

WHO WE ARE?

FICA SPIRITUAL ASSESSMENT TOOL

FICA Is an Acronym That Can Be Used To Remember What Is Asked In A Spiritual History. It Includes:

- F:** Faith or Beliefs
- I:** Importance or influence
- C:** Community
- A:** Address

Specific Questions You Can Use To Discuss These Issues Are:

F: What is your faith or belief?

- Do you consider yourself spiritual or religious?
- What things do you believe in that give meaning to your life?

I: Is it important in your life?

- What influence does it have on how you take care of yourself?
- How have your beliefs influenced your behavior during this illness?
- What role do your beliefs play in regaining your health?

C: Are you part of a spiritual or religious community?

- Is this of support to you and how?
- Is there a person or group of people you really love or who are really important to you?

A: How would you like me, your healthcare provider, to address these issues in your healthcare?

General Recommendations When Taking A Spiritual History Include:

1. Consider spirituality as a potentially important component of every patient's physical well being and mental health.
2. Address spirituality at each complete physical examination and continue addressing it at follow-up visits if appropriate. In patient care, spirituality is an ongoing issue.
3. Respect a patient's privacy regarding spiritual beliefs; don't impose your beliefs on others.
4. Make referrals to chaplains, spiritual directors, or community resources as appropriate.
5. Be aware that your own spiritual beliefs will help you personally and will overflow in your encounters with those for whom you care to make the doctor-patient encounter a more humanistic one.

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Spirituality Role Playing

HCP Script

The patient has terminal cancer. They are at home and you're at the patient's house in your professional role. Your "job" in this scenario is to say all the wrong things:

1. *You'll be okay.*
2. *Stop your whining. Things could be worse. You could have died in your twenties.*
3. *You haven't figured that out yet?*
4. *I thought you were religious. How can you have any doubts about the future?*
5. *If I were you, I would.....*
6. *I don't know why you're worried about your kids. They have their own lives to live.*

You: Hi Mr/Ms. Jones. How are you doing today?

Patient: I'm feeling a little down today.

You: Oh. Why is that?

Patient: Look, I know I'm dying. Normally, I cope with it pretty well, but today, I'm feeling more afraid of dying. I don't understand why this is happening to me.

You: You'll be okay. After all, you're not dead yet, right?

Patient: Well, no, but I'm worried about a lot of things. I'm worried about my kids. I'm afraid of death. What's it like to die? Will I suffer?

You: Well, it's not realistic to think anyone can go through life and not have some suffering

Patient responds and the two of you improvise.

Patient Script

You are at home. Your HCP is here. You have the following concerns:

You're afraid of dying

You're worried about your kids

You're not sure what to do about your property

You don't want to be in pain and you don't want to suffer

HCP: Hi Mr/Ms. Jones. How are you doing today?

You: I'm feeling a little down today.

HCP: Oh. Why is that?

You: Look, I know I'm dying. Normally, I cope with it pretty well, but today, I'm feeling more afraid of dying. I don't understand why this is happening to me.

HCP: You'll be okay. After all, you're not dead yet, right?

You: Well, no, but I'm worried about a lot of things. I'm worried about my kids. I'm afraid of death. What's it like to die? Will I suffer?

HCP: Well, it's not realistic to think anyone can go through life and not have some suffering

You respond and the two of you improvise

Good Communication Scenario

Now let's do this again, but with good communication techniques. This time, they say things like:

1. *This sounds like it is really hard for you*
2. *What do you fear the most?*
3. *How can I help you?*
4. *Do you want to talk about it?*
5. *Have you shared your concerns with your pastor? Would it be helpful to speak to him?*
6. *Using Good Communication Techniques*

HCP: Hi Mr/Ms. Jones. How are you doing today?

You: I'm feeling a little down today.

HCP: Oh. Why is that?

You: Look, I know I'm dying. Normally, I cope with it pretty well, but today, I'm feeling more afraid of dying. I don't understand why this is happening to me.

HCP: You say that normally you cope with this pretty well. Has something happened that's making it more difficult for you to cope with it today?

You: I'm worried about a lot of things. I'm worried about my kids. I'm afraid of death. What's it like to die? Will I suffer? I find I'm having doubts about my faith. Is there really a heaven?

