

Temple Beth Hillel – Beth El
Hesed Network

Bikkur Holim Handbook



For additional information:

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Dear Volunteer,

Thank you for being a part of the Bikkur Holim Team of the Hesed Network at Temple Beth Hillel – Beth El.

The Hebrew translation for “Bikkur Holim” is visiting the sick. As volunteers of the Bikkur Holim Team, we are ready to offer support to those who are ill in our community, whether at home or in the hospital. Illness can be lonely; a warm visitor can revive the spirit.

It is written that “one of the most important obligations in Jewish life is to imitate God by providing care, concern, and compassion for those who are ill.” This obligation is one we hope to try and fulfill as volunteers of the TBH-BE Bikkur Holim team.

It is our hope that this Bikkur Holim handbook will answer your questions about our work and make your role as a volunteer more comfortable.

Please know that these are simply suggestions, and you must respond to the congregant in a way that is most comfortable for you. We are always here to provide support whenever it is needed.

We are grateful for the training and support that we received through the JTS Sustainable Bikkur Holim program, which helped us begin the process of creating our own program at TBH-BE. We are also appreciative of the ongoing support we have received from Sandy Goldstein at Temple Beth Elohim in Wellesley, MA, who continues to lead the bikkur holim effort created more than 10 years ago.

Thank you again for being part of this important and meaningful work.

With blessings,

Rachel Dunaief and Batya Warshowsky, Bikkur Holim Co-Chairs

Sheila Segal, Chaplain

Roadmap for Bikkur Holim Program

1. Congregants are encouraged to contact the synagogue office to notify about an illness. The office staff provides this information to the clergy and executive director.
2. A member of the clergy team contacts the congregant (or family) to offer support. The clergy member also describes our bikkur holim program and offers the congregant a visit by a bikkur holim volunteer.
3. The clergy member contacts the bikkur holim coordinators to let them know of a congregant who would welcome a contact.
4. The coordinators match a bikkur holim volunteer with the person to be visited. They provide the volunteer with as much information about the congregant's situation as is appropriate and necessary, while protecting privacy and confidentiality.
5. The volunteer calls the congregant, introduces him/herself, offers support and sees if a visit is welcome.
6. The volunteer visits with the congregant and delivers the TLC bag. TBHBE Loving Care (TLC) bags are kept in the Library in the storage space underneath the window bench. The volunteer writes a get-well note on the card in the bag and provides his/her contact information in the card.
7. After the visit, the volunteer emails the coordinators with feedback about the visit. When appropriate, the coordinators will reach out to the general Hesed Network pool of volunteers to request assistance with needs such as meals and rides. This is done through the www.LotsaHelpingHands.com system and through informal contacts.
8. The volunteer stays in touch with the congregant, and follows up with phone calls, emails and/or visits for as long as is appropriate.
9. After each visit, the volunteer provides an email update to the coordinators. This will help us keep track of the work we are doing together.
10. Monthly, or as appropriate, the coordinators provide a report to the clergy summarizing support provided and requesting additional clergy support if needed.

If you have questions, want to talk through a situation, or need some support, please feel encouraged to contact any of us:

Coordinators:

- Rachel Dunaief (rachjoshd@gmail.com, 610-639-2108)
- Batya Warshowsky (batyawardshowsky@comcast.net, 610-667-2053)

Chaplain Advisor:

- Sheila Segal (sfsegal@comcast.net, 610-316-0213)

Thank you so very much!

Tips for Making the Initial Call

The tone of the initial call can affect the receptiveness of the person who is sick. Try to sound warm and friendly, respectful but not formal. Here is some suggested language that you might include:

Hi, Is this _____? I'm _____, a member of the shul/synagogue. I hope I've reached you at a time when you have just a few minutes (or, at a time that's okay for you). . . . I'm calling because I'm part of the Bikkur Holim team, a group of congregants who reach out to visit other congregants when they are ill. Rabbi _____ said he spoke with you about us and that you might like a visit. . . . so I'm following up to see how you are and offer you some support. I would be very happy to come and see you. I also have something to bring you from the congregation. . . .

