Educating Health Care Practitioners in Spiritual Care — A Tradecraft Workshop

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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 w 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)

From The Healer's Tale Sharon R. Kaufman, The University of Wisconsin Press, 1993.

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 <u>Complaint</u> 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!











