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The sharing of sacred stories has become a tradition within Catholic Health Initiatives. Stories of the ways in which spirituality enhances the quality of care we provide to our patients, co-workers and communities have the power to comfort and inspire us. The very telling of these stories brings us joy. I would like to share a sacred story of my own.

A few years ago, while attending Mass at my home parish in Louisville, Kentucky, I experienced the power of the faith-based ministry of Catholic Health Initiatives. In this particular parish, the “exchange of peace” during Mass was never a quick gesture but an interactive time that could easily last ten minutes. One Sunday as members of the congregation wished each other peace, a fellow parishioner who knew my affiliation with Catholic Health Initiatives said to me, "I have to tell you what happened to my son at CARITAS.” She was referring to CARITAS Peace Center, part of CARITAS Health Services in Louisville, which provides comprehensive behavioral care. CARITAS Peace Center has a large adolescent unit that cares for forensic patients through a contract with the Commonwealth of Kentucky.

My 24 years as a health care executive had conditioned me to think, "Oh no, what happened now?” I braced myself as she began to cry, but her next words were, "CARITAS saved my son’s life.”

In dealing with typical teenage issues, her older son had become withdrawn and started experimenting with drugs and skipping school. She admitted him to CARITAS Peace Center. "The staff was so caring and attentive to his needs and they helped him through his problems,” she said. “He is a different person now. He has turned his whole life around.” She explained that he had become a peer role model and now serves as a counselor to other young people seeking help at CARITAS.
Hearing this story in church reminded me of the power of the Catholic tradition of caring for the whole person in mind, body and spirit. The spirituality that is intrinsic to the care provided by the staff at our market-based organizations certainly had an effect on this young man, who is now dedicated to making his life and the lives of others better.

This fifth edition of Sacred Stories is a collection of moments and encounters in which spirituality made ordinary events extraordinary. It is the spirituality of our distinctive culture that makes our facilities temples of healing and sanctuaries of comfort when healing is not possible. I hope you will read these stories, share them with others and continue to be graced by your own stories of God’s healing presence among us.

Kevin E. Lofton, FACHE
President and Chief Executive Officer
Catholic Health Initiatives
n my first day of work at St. Anthony Hospital, I attended new employee orientation. This included a conversation with the director of the pastoral care department. We discussed the reasons I had come to St. Anthony seeking a job. One of the reasons I gave him was that I thought the hospital was in line with my own spiritual beliefs. This statement was totally false. I just didn’t think it appropriate to tell the hospital chaplain what was really going on with me: I had been very unhappy at my last job; my marriage was failing; and, at the moment, I could not seem to find God anywhere in my life.

During my first year at St. Anthony, I made friends with people who have the kind of spiritual beliefs that remind me to pray and remember that God is truly in charge of our patients and of us. I feel badly when a patient I have been working with dies, but I now realize that I play a truly important role with patients who are terminally ill. I help them to be physically as well as emotionally comfortable, and encourage them to pray with their loved ones as they learn to face the challenges of their illnesses.

My relationship with God is growing and I feel good about the care I am giving. I have a long way to go with God, but I feel Him in me and I am no longer just going through the motions in life or in my work.

Greg Blanc, RRT
St. Anthony Hospital
Pendleton, Oregon
“One of the reasons I gave him was that I thought the hospital was in line with my own spiritual beliefs. This statement was totally false.”
The patient arrived in intensive care via the emergency room. The 42-year-old man was unconscious and had been for quite a while. He had been discovered by friends who lived next door.

Someone had already phoned members of the patient’s family who lived in the area, but they declined to come to the hospital. They suggested that the hospital contact the patient’s mother, who lived in Detroit.

When I walked onto the unit, the patient was on a ventilator. Kellie, the nurse who was caring for him, approached me with tears in her eyes. “I need some help,” she said. It had fallen to her to call the patient’s mother. “I have to tell this poor man’s mother that her son is breathing only with the help of a machine. She’s the only one in the world who cares about him, and she’s 800 miles away.”

As Kellie’s voice trailed off, so did her tears. She walked purposefully toward the nurse’s station. She dialed the number quickly, as though afraid that if she stopped she wouldn’t be able to continue. As the phone at the other end began to ring, she said, “I have a six-year-old son; I have no idea what I would do if I got a call like this.”

When I arrived on the floor I had assumed that Kellie would ask me to make the call. Instead, I watched as Kellie shared the grief and heartbreak of another mother, even though they were separated by a great distance and would probably never meet. While Kellie made clear the truth of the situation, her words were mixed with compassion and care. She assured the patient’s mother that he had not died alone, that she had cared for him and that he would continue to be a child of God.
Eventually, the conversation turned to practical matters as Kellie asked for addresses and information so the body could be sent home for burial. I also heard her mention that a chaplain was near, but I knew that I wasn’t needed. I could not have improved on the compassionate care given to a mother by a young nurse who understood the joys and the sorrows of motherhood.

Sam Adkins, PhD
St. Vincent Health System
Little Rock, Arkansas

“I watched as Kellie shared the grief and heartbreak of another mother, even though they were separated by a great distance and would probably never meet.”
It was an ordinary day in the resident relations department at Riverview Place.

A resident going through cancer treatment had been given no hope by her physician. I spoke to her brother in Texas, who was trying to find someone to drive her several hundred miles for a second opinion. Kathy, my co-worker, listened to my concerns and said, "I can’t think of a better way to use some of my vacation." I am thankful to work with people like Kathy: this is just one example of our mission and core values in action.

As I gave a tour to prospective residents, we toured Betty’s apartment. There were quilted squares all over her guest room. She said, "This is something I am doing for Helen. She can no longer sew, and she asked me to finish three quilt tops for her." Helen, however, was in the hospital and would not be returning to Riverview Place. Betty was worried she would not be able to get the finished quilts to Helen. I assured Betty that we could get them delivered. Helen had told us she was so happy someone cared about her and was willing to help her finish her quilting. Residents truly care for each other at Riverview Place.

Joyce had left her home in Minot the day before to move to Riverview Place. Her son called and said his mom was having a hard time and would not arrive at Riverview Place until late, maybe 10 pm. I left a message for the Sisters, knowing they would be the ones to greet Joyce and her family. Sister Mary was first to meet them. She saw it was not a good situation and in her wonderful, caring way, brought cookies and coffee to Joyce in her new home. She visited with Joyce while her family placed her belongings. Joyce’s family is extremely grateful for Sister Mary and her kindness during a time of need.
Karen left a message for me; she no longer wants us to call once a day to check on her. Her friend Sue gets the paper every day and reads it early, then brings it to Karen’s apartment about 10 am. They have coffee, then Sue leaves the paper. Karen said she doesn’t need the phone call because she and Sue check on each other every day. Friendship can be built at any stage of life; new friends meet every day at Riverview Place.

This was not an unusual day at Riverview Place. But on this particular ordinary day, I took time to reflect on the wonderful blessings we receive. I am truly privileged to be part of Riverview Place.

Bonnie Peters
Riverview Place
Fargo, North Dakota

"Friendship can be built at any stage of life; new friends meet every day at Riverview Place."
In some ways this is just an everyday story. Some people may even say it’s a little corny, but it reminds me that prayer is an important part of my work as a nurse.

I was called to start an IV on a patient who was hospitalized for dehydration and abdominal pain. The patient’s three sisters were in her room offering support and comfort, but she was still quite anxious. She told me she was afraid of needles and she had already been poked five times to get one IV started. “I have no veins,” she said. And she was right: she had no visible veins.

I got down on my knees, as I often do when I start an IV. The patient’s sisters teased that I was kneeling to pray for a vein to appear. I told them I often do pray before this procedure, as a little prayer never hurts and often helps. One of the sisters said to the other two, “We are going to pray, too. Our sister needs all of our prayers to help her get better.”

Everyone held hands, and I felt one of the sisters put her hand on my shoulder. The room was quiet as they watched me work. There was definitely a sense of peace, and out of nowhere a vein appeared, as if it was sent from heaven. I was able to get the IV started on the first attempt.
As I walked out of work that day, one of patient’s sisters walked with me. She asked if I had been able to sense the Lord in the room, helping me start the IV. I told her that I did, because I know that someone besides me was guiding my hands. She told me how she had recently rejoined her church after a long time away. She said, “I am very happy to hear that this hospital is not afraid to express spirituality and to pray with patients.”

This experience made me realize several things. First, I’m proud to work where prayer is part of patient care. Second, I’m awed that God works through these simple acts and works through me. It is amazing to be part of the healing ministry of the Lord. And finally, it made me wonder how often God has been part of our work even when it wasn’t called to our attention.

Denise Klade, RN
Good Samaritan Health Center
Merrill, Wisconsin

“I know that someone besides me was guiding my hands.”
Most people think cancer is one of the worst things that can happen to them. For Tillie, however, having cancer changed her life for the better.

Tillie is a 53-year-old woman with breast cancer. Years of drug abuse had left her with many memory and cognitive problems, but few life skills. Tillie had no job, income or home.

She received treatment under the Colorado Indigent Care Program, but she needed much more than that. Her guardian angel came in the form of Sally, a counselor at Penrose Cancer Center. Sally worked through a long list of Tillie’s needs, including medications for a seizure disorder and depression, having 28 teeth pulled one morning, having new dentures made and finding a place to stay.

With Sally’s assistance, Tillie was able to utilize a variety of community services, including the Penrose-St. Francis Foundation. A court hearing granted Tillie disability and Medicaid coverage. Most of us would have a tough time making ends meet on $475 per month and food stamps, but for Tillie it will be enough.

She lived for several months in the Stearman House, a Victorian house on the Penrose campus where cancer patients from out of town can stay while undergoing treatment. At $10 per night, it was one of the cheapest places for her to stay. Tillie served as hostess for the house, welcoming new guests and telling them about the support groups and services available.
Just before Christmas, however, it was time for Tillie to leave. Sally found her a small apartment on the bus line so she’d have a roof over her head, but she had no furniture or furnishings of any kind. Staff and support group members came to the rescue by “adopting” Tillie for Christmas. Within days, she had furniture, a television, linens, a microwave, a vacuum cleaner, plants, grocery gift certificates and money for utilities.

