



## Introduction

This project aims to introduce the use of Caritas Processes® as tools to prevent compassion fatigue and improve patient outcomes/experiences.

- Each month (starting January 2022), an in depth look at one of Jean Watson's Ten Caritas Processes® will be presented to the K4 unit via the Wellness Visibility Wall and email.
- Every Wednesday, an easy-to-use strategy or tip related to the month's Caritas Process® as well as the results of the pre-survey/midway-survey will be shared in AM and PM huddles on the unit.

## Significance

The ICU region at Stanford Healthcare has had a tumultuous two years with many nurses feeling stressed, depressed, burned out and anxious - leaving little to no room for compassionate caring. This project will provide tools on how to alleviate some of this emotional burden.

## Purpose

The purpose of this Caring Science Implementation Project is to reintroduce Caring Science to K4 in an approachable, piecemeal way. By slowly bringing our attention back to how we treat ourselves and others, we can begin to build a toolkit on how to approach ongoing stressors and compassion fatigue. This project will also help K4 obtain and sustain our Vision Statement of: *"K4 is a diverse, resilient, supportive & inclusive team engaged and proactive in achieving the highest level of excellence which stems from our compassion to deliver expert level care for our surgical, trauma, & transplant patients."*

## Cited Literature

- Sitzman, K. & Watson, J. (2018). *Caring Science, Mindful Practice: Implementing Watson's Human Caring Theory, Second Edition*. Springer Publishing Company, LLC.
- Watson, J., Brewer, B.B., & D'Alfonso, J. (2012). *Watson Caritas Co-Worker Score (WCCW)*®. Watson Caring Science Institute
- Watson, J., Brewer, B.B., & D'Alfonso, J. (2012). *Watson Caritas Self-Rating Score (WCSR)*®. Watson Caring Science Institute



<https://rcni.com/features/resources/managing-stress-and-building-resiliency-79261>

## Project Description/Process

- **December 2021:** Distribute the Watson Caritas Self-Rating Score (WCSR)® and the Watson Caritas Co-Worker Score (WCCW)® to K4 staff to establish baseline knowledge of the Ten Caritas Processes® (samples provided following timeline). Data from patient satisfaction, health outcomes and NDNQI results will also be collected.
- **January – May 2022:** Caritas Processes® One through Five will be presented via the Wellness visibility wall, Wednesday huddles and email.
- **June 1, 2022:** The WCSR and WCCW surveys will be sent to K4 staff once again and patient satisfaction/outcome data collected from the preceding five months. Preliminary data analysis will occur.
- **June – October 2022:** Caritas Processes® Six through Ten will be presented via the Wellness visibility wall, Wednesday huddles and email.
- **November 1, 2022:** The WCSR and WCCW surveys will be sent to K4 staff a final time and patient satisfaction/outcome data collected.
- **December 1, 2022:** Final data analysis complete and results posted for Caritas Coaches and K4 Unit.

WCSR ver. 2.0

  
Watson Caring Science Institute

**Watson Caritas Self-Rating Score®**

DIRECTIONS: When answering the questions, please consider the overall consistency of human-to-human **Self CARING** you have experienced. Please circle the number for the one best answer.

	Never	1	2	3	4	5	6	7	Always
I treat myself with loving-kindness.		1	2	3	4	5	6	7	
I practice self-care as a means for meeting my own basic needs.		1	2	3	4	5	6	7	
I have helping and trusting relationships with others.		1	2	3	4	5	6	7	
I create a caring environment that helps me to flourish.		1	2	3	4	5	6	7	
I value my own beliefs and faith, allowing for my personal success.		1	2	3	4	5	6	7	

Would you recommend our hospital to someone you love?  
Yes  No

We invite you to share any notable caring or uncaring moments you have experienced.

### Example of Watson Caritas Self-Rating Score (WCSR)®

WCCW ver. 2.0

  
Watson Caring Science Institute

**Watson Caritas Co-Workers Score®**

DIRECTIONS: When answering the questions, please consider the overall consistency of human-to-human **CARING** you have experienced from your co-workers. Please circle the number for the one best answer.

