Long-Term Care Community of Practice Series

Spiritual and Religious Care as Part of the Holistic Approach



Host & Moderator: Holly Finn, PMP

Guest Speaker: Jennifer Holtslander, SCP-Associate, MRE, BTh

Date: June 9th, 2022

Territorial Honouring



The Palliative Care ECHO Project

The Palliative Care ECHO Project is a 5-year national initiative to cultivate communities of practice and establish continuous professional development among health care providers across Canada who care for patients with life-limiting illness.

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The Palliative Care ECHO Project is supported by a financial contribution from Health Canada. The views expressed herein do not necessarily represent the views of Health Canada.





Santé Canada



LEAP Long-Term Care

- Interprofessional course that focuses on the essential competencies to provide a palliative care approach.
- Case studies contextualized to the longterm care setting.
- Delivered online or in-person.
- Ideal for any health care professional (e.g., physician, nurse, pharmacist, social worker, etc.) working in long-term care and nursing homes.
- Accredited by CFPC for 27.5 Mainpro+ credits (online) and 26.5 Mainpro+ credits (in-person).



Learn more about the course and topics covered by visiting

www.pallium.ca/course/leap-long-term-care



Overview of Sessions

Session #	Session Title	Date/ Time
Session 1	Introductory Session	Dec. 9, 2021 from 12-1pm ET
Session 2	The Palliative Approach as Part of the Continuum of Care	Jan. 13, 2022 from 12-1pm ET
Session 3	The Palliative Approach as an Inter-Professional, Team-Based Approach	Feb. 10, 2022 from 12-1pm ET
Session 4	Individuals and their Families as Members of the Team	Mar. 10, 2022 from 12-1pm ET
Session 5	Advance Care Planning	Apr. 14, 2022 from 12:30-1:30pm ET
Session 6	Resources for Long-Term Care	May 12, 2022 from 12:30-1:30pm ET
Session 7	Spiritual and Religious Care as Part of the Holistic Approach	Jun. 9, 2022 from 12-1pm ET
Session 8	Supporting New Team Members	Jul. 14, 2022 from 12-1pm ET
Session 9	Honouring Personhood in Dementia Care	Aug. 11, 2022 from 12-1pm ET
Session 10	Diversity and Inclusion in the Long-Term Care Setting	Sep. 8, 2022 from 12-1pm ET
Session 11	Meaningful Measurement to Support Health System Improvements in LTC	Oct. 13, 2022 from 12-1pm ET
Session 12	Mental Health and Resilience During the COVID Pandemic: Part 1	Nov 10, 2022 from 12-1pm ET
Session 13	Mental Health and Resilience During the COVID Pandemic: Part 2	Dec 8, 2022 from 12-1pm ET





Welcome and Reminders

- Your microphones are muted. There will be time during this session for questions and discussion.
- You are welcome to use the chat function to ask questions, if you have any comments or are having technical difficulties, but also please also feel free to raise your hand!
- Remember not to disclose any Personal Health Information (PHI) during the session
- This session is being recorded- this recording and a copy of the slides will be emailed to registrants within the next week.
- This 1-credit-per-hour Group Learning program has been certified by the College of Family Physicians of Canada for up to 12 Mainpro+ credits.

Introductions

Host & Moderator

Holly Finn, PMP National Lead, Palliative Care ECHO Project, Pallium Canada

Technical Support

Gemma Kabeya

Education Research Officer, Pallium Canada

Guest Speaker

Rev. Jennifer Holtslander, SCP-Associate, MRE, BTh
Associate Spiritual Care Provider – Canadian Association of Spiritual Care
Spiritual Director and Supervisor – Spiritual Directors International
Multi-faith Spiritual Care Provider for Veterans Unit 3-5 – Wascana Rehab Centre, Regina, SK
Living Faith at Home – Spiritual Care and Spiritual Direction Private Practice



Disclosure

Relationship with Financial Sponsors:

Pallium Canada

- Not-for-profit
- Funded by Health Canada

Disclosure

This program has received financial support from:

- Health Canada in the form of a contribution program
- Generates funds to support operations and R&D from Pallium Pocketbook sales and course registration Fees

Host/ Presenter:

- Holly Finn: National Lead, Palliative Care ECHO Project, Pallium Canada
- Jennifer Holtslander: I am an author and a Spiritual Care Provider in private practice. My recommendation of Spiritual Care may be perceived as a potential conflict of interest.