In the small picture, Tillie was “just” a homeless person who some would say was paying the price for her poor choices. In the bigger picture, she is so much more. She is recovering from cancer, has a home and enough income to survive. Now, she is giving back by helping others in need. She is an example of the healing ministry put into action every day by our staff — curing patient illnesses when possible, but also looking into their hearts and healing them one soul at a time.

Deborah Hood
Penrose Hospital
Colorado Springs, Colorado

“In the small picture, Tillie was ‘just’ a homeless person who some would say was paying the price for her poor choices. In the bigger picture, she is so much more.”
o-choiring the 130th anniversary celebration at St. Joseph Medical Center was an honor and a privilege. For me, the event was especially meaningful because it acknowledged two very special people in my life: Norman and Marie Kline, the grandparents of my husband and lifelong patients of St. Joseph Medical Center.

Norman and Marie were distinguished guests of honor during the 130th anniversary Founders Day celebration. They are 90 and 91 years of age, respectively. Both were born and raised near Centerport, Pennsylvania, and recently celebrated their 70th wedding anniversary. They still live in the farmhouse in which Norman was born and continue to bless all who know them.

Norman and Marie have always led by example, through hours and years of service they have given to God, their town and their community. Both have great memories and have shared some priceless stories with me.

Marie’s first memory of St. Joseph Hospital and the Sisters of St. Francis goes back 75 years. In March of 1928, just one month past her 16th birthday, Marie was severely burned while cleaning a stove in her family home. She spent six months in a hospital bed. At the time, St. Joseph’s medical personnel had little hope that she would survive her burns, let alone walk again. Marie recalls laying flat on a bed, arms propped on small tables, chicken wire and light bulbs suspended over her entire body. She prayed daily that she would walk again.

Still unable to walk, but with her burns getting better, she was discharged from the hospital in the late summer of 1928. She fondly recalls that the sisters were sad to see her go because they got to know her well during her long recovery. Many came to her side to say goodbye. On Christmas Day of that year, Marie took her first weak steps, marking the beginning of a miracle. Since then, she has never stopped walking and her faith in God abounds.
Sacred Stories

“Each week, Norman would deliver 15 to 20 bushels of potatoes to the hospital. He continued until he was told one day that the pantry was full and the debt was paid.”

Marie still has many of the weekly bill receipts from her six-month hospital stay. I was amazed to find that her hospital accommodations ranged from $2.15 to $3 per day!

In 1936, Marie, now married to Norman, was hospitalized again, this time for surgery. Norman had a large crop of potatoes that year, so, with cash being almost non-existent during the Great Depression, he asked to barter the hospital bill in potatoes. Because the hospital pantry was in dire need of food, the Sisters of St. Francis agreed. Each week, Norman would deliver 15 to 20 bushels of potatoes to the hospital. He continued until he was told one day that the pantry was full and the debt was paid.

When I sat down at my computer to begin capturing Norman and Marie’s stories in type, a phrase on my desk calendar caught my eye: “Let gratitude for the past inspire us with trust for the future.” Amen.

Lori L. Grauer
St. Joseph Medical Center
Reading, Pennsylvania
Music can be a means of spiritual communication that transcends human understanding. We had such an experience at St. John’s during the Christmas season. As usual, we had a wonderful schedule of events to celebrate the birth of our Lord. I had the privilege to organize and direct an employee choir. We have many gifted and talented employees who blended their voices. We sang a cantata titled “Jesus, Light of the World.” It was a wonderful experience for me, for the choir members and for those who were able to listen to our presentations.

After we performed in the Conference Center at the Annual Employee Christmas Buffet, one of our chaplains told me about a hospital patient who loved music. The patient was terminally ill and not expected to live more than a day or so. The chaplain asked if some of the choir members would go to the patient’s room and sing a few carols.

I sent an e-mail message to the choir, asking all who could to meet me at the patient’s room. Nearly all of the 34 choir members gathered around the bedside of this dying patient. His family was also in the room. We sang the entire cantata for them. We could really feel the presence of the Lord with us. But for the Grace of God I’m not sure how we made it through. It was the most touching and memorable moment of my entire Christmas celebration. I know it was a sacred moment for the patient and his family.
I really appreciate sharing in the Catholic mission and ministry at St. John’s. I’ll never forget this 30-minute experience in which Jesus lit up our corner of the world in song.

JANE OBERT
St. John’s Regional Medical Center
Joplin, Missouri

“It was the most touching and memorable moment of my entire Christmas celebration.”
or many of my clients, when things go wrong, they go catastrophically wrong. This was the situation of a woman referred to me by a perinatal care coordinator at Good Samaritan Hospital. She was a young woman, five months pregnant.

We sat in her living room in near darkness. She trembled as she shared her story with me. She was separated from her husband and complications of the pregnancy made her unable to work. She was severely depressed and had considered terminating the pregnancy. She had no income and no family support. But the worst part, she said, was that she didn’t think God could ever forgive her. She told me that her pastor’s son had raped her at age 13, and she quit going to church.

As a parish nurse, I have the privilege of being a companion to people on difficult journeys. As I took her hand, I felt invited into a very sacred moment with this young woman. Through her tears, she cried out to God for help, forgiveness and peace. We talked about her health, hopes and faith. She told me she didn’t know how to pray. “Prayer is calling out to God from the truest and deepest part of ourselves,” I said. “You’ve been praying the whole time.”

I was blessed to see the beauty of her soul, open and vulnerable. We prayed, talked and cried. As I prepared to leave, I asked if I could give her a hug. She wrapped her arms around me and sobbed. This time, she said, they were tears of relief that she was not alone.

**Mary Kappesser, RN**

*TriHealth*

*Cincinnati, Ohio*
“Prayer is calling out to God from the truest and deepest part of ourselves. You’ve been praying the whole time.”
In times of worry about the illness of a loved one, it is often difficult to focus on the tasks at hand in the workplace. Your mind may be on your work, but your heart is at the bedside of your loved one.

It is also difficult for others to find the right words to comfort you or make things seem better than they are. Part of you wishes you could escape the reality of what is happening or may happen in the days or weeks to come, but you know that it wouldn’t change things in any way.

Recently, my father was stricken with an illness at first believed to be cancer. It was not easy to face this. Why do we grieve? Is it because of the pain and suffering of our loved one, or because of the pain in our own hearts? This is not easy to determine, but once you find a way to deal with the situation, the load gets lighter with time.

My father was not a patient at St. Joseph’s Medical Center because he lives in another area, but I could not have survived this trying time without the support I found among my colleagues. Working at St. Joseph has shown me that there can be faith and love in our daily work life. There is a calmness here that is due to the strong faith that lives in the corridors. You can feel it every day.
During my father’s illness, everyone was kind and caring in a very genuine way. A gentle smile or friendly question about my well-being carried me through each day.

Most important, I was better prepared to accept what was happening to my father because of the strong faith I have developed just by being associated with the mission here at St. Joseph. The mission is so great and so well spoken by the leaders that it renews what can get lost in workplaces that do not include daily prayer and reflection.

The world is a hard and sometimes cold place in which to live and work. Being at St. Joseph is something like a retreat from daily life because we all know that we do not work or grieve alone. As we celebrate the 130th anniversary of St. Joseph Medical Center, I can envision the beginning of St. Joseph’s mission and ministry as if it were still happening. In fact, I am sure it is in some way.

Jeannie Gourgeot
St. Joseph Medical Center
Reading, Pennsylvania

“I was better prepared to accept what was happening to my father because of the strong faith I have developed just by being associated with the mission here at St. Joseph.”
It was another busy night in the emergency department. The exam rooms were full, and the hallways were filled with people waiting to be seen. The staff scurried about performing healing tasks.

Into this ordered chaos entered a distraught young woman, asking for help. We discovered that she had recently obtained her driver’s license. She had hit a bird, which was still alive but stuck in the grill of her car. “I came here because it’s all I could think of to do,” she said.

Our security guard and I accompanied her to her car and found a robin in the grill. The bird seemed to sense that we were trying to help, as it sat very still while we worked its obviously broken wing out of the metal grill. A brief exam and consult with the physician, followed by calls to two veterinary clinics, led us to the conclusion we would have to take care of the bird. The security guard wrapped it in a towel and put it in a box in the security office. The bird took water from a dropper and hungrily gobbled some bugs.

The young woman who brought the bird in was greatly relieved that it had survived, and left after calming herself enough to drive. Several days later she returned to check on the bird, which had recovered sufficiently to hide in a large evergreen on campus. Several days later the bird took flight, and has not sought emergency services again.
Several months later, the young woman returned to visit her grandmother, who was here as an end-stage patient. Through the course of several days, the grandmother’s condition worsened to the point that death was near. After prayer and scripture, the grandmother slipped peacefully away to be with her Lord. After the first expressions of bereavement had passed, the granddaughter and I shared a smile when I said “…and she was of more value than many sparrows.” (Matthew 10:31).

God does indeed work in mysterious ways.

Dixie Kimberlin
Flaget Memorial Hospital
Bardstown, Kentucky

“Several days later the bird took flight, and has not sought emergency services again.”
It was a sultry summer day. Children played in the new water fountain, dedicated to the love given to our health community by the Sisters of Mercy. As I passed the children, their faces seemed radiant with the innocence of their love and I knew I was on holy ground.

“Holy ground?” you might ask me. “How could that be? Have you seen any burning bushes lately on your campus?” I would reply in the affirmative. Rarely an hour goes by that our hospital doesn’t exhibit the love of God.

That day, as the children joyously bathed in the sun and the glistening water of the fountain, a family inside our facility was anguished by words given to them hours before: “The prognosis is not good. Your father only has a few days to live.”

The family joined hands with me around their dad’s bed for a brief prayer service. I asked them to share the things they would remember most about their father. The litany of their father’s love was legion and I concluded with a prayer of thanksgiving and the “Our Father.”

