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## **Nurses' Spiritual Nursing Competency Levels in the Neurology Inpatient Ward of Aceh Government Hospital: A Case Study**

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### **Abstract**

**Background:** Health services in the world today are trying to apply a holistic concept, namely viewing humans in service as a unified whole, including physiological, psychological, socio-cultural, and spiritual dimensions. Spiritual care is an approach that recognizes the importance of spiritual aspects in human well-being. Providing spiritual services is one of the factors in improving the quality of nursing services and achieving patient satisfaction. This case study aims to determine the spiritual competence of nurses in the neurology inpatient room at an Aceh government hospital.

**Methods:** The samples taken in this study were 25 nurses. Data analysis uses univariate analysis. Data were collected using the Spiritual Care Competency Scale questionnaire by distributing the SCCS questionnaire Google form link to nurses via the neurology nurse WhatsApp group.

**Results:** Spiritual competence in professionalization and improving the quality of spiritual services (100%). The domain of personal support, counseling, and patient referrals (96.0%), the domain of attitudes towards patient communication spirituality (100%), and the domain assessment of the implementation of the provision and evaluation of spiritual services (96.0%) which shows that the majority of nurses have high spiritual competence regarding spiritual services.

**Recommendations:** There needs to be follow-up and special attention from the hospital to optimize the spiritual competence of nurses in other inpatient rooms by providing training related to spiritual competence to provide a sense of satisfaction for patients, clients, and families in terms of providing spiritual care.

**Keywords:** Spiritual Nursing Care, Nurse Competency, Neurology Patient, Spiritual Care

### **1. Introduction**

Health services in the world today are trying to apply a holistic concept, namely viewing humans in service as a complete unit including physiological, psychological, socio-cultural, and spiritual dimensions, according to Gordon (Sulisno, 2012) <sup>[19]</sup>. Hadijah (2015) <sup>[7]</sup> describes basic human needs into eleven (11) patterns, one of which is the value or spiritual pattern. Spirituality offers an understanding of intrapersonal, interpersonal, and transpersonal connectedness. According to Yodang dan Nuridah (2020) <sup>[20]</sup>, spirituality is essential for assessing the quality of life and conditions leading up to death. The role of spirituality is increasingly being realized, especially in conditions approaching the end of life (Nurhasanah *et al.*, 2022) <sup>[12]</sup>. Nursing care refers to nurses' professional actions to care for, observe, and facilitate patient recovery (Nurdina & Putra, 2016) <sup>[13]</sup>. Nursing care involves various components such as clinical assessment, medical intervention, patient condition monitoring, medication management, education for patients and families, and collaboration with other medical teams (Husna *et al.*, 2023) <sup>[9]</sup>; Midari *et al.*, 2023). This approach also includes understanding the patient's physical, psychological, social, and spiritual dimensions so that nurses can provide more comprehensive attention (Potter, Perry, Stockert, & Hall, 2021) <sup>[14]</sup>. In fulfilling their spiritual care, nurses must be able to carry out four parts, namely nurse communication with clients, assessment and implementation of spiritual nursing, referring to clergy, personal support, and nurse counseling (Leeuwen, 2008) <sup>[10]</sup>. The spirituality factor is an essential element of well-being and health. Nurses must focus on the relationship between spirituality and health.

Spiritual care is an approach that recognizes the importance of spiritual aspects in human well-being. This treatment focuses on the physical and psychological dimensions. It acknowledges that the spiritual element significantly impacts an individual's health and balance (Fitchett *et al.*, 2019) [6]. Spiritual care refers to efforts to maintain and strengthen a person's spiritual dimension to achieve holistic balance in life. The spiritual well-being of an individual can influence the level of health and personal behavior, namely the source of support for accepting the changes experienced (Seyedrasooly *et al.*, 2014) [17].

Nursing services are the authority and responsibility of nurses to have good competence so that quality services can be achieved. The main challenge now and in the future is increasing competitiveness and competitive advantage in nursing. So, competency becomes important for nursing services to improve the quality of nursing services (PPNI, 2010) [15]. One of the studies in 2014 conducted by Rosita found that the competency level of nurses in Indonesia in fulfilling spiritual needs was still relatively low, namely 57.5%. The low level of competence causes nurses to hesitate to provide spiritual care, so in the end, nurses will ignore this spiritual aspect due to nurses' lack of understanding of the concept of spiritual nursing.

Estetika and Jannah (2015) [4] found in their research that many nurses admitted that they did not understand clearly and experienced confusion between spirituality and religion. In the study, Hadijah (2015) [7] found that many nurses admitted that they could not provide spiritual care competently because, during their education, they received little guidance on how to do so. A study found an increase in recognition of the importance of spiritual care in the last 30 years. However, this increase in recognition was not matched by monitoring how spiritual care was taught in institutions, how it was understood, and how it was implemented by nursing students (Ardian, 2016) [1].

