I. PURPOSE: Montana State Hospital (MSH) seeks to provide holistic care of each patient’s body, mind and spirit from the time of admission through discharge. Through the hospital’s pastoral services (chaplains, volunteers), the hospital seeks to provide each patient an opportunity to receive spiritual and religious support in accordance with their preferences.

II. POLICY:

A. Patients have a right to visitation with spiritual and religious counselors and the right to religious worship. In recognition of the rights and preferences of patients, the hospital provides pastoral services through hospital chaplains and authorized volunteers. Patients may seek or be offered pastoral services from hospital chaplains or other authorized volunteers. Hospital chaplains may be asked by patients to contact other church leaders, tribal elders and/or religious persons from the larger community.

B. Spiritual beliefs and values may impact treatment and will be evaluated as part of the treatment team’s assessment process. Important religious and spiritual information will be included in the social assessment at the time of admission. The patient’s social worker will convey the patient’s expressed religious and spiritual background and preferences to the treatment team for use in the treatment planning process.

C. Patient participation in pastoral counseling services is voluntary and will be coordinated through the treatment team. When pastoral counseling is considered an important aspect of the patient’s treatment, it may be documented on the treatment plan and in the clinical record.

D. Pastoral services at MSH will be provided in a manner that reflects that spiritual beliefs are to be expressed in a way that is respectful of all persons. At no time should religious or spiritual expression detract from or interfere with others’ treatment or safety.

E. Pastoral services may be provided by hospital employees or persons who have a contract to provide services at the hospital.

F. The Hospital Chapel, dedicated on October 5, 2011, was built entirely with “private funding” and was intended to be equally available to all religious groups provided the
groups respect the sacred space while not disrespecting or disrupting another group using the same worship space. For example, the Chapel could be utilized for Native American drumming and smudging ceremonies. Services in the Chapel should be led by a clergyman, religious leader or someone recognized by their home community and who leads worship on a regular basis. MSH patients will not be asked or allowed to lead a worship service in the Chapel.

G. The Hospital will attempt to recognize and accommodate federally recognized religious groups and practices. The Hospital may restrict certain religious and spiritual groups or practices if they represent a threat to the safety of staff or other patients.

III. DEFINITIONS: None

IV. RESPONSIBILITIES: The hospital chaplains are responsible for providing identified services in accordance with this policy.

V. PROCEDURE:

A. MSH pastoral services are provided by appropriately trained chaplains, professional clergy, or authorized volunteers. The Director of Rehabilitation Services will coordinate and supervise these service providers.

B. The hospital chaplains will:

1. Clearly explain their role and responsibilities to patients
2. Clearly explain what is privileged communication and what will be shared with the treatment team
3. Visit each treatment unit regularly in order to demonstrate accessibility to patients
4. Consult with treatment teams in the development of treatment plans that account for the patient’s spiritual and religious preferences
5. Conduct or facilitate regular scheduled worship services,

6. Be available for:
   a) pastoral counseling with patients, families, and employees
   b) emergency pastoral calls,
   c) consultation with treatment teams and hospital administration,
   d) serving on hospital committees.

7. Act as liaisons to tribal elders, religious organizations, and religious leaders in the community.
C. All pastoral services provided to patients and families will respect the patient’s right to confidentiality. Hospital chaplains may have access to patient medical records in order to better understand and serve the patient. Chaplains may enter information of clinical significance into the patient’s record.

D. Hospital chaplains will participate in hospital orientation, pre-service training, and appropriate continuing education.

E. Volunteers who are authorized to provide religious or spiritual counseling or services will be pre-approved for the service and attend hospital orientation. Volunteer services will be coordinated by hospital chaplains or the Rehabilitation Program Manager.

F. Direct care staff and other treatment team members will inform patients about scheduled worship services and will escort patients who require assistance or supervision in order to attend. Those who are unable to attend scheduled services may request to be visited by chaplains.