“Rarely an hour goes by that our hospital doesn’t exhibit the love of God.”
Our pastoral care department hands out pewter tokens with a symbol of our faith on one side and a prayer or scripture verse on the other. The tokens have been quite popular as a small gift to individuals who are hurting and want to grasp an item as a remembrance of God’s love. On that evening, I asked one of the patient’s daughters, Christy, to read the scripture verse on the token that I would give to all of her siblings. With tears streaming down her cheeks, she read St. Paul’s words, “Love is patient and kind…It always protects, trusts, and hopes…Love never fails.” (1 Cor. 13:4)

Christy began to break down with her words almost inaudible, “My dad gave me life — and he saved my life!” A moment later one of her siblings came to my side and said, “Dad gave Christy a kidney a couple of years ago so that she could live.” He had literally given and saved her life. That was a “burning bush” experience. Our bush is still burning, yet it is never consumed.

Robert D. Cook, MA, MDiv
Mercy Medical Center
Des Moines, Iowa
leaving seven of their 11 children at their home in rural Mexico, Felipe and his wife, Josefina, took a long-awaited vacation to visit family in Arkansas. The purpose of their visit was to see their four oldest children and gather clothing and other items for the children who remained in Mexico, who ranged in age from 5 to 23 years.

Soon after arriving in Little Rock, Josefina began to have chest pains. A friend decided to take Josefina to St. Vincent Infirmary Medical Center for medical attention. After an evaluation in the emergency room, Josefina was admitted and taken to the critical care unit. She had a blockage that required immediate surgical intervention. Felipe stood by her bedside, terrified for Josefina’s health and for the enormous costs that would certainly be incurred – costs that were well beyond his means.

“Can we take her back to Mexico to do the procedure?” Felipe inquired.

“I’m sorry, but she likely would not survive the trip,” the doctor replied.

A chaplain and translator stayed with Josefina and Felipe and they prayed together. A volunteer came to offer communion. Josefina and Felipe were assured of excellent care regardless of their financial situation.

Felipe went to the health advisor’s office seeking assistance. By chance, a Mexican couple who work at the hospital were in the office, cleaning and performing maintenance. The husband had undergone major surgery only a few months earlier. He offered comforting reassurance that helped calm Felipe’s fears. Another Latino worker stopped in to offer assistance and accompany Felipe back to Josefina’s room.
Josefina had surgery the next morning. Later that week, as Josefina continued to recover, Felipe was being healed, too, at a spiritual level. He was overwhelmed by the great kindness shown to him and his wife. Employees spoke to Felipe about St. Vincent’s mission and values and how they guide the staff to act with reverence, integrity, compassion and excellence in all matters. They explained to Felipe that he and Josefina had provided a special opportunity to bring the healing ministry of Jesus to life.

Many prayers went up for the couple, the illness was corrected and, after a week, Josefina was ready to leave. A social worker arranged for Josefina to receive free medicine for a month: time enough to get home and arrange for care with a physician in Mexico. As Josefina sat on her bed, smiling and lovely, Felipe shared his blessings. “None of this was by coincidence,” he said. “She never showed any sign of being sick before, but we now know she was in danger for a long time. We thank God for bringing us to this place at the perfect time.”

As the couple left, everyone involved was pleased that they had helped heal Josefina and extended loving support that would not soon be forgotten.

Brenda Phousongphouang
St. Vincent Health System
Little Rock, Arkansas
We became friends the first day I worked at Memorial as a certified nursing assistant. Betty was a housekeeper. She was an older lady with long dark hair and she wore butterfly hairpins. She had a hard life. I was just out of high school and preparing to go to nursing school and take on the world.

The work was harder than I thought it would be. Betty was there every time I was ready to give up. She always listened and had the very best advice. By the time we finished talking, we would both be laughing and my problem would be gone. Betty would jokingly tell me, "I took you to raise and you’ll quit over my dead body."

One of the worst days of my life was also the best. On March 18, 2000, Betty passed away and I graduated from nursing school.

Every time I see a butterfly I think of the talks we had and her words of encouragement. She was truly an angel from above who was sent to make sure I finished what I had started.

Melinda Kinsey, LPN
Memorial Health Care System
Chattanooga, Tenn.

"The work was harder than I thought it would be. Betty was there every time I was ready to give up."
Recently, an experience made me glad I work at Good Samaritan Health Center.

It was the Friday before Labor Day. In the morning, I received orders to discharge two patients to their homes and another to extended care. In the meantime, I was managing my fourth patient’s comfort status. Around noon, a post-op patient was added to my roster. It was a normal, busy day.

Shortly after noon, the nursing supervisor came to the floor. She offered to relieve me and the nurse working with me so we could attend a Labor Day prayer service in the hospital chapel. I was hesitant, as I had post-op vital signs to monitor. But the supervisor took my vital sign flow sheet and encouraged me to go. The other nurse and I walked down to the chapel together.

The service allowed me to pause and catch my breath, but did much more than that. The readings spoke of being the light of the world. Sometimes, during a busy workday, it’s easy to lose sight of this: to not even think about what God may be calling me to be. The short chapel service made me ponder why I exist and who I am living for. It reminded me that God is the one who helps me through each day. It is God, working through me and my co-workers, who cares for our patients.

During the service, each of us received a candle. Every time I see my candle, I remember and ponder these truths. I am called to be the light of the world by how I am present in the world.

**Angela Acker, RN**  
*Good Samaritan Health Center*  
*Merrill, Wisconsin*
I have a lot of fun as a member of the Employee Recognition Committee at St. Anthony Hospitals. One of my favorite jobs as part of the committee is distributing prizes to colleagues whose names are chosen in a monthly drawing of compliment cards. In addition, the committee automatically awards gift certificates to associates who receive four compliment cards in a month. During my three and a half years at St. Anthony, I recall that happening just three or four times. So, it was very special when one associate received a record-breaking eight compliment cards in a month. I went to find her to tell her that she was an automatic winner of a gift certificate.

Kathern Golden is part of our float pool and works with different units in the hospital. She is a certified nursing assistant who plans to go to nursing school. I found her in the room of an elderly patient named Jerry. He had just returned from radiology, and Kathern and a few other staff members were putting him back to bed. She told Jerry to hug his pillow like a teddy bear while they moved him. Then, she told him to "push the red button if you need us, and we will be right here." Jerry agreed and seemed relieved.

There was another reason I went to find Kathern – to give her a letter that St. Anthony received that morning. It is printed here exactly as it was written by a former patient. At first glance, it isn’t perfectly written; but on second thought, it is perfect! Kathern lit up the life of this patient with her compassion and excellence:
"I was a patient at your hospital and the care I received while I was there was outstanding but most of all one of your nurses (Miss K. Golden) made me feel like I was the only one in your hospital she knew my fears and eased my pain she would come into my room every day and see that I was alright on my worst day when I had it up to here she did not come in. I figured that she had forgotten about me or got too busy, maybe she had the day off the next day she came in while I was crying and asked me what was wrong I truly believed she cared about me and not having to run away to do something else. She comforted me and then started to sing me a song I think it was “you light up my life” but in reality she was the one who lit up mine. I feel this woman truly knows how to care for the sick you are lucky to have her as a part of your staff and in the future I will always return because I know I’ll get the care I deserve. Thank you, with all my heart."

Anonymous
(To tell you who I am would not be right; just keep up the great job)

Bob Eaton
St. Anthony Hospitals
Denver, Colorado

“…she knew my fears and eased my pain…”
Believe it or not, service excellence was not invented by St. Vincent Health System. From my earliest years, I remember my mother telling me "Any job worth doing is worth doing well,” and “If you start something, you should finish it.” I know these were not her original ideas, but they stuck with me.

At the beginning of my nursing career, I was very idealistic. I had this plan, you see. I was going to bring beautiful babies into the world and let someone else deal with the sick or dying.

Fortunately for me, that wasn’t God’s plan. Oh, I started out delivering babies all right, but they weren’t always beautiful or perfect and they sometimes came into this world sick or dying. And, as hard as I tried, I couldn’t turn away from them. I was drawn to them and often found myself volunteering to take a case no one else wanted.

Later in my career, I worked with adolescents. I thought the mere fact that they were teenagers would harden my heart toward them and free me from all this “feeling” stuff. But, God stepped in again. He put teenagers in the end stages of childhood diseases right in the middle of my path. I cried and hated what was happening to these bright young people, but I loved them. Once more, I seemed destined to care for the most difficult cases. Instead of becoming hardened, I grew softer and gentler.

When I first came to work at St. Vincent, I was a hospice nurse. I worked with hospice patients for more than seven years and learned far more than any book could teach me. You see, when people know they are dying, they feel a freedom to express their feelings. Their insight and hindsight is clearer because it’s not clouded by “when I get around to it” or “I’ll deal with that later.” For them, getting around to it later is not an option.
My growth as a nurse has been far surpassed by my growth as a person. God really did know what He was doing when He directed my path. I’ve learned empathy, compassion and understanding, and my faith has grown stronger. I’ve become a nurse who not only cares for people but about people. My career is no longer how I earn a living; it’s how I live. Everywhere I go there are people hurting and in need. My ministry is to try to soothe the hurts and meet the needs. I get to do a lot of that at St. Vincent, and I honestly love it.

Sharon F. Martindale
St. Vincent Health System
Little Rock, Arkansas

“God stepped in again. He put teenagers in the end stages of childhood diseases right in the middle of my path.”
feel blessed to work with the Giving and Learning Program based at Riverview Place. In 2001, the Catholic Health Initiatives Mission and Ministry Fund awarded a grant to create the program, which connects New Americans (refugees) with senior citizens who mentor them in English language skills and American culture. This work has been touched with little miracles.

The stories from our mentors are inspiring. One woman took a Sudanese family to a swimming pool for the first time in their lives. With the help of their mentors, a number of students have become certified nursing assistants.

While there is an obvious benefit for the New Americans, the other side of the picture is the value received by the mentors. One mentor wrote, "Never in my wildest dreams would I have thought I’d be sitting side-by-side with an Iraqi woman and helping her read and write in English. It has been a real privilege for me to work as a mentor, to realize the determination that refugees must have to be assimilated into our culture and to enrich us by their ways."

