FAST FACTS AND CONCEPTS #274
THE FICA SPIRITUAL HISTORY TOOL
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Background  Spirituality is defined as “the aspect of humanity that refers to the way individuals seek and express meaning and purpose and the way they experience their connectedness to the moment, to self, to others, to nature, and to the significant or sacred” (1). Taking a spiritual history is an important patient assessment skill, and most American patients report they want medical professionals to be aware of the importance of religion or spirituality to them (2). Fast Fact #19 presents one approach to taking a spiritual history. This Fast Fact discusses the FICA Spiritual History Tool© (Faith, Importance/Influence, Community, Action/Address in care).

Spirituality & Health  There is a large body of evidence that demonstrates a relationship between spirituality, religion and healthcare outcomes (3-9). Spirituality and religion are strong contributors to how people cope with illness and suffering (10-12). Providing for spiritual and religious needs benefits both patients and the health care system (13).

Spiritual History & the Healthcare Team  A National Consensus Conference (NCC) developed models and guidelines for interprofessional spiritual care (1). While the conference highlighted the importance of board-certified or board-eligible chaplains as the spiritual care experts and essential members of palliative care and other care teams, it recommended that all members of the health care team be responsible for addressing patients’ spiritual issues within the biopsychosocial/spiritual framework (14). The NCC recommended that all patients should have a spiritual screening or history, that spiritual distress should be diagnosed and attended to, and that validated assessment tools should be used.

Taking a Spiritual History – Key Principles
1. Consider spirituality as a potentiality important component of every patient’s life. Spirituality can impact a patient’s quality of life; it is an inherent part of most people’s wellbeing.
2. Address spirituality at each new visit, at annual examinations, and at follow-up visits if appropriate.
3. Respect a patient's privacy regarding spiritual beliefs.
4. Be aware of your own beliefs; don’t impose your spiritual/religious beliefs on others.
5. Make referrals to chaplains, spiritual directors, or community resources as appropriate.

FICA  The FICA Spiritual History Tool© was developed to help healthcare professionals address spiritual issues with patients. FICA serves as a guide for conversations in the clinical setting. It is also used to help identify spiritual issues patients face, spiritual distress, and patients’ spiritual resources of strength. The FICA tool has been evaluated in cancer patients (15). This study suggests FICA is a feasible tool for the clinical assessment of spirituality, and responses to the FICA were correlated to many aspects of quality of life. Healthcare professionals are encouraged not to use the FICA tool as a checklist, but rather to rely on it as a guide to aid and open the discussion to spiritual issues.

F - Faith, Belief, Meaning  Do you consider yourself spiritual or religious? Do you have spiritual beliefs that help you cope with stress? If the patient responds No, the health care provider might ask, What gives your life meaning? It is important to contextualize these questions to the reason for the visit – e.g., wellness, stress management, breaking bad news, the end of life. Meaning might be found in family, career, nature, arts, humanities or other spiritual, cultural or religious beliefs and practices.

I - Importance and Influence  What importance does your faith or belief have in your life? Have your beliefs influenced you in how you handle stress? Do you have specific beliefs that might influence your health care decisions? If so, are you willing to share those with your healthcare team?

C – Community  Are you part of a spiritual or religious community? Is this of support to you and how? Is there a group of people you really love or who are important to you?

A - Address/Action in Care  How should I address these issues in your healthcare? This is also to remind clinicians to develop a plan to address patient spiritual distress or other spiritual issues.
Further Resources  
More information and educational materials about FICA are available at http://www.gwish.org/.

References

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