



Sacred stories

FIFTEENTH EDITION

† CATHOLIC HEALTH
INITIATIVES®

A spirit of innovation, a legacy of care.



S a c r e d
s t o r i e s

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Foreword

In the course of our daily work, we don't always recognize the mystery of circumstance as it happens. When tending to the details of our work — from bedside care to business planning, from typing blood to stacking linens — we're concentrating on a goal and not taking the time to think about why a certain person or experience comes across our path.

Often, it's only afterward — while sitting in the quiet of the living room, walking a pet, falling into a dream that includes images of the day — that we recall seemingly random interactions that, perhaps, were not random at all. The open door that beckoned, the conversation you overheard at lunch, the patient who approached with a question: was it circumstance that put you there, or was there a purpose?

Many stories in this edition provide wonderful glimpses into the mystery of circumstance. It seems that members of the Catholic Health Initiatives family quite often find themselves in the right place and at the right time to learn, share or help. Sometimes, they reflect and become more aware of the quiet, steady presence of our creator in our midst, permeating the ordinary of our everyday. Sometimes, they share their awareness in the form of sacred stories. We are grateful.

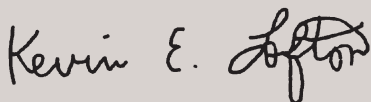
“It seems that members of the Catholic Health Initiatives family quite often find themselves in the right place and at the right time to learn, share or help.”

Introduction

Thank you for opening this 15th collection of Catholic Health Initiatives' *Sacred Stories*. These stories come straight from the hearts of their authors: employees and other members of the CHI family who experience special moments of lived spirituality in the course of their daily work.

It's a time of rapid change in health care, and we are asking our employees to accept and adapt to much that is new. We're proud that our employees are ready to accomplish the tasks at hand and that, in doing so, they never seem to lose sight of the larger spiritual dimension of the care we provide.

This ability to accept change while staying open to the power of our Creator is not only a significant asset to CHI: it's an essential foundation for *Sacred Stories*. To capture these sacred stories, the authors needed to be open to experiences that bring the unique spirituality of our workplace into focus. By sharing their stories, they help all of us to be aware of and thankful for the presence of our God in our midst. Please enjoy these wonderful stories, and feel free to share them with others.



KEVIN E. LOFTON, FACHE
President and Chief Executive Officer



THOMAS R. KOPFENSTEINER, STD
Senior Vice President, Mission

TO TRULY SEE

Suggested Sacred Text

But blessed are your eyes because they see and blessed are your ears because they hear. I assure you, many a prophet and many a saint longed to see what you see but did not see it, to hear what you hear but did not hear it.

Matthew 13:16

Sacred Story

While working the night shift at St. Vincent Infirmary, a patient of mine forever changed my view on life.

This patient was blind, so I made frequent stops in her room. Early one morning, I asked if she would like me to order her breakfast. Although I was swamped with the upcoming shift change and charts, I took the time to read the menu to her, tell her which items I recommended and call dietary to place her order.

Anxious to go and finish the rest of my work, I asked if there was anything else she needed before I left. She asked if the sun was rising yet. I walked to her window and slightly opened a blind, responding "Yes, ma'am, it is." She asked if I would open the blinds for her. I was a little bewildered, but I opened the blinds to the new morning.

As I did so, I wondered what this new day would hold. What promises, heartaches and losses would each of us endure? As I pondered my silent inquiries, my patient sighed deeply and said she had not seen a sunrise in decades. She told me the heart-wrenching story of how she lost her eyesight as a young child, and how she would love to see a sunrise just one more time.

I looked at the clock, and back to silent tears now streaking my patient's aged face. I walked to her bedside, held her hand for a moment and said "Can I paint it for you?"

She smiled and said, "Well, honey, I still won't be able to see it!"

“Yes, ma'am, you will, because God is the painter,” I said.

I let go of her hand and walked back to the window. I described the sunrise in such poetic terms that I astounded myself. I described the shades of the shadows that tried to hide from the golden rays of sun. I blended the hues of blue, purple, pink, orange, yellow and gray in the sky. I highlighted the greenery as it was touched by the sunlight, and described the wisps of cloud with their silver linings.

I turned back to my patient, who was still crying, but smiling. She thanked me for taking the time to describe something so many of us take for granted. She said that a heavy burden of grief had been lifted, and it was a gift to see again, if only for a moment, through my words. I grasped her outreached hand, and she said it was her turn to paint me a picture.

“Most people worry about tomorrow. They don't stop to see the beauty God has put in front of them, or the promises of beauty within that prove God's love. If

“I described the sunrise
in such poetic terms
that I astounded
myself.”

God takes care of the birds, don't you think God will take care of you? So I ask you, who is it that is truly blind?"

Shocked, I answered honestly. "Me," I said.

My patient said, "I depend on God every day to take care of me. Today, God sent a young girl to describe a sunrise to me. If you open your eyes, you will see that God will take care of you, too." Through my tears, I thanked her and hugged her.

On the way home, I pondered her words of wisdom. I realized that a healing had taken place for both of us, and that through us, God had met both of our needs. I was being robbed by worry, fear and doubt, when, in fact, each day was a blessing.

Since that day, I look to the morning with expectation and hope, which has changed my attitude and even "infects" the people around me. I've learned to count my blessings. Often, when the shadows fall just right and the hues in the sky blend perfectly as they did on that life-changing morning, I think of my patient and thank God for sending her across my path.

KAYLIN HOUSE-MURPHY

St. Vincent Health System

Little Rock, Arkansas

Questions for Reflection

Describe a time when you were able to be the eyes and ears for another person. What did that feel like?

Has anyone ever been your eyes and ears? What was that experience like for you?

FAITHFUL, LOVING CARE

Suggested Sacred Text

The gospel of life is to be celebrated above all in daily living, which should be filled with self-giving love for others. Over and above such outstanding moments, there is an everyday heroism, made up of gestures of sharing, big or small, which build up an authentic culture of life. A particularly praiseworthy example of such gestures is the donation of organs, with a view to offering a chance of health and even life itself to the sick who sometimes have no other hope.

Pope John Paul II

Sacred Story

At St. Luke's Hospital at The Vintage, our job is to provide "Faithful, Loving Care" to all patients. In February, we received a 22-year-old male patient who was resuscitated after an overdose. This was a young man entering the prime of his life; a life to be valued.

This patient's family was heartbroken when it was determined that he was brain dead. They made the courageous choice of allowing him to be an organ donor, ensuring that his loss of life would improve the quality of life for others.

When the organ procurement team arrived, they were well into a 16-hour day, with this being their fourth organ harvest of the day. They went about their well-organized processes with great professionalism. As they prepared to wheel the young man to the surgery suite, a nurse asked if it would be okay to say a prayer for the donor and his family. The prayer was said, and the patient's organs were harvested.

The organ procurement team had a staff meeting early the next morning. Usually, these meetings were brief events in which information was shared quickly. But, that morning was different. The team members who had been at our hospital the night before told their colleagues about the prayer said for the donor and his family. They asked their colleagues if they should all incorporate a moment of silence and prayer before each organ harvest. As a result, this spiritual time-out became part of the harvest procedure: a moment to honor the

donor, the family and the importance of their gift.

This wonderful change came from our small facility. It's just one example of what St. Luke's "Faithful, Loving Care" looks like in practice. They are not events that can be scripted. They are the natural result of building a culture of faithful, loving care.

I've spent the last 30 years taking care of people, in a multitude of different settings. I'm proud to be working with a team that believes in taking care not only of patients, but of people; a team that reverences the whole person and those important to that person. We all have a part in that.

PHILIP BINKLEY

*St. Luke's Hospital at The Vintage
Houston, Texas*

Question for Reflection

We often forget the interconnectedness of life: all the people, places, events and histories that have brought us to where we are today. What experiences or people or places have left a lasting impression on your life?

“A nurse asked if it would be okay to say a prayer for the donor and his family.”

CARING FOR EACH OTHER

Suggested Sacred Text

Let the children come to me...

Matthew 19:14

Sacred Story

A couple of years ago, we faced significant challenges here at Memorial. We decided to hold a Day of Prayer for all the needs and intentions of the hospital. Throughout the day, the spiritual care staff took turns spending an hour in the chapel in prayer, and all employees were invited to join for prayer as time allowed.

