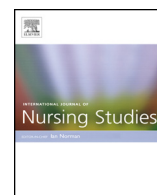




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Review

Interventions for compassionate nursing care: A systematic review

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ABSTRACT

Background: Compassion has been identified as an essential element of nursing and is increasingly under public scrutiny in the context of demands for high quality health care. While primary research on effectiveness of interventions to support compassionate nursing care has been reported, no rigorous critical overview exists.

Objectives: To systematically identify, describe and analyse research studies that evaluate interventions for compassionate nursing care; assess the descriptions of the interventions for compassionate care, including design and delivery of the intervention and theoretical framework; and to evaluate evidence for the effectiveness of interventions.

Review methods: Published international literature written in English up to June 2015 was identified from CINAHL, Medline and Cochrane Library databases. Primary research studies comparing outcomes of interventions to promote compassionate nursing care with a control condition were included. Studies were graded according to relative strength of methods and quality of description of intervention. Narrative description and analysis was undertaken supported by tabulation of key study data including study design, outcomes, intervention type and results.

Results: 25 interventions reported in 24 studies were included in the review. Intervention types included staff training ($n=10$), care model ($n=9$) and staff support ($n=6$). Intervention description was generally weak, especially in relation to describing participants and facilitators, and the proposed mechanisms for change were often unclear. Most interventions were associated with improvements in patient-based, nurse-based and/or quality of care outcomes. However, overall methodological quality was low with most studies ($n=16$) conducted as uncontrolled before and after studies. The few higher quality studies were less likely to report positive results. No interventions were tested more than once.

Conclusions: None of the studies reviewed reported intervention description in sufficient detail or presented sufficiently strong evidence of effectiveness to merit routine implementation of any of these interventions into practice. The positive outcomes reported suggest that further investigation of some interventions may be merited, but high caution must be exercised. Preference should be shown for further investigating

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interventions reported as effective in studies with a stronger design such as randomised controlled trials.

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What is already known about the topic?

- Compassion has been identified as an essential element of nursing and is increasingly under public scrutiny in the context of demands for high quality health care.
- Primary research on effectiveness of interventions to support compassionate nursing care has been reported but there is no consensus on what is effective in providing this support.
- There are currently no systematic reviews of the effect of interventions or programmes to improve compassion in nursing.

What this paper adds

- Interventions reported in the research literature that are targeted at supporting compassionate nursing care vary widely and focus either on staff training, staff support or introducing a new care model to practice.
- Studies reporting the effectiveness of compassionate nursing care interventions report mostly positive effects on one or more patient-based, nurse-based and/or care quality outcomes.
- The quality of intervention description and the underlying methods are mostly poor, providing scant evidence of actual effectiveness and so the evidence provides little guidance to those seeking to support compassionate nursing care.

1. Introduction

The need to strengthen the delivery of compassionate health care, in particular for people with chronic illness in hospital settings, is consistently identified as essential to healthcare (Dewar et al., 2014; Dewar and Nolan, 2013; Schantz, 2007). Several studies and reports have indicated deficiencies in healthcare globally and related to nursing care in particular, with particular scrutiny of relational aspects of care such as dignity and compassion (Franklin et al., 2006; Maben et al., 2010; Hall et al., 2009; Youngson, 2011; Francis, 2013). Compassion is also emphasised as pivotal in caring by nursing science theorists such as Eriksson (1992) and Watson (2008). There has also been an increasing public scrutiny of the delivery of compassionate care, as evidenced through media coverage, political interest and resulting policy developments. This is particularly emphasised in UK, where the recent Francis inquiry into hospital care for older people highlighted substantial and significant variations in care quality, with a lack of compassion towards patients by hospital staff identified as a significant feature in the care failures investigated (Francis, 2010, 2013).

Definitions of compassion abound, and the literature is both confused and confusing in the way that terms are

used and often conflated. However, we can identify four key components of the narrative of compassion. The first is a set of ideas about the *moral attributes* of a 'compassionate' nurse. These include wisdom, humanity, love, and empathy (Dewar et al., 2014; Maben et al., 2010; Schantz, 2007). These moral attributes may be expressed through a kind of *situational awareness* in which degrees of vulnerability and suffering are perceived and acknowledged (Chochinov, 2007; Schantz, 2007). Setting up compassion in this manner firmly links it to participation of the nurse in *responsive action* that is aimed at relieving suffering and ensuring dignity, and which involves the nurse in some sort of participatory relationship in which the nurse exercises *relational capacity* (Cameron et al., 2013; Dewar and Cook, 2014; Schantz, 2007; Von Dietze and Orb, 2000) through which empathy is experienced and a caring pastoral relationship is constructed (Bridges et al., 2013; Hartrick, 1997; May, 1992).

Although current definitions of compassion in nursing practice are imprecise and sometimes confused, there is intense interest in this problem both within and outside of the profession of nursing. Little is known about what strategies are effective in promoting compassionate care among nurses. There is, to date, no rigorous critical overview of research assessing the effectiveness of programmes and interventions promoting compassionate care among nurses in practice. This paper reports a systematic review which fills this gap, using the four key components of the compassion narrative identified above to provide an operational definition. The objectives of the review are to:

- (i) systematically identify, analyse and describe studies that evaluate interventions for compassionate nursing care,
- (ii) assess the descriptions of the interventions for compassionate care used, including design and delivery of the intervention and theoretical framework,
- (iii) evaluate the nature and strength of evidence for the impact of interventions.

2. Methods

A systematic review was conducted, guided by the Cochrane Collaboration methods to assure comprehensive search methods and systematic approaches to analysis of the review materials (Higgins and Green, 2011).

2.1. Search strategy

A systematic search for primary research evaluating compassionate care interventions was undertaken on three databases CINAHL, Medline and the Cochrane Library (including the Cochrane Database of Systematic Reviews,

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