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Integrative Nursing:

What does it look like in practice?

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Integrative Nursing:

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Introduction

A new approach to medicine called “integrative care” is spreading across the United States and the globe. In many ways, modern healthcare is a system in separation. Patients encounter doctors in highly-separated silos of specialties, specialized drugs, and increasingly specific billing codes and diagnoses. In contrast, integrative nursing aims to support the whole-person with whole-systems healing.

Integrative nursing recognizes that people cannot be separated from their environment or their physical surroundings, their relationships to family and their relationships to their care providers. Integrative nursing also emphasizes the body’s natural inclination to heal itself, as well as the healing properties of nature. Creating a healing environment, in this holistic view, is crucial to integrative care.

Integrative nursing is evidence-based, and uses a range of modalities. Although there is no one way to implement integrative nursing, there are certain principles and methods that apply across a variety of healthcare settings from urban hospitals to rural clinics. Places that have adopted integrative nursing often see measurably better outcomes and patient satisfaction.

What is integrative nursing?

Florence Nightingale, the founder of modern nursing, understood that nursing was an integrative, holistic healing profession. In her writings, she thought the ultimate role of the nurse is to put the patient in the best possible condition so that nature can act and healing can occur. She understood that the role of the nurse is really to create that environment that is conducive to healing.

At its core, integrative nursing is a way of being, doing, and knowing that advances the health and well-being of people, families and communities through caring and healing relationships. It uses evidence to inform both traditional and emerging interventions that support whole-person and whole-systems healing.

For clinics and institutions that want to adopt integrative nursing, it’s important to view integrative nursing as a framework, as a practice model, and as a mechanism of care delivery that’s consistent and aligned with a set of principles. These principles, or specific indicators, can be used evaluate the presence of integrative nursing.

First principle:

People are whole systems

The first principle of integrative nursing is to think of people as whole systems that cannot be separated from their environment. In this case, the environment can encompass a patient's inner world, the emotions of those who surround the patient, and, of course, the actual physical environment where the patient receives care. Integrative nursing should regard each patient as a whole and complete system that includes the body, mind, and spirit.

In practical terms, a whole system approach means a nurse should do a comprehensive assessment with this principle in mind; assessing each patient's physical, mental, emotional, social, and spiritual state. With elements of the whole person in mind, the next step is to develop a plan of care that reflects the patient's and the family's unique needs, strengths and preferences. The aim of the plan should be to ensure that care is personalized, coordinated, and individualized. This may require personalizing the environment for a patient, or recognizing the important role of art, personal objects or room preference.

In general, maintaining the integrity of the patient's physical environment will help their healing process. Emphasize the importance of fresh air, light, and color. Monitoring noise, smells, and privacy can help a person heal in any setting. Wherever possible, it can help to promote a patient's independence and offer choices to them.

Nurses themselves are actually part of the patient's environment, and an integrative nursing approach uses this often overlooked fact. Nurses should aim to be aware of their attitudes, actions, and body language. In fact, nurses who use mind-body approaches to remain calm, centered, and fully present when caring for patients can automatically add a healing element to any patient's environment.

Second principle:

The innate capacity to heal

The second principle of integrative nursing requires healthcare providers to acknowledge and support a person's innate capacity for health, self-healing and well-being. Innate, of course, means from within and self-healing means recognizing the innate, restorative capacities of the body.



Florence
Nightingale

The role of the nurse is to put the patient in the best possible condition so that nature can act and healing occur.

