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Digital Sharing of Spiritual Data in Mental Healthcare

Axel Liégeois

Professor Practical Theology and Care Ethics KU Leuven

Ethical Advisor Brothers of Charity

axel.liegeois@kuleuven.be

<https://theo.kuleuven.be/values-in-dialogue>

Sanctuary place

Sanctuary place for spiritual care

High expectations of confidentiality due to tradition of asylum and seal of confession

Chaplain as religious reference person and 'external' care provider

Sanctuary for spiritual care and counseling, not for chaplain

Legitimacy through connection with church

Confidentiality of spiritual data

Strict confidentiality

Values of autonomy, privacy and trust

Integration

Integration of spiritual care

Integrated care: bio-psycho-social and spiritual

Integrated care: interdisciplinary cooperation

Chaplain as fellow care provider

Legitimacy through integration in healthcare

Shared spiritual data

Shared professional confidentiality

Recording and sharing information in patient file

Values of care, protection and justice

Question and method

Question

How to combine sanctuary place and integration of spiritual care?

How can chaplains share spiritual data with other caregivers without breaking the crucial confidentiality towards the patient?

Method

**Ethical reflection based on
personalist care ethics and**

**guideline of ethics committee in mental health care
of Brothers of Charity in Flanders, Belgium**

Options

Options in order of preference

Starting point: confidentiality

First option: patient's self-disclosure

Second option: open dialogue with consent and relevance

Third option: shared confidentiality

Exception: serious threat of harm

Confidentiality

Starting point: confidentiality

**Non-disclosure of confidential data
from necessary professional relationship of trust**

Starting point but not end point

Practical option in case of doubt

Values: trust, autonomy and privacy

Self-disclosure

First option: patient's self-disclosure

Golden way to disclose confidential data

Motivating patient to provide certain data to certain care provider(s)

Patient's decision about why, who, what and how

Outside professional confidentiality

Values: autonomy, privacy and trust

Open dialogue

Second option: open dialogue with consent and relevance

1. Open dialogue

Open dialogue with patient on why, to whom, what, and how
Value: trust

2. Consent

Actual or prior explicit consent of patient
Content of spiritual data determined by patient
Value: autonomy

3. Relevance

Relevance filter: distinction between 'relevant' and 'pleasant' data
Data that enhance responsibility, broader than necessary
Value: privacy

Shared confidentiality - who

Third option: conditional shared confidentiality

WHO?

- (1) Clear demarcation of care providers sharing confidentiality
- + (2) Under individual confidentiality
- + (3) In actual care relationship: collaboration in care and relationship

Value: trust

Consequences

Recording care providers in patient's digital file

Permanent access for all persons involved and possibility of adaptation

For chaplain: inclusion in demarcation !

Shared confidentiality - how

HOW?

(4) Dialogue with clear information

+ Justification conditions, in particular demarcation

(5) Express prior consent for certain period of care

+ Implied consent during period of care, if sufficiently informed

Value: trust and autonomy

Consequences

No tacit sharing of spiritual data

For chaplain: explicit, current consent for sensitive information,
due to high expectations of confidentiality !

Shared confidentiality - what

WHAT?

(6) Only 'relevant', not 'pleasant' information

+ Enhances responsibility towards care user

Value: privacy

Consequences

Difference from 'nice to know, need to know'

Good care requires more than necessary information

For pastor: strict application of relevance for other care providers !

Exception: harm

1. Impossibility of dialogue and consent

Informing and motivating as much as possible

Values: autonomy and trust

2. Serious and threatening harm

To physical and/or psychological integrity and/or health of care user or other

Values: protection and justice

3. Proportionality

Reasonable relationship between avoiding harm and breaching trust

No more information to no more persons than necessary

Value: privacy

Questions

1. How do you actually share spiritual data?

Experiences

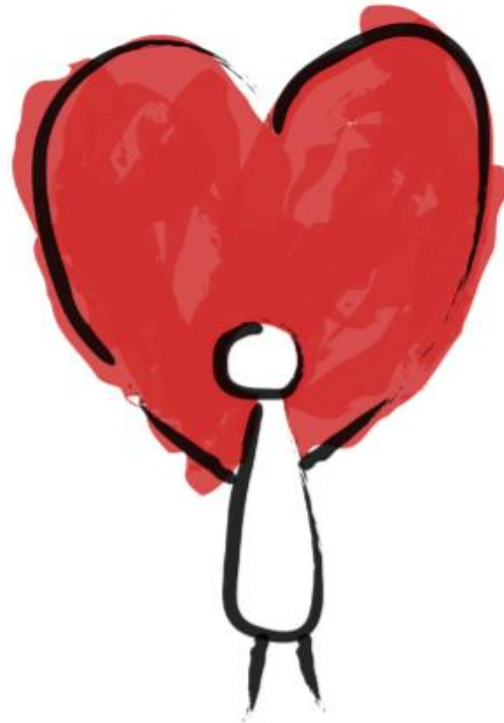
2. Is the ethical framework helpful?

Confidentiality – Self-disclosure – Open dialogue

Shared confidentiality – Exception

3. Are the ethical criteria helpful?

Dialogue – *Consent* – Relevance



ETHICS OF CARE

Values, Virtues and Dialogue

Axel Liégeois