While I was taking my turn in the chapel, a young mother and her two small children came in. The mother said to her children, “We must say a prayer for this hospital and the people who work here.”

The little boy asked, “Why do we need to pray for the hospital?”

“There have been some hard choices and changes the hospital has had to make,” the mother said.

The little girl asked, “Mommy, is Grandpa going to be okay?”

“Yes, the nurses are taking good care of him,” the mother said. “He is going to be fine.”

The little boy asked, “What about the people who work here?”

“We need to pray for them because of the changes and challenges in their jobs,” the mother said. “So, let’s say a prayer for the hospital and the people who work here.”

They knelt down and prayed softly together.

Then, the little boy asked, “Mommy, did we help the people?” Before the mother could answer, the little girl asked again, “Mommy, are you SURE Grandpa’s going to be okay?”

“We must say a prayer for this hospital and the people who work here.”

When we are busy taking care of the patients who are entrusted to us, we may not realize that those patients, their families and their friends care for us, too. It was so beautiful to witness a young mother teaching her children to care for others and pray for them even in the midst of their own concerns.

O God, we are grateful for all the friends you have given us — even those we do not know — who pray for us and care for us even as we care for them.

CONNIE ROTTERS BLAKE, RN
*Memorial Health Care System
Chattanooga, Tennessee*

Questions for Reflection

In these times of changes and challenges, how will we make sure that Grandpa (and every other person in our care) will be "okay?"

*Have you ever taken the time to think about unknown friends and be grateful for them?
Say a little prayer for them now.*

*How often are you the "invisible" friend praying for loved ones, people you care about and strangers?
What is that experience like for you?*

A LITTLE REMINDER

Suggested Sacred Text

Devote yourselves to prayer, being watchful and thankful.

Colossians 4:2

Sacred Story

Sometimes in life, you encounter people who change your thinking with just one question. These people may also remind us that the pace of our work in health care sometimes should be slowed to allow us to focus our hearts and minds.

I recently had such an experience with a resident in our long-term care facility. Gladys was admitted for a short stay as she recovered from an illness, with a plan to return to her home soon. As a former employee, she wanted to complete her recovery at LakeWood, where she had been able to care for so many others.

I was acquainted with Gladys and felt honored that she would choose LakeWood for her care. One day, soon after her admission, Gladys asked me, “What happened to the morning prayer? I have not heard it since I’ve been here. I loved the opportunity to listen to the prayer while I worked here. It made me feel great each day, and helped me focus on my work.” I answered truthfully that I did not know. I told her that I would look into what had happened to the daily, facility-wide reflection and prayer.

I asked our mission leader if she knew what had happened. She explained that due to some telephone issues that came up while moving from our old facility to our new facility, she had not been able to use the overhead paging system to broadcast the morning prayer. The paging system issue had been resolved, but the morning prayer had not been reinstated. Our mission leader took it upon herself to restart the tradition of a daily reflection and prayer. Now, we have a

moment to pause each day to center ourselves, slow our thoughts in the presence of our creator, and fully bring our spirituality into our work.

Sometimes, we come across little reminders that help us focus on our mission. Even as we implement new care delivery techniques and technologies, we need to do so in alignment with our mission. Thank you, Gladys, for the reminder.

JASON BREUER
*LakeWood Health Center
Baudette, Minnesota*

Questions for Reflection

What prompts you to pause and give thanks and praise to God in the midst of your busy days?

What are the reminders that keep you focused on CHI's mission and core values as you go about your work?

“What happened to the morning prayer? I have not heard it since I’ve been here.”

REACHING SHARON

Suggested Sacred Text

Blessed be the God...who encourages us in our every affliction, so that we may be able to encourage those who are in any affliction with the encouragement with which we ourselves are encouraged by God.

2 Corinthians 1

Sacred Story

As health coordinator for our Population Health Program, I went to the fourth floor of St. Vincent Infirmary one Friday afternoon to conduct interviews with some patients. The first patient, Sharon, was alone in her room when I arrived. I introduced myself and began to tell her about the program and my role in her recovery for the next few months. She nodded a bit and answered some questions, but she had a very flat affect, with no smile and no gleam in her eyes.

Sharon's husband entered the room. I introduced myself to him and began again to explain the Population Health Management Program and my purpose. As I talked with Sharon's husband, I noticed that she continued to withdraw.

As we continued to talk, Sharon's husband told me how stubborn his wife was and said that she would not listen to him. I explained to Sharon that her husband was her health "coach," and asked her to tell me that she would allow him to coach her at home. She barely looked at me. I took her hand, held it, and asked her if she was depressed. She nodded her head just slightly.

Then, a well of information opened up. Sharon's husband explained that they had lost their son and granddaughter in a very violent and tragic way nearly two years before. Since then, Sharon had not been taking care of herself and had been hospitalized several times, not wanting to go on with life.

I asked if they had received any counseling, and the answer was no. I asked if Sharon was on anti-depressant medication, and again the answer was no. I knew I needed to do something for them.

“I told them that grief is a journey, and we need help along the journey.”

I told them my story. I lost a daughter in a car accident 16 years ago, and I thought that I could deal with it just because I'm a nurse. I told them that grief is a journey, and we need help along the journey: the worst thing I did after my daughter died was not go for counseling. I advised Sharon's husband to talk with her primary care doctor to determine the best treatment for her. Then, something told me to ask them to pray.

As the three of us held hands, I said a prayer thanking God for his blessings and asking for strength and guidance for the couple in their journey through grief. All of us had tears in our eyes. Then, Sharon's husband came across the room, gave me a big hug and thanked me.

I thank God for guiding me to become a nurse and for being in that place, at that time, to help Sharon and her husband spiritually, physically and emotionally.

LORI BURRIS, RN
St. Vincent Health System
Little Rock, Arkansas

Questions for Reflection

In the hectic pace of health care, one of the greatest sources of healing may be to listen to another's story. How will you help someone to heal today?

What can you share from your life experience to help others?

SINGING GOOD BYE

Suggested Sacred Text

Sing to God, sing praises to his name; lift up a song to him who rides upon the clouds — his name is the Lord — be exultant before him.

Psalms 48:4

Sacred Story

We had a couple in our unit who were so close. She was our patient, and he would come and visit her every day. He would hold her hand, read to her, watch TV, or just sit quietly by her side. He would fuss over her and be very precise about how we were to perform her care. You could feel their love and see it in their eyes when you entered the room.

As her health grew worse, it was harder for him to leave her side. Tears would fill his eyes when he kissed her good night, said a prayer, and made sure she was all tucked in. He would always let the nurse know that he was leaving. “Call me if she needs me or if there are any changes,” he would say. We assured him that we would. Their minister came to visit them often, and this seemed to be a great comfort to them both.

“As her health grew worse, it was

One night after he had left, I made rounds and saw that she was comfortable. But, something pulled me back to her room. I saw that her breathing had changed. I called her husband and told him he needed him to come right away. I went back to her and told her, “Your husband is on his way, so hold on; I will sing the Lord’s Prayer if you would like.” She looked at me while I sang, and her breathing grew less labored and her face more peaceful.

When he arrived, he was so appreciative and said, “That was her favorite prayer.” He was glad that someone had been there to say a prayer with her. I told him I felt that I sang good-bye to her for him.

DEBRIA CARNAHAN
*Lisbon Area Health Services
Lisbon, North Dakota*

Question for Reflection

How might we be more attentive to the needs of those who are suffering?

harder for him to leave her side.”

GRANDMA'S SMILE

Suggested Sacred Text

I have said these things to you so that my joy may be in you, and that your joy may be complete.

John 15:11

Sacred Story

After my shift on Thursdays, I play my guitar and other instruments on one of the floors of our hospital. I generally play praise and worship songs in the lobby. One day, a 12-year-old boy named Derrick watched me from a distance. Ever so slowly, he came closer. Eventually, he came close enough to look at my music book. His eyes lit up and he smiled.

He told me that his Grandma was a big fan of God. She would love the songs I was playing and the songs that were in my book. He asked if I could play his grandma some songs in her hospital room, and I agreed. But first, he asked me to show him how to play something on the guitar.

