

SECTION V

SCHS

GENERAL POLICIES

AND

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Spiritual Needs of the Patient in the SCHS

Policy

Consistent with our Mission Statement of the Sisters of Charity of St. Augustine and the partnering institutions efforts to provide quality health care, each institution recognizes that each patient must receive comprehensive care. This concept embraces not only the physical needs but also the spiritual, emotional and social needs of the patient.

101.4 - Patient's Spiritual and Religious Needs

Every system employee is impelled to take into account of the spiritual and religious needs in the lives of patients if all resources are to be utilized for the welfare of the patient. Whether or not employees claim these as relevant for themselves, they are encouraged to respect and integrate these spiritual resources into the total care of the patient and utilize spirituality as a resource when it is meaningful to the patient. Likewise, employees use their own personal faith as a professional resource while not imposing their values and beliefs upon a patient. If these beliefs are irreconcilably in conflict, consultation should be sought.

The Departments of Pastoral Care have a holistic concept of health. We believe that in the modern medical center setting the staff should not only be concerned about the physical needs of patients, but also their spiritual needs. The physical and spiritual are interdependent dimensions in the patient's life and environment, in health and wholeness or in crises and illness.

The services of the Departments are broadly interdenominational, interfaith and supportive. We strive to assist persons in utilizing their resources to deal with illness and hospitalization. To that end, spirituality may or may not be a resource to the patient. We seek to utilize spirituality as a resource when it is meaningful to the patient. The chaplain functions as a pastoral care specialist and health care professional within the medical centers.

The objectives of the Departments are:

1. To support patients and families emotionally and spiritually during the stress of illness and hospitalization this often includes a crisis of meaning, i.e., an effort to discern meaning from the experience.
2. To augment, not replace the ministry of the patient's Priest, Pastor, Imam, or Rabbi.
3. To serve as a support and consultant to staff in personal and professional concerns.
4. To provide Clinical Pastoral Education.
5. To provide religious, spiritual leadership for the hospital communities.

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Departments of Pastoral Care – Responsibilities

The Departments of Pastoral Care are responsible for providing a spiritual ministry, where needed and desired, and are designed to be supportive to patients, their families and staff. Staff chaplains, chaplain residents and interns are available for this purpose during regular business hours and on-call at specific times. All religious practices within the hospitals are under the direction and supervision of the Director of Pastoral Care or his/her designee.

Community Clergy Visitation

The SCHS seeks to provide, support and where desirable, supplement a pastoral ministry by community clergy to persons from their congregations who become patients. Clergy may visit parishioners at all times. Pastoral care services offered to patients and families within systems healthcare institutions by community clergy are under the oversight and are thereby administratively accountable to the Directors of Pastoral Care. Indiscriminate, unsolicited and unauthorized visiting anywhere in the hospitals is prohibited. When designated, community clergy may visit persons of their denomination or faith group whose residence is outside the metropolitan Cleveland area.

Religious Literature and Services

Appropriate spiritual literature is made available within hospitals. Established policy includes the utilization of Bibles, New Testaments, or other spiritual literature routinely available through the Departments of Pastoral Care. Indiscriminate distribution of spiritual literature or tracts is prohibited.

Religious services are permitted within the hospital only with expressed prior consent of the Directors of Pastoral Care. Weekly and special holy day worship services are offered for patients and staff by the chaplaincy staff.

At St. Vincent Charity Hospital, there is a Chapel on the first floor near the administrative offices. At St. John West Shore, the Chapel is adjacent to the Pastoral Care offices on the first floor. These are available at all times for patients, families and employees.

Pastoral Care – Referrals

Referral for pastoral care can be made directly to the Departments of Pastoral Care by any patient, family or hospital employee. A physician's order or written consultation is not necessary.

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Patient Information

Upon a patient's admission to the hospitals, information regarding their religious affiliation and church membership is requested and recorded with other confidential data. If permission is granted, the patient's church, mosque or synagogue will be notified of their hospitalization in accordance with HIPPA regulations. The patient's chart is available only to the hospital staff chaplains and ACPE residents or interns (visiting clergy do not have access to these documents).

Anointing of the Sick

When a Roman Catholic patient receives the Sacrament of the Anointing of the Sick, this fact must be recorded in the patient's chart.

