Ready for Tough Times

How can spiritual care for staff and organisational spirituality build resilience to deliver patient and family care
(in the context of financial pressures and growing demand)
Climate of Financial Austerity

“I met with the budget people and we agreed that the cheapest way to fix all of our problems is chocolate.”
No easy answers

Wicked issue

Where asking the appropriate questions and wrestling with them together may point the way forward…. 
Ewan Kelly

Father, friend, son (bereaved), brother, colleague, divorced, hillwalker, cloudwatcher, rugby lover, live music listener, beer drinker, reader, reflective practitioner, church member,

Programme Director,
NHS Education for Scotland
and
Senior Lecturer in Pastoral Theology
University of Edinburgh
We are **persons** first and professionals second

Organisations are made up of **people** who are professionals
Why did you decide to enter the profession you are in?

Take yourself back and reflect on what was your motivation for entering nursing, medicine, an allied healthcare profession ....
We, each of us entered our profession out of human need.....

• To make a difference
• To care
• To make money/ have a secure job/status
• Because our parents thought it was best for us....
Self as human being

Greatest therapeutic asset we have for enhancing others health and wellbeing (and our own!)...

Not Quite

Greatest asset for enhancing health and wellbeing is the reflexive self – the self that has been reflected on and continues to be so
Shedding the armour of professional facade

what I want is competence and compassion

ok - this is the REAL me
What’s this to do with spiritual care

Calvin and Hobbes: Calvin: 
You know, Hobbes, I can’t figure out this death stuff.

Hobbes: 
Why did that little raccoon have to die? He didn’t do anything wrong.

Calvin: 
He was just little! What’s the point of putting him here and taking him back so soon?!

Hobbes: 
It’s either mean or it’s arbitrary, and either way I’ve got the heebie-jeebies. Why is it always night when we talk about these things?
Meaning and purpose – as a person

What raises your spirits?
Gets you out of bed in the morning?
Makes life worth living?
What’s important to you?
What keeps you going when the chips are down?

What makes you fly?
What gives you meaning and purpose at work?

Gives you a sense of satisfaction?
Keeps you going back day after day?
Gives you a lift?

What makes you fly?
Meaningful work (or its absence) influences -

- Job satisfaction
- Work motivation
- Work behaviour
- Engagement
- Empowerment
- Stress and absenteeeeism
- Performance

Rosso et al 2010
Enabling people to fly as human beings and as professionals…

Creating meaningful work leads to healthy organisations with desired organisational outcomes and healthy staff who…. 

deliver quality care

(see Michael West)
What values do you seek to embody in life and at work?

Informed by

- upbringing
- beliefs
- key relationships and people in your life
- surrounding culture
Ardgowan Hospice
Key Values

- Commitment
- Integrity
- Compassion
- Quality
- Confidentiality
- Care
- Respect
- Sensitivity
- Trust
Self-compassion

If I am not for myself, who will be for me?

But if I am only for myself, who am I?

Rabbi Hillel
Not
‘Love your neighbour more than yourself’
- Traditional model of service

But
‘Love your neighbour as yourself.’
more “ME” stuff
less “YOU” stuff
no “THEM” stuff
Happiness and Virtue

Personal character and living out the values we feel important

Virtue
Aristotle – knowing what is good
Plato – doing what is good

Jamison 2008
Do you perceive the organisation you work in enables you to live out/embod the values that are important to you?
If you are a team leader, clinical lead, manager or organisational lead what can you do to enable colleagues, the organisation and yourself to live out the values that are significant for all….?
When do you as
• an individual
• a team
• an organisation

Regularly asking questions like ‘did I/we do the right thing’? Am I/are we doing the right thing?
Values Based Reflective Practice
NES

• Whose Need(s) were met during the encounter?
• What does this experience tell me about my caring Ability?
• What does it tell me about Me?
• What questions does it raise about my Values (that inform my attitudes and behaviours)?
• With whom did the power lie in the case study?
• Whose voice(s) dominated or had most value?
• Whose voice(s) were not heard or undervalued?

Paterson and Kelly 2012
Ready for Tough Times

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Organisational Shadow Side of Palliative Care

‘and what I would avoid, I carry with me, always’

John Burnside Suburbs (2006, 2)
Organisational Shadow Side of Palliative Care

• Death

• Disenfranchised grief
Organisational Shadow Side of Palliative Care

Death

Can organisations be healthy and resilient if a core function is not owned and communicated?
Organisational Shadow Side of Palliative Care

Disenfranchised or accumulative grief

The unacknowledged and processed losses and grief that we increasingly carry as human beings and as healthcare professionals

Potential of dehumanisation and burn out

Browning Helsel 2008
Disenfranchised or accumulative grief

Role of reflective practice
Journaling
Team de-briefs

Ritual
"I'm fed up of Poohsticks. Let's go down the arcade and get ourselves tattooed"