I explained a few things and asked Derrick if he wanted to try playing. At first he was hesitant, but I assured him that it was okay. I showed him how to hold the guitar and how to play two easy chords. I showed him how to play "Nothing But the Blood," which is basically a two-chord song, though you can get away with one if you do it right.

We went to his grandma's room and I played a couple of songs for her. She looked a bit lethargic while I was playing. When I finished, I told her I had a surprise for her. I gave Derrick the guitar and showed him what to do. I did the singing and he did the playing to the best of his ability. It actually sounded pretty good.

Derrick's grandma perked up. Her eyes grew wide and she had a smile on her face from ear to ear. She told me that Derrick had always been interested in

“One day, a 12-year-old boy named Derrick watched me from a distance. Ever so slowly, he came closer.”

guitars, but she had hesitated to buy one for him. “Now, I’ll buy him a guitar and get some lessons for him,” she said. “Bless you for taking the time to share with him.”

I don’t know if Derrick ever pursued the guitar, but I’m thankful for the gift God has bestowed on me and happy to share it with others. I’m also happy for the joy I brought to Derrick, and for that priceless smile on his grandma’s face.

DANIEL CISNEROS
Penrose-St. Francis Health Services
Colorado Springs, Colorado

Questions for Reflection

What brings you joy and happiness from your ministry?

How does your joy and happiness touch the lives of others in your ministry?

DEDICATED TO GOD'S SERVICE

Suggested Sacred Text

And now it has pleased you to bless the house of your servant, that it may continue forever before you; for You, O Lord, have blessed, and it is blessed forever.

1 Chronicles 17:27

Sacred Story

I suppose it is a result of my Catholic upbringing, but whatever the reason, it's important to me that certain objects, such as the crucifix in my office, are blessed. On a larger scale, it's important that our CHI offices, hospitals, chapels and other facilities are blessed. It's not about making things magically sacred with the sign of the cross and the sprinkling of holy water. Rather, it's about the dedication of a thing or structure to God's service. Even more important, it's about dedicating ourselves to God's service.

As the senior vice president and executive officer of CHI's Fargo Division, I have the privilege of missioning new leaders into this organization. During these services, I note that to be "missioned" is to be both "called" and "sent forth." After the new leaders acknowledge their readiness to accept this call and be sent forth to lead this healing ministry, I present them with a CHI candle, a bible and a framed copy of CHI's mission and core values. As I do so, I pray that these symbols will remind them, as the crucifix in my office reminds me, of the one to whom we are dedicated and whom we are called to serve.

Something similar happens at our facility blessing services. We dedicate our new buildings and ourselves to God's service while surrounded by symbols, images and artifacts indicative of our legacy, mission and values. Then, long after the ceremonies have concluded, these sacred stories remain in our lobbies and conference rooms as another reminder that we are blessed, and that we are called to be a blessing to others.

“It’s about dedicating ourselves
to God’s service.”

Thinking back to my Catholic upbringing once again, I recall from catechism classes that the Latin word *beati*, from which we get *Beatitudes*, can be translated as either “blessed” or “happy.” While I can’t claim that I’m always happy, given the weighty decisions I often face, I do feel a sense of satisfaction and fulfillment with the work we are doing to provide health care in the mostly rural settings of the Fargo Division. We do this through hospitals, clinics, telemedicine equipment, helicopters, ambulances, long-term care facilities, group homes, senior residences and, most recently, an apartment building. By having these things blessed, we dedicate them to God’s service. We also ask God’s blessing on us as we strive not only to further this healing ministry, but to build the Kingdom of God on the prairies, woodlands and shores of our region of Catholic Health Initiatives.

So, that’s why I like things to be blessed — to be dedicated to the service of God’s people. Amen.

JEFFREY DROP

*Catholic Health Initiatives National Office
Fargo, North Dakota*

Questions for Reflection

What does it mean to be “blessed?”

What does it mean to be a blessing to others?

TODAY, GREAT THINGS WILL HAPPEN

Suggested Sacred Text

Fear of others becomes a snare, but the one who trusts in the Lord is safe.

Proverbs 20:25

Sacred Story

On a Tuesday morning, I got out of bed feeling anxious about what might happen that day. Our branch of American Nursing Care was in a rebuilding phase, and sometimes the results of my efforts to create order seemed little in evidence, at least to me. Refusing to surrender to the negative feeling of anxiety, I told myself, "Today, great things will happen."

The truth was, I needed great things to happen. The branch would be visited by a surveyor that day. As well, there were lots of patient visits to cover with limited staff, operational issues to handle, and more. Yes, great things needed to happen, and I decided to rely on my faith.

Before I left for work, I told my husband about my certainty that today would be special. When I arrived, I told the director of clinical services, "Great things are going to happen today."

I would not be disappointed.

Things were going as well as I could hope when the branch received a call. The caller wanted to speak with the "nurses' boss." The director of clinical services was not available, so I took the call, expecting to hear a complaint. Pulling out a complaint form, I picked up the phone. "Hello, this is the director of operations," I said in my most professional voice. "How may I help you today?"

On the other end of the line was a cancer patient who wanted to tell me that our nurse had made her day. "She genuinely cares and wants me to be healed," the patient said. "She is a blessing. I really believe that without her, I would be done for. She seems like a friend that I've had for life."

I was overwhelmed by the words of this generous patient, whose burdens were

many. I thought back to the morning when I made the choice to not accept the negative possibilities of the day. I shared with the patient my faith in what the day would bring, and thanked her for being a “great thing” that happened.

Silently, I prayed that she would heal and that God would grant her a “great thing.” I thanked God for finding me in that moment. I will always treasure that call as a lesson in choosing to believe that great things are in store, no matter what the challenges might be.

AMY FORTNEY

*American Nursing Care/Consolidated Health Services
Columbus, Ohio*

Questions for Reflection

Have you had a similar experience of anticipating a “great thing” in the midst of chaos?

Are you open to recognizing the “great things” that happen every day?

Have you been the “great thing” that happens to someone else?

“Yes, great things
needed to happen, and
I decided to rely on
my faith.”

A GRACIOUS HOSPICE EXPERIENCE

Suggested Sacred Text

Let us not grow tired of doing good, for in due time we shall reap our harvest, if we do not give up.

Galatians 6:9

Sacred Story

Twenty-four years have passed since my dad was diagnosed with lung cancer. He spent his final days in the care of loving hospice hands. After our Lord took Dad home, the hospice experience stayed in my mind for days, weeks and then years.

Two years ago, I was blessed with the opportunity to become a volunteer for Hospice of Nelson County, in association with Flaget Memorial Hospital. My experience with hospice was limited, but I had been a volunteer in hospital ministry for 20 years.

I'll never forget my first hospice patient, Doug, and his caregiver, Jane. They had been friends for many years and continued to be friends after both of their spouses and passed away. I was amazed by their simplicity and humility, as well as their desire to help each other through the last stages of their life journeys.

Doug was a Catholic and wanted to receive Holy Communion as often as possible. That was music to my ears. I assured him I would do my best to make that happen. During many visits and conversations, Doug and I grew closer. I looked forward to my visits with Doug and Jane, as well as the opportunity to take Holy Communion to Doug.

When Doug became terminally ill, his doctors expected him to live five to six months. But, I was blessed to visit with him for 16 months. I always thought that his love for the Eucharist kept him going.

When Doug passed away, his family asked me to preside at the funeral. I told them that I wasn't a priest, a deacon or a chaplain, and I wasn't sure it was something a lay person could even do. It made no difference to them. On the

day of the funeral, even though I was out of my comfort zone, everything went well. When we finished at the gravesite, a strange feeling came over me. It was as if Doug was one of my family and I wasn't ready to give him up.

I'll always remember my conversations with Doug and what a pleasure he was to be around. It was truly a blessing to share his final days, and I'll always have a special place in my heart for him. I can't thank God enough for this amazing hospice journey. It's grace upon grace.

PHILIP FORTWENGLER

KentuckyOne Health

Flaget Memorial Hospital

Bardstown, Kentucky

Questions for Reflection

Can you relate to the author's humility when asked if he would preside at the funeral?

Have you ever been asked to do something for which you were not qualified? How did you handle it?

People who give of themselves often experience a gift of healing of themselves.

Have you experienced this, or been a witness to others who have experienced this?

“It was as if Doug was one of my family and I wasn't ready to give him up.”

