

Learning values in healthcare?

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My practice of medicine changed profoundly when I realised that I do not *have* a soul, but I *am* a soul. This has manifested itself in my work in various ways. I work as a consultant psychiatrist for the elderly in London. I am a trustee and past chair of the BHMA and a medical advisor to the Janki Foundation – a charity that supports a holistic hospital in Rajasthan, India. I am also chair of the Spirituality and Psychiatry Special Interest Group of the Royal College of Psychiatrists and have run several workshops on meditation and values. I was co-ordinating editor of *Values in healthcare: a spiritual approach*. I experience the most joy, however, from the opportunities I have in my clinical practice of connecting with people as souls. **Sarah Egger**

I am a senior lecturer in the School of Integrated Health at the University of Westminster, work privately and in the NHS as a practitioner of traditional Chinese medicine, and train acupuncture students in primary healthcare settings. I have a background in systemic family therapy that I integrate into teaching, supervision and practice. Working across the domains of oriental medicine and systemic practice enables me to accompany people in exploring the connections, networks of communication and significant relationships they have not only with others but with the cultural and spiritual beliefs from which they derive their strength and faith. **Arnold Desser**

Despite an improvement in disease management in recent years I am aware of a decline in a sense of purpose and general unhappiness in health professionals. I feel that learning about values and supporting them in their training and work is the way to restore morale and enthusiasm for patient care. However caring for oneself comes first. I have trained as a spiritual healer and was president of the National Federation of Spiritual Healers from 1997–2001. I have been part of a core group of the Janki Foundation designing and piloting the *Values in healthcare* training programme. **Craig Brown**

Summary

A review of **Values in healthcare: a spiritual approach** has appeared in a previous issue of the *Journal of Holistic Healthcare* and addresses the issues of teaching spirituality in healthcare.¹ It is a personal and team development programme supporting the personal wellbeing of practitioners through the identification and expression of their core values. In this article the authors describe the background, inspiration and underlying principles of the pack.



Introduction

Spirituality and spiritual care is increasingly discussed in healthcare but it is a different matter as to how it may be taught. Often the subject is reduced to discussions about different religions and it is felt to be the role of chaplains. For many, however, spirituality is something that transcends cultural and religious boundaries with opportunities to offer spiritual care in healthcare settings.

Background

During the winter months of 2000/2001 a group of 10 colleagues from various backgrounds in healthcare, medical education, and organisational consulting and training met to share ideas about the issues facing the healthcare professions. A question that concerned us all was how the spiritual dimension of 'whole person' medicine could be integrated into current healthcare provision and into the training and education of healthcare workers. We wanted to develop an educational programme that would provide space and time for practitioners to explore these issues for themselves before then thinking about how they might bring these ideas into their work.

Inspiration

We were much inspired by certain contemporary approaches to healthcare and education. Among these were *Living values* and *Living values: an educational programme*, created by Diane Tillman and others.^{2,3} Published in the USA in 2000, and winner of the prestigious 2002 Teacher's Choice Award, *Living values* is a guide for teachers, community workers, parents and students. It explores human values in depth and includes educational activities that promote self-esteem, emotional intelligence and creative expression in people of all ages. Guided by this approach, we began to develop the structure and content of our programme, which became aptly entitled *Values in healthcare*.

In our discussions of the current concerns facing healthcare organisations and practitioners, we thought of the importance of taking a positive



approach, and so adopted the term 'positivity' to reflect this in the material we produced. We turned to the Appreciative Inquiry, a process building on what works well in organisations and individuals' practices, rather than taking a critical approach.^{4,5} We chose exercises that we knew worked well for a broad range of participants, structured questions to be appreciative, and kept the language positive.

We spent many hours discussing and meditating on the meaning of spirituality and agreed that it involved using inner resources of peace, love, positivity and compassion for the benefit and healing of others and ourselves. We felt deeply that spirituality could be expressed through thoughts, feelings, attitudes and actions. Apart from our own experience in this area, we drew on relevant work from nursing care, hospice work, chaplaincy, and mental health.⁶⁻¹¹

Finally the group's various concerns and enthusiasms gave voice to an abundance of ideas drawn from each of our individual approaches to clinical practice, learning and teaching. We were inspired by each other and the process. We modelled our meetings on the type of programme we were producing and from this went on to develop a method of teaching that we called the 'spiritual approach'. This includes deep reflection, periods of silence, visualisation, listening, appreciation, as well as being creative and playful.

