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“I am always amazed by the stories of real people living out the mission and vision of Catholic Health Initiatives.”

These are the words of one of the authors of this, the tenth edition of Sacred Stories. We couldn’t agree more. Sacred Stories is so special simply because the stories are written by members of the Catholic Health Initiatives family who are able to capture fleeting moments of lived spirituality and translate them into words. The fact that these authors are willing to share their stories gives all of us a resource for finding deeper meaning in our work.

When Catholic Health Initiatives published the first edition of Sacred Stories in 1999, no one knew how many volumes would follow. So far, we have found no limit to these expressions of spirituality at work. Each edition brings new perspectives on the work of Catholic Health Initiatives and on our culture, which is grounded in spirituality.

We are very pleased to share this tenth edition of Sacred Stories with you. As always, we thank the authors for sharing stories that they treasure, which we are now able to cherish along with them.

**Kevin E. Lofton**, FACHE
President and Chief Executive Officer
Catholic Health Initiatives

**Thomas R. Kopfensteiner**
Senior Vice President, Mission
Catholic Health Initiatives
Introduction

Since 1999, Sacred Stories has been a true and treasured reflection of the ministry culture of Catholic Health Initiatives. This tenth edition expands our collection of remarkable stories that exemplify Catholic Health Initiatives’ core values in action. As such, it promises to remain a source of inspiration, reflection and prayer for many years to come.

Sacred Stories are heartfelt stories of moments of lived spirituality at work. Their power comes from the fact that they are written by real people: employees, physicians, volunteers, board members and others who carry out the mission and vision of Catholic Health Initiatives every day.

Each story in this edition is followed by a question or two, designed to help readers reflect and consider how the message of each story might apply to their own lives and work. We hope you will find these questions to be helpful as you read the stories and think about the precious moments of spirituality captured within.
One Saturday, I headed to Petit Jean State Park to hike and enjoy the beautiful views God has given us here in Arkansas. I returned home late, and heard my work phone beeping. The message was that St. Vincent was in disaster mode due to Hurricane Gustav. The hospital needed extra personnel to help in the emergency department.

As a diabetes educator, I thought, “What could I do to help?” But God quickly reminded me, “You were a nurse before you were an educator. Go!”

I was scared out of my mind, so I said a prayer on the way to the hospital: “Lord, please guide my hands today and be with those who are being displaced.” When I arrived in our brand-new emergency department, I was instructed to do assessments of the evacuees. It didn’t take long to get into a routine. Everyone worked together to admit patients as quickly as possible. Admissions staff, nurses, doctors, pharmacists, central supply staff, medical social workers, housekeeping staff, our chief nurse and our chief executive officer were all there. But, the staff members who touched my heart most were the chaplains.

The chaplains went to the frightened, displaced patients and prayed with them, which helped calm them. One lady told me, with tears in her eyes, that a chaplain had already spoken with her and had called her husband. When the Louisiana hospital in which she was a patient was evacuated, she couldn’t reach her husband and she didn’t have a cell phone. She said that when the chaplain reached him, her husband broke down and cried because he hadn’t known where she was and was so relieved to know she was in good hands. Later in the week I met this patient’s husband, and he spoke highly of the chaplain for calling and reassuring him.

Later in the evening, as the last planes from Louisiana landed, I was assigned a patient in her late 80s who was scared and confused. She was fighting us, convinced that we had kidnapped her. A chaplain and
a pharmacy technician came in. With very calm voices and mannerisms, they calmed the lady until I could do what I needed to do to help her. I don’t think any of us could have done what we needed to do if the chaplains had not been there to keep patients calm — and keep us calm as well.

I will never forget the teamwork and excellence displayed at St. Vincent the weekend we took in more than 60 evacuees from Hurricane Gustav. We all pulled together for the good of those in need, and I was honored that God had told me, “Go!” What I experienced that weekend exemplified St. Vincent’s values of reverence, integrity, compassion and excellence. I think the Sisters of Charity of Nazareth would be proud. Being part of what we accomplished that weekend was truly a blessing in the midst of disaster.

Lisa K. Johnson, BSN, RN
St. Vincent Health System
Little Rock, Arkansas

“I was scared out of my mind, so I said a prayer on the way to the hospital.”

Questions for Reflection

When has God said “Go!” to you, even though you may have been unsure, anxious, or even frightened?

When has a team accomplishment been a true blessing in your life?
Mark Bowman had just come to work when he heard the sound of water spraying. Flipping on the lights in the laundry, he saw steam in the air and water pooling on the floor, already a couple of inches deep. It was hot, too. A two-inch hot water hose that feeds one of the giant washing machines had split.

He looked for a way to get to the shut-off valve, but there was no dry or safe path. The water was rising and coming close to electrical components. After alerting co-workers, Mark waited for the water to cool enough for him to wade through it to the shut-off valve. When the water was still a bit too hot for comfort, he jumped in its path and closed the valve.

Mark’s quick thinking saved Holy Rosary a great deal of time and expense in repairs, clean-up and downtime. He was very humble about it. “Oh, it was no big deal,” he said.

No big deal for him; but it was for our facility. The beauty of a place like Holy Rosary is that there are a lot of everyday, unsung heroes and teams of heroes who make large and challenging tasks “no big deal:” from the tons of laundry we process, to the innumerable trays of instruments we sterilize, to the mountains of supplies that are moved around the building, to the hundreds of meals that are prepared and the pile of help-desk tickets handled by our information services department. A small army works behind the scenes to keep our doors open each day. While they are busy performing their miracles, the hospital hums right along, and most of the time no one else is aware of the problems overcome on our behalf.

The people who work behind the scenes to support our great care serve our mission exceedingly well! Ask Mark Bowman, dripping with water, about our mission. He’ll tell you it’s just part of his job, and no big deal.

Rev. Mark Lane Bekkedahl
Holy Rosary Medical Center
Ontario, Oregon
“There are a lot of everyday, unsung heroes and teams of heroes who make large and challenging tasks ‘no big deal.’”

Questions for Reflection

Who are the unsung heroes in your everyday life?

How do you relate your everyday job as contributing to our mission?
Oscar and I developed an immediate connection, as though we had known each other for years. He was however, my hospice patient.

Oscar educated me about life, and, at the end, he shared with me his death. We used to hold hands as he told me stories about his wife, family, the war and his work. We shed tears as he questioned the seriousness of his disease and envisioned his life coming to an end.

He never complained about his painful cancer and told jokes during dressing changes. One day, however, the jokes ended. When I arrived at Oscar’s home, his daughter came out to meet me. “Sherrina, I don’t know why dad is still with us. He’s been gasping for air all afternoon,” she said, tears in her eyes. “Let’s go in and see what’s going on, OK?” I said. As we entered Oscar’s room, she said, “Dad, your favorite nurse is here.”

“Oscar educated me about life, and, at the end, he shared with me his death.”

Oscar’s skin was pale and ashy. His eyes were fixed to the heavens. As I laid my hand on his arm, I could feel the cold dampness of death. I wasn’t sure why he was still with us, but I have faith that dying patients always have their reasons.
I sat next to him, stroking his forehead. His daughter held his other hand as I whispered, “Hi Oscar, it’s Sherrina. Oscar, you have to know how much you’re loved by all of us and we know you love us, too. And when you leave us, we’re all going to miss you. But, it’s okay for you to go now. Look, you’ll never be sick again and we will see you one day very soon. Just find your wife, Oscar, and go with her.” Within seconds his breathing ceased.

“I couldn’t figure out why Dad was still with us,” said Oscar’s daughter. “But now I know — he was waiting for you.” As we hugged each other, I looked at Oscar’s face. His expression of pain was gone forever.

When Oscar died, I believe that God granted him a peaceful passage and blessed me with the gift of sharing in Oscar’s journey. In hospice, we are given the opportunity to help families through some of the most painful experiences they will ever endure. Caring for Oscar reminded me what being a true, compassionate hospice nurse is all about.

Sherrina Fawn Bitzer, LPN
St. Catherine Hospital
Garden City, Kansas

Note: Some names have been changed to protect confidentiality.

Question for Reflection

When curing or fixing is not an option, we are often called to care with compassion. How is God calling you to service with compassion this day?
When I was in the hospital for the birth of my first daughter, my sister Jeanette lay in the bed next to me. We were the first sisters in 50 years to deliver babies on the same day and in the same room at Mercy Medical Center. I was proud to be a new mother to Nicole and a new aunt to Jeremy. We fondly called them “twin cousins.”

These cousins grew to love each other very much. They were constant companions. When they were two years old, they ran wildly around the house yelling, “Mon Gogi!” and “Mon Toe!” In their language, that meant, “Come on, Jeremy!” and “Come on, Nicole!”

In 1990, I took a job at Mercy Medical Center as staffing coordinator for the nursing departments. In all the years I’ve been here, each time I walk pass the rooms where my daughters and Jeremy were born, I smile.

Just after his 16th birthday, Jeremy was in a horrible car accident that brought him back to Mercy. Our family gathered in the Emergency Department and waited for word on his condition. I felt fortunate that despite serious orthopedic injuries, Jeremy was brought to Mercy, where I would be close to him while I worked. I was also confident in the care he would receive.

For a week, while Jeremy recuperated, I would visit him. He was in good spirits, even after surgery to place a rod in his broken leg. At the end of the week, he was excited because he was getting a Nintendo game system in his room and would also be getting up to walk for the first time in almost a week. After visiting him that morning, I went back to my office to settle in for work. Approximately 45 minutes later I heard a code being called.
Even before they said the words “code blue,” I knew it was Jeremy. I raced up the stairs. I knew that many patients survived codes and willed him to be one of them. However, when I got to his room and saw the team working on him, I knew he was already gone. So it was that he died of a pulmonary embolism several doors down from the room where he had been born 16 years earlier.

This is the most tragic event my family has ever endured. Though it was many years ago, we still remember every moment. We also remember the faces and well wishes of many caring people. The goodness of the people I work with touched us deeply, and still reminds me to be as generous and compassionate as they were to us. After all these years, I like to think of them as living angels, and I believe that Jeremy is with God as our Guardian, Dear.

Anne Chatterton, RN
Mercy Medical Center
Nampa, Idaho

“Even before they said the words ‘code blue,’ I knew it was Jeremy.”

Question for Reflection

God is frequently present in “how we do what we do.” How is God calling you to witness his compassion and presence this day?
This sacred story is about a non-patient who came to Flaget Memorial Hospital in the worst hour of her life.

On a cold March evening, just as the evening shift arrived in the Emergency Department, a distraught young woman appeared. She had been told to come to the hospital to identify the body of her husband, who had just died in a motorcycle accident. But, there was no body, and no one in the hospital knew of an accident.