101.5 - Confidentiality

Confidentiality is critical to a trusting, caring relationship and must be maintained. Residents or interns maintain patient confidentiality in accordance to the ethical guidelines of the hospital, The ACPE Professional Ethics Commission Manual, and HIPPA regulations. Sharing of information within the Department or with other professionals involved in the care of the person must be done in the most sensitive and responsible manner and only when necessary to the ultimate benefit of the patient.

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Dress Code Policy

Chaplain residents or interns are expected to dress in a professional manner whenever they are providing ministry within the hospitals. The chaplain must also be aware of health safety in the clothing, perfume, jewelry, and cosmetics worn.

Attire for men: dress slacks, shirts, ties and blazers. When the weather is hot, blazers need not be worn. At such times, short sleeve shirts and ties are recommended. Sandals, blue jeans, gym shoes, and T-shirts are not acceptable.

Attire for women: stockings, dresses, dress slacks, skirts, blouses, and blazers. Blazers need not be worn on hot days. Sandals, blue jeans, gym shoes, and T-shirts are not acceptable.

News Media and Photography

Chaplain residents or interns, who are approached by the news media and television for interviews, whether for personal or professional reasons, should notify the Department of Public Affairs. All media inquiries about patient care policies, hospital management policies, breaking news stories or other affairs which concern the hospital's interests, legal liability, or the hospital's image must be referred to the Department of Public Affairs. Media requests for patient information, when a member of the Department of Public Affairs is not available, will be referred to the nursing supervisor. The Chaplain resident shall inform the ACPE Supervisor at the next available opportunity.

Generally, photographs, audio, and/or video recordings of patients, facility, or employees are not allowed. In the case of photographs, audio, and/or video records of patients, the consent of the patient, the Department of Public Affairs, and the resident or intern's supervisor must be obtained. In the case of photographs, audio, and/or video recordings of the facility or employees, the consent of the Department of Public Affairs and the resident or intern's supervisor must be obtained.

Photocopying Policy

A Photocopying machine is available at for the use of the chaplain residents or interns. Photocopying should be limited to hospital and educational functions. Please use two sided copying whenever possible to decrease the use of paper and thus help protect our environment.

If you are unfamiliar or need training on the photocopy equipment, please ask fellow residents or interns, supervisor, or secretary who are familiar with the equipment. Do not attempt to work beyond your ability as these machines break easily.

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Telephone Policy

Telephones are to be used according to the hospital policy. Urgent personal telephone calls are permitted which do not interfere with the chaplain resident's duties. Please keep these conversations to a minimum.

Telephone calls, which come to the main Pastoral Care number, will be answered and a message will be taken. The message will be placed in your mail slot. You are to check your mail slot and MOX at least once a day for messages. Please discourage numerous calls to the hospital.

Long distance telephone calls can be made through the hospital system. For the pastoral care of families and patients, the costs of the telephone calls are paid by the hospital. You may make emergency personal long distance telephone calls for which you will pay the hospital costs.

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Student Responsibilities

For all ACPE Residents or Interns:

1. Pastoral care of the dying and/or bereaved families takes precedence over all activity in the program, except educational seminars. The Chaplain resident or intern must notify the supervisor if an emergency prevents the Chaplain resident or intern from attending an educational appointment.
2. Chaplain residents or interns are expected to conduct themselves at all times in keeping with their role as ministers. As such they will conduct themselves in a manner that is responsible and professional, clarifying and negotiating “tacit contracts” between themselves and colleagues, staff, patients or family members, seeking clear and honest communication.
3. The Chaplain residents or interns also will negotiate among their peer group responsibility for designated presentations (e.g., verbatim, didactics).
4. Chaplain residents or interns will initiate relationships with the nurse managers, social workers and other disciplines represented on your assigned units. The purpose and scope of these relationships should be for service and learning. As part of the health care team, you are expected to move around freely and consult with others on your units.
5. Chaplain residents or interns will participate in in-service seminars, team meetings, ethics committee meetings and case consultations whenever possible in connection with the Resident or intern’s assigned units.
6. The confidences of patients, both oral and written, are to be highly respected and very closely guarded. Discussion of cases, write-ups, training methods, and tools is prohibited in the elevators, cafeteria, coffee shop, corridors, or any place where it might be overheard. Specific information about patients is not to be divulged except in permissible professional consultation (**101.5**)
7. Identifying name badges, which are furnished, are to be worn at all times by chaplain residents or interns.
8. Chaplain residents or interns have access to all services of the Pastoral Care and Hospital Libraries. The chaplain residents or interns may use books in the ACPE Supervisor’s personal libraries with the Supervisor’s permission. If one is lost, the Chaplain resident or intern will pay for it or replace it.
9. Parking is available at no charge to chaplain residents or interns in the surface lot designated for employee parking.

