

# Advancing Chaplaincy

## *Learning to Think & Act Strategically*

Session 2: Return on Investment

April 2, 2018



TRANSFORMING CHAPLAINCY



*The Standard for Spiritual Care & Education*

## Host

George Fitchett, DMin, PhD



## Background

Rev. Kelsey White, BCC



## Return on Investment

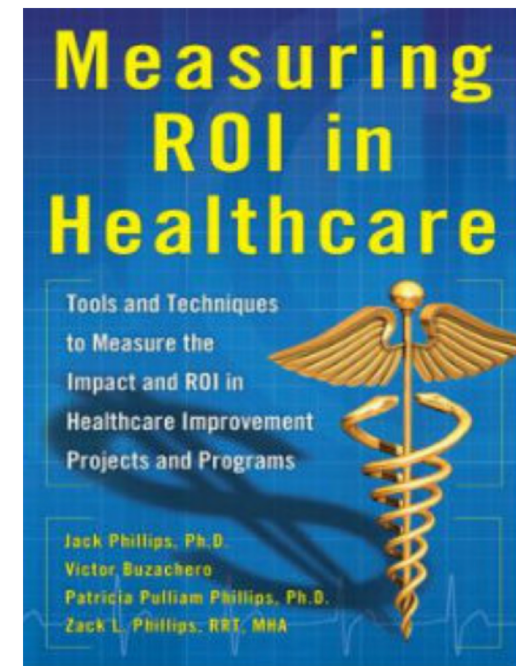
Mark Grace, Baylor Scott & White



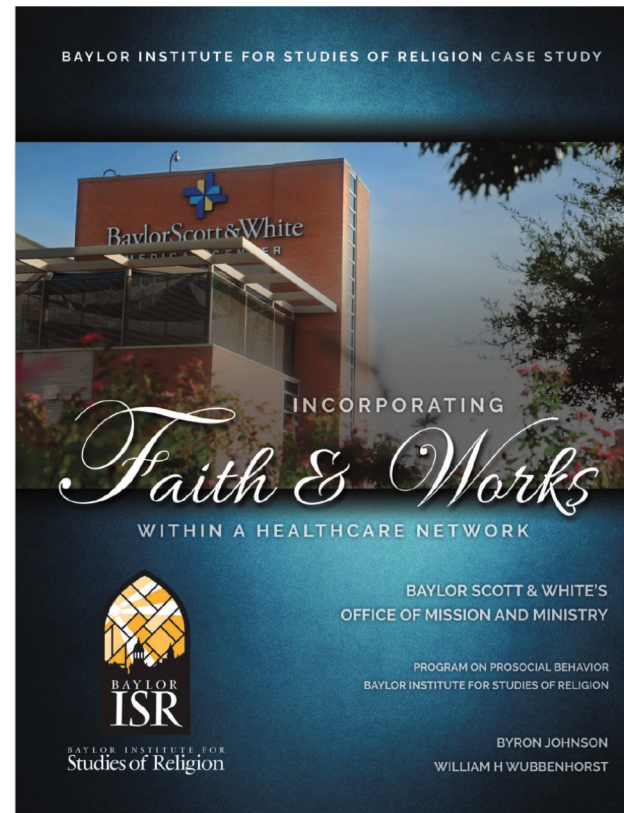
# Background



- ROI = Ratio of...
  - Cost to Benefit
  - Profit to Investment
  - Value to Cost
- Expressed as a percentage OR dollar amount
- ROI Institute – [www.roiinstitute.net](http://www.roiinstitute.net)