One Riverview resident who has been in a wheelchair all her life gave mentoring help to a young Somali woman. The resident said, "My disability has kept me from going to Africa, but Africa has come to me in the name and face of Faisa. Her sweet smile and willingness to learn English is so rewarding."

Every mentor has a unique story to tell. Our outcomes are rarely measured in numbers, but in stories of people giving and learning.

Julie Austin
Villa Nazareth
Fargo, North Dakota
“Never in my wildest dreams would I have thought I’d be sitting side-by-side with an Iraqi woman and helping her read and write in English. It has been a real privilege for me to work as a mentor.”
Sunday, May 4, 2003, was a day of devastation across southwest Missouri and southeast Kansas. Multiple tornadoes dropped from the sky, demolished hundreds of homes and buildings and claimed 16 lives. Many staff members at St. John’s lost their homes, and everyone on staff was affected by the tragic loss of a talented cardiac nurse who was killed when a storm struck her home.

In the somber week that followed, I was surprised to hear a phone message with a young woman’s voice that I didn’t recognize. "Sister Corita, I have to thank you for saving my baby’s life," she said. "Please call me back."

I couldn’t imagine what she meant, but it sounded like welcome good news. When I returned her call, the young woman told me that she and her 11-month-old daughter had been at home on Sunday when a tornado hit their house without warning.

Before she could grab the baby from her crib, the storm tore the roof off their home and ripped the walls clear away. The family’s belongings were scattered across hundreds of square feet. Yet, unbelievably, the baby’s room stayed intact. "The rest of our house was completely destroyed," the young mother told me, "but in the baby’s room, nothing was moved – not the blankets in her crib, not the pictures on the wall. You saved her life!"

"That’s wonderful!" I told her. "But why do you think I saved her life?"

"The guardian angel you gave us was hanging on the wall above her crib," she said. She was speaking of a medallion I give each newborn’s family when I visit them during pastoral rounds and say a blessing for the baby. On the medallion is a beautiful angel holding a baby in her arms. "Well, thank the Lord, not me," I said. "It’s His work and the work of your baby’s guardian angel."

"Oh, I do! I will," she said.
The next week, as St. John’s employees continued to mourn our friend, there was another bright spot in my day. The baby’s parents brought her to the hospital so I could meet her. She was blonde and blue-eyed and gave me a precious smile. When they left I said a prayer of thanks for the baby and her family, and thanked the Lord for all the grateful hearts He shows me through my work as chaplain.

Corita Holmes, RSM
St. John’s Regional Medical Center
Joplin, Missouri

“Before she could grab the baby from her crib, the storm tore the roof off their home and ripped the walls clear away.”
In the renal dialysis unit, we develop close relationships with patients and their families – particularly outpatients, who come for treatment three times a week, sometimes for years. Recently, an outpatient who received dialysis in our unit for eight years passed away.

When we saw the end was near, one of the nurses stayed at his bedside because she didn’t want him to die alone. He lived in a nursing home and had no family. The staff thought it was sad that such a nice man had no one to mourn his passing. We were not sure who would take care of his burial or if there would be a funeral. Upon checking with the nursing home where he had lived, we discovered that he had been buried in Hensley, Arkansas. There had been no funeral. We decided to have a memorial service for him. One of our nurses has a son who is a minister, who was delighted to perform the service.

On the day, dialysis nurses and patients met at the unmarked grave in Hensley, where we placed flowers. When the minister asked each of us to say something about this man, one nurse said we didn’t know for a long time that he could talk. When he did, we asked him why he hadn’t spoken before. He said that he didn’t have anything to say. He only had one leg, but would always do everything he could to help us get him into bed. He enjoyed watching people. One of the nurses called him her boyfriend and he would laugh. He loved to eat, even if it was something that wasn’t on his diet.
Through the years we have attended many of our patients’ funerals, but this was the first time we had arranged a memorial service. All of our patients are special and the thought of one of them passing without some sort of service was just not acceptable. I am sure he is up in heaven and is pleased to know that he touched our lives, and that we are better people for knowing him.

A story about the memorial service was posted on the Wall of Fame at St. Vincent Infirmary Medical Center. An employee who read the story offered to provide our patient with a headstone. I gave the cemetery’s headstone specifications to the kind employee, along with the sentiment we would like on it: “In Loving Memory.”

**Evelyn Howard**  
*St. Vincent Health System*  
*Little Rock, Arkansas*

“Through the years we have attended many of our patients’ funerals, but this was the first time we had arranged a memorial service.”
It was my third day on the job as the director of 500 South, and it was getting late. I was waiting for the elevator so I could go to another floor. There was another man waiting also. Making small talk, I asked how his day was going. With a dejected look on his face, he responded, "Well, I guess my day is going better than my mother’s day." He told me how his mother had been neglected in a nursing home, became ill, and now might not survive this hospitalization.

Busy as I was, I had selfishly hoped my small talk was going to be just that: small talk. But as the man’s story unfolded, he began crying and saying that he was not ready to let his mother go. I felt God telling me that this man needed and deserved my time and compassion. This was a ministry opportunity.

I spent about 40 minutes comforting him, letting him talk, sharing scripture and just being a listening ear. When I finally left work that night, I felt revitalized by knowing that I had ministered to him.

The next night, I was still at work at 7 pm. My charge nurse came to me and hesitantly said, "Paul, a family wants to speak with the director." I knew that this type request is usually followed by family complaints.

I entered the room to find three family members gathered around a patient’s bed. When I introduced myself, they said, "Oh, you just missed our brother. You spoke to him on the elevator last night and really made a difference in his life. We just wanted to thank you for taking the time to comfort him. And also, all of your nurses have been just wonderful to us." Once again, I felt selfish and stupid for assuming that the family who wanted to see me would have nothing but complaints.
Just then, the brother I had spoken with the day before entered the room, shook my hand and hugged me. With a tear in his eye, he whispered, “Thank you so much for spending time with me last night. I’m ready now to let Mother go.”

Next time I am busy or tired and something unexpected comes my way, I hope I will not only think of myself and my needs. I hope I will hear God prompting that “This is someone I have sent to you who needs to be ministered to. Be Jesus to him today.”

Paul Weaver, RN
Memorial Hospital
Chattanooga, Tennessee

“I felt God telling me that this man needed and deserved my time and compassion.”
Hospice is synonymous with death and grief, yet it means something more. It means placing emphasis on living until you die, no matter how much time is left.

Every one of our hospice patients is special and we are humbled to help guide them through a significant part of life, but some patients strongly remind us why we do this work. Recently, we had the privilege of working with a patient, Amy, who exemplified our feelings on hospice.

Amy’s husband had died just a year prior to her own admission to hospice care. Her symptoms were well controlled, and she was able to pursue activities of her choice during her first months of hospice care. Then, during a hospice team meeting, we learned that Amy was planning an early Christmas. Amy wanted to celebrate this wonderful holiday with her children, some of whom lived at a distance, one more time. Because it was uncertain if Amy would be here on Earth on December 25th, Christmas Day in her house was to be September 16th.

In August, her daughter took leave from work to assist her mom with daily needs. Amy began her Christmas shopping from home. Everyone would get a special gift. The hospice team was excited about Amy’s Christmas in September. We called a church, requesting Christmas carolers; one of the hospice volunteers baked an array of Christmas cookies; and Santa planned to pay a visit on “Christmas Day.” Amy’s family prepared to be together for the big day.

On “Christmas Eve,” Amy’s condition became worse, and it was uncertain whether she would live to see her Christmas. Her entire family was gathered at her home. Hospice staff visited, bringing cookies, an ornament, cards and gifts, and wearing Christmas clothing. Many prayers were said that Amy would stay with us on Earth for one more day.
On "Christmas Day," Amy woke in time to hear the carolers. She even sang a few lines with them and ate a Christmas cookie. Our prayers had been answered: the family was able to share Christmas together.

Amy died three weeks later with family at her side. Though their grief will be with them for years to come, they realize that Amy gave them the best gift she could. She gave them peace, understanding, togetherness and appreciation for a mother who lived her life until her last day. Amy and her family also gave our hospice team the gift of understanding why we do this work every day. Together, they embraced and lived the hospice philosophy of care.

**Tana Erbes**  
*Riveredge Hospice*  
*St. Francis Medical Center*  
*Breckenridge, Minnesota*

“Because it was uncertain if Amy would be here on Earth on December 25th, Christmas Day in her house was to be September 16th.”
A Small but Mighty Leader

Sister Margaret Catherine was small, but she was a mighty healer. She worked as a nurse and nurse manager and taught at a school of nursing for many years. She was known for kindness and firmness, and was respected and loved by those she managed and taught. As her nursing career neared its end, she became a chaplain. She loved this work.

After she had been a chaplain for a few years, the worst happened. When she was young, she had been diagnosed with scleroderma, a usually fatal disease of the connective tissues. At the time, she was told she probably had only months to live. She would have none of it. With deep faith, good self care, good medical care and a measure of good fortune, she survived for more than 40 years.

However, when she was in her late sixties, the disease returned and she faced a bilateral below-the-knee amputation. Her hospital course was difficult. She was discouraged by the need for surgery and the loss of her lower legs and feet. Her disease-weakened circulatory system had another nasty trick to play, and she had a devastating heart attack. Yet, she bounced back.

Some thought this would be the end of her career as a chaplain, but they underestimated Maggie, as she was called by those closest to her. The Franciscan Sisters believed she could retire with honor and told the pastoral care director to look for a replacement. The pastoral care department took a different approach: that only Maggie could say when she was ready to quit.

A few weeks later she was back on the job, assigned to the rehabilitation department. Her first contact was with a man who was having a difficult time and giving the staff an equally difficult time. He was angry about his disability and about the hard work he had to do in order to recover. He handled his anger by feeling sorry for himself and blaming others.
After getting a report from the nurses, Maggie rolled her wheelchair next to his bed, threw back the blanket that covered the stumps of her legs, and said in a firm, kind voice, “Tell me, buddy, what’s your problem?” That was the beginning of the patient’s turnaround toward healing.

After a few more years of excellent pastoral work, Maggie went on to claim her eternal reward with the angels of God. She knew that healing comes from God and from within. Her ministry was to call others into partnership with the God who wills us to be and stay well. It was a real privilege to work with her.