The staff made some phone calls and it found that the young husband had, in fact, been killed in an accident and taken directly to the coroner’s office in Louisville, 45 minutes away. To make matters worse, the husband was originally from Turkey, where his family lived. The woman tried to call her Turkish relatives, but she knew almost none of their language and they did not know English.

The staff rallied around the grieving woman. The chaplain and the nursing staff helped her connect with the AT&T Language Line. A sympathetic Turkish-speaking operator stayed on the phone for 45 minutes while connections were made. As the relatives were notified, the chaplain knelt on the floor next to the woman and prayed.

It took several hours to connect with everyone and make arrangements for the wife to accompany her husband’s body to Turkey. Finally, the calls were completed and the woman was ready to go to Louisville. As she left, she knew that she had been surrounded by the love and prayers of people who truly cared and felt deeply for the tragedy of a stranger.

How thankful I am to work in a Catholic hospital with people who care so much, who know the power of prayer, and who live out our core values every day and every shift, no matter who comes through the door.

Deborah Cowles
Flaget Memorial Hospital
Bardstown, Kentucky
“She knew that she had been surrounded by the love and prayers of people who truly cared and felt deeply for the tragedy of a stranger.”

Question for Reflection

How has God been present in the unexpected within your work?
I received a call that a patient had just died and the family wanted a chaplain. The death was somewhat unexpected.

It was after hours, it was my birthday, and I was in a restaurant with my family. I said goodbye and headed to the hospital. I had really been looking forward to ordering the chocolate molten lava dessert that was to be my gift to myself. Needless to say, the interruption was a disappointment.

When I arrived at the hospital, the nurse told me the staff was concerned about the dead patient’s husband. An oncologist came out of the patient’s room. He explained that the disease had come on quickly. Death had been caused by numerous benign tumors throughout the patient’s body. The oncologist said he had lost sleep while trying to get this patient well enough to travel back to her home in New York. She had come to Chattanooga two months before to help her sister care for their dying father, but had become ill right after she arrived. Her father had died a month ago.

I entered the room and greeted the patient’s husband and sister. I expressed condolences and asked what I could do for them. They asked if I would pray, which I did. Then, I sat with them to await the arrival of other family members. As we sat, the husband began to talk about his wife. I could tell that he loved her greatly.

The couple married when they were both 22 years old, and they moved to New York City. Not long after, she became extremely ill with similar tumors — so ill that she was dying. One day when he couldn’t take any more, the husband took their dog for a walk in the park. He had been raised in a Christian home, but at that particular moment he felt very far from God.

As he walked the dog, he cursed God for his wife’s illness. A disheveled man sitting on a park bench stopped him and asked for a cigarette. The husband told the stranger that he didn’t have any cigarettes and
began to walk away. The stranger stopped him again by saying, “I am not a bum.” He pointed to a burned-out apartment window across the street. “See that window?” he said. “I used to live there with my wife and two children. They were killed three weeks ago in a fire. I am living with my brother and his family. He has children about the same age as mine. Sometimes I can’t stand the joy in their house, so I come here and sit on this bench.”

The stranger left. The young husband sensed that God was saying, “That man has no hope, but you still do.”

“I went home,” the husband told me. “My wife got better and we had 33 great years together. Every day since that one has been grace. I am sad that my wife suffered the pain of this illness, but I am grateful to God that I had her as long as I did.”

When I left, I stopped at the nurses’ station and told the story to them. We all marveled. As I left the hospital, I was smiling. I looked up and said, “Okay, God, I get it. Thank you for the birthday present.”

You may wonder what the present was: it was the realization that life is a gift. When I got home, my wife and I went out for some ice cream. That evening truly was a gift of grace.

**Robert Cox**  
*Memorial Hospital, Chattanooga, Tennessee*

“**That man has no hope, but you still do.**”

**Question for Reflection**

Who recently, in your life, has been the “disheveled man sitting on a park bench” and what new perspective on life did that person give you?
I responded with the Fire Department to a call involving an unresponsive infant, one of a set of twins. The job was well underway, and a landing zone was being set up so that the infant could be transported by helicopter.

On my way to the landing zone, I saw an ambulance in the parking lot of St. Peter and Paul’s Church. As I approached, a priest stepped out of the back of the ambulance. “This is a first,” he said. I found out that the infant we had been called to transport, who was in the ambulance, was dying from a terminal illness. The baby’s mother wished no invasive measures by the paramedics.

However, the mother had been distraught due to the critical state of the baby and the fact that neither of her twins had been baptized. The paramedics on the scene, Irene Slate and Paul Jones, did something I had never seen done before. They had asked to take the mother and the dying infant, along with the baby’s father, to the nearest church to see if there was a priest available to baptize the infant. That church was St. Peter and Paul’s, which happened to be on the way to the landing zone.

Surely God was looking down, because when they knocked on the rectory door the pastor was home. He baptized the baby, held in the arms of his parents, right there in the ambulance.

Once the baby was baptized, the parents became almost tranquil. They were relieved that the baby was christened before his passing. The priest later went to the family’s home to baptize the other twin.

Ken Dempsey, MICU
Saint Clare’s Health System
Denville, New Jersey

**Question for Reflection**

*How might this story appropriately help us understand our work as a ministry?*
“He baptized the baby, held in the arms of his parents, right there in the ambulance.”
As director of Social and Behavioral Services, it was my responsibility to assess and determine patients’ needs and see what I could do to improve each patient’s stay. Who knew that this time, the patient would help me.

For years I had seen him, a young boy in a wheelchair. He attended the same school as my children; he rode the fire truck in every parade; he was at sporting events and clinic appointments: seemingly everywhere.

One day, I received a call that this young man would be admitted to restorative care for a short stay. He needed IV medications and therapy. It was time for me to get to work.

No one could have predicted that weeks would turn to months, and his restorative care would become comfort care. Also unforeseen was the moment I stopped seeing this young man as a patient and began to see him as a friend. Because of his disability, his words were few, but after a short time I easily understood him. His smile lit up the room. I looked forward to our visits and even found myself sharing laughter with his family after hours. When I looked at this patient, I no longer saw a disabled child, but the amazing life of a fighter.

On a cold November evening, my phone rang shortly after I had retired for the night. My heart sank because I knew it was time to say goodbye to my friend.

As I drove to the hospital, the air was crisp and the sky clear. In front of me was the moon, with a star beaming brightly by its side. Peace surrounded me like a warm blanket.

When I entered my friend’s room, I was calm and able to think clearly. I brushed the hair away from his eyes, held his hand and the hand of his mother. I prayed that he would see the same bright star I did, and that this star would lead him to his new home in heaven.
Just as important as the lessons we learn in the classroom are the ways we grow as people, the friendships we form and the deeper understanding we acquire of ourselves and others. It is said that we begin to die the day we are born. However, I began to live the day one of my patients died. I no longer see my position as a job but as a celebration of milestones. I look forward to a new horizon, never to forget what brought me this far.

Deborah Anderson MS, LAPC, NCC
Mercy Hospital
Valley City, North Dakota

“Just as important as the lessons we learn in the classroom are the ways we grow as people, the friendships we form and the deeper understanding we acquire of ourselves and others.”

Questions for Reflection

In what ways do you take your relationships and acquaintances for granted?

What should you do to become more fully present and alive to your work and relationships?
About 10 years ago I had an experience that has stayed with me, reminding me of why I became a nurse and how much the “little things” we do can affect other’s lives.

I came to work on a cold January evening as a night shift nurse on our obstetrics unit. My patient, Julie, was an elementary school teacher. She and her husband, Michael, were having their first child.

As I became acquainted with them, I learned that Michael’s father was downstairs, dying of cancer. Michael was torn up about who needed him more: Julie, or his mother and family. I reassured him that whenever he needed to be two floors away with his father, I would stay at Julie’s bedside and we would call him right back if she needed him. Throughout the night, Michael and I took turns being with Julie so that he could make several trips to the medical floor.

Michael and Julie’s baby girl arrived after 4:00 a.m., and she was beautiful and healthy. As I held her, I looked at Julia, Michael, and the attending physician. I asked if Michael and I could take the baby to meet her grandfather. They all agreed. Michael and I wrapped up our precious bundle and took her to meet her grandpa.

Michael’s father was surrounded by family. Though his respirations were labored, I felt him relax as we took his hand to help him touch his new granddaughter. It was as though God had His hand on the moment. We stayed only a few minutes before returning the baby girl to her mother.

Michael’s father died about two hours later. It seemed that the whole family could accept his death more easily knowing that life had been carried on through the birth of a precious infant girl.
About five years ago, I received a card from Julie. She wrote that she is now a registered nurse in a pediatric unit, and believes it is a perfect fit with her elementary education background. She said that in nursing class, she had used our story for one of her personal experience speeches. She wanted me to know that she changed her career because of one night with one nurse who made a difference.

Lisa Dolezal, RN
St. Joseph’s Hospital
Dickinson, North Dakota

Note: Some names have been changed to protect confidentiality.

“Though his respirations were labored, I felt him relax as we took his hand to help him touch his new granddaughter.”

Questions for Reflection

Why did you start working in health care?

What can you do at the start of each day to help you be more attentive to the opportunities you have to make a difference in the life of someone else each day?
The following statement was written by a first-year resident chaplain at St. Anthony Central Hospital when requesting a second year of residency. She agreed to share this important learning and inspiring message. Her Sacred Story eloquently and perfectly describes who chaplains are and what chaplains do:

“I now find myself a resident chaplain at St. Anthony Central Hospital. I have come up against the edges of my exhaustion and witnessed the most intimate, transitional moments in people’s lives. This witnessing and companioning has become the center of my work at St. Anthony: helping to create and hold a sacred space so people may connect with the Holy Spirit, their loved ones, and to the deepest part of themselves during difficult times.

“I find myself in the sacred space as well, often with my hands full of work to do. I have held a seven-year-old boy after he learned of his mother’s death. I have held the hand of a lonely 80-year-old woman as she took her last breath. I have held stillborn babies. I have held mothers as they wailed for their dead sons. I have held the eyes of nurses and physicians in their confusion. I have held the wallets of the recently deceased as I search out their relatives. I have held stories and secrets, and I have held silence and space.

“I have been held by my peers, my supervisor and my God throughout this time. I have learned to recognize how I am held; to be grateful; and slowly, slowly, to ask for this support. I have learned to soften and grow strong. I have learned to recognize and claim my gifts. I have learned that I love this work.”

Bob Eaton
St. Anthony Central Hospital
Denver, Colorado
“I have learned to recognize and claim my gifts.”

