NACC COVID-19 Resources and Listening Session Highlights – 3/18-3/26

https://www.nacc.org/resources/coronavirus-resources/

NACC website https://www.nacc.org/resources/coronavirus-resources/ New postings daily, there are many new resources to be used in your ministry.


National Catholic Bioethics Center: https://www.ncbcenter.org/

Review your diocesan websites for local resources and support including on-line Masses, rosaries and prayers.

Resources:

- UMPC Pinnacle Health: https://www.pinnaclehealth.org/l/coronavirus-information
- Diocese of Orange County, CA https://www.rcbo.org/resource/pastoral-care-2/
- Diocese of Dallas, TX: https://www.cathdal.org/covid19-resources has English and Spanish Spiritual Communion
- Give Us This Day https://giveusthisday.org/
- Magnificat https://us.magnificat.net/ are offering their publications free online
- On-line Mass resource https://mass-online.org/daily-holy-mass-live-online/
- Taking Back the Crown https://anchor.fm/takingbackthecrown 30-day podcast Ignatian style retreat called (obvious reference to coronavirus) for spiritual self-care
- Diocese of Kansas City/St. Joseph: https://kcsj.catholic.org/ and Bishop Johnston (on our EAC)
- Poetry: https://allpoetry.com/Oceans
- Quotes: https://www.allgreatquotes.com/john_odonohue_quotes.shtml
- National Catholic Bioethics Center: https://www.ncbcenter.org/

For patients, COVID-19

- Only frontline staff is providing care for patients, using resources from the therapeutic services, and using iPads for communication with family members, facilitating FaceTime for patients and family members.
- Times may be limited to be able to be properly disinfected between uses.
- Some allow priests to come into anoint and they would follow all infection control procedures (Personal protective equipment PPE). Common use is a disposable container to put the oil in (not to use a common
oil stock) and to dispose of the cup and oil, gloves, etc. in the biohazard container.

- Challenge of donning the full PPE gear is that you cannot be heard through the N95 and face shield or your voice is distorted and not comforting at all. One can also look quite frightening.

- Non priest chaplains do offer the “prayers associated with the last rites” or commending the spirit to God from the pastoral care manual, cf.

- Challenge of donning the full PPE gear is that you cannot be heard through the N95 and face shield or your voice is distorted and not comforting at all. One can also look quite frightening.

- There is a pastoral need, when alone, to feel God’s mercy and forgiveness and calm fears for loved ones.

- Mostly phone visits with COVID would rather die than infect family. We are working on kits for mindfulness, medications, resources, mass online, other religious traditions.

- All chaplains have been trained in PPE. During the huddle, I offer the opportunity for all staff to meet privately to talk, get a blessing and offer prayer for any that want to linger for a minute or two.

- The (Decree from Apostolic Penitentiary) guidelines ([https://www.nacc.org/wp-content/uploads/2020/03/Decree-of-the-Apostolic-Penitentiary.pdf](https://www.nacc.org/wp-content/uploads/2020/03/Decree-of-the-Apostolic-Penitentiary.pdf)) we have are that the local bishops are to regulate general absolution.

- See Q&A for ways of explaining Plenary Indulgence

- The Catechism of the Catholic Church states that in making a Perfect Act of Contrition that both venial and mortal sins are forgiven. Remember Christ acts outside the Sacramental System. Just saying the name of Jesus gives a Plenary Indulgence.

- Remember the Pastoral Care of Sick Book has wonderful resources that chaplains can use for Prayers for the Commendation for the Dying; to adapt the Pastoral Care book for the dying to the situation and the setting to assure of God’s care. To deal with anxiety and fear factor when a clergy cannot be present.

For patients, non-COVID-19 but in restricted settings

- We are restricting visiting of family and community.

- I park outside of the facility and speak with staff about who needs spiritual care. We also do this for home visits, but we need to call first. We gown up as needed to do the spiritual assessment

- Evening prayer to be effective, and comforting; from the breviary

- Biggest issue right now is loneliness. Residents are quarantined to their rooms. We do have some spiritual/emotional programs on our house television. Live stream mass and spiritual communion, using "Alexa" over the PA to provide music, prayer service in the Chapel, televised to rooms.

- Patients are lonely, no visitors or volunteers. Stop and pray a prayer and blessing at each room. We will go into non-isolated rooms upon request or upon referral. When we do, we stand at the foot of the bed which is about 6” away.

- We are preparing to send daily tray reflections to our patients with a daily reflection and information about the current situation and how to contact a chaplain by phone and communion cards for our Catholic patients with information about how to watch mass from our chapel and Reflection moments to share with your phone

- Only responding to consults and we’re doing those non-emergent visits by phone, rounding for staff support, but only insofar as we can maintain social distancing. We’re still providing in-person presence for emergencies, primarily for staff support since our system is following stringent visitor restrictions.

- There was an odd intimacy by using the phone. Remember that this person has spoken with many on the phone. Need to learn new skills to help people reflect or remember. Its different cues, not touching, hand holding.

- We just had a new restriction, for someone not COVID, for comfort measures. We are not asking priest to come in unless someone is dying with management approval. My supervisor says not to go into caution
rooms. I pray at the door. We went from 1 to no visitors.

- We are not visiting but make phone calls. We are calling all parishioners to be in touch with them. May parishes use website for resources and support, streamed masses to be linked. Facebook, phone calls for connectivity. Our parish has people bring food/groceries to those who are in need. Bring things to the door, depending on the situation.

