

630U Clinical Spiritual Care

Course Name Clinical Spiritual Care
Course Director Shiho Ito, MD

1. Course Director, Coordinator and General Administrative Information

FACULTY AND STAFF

Name	Office Location	Phone	Email
Director: Shiho Ito, MD	333 City Blvd West Ste 500	714-456-7809	itos@hs.uci.edu
Coordinator: Noosha Eftekharian, MBA		714-567-5726	seftekh@hs.uci.edu

DESCRIPTION

This elective course addresses two important aspects of medical student training: first, improving patient care skills by addressing the spiritual care of patients and second, promoting medical student wellbeing and resilience. It provides an opportunity for students to develop the skills to process the emotions that arise in caring for acutely ill and dying patients, to explore how their own background, attitudes and beliefs inform their motivation for a career in medicine and how attending to meaning- and purpose-oriented aspects of themselves such as their spirituality can influence their approach to coping with the rigors of clinical training.

This rotation teaches students to develop patient care and interpersonal skills that can enable them to become a 'healing presence' for their patients and colleagues and to skillfully navigate interpersonal and family dynamics in a clinical setting. Students develop active listening skills and learn to critically reflect on patient interviews to understand how their interviewing technique can open or shut down communication and how to continually improve. By turning the focus on meaning and relationship-oriented questions that arise during patient care, students will be uniquely equipped to thrive personally and professionally despite the challenges of training and in the face of challenging patient encounters.

Note: During the training provided in this course, spirituality is approached broadly, from expressions spanning the continuum of strict religious observance to feelings of oneness in nature. The goal is to provide an inclusive environment so that all students can meaningfully participate regardless of their own spiritual beliefs and can learn to serve patients of diverse spiritual perspectives.

PREREQUISITES

This course is intended for third- and fourth-year students enrolled in the undergraduate medical education program at UCI School of Medicine.

RESTRICTIONS

This course is intended for third- and fourth-year students enrolled in the undergraduate medical education program at UCI School of Medicine.

COURSE DIRECTOR

Dr. Shiho Ito is a board-certified UCI Health physician who specializes in hospital medicine and palliative care. She attended Loma Linda University School of Medicine where she first learned how to integrate spiritual and whole-person care into her medical practice. She completed her residency in Family medicine and training in Hospice and Palliative Medicine at UCI and is spearheading the development of spiritual care training modules for physicians at UCI.

INFORMATION FOR THE FIRST DAY

Please report to Chaplain Patrick Thompson or Chaplain Pirjo Carlisle at the chaplain's office along the left side of the first floor of Douglas Hospital at 9am. Please proceed to interdisciplinary rounds at the 78-family lounge on the 7th floor at 10am with the palliative care team.

Location to report: 9am

Email: Contact Dr. Ito via email itos@hs.uci.edu for the course packet.

SITE: UCIMC

DURATION:

2 weeks

Scheduling Coordinator: UCI students please call (714) 456-8462 to make a scheduling appointment.

Periods Available: Throughout the year.

NUMBER OF STUDENTS ALLOWED:

A maximum of four students will be allowed at one time.

WHAT STUDENTS SHOULD DO TO PREPARE FOR THE COURSE

Optional: Reflect on how your spirituality and spiritual practices (if any) inform your coping mechanisms, patient care and interpersonal relationships.

COMMUNICATION WITH FACULTY

Questions about logistics should be directed to the Course Coordinator. Direct questions, comments, or concerns about the course can be directed to the Course Director. Contact information and office location are at the beginning of this document.

To ensure that your email will not be lost in the large volume of email received, please use the following convention for the subject line:

SUBJECT: COURSE NAME, your last name, your issue (e.g. 630U, Smith, Request for appointment)

2. Course Objectives and Program Objective Mapping

The following are the learning objectives for the 630U course. Students are expected to demonstrate proficiency in these areas in order to satisfactorily complete the course. In addition, the extent of a student's mastery of these objectives will help guide the course evaluation and grade.

Course Objective	Mapped UCI School of Medicine Program Objective	Sub Competency	Core Competency
1. Take an appropriate spiritual and cultural history.	A-3. Knowledge of basic clinical skills required to meet the skills objectives, including interviewing, physical diagnosis, communication and clinical reasoning processes	Basic Clinical Skills	Knowledgeable

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	<p>B-1. The ability to competently conduct a medical interview and counseling to take into account patient health beliefs, patient agenda and the need for comprehensive medical and psychosocial assessment</p> <p>C-2. Professional behaviors reflecting compassion and respect for patient privacy, altruism and a commitment to comprehensive, holistic medical care</p> <p>C-3. Sensitivity and awareness of diverse cultures, health beliefs and social factors impacting patient health and illness</p> <p>D-2. A commitment to patient care and to the well-being of patients and colleagues</p>	<p>Medical Interview</p> <p>Compassion</p> <p>Cultural and Social Awareness</p> <p>Patient Care</p>	<p>Skillful</p> <p>Altruistic</p> <p>Altruistic</p> <p>Altruistic</p>
2. Understand the impact of spirituality on patients' view on health and potential barriers to care, and to develop empathy for patients and their families.	C-2. Professional behaviors reflecting compassion and respect for patient privacy, altruism and a commitment to comprehensive, holistic medical care	Cultural and Social Awareness	Altruistic
	C-3. Sensitivity and	Cultural and	Altruistic