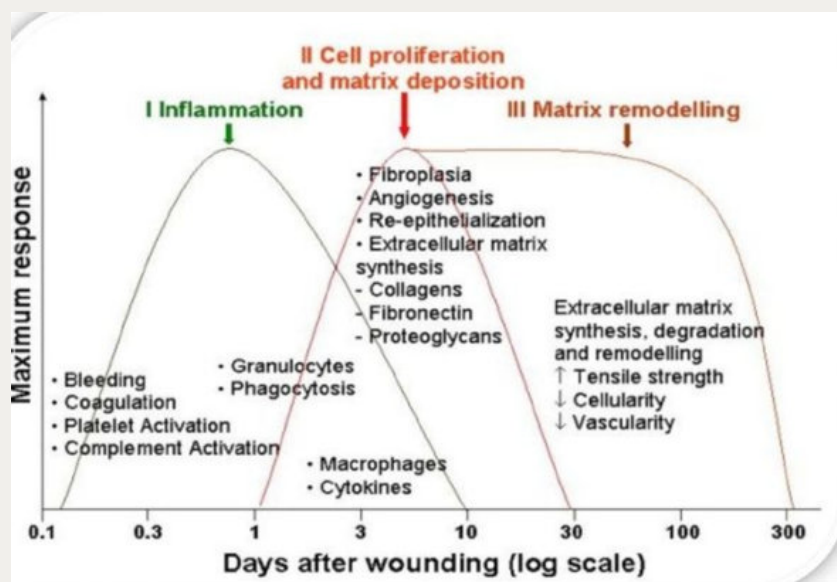
Figure 1

Think of what happens after a cut, a scrape or a wound; the body instantaneously goes into a process of repair without the patient ever being conscious of it. An amazing choreography of immune responses kick in to restore the body. The same is true for organs, such as the liver after acute hepatic exposure. Even nerve cells have some capacity for self-repair.

Although people once thought the brain stopped changing after childhood, we now know the brain has neuroplasticity and is capable of changes in structure and function, and even some ability to repair itself. People can guide changes in their own brain through meditation.

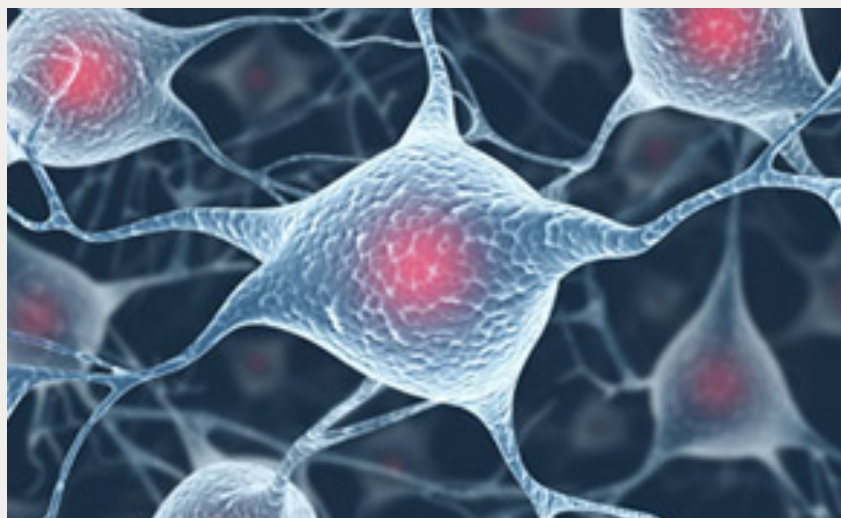
Recent studies, such as those done by Dr. Richard Davidson at the University of Wisconsin Madison, have shown meditation can produce distinct patterns of brain changes that can actually be measured, and those changes can actually endure over time. Other research by Dr. Barbara Fredrickson at the University of North Carolina has shown positive emotions can change the chemical balance in our brains—the brain is literally flooded with dopamine and serotonin—and this change can in turn enhance immune functioning and diminishes the body's inflammatory response. The book "You Are the Placebo" by Dr. Joe Dispenza, outlines the recent research into how the environment and an individual's thought habits can change their gene expression. The book also details how attitude has more of an influence on an individual's longevity than blood pressure, cholesterol, smoking, body weight or level of exercise.

Thoughts can literally affect the functioning of a person's body neurologically,



Amazing Choreography

Figure 2



Nerve Cells

- Neurons do not divide and are not capable of mitosis after injury.
- Surviving nerve cells reorganize and establish new neural connections.

Figure 3

chemically and genetically. For nurses, this means aiming to recognize the importance of facilitating positive thoughts through connections and relationships that lead to meaning and wholeness. Whenever possible, engage and support the patient and the family, and deeply cultivate a positive, full presence with patients.

Third principle:

Use nature's healing properties

The third principle of integrative nursing is based on the idea that nature has healing and restorative properties that contribute to health and well-being. The philosophy of biophilia contributes to this principle; "bio" meaning nature and "philia" meaning loving.

There is real evidence that, as human beings, we're innately drawn to nature. Studies have shown that being in nature is associated with a reduction in blood pressure, a lower heart rate, a reduction in respiratory distress and changes in biological markers associated with stress response. A recent study found that doing the same physical exercise indoors versus outdoors has a measurable different effect in the brain, with more benefit from exercising outdoors.