Question for Reflection

God is so frequently made present in simple acts of kindness. What is God inviting you to do today that will make God’s presence and compassion more visible?
I was working my shift in the chest pain center. On this particular day, we had an elderly patient with chest pains. He was frail and almost blind from years of diabetic retinopathy. His color was pale, and his skin was moist. He was apprehensive, knowing in his soul that something was terribly wrong. We knew he was having a heart attack in front of our eyes.

Within minutes, the catheterization laboratory staff was ready and waiting for us. We loaded our patient up, grabbed some emergency drugs and took off, rolling his bed toward the elevator.

We found the big, new elevator out of service. “We don’t have time to go all the way to the other end of the hospital to find another elevator,” we frantically yelled to each other. “We’ll have to use the old one and hope we fit.” When the old elevator came, we pushed the bed in. The door would not close—the bed was in the way.

Carefully, we adjusted ourselves, moved the IV pole and the oxygen tank, put the head of the bed up and tried again. The door slowly closed, scraping along the foot of the bed, and we climbed to the third floor. We rolled the bed out of the elevator and took off down the hall to the lab. When we had safely transferred our patient, we had a feeling of accomplishment. It had only been only 22 minutes from door to lab. We had done our job the best we knew how.

Later, I went to retrieve the bed. I noticed that the new elevator was still out of service. “Oh well,” I thought. “It fit in the old elevator going up, it will fit coming down.” I tried for what seemed like forever to get that bed back into the old elevator. No matter what I did, I could not get it to fit. To this day, I can’t explain it.
Later, we went to visit the patient in his room. He was resting quietly in bed, looking peaceful and pain-free. We told him the elevator story. He was not the least bit surprised. “I wasn’t worried,” he said. “In the elevator, I saw an angel hovering over me, and I knew I would be all right.”

Years later, I still feel awe and wonder when I recall his words. I truly believe there was a power in that elevator that either made the bed shorter or stretched the elevator a bit longer for our short ride. Whatever it was, it helped save our patient’s life.

Marilyn Blenker, RN
St. Anthony Central Hospital
Denver, Colorado

“The door slowly closed, scraping along the foot of the bed, and we climbed to the third floor.”

Questions for Reflection

What important aspect of your life are you missing because you do not “believe” you can fit it in?

What adjustments must you make to contribute to your team’s ability to “fit in” all that needs to be accomplished?
At St. Jude Hospital in Vieux Forte, St. Lucia, I did a variety of things. I organized respiratory therapy supplies and assembled resuscitation equipment using pieces and parts. I even helped to fix a baby ventilator. I also educated nurses on the use of various pieces of equipment, and was able to train 50 staff members on EKG lead placement. In my spare time, I cared for patients, helped with CPR training and did extensive asthma data collection and analysis.

My main impression of St. Jude is not the lack of equipment, supplies and general education, but how the staff makes do with what they have, and are content with it. There is no demanding or whining. They just do what they can with what they have, and for the most part it works. It made me realize how wasteful we can be in the U.S. I have a new appreciation for my job, my facility and my life as a whole.

When I first decided to go on the mission trip to St. Lucia, I wanted to “change” or “fix” everything I could. I had to take a step back and realize that I could not change the world. Instead, if I could make a difference in one person’s life, I would feel that my mission was complete.

That moment came early in the trip, when I had the opportunity to teach a mother and son, Babylina and Miguel, about asthma. It was no hardship for me: I do it all the time. But, upon visiting with them, I realized that Miguel was admitted to the hospital on a regular basis simply because Babylina had no knowledge about the medications she was giving him. In fact, she was giving the medications in completely the opposite way that they needed to be given.
Babylina was so grateful that she cried, hugged me and thanked me for saving Miguel’s life. I told her that her attentiveness to Miguel was the life saver. Babylina said she knew that God had sent me to her and Miguel. She had been praying for a miracle for him, because she knew how sick he was and feared for his life. They came back four times to see me and thank me.

After that, I knew I was in St. Lucia for a purpose and would give all I could, no matter how big or small the task. I had made a difference — and that is the most rewarding thing to me.

**Deb Anderson**  
*Holy Rosary Medical Center*  
*Ontario, Oregon*

“When I first decided to go on the mission trip to St. Lucia, I wanted to ‘change’ or ‘fix’ everything I could.”

**Questions for Reflection**

*If you could make a difference in one person’s life in your circle of influence, what would you do? Why?*

*In what ways do you make a difference in your circle of influence?*
Recently, 4 East had one of those patients who leaves a special mark on your heart and makes you glad you work at Memorial.

This man was chronologically in his 30s, but from birth he had struggled with autism and mental retardation that left him functioning at the level of a four-year-old. He was admitted to Memorial with leukemia.

He was fortunate because he had strong, loving family support and a great network of care. Although he was in isolation because of his illness and treatment, he was never alone and never neglected.

With his sunny spirit and joy in life, he quickly became a staff favorite. Everyone who entered his room came out with a smile and a gentle reminder that life is good. Staff felt drawn to him and even doctors were known to come back “just to check on him.”

Everyone had a story about an encounter with him, and I’d like to share one of my favorites. Pam was his housekeeper for the many weeks he was here. When she cleaned his room, she would greet him cheerfully. Then, just before she left, she would ask him if he wanted to sing. Unless he was too ill from treatment, he would eagerly agree and together they would sing their special song: “This is the day that the Lord has made. We will rejoice and be glad in it.”

That’s what it is all about, isn’t it? Today is a day that God made for us. He is here with us in this day and so, whatever our circumstances, we can find reason to rejoice in His steady presence. I am so grateful for patients like that young man and staff members like Pam who remind me of God’s presence at Memorial.
Tell them that they are loved — not just by God but by you;
Because the only hands God has to touch them with are your hands,
And the only heart God has to love them with is your heart,
And the only way they will see the love of God
is when they see it in your eyes and experience it in your hugs;
And they will find healing for their spirit when you find healing for yours,
As they will find life when you share life with them.
—Author Unknown

Betsy Kammerdiener
Memorial Health Care System
Chattanooga, Tennessee

“Everyone who entered his room came out with a smile and a gentle reminder that life is good.”

Question for Reflection
How are you being God’s presence to those you serve?
I was making morning rounds in the Intensive Care Unit when I saw Mae, in a dimly lit room, in the bed, slumped to one side. Although she appeared to be looking directly at me as I stood in the doorway, she did not respond to my voice. I walked to her bedside, gently touched her hand, and introduced myself as the chaplain. Again, there was no response.

“May I say a prayer for you?” I asked. Mae nodded. I offered prayer. Then, she spoke. She told me she didn’t get many visitors, and her only family was a niece and nephew who lived out of state. All of her siblings and close friends had died, and although she had made some friends at the assisted living center, they were too sick to visit her now. She didn’t seem to know what was wrong with her medically, but said she was not feeling well and her body was just wearing out.

I could see that she was very tired and struggling to stay awake. She thanked me for coming and invited me to visit again. I planned to return the next day and present Mae with a prayer shawl.

“She told me she didn’t get many visitors.”
When I arrived for our second visit, Mae was sitting up in a chair. As I gave her the prayer shawl, she exclaimed, “I feel like it’s Christmas! It’s so pretty. These are my favorite colors.” She began to reminisce about the Christmases of her youth. I listened as she shared stories of her life and her loves as she fingered the stitches of the shawl.

Mae asked if I had made the shawl for her. I explained that people in various church communities surrounding our hospital make the shawls. As they knit or crochet, they offer prayer for the individual who will receive the shawl. Wrapped in prayer, the patient is able to feel a sense of God’s comforting and abiding presence. “What a lovely gift and in perfect time,” she said as she shared that she would celebrate her 94th birthday the following week. “Happy birthday, Ms. Mae,” I told her.

As I left her room, I felt humbled and grateful for this ministry, which allows me to witness daily the powerful works of prayer.

**Kathy Edelmann**  
St. Joseph Medical Center  
Towson, Maryland

**Question for Reflection**

In addition to the tangible gift of the prayer shawl, Kathy’s sacred gift to Ms. Mae was being present to her — engaging in her life’s memories and listening to her stories. In the midst of our busy schedules, how can we make the time to be truly present to our patients, residents, colleagues and families?
That dark winter morning, as I made my way to the front doors of the hospital to begin my day, a woman using a walker was having difficulty navigating the entrance. She could hardly move, even with the walker. I asked, “How may I help you?” Her reply stunned me. “My baby is having surgery today, I learned I have cancer and I have eight children.” I helped her to the admissions desk.

The woman’s story weighed heavily on my heart. How could I extend my concern, caring and Christian spirit? I composed a short note, offering my prayers to the woman and her family. I took it to the Neonatal Intensive Care Unit and asked, “Please give this to the woman whose baby is having surgery today.”

Upon returning to work after Christmas break, I learned that a co-worker’s daughter-in-law, Amy, had a baby and was then diagnosed with cancer. My heart sank. I listened to the staff talk, never sharing all that I knew. But, yes, it was Amy who I helped into the hospital that dark morning.

The baby, Matthew, had been transported to the University of Nebraska Medical Center (UNMC) for surgery. While chemotherapy reduced the size of Amy’s tumors, she also required surgery. Therefore, neither she nor her husband could be with their baby.

We do telehealth calls with UNMC, but they are usually educational or administrative in nature. Amy’s situation prompted a “compassionate call.” We made arrangements with UNMC, and Amy was able to see her baby and learn of his progress.

There are times in life when the Lord takes your hand, opens doors and leads you through them. The UNMC nursing and telehealth staff did everything they could do to make the call happen.
The call was incredible. Amy talked to Matthew as if he were in her arms. The nurse showed everyone his incision and how it was healing, and provided an update on his progress. After his bottle, Matthew was tired and so was everyone on our end of the call.

Amy expressed her gratitude for all we had done, but we were also grateful. We were grateful that the technology worked, that everything fell into place. We were grateful to Amy and Baby Matthew for allowing us to help connect them. In those moments, we could all feel the presence of the Lord.

KATHY GOSCH, RN
Good Samaritan Health Systems
Kearney, Nebraska

Note: Some names have been changed to protect confidentiality.

“There are times in life when the Lord takes your hand, opens doors and leads you through them.”

Questions for Reflection
How has the Lord taken your hand, opened doors and led you through them recently?

When have you felt the Lord’s presence in a moment of gratitude?
On July 16, 2008, we hosted a fundraising event titled “Boots to Buckles.” The event raised money through The Stampede Rodeo’s Tough Enough for Pink Campaign, which benefits women in our community who can’t afford breast screenings. It was a wonderful event. Because it was Rodeo Week, the 200 people who attended Boots to Buckles went on to attend “Pink Night” at the rodeo.

Our event featured a speaker, Keri Christian, a breast cancer survivor who used to work at Mercy Medical Center. Keri developed breast cancer six years ago, which resulted in a mastectomy and much treatment. Shortly after Keri finished treatment, her husband, Chris, died suddenly of heart failure.

