Educating
Health Care Practitioners
in Spiritual Care –
A Tradecraft Workshop

with Chaplain Bruce Feldstein MD
Stanford University School of Medicine
Stanford University
School of Medicine
Welcome and Overview

Educating Healthcare Practitioners in Spiritual Care – A Tradecraft Workshop

- Educating – we are educators, about education and learning
- Health Care Practitioners – who we teach/educate, why
- In Spiritual Care – and spirituality
- A Tradecraft Workshop - “Skill or art in connection with a trade or calling” Oxford English Dictionary
Introduction

WHO ARE YOU?
Let’s Talk about EDUCATION
To Educate

Latin roots

- "educare" to bring up, rear, train or to mold
- "educere" to lead out, draw forth
Let’s Talk about LEARNING
Learning

- What is Learning?
  
  ... the act of acquiring new, or modifying and reinforcing, existing knowledge, behaviors, skills, values or preference. Wikipedia

- Mood/emotions
  - Cognitive Emotions
    - Wonder – I don’t know, and I like it
    - Perplexity – I don’t know
    - Confusion – I don’t know, and I don’t like it
    - Boredom – I don’t care
Stages of Learning

- **Blind** – Doesn’t even know, Huh?
- **Ignorant** – Huh!, knows they don’t know
- **Beginner** – Knows they don’t know, committed to learn, finds teacher/guide, gives trust, follows instruction step by step
- **Advanced Beginner** – Performs with supervision; breakdowns, pitfalls, errors, mistakes
- **Competent** – Can do on own, according to standards of community, manage breakdown, knows limits

Adapted from paper by Fernando Flores, et.al., Domains of Education, Ontological Design Course (1986)
3 Domains of Trust

- **Sincerity** (mean what you say, compassion, respect)
- **Competence** (able to do what you say)
- **Reliability** (do what you say you’ll do and when, i.e. promising)
Let’s Talk about HEALTHCARE
Healthcare is….

- Bio-Psycho-Social-Spiritual (Sulmasy)
- Whole Person
- “To Life”
  - relief of suffering,
  - health (live according to your values),
  - well being
Goals of Medicine

Guerir quelquefois, sometimes, To cure
Soulager souvent, To relieve often,
Consoler toujours. To comfort always.

Motto made famous by

Edward Livingston Trudeau MD (1848-1915)

Let’s Talk about Teaching Spirituality and Meaning in Medicine
Spirituality and Meaning in Medicine (the class)

Goal

Identify and respond to your patient’s spirituality and sources of meaning as well as your own.
Spirituality and Meaning in Medicine (the class)

Why?

• Patient’s Want It
• Research Shows good for
  • Health
  • Satisfaction – patient and provider
• Joint Commission requires
• Legacy of Medicine
• Right Thing to Do
Spirituality and Meaning in Medicine (the class)

In typical medical classes, you’re presented with scientific research and clinical evidence.

This class is also based on scientific research and clinical evidence, and, another kind of evidence — the direct observations of our own experience.
Experience as Evidence

The value of experience is not in seeing much, but in seeing wisely.

William Osler (1849-1919)

Father of Modern Medicine
Essential Skills

- Recognize spiritual/meaningful experience
- Make a meaningful connection
- Identify and respond to the Chief Concern (not just the chief complaint)
- Take a Spiritual History
- Referral
Introductions

Say your

- Name
- What year you are
- Where you’re from
- One thing others wouldn’t know by looking at you, or your resume (Rachel Remen)
What is Spirituality?

- What comes to mind when you hear *spirituality*?
- Read statements from the medical literature.
- Reflect on a personal or professional experience you’d call meaningful or spiritual.
- Share

- What do you discover?
- Landscape of Spiritual Experience
Chief Concern vs. Chief Complaint

- Chief Complaint – Answers the question “What?”
  “What brought you in?” What prompted you to come in today?
  - Reflects patho-physiological thinking
  - Essential for differential diagnosis

- Chief Concern – Answer the question “So What?”
  - What is it about this that prompted you to come in? What concerns you the most?
  - About meaning
  - Essential for compassionate care
Key Value

For the compassionate clinician:

What matters for you IS what matters for me
Take a Spiritual History

- Concerns: time, appropriate, respect, comfort, know how

- Context: How many patients believe physicians should consider spiritual needs? How many physicians patients should share? How many ask?

- When? Which encounters? When in the history? Social history

- How? Segue + FICA / HOPE
Referral

- When? Signs of Spiritual Distress
- To Whom? chaplain, social worker, psychology/psychiatry, family, friends, support groups, AA, community
Make a Meaningful Connection

- Prepare your Attention and Intention
- Knock, enter, introduction (something personal)
- What Matters Most – the Chief Concern
- Take a Spiritual History (when appropriate)
- What I wish for you… hope for you…admire about you
Let’s Talk about

Some Further Thoughts
Some Further Thoughts

- On Love
- On Mystery and Awe
- On Meaning
- On Wisdom
About Love

• “Inspire me with love for my art and for Thy creatures.” Moses Mamonides 12th century physician, rabbi, philosophe

• “A kind of medicine that doesn’t come in the IV or pill.” Chaplain Bruce Feldstein MD

• What do you say?
On Mystery and Awe

- Something experienced
- Perhaps called sacred, significant
  - e.g. synchronicity – Carl Jung
- Unexplained, unexplainable
- Can’t put into words
- Non-rational (not irrational)
On Meaning

Meaning is the antecedent of commitment.

Rachel Naomi Remen MD
Let’s Talk about

What’s next?
Closing

- What’s something you’re taking away with you today?
Closing

- What’s something you’re taking away with you today?
- What I wish for you, hope for you, admire about you?
Closing

- What’s something you’re taking away with you today?
- What I wish for you, hope for you, admire about you?
- Thank You and Be Well!