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ministry & liturgy

the comprehensive resource
for integrated ministry

The sacred triduum of autumn

Embracing moments of silence

Protocol for hospital visitation

Saints alive and present in our midst



Added to ministry: hospital visitation

Choir members, youth ministers, lectors, extraordinary ministers of holy communion, and catechists get sick or incapacitated from time to time, and periodically their maladies require a stay in the hospital. While the pastor is expected to make a visit to them, other leaders of ministry such as pastoral associates, music ministers, and catechetical directors should show concern and support by visiting as well. Some say they do not like hospitals because it makes them feel uncomfortable. What they might mean is that they do not know what to say or how to act when visiting. For many, visiting the sick is awkward, and they do not want to make a situation worse with their own “foot in mouth disease.” Yet leaders are expected to visit their ministers and team members. I offer some suggestions to make visiting the sick a more positive experience for both the visitor and the person visited.

Visiting etiquette

A person is in a hospital because they are seriously ill or there is a serious medical concern, which means that medical care is the priority. Call ahead to ask if visiting is okay and when a good time is. The patient may not always know when a treatment or procedure is scheduled, so always be prepared to leave, if asked. Do not worry if this happens. Hospital staff are famous for ignoring visitors and going about doing their business, and if they need you to leave, they will tell you. If your visit is interrupted by hospital staff, that might be a good time to excuse yourself and leave. The best goodbye in this situation is, “I’ll be back to see you soon,” but only say that if you mean it. Hospital stays can be tedious, and the patient will then have an expectation and await your return.

Don’t practice medicine

Patients are in the hands of competent medical professionals, and they receive good care. Do not give medical advice. Once, during my own stay in a hospital, a person told me that I could have avoided being sick if I had just made a small change in my diet. I mentioned this to my doctor and she responded by telling me that I would have been hospitalized sooner and in worse condition had I followed my friend’s advice. What works for some may not work for others. You are not aware of all the medical conditions and concerns of the patient, and not everything on the internet is accurate. Don’t practice medicine, practice compassion. ►

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ou can always pray with patients for strength

Knock, announce, and wait

There is very little privacy in hospital rooms. When a hospital room door is closed, or if a screen is around a bed, knock and ask the person if you can come in. It allows the patient some dignity and control. No one likes to be caught in the act of sitting on a bedpan and taking care of business. Furthermore most patients are in double rooms, so before entering a room announce who you are and who you are there to see. If you do not get an answer, crack the door open but not enough to see inside. Just announce and wait. If still no response, you may open the door but be prepared for the worst. The person you are visiting may be asleep and exposing parts of the body that he or she would not want you to see. A better idea might be to ask a member of the hospital staff who is not engaged in other tasks to check on your friend or fellow minister.

Getting R&R

You may notice that hospital rooms are dark. People who are sick need to rest and sleep so that the body can heal itself using the medicines that have been given. It is fine for the patient to increase the lighting in the room, but leave that decision up to him. Bright lights can make some patients uncomfortable, since many medicines cause sensitivity to light.

Sleep is important, so do not overstay your visit. If the person looks tired, leave. Thirty minutes is about as much as most patients can tolerate. If they are better and recovering, they may welcome a longer visit, but be sensitive to people's condition and demeanor.

Privacy issues

Do not ask for information about a patient's condition, prognosis, or diagnosis. If people want you to know, they will tell you. Do not ask about test results or when they are going to be discharged. If they know and want you to know, they will share that information with you. A patient may not have informed her family of all the details of her condition, and she certainly would not want information to get to family members from another source. Furthermore, never inquire about other patients' information.

Mirror, mirror on the wall

Do not tell a patient how he is looking. If he wants to know, mirrors are available in the hospital.

On the one hand, no one wants to be told how terrible he looks. On the other, no one wants to be told how good he looks when he does not and knows it. This is especially true if he is feeling horrible and you say he looks great. This raises the question of how he normally looks. Commenting on appearance should be reserved for a time when the patient truly is looking better.

“Don't worry; be happy!”

