

## SOMETHING NEW UNDER THE CPE SUN?

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Yes! Something is new under the CPE sun: an instrument for the consolidation of student learning from verbatim peer group presentations. The Verbatim Record of Pastoral Care, long the centerpiece of the typical CPE curriculum, was introduced 72 years ago in, "The Art of Ministering to the Sick," by Richard C. Cabot and Russell L. Dicks. Since that time thousands of CPE units have required verbatims to be written and presented to peers and supervisor for feedback as an integral part of clinical learning. But only recently has a teaching tool become available to complete the process. That instrument is the Ideal Intervention Paper (IIP).

The immediate purpose for the IIP is to help students consolidate learnings gained from presentation of a typical verbatim in the peer group before rushing out to get the next one. I have successfully employed these five simple steps in three extended CPE units at St. Vincent Hospital, Indianapolis.

- 1) Provide a copy of the IIP protocol during orientation to the CPE unit.
- 2) Include one IIP in the written requirements for that unit listed, at the outset.
- 3) Near mid-unit, present a didactic seminar on the IIP. (I will provide an outline for the didactic seminar at your request.)
- 4) Toward the end of the unit, schedule a seminar in which students can read their IIPs to each other. This further consolidates learning and builds group trust ("She DID listen to my feedback!").
- 5) Have the student (not you) forward the paper for further study to Fr. Henry Heffernan, SJ, at [hheffernan@gonzaga.org](mailto:hheffernan@gonzaga.org), and thereby avoid any confidentiality problem.

The long-term reason for collecting the IIPs is that they form the basis for testing and identifying evidence-based spiritual care best practices discipline-wide. In that regard the IIPs are organized by central issue identifiers so that others with the same issue can find out what the student has learned and incorporate that learning into their own interventions. This is the inductive method, as opposed to our usual way of deducing categories and then trying to fit situations into those predetermined categories. Thus, a tersely stated, very specific central issue identifier and a brief description of the desired pastoral response are essential in each IIP. Central issue identifier examples so far include: grief over loss of independence; doubts about hearing God's voice; despair; anger at God over spouse's cancer; triangulation by an uninvited pastor; and self-worth.

Several supervisors in the East Central Region and beyond have been requiring the IIP, some since as far back as 2006. What are they and their students saying about the IIP experience?

"The IIP helped me take the action-reflection-new action model to a whole new level." (Darlene Graham, Level 1 Student)

"I have been preparing IIPs on each verbatim based on the observations of group supervision using what I feel reflects learning for me. I have found this very useful in developing my ministerial style in addressing a variety of ministry encounters." (John W. Williams, Level 2 Student)

"Supervisory education students going up for Readiness find that having IIPs with both verbatims helps demonstrate that Level 2 Objectives are met." (Paul Steinke, Supervisor, Eastern Region)

"An aspect of practicing Buddhist meditation is to contemplate reality, to make the mind clear, to discard hindrances, to arouse awareness, to act upon right observation with helpful intentions. As a supervisor who has applied the IIP with my students, I witnessed their movement of learning likened to the process of Buddhist meditation.... This added step (encapsulating new discoveries in the use of the IIP protocol) deepened their ability to integrate new learnings, hence new skills in helping ministry." (Yoke Lye Lim Kwong, Supervisor, East Central Region)

Act today to include in your CPE curriculum this culmination phase of verbatim group learning. Obtain your IIP protocol and ask your questions by going to [mariejohn50@att.net](mailto:mariejohn50@att.net) and remember in so doing that you and your students will be contributing to the discovery of evidence-based spiritual care best practices.

Thanks for helping to provide the highest quality of care and education to our patients, their families, our staff peers, and our students. Jack Gleason, ACPE Supervisor Emeritus