MY JOURNEY
From Emergency Nurse Manager to Spiritual Care Chaplain at Stanford Hospital & Clinics

By Linda J. Bracken, RN, PCM

My career as a Registered Nurse began 44 years ago, working on the east coast at Yale-New Haven Hospital. Twenty one years later in 1989, I began my work at Stanford Hospital & Clinics, which included staff nursing and management positions in the Emergency Department (ED). And then, twenty three years later in May of 2012, I retired from my job as Patient Care Manager (PCM) in the ED and jumped right into my next role — I spent 11 weeks as a resident in the Clinical Pastoral Education program (CPE) at Stanford Hospital & Clinics. The CPE Program is part of the Spiritual Care Service department, which provides interfaith spiritual care and support to patients and guests at Stanford Hospital.

In my last several years as ED manager, I had been studying at Nashotah House Seminary (Episcopal) in Wisconsin to gain a theological education. As I studied, I discovered that courses in theology do not necessarily prepare you to emotionally relate to patients in crisis. I realized that is what the CPE program at Stanford could do for me. In addition, the CPE Program would partner well with my many years in nursing and managing staff.

A significant part of the CPE program is to teach us to identify and understand our feelings, and how we react in various situations. Knowing ourselves better can help us relate to our patients. Chaplaincy at Stanford encourages meeting the patient “where they are.” We respect the patients’ belief systems.

See MY JOURNEY page 3
A TALE OF TWO CONSTRUCTIONS

By The Rev. Dr. C. George Fitzgerald, S.T.D.

If you have any connection with Stanford Hospital & Clinics, then you are well aware that there is a lot of construction going on. Think of it in terms of two categories: the hard construction, which is the physical nuts and bolts of actually building the new hospital, and the soft construction, which involves the emotional and compassionate connections that we build amongst staff, volunteers, patients, and guests.

The hard construction has been on the community radar for at least four years. The new hospital is scheduled to be completed in 2018. It will represent a major upgrade for Stanford Hospital & Clinics and it will meet the highest standards for earthquake safety. Most importantly, it will have approximately 600 private patient rooms with hillside views.

In contrast, soft construction does not readily lend itself to quantification. We know compassion when we experience it, but it is not as easy to measure it. In regards to patient care, the soft construction of genuine concern for others existed long before the construction of the first hospital. In my twenty-four years at Stanford the provision of excellent patient care has continually been a major consideration and objective. Two years ago, soft construction received a tremendous infusion of energy and purpose when Amir Dan Rubin, our President and CEO, introduced a vision of “healing humanity through science and compassion, one patient at a time.” Focusing on a goal of achieving absolute satisfaction, especially for patients and family members, “C-I-CARE” was launched hospital-wide. The acronym stands for “Connect, Introduce, Communicate, Ask, Respond, and Exit.” It emphasizes compassion, professionalism, and communication. The initiative includes a host of on-going training programs, bringing together staff and volunteers from all levels. Departments have become much more interactive and more effective in consciously linking their resources for the benefit of patients and families. Like so many things that appear deceptively simple, C-I-CARE has proven to be incredibly effective. Almost every patient I visit lets me know what a truly remarkable personal experience they have had at Stanford Hospital, and what a genuinely friendly place it is.

Guest Services, which includes the Spiritual Care Service, has been at the forefront of implementing C-I-CARE. With the challenges manifested by the extensive construction projects, compassion and communication are more indispensible than ever. Spiritual Care Service has much to contribute to the effort, as there have been so many recent studies that document that hospitals with clinically trained chaplains generally have fewer complaints, less requests for pain medication, and earlier discharges. Moreover, we have the resource of over 230 volunteers from a host of religious traditions (Buddhist, Christian, Jewish, Hindu, Muslim, and Sikh) who provide a unique sense of welcome and support for patients and families from their faith group.

Hard construction and soft construction are two sides of the same coin, each integral to the other, and each very evident at Stanford Hospital & Clinics.

The Reverend Dr. C. George Fitzgerald, S.T.D., is the Director of Spiritual Care Service. You can reach him at cfitzgerald@stanfordmed.org.
or their need to just talk, apart from religion. Most people want kindness, love and someone to listen. Some patients request prayer, others do not. We are a multi-cultural hospital, with many different faiths, cultures, and viewpoints. For a beginning chaplain, this is quite a challenge, which the CPE program helps address.

