

**The Ideal Intervention Paper Exercise:
The Learning and Maturing Experience for the CPE Student**

Summary

The ideal intervention paper exercise, from the perspective of the pastoral formation of the student, can be an experience that helps to complete the student's formation of her or his pastoral identity in a CPE Unit. The development of the paper brings into play the student's ability to make effective use of her or his religious and spiritual heritage, theological understanding, knowledge of behavioral sciences, and sensitive awareness and understanding of different persons' values and spiritual needs. In this writing exercise, the student uses the input from individual supervision and peer group discussion, as well as self-evaluation of her or his own ministry, to formulate in detail a proposed ideal intervention for the spiritual care of a specific patient previously encountered in a patient visit. This exercise can empower the student in the role of pastoral caregiver in an institutional chaplain role by providing a concrete opportunity to synthesize and integrate the learning and personal growth being achieved during the CPE unit. The detailed description of the ideal intervention, in accordance with a specified research-oriented format, introduces the student to the collegial effort of the profession to identify the best pastoral practices by systematic inductive analysis of spiritual care experiences in the concrete context of care delivery.

Contents

- 1 - The Student's Pastoral Maturation During a CPE Unit
- 2 - Balance and Perspective
- 3 - The 'Ideal Intervention Paper' (IIP) Exercise
- 4 - The IIP Exercise's Benefits for the Student
- 5 - The Pastoral Empowerment of the CPE Student
- 6 - An Introduction to the Professional Discipline of Pastoral Research

1 - The Student's Pastoral Maturation During a CPE Unit

Throughout the course of a CPE Unit, the student experiences a variety of pastoral encounters with patients (in hospital-based CPE units) or persons in need (in community-based or other institutional CPE programs), along with a concurrent periodic series of evaluations of her or his performance in peer group discussions and meeting with the supervisor. The student writes weekly and periodic self-evaluation papers, based on the student's perceived progress towards the goals outlined in the student's learning contract with the supervisor. Both the peer group discussions and the weekly meetings with the supervisor provide the student with others' views of the student's pastoral performance with patients and the student's progress toward establishing a pastoral identity and competence.

The student's written verbatim descriptions of the pastoral conversations with patients, which are then discussed with the student peers and the supervisor, provide the information basis for the evaluations of the student's perceptiveness and sensitivity in those pastoral encounters with patients or persons in need. These verbatim accounts of visits describe the pastoral and spiritual care practices the student has used in identifying and supporting the spiritual needs of patients. In addition, the student's weekly reports on progress toward the student's pastoral formation goals are analyzed and commented on by the supervisor with suggestions for improving the student's ability to apply the clinical method of learning.

Normally CPE students need some time in the early phase of a Unit to learn to use CPE practices effectively to make progress toward their personal goals and the objectives as stated in their learning contracts. Developing rapport and mutual trust among the peer students in a CPE unit takes some period of time and cannot be forced. For this reason, the assimilation by a student of the insights and comments of the other student peers can be expected to grow during the course of a unit. The group discussion practices, the weekly reflections, the writing of the verbatim accounts of visits, and the individual sessions with the supervisor are progressive and dynamic learning experiences that enable students to make progress towards their stated goals and objectives.

The hours dedicated to direct contact with patients are the primary personal experiences that stimulate the dynamic growth of students' personal pastoral identities. These interactions with patients drive the other activities in the CPE process, which are designed to help the student perceive and internalize the meaning of the "living documents" encountered in the patients. Therefore, from the pragmatic perspective of the limited time available, the systematic examination of the effectiveness of pastoral practices and the professional sharing of the results of this systematic reflection and examination should build upon the existing processes of the CPE unit, rather than be separate activities. The Ideal Intervention Paper (IIP) exercise is designed to fit into the existing verbatim exercises of the Unit by extending the reflection on one of them.

2 - Balance and Perspective

During the course of a CPE Unit, the continuing stream of comments from student peers and the supervisor on the student's verbatims and participation in the group discussions, as well as the student's weekly self-evaluation for the reports on progress towards the student's goals, turn the student's attention inward to perceive changes in the student's own attitudes and perspectives. The observations and suggestions provided by peers in the discussion group, and by the supervisor, will be based on their vicarious imaginings of what the student is doing and experiencing in the patient visits. These perceptions of others, constructed imaginatively in their own minds, will relate the details of the student's verbatims to their own previous experiences with patients. But the images of the student's pastoral encounters with patients that they construct in their imaginations cannot be expected to match exactly what the student did or experienced. In listening to their questions, observations, suggestions, and criticisms of the verbatims of the interactions with patients, the student often will recognize contextual factors and emotional realities of the experience that were different from the assumptions of the peers and supervisor, and therefore negate or modify those comments. Including all of those subtle perceptions in the verbatim would have been difficult or impossible, and attempting to describe them in the group discussions often will be interpreted by others as excessive defensiveness.

