Tips on Addressing Spiritual Issues in End of Life Care

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Spirituality and End of Life

• “Turning ship around”
• History—studies
• Spirituality?
• Benefits
• How to?—Tips
• Resources
Spirituality and Medicine

- History of Care\(^6\)
- 87% of religion “very/somewhat important”
- 79% faith aids in recovery
- 56% faith helped them recover
- 77% physicians should consider spiritual needs
- 48% want physicians to pray with them\(^1\)
Spirituality and Medicine

- Coping strategies with *positive* effects on emotional well-being; ability to cope
- Ranked 2\textsuperscript{nd} on National Inpatient Priority Index 1998-2003\footnote{1}
- Hospitalized terminally ill, higher levels of spirituality than non-terminally ill.\footnote{5}
Spirituality and Medicine

• 85% increased trust in physician\textsuperscript{7}
• Doctors to be warm and caring\textsuperscript{11}
• Improved relationships; ability to cope with disease and hospitalization
• \textit{Affects} health and hospital financial outcomes and overall patient satisfaction\textsuperscript{2}
What is SPIRITUALITY?
Spirituality is an aspect of every human being
Spirituality is a journey... toward completeness
Spirituality is sometimes... seeking to connect with the divine
Spirituality is the search for...
Spirituality is **affirming who we are as human beings**...
Spirituality is being fully alive in ways that are meaningful...
Spirituality is being *fully human*:

Mind  

Body  

Spirit
Exploring Spirituality Takes...
What are the benefits?

• Holistically aware
• Deepen relationships/trust
• Lower costs/LOS
• Decreased anxiety and depression
• Increased emotional coping
• Positive physiological responses
• Help for coping with disease and hospitalization\(^2\)
...More benefits

- Healing
- Acceptance
- Goals, legacy
- Reconciliation
- Hope
How to…

• Assessment tool
• Listening skills
• Cases
• Resources
Tip #1: It starts with *me*!

- “Physician, heal thyself”
- Spirituality/mortality
- My wishes?
- Head to heart
- Conversation
Tip #2: Spiritual History
FICA©—a screening tool

- F — faith and belief
- I — Importance
- C — Community
- A — Address/Action in care

asap
Tip #3: Listening

- “Up?”
- Two ears and one mouth
- Assume?
- Normalize
- Open-ended?
Cases

• The “daughters”: Who’s agenda?
• The “DO Resuscitate Doctor”: Who’s need?
• “I am ready to go to heaven”: Listening skills
• ALS: Patient wishes
• All aboard!: Success story
Resources

The Chaplain
  • Male / Female
  • Layperson / Ordained
  • Faith
  • Professional
Further Resources

- People / Books
- Music
- Educational
- Mediation
- Support Groups
Remember!

- NEVER too early
- NOT about you!
- FICA
- Refer
- Feelings?