

Data collection for the narrative visit note and four documentation examples

INITIAL VISIT ASSESSMENT- HOSPICE CHAPLAIN

Patient's name _____	Assessment Date _____
Patient identified by; <input type="checkbox"/> Family/Caregivers <input type="checkbox"/> Facility Staff <input type="checkbox"/> Room number <input type="checkbox"/> Name	
Hospice Diagnosis _____	Age _____
Patient's faith tradition _____	

Note: There have been many cases of mistaken identity- where hospice staff visited the wrong patient- especially with patients in a skilled nursing facility. That is why it is important to make sure that you visit the right patient.

Pain Assessment

Intensity: None = 0 1 2 3 4 5 6 7 8 9 10 = most intense

Frequency: ☐ Occasional ☐ Frequently ☐ Constantly

Acceptable level of pain by patient: ____/10

If pain is high/ above the acceptable level-, notify the patient's nurse and document it.

Patient's Mental Status and functioning ability: <input type="checkbox"/> Alert and oriented <input type="checkbox"/> Confused/disoriented <input type="checkbox"/> Unresponsive <input type="checkbox"/> Nonverbal <input type="checkbox"/> Forgetful
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Note: Documenting the patient's mental status during every visit is important because it helps to track decline.

Alteration in Coping

(How is the patient and family/caregiver coping in relation to the hospice diagnosis?)

Signs of psychosocial/emotional distress ☐ **Pt** ☐ Yes ☐ No ☐ **Caregiver** ☐ Yes ☐ No

Signs of spiritual distress ☐ **Pt** ☐ Yes ☐ No ☐ **Caregiver** ☐ Yes ☐ No

Signs of family discord/distress ☐ Yes ☐ No ☐

Caregiver expressing anticipatory grief: ☐ Yes ☐ No Comment _____

Note: Facing death is very challenging because it brings to the surface spiritual concerns. The chaplain can identify these concerns and explore them with the patient. When writing the visit narrative note, describe the patient's concerns and if possible, illustrate using quotes from the patient.

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Patient's primary spiritual concerns

- ☐ End of life issues ☐ Existential despair ☐ Faith ☐ Anger ☐ Trust
- ☐ Loss of independence ☐ Depression ☐ Death anxiety ☐ Guilt ☐ Reconciliation
- ☐ Loneliness/ social isolation ☐ Letting go ☐ Feeling abandoned by God
- ☐ Seeking to sustain their sense of relationship with God ☐ Suicidal ideation
- ☐ Feeling abandoned by family ☐ Seeking meaning ☐ Afterlife ☐ Other _____

Some questions you can ask patients during assessment

- Do you feel overwhelmed? How is your faith sustaining you?
- Do you have anyone supporting you? What are your biggest fears, worries or concerns?
- Is there any unfinished business? What are your hopes or dreams?
- What frustrates you the most? What keeps you going?
- Has being sick affected your relationship with God?

Note: In addition to grieving the impending loss of a family member due to terminal illness. When a member of the family is terminally ill, it is a strenuous time for the family as they struggle to cope with the impending death until it becomes reality. When writing the visit narrative note, describe their concerns and if possible illustrate using quotes from them.

Family's concerns

- ☐ Anticipatory grief ☐ Depression ☐ Suicidal ideation ☐ End of life issues
- ☐ Existential despair ☐ Faith ☐ Financial ☐ Caregiver stress
- ☐ Feeling abandoned by God ☐ Anxiety ☐ Reconciliation ☐ Other _____

Some questions for Identifying At-Risk Family Caregivers are;

- Do you feel overwhelmed as a caregiver? ☐ Yes ☐ No
- Do you feel isolated? ☐ Yes ☐ No
- Do you have other family helping you? ☐ Yes ☐ No
- Do you feel prepared for your loved-one's death? ☐ Yes ☐ No
- Have you felt intensely sad or anxious recently? ☐ Yes ☐ No

**TERMINOLOGY YOU CAN USE IN FRAMING YOUR NARRATIVE
NOTE/DOCUMENTATION**

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Chaplain's intervention

- | | |
|---|--|
| <input type="checkbox"/> Chaplain provided supportive presence. | <input type="checkbox"/> Chaplain validated fears and concerns |
| <input type="checkbox"/> Chaplain conducted ritual. | <input type="checkbox"/> Chaplain prayed for... |
| <input type="checkbox"/> Chaplain provided spiritual reflection. | <input type="checkbox"/> Chaplain provided pastoral dialogue. |
| <input type="checkbox"/> Chaplain educated about. | <input type="checkbox"/> Chaplain read scriptures for... |
| <input type="checkbox"/> Chaplain validated the patient's or family's feeling regarding... | |
| <input type="checkbox"/> Chaplain provided emotional support to help reduce anxiety | |
| <input type="checkbox"/> Chaplain engaged patient in conversation to help promote self-expression | |
| <input type="checkbox"/> Chaplain projected positive images of the afterlife | |

When you are writing the narrative note; Document the intentional ministry: Describe the purpose of the interventions. That involves what the chaplain did or will do.

Purpose of Chaplain's intervention

- | | |
|---|---|
| <input type="checkbox"/> To allow the patient to reflect on Life story | |
| <input type="checkbox"/> To affirm personhood, self-worth, and dignity | |
| <input type="checkbox"/> To decrease the patient's sense of loneliness and social isolation | |
| <input type="checkbox"/> To sustain or affirm faith | <input type="checkbox"/> To create awareness of |
| <input type="checkbox"/> To increase sense of peace | <input type="checkbox"/> To transform hope |
| <input type="checkbox"/> To explore faith realities | <input type="checkbox"/> To create meaning |
| <input type="checkbox"/> For discovery of the sacred in daily experiences | |

Document the outcome of your visit and the plan for the next visit.

Outcome of the Chaplain's intervention

- | | |
|--|---|
| <input type="checkbox"/> Patient/family expressed assurance | <input type="checkbox"/> Patient/family was very appreciative |
| <input type="checkbox"/> Patient/family seemed less anxious | <input type="checkbox"/> Patient/family reports increased inner peace |
| <input type="checkbox"/> Patient/family's feelings were validated | <input type="checkbox"/> Patient developed greater sense of peace |
| <input type="checkbox"/> Patient/family requested further dialogue | |

**THE NEXT STEP AFTER THIS DATA IS FRAMING THE NARRATIVE NOTE TO
MAKE SENSE TO THE MEDICAL TEAM AND HOSPICE PAYERS**