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10. Chaplain residents or interns are governed by the relevant hospital employee policies and procedures, and should be familiar with the Employee Handbook. The complete Departmental Hospital Policy and Procedure manual is available through the Director of Pastoral Care.
11. Chaplain residents or interns are required to become familiar with the Meditech patient care system. Your training in the use of the system will take place early in the first unit. Chaplain residents or interns shall maintain confidentiality of the computer system password and information that it contains. Chaplain residents or interns have daily access to the final census listing patients on all units on the Meditech system.
12. Chaplain residents or interns should document as per the guidelines of each hospital
 - a. All contact regarding an Advance Directive or Durable Power of Attorney for Health Care whether giving information or completing A.D.s.
 - b. Crisis situations where there is significant involvement by the chaplain. This could include Express Teams/Codes.
 - c. The death of a patient and ministry with the family.
 - d. Patients here for longer term stays due to terminal illness or medical complications.
 - e. Special requests by patients.
 - f. Referrals by doctors, nursing staff, social workers.
13. Chaplain residents or interns will be assigned a pager during the first week of the program. These pagers are to be activated at all times during regular working hours.
14. All Chaplain residents or interns visit pre-surgical patients on their assigned units daily. The schedule is delivered to the Pastoral Care Office.
15. Chaplain residents or interns are accorded the status of department members and will attend departmental meetings as scheduled.
16. If a Chaplain resident or intern will be absent as a result of sickness, a report must be made by telephone to the on site staff chaplain and supervisor in the morning. An illness longer than two days requires consultation with your supervisor.
17. Chaplain residents or interns must attend all seminars on time, and any anticipated lateness must be reported prior to the scheduled time.
18. Chaplain residents or interns must report all critical incidents which you observe or in which you are involved to the ACPE Supervisor or Director of Pastoral Care as soon as possible.
19. Chaplain residents or interns will decide how to follow-up cases which involve more than one member of the pastoral team, ascertaining that the patient will receive adequate follow-up.
20. During regular program hours, chaplain residents or interns may not use computers for verbatims and other work to be done at home.

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21. All injuries, body substance contamination, or other accidents must be report to the supervisor promptly. If medical examination is warranted as a result of a hospital accident (such as body substance contamination), the Chaplain resident or intern shall report to the Occupational Medicine Department (during weekday daytime hours) or the Emergency Room (nights and weekends) for immediate consultation and treatment.
22. Chaplain residents or interns must submit all written assignments by the end of each unit. Material submitted after the scheduled day of that unit's Final Evaluation will not be accepted.
23. No charges are made for chaplains' services at SCHS. Gifts or attempts to pay for the services should be courteously accepted. Please obtain the name and address of the person, so that a letter of thanks can be sent. Such funds are deposited in the Pastoral Care account of SCHS.
24. The Chaplain resident or intern will take initiative to identify the minister, priest or rabbi desired by the hospital patient or the family. Whenever possible, the chaplain will be responsible to notify this pastor and consult with him/her concerning the need of patient and family.
25. Each Chaplain resident or intern is expected to fulfill the program requirements and participate in events listed in the program schedule. All written material is to be submitted typed in a professional manner, unless negotiated with the supervisor.
26. It is an assumption of the educational and theological perspective of this training program, that the minister's own person-hood is the primary tool of your ministry. Therefore it is deemed helpful for chaplain residents or interns to be engaged in a clinical and therapeutic exploration of the self, as a part of your commitment to a clear and genuine personal availability for ministry. We recommend this for everyone in the program.
27. All Chaplain resident or intern placements are made by the ACPE Supervisor in collaboration with the Director of Pastoral Care and are based on a blend of the individual needs of residents or interns and the institution.
28. Chaplain residents or interns receive specific ministry assignments within their placement hospital from the Supervisor of Clinical Pastoral Education.
29. Chaplain residents or interns are to follow the policies and practices established for the Pastoral Care Department at their placement hospital. They are responsible to the Director of Pastoral Care in their placement hospital for their ministry in that facility.
30. Any reimbursements for education monies come through the Pastoral Care Department office.