Her speech was amazing and made everyone who heard it realize that life is very short and we must live every moment to the fullest. With the crowd in tears, Keri asked who would be willing to donate $100 to provide a free mammogram for a woman who is not able to afford it. The bidder numbers went flying!

As we collected donations at the end of the event, an eight-year-old girl named Harley Goul slid a $20 bill across our table. She said, “This is all of my allowance and I would like to donate it to help a woman in need.” I took in a deep breath and thought, “This little girl is lending her hand — and hard-earned allowance — to help the less fortunate. Wow! At her age, she gets it!” Our chief executive officer, Joe Messmer, sent Harley a letter of appreciation for her donation and told her just how special she is. Her uncle later told me that letter from Joe meant so much to Harley.
Our mission and ministry call us every day to lend a hand to neighbors in need. Hopefully, adults realize that this is our obligation and privilege. Something special occurs, however, when a child learns to give to others; it marks the transfer of wonderful values to a new generation. A child’s generosity, like that of the widow and her two copper coins in Mark’s Gospel, is priceless.

Alisha Havens
Mercy Foundation
Nampa, Idaho

“Wow! At her age, she gets it!”

Questions for Reflection

What values are you passing on to the next generation through your words and actions?

What does it mean to “live every moment to the fullest” this moment…this day?
Anna came into my office beaming, accompanied by her sister, Molly, who had a young son in her arms. A recipient of assistance from our Henrietta Child Fund, which provides care to uninsured and low income patients, Anna had been a methamphetamine user who came to Saint Joseph-Berea for help.

Two years earlier, Anna had arrived with infected gums and corroded teeth. Methamphetamine had ruined her health and destroyed her teeth, making speech and eating difficult. A ruined smile and other effects of drug abuse prevented Anna from getting a job. She was broke, ashamed and desperate.

Our fund paid to have Anna’s teeth extracted and for a set of dentures. I did not see Anna after she got her new teeth, but received a nice thank-you note.

This morning, Anna was a different person than the one I had met two years before. Anna told me that her life had turned around. She said that receiving help had made her believe she was worth something. It gave her confidence to make changes and get her life back on track. She had entered a rehabilitation program for methamphetamine abusers. Clean for a year, Anna had enrolled in a medical assistant training program.

The assistance Anna received gave her the impetus to change, but it was her faith that sustained her throughout rehabilitation and each day that followed. She told me it was difficult to resist the temptation of getting high, but she prays to God many times a day and asks him to “walk with her.” I told Anna how happy I was for her and asked her to come back again to tell me how she is doing in school.

But, Anna was not yet ready to go. She told me that Molly used methamphetamine and needed help, too. Molly began to cry as she showed me the ravages of the drug on her teeth. Molly had carried and given birth to her son while using drugs. Unlike Anna, Molly
had not been able to quit. She turned her baby to face me and said, “This is what is most important to me and who I am hurting the most. I need help.” I helped Molly complete applications for assistance and urged her to get into a rehabilitation program.

As the three got up to leave, we shared a hug — a hug of joy for Anna’s progress and of support for Molly and her son. As they walked down the hall I could hear Anna say, “Walk with me today, Lord. Walk with me.”

KATHERINE ANNA HECKMAN
Saint Joseph-Berea
Berea, Kentucky

Note: Some names have been changed to protect confidentiality.

“She said that receiving help had made her believe she was worth something.”

Question for Reflection

God sometimes calls us to serve in unexpected ways. How is God inviting you to serve in the work you do?
Ed Cloman’s wife, Nancy, lay sick in her hospital bed, battling lymphoma at St. Joseph Medical Center. There were many days that the hospital chaplains saw Ed on his knees beside Nancy’s bed. This devoted husband and father was constantly at his wife’s side. Ed would caress Nancy’s hands and pray for her recovery — for a miracle. Because he is a member of the Facilities Department at St. Joseph, the miracle may have been that he was able to spend so much time with his wife in her last weeks and days. Ed’s co-workers made sure to allow him that precious time.

According to Ed, at age 38 Nancy had a dream in which she was visited by the Virgin Mary and told that she would not live to see her 50th birthday, even though she was perfectly healthy when the vision came to her. Nancy passed away from lymphoma at age 49 in June 2007, just two weeks before her 21st wedding anniversary.

Nancy’s memory and spirit live on at St. Joseph Medical Center in a unique way. When the St. Joseph Chapel temporarily relocated to another building during a renovation, it gained a beautiful new hand-carved altar and tabernacle created by Ed in memory of his beloved Nancy. Last March, a blessing and dedication of the altar and tabernacle took place, attended by many at St. Joseph who were touched by Nancy’s life. When the chapel reopens after the renovations are complete, Ed’s handcrafted altar will become part of the new interfaith room in St. Joseph’s main entrance and lobby addition.

Mary Ann Hodes
St. Joseph Medical Center
Towson, Maryland
“Ed’s co-workers made sure to allow him that precious time.”

Questions for Reflection

How can you support a colleague who is suffering from the illness or death of a loved one?

How can you honor the memories and preserve the spirit of those who have served our health care ministry?
When my son, Jesse, died in May 1995, I received a planted pine tree from my co-workers as a memorial gift. Unfortunately, the tree did not last until Christmas. So I purchased another one, named it “Jesse Tree,” and decorated it as Jesse, my other son, Jeremy, and I would do when they were boys.

The next Christmas, and several Christmases after, I purchased a new “Jesse Tree.” Maybe that is why they didn’t last from one Christmas to the next — because I bought them myself. Then, one Christmas, I received a small potted pine branch. It grew and lived for five years. I was amazed!

Each year, I take out the ornaments my sons made in Sunday school and grade school. I hold them in my hands and member and cherish the memories of Jesse and Jeremy proudly hanging the ornaments on the tree.

One day, I was conducting a Bible study with residents at Holy Family Villa. I read about a Jesse Tree in Isaiah 11:1–2. It states: “But a shoot shall sprout from the stump of Jesse and from his roots a bud shall blossom. The spirit of the Lord shall rest upon him; a spirit of wisdom and of understanding, a spirit of counsel and of strength, a spirit of knowledge and of fear of the Lord.”

Working at Carrington Health Center and Holy Family Villa as a social worker, past mission director and interim spiritual care coordinator, I have received a true Jesse Tree: an opportunity to grow and to be of service to others and to God. I will carry on this tradition. Even if my own Jesse Tree does not last until next Christmas, my spirit will last, my memories will last and my faith will continue to keep purchasing a Jesse Tree.

Marilyn Anderson
Carrington Health Center
Carrington, North Dakota
“I have received a true Jesse Tree: an opportunity to grow and to be of service to others and to God.”

Questions for Reflection

How can you more fully be a Jesse Tree for others?

Are there opportunities for you to purchase a tree to commemorate a deceased colleague or friend?
Many associates in the Catholic Health Initiatives family, as well as their loved ones and communities, have been affected by the war in Iraq. The effects of separation, fear and worry about the safety of our soldiers, and sorrow over the loss of those who give the ultimate sacrifice are a constant presence in our workplace. We are all called to support and embrace those in harm’s way, and their family members who work with us, however we are able.

Denise Smith, a consultant in CHI’s National Clinical Competency Program, is no stranger to military life. Her husband, Brad, joined the army in 1981 and served in Iraq in 1991 as a member of the National Guard. Her only child, Jeremy, was commissioned as an officer in the Marines at his college graduation a few years ago. The day Denise knew would come arrived in early 2008, when Jeremy was deployed to Iraq. While she is an exemplary military wife and mother, it was obvious that Denise was torn between pride in her son’s service and fear for his safety. As her manager, I wondered what I could do to support her.

“The effects of separation, fear and worry about the safety of our soldiers, and sorrow over the loss of those who give the ultimate sacrifice are a constant presence in our workplace.”
While browsing in an airport shop, I came across a display of beautiful crosses constructed of wire and colorful beads. I purchased the one I thought was perfect for Denise. I wrapped the cross and left it on Denise’s chair for her to find along with this note:

“I saw this cross this week and was drawn to it. Please hang it on the wall outside your office when you return from seeing Jeremy off. He can take it down on his first visit after he returns home. He will be in our hearts and minds constantly, and the cross can serve as a beautiful symbol of our support.”

The cross hung for months.

On September 19, 2008, accompanied by his wife, Carrie, and his parents, a healthy and smiling First Lieutenant Jeremy Smith removed the cross from wall. The cross is now in his safekeeping.

Debbi Honey
Catholic Health Initiatives

Questions for Reflection

How can we support those whose loved ones are in service away from home, especially in military service?

Can you take a few minutes today (and every day) to pray for those who serve our country in the military and in all capacities?
Bob was a cancer patient who was homeless and set to start chemotherapy.

As his oncology social worker, I was faced with many challenges. Bob resided on the streets or stayed with a friend. All of his worldly possessions were stored behind the sign at the local McDonald’s. I could provide as much support as he would accept, but reminded all involved about a patient’s right to self-determination.

Bob arrived for treatment in overused clothing, with filthy fingernails. He was a small man with a shuffling gait and a big smile. His one request was three cups of coffee with plenty of sugar.

My work with Bob went beyond my usual role of assisting with transportation, coping skills and financial assistance. For Bob, I bought new clothes and groceries and located a motel room, which he finally accepted once the snow came. When he did not show up for treatment, we would place a call to McDonald’s. The community driver and police would comb the streets looking for him.

Everyone in town knew Bob. He left an impression on people that was surprisingly endearing, given his outside appearance and circumstances. Bob was always apologetic if he missed an appointment. He was estranged from his family due to a history of addiction and poor decision making. The only family contact he had was through the community social worker, who would receive holiday gift cards and a few dollars for Bob from his two sisters in Florida.

As Bob’s illness progressed, his hospital stays increased and he became agitated and angry. He always regretted that behavior and voiced appreciation for all I did. Three coffees always remained at Bob’s bedside. Finally, with his permission, we located his sisters. They spent the last days of Bob’s life with him. They were thankful that they were contacted and present when he died.
I attend few funerals, but I needed to attend Bob’s. The pews were partially filled with a mix of people: his friends from the street, his community worker and drivers, a few business owners and his sisters in the front row. The service was conducted by a minister who talked about Bob as a man who followed the beat of his own drummer. The gratitude expressed by his sisters elicited a smile as I recalled the shuffling image of our patient, who kept everyone wondering, “What about Bob?”

Brandy Johnson, MSW, LCSW
Cancer Care at Saint Clare’s
Denville, New Jersey

“Everyone in town knew Bob. He left an impression on people that was surprisingly endearing, given his outside appearance and circumstances.”