Disclosure

Mitigating Potential Biases:

 The scientific planning committee had complete independent control over the development of course content

Spiritual and Religious Care as Part of the Holistic Approach

Objectives of this Session

Upon completing the session, participants will be able to:

- Explore patients' spiritual or religious needs.
- Refer to useful resources that help support the spiritual and religious needs of patients and their families.
- Describe some important practices across main faith groups with respect to end-of-life care



What is Spiritual Care?

Spiritual Care responds to the spiritual and religious care needs of residents, their family members/ friends, and the Care Team when they are:

- Seeking sources of hope, meaning, comfort, and strength;
- Wrestling with issues of forgiveness or unresolved conflict;
- Addressing a crisis of life or faith;
- Struggling with anger, despair, hopelessness, or loneliness; or
- Dealing with the fear of death or dying.

Individuals might turn toward Spiritual Care when...

- They have important treatment decisions to think about
- They have been given life changing news
- They have a religious or spiritual need
- They have questions about themselves, others, life or God
- They are worried about their family
- They have questions about death and dying

Think of people in your context that experienced any of the above. Tell us a bit about what was going on.

At Intake and Reviewed Regularly

- Would you like Spiritual Care?
- Would you like our Chaplain to come see you?

- Who or what supports you in your life? What brings you joy?
- Do you have any cultural, religious, or spiritual beliefs that you would like people caring for you to be aware of?
- Who do you have to talk to about cultural, religious, or spiritual matters?
- Would you like to have your culture or religion recorded on your chart? so that our staff know how best to meet your cultural, spiritual or religious needs



FICA

The acronym FICA can help health care professionals take a brief Spiritual History.

- Faith and belief
 - Question example: "Do you consider yourself spiritual or religious?"
- Importance (Impact) Question example: "What importance/impact does your spirituality have in your life?"
- Community Question example: "Are you part of a local faith community?"
- Address in Care Question example: "How would you like me, your _____, to address these issues in your care?"



Indirect Cues Invite Respectful Questions

- Complaints
- Anxiety/Fear/Worry
- Expressions of loss
- Expressions of being disconnected from self, others or God
- "I keep wondering why this is happening to me?"
- "What has she done to deserve this?"
- "Perhaps it was meant to be."
- "He knows his time has come."
- Other ______

Tradition specific

- Tobacco, sweetgrass braid, eagle feather, or ribbon skirt;
- Prayer mat;
- Hijab, niqab, or burka;
- Turban, or khanda;
- Namaste, or tilaka;
- Kippah, menorah, star of David, hair covering, or mezuzah;
- Crucifix, cross, bible, or hymnal.



Why is Spiritual Care important?

- Because everyone has something important to communicate about their living and dying. Be in conversation to attend to what those things might be.
- But DO NOT assume that you know what the cues mean without ongoing conversation.

Ongoing Spiritual Care conversations matter

- 1. to develop relationship with the resident and their support team;
- to support the resident with their spiritual and/or religious needs;
- 3. to help the care team get important moments of transition right;
- 4. to help the family be able to be supported in their experiences of spiritual need, anticipatory grief, and in their bereavement; and
- 5. to help the Care Team be supported in their experiences of working with living and dying.



We all share responsibility!

Specialist-level palliative care teams and services

Health care provides across
professions working in different
settings and areas of care:
LTC, Primary care, Oncology, Internal
medicine, Cardiology, Pulmonology,
Neurology, Geriatrics, Pediatrics, Surgery,
Emergency Care, Intensive Care
Etc.

Palliative Approach to Care

Case Study: Betty Part 1

Betty is 87 and has lived in Long Term Care for ten years.

The initial diagnosis and reason for admission have long since faded into the background.

Betty has built supportive relationships with nursing and therapies staff which is a gift because her family moved out of province last month and now Betty no longer has regular outside visitors.

When volunteers host religious events, Betty always says yes to attending.

Let's make a plan to assess and support Betty's spiritual needs.

