

Regulatory Citation(s): 42 CFR 418.64(d); 418.100(c)
L-Tag(s): 598, 652

POLICY: Lifesong Hospice and Palliative Care provides counseling or arranges for counseling to meet the spiritual needs of patients/caregivers in a manner consistent with their beliefs and desires and in accordance with the patient’s plan of care.

PROCEDURE:

1. Lifesong Hospice and Palliative Care ensures there are an adequate number of qualified Spiritual Care Coordinators, called Spiritual Care Coordinators (SCC), available to meet the needs of patients and their families and offers patients/caregivers spiritual care from the hospice’s own Spiritual Care Coordinators or from clergy and others in the community.
2. The hospice Spiritual Care Coordinator makes reasonable efforts to arrange for visits of clergy and other members of religious organizations in the community for patients who request such visits.
3. A Spiritual Care Coordinator is assigned to each patient/family and participates as a member of the hospice IDG in the development and implementation of the patient’s plan of care.
4. The comprehensive assessment of the patient includes a spiritual assessment conducted by the Spiritual Care Coordinator to evaluate the patient’s/family’s spiritual needs and identify appropriate spiritual problems, interventions and goals for the patient’s plan of care.
5. The hospice Spiritual Care Coordinator makes reasonable efforts to visit every patient on admission to complete an initial needs assessment, and ongoing to provide spiritual support as identified in the hospice plan of care. All attempts and efforts made to visit the hospice patients are documented in the clinical record.
6. The Spiritual Care Coordinator provides services to the patient/ caregiver in accordance with the plan of care. Visit frequencies, specified in the plan of care, are determined based on the individualized, assessed needs of the patient/family.

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7. Interventions and services provided by the Spiritual Care Coordinator should include, but are not limited to:
 - a. assessing the pastoral care needs of patients/caregivers;
 - b. facilitating visits by local clergy, pastoral counselors, or others who can support the patient's/family's spiritual needs as desired by the patient/family;
 - c. providing counseling to address the spiritual needs of the patient/family in accordance with their acceptance of the service and in a manner consistent with their belief and desires;
 - d. administering requested sacraments or contacting local clergy to do so;
 - e. providing inspirational literature or music as requested;
 - f. praying with the patient/family as appropriate and if requested;
 - g. assisting with the planning or conducting of memorial or funeral services; and
 - h. serving as a spiritual resource to members of the IDG and members of the community at large as requested.

6. The patient/family's spiritual needs are reassessed every 15 days, in collaboration with the hospice nurse and social worker, and changes are reflected in the patient's updated plan of care.

7. The Spiritual Care Coordinator documents all care provided in the patient's clinical record in accordance with the hospice's documentation requirements.

8. If the patient/family refuses spiritual care services, no visits are required, and the refusal is documented in the patient's clinical record. The assigned Spiritual Care Coordinator continues to offer support to the IDG in its care of the patient and to monitor the patient's/family's evolving spiritual needs and the remaining IDT members continue to offer spiritual care services when appropriate.

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