ASSESSMENTS

Meaning & Direction

- Patient does not place blame.
- Patient tends to intellectualize circumstances
- Patient sees and articulates both sides of most situations.
- Patient is concerned about the meaning of own life/identity and making sense of his/her illness.
- Patient has difficulty focusing and making decisions.
- Patient employs several metaphors, images, or analogies in conversation.
- Patient asks questions and demonstrates curiosity (e.g., about illness, the nature of God or religion).
- Patient feels enticed, yet encumbered by exploring infinite possibilities.

Self-Worth & Belonging to Community

- Patient blames self, not others.
- Patient does not complain.
- Patient accepts current reality without questioning or evaluation.
- Patient expresses concern for others and fears burdening them.
- Patient prioritizes caring for others and may minimize their own needs, healing and/or self-care.
- Patient shows deep appreciation for social support and opportunities to tell their story.

Reconciliation/To Love and Be Loved

- Patient blames and mistrusts others.
- Patient complains (e.g., about food, staff).
- Patient expresses unrealistic expectations that others should know patient's needs.
- Patient does not take responsibility for own healing or choices.
- Patient presents with combative energy and angry affect early in process.
- Patient's comments focus on their assumptions about others' flawed actions and inner lives, rather than their own.
- Patient discusses strained, broken, or estranged relationships, need to forgive or be forgiven, inability to grieve losses, or unwillingness/inability to say goodbyes.

CHAPLAIN'S SELF-AWARENESS

Meaning & Direction	Self-Worth & Belonging to Community	Reconciliation/ To Love and Be Loved
Chaplain may feel in a fog or have difficulty following what patient is saying.	Chaplain may feel that patient attempts to serve as a caregiver for the chaplain. Chaplain may feel that patient puts chaplain up on pedestal.	Chaplain may feel him/herself being drawn into a triangle. Chaplain feels at risk of alienating patient easily.



INTERVENTIONS/EMBODIMENT

Meaning & Direction

• Name and reflect back emotions (especially anger) as a source of clarity.



- Surface what decisions need to be made or questions need to be answer.
- Ask patient how he/she has coped with similar crises and circumstances or made decisions in the past.
- Help patient to name resources to help make decisions, answer questions, or achieve clarity about their heart's desire.
- Demonstrate support and guidance, as if walking alongside patient on a path.
- Honor when patient makes important decisions (e.g., regarding treatment, to enroll in hospice, to take an important trip).
- Honor when patient arrive at a new meaning (e.g., deciding upon a legacy project like a video, letter for child).
- Commission the patient for this decision/work/meaning with a blessing or ritual (religious or non-religious/poetic).

Self-Worth & Belonging to Community

- Surface anger as source of energy; accompany him/her as they feel it.
- Surface old, unhealthy, unkind beliefs about self.
- Create a "community of two" by keeping patient company and listening to his/ her story of illness/suffering.
- Make specific, genuine statements of affirmation about attributes, role, and behavior of patient.
- Ask the patient for their opinion on a subject about which they know more than you.
- Listen attentively while valuing patient's story.
- Empower patient to identify what is loveable about them.
- Make referrals to spiritual communities, classes and illness-specific support groups.
- Regularly remind patient about loved ones and reference other caregivers on team to build support.
- Use faith tradition to challenge old beliefs; create an offer new cleansing belief and ritual.

Reconciliation/To Love and Be Loved

- Demonstrate ability to tolerate patient's anger.
- Surface and explore sadness, fear, grief, loss of sense of control beneath the anger.
- Acknowledge brokenness, tension, or estrangement in the relationships patient discusses.
- Remind patient of own internal resources/abilities to advocate appropriately for self.
- Hold patient accountable for creating safety for self and choosing to trust others.
- Remind patient to say what they need rather than expect others to intuit it.
- Ask patient about their part in estrangement and conflict. Call them to confess fully.
- State impact of patient's behavior on you/others. Observe whether contrite/sorry.
- Patient takes responsibility to apologize and for behavioral changes/acting differently.
- After patient has behaved differently, discuss forgiveness from others, self-forgiveness, and forgiveness in their faith tradition; offer ritual.

OUTCOMES/HEALING



Meaning & Direction

- Patient learns and trusts that whatever decision they make will be congruent with own values.
- Patient identifies own primary/prominent heart's desire.
- Patient attains greater clarity regarding meaning or purpose of his/her life.
- Patient reports less angst and more support about making a particular decision.

Self-Worth & Belonging to Community

- Patient reports greater sense of belonging to community.
- Patient names how he/she is addressing his/her needs.
- Patient prioritizes self-concern in equal balance with concern for others.
- Patient's actions/behavior suggest enhanced self-worth.

Reconciliation/To Love and Be Loved

- Patient realizes that his/her behavior has an impact on other people.
- Patient expresses vulnerability and feelings, instead of resorting to anger and blaming others.
- Patient confesses part in conflict and broken relationships.
- Patient expresses true remorse through feelings.
- Patient commits to new behavior and forgives self.
- Patient may seek and may experience forgiveness from others and God.
- Patient experiences reconciliation.