The Critical Role of Spirituality in Patient Experience

Jason A. Wolf, PhD, President, The Beryl Institute
Rev. George Handzo, BCC, CSSBB Director
Health Services Research and Quality HealthCare Chaplaincy Network™
Defining Patient Experience

The sum of all interactions, shaped by an organization’s culture, that influence patient perceptions across the continuum of care.

- The Beryl Institute
About The Beryl Institute

The Beryl Institute is the global community of practice dedicated to improving the patient experience through collaboration and shared knowledge.

OUR COMMITMENT

As a community, we commit to:

• Elevating the importance of experience across all care settings
• Generating, collecting and sharing ideas and proven practices
• Engaging a broad range of voices and views
• Putting patients, families and care partners first
• Recognizing the value of the entire healthcare team
• Reinforcing experience encompasses quality, safety, service, cost, and outcomes

www.theberylinstitute.org
Keynote Speakers

Ronan Tynan  
Cynthia Mercer  
Montel Williams  
Kelly Corrigan

Breakout Sessions

50+ INSPIRING SESSIONS
{ more details on our website }

Three Pre-Conference Workshops

The Environment of the Patient Experience: Proactive Design in Practice  
Lorissa MacAllister and Susan Mazer

Coaching and Feedback to Enhance Communication  
Calvin Chou and Laura Cooley

Leading Your Patient Experience Strategy to the Next Level  
Wendy Leebov, Jill Golde and Dorothy Sisneros

Three Pre-Conference Gatherings

Patient Advocacy Community  
Physician Community  
Pediatric Community

Networking Dinner & Reception

The Margot and Bill Winspear Opera House at the AT&T Performing Arts Center
Become a Certified Patient Experience Professional.

Applicants should have a minimum 3 years of professional experience in a patient experience related role or completion of 30 Patient Experience Continuing Education Credits (PXEs).

Learn more at www.pxinstitute.org
HealthCare Chaplaincy Network™ is a global health care nonprofit organization that offers spiritual-related information and resources, and professional chaplaincy services in hospitals, other health care settings, and online. Its mission is to advance the integration of spiritual care in health care through clinical practice, research and education in order to increase patient satisfaction and help people faced with illness and grief find comfort and meaning—whichever they are, whatever they believe, wherever they are. HCCN has been Caring for the Human Spirit® since 1961.
PX Continuing Education Credits

• In order to obtain patient experience continuing education credit, participants must attend the program in its entirety and return the completed evaluation.

• The planning committee members and presenters have disclosed no relevant financial interest or other relationships with commercial entities relative to the content of the educational activity.

• No off label use of products will be addressed during this educational activity.

• This activity has received no sponsorship or commercial support. No products are available during this educational activity, which would indicate endorsement.
The Critical Role of Spirituality in Patient Experience

January 19, 2016
Our Speakers

Rev. George Handzo, BCC, CSSBB
Director, Health Services Research and Quality
HealthCare Chaplaincy Network™

Jason A. Wolf, Ph.D.
President
The Beryl Institute
Our Agenda

• Spirituality & the Patient Experience
• Caring for Spiritual Needs
• What We Learned
• Reflections
• A Call to Action
• Q & A
SPIRITUALITY AND THE PATIENT EXPERIENCE
Patient Experience Defined

The sum of all interactions, shaped by an organization’s culture, that influence patient perceptions across the continuum of care.

The Beryl Institute
At the end of the day...
...we are human beings caring for human beings!
Why Spirituality & the Patient Experience

We must

• move beyond the body and its ills to the mind and spirit that accompany it

• look broadly to the values, hopes and dreams, concerns and fears that accompany an individual on a care journey

• see patient experience as something encompassing all a patient, family member or provider of care encounters in the healthcare system
Why Spirituality & the Patient Experience

“When we touch on the essence of humanity at our core – the very spirit that accompanies the body in each care encounter, we reveal boundless opportunities to positively impact the overall health of each individual and the communities we serve.”
What we asked?