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	<p>awareness of diverse cultures, health beliefs and social factors impacting patient health and illness</p> <p>D-2. A commitment to patient care and to the well-being of patients and colleagues</p>	<p>Social Awareness</p> <p>Patient Care</p>	<p>Dutiful</p>
<p>3. Develop techniques for communication when dealing with challenging conversations.</p>	<p>B-3. The ability to articulate a cogent, accurate assessment and plan, and problem list, using diagnostic clinical reasoning skills in all the major disciplines</p> <p>B-6. The ability to function effectively within the context of complexity and uncertainty in medical care</p> <p>C-1. Honesty and integrity reflecting the standards of the profession, in interacting with colleagues, patients, families, and professional organizations</p> <p>D-2. A commitment to coordinated patient care and to the wellbeing of patients and colleagues</p>	<p>Patient Management</p> <p>Patient Management</p> <p>Professionalism</p> <p>Patient Care</p>	<p>Skillful</p> <p>Skillful</p> <p>Altruistic</p> <p>Dutiful</p>
<p>4. Explain the role of the chaplaincy and palliative</p>	<p>B-3. The ability to articulate a cogent,</p>	<p>Patient Management</p>	<p>Skillful</p>

<p>care teams, when to consult these services and how to incorporate their recommendations to enable patient-centered care.</p>	<p>accurate assessment and plan, and problem list, using diagnostic clinical reasoning skills in all the major disciplines</p> <p>C-1. Honesty and integrity reflecting the standards of the profession, in interacting with colleagues, patients, families, and professional organizations</p>	<p>Professionalism</p>	<p>Altruistic</p>
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3. Course Resources

CANVAS COURSE ORGANIZATION

Links to required videos and podcasts will be available on the Canvas site. Journal entries, verbatim forms and case study completion can be submitted through Canvas.

TEXTS AND READINGS: SUGGESTED

Frank, Arthur W. *The Wounded Storyteller: Body, Illness, and Ethics*. Chicago: University of Chicago Press, 1995.

TEXTS AND READINGS: SUPPORTING AND REVIEW

"Overview of Spirituality in Palliative Care." UpToDate. Web.

<https://www.uptodate.com/contents/overview-of-spirituality-in-palliative-care>

"Influence of spirituality and religiousness on outcomes in palliative care patients"

UpToDate. Web. <https://www.uptodate.com/contents/influence-of-spirituality-and-religiousness-on-outcomes-in-palliative-care-patients>

"Religion and End of Life Part 1: How Different Religions View the End of Life."

UAHS Center on Aging, 1 June 2019,

<https://www.uofazcenteronaging.com/caresheet/providers/religion-and-end-life-part-1-how-different-religions-view-end-life>

Fitzpatrick, S.J., Kerridge, I.H., Jordens, C.F.C. et al. Religious Perspectives on Human Suffering: Implications for Medicine and Bioethics. *J Relig Health* 55, 159–173 (2016). <https://doi.org/10.1007/s10943-015-0014-9>

Saguil, Aaron, and Karen Phelps. "The Spiritual Assessment." *American Family Physician*. 15 Sept. 2012. <https://www.aafp.org/afp/2012/0915/p546.html>

"Spirituality and Medicine." *Spirituality and Medicine | UW Department of Bioethics & Humanities*. Web. 10 May 2021.
<https://depts.washington.edu/bhdept/ethicsmedicine/bioethics-topics/detail/79>

ADDITIONAL RESOURCES (Websites)

Required:

Duke CME Videos: "CME Videos - Spirituality, Theology and Health at Duke." Center for Spirituality, Theology and Health. Web.
<https://spiritualityandhealth.duke.edu/index.php/cme-videos>

Ethics: "What Has Religion to do with Bioethics?"
<https://projects.iq.harvard.edu/rshm/dr-farr-curlin-hds-hms-lecture-seriesreligion-and-medicine>

Palliative Care: <https://www.youtube.com/watch?v=vS7ueV0ui5U> Improving the quality of spiritual care as a dimension of palliative care: learning from the U.S.
<https://www.youtube.com/watch?v=xQLpHWhBIE8>

Spirituality traditions: Religion And Death: Interfaith Panel Explores End Of Life Care Beliefs <https://www.youtube.com/watch?v=KMc9a-ze0iE>

Suggested:

GWish Spiritual Assessment in Clinical Practice Course

<https://apps.smhs.gwu.edu/gwish/spiritualassessment/story.html>

Cantilena, Chris. "Every Physician Is a Wounded Healer." *KevinMD.com*, KevinMD.com, 15 May 2019. www.kevinmd.com/blog/2016/04/wounded-healersthe-urgent-need-for-self-care-inmedicine.html#:~:text=Carl%20Jung%20is%20credited%20with,that%20could%20not%20be%20healed.