The benefits of these group discussions and individual sessions with a supervisor are well known. They assist the student to grow in self-awareness, and to understand how others perceive the student. There is also a potential problem, however: the student may be drawn into defining her or his pastoral identity in terms of the perceptions, opinions and views of other persons. This is particularly true when the peer students challenge the student's interpretation of the needs of individual patients, and when the supervisor may confront the student with quite different views of what spiritual care should be in specific cases. The supervisor, of course, can be very helpful in counterbalancing this tendency and in providing positive appreciation of the student's efforts, even when the supervisor's own religious perspectives or psychological perceptions differ from those of the student. The supervisor can recognize and confirm for the student the evidence of growth in the student's personal pastoral identity and skills in spiritual care, even if the student has not yet achieved maturity.

For this purpose of encouraging the student's self-confidence and confirming the growing maturity of the student's pastoral judgment, the ideal intervention paper exercise can be a distinct help to a supervisor. When assigned during the second half of a CPE Unit, the IIP is well designed to provide an empowering experience for the student by encouraging self-confidence in making pastoral care decisions, and by recognizing the value of the student's personal pastoral approach to supporting the spiritual needs of a specific patient.

3 - The 'Ideal Intervention Paper' (IIP)

At some time after the mid-point of a CPE unit, but not in the final week or two of the unit, the supervisor assigns to each student the task of reworking one

of the student's verbatims into a format that would be sufficiently detailed to allow another chaplain to replicate that patient visit, but in the ideal way that the student now considers would have been most effective. In this exercise each CPE student is assigned the task of reviewing one of her or his verbatims in the light of peer comments and the supervisor's suggestions, and then writing a structured description of what the student perceives would have been an ideal pastoral intervention with that patient. This detailed description of a visit, called an Ideal Intervention Paper (IIP), should follow a common format or template that is designed to provide all the information that would be necessary and sufficient for enabling another chaplain to have all of the information about the patient known at the beginning of the original patient visit, and to understand the purpose and method of the intervention in the visit, along with the cognitive content to be communicated to the patient. With this detailed description, another chaplain should have sufficient guidance to enable her or him to replicate that ideal intervention with other patients who might have similar characteristics and spiritual needs.

The description of the intervention will start with the purpose of the visit, and the same limited information about the patient that was available to the student at the beginning of the original visit. The description of the sequence of the intervention will allow the student to follow a sequence in the ideal intervention that hindsight, and reflection on the comments of peers and the supervisor, suggests would have been most effective if followed in the original patient visit. Despite what others may think of the student's 'ideal' approach described in the IIP, these others were not present at the original patient visit, and do not have the student's self-awareness of her or his own strengths and limitations in following the first priority of professional practice: "do no harm" (*Primum non nocere.*)

The ideal intervention paper will not be able to fill in the patient's comments and the full dialogue with the patient that would have occurred in the original visit if the ideal sequence of topics and discussion had been followed. In this respect it will differ from a verbatim. But the religious and behavioral knowledge that the student draws on for conversation with the patient, and the planned sequence of presenting this content to the patient, can be represented in the description of the ideal conversation with the patient in the ideal intervention.

This Ideal Intervention Paper (IIP) exercise is intended and designed to complement the implicit learning of the student from the peer group discussions and the supervisor's comments by articulating explicitly what the student has integrated from those comments, and the student's own reflection on a specific patient visit. What has been learned will be described in detail and explicitly.

4 - The IIP Exercise's Benefits for the Student

At present, the insights learned from the peer group discussions on students' verbatims, and from the observations of the supervisor, are not systematically integrated into a synthesized plan for pastoral interventions in

future patient visits when the patients have similar needs and characteristics. The writing of verbatims on patient visits helps the student clarify what went on in those individual patient visits. The peer group discussions that analyze those verbatims help the student to see additional factors and details that had not come clearly to mind while writing the verbatim.

By the beginning of the second half of a CPE Unit, the student has had some time to reflect on the patterns in the criticisms and suggestions of peers and the supervisor, and has had some time to relate and compare the experiences of individual patient visits. But all of these ideas, critiques, suggestions, and reflections on what might be done in similar situations in the future are retained in memory, without being crystallized in writing and made explicit in articulated expression. The ideal intervention paper exercise will provide the opportunity and incentive to pull together these strands of insight and experience, compare them with the comments and suggestions received, and integrate and synthesize them in an explicit written plan for approaching pastoral visits with patients similar to the original patient and context of that pastoral encounter. The IIP exercise will bring put into written form the student's own practical judgment of the applicability and feasibility of all these suggestions from peer students and the supervisor.