My co-workers:	Never	1	2	3	4	5	6	7	Always
Treat me with loving-kindness.		1	2	3	4	5	6	7	
Practice self-care.		1	2	3	4	5	6	7	
Have helping and trusting relationships with me.		1	2	3	4	5	6	7	
Create a caring environment that helps me to flourish.		1	2	3	4	5	6	7	
Respect my personal beliefs and faith, allowing for me to succeed.		1	2	3	4	5	6	7	

I would recommend this hospital to someone I love:  
Yes  No

We invite you to share any notable caring or uncaring moments you have experienced with your co-workers.

### Example of Watson Caritas Co-Worker Score (WCCW)®

## Results

### Project Outcome(s)/Projected Outcomes

By doing this regularly, we can start having more open conversations about wellness and how to bring that to ourselves and those for whom we care. The goal is to *introduce* the Ten Caritas Processes® as a tool to use towards resiliency and greater bandwidth for loving-kindness and compassion. Not everyone will hear something that speaks to them each week, but if one person gets one nugget out of one of these huddles, we have made significant progress.

### Project Evaluation or Partial/Projected Evaluation if not completed

Over time, the aim is to see higher employee satisfaction with their job as well as patient satisfaction with our care reflected by data produced through surveys and patient satisfaction surveys/outcomes.

## Future Directions

As this is a year long project, it will take time to see the impact reflected in the data. The hope is to see improved job satisfaction (reflected by surveys as well as retention) for the K4 staff and to see improved patient outcomes both from satisfaction surveys as well as medical outcomes.

If successful, the Caritas Processes® will become an integral part of the culture for the staff of K4 and improve staff and patient satisfaction overall. It can be a yearly adventure to keep digging into the Ten Caritas Processes® and see how our practice can improve using these processes.

## Acknowledgments

- Gisso Oreo, SHC Caritas Coach
- K4 Unit Leadership: Brian Phillips, Cyndi Parke, Jamie Kustudia, and Rob Faurote.
- K4 Wellness Committee
- Caritas Humanistic Care Certificate Program: Cohort One



## Introduction

Setting the intention for E2 to incorporate Watson Caring Science daily by use of the Stand-Out Bulletin Board.

## Significance

E2 has one of the highest mortality rates at Stanford. It is important to remind the people that see E2 staff and the staff themselves to be rooted solidly in compassionate care to self and others to face E2's unique hardships as well as shared experiences cultivating a more active dissemination of Watson's Caring Science.

## Purpose

The purpose of this Caring Science Implementation Project was to design our Stand-Out Board to connect to caring science in remembering the why of our staff. Why did you become a nurse, a physician, a physical therapist? I want people to remember their whys and remember why they stay. This creates the sacred intention to create an environment beyond just the numbers in a chart but the humans we encounter during a formative, vulnerable experience. This public display creates witnesses to our intentional work on E2 in creating a healing environment in life and death for our high acuity oncology patients.

## Cited Literature

Watson, J. (2021). Caring science as sacred science. Lotus Library.

## Project Description/Process

Each branch will represent the Standout roles. Staff member names will be the leaves. The leaves will also contain the staff member's why E2 as described above, self-care tip, or a brief Caritas Process connection. All of these are Caritas related and writer will engage the staff to connect to Watson Caring Science to what is already being done.

- Caritas Spotlight: Monthly staff connection to 1 of the Caritas Processes or reason for working on E2. All staff that supports the unit will be considered including environmental services, rehabilitation services, advanced practice providers, and administration.
- October 25th: Discussed re-design ideas of bulletin boards, vis-wall with shared leadership. Pitched incorporating Caring Science into the wall.
- November 2nd: In-person SLC meeting on unit to agree upon design and use of Caring Science and the standout platform.
- Subsequent November weeks: Engaged with staff to ask whys utilizing caritas processes as guides for individual. Data logging using excel. Briefly explained Caritas processes applicable to respondent staff.
- December: Break
- January: Complete dataset for all staff.
- February: Design completed and printed.
- March-December: Monthly interview with SLC chosen staff to engage in Caritas spotlight.