# Spiritual Care at Baylor Scott & White Health



<https://bit.ly/2GDW9Gi>



# Spiritual Care at Baylor Scott & White Health

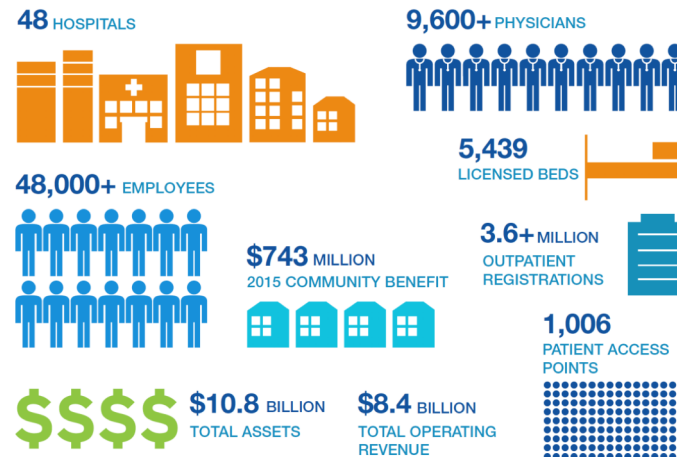


## APPENDIX I

### CHANGING HEALTH CARE. FOR LIFE.®

Baylor Scott & White Health is the largest not-for-profit healthcare system in Texas, and one of the largest in the United States. Baylor Scott & White was born from the 2013 merger of Baylor Health Care System serving North Texas and Scott & White Healthcare serving Central Texas. After years of thoughtful deliberation, the leaders of Baylor Health Care System and Scott & White Healthcare decided to combine the strengths of the two and create a new model system able to meet the demands of health care reform, the changing needs of patients and extraordinary recent advances in clinical care.

Baylor Scott & White is known for quality patient care where people can fulfill their calling and be an integral part in changing healthcare to meet the needs of the future. The System currently has 48 hospitals, 1,006 patient access points, more than 9,600 physicians and 48,000+ employees as well as the Scott & White Health Plan—a health insurance company that insures employees and consumers alike.

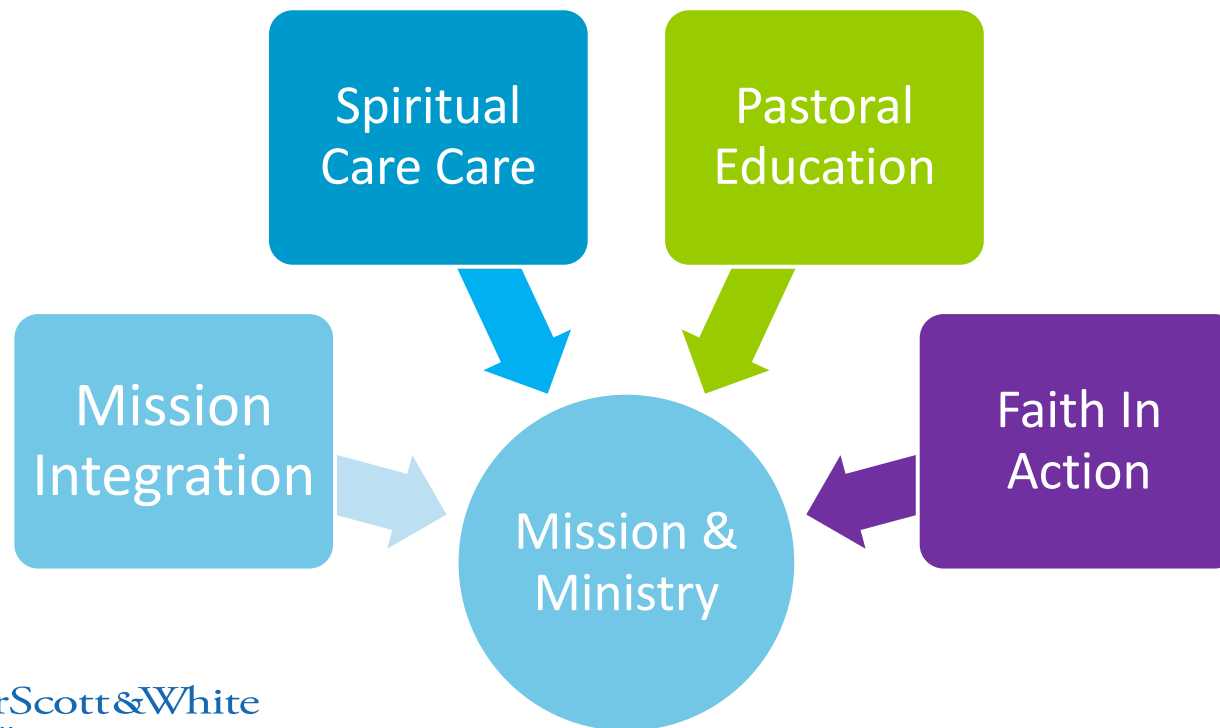


With a commitment to and a track record of innovation, collaboration, integrity and compassion for the patient, Baylor Scott & White stands to be one of the nation's exemplary healthcare organizations.