HCP respond then the two of you improvise

FAITH Spiritual Assessment

F: Faith/Spiritual Beliefs

- a. Do you have any particular faith, religion or spiritual beliefs?
- b. What gives your life meaning?
- c. What helps you cope in times of stress or illness?

A: Application

- a. In what ways do you apply your faith in your daily life?
- b. Do you belong to a particular church or community?
- c. Is prayer or meditation important to you?

I: Influence/Importance of faith in life, in this illness, and on health care decisions

- a. How do your faith and spiritual beliefs influence your life? Are they important to you?
- b. How do your faith and spiritual beliefs influence you in this illness? Have they altered your attitude or behavior?
- c. Has this illness influenced your faith?
- d. Do your beliefs influence or affect your health care decisions that would be helpful for me to know about?

T: Talk/Terminal Events Planning

- a. Do have anyone you can trust to talk to about spiritual or religious issues?
- b. Do have any specific requests if you were to become terminally ill (e.g., terminal care options, living will, EOL requests).

H: Help

- a. Is there any way I or another member of the health care team can help you?
- b. Do you require assistance or help with prayer?
- c. Would you like to speak to a chaplain?
- d. Would you like to discuss spiritual issues or your beliefs with your doctor?

Neely, D., & Minford, E. (2009). FAITH: Spiritual history-taking made easy. *The Clinical Teacher*, 6, 181-185.

Box 1. Assessing the Spiritual Issues Raised by Serious Illness, Especially at the End of Life

First, establish an empathic connection with the patient (or the patient's family). Often, nothing more will be required to engage the patient in significant spiritual sharing. Only then, consider moving to more specific questions.

Opening

"It must be very hard for you to find yourself (your loved one) so sick. How are you holding up?"

Questions of Meaning

Patient/family questions

- "What is the meaning of my illness?"
- "What is the meaning of my suffering?"
- "What is the meaning of my death?"
- "Will any meaning persist beyond my death?"

Clinician questions

- "Have you thought about what all this means?"
- "Would there be anything for which you might hope even if you (your loved one) are not cured?"
- "Do you attach any spiritual significance to the word 'hope'?"

Questions of Value

Patient/family questions

- "How does my value relate to my appearance?"
- "... my productivity?"
- "... my independence?"
- "Is there anything about me that is valuable when these are threatened?"
- "Is there anything valuable about me that will persist beyond death?"

Clinician questions

- "Are you able to hold onto a sense of your own dignity and purpose?"
- "Do you feel that people in the hospital/your family/your friends/your congregation really care about you (your loved one) as a person?"
- "Are there any spiritual or religious resources upon which you can draw to help see you through this?"

Questions of Relationship

Patient/family questions

- "Am I estranged from any family or friends?"
- "Who have I wronged? Who has wronged me?"
- "Am I loved? By whom?"
- "Does love endure beyond the grave?"

Clinician questions

- "How are things with your family and friends?"
- "Is there anyone with whom you need to 'make up'?"
- "Is there anyone to whom you need to say 'I love you' or 'I'm sorry'?"
- "If you're a religious person, how are things between you and God?"

Closing Comments

"I can't do everything—that's why we work as a team. I think we've covered some very important ground here, but there's so much more to talk about. If it's okay with you I'm going to send Rev S to see you later today. Also, I'd like to tell her a little about what you've just shared with me, so she can be better prepared. Would that be okay?"

Based on Sulmasy.^{19(pp97-212)}

Sulmasy, 2006

Table 2. HOPE Questions for Spiritual Assessment

<i>Category</i>	<i>Sample questions</i>
H: sources of hope	What are your sources of hope, strength, comfort, and peace? What do you hold on to during difficult times?
O: organized religion	Are you part of a religious or spiritual community? Does it help you? How?
P: personal spirituality and practices	Do you have personal spiritual beliefs? What aspects of your spirituality or spiritual practices do you find most helpful?
E: effects on medical care and end-of-life issues	Does your current situation affect your ability to do the things that usually help you spiritually? As a doctor, is there anything that I can do to help you access the resources that usually help you? Are there any specific practices or restrictions I should know about in providing your medical care? If the patient is dying: How do your beliefs affect the kind of medical care you would like me to provide over the next few days/weeks/months?

Adapted with permission from Anandarajah G, Hight E. Spirituality and medical practice: using the HOPE questions as a practical tool for spiritual assessment. Am Fam Physician. 2001;63(1):87.