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For Residents Only:

1. During the times in between units, Chaplain Residents maintain full pastoral care responsibilities for hospital units and on-call assignments.
2. Chaplain residents must submit to and pass a new employee health examination (including drug screening) as a condition of acceptance into the Clinical Pastoral Education program. Thereafter, chaplain residents or interns have access to the resources of the Occupational Medicine Department the same as employees.
3. Chaplain residents may chose to enroll in the health insurance plan of their choice as offered by the St. Vincent Charity Hospital.
4. Only five (5) consecutive days off, at one time, may be taken during the weeks between Clinical Pastoral Education units. No vacation will be scheduled during the time of an educational unit and following the last unit. A written request for vacation time must be made to the Clinical Pastoral Education Supervisor in consultation with the Director of Pastoral Care using the *Pastoral Care Department Request for Time Off Form* (example at end of this section or request one from the Pastoral Care Department).
5. Ordinarily, Chaplain Residents will be assigned to a placement hospital for one half the residency year. If there is a reason for change either on the part of the resident or intern, the ACPE Supervisor or the Director of Pastoral Care, a collaborative decision will be made for the good of the resident or intern and the hospitals served.
6. Each Chaplain resident is assigned a Staff Contact Person at his/her placement hospital. This relationship is intended to offer guidance and support for the resident or intern in ministry. The resident or intern may wish to share his/her own learning goals with the mentor.
7. Each Chaplain resident is required to complete a *Weekly Contact Report* (example at end of this section or request one from the Pastoral Care Department). This report is to be submitted to the Pastoral Care Office at St. Vincent Charity Hospital at the end of each week.
8. Ordinarily, Chaplain Residents are expected to be at their clinical assignment on Mondays (except after an on-call weekend) and Fridays, 8:00 a.m. – 4:30 p.m. and on Tuesdays, Wednesdays and Thursdays from 1:00 p.m. – 4:30 p.m. The Pastoral Care office at St. Vincent Charity Hospital is to be notified in writing of any planned changes in this schedule at least one week in advance. Any emergency change (sickness, etc.) is to be called in immediately to 216-363-3312.
9. Chaplain residents will be reimbursed for mileage from St. Vincent Charity Hospital to their clinical placement; Saint Luke’s Medical Center, 5 miles; St. John West Shore, 20 miles. Chaplain Residents will not be reimbursed for mileage on Mondays or Fridays, as they will be traveling to and from home. Mileage will be reimbursed at current rate used by SCHS. Payment will be issued at the end of each unit. In order to receive

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reimbursement, each Chaplain Resident must complete the *Monthly Mileage & Expense Record* (example at end of this section or request one from the Pastoral Care Department) and submit it to the Pastoral Care office. This report must be received by the end of the first week following expensed month, not at the end of the unit.

10. Any questions or concerns related to payroll, mileage reimbursement, ordering of supplies, secretarial assistance in preparing materials for ministry, are to be directed to the System Supervisor.

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MEDITECH at SCHS

First Time Log In.

1. All visits must be documented in Meditech no matter how short or uneventful the encounter may have been. Patient's caregivers, doctors or anyone who has a need to know, may review your documentation. The information documented should be how you assessed the patient, along with any information helpful for those who care for them. Each chaplain will be issued a user id and a password. The chaplain should change the password as soon as the user id is given. Passwords should not contain the chaplain's name, family names, social security numbers, or any information that would be easily identifiable to that chaplain. Passwords should be changed if a chaplain believes that anyone else has learned their password. Passwords are not to be shared for any reason. Someone will be available to help a new chaplain enter Meditech for the first time.
2. The steps to enter all necessary documentation for a patient are:
 - a. Create a Plan of Care for the patient
 - b. Document your Pastoral Care Assessment, a full updated assessment must be done every 7 days the patient is in the hospital.
 - c. Document if Advance Directives were needed
 1. Create an Education Interdisciplinary Record (if appropriate)
 2. Complete the Advanced Directive assessment
 - d. Write a Patient Note if the patient is under Palliative Care or if there is something significant that the chaplain feels other caregivers need to know about.