Transitions...

Advocate Health Care is a health system rooted in the United Church of Christ and the Evangelical Lutheran Church in America. Because Advocate is a faith-based system, we take seriously the mission of caring wholistically for the people we serve. In the past year, some key shifts in leadership and direction have impacted the way Advocate Health Care attends to its mission and the provision of spiritual care. This newsletter will highlight some of these changes that will be of interest to our colleagues in the faith communities.

In Senior Leadership

In March, 1999, Rev. Jerry Wagenknecht assumed the role of Senior Vice President of what was then the Department of Religion and Health. Prior to his appointment he led Advocate’s efforts to integrate its Mission, Values and Philosophy (MVP) into the daily work life of the institution. In his current position, Rev. Wagenknecht continues to work closely with Advocate’s leadership, physicians and staff around MVP integration, further defines Advocate’s role as a faith-based health care network and manages the team of leaders in Mission and Spiritual Care. He is ordained in the Evangelical Lutheran Church in America.

In Department Name

An especially visible shift has been the change in department name from Religion and Health to the Office for Mission and Spiritual Care. This change aligns the office more closely with Advocate’s efforts to integrate its Mission, Values and Philosophy. Also, the name is consistent with language used by Advocate’s church sponsors. Finally, it is more wholistic and inclusive, relating to the spiritual care of all people, whether or not they belong to an organized religion.

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In Spiritual Care

Advocate, as a faith-based system, has always affirmed that health encompasses physical, emotional, relational, ethical and spiritual concerns and that God is the source of all healing. We further believe that spiritual practices enhance health and well-being.

These beliefs have always motivated us to welcome persons of all faiths to our programs of care and to respect each person’s faith tradition. However, as we have reflected critically upon our actual delivery of spiritual care, we have concluded that two dimensions of our care need additional emphasis:

1. Providing a face-to-face “spiritual welcome” visit for newly admitted patients and their families. Through such visits we can gain some sense of the patient’s spiritual state, their resources for spiritual support, and other practices or concerns that may arise from their faith tradition and their hospitalization. To achieve this goal more completely, it may be necessary to enlist and train volunteers to augment the work of chaplains.

2. Giving greater attention and support to the sources of spiritual care and guidance that patients rely upon when not in the hospital. In this era of ever-shortened hospital stays, it is urgent that we assist those care-givers rather than displacing them during the patient’s hospital stay. This emphasis will require more resources being given to forming effective communication links and other covenants which help maintain the ministries of our congregations.

Chaplains will continue to be available to patients and families at their request, to consult with clergy and ministers of care from congregations, to be a resource to other members of the treatment team, and to offer care to those patients who may be spiritually seeking or troubled and who do not have a functioning tie to a faith community.

Rev. Jim Gibbons is Vice-President for Spiritual Care.

In Community Ministry

Advocate Community Ministry seeks to further the ministry of wholistic healing by working collaboratively with congregations and community organizations to develop programs and initiatives that promote health in the community.

Since the fall of 1999, the Community Ministry office has developed its emphasis on networking with community organizations. While continuing to resource congregations around health and wellness, program staff have increased their connections with other community agents that also have an interest in health and healing.

In addition, Advocate Parish Nursing Services is now under the management of the Community Ministry office, integrating a critical component of health ministry into the office. Currently, twenty four nurses serve 28 churches. A synagogue is scheduled to enter the program soon. Through these initiatives Advocate expresses its commitment to wholistic healing.

Rev. Delois Brown-Daniels is Vice President of Community Ministry.
Rev. Kirsten Peachey is Coordinator of Community Ministry.
Ms. Nancy Durbin is Interim Manager for Parish Nursing Services.

Rev. Kirsten Peachey, Coordinator of Advocate Community Ministry, greets participants at a training for congregations wishing to develop older adult ministries.
In Clinical Pastoral Education

Clinical Pastoral Education (CPE) is an experiential model of learning available to pastors, seminary students, and lay persons who wish to develop or enhance their ability to minister to the spiritual and emotional concerns of persons. Students in the program have the opportunity to minister with patients, families, and staff in the hospital setting and then reflect on their pastoral experiences in small peer group seminars and in individual supervision with a certified CPE supervisor.

