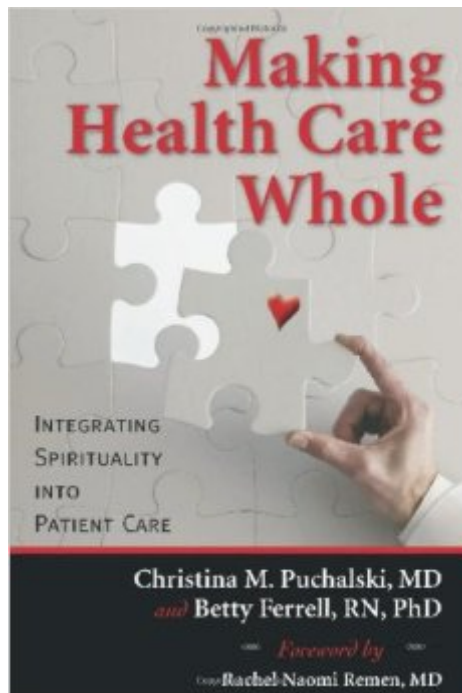


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# Making Health Care Whole: Integrating Spirituality Into Patient Care



## Synopsis

In the last fifteen years, the field of palliative care has experienced a surge in interest in spirituality as an important aspect of caring for seriously ill and dying patients. While spirituality has been generally recognized as an essential dimension of palliative care, uniformity of spiritual care practice has been lacking across health care settings due to factors like varying understandings and definitions of spirituality, lack of resources and practical tools, and limited professional education and training in spiritual care. In order to address these shortcomings, more than forty spiritual and palliative care experts gathered for a national conference to discuss guidelines for incorporating spirituality into palliative care. Their consensus findings form the basis of *Making Health Care Whole*. This important new resource provides much-needed definitions and charts a common language for addressing spiritual care across the disciplines of medicine, nursing, social work, chaplaincy, psychology, and other groups. It presents models of spiritual care that are broad and inclusive, and provides tools for screening, assessment, care planning, and interventions. This book also advocates a team approach to spiritual care, and specifies the roles of each professional on the team. *Making Health Care Whole* will benefit hospices and palliative care programs in hospitals, home care services, and long-term care services. It will also be a valuable addition to the curriculum at seminaries, schools of theology, and medical and nursing schools.

## Book Information

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## Customer Reviews

Healthcare has become so technologically driven that a person's spirituality is not always integrated into the treatment plan. Making Health Care Whole is an excellent resource for clinicians working with patients dealing with a serious illness and end of life decisions. As a healthcare provider with over 35 years experience predominately in the intensive care unit, I recommend this book as a useful tool. It provides practical aspects of incorporating spiritual issues through screening, obtaining histories and assessments, intervention, follow-up and quality improvement in a compassionate and patient-centered health care system model of care.

I have been a chaplain (hospice) and pastor for over 30 years. I have just finished my thesis on end of life communication. So I think I can say this book lacks in two (and more) areas. First, the idea that clinical workers determine if someone should have a spiritual assessment assumes that some people are spiritual and others are not. First big mistake. Every patient should be viewed as a spiritual being regardless if they themselves reject the label. Second big mistake, no research evidence based practices explored in the book. The recommendations at the end of the chapters seem to have been created out of thin air. Most of the structure of care is either flow chart like the figure on page 98 (structured like like a symptom checker on WebMD.) Or a series of steps. A better book is Ellershaw & Wilksinson (EDS.) Care for the Dying (2011). Typical misguide statements are found through out book. For example p. 165 it is assumed that illness disturbs the patient spiritual or transcendent nature. Research strongly has shown that illness generally strengthens the patient's religious or spiritual outlook. But the book presents the idea that illness results in a negative spiritual crisis. It certainly can, but surprisingly, through interviews and surveys the opposite generally has been found. Does this bit of information change the way the clinical worker approaches patient? It sure does.

Making Health Care Whole: Integrating Spirituality into Patient Care speaks of the importance of spirituality in the health care system and provides tools to integrating spiritual concerns into the health profession. Health professionals will find this comes from a national conference discussing guidelines for clinical practices: chapters are scholarly but specific add address issues ranging from patient spiritual screening at the point of entry into the health care system to implementation models, with case histories profiling common concerns.

this book is very useful , I love it.

Book is in good shape, minimal wear. No rips or tears noted. Received the book within 2 weeks.

Thank you

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