

## October 2024 Monthly Chaplaincy Update!

The month of October has been extremely busy at LA General, with the days passing by swiftly. We started off the month with several activities, which included planning for the AIN event, which was scheduled for October 16th. Two chaplains from the Presbyterian Church founded AIN (*Angel Interfaith Network*), a ministry now under St. Camillus that provides clothing, hygiene kits, baby items, and gift vouchers to assist with food, rent, and other utilities for our most vulnerable patients. The purpose of the event, which took place in one of LA General's conferences, was to invite staff members to participate, visit, and gain more knowledge about the ministry. During the event, we recognized donors such as churches and organizations like *Baby to Baby* and *Shelter Partnership* and presented two awards to social workers involved in the ministry. One of the key challenges we had was the low turnout for the event. As part of my preparation for the AIN event, in May I interviewed one of our volunteers, *Halmar Chavez*. I first heard *Halmar* share his story during a hospital-wide event, during which I learned that he was one of our patients, and his experience at the hospital led him to volunteer. **Please watch the video [here](#).** From October 16th to October 26th, we also celebrated the spiritual care week, which included various events, such as tea with the chaplains, the distribution of tea bags with notes, and a celebratory lunch for the chaplains, which was a gift from our director. I have continued to visit with patients and their families, which I believe is the crucial part of ministry as a chaplain. I will share about some of my encounters this month, which were mainly referrals from doctors or staff members.



*Photos from the AIN Event @LA General where I read a poem from Jan Richardson's Book!*

## “Dad was sleeping”

I visited with Kat (pseudonym) while doing my morning rounds in the ED resuscitation area. She was awake and welcomed the visit after I introduced myself as a chaplain. Kat then went on to share that she was experiencing some GI issues and was eager to learn more about them, as she was concerned about the constant pain she was experiencing. As I delved deeper into her symptoms, Kat revealed that she had recently undergone abdominal surgery and was currently recovering. She expressed concern about the recurrence of her previous pain and wondered if something had gone wrong during the surgery. Kat went on to mention that she was currently waiting for two specialists to determine whether she needed another procedure or not. As I explored sources of support, Kat had a friend at the BS who was sleeping during the visit, and she also shared about her family who live in the Midwest. She noted that she had just lost her dad two weeks earlier and was still in the middle of trying to decide what to do with his body. Kat explained to me that, although her dad was a devout Christian and his faith held great significance to him, the coroner had recommended cremation due to his discovery at home several days after his death. She explained that part of her concern about cremation was whether it was acceptable for Christians and that she needed some help thinking through what to do. I helped her explore some of her dad’s wishes, and Kat noted that he had never talked about any wishes or preferences for burial or cremation. He was living with her younger brother, who could not help with decision-making due to mental health issues, and had informed her that he thought that his "dad was sleeping" before they realized that he had passed on. As a result of our conversation, Kat decided to postpone her decision until she goes back home to visit and also have a conversation with other family members, including her aunt (dad’s sister). As I explored spiritual care needs, Kat noted that she was not religious, though she respected her family’s beliefs and wanted to honor that in the way she dealt with her father’s remains.



*Providing teabags with blessings to the Morning Shift Staff @ LA General*

## “Experiencing Guilt”

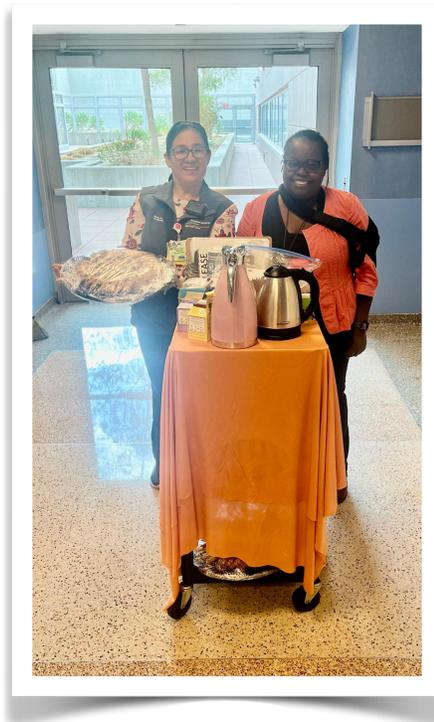
I visited Robert (pseudonym) on a staff referral for support, as he was experiencing guilt after accepting a blood transfusion and is a Jehovah's Witness. When I first arrived, he was busy with the doctors, and so I informed him that I would follow up later. Upon my subsequent SC visit, I found Robert awake and resting on his bed. He said he was doing “okay” and expressed that his faith preference is Jehovah's Witness. I shared with him that I reached out to our contact person for Jehovah's Witness (Moises Lopez), who said he would visit later in the afternoon for additional support. As I offered listening support, Robert shared that he started feeling sick on Sunday and decided to come to the hospital. He also mentioned that, despite being a Jehovah's Witness, he had chosen to accept the blood transfusion. Robert then broke down in tears, stating that he didn't want to die because his children and family still needed him. As I delved into his concerns, Robert revealed that he doesn't have any significant health issues. However, he recently visited the hospital for gastrointestinal problems, including constipation, and received a diagnosis of blockage, which he later recovered from. I continued to provide support as Robert shared that during his hospital admission, he discovered that some of his organs, such as the kidneys, were malfunctioning. He was currently awaiting additional tests to determine the cause of his altered eyes and skin color. He was concerned but hopeful that he will still recover so that he can go back to his family. As I explored sources of support, Robert shared that he has been living in Tijuana with his family and is a dual citizen of the US and Mexico. He spent time discussing his mother and grandfather, who had German ancestry, which explains why he uses an additional name. At the end of the visit, Robert revealed that he became a Jehovah's Witness approximately a year ago, having previously been non-religious. He was drawn to them due to various factors, such as their devotion to the Bible and their connection to the local community in Mexico. A close friend was also present at the BS, although she was preoccupied with a phone call. I reminded Robert that chaplains are available as needed for support, and he appreciated the visit. I also informed him that I would keep him in prayer, as he requested, and then plan to follow up as much as possible.



