



## GOD'S CALL TO THE FUTURE HEALTHCARE PROFESSIONAL



**Christian  
Medical & Dental  
Associations®**  
*Changing Hearts in Healthcare*

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 @DocRies



## GOD'S CALL TO HEALTHCARE

1. Defining Your Call
2. Developing Your Call
3. Discharging Your Call

## GOD'S CALL TO HEALTHCARE

**Defining Your Call**

- 1<sup>st</sup> Calling: *Follow Me*

*Do not be conformed to this world, but be transformed by the renewing of your minds, so that you may discern what is the will of God—what is good and acceptable and perfect.*  
(Rom 12:2)

## GOD'S CALL TO HEALTHCARE

**Defining Your Call**

- 1<sup>st</sup> Calling: *Follow Me*
- 2<sup>nd</sup> Calling: *Make Disciples*

*"Therefore go and make disciples of all nations..."*  
(Matt. 28:19)

**Discipleship:**  
*Developing in people a compass that points to Jesus, and helping them read the story that God is writing on their life.*

## GOD'S CALL TO HEALTHCARE

**Defining Your Call**

- 1<sup>st</sup> Calling: *Follow Me*
- 2<sup>nd</sup> Calling: *Make Disciples*
- 3<sup>rd</sup> Calling: *Your Story*

*"Put first things first, and we get second things thrown in. Put second things first, and we lose them both."*  
-C.S. Lewis



## GOD'S CALL TO HEALTHCARE

### Defining Your Call

- 1<sup>st</sup> Calling: *Follow Me*
- 2<sup>nd</sup> Calling: *Make Disciples*
- 3<sup>rd</sup> Calling: *Your Story*

*"What's in your hand?"*

## GOD'S CALL TO HEALTHCARE

### Developing Your Call

## GOD'S CALL TO HEALTHCARE

### Case Study:

You are providing care for Jennifer, who presented with escalating headaches. A thorough evaluation has been done, ruling out potentially dangerous secondary causes of these headaches.

As you discuss the reassuring findings and talk with her further, Jennifer starts opening up about the stress in her life, along with some weighty issues of guilt and fear.

You sense that the primary issues underlying her anxiety and perhaps even her headaches may be related to spiritual issues. Perhaps God has allowed a divine appointment between you and she?

- Q1: *Is it acceptable, legal, or ethical to discuss spiritual health with your patients?*
- Q2: *What would you say to Jennifer?*

## GOD'S CALL TO HEALTHCARE

### Developing Your Call

- Spiritual History/Assessment
  - **Patients desire it**
    - 85% desire provider to ask of their beliefs
    - Of those that do:
      - 75% want to be asked depending on situation
      - 25% want to be asked regardless
  - Affect ability to:
    - Encourage realistic hope
    - Give medical advice
    - Change medical treatment

## GOD'S CALL TO HEALTHCARE

### Developing Your Call

- Spiritual History/Assessment
  - Patients desire it
  - Evidence supports it
    - *"Religion and spirituality are among the most important factors that structure human experience, beliefs, values, behavior and illness patterns."*

Lukoff D, Lu F, Turner R. Toward a more culturally sensitive DSM-IV: Psychoreligious and psychospiritual problems. *J Nerv Ment Dis* 1992;180:673-682.

## GOD'S CALL TO HEALTHCARE

### Developing Your Call

- Spiritual History/Assessment
  - Patients desire it
- Evidence supports it
  - Source of comfort, or turmoil?
    - If believed God: abandoned, punishing, didn't love them, didn't have power to help
  - Church had deserted them
  - 19-28% higher mortality!

Pargament KI, Koenig HG, et al. Religious struggle as a predictor of mortality among medically ill elderly patients: a two-year longitudinal study. *Arch Intern Med.* 2001;161:1881-1885.

## GOD'S CALL TO HEALTHCARE

### Developing Your Call

- Spiritual History/Assessment
  - Patients desire it
- Evidence supports it
  - Positive impact
    - *"A large proportion of the data suggest that religious commitment plays a beneficial role"*
    - Preventing physical/mental illness
    - Improving coping skills
    - Facilitating recovery

Matthews DA, McCullough ME, et al. Religious Commitment and Health Status: A Review of the Research and Implications for Medicine. *Arch Fam Med* 1998;7(2):118 - 124.

