

Ideal Intervention Project e-Newsletter

Volume 2, Number 10

December 9, 2009

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Difficult Care Situation? Check the SC Knowledge Base

Are you or one of your students dealing with a difficult care situation? Go to <http://www.ACPEresearch.net> and use the Spiritual Care (SC) Knowledge Base by clicking on "Special Section: Ideal Intervention Paper (IIP) Project." Then check *Central Issue identifiers* for a situation similar to yours in order to gain the insights of SC colleagues before proceeding with your own care giving.

Decreasing IIP Submissions Threaten the Long-Term Usefulness of the Project

Beside the steady IIP input from CPE students of Yoke Lye Lim Kwong at Howard Regional Medical Center in Kokomo Indiana, only two such papers have been received since late September at mariejohn50@att.net for inclusion in the national SC knowledge base. The Project design requires a large number of entries in that knowledge base to begin validation of evidence-based SC best practices. Decreasing student IIP and practitioner IIF (F for Form) submissions thus threaten the long-term usefulness of the Project in support of the professional discipline of SC.

Several IIP workshop attendees and recipients of this e-newsletter have submitted one or two completed IIFs and have praised the Project as important and necessary work. Thank you! But please continue to write and forward those IIFs!

Also, a number of CPE Supervisors have required students to consolidate their learnings after verbatim presentations to their peer groups by writing IIPs. Thanks again! However, few supervisors have encouraged those students to take the next step and submit their work for processing into the knowledge base at <http://www.ACPEresearch.net>. Even fewer supervisors have required the IIP beyond one or two training units. Please continue to require writing and forwarding IIPs!

Non-participation consequences could well be dire. See Scenarios One and Two below.

In the Year 2015 It's Going To Be Either Scenario One...

Under provisions of the new 2015 federal law the services of all healthcare disciplines are now reimbursed only for attaining desired outcomes based upon evidence-based best practices. These outcomes must be validated by success rates and patient feedback. Meeting standards developed by committees within a discipline's own membership is not recognized.

Since no properly validated evidence-based SC best practices exist, U.S. healthcare institutions are terminating all paid chaplaincy staff. Volunteer community clergy are permitted limited access to patients, and are typically supervised by the volunteer, consumer relations or marketing departments.

...Or Scenario Two

In 2015 a large number of certified SC practitioners, educators and students are continuing to regularly contribute IIPs to the ACPE Research Network website. The ever-growing evidence-based SC best practices knowledge base allows for testing and validation of effective interventions, thereby complying with federal law regarding reimbursement only for evidence-based desired outcomes.

Most importantly, the quality of patient care is significantly improving, and certified SC practitioners and educators continue to be paid from within institutional budgets. Furthermore, SC is increasingly respected by doctors, nurses, social workers, other allied healthcare workers, and the community-at-large.