*Adapted from Rabbi Simcha Weintraub

Tips for Encouraging Conversation

Saying “How are you?” may not convey your authentic personal interest or invite an honest, expressive response. Some people who are ill have criticized this common question because it doesn’t seem to acknowledge the very different course their life has taken, and can encourage automatic expected answers such as “I’m OK,” or “Fine, thanks,” which may not be a sincere reply or convey the whole story.*

Here are examples of questions that encourage conversation.

1. How are you feeling today?
2. How are you doing with all of this?
3. How are your spirits?
4. How are you hanging in?
5. What was that like for you?
6. What do you need the most right now?
7. What’s helping you get through this?
8. What’s been on your mind as you try to cope with all of this?
9. What has been most difficult for you?

Try to avoid questions that can be answered “yes” or “no.”

When the person is talking, show your interest by nodding with affirmation and understanding. Make eye contact. Say something like, “Yes,” “Really?” or “I see” to signal that you’re listening.

Encourage the person to continue talking with statements like: “Tell me more about that . . . What was that like for you? . . . I think I understand . . . Would you be comfortable telling me . . . ?”

*Adapted from Rabbi Simcha Weintraub

Tips for Being a Compassionate Presence

- Center yourself.
 - Be intentionally present, not distracted.
 - Listen actively, showing your attentiveness through your face, body language, and simple comments.
 - Listen more than you talk.
 - Allow silence.
 - Listen with your heart.
 - Witness with reverence.
 - Affirm the feelings that are expressed.
 - Accept things as they are. Your role is not to fix them.
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- Don't ask for a medical report or give medical advice.
 - Don't switch to your own story, even if you have had the same experience.
 - Don't assume you know how the other person feels.
 - Don't be dismissive of worries and fears.
 - Don't say, "Everything will be fine."
 - Don't try to answer the big questions, just share them.

Bringing Prayer to the Visit

1. In your own words. Sometimes prayer feels stilted, so find the language that is comfortable for you. Here are some possibilities:

“May God bless you with . . . [or “May you be blessed with . . .]

- refuah shelemah, a complete recovery, healing of body and spirit; or
- with everything you need right now; or
- with the strength/patience/courage/ . . . [affirm whatever has come up in your visit] you need right now

2. Traditional Mi-Shebeirach. We are accustomed to hearing the Mi-Shebeirach in synagogue. It also is appropriate to recite it for an individual during a Bikkur Holim visit, and it can be very powerful. The Hebrew prayer, in male and female language, can be found in Siddur Sim Shalom or Lev Shalem. Here is the basic text in English:

May the One who blessed our ancestors, Abraham, Isaac, and Jacob, Sarah, Rebecca, Rachel, and Leah, now bless and heal _____. May the Holy One in mercy strengthen him/her and heal him/her soon, in body and spirit, together with others who suffer illness. And let us say: Amen. [It is customary to use the person’s Hebrew name and mother’s name.]

3. Contemporary Mi-Shebeirach. A contemporary version of the Mi-Shebeirach, created by Debbie Friedman z”l, expresses the essence of the prayer in evocative language and a beautiful melody. You can read or sing this version to the person you are visiting, substituting her/his name for “those in need of healing.” To learn the melody, go to “Debbie Friedman –Mi-Shebeirach” on YouTube.

Misheberach avoteinu, mekor ha-bracha le eemoteinu,
May the Source of strength,
Who blessed the ones before us,
help us find the courage
to make our lives a blessing,
and let us say, Amen.

Misheberach eemoteinu, mekor ha-bracha l’avoteinu,
bless those in need of healing
with *refuah sheleimah*,
the renewal of body, the renewal of spirit,
and let us say, Amen.

4. Psalms. Psalms give sacred language to the despair and hope of those who are ill. Psalms 30, 121, and 130 are frequently read, but many others are appropriate.

