DEVELOPING A CARITAS CONSCIOUSNESS: SETTING DAILY CARING INTENTIONS ON THE PATIENT CARE UNIT

Suzanne Fernandes, RN
Brigham & Women’s Hospital
75 Francis Street, Boston MA 02115
sfernandes@partners.org

Introduction: The Nursing Staff at Brigham & Women’s Hospital have strived to deliver excellent nursing care to patients and families through a well trained and educated clinical staff. As nursing staff continue on their journey to define the characteristics of excellent practice and provide nurses with the best supports and conditions, they have come to recognize that throughout this transformation there is a need for nursing leaders and clinical nurses alike to develop a deeper understanding of humanity in order to transform the collective vision for healing both ourselves and the patients we serve.

Significance: Nurses at Brigham and Women’s Hospital are committed to knowing their patients and families so that their patients feel known and cared for within the hospital environment. Today Brigham and Women’s nurses face many day to day challenges of working in a large urban hospital. The patients’ health care needs have become increasingly challenging. Nurses are caring for more patients with fewer resources and the technology is ever changing. Nurses must find a way to reconnect to what is meaningful and caring within nursing in order to provide the best care possible. Dr. Watson (2008) states, “The Human to Human Connection expands our compassion and caring and keeps alive our common humanity.”

Purpose: The Nursing Staff at Brigham & Women’s Hospital respect and honor the many relationships that they engage in each and every day. The purpose of this project is to help staff begin to develop a Caritas Consciousness through setting daily intentions that will begin cultivation of the practice of Loving Kindness and Equanimity in order to enhance trusting and caring relationships.

Setting and Participants: This project will be implemented within three patient care units at Brigham and Women’s Hospital, a large urban hospital in Massachusetts. The participants will be clinical staff, including clinical nurses, patient care assistants and unit coordinators. The clinical nurses are members of the Nursing Practice Committee who have committed to and are engaged in new learning about Caring Science and Caritas Consciousness.

Project Description/Process: This project, specifically focused in the patient care setting, is part of a larger system-wide project that also includes nurse leaders. The patient care setting part will occur in three phases.

- **Phase One** included the education and engagement of clinical nurses who are members of The Nursing Practice Committee. Their learning has consisted of discussions regarding:
  1. Relationship-Based Care
  2. Self Awareness
  3. Meditation
  4. Watson’s Theory of Caring Science
5. Setting Intentions with the use of Touchstones, at the beginning, middle and end of the day.

- **Phase Two** includes the identification of individual nurse participants who work on the pilot patient care units that will implement setting both collective and individual intentions for caring and healing at the beginning of the day, in the middle and at the day’s end through the use of the touchstones.

- **Phase Three** will be the implementation of the project and active participation on the pilot units by all clinical staff. As a Caritas Coach, I will be available to the staff as they begin to engage in the practice of setting daily intentions throughout the day.

**Projected Outcomes:** The projected outcome of this project will be development of a deeper understanding by staff of Caring Consciousness and the importance of setting daily intentions on the patient care units, for both staff and patient/families we serve. The long-term goal of this project is that this practice of setting authentic daily intentions will become more widespread to include other inpatient clinical care units beyond the three pilot units and that the higher level of caring consciousness will increase both staff and patient satisfaction.

**Projected Evaluation:** Once the project has been fully developed and implemented, two small focus groups of staff participants from the pilot units will be formed. Questions to be explored by an independent interviewer will include:

1. In what ways has the practice of setting daily caring intentions changed the environment and relationships for both staff and patients?
2. What will allow the practice of setting daily caring intentions to be sustained over time?

Collected data will be compared with data collected from the same project carried out with the hospital nurse leaders.

**Future Directions:** It is hoped that this project will continue to grow and the practice of setting intentions will become a ritual in which all staff at Brigham and Women’s Hospital will engage to generate a healing presence throughout the institution.

**Acknowledgements:** There are many people that I am grateful to, for their support, guidance and encouragement throughout this enlightening process and experience: Dr. Jackie Somerville, CNO and V.P. of Patient Care Services Brigham & Women’s Hospital; Mrs. Estralita Karsh, many thanks for her generosity; Rose Cannistraro Executive Assistant to CNO; B.W.H. Nursing Practice Committee; Dr. Lynne Wagner, CCEP Mentor; and Dr. Jean Watson, who is a gift to our profession.

**References:**