This IIP exercise can achieve intellectual closure to the analysis and evaluation of the original verbatim exercise and pastoral care experience with that patient. The writing of the verbatim stimulated the student to describe the patient visit in some detail and to notice aspects of the visit that would not have caught her or his attention without the effort to reconstruct the patient visit in the imagination, and then fulfill the verbatim exercise by writing that reconstructed memory down. The IIP exercise will complete the student's learning from the discussion of the verbatim with peers and the supervisor. Without the IIP exercise, the student will not be motivated to fully integrate and synthesize the information and advice received in the discussions, and will not formulate in explicit expression her or his final judgment as to what would have been the best approach to the original patient visit.

In addition, the student will become consciously aware of what is needed to communicate with colleagues in a professional way about pastoral encounters. The discipline of following the structured description template and submitting the IIP to the ACPE Research Network will open the student's mind and attention to the larger context of professional clinical pastoral ministry. The student will learn to anticipate in advance the questions that other chaplains would have about a pastoral intervention, and the information about the intervention that other chaplains would need to know in order to use that approach in similar cases:

- The purpose of the intervention, based on what is already known about the patient
- What is known about the patient at the beginning of the visit, along with what is learned in the course of a visit

- The themes of the conversation – the cognitive content or information presented by the chaplain to the patient – of the intervention
- The sequence of ideas, steps or phases of the intervention
- The indicators considered to be evidence of a favorable or unfavorable outcome of the visit

The IIP exercise stimulates the student to clarify in writing how the insights learned through the verbatim writing and discussion cycle can be put together as a practical plan for future patient visits in which the patients turn out to have similar characteristics, problems, and needs as the original patient. Without being crystallized in detailed articulated expression, there is no stimulus or need for the student to attempt the professional task of integrating and synthesizing what has been learned implicitly: all of the ideas and perceptions stimulated by the discussions of the verbatim. The IIP exercise motivates the student to integrate and synthesize what has been learned in an explicit written form that would communicate this knowledge and insight to professional colleagues.

5 - The Pastoral Empowerment of the CPE Student

The ideal intervention paper exercise, therefore, based on one of the student's verbatim assignments of the unit, will provide both an opportunity and an incentive to pull together in an integrated and synthetic description all of the aspects of the patient visit that the student now recognizes to be relevant for conducting the visit in an 'ideal' way that would optimize the benefit for the patient. Through this exercise of developing a detailed description of an ideal intervention with a patient, the student recognizes and articulates her or his own pastoral role as a spiritual and pastoral caregiver whose pastoral insights and careful attention to the needs of a particular patient is of relevance for pastoral interventions with other patients who have similar characteristics, problems and needs.

The CPE experience as a whole, including the critical comments received from peers and the supervisor, may lead a student to be discouraged and think that her or his pastoral competence is not adequate, or at least not appreciated by peer students and the supervisor. The criticisms and suggestions of peers and the supervisor, however, seldom will be intended to discourage the student. The exercise of developing an IIP from the experience of a patient visit, refined from the explicit description of that visit in a verbatim, and synthesized from the ideas contributed by peer students and the supervisor in discussions, can be a valuable contributor to the self-confidence and maturing of the student.

Ultimately, the value of this IIP exercise before the end of a CPE unit will be determined by the greater level of pastoral maturity it introduces in the student's reflection on her or his pastoral experience, and also by the value for pastoral

research of the ACPE Research Network's databank of detailed descriptions of pastoral interventions, refined from IIPs (ideal intervention papers). The research that can be conducted subsequently on these detailed descriptions of patient encounters can lead to the general systematic improvement of pastoral care among professional health care chaplains and community pastoral caregivers, and the CPE student will have been an essential contributor to that improvement.

6 - An Introduction to the Discipline of Pastoral Research

The student, through this IIP exercise, will be introduced to a major aspect of professional pastoral responsibility: that of contributing to the professional improvement of the field of pastoral ministry by identifying and articulating pastoral interventions that may have general value for the professional field of pastoral ministry. The student's unique approach in a particular patient visit is developed and offered as potentially a model for others to consider when dealing with a patient with similar characteristics and problems. This ideal intervention paper exercise can serve as an introduction for the student to one of the concrete methodologies of the discipline of pastoral research.