Volunteer Spotlight – Charlie Porzio

How did you decide to volunteer at Stanford

In 2016 I decided I had been working long enough and felt God calling me into another chapter of my life. My wife, financial adviser and I gave me the green light to retire. I worked in the bus transportation industry for 43 years and retired at age 63. I became a volunteer because I heard folks were needed to share their experience on one of the hospital units once a month. Later I got involved in Spiritual Care volunteer activities.

What are some assignments you have as a volunteer?

After I shared my experience as a recovering addict, my strength, and hope, several patients gathered in a conference room. Later I asked if there was program so I could sit with patients who might not have family. I was told about N.O.D.A. (No One Dies Alone) and signed up. On Fridays, I help patients complete advance directives or a What Matters Most letter that allows them to describe their medical wishes in their own words if they cannot speak for themselves.

What do you find most rewarding about the work?

It has been an awesome experience to sit with dying patients and sometimes with their families. One of my first NODA patients talked about the business he owned. I played along - became one of his employees. I explained to him that I was trying real hard to be good and not to let me go. He had me repairing imaginary things in the room. I felt close to him even when he told me that I was doing it wrong. Moments like these are a blessing. Another patient had me calling relatives. Some of the messages he left were difficult, but I know he was doing what he needed to do. I was there to fulfill a wish for him.
Message from the Director
by Rabbi Lori Klein, Director

This year’s fires remind us that upheaval, uncertainty, and loss can upset the equilibrium of our lives without warning. Patients diagnosed with a serious illness or injury learn the same life lesson. Sometimes we seem in control; sometimes life happens to us.

How does spiritual care encourage a fruitful response to loss and suffering?

Definitions of “spirituality” vary, but all emphasize connection: to self, to loved ones and communities, to the sacred or transcendent, to hope, beauty, gratitude, forgiveness, meaning. If spirituality is about connection, disconnection is the hallmark of spiritual distress or suffering.

You may notice I have used the term “spirituality,” not “religion.” Religious practices and beliefs are only one way to live as a spiritual being. For those who feel discomfort at the idea of spirituality, “existential” fulfillment or distress carries virtually the same meaning.

The chaplain’s first task with a patient or caregiver is building a trusting relationship. The second is assessment. In what ways are the patient or caregiver feeling connected or disconnected? Chaplains encourage patients and caregivers to name and explore the sources of their distress, knowing that exploration may lead to emotions released, vulnerabilities revealed, a new equilibrium.

Chaplains also help patients and caregivers assess and name their resources, to encourage resilient responses to illness, injury, even the approach of death. Anthropologist Dr. Catherine Panter-Brick says, “resilience is a process to harness resources to sustain well-being.” Culture and religious tradition can determine how we define well-being and which resources we harness. Patients and caregivers can show signs of distress and resilience at the same time. [“Resilience Definitions, Theory, and Challenges: Interdisciplinary Perspectives,” European Journal of Psychotraumatology, Southwick, et al.]

As we chaplains and spiritual caregivers work alongside our colleagues in the Patient Care Services department, we help reduce distress and suffering, and encourage growth in the face of life’s challenges. Our interventions begin with attentive listening and compassionate presence, and often go on to include facilitating a patient’s review of his or her life; encouraging communication among family members, between physicians and patients or families, and among medical team members; prayer, ritual and blessing.

I am often asked how our chaplains and chaplain residents can provide spiritual care to patients and families who do not share their religious tradition. At times, a patient needs a prayer, sacrament, or ritual that can only be performed by a member of the same religion. Surprisingly, those times are the exception. Our focus as interfaith chaplains is on fostering connection and healing disconnection; a goal all of us share. In our fractured world, it can be especially healing to regain resilience or receive comfort from someone walking a different path.
Crossing a Threshold
by Landon Bogan, ACPE Educator and Associate Director for Clinical Pastoral Education

This past Summer, our 2017-2018 graduates prepared a celebration service that acknowledged the significant life threshold that is Clinical Pastoral Education (CPE) at Stanford Hospital. With laughter, song, storytelling and plans for a new beginning, the graduates celebrated their participation in healing humanity and their arrival on the other side of something transformative. John O’Donohue, in an interview with Krista Tippett, said that a threshold “is a place where you move into more critical and challenging and worthy fullness (Tippett 76).” For our students, CPE is a threshold experience. It is a time to attend to significant inbreaking life events that shape our humanity. Through critical reflection in a supportive community committed to facing challenges, students encourage one another in pursuit of meaningful vocation.

