A Guide to Hospital Visitation by the Clergy

Prepared by
The Department of Pastoral Care
St. Vincent Hospital
Faith in God has always been a driving force in the history of Saint Vincent Hospital from its inception in the nineteenth century with the arrival of the Sisters of Providence in Worcester. The first centers for caring for the sick were begun by religious orders (ca. 378 AD) and for fifteen hundred years, faith and care for the sick were a religious and spiritual undertaking. So, the recent interest in the links between a patient’s faith and its practice is not novel. Yet, we also recognize the crucial role you have as area clergy or leaders of faith communities in Worcester or the cities and towns of Worcester County in the recovery of those who are hospitalized.

Most people who are sixty-five or older are deeply religious and turn to their faith for comfort, support and hope in trying times. Hospitalization often entails separation from a patient’s normal routine and sources of support, so that a visit from you during such a time reminds those who are under our care that recovery is possible and a return to their home is more likely. The material contained within this handbook seeks to make your ability to visit our patients who are members of your faith group easier and more effective, while safeguarding the essential medical and nursing practices that we provide to improve the health of those who are sick.

From the day that the Sisters opened the doors and transformed the Bartlett Farm into the House of Providence and cared for 104 patients their first year to the thousands of patients Saint Vincent Hospital cares for in the twenty-first century, the Catholic faith has grounded what we do; so, we have known from the beginning how important that transcendent element is in providing care to the sick. We need your help to do so and commit ourselves to doing all that we can to make your vital contribution to the health of your people more effective for them while they are with us at Saint Vincent Hospital.
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Obtaining Patient Information

To enhance proper contact between hospitalized patients and their respective faith leaders, the hospital maintains a patient's affiliation with an outside parish, church, or synagogue by means of a numerically-coded system. Most long-established religious groups within the confines of Worcester County were assigned a three-digit code decades ago and remain current. To monitor whether or not any of your people are hospitalized, you should do the following:

Information by Telephone

- **During normal business hours (Monday through Friday 7:00am – 6:30pm), dial 508-363-9233.** Then, after the prompt asks you “to enter the number of the extension you wish to dial,” enter ext. 22241. You will be transferred to the Information Desk. On evenings, weekends and holidays, patient information is available between 12nn-5pm only. During other times, you will have to dial the main telephone number of the hospital: 508-363-5000 and the operator will assist you.

- **Provide your three-digit Identification Code.** Reminder: The code-system was compiled at the dawn of the computer age and has not been updated.

- **Patient names and room numbers (not diagnosis) will be provided for hospitalized patients who have indicated membership in your particular faith group.** Patient information cannot be provided to third-parties on the basis of denominational identity only (e.g., all Roman Catholic patients).

  Reminder: The patient is the one who claims membership. We recommend that you examine the information provided to you by the hospital with personal knowledge and the membership records you maintain or consider hospital visitation either as an outreach to marginal members or as the spiritual and noble act of visiting the sick.

Confidentiality of Patient Information

As local clergy or faith leaders, there are many sources of information by which you learn about the health or illness of the people under your care. Indiscriminate use of that information is not responsible use. Please remember that if the information you receive from the hospital about a patient is your only source you must keep that information for your use only. Any public release of the fact of hospitalization (e.g., pulpit announcements, publishing the name along with others who are sick as a list in the bulletin, even placing the patient's name on a prayer line) is not a proper use of patient information without the authorization by the patient or their proxy and, in the case of a minor (viz. a pediatric patient), the child's legal guardian.

Health Insurance Portability & Accountability Act (HIPAA)

For more than a decade, the use and release of a patient's personal health information has been governed by HIPAA. Certain elements of that information are considered protected and this information is labeled as protected health information (PHI). One of those protected elements is religious affiliation. When a given patient invokes HIPAA privacy in regard to religious affiliation (or any other element), no such information can be released even to recognized faith leaders. While this occurs rarely in regard to religious affiliation, if a congregant has asked for privacy in that regard, the hospital cannot release the name to you, even if you already know they are at this hospital. In our experience, such a request for privacy is rare because the vast majority of patients do not object and, so, the fact that they are hospitalized should be readily available to you.

Improving the Quantity & Accuracy of Patient Information

Saint Vincent Hospital unequivocally supports your role in the care that we provide to the hospitalized; yet, we also have to comply with the privacy practices and restrictions placed upon release of that information to third-party (or outside) individuals. Here are some things you can do to help and a few things not to do:
A Few Do’s
- Do encourage members of your faith group to clearly state that they are members of your congregation and that they want that information listed in their medical record.
- Do appreciate that the names of patients who have invoked HIPAA privacy cannot be given to you.
- Do let us know if a patient you visited is a member of your local faith group and that name was not part of the computer-generated list of in-patients you received over the phone. The chaplains will make every effort to corroborate this with the patient and seek their authorization to add your faith group’s name and identification number to their medical record. The same is true if a patient is listed as belonging to your group and, in fact, they are not.

Don’ts
- Don’t publicize a patient’s hospitalization when the source of that information is exclusively obtained from information that the hospital has provided to you.

