of human caring. Participation with this group has escalated the integration of theory at Central Baptist and the next gathering will be held in Lexington.

Central Baptist embarked on the Magnet journey in 2002. Prompted by ANCC criteria, theory was selected and efforts to incorporate the precepts across the hospital were initiated. When Magnet status was awarded in October 2005, ANCC surveyors complimented the extent to which theory was integrated throughout the facility. Most importantly, nurses and others became more introspective regarding the nature of healing work. The connection with and implementation of this nursing theory reaffirmed our mission, informed our practice and brought conscious intent to our philosophy of care. This journey affected the hospital as a whole and influenced other hospitals in our system to embrace caring principles.

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