Being on call evenings, nights and weekends involves both Stanford Hospital and Lucile Packard Children’s Hospital. It can be very busy. Chaplains respond to codes and rapid responses. Patients ask to meet with a chaplain and talk or pray at any time of the day or night, especially during the crises of changing medical conditions. Emotional situations allow us to talk with families and staff whenever we can be of service. We also like to be available to respond to the needs of staff under stress.

The challenges of the transition from patient care manager to chaplain trainee for me were several. Slowing down my pace, and allowing myself to be present in the moment for the patient, was difficult at first. I wore a small bell which jingled when I walked fast, reminding me to take a deep breath and walk more slowly and calmly. I was anxious in anticipation of unfamiliar situations when I was first on call. It was also hard for me to be introspective about my feelings. Listening quietly to the patient was a skill I developed during these weeks. Easier transition issues for me, based on my experience, were an understanding of what was happening with the patient physically. I was also particularly empathetic to the stresses on the staff.

Patients and families have many needs. They want kindness and compassion, they want someone to listen to them, and they want their concerns heard. They want explanations about what is happening to them. As a chaplain, we have more time to listen to patients, to hear what their concerns are. Listening to patients tell me of their dreams, their disappointments, their fears, and their joys is a privilege.

I will carry these patients with me forever in my mind and heart. On a daily basis, we, the hospital staff, are privileged to meet patients both at the beginning of their lives and at the end, and at all times in between. The medical and nursing staff helps them in tangible ways, while the chaplains minister to the emotional and spiritual, but not so measurable, needs of the patients. Those needs are just as important as the physical needs, and I am humbled by this task.

Linda Bracken was the Patient Care Manager in Stanford Hospital’s Emergency Department and a summer resident in Stanford’s Clinical Pastoral Education program.

MARK YOUR CALENDAR

Hanukah Celebrations
Everyone is invited to join us for Hanukah celebrations in the Stanford Hospital Atrium (located on the Ground Floor between Units D and E):
• Daily Candle Lightings, December 8th – 16th, 4:00 pm
• Festival of Lights Celebration, December 10th, 4:00 pm, Hospital Atrium

Christmas Festivities
Be sure to join in on the Christmas spirit with music, songs, and refreshments on Wednesday, December 19, at 4:00 p.m in the Stanford Hospital Atrium (located on the Ground Floor between Units D and E).

All patients, guests, staff, volunteers, and community members are invited to attend any celebration.
I was touched by the years of faithful service these employees represented, and impressed by others who are serving with such passion and compassion (Rabbi Lori Klein and Annamae Taubeneck, and over two hundred volunteers and on-call contractors, both long-term and new). There was such a sense of heartfelt warmth, joy, and fulfillment in those who were serving. How was this maintained across years of institutional changes? I reflected that these were persons connected to the spiritual dimension of “meaning.”

I was reminded of the Italian psychiatrist Roberto Assagioli who tells a parable about three stone cutters building a cathedral in the Middle Ages. A person approaches the first stone cutter and asks him what he’s doing. Angrily the stone cutter turns and says “Use your eyes! They bring me a rock, I cut it into a block, they take it away, and they bring me another rock. I’ve been doing this since I was old enough to work, and I’m going to be doing it until the day that I die.” The person goes to the next stone cutter and asks him the same question. This stone cutter smiles warmly and says “I’m earning a living for my beloved family. With my wages I have built a home, there is food on our table, and the children are growing strong.” Moving on to the third stone cutter, the person asks the same question. Pausing, the stone cutter gives a look of deep fulfillment and says “I am building a great cathedral; a holy lighthouse where people lost in the dark can find their strength and remember their way. And it will stand for a thousand years!”

Each of these stone cutters is doing the identical task. Finding meaning in our work and lives opens even the most routine of tasks to a spiritual dimension. Meaning does not change our lives but transforms our experience of our lives and work. How do we find ways to pursue and preserve a sense of meaning? I believe “meaning” is a spiritual dimension of our lives and work which nourishes our spirit, our soul, and allows us to serve with deep satisfaction and joy.