While a year of CPE is one such threshold, O’Donohue illustrates how it only takes an instance and very little initiative, to cross a threshold that changes us. He talked about the experience of going about one’s busy evening only to receive a phone call with news that a loved one is dying, “it takes ten seconds to communicate that information. But when you put the phone down, you are already standing in a different world. Suddenly everything that seemed so important before is all gone and now you are thinking of this (Tippett 76).” As is the case when the phone rings (or the pager goes off) at 2:00 am, or we turn on the news, in an unexpected instance we learn something about loved ones or community members in need, and it can change us.

There are so many different human responses to thresholds. Some align priorities that may be out of alignment. Others find a deep well of compassion that was buried under less important values, and some recall the support of heroes and inspirational figures that have been a source of support and strength through difficult times. These are a few positive ones, and there are so many more. As we consider our responses to new and often unwelcome threshold experiences, perhaps we can take some courage from our graduates to do so in ways that heal us, help to heal our world, and give us reason to sing, share and celebrate arriving on the other side of something transformative.

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Are there any challenges to your work?

I realize there are times that are not opportune for me, but they are exactly the tasks God needs me to do with patients. I love to be with a patient’s family and friends. It’s an honor many don’t understand, especially with an advance directive. Sometimes families argue about their loved one and so much of that could be avoided if patients just communicated their wishes.

What do you look forward to?

I enjoy my volunteer time with the patients as it brings a feeling of accomplishment, peace, and joy in my life. I look forward to more time spent working in the N.O.D.A. program because it makes me feel closer to God to be with them at the end of life. I also volunteer at another hospital wheeling discharged mothers and babies to their car, the best! As a friend told me, I assist folks out and bring them into this world. Can’t beat that!
New Clinical Pastoral Education Members

NEW RESIDENTS

Ki (Paul) Kim was born in South Korea: he was raised in New York City. Paul graduated from Binghamton University (State University of New York) with a B. A. degree in Economics. Then he went to Westminster Theological Seminary in Philadelphia and earned an M. Div. degree in Counseling. He previously served in the U.S Army Reserve for six years as a Chaplain candidate. He is currently serving New Community Baptist Church as an ordained associate pastor and he is a member of the Korean American Presbytery Church (KAPC) denomination. Paul is married and has one toddler son.

Emily Linderman was born and raised in Michigan. A former architect, she completed her Spiritual Direction training with the Sisters of Mercy in Burlingame in 2009, graduated with a Master of Divinity from Seattle University in 2016, and is a Member in Discernment with the United Church of Christ. Emily is contemplative by nature and curious about human agency, connection, and growth amidst the animating forces of living and dying. She relocated from Seattle for this residency and is very grateful to be here. In her free time Emily loves to be outside, bake, explore the local architecture, and FaceTime with her godchildren.

Wes Moldogo is currently in his final semester at Portland Seminary (of George Fox), pursuing a Master of Divinity. He holds Bachelors in Communication from Simpson University and has previously completed a unit of CPE at the David Grant Medical Center at Travis Air Force Base this past Spring. Wes is currently a Chaplain Candidate in the California Army National Guard. In the past 6 years, he holds prior U.S. Army service as an enlisted Motor Vehicle Operator and as a commissioned Engineer Officer. He is an ordained minister in the Covenant of the Cross Church in Nashville, TN.

Bichhoa (Tam) Pham is an ordained Buddhist nun in the Lin chi lineage. Tam earned a B.S degree in Radiology Technology in 2000 from CSU, Northridge and an M.Div. in 2017 from University of the West. At the age of ten, coping with the death of her father was an unbearable experience. Thus, she believes that interfaith chaplaincy in the hospital setting, providing emotional and spiritual support, is so meaningful to patients and families at the most difficult times — especially, coping with the end of life. It also gives Tam the opportunity to learn about other faiths and to serve others better in our diverse society.

Frederico (Freddie) Trancoso is a native of Rio de Janeiro, Brazil, the eldest in a family of 14. He was raised in both the Umbanda and Spiritist religions. Freddie studied history before completing his BA in Physical Therapy in Rio; he continued studying to become a certified Acupuncturist which he integrated successfully into his work. Freddie has trained in Tibetan Buddhist meditation and ritual arts for twenty-three years. He completed two traditional three-year and three-month retreats under the guidance of his teacher Lama Tharchin Rinpoche at the Vajrayana Foundation. He is an instructor to the current traditional three-year retreat program of Pema Osel Ling.
Mark Your Calendar

