Bigger Roles for Chaplains on Patient Medical Teams

Chaplains are coming into the mainstream of patient care, as new research shows positive spiritual guidance and discussion can help improve a patient's medical outcome.

- Video: Spiritual Care Appears to Help Hospital Patients

By LAURA LANDRO
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Doctors and nurses were preparing Kathleen Hynes for a stem-cell transplant at Long Island's North Shore University Hospital last June when she asked them to page another member of the medical team—hospital chaplain Kimberli Lile.

VIDEO: There is growing evidence that many patients with major illness have better outcomes when hospital care is combined with spiritual care. Laura Landro has details on Lunch Break.

Ms. Hynes, a 53-year old cancer patient, wanted the chaplain to bless the cells before they were administered intravenously.

Hospital chaplains have long been a source of comfort and succor for patients facing daunting illness.

Chaplains are seeking bigger roles in hospitals and in some cases joining the medical-care team, as new research shows positive spiritual guidance and discussion can help improve a patient's medical outcome.

Some hospitals are giving patients questionnaires upon admittance to identify who may benefit most from chaplain referrals.

Chaplains, of course, may still pray with patients regardless of denomination, help families make difficult end-of-life decisions or simply offer a sympathetic ear.

As interest rises in the links between religion, spirituality and health, there is a new push to establish chaplaincy in the medical mainstream and apply more rigorous scientific research. The Association of Professional Chaplains, which certifies health-care chaplains, issued its first standards for practice in 2009, including the requirement that chaplains document their work in patient medical records and stay abreast of new research.

Medical schools are adding courses on spirituality and health, and training residents to consider patients' spiritual needs. Some two-thirds of U.S. hospitals provide chaplaincy services; others rely on local clergy and lay volunteers.

Studies indicate as many as 40% of patients with serious illnesses like cancer struggle with spiritual concerns, which can harm emotional and physical well-being, says George Fitchett, research director in the Department of Religion, Health and Human Values at Rush University Medical Center Chicago.
Patients who have negative thoughts—say, questioning God's care for them—are more likely to develop worse health outcomes than patients who show positive spiritual coping, such as turning to religion for solace.

Chaplains "are patients' greatest advocates," says Harold Koenig, director of Duke University's Center for Spirituality, Theology and Health. They should work closely with other medical professionals, he says, and help them understand how spiritual beliefs influence patients' treatment decisions and response.

Studies indicate that chaplain visits can result in less patient anxiety, shorter hospital stays and higher satisfaction. Still, a review in the Journal of Health Care Chaplaincy concludes that many studies haven't been rigorous enough to test effectiveness and define the best practices of chaplains' care.

"Every dimension of health care has to be accountable," says Walter Smith, a Jesuit priest and president of the nonprofit Health Care Chaplaincy in New York, which conducted the review and provides chaplains to area hospitals.

"Creating a strong research foundation of what chaplains do in the clinical setting will mark the coming of age of health-care chaplaincy as a profession," he says.

With a $3 million grant from the John Templeton Foundation—whose late founder was an investor interested in the intersection of scientific research and spirituality—the Health Care Chaplaincy will oversee six national research projects on professional chaplains' role in health and palliative care, Dr. Smith says.

A study published online in July in the Journal of General Internal Medicine found that among 3,000 patients hospitalized over a three-year period at the University of Chicago Medical Center, 41% wanted a discussion of religious and spiritual concerns, yet only half of that group reported having one.

Patients who had a spiritual discussion reported being more satisfied with their overall care, whether or not they said they had desired it.

Patients may hesitate to ask for a chaplain's services out of concern that chaplains will proselytize—even though in many cases they don't use explicit theological language and "are there to be companionable and offer support," says Wendy Cadge, associate professor at Brandeis University.

Doctors, she adds, may feel uncomfortable asking patients about spiritual needs, or that it is inappropriate to do so.
Kathleen Hynes gets a CAT scan at a North Shore LIJ Health System imaging center.

That's where tools such as spiritual history-taking can help, says Christina Puchalski, director of the George Washington Institute for Spirituality and Health, in Washington D.C., who developed a screening questionnaire.

Ann Berger, chief of pain and palliative care at the National Institutes of Health's Clinical Center in Bethesda, Md., says it is "an easy way to ask these questions of patients and teach spiritual assessment to health-care providers." Chaplains visit referrals from such questionnaires and often make rounds to chat informally with patients.