I THOUGHT YOU MIGHT NEED A HUG

Suggested Sacred Text

The compass of God implanted in the seeker's heart stretches toward truth and signals the way to justice... These seekers hear the voice of God in the cry of the poor and oppressed, and they 'immediately put aside their own concerns' and follow God's call in their actions.

The Monastery of the Heart: An Invitation to a Meaningful Life, Joan Chittister, OSB

Sacred Story

I was walking down the ground floor hall when I saw Alicia, a unit secretary, leaning on the wall outside the elevators, waiting for one to open. I stopped to chat for a moment. She said she was waiting for a woman she thought would be stepping off the elevator soon. She said the woman seemed upset when she got on the elevator, and Alicia wanted to make sure she was OK.

Just at that moment, the elevator doors opened and a woman stepped off. She was obviously upset; she had the face of a person who had been crying. As she passed us, her eyes looking down at the ground, Alicia asked her if she was okay.

The woman did not look up, but quietly said, "Yes," and kept walking.

"Well, I thought you might need a hug," Alicia said.

The woman, who was now at least 10 steps beyond us, turned and literally ran back into Alicia's arms. She began sobbing so hard that her body shook. Alicia said nothing as she held the grief-stricken woman. I smiled at Alicia and went on my way. I don't know how long they stood there together, the silence broken only by the woman's tears.

“The woman, who was now at least 10 steps beyond us, turned and literally ran back into Alicia’s arms.”

This encounter touched my heart so much. The simple act of a human touch filled my being with a sense of peace. It is the perfect example of why we and our patients know that we’ve come to the right place.

ROBIN GEORGE
*Memorial Health Care System
Chattanooga, Tennessee*

Questions for Reflection

When was the last time you took the time to really listen with your heart?

Did it lead you to action?

THE ART OF MY PROFESSION

Suggested Sacred Text

I urge you to walk in a manner worthy of the calling to which you have been called, with all humility and gentleness, with patience, bearing with one another in love, eager to maintain the unity of the Spirit in the bond of peace. There is one body and one Spirit — just as you were called to the one hope that belongs to your call — one Lord, one faith, one baptism, one God and Father of all, who is over all and through all and in all.

Ephesians 4:1-6

Sacred Story

As a respiratory therapist, I have worked in many different settings and witnessed the power of God at work. I have seen God in the faces of my patients as I have seen the light enter their eyes while dying. I have also seen them reach for the light as they moved from this world into the next. I don't think you can work in a hospital as a respiratory therapist unless you believe in God.

I was hired by Lisbon Area Health Services to set up a respiratory care department. The area in which I felt the least experienced was pediatrics. So, I did some reading, and my approach was to use the same technique that I used with the children in my extended family.

As I enter a pediatric patient's room, I immediately explain who I am, using my first name, while washing my hands. I sit at the bedside, at the patient's level, focusing on my conversation with the child and engaging the parents along the way. I let the children play with my stethoscope, listen to their own lungs and assist me with the nebulizer. If they are quite reluctant, I might ask a parent to hold a child, although most of the time I earn the child's trust.

One particular patient gave me insight into the role I play with children and other patients who have asthma. I entered this patient's room with a nurse who had medication for the four-year-old boy. He complained that the sides of his chest hurt, so the nurse left to get him some Tylenol. In the meantime, the little boy and I proceeded to get to know each other and he took his nebulizer treatment. When the nurse returned with the Tylenol, he told her that he didn't

“I don’t think you can work in a hospital as a respiratory therapist unless you believe in God.”

need it because I had “fixed” his lungs and his sides no longer hurt.

I’ve come to realize that my role with all of my patients is to be someone who can take away pain in the lungs associated with difficult breathing. It took my experience with that little boy to make me realize what that really means.

I consider respiratory therapy to be my calling. It is my greatest passion in life. I’ve learned the most about my profession from my patients. The practice of respiratory care is both a science and an art. I’ve been blessed to learn the art from my patients.

TAMARA MCCABE HALVORSON

Lisbon Area Health Services

Lisbon, North Dakota

Questions for Reflection

What is my greatest passion?

What have I learned from those I have been called to serve?

AN ANGEL AMONG US

Suggested Sacred Text

O Divine Master, grant that I may not so much seek

To be consoled, as to console;

To be understood, as to understand;

To be loved as to love.

For it is in giving that we receive;

It is in pardoning that we are pardoned;

And it is in dying that we are born to eternal life.

— *Prayer of St. Francis*

Sacred Story

When my mom was diagnosed with breast cancer more than 10 years ago, it was a shock to all of us, considering that breast cancer does not run in our family. With all the treatments she went through, she lost her job, and we lost our house.

After saying prayers and never giving up hope, my mother won her battle with cancer. She was cancer-free for seven years. She was hired to work at Flaget Memorial Hospital, where I work. The delight she took in helping patients, families and colleagues was evident. She knew she was part of a healing ministry.

Sadly, the cancer returned. Remarkably, however, Mom continued to come to work with a smile on her face, showing everyone the true meaning of service, strength and determination.

Mom's cancer progressed, but she was determined not to give up. She would take off half-days for chemotherapy, and come back to work the next day. Patients would come in for their procedures and she would take care of them, despite feeling tired. I heard her tell ladies with abnormal mammograms that they were not alone. She reminded patients that she and her coworkers were there to walk with them in their time of need.

However tired she became, Mom never gave up hope. She prayed to God every day, and prayers were answered through her co-workers, who became her “angels.” Her coworkers offered her their paid time off so she could stay at home when necessary. They also donated money to help Mom pay her bills. She knew she was not alone, and that she was loved.

My mom touched many lives in her daily work. Her colleagues and patients still remember her kindness, courage and determination. Our core values of Reverence, Integrity, Compassion and Excellence were part of Mom, and she remains a part of us.

HEATHER HILL

*KentuckyOne Health
Flaet Memorial Hospital
Bardstown, Kentucky*

Questions for Reflection

How might challenges in our personal lives influence the way we show care to our patients and coworkers?

What does it mean to be an “angel” to others?

“She reminded patients that she and her coworkers were there to walk with them in their time of need.”

SEEDS GENTLY PLANTED

Suggested Sacred Text

I will sprinkle clean water on you, and you shall be clean from all your uncleanness, and from all your idols I will cleanse you. And I will give you a new heart, and a new spirit I will put within you. And I will remove the heart of stone from your flesh and give you a heart of flesh. And I will put my Spirit within you, and cause you to walk in my statutes and be careful to obey my rules. You shall dwell in the land that I gave to your fathers, and you shall be my people, and I will be your God.

Ezekiel 36:25-28

Sacred Story

An older gentleman was brought to the hospital. After visiting with him, I learned that he had moved to our town to be closer to his grandchildren. Their lives had become busy, and without them to watch over him, he had declined, becoming more of a recluse every day.

He had little desire to talk about his spirituality, but he did allow me to pray for him. During his stay, he was approached by other staff members who compassionately offered kindness and prayers. Seeds were being gently planted by some, watered by those who came next, and fertilized by others. Eventually, this seemingly gruff old bear began to shed his layers of toughness and reveal his true teddy-bear interior.

One day, he asked me what would happen to him if he died. He welcomed a long discussion about Jesus and what I believe happens when we die.

A day or so later, his doctor called me to say that this patient had indicated that he wanted to be baptized. With joy in my heart, I talked with him and baptized him.

A few days later, the patient left to receive care at a local nursing home, where he continued to flourish for several months. Then, we heard he was placed in

“Eventually, this seemingly gruff old bear began to shed his layers of toughness and reveal his true teddy-bear interior.”

hospice care.

I kept in touch with him through his time in the hospice program and visited him often. At his request, I brought prayers he could learn and Bible verses he could read. During our visits, he would talk about his new faith and take comfort in it and in his baptism at the hospital.

It was a beautiful opportunity to walk with him on his journey to God, and to appreciate the guidance God provides all of us as we minister together under the banner of Compassion and Reverence.

DEBORAH HOWIE

*St. Joseph's Hospital and Health Center
Dickinson, North Dakota*

Questions for Reflection

What seeds of compassion are you sowing?

Who are the “gruff bears” that long for your attention and kindness today?

HOW SHALL I USE MY GIFTS TODAY?

Suggested Sacred Text

Though one may be overpowered, two can defend themselves. A cord of three strands is not quickly broken.

