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Developing a Joint Approach to Apply the SPARC Holistic Needs Assessment Instrument in the Colombian Clinical Setting

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Abstract

The delivery of comprehensive healthcare in any clinical setting involves assessing the multifaceted needs of patients. In recent years, a holistic approach to patient care has gained increasing recognition, focusing on not only the medical aspect of a patient's condition but also their psychological, social, and economic needs. The SPARC Holistic Needs Assessment Instrument has emerged as a valuable tool to facilitate this approach. This article discusses the development and application of a joint approach to implement the SPARC Holistic Needs Assessment Instrument in the clinical settings of Colombia.

Keywords: Spinal cord • Lipidomic • Neuroprotective

Introduction

Traditionally, healthcare has often been fragmented, with a focus on the patient's medical condition rather than their overall well-being. However, the holistic approach to healthcare recognizes that patients are individuals with unique needs and challenges that extend beyond their physical health. A holistic needs assessment aims to address the psychosocial, emotional, and practical concerns that impact a patient's health and recovery. The SPARC Holistic Needs Assessment Instrument is a structured tool designed to help healthcare professionals assess and address the holistic needs of patients. Developed in the United Kingdom, it is increasingly being recognized for its applicability in various clinical settings. The instrument typically covers various domains, including physical, psychological, social, and practical needs, and helps healthcare teams tailor care plans to the individual needs of patients [1,2].

Literature Review

Colombia is a diverse country with multiple cultural groups and languages. Healthcare professionals must be sensitive to these cultural differences when conducting holistic needs assessments, as the patient's background may significantly impact their needs and preferences. Providing assessment tools in multiple languages, or through trained interpreters, is essential to ensure effective communication and understanding of patients' needs. Colombia's healthcare system faces resource constraints, particularly in rural and underserved areas. Implementing the SPARC Holistic Needs Assessment Instrument may pose challenges, as it may require additional training, time, and resources. Collaborative efforts between healthcare organizations, NGOs, and governmental bodies may be necessary to overcome these constraints and ensure effective implementation [3,4]. Integrating the SPARC Holistic Needs Assessment Instrument into the existing healthcare processes in Colombia

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is essential for its successful implementation. This may require significant adjustments in workflows and collaboration between different healthcare professionals. Ensuring that the assessment process complements existing clinical practices is crucial for its adoption.

Discussion

Implementing a joint approach to the SPARC Holistic Needs Assessment Instrument can lead to improved patient outcomes. By addressing a patient's physical, psychological, social, and practical needs, healthcare teams can create tailored care plans that enhance recovery and overall well-being. When patients feel that their unique needs are being acknowledged and addressed, their overall healthcare experience improves. This approach fosters trust and communication between healthcare providers and patients, leading to greater patient satisfaction. A joint approach to implementing the SPARC Holistic Needs Assessment Instrument can help optimize the allocation of healthcare resources. By identifying and addressing patients' specific needs, healthcare organizations can reduce unnecessary procedures and treatments, thereby making more efficient use of available resources. The standardized documentation and reporting procedures established through a joint approach can provide valuable data for research and quality improvement initiatives. This data can help identify trends and areas for improvement in healthcare delivery, ultimately benefiting the entire healthcare system [5,6].

Conclusion

The implementation of the SPARC Holistic Needs Assessment Instrument in the clinical settings of Colombia is a significant step toward providing more comprehensive and patient-centered care. A joint approach, involving collaboration between healthcare providers, training and education, standardized documentation, patient involvement, and multilingual support, is essential for the successful adoption of this assessment tool. By addressing the unique needs of patients, this approach can lead to improved patient outcomes, enhanced patient experiences, resource optimization, and valuable data collection for future improvements in healthcare delivery. Ultimately, the holistic needs assessment instrument can contribute to a more effective and compassionate healthcare system in Colombia.

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Conflict of Interest

None.

References

- Eckenhoff, Roderic G., Mervyn Maze, Zhongcong Xie and Deborah J. Culley, et al. "Perioperative neurocognitive disorder: State of the preclinical science." Anesthesiology 132 (2020): 55-68.
- Liu, Yang, Huiqun Fu and Tianlong Wang. "Neuroinflammation in perioperative neurocognitive disorders: From bench to the bedside." CNS Neurosci Ther 28 (2022): 484-496.
- Newman, Mark F., Jerry L. Kirchner, Barbara Phillips-Bute and Vincent Gaver, et al. "Longitudinal assessment of neurocognitive function after coronary-artery bypass surgery." N Engl J Med 344 (2001): 395-402.
- 4. Han, Kelsey, Jordan D. Bohnen, Thomas Peponis and Myriam Martinez, et al. "The

- surgeon as the second victim? results of the boston intraoperative adverse events surgeons' attitude (bisa) study." *J Am Coll Surg* 224 (2017): 1048-1056
- Baker, David W., Ruth M. Parker, Mark V. Williams and Wendy C. Coates, et al. "Use and effectiveness of interpreters in an emergency department." JAMA 275 (1996): 783-788.
- Mort, Thomas C. "Continuous airway access for the difficult extubation: The efficacy of the airway exchange catheter." Anesth Analg 105 (2007): 1357-1362.

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