

Hospital chaplain honored for distinguished career in ministering to sick

MARY MCWILLIAMS

Mary Lou O’Gorman made a career of running toward people in painful, uncomfortable and life altering situations. The Christ the King parishioner was not a first responder in the sense of a firefighter or police officer, but a Catholic chaplain in Nashville hospitals.

O’Gorman was honored with the Distinguished Service Award by the National Association of Catholic Chaplains (NACC) July 14 in Anaheim, California, for her service and leadership in pioneering the advancement of educational requirements for chaplaincy certification and advocating for the importance of including the spiritual component of a patient into their overall care, in addition to the compassionate care she offered to patients, families and medical staff during her career.

The Catholic chaplaincy, and a woman’s role as a chaplain, O’Gorman said, is the “best kept secret in the Catholic Church.”

Among the makeup of the nearly 2,000 NACC members, more than 60 percent are women and 57 percent are laypeople, according to the National Association of Catholic Chaplains.

She explained that “chaplain” is a term for a minister who works in an institution such as a hospital or the military. In its most basic job description, the chaplain, she said, provides support and resources relevant to a patient.

Canonically, she said, the title is “lay ecclesial healthcare minister.”

But in its most complex and realistic form, the chaplain sits in the emergency room all night with a little boy whose mother was killed in a car accident.

The chaplain serves as a patient advocate who tells the medical team the patient doesn’t really understand the trajectory a devastating illness will take.

The chaplain goes step-by-step with the family over the conditions and ramifications of end-of-life care. Particularly in end-of-life cases, the chaplain, she said, tries to understand what is “broken” in the patient’s life – or what



Mary Lou O’Gorman, center, accepts the Distinguished Service Award from Mary T. O’Neill, left, chair of the National Association of Catholic Chaplains Board of Directors, and Mary Heintzkill, a member of NACC board and the award presenter.

is hindering that person from being at peace.

The chaplain comforts hospital personnel who are grieving the loss of a patient they’ve come to know fondly.

She describes her career as a chaplain, which began in 1985 at Saint Thomas West Hospital and continued until her retirement as director of spiritual care in 2016, as “a wonderful, wonderful experience.”

O’Gorman started out as a Catholic elementary school teacher in St. Louis, and then, after she married, for a brief time in Belgium. She spent 14 years as a stay-at-home mother to her three sons, and then began to ponder, “What do I want to do when I grow up?”

Her husband taught at a Catholic seminary in Denver and she was able to take some courses there for free. Those courses turned out to be part of the master’s program in pastoral care.

“I felt a gift in working with the sick,” she said, a gift that was re-affirmed by her instructors.

But when her husband, Bob O’Gorman, took a job in Nashville in

1981 to teach at Scarritt College, now closed, she had to find a new channel for her studies. That ended up being Vanderbilt University where she was able to pursue a master’s degree in divinity, a course of study that often culminates in ordination.

“Some classmates said I should join another church and become ordained,” she recalled. But her strong identity as a Catholic woman made converting to another religion out of the question. She marvels that through her faith and the Catholic Church, she was able to find a way to minister to the sick.

Before coming to Saint Thomas, she trained at the Veterans’ Administration hospital, a facility, she noted, that does not have an emergency room. Her first assignment at Saint Thomas was to its emergency room, and there, she got a heavy taste of what it means to be a chaplain, which she said is “not a one-size fits all” kind of profession.

It was her first week on a Friday night that a woman was killed in a tragic car accident. The woman’s young son was

in the emergency room and the hospital had a hard time tracking down the father. While she waited with the boy, she also had the opportunity to see how difficult the incident was on the emergency room staff.

The boy’s father was eventually found and took his son home. She, too, went home, but Monday morning checked in with the emergency room staff to see how they were holding up.

“They greeted me so warmly,” she said. She finally realized that their warmth was a result of seeing her persevering through the most trying ordeal as they had to do. “I realized that what I did was not run away.”

The staff, she said, learns of the need for the chaplains by seeing them at work, making rounds, praying at a patient’s bedside, talking through the difficulties of an illness – sometimes life-altering, sometimes terminal – with both the patient and family.

Much of her work has been in end-of-life care. As a result, she was able to help educate hospital personnel on the integration of spiritual care with their medical plans. She taught medical students and new personnel about the job of chaplains.

“They see the value of the human spirit,” she said of the hospital personnel observing chaplains’ work. “And tending to the human spirit.”

Her work didn’t stop in Nashville, however. O’Gorman’s leadership with the NACC has brought both regional and national advancements. She was instrumental in establishing guidelines for educational requirements for chaplaincy (a master’s in theology is required, plus one-year of clinical pastoral education), and continuing education. She has held a number of leadership positions within the organization, served on the board of directors, and continues working to expand the role of chaplains.

NACC is currently in the beginning stages of working with bishops, educating them about the chaplain’s role and how chaplains can fill in the gaps of patient care when they are moved from one facility to another, such as hospital to nursing home. ♣

Teacher, daughter spend summers helping kids in Sierra Leone

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nightly devotions and scripture exploration, and, according to Rippy, “an amazing pastor who reminds them daily that they are a special child of God, and that God has a plan and purpose for their lives.”

The entire orphanage gathers in the courtyard at day’s end, and the kids take turns leading the worship and reading lessons.

For Rippy, the mission work enabled her to have an “a-ha” revelation about her own faith.

“When we went the first time, I really

thought we were going over to share the love of God with them,” she said. “But when we got there and watched them during their prayers, their worship and their evening devotion time, it showed me that they have nothing, but they have everything. They really feel the love of God in ways that we don’t.

“These children in Africa know Him, and we can know Him that same way, if we just open ourselves up and forget all the trappings of the First World,” continued Rippy. “I know it has changed me, though in what ways I’m not really sure. Our faith is constantly evolving, and I think He’s still working on me.” ♣

Church leaders get training to help veterans heal

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to talk to them now,” he said.

An important part of his ministry, he said, is one of presence, “being available to let them tell their stories.”

One challenge many military families face, Father Wolf said, is that when a soldier returns home from serving overseas and “the family has worked out a different way of getting along

without them,” and they have to readjust to different family dynamics.

“I don’t know how these soldiers do what they do,” Father Wolf said, serving in multiple, back-to-back deployments overseas, having to continually withdraw and re-integrate into family life.

Learning more about the concept of “moral injury” was helpful to Father Wolf, and he said he was glad to see that “the Army seems to be helping

them work through that with dignity.”

Workshop participants also learned more about: identifying potential conflicts between civilian and military cultures, identifying actions community clergy can take to assist military personnel and their families with a healthy adjustment to a civilian culture, types of common military events that can cause adjustment problems for military personnel and the psychiatric and psychological

responses that often follow from them, identifying the relationship between spirituality and “meaning making,” the importance of personal narratives and past, present and future stories, identifying pastoral responses and resources for clergy and their congregations.

More information about the Community Clergy Training Program is available at: <https://www.patientcare.va.gov/chaplain/clergytraining/index.asp>. ♣