Ecclesiastes 4:12

A friend loves at all times, and a relative is born for a time of adversity.

Proverbs 17:17

Sacred Story

I've been friends with Abby, a house supervisor, for a few years. I'm a unit secretary, and Abby and I share interests in getting healthy and raising kids. We love going to lunch together.

One morning, I was called out of my comfort zone to be a "sitter" for a patient. Please understand, I am clerical, not medical. I can help an emergency room run smoothly and efficiently, but I don't have an experienced bedside manner.

"The patient is very quiet and compliant as long as someone is with her," they said of the elderly patient with dementia. When I got to the patient's room, she was quiet, but just for a few minutes. We began to talk and I tried to establish rapport. All the while, I prayed. God knew I was in over my head.

The patient repeatedly asked where her daughter was. "She went to get some things from home," I explained. She continuously tried to climb out of bed, saying, "I need to get off this train." Or, she pulled her covers off and said, "I'm freezing cold. I need to get my coat on."

I covered her back up, said we needed to wait for the doctor to come in to see her, and did my best to redirect her attention. But, my comfort zone was grievously breached. This was going to take much more mental strength than I had. That's when God sent my friend, Abby, to start an IV for the patient.

With tender hands, a gentle voice and happy demeanor, Abby went to work. She had cared for this lady the day before, though the patient could not remember.

Abby patiently continued to build a sense of trust and calm with the patient. She explained what she was doing and why she needed to do it. I had never seen Abby function this way before. I knew that she was sensitive and compassionate, organized and efficient: but, to watch her carry out her tasks with such light-hearted kindness was amazing.

I cried, not only because I was so uncomfortable in the situation, but because Abby was so comfortable. She was calm and relaxed. God had provided exactly what the patient needed, and what I needed. Exactly.

I considered how to use my gifts better in the workplace, including developing the ones I may be lacking. I also thanked God for coworkers like Abby, who use their gifts every day to treat every patient with respect, dignity and immense compassion.

JILL HUSKEY

*Alegent Creighton Health Midlands Hospital
Omaha, Nebraska*

Question for Reflection

How do you find support in your coworkers? How effective are your co-workers as a team?

“God had provided exactly what the patient needed, and what I needed. Exactly.”

SEE WHAT YOU CAN DO

Suggested Sacred Text

To what shall we compare the kingdom of God? ...It is like a mustard seed that, when it is sown in the ground, is the smallest of all the seeds on the earth. But once it is sown, it springs up and becomes the largest of plants and puts forth large branches, so that the birds of the sky can dwell in its shade.

Mark 4:30-32

Sacred Story

Many church groups visit Machame Hospital at the base of Mt. Kilimanjaro in Tanzania. In one group was a man I sensed wanted more than an overview tour. I invited him to go along with our hospice/palliative/home care team as we went down dirt paths under big-leafed banana trees to visit people in some of the many tiny huts around the hospital.

At the first house was a woman who was a patient of our HIV-AIDS clinic. Her husband had died the previous year of AIDs-related causes. She was being treated for tuberculosis as well as HIV-AIDS. When asked why her three children weren't in school, she said in Swahili, "I have no money, not a cent." (Primary school is free, but in order to attend, kids need uniforms, shoes and some corn and beans to contribute for lunch, none of which they had.)

My visitor was clearly moved. "What would help this woman most?" he asked.

"Well, she is getting proper medical care," I said. "We can get a little food for them and get the kids in school through some existing programs. But, their house is unbelievably bad, made of scrap wood and mud. Machame has a long, cold, rainy period each year, and it's difficult to get stronger while sleeping in the mud. What they really need to be healthier is better shelter."

"Can't we do something about that?" asked the visitor.

"I don't know anything about building," I said. "I'm a medical guy."

"Well, see what you can do," he said, and gave me \$5000. There were no forms,

no receipts, no needs assessments, no budgets, no grant request submissions; there was just trust.

So, I studied and measured small houses in the area and came up with a sketch of a two-room house. There would be plastered walls, a cement floor and a metal roof, but no electricity. It was simple, but our patient would be out of the dirt and the elements.

The house was built by a local builder using local supplies, so the money became an economic resource for the community, too. We even had enough left over to build a second house for another family.

At the time, none of us realized what would come from this small work of mercy, which took place a few short years ago.

Today, part of my job is overseeing Houses for Health in Tanzania. We are now building house number 79. All of the houses are occupied by patients of the hospital and their families; 75% are HIV positive, while others have orthopedic challenges, developmental challenges, mental illness and more. While we can house only one family at a time, that family will reap the health benefits for the life of the house...maybe 50 years.

Truly, one never knows what God will make of your smallest effort to love and care for another. "See what you can do" became a mission unto itself.

ROBERT KASWORM
Alegent Creighton Health
Machame, Tanzania

Questions for Reflection

How can you reach beyond your comfort zone to help others?

"There was just trust." How strong is your trust in others ...and in God?

SACRED SPACES

Suggested Sacred Text

The purposes of a person's heart are deep waters, but one who has insight draws them out.
Proverbs 20:5

Sacred Story

What if the end goal, the grand vision, the ultimate outcome of all our work was to create sacred spaces?

We prevent, we test, we analyze, we research, we hypothesize, we prescribe, we treat, we operate, we educate, we rehabilitate — all so our patients will be able to engage in the sacred spaces of their lives.

To enjoy a jog around the lake in the early morning hours as the mist rises; to beam proudly as a granddaughter walks across the stage at graduation; to rock a baby to sleep in the middle of the night; to breathe deeply through the anxious moments of every relationship.

We get them to these moments, these spaces, so nothing else will be in the way of the Spirit of God doing Its transformative work in their hearts, allowing them to experience the depth of love, the relief of forgiveness, the joy of laughter, the revelation of understanding, the comfort of another's touch.

What if we recognized that sacred spaces are not only waiting down the road for our patients and ourselves, but are here right now, in this very moment? We have space to breathe deeply, to understand, to know love, to laugh, to comfort, to forgive.

“We have space to breathe deeply, to understand, to know love, to laugh, to comfort, to forgive.”

This is our work. This is our calling: to create the spaces, amidst all the fears of this world, where the Spirit of Christ can abide.

LISA KELLY
Alegent Creighton Health
Omaha, Nebraska

Question for Reflection

What comes to your mind after you read this story?

GOODBYE, FROM A CHILD, “TO YOU, AND YOU, AND YOU...”

Suggested Sacred Text

“Do you hear what these children are saying?” they asked him. “Yes,” replied Jesus, “have you never read, ‘From the lips of children and infants you, Lord, have called forth your praise?’”

Matthew 21:16

Sacred Story

The first time I met Beth, I was working a night shift in Mercy’s pediatric ICU. Beth was two years old and recovering from pneumonia. She had Spinal Muscular Atrophy, the number-one genetic killer of children under the age of two. The disease destroys the nerves that control voluntary muscle movement: crawling, walking, and even swallowing. It does not, however, affect intellectual activity. Children with this disease are commonly observed to be unusually bright and sociable. Beth, unable to hold even the smallest toys with her weak arms, was in that category.

On this night, she was awake and wanted to play. “Do you have any baby dolls?” she asked. I answered, “No, but I can make you some.” With tissue and bandages, I carefully made dolls in hopes that she would be able to hold and play with them. When I handed her three tissue dolls, she giggled and said, “Those baby dolls look more like baby angels.” We played with the baby angels until she fell asleep.

Six months later, I was working as a Mercy Home Care nurse. My assignment for three days was to visit a three-year-old after a PICU visit for failure to thrive. This was my second encounter with Beth. When I arrived at her home, she was sitting in a red wagon, propped up with pillows, watching *The Sound of Music* and singing along with the von Trapp children: “So long, farewell, *auf wiedersehen*, good night.” When my visit was over, I gave her three tissue angels that I had made for her. We both giggled and played briefly with the angels.

Eighteen months later, I was the manager of the Mercy Pediatric Clinics. I again crossed paths with the very charming Beth, who arrived like a princess in her

“I am not afraid. I have
been playing with the angels
for a long time.”

red wagon for a scheduled appointment. As she left, she softly sang, "I'm glad to go, I cannot tell a lie. I flit, I float, I fleetly flee, I fly." She drew out the last notes of the song as long as she could, "Good-bye, good-bye."