At North Shore University Hospital, Ms. Hynes met Rev. Lile, a Health Care Chaplaincy employee, when the chaplain stopped by her room.

Ms. Hynes, a Catholic, had turned to her faith to help her cope with the 2008 death of her husband and the loss of her teaching job. After she was diagnosed with mantle cell lymphoma, a rare and often aggressive cancer, Rev. Lile helped Ms. Hynes face some of her fears, she recalls. "She gave me a beautiful prayer, and we sat and talked for an hour. She was so receptive and interested in what I was going through."
Kimberli Lile, left, helped Ms. Hynes deal with some of her fears during treatment for cancer.

The two spoke often during Ms. Hynes's hospital stay, laughing over the notion that Rev. Lile, trained as a Lutheran minister, would be blessing Catholic holy water that Ms. Hynes's son brought to the hospital for the stem-cell transplant.

After the transplant, Ms. Hynes wrote to Rev. Lile to express her thanks: "I feel so blessed to have your encouraging influence during this turning point in my life... The beautiful prayer and blessing is a memory I will always carry with me."

**Checking on Spirit After a Transplant**

As a nearly 20-year survivor of a bone-marrow transplant at the Fred Hutchinson Cancer Research Center, in Seattle, I get an annual questionnaire in the mail about my physical and psychological well-being. This year, it asked about my experience of "Spiritual/Religious/Existential Struggle."

Stephen King, manager of chaplaincy at the Seattle Cancer Care Alliance, which includes Fred Hutchinson, says the aim is to learn more about how the aftermath of a transplant affects not just the body but the soul. It is part of a medical effort to understand the links between health and spirituality.
Taking a Spiritual History

Here are some of the screening questions that many health-care professionals use to address spiritual issues with patients.

• **Faith, Belief, Meaning**

What is your faith or belief?

What things do you believe give meaning to your life?

• **Importance and Influence**

How have your beliefs influenced your behavior during this illness?

What role do your beliefs play in regaining your health?

• **Community**

Are you part of a spiritual or religious community?

Is there a person or group of people you really love or who are really important to you?

• **Address/Action in Care**

How would you like me, your health-care provider, to address these issues in your health care?

**SOURCE:** Christina M. Puchalski, MD, George Washington Institute of Spirituality and Health.

Of all the medical treatments that cause extreme pain and deadly risk in pursuit of a cure, few are more daunting than a bone-marrow or stem-cell transplant to treat leukemia, lymphoma and other diseases. Patients get high doses of chemotherapy and radiation to kill cancer cells; then healthy cells are administered intravenously in hopes of building a strong new immune system. Even when it works, patients can suffer terrible side effects, dangerous infections and long-term physical limitations.

On the encouraging side, studies have shown that many transplant patients experience enhanced appreciation for life, re-ordered priorities, increased empathy and higher self-esteem. Yet they also often report lower spiritual well-being. "Negative religious coping"—feeling angry, unloved or abandoned by God, or doubting one's beliefs—has been associated with anxiety, depression and poorer social and emotional well-being.

Experts say attending to one’s spirituality—be it with yoga, prayer, meditation, music or putting others first—may help turn spiritual struggle into an opportunity for growth.
Four Nondenominational Prayers for Healing

My God and God of all generations, in my great need I pour out my heart to you. Long days and weeks of suffering are hard to endure. In my struggle, I reach out for the help that only you can give. Let me feel that you are near, and that your care enfolds me. Rouse me with the strength to overcome my weakness, and brighten my spirit with the assurance of your love. Help me to sustain the hopes of my loved ones as they strive to strengthen and encourage me. May the healing power you have placed within me give me the strength to recover so I may fulfill my journey in the Divine Plan.

* * * * *

In sickness I turn to you, O God, as a child turns to a parent for comfort and help. Strengthen within me the wondrous power of healing that you have implanted in your children. Guide my doctors and nurses, that they may speed my recovery. Let the knowledge of your love comfort my loved ones, lighten their burdens and renew their faith. May my sickness not weaken my faith in you, nor diminish my love for other human beings. From my illness may I gain a truer appreciation of life's gifts, a deeper awareness of life's blessings, and a fuller sympathy for all who are in pain.

* * * * *

Send me, O God, your healing, so that I may quickly recover from the illness that has come upon me. Sustain my spirit, relieve my pain and restore me to perfect health, happiness and strength. Grant unto my body your healing power so I may continue to be able to bear testimony to your everlasting mercy and love, for you, O Lord, art a faithful and merciful healer.

