Abstract 034

Category: Nursing knowledge

TITLE: Documenting Culturally Safe Nursing Practice

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Introduction and Problem Statement:

A two phase, two method qualitative study explored documentation of culturally safe nursing practices in the electronic health record (EHR). Specifically, the study focused on documentation of these practices through the Nursing Interventions Classification (NIC) and the International Classification of Nursing Practice (ICNP[®]) nursing languages.

Methods:

Phase I: Expert Review Panel (ERP):

Based on a literature review, the principle investigator developed a case scenario that represented culturally safe care of an Indigenous elder. This case scenario was presented to a panel of cultural safety experts for feedback and revision.

Phase II: Delphi Panel:

Experts in the NIC and the ICNP[®] were invited to participate in two separate Delphi panels. These panels reviewed the case scenario and provided data on how the nursing care depicted in the scenario could be documented within each system.

Results and Discussion:

The ERP agreed that six culturally safe nursing practices could be identified, observed and described. The NIC Delphi panel identified the following four NIC nursing interventions: 1) Culture Brokerage, 2) Complex Relationship Building, 3) Emotional Support, and 4) Active Listening. The results of the ICNP® Delphi Panel showed that only one ICNP® nursing intervention [Establishing Trust] existed to represent one of the six elements of culturally safe nursing care.

Impact on the Discipline:

Culturally safe nursing practices can be described and documented. Currently, components of culturally safe nursing interventions are represented more fully in the NIC than in the ICNP[®]. Implications for both standardized nursing languages will be discussed, with recommendations for the discipline to take steps to ensure that culturally safe nursing care data can be captured in the EHR.