Feeling drawn to work at the new Mercy hospice facility, I changed jobs for the final time. On a Sunday afternoon, a pediatric patient was admitted. It was Beth. A room was carefully prepared for her, with Cinderella sheets and pillow cases. When Beth arrived with her parents, they announced she had three final wishes:

She wanted only her Mommy and Daddy to be with her.

She wanted to watch *The Sound of Music*.

She wanted chocolate ice cream.

The *The Sound of Music* was ready when Beth arrived and a nurse was quick to bring chocolate ice cream. Beth's eyes twinkled when her favorite song came on, "Farewell, to you, and you and you and you," she sang. As the movie ended, Beth noticed that her daddy was crying. She whispered, "Oh, Daddy, please don't cry. I am not afraid. I have been playing with the angels for a long time." Beth was at the hospice house just six hours when she died in her father's arms.

DEEDEE KENNEDY

Mercy Health Network

Des Moines, Iowa

Question for Reflection

What experience or person has taught you the "wisdom" you live by?

TINA'S DOLL HOUSE

Suggested Sacred Text

My comfort in my suffering is this: Your promise preserves my life.

Psalm 119:50

Sacred Story

In late November, the pastoral care office received a call from a patient named Tina, who wondered if we would be able to “adopt” her family for Christmas. In my role as chaplain, I visited this 44-year-old woman and listened to her story of loss, illness and love for her five young grandchildren. My colleagues and I agreed that we wished to use the funds we had been collecting all year for this family: thus the “sacred serendipity” unfolds.

We were excited about setting off with our meager fund to play Santa. Tina provided a list of the children’s ages, clothing sizes and toys wished for. However, when I asked Tina what she would like for herself, she said, “A doll house.” She explained that her 19-year-old son had been killed on New Year’s Eve three years ago. The doll house, she explained, would be a place she would be able to go and pretend that her son was still with her.

I debated the wisdom of giving Tina a doll house. However, I came to realize that it might be her sanctuary in a world that didn’t make sense. Perhaps it would bring some healing to her broken heart.

We delivered the gifts on December 23, and Tina was so grateful. She promised that when she could, she would give \$100 to benefit another family the next year; she needed to “pay it forward,” she said more than once. However, that February Tina was admitted to the critical care unit, where the beautiful heart that had loved and hurt so much gently stopped beating.

When the critical care unit staff heard about what the pastoral care department had done for Tina's family, some of the nurses gave to our Christmas fund. Our fund was blessed by the spirit of Tina, who lived life in joy and in sorrow.

Tina's life will continue to make a difference, especially during the Christmas season, when our prayer of listening deepens just enough to hear a promise of "paying it forward," a whisper of peace, and the joyous laughter of God.

DEBORAH KNIGHT

*Good Samaritan Hospital
Cincinnati, Ohio*

Questions for Reflection

When in your life have you experienced the unfolding of "sacred serendipity"?

What happened? What did you come to understand?

What difference does it make when you listen with your heart rather than with your ears?

"I came to realize that it might be her sanctuary in a world that didn't make sense."

BREAKING BREAD

Suggested Sacred Text

They will celebrate your abundant goodness and joyfully sing of your righteousness.

Psalm 145:7

Sacred Story

“This is my body, which is given for you; do this in remembrance of me.” When I was a young boy, these were the words the priest would recite before communion. As I grew older and read the bible, I knew it was Jesus who said those words to his disciples at the Last Supper.

Thanksgiving, the celebration of a good harvest, was passed on to us by the Pilgrims. They celebrated with family, friends and Native Americans, giving thanks to the Lord for the abundance. As I sat at my family’s Thanksgiving table, the words Jesus spoke came to mind. The bread we shared was indeed in remembrance of Jesus. We prayed, ate, laughed and sang, enjoying the warmth and comfort of being together. The good Lord truly was there, and is there every time we break bread.

One day, as I sat in the hospital cafeteria eating lunch with some friends, I noticed a few coworkers who were each dining alone. As I left, I asked one of them to join us the next time he came to eat. This brought a smile to his face, and he did join us the next day. Upon seeing the joy this simple invitation brought to one, I decided to invite all of my coworkers.

Since then, we have made it a point to have a monthly luncheon in our department. Everyone gets involved, and there’s some friendly competition over who can bring the best entrée, the best side dish, etc. We trade our best recipes and cooking secrets. You can feel the spirit of giving and sharing in the air. We give thanks to God and break bread, together as family and friends.

“The good Lord truly was there, and is there every time we break bread.”

Just like the Last Supper, Thanksgiving and dinnertime at home, our monthly luncheon brings expressions of spirituality and peace. We share stories from our home lives, discuss how to handle problems with the projects we work on, and find solutions that make the day after our luncheon a better day.

Breaking bread together unites, nourishes and strengthens our team. We leave the table knowing the Lord sat with us.

ALEX LOPEZ
St. Luke's Health System
Houston, Texas

Questions for Reflection

In what ways do you share your abundance with others?

What changes in you when you get to know those you work with as persons and not just as coworkers?

WHATEVER HAPPENED TO THAT PATIENT?

Suggested Sacred Text

The Lord sustains them on their sickbed and restores them from their bed of illness.

Psalm 41:3

Sacred Story

Have you ever had a patient who was transferred to another facility, leaving you to wonder, “Whatever happened to that patient?” In a small, rural hospital this happens quite often. So, it’s very special when we hear from a former patient who had a rewarding outcome.

In January 2012, our intensive care unit received a patient from the emergency department. The admitting diagnosis was attempted suicide. As details emerged, we realized that this patient’s attempted suicide went beyond a “cry for help.” She was an educated, successful woman who had an elaborate plan to end her life. While we could heal her physiologically, healing of the heart and mind would require a different approach.

I prayed for God to grant me the words and wisdom to help this troubled soul recognize what a gift life is, and to believe that she had something to live for. Through prayer, tears and God’s guidance, I helped the patient through her process of acknowledgement, anger, fear and sorrow.

When it was time for her to leave the hospital, I thought that she needed to go to a safe and protected environment. I thought that if she was discharged home, it would be an opportunity for her to proceed with self-harm. After conversations with her physicians, arrangements were made for her to transfer to a facility for extended treatment. As she left our unit, my concern for her was overwhelming. I thought of her often.

Several weeks later, a coworker answered the phone and passed it to me. The caller identified herself as the patient I had cried with and for, and she asked me what time I would finish my shift that day.

A few hours later, a lady arrived in our ICU. I hardly recognized her! Gone was

her waif-like appearance and face of despair. In their place were a broad smile, statuesque posture and snappy stride of confidence. She appeared before us full of courage, strength and life. She explained to us how she had gone down the path of self-destruction. She had closed out her family, friends and God, and thought that suicide was the only solution to her desperate loneliness.

She said that the first few hours in our ICU had turned everything around for her. The prayers we said together, the words of encouragement and understanding when everything in her life seemed so hopeless, had guided her to a renewed life with God. That, in turn, had rekindled her faith in family, humanity and life.

I, too, believe that her time at St. Vincent Morrilton guided her through that profound transition. We are so blessed to work in a healing ministry where God walks and works beside us each day, as we face each challenge and do our best to make a difference for our patients — emotionally, physically and spiritually.

MELANIE MORRISON

St. Vincent Health System

Little Rock, Arkansas

Question for Reflection

What in my life am I grateful for and have to live for?

“While we could heal her physiologically, healing of the heart and mind would require a different approach.”

THE PRODIGAL SON

Suggested Sacred Text

For as high as the heavens are above the earth, so great is his love for those who fear him; as far as the east is from the west, so far has he removed our transgressions from us.

Psalms 103:11-13

Sacred Story

The emergency department nurse reported that I would be getting a patient who was withdrawing from alcohol and was "not a happy camper." The patient had spent most of the night and early morning yelling at the nurses in the emergency department. I saw before me a man who was experiencing the typical signs of withdrawal, but was also scared and tormented by demons of his past.

After we performed the usual assessments, the patient tried his best to appear in control and to push everybody away from him. The fear in his eyes and the torment of his soul went beyond his present afflictions. I sat down next to him, amidst the belligerence he was hurling at me, called him by name and simply said, "You know, there are second chances in life."