## GOD'S CALL TO HEALTHCARE

### Developing Your Call

- Spiritual History/Assessment
  - Patients desire it
- Evidence supports it
- Profession expects it
  - *"In general, studies suggest that infrequent religious attendance should be regarded as a consistent risk factor for morbidity and mortality of various types."*

Levin JS, Vanderpool HY. Is frequent religious attendance really conducive to better health: toward an epidemiology of religion. *Soc Sci Med* 1987;24:589-600.

## GOD'S CALL TO HEALTHCARE

### Developing Your Call

- Spiritual History/Assessment
  - Patients desire it
- Evidence supports it
- Profession expects it
  - Standard of Care:
    - 1989 - American Psychiatric Association
    - 1992 - American Psychological Association
    - 1994 - Accreditation Council for Graduate Medical Education (ACGME)
    - 1995 - Council on Social Work Education
    - 1996 - Joint Commission on the Accreditation of Organizations (JCAHO) Healthcare
    - 1997 - Amer. Academy of Family Physicians
    - 1998 - ACP/ASIM and Association of American Medical Colleges

## GOD'S CALL TO HEALTHCARE

### Developing Your Call

- Spiritual History/Assessment
  - Patients desire it
- Evidence supports it
- Profession expects it
  - JCAHO:
    - *"Should, at a minimum, determine the patient's denomination, beliefs, and what spiritual practices are important to them."*
    - *"This information would assist in determining the impact of spirituality, if any, on the care/services being provided and will identify if any further assessment is needed."*

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### Developing Your Call

- Spiritual History/Assessment
  - Patients desire it
- Evidence supports it
- Profession expects it
  - ICN Code of Ethics for Nurses, 2006
    - *"The nurse promotes an environment in which...spiritual beliefs of the individual, family, and community are respected."*
  - ANA Standards for Clinical Nursing Practice
    - *"...assessment includes the spiritual dimension"*

## GOD'S CALL TO HEALTHCARE

### Developing Your Call

- Spiritual History/Assessment
- "G.O.D. Questionnaire"
  - G: God-Is God, faith, spirituality, or religion important to you?
  - O: Others-Do you participate in a religious or faith community? How often do you meet?
  - D: Do- What can I do to assist you in incorporating your faith into your medical care?

## GOD'S CALL TO HEALTHCARE

### Developing Your Call

- Spiritual History/Assessment
- Prayer
  - With Respect
  - With Sensitivity
  - With Permission

## GOD'S CALL TO HEALTHCARE

### Developing Your Call

- Spiritual History/Assessment
- Prayer
- Faith Flags
  - *Brief statement that occurs in course of natural conversation that identifies you as someone to whom God, prayer, faith, the Bible is important*
  - *May lead to Faith Stories*
  - *"What is God doing here?"*

## GOD'S CALL TO HEALTHCARE

### Discharging Your Call

- Following Jesus

## GOD'S CALL TO HEALTHCARE

### Discharging Your Call

- Following Jesus
- Greatest Danger = Distraction
  - Debt → Live below means
  - Cynicism → Gratitude
  - Entitlement → Giving

## GOD'S CALL TO HEALTHCARE

### Discharging Your Call

- Following Jesus
- Greatest Danger
  - Distraction
    - Debt
    - Cynicism
    - Entitlement
- Mentoring

## GOD'S CALL TO HEALTHCARE

### Discharging Your Call

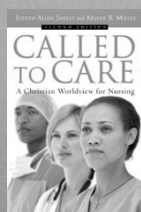
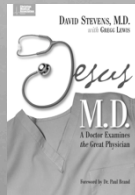
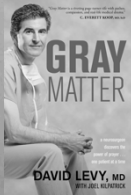
- Following Jesus
- Greatest Danger
  - Distraction
    - Debt
    - Cynicism
    - Entitlement
- Mentoring
- Your Day = Your Call

## GOD'S CALL TO HEALTHCARE

- Defining Your Call
- Developing Your Call
- Discharging Your Call

## GOD'S CALL TO HEALTHCARE

### Next Steps:



## GOD'S CALL TO HEALTHCARE

### Next Steps:



William C. Peel, ThM



Walt Lattimore, MD

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[www.cmda.org](http://www.cmda.org)

(ccm@cmda.org for handout)



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