Social Care and Wellbeing

Policy on Spirituality in Social Care

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POLICY ON SPIRITUALITY IN SOCIAL CARE

1. INTRODUCTION

1.1 There is a recognised need in our society today for development of more effective ways of responding to not only physical and emotional but also spiritual needs of people at different life stages (for example birth, birthdays, moving on, marriages, death and dying etc) in care settings.

1.2 Spirituality is increasingly of interest in both health and social care settings. We now know that spiritual practices and attention to spiritual and/or religious needs help people feel better and cope with illness and distressful circumstances as well as help understand positive life experiences.

1.3 There is an expectation that staff, who work within health and social care settings, will be able to, at the very least, acknowledge the spiritual lives of service users and understand something of the relationship between spiritual needs and wellbeing.

2. LEGAL CONTEXT

- Adults with Incapacity (Scotland) Act 2000
- Protection from Abuse (Scotland) Act 2001
- Human Rights Act 1998
- Disability Discrimination Act 2005
- Race Relations Act 1976 as amended
- Employment Equality (Religion or Belief) Regulations 2003
- Children (Scotland) Act 1995
- Social Work (Scotland) Act 1968 as amended
- Regulation of Care (Scotland) Act 2001
- National Care Standards
- SSSC Codes of Practice
- Community Care and Health (Scotland) Act 2002
- Mental Health (Care and Treatment) (Scotland) Act 2003
- Foster Children (Scotland) Act 1984 as amended
- Education (Scotland) Act 1980 as amended
- Carer’s (Recognition and Services) Act 1995

3. UNDERLYING PRINCIPLES OF THE POLICY

3.1 The policy seeks to address spirituality as part of the life experience of people who use care services and their carers. It is underpinned by the following principles for integrating the spiritual aspects of people’s lives into the provision of social care:
understanding that spirituality has many meanings for people;
- respecting the beliefs and values of individuals of faith and those of no faith;
- showing openness, sensitivity, integrity and compassion in meeting individual’s spiritual and care needs holistically;
- facilitating access to spiritual and religious care of all kinds;
- taking a person-centred approach to planning and providing care that puts the individual at the centre; and
- recognising and valuing of the cultural and religious diversity of the people of Aberdeen City.

4. PRINCIPLES OF SPIRITUALITY

4.1 Spiritual care may be important to religious and non-religious people alike. It should be interpreted in a very wide sense: service users and carers who are facing important life transitions, whether positive or negative, often want to search for the meaning of their lives in their own way at various stages of their life or perhaps throughout their lives. Among the basic spiritual needs that might be addressed within the normal daily activity of social care are:
- the need to give and receive love;
- the need to be understood;
- the need to be valued as a human being;
- the need for forgiveness, hope and trust;
- the need to explore beliefs and values;
- the need to express feelings honestly; and
- the need to find meaning and purpose in life.

5. PURPOSE OF THE POLICY

5.1 To help workers achieve a basic understanding of spirituality as a prerequisite for responding to spiritual care needs as part of ongoing assessment, action, intervention and support as a positive force.

5.2 To outline the basic principles of spiritual care for children and adults as an integral part of the holistic care approach of Social Care and Wellbeing Service.

6. WHAT SERVICE USERS SAY THEY WANT

Views expressed by service users during the consultation process:

“Spiritual care means to me is the fellowship and socialising gives you confidence and helps you both mentally and physically. Being able to show your skills, being interested in what’s going on in the community give encouragement. It is important that Aberdeen City Council, Health and Care
services have a policy on Spiritual Care. It is important to keep up your personality

“Everyone agreed that what sets spiritual care apart from other types of God / a power beyond our normal understanding / faith / religion. People generally agreed that you can call on this type of help at the most difficult times of your life. There was agreement that everyone does this whether they claim to have faith or not”

“The spiritual part of people holds a lot of potential. If more care workers understood this, it would be a good thing. If this part of people isn’t given proper consideration, a large part of people’s potential isn’t being tapped by care workers”

“Watching the sky and the stars makes me feel good because that’s where my brothers and friends are”

“We feel that many people have experiences which can legitimately be called experiences of the transcendent and which often they are afraid to speak about for fear for being ridiculed”

“One thing is very important to us and that is freedom of religion and freedom of worship”

“I totally agree with the importance and therapeutic benefits of supporting people in this way”

“The policy changed our minds about the concept of spirituality and that it was good to recognise it a coping strategy and resilience factor”

7. DEFINITIONS OF SPIRITUALITY

7.1 Spirituality is a complex concept that cannot be defined fully by one definition for all people as its complexity reflects itself in different meanings for different individuals at different stages of their lives.

7.2 This policy accepts several working definitions of spirituality. The definitions below are not offered as prescription but rather as a starting point for exploring the idea of spirituality in social care. They are not mutually exclusive but complement each other and should be understood in the context of service users’ needs at a particular point in time.