Questions for Reflection
What have you found “surprisingly endearing” about a patient, co-worker or family member today?

What about “Bob” who lives in your community?
One afternoon I received a call from Father John. He was concerned about a gentleman he often saw in the neighborhood. All that Father John really knew about “Bear” was that he lived above one of the neighborhood bars, was in poor health and was a very nice man. “Bear is about my age,” said Father John, who is 72. “This morning, he said that if he had had all of his medications last night, he would have taken them to end it all. Can you help him?”

When I arrived at the bar, a tall, thin gentleman with a scruffy beard and slightly graying bushy hair met me. When I asked, “Bear?” he smiled and said, “You called me by my nickname!” Bear, whose given name is Thomas, confirmed that he was so depressed that he would have ended his life the night before except he didn’t have the means.

Bear was willing to go to the hospital. On the way, he told me that he was 57 years old, but he looked every bit of the 72 years Father John had described — the result of years of drug and alcohol abuse. He also had heart disease. There was something special about this man that touched my heart and soul deeply; why, I did not yet know.

When we arrived at the hospital, he refused to use a wheelchair. I had the feeling he was afraid that I would abandon him if I left to find a wheelchair.

When we arrived at the Emergency Department triage desk, Bear said, “I can’t stand anymore; I am going to fall.” Two women in the waiting room helped me hold him up while the receptionist got a wheelchair. The triage nurse checked his vital signs and took a brief history before whisking him to the critical care area of the ED. She then took me to see the ED social worker, Betty. The nurse said to Betty, “You know it takes a lot for someone to tug at my heart, but this man surely does.”
Later, as I sat in the waiting room, I reflected on my short time with Bear. What was it about him that filled me with a peace beyond my understanding? I thought of what the nurse said, and suddenly I knew— I had seen the face of God in this seemingly broken, yet very kind and gentle man. May he be blessed for the gift he is to others.

Sr. Phyllis Kemper, RN
TriHealth Parish Nursing
Cincinnati, Ohio

“You know it takes a lot for someone to tug at my heart, but this man surely does.”

Questions for Reflection

How do you respond to Sr. Phyllis’ question and her answer: what is it about Bear and all the persons in our lives who “fill us with a peace beyond our understanding?”

In which seemingly broken persons do you see the face of God? How do you respond?
Pain Relief

Watching someone in pain is one of the hardest things we endure as caregivers. The shift to education about how to recognize and alleviate pain has made tremendous improvements in patient care. Twenty years ago, it was much different.

I was visiting a former co-worker, Kathy, who was an inpatient. When I walked into her room, I saw her pain. Her face was contorted and she was moving about in the bed. I asked what I could do for her. “Should I get one of the nurses?” I asked. She responded, “The nurses have called the doctor, and we are waiting for him to call back.”

I knew the only thing I could do for her was pray. I looked into her eyes and said, “Kathy, may I pray with you?” She agreed. I gently took her hands in mine and quietly asked our precious Lord for pain relief and peace for this special lady. As I was praying, I noticed her starting to relax. Her body, once curled up, started to unwind. She slowly quit moving around in the bed. During the prayer, she continued staring into my eyes. As I finished, she said, “It’s gone. The pain, it’s gone.”

We thanked our dear Lord with tears running down our cheeks.

Donna Langton
Mercy Hospital
Devils Lake, North Dakota
“As I was praying, I noticed her starting to relax.”

Questions for Reflection

How have you responded to God’s call to relieve the physical or emotional pain of another?

How have you experienced the power of prayer in your life?
I am the Board Chair at of St. Mary-Corwin Medical Center. As a lay member of the Board, I often struggle to balance the role of governance with the need to know the hospital’s daily life. So, when our chief nursing officer invited me to spend an afternoon shadowing a nurse, Ellen, in the Intensive Care Unit, I jumped at the opportunity.

As soon as I met Ellen, I apologized for being a possible nuisance. I explained that I wanted to know what a day is like for her and her colleagues. “No problem,” she said, and she smiled. “Let’s go, we have to check on my patients.”

Patients can be in intensive care for as little as two days or as long as six weeks. Two of Ellen’s patients were clearly there for the long haul, one due to a motorcycle accident and the other due to a car crash. As Ellen finished changing a dressing for one of her patients, we heard the call, “Level One Trauma.” The Flight for Life helicopter was coming in.

The nursing director for the Emergency Department called and asked if I wanted to come down and see the response to the Level One Trauma. Ellen and I went downstairs to what seemed like chaos: a crowd of people bustling around someone on a gurney, who had a chest so bloated it looked like it was going to explode. The patient had been thrown from his horse the day before, but had only been found this morning.

Initially, I felt like an intruder. But I quickly forgot myself and stood in awe. I realized there was no chaos. There was an incredible team of nurses, doctors, respiratory therapists and X-ray technicians who, with the elegance of a symphony or a dance troupe, worked to save a life. Had it been me or anyone I love on that gurney, this was the team I would want.
Later, as I left the hospital, I offered a prayer for all the patients seeking healing and health. I prayed especially for the associates of St. Mary-Corwin, who are always here, who put the healing ministry of Christ into action every hour and every day, who are known and loved by their patients, and who I rarely have the privilege to meet.

As Board Chair, one of my responsibilities is to ensure that the charts and statistics we review evolve into strategies for improvement. It’s good work. This day, I put a face on all that data. I was a fragile witness to Christ’s healing ministry. And, I’ll never look at data the same way again.

Jayne Mazur
St. Mary-Corwin Medical Center
Pueblo, Colorado

“Initially, I felt like an intruder. But I quickly forgot myself and stood in awe.”

Questions for Reflection

How do I “put a face on” the “good work” I do, in whatever my role, in this healing ministry?

How might my impressions change if I shadowed a nurse, an administrator, a housekeeper, a coder or a physician this afternoon?
As my husband, Stan, and I sat down to dinner on a hot July day, I said, “Let me share my day with you.” I began to tell him of my time at St. Catherine Hospital, where I volunteer each week to play the piano.

I had played for several minutes when my lower back began to hurt. I was seriously thinking of closing up the piano and going home. However, I persevered and continued to play.

Soon, a young woman walked by with her little girl, who was hooked up to intravenous medications. The child was very curious about the piano and stopped to look. I asked her if she would sing with me, and began to play “Twinkle, Twinkle Little Star.”

“Music seems to minister to those who are in need and give them comfort.”
Suddenly, the little girl climbed under the ropes that separated me from the people. As her mother disconnected her from the IV bag, she backed up to my leg, wanting me to pick her up. As I put her on my lap, I kissed the top of her sweet little head. I looked up at the mother, who began to cry as she said, “My mother died not long ago and I miss my mother’s song. She always sang to my siblings and me as we were growing up. She always had a song in her heart.” As the little girl left my lap and went back to her mother, she was beaming.

As I left for the day, I thanked God for the privilege of sharing the gift of music that He had given me as a child. Music seems to minister to those who are in need and give them comfort. Tears streamed down my face as I thanked God for the wonderful experience. I thought of the scripture, “Whatever you do for the least of them, you do for me.”

Tears welled up in Stan’s eyes as he said, “Now, you need to hear the rest of the story.” He told me that, during the time he knew I was at the hospital, he prayed that I would feel the Lord’s arms around me and His presence. God had answered my husband’s prayers in such a marvelous way. As always, all praise goes to Him, the Author and Finisher of our Faith.

Earlene Mitchell  
St. Catherine Hospital  
Garden City, Kansas

Questions for Reflection

What prayer or song from your childhood lingers in your heart?  
How can you share the joy of this memory with someone who needs a smile?
Nursing is what I’ve always wanted to do. Helping people when they need me is what I enjoy most. I have cared for many people and seen many things. However, one day and one patient in particular will stay with me forever.

I had been a nurse for a little over a year at the time. I was gaining experience every day and loving every minute of it. One Sunday afternoon, I had been floated to the medical floor. When my shift was half over, I was told I was getting a patient from the Emergency Department: an older man who had been brought in septic. I was told it was too late for treatment and that he would be brought to the floor for comfort measures.

When the patient was brought to the room, he was unresponsive. The report said that he had no children. He had been accompanied by his niece and her husband, but they had left after showing no real sympathy for the situation.

With my little experience with death, I asked another nurse to help me with the assessment. We knew the patient would die soon. The odor that came from the man was one of old urine and a lack of bathing.

Without a word, the two other nurses and a certified nurse assistant on the floor began to help give the patient the bath he needed and deserved. We cleaned him from head to toe and everywhere in between. It took a while, but it was all done without a word being spoken.

One of us stayed with the patient constantly, in between caring for our other patients. I held his hand and talked to him as if I knew him. He began to show signs of the end. I called in the other nurses and continued to hold his hand until he passed — my first face-to-face experience with death. No one was there but us.
Something amazing happened that day: without a word being said, we came together and became the people this man needed the most. No one except us knew in what condition he had come into the hospital. He left this Earth clean and ready for the next life. It was one of the most memorable moments of my career and I still think of it to this day.

Johanna Murry
St. Catherine Hospital
Garden City, Kansas

“Without a word being said, we came together and became the people this man needed the most.”

Questions for Reflection

What part of your daily work has provided deeper meaning to your role in the organization?

Share an experience with death that has touched you.
Busy Angels — A Holiday Story

Every year, St. John’s Emergency Department (ED) staff adopts a family for the holidays. We help them with their needs and a few of the wants they have for Christmas.

I asked the principal at my son’s school if she knew of a family that needed our assistance. She had just the family for us. A mother and her young son had moved to our area a few months earlier and were struggling to get on their feet. I called the mother and asked if she would be willing to accept our help. She was reluctant at first, but agreed to work with us through the holidays. Every time I spoke with her, she cried, overwhelmed that people she had never met would be willing to help her small family.

A few conversations later, I learned that there was no refrigerator in her house. All I had to do was speak with one of my wonderful co-workers. The following day, a brand-new refrigerator was delivered to the family’s home. The mother was thrilled and called to say that she could never have imagined such a gift.

Our phone calls also revealed that this woman and her son were living in only three rooms of their house. Someone who had tried to help her out had removed the floor from her son’s room, as well as all the fixtures from the bathroom. Nothing had been replaced. The mother and son used the shower at her sister’s house and the restroom at a convenience store. This was a challenge, but I knew I could count on the generosity of the ED staff.

“Every time I spoke with her, she cried, overwhelmed that people she had never met would be willing to help her small family.”
Two weeks later, the mother shed tears of joy as she showed me her son’s new floor and bed, along with all the Christmas presents he received from our staff. She showed me her new bathroom, which was well on the way to completion. Everything had been provided through the hard work, determination and financial contributions of a medical team she didn’t even know. She and her son were assured a better New Year just by knowing that there are people who give without hesitation and when you need them most.