- What do you see as the significance of spiritual care in the patient experience conversation today?
- What do you believe are the greatest spiritual care needs in positively impacting/influencing the patient experience? In which areas of the patient experience can spiritual care have the greatest impact?
- What do you see as the value in focusing on/integrating spiritual care into your patient experience strategy?
- How do you see the professional health care chaplain specifically contributing to this value and impact?
- What do you see as the trend in healthcare over the next 5 years that will influence and/or be influence by spiritual care? And which will be most relevant to PX?
- What would you offer as the critical guiding principles or recommendations for action in engaging/introducing spiritual care as part of the patient experience conversation?
Voices from the Paper

David Carl
Executive Director, Spiritual Care and Education, Carolinas HealthCare System; Assistant VP, CHS Patient Experience

Kevin Massey, MDiv., BCC
Vice President for Mission and Spiritual Care Advocate Lutheran General Hospital

Doug Della Pietra
Director, Customer Services and Volunteers Rochester General Hospital

Christina Puchalski, MD, MS
Founder and Director The George Washington University’s Institute for Spirituality and Health

Trace Haythorn, PhD, MDiv.
Executive Director Association for Clinical Pastoral Education, Inc.

Margo Richardson, M.Ed., MDiv., BCC
Spiritual Care Program Manager Allina Health Unity Hospital

Malcolm Marler, D. Min, BCC
Director of Pastoral Care UAB Medicine

Amy Wilson-Stronks
Visionary Healthcare Quality and Safety Strategist, Researcher and Consultant Wilson-Stronks LLC Improving Healthcare
CARING FOR SPIRITUAL NEEDS
Research- What Do We Know?

• Spirituality/religion impact health outcomes

• Spirituality/religion are important to most people in coping with illness

• Most people want their spiritual/religious beliefs and practices taken into account in their health care

• If spiritual/religious needs are met, outcomes improve including medical outcomes, cost reduction and patient satisfaction
In a large study of advanced cancer patients:

- 88% said religion was at least somewhat important
- 72% said their spiritual needs were minimally or not at all supported by the medical system
- 42% said their spiritual needs were minimally or not at all supported by their faith community
- Spiritual support was highly associated with QOL (P=.0003)

Satisfaction With Care

Patients whose spiritual needs were not met reported lower ratings of quality and satisfaction with care.

Satisfaction With Care

- Chaplain visits increased the willingness of patients to recommend the hospital, as measured by both the HCAHPS survey and the Press Ganey survey.
- On the Press Ganey survey, patients visited by chaplains were also more likely to endorse that staff met their spiritual needs and their emotional needs.
- In terms of overall patient satisfaction, patients visited by a chaplain were more satisfied on both the Press Ganey survey and on the HCAHPS survey.
- Chaplains’ integration into the healthcare team improves patients’ satisfaction with their hospital stay.

Satisfaction With Care

• 41% of inpatients desired a discussion of R/S concerns while hospitalized, but only half of those reported having such a discussion.

• Overall, 32% of inpatients reported having a discussion of their R/S concerns.

• Religious patients and those experiencing more severe pain were more likely both to desire and to have discussions of spiritual concerns.

• Patients who had discussions of R/S concerns were more likely to rate their care at the highest level on four different measures of patient satisfaction, regardless of whether or not they said they had desired such a discussion.

Discussions about the patient’s wishes for end-of-life care and a greater number of spiritual care activities performed were both associated with increased overall family satisfaction with ICU care ($p < 0.05$).

Patient Experience and Outcomes

Chaplaincy intervention leaves patients feeling more peaceful, hopeful and able to discuss their situation with medical staff.

