

# Integrating Spiritual Care Through Psycho-Spiritual Needs Assessments in a Palliative Approach



BY  
 Pallium Canada

**Host:** Holly Finn, Pallium Canada

**Presenters:**

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# 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.



# LEAP Core

- Interprofessional course that focuses on the essential competencies to provide a palliative care approach.
- Taught by local experts who are experienced palliative care clinicians and educators.
- Delivered online or in-person.
- Ideal for any health care professional (e.g., physician, nurse, pharmacist, social worker, etc.) who provides care for patients with life-threatening and progressive life-limiting illnesses.
- Accredited by CFPC and Royal College.



Learn more about the course and topics covered by visiting

[www.pallium.ca/course/leap-core](http://www.pallium.ca/course/leap-core)

# Introductions

## Host

**Holly Finn**, Senior Manager Program Delivery, Pallium Canada

## Presenters

**Adriana Rengifo, MA, RP, G.D., Bioethics**

Registered Psychotherapist (CRPO)

Certified Spiritual Care Practitioner (CASC)

Clinical Chaplain, Palliative and Complex  
Care Programs at Bruyère Health, Ottawa, ON

# Welcome and Reminders

- For comments and introductions, please use the Chat!
- For questions, please also use the chat, these questions will be addressed at the end of the session.
- This session is being recorded—this recording and slide deck will be emailed to registrants within the next week.
- Remember not to disclose any Personal Health Information (PHI) during the session.

# Conflict of Interest

## Pallium Canada

- Non-profit
- Partially funded through a contribution by Health Canada
- Generates funds to support operations and R&D from course registration fees and sales of the Pallium Pocketbook

## Host/Presenter

- Holly Finn: employed by Pallium Canada
- Adriana Rengifo: Nothing to disclose

# Session Learning Objectives

**Upon attending this webinar, participants will be able to:**

- Explain the role and contributions of spiritual care practitioners as part of the interprofessional team.
- Understand how psycho-spiritual needs assessments supports patients spiritual and existential struggles, and ethical and cultural beliefs in care.
- Identify the relevance of spirituality in care conversations for early integration of psycho-spiritual support in patient care.
- Appreciate evidence-based psycho-spiritual interventions to support meaning, purpose, suffering, grief and spiritual considerations into their own professional practice.



# Spiritual Health

## Supporting the Human Spirit

Spiritual Care Practitioners and Psychospiritual Therapists support individuals in health care settings and communities in creating, building and sustaining their sense of well-being in the face of changing circumstances.

- As members of the interprofessional health care team SCP provide interventions to address spiritual distress (such as, anxiety, anger, guilt, fear, unexplained pain, conflict with others); grief and bereavement; explore values and beliefs; accompany you in your search for meaning and purpose; help when cultural and ethical issues need to be considered; facilitate difficult conversations; provide spiritual health education; and connect you with a faith representative for religious services and rituals.

# Assessment and Care Plan

- SDAT: Spiritual Distress Assessment Tool: “Is a 5-item instrument developed to assess unmet spiritual needs in hospitalized elderly patients and to determine the presence of spiritual distress; has acceptable psychometrics properties and appears to be a valid and reliable instrument to assess spiritual distress in elderly hospitalized patients.”
- (SNAP) Spiritual Needs Assessment for Patients: The results provide preliminary evidence that the SNAP is a valid and reliable instrument for measuring spiritual needs in a diverse patient population.
- Meaning Centered Psychotherapy: Therapeutic intervention that has been developed to support the needs of patients treated with a palliative approach to care by also attending to the psychiatric, psychosocial, existential and spiritual domains at the end of life.

# References

- Monod, S., Martin, E., Spencer, B., Rochat, E., & Büla, C. (2012). Validation of the spiritual distress assessment tool in older hospitalized patients. *BMC geriatrics*, 12, 1-9.
- Sharma, R. K., Astrow, A. B., Texeira, K., & Sulmasy, D. P. (2012). The Spiritual Needs Assessment for Patients (SNAP): development and validation of a comprehensive instrument to assess unmet spiritual needs. *Journal of pain and symptom management*, 44(1), 44-51.
- Breitbart, W. S. (Ed.). (2016). *Meaning-centered psychotherapy in the cancer setting: Finding meaning and hope in the face of suffering*. Oxford University Press.
- Pargament, K. I., & Exline, J. J. (2021). *Working with spiritual struggles in psychotherapy: From research to practice*. Guilford Publications.
- Defining Spiritual Health: <https://www.youtube.com/watch?v=0gEpGQ4bUtc>