Our incredible ED staff saves lives every day. This time, they healed a broken spirit. They received something in return: the gratitude of a single mother and the smile on her son’s face.

I once read a story that said angels are very busy during the holidays, so they need help from people here on earth. I think many of those angels work right here at St. John’s. I am proud to work alongside each one of them.

Nancy Nichols  
St. John’s Regional Medical Center  
Joplin, Missouri

Questions for Reflection

How has God made Himself known to you?

Are you spiritually alive?
One Sunday morning I worked on the Pediatric Unit at St. Catherine Hospital, where two young boys, George and Nick, were patients. They both had leukemia. Both were fairly healthy and able to be out in the halls, rather than in their rooms in isolation. They were bored and talked me into letting them each have a large, 60cc syringe that they used to spray each other with water.

I made them promise not to spray me or any other nurses and, of course, not to saturate the halls. I’d had a problem once when George dropped water out the window of his room onto a nurse who was walking into the hospital. George and I both got in trouble.

Dr. Meyers, a pediatrician, was making rounds that morning and got caught in the spray from the syringes. He was a good sport about it. The boys begged him not to tell their pediatrician, Dr. Zauche: they wanted to squirt him, too, when he came to do rounds.

I was feeling that I had somehow lost control of the situation, but the boys were having so much fun. Dr. Meyers left the floor with the boys calling “Don’t tell Dr. Zauche!” after him.

About an hour later, I noticed a transformer coming up the hall. It was a person in full transformer gear, including a full plastic face mask. To my disbelief, the transformer proved to be Dr. Zauche! The boys looked out their doors, whooped and hollered and blasted away with their water-filled syringes.

I will never forget that day, the wonderful spirit of fun in the two boys and the two pediatricians who made their day.

Linda Roemer, RN
St. Catherine Hospital
Garden City, Kansas

Note: Some names have been changed to protect confidentiality.
“I noticed a transformer coming up the hall.”

Question for Reflection

Where do you find “laughter” in the stress of your work?
Sometimes, someone comes along who touches your soul: someone who is infinitely approachable and gives of himself without expecting anything in return. For me, this person was Paul, a certified registered nurse anesthetist who I worked with in the operating room. He had a way of calming and reassuring his patients with his demeanor and touch. He gave 100 percent to his patients and co-workers.

Paul died after bravely fighting cancer for five years. I knew he had retired from the Air Force and had been in Desert Storm and Iraqi Freedom. I knew he was married to the love of his life and that his family was very important to him. I also knew he was a born-again Christian who was truly faithful to God and his teachings.

At one point, I was having a difficult time as a parent. Knowing that he had grown children, I asked Paul if he knew of anything that would help. He asked if it would be OK if he prayed with me. I agreed, and he grasped both of my hands in his and began to pray. He asked for guidance for me, healing for my son and peace and comfort for my family. He said “Amen” and released my hands. A feeling of warmth and comfort began to surround me. I had never had such an all-encompassing feeling of peace before, and have never had it since.

At first, I did not want to share this experience with anyone because I was afraid they would think I was crazy. When I eventually shared it with some of my friends, I found out that Paul had prayed with others who had experienced the same feeling of peace, as if their burden had been lifted.

Knowing and praying with Paul was such a wonderful example of what true faith can do. Paul was a living example of the core values of reverence, integrity, compassion and excellence. He is missed.

Lisa Rowan, RN
St. Catherine Hospital
Garden City, Kansas
“I had never had such an all-encompassing feeling of peace before, and have never had it since.”

Questions for Reflection

What is the significant learning from this story?

How are you led by the Spirit?
I was called to the Critical Care Unit because a family wished to have their loved one taken off a ventilator. I paused for a short prayer to prepare myself. I thought about how difficult it must be for the family. As I approached the nurse’s station, I was told the family was in the waiting room.

I entered the waiting room and saw a large family of 30 sitting in a circle. A few were in chairs, some were on the floor and three held babies in their arms. The nurses had supplied coffee and water to drink. The family members included young and old. There were smiles and tears, but mainly joyous sound filled the room. There was a vacant chair in the middle of the circle for me, the chaplain.

The eldest son, Brian, introduced me to the family. I felt a sense of joy encapsulate the family in their closeness. The youngest son began to tell his favorite story about the patient, Papa Joe. One after another, each family member shared their stories of their love for Papa Joe. Engaged in listening, I was surprised by how quickly an hour passed. We began to discuss funeral arrangements.

In a moment of silence, a granddaughter blurted out, “I want to help. I can put together pictures of Papa Joe.” A daughter-in-law said, “I want to do a video show of his life.” Another child said, “We must have a fishing pole at the service.” Ideas for songs and scripture sprang up from many family members. Then a great-grandchild of five shouted, “I can draw fishes real good!” “Yes indeed,” said his grandma, “and you shall.”

As the room quieted, Brian said it was time to go and say the last goodbyes. As each family member kissed Papa Joe, they thanked him for their favorite times. Their last thoughts were not of a man dying, but the unique gifts he had given to each of them. I replayed their stories in my mind as I watched them enter and leave Papa Joe’s room.
Brian hugged me and smiled. With tears running down his cheeks, he said, “Death and birth are a celebration of one’s beginning.”

I will keep Papa Joe’s family in my heart always. They understood how precious the gift of life is and the importance that each person has in life, no matter their age. The simple words “I can draw fishes real good!” will forever leave their imprint on my heart.

CATHI RUIZ
Penrose-St. Francis Health Services
Colorado Springs, Colorado

“One after another, each family member shared their stories of their love for Papa Joe.”

Questions for Reflection
Where do you draw your significance from?
What is the difference between knowing about God and knowing God?
Recently, I arrived at work and found it was my turn to be pulled to a different floor. We get very comfortable in a routine, and it can be hard to move out of our “box.” I went willingly, even though I wanted to stay with my immediate floor “family.”

After receiving my assignment and starting my shift, everything was very routine: greeting patients; listening to their hearts, bellies and lungs; checking dressings; and doing the other things that pertain to assessing patients.

One patient seemed very distant. I perceived that he could use a listening ear. He was on medical leave from his job as a pilot, due to a problem with alcohol brought on by family issues. This gentleman felt his life was on a self-destructive, downward spiral.

I asked him if he thought about his spirituality. His response was that he didn’t think God cared. I explained that I didn’t usually work on that floor, but I thought that God cared about him so much that God had called me to speak to him, to let him know how much God cared. The stately gentleman appeared humbled by this thought and allowed me to pray with him.

I’ve not heard from the patient since that encounter, but I never doubt God’s purpose for redirecting my path each day. Yes, I chose my career to serve with my hands, and I am willing to go when I am called. I never know when God will use me as His handmaiden. I just want others to know that there is more to our patients than their medical needs.

Helen Ryan, RN
Saint Clare’s Hospital/Denville
Denville, New Jersey
“I asked him if he thought about his spirituality. His response was that he didn’t think God cared.”

Questions for Reflection

The healing profession has always been linked to spiritual healing and wholeness. What brought you to the work you do?

How have you met the spiritual needs of those you care for?
It can be challenging to live up to our mission of creating a healing experience for the body, mind and spirit of every person we care for. When a patient is nearing the end of his or her life, there is a need to bring closure; to say goodbye. This story is about one closure when true healing occurred.

Mary had cancer and had been at our hospital for more than two weeks. Mary and her son made the difficult decision that she should go to hospice care. Mary was on a ventilator and needed a significant amount of care. As you can imagine, she began to plan how she wanted to live her last days. Mary wanted to spend her final moments with her husband, who was in a nursing home in Fremont, Nebraska, more than 30 miles away. Our team was concerned that Mary could not tolerate the trip and would die before getting the chance to see her husband.

Donna, our charge nurse, and Marcia, our social worker, began to explore how we could help Mary. They tried to convince her to stay at our hospital while we made arrangements to bring her husband to her. Concerned about her husband’s health, Mary was against this and wanted to continue with plans to go to Fremont.

The team had a very difficult time arranging Mary’s trip because no transport company could provide ventilator support en route. Finally, they found a transport company that agreed to take Mary, with the understanding that she might have to be manually ventilated during transport. Then, administrators at the Fremont nursing home told us they could not meet Mary’s needs because she required a ventilator. However, our team would not be deterred in helping Mary to say goodbye to her husband. They contacted Fremont Hospital and arranged for Mary to be admitted there. The hospital is connected to the nursing home where Mary’s husband resided.
With plans in place, our team prepared Mary to make the trip successfully. She was ventilated the entire way to Fremont. The hospital staff greeted her when she arrived and brought her husband to her bedside. At last, she was able to see him and say goodbye. Mary and her husband looked in each others’ eyes and shared their love for each other. Mary survived for 45 minutes. With a peaceful heart, holding her husband’s hand, she died. Later, we learned that Mary’s husband died just a few weeks after she passed away.

I became aware of our team’s extraordinary efforts days later. You see, they knew they didn’t need to ask permission to go out of their way to do the right thing for Mary and her husband — they just did it. Without fanfare, they made our mission to heal the body, mind and spirit of this family a reality. We may not have cured Mary, but we know we healed her.

Ann Schumacher
Alegent Health Immanuel Medical Center
Omaha, Nebraska

“Our team would not be deterred in helping Mary to say goodbye to her husband.”

Questions for Reflection

How have you found the extraordinary in your ordinary, day-to-day activities?

People in this story showed compassion: how have you seen this value in your co-workers?
The radiation oncology department of Memorial Health Care System has seen many people in need. Often, we wish there was more we could do for our patients. We are so blessed to become part of their lives for several weeks. During that time we become best friends, daughters, sons or grandkids, but most of all we become their support. We are not just therapists, nurses and front office staff, we are family. We see them through tears of frustration and fear and through smiles of hopefulness.

Not long ago, our department shared an example of God working through us. A young patient came to us in a very bad state. She was mother to four small children and was so sick that she was admitted to the Intensive Care Unit. There she stayed, alone and away from her children. Slowly, she regained her strength and completed her radiation treatments. During this time, the Lord put our young patient on our hearts.

One evening when I went home, I could not shake the feeling that there was something God wanted us to do for our patient and her family. When I went to bed, I prayed and asked what we needed to do. Finances, I thought — that was the answer. The next morning, I went to work wondering what the next step would be. I talked with several of the staff and found that we all shared the same feelings. By the end of the day, we had several hundred dollars that staff members had donated to our patient.

I went to the store and purchased gift cards for groceries and two special gifts for each child. There was enough money that we could also give the family cash to help with bills.