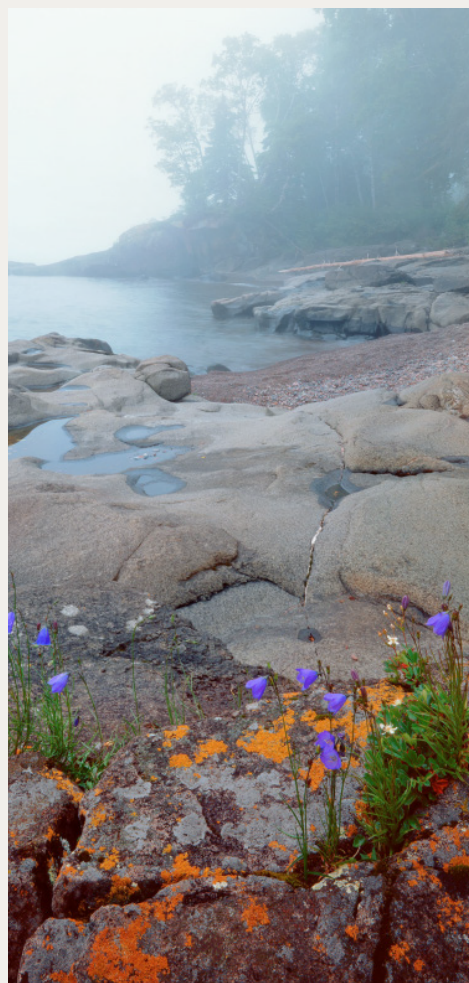
Some forward-thinking hospitals are building wings, gardens or even entire buildings with biophilic design. For example, Dana-Farber Cancer Institute in Boston has built a beautiful indoor healing garden space for patients to visit. Nature-based therapies are taking a foothold across the country including healing gardens and landscapes, therapeutic horticulture, and animal-assisted interventions.

Nurses can approach this biophilia philosophy with simple gestures from asking patients if they want their curtains open, to facilitating green exercise, to encouraging patients to use any labyrinths or gardens onsite.

Fourth principle:

Relationships in care

The fourth principle of integrative nursing recognizes that the core of nursing is person-centered and relationship-based. Relationships are crucial to healing. To operate with the fourth principle of integrative nursing, nurses should try to nurture qualities of empathy, love, warmth, trust, confidence, respect, and kindness. Good relationships between the nurse and the patient, as well as between colleagues are crucial to integrative nursing.



We are hard wired to
interact with the natural
world – water, plants,
fresh air.

Figure 4

Some concrete, basic everyday practices can boost relationships in nursing. For example, learning a patient and their family by name, understanding the basics of a patient's back story and the context of their life.

On the side of coworkers and relationships, it's important to develop staffing and scheduling patterns that lead to continuity of nurse/patient care. This allows nurses the space and time to learn about their patients and develop opportunities to anticipate and support a patient's needs and preferences.

Unfortunately, hectic staffing and lack of communication can result in heartbreakingly subpar care. Take the example of the author's own daughter-in-law who had an emergency C-section with her first baby at 10 pm one night. By 7 am the next morning, the mother had not yet seen her own baby. One nurse explained to the mother that the baby had to go to the nursery to be monitored for an infection. Yet nobody on staff mentioned that she was allowed to go to the nursery and see her baby. Instead, the newborn stayed separated from her mother, hungry and crying, for hours for no reason.

As an individual, nurses can help foster relationships by setting an intention before each shift. This could be setting an intention to being a healing presence, practicing authentic listening, or recognizing each patient as a person. It may be even as simple as making a point to make eye contact or, when appropriate, utilizing touch. At the end of each shift, it can also be useful to engage in some reflective practice and remember what went well, what didn't work, and what could be learned to improve care next time.

The screenshot shows a digital interface for an educational module. At the top, the header includes the University of Minnesota logo, the Center for Spirituality & Healing tagline 'Driven to Discover™', the title 'Addressing Post-Operative Pain', and the text 'Integrative Nursing Scenarios'. The main content area is titled 'Greeting Bob' and asks the user to choose a greeting for a patient named Bob. Four radio button options are listed: 'Hi, how's your pain?', 'Hi, let's check how you are doing.', 'Hi Bob. I'm Sara. I'll be your nurse today.' (which is selected), and 'Hi Bob. I'm Sara. I'm your nurse today to help with whatever you need.' Below the options is a yellow 'Submit' button. To the right of the options, there is a text box that says 'This is a fine greeting. A good way to establish rapport and build a relationship is by introducing yourself.' and a small image of a person's face. At the bottom of the main content area, a green text line reads: 'Select one answer and click Submit. You may try again after reading your feedback. When you are finished, click the forward arrow.' The footer of the interface includes a copyright notice '©2014 Regents of the University of Minnesota. All rights reserved.' and the Center for Spirituality & Healing logo, with yellow left and right arrow buttons.

Figure 5

Fifth principle:

Evidence-based care

The fifth principle of integrative nursing is practice care based on evidence, and to use the full range of therapeutic modalities. One way to envision this is to think from least to most—meaning start with the least intrusive treatment first and move towards the most intrusive, intensive or expensive treatment as is needed.