# **BSWH Office of Mission & Ministry: Our Calling**

- **To create patient care and employee environments that nurture and mobilize faith resources.**
- **To promote a spirit of altruism and collaboration in meeting humanitarian needs locally and globally.**
- **To collaborate with healers in every medical discipline to enhance their effectiveness in addressing patient and family spiritual needs and**
- **To lead exceptionally effective education programs for spiritual care that effect both global and local improvement in the spiritual lives of individuals.**

# Our Mission: To Minister



# Rol Analysis of Chaplaincy Services

INTERVENTION	FACILITY	DESCRIPTION OF SAVINGS	ANNUALIZED SAVINGS	DESCRIPTION OF RELATED HOSPITAL CHAPLAINCY COSTS	ESTIMATED ANNUALIZED HOSPITAL CHAPLAIN COSTS
Reducing Direct Cost and Length of Stay on Total Joint Patients by an Outcomes Manager led Interdisciplinary Team	Baylor University Medical Center	Reduced direct costs of total knee (TKA) and total hip (THA) replacement by 4.8% and 8.7%, respectively.  Reduced ALOS for TKA and THA patients by 20.9% and 16.2% respectively.	<b>\$481,762</b>  (Annualized reduction of 356 patient days)	<ol style="list-style-type: none"> <li>1. Attending to patient's needs</li> <li>2. Responding to patient's concerns</li> <li>3. Personal Needs (These first three correlates with the HCAPHS measures)</li> <li>4. Provide Spiritual Care</li> <li>5. Advance Care Planning</li> <li>6. Intervene and Support</li> <li>7. Collaborate with Clinical Staff</li> </ol>	<b>\$32,500</b>  (25 hours/week * \$25/hour * 52 weeks)
Estimated Share of Annualized Savings of \$481,762 Attributable to Hospital Chaplaincy		15%	Total annualized savings attributable to Hospital chaplaincy		<b>\$72,264</b>  (\$481,762 * 15%)
TOTAL ESTIMATED ROI - \$2.22 (\$72,264÷\$32,500) IN DIRECT COST SAVINGS FOR EVERY DOLLAR SPENT ON HOSPITAL CHAPLAINCY					

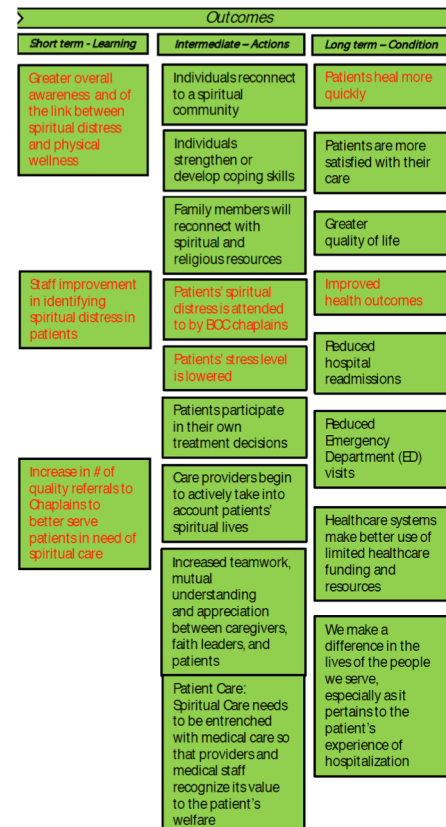
# ROI Analysis of Chaplaincy Services

INTERVENTION	FACILITY	DESCRIPTION OF SAVINGS	ANNUALIZED SAVINGS	DESCRIPTION OF RELATED HOSPITAL CHAPLAINCY COSTS	ESTIMATED ANNUALIZED HOSPITAL CHAPLAIN COSTS
Enhancing Care at the End of Life Through Transition to Hospice	Baylor All Saints Medical Center	120 patients transferred from ICU to hospice over 24 months	\$259,085  (1.56 lower LOS at savings of \$2,768 per day for 120 patients)	Served as a team member contributing in efforts to decrease anxiety/stress, allowing patient to participate in decision about their own care, etc. (pastoral care previously not involved with total joint patients).	\$17,135  372.5 hours * \$46/hour  115 hours of visit time + 57.5 hours staff discussion + 200 hours of Palliative Care chaplain admin. time
Estimated Share of Annualized Savings Attributable to Hospital Chaplaincy		25%	Total annualized savings attributable to Hospital chaplaincy (Hospital chaplain as member of 4-member Palliative Care Team)		\$64,771 (\$259,085 * 25%)
TOTAL ESTIMATED ROI - \$3.78 (\$64,771÷\$17, 135) IN DIRECT COST SAVINGS FOR EVERY DOLLAR SPENT ON HOSPITAL CHAPLAINCY					