**2. Methods**

This research is a non-experimental quantitative research with a descriptive design. This case study uses a cross-sectional study approach, namely, data collection carried out at that time. The data collection technique in this case study is to use a total sampling technique, namely distributing questionnaires of the *spiritual care competence scale* (SCCS) in the form of a web-based questionnaire (Google Form) developed by Fang, Susanti, Dlamini, Miao, and Chung (2022) [5]. Data collection was carried out from 11 to 12 September 2023. The population in this study are nurses who work in the neurology room using a total sampling technique.

Data collection was carried out after receiving a data collection letter from the profession to carry out research at the hospital. Data analysis in this research is univariate analysis.

**3. Results**

Based on this research data, the following results were obtained:

**Table 1:** Frequency of Nurse Characteristics

Category	f	%
<b>Gender</b>		
Man	11	44.0
Woman	14	56.0

<b>Level of education</b>		
DIII Nursing	19	76.0
Nurse	6	24.0
<b>Employment status</b>		
PPPK	19	76.0
Civil servants	6	24.0
<b>Length of work</b>		
Establishment Stage (< 2 years)	1	4.0
Advancement Stage (2-10 years)	20	80.0
Maintenance Stage (> 10 years)	4	16.0

Based on Table 1, it was found that the gender of nurses was dominated by 14 women (56.0%). Then, the highest level of education was D-III nursing graduates, namely 19 people (76.0%). Most nurses have employment status as PPPK, namely 19 people (76.0%). Furthermore, the average nurse has worked for 2-10 years, namely 20 people (80.0%).

**Table 2:** Frequency of Nurses' Spiritual Nursing Competency Levels

Competency Level	f	%
Medium	1	4.0
High	24	96.0
Total	25	100.0

The data collection results in Table 2 show that most nurses' spiritual competency levels were high; 24 people (96.0%) and one person (4.0%) were in the medium category.

**Table 3:** Frequency of Professionalization and Improving the Quality of Spiritual Services

Professionalization and Improving the Quality of Spiritual Services	f	%
High	25	100.0

The data collection results are in Table 3 in professionalization and improving the quality of spiritual services. It shows that most nurses are in a suitable category, namely 25 people (100.0%).

**Table 4:** Frequency of Personal Support, Counseling, and Patient Referrals

Personal Support, Counseling and Patient Referrals	f	%
Medium	1	4.0
High	24	96.0
Total	25	100.0

The data collection results are in Table 4; in the domain of personal support, counseling, and patient referral, most nurses were in a High category with 24 people (96.0%).

**Table 5:** Frequency of Attitudes towards Spirituality and Patient Communication

Attitudes Toward Spirituality and Patient Communication	f	%
High	25	100.0

The data collection results are in Table 5. In the domain of attitudes towards spirituality and communication, most patients are in the high category, namely 25 people (100.0%).

**Table 6:** Frequency of Assessment, Implementation, Delivery, and Evaluation of Spiritual Services

Assessment, Implementation, Delivery, and Evaluation of Spiritual Services	f	%
Medium	1	4.0
High	24	96.0
Total	25	100.0

Data collection results in Table 6 in the domain of assessment, implementation, provision, and evaluation of spiritual services, the majority of nurses were in the High category, namely 24 people (96.0%).

#### 4. Discussion

The spiritual competency of nurses in the Neurology Inpatient Room at Government Hospital Banda Aceh was in the high competency level category, with 24 respondents (96.0%) and one respondent (4.0%) in the medium competency category. The same results were also obtained in research by Syntia and Andhika (2016) regarding spiritual care competence for patients at the Ibnu Sina Yarsi Islamic Hospital at Padang; most respondents had high spiritual competence, 68.3%.

Study Husna (2020) [3] said that nurses' spiritual competence is crucial for nurses to apply to clients and be applied in hospital nursing services. Other research also states that the spiritual competence of nurses is very high because they have been given training related to providing spiritual care to nurses, which can support the implementation of spiritual nursing care in regional hospitals (Siregar, 2019) [18]. This is supported by research conducted by Ross *et al.* (2013) [16], which shows that respondents who have received education about spiritual care are more competent than those who have not.

Based on the author's assumptions, the level of spiritual competence of nurses in the high category can be influenced by many factors such as knowledge, experience, and training that have been followed by nurses so that nurses can know the spiritual competence that must be fulfilled and the spiritual nursing care or services that must be provided to patients, family, and clients. This is supported by Husna (2020) [3], who said that nurses' spiritual competence is crucial for nurses to provide to clients and apply nursing services in hospitals. The results of research conducted by Ross *et al.* (2013) [16] show that respondents who have received education about spiritual care are more competent than those who have not.

The results of this study also show the results of the four domains of spiritual nursing competency, which consist of professionalization and improvement of the quality of spiritual services, personal support, patient counseling, and referral, attitudes towards spirituality and patient communication, assessment, implementation, provision and evaluation of spiritual services.

#### 5. Conclusion

The research results in the Neurology Inpatient Room at the Aceh Government Hospital showed that most nurses had a high level of spiritual competence regarding spiritual services, namely 96.0%. This can be influenced by the characteristics of nurses, such as age, gender, level of education, length of work, motivation to work, and the training the nurse has attended.

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