COMPASSION FAIR
Thursday, December 7
9:00am – 3:00pm, SHC Atrium

HANUKAH DAILY CANDLE LIGHTING
December 12 – 20
4:00pm, SHC Atrium

HANUKAH FESTIVAL OF LIGHTS
Thursday, December 14
4:00pm, SHC Atrium

CHRISTMAS CELEBRATION
Monday, December 18
2:30pm, SHC Atrium

SPEAKER SERIES:
A DAY IN LIFE OF A CHAPLAIN
Tuesday, January 30
4:00 – 5:30pm, Li Ka Shing Building

2017 VOLUNTEER GRADUATION
Monday, February 12, 2018
7:00pm, SHC Atrium

ASH WEDNESDAY
Wednesday, February 14, 2018
Ashes provided in patient rooms
Chapel, CCPA Meditation Room
CCSB, Redwood City Outpatient Center

PURIM
Wednesday February 28, 2018
Gift bags distributed to patient rooms.

GOOD FRIDAY SERVICE
March 30
12 Noon, Breezeway on ground floor near SHC Atrium

PASSOVER
Friday March 30 – April 7
Gift bags distributed to patient rooms.
Seder in an envelope available to patients first two nights.

EID CELEBRATION 2018
June 2018
SHC Atrium

For more information please call the Spiritual Care Service: 650-723-5101.

NEW RESIDENTS

Jeniffer Ruth Wellington is a New Thought Practitioner who studied African, Christian, and Jewish mysticism, Buddhism, and Shamanism. In 2014, she retired from a 20-year Information Technology career with the California State University system. She then attended Pacific School of Religion in the Graduate Theological Union (GTU) in Berkeley, California, and graduated with her M.Div. Her academic focus was on Interreligious Studies. As a Chaplain Resident, Ruth provides spiritual guidance based on diverse spiritual training and practices. During nine years as a Licensed Professional Religious Science Practitioner (RScP) in Oakland, CA she focused on Children’s, Education and Music ministry support.

Severo Kuupuo is a Catholic priest from the Catholic Diocese of Wa, Ghana, where he grew up. He did his seminary formation in St. Victor’s Major Seminary and obtained a Bachelor of Arts in Philosophy and Comparative Religions in an affiliated program with the University of Ghana. He also studied in Duquesne University and Walden University earning his MBA/MIS and a PhD in Public Administration respectively. He has lived and ministered in Southern California. He was in SHC for the past year for the residency program. He hopes to use the skills he acquires in the current fellowship program for providing competent services to people living with serious and life limiting ailments who he may encounter during his ministry in the future. Sev resides in St. Thomas Aquinas Parish, Palo Alto and helps out in the parish ministry. Sev’s hobbies include walking, reading, research, and gardening.
Meet Our New Cancer Center South Bay Chaplain
by Rev. Anna Nikitina, Staff Chaplain

In October, we welcomed Chaplain Anna Nikitina to the Spiritual Care Service staff. She is serving the Cancer Center South Bay. She was born in Russia and raised in the home of an Emergency Department physician. As a child she regularly visited her mother at work and became familiar with a healthcare environment at a young age. Anna brings the breadth of cultural and spiritual experience to her work as a chaplain. In Russia, she majored in Civil Law (Legal Studies) and completed the country’s law exam. Her desire to study theology in an intercultural context brought her to Seoul, South Korea, where she obtained a Master of Divinity degree at Torch Trinity Graduate School of Theology. Anna also studied at San Francisco Theological Seminary, where she plans to complete her Doctor of Ministry degree in the future.

After immigrating to United States, Anna worked as physical therapist aide in an outpatient rehabilitation center. There she learned the importance of listening to the stories of patients. She believes that human connection and compassionate presence can heal. Working with elderly, chronically ill patients at the rehabilitation center led Anna to join the CPE program at St. Francis Memorial Hospital, San Francisco. Anna integrates the action/reflection model of providing spiritual care. She comes to serve the Cancer Center South Bay as a Palliative Care Chaplain after six years as a staff chaplain at Mercy Medical Center in Redding, California. Anna is board certified by the Association of Professional Chaplains. She is a member of the Orthodox Christian Association of Medicine, Psychology and Religion. Anna’s professional interests include researching the subject of resilience and providing support to caregivers. Anna enjoys outdoor activities and lives in Sunnyvale. She loves walking, dancing, traveling, cooking and spending time with her spouse and two daughters.