Reverend Sandee Yarlott is the Interim CPE Residency Supervisor at Stanford Hospital. You can reach her at syarlott@stanfordmed.org.
WELCOME TO OUR NEW CPE RESIDENTS

For more than 21 years, Stanford’s Clinical Pastoral Education (CPE) program has helped teach interpersonal and professional skills to theological students and ministers of all faiths. While most hospitals have a chaplaincy, not all are qualified to provide pastoral education, which must meet stringent accreditation guidelines set by the Association for Clinical Pastoral Education.

Stanford Hospital & Clinics welcomes the CPE Class of 2012.

Taqwa Mahrani Surapati
Islam
Originally from Indonesia, Taqwa became a resident of San Jose in 1998. She belongs to many mosques in the Bay Area, and is actively doing volunteer work with Muslim and non-Muslim organizations. Taqwa enjoys travelling and reading. She and her husband Aldrin are parents of two sons: Ken, 17, and Rama, 14.

Rui Rizziolli
Ordained Brazilian Seventh Day Adventist pastor
Rui has worked with the Adventist of Development Relief Agency in the Amazon and Venezuela. He also worked in Sao Paulo, Brazil, as a middle school and high school Chaplain while leading churches. He led trilingual Seventh Day Adventist Churches in Mountain View and Sacramento. He was gifted with 2 kids, Talita, 13, and Christopher, 14, and his spouse Roberta. He enjoys travel, nature, saxophone, languages, jazz, his two little dogs, and the memories of serving in the Army.

Crystal Shinn
Presbyterian Church (USA)
Originally from Seoul, South Korea, where she spent high school, Crystal has lived in various parts of the United States. She recently graduated from Princeton Theological Seminary after leaving careers in the high tech and financial industries. She worked as a pastor intern at Presbyterian Church USA churches and a chaplain intern at University Hospital at Princeton. She enjoys hiking, reading, and writing.

Albert Da Valle
Catholic
Albert has a BA in Math/Physics from the University of California and an extensive career in various engineering and management positions. In 2006, Albert received his Masters in Pastoral Ministries from Santa Clara University. For several years he has worked with teenagers in his local church and has been a volunteer hospital minister. Albert has been married for thirty-seven years, is a father of three, and has six granddaughters, plus a new grandchild due in March of 2013. He enjoys running and exercise.

The Rev. Annamae Taubeneck
Presbyterian (USA)
An ordained Presbyterian Chaplain, Annamae is an enrolled band member of the Mohawks of Kahnawake, a Mohawk Nation in Quebec, Canada. She is a veteran of the U.S. Army where she served as a helicopter mechanic and crew chief and a veteran of the Royal Canadian Navy. Annamae earned a Master of Divinity from San Francisco Theological Seminary and is currently pursuing certification in Supervisory Clinical Pastoral Education at Stanford Hospital.
VOLUNTEER SPOTLIGHT

Name: Reverend Tony Iraci

Religious Denomination: Non-Denominational

How long have you been a Spiritual Care Service volunteer? 6 years

Why did you choose to volunteer here? My three weeks as a patient provided great insight into the level of care at Stanford Hospital. I was so impacted by the excellent care I received and the compassionate staff that I felt it was a great opportunity for me to give back and help others going through difficult situations. Since I have a background in ministry, Spiritual Care Services seemed the best place to volunteer.

Most rewarding part of volunteering: Being part of the healing process. Some patients face the most difficult time in life’s journey and just being there for them allows me to impart a sense of encouragement, hope, and compassion. It’s so rewarding to see a smile on the face of a discouraged patient, or to watch them transition from a state of hopelessness to being hopeful, and to hear them say “Thanks for taking time to be with me.”

Biggest challenge of volunteering: How to respond to patients when they share that the doctor was just there and told them there is nothing else that can be done for their medical condition. There are also patients I visit that are being discharged and have no family, friends, or place to call home. Listening with compassion instead of talking is sometimes the best way to respond, and that can be a challenge.

A favorite story: Over the past 6 years I’ve had many wonderful stories. One in particular was when a patient was being transported to another unit in the hospital and misplaced their eyeglasses. When I asked “Is there anything else I can do for you today?” the patient replied “Can you help me find my glasses?” I replied, “Let me see what I can do.” So off I went to Security with a description of the glasses. There was a large box full of misplaced eyeglasses and I went through them. Then, like a small miracle, there were the glasses! The patient was so surprised and elated, and for me it became another rewarding experience.