Inaccurate Information
Despite our best efforts, there will be times when you know that one of your congregants is hospitalized, yet their name and location in the hospital is not included on the list for your faith group. Adding that patient to your list requires their authorization. Please either notify the hospital’s Information Desk or call the department of pastoral care. The chaplains will verify with the patient whether or not they want to add that affiliation to their medical record. Conversely, you may have a patient who claims membership, though you know they are affiliated with another faith group. Follow the same procedure. Give the information to the clerk at the desk as you leave the hospital or call the Pastoral Care Department.

Getting to the Hospital & Getting into the Hospital
Saint Vincent Hospital has its main campus in downtown Worcester and we are located at 123 Summer Street. Almost all inpatient services (except Psychiatry, out-patient Radiation Oncology and Ambulatory Clinic) are located in that one multi-use building. This location is conveniently located off of Interstate 290. Use exit 16, whether coming from the east or the west. The Vernon Hill campus is located at 121 Providence Street and this location is also reached by I-290, but via exit 13.

Parking & Validation
You must use the adjacent parking garage when visiting the downtown location. Enter the garage by the Summer Street side and follow the signs that indicate patient and visitor parking. Take a parking ticket and be sure to bring the ticket with you. The parking garage has two sections: North and South. Use the elevators within the garage and take them to the third level. Exit the garage and cross over the access road. During normal business hours, stop by the Information Desk and tell the clerk you are a member of the clergy or a local faith leader (or your delegate) and your ticket will be validated. On weekends and holidays, only the north Greeter Station is staffed and, so, you can only have your ticket validated there. After hours parking validation: If an emergency requires you to come to the hospital after the Greeter Station is closed, in order to have your parking ticket validated, you must go to Admitting/Patient Registration (Suite 310), located on the south side of the hospital.

Late Night Access
After 9:00pm, the main doors to the hospital are locked for the safety of patients and staff. If you must come to see a member of your congregation after that or before 6:00am, you must enter the facility through the Emergency Department. You may be asked for identification and to sign in, as well as indicate the patient you are going to see. Visitor badges are to be worn if the security officer provides one for you. These measures are essential for hospital security to know who is authorized to be in the building and the area of the hospital they should be in.

Information Needed to Optimize Your Visit & for Safety
The sole purpose of your visit is in the care of your own people who are hospitalized. Visiting for purposes of proselytizing or soliciting new membership is never allowed and strictly forbidden. Room-to-room visitation is only done by members of the Department of Pastoral Care. You are free to distribute literature or religious articles to your members, but indiscriminate distribution of such information to the general patient population or in the waiting rooms or lobbies is not allowed.
Infection Control—Posted Notices

You must abide by posted notices concerning isolation or other infection control measures. The aim is to prevent the spread of microorganisms (bacteria, viruses, fungi) that can lead to infections within the healthcare setting; these measures serve to protect you and the patient population from the inadvertent spread of those invisible organisms. Prevention methods include frequent hand-washing and the use of personal protective equipment (PPE) when indicated. Before visiting patients, you should wash your hands or use the aerosol hand-sanitizer outside of all patient rooms and do so again before visiting subsequent patients.

Understanding the Posted Notices

There are four different types of precautions which are posted outside of the room of a patient who has exhibited certain symptoms. Standard Precautions are in place for all patients who enter the facility.

Standard Precautions

These basic infection control techniques apply to all staff, patients, and visitors, regardless of the suspected or confirmed status of the patient. Hand washing is necessary before and after every visit with a patient. At times, due to anticipated exposure to blood, saliva or bodily fluids, personal protective equipment (PPE) may also be required. PPE can be mask, gown, gloves, face shield, or bonnet. These tools protect you and prevent you from spreading one patient’s infection to the next person with whom you come into contact.

Isolation Precautions

In addition to standard precautions, those patients who are under Isolation Precautions require either a private room or must share a room with another patient with the same microorganism. All hospital personnel—including clergy or faith leaders—must understand and abide by the following category, color-coded isolation signage: Lime green, red, pink, and orange signs. You must not exempt yourself from complying with these measures.

Understanding the Signage

A Lime Green Sign indicates contact precautions. If you are visiting a member of your faith group who has such a sign outside their room, you must do the following:

- Wash your hands before entering the room and upon leaving the room using the Quik Care aerosol can (a antimicrobial agent) immediately outside every room.
- Gloves and gown must be worn when entering, due to contact with the patient, environmental surfaces or items in the patient’s room
- Remove gloves and gown before leaving the patient’s room

A Red Sign indicates seasonal influenza or flu. A special respirator mask is required or N-95 mask that is meant to protect you and healthcare workers against airborne illnesses (viz. Tuberculosis, chicken pox, the flu).

A Pink Sign indicates a no Foam Room: When posted, **DO NOT USE** the antimicrobial foam located outside the patient’s room. Instead, you must wash your hands with ordinary soap and water. This is for patients who are on contact precautions for C.Diff. (or Clostridium Difficile) only.