## Results

### Project Outcome(s)/Projected Outcomes

The projected outcome is that caring science is centered on E2 to better understand staff peer to peer as well as utilizing Caritas Processes to disseminate the theory in a broader manner to visitors, consultants, and the Stanford Health Care community.

### Project Evaluation or Partial/Projected Evaluation if not completed

During my shifts as FASST nurse, I briefly surveyed the nurses on what they understood about the Caritas Processes. All nurses could not describe the theory or why Stanford chose it. However, all nurses unknowingly were utilizing the theory in their practice. In a year, SLC feedback survey will incorporate understanding of Watson Caring Science aiming for 100% awareness of the theory.

## Future Directions

Daily integration of the productivity development tool and Watson's Caring Science. Caritas connection utilized in staff meetings and weekly huddles to support impactful engagement.

## Acknowledgments

- E2 Shared Leadership Council
- Johnathan Clevinger
- Jessica Martinez



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## Introduction

The past two years have been very difficult for health care professionals and humanity, in general. COVID-19 has changed everything that we once considered “normal and routine”. We are now almost two years into this pandemic, and every time we think that the end may be in sight, a new variant appears, and our lives change, again. It has been very difficult for many health care professionals to remain in their chosen profession and for those who have stayed, many are struggling with their reasons for continuing to work in healthcare. Many are also working through the burden of post-traumatic stress from what they experienced and are trying to cope with the challenges of the pandemic and our “new normal”.

## Significance

- Mental health of nurses and other health care professionals are critical during these challenging times.
- We also must remember why we chose professions where we are able to serve others and care for people.
- We cannot care for others when we are not in good health, physically and psychologically.

## Purpose

The purpose of this Caring Science Implementation Project is to help me focus on the beauty and the joy of nursing, reminding me why I chose this honored profession and helping me to regain my love and passion for it.

## Cited Literature

- Sitzman, K., & Watson, J. (2018). *Caring science, mindful practice: Implementing Watson's human caring theory*. Springer Publishing Company, LLC.
- Watson, J. (2021). *Caring science as sacred science*. Lotus Library.

## Description

This is a personal implementation project, that I hope will allow me first to internalize and solidify my intentionality with the Ten Caritas Processes® and then I hope to share the beautiful art and science of Jean Watson's Theory of Caring with those I encounter every day. As I work through the various phases of my plan to deepen my knowledge base and embed into practice, two Caritas Processes that I want to focus on:

*Caritas Process #1: Sustaining humanistic-altruistic values by practice of loving-kindness, compassion and equanimity with self/others.*

*Caritas Process #5: Allowing for expression of positive and negative feelings - authentically listening to another person's story.*

In both my personal and professional life, these two Caritas Processes speak most authentically to me. I would like to focus on intentionally incorporating these into my daily practice.



## Process

### Stage I: Watson Institute MOOC course

October 2021

### Stage II: SHC Caritas Humanistic Care Certificate Program

November – December 2021

### Stage III: Intentionally incorporate Caritas Processes One & Five into daily practice with journaling to document this integrative process

January – March 2022

### Stage IV: Look to future directions and projects

Start March 2022



## Future Directions

- Interventional Platform Orientation Program (IPOP)
  - Crosswalk the IPOP skills/curriculum with the 10 Caritas Processes® collaborating with the Caritas Coaches at CEPD
- Association of PeriOperative Registered Nurses (AORN)
  - Submit abstract for 2023 conference to present the 10 Caritas Processes® and how to integrate into the perioperative services

## Results

### Project Outcome(s)/Projected Outcomes

The anticipated outcome of this project is to transform into a Stanford nurse who has a deep understanding of Jean Watson's Caring Theory and the Ten Caritas Processes®. My intention is to focus this effort on myself first and then to intentionally use these processes as I interact with my team, other staff on the Interventional Platform and across the system. Throughout this process, I will complete a minimum for 3 journal entries per week and to reading at least 1-2 chapters/articles weekly.