Zigmond, David. "Physician Heal Thyself: The Paradox of the Wounded Healer." Physician Heal Thyself: The Paradox of the Wounded Healer by David Zigmond. Web. 05 May 2021.

Phifer, Andrew. "Preventing Physician Burnout: Emotional and Spiritual Wellbeing." Baylor College of Medicine Blog Network. 17 July 2019.
<https://blogs.bcm.edu/2019/07/17/preventing-physician-burnoutemotional-and-spiritual-wellbeing/>

Schimpff, Stephen. "The Physician as Healer." In-Training. 10 Jan. 2015.
<https://intraining.org/doctors-orders-physician-healer-stephen-c-schimpff-md-7525>

4. Major Exams, Assignments and Grading

MANDATORY SESSIONS

Session Title	Location
Orientation, Duke CME videos (flipped classroom, role play)	UCIMC/Virtual
Verbatims (small groups, role play)	UCIMC/Virtual
Case Studies (individual or small group role play with attending)	UCIMC/Virtual
Medical Ethics (podcast)	UCIMC/Virtual
Spirituality Traditions (podcast)	UCIMC/Virtual
Palliative Care (podcast)	UCIMC/Virtual
Spiritual Wellness of the Physician (journaling)	UCIMC/Virtual
Student presentations (if applicable; conference)	UCIMC/Virtual
Wrap-Up Reflective Session (small groups, individual meetings)	UCIMC/Virtual

Clinical Components

1. Join the chaplain or the palliative care team for rounds each day and conduct spiritual interviews with patients, at least one of which should be observed.
2. Case Logs: at least 1 per each unit/specialty: Surgery, Gyn-Onc, Heme/Onc, NICU, PM&R, Psych, Neuro, ED, MICU. You may also substitute for patients in another specialty or area of the hospital; please see number 6.
3. Attend at least one ethics consult.
4. Participate in at least one family meeting.
5. (Optional) Arrange to visit a patient with Vitas (the hospice service contracted with UCI) and conduct a spiritual interview.
6. (Optional) Contact Bradley Giafaglione bgiafagl@hs.uci.edu in Patient Experience Services to be connected with patients in Tower who might

benefit from additional attention to spiritual needs or other whole person needs (e.g. help with legacy work (transcribe life story, recipes, birthday messages to their children for the future, etc.)).

MAJOR ASSIGNMENTS

1. 6 Journal Entries: respond to prompts provided at orientation, after watching Duke CME videos, videos on Ethics, Palliative care, and Spiritual Traditions and prior to wrap-up.
2. Verbatims: transcripts of conversations with patients
3. Personal spiritual wellness plan and log: each student will devise their own plan for maintaining their own spiritual wellness (e.g. daily meditations, nature walks, prayer, reading inspirational/spiritual material, journaling, etc.), track how well they are able to adhere to it especially during stress and revise the plan as needed. Discuss with the chaplain midway through the course.
4. Case Studies: Complete at least 2 case studies in role-play format with chaplain, attending, resident or senior medical student.
5. Submit form for observed spiritual interview, case logs
6. (Honors project) Student Presentation: A 10-min presentation on a topic of choice related to spirituality in medicine or medical ethics. A list of suggested topics will be provided.
7. (Honors Assignment): Watch/read 4 optional podcasts/videos/articles from list provided and respond with journal entries after each one. You may also choose your own reading with approval from course TA or course director.

THE GRADING SCALE

Medical Students are graded using the following scale: Honors (H), Pass (P), Fail (F), and Incomplete (I). For further information, please review the Grading Policy.

Requirements for Pass: Complete all Mandatory Sessions, Clinical Components and mandatory Major Assignments listed above. All assignments are graded on completion/no completion and do not have points associated with them. Makeup assignments may be arranged on a case by case basis.

Requirements for Honors: Complete all requirements for honors listed above in Major Assignments in addition to 'Pass' requirements.

You have 30 days from the date of the grade to appeal any aspect of this grade. Please contact your Clerkship/course Director should you have any questions.

GRADING

Medical Students are graded using the following scale: Honors (H), Pass (P), Fail (F) and Incomplete (I). For further information, please review the Grading Policy

Requirements for “Pass”:

To receive a grade of Pass, students must demonstrate successful performance in all the following areas:

- Knowledge
- Patient Care
- Practice-Based Learning
- Interpersonal & Communication Skills
- Professionalism
- Systems-Based Practice

Requirements for “Honors”:

To receive a grade of Honors, students must demonstrate exceptional performance in all the following areas:

- Knowledge
- Patient Care
- Practice-Based Learning
- Interpersonal & Communication Skills
- Professionalism
- Systems-Based Practice

Grounds for “Incomplete”: You will not be issued a grade until all elements of the course have been completed.

REMEDIATION

Remediation, if needed, will be designed by the Course Director to suit the issue at hand.

Grounds for “Fail”: You will receive a grade of "Fail" if the requirements for passing the course have not been met. Please refer to the [Grading Policy](#) for the impact of the "Fail" grade to the transcript.