All too often, it can be easy to treat each symptom with the quick corresponding PRN medication. But instead of handing out pain relievers or anti-anxiety medication, integrative nursing encourages nurses to personalize interventions, use integrative therapies and focus nursing care on the healing process.

Take the issue of nausea. It's common for patients to suffer from nausea in post-operative care or during chemotherapy. But instead of starting with anti-nausea medication, there are other options ranging from aromatherapy, using ginger and peppermint, mind/body exercises, acupressure or acupuncture, and energy healing such as reiki.

For fatigue, an integrative nurse may start by recommending guided imagery, progressive muscle relaxation, nutrition, mindfulness-based stress reduction,

Ayurveda or TCM treatments before moving all the way to pharmacologic interventions or psychotherapy.

For pain, integrative nursing approaches may include distraction therapy, mind-body relaxation techniques, acupressure, yoga or massage, before moving more aggressively, with severe pain, to pharmacologic approaches or anesthetic block.

Sixth principle:

Self-care

The sixth principle of integrative nursing focus on self-care, meaning the health and wellbeing of caregivers as well as those they serve. As Florence Nightingale noted, “to heal, one must be sound in body, mind and spirit.”

All nursing, including integrative nursing, is demanding. It’s helpful to recognize that caregivers need to nurture their own well-being, which may mean developing a plan of self-care, taking time for self-reflection and engaging in reflective practices. The goal is to come to work balanced, integrated, aligned and having a sense of well-being.



Evidence-Based Design

Figure 6

Portrait of implementations

Integrative nursing doesn’t have to start from the ground up with a new clinic or new facility. There are many types of existing healthcare settings where integrative care can be applied—from health promotion, to disease prevention, to disease management, symptom management, or simply caring for people, families, and communities. Although the models may vary, integrative care usually fits in anywhere. Often, implementing integrative care works best in hospitals when it starts with nursing. Several case studies around the U.S. can demonstrate how.

Veterans administration hospital, Minneapolis

Several years ago, the Veterans Administration Hospital in Minneapolis began looking into new pain management initiatives. A recent graduate of the doctorate of nursing practice program in integrative health at the University of Minnesota stepped up, and applied to get funding to support the addition of non-pharmacologic approaches to improve pain management at the hospital.

The program began implementing the US Army’s 2010 Pain Management Task Force recommendations and incorporating integrative nursing methods of guided imagery, aromatherapy, acupressure, music, massage, and energy healing. First, staff at the VA received 4-8 hours of education on each of these integrative pain management topics. These were registered nurses, nurse practitioners, licensed practical nurses, social workers, recreation and art therapists.

The staff also attended a series of lunch-and-learn lectures that focused on integrative nursing. For example, learning what the integrative approach looks like in palliative care, or in caring for people that have anxiety, depression and inflammation. Finally, the staff regularly attended skills days where they could be recertified or demonstrate competency in an area. Integrative nursing was added to this program and covered therapeutic presence, mindfulness, self-care and authentic communication.

The results were clear after implementation. Evaluations with veterans showed 91 percent reported improvement in pain scores, 80 percent reported improvement in anxiety and 86 percent reported improvement in nausea. One patient said that imagery was more effective than oxycodone at relieving pain, and his nurse said guided imagery relaxed him so much it put him to sleep in five minutes.

A pediatric blood and marrow transplant program

The University of Minnesota has a pediatric blood and marrow transplant program that attracts children from across the United States and other countries. Children with very serious ailments travel there: leukemia, adrenoleukodystrophy, Hurler syndrome, Fanconi anemia, aplastic anemia and epidermolysis bullosa. Although the care is excellent, the treatments are extremely taxing, so head doctors from the program approached the integrative nursing program at the University of Minnesota for help. The joint effort was an implementation of an integrative care program that covered children from diagnosis up to either a cure, or tragically, end of life care. The program also aimed to help the families and caregivers who suffering during intense treatments.

One of the first changes was to improve the environment for these children. The kids are usually confined to the square footage of their room for 100 days or more. So the program paid attention to bringing in natural light and giving the children some sort of control either of their window screens or an interactive TV. One child, for example, was feeling disturbed by a lack of privacy, so the program brought in an over-bed table to create a sort of sacred, personal space. The staff also uses the GetWellNetwork and Yoga Calm for interactive programs.