Art Schmidt
Franciscan Health System
Tacoma, Washington

"Maggie rolled her wheelchair next to his bed, threw back the blanket that covered the stumps of her legs, and said in a firm, kind voice, “Tell me, buddy, what’s your problem?”
During a routine 9 am prayer at Saint Joseph, a staff member and patient became a faith community of two, comforted by a larger community sensed but not seen.

Melanie Jenkins, an admitting coordinator, was walking a visibly scared patient to radiology when the Morning Prayer came over the intercom system. The patient asked, “Is someone praying?” They stopped walking. They stood together in the hallway and prayed along with the voice on the intercom, which Melanie knew was that of Sister Laura.

“I don’t know how I kept my composure,” Melanie said. “This very young, healthy-looking woman had been diagnosed with a terminal illness the day before and was starting a battle for her life. I don’t remember the exact words of the prayer, but it visibly touched this patient. It was beautiful. The fear was gone from her eyes and she smiled.

“We continued to radiology, and along the way I showed her the chapel and told her it was open to all. She asked if everyone in the hospital could hear the Morning Prayer. I told her that most people could, if not everyone. She thanked me and went on her way.

“It is such an awesome thing to work in a facility that praises God and works with Him to touch the patients. I know that the Morning Prayer helped at least one very scared soul. I keep this patient in my prayers and know that whatever happens is God’s will and that she will be OK.”
Prayer and reflection is a distinguishing and enriching characteristic of our healing environment. Prayer is definitely an “instrument” in our tool kit.

MELANIE E. JENKINS
BETH LLEWELLYN
Saint Joseph HealthCare
Lexington, Kentucky

“It is such an awesome thing to work in a facility that praises God and works with Him to touch the patients.”
t was a beautiful autumn morning. The leaves were beginning to turn their wonderful variety of colors. I was en route to a speaking engagement at the Catholic Women’s League annual luncheon. I am a graduate and advocate for House of Mercy and have spoken about my experiences many times, so this time wasn’t really different than any other.

However, my heart began to pound the instant I walked into the banquet room. I quickly spotted my House of Mercy colleague, as she was the only other person in the room who didn’t have gray hair. I sat beside her and she asked me, “Doesn’t this make you wonder what we’ll be like when we get older?” My question was, “What will they think of my story?”

You see, most of the older people I knew while growing up would not have accepted what I had to say. I was afraid of being rejected by this group of women. I didn’t know it at the time, but this group would teach me more than any substance abuse counselor in the world ever could.

It was our turn at the podium. My colleague spoke about House of Mercy’s programs, then introduced me as an advisory board member for House of Mercy and an accountant with Mercy Medical Center.

My knees trembled as I spoke about a woman who came to House of Mercy with a two-month-old baby in her arms. I told how House of Mercy enrolled her in college and how she now had a future to look forward to. I assured them that I knew the story was true, as I was the woman I was speaking of.
This is where God’s lesson came in, because the group gave me the only standing ovation I have ever received doing advocacy work for House of Mercy. I had been so afraid that they would judge me by my history that I was actually the one judging these wonderful women.

God is in my life today, and I have reached the seven-year mark in my sobriety. I often speak of this event to other groups. It taught me an important lesson about the compassion, respect and forgiveness of humanity. It also helped me realize that it’s not your past that counts, but the changes your future will bring. Everyone makes mistakes and can be forgiven by others, but the most important thing is to forgive yourself.

Connie Daniel
Mercy Medical Center
Des Moines, Iowa

“I didn’t know it at the time, but this group would teach me more than any substance abuse counselor in the world ever could.”
A few years ago, a young woman came into our Family Birth Center. She was about to deliver a full-term infant, but, as happens from time to time, she was truly surprised to find that she was pregnant.

Because she had not recognized her pregnancy, she had been ruptured for days and the infant was born in full septic shock. This very ill mom was in complete denial and repeatedly refused to see the infant who had came from her body.

Her newborn son was in the neonatal intensive care unit for just a few hours when it was determined that he was not going to survive. I spent that evening caring for the child.

When death was near and it was time to extubate him, I had a co-worker place him in my arms, in a warm blanket. I prayed out loud and sang soft lullabies. The baby died in my arms without ever being seen by his mother, but not without love. I bathed his tiny body, and, as we do for all newborns, had pictures taken and footprints made. I then dressed him and prepared him for the mortuary.

The mother refused to help arrange a funeral for the baby. So, I worked with our Social Services staff to set up a small funeral for him. I purchased a sweet and cuddly burial outfit and stuffed animal to accompany him. In the end, his mother came to his funeral, but she was very distant.
The situation broke my heart, but I knew someone had to step in to offer some love and heartfelt care for this child. While studying to be a nurse, I learned to be an advocate for those who are incapable of speaking for themselves. To me, this was an example of following both my training and my heart.

**Chris Wagner, RN**
Saint Elizabeth Regional Medical Center
Lincoln, Nebraska

“The situation broke my heart, but I knew someone had to step in to offer some love and heartfelt care for this child.”
As a parish nurse, my ministry takes me to visit parishioners in their homes, and I never know for certain where our loving God will direct me. A recent call took me to the home of a delightful elderly couple, John and Rose. John was confined to bed, and Rose was at his side almost constantly. The loving glances between them spoke words beyond measure. Comfortable that John’s needs were met, I focused my attention on his wife.

Settling into a recliner, Rose told me that she and John had been married only a few years. Now, she was facing the loss of her companion, friend and lover. She told me that hospice came several times a week, a nurse came to get John ready for the day and settled for the night, and they had nursing assistants 24 hours a day.

I asked Rose what she was doing to take care of herself. She looked surprised and said she didn’t like to leave her husband, so she only went out long enough to get her hair done. Their family brought meals and Eucharistic ministers brought communion, so she didn’t see any reason to leave. I asked a family member who was present about taking Rose out to dinner or even to church, and he nodded
understandingly. When I offered to stay with John so Rose could go out for a while, she said she appreciated my offer and would think about it. We talked a while longer, then it was time for me to go.

As I got ready to leave, I told Rose I had brought something just for her. As I unfolded a knitted shawl, her eyes lit up and she smiled. As I wrapped the shawl around her shoulders she exclaimed, “This is for me? You brought this for me?” I told her I had made the shawl for a Prayer Shawl ministry I hoped to start at church. Rose said, “I am cold all the time because John is always so warm. This is wonderful! I must go and show him.” Her family members said, “Thank you for making her feel special.”

When Rose feels sad or alone in life’s journey, I hope she will wrap up in the shawl and know that she is embraced by God’s warm love and the love of family and friends.

Connie Rotters Blake, MSN, RN
Memorial Health Care System
Chattanooga, Tennessee

“I asked Rose what she was doing to take care of herself. She looked surprised and said she didn’t like to leave her husband, so she only went out long enough to get her hair done.”
In my nursing career, I have cared for many different patients with many different diagnoses, and all of them have touched and enriched my life. One patient in particular had a profound effect on me and renewed my childhood belief that God, through Jesus, is with me always.

In providing care to a group of hospice patients, I came to know and respect a young man, Mike, who had difficulty dealing with his diagnosis and probable early death. We discovered that we had much in common, from our family lives to our education and marriages. Because our spiritual bond was very strong, I was able to provide nursing care to him in a way other nurses could not.

Mike and I talked about faith, sources of spirituality and concepts of heaven. We both believed that in heaven we would see God; be with family members who preceded us; and carry out “living” in the presence of the Lord. So intense were our discussions that Mike was able to totally trust and count on me to help him. We became part of each other’s family, and I became a babysitter for his two daughters and colleague in nursing to his wife.

“The three of us holding hands with Mike were crying, yet smiling, as Mike went willingly with Jesus.”
On a sunless Sunday morning I was called to Mike’s room. He asked me to insert an nasogastric (NG) tube, the one thing he had told me he would never have or accept unless absolutely necessary. I quickly gathered all the needed items. His wife and best friend were already there.

My first two attempts to insert the tube failed. I couldn’t advance the tube down his left nare, which was the more open of the two. I decided to try the right nare, and Mike gently urged me to hurry. Near tears, I looked up at the ceiling and asked for help. Sunlight broke through the gray clouds and the NG tube slipped easily down the very narrow right nare.

Mike took his wife’s hand in his left hand, his best friend’s hand in his right, and asked me to take their free hands. Quietly, Mike expressed his love for each of us and asked us to remember him. The three of us holding hands with Mike were crying, yet smiling, as Mike went willingly with Jesus.

God answered our prayers that day: mine, when I asked for help in providing care to Mike; and Mike’s, when God sent Jesus to bring him home. I will never forget Mike or his family or that day when God reminded me of His love for us through Jesus.

Kate Peires, RN
St. Joseph Medical Center
Reading, Pennsylvania
Daniel was on a downward spiral. He lost his job, was on the outs with his family, was homeless and living under a bridge. He lost his dignity and sense of being; his spirituality faltered. All of this was precipitated by a problem with Daniel’s health. He suffered from severe and relentless abdominal pain. He sought medical attention from local hospitals and clinics, but was consistently given empty promises or turned away for lack of health insurance.

While eating at a local soup kitchen, Daniel discovered St. Clare Medical Outreach. “God led me to St. Clare Medical Outreach,” says Daniel, now smiling and pain free. “They were the only people who helped me. They saw my pain and treated me as a human being. They restored my faith in God.”

St. Clare Medical Outreach is an extension of St. Joseph Medical Center. Part of the Division of Mission and Ministries, St. Clare Medical Outreach is a mobile coach clinic, equipped with two exam rooms, a pharmacy and a small laboratory. St. Clare’s mission mirrors that of the founding sisters of St. Joseph: to provide free health care to the poor and indigent of Baltimore.

The St. Clare care providers recognized that Daniel needed a surgical consult and quickly referred him. Within a few days, Daniel had surgery and recuperated quickly. He was ecstatic that his pain was gone and that he could enjoy meals without the specter of pain. Daniel’s entire being began to change for the better.
Although he no longer needs the services of St. Clare Medical Outreach, Daniel keeps in contact with the staff. He has reconciled with his family and is no longer homeless. He’s gained a few pounds and wears a smile. He started his own landscaping business, creates his own artwork and got married last year.