*A table set for Tea with the Chaplains in ICU!*

## “Gathering my nerves”

I responded to a referral from Palliative Care to visit and check on Tom (pseudonym) and also call his wife for support. When I arrived at the unit, Tom was alone and appeared to be awake. He repeatedly opened his eyes when I called out his name. I provided a compassionate presence and pastoral touch to Tom, who is non-verbal, and it was challenging for me to determine whether he could hear or not. Later, I called his wife, Mary (pseudonym) and offered her support over the phone. She shared about Tom’s life, family, and health issues. According to Mary, they have been married for over fifty years, and she still loved him! Mary described how Tom began experiencing health issues in December after suffering a stroke, but he recovered. Then a few weeks ago, Tom got burned all his body (about 80%), and their son found him. They think that he was trying to smoke and lit the cigarette while in bed, and the bedding got burned. Mary noted that she was feeling guilty about what happened, and they were still not sure but guessed he was smoking because Tom had been a smoker all his life. She also shared that part of her guilt was related to the fact that it all happened while she had gone out shopping, and she still remembers how he looked, which was preventing her from visiting.



*On our way to the Emergency Department for Tea with the Chaplains!*

As I explored sources of support, Mary shared that she has five adult children and several in children in law and grandchildren. They were the ones visiting to check on Tom since she had not been able to. She also noted that she is a foster mom to three teenagers and they have been fostering children for over forty years. Mary also noted that while she has not been able to visit, but her daughters visit and normally put their

phones near Tom's ears so that she can talk to him. She described how she was still planning to visit and see him but was having difficulty with remembering how he looked with the burns all over her body. With heaviness in her voice, Mary said she was still "gathering her nerves" so that she could visit. I encouraged Mary to try and visit soon and as I explored their life together, she noted that they had talked about their end of life wishes and knew that he would not like to continue living that way. After a brief moment of silence, Mary expressed her sadness over the phone while noting that "I know he is suffering and would not want all these things done to him." During a life review, Mary shared how Tom worked for MTA for many years before he retired and had no major health issues before the stroke. As the visit came to an end, I inquired if Tom had any religious beliefs and Mary said they were Christians and were part of the Baptist denomination. She was in touch with one of their ministers who was visiting to check on Tom in the burn unit. We spent time in prayer for Tom as he continues to receive treatment and for Mary and her family as they make decisions regarding his goals of care. Mary appreciated the call and she also noted that the doctors and social worker were keeping her updated about Tom's prognosis. They had performed several procedures for grafting to replace flesh on the burnt areas but it all seemed futile because he was still very sick.

***Prayer Items:***

- Continue to pray for our patients at LA General as they receive treatment. Pray for continued healing and recovery, particularly for those patients who have been hospitalized for extended periods, such as several months, or in some cases, in units such as the jail and behavioral health, for years. Pray for their family and friends who support them and make decisions for their care.
- Continue to pray for the ministry of Angel Interfaith Network, which uniquely seeks to meet the tangible needs of our very vulnerable patients and families. In the past few months, the needs have increased, and we are getting more requests. Pray especially for those who are unhoused and lack support from family or friends. Pray for continued support from organizations, churches, and individuals through donations to serve these patients and families.
- Pray for our staff members at the hospital. During the spiritual care week, we had an opportunity to serve and spend time with many of them in the different units. One of our visits was to the emergency room area, which has over a hundred beds. It required five chaplains to round the area and serve tea and cookies, which many of the staff were grateful for. Pray for their families, as well as those families who have lost loved ones who were working at the hospital.
- As we enter November, I realize its been almost a year of my ministry at LA General, and I am grateful for all the encounters with the patients, families, and staff members. Please continue to pray for God's guidance and wisdom as I serve and build relationships at the hospital. Also, pray and give God thanks for the support from the presbyteries and for continued provision for this chaplaincy ministry.

*Photos of Halmar Chavez (volunteer) while recovering from illness after discharge*