One example is the story of how women from the local United Church of Christ churches in the southwest suburbs set up an assembly line in the basement of Immanuel Church in Evergreen Park to sew the drapes for the new Christ Hospital and Medical Center building when it opened in 1961.

The Heritage Project is part of the larger work of integrating Advocate’s mission, values, and philosophy (MVP) into the organization. Teams at each of the sites are charged with devising methods to insure that MVP is at the heart of all that is done. Examining issues of faith in relation to finance is another key focus for the MVP integration program.

Advocate Health Care’s CPE programs are unique in that they are part of an integrated system. This benefits students by giving them access to a range of educational resources across the Advocate Health Care system. Also, programs exist at hospital sites serving a rich mix of communities.

Advocate’s CPE programs place a special emphasis on training lay people for ministry. Parish nurses, deacons, pastoral associates and people exploring ministry options are encouraged to apply.

Rev. Mary Wilkins is the Director of CPE.

In Telling Advocate’s Story

In 1999 the Heritage Project was created as a way to discover, preserve, celebrate and utilize Advocate Health Care’s history as a faith-based organization. The key is to employ that history, not just as facts about the past, but as a source of information and inspiration for today.

“We want to capture and celebrate the history of all of Advocate,” reports Tracy Hulett, Project Coordinator. “That means individual associates and departments to entire sites of care and the Advocate organization in general. Advocate is filled with great stories.”

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Dick Wright heads up MVP integration initiatives.

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The program focuses on learning to assess and respond pastorally to peoples’ spiritual concerns. Students learn the art and skills of listening and being present with another as they journey through illness, trauma and death. The CPE process also teaches self-awareness—how our attitudes, values and assumptions affect our ministry.

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The Community Ministry Office of Advocate Health Care seeks to make real the vision of wholistic health—abundant life for all—by collaborating with community agents and congregations from all denominations and religious affiliations. By offering opportunities for training and education, consultation, resource linking, program development and networking, Advocate Community Ministry supports congregations and community organizations as vital agents in creating communities of wholeness and healing.

Advocate Health Care is a faith-based health care system in the Chicagoland area grounded in the Evangelical Lutheran Church of America (ELCA) and the United Church of Christ (UCC). Comprised of 8 hospitals, numerous neighborhood clinics, a home health care and hospice organization, and many other sites of care, Advocate’s mission is to serve the health needs of individuals, families and communities through a wholistic philosophy rooted in a fundamental understanding of human beings as created in the image of God.

Upcoming Events

**Spiritual Supports for Late Life: Resources and Programs for Congregations**

Saturday, June 24, 9 a.m. to 3:30 p.m.

A one day workshop focusing on how congregations can attend to the spiritual needs of older adults. The conference will be held in Oak Brook at the McDonald’s Conference Center. Registration is $20, including lunch.

The keynote speakers will be Rick Moody, author of *Five Stages of the Soul*, and Jack Shea, a scholar who has written extensively on spirituality in late life. Numerous workshops are being planned, including spiritual care for nursing home and assisted living elders, spiritual gifts of well and community-dwelling elders, end of life issues and helping people find meaning when they are ill and frail. The Retirement Research Foundation and Advocate Community Ministry are among the many sponsors. Call 847-384-3510 for more information and to register.

**Faith and Health: Graduate Summer Courses**

Three summer courses on Faith and Health are being offered by North Park Theological Seminary, North Park University and the Nurses Christian Fellowship.

- **Ethics of Caring and Health** (May 22-26)
- **Biblical Perspectives on Health and Healing** (July 31-August 4)
- **Theology of Caring and Health** (July 31-August 4)

For more information contact Dr. Mary Chase-Ziolek at 773-244-6201.