

# **Online Supplementary Material**

Daaleman TP, Usher BM, Williams SW, Rawlings J, Hanson LC. An exploratory study of spiritual care at the end of life. *Ann Fam Med.* 2008;6(5):406-411.

http://www.annfammed.org/cgi/content/full/6/5/406/DC1

# Supplemental Appendix: Interview Guide for Spiritual Caregiving

We are interested in exploring the nature of spiritual caregiving at the end of life, and you have been recommended as someone who incorporates this unique dimension into what you routinely do. To begin, we recognize that spirituality and spiritual care have many meanings and interpretations, and we would like you to think about your interactions with patients. With that in mind, please take a few minutes to reflect on two contrasting patient encounters that you personally experienced. In both cases, the patient was near the end of life or facing a serious life-limiting illness. First, tell me of one patient where spirituality and spiritual care were core elements of your care and with whom you were confident of delivering this care. Next, think about a patient where spirituality and spiritual care were also central components but with whom you tried and were unable to help in this area.

#### Describing the first patient:

Please tell me about the patient.

#### Prompts:

- 1. In what way did you make a difference?
- 2. How did you recognize that there were spiritual issues at hand? How did you distinguish these issues from emotional, psychological, or social concerns?
- 3. What were the circumstances that made you confident of delivering this care in a way that was helpful to this patient?
- 4. What was the content of spiritual care that you (or others) provided (eg, praying with patient)? How did you approach the subject of spiritual care with the patient? With family members? With other members of the care team? Describe.
- 5. Did you share the patient's faith tradition, beliefs, practices, or faith community? If not, how did you resolve these differences in approaches or ways to deliver this care?
- 6. Were there racial, ethnic, or cultural differences between you and the patient? How were these resolved? Describe.
- 7. What facilitated the delivery of spiritual care with this patient?
- 8. What impeded spiritual care? Were there institutional or organizational barriers to your spiritual care?

# Now thinking of your second patient:

Please tell me about this patient, and contrast him/her with the example from above.

# Prompts:

- 1. What circumstances made the spiritual caregiving difficult for you?
- 2. What was the content of spiritual care that you (or others) provided? How did you approach the subject of spiritual care with the patient? With family members? With other members of the care team? Describe.
- 3. Did you share the patient's faith tradition, beliefs, practices, or faith community? If not, did these differences affect your ability to deliver spiritual care?
- 4. Were there racial, ethnic, or cultural differences between you and the patient? How were these resolved? Describe.
- 5. What facilitated the delivery of spiritual care with this patient?
- 6. What impeded spiritual care? Were there institutional or organizational barriers to your spiritual care?

#### **Online Supplementary Data**

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# Summary Questions

- 1. What is spiritual care and how would you define it? How would you distinguish it from pastoral care or the care that the clergy provides? What kinds of spiritual care do you do?
- 2. What got you started delivering spiritual care in your work? When you look at your own experience, what has allowed you to incorporate a spiritual dimension into your caregiving (eg,. training, personal or professional experience)? Describe.
- 3. How would you characterize your beliefs, values, or attitudes regarding spiritual care at the end of life? How do your own spiritual or faith traditions affect your caregiving? Describe.
- 4. We have discussed many things today. From all of the things that we talked about, what is the most important? In your opinion, what would be a "take-home" message for others who care for patients who are nearing the end of life?