### Projected Evaluation

Colleagues will start to see my integration of the Caritas Processes into my interactions with them and I would hope to see an increased interest from them. Their increased interest will open a natural dialogue where I can share my experiences and encourage others to partake in this journey and in future cohorts. I would also like to take this into other parts of my professional life including my volunteer leadership work with the Association of PeriOperative Registered Nurses (AORN) where I currently serve as Vice President of the Board.





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## Introduction

In a profession centered around caring for others, it is extremely easy to forget to provide care for yourself. With this project, I am addressing my personal lack of prioritization of self care and hope to make it a more consistent, intentional, and mindful daily practice.

## Significance

The third Caritas emphasizes being sensitive to your self and others by nurturing individual beliefs and practices (Sitzman & Watson, 2018). It's easy, especially when working with 3 or more patients per day, to burn yourself out trying to care for patients and their families mindfully and holistically. As Sitzman & Watson (2018) explain in the third Caritas, you cannot be sensitive towards the needs of others without first being sensitive towards the needs of yourself.

## Purpose

The purpose of this Caring Science Implementation Project was to be more mindful of initiating more intentional self care practices on a daily basis in order to properly care for myself so that I have the space to care for my patients, coworkers, and loved ones fully and holistically.

## Cited Literature

Sitzman, K., & Watson, J. (2018). Caring science, mindful practice : Implementing Watson's human caring theory. Springer Publishing Company.

## Project Description/Process

This project began in November 2021. On a daily basis, I completed one self care activity to allow myself to relax and disconnect from all the extraneous daily stressors. In order to keep this simple and achievable, I allowed myself the freedom to pick any activity rather than pre-assign myself an activity for that day. I also did not assign a time limit to these activities.

For the purpose of this project, the criteria for a "self-care activity" included:

- Activities or practices that can be completed alone
- Not involving a smart phone or social media
- Something that is not, and does not have the potential to be, stressful
- Something that is not work-related

Some of the activities I engaged in were:

- Reading a book
- Sitting outside in my backyard with my morning coffee in silence
- Making an effort to get my morning routine completed before walking my dog (as opposed to doing it after his walk)
- My skin care routine
- Taking my break at work without my Voalte phone and outside of my unit's break room.

[Cherubino Caritas project recording.mov - Google Drive](#)

## Results

### Projected Outcomes

**The projected outcomes of this project is to make it a daily habit to take time out of my day to focus solely on myself in some way. With this enhanced attention to myself and my needs, my hope is that I have more space and energy to adequately fulfill my patients' needs without it becoming overwhelming and burning me out. I am also hoping that this helps me have a clearer mind and relieve some of the anxieties in my personal life, while also helping me to connect more to myself.**

### Project Evaluation

Since implementing this project, I have been more conscious of how I spend my time and I noticed how easy it became to remind myself to take time for myself. The flexibility of choosing any activity that spoke to me made these tasks less intimidating, more achievable, and more enjoyable. The negative side to the flexibility, though, is that I would notice myself doing an activity that did not meet or went against my criteria (ex. scrolling through social media after work) and would convince myself make it an approved activity for that day. This happened mainly after getting home from work and being low on energy. There were also some activities that I engaged in that were exceptions to the criteria (ex. working out with friends) that had a positive impact on my day. Another thing I have noticed throughout the duration of this project is that it is much easier for me to complete these activities in the morning rather than mid-day or evening. I feel that the one month I originally planned for this project was not long enough to fully evaluate it's impact on my work, so I have decided to continue for at least another month.

## Future Directions

**Going forward, I am going to continue taking the time each day to do one self care activity. When originally planning this project, I was going to set an alarm that goes off each day to remind me to stop what I'm doing and take time out for myself. I decided not to do that, but I think I will test it out in this next month at different times of the day to see how it affects my consistency and participation. I am also going to continually evaluate the activities I am choosing and how closely they align with my criteria and goals for myself. Finally, I am going to begin journaling throughout this process so I can more accurately keep track of my consistency, evaluate the quality of these activities and their effectiveness, and to track the progress of its affect on my work and personal life.**

## Acknowledgments

Thank you to Grissel Hernandez, Gisso Oreo, Jean Watson, and all of my classmates in cohort 1 of the Caritas Certificate program for being a part of this journey with me.