

The development of a guideline for spiritual care

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Question 1: Does spiritual care fit in a guideline?

No:

- Last open space in health care
- Impossible: qualities caregiver play a key role
- Bad idea to adjust to medical model

Yes:

- Is as old as the Ten Commandments
- Makes SC visible in the system (formal)
- Gives us a common text (content)

Question 2: what should the guideline be called?

- Meaning
- Existential questions
- Slow questions
- Philosophy of life
- Spirituality
- Inner life
- Faith
- Belief system
- Religion

Question 3: How can spirituality be defined?

'Spirituality is the functioning of human beings as regards their philosophy of life including questions of experiencing and giving **meaning**' (Dutch guidelineL)

'Spirituality is 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' (Consensus VS)

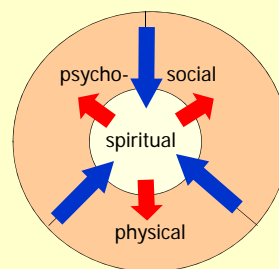
EAPC Working Definition 2010

Spirituality is the dynamic dimension of human life that relates to the way persons (individual and community) experience, express and/or seek **meaning, purpose and transcendence**, and the way they **connect** to the moment, to self, to others, to nature, to the significant and / or the sacred.

The spiritual field is multidimensional:

1. Existential challenges
2. Value based considerations and attitudes
3. Religious considerations and foundations

Question 4: what is the position of spirituality?



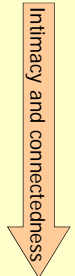
Question 5: how concrete must the guideline be?



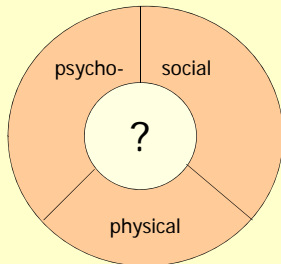
1. Attention to different layers of meaning
2. Dealing with questions to which there is no answer (presence)
3. Attention to the spiritual process (from normal process to crisis)

"I cannot sit around the table with my children next Sunday"

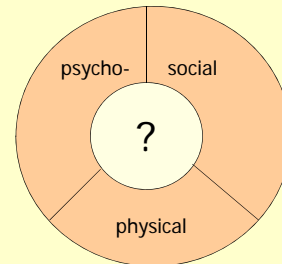
Physical	Description of reality
Psycho-	Experience and emotions
Social	Connection with identity and life story
Spiritual	Sources, inspiration



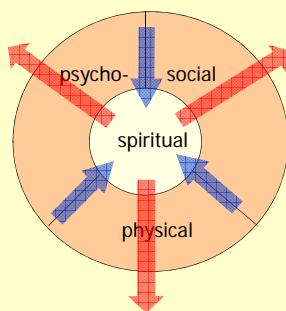
Question 6: what is the question (need, problem, desire, etc)?



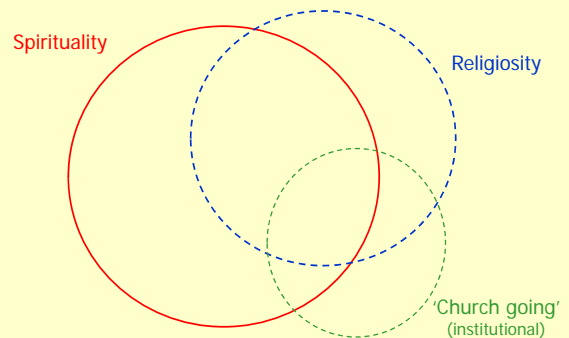
complaint – need – question – desire – ...?



Resonating with the unspeakable



What do we know of someone?



Question 7: spiritual care:
whose business?



Dimension of care

Question 8: how broad is the
concept of spiritual care?

- Attention
- Empathy
- ...
- Faith
- ...
- Intervention
- Therapy



Attention

Signaling:

- What worries you?
- What give you power in other times of trouble?
- With whom would you like to talk?

Supporting:

- Being there (presence)
- Attentive listening
- Being yourself

Accompaniment

Origin and process of search for meaning

- Loss of meaning
- Bereavement process
- Experience of meaning

Diversity of roles

- Physician/nurse: signaling, passive mode, referral; but also own professional way of accompanying
- Chaplain/ spiritual counsellor and psychologist: accompaniment (not: treatment)

Crisis intervention

Origin and process

- Loss of meaning
- Bereavement process -> stagnation
- (*.....Experience of meaning*)

Patient related factors

- History of depression or trauma
- Fear of striving for perfection

Environment related factor

- Perceived loss of dignity
- No social support

Question 9: how do the professions relate to each other?

	Physician and nurse	Psychologist and social worker	Chaplain and spiritual counsellor
<i>Primary focus and framework of reference</i>	<i>Physical</i>	<i>Psychosocial</i>	<i>Spiritual</i>
A Attention	Listening, Supporting, Acknowledging, Exploring	Listening, Supporting, Acknowledging, Exploring	Listening, Supporting, Acknowledging, Exploring, interpreting
B Accompaniment	Signaling, accompanying, referring, mapping	Acknowledging, Accompanying, Referring (->) mapping	Acknowledging, Accompanying, (->) referring, mapping, interpreting, valuing
C Crisis intervention	Signaling and referring	Acknowledging, Accompanying, treating, referring (->)	Acknowledging, Accompanying, sometimes: treating (->) referring, interpreting, valuing
			Representing and connecting

Question 10: how concrete must the instruments be?



(A) 'Screening'

1. How do you make sense of what is happening to you?
2. What sources of strength do you look to when life is difficult?
3. Would you find it helpful to talk to someone who could help you explore the issues of spirituality/faith?

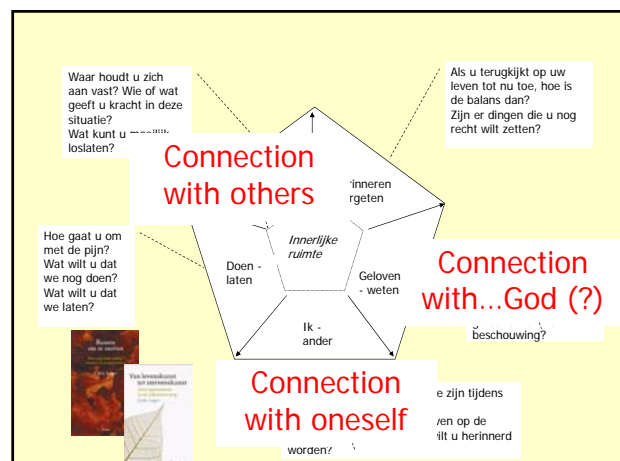
The Mount Vernon Cancer Network

(B) 'Spiritual history taking'

F: Faith and beliefs
I: Importance of spirituality in the patient's life
C: Spiritual community and support
A: How does the patient wish spiritual issues to be addressed in his or her care

S: Spiritual belief system
P: Personal spirituality
I: Integration with a spiritual community
R: Ritualized practices and restrictions
I: Implications for medical care
T: Terminal events planning

Model Leget: 'diamant' (Leuven, Zeist, Arnhem)



(B) 'spiritual assessment'

Professional competency chaplain

No tick box approach but:

interpretative framework:

- Fitchett
- Leget
- Weiher

Does spiritual care fit in a guideline?