- “The very nature of spirituality as a source of vitality, motivation and healthy sense of belonging and being valued.” (Culliford, 2002)

- “Spirituality is not necessarily about religion but about reaching one’s full potential, about developing and nurturing supporting and sustaining relationships, and about seeking meaning in one’s life and seeking one’s own truth, value and perspective on life. It is about laughter, joy,
belonging, acceptance and community spirit. “(Sue McGregor, Woman’s Hour, Radio 4, August 2004)

- “Spiritual care is usually given in a one-to-one relationship, is completely person-centred and makes no assumptions about personal conviction or life orientation. Spiritual care is not necessarily religious. Religious care, at its best, should always be spiritual.” (HDL, 2002, 76 Spiritual Care in NHS Scotland)

- “Spiritual wellbeing or spiritual health is about having an inner spirit that is healthy and meaningful. It is not necessarily a religious component. Spiritual wellbeing can be expressed in humanistic, religious and other ways, for example the sense of wellbeing that comes from art, music, a walk in the hills, nature or meditation.” (HNC in Social Care – Open Learning Pack – Supporting Spiritual Wellbeing, 2005)

8. UNDERSTANDING SPIRITUAL CARE NEEDS

8.1 Spiritual care is care that takes into account the spiritual, religious and faith needs of service users and carers.

8.2 Holistic Approach

8.2.1 The holistic approach takes into account the whole person and the whole person’s life. Each individual human being comprises different elements that contribute to overall wellbeing and these elements are intimately integrated rather than existing separately. The holistic approach seeks to recognise and promote a state of dynamic harmony when it treats each individual as a unique whole.

8.2.2 The spiritual element is becoming more widely recognised as that element within each human being that is concerned with meaning, connection and hope. Research such as for example the work of Victor Frankl (1984) on the centrality of meaning for human flourishing, indicates that having a strong sense of meaning and purpose in one’s life is good for ones sense of well-being and quality of life. Acknowledgement of one’s spirituality may be good for one’s sense of well-being.

8.3 Person-Centred Approach

8.3.1 Social Care and Wellbeing is committed to a person centred approach which puts the service user at the centre of all development activities at all times, taking time to listen and find out about hopes, aspirations, preferences and fears, allowing the service user to take the lead rather than taking control.

8.4 Spiritual distress and the impact on health and care outcomes.

8.4.1 High levels of spiritual distress may interfere with the service user’s ability to cope with his/her specific disability, illness or condition. This distress
may contribute to poorer health outcomes and less satisfaction with life. Health and care providers may encourage service users to seek advice from appropriate spiritual or religious leaders to help resolve their conflicts, which may improve their health, quality of life, and ability to cope.

9. WHAT SHOULD SERVICE USERS EXPECT

9.1 In addressing a service user’s spiritual needs during provision of care, staff will encourage the service user to take the lead in expressing the spiritual needs as well as ways of meeting such needs.

9.2 Staff may address a service user’s spiritual needs in the following ways:

- identifying service user’s spiritual, religious or faith needs as an integral part of the assessment and care planning process;
- recognise that some service users will not require or want spiritual, religious or faith support;
- identifying goals for care and making decisions about care that are consistent with the service user’s spiritual, religious or faith views and which also enable the worker to maintain the integrity of his or her own spiritual, religious or faith views;
- encouraging service user’s to speak with his/her spiritual support person who the service user feels can best address his/her spiritual needs at the time;
- referring the service user to an appropriate religious and/or spiritual leader or other resource that addresses spiritual issues during periods of transition; and
- encouraging active links between key services and local chaplaincy.

9.3 Where it is appropriate, provision will be made in social care settings for a space for quiet reflection or for worship.

9.4 Social Care and Wellbeing will ensure that services commissioned from the independent sector will adhere to the National Care Standard on Lifestyle – social, cultural and religious belief or faith, that states “Your social, cultural and religious belief or faith are respected. You are able to live your life in keeping with these beliefs.”

10. WHAT SHOULD STAFF EXPECT
• We will promote a service culture that recognises and values diversity in matters of spirituality, religion and faith, in accordance with the Council’s policy on MANAGING DIVERSITY AND EQUALITY.

• Social Care and Wellbeing staff have a duty to respond to their service user’s needs and concerns about spiritual, religious or faith matters, but are not expected to take part in the service user’s religious rituals or to debate religious beliefs.

• Social Care & Wellbeing staff may be involved with the individual to identify his/her spiritual needs and enable the individual to meet these needs and can expect to be trained and supported in how to address a service user’s spiritual and/or religious or faith needs. Staff should expect that this is raised, when deemed appropriate, during supervision.

• Staff have the right to access appropriate spiritual, religious or faith support and will be supported by the Council to do so.

• The particular needs of different religious or faith groups within the City will be respected and access to appropriate support regarding matters of religion or faith may be offered as appropriate.

References:


McGregor S., Woman’s Hour, Radio 4, August 2004

HDL, 2002, 76, Spiritual Care in NHS Scotland

HNC in Social Care – Open Learning Pack – Supporting Spiritual Wellbeing, 2005

Frankl V. E, 1984, Man’s Search For Meaning, Washington Square Press

National Care Standards, Scottish Executive, 2005

Codes of Practice for Service Workers and Employers, Scottish Social Services Council, 2007