Self-Care and Five Key Relationships: Good for Us All
by Chaplain Bruce Feldstein MD, Director, The Jewish Chaplaincy at Stanford Medicine and Adjunct Clinical Professor, Stanford School of Medicine

Chaplains play an important role supporting wellness in health care providers and addressing rampant burnout. At the first American Conference on Physician Wellness in October, Rabbi Lori Klein and I emphasized the spiritual domain in our workshop, “Toward a Culture of Wellness: Addressing Spiritual and Moral Distress.” In my class, “Physician Self Care,” I teach medical students a strategy for being emotionally resilient and open-hearted with their patients and themselves. I call it Five Key Relationships, something I discovered as a chaplain and wish I learned in medical school. It’s useful for anyone. We’re doing well if we have three of these relationships in our lives:
A Harvest of Thanksgiving to our Volunteers

To Volunteer Coordinating Council members who have served faithfully as leaders, mentors and administrators in 2017, thank you for your willingness to be information brokers, compassion vessels, cooks, technicians, set/up and clean up engineers, speakers, and hand-holders for our newest class of 42 Spiritual Care volunteers.

To Patricia Connor who offered 14 years to serving patients and gathering our statistics, navigated our first attempts in Volgistics to track volunteers, we give thanks! And to her successor, Patrick Dupuis who has continued to improve the content of our reports and statistics. Patrick has also developed a more efficient system of onboarding which will assist future classes (and coordinators!).

To our faithful volunteers who have logged in many more hours as the number of patients requesting Advance Directives has quadrupled. Our volunteers and the quality improvement team tracking What Matters Most Letters were given an honorable mention for the 2017 Malinda S. Mitchell Award for Quality and Service.

To Mahesh Bhavana and staff member Raksha Patel for their leadership, cooking, and choreography for the October Diwali (festival of light) celebration. Delicious food and dancing drew more than 200 patrons.

To Muna Alzughoul and Sammy Rahmatti, our Muslim volunteers who prepared the program, set displays, offered readings, slide shows of the Hajj, and prepared delicious food for our September EID celebration.

To Linda Allen, Chaplain Bruce Feldstein and the Jewish Chaplaincy volunteers who led the September “Sounding of the Shofar” event with children from Gideon Hausner Jewish Day School, High Holidays in an envelope distributed to patients, and the Sukkah that provided respite for patients, families and staff.

To all our faithful volunteers who continue to give their time and heart, who visit patients with patience and presence, who offer the gift of themselves in the midst of a person’s illness and emotional moments, thanks. You are a special part of Stanford Hospital. In the month of October, you offered 325 volunteer visits, 787 hours, 3120 trips to patient’s rooms and 4161 encounters with patients and families. Over a year’s time, that is a remarkable accomplishment.

May you know joy and peace in the coming year.

1. **A relationship with ONESELF.** Human beings have a capacity to do more than imagined. Yet, we are limited. We live in bodies, in time. A healthy relationship with oneself requires courage, self-acceptance and self-forgiveness.

2. **A SOUL FRIEND,** someone who can listen to whatever you have to say, compassionately and generously, without judging or trying to fix a situation or solve a problem. Perhaps a family member, a spouse, a friend, or sometimes someone you’ve just met.

3. **A THERAPIST or SPIRITUAL GUIDE,** someone to provide support and guidance as you make decisions and clarify feelings.

4. **A COLLEAGUE.** No one can appreciate what you’re going through like someone who’s been through it.

5. **The TRANSCENDENT,** connecting with that which is beyond ourselves, however we call it: God, the Sacred, the Universe, Life. People experience this in many ways: through religion, nature, art, music, sport, family, work, community, or volunteering.

Self-care is essential for chaplains, for physicians, indeed for us all. How many of these key relationships do you have in your life today?
Caregiving Leads to Lives Intertwined

By Chaplain Taqwa Surapati

When someone close to you is diagnosed with a serious or chronic illness, your role can shift from being a wife, husband, partner, child, or friend, to also being a caregiver. The caregiver helps meet their loved ones’ medical and daily needs. Help with medical needs includes accompanying your loved one to doctor’s visits, tracking medication schedules, noticing if the illness has progressed, and helping communicate with the healthcare team. Your role shifts further if the person living with illness becomes more dependent and requires assistance with daily activities such as cooking, dressing, exercise, housework, and grooming. Your role as a caregiver is meaningful and essential.

Caregiving can be demanding and overwhelming, but for the right person it can also lead to gratifying and rewarding experiences. Your life and the life of the person you care for become intertwined and rich with mutual purpose. This is more likely to occur if the caregiver also attends to or receives support for her or his needs. Your need for time on your own as a caregiver can improve the quality of your care, and the relationship with the other person. You can join a support group for caregivers for a break, or create a schedule with other people to share caregiving tasks.

Another important aspect of caregiving is to find joyful activities that you and your person can both participate in together. Try finding ways to connect with him or her that would include heartfelt communication, either verbally or through another medium. Writing or drawing in a shared journal, praying together, or exploring someplace new are examples. To be able to find meaning in caring for an important person in your life is a gift.