Spiritual Assessment: Everyone’s Task

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HMA Chaplains Web Site
www.hmablogs.hma.com/hmachaplains

Larry and Richard visit all Health Management Hospitals to develop Spiritual Care Programs to fit their Community’s Spiritual needs

Historically, Hospitals began by People of Faith

From the earliest records, people of faith cared for the sick, called “hospitality,” which developed into “hospitals” and “hospices.”

Today, we are returning to Holistic care: Body, Soul and Spirit.

Hospitals are a Holy Place

Life begins here
Life is extended here
Life ends here

From Joint Commission’s “Evaluating Your Spiritual Assessment Process”

“Physicians, therapists, nurses, and clinical pastoral staff should receive training on the value of spiritual assessment and the tools that should be used to assess a patient’s spirituality.”


Hospitals to Meet Patients’ Spiritual Needs Through...

Staff Chaplains
Volunteer Chaplains
&
All Hospital Associates
Admitting Registrar will ask... “What is your faith or denomination?”

Added to the AS400 / Pulse System then Displays in the Religious Census for Chaplains to see

Joint Commission stated in 2004

1. Hospitals must do a spiritual assessment on each patient
2. Fulfill that assessment -- Meet the Need
3. Chart that assessment (per Risk Direction)

Admitting Nurse’s Assessment
Simple pre-assessment questions

a. May we Call your Place of Worship?
b. Would you like a Chaplain to Visit?
c. Any other spiritual / cultural needs?

Admitting Nurse
Referral to Chaplain

Spiritual Assessment sent to Chaplain’s Printer as a work order

Chaplain Re-Assesses Patient

Calls Place of Worship and Fulfills Spiritual Need or Refers

Chart Documentation

Staff Chaplains Chart Fulfillment
Volunteers Chaplains store fulfillment in locked cabinet (each hospital may do this differently)
SERVICE:
“To provide outstanding customer service one experience at a time.”

All Hospital Associates
What to Look / Listen For...

Crying, Anger, Resentment,
Depression, “God Talk”,
Acting out, Denial

Listen and “Read”

➢ Learn to “read” body language
➢ Learn to Listen for needs
➢ Ask – “How can I help you?”
➢ Be tactful; use good judgment
➢ “They don’t care what you know, until they know that you care”

Culture Differences

Note that not everyone thinks or believes like you.

It’s not about you!

30-Second Spiritual Encounters

➢ Everyone is BUSY!!!
➢ We all have 30-seconds to be compassionate

Patents’ Basic Spiritual Needs

➢ Smile
➢ Compassion
➢ Touch
➢ Listen
➢ Pray (Always ask permission)
Offer Prayer

“Would a prayer be helpful?”

Sample Prayer

“Dear God. In times like this, we are thankful that we can put our faith and trust in You. We ask for hope, healing, and peace. Give the doctors and staff Your guidance. Amen”

Specific Prayer

Ask the patient…
What would you like me to pray about?
What Name of God do you use in prayer?
End a prayer the way THEY pray!

Meet Spiritual Needs
And/or Refer to a chaplain

➢ All staff should practice spiritual care!
   and/or
➢ Refer to Their Minister or a Chaplain

No Proselytizing

No one should:
   promote their own faith,
or try to persuade a patient toward their point of view

MEET THE PATIENT’S NEED

How to Contact a Chaplain

STAT: Call the Switchboard
Non-STAT: AS400/Pulse -- Referral
Available Hospital Chaplains

All Health Management Hospitals will have a Staff Chaplain or Volunteer Chaplains or both

Chaplain vs. Clergy

“Clergy”: those who represent a place of Worship
“Chaplain”: those who represent the Hospital

Chaplains do not take the place of Clergy.

Always offer to call the Patient’s own Minister first.

Clergy vs. Chaplains

Clergy

Role

Clergy only visit their own members or friends

Chaplains offer spiritual care to all

Patient Information

Clergy get info from Patient or Family

Chaplains may obtain info. From Staff “Need to Know” Information

Chaplains on Medical Healing Team

Medical Staff and Clinical Staff may give Staff Chaplains and Volunteer Chaplains information to meet patients needs

HIPAA says - “Need To Know” Basis

Give Chaplains basic medical status of patient

Chaplain will report relevant info. to medical and clinical staff

Staff Chaplains serve on the Interdisciplinary Team

What Chaplains Offer...

- spiritual assessment (determining the need of the patient)
- a spiritual visit or friendly chat
- call their Minister or Place of Worship;
- listening to their story;
- compassionate touch;
- a prayer or blessing;
- spiritual intervention with life’s decisions
- support for long term illnesses;
- care during the dying process or at death (grief counseling);
- pastoral crisis intervention (i.e.: trauma, emergencies or a Code Blue);
What Chaplains Offer... (cont.)