# Case based discussion

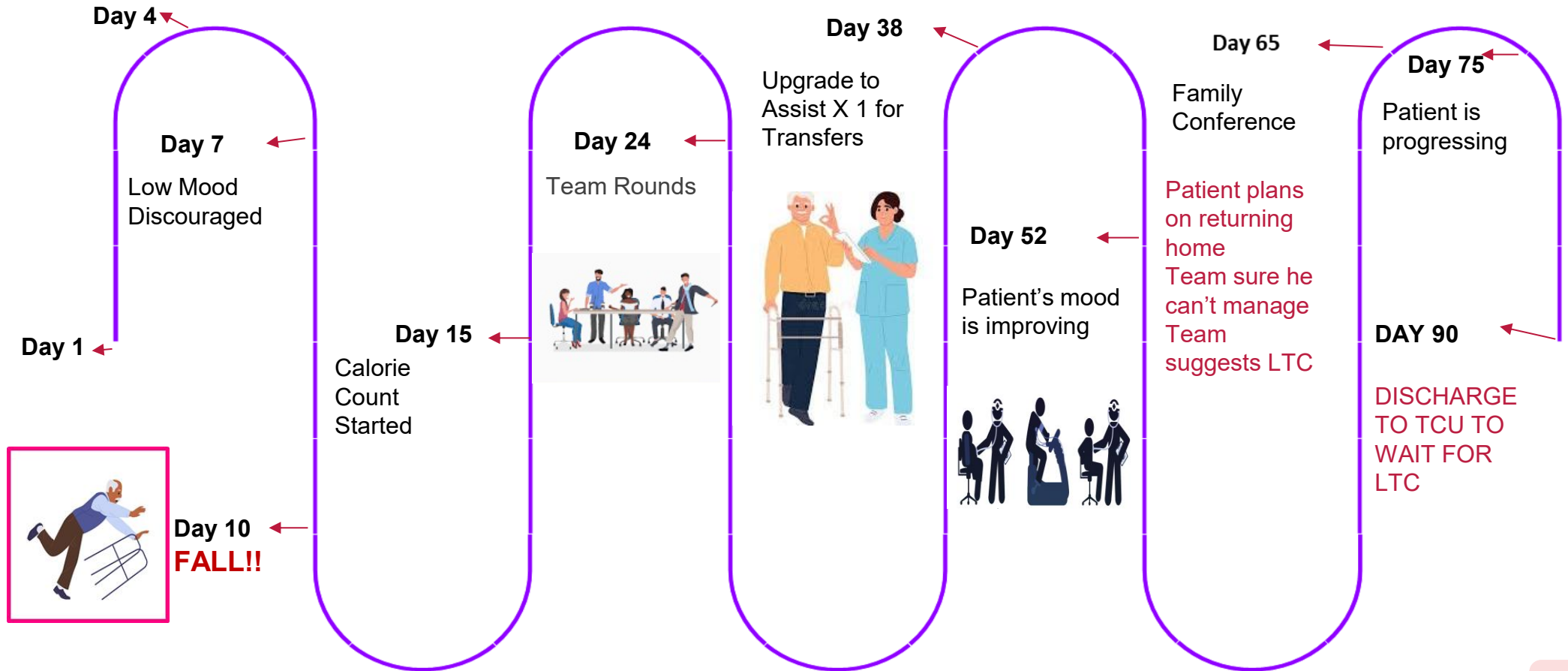
# Case study:

- ❖ **Mr. P, age 65 years, admitted to SVH Rehab program on March 3, 2025 following an acute care admission for acute hypoxia secondary to presume aspiration. As per ICU, had a PEJ tube inserted and a post-intervention delirium that resolved.**
- ❖ **Medical History:** alcoholic cirrhosis; cerebellar hemorrhage; permanent trach due to loss to a/w reflexes and swallowing dysfunction; had mechanical fall at home resulting in left ankle fracture.
- ❖ **Pre-Hospitalization History:**
  - ❖ Retired
  - ❖ Independent with eating
  - ❖ Eating soft textures food, thin fluids
  - ❖ Assist x1 with grooming, dressing, toileting and bathing
  - ❖ Continent
  - ❖ Independent with 4WW for transfers and walking around his home
- ❖ **Current Status:**
  - ❖ Assist x 1 for ambulation with 4WW and assist x 2 for transfers
  - ❖ Total care for ADLs
  - ❖ PEJ tube; SLP recommended non-oral nutrition to maintain hydration, plus enteral feeds.
  - ❖ Low mood/ responsive behaviors

# Rehabilitation Journey

AH Initial Assessments Completed

- Patient Goals**
1. Return to Home
  2. Walk
  3. Eat PO
  4. Toilet indep
  5. Use computer indep to socialize



Q & A



# Session Wrap Up

- Thank you for joining us!
- Please fill out the feedback survey following the session—a link has been added into the chat!



# Thank You



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