I am always amazed when I visit a patient and hear them say “I was just hoping and praying for someone to come visit and pray for me, and suddenly a knock came at my door and there you were.” For me, it is such an honor and privilege to serve others through Spiritual Care Services — one patient at a time.

Reverend Tony Iraci has volunteered an extraordinary amount of hours at Stanford’s Spiritual Care Service — over 1,700 hours!

VOLUNTEER TRAINING

Spiritual Care volunteers attend an all-day training session in October 2012. Then they complete three mentoring sessions with an experienced Spiritual Care volunteer. They then may volunteer in the hospital with our patients. The next round of volunteer training sessions will begin in spring 2013.

HOUSING FOR RESIDENTS

If you have an extra room in your home, please consider hosting a Clinical Pastoral Education resident while he or she trains at Stanford. Any length of time is appreciated. For more information, please call 650-723-5101.

LEADERSHIP

CPE Professional Advisory Group
Will Masuda (Chair)  Tim Chamberlain  George Fitzgerald  Carolyn Glauz-Todrank  Marita Grudzen  John Hester  Lori Klein  Scotty McLennan  Judy Passaglia  Barbara Ralston  Jan Roberts  Susan Scott  Liza Taft  Robinetta Wheeler

Volunteer Coordinating Committee
Tom Brosnan (Chair)  Brenda Avery  Penny Barrett  Mahesh Bhavana  Albert Da Valle  Bruce Feldstein  George Fitzgerald  Don Gee  John Hester  Sherifa Ibrahim  Tom Jackson  Lori Klein  Susan Scott  Kathryn Stucki  Taqwa Surapati  Isabel Tagle
Eid, an Arabic word meaning joyous occasion, and Fitr, meaning breaking of the fast.

This day celebrates a renewal of our spirit after the month-long fasting of Ramadan, a rigorous training of body and soul where healthy adult Muslims are abstaining from all food from dawn to dusk. It is both an occasion of joy, as it marks the beginning of a new life with increased God consciousness, as well as an opportunity to commiserate and share with the poor and needy. The first day begins with a special communal morning prayer offered at the mosque, remembering God with praise and happiness. It may also include performing acts of charity, visiting family and friends, preparing special foods, dressing in new clothes, and giving gifts. (1 Shawwal 1431) Greetings for the day are “Eid Mubarak,” which means “Blessed Eid.”

The tenth annual Eid al-Fitr celebration at Stanford Hospital & Clinics was presented by the Muslim Volunteer Group on August 23rd, 2012. The holiday was celebrated with a luncheon, inspirational talks, slide shows, and displays of artifacts.
By The Rev. Susan Scott

In October, Stanford Hospital sponsored the Jonathan King Lecture with Dr. Ira Byock, speaking on The Ethics and Practice of Loving Care. The lectureship was established in 1991 to encourage the compassionate and humane care of all patients. Dr. Byock spoke of the importance of practicing loving care with our patients. His lecture was very affirming of our hospital’s mission statement: healing humanity, one patient at a time. As a chaplain, I fortunately have many opportunities to participate in sharing loving care with patients, guests, and staff.

One day, I received a call from the nursing staff in the Operating Room. They had a patient who had been in a car accident and died during surgery. They weren’t sure of his background or religion. They asked for me to come pray for him and they also asked, “Would you come for us?” I went to the operating room, put on scrubs, and the nurses and I gathered around the patient and prayed. We prayed for this person who we knew to be a child of God. We prayed for peace for him, and for comfort for his family. I gave thanks for each of the staff who cared for him. The nurses were very appreciative for that moment of prayer. Later I spoke with the patient’s sister and I told her about the prayer in the Operating Room. She was extremely grateful that there had been caring people with him.

Last month, a man came into the Emergency Department and died very suddenly. His wife was distraught and very worried about her two children. With her permission, I went to their school, picked up the children, and brought them to the hospital to be with their mother. Along with our Child Life Specialist, who communicates with children in the Emergency Department, and a social worker, I spent numerous hours supporting the family. We provided video games for the kids as a break from the pain and sadness of losing their father. We got them dinner and talked. When other relatives arrived, we encouraged them to be supportive of the children.

These are stories about hope and healing in the midst of sadness, and they are stories we take very seriously in our commitment to loving care and to “healing humanity, one patient at a time.”

The Rev. Susan Scott is the Decedent Care Chaplain at Stanford Hospital & Clinics. You can reach her at suscott@stanfordmed.org.