5. Shema. It is always appropriate to chant the Shema together as an affirmation of faith and reminder of God’s Presence

GUIDELINES FOR A HOSPITAL VISIT

(Adapted from the "Caring Curriculum," Unit 5, created by the Jewish Theological Seminary And available online at www.jtsa.edu.)

1. Do not visit unless a visit is requested. Try to reach the patient by phone before coming.
2. Look the part: dress appropriately to show respect for the person you are visiting.
3. Do not enter a room uninvited; knock before entering.
4. Do not wake a sleeping patient; leave a note.
5. Do not interrupt if a doctor, nurse, or other medical provider is with the patient.
6. Greet and introduce yourself to all who are present in the room. Shake hands, wearing gloves if indicated.
7. Briefly explain your role. Even though the synagogue might have told the person that someone from the Bikur Holim group would visit, don't assume that the person remembers or understands what your visit is about.
8. Do not remain standing next to a person who is lying in bed or seated. It gives the impression that you are in a rush and not fully present. It also creates a power differential between the patient and the visitor.
9. Do not sit on the patient's bed. Doing so assumes a level of intimacy that might not be welcome, even if the person is a close friend.
10. Bring a chair to the side of the bed, near the patient's feet, so that you can look at each other at an angle without straining necks.
11. Avoid staring at medical equipment, tubes, and wires attached to the patient, or at scars, wounds, and so on. Try to prepare yourself for what you might see.
12. Don't ask the patient for medical information.
13. Express your interest by asking something like, "What has this been like for you?" or "How are you holding up?"
14. Offer a few words of prayer. *(See "Bringing Prayer to the Visit.")*
15. Keep your visit brief, no more than 30 minutes.

Confidentiality Statement for Bikkur Holim Volunteers

As bikkur holim visitors, we are obligated to protect the privacy of those we visit. Institutions such as hospitals and nursing homes usually ask for a signed statement of confidentiality from volunteers. Visiting people as representatives of the synagogue community does not require a signed statement, but it does require a commitment to maintain confidentiality about the content of the visit or even that the visit took place.

However, there is a distinction between tale-bearing and helpful follow-up. Concerns about the needs and well-being of the person you visited should be shared with the bikkur holim coordinators, Rachel Dunaief (rachjoshd@gmail.com, 610-639-2108) or Batya Warshowsky (batyawareshowsky@comcast.net, 610-667-2053), or our chaplain advisor, Sheila Segal (sfsegal@comcast.net, 610-316-0213). Please be especially alert to situations that might call for professional intervention.

It is a sacred trust to enter into the lives of others during times of distress and vulnerability. Each of us is obligated to honor that sacred trust by maintaining confidentiality and protecting their privacy.

Just Listen
From Kitchen Table Wisdom: Stories That Heal
By Rachel Naomi Remen, M.D.

I suspect that the most basic and powerful way to connect to another person is to listen. Just listen. Perhaps the most important thing we ever give each other is our attention. And, especially if it's given from the heart. When people are talking, there's no need to do anything but receive them. Just take them in. Listen to what they're saying. Care about it. Most times caring about it is even more important than understanding it. Most of us don't value ourselves or our love enough to know this. It has taken me a long time to believe in the power of simply saying, "I'm so sorry," when someone is in pain. And meaning it.

One of my patients told me that when she tried to tell her story people often interrupted to tell her that they once had something just like that happen to them. Subtly her pain became a story about themselves. Eventually she stopped talking to most people. It was just too lonely. We connect through listening.

When we interrupt what someone is saying to let them know that we understand, we move the focus of attention to ourselves. When we listen, they know we care. Many people with cancer talk about the relief of having someone just listen.

I have even learned to respond to someone crying by just listening. In the old days I used to reach for the tissues, until I realized that passing a person a tissue may be just another way to shut them down, to take them out of their experience of sadness and grief. Now I just listen. When they have cried all they need to cry, they find me there with them.

This simple thing has not been that easy to learn. It certainly went against everything I had been taught since I was very young. I thought people listened only because they were too timid to speak or did not know the answer. A loving silence often has far more power to heal and to connect than the most well intentioned words.