He stopped mid-sentence and became quiet as his eyes filled with tears. He then gave me a litany of all the people he had hurt in his past, all the relationships he had strained and all the bridges he had burned because of his addiction. Of greatest concern to him was his damaged relationship with his immediate family.

"The situation is hopeless," he said.

I asked my patient if he had ever heard a story about a man who had wasted everything he had been given; who spent his entire inheritance on alcohol, wild women and parties and completely abandoned his family. After listening to my rendition of the story of the Prodigal Son, my patient said, "That guy sounds a lot like me."

I shared the happy ending of the story with the patient, and explained that his

“I asked my patient if he had ever heard a story about a man who had wasted everything he had been given.”

story could end that way, too. Before leaving for the evening, I prayed with him and once more reminded him that with God, second chances are possible.

I didn't see the patient again, as he was discharged before my next shift. I didn't think I would ever know how his story turned out, as we seldom do. But one afternoon about eight months later, I was in the lobby when I heard a voice holler, “Rob!” There stood my former patient with a huge grin on his face. He said that he had entered a rehabilitation facility, contacted his wife, and was in the process of making amends with his family.

“None of it would have happened without your help, Rob. Thank you,” he said.

Somehow, God put me in the right place at the right time and gave me the right words to serve as an instrument of transforming grace.

ROB NORE, RN

*Alegent Creighton Immanuel Medical Center
Omaha, Nebraska*

Questions for Reflection

Are there amends I need to make in my life?

How did I feel when I sought forgiveness from another and received it?

\$20 A WORD

Suggested Sacred Text

Blessed are the peacemakers, for they will be called the children of God.

Matthew 5:9

Sacred Story

Remember being told as a child never to speak certain words? Maybe you heard them on the playground or saw them written on the bathroom wall. But, you didn't use them yourself because if you were caught, the consequences would be dire!

Since CHI introduced its national violence prevention campaign, the use of certain words falls into that "dire consequences" category, at least in the East/Southeast Division. Here, using violent language will cost you \$20 for every word. No one who knows this better than the leaders in the division: just ask Peter Banko, Beth O'Brien, Jim Hobson, Mark McGinnis and quite a few others. In 18 months, we collected more than \$4,700, which will benefit various mission projects across the division.

Today we rarely hear the words "bullet" or "target." They've been replaced by "dot point," "focus," "goal," "objective," and "intention." It is amazing how rapidly "dire consequences" can change our speech. Many words on the violent language list have been replaced by nonviolent alternatives over time. And, two words — "kickoff" and "deploy" — were rescinded from the list (etymology and a good dose of humility plays a role in change).

We in the East/Southeast Division have found that language does change people. It has changed us; we have become more conscious of what we say and how we say it. We have taken the idea of nonviolent language back to our homes and

families and, in our own small way, have tried to make a difference in the world. We continue to catch each other using those certain words, and hope that our changed language will change us for the better.

Join us, won't you?

BETH O'BRIEN

Catholic Health Initiatives National Office

East/Southeast Division

Questions for Reflection

When was the last time you caught yourself saying a violent word?

What did you do?

How can language change things for the better in your sphere of influence?

“We have become more conscious
of what we say and how we say it.”

SAVE THE LAST DANCE

Suggested Sacred Text

*Let them praise his name in the dance: let them sing praises unto him with the timbrel and harp.
(Psalms 149:3)*

Sacred Story

If I were part of a popular R&B/Rock 'n' Roll band, I'm not sure how I would react to finding out that my biggest fan was a nearly 99-year-old woman living in a nursing home.

One of our social workers sent an e-mail with the subject line, "Your oldest fan is turning 99!" to a well-known local band, a Milwaukee-area favorite. The subject line was intended to get the band's attention, and it did. The email went on to explain that one of our residents, Wanda, wanted to dance to the band's music one more time.

The social worker had made a request on Wanda's behalf to Franciscan Villa's Wish Upon a Star program, which was established a few years ago to help fulfill the final wishes of our residents. We've found that discerning our residents' final wishes is mostly a matter of listening to their stories and watching for their eyes to light up. That's when we know they are talking about something they love.

You could see in his eyes that Ray, a lifelong Chicago Cubs fan, just wanted to go to one last ballgame with his grandson. Dawn, a former lifeguard, wanted to go swimming. Katherine, who had been a figure skater, wanted to twirl on the ice once more. And, Wanda wanted to dance while her favorite band played.

When we told Wanda she would do exactly that on her birthday, her initial response was disbelief. She didn't understand why we would make such a fuss over her. "But, why?" she asked. We could tell that it made her feel special when we answered, "Just because we like you."

A whole week was spent preparing Wanda for the event, and as the week went on she became more convinced that it was really going to happen. We consulted her on important logistical details, such as which dancing shoes she was going to wear.

Two of our activity specialists took Wanda into the city, to a dimly lit tavern where the band was on stage. The band members invited her up on stage, wished her a happy birthday and sang her favorite song. They remembered her and couldn't believe that their oldest fan from more than 20 years ago was still their oldest fan!

Wanda danced and danced, pausing only momentarily to catch her breath and say, "I think I need a beer." She danced until the band got tired. It was wonderful to see Wanda so happy and to make one of her final dreams come true.

Timeless is the gift given and received when done so through the heart. Wanda, from all your friends at Franciscan Villa, thanks for saving the last dance for us.

RYAN O'ROURKE

Franciscan Villa

South Milwaukee, Wisconsin

Questions for Reflection

When have you given a gift to someone in your ministry that touched their heart?

When have you received a gift from someone in your ministry that touched your heart?

NOT BY CHANCE

Suggested Sacred Text

Then they returned to Jerusalem from the mount called Olivet, which is near Jerusalem, a sabbath day's journey away. When they had entered the city, they went to the room upstairs where they were staying, Peter, and John, and James, and Andrew, Philip and Thomas, Bartholomew and Matthew, James son of Alphaeus, and Simon the Zealot, and Judas son of James. All these were constantly devoting themselves to prayer, together with certain women, including Mary the mother of Jesus, as well as his brothers.

Acts 1:12-14

Sacred Story

It was after 6 p.m. on a midweek evening and I was exiting the parking deck to go home. I saw a woman turning slowly with keys in hand, and recognized her dilemma – one that I have experienced several times myself. I turned on my interior car lights so she could see me and wouldn't be startled as I slowly drove to where she was standing. I introduced myself as a hospital employee and asked if she would allow me to chauffeur her on a “grand tour” of the deck to locate her vehicle.

She told me her name and her story. Her husband had a critical head injury and was in intensive care. I asked if I could check on them later, and she said she would appreciate it. We exchanged phone numbers.

That Friday, I reminded her that I lived near the hospital and could come over if she needed company. Her family lived a few hours away and if her husband's condition deteriorated, it would take them some time to get to Little Rock. The next week, I visited her in her husband's room and met other family members. During the next few weeks, the patient improved and his wife came by my office to discuss their anticipated transfer to an intermediate care facility. We marveled at the God of second chances, an encouragement for both of us.

Several times during the course of the patient's rehabilitation, I received texts with updates on his progress and eventual discharge home. His wife expressed

“We marveled at the God of second chances, an encouragement for both of us.”

her gratitude at the many kindnesses extended to them during her husband’s extended hospitalization.

We have often spoken of our meeting and our belief that it was not by chance, but by divine appointment. It is by God’s grace that we are positioned at particular places at certain times, so that we can assist or be assisted through difficult circumstances.

A pastor, asked what biblical character’s attributes he would most like to emulate, responded that it would be Bartholomew, who was an encourager. In this life, on this journey of faith, we could all aspire to be a Bartholomew, praying that God will show, through us, a reflection of grace and mercy.

KERRI PEDEN, RN
St. Vincent Health System
Little Rock, Arkansas

Questions for Reflection

How are you called to serve others just as Bartholomew and the other disciples were called to serve the men and women of their day?

What is one opportunity that you have today to make a difference for someone else?

GOD'S PRESENCE IN THE HOLY EUCHARIST

Suggested Sacred Text

And now faith, hope, and love abide, these three; and the greatest of these is love.

1 Corinthians 13:13

Sacred Story

I have worked as a nurse in our hospital since it opened 10 years ago, and during these years I have also served as an Extraordinary Minister of Holy Communion for Catholic patients and staff. Bringing the bread of life to those who are sick and suffering, weak and worried is an amazing and humbling experience.