Underlying principles

In 2002, as we began writing and designing the *Values in healthcare* programme, three underlying principles became evident.

Physician heal thyself

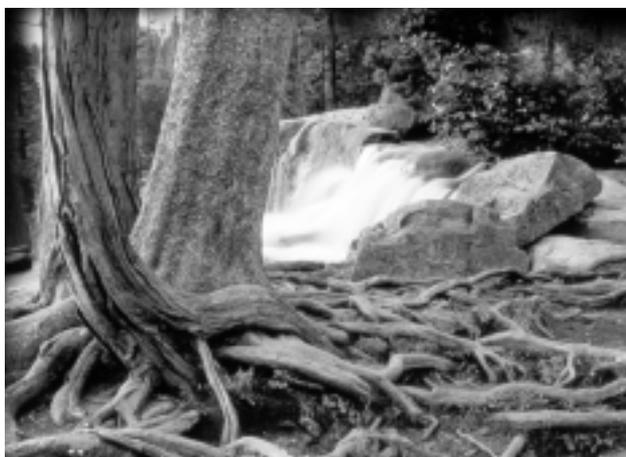
Working within a framework of values is hardly a new idea. The Hippocratic Oath, for example, is one of the earliest and best-known statements of values. All medical-professional organisations have statements that refer to values in their codes of practice.

Interestingly, in 1994 the British Medical Association (BMA) hosted a conference, *Core values for the medical profession*, to examine the future of the practice of medicine.¹² Since this conference there has been ongoing discussion in the medical profession concerning the importance of core values and the need to reaffirm them.^{13, 14} These values were based on caring, compassion, integrity, competence, confidentiality, responsibility, advocacy and the spirit of enquiry. They were seen as the profession's greatest asset, greater even than scientific knowledge and technology that seemed to have been sidelined in the training of healthcare workers.

We shared these ideals, but also had the fundamental belief that healthcare practitioners cannot aim to heal others before nurturing and healing themselves. We also felt that any educational programme should aim to support and develop the personal wellbeing of healthcare practitioners, rather than specifically focus on improving their clinical skills. In our own collective experience, the benefit of healthy practitioners to patient care in terms of raised morale and renewed sense of purpose was immeasurable.

Learning through experience

In the healthcare professions, many different methods are used to teach the skills and art of



each discipline. Traditionally formal lectures, personal study, tutorials and practical experience are used alongside apprenticeship learning. Very little is done, however, to enhance and strengthen the qualities of calmness and compassion that is expected of healthcare professionals. Paradoxically, these may actually (though unintentionally) be trained out of us. We believed that values could best be understood and explored through direct, 'inner' experience, so we planned the programme to provide facilitated, small-group experiential learning, rather than didactic instruction. By allowing time in a supportive environment for silence, reflection, meditation and sharing, we hoped to encourage the discovery of personal values and insights.

Relevance to work

Finally, we felt the learning experience – with an emphasis on reflection, action planning, review, evaluation and a commitment to ongoing learning – should be relevant to participants' work and lives. Much has been written about the high levels of stress experienced by health professionals, the effect it has in practice, why so many doctors and nurses are unhappy and what can be done to promote well-being.^{15–18} Indeed, all healthcare professionals have been worn out by work at times; much of the day-in and day-out business of taking care of people who are ill is, after all, inherently distressing. But changes (and the rate of change) in society, organisational structures, medical and information technology, and patients' expectations have imposed an additional burden that can lead to a state of chronic tiredness and demoralisation. Pines and Maslach, among others, have described this exhaustion arising from involvement in

situations that are emotionally and physically exhausting as 'burnout'.^{19, 20} Stress and its consequences can be addressed by working with our values as a way of preventing burnout and ill health.²¹ It seems self-evident that healthy practitioners will provide enhanced quality of care for patients.

Organisations, too, would benefit from a clear, values-based statement that staff at all levels can identify with. Institutions encouraging a culture of care can contribute significantly towards creating a healing environment for staff as well as patients. Such an environment can also go some way towards protecting patients from practitioners acting out their own needs in the healthcare setting (ie the desire for power, control, to be liked, needed and cared for). These needs can be more healthily addressed in an atmosphere of good staff support, an optimum environment in which to deliver high quality care and a place where people are well supported when caring for those who are distressed or suffering.