"St. Clare Medical Outreach made my faith stronger," Daniel says. "I needed help and there they were for me.” Daniel has made the faith of the St. Clare staff stronger as well.

BILL GOUGH, CRNP
St. Clare Medical Outreach
Towson, Maryland

“They saw my pain and treated me as a human being. They restored my faith in God.”
With tears streaming down her face, Dorothy tenderly held Emmett’s still-warm hand. “I can’t believe he’s gone,” she said. Four adult children, their spouses and numerous grandchildren were also gathered around Emmett’s bed. The room resonated with quiet sobs. Emmett, 66 years old, had just died at Mercy Hospice in Des Moines after a two-year battle with lung cancer.

The presence of his absence was everywhere in the room. He had been dearly loved and would be greatly missed. As hospice social worker, I bore witness to the pain of his family. However, they allowed me to bear witness to far more.

Rochelle, one of Emmett’s daughters, spoke through her tears: “Let’s play his song.” What happened next was one of the greatest gifts I have received in my years of hospice work. Rochelle put a tape in a cassette player that was sitting on the mantle. As the song began to play, a sense of hope and victory began to flood the room. Rochelle and many of the others began to sway and dance. Their faces became radiant. Joy came into the room and made perfect friends with sadness. The vigil had become a celebration.

The lyrics were full of hope: “The best of my life is yet to come/Today is the first day of the best years of my life/You ain’t seen nothin’ yet!”

Yo u A i n’t S e e n N o t h i n ’ Y e t!
My eyes brimmed with tears of appreciation for the family that could experience such hopeful joy in the presence of such raw pain. They understood the "already but not yet" nature of Christ’s victory over sin, death and everything else that is wrong with the world as we know it. They knew that God’s grace cannot be defeated, even by death itself. They could envision the lion and the lamb already peaceful together. Their wisdom and understanding re-affirmed my faith.

Thank you, Emmett and family, for allowing me to bear witness.

VICKI VANDERKWAAK
Mercy Hospice
Des Moines, Iowa

“Joy came into the room and made perfect friends with sadness.”
He Stayed With Us Until the Morning

I walked into the softly lit bedroom and saw our hospice patient, Warren, in the bed he’d shared with his wife of 23 years. His was dark hair against the pillow and his salt-and-pepper beard contrasted with the light-colored sheet on which he lay. His shoulders were bare. I thought, "He looks like Jesus." His stomach was sunken beneath his rib cage because cancer had ravaged his body during the previous two months.

This once vibrant man would breathe for 30 seconds, not breathe for 30 more, then start breathing again. It was a long vigil for his family. I thought of Mary and John who stood at the foot of the cross and experienced the agony of watching a beloved son and close friend die. "They must have felt as helpless as this family does at this moment," I thought. I felt helpless, too. There was nothing I could do except provide a caring presence.

We recited Psalm 23, including "He makes me lie down in green pastures." I thought of the green pastures of Ireland. Warren had hoped to go to Ireland but did not make it. He had told us he thought he would die on Tuesday. He had meant a Tuesday a few weeks past, but his strong heart kept beating. I softly told him it was Monday in North Dakota, but already Tuesday in Ireland. He did not respond. His wife, his daughter, his son, the hospice nurse and I continued the vigil.
It began to rain outside. Warren was a civil engineer who was known as "the water man." I thought the rain might be a sign that Warren was ready to leave us and go to his heavenly home. Thunder clapped loudly, but Warren remained. The rain stopped, but his breathing did not. There was peacefulness as hymns from a CD filtered through the earphones near Warren’s head and candles flickered. When we spoke, it was in reverent, hushed tones.

Warren kept breathing until it was Tuesday in North Dakota as well. One of his favorite expressions was “Top of the day to you,” and he stayed with us until the morning.

I knew that I stood in sacred space, on holy ground, during the time I was blessed to share with this patient and family.

Sandie Nicolai
Carrington Health Center
Carrington, North Dakota

“I softly told him it was Monday in North Dakota, but already Tuesday in Ireland.”
Gifts come in a variety of packages. Working with hospice patients and their families, we are privileged to witness the gifts of wonder and insight that can come at the close of life.

One Wednesday morning, we gathered in the hospice office before our bi-weekly interdisciplinary team meeting. As we prepared to go to the meeting, a staff member came in and said, “Jill, there is a cake for you at the front desk and the woman who made it is waiting to see you.”

Jill went to the front desk while the rest of us went to our meeting. A few minutes later, Jill joined us with a red velvet cake and told this story:

During the past summer, we had cared for a young woman who had a terminal diagnosis of cancer. She made a list of all she wanted to accomplish before she died and systematically worked through it. Some of the items were flying in a float plane and landing on Potato Lake; reconciling two siblings who she felt were estranged; and visiting the headwaters of the Mississippi River one more time. Also on the list was “bake a red velvet cake for the hospice interdisciplinary team meeting.” However, she died before she could bake the cake. Her sister, Ruth, took the list and tried to complete the items that were left. Ruth baked the red velvet cake two days before Christmas in 1999.
The cake was a gift in itself, but the true gift was that it helped us remember our wonderful patient. The cake was also a gift of self and time that Ruth could give her sister, even after death. We were moved to tears and felt we had received an illustration of the most wonderful gift of all: the gift of love.

Chris Broeker, Kim Barr, Jill Grimes, Suzette Free, Lucinda Peterson, Bob Light and Iva Thielges
St. Joseph’s Area Health Services
Park Rapids, Minnesota

“She made a list of all she wanted to accomplish before she died and systematically worked through it.”
Dream Catcher

We were reminded of a moving moment by a recent communication from the mother of an infant girl who was our patient some time ago. The infant, C.J., had a terminal genetic disorder and spent her early months in our neonatal intensive care unit. Ladonna Tool, RN, and I grew especially close to C.J. and her mother. Knowing them turned out to be an in-depth cultural learning experience.

C.J.’s mother explained that it is a Native American custom to hang a “dream catcher” on the wall to capture bad spirits. So of course, we helped her hang a dream catcher. Soon after, we noticed a branch of sage taped to the crib. Later, there were eagle feathers around the room. As we all grew into the experience, we thought we were prepared for just about anything. Then, C.J.’s family requested something quite unusual for us – that a medicine man be allowed into the unit.

It was important to the family that the medicine man hold a ceremony to assure that C.J. was led along the proper path into the spirit world. The most wonderful and moving ceremonial dance and chanting took place at the baby’s bedside, our staff joining with the family.

More than two years after C.J.’s death, her mother stays in contact with Ladonna and me. Each time we hear from her, we remember C.J. and the learning experience she brought us and say another prayer for her, now among the spirits of her ancestors.

Kris Schwarzkopf, RN
Saint Elizabeth Regional Medical Center
Lincoln, Nebraska
As a volunteer interpreter at Mercy Medical Center, I was called to the emergency room one Saturday night. A couple from Germany was visiting Durango to celebrate their 25th anniversary. The wife became terribly ill shortly after arriving in Durango. The hospital transferred her to intensive care and ran tests to determine whether she had experienced a heart attack.

As I acted as a translator, the patient told me she was worried she would die and wanted to see a priest. I called a staff chaplain who is also a priest. He gave the patient communion and was performing the anointing of the sick when he asked me to join them. I said, "But I’m not Catholic, I’m Lutheran." He said, "That doesn’t matter. You are part of the family now."

After prayers were said and test results showed the patient would be fine, her husband mentioned how sad he was to miss seeing the fall colors and tourist attractions of the area. I said, "Let’s jump in the car and drive up the mountain so you can at least take pictures." As we rose from the valley, the gorgeous fall colors got more spectacular. We were all the way to Silverton before I remembered I hadn’t told my husband where I was going!

Fortunately, the patient healed well. The couple’s insurance was so good that a doctor was sent from Germany to accompany them home. The husband was grateful that his wife recovered and delighted that he got to see a little bit of Durango and take pictures to share with his wife.

Brigitte Cunningham
Mercy Medical Center
Durango, Colorado

"I said, ‘But I’m not Catholic, I’m Lutheran.’
He said, ‘That doesn’t matter. You are part of the family now.’"
Recently, I saw a bumper sticker that said, "My boss is a master carpenter." This made me think. I do believe that Jesus spent the majority of his life on earth in the workplace. We read in scripture about how a large part of his work as an adult involved healing of the sick or disabled. However, I believe Jesus engaged in another kind of healing even before starting his public ministry.

We know that by the early age of 12, Jesus had started to work toward the mental healing of the religious leaders of his day. This is important to me because this kind of healing touched my life in a powerful way.

I worked for many years in an organization that encouraged employees to express an on-the-job commitment to the spiritual mission it embraced. My own job responsibilities included printing religious materials, training students and providing daily devotionals. Sadly, over time, the genuine sense of vision and mission that had once enlivened the organization began to fade. When that happened, I felt a tremendous loss of spiritual focus in my work life and found myself in need of mental healing.

Then a wonderful thing happened. I applied and was hired for a printing position at St. Anthony Hospital. During my interview I learned that this organization believes its spiritual mission is core to its purpose and function. I learned that each day would begin with a Morning Prayer. I found myself coming alive again when I heard the mission statement of Catholic Health Initiatives. A true sense of mission was coming back into my work.
I have been at St. Anthony Hospital now for several years. I have found acceptance and appreciation for my skills and talents. I sincerely believe that more healing goes on here than just the physical healing of our patients. When we lift up a fellow worker who is feeling down, that’s healing. When we encourage the discouraged around us in the workplace, that’s healing.

Jesus healed us first, and through the example of his life showed us how to heal in many different ways. This is what makes it possible for me to continue, in my own way, sharing in his mission on Earth. It is my hope and prayer that St. Anthony Hospital will remain strong and bold in its mission, no matter what lies ahead.