Children undergoing this treatment often experience temporary personality changes due to high steroids. In the course of their care, they may also undergo symptoms of pain, fatigue, nausea, stress, and anxiety which can alter their moods. This makes the relationship-focus in integrative nursing crucial to support families and create a positive environment. In the same vein, nurses working in this center often have long shifts, rotating shifts, a lot of manual labor, and a lot of emotional and spiritual distress. So having a whole, self-care program for caregivers is has really been important to the success of integrative nursing at the center.

Touchstone mental health

Touchstone Mental Health is a Minnesota-based organization that serves hundreds of adults in the community in need of mental health care. Their programs focus on case management, care coordination and housing.

The 35-year-old organization recently opened a community health and wellness center under a different business model. Now Touchstone does health coaching as well as integrative therapies to care for people needing chronic care. About 30 percent of the people Touchstone serves are homeless, and another 30 percent have disabilities in addition to their mental illness. Most of their patients have chronic conditions. Serving this population can be very costly, and often one person will need multiple expensive pharmaceuticals for treatment.

Since Touchstone began incorporating integrative medicine, there are a number of modalities folded into their care. Touchstone employs a nurse practitioner with a past similar to many patients to be a peer specialist health coach. This nurse can offer a unique perspective and support because she herself has a mental health diagnosis, a history of substance abuse, and lived through a period of homelessness. Their programs also include counseling with a dietician, access to a fitness center, and a partnership with the School of Public Health at the University of Minnesota. Many view Touchstone's work as a model for integrative nursing in the mental health setting.

Best implementation practices

There's no single way to implement integrative nursing or integrative care. It can be tempting to look at a successful program and mimic pieces of it, but integrative care works best when it's tailored to each setting. To start an integrative care program, it's important to understand the organizational context and how best to work integrative programs into the existing organization's vision, mission and priorities.

Part of implementing integrative nursing is connecting it to the practice model of an institution, integrating it into the plan of care, and finally integrating it into the expectations and performance reviews of staff.

The institutions most successful at fully implementing integrative care see the integrative model not as an add-on, but as something that becomes a fabric of the care that's delivered. That often means investing in staff education, professional development, and orientation of new employees. Choosing a variety of educational resources is also important.

Documentation is a great way to help ensure a successful implementation of integrative nursing, especially in the modern era of medicine. Electronic medical records – like Epic – that have designed flow sheets that can really look at symptom management and the outcomes of nursing interventions. With electronic records, institutions can continually retrieve and report on that data.

Shared narratives are another way to cement integrative nursing into an institution. For example, each year the chief nurse at Boston Medical Center shares the successful and meaningful stories nurses experienced at work with the entire nursing staff. This includes the poignant story of a nurse who was working in the ER the day of the Boston Marathon Bombing. Although they aren't possibly quantifiable, shared and documented narratives can support and reinforce an integrative nursing program.



Gentle Action

- Small changes can have large effects.
- Turbulent systems may be very sensitive to change. Stable ones are highly resistant.
- Great power – small, collaborative and highly coordinated actions.

Figure 3

Conclusion

Through its six basic principles, integrative nursing can benefit everyone involved in healthcare from the patient, to their families, to the nurses and even down to the budget of healthcare institutions. The theoretical principles of integrative nursing and its care delivery model can work hand-in-hand in a number of healthcare settings.

The benefits of an integrative nursing approach can be small, and sometimes hard to measure. For example, sitting and talking for five with a frightened chemo patient experiencing side effects may prevent the need to prescribe an anti-anxiety pill.

Yet, other implementations of integrative nursing can be measured directly. Some programs have found preemptively teaching cancer patients acupuncture points before chemotherapy can later reduce their dependency on anti-nausea therapy.

Healthcare institutions are increasingly being reimbursed based on patient satisfaction, patient scores and readmission rates. This means implementing integrative nursing will effect more than just patient and staff experiences, it will affect the bottom line. Better electronic records, including reimbursement data, have already supported the benefits of whole-person focused healthcare found in integrative nursing.

Recent changes in the healthcare landscape have created a lot of turbulence in hospitals and clinics. But this time of change may be the perfect opportunity for programs to turn to integrative healthcare.

Biography

Mary Jo Kreitzer, PhD, RN, FAAN, has more than 25 years of leadership and expertise in healthcare. In addition to her roles as nurse, teacher, healthcare administrator and researcher, she is also an internationally recognized pioneer and innovator in the field of integrative health and wellbeing. Dr. Kreitzer earned her doctoral degree in public health focused on health services research, policy and administration; and her master's and bachelor's degree in nursing.

Dr. Kreitzer is the founder and director of the Center for Spirituality at the University of Minnesota. She is also a tenured professor in the University of Minnesota School of Nursing, and co-director there of the doctorate in nursing practice (DNP) specialty in integrative health and healing.