

Refer to NACC website <https://www.nacc.org/resources/coronavirus-resources/> New things are being posted daily, with many new resources that can be used in your changing ministry.

Refer to the CHA website <https://www.chausa.org/> for resources. New things are being posted daily. CHA website. – front page is a link to Corona Virus resources and Spiritual Care resources and a series of short podcasts.

Refer to the CHA Guidelines for Sacramental Celebrations in a Health Care Setting: https://www.chausa.org/docs/default-source/pastoral-care/guidelines-for-sacramental-celebrations-in-health-care-setting_jan2021.pdf?sfvrsn=4

Chaplaincy Innovative lab <https://chaplaincyinnovation.org/>

Prayers from USCCB: <http://usccb.org/about/communications/usccb-president-reflection-and-prayer-during-coronavirus.cfm>; www.usccb.org

<https://www.nacc.org/resources/spirituality-and-prayer-resources/world-day-of-the-sick/>

REFLECTION:

Reading from Matthew (Matthew 8:23-27), we are being swamped by so much, we are perishing... May we learn from you...

Now is the time to share what is on our minds and hearts.

I work at Mercy Hosp south in South County St. Louis MO. I've worked for 18 years as chaplain, In the past year I stepped down from lead. I appreciate the reading selected. It echoes the feeling we have internationally and nationally as well as departmentally in our hospital. I have reflected on being in the boat as we continue to have changes.

I often shared this reading with my patients. It is good to ask for that kind of intervention.

I've been retired pre-Covid. We were planning to travel to Poland. COVID stopped that. We are now aware of the danger to Poland, we do correspond, they say they are anticipating WWIII. While we feel sorry for everyone. Our plans are changed.

I've been in touched; I hear stories. Their burdens are really heavy. I got an earful and a heartfelt. I agreed to connect, to meet. I hope I can hold them up in prayer and be with them when they are vulnerable.

I feel calmer just listening to you.

In Chicago area, new chaplain going through Certification. I'm in 3 different hospitals part-time. Would like to focus, I've only known COVID time. A young nurse was telling me her problem was that she builds walls that she is unable to get involved with the patient or she gets too attached. There is a need for her to separate. I wanted her to help her, she does not practice any faith. I went to Letting GO... my go to. How could I have cared for her? I do want to revisit her. Suggestions?

We talked about lack of control, but I'm not sure that's ok for an ICU nurse.

You may not be able to do more than listen to her, know you care.

Ministry of presence, as chaplains we cannot fix anything, just give unconditional acceptance. By listening you are helping her. Its ok to build her up. Its ok to be there for a reason and a season. Boundaries are important.

Acknowledging her awareness is step one, her wisdom about that. I could ask what makes you put up the wall, look for further insights. Appreciating and honoring her struggle, naming it and then affirming her.

I would second that you are not only present, but you are there and there is an affirmation of her self-awareness. The person often has the solution, so what is helpful is the art of drawing it out. Helping them find the solution in themselves.

Currently doing CPE Residency with Cleveland Clinic. I can appreciate that you are learning how to be in this. Recognizing that you are looking to “fixing it”. My learning process has caused me to stay aware of that.

I’m hearing about not trying to fix, and all that we need to do to be present and non-judgmental. A part of me wants be in a spot between ministry of presence and following the model that the minister is a diagnostician. While we are still in the pandemic, an extreme situation in the past 2 years. It’s become average for staff to exhibit extreme reactions. What helps me is giving self a gentle pat on the back, for being there from a spiritual point of view, this ongoing presence, the willingness to be engaged throughout.

I would add it may be that the nurse may be embarrassed to have opened up to you, you may not be able to reopen that conversation, but there can be other conversations.

Janet, we don’t always know how to minister people who are trying to minister, who are not trained for this. We have to realize that we are enough. I’m reminded of building resilience like building a pearl. It is important to let her know she is providing compassionate care. They are the world to their patients. We sometimes don’t know how to handle it. Sometimes the walls are her own limits. Being compassionate care gives better results.

Thank you for being in the right place at the right time. My daughters entered nursing during COVID. They appreciate the chaplain who is very calm who can help carry them. Faith and hope that everything is alright. To evoke what they are feeling helps them to release it.

At a state hospital as Catholic lead chaplain. I get to work with people long term. It allows me to see progress.

Its unusual even in BH facilities.

It is an amazing ministry to those suffering from issues. Being able to bring parallels of spiritual themes. It’s rewarding to do groups as well as individual participation.

Staff reaction is a mix. Many don’t know what to make of a Catholic chaplain. Many ask for magic, exorcisms. (Not practical) Many are unchurched, or from their upbringing. I’m here to help people flourish in this life. Once they get to know me there is respect, but often they don’t bother. There are often surprises. Sometimes I’m able to intervene.

Maybe show how spirituality has a connection to mental health. There are connections between spirituality, psychology and mental health.

The psychology of religion and coping: Theory, research, practice.

Kenneth Ira Pargament

<https://psycnet.apa.org/record/1997-08957-000>

<https://www.guilford.com/books/The-Psychology-of-Religion-and-Coping/Kenneth-Pargament/9781572306646>

Treatise on spiritual struggles, how to help clients who may also have spiritual struggles.

National Catholic Partnership for Disabilities (great mental health/pastoral resources) -
Conference in May: <https://ncpd.org/even/mental-health-ministry-conference>
Another wonderful resource, <https://catholicmhm.org/>

I do appreciate the discussion. You can be detached and compassionate at the same time. Knowing that there is a history of practicing that is helpful.

Concluding prayer -