Do not tell patients not to worry. They would not be in the hospital if their condition was not serious. True, Scripture tells us not to worry (see Mt 6:25–34 and Phil 4:6–7), but our saying it does not make it so. Accept the patient's concerns; listen to what she is saying — and to what is implied in what she is saying. I know of one woman who was hospitalized, and the best-case scenario was that she would be in the hospital for a month. She decided to make a list of all the things that could go wrong. She discovered that she was not as worried about her health as she was about her teenage daughter who was going through a difficult period. Once she shared her concerns, her daughter agreed to visit her mother in the hospital every day as a way of helping her heal. There may be things that you can do to address the patient's concerns and quiet her fears, but usually just listening to her worries can help lessen the anxiety.

The power of prayer

Be careful about your approach to prayer. Telling people to pray more or harder may sound helpful, but unless you know about their prayer life, you should be quiet. Offering to pray with them is another matter. Always ask patients if you may pray with them. Spontaneous prayer has the potential to make matters worse, especially if you do not know everything going on in the patient's illness or life, so it's best to pray traditional prayers like the Our Father or Hail Mary. Some prayers, however, can make the patient feel better. You could give thanks to God for your relationship or for Christ's coming and

to carry their crosses and wisdom for understanding.

the promise of salvation and eternal life. You can always pray with patients for strength to carry their crosses and wisdom for understanding. You can pray together that the True Physician guide the hands of all those who take care of them.

Never tell patients that their illness or disease must be a punishment from God. If you think this, read the Book of Job.

A guard on your lips

Be careful about offering words of hope that the patient will recover or get better. While we may feel we are helping because we are giving them support in their fight, not everyone will “beat” the illness — some will die. Not everyone will go home; some will go to a nursing home or to hospice care. As Christians we know that a bird does not fall from the tree without the Father’s knowledge (Mt 10:29). Whatever the outcome, we know that the person is in the loving hands of God.

Works of kindness

Patients appreciate offers of assistance. Say things like, “I am going shopping at such-and-such store. Can I pick something up for you?”

Hospital food and supplies are usually not what people buy for themselves. Patients do not want to inconvenience anyone to bring them their favorite brand of snack or toiletry, but if you tell them that you are going to the store anyway, they may not feel they are imposing. However, first check with the patient’s nurse to see if certain items are good or permissible for the patient. One man I know of asks everyone who visits him for Diet Pepsi. In their kindness, his visitors will bring him a 12- or 18-ounce bottle. But when he drinks more than six ounces of it, he becomes hyperactive and nasty. After consulting with the staff, his friends now bring the Diet Pepsi and give it to the staff, who in turn give the soda to him in a cup in the proper amount (and no seconds), and everyone is happy.

You might ask a patient, “Would you like me to take care of XYZ for you?” If the patient lives alone, you could offer to mow the lawn or pick up the mail. You can alleviate his or her worries by taking on one or more of these duties or making arrangements for them.

Adding that you’ll pay for chores to be done or handle some bill paying (if you are able) will offer even more relief. People staying in hospitals are not allowed to keep large sums of money with them; in many hospitals, all cash is locked away for safekeeping. But household finances are always a concern for those who are hospitalized.

Listen actively, and spread the good news

Be a good listener and do not prepare your response while a patient is talking. We all like to share our stories, but a good listener will listen and comment on the patient’s.

On the other hand, having no outside information leaves patients feeling out of the loop. You could share the latest news from the parish. They want to hear the local news, the local gossip, and the fun and silly things people in their circle of friends are doing. Share the same stories you would share if they were home.

Tell them what you miss about them. If you tell them you miss their voice in the choir, you are telling them they are important to you. If you miss having coffee together, perhaps you could bring in a cup of coffee and muffin from your local coffee shop. These simple gestures show how much they are a part of your life or your ministry.

ast thoughts: Act as normal as possible. Entrust the people you visit to your prayers and your concern. And know that they appreciate the fact that you visited them, even if they do not tell you. Your attention to the ill is the act the Lord said will help you enter the kingdom of God (Mt 25:36). **ML**

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