Spiritual Care Guidelines

Introduction

Spirituality is an important but often neglected area in the lives of people with mental health problems. Humber NHS Foundation Trust recognises its importance. Our aim is to encourage and enable a spiritual dimension to be built into day to day mental health care practice by the provision of a comprehensive spiritual care service.

What do we mean by spirituality?

We define spirituality broadly and we include:

- what gives meaning and value to people’s lives
- the sense that there is more to life than the material and the practical
- the importance of relationships and connections.

Spirituality is a basic human right. For some it is based in their faith and religious beliefs. However, the evidence suggests that spirituality in UK modern society, often argued to now be a predominantly secular society, has migrated from religion into different and more diverse forms.

These may include, but are not necessarily defined by established religions or faith communities. Key to this understanding is recognising the underlying spirituality within popular culture. Spiritual needs remain but the language in which they are expressed and the shapes and forms through which spirituality manifests itself have changed radically.

An increasing body of evidence is highlighting the importance of religious and spiritual beliefs in the lives of people with experience of mental and emotional distress. Quantitative research in the UK, the US and other countries has indicated that aspects of spirituality are generally linked with beneficial mental health outcomes.

We recognise that everyone needs support systems, especially in times of crisis. Many service users, carers and staff, especially those confronting mental health crisis have spiritual needs and welcome spiritual care. They search for meaning in the experience of illness.

- They look for help to cope with their illness and suffering, loss, loneliness, feelings of unfairness, anxiety, uncertainty, despair, anger and guilt.

Through this guidance we aim to:

- support service users, carers and staff,
- promote wellbeing, develop and influence service design.
• ensure that persons of all backgrounds, faiths and beliefs have equal
and appropriate access to its services.

Definitions

• Religious care is given in the context of shared religious beliefs, values,
practices and lifestyles of a faith community.

• Spiritual care is usually given in a one-to-one relationship, is
completely person centred and makes no assumptions about personal
conviction of life orientation.

• Spiritual care is not necessarily religious. Religious care at its best is
always spiritual.

Visions and values

• Spiritual care addresses the human need to have a sense of hope,
security and peace, particularly when suffering mental illness or loss,
and to seek meaning, purpose and fulfilment in life, death and
suffering.

• Spiritual care is person focussed respecting the diversity of our local
population.

• No assumptions are made about beliefs, faith or life orientation.

• That religious care is an aspect of spiritual care and those with
religious needs have a right to have these met.

• That delivery of spiritual care is a responsibility of all NHS staff in
partnership with those employed with specific responsibility, training
and skills in spiritual care.

• That chaplains are specialist providers /supervisors / enablers of
spiritual care to service users, their carers and NHS staff.

• That spiritual care will be characterised by openness, sensitivity,
integrity and compassion.

• That spiritual care will be offered in a confidential manner and safe and
appropriate environment.

• Affirms the right of choice to be visited (or not) by chaplain, religious
leader, or spiritual care giver, and acknowledges that awareness
raising and training in spiritual care, religious traditions and needs of
faith communities is essential.
NHS culture

**Awareness raising** - the benefits of providing a spiritual care service and its part in personal wellbeing is necessary. Awareness of religious traditions and needs of faith communities is also required.

**Education** - Spiritual care is an essential part of pre and post professional training.

**Environment** - Facilities ought to include sacred spaces / places appropriate for use by people of all backgrounds and faiths for quiet reflection, spiritual or religious ceremonies, pastoral counselling / support. Attention to the physical surroundings of buildings is also important to promote wellbeing. The architecture, design and decoration, safe and secure premises, level of noise and outlook from windows all effects spiritual wellbeing and health.

**Community based services** - Increasingly healthcare will be community based. Community healthcare teams are also required to address the spiritual care needs of people in the local communities. The link between primary and acute care services in this area is also important to ensure a full exchange of information to support personal wellbeing.

**Clinical care** - Improved outcomes and an enhanced experience of using services for service users is central to the work of clinical staff.

A spirituality assessment should be undertaken as an integral element of all clients ongoing packages of care. Where needs are identified these should be care planned for and reviewed through the Care Programme Approach structure.

**Structure** - To be effective spiritual care services requires to be integrated in organisational structures with support and accountability at a senior level.

**Accountability & monitoring / evaluation see action plan** - Monitoring and evaluation will be undertaken locally with the assistance of the Patient Experience Team, Chaplains and Spirituality Steering Group. It is envisaged that spiritual care will be an integral part of our Clinical Governance agenda.

We recognise that this is an evolving agenda and we aim to respond positively at all times.

**Actioned:** Audit of Spiritual Space has been done.

**Yet to be done:** Consultation with Staff.

**Review:** November 2010