- Before the virus, we had a communal penance service, but there was no confession in LTC. Patients ask did they receive absolution if they didn’t hear the words. Given their closed environment and they don’t commit mortal sins, that an act of contrition is acceptable. Catechesis needs to be done to allow for understanding. This is delicate because of how people understand this.

- Older adults need to interact, some have hearing problems, so phone is not always the answer. Presence is necessary, good handwashing, its constant. I find our isolation hard in our community life. It’s doable but it’s not comfortable.

**All settings/family**

- We have a card to pass out that says “our chaplains are available via phone to offer emotional and spiritual support to you and your family during your stay. If you would like to speak to us between 9-5, please call this number.” We do have 24-hour chaplaincy support, so some of us are staying overnight. if we are needed to support the families

- Restricted from visiting patients except those who request a visit, or we deem need a visit, we can connect on the phone.

- I have heard of chaplains working remotely at home who are using only *67 (blocks your number from Caller ID) and their own home phone in the absence of more HIPAA compliant resources.

- For the distribution of all sacraments especially the Anointing of the Sick and Holy Communion, the **Universal Precautions** must be followed, gown, mask, gloves, don’t contaminate the oil stock or Communion pyx

- We are available for non-professional phone calls – you are not alone; we are here for you.

- I’m dealing with them by phone. Families and care takers are concerned about contracting the illness.

- I used the Holy Father’s invitation to pray the Our Father. Staff want to do this again. I meet with nurses for their individual needs. As we are opening new units, we need to bless them before their use.

- Finding that I get close to my patient, let’s picture that Jesus is holding our hands while we pray, it helps close the distance. (When 2 or more are gathered in my name)

  Let’s pray to St. (person’s name) it helps people connect in a special way

**For families who cannot visit with patient**

- There is an appreciation of video calls. Hospice outside. Patient died yesterday. We did phone visits. It was hard for members. I called by phone, offered prayers. It needs to be done by phone, spiritual direction and grief counseling. Wider group, I’m emailing texts and other sources for people.

- We’re limiting visits, so when family wants to say goodbye only one is allowed. It is a challenge not to create more ways to support those grieving..

**For staff**

- For morale, we are coming up with disposable care items, a message, treats in a plastic bag in a disposable container that can be left on the floor for staff. Waiting to hear from nursing leaders

- Helpful to relax and relieve anxiety is to invite someone to breathe in the rhythm of the ocean. Imagery
helpful. If religious, you can breathe in God’s love and have it fill your entire being, and on the exhale, rest in God’s comfort. This can help people relax.

- Residents, staff, and families to pray or hold a moment of silence -- collectively -- each day at 9 a.m. We have offered Christian and Interfaith prayers and are inviting anyone to share their own prayer which we can make available.

- We are debriefing with nurses on units concerned about their own risk and the risk of carrying the virus to other patients, staff or family. I’m reaching out to Chinese, Vietnamese, Spanish, Jewish, Muslim and Hindu cultural groups to be sure they know what we are doing.

- Worried for the homeless. They closed the shelters to limit the spread. The governor is taking over hotels and bringing in trailers, but they are not ready yet. The homeless with symptoms are admitted but there is nowhere to safely discharge them.

- I’ve been putting something out weekly to uplift the staff, prayer or reflection.

- We made a poster of Irish prayer/meditation widely posted. Today we distributed cards to front line staff to remember to breathe in the love. I’m grateful for staff support. (Lockdown poem)

- Some people are doing work to make sure those who need PPE are using and removing it properly.

- I do active meditation while walking, Aroma Therapy, confronting our own vulnerability

- Be sure we understand the safety issues. Once patients test positive or are being tested, Pastoral care is not allowed in the room.

- Clergy who are not hospital chaplains, we need to educate them, create relationships. i.e. communion, disposing of hosts, cleaning pyxes. Not all our colleagues are as well informed.

- I’ve spoken with isolated patients. Sadness, loneliness, existential sadness. As you walk, you are alone. It’s nice to hear the birds and see the flowers, but there is a sadness and sorrow right now. Thank you for naming sadness. It’s been very surreal being at home, talking to people when I can. It’s affecting me. I have to write to the staff. It feels like not being able to engage at the front line.

- There is anger about what is happening; it’s unjust. We’re only beginning to see this in our hospital and its only beginning. I’ll be doing calls from my office. We need to see the laments in scripture, so anger is justified and the need to express this in a broader way. It saddens us, and angers us.

- Nurses were frightened. They didn’t know how to put on their equipment. Tomorrow we will go to a huddle to support. I do blessings by John O’Donohue

- We are broadcasting prayers over the PA system and giving cards to the staff.

- What can be particular support for housekeeping and other staff? They are concerned. How do we continue to let them know they are important? I can appear when housekeeping meets, to offer support and availability, posting, sharing prayers and poems? Spiritual aids that can be posted and translated.

- Another boost for our employees: Food Service supervisors are providing items of staple foods for purchase by our employees—milk, soup, bread, eggs, butter & toilet paper. A GREAT help!

Other/Self-care

- Self-care: I do active meditation while walking, Aroma Therapy, confronting our own vulnerability

- For self-care, started a journal dedicated to this Covid-19 experience.

- “Remember, you are still part of a community.” Fr. James Martin, SJ

We are all connected, and that intentional consciousness is most important as well as how we communicate that connectedness by word and gesture and action. Families supporting each other.