ROLE OF SPIRITUAL CARE

Health insurers and care delivery programs should consider comprehensive care models that include a palliative care component to support medical, emotional, and spiritual needs. The care plan should be created and regularly reevaluated by an interdisciplinary health care team that includes a chaplain. Chaplains help patients cope with their illness, align care values with the patient's and family's values, and support the patient and family throughout the continuum of care. They can enhance patient care, increase patient and family satisfaction, and decrease hospital costs.

In a study of 176 advanced cancer patients, 43% of those who had had a discussion with a chaplain were satisfied or very satisfied with the care they had received, compared with 28% of those who had not. In addition, patients who had discussed end-of-life wishes with a chaplain were three times as likely to talk about their wishes with someone else.

Chaplains also help patients talk with the health care team about their spiritual needs. Patients who had discussed their spirituality with a chaplain were 2.5 times as likely to say their spiritual needs were very well met, compared with those who had not.

A recent study found that patients who had a spiritual care call center were more satisfied with their spiritual care than those who did not. The study also found that patients who had a call center were more likely to talk to a chaplain about their spiritual needs.}

Institutional bottom-line

Unmet needs are associated with significant increased costs. For every dollar spent on spiritual care services, there is a $3.42 increase in patient satisfaction. Providing ongoing spiritual care support can lead to decreased rates of medical errors.

Professional chaplains facilitate discussions about religious/spiritual matters, help promote patient autonomy, and can influence patient satisfaction, quality of life near death, and end-of-life care discussions for advanced cancer patients that lead to fewer hospital transfers for geriatric care team that includes interdisciplinary health care team.

Many more patients desire conversations about religion/spirituality than have them.

A strong association exists between satisfaction with spiritual care and satisfaction with total ICU experience.

In a study of 1,140 chaplain interventions, 30% of patients reported conversations about life review, family needs, and life wishes. Of those patients, 70% felt they received adequate spiritual care.

A recent study found that patients who had a call center were more satisfied with their spiritual care than those who did not. The study also found that patients who had a call center were more likely to talk to a chaplain about their spiritual needs.

In a study of 176 advanced cancer patients, 43% of those who had had a discussion with a chaplain were satisfied or very satisfied with the care they had received, compared with 28% of those who had not. In addition, patients who had discussed end-of-life wishes with a chaplain were three times as likely to talk about their wishes with someone else.

Chaplains also help patients talk with the health care team about their spiritual needs. Patients who had discussed their spirituality with a chaplain were 2.5 times as likely to say their spiritual needs were very well met, compared with those who had not.

A recent study found that patients who had a spiritual care call center were more satisfied with their spiritual care than those who did not. The study also found that patients who had a call center were more likely to talk to a chaplain about their spiritual needs.

Somatic care and spiritual care are related to better patient quality of life near death.

Professional chaplains facilitate discussions about religious/spiritual matters, help promote patient autonomy, and can influence patient satisfaction, quality of life near death, and end-of-life care discussions for advanced cancer patients that lead to fewer hospital transfers for geriatric care team that includes interdisciplinary health care team.

Many more patients desire conversations about religion/spirituality than have them.

A strong association exists between satisfaction with spiritual care and satisfaction with total ICU experience.

In a study of 1,140 chaplain interventions, 30% of patients reported conversations about life review, family needs, and life wishes. Of those patients, 70% felt they received adequate spiritual care.

A recent study found that patients who had a call center were more satisfied with their spiritual care than those who did not. The study also found that patients who had a call center were more likely to talk to a chaplain about their spiritual needs.

In a study of 176 advanced cancer patients, 43% of those who had had a discussion with a chaplain were satisfied or very satisfied with the care they had received, compared with 28% of those who had not. In addition, patients who had discussed end-of-life wishes with a chaplain were three times as likely to talk about their wishes with someone else.

Chaplains also help patients talk with the health care team about their spiritual needs. Patients who had discussed their spirituality with a chaplain were 2.5 times as likely to say their spiritual needs were very well met, compared with those who had not.

A recent study found that patients who had a spiritual care call center were more satisfied with their spiritual care than those who did not. The study also found that patients who had a call center were more likely to talk to a chaplain about their spiritual needs.

Somatic care and spiritual care are related to better patient quality of life near death.