An Orange Sign indicates the use of a standard surgical mask, if you are going to be within three feet of a patient, though it is prudent to wear a mask in all such situations. Whether through the sclera (white part of the eye) or the mucous membranes of the nose, the patient is suspected to have certain infections, whether by coughing, sneezing or even talking, generates droplets that can be inhaled by visitors.

Other frequently used signs are: NPO (patient is not to receive anything by mouth), fluid restrictions (liquid intake monitored) so do not provide patients with water or even ice chips, as well as Fall Precautions which means the patient must not be allowed to get out of bed on their own or even with your help.
Saint Vincent Hospital as a Catholic Hospital

Today’s state-of-the-art Saint Vincent Hospital has always been and remains a Catholic healthcare facility, which entails a unique relationship between the hospital and the Roman Catholic Bishop of Worcester. Catholic healthcare is a specific form of generalized healthcare and, so, the hospital exists for both clinical and spiritual reasons. Thus, it continues a mission that began with the Sisters of Providence in 1893 and, in truth, long before that, with the life and example of Jesus Christ. The hospital espouses to embody such a noble heritage and to serve as an extension of the Church’s spiritual mission to be a vehicle of the compassionate love of God in today’s world. Fundamental to that mission is the belief that to promote health and to relieve suffering, Saint Vincent Hospital must care for the body, mind, and soul of those who seek medical help. Fundamental to that vision is the profoundly visible (i.e., sacramental) nature of God’s work and, broadly speaking, it is the meeting place of two realities—the human and divine. Then, through that divinely-created connection, the merely human is transformed. This is true in everything the hospital does and it must be supremely true in the work of the Department of Pastoral Care who bears the responsibility for the spiritual care of the hospital’s patients, visitors and staff. For any Catholic institution to be true to its religious identity and mission, anyone who comes into contact with everyone who works here also comes into contact with the saving power of God.

Sacramental Sharing

While routine visitation, spiritual counseling and various forms of pastoral care are available to all patients and their families regardless of religious affiliation or lack thereof, sacramental sharing when provided by the hospital’s Catholic chaplains, among the various Christian faith groups, is subject to the rules and regulations of the Roman Catholic Church. In general, there is a significant distinction made between Christian denominations, differentiating between Orthodox and the Christian churches of the East and other Christian denominations whose origins are in the West. Moreover, in regard to such sacramental sharing (or an exchange of spiritual goods), the Catholic position also distinguishes between routine sharing (or open communion) which is never allowed and exceptional circumstances (e.g., danger of death). The Roman Catholic Bishop of Worcester, after consultation with the competent authorities of other Christian groups, can develop agreed-upon guidelines governing intercommunion or sacramental sharing in life-threatening situations.

Eastern Christian Churches

While the Catholic Church does not object to the sacramental sharing between priests and/or members of the Orthodox Churches, the Assyrian Church of the East, and, most recently, the Polish National Catholic Church—as well as similarly situated churches—members of those churches must also respect the internal discipline of their respective religious authorities which usually do not approve of sacramental sharing with Catholics.

Other Christian Denominations and Life-Threatening Situations

While routine sacramental sharing is not allowed, in the case of “danger of death” or “other grave necessity,” and following proper consultation between Catholic officials and other competent religious authorities of affected Christians, Catholic priests may administer three sacraments to members of other Christian denominations within these four parameters: (1) The dying patient is unable to approach a minister of his or her own religious denomination; (2) the patient asks the priest to receive a particular sacrament on their own; (3) the individual manifests...
life, or as continuing education and refreshment while engaged in full time commissioned ministry.

The CPE program, because of its interfaith/ecumenical nature, provides an additional resource to the Pastoral Care outreach at St. Vincent Hospital. Area clergy are encouraged to contact the Pastoral Care office or the ACPE supervisor with requests for visits to parishioners outside the Roman Catholic sacramental ministry provided routinely by the Department. CPE students are also encouraged to develop relationships with patient’s local parish clergy, as authorized by the patients and their families.

For further information, referrals or questions, please refer to the hospital website: Stvincenthospital.com, under the menu, Hospital Services: Additional Services: CPE, or by contacting Rev. Peggy Kieras, e-mail peggy.kieras@stvincenthospital.com or by telephone at 508-363-7012.

Information About & Interaction with the Chaplains

All of the offices of the Department of Pastoral Care (Suite 101) are situated within Saint Vincent Hospital on the ground floor (or Level One) of the South side of Worcester Medical Center. Department staff include the Director, staff Chaplains, the Supervisor of Clinical Pastoral Education (CPE), and Chaplain-interns.

Office and Visitation Hours

Daily from 7:00am—4:30pm, one or more of the chaplains is available. Routine visitation takes place during the day and a priest-chaplain is always available, day or night. If you know of someone who requires spiritual or pastoral care or you want the chaplains to follow up on a visit you made, please call the department and either leave a message or speak to a chaplain directly. After regular hours or if the situation is crucial and time is a factor, call the main hospital telephone number and ask the operator to “page the priest on duty.”

Important Phone Numbers

Department Number: ............508-363-6246
Hospital Main Number: ...........508-363-5000
Patient Information: .. 508-363-9233 x 22291
Clinical Pastoral Education:....508-363-7012