Name: Betty Q Admission: 12 October 2012

DOB: 15 June 1935 NOK: George Q (son)
Gender: F Status: Permanent
Allergies: N/A Doctor Wilson



Receiving support from local faith community yes Mo Referral by Rounds Social Work Nursing Physician Spiritual Care Colleague Family Patient Palliative Care Coordinator Other	Long Term Care Assessment – Spiritual Health & Initial Assessment Date 12 October 2021	Rev. Jennifer Holtslander, Spiritual Care			Faith Home					
Support Systems (Community) Y = yes N = no blank = unknown Y = yes N = no blank = uknown Y	Visit with Patient Partner Parent Family Member(s) Friend(s) Faith Affiliation No current affiliation. Family history of mixed denominations									
Support Systems (Community) Y = yes N = no blank = unknown Y = Family										
Y = yes N = no blank = unknown Y = Family Y = Family Y = Family Y = Family Y = Spiritual Care N = Faith group N = Partner Y = Medical staff Y = Spiritual Care Y = Spiritual Care Y = Friends Y = Medical staff Y = Music Y = Talking Y =	Referral by 🗆 Rounds 🗆 Social Work 🗆 Nursing 🗆 Physician 🗆 Spiritual Care Colleague 🗶 Family 🗆 Patient 🗀 Palliative Care Coordinator 🗀 Other									
4 Maintains relationships with significant others 4 Participates in meaningful rituals and practices 5 Spiritual care provided by family or faith community Other: Changes in belief system that can hinder coping Longing for forgiveness Concern for how "significant others" are coping with losses/changes Other: Other: Other: Changes in belief system that can hinder coping Longing for forgiveness Concern for how "significant others" are coping with losses/changes Other: Other: Community Faith leader □ Volunteers □ Bereavement	Y = yes N = no blank = unknown Y	monies only if story based Meditation/relaxation Talking Humor Humor Otest over loss on mplicate grieving/coping by suffering and ndure with others or within self, such laming ion from God or significant indonment tem that can hinder coping	(date	Aligned care plan with client's values Built relationship of care and connectedre Provided faith affirmation Journeyed with client in grief process Encouraged verbalization of feelings Supported meaning-making Provided opportunity for life review Affirmed strengths Broadened psycho-spiritual tools for self- Examined/encouraged religious practice Explored issues related to forgiveness/he Provided cultural support Arranged sacred ritual Discussed sacred writings Provided requested religious material Pselprovided emotional/spiritual support Facilitated use of music and sacred song Other: ww-up by Spiritual Care = every few hoursely monthly rto: Social Work Music Therapy	-regulation ope alms gs □ daily					

Spiritual Care Notes: Rev. Jennifer Holtslander, Spiritual Care





Case Study: Betty Part 2

Betty experiences an escalation of anxiety. When you are able to have a conversation, Betty admits that she is afraid that she is dying.

As you explore her fears around death and dying, she confesses that she wasn't always a good person. She says that she is afraid that torment is in her future.

What is part of your plan to support Betty's spiritual needs?

Case Study: Betty Part 3

Over the last few weeks you notice that Betty's appetite and thirst are decreasing, breathing is more laboured, and interest in activity has fallen off. She is fatigued and has no more interest in getting out of bed.

In addition to your regular plan for physical comfort, how might you plan to support Betty's spiritual needs as she approaches her final weeks of life?

Resources

FICA

https://smhs.gwu.edu/spirituality-health/program/patient-research/monitoring-effectiveness-fica-tool

Dignity Therapy

https://www.dignityincare.ca/en/toolkit.html

Living My Culture

https://livingmyculture.ca/culture/ to help you develop some respectful questions.

Creatively assess who in your community or facility can help you connect residents and families to Spiritual Care supports.

Invite a Spiritual Care Provider to prepare resources for your team.

Invite a Spiritual Care Provider to be part of your team.



Questions & Discussion



Wrap Up

- Please fill out the feedback survey following the session! Link has been added into the chat
- A recording of this session and a copy of these slides will be emailed to registrants within the next week
- Please join us for the next Long- Term Care Community of Practice Session:
 - Title: Supporting New Team Members
 - Guest speaker: Roslyn Compton
 - Date/ Time: July 14th, 2022 from 12-1pm ET

Thank You



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