VI. REFERENCES: None

VII. COLLABORATED WITH: Medical Director; Rehabilitation Department Manager

VIII. REVISIONS: #TX-09, Pastoral Services dated November 19, 2015; #TX-09, Pastoral Services dated October 8, 2009; #TX-02, Pastoral Services dated September 11, 2006; #TX-02, Pastoral Services dated March 31, 2003; #TX-09, Pastoral Services dated February 14, 2000; H.O.P.P. #13.03R.103077, Pastoral Services dated May 20, 1996.

IX. DISTRIBUTION: All hospital policy manuals.

X. ANNUAL REVIEW AND AUTHORIZATION: This policy is subject to annual review and authorization for use by either the Administrator or the Medical Director with written documentation of the review per ARM § 37-106-330.

XI. FOLLOW-UP RESPONSIBILITY: Director of Clinical Services

XII. ATTACHMENTS: Chapel Guidelines

___________________________________________/___/___  _____________________________________________/___/___
John Glueckert                         Date          Thomas Gray, MD                         Date
Hospital Administrator                Medical Director
MONTANA STATE HOSPITAL
Chapel Guidelines

PURPOSE: To establish guidelines for the utilization of the chapel in offering spiritual and religious activities to meet the cultural diversity of the patients at Montana State Hospital.

POLICY: It is the policy of MSH that the Chapel will be a space that supports and benefits the patients through inclusion of interfaith offerings. The chapel will be seen as a space that patients may voluntarily seek prayer, meditation, contemplation and inclusion in spiritual and religious activities of their choice.

DEFINITIONS:
A. Chaplain – A contracted staff member that is responsible for offering religious and spiritual counseling as well as religious services to meet the diverse needs of the patients. The chaplain ministers to all patients spiritual needs regardless of the patient’s religious affiliation.
B. Interfaith – involving people of different religions.
C. Religion – the belief in and worship of a God or a group of gods. An organized system of beliefs, ceremonies, and rules used to worship a God or a group of gods.
D. Spiritual Practice – the regular or full time performance of actions and activities of individuals or groups undertaken for the purpose of inducing spiritual experiences and cultivating spiritual development. Activities will be a recognized practice of a religious or spiritual tradition.

RESPONSIBILITIES:
A. Chaplains – Responsible for providing interfaith counseling and services that meet the religious and spiritual needs of the patients and family members at the Montana State Hospital. Ensuring that all offerings are scheduled and posted for patients and staff to easily review. Act as a liaison to off-campus religious leaders of all faiths to visit the hospital to provide opportunities for religious services or spiritual expression for patients. Examples include: inviting a Rabbi periodically to allow Jewish patients an opportunity for access to their preferred religious expression; inviting an American Indian Elder who is recognized and accepted by patients as someone who can lead a meaningful native spiritual expression for patients.
B. Rehabilitation Department Manager – Responsible to review activities and events that are to be implemented in the chapel. Ensure that activities meet chapel guidelines.
C. MSH Staff – Assist patients in accessing the chapel through activities that are offered as well as to assist in referring patients to chaplains who request specific religious and spiritual preferences in their treatment services.

PROCEDURE:
A. Chapel hours will be scheduled through the Rehabilitation Department. Religious and spiritual offerings will be posted on a schedule that may be easily accessed by patients and hospital staff.
B. Patients and their family are welcome to visit the chapel.
C. Patient’s involvement in ceremony, religious/spiritual activities and special events within the chapel is voluntary. Patient attendance in religious activities will not be a mandatory part of treatment services. Attendance will not impact a patient’s ability to increase their independence and/or treatment level.
D. Requests for activities and special events will be reviewed by the Rehabilitation Department Manager to ensure they meet chapel guidelines.
E. Chapel activities and special events will have a primary focus of religious and/or spiritual practice/tradition.
F. Facilitators of religious and spiritual practice held in the chapel are responsible to return the chapel layout/seating to its original placement upon completion.
G. The chapel will remain unadorned to allow all faiths to feel welcome in a communal sacred space.