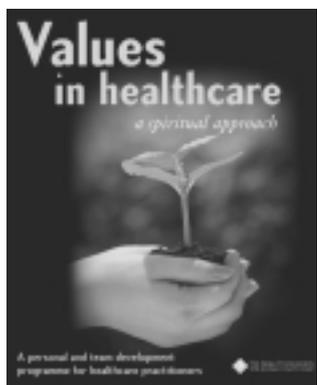
The pack

Four years later, after hundreds of hours of thinking, discussing, outlining, structuring, writing, reflecting on what had been done and what needed doing, changing, editing, testing ideas at conferences, and real-world piloting, the words, voices and aspirations were committed to the 500 pages of text. The pack contains detailed guidance and all the necessary materials to run the seven modules, packaged into a ring binder with CDs (see box).

The seven modules

Values

By identifying values in ourselves and at work we can identify and apply core values in healthcare. This includes ways in which we could remind ourselves of the values which motivated and



Values in healthcare

Part 1: Introduction to the pack

Part 2: Guidance for facilitators

Part 3: The modules – there are seven modules providing:

- background information
- timings
- aims and learning outcomes
- step-by-step facilitation guide
- exercises/feedback
- review
- action planning
- handouts

Part 4: Spiritual tools

details on the 'tools' or learning principles used:
meditation, visualisation, reflection, listening, appreciation, creativity and play

Part 5: Additional resources

- warm-up exercises
- movement exercises and closure exercises
- learning logs
- action planning and evaluation *pro formas*
- references and resources for follow-up reading and exploration
- texts of meditations and visualisations on CD
- CD of meditations: spoken commentaries, visualisations and music

guided us at the outset of our careers, how to bring new vitality to our practice by reflecting on these values and assist others to rediscover their own personal values through a series of structured exercises, activities and meditations.

Peace

Peace is introduced as our natural state; that within all of us there is an innate core of calm and tranquillity. The programme uses simple yet powerful ways to rediscover this inner peace. By practising peacefulness, participants can access their positive qualities which help to build self-respect and contentment. Peacefulness is the medicine for 'burnout'.

Positivity

Positivity is seen as an antidote to the critical thinking that healthcare professionals often do out of habit. The programme helps participants recognise unhelpful patterns of thinking and change them into more positive ones.

Compassion

Compassion is the expression of our innate qualities of patience, generosity and kindness, yet there are often personal barriers to its expression –

anger, anxiety, guilt and attachments. The programme helps participants to acknowledge the barriers and to view compassion as a value they can consciously express throughout their practice.

Co-operation

This enables participants to gain an understanding of the thoughts, attitudes, feelings and behaviours which enable successful co-operation. This allows them to build team spirit in non-competitive ways, so that tasks become enjoyable and creative.

Valuing the self

Valuing the self requires that we recognise our own worth and, in doing so, better acknowledge the intrinsic worth of others. Participants explore ways they currently look after themselves and consider what sources of personal support they have available to them. Self-confidence will grow as they develop their self-respect. This can help them to bring mutual respect and harmony into their relationships, to the benefit of themselves, their patients and colleagues.

Spirituality in healthcare

Spirituality is a vital concept in furthering the ideals of holistic health and in meeting the spiritual needs of patients and practitioners alike. The programme invites participants to clarify concepts of health and healing, spirit and spirituality, in order to further develop their values-based practice.

Each module consists of a full day session, containing a mix of group learning activities, guided by a facilitator. The modules can be run as stand-alone workshops, incorporated into wider development programmes, or run in sequence. The materials can also be effectively used for self-study. Each module begins with an introduction to the theme and optional warm-ups, followed by a structured programme of activities, some active, some reflective. Time is then spent on summarising, action planning, evaluation and closure. The morning and afternoon sessions allow for a progression from personal exploration through to application of learning to work-based situations and issues.

The programme pack sets out to address the spiritual needs of healthcare practitioners through all seven of its modules, helping them in identifying

their personal values, being peaceful, being positive, practising compassion, co-operating with colleagues, practising self-care and developing self-esteem.

Conclusion

The main premise of *Values in healthcare* is that in developing a conscious, values-based approach, participants can rediscover their own peacefulness, think more positively, and act with compassion and co-operation, while putting their own self-care at the centre of their efforts.

Our vision is that *Values in healthcare: a spiritual approach* will be used widely at both undergraduate and postgraduate levels for all healthcare workers and outpatient teams, including managers, support and administrative staff. It is already being used in Brazil, Israel, the US, Mauritius, Kenya and India. In the UK a growing number of hospital and community-based healthcare practitioners have begun to include the material in their continuing professional development programmes.

For further details about the *Values in Healthcare* project, contact:

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