

An Outlandish Idea: Evidence-based Spiritual Care Best Practices  
M1.6 Workshop at *Summit '09*  
February 2, 2009

PowerPoint Presentation Narrative

Our outlandish idea is “Evidence-based Spiritual Care Best Practices”.

Our belief is that every individual has the right to the most effective medical and related services available and confirmable with evidence, even in matters of healing that uniquely involve the Divine Mystery, through evidence-based spiritual care best practices.

Our structure is an international group of professional organizations actively collaborating to advance excellence in professional pastoral and spiritual care, counseling, education and research: the Spiritual Care Collaborative.

Our action plan is a way to collect ideal interventions in a knowledge base accessible throughout North America for application in specific spiritual/pastoral care situations: the Ideal Intervention Project.

Our three-dimensional model... our belief in one’s right to the most effective spiritual care, our structure, the Spiritual Care Collaborative 10,000 strong, and our action plan, the Ideal Intervention Project ...is our foundation and our strength.

Our Story, Beginnings The Ideal Intervention Project was conceived within the ACPE, a Spiritual Care Collaborative partner, by Henry G. Heffernan SJ, who adapted the Ideal Intervention Paper for CPE students from a cognitive therapy template 1) to consolidate learnings, and 2) to allow replication.

Our Story, Part One- Students Since 2006 a growing number of students across the ACPE regions have completed Ideal Intervention Papers and forwarded them to Heffernan for editing and inclusion in a knowledge base.

Our Story, Part One- Practitioners Experienced spiritual care practitioners are now being asked to complete Ideal Intervention Forms and submit them to Heffernan, also for editing and inclusion in the knowledge base.

Our Story, Part Two Spiritual care clinicians will edit and transform students’ Ideal Intervention Papers and practitioners’ Ideal Intervention Forms into Potential Best Practices.

Our Story, Part Three The ever-growing Potential Best Practices knowledge base will be inductively organized by Central Issue Identifiers, a departure from the usual deductive common factors approach.

Our Story, Part Four A brief effectiveness questionnaire will be created within the context of current client satisfaction surveys, using appropriate expertise, for use with those receiving Potential Best Practices interventions.

Our Story, Part Five Institutional Review Boards will approve the brief effectiveness questionnaire for use with the recipients of Potential Best Practices interventions.

Our Story, Part Six Spiritual care clinicians will access the knowledge base by the Central Issue Identifier for a Potential Best Practice pertaining to a current actual situation, thereby gaining the insights of others to apply as appropriate.

Our Story, Part Seven Shortly after Potential Best Practice Interventions the brief effectiveness questionnaire will be administered, and effective Potential Best Practices will be designated as Tentative Best Practices.

Our Story, Part Eight Other spiritual care clinicians will repeat the process, and Tentative Best Practices rated as effective by recipients will be designated as evidence-based Spiritual Care Best Practices.

Our Story, Part Nine Spiritual Care Best Practices will become widely available as the knowledge base expands and as the cycle of refinement and validation continues.

Our Story, A Fourth Dimension Along with our belief, our structure and our action plan, a fourth dimension is required to transform this outlandish idea into a reality. That fourth dimension is YOU and YOUR COMMITMENT to join us in this vital ministry.

Our Team Henry G. Heffernan SJ, is a chaplain at NIH, Bethesda, Maryland, creator of the Ideal Intervention Paper, and literature resource person. Yoke-Lye Lim Kwong, workshop co-presenter and Ideal Intervention Paper refiner, is an ACPE Supervisor and Director of Spiritual Care at Howard Regional Hospital in Kokomo, Indiana. John J. Gleason, workshop co-presenter and editor of the Ideal Intervention Project e-Newsletter, is an ACPE Supervisor Emeritus, and resides in Greenwood, Indiana.

## Notes

The PowerPoint presentation is followed by a practical exercise and an open discussion.

The belief statement is adapted from Thomas Sexton, quoted in Sylvia A. Marotta and Richard E. Watts, "An Introduction to the Best Practices Section in the Journal of Counseling & Development," *Journal of Counseling & Development*. 85, Fall 2007, 491-503.

The structure statement is the mission statement of the Spiritual Care Collaborative.

The cognitive therapy template reference is from Deborah A. Roth *et al.*, "Cognitive Behavior Therapy," *Encyclopedia of Psychotherapy* Vol. 1, 451-458; and Michael J. Zvolensky and Georg H. Eifert, "Manualized Behavior Therapy," *Encyclopedia of Psychotherapy* Vol. 2, 115-121.

The knowledge base is managed by Heffernan, and currently contains approximately thirty anonymized ideal intervention descriptions. Contact him at [hheffernan@gonzaga.org](mailto:hheffernan@gonzaga.org) for further details or to contribute an ideal intervention.

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JJG  
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