

Title	Spiritual history taking				
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EPICC Standard Competency	General Teaching & Learning	1 Intrapersonal Spirituality	2 Interpersonal Spirituality	3 Spiritual Care: Assessment and Planning	4 Spiritual Care: Intervention and Evaluation
Teaching Group	Nursing, midwifery, multi-professional.				
Year of Teaching	Flexible, but requires some degree of experience.				
Learning Objectives	<ul style="list-style-type: none"> • Demonstrate what kind of ethically-challenging situations in patient care an inexperienced person can cause (when using a spiritual assessment tool and not having sufficient experience to adapt questions to fit a patient's answers, nor having a plan of how to integrate the information into a patient's care). • Understand that patients may reveal a great deal about their spiritual distress and needs (even if questions are posed clumsily). • Demonstrate the importance of listening and using the patient's words when responding. • Understand the plan of care before commencing any spiritual assessment. <p><u>General considerations</u></p> <ul style="list-style-type: none"> • Patients' beliefs, values and needs. • Interaction skills. • Interviewer's position. • Interview guideline (e.g., FICA, HOPE) versus one question. 				
Strategy Description	<p>This education strategy is based on a 16-minute spiritual history assessment in a palliative care setting, for a research project (Paal, Frick, Roser, & Jobin, 2017). This was important because:</p> <ul style="list-style-type: none"> • The interviewer was rather inexperienced and determined to ask all 4 interview questions. • The patient denied being spiritual or religious, however, as the interview unfolded, the patient's need for connectedness and support became evident. • The overall situation demonstrates the need for a plan before entering the field. • The interview resembles a situation familiar to all beginners. <p>Two participants (on voluntary basis) read aloud the script (20 minutes). Others listen and are then asked to reflect based on the passages within the script. The general idea is that participants look up the words and stories from the script to demonstrate and discuss what the patient is really saying, or to comment on interviewer's strategies, and make suggestions for improvements.</p> <p>The most important question is:</p> <ul style="list-style-type: none"> • What can we learn from this interview in terms of (a) the patient, (b) the interview strategies, and (c) why we need a plan when entering the field? <p>Own experiences and other stories should be not reflected in this teaching session.</p>				

	Depending on a group size plan 40 to 60 minutes for this exercise.
Educator's Role	<ul style="list-style-type: none"> • To pick-up a good interview that provides aspects for discussion. • Choose two participants to read aloud the script. • Control that comments strictly relate to what is in the script. • Offer reflection at the end.
Resources	<ul style="list-style-type: none"> • Script on paper for those who are reading aloud. • Script on paper for other participants.
Learner Assessment	<ul style="list-style-type: none"> • What qualities are required from an interviewer while taking a spiritual history? (Ground rules). • How should an interviewer position themselves when taking a spiritual history? (Involvement). • Why is a follow-up contract essential in this context? (Follow-up).
Additional Comments	<ul style="list-style-type: none"> • Being aware of own spirituality and the spirituality of others. • Gain an openness to different religious orientations and worldviews.
References	Paal, P., Frick, E., Roser, T., & Jobin, G. (2017). Expert discussion on taking a spiritual history. <i>Journal of Palliative Care</i> , 32(1), 19-25. doi: 10.1177/0825859717710888