Snowdon A., Telfer I, Kelly E, Bunniss S, Mowat H. (2013) “I was able to talk about what was on my mind.” The operationalisation of person centred care. The Scottish J of Health Care Chaplaincy. 16(Special), 16-22.
WHAT WE LEARNED
Significance of Spiritual Care

“I think the significance of spirituality is **the emphasis on recognizing patients as a whole**, which would include the mind, the body, the spirit. The place of the spiritual dimension of care in the patient experience is honoring...and recognizing the power of beliefs on (the whole of) our biology. [It is] the overarching breadth of what it means to honor the sacred nature of the work that we’re doing."

– David Carl
Greatest Spiritual Care Needs/Impact

When we help people to feel understood, heard and respected, this is not simply a rote exercise, but rather it is a focused intention on bringing the whole person into the care encounter. In doing so you acknowledge not just the diagnosis, but the emotions, fear, concern, anxiety, etc. that flavors any and all care encounters.

“Spirituality points back to the **humanity of the whole caring experience.**”

- Margo Richardson
Value in Integrating Spiritual Care

“The value remains the capacity to contribute to the whole of people. I believe the users of healthcare are smart and will essentially (or eventually) go where they will be holistically cared for, not simply where they are fixed. In addition, there is a real business aspect to this value conversation as leaders look to have the greatest impact at the lowest cost, there may be no better place to look for that than caring for the spiritual needs of people – a true focus beyond body to mind and spirit as well.”

—Trace Haythorn
“The role of the chaplain is to really be that person who can help the patient and the medical team communicate together sometimes through seemingly foreign languages and goals of care. **It is translating who a person really is,** i.e., who they are culturally, personally and the values that they have and hopes that they have for their future, and how the medical team can help people achieve realistic goals along with that.”

– Kevin Massey
“We need to be teachers and trainers and to listen with a different ear than we’ve listened in the past. That’s what we’re doing. I think over the next five years the biggest change is how is the hospital and the community and the outpatient, coming back to the doctor, how does all of that help people stay out of the hospital? How do we help them be healthier?”

–Malcolm Marler
I think that it’s really important to have someone on the team that can address and treat spiritual distress more fully. Also, it’s critical to be able to give voice to patients’ and families’ spiritual, religious or cultural beliefs and values.

– Christina Puchalski

In order to really effectively introduce spiritual care, it needs to be better understood by the public, as well as the key stakeholders who would actually make it happen.

– Amy Wilson-Stronks

The evidence is very clear that...those that have their religious and spiritual needs met are more likely to be a part of their plan of care and compliant and less depressed, and more calm, more peaceful and more satisfied. Spiritual care should be seen as part of the interdisciplinary team, not just an add-on that if we run into very, very emotionally upset people, or a death, that we call spiritual care. This should be a part of the care plan with chaplains being integrated into conversations on patient units on a daily basis.

– Doug Della Pietra
Reflections

• Health care is increasingly about caring for the whole person (Yeah)

• The question of whether spiritual care should be included in health care has been answered.

• The question of whether spiritual care impacts patient experience has been answered.

• Like all other “must haves”, spiritual care needs to be hard wired in and have a professional in charge
A CALL TO ACTION FOR SPIRITUALITY IN HEALTHCARE
A Call for Elevating Spiritual Care

- People are **more than a disease or a body**, an emotion or a mind
- Intentional commitment to **holistic care**
- Elevate the **sense of humanity**
- Spiritual care should be made available to patients, family and other caregivers, **AND support healthcare professionals**
- Spirituality **cannot be left to chance**
- Chaplains should be included as the **spiritual care specialists** on the healthcare team

We have an **opportunity** to expand and reinforce the dialogue on the outcomes spiritual care can drive.

+ other actions/ideas to consider...
“When we touch on the essence of humanity at our core – the very spirit that accompanies the body in each care encounter, we reveal boundless opportunities to positively impact the overall health of each individual and the communities we serve.”
Q & A / Contact Us

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PX Continuing Education Credits

- This program is pending approval for 1 PXEs

- In order to obtain PXEs, participants must attend the program in its entirety and complete evaluation.
We invite you to join our global community of over 40,000 members and guests passionate about improving the patient experience.

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