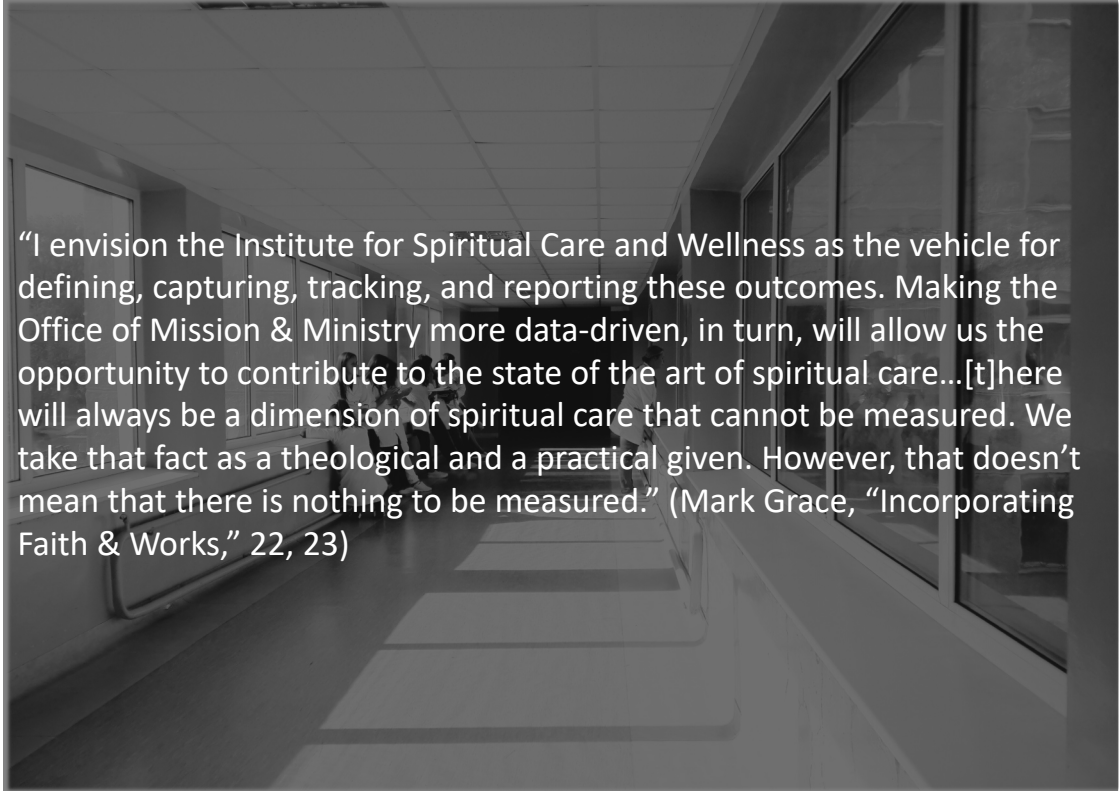
# ROI Analysis of Chaplaincy Services

## APPENDIX V: DIRECT SPIRITUAL CARE (spiritual Distress)

Alleviate spiritual distress by providing a reconnection with spiritual and religious resources in order to inject a sense of meaning, purpose, and value into the lives of patients and their families so that they are better equipped to either battle an existing illness or to stay well.