* * * * *

Be at Peace

Do not fear the changes of life--

Rather look to them with full hope as they arise.

God, whose very own you are,

Will deliver you from out of them.

He has kept you hitherto,

And He will lead you safely through all things;

And when you cannot stand it,
God will bury you in His arms.

Do not be afraid of what may happen tomorrow;
The same everlasting Father who cares for you today
Will take care of you then and every day.
He will either shield you from suffering,
Or He will give you unfailing strength to bear it.

Be at Peace--
And put aside all anxious thoughts and imaginations.

-- St Francis de Sales

**Buddhist Blessing and Healing Chant**

Just as the soft rains fill the streams, pour into the rivers and join together in the oceans, so may the power of every moment of your goodness flow forth to awaken and heal all beings, Those here now, those gone before, those yet to come.

* * * * *

By the power of every moment of your goodness...

May your heart's wishes be soon fulfilled, as completely shining as the bright full moon, as magically as by a wish-fulfilling gem.

May all dangers be averted and all disease be gone.

May no obstacle come across your way.

May you enjoy fulfillment and long life.

**Source: Health Care Chaplaincy**

http://online.wsj.com/article/SB10001424052970204826704577074462494881428.html?mod=ITP_personaljournal_0
In recent years, a growing body of research investigating the relationship between religion, spirituality and health has led to a number of evidence-based guidelines for spiritual care and tools to help hospitals provide it, such as a spiritual-history taking questionnaire, available through George Washington University's Institute for Spirituality and Health. Known as GWish, the institute is currently overseeing a National Spiritual Care Demonstration Project at nine academic medical centers in California to test such tools and improve the quality of spiritual care.

“When health-care professionals don’t invite patients to discuss their spiritual needs, they are unable to understand how patients define wellness and quality of life in illness,” Christina Puchalski, who heads the GWish program, tells the Health Blog. Without such conversations, she adds, doctors are "missing critical information required for effective diagnosis and treatment."

But many experts agree more research is needed, not only to help doctors and nurses identify patients with spiritual needs who would benefit from a referral to chaplains, but to help chaplains perform "spiritual assessments" as part of their ongoing care of a patient.

George Fitchett, a chaplain and director of research in the Department of Religion, Health and Human Values at Rush University, notes there are a number of spiritual assessment models chaplains use in practice — including one developed at Rush — but none have been tested with a critical review.
“Spiritual assessment can help chaplains organize and interpret what they are hearing from the patient, but there need to be more explicit frameworks for how we interpret a patient’s situation and guide our response,” Fitchett says. “Chaplains may think we can’t measure what God is doing, and in a way that is true, but we can measure religious and spiritual attitudes and relate them to important outcomes, emotional well-being and quality of life.”

The John Templeton Foundation, which funds research into such issues as the intersection of science and spirituality, recently awarded a three-year, $3 million grant to the New York-based Health Care Chaplaincy to select and fund half a dozen national research projects to advance and test models for chaplaincy practice, especially in palliative care for the most seriously ill patients.

Emanuel Chirico, chief executive of apparel maker PVH Corp., and a trustee at the Health Care Chaplaincy, says one of the organizations’ chaplains, Sister Elaine Goodell, made a big difference in his experience at Memorial Sloan Kettering Cancer Center when he was in treatment more than a decade ago for non-Hodgkin’s lymphoma. “She totally relaxed me and left me with a calmness that wasn’t there before,” he recalls.

But in an environment where hospitals are looking to cut costs and programs that might not seem to fit into mainstream medicine, chaplaincy will need to provide ongoing evidence of its benefits. “There is research to support that what chaplains do helps, but we really need to see more of it,” Chirico says.

Physicians, meanwhile, need to stop focusing solely on medical cures and consider the needs of the “whole person,” says Linda Lee, clinical director of the integrative medicine and digestive center at Johns Hopkins School of Medicine.

Many patients with cancer and chronic diseases struggle with ongoing emotional and spiritual concerns, and studies show that their lives are enhanced with social and spiritual support, Lee adds. “We are supposed to be healers and not just prescribers, so we should be embracing that as much as we embrace chemotherapy,” she says.

And Peter Pronovost, who heads Hopkins’ quality and safety programs, says physicians can also benefit from embracing spirituality in their own lives. “Spirituality allows us to bring our whole selves to work,” Pronovost says. “When we do we recognize that we are vulnerable in many ways, we deal with many traumatic issues and we need to provide a space to heal.”