Before I enter the hospital, I always pray and thank God for the privilege of serving others. I ask God to pour the Holy Spirit on the patients and help them heal, physically and spiritually, through the gifts of salvation, forgiveness and hope encompassed in the Holy Eucharist.

Because I have been involved in this beautiful ministry for 10 years, I know the customary reactions of the patients I visit. There is often a huge desire to receive the precious body of Christ; I hear it in the patients' voices and see it in their eyes. There is also solemnity and peace as they consume the Eucharist. Finally, there are tears of joy, redemption and gratitude.

However, God enlightens us in unexpected ways, as when I visited a patient I knew through our church. Joe had made it through some difficult cancer treatments, but something was upsetting him: his intense fear of needles. Joe had developed a clot in his leg, and to treat it he had to self-administer an injection twice a day. He was petrified and was praying for courage. When I entered his room, I had the answer cradled in my hand: Jesus in the Eucharist! Joe told me his prayers were answered.

Joe and I prayed and shared the Eucharist, and I helped him with some tips regarding the injections, but I didn't know what an impact our encounter would

have on his spiritual life. A few months later, we saw each other at church, and Joe told me he had written a testimonial about his faith journey during his illness. The significance of God's presence in the Eucharist when he needed it most was truly a turning point for Joe.

Joe's story exemplifies for me how blessed I am to work and serve in a faith-based hospital. Our chaplain often says we work in a "sacred place." How wonderful it is when our daily work is truly God's work.

PEGGY REINHOLD, RN
St. Luke's The Woodlands Hospital
The Woodlands, Texas

Questions for Reflection

Have you experienced unconditional love in your ministry?

How have you shown unconditional love to others in your ministry?

“Bringing the bread of life to those who are sick and suffering, weak and worried is an amazing and humbling experience.”

RAMONA

Suggested Sacred Text

*Though I walk in the midst of dangers,
you guard my life when my enemies rage.*

*You stretch out your hand;
your right hand saves me.*

Psalms 138

Sacred Story

In October 2012, the Good Samaritan Hospital Cancer Center dedicated a beautiful bronze statue of Jesus in our healing garden. The statue depicts Jesus as life-sized, sitting on a bench. His hands are outstretched and there are benches on each side of him. Anyone who visits the garden may sit beside the Jesus statue and hold his hand.

At the dedication ceremony, I was asked to share a story about my encounter with Ramona, a wonderful nurse who had dedicated many years of her life to ministering to the sick at Good Samaritan Hospital.

A few weeks prior, I had invited Ramona to the dedication ceremony for a stained glass window that had been donated by the family of a nurse who had died of cancer. Although I knew that Ramona had been quite ill for some time, I invited her to that ceremony because she had worked with the nurse. However, Ramona decided not to come to the dedication because her immune system was compromised and she couldn't be around large groups of people. Instead, she came alone a few days later.

After she saw the lovely stained glass, I asked if she felt up to a short walk. She agreed, and we walked to the healing garden. When we turned the corner and Ramona saw the statue of Jesus, she gasped. She gently touched the statue's

“Anyone who visits the garden
may sit beside the Jesus statue
and hold his hand.”

hands, then stroked his face. She asked him when he was coming to take her home. She was truly moved by the beautiful piece of art.

As we walked away, she pointed to a nearby parking lot and said she could park her car there and walk to the garden to sit with Jesus. She talked of praying the rosary there and of the peace it would bring her.

As a nurse, I understand the role of touch in the healing process. Ramona helped me see the power inherent when we reach for and touch Jesus. I imagine that through the years to come, this statue will help comfort and sustain many people, just as it did Ramona.

MARCIA STEPHENS, RN
*Good Samaritan Hospital
Kearney, Nebraska*

Questions for Reflection

How does your compassion touch others?

Is there a work of art or nature that has a healing power for you?

HEALING COMES IN MANY WAYS

Suggested Sacred Text

Whenever the spirit from God came on Saul, David would take up his lyre and play. Then relief would come to Saul; he would feel better, and the evil spirit would leave him.

1 Samuel 16:23

Sacred Story

From the earliest times of medical practice in Greece, music was understood to be a vital component of the healing process for body, mind and spirit – just as important as surgical procedures, potions, lotions and drugs. In Western medicine, we are just beginning to remember the importance of music in the healing arts.

At St. Francis Hospital, we are fortunate enough to have professional music therapists. Allow me to share just one story with you:

Not long ago, I received a call from the first floor nurse's station, asking me to sit with a patient for a while. The patient was in intractable pain, constantly crying and calling out. As I walked to the unit, I wondered what I could possibly have to offer this patient and the staff. Then, I remembered it was Wednesday, and the music therapist comes on Wednesday! Indeed, 20 minutes later our harpist, Becky, arrived in the hallway and I beckoned her into the patient's room. The patient was in obvious pain and distress, pulling at her blankets, crying out, and pinching her brow together.

Becky wheeled her harp into the room. While I dimmed the lights, Becky sat behind the harp and began to play softly, tenderly plucking and running her fingers across the strings. The melody was gentle, slow and peaceful. With each passing minute, the patient seemed to settle into a new rhythm. First, she stopped pulling at the blankets; then her crying became quieter and less frequent until it faded away entirely. Finally, I noticed that her face was more

“With each passing minute, the patient seemed to settle into a new rhythm.”

relaxed; her brow was no longer pinched tightly together; her breathing had slowed. It appeared she had drifted off to sleep.

Becky played for nearly an hour. During that time, and for several hours after, there was only peace in that patient’s room.

Healing comes in many ways!

JENNIFER TAPLEY
Franciscan Health System
Tacoma, Washington

Questions for Reflection

What music renews your spirit?

How might you incorporate music as a resource to focus or inspire you and your fellow workers?

THERE'S MY BUD, JOHN

Suggested Sacred Text

He had a dream in which he saw a stairway resting on the earth, with its top reaching to heaven, and the angels of God were ascending and descending on it.

Genesis 28:12

Sacred Story

I had just walked into the John Zay Guest House, which serves patients and family members who live outside the Colorado Springs area and is named for my late husband. I was there for the community meal, which we celebrate each Wednesday. Karen, a volunteer, greeted me and said, "You have to hear this guest's story."

The guest, Michael, had suffered a traumatic accident that injured his arm and hand. Despite good initial treatment, his condition deteriorated and he came to Penrose-St. Francis Health Services for care.

Michael needed surgery to clean out an infection that had set in. Before the surgery, he talked to his wife and the care team about his buddy, a man named John. Michael said that John had visited him and told Michael to come to "his house," where he would be taken care of. Michael's wife knew that he didn't have any friends named John, so she asked Michael what John looked like. Michael said John was wearing a suit and had a receding hairline and a beard.

After Michael's surgery, he needed daily IV antibiotics for a week, so he came to stay at the Guest House. When he and his wife arrived, they toured the house. In the dining room, Michael pointed excitedly to a portrait of my husband. "There's my bud, John," he said.

After hearing Michael's story, I had tears in my eyes. "The next time you talk to John, would you tell him I'd like to talk to him, too?" I said.

I kept a special watch over Michael and his wife during their stay. I asked Michael if he had experienced any more communication with John. "Yes," Michael said, "he comes to me when my wife and I read the bible and pray. He

told me not to worry, to have faith, and that heaven is not ready for me yet.”

Michael also had some words of comfort for me. “John spoke to me when I was sleeping. He said, ‘Tell my love to always stay happy and loving, like me. Tell her I’m happy, and though we are unable to be together, we are always going to be as one. Do not be worried or sad! You will always be in my heart. Live your life to the fullest. Spread love and laughter wherever you go. You did that while I was on earth; please do it now. Others need you and your faith!’”

Being of Celtic descent, I like to think of the John Zay Guest House as a “thin place:” a place where the boundaries of heaven and earth dissolve, and we are left unmasked.

ELAINE ZAY

Penrose–St. Francis Health Services

Colorado Springs, Colorado

Questions for Reflection

When have you experienced the “thinness” between heaven and earth and shrugged it off as coincidence?

What difference does it make when you stop to consider the mystery of circumstance?

“The next time you talk to John,
would you tell him I’d like to
talk to him, too?”