Don Zeigner
St. Anthony Hospital
Pendleton, Oregon

“I sincerely believe that more healing goes on here than just the physical healing of our patients.”
Lucas, the son of one of our staff members, was diagnosed with cancer when he was three or four years old. Co-workers asked to visit him and his family at their physician’s office. When I arrived, they shared the devastating news with me. I offered them support and prayer.

I was with the family the day Lucas had surgery. Lucas was a real fighter. He was one determined little guy. I visited him often to provide support and encouragement, as well as to offer prayer. His chemotherapy and doctor visits were hard on Lucas and his family, but his determination kept everyone going.

When Lucas was ready to come home, his friends bought him a trampoline. When I went to see Lucas at home, he was lying on a couch with a long face, hooked up to his IVs. I asked if I could do anything to make him feel better. He asked if I would jump on the trampoline for him. I hesitated, as I am not known for my athletic abilities. Then I thought, “I can do anything for this little boy.”

We lifted him off the couch, IVs and all, and took him out to the deck. I proceeded to jump on the trampoline, and he just giggled. It tickled my heart. Of course, I put on a little show, too.

At a health care picnic this year, Lucas made my day. He came over with a great big hug and a smile for me. He is now a happy, healthy 10-year-old boy who enjoys playing baseball, just like all the other children his age. What a true blessing from God.

Phyllis Knutson
St. Francis Medical Center
Breckenridge, Minnesota

“He asked if I would jump on the trampoline for him. I hesitated, as I am not known for my athletic abilities.”
Sandie’s Miraculous Hands

t. Elizabeth Health Services is a place of miracles. That is not to say that what happens here is necessarily magical, but that willing people are used to carry out the healing ministry of Christ. As someone has said, our hands are the only hands God can use to touch people on Earth. I believe that He is truly using Sandie’s hands.

To look at Sandie’s hands, you would never imagine that they perform miracles. But these hands collect stuffed animals, wash and repair them as needed, and give them to the emergency department so they can be used to comfort frightened children. These hands, worn by years of hard work, reach out to hug suffering co-workers. These hands serve meals at the local Compassion Center.

These hands tie bells on Sandie’s shoes every holiday season to remind people that we have a reason to celebrate and a need to rejoice. These hands scrimp and save so she can give a gift to those who might not otherwise receive. These hands wipe tears away when the pain of the world overwhelms a lonely soul.

Recently, Sandie received a gift certificate to the restaurant of her choice for demonstrating St. Elizabeth’s values. She called me to ask if she could give the certificate to a co-worker who had a financial struggle. This time, her hands wiped away the co-worker’s tears of joy and thankfulness.

St. Theresa’s Prayer says, ”May today there be peace within, may you trust your highest power that you are exactly where you are meant to be.” I believe that Sandie and her miraculous hands are exactly where they are meant to be!

Jerry D. Nickell
St. Elizabeth Health Services
Baker City, Oregon
My 86-year-old father was diagnosed with leukemia in April 2002. Though he was advanced in years, he had been sick about four days in his whole life.

I knew this was going to be a difficult course. Most of his hospitalizations would be in Des Moines, and because I am a nurse at Mercy Medical Center, I would be available to help him. The challenge was that he lived 100 miles away, in Centerville, and would have to go alone to the local hospital for blood tests and treatments each week. Even though he lived independently, he was very hard of hearing. I prepared him as best I could for his outpatient visits. I also touched base with the nurse who would be there to help him. Her name was Mary Lou.

Dad’s outpatient visits went well. One day I went to Centerville to accompany him to the oncology clinic. Winter had progressed and bitter cold lingered. I noticed that he wore a heavy winter coat. We had encouraged this for years, but he would only wear a light jacket, regardless of the weather. I realized he was losing weight and his blood level was low, so I assumed that was the reason he was wearing the coat.
When we arrived at the clinic, Dad refused to take off his coat. He was looking around like a child on Christmas morning. I didn’t understand why he was acting that way. Finally, I saw a big smile on his face and I knew the reason. Mary Lou, the nurse, was coming down the hall. She walked over to Dad, touched his collar and said, “Now, this is a winter coat!” Dad laughed and laughed. She had told him on his previous visit that next time he came in, she wanted to see him in a real winter coat. Dad told me this story over and over and laughed every time.

Dad died, probably without knowing Mary Lou’s name. He referred to her as “that nurse.” But he knew to look for her every time he went to the clinic. He trusted her, and her great nursing skills and little acts of kindness made him comfortable. She gave an elderly man joy at a time when he was tired, scared and dying. It would be great if every adult child could find a “Mary Lou” to help care for their parents.

Mary Jo Staniger, RN
Mercy Medical Center
Des Moines, Iowa

“When we arrived at the clinic, Dad refused to take off his coat. He was looking around like a child on Christmas morning.”
Making postoperative phone calls can be repetitive, but on one such call a patient shared God’s faithfulness and how important the smallest of things can be to patients in times of stress and need.

I had asked the patient all the post-operation survey questions and followed with a standard, “Is there anything else I can help you with?” Unexpectedly, she said, “Yes, can you tell me where to get the artwork you have in your pre-op area?”

“I want to share this story with you,” she said. “I was married for almost 50 years and lost my husband two years ago. I asked God to show me a sign that he would help me through this difficult time. Soon after, God started showing me one of my favorite things, monarch butterflies, at times I was low. During one particularly rough patch, I noticed black objects floating above my house. On closer look, I realized they were monarch butterflies on their yearly migration. They chose my house as a place to stop and rest for the night. My neighbors took pictures and we gazed in awe at the spectacle.

“I’m sharing this with you because I was very nervous about my surgery. I prayed to God to show me that it would be OK. When I was getting dressed in my pre-op room at St. Catherine, my sister yelled, “Oh, look!” I was so surprised to see a large print of a beautiful monarch butterfly in flight on the wall. I knew that God was answering my prayer yet again. Given all the empty pre-op rooms, what were the chances I would end up in that one? So, I would like to get a copy of the print to remind me, because it was then I knew I was in God’s hands and that everything would turn out all right.”
What a blessing it was to hear this story! It reminded me that in the everyday routine of life, the little things can mean so much. Nothing we do for our patients is ever wasted. The print on the wall, the comfort of a warm blanket, a word from a caregiver, a thoughtful reply, a heartfelt hug...all can remind us that God is faithful and there to comfort. It has helped me remember that even when my day is not the best, my patients and God are watching, and the smallest thing I do can make all the difference.

**Kayla Hillery**
*St. Catherine Hospital*  
*Garden City, Kansas*

“I was so surprised to see a large print of a beautiful monarch butterfly in flight on the wall. I knew that God was answering my prayer yet again.”
My patient was dying. She knew it. Her children who had gathered from around the country knew it. And I, her chaplain, knew it. She had lived every one of her 90-plus years independently and fully. She had been involved with her church and charity work, neighbors and family. She had always been at the center of the activities and in charge of the events. Now she lay in her bed, waiting.

"I’m scared," she admitted to me.

"It is scary," I agreed. "You’ve never been here before." I struggled for words that might comfort this dear, honest, dying woman. As so often happens, the patient led the chaplain.

"Look at what I have around my neck," she requested. I bent over the bed and looked at what she had clasped in her hand. It was a simple metal cross hung on a black leather cord. "My priest loaned it to me last night," she said. "When he came to see me, I was very agitated. I guess I was thinking about what’s next and I couldn’t calm down. He’s letting me wear his cross for a while."

"It’s beautiful," I said. "Does it help you?"
The patient was quiet for a moment and then said softly, "Yes, it does. See, all I can do right now is hang on to the cross."

Tears welled up in my eyes as I replied, "That's all any of us can do. We just hang on to the cross."

When I checked on the patient a few days later, I found her very near death. She was asleep and peaceful. As I looked closer, I saw that she still had the black leather cord around her neck and the cross clasped in her hand. She was hanging on to the cross all the way to the end.

Betsy Kammerdiener
Memorial Health Care System
Chattanooga, Tennessee

"That’s all any of us can do. We just hang on to the cross."
The Goose and the Man

I first met Claude in his rural home while visiting through the Appalachian Outreach Program of Saint Joseph Hospital. Claude is a kind and caring man who is facing a very serious illness.

As we talked, I heard honking outside, as if a flock of geese kept flying over the house. It was a little unusual, but it was spring and I figured they were heading north for the warm months. After a lovely visit, Claude and I walked out into the yard, and there sat a huge Canadian goose, who had been making all the noise.

The goose, named Buddy, did not trust me but waddled over to Claude for attention. I asked him how he came to have a wild Canadian goose in his front yard. He said that 11 years ago he brought the goose home to his elderly father, Virgil, who immediately became attached to Buddy. They were inseparable, with Buddy laying his head on Virgil’s leg in adoration and devotion. Virgil died several years ago and Buddy transferred his love to Claude.

Some weeks later, I returned to see Claude and met his wife, Rose. After visiting for a while, I asked about Buddy. Rose said when she and Claude had visited the family cemetery, they found Buddy on guard. Buddy flew down and hit Rose on the head with his feet when she tried to tidy the cemetery. I asked why Buddy was so territorial, and Rose said that Virgil is buried there. When Virgil was buried, Buddy followed the hearse to the cemetery and then stayed on the grave for four days and nights, and to this day he guards the grave.
I thought about how this dear Canadian goose has brought so much joy to two men, father and son. The goose became a metaphor for the service and reverence we need to provide to those who are sick.

As I drove down the curvy mountain road, I thought about how awesome God is in His creation of all creatures great and small. We need them all.

Jeanie Lawson, LSW
Saint Joseph HealthCare
Lexington, Kentucky

“The goose became a metaphor for the service and reverence we need to provide to those who are sick.”
The Joy of Polka

Polka music was part of my youth and part of the joy families and friends shared back then. The name Kucera was familiar to me from those days, too: Mr. Kucera had played in a local polka band.

That name from the past came to my attention recently when I got a call from my father. He told me he read in the newspaper that Mr. Kucera had been in a fire and was now a patient in the Saint Elizabeth Burn Center, where I work.