- ministry during Withdrawal of Life Support
- prayer at Hospital functions
- Funerals and Weddings for patients, employees and their family members
- available to help staff, visitors, and the community with their spiritual needs
- assist the hospital to be the bridge to connect the local ministers with their members (our patients)
- administration of religious rites or sacraments (i.e.: Baptism, Dedication or Baby Baptism, Holy Communion, Anointing of the Sick)
- and the chaplain to become the hub to connect local ministers to each other at the hospital in regular ministerial association meetings with medical and community education

Prayers while you work...

“Give me wisdom to treat this patient”
“Help this test to show the problem.”
“May this procedure cure their illness.”
“May the procedure not hurt.”
“Help the Physician to discover the solution.”
“May this surgery go well.”
“Help this medicine to heal them quickly.”
“May this pain medicine give them relief.”
“Help the patient to have hope.”
“May this therapy help them heal.”
“May this food make them strong.”
“Keep them from infections.”
“May they breathe better today.”
“Help their heart to stabilize.”
“May they get to go home soon.”

Double Blind Studies in Prayer

In 1980’s Harvard Medical School studied the effects of prayer
A prayer group prayed for half of the open-heart patients
The doctor, nurse and patient did not know (thus “double blind”)
(1) Those patients left the hospital sooner
(2) fewer infections
(3) And returned less often

Yale, Duke, Princeton, Emory, etc. similar studies and results

Meet Holistic Needs

HEALING is a combination of:
- Medicine and Treatment
- Faith in the medical treatment
- Desire and Drive
- Diet and Exercise
- Coping with Stressors
- Hope and Peace about the outcomes
- Contact with The Divine
- Knowing that someone cares

Benefits of Spiritual Care (Part 1)

- Returning to Holistic Healthcare, since historically all the original hospitals were pioneered by faith-based institutions with a spiritual compassionate mission.
- Fulfilling what is missing in the Medical Model: (medicine, surgery, rehab, exercise, diet)
- Fulfilling what is missing in the Psychological Model: (introspection, counseling, direction)
- Meeting Patients’ most Heartfelt Needs: human compassion, love, peace, courage, power to cope, connection with The Divine, forgiveness, a new path, meaning to life, hope, etc.
- Freeing up Clinical & Medical Staff to concentrate on their medical mission via the Chaplain referral.
- Incorporating Clinical & Medical Staff in Spiritual Care to use their own spiritual capacity to meet the patient’s spiritual needs in 30-second spiritual moments: smile, touch, listening, prayer.

Benefits of Spiritual Care (Part 2)

- Increasing Patient Satisfaction Scores as we fulfill patients’ cultural and spiritual needs.
- Helping Staff become more Productive – Chaplains are available for Staff needs with short counseling sessions concerning: finances, marriage, children, depression, anger, hope, etc. Managers can call on Chaplains to do special counseling. NOTE: all large and many small corporations hire chaplains to counsel with employees (They don’t have patients)
- Reducing D.R.G.s and Outlier Days – Prayer has been proven to be effective in Medical School studies (i.e.: Harvard, Yale, Princeton, Duke, Emory) so that patients will (1) leave the hospital sooner, (2) less infections, and (3) return to the hospital less often.
- Reducing D.R.G.s and Outlier Days – Staff Chaplains are trained to work with Physicians, Case Management, and patient families to assist in compassionate and timely Withdrawal of Life Support.
- Reducing Litigation – Staff Chaplains are trained to listen to families when they are angry and frustrated after poor outcomes. Families often say, “We understand mistakes; we just wanted someone to listen.”
- Thus Spiritual Care is Self-Funding the salary for a Chaplain.
Benefits of Spiritual Care (Part 3)

- **Expanding Marketing** – Connecting Hospitals with Places of Worship with an R.N./Public Relations Nurse by: (1) training worshippers in early detection of common diseases, (2) Case Managers call trained Church liaisons to discharge patient earlier, set up the patient’s home, get prescriptions, and get patient to next doctor’s visit [Thus keeping the patient out of the ED!], and (3) Clergy signs a commitment to promote your Hospital as the Hospital commits to reduce the Clergy’s hospital bill. This is a Trademarked Program (Congregational Health Network) from the United Methodist Hospital System in Memphis, TN. The creator and founder is Joe Webb, who now is with Health Management.

- Therefore meeting Joint Commission’s Standard for Spiritual Assessment, Fulfillment of the Assessment and Documentation of the Fulfillment.

Thank you for your help in meeting your patient’s spiritual / cultural needs

Thank you for caring!

References