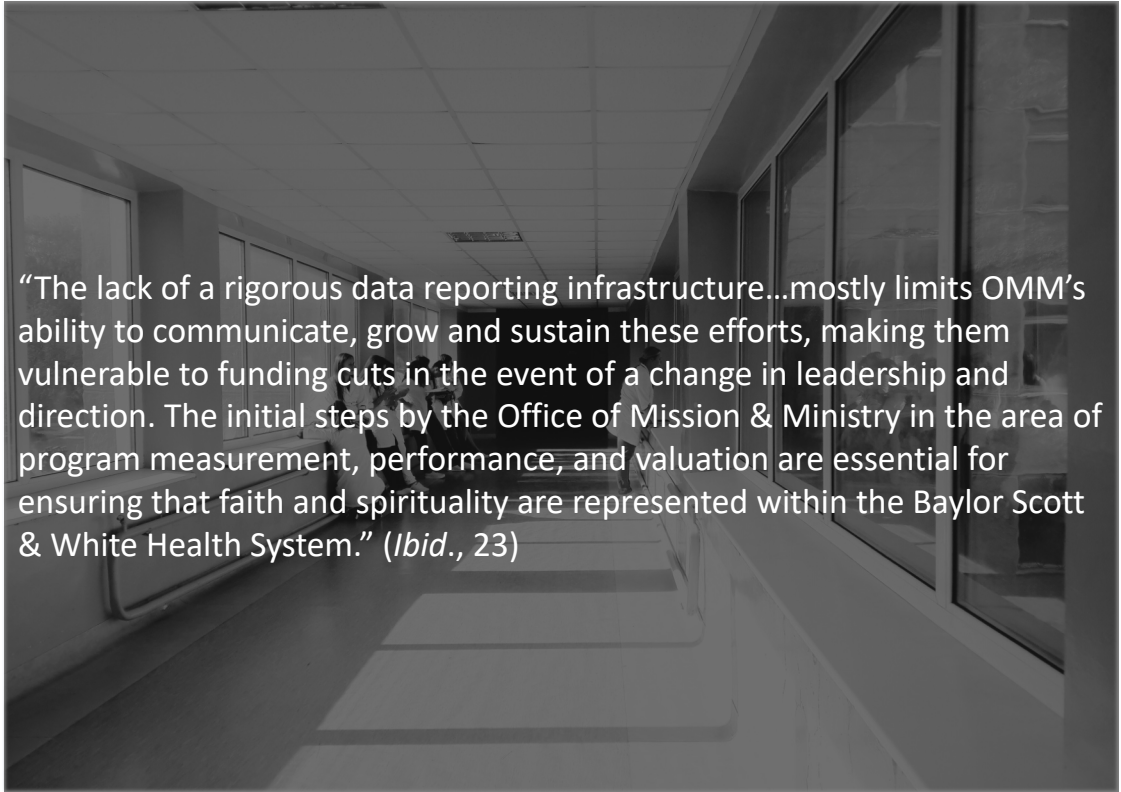


## Lessons Learned / Next Steps



“I envision the Institute for Spiritual Care and Wellness as the vehicle for defining, capturing, tracking, and reporting these outcomes. Making the Office of Mission & Ministry more data-driven, in turn, will allow us the opportunity to contribute to the state of the art of spiritual care...[t]here will always be a dimension of spiritual care that cannot be measured. We take that fact as a theological and a practical given. However, that doesn’t mean that there is nothing to be measured.” (Mark Grace, “Incorporating Faith & Works,” 22, 23)

# Lessons Learned / Next Steps



“The lack of a rigorous data reporting infrastructure...mostly limits OMM’s ability to communicate, grow and sustain these efforts, making them vulnerable to funding cuts in the event of a change in leadership and direction. The initial steps by the Office of Mission & Ministry in the area of program measurement, performance, and valuation are essential for ensuring that faith and spirituality are represented within the Baylor Scott & White Health System.” (*Ibid.*, 23)



## Lessons Learned / Next Steps



- Need for a culture shift in spiritual care units
  - Training on and implementation of measurement
  - Embracing accountability
  - Understanding how chaplains / chaplain managers deal with change and resistance to change

# Advancing Chaplaincy

## *Learning to Think & Act Strategically*

See the January 2018 Transforming Chaplaincy Newsletter  
for Kelsey White's report of a conversation  
with Dr. Patti Phillips of the ROI Institute

<https://www.transformchaplaincy.org/news/newsletter-archive/>



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# Questions?

Advancing Chaplaincy  
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## *Learning to Think & Act Strategically*

**Session 3: May 17, 2018**

**Challenges in Healthcare Delivery and Implications for Spiritual Care**

Featuring Timothy Glover

*Senior Vice President, Mission Integration*

*Ascension Healthcare*

**All sessions: 1-2p Central Time**



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**ACPE**

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