When we presented the patient with our cards and gifts, she began to cry. We wondered if we had offended her. She looked up and said she loved us and we were an answer to her prayers.
The special gifts for her children were perfect, from the necklace for the oldest girl to the baby doll for the youngest girl. I don’t think it was me who picked the gifts out, it was our Lord. He knew what each of his children needed.

Sometimes, we all get too busy to listen. At other times, all it takes is a whisper from God to make things happen. I pray I am never too busy to listen to his whispers again.

Dawn L. Schussler, RT
Memorial Health Care System
Chattanooga, Tennessee

“I could not shake the feeling that there was something God wanted us to do for our patient and her family.”

Questions for Reflection
How are you led by the Spirit of God?
Are you open to hearing God’s whispers?
Karen had been in a serious motor vehicle accident. Her home and her family, including her children, were two hours from our facility. Karen’s progress in therapy had slowed while she was in a large rehabilitation unit, and a traumatic brain injury facility in another state believed she was not ready for admission. Instead, Karen transferred to our Transitional Care Unit to continue her rehabilitation.

When Karen came to us, her mobility and communication were quite limited. However, we could always tell how hard she tried. She has a very loving family who always visited and encouraged her.

During the months that Karen was here, we began to see little signs of progress in her physical function and communication skills. She always worked hard, and that hard work paid off. Her family once again contacted the traumatic brain injury facility that had initially declined to admit her. Their representatives came to visit Karen and determined she had progressed enough to tolerate their regimen. We were all ecstatic at the thought of Karen moving on to “Brain School,” as her family called it!

“After months of living with us and becoming part of our family, Karen would now be hours away from us and even further from her family.”
But, moving on meant that after months of living with us and becoming part of our family, Karen would now be hours away from us and even further from her family. Because her family and friends had been so involved in her therapy and progress, we wanted to give all of them a chance to wish her well in the next phase of her recovery.

The weekend before Karen was to leave, we held a party for her, expecting about 20 people or so. Instead, more than 60 people who love and care about Karen came to give her their best wishes!

Her family told us how much they appreciated the party. We were happy to share with them that it was as much for us as it was for them, as Karen had truly become part of our family.

Ann Shoup, PT  
St. Mary’s Healthcare Center  
Pierre, South Dakota

Questions for Reflection

How does the life of God bring light to the world?

What can we learn from this story?
Today I was feeling sad, scattered and restless. I yearned for a few moments of peace. I walked the labyrinth at Mercy Regional Medical Center and found comfort in my mind, body and soul.

It’s magical, the way that walking the labyrinth works. Some sections are tight switchbacks that make me feel like I’m not progressing at the rate I’d hoped. The longer stretches give the illusion that I’m finally getting somewhere. I can’t accurately see where I am in the process, yet I trust that I’m on the right path and that all will work out in good time. I trust the process, much like life.

Once in the center, I rest and relish the quiet warmth of the sun and the refreshing breeze. Then, I begin the journey back to the tasks at hand. I find myself truly refreshed and invigorated. And it only takes 15 minutes of my time. Try a labyrinth, you might like it.

**Jenny Treanor**
*Mercy Regional Medical Center*
*Durango, Colorado*
“I trust that I’m on the right path and that all will work out in good time.”

Question for Reflection

What challenges might your current path be preparing you for in life and in the work you do?
Working in the emergency medical field, we witness a lot: some good, some not so good. Occasionally, we transport residents from one facility to another for treatments and doctor appointments.

For about two weeks, my ambulance partner and I had the privilege to transport an elderly lady, Betty, from St. Francis in Denville to Saint Clare’s Hospital/Dover for chemotherapy treatments. She grew weaker as the days went by, and no family members had visited her for months. Still, she was a happy soul and we had fun on our trips to Dover. She looked forward to seeing us and we looked forward to seeing her.

Though Betty’s spirits were high, we all knew that she was declining. She was unable to eat much. One day, on our way back to St. Francis, I asked her, “If you could have anything to eat right now, what would it be?” She told me how she had loved to go to Denville Dairy, a well-known ice cream establishment, and indulge in ice cream with her family.

My partner and I waved goodnight and told her we would see her the next day. We looked at each other and knew just what to do. We had no other jobs pending, so we went to Denville Dairy and bought her an ice cream cone.

We took the ice cream cone to St. Francis. We found Betty lying in bed looking at photographs. “Betty, we have a little something for you,” we said, and gave her the cone. Her eyes lit up and she smiled from ear to ear. We had tears in our eyes — to see her so happy was wonderful. We sat a while and spoon fed her some of the ice cream she had been craving for so long. She didn’t have much, but she loved it and was thankful for the thought.
It was a Friday when we last saw her and brought her the sweet treat. We were not able to take her for any more treatments, as she died shortly after that. We are thankful that her last days were the best they could be. I am thankful I had time with Betty and helped her enjoy the brief time she had left here on earth.

It seems that people always want more in life, but it’s the little things that make life so sweet.

JOANNE STAVERS
Saint Clare’s Hospital/Dover
Dover, New Jersey

“I asked her, ‘If you could have anything to eat right now, what would it be?’ She told me how she had loved to go to Denville Dairy and indulge in ice cream with her family.”

Questions for Reflection

Can you name the “favorite things” of your loved ones?

When was the last time you surprised your loved one with one of his/her favorite things, and what did it mean to you and to your loved one? What is it that holds you back from these simple pleasures?
We are never truly ready to hear the holy stories that come our way when we enter a patient’s room. As a clinical pastoral education student, I am amazed at the Sacred Stories that people are willing to share when I spend time being “present” with them. I also realize that it is our own fears that can keep us from hearing and telling these stories, which have the power to sustain us during the darkest times.

Recently, I spent time with a man before he had major surgery for a probable cancerous tumor. I prayed with him and his family for his physical health and recovery from the surgery. Days later, I made another visit to him as he prepared to go home. He was physically recovering from his surgery, though the diagnosis and other long-term chronic conditions would be a challenge for him when he returned to his small rural home. I hoped to wish him well and perhaps offer a final prayer.

Our visit began with the usual conversations two people have when they are nearly strangers to each other. We talked of his surgery, his physical health and what home would be like for him during his recovery. Then, the conversation began to shift. He made a remark about his approaching birthday, and how he really hated that time of year. He told me of the loss of his beloved wife a few years ago during the month of his birthday. Then, he shared with me the very tragic loss of his son less than two years ago — on his birthday — through suicide.

As he told his story, I remember thinking that I had a choice to make: to embrace his pain and courage in telling his story, or to turn away. This man was sharing a pain that I could not even begin to feel; yet he trusted me with this pain. What a risk he took!

When he finished his story, I took his hand and held it tightly. I told him how honored I was to have been chosen to hear this most holy story — to be trusted with holding his pain — if only for a moment. I also told him that I was made “more” because of his story and that he would always be a part of me.
Being present with people in their pain is an amazing process. How do people find it within themselves to sustain such loss and despair? By sharing his losses, did this man find strength to address the fears in his future? I don’t have any answers. I only know that I am amazed at the strength I witnessed, which could not come through any earthly source. I wish he would have asked for a prayer, but perhaps our entire time together was a prayer: a sharing of pain and loss that can be offered up to the Creator who longs to embrace us in our pain.

If I would have prayed, I might have used a beautiful African prayer about fear that speaks to me in times of distress:

O Lord, deliver us from fear of the unknown future, from fear of failure, from fear of poverty, from fear of bereavement, from fear of loneliness, from fear of sickness and pain, from fear of age, and from fear of death. Help us, O Father, by your grace to love and fear only you. Fill our hearts with cheerful courage and loving trust in you; through our Lord and Master Jesus Christ. Amen.

—Akanu Ibiam, Nigeria

Kay Totten
St. Anthony Hospital
Pendleton, Oregon

Questions for Reflection

When was the last time you took the time to really listen to an elderly person, an adolescent child or a family member? How did you feel about that encounter?

Do you remember a time when you experienced a change within yourself because of an unexpected encounter? What was that like for you?
Marty walked into the emergency outreach center where I worked as a faith community nurse. He was dressed in a camouflage jacket and pants, as well as combat-style boots. His long grey hair, balding on top, was tied back in a ponytail.

I detected a New York accent when he said, “I really don’t know why I’m here. I don’t need any help.” But, he sat down anyway. We started to talk about New England (I was born in Connecticut). Then, the conversation turned very personal. Marty told an atrocious story of childhood abuse, of leaving home at age 14 and living on the streets until he enlisted in the Army, and of an ex-wife and children he hadn’t seen in 30 years. He didn’t know where they were. After I listened, I asked him some questions. This was one of them: “Where is the Lord in this for you?” Marty jumped out of his chair said, “Gotta go,” and walked out.

I wasn’t really surprised when he left, but I was astounded when he came back to see me the next week. We sat and talked some more about his current life issues. At end, I asked him the same question: “Where is the Lord in this for you?” Again, he jumped out of his seat and left.

This scene played out numerous times until one day, in answer to my question, he said, “I hate that you are always speaking truth. I need it, but I hate it.” He gave his heart to Jesus and his life changed. He quit drinking, with no delirium tremens.

One day Marty came into my office, as he had so many times during our seven-year history, but this time he said he had been diagnosed with cancer. I saw him less often, then not at all. However, I later received a call from a home health nurse asking if I knew Marty. He was in the Veterans Administration hospital in Denver, and had asked to give me medical power of attorney.
I went to visit him this time. He was transferred to hospice in Colorado Springs, and I was with him when he peacefully went to meet his Savior.

In arranging for his funeral, I had no family information, so I called the Veterans Administration clinic and asked them to check Marty’s records. Under next of kin, Marty had written my name.

We never know the ripple effect that can happen when two people meet. It can be wonder-filled if we invite the Lord in. Such was the case when I met Marty.

SALLY VAN WYK, RN
Penrose-St. Francis Hospital
Colorado Springs, Colorado

“Under next of kin, Marty had written my name.”

Questions for Reflection

Where is the Lord in this (this role, this moment, this period in time, this relationship, etc.) for you?

When was the last time you took the time to visit the sick (listen, share, be present, hold a hand, give comfort)? Is it time?
It was near Saint Patrick’s Day, and my friend Danny and I were sharing stories of life and the roads we are taking in our medical careers. We began to talk about where our families came from. Danny has Irish roots and I was born in England. Danny told me that he plays the bagpipes, which I love to hear, and that he would perform in a Saint Patrick’s Day parade with his piping band.

I asked if he would be kind enough to stop by on his way to the parade and play the pipes for me. He came to Saint Clare’s Hospital with his father and friend. The three of them stood in their kilts in the parking lot, playing the pipes for all to enjoy. It was beautiful.

A man appeared and asked who was playing the pipes. I told him it was a friend of mine, and he asked if they would play for his mother, who was in hospice at the time. She had always wanted to hear someone play the bagpipes.

