Improving Communication about Chaplain Role to Multi-Disciplinary Care Team

The Problem
- Chaplains at BIDMC noted misunderstanding of chaplain role by other healthcare professionals.
- When attending interdisciplinary rounds on floors, chaplains identified several patients who would benefit from a chaplain visit but were not referred; patients who were referred were not always appropriate referrals.
- There was little consistency in how chaplains charted patient visits on OMR, with each chaplain having his/her own method. We wondered if this contributed to poor understanding of the chaplains’ work and role.
- As professional chaplains we are bound by the standards of the Joint Commission which, “requires organizations to include a spiritual assessment as part of the overall assessment of a patient to determine how the patient’s spiritual outlook can affect his or her care, treatment and services” (PC .02.02.01).

Aim/Goal
- Our aim was to develop and utilize a uniform template as a method of recording in OMR, effective March 2015.
- Spiritual care notes would demonstrate the scope and content of a spiritual assessment.
- Other disciplines would better understand chaplain role and value of referral to chaplaincy.
- Patients’ and families’ spiritual needs would be better addressed and integrated into the care plan.

The Interventions
- Used staff meetings to anonymously review chaplain notes and to provide input re: communication that supports goals of spiritual assessment and illustrating spiritual care role.
- Came to consensus on elements of effective template based on best practices in the literature; developed and implemented template (see above).
- Solicited feedback from other disciplines regarding what is helpful information in a spiritual care note.

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The Results/Progress to Date
- All chaplains began utilizing the template in March 2015, for consistency of charting.
- Colleagues from other disciplines express better understanding of chaplain role: “The content of your note is so helpful. I have a better sense of what a spiritual assessment reveals, and this helps me in my clinical work.” - BIDMC social worker
- Increased requests for chaplaincy participation in Schwartz Rounds, Ethics Rounds, Renewal and Reflection Rounds, family meetings.

Lessons Learned/Next Steps
- Although utilization of the template may be more time intensive, chaplain notes have become more consistent and meaningful. This has improved communication between chaplains and other staff.
- There was a 28% increase in the number of patient visits by chaplains in 2015. We believe this charting initiative is one reason for the increase, as chaplains have improved their communication with other caregivers and each other.
- We should do more research to understand the correlation between increased visits and this and other improvement initiatives.
- The issue of effective chaplain communication within a hospital setting has been addressed in the literature (Lee, Curlin, Choi 2015); this intervention is a step toward improving chaplain communication within the medical setting.

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