I wasn’t Mr. Kucera’s nurse, but I just had to talk with him. Through our conversation, I learned that his wife was in poor health and the rest of the family was busy caring for her, so his visitors only came on Sundays. Suddenly, my ear caught the sound of the pop music our staff enjoys in the break room. A thought struck me: I knew pop music was probably not what Mr. Kucera would choose, but my mother had given me some old polka records to convert to cassette tapes for her. I decided to make a polka music tape for Mr. Kucera, too.

“I knew pop music was probably not what Mr. Kucera would choose, but my mother had given me some old polka records to convert to cassette tapes for her. I decided to make a polka music tape for Mr. Kucera, too.”
He appreciated it. He told me so in words and with his eyes and smile. Our team was good about playing it for him regularly. In fact, at shift changes there was often a note reminding someone to play the polka tape for him.

Unfortunately, his condition deteriorated. But even when he no longer responded to verbal stimuli or even painful stimuli, his nurses would often see his foot tapping to the music.

This has become one of my fondest memories of what it means to be a nurse. After Mr. Kucera died, his family said they were so affected by this act of personalized kindness and caring that they wanted to keep the tape.

Pam Wiebelhaus, RN
Saint Elizabeth Regional Medical Center
Lincoln, Nebraska
We will all remember where we were, what we were doing and how we felt when we heard the shocking news on Tuesday morning, September 11, 2001. Like others in our country, I was horrified by what I saw on television.

Calls for help went out to Americans across the country. I received such a call the second week after the terrorist attack on New York City. I am a certified professional art therapist who specializes in trauma at CARITAS Peace Center, one of the nation’s largest psychiatric hospitals. I was asked by Crisis Management International to travel to New York City to offer counseling to people affected by the attack on the World Trade Center. There was no way I could not go. As someone trained in critical incident stress debriefing, this was my mission, to help others find their way in the journey of healing.

I worked with many people, both in groups and individual sessions. Some of the people I worked with lived in the vicinity of the Twin Towers and had not been able to go back to their homes. Many had lost spouses, co-workers, friends and acquaintances. Everyday things, like the sound of an airplane or emergency siren, cause them to relive the terror of that day. They were struggling, and many will continue to struggle for a long time as they deal with their fear and horror. The trauma they experienced is difficult for those of us not directly involved to comprehend.

Someone asked me if would I go back if called. Without hesitation, I would go. Like many other Americans, September 11, 2001, gave me cause to evaluate my life, strengthen my faith and renew my spirit. Serving those affected by the tragedy has helped me in my mission to help others find their way through the healing process.

Marybeth Orton, MA, ATR, CPAT
CARITAS Peace Center
Louisville, Kentucky
“I was asked to travel to New York City to offer counseling to people affected by the attack on the World Trade Center.”
On a winter day, upon entering the hospital’s imaging department, we are each ushered to a dressing room. We are told to put on two hospital gowns, one tied in the front and one tied in the back, so nothing shows that shouldn’t. In the hall there is a row of chairs where we sit like identical birds on a telephone line. We are strangers, waiting for our call to the imaging room.

One bird has put on both gowns the same way, tied in the back. She shivers, and her back is exposed to the cool air. Gently, the bird next to her pulls the cloth together, ties it, and tucks the rest in so she no longer feels the chill. After all, birds of a feather must stick together!

We begin a conversation in the language of illness, describing previous tests that you’d never hear about in polite company. Laughter enters, making the unbearable bearable and the unthinkable maybe not a reality. We’re sitting at a common table of apprehension, pain and discomfort, wondering if the indignities we have to suffer for tests will bring definitive results.

It’s my turn, and lying on the imaging table under a warm blanket for a few minutes is not too bad. Pain enters the scene as a catheter is inserted into my arm, then the pain leaves. A very kind young woman who treats me like her own grandmother takes numerous images. She tells me, “Now, baby doll, you just take a snooze, and I’ll wake you up when we’ve finished.”
Upon entering the corridor again, four of the birds — my friends now — are still sitting in the chairs. After getting dressed, I walk out and say to them, “May we all be well by the time the daffodils and tulips bloom.” A chorus of “I sure hope so” rises. A large gentleman gets up, hugs me, kisses my face and says, “God bless you, little lady.”

I walk away knowing that while this is the only encounter we “birds” will ever have with each other, we were able to provide strength, courage and laughter to each other for the day’s journey, and that is ministry in its purest form.

“By this shall all know that you are my disciples, that you have love for one another.” (John 13:35)

Nina H. Lee
Flaget Memorial Hospital
Bardstown, Kentucky

“We begin a conversation in the language of illness, describing previous tests that you’d never hear about in polite company.”
They have been in five or six medical centers for her heart-related problems, but Frank said Saint Elizabeth is the place that has had the deepest impact on them.”
Their motor home stood sentry in our parking lot, waiting for the two peas to return to their pod. But, Eleanor’s heart problems worsened. “She was so weak, but I never counted her out,” said Frank. “I knew we’d pull through this.”

Weeks passed and November rolled around. Frank had hoped to have Eleanor home for their 49th wedding anniversary, but he knew Christmas was a more realistic target. The staff conspired for days to set up a special seafood dinner for two (an Eleanor and Frank favorite) to surprise them on the evening of their anniversary. “I walked in and there was a table with a tablecloth, candles (battery powered), two Champagne glasses (full of a bubbly soft drink) and a wonderful meal,” said Frank. “I had thought I was going to spend our anniversary on the phone, updating people on Eleanor’s condition.”

Tears pooled in his eyes. “You probably don’t think about it, but everything you do here has such an effect on people,” he said. “I’m a much better person for having come here and had this experience. I knew that the Good Lord and the people at Saint E’s would take care of us. I thank them for all they do every day for us, and for every patient here.”

Jo Miller
Saint Elizabeth Regional Medical Center
Lincoln, Nebraska
I remember Anna as an energetic five-year-old girl dancing at her cousin’s wedding, proud of her new flowered dress and without a care in the world. She became sick the next day with flu-like symptoms. After four days and many trips to the doctor, she was home with a diagnosis of a malignant brain tumor.

We admitted Anna to our hospice service. It is always hard to care for terminally ill children. I thought of my daughter, who was the same age as Anna, and the child with whom I was pregnant.

From the beginning, I knew that Anna’s family found strength in their faith. They did everything they could to keep her days as normal as possible.

I can still hear her mother say in a soft and gentle voice, “Anna honey, when Jesus and the angels want you to come and play with them it is OK. You can go play with them.” At first Anna said, “Mommy, you come too!” But her parents would simply reassure her. I witnessed her family’s deep love for Anna and for our Lord.

Anna failed rapidly. She lost her motor ability and speech. Her parents carried her everywhere and provided her with so much love and compassion that it was glorious to be in their presence.
Our staff hoped for a miracle to change the course of fate, but it was obvious this would not happen. One evening, the parents summoned the hospice nurse, concerned that Anna was having seizures. Anna’s movements did not last long. During the night, with her parents at her side, she peacefully stopped breathing.

Her mother and father spent a long time rocking her sweet body and talking. It was comforting sight. Her father said, “Anna wasn’t having seizures. She saw Jesus and the angels and she went to play with them.” No eye was dry, no heart untouched. Everyone’s faith was enriched through the selfless love taught by Anna’s family. Anna was buried a few days later wearing the same dress she had worn to her cousin’s wedding.

Deb Schweitzer RN, BSN
St. Joseph’s Hospital and Health Center
Dickinson, North Dakota

“Everyone’s faith was enriched through the selfless love taught by Anna’s family.”
he had a way of seeing a glimmer, a little piece of potential inside someone.
She would pull it out, hold it up and show you what she saw.”

Sharon Hershberger, longtime friend and employee

Life and death go together, and we all know it. This reflection is about the impact that Linda H. Culp had on my life and the life of Marymount Medical Center in 16 short months; the challenges and lessons that we all shared through her life and death.

I met Linda early in 2002. She was a candidate for chief executive officer of our hospital. The questions that ran through my mind were, “Can this little woman turn this place around? Do I want her to be my boss? What will she be like? Will she be fair? Will she have integrity? Will she care about us as individuals and as employees?” Little did I know that not only would she turn around this organization, but my life as well.

After Linda became our chief executive officer, we felt as if a tornado had landed in the middle of us. Her energy, excitement and enthusiasm for accomplishment were more than most of us could imagine. The enthusiasm she inspired in all of us to make Marymount the best health care facility in southeastern Kentucky was unstoppable. Her vision was infectious; we either caught it or stepped aside to allow this “tornado” to get the work done.

A few months ago, Linda died much too suddenly for most of us to understand. Unfortunately, she didn’t die of natural causes, a long illness, or anything else you might expect a 54-year-old to die from. Linda died as a result of a homicide: a senseless act that ended a precious life. No one will ever know the burdens she carried, as she carried them so gracefully. Yet, she had become one of us. She laughed and cried with us, remembered our birthdays, knew our likes and dislikes. She celebrated with us the successes of an improved profit margin and great employee satisfaction scores.

However, her death reminds us that we are never promised tomorrow. We must live life fully and leave no stone unturned. This is exactly how Linda lived, working hard and celebrating accomplishments; and, while celebrating, planning the next project.
You might ask, "So what? Why share all of this? We know we will die; why remind us?" That’s exactly what I want you to think about. Death is a part of life, and life is all about learning. Our Marymount family learned much about ourselves, our choices and more because of the life we experienced with Linda.

Here are some of the lessons I learned from Linda:

- Be thankful.
- Be selective in decision-making.
- A quality end product requires daily care and nurturing.
- Measure life by slowly building values and character.
- Don’t impose on others. Learn to be self-sufficient.
- Make do with what you have. Enjoy the simple things in life.
- When a job needs to be done, step to the front of the line.
- Don’t procrastinate — just do it!
- Don’t expect others to do what you can do yourself.
- When the going gets tough, keep going.

The most important lesson I learned from Linda is the impact one individual can have on others: an impact so great that the lessons taught are incorporated in the small things and the big things of life without question or pause. Is there any better way to say that the life of Linda H. Culp made a difference?

Robert W. Nolan
Marymount Medical Center
London, Kentucky

"After Linda became our chief executive officer, we felt as if a tornado had landed in the middle of us. Her energy, excitement and enthusiasm for accomplishment were more than most of us could imagine.”