Abstract

Aim: To provide a review of qualitative studies exploring families’ experiences of spiritual care at the end of life in acute hospital settings.

Background: Although there is a widespread belief that the consideration of spiritual and religious needs is out-dated in the context of secularism, from a practical perspective patients and families appear to benefit from spiritual support at the end of life.

Methodology: Six key databases were searched and three reviewers independently extracted the data and coded it into themes and subthemes. The Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) was used as a reporting framework (Pati & Lorusso, 2018).

Findings: Five main themes emerged: anticipating needs; honouring the family by honouring the patient; personal connection; lack of sensitivity and making space for religious & spiritual practices.

Discussion: Families experiencing end of life care in acute hospital settings may benefit from spiritual care according to their individual needs. While this can also be considered as fundamental care, understanding this through the lenses of spiritual care allows for the incorporation of religious and spiritual practices that many seek at this time, irrespective of their faith perspectives.

Relevance to clinical practice: Although hospice care is well established internationally, many families experience end of life care in acute hospital settings. Nurses usually get to know families well during this time, however the demands of the clinical environment place restrictions on family care and the perception of lack of communication, limited support and/or limited sensitively can compound the families’ suffering. Consideration of families’ spiritual needs can help to support families during this time. Nurses are ideally placed for this and can anticipate and plan for patient and family needs in this regard, or refer to a specialist such as the Health Care Chaplain.

Keywords: Spiritual care, end of life, acute, hospital, family, systematic review

Ethical approval was not necessary as this was a systematic review and the articles included had each obtained ethical approval.