Danny and the others agreed to play for the man’s mother. We secured permission from hospital management and hospice management. Danny and his entourage proceeded upstairs to the hospice area. They played “Amazing Grace.” The sound of the pipes echoed in the halls and everyone was caught up in the moment, forgetting their troubles for a brief time as they and enjoyed the sound of the bagpipes. We were all in tears of joy and sadness as the bagpipers granted the woman’s wish.

I had to leave, but Danny, his dad and his friend stayed a while longer to chat with the patient and family. Danny said she looked content after they had finished playing. She died a couple of days later, but her son gained comfort from knowing he had granted her dying wish.
Danny was invited to play the bagpipes at the woman’s funeral, which he did. What a nice ending to a heart-warming life experience. No money or possessions can ever replace the goodness that comes from our hearts.

All of this happened just by chance. Was it coincidence, or a blessing in disguise? God really does work in mysterious ways.

**Joanne Stavers Sisco**

*Saint Clare’s Hospital/Dover*  
*Dover, New Jersey*

“We were all in tears of joy and sadness as the bagpipers granted the woman’s wish.”

**Questions for Reflection**

*Stop for a moment and recall: what sound lifts your heart, and why?*

*Think about the sound of your own voice when you are talking with others. Is the sound heartwarming, like the bagpipes? How do reverence, integrity, compassion and excellence come through in the sound of your voice?*
It was just a piece of dusty ground — an eyesore near the entryway to St. Elizabeth Care Center. At one time, someone had thrown a handful of wildflower seeds down, and some of those had grown, along with a variety of local weeds.

The employees of the care center were not content to let the sleeping ground lie. Donna, a certified medical assistant, and Misty, a certified nursing assistant, took the situation in hand. On their own time, using their own resources, they began to dig up and clear the little plot of land. After they removed the weeds, they realized that the wildflowers, while beautiful, did not provide the organized beauty they envisioned. A major remodel was necessary.

New plants were purchased for or donated to their project. A high school gardening class provided flowers. A nursery donated a load of bark. Employees provided additional funds for trees and flowers, and decorative rocks came from a landscaping company.

Almost every day, before or after their shifts, Donna or Misty could be found watering, weeding and planting their little piece of heaven on earth.

Now, that little piece of ground is easily the most beautiful spot on our campus. Residents and employees show off the latest bloom, proud to be associated with the beauty that now defines their home and workplace. Employees and visitors pause to smell the roses in full bloom, taking in the fragrance that perfumes the entrance to our facility for all who walk by.
I think those roses symbolize Donna and Misty. The beauty of their lives, their unselfish giving and their efforts to make the world a little better provide us with examples of how Sacred Stories thrive every day at St. Elizabeth Health Services!

Jerry D. Nickell
St. Elizabeth Health Services
Baker City, Oregon

“The employees of the care center were not content to let the sleeping ground lie.”

Questions for Reflection

What are the signs of the Spirit within this story?

What is the meaning that you draw from this story?
The day had been anything but joyful. I had just begun my morning when I was called to the medical floor to visit a family that had lost their loved one. A week earlier, the medical staff had asked me to communicate a poor prognosis and assist the family with end-of-life decisions. Their cultural background and persistent denial complicated the process. I was not surprised to find that nothing further had been planned or prepared during the week of the patient’s obvious decline.

Five hours later, I was frustrated and even angry in my spirit. My patience wore thin as I struggled to help the family make the decisions necessary to complete funeral arrangements.

As I left the room, I wanted desperately to escape the hospital, go home and engage in some mindless, manual task. But, I was paged again to visit a patient who needed counseling. Anticipating more fruitless conversation, I felt the last of my patience drain away.

As I walked to the patient’s room, I prayed for Christ’s wisdom, patience and love (especially the last two). After a forced smile and greeting, I took a chair beside the patient’s bed. Within minutes, she told me she could see no reason to keep on living. She’d been a professional and a good one. She’d gone the extra mile with colleagues and family. She was always the strong one, the one able and willing to hold it all together. But now her advancing age and health problems made all of that impossible, so why go on living?

I’m not sure what I said in response. I mostly listened. But, I began to feel her hurt and disappointment as she grieved her loss and feared the changes looming ahead. As we prayed and wept together, something happened. Her expression became more joyful. She realized that her life still held possibilities. At an ever-increasing pace, she began to put into words the new ideas and plans being poured into her mind in answer to our prayers.
The next morning, I found her waiting with newly written discharge instructions in her hand. Smiling joyfully, she introduced me to her husband and proclaimed, “Here is the chaplain who saved my life!”

That was news to me! I’d felt pretty ineffective the day before. But, somehow, God overwhelmed my frustration and impatience and used my humble ministry anyway. He allowed me to experience once again the words Jesus spoke to the Apostle Paul, “My grace is sufficient for you, for my grace is made perfect in weakness!” (2 Corinthians 11:9)

Joe Barnett
Holy Rosary Medical Center
Ontario, Oregon

“She realized that her life still held possibilities.”

Questions for Reflection

In what ways has God used you as an instrument to minister to others even though you are tired or frustrated?

In what ways can you listen more effectively to the needs and cares of others?
End-of-life care includes the comfort of the patient and also those who are hurting and grieving. As coordinator of St. John’s end-of-life care program, I minister to families in many different ways. Once in a while, a family comes along and ministers to me.

I met such a family in our Intensive Care Unit. The family’s father had not shown any improvement after an intracranial bleed. They were an observant Mennonite family, and I hoped I knew enough about their beliefs to be sensitive to them.

Three adult children of our patient walked with me to our Palliative Care Unit, where we would transfer their father for comfort measures after discontinuing ventilator support. They had fewer questions than most families I meet in this role. When they saw the room their father would have, they said, “Yes, this is where we want him.” When I provided an overview of our palliative care protocol, I couldn’t help feeling that their decision had already been made and they were merely indulging my need to have this discussion.

After the patient was settled into the new room, I heard singing. It sounded like a large church choir singing traditional hymns, a capella, in four-part harmony. It was beautiful, but loud. I peeked into the room and counted about 25 people, all gathered around the bed of their beloved father, grandfather, husband and friend.

The staff went into response mode, moving from room to room around the unit, much as we respond to a fire drill. We asked all of the patients, “Is the singing too loud for you?” We offered to close their doors, preferring to let the family sing unless there was a patient who could not tolerate the volume. All of the patients and families said the singing did not bother them, and most asked us to leave their doors open so they could hear.

The family sang numerous times throughout the day, for about 20 minutes at a time. The wife of a patient two doors down asked if the
family would sing for her husband, who was also in his last days of life. They humbly obliged. Listening from my office was like being on a spiritual mini-retreat. The singing, as loud as it was, actually created an atmosphere of peacefulness.

As I watched, I realized why they had wanted the patient here. Which medications we would give or how we would assess his breathing mattered little to this family. They needed a place to come together as a community, to be close to him, to sing songs of praise and place their trust in the Lord. In their grief, they did what provided comfort to them and brought a dose of joy to us. I wonder if they realized how many hearts they touched that day?

**Tracy Borgmeyer**
St. John’s Regional Medical Center
Joplin, Missouri

“It sounded like a large church choir singing traditional hymns, a capella, in four-part harmony. It was beautiful, but loud.”

**Questions for Reflection**

*When was the last time you took a risk that made a difference?*

*When was the last time you sang out loud? What happened? How did it feel?*
James 2:5 says, “Has not God chosen those who are poor in the eyes of the world to be rich in faith and inherit the kingdom he promised those who love Him?”

I had the opportunity to travel to Guatemala with others from a local church for 10 days. We stayed at the Rising Villages in San Pedro Las Huertas. The trip changed me in many ways, especially how I feel about the people native to the area.

At first, I wanted to go so I could “help those poor people.” As my experience with the Guatemalan people grew, I realized that these “poor people” were far richer than I am in many ways. Their lives, from the outside, may appear very poor and simple, but their poverty is simply a matter of economics. The people of Guatemala are richer spiritually than I was — rich in a way that many of us want to be.

When we’re hungry, we go to the kitchen and get something to eat. When we’re bored, we turn on the TV. When we’re dirty, we take a hot shower. In Guatemala, things are quite different. Things that we take for granted all the time are not available to most of the population.

I came home from this experience with far more than I expected. My most memorable experience was volunteering in a hospital for people with severe disabilities, both physical and mental, as well as abandoned children with disabilities and cleft palates. To me, it was amazing to see that the permanent residents of this hospital were very well cared for and loved, even though they had been abandoned at some point in their lives.

Seeing the “poorest of the poor” and knowing that my visit to Guatemala wasn’t going to make a major, long-term difference was one of the hardest things to deal with. Most people in the U.S. aren’t poor in the same sense as those in Guatemala. We have food pantries and other public assistance programs. In Guatemala, if your children are hungry and you are poor, they just don’t eat.
Seeing how many Guatemalans are poor by material standards, yet rich spiritually, was an eye-opening experience for me. It gave me a more undiluted, uncomplicated view of life. After all, what’s more important in Christ’s vision of an earthly life: our “stuff” or our relationships? I think we all know the answer to that question.

My Guatemalan experience is something that I try to carry with me to work every day. Fundamentally, it’s an appreciation of the understanding of “rich” and “poor.”

Lynn Warzecha
St. Gabriel’s Hospital
Little Falls, Minnesota

“The people of Guatemala are richer spiritually than I was — rich in a way that many of us want to be.”

Questions for Reflection

What can you do to undilute and uncomplicate your view of everyday life?

In what ways might you be able to assist those who are poor and in need of the basics for life?
I look forward to receiving the newest edition of *Sacred Stories*. I am always amazed by the stories of real people living out the mission and vision of Catholic Health Initiatives. The ninth edition, however, was particularly special to me because it contained the story “Coming Home to Go Home,” which was written about my father.

My dad’s last few years battling cancer were very tough, not only on him but on the entire family. As sometimes happens in families, there were different opinions regarding his course of treatment. His final hospital stay proved to be the most difficult because of differences of opinion regarding letting him go home to spend his final days.

When Jim Lukenbill, the ambulance driver, asked if he could submit the story of my Dad’s final trip, I was very touched. When our mission leader announced in a department meeting that the story had been published, it was all I could do to hold back the tears. My mother, who was still struggling with the loss of my dad, was also very touched and grateful that Jim had shared the story. Our mission leader even ordered copies of *Sacred Stories* for our family members. We thought we should pay something, but we could only receive the books as a gift. We are very thankful to have this special keepsake.

These stories are a testament to our values as an organization, one to which I am proud to belong. Keep the stories coming!

Lois Slick
LakeWood Health Center
Baudette, Minnesota

*Question for Reflection*

What stories can you share as a testament to our values?