

THE UTILIZATION AND EFFICIENCY OF PROFESSIONAL CHAPLAINCY

GAPS TO FILL



Many more inpatients desire conversations about religion / spirituality than have them.

Source: BMC Palliative Care, 2012

More than one-quarter of all adults, including those 75 and older, **have given little or no thought to their end-of-life wishes**



Source: "Dying in America" report, Institute of Medicine of the National Academies, 2014

In cancer patients, the presence of spiritual pain is associated with worse symptoms and worse global health.

Source: J of Pain and Symptom Management 2023

PATIENT SATISFACTION

80%

of patients with spiritual/religious needs said the chaplain met these needs very well.

Source: Journal of Palliative Medicine, 2009

A strong association exists between **SATISFACTION** with **spiritual care** and **satisfaction with total ICU experience**.

Source: Critical Care Medicine, 2007

EOL patients utilizing spiritual care have improved outcomes including undergoing fewer futile, aggressive measures, having more time after their last active treatment, and using hospice services more.

Source: The Oncologist 2023

INSTITUTIONAL BOTTOM-LINE

INADEQUATELY-SUPPORTED SPIRITUAL NEEDS LEAD TO

- MORE DEATHS IN ICU
- HIGHER END-OF-LIFE COSTS

Source: Journal of Pain and Symptom Management, 2011

CHAPLAINCY SERVICES ARE RELATED TO



SIGNIFICANTLY LOW ER RATES OF HOSPITAL DEATHS

HIGH ER RATES OF HOSPICE ENROLLMENT

Source: BMC Palliative Care, 2012

CHAPLAIN VISITS RESULT IN

- INCREASED SCORES ON PATIENT SATISFACTION SURVEYS (HCAHPS, Press Ganey)
- OVERALL PATIENT SATISFACTION
- PATIENT'S WILLINGNESS TO RECOMMEND HOSPITAL

Source: Journal of Health Care Chaplaincy, 2023



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