Key insights from CHA Surveys on Chaplaincy with Executives and Clinicians

BY DAVID LICHTER, DMIN

Within the last few years, there has been additional focus on the chaplain's ministry within Catholic health care. Recently CHA and the National Association of Catholic Chaplains paired up to create the Pastoral Care Advisory Committee to focus on specific issues and trends in chaplaincy and provide a unified voice.

The group felt it was time to conduct a national survey of executives and clinical staff to gauge their understanding of the benefits of good spiritual care and of the training required to be a certified chaplain.

The survey focused on the following:

- What do Catholic health care executives think about chaplaincy and spiritual care services being offered?
- How do clinicians and colleagues view chaplains and spiritual care services that are provided?

Answers to both these questions would help clarify perspectives and identify messages to enhance understanding of the chaplain's role and how his or her work supports both the healing process and Catholic health care organizations' mission.

In September 2012, surveys went to CHA's database of executives and clinicians. The response was good, with the executive group showing a larger number of respondents (701 responses), but a lower response rate. The clinical group had a smaller number of respondents (432 responses) but higher response rate. Overall, we learned much from the feedback offered in the survey.

SURVEY WITH EXECUTIVES
Executives were asked two questions: How would you describe the purpose and value of spiritual care and professional chaplaincy? And as a decision-maker, what types of information do you want to have regarding the role of chaplain in your decision-making?

The first question was a perception and value question; the second concerned what more they needed to know about chaplains. The committee felt both would be important in understanding executives' assumptions and ideas about chaplaincy services.

There was strong representation of board members and chief executive officers (45 percent) among those surveyed (board members, CEOs, COOs, CMOs, CNOs), and they showed a positive understanding of and appreciation for the value of chaplains. Regarding the purpose and value of spiritual care and professional chaplaincy, the most prominent noted items (in order of emphasis) were:

1. Providing patient and family support
2. Demonstrating Catholic identity/mission
3. Treating the whole person
4. Providing staff support

While providing patient and family support would be the hoped-for response as to the chaplain's role, the fact that executives viewed its value as integral to Catholic identity and mission and to treating the whole person was an important finding.

In comments, one CEO expressed it: "To act in a leadership role in assisting in the development of a culture of respect and dignity for others, and healing for all." A trustee said, "Both a strong presence and wide array of spiritual care services will only enhance our health care mission.
A CFO wrote, "I believe this in an integral part of supporting our mission to provide quality care of the whole patient."

Certainly, viewing spiritual care as essential to Catholic health care is a critical message, and we were delighted to see that executives could articulate this vision. Also, the high response regarding staff support indicates the appreciation that executives have for chaplains and the importance of the spiritual care department to staff care.

As to the types of information executives want to have regarding the role of chaplain in their decision-making, the highest responses were for the integral role of spiritual care, especially in tending to the emotional needs of the clients served. Four other responses were grouped closely together:

- Positive influence on patient satisfaction
- Support of staff, especially during critical incidences
- Orientation, education, and integration of staff in meeting spiritual needs
- Essential role of spiritual care in Catholic health care

Again, it was helpful to learn that executives need to know more about how chaplains impact patient satisfaction and how they are meeting patient and family emotional needs. It was also valuable to know how important, in their eyes, the chaplain's role is in preparing staff for the staff's respective roles in meeting spiritual needs, as well as supporting staff in critical times.

While chaplains' impact on the quality of experience is a little less emphasized, this might be
attributed to leaders not seeing spiritual care services and chaplains as a part of quality initiatives in their facilities.

Survey with Clinicians
Clinicians were asked to identify their respective disciplines and to answer four other questions. The first question mirrored the first question for the executives, asking them to describe the purpose and value of spiritual care and professional chaplaincy. The second questions sought to learn what clinicians want when asking for help: "When seeking assistance from spiritual care and professional chaplaincy, what are you asking for?" The third question asked, "When would you refer a patient and why?" The final question aimed to learn what more clinicians would like to know about chaplains.

The majority of those responding were nurses, with the second largest (but much smaller) group being social workers. Many who responded wore several hats.

In response to the question regarding the purpose and value of spiritual care and professional chaplaincy, patient and family support was deemed of highest value. The essential need for treatment of the whole person was second and staff support was third.

Clinicians compared similarly with executives who ranked support of patients and their families as their highest priority, grounding this value in a holistic view of the human person. In comments, one physician wrote, "It is at the essential core of the healing process for patients and their families." Or, as a nurse expressed it, "We need to recognize that our patients identify themselves as spiritual beings. Respecting that identity requires we provide care commensurate to their identified needs."
However, in contrast to the executives who ranked "part of Catholic mission and identity" as the second highest, clinicians ranked this much lower, only sixth. Given the executives' focus on ensuring that the Catholic mission of the institution is being lived on all levels, it makes sense that they view chaplaincy in this light more than clinicians do.

In response to the question, "When seeking assistance from spiritual care and professional chaplaincy, what are you asking for?" supportive presence for patient and families was noted the most, with recognition of the religious (prayer/ritual) needs of patients second and support of staff was third. For "ethical questions and concerns" was placed fourth.

![Question 3: When seeking assistance from spiritual care and professional chaplaincy, what are you asking for?](image)

These responses are not surprising, given this group's focus on patient care. They named the value of chaplains in terms of patient care, and I providing religious support (prayer and ritual) as needed.

However, being called upon to be a support to staff remains consistently high on both surveys. This support was expressed by a social worker in this way: "Teaching for staff on how to meet spiritual needs of patients within the work that we do."

Clinicians seemed to view more highly the chaplains as spiritual care resources of religious support and in ethical matters. A physical therapist commented: "Help with clarifying needs of patient's from faith backgrounds that we typically do not have experience with Muslim, Hindu,
etc." Additional comments focused on specific ways in which that support was provided, for example, aid in end-of-life care.

In response to the question, "When would you refer a patient and why?" several reasons were rated high and grouped close together, in this order:

- Patient expresses/evidences emotional or spiritual distress
- Patient expresses need for spiritual or cultural support around faith or beliefs
- Family needs support
- Patient needs support with end of life decisions
- Patient receives terminal diagnosis

These responses reflect a healthy understanding regarding when to refer to a chaplain. The results seem to indicate that clinicians are more aware than executives of the important role of spiritual care around end-of-life issues. A nurse noted, "Advance Directives, help with goals of care, or to help clarify a course of treatment/treatment plan."

The final question was "What more would you like to know to better understand the role of professional chaplains?" The highest ranking went to understanding chaplains' specific roles and responsibilities and their specialized training and certification. In other words, what do chaplains do and how are they trained and certified for this?
Conclusions and Follow-up

The surveys made clear that chaplains and spiritual care are valued at all levels of the organization. There was little variation between what executives and clinicians reported are the main roles played by chaplains, with patient care being at the heart of who chaplains are. While both groups understand this service in the context of holistic care, executives place that value more strongly in relationship of spiritual care to Catholic identity and mission than do clinicians, while clinicians understand more concretely and specifically when and why a chaplain is needed.

The executives want to know how chaplains' services contribute to patient satisfaction and how they support and educate staff on their role in spiritual care. Clinicians want to know more about the specific roles and responsibilities, training and credentialing of chaplains.

While the richness of the survey results cannot be fully captured in this article, the main discoveries already have been helpful in shaping communication messages for diverse education tools about spiritual care and chaplaincy, such as CHA's most recent e-learning module on spiritual care essential to Catholic identity (available in the CHA Knowledge Center – www.chausa.org/knowledgecenter).

DAVID LICHTER is executive director of the National Association of Catholic Chaplains, Milwaukee.