

How to Bring Heaven in Healthcare

Episode 3: The Legitimacy of Faith in Healthcare Full Transcript

[Length of episode: 45:41 minutes]

Pete Carter

In this session I'm joined by Mike Von Fraunhofer, a close friend of mine and also a medical doctor, and we're going to look at the legitimacy of sharing your faith in a medical context in a way that respects both patients and codes of conduct.

One of the conversations that's going on much more in the medical world nowadays is this concept of holistic care, probably much more so than when you and I went through medical school - when it was medical, a bit psychological, very little reference to overall wellbeing, and certainly not the Spiritual care. And I think now that need - and a good need - and also a requirement within our regulations of taking that person's whole wellbeing into consideration in their provision of healthcare is actually really important nowadays isn't it?

Mike Von Fraunhofer

Yeah. To be honest, I was really surprised, because not that long ago I discovered that the GMC, which is the governing body for UK medics, has actually got a supplementary document about spirituality, and in it they actually say that it's a 'must'; they say that Doctors must take into account not only their physical and psychological elements but they must consider the spiritual and cultural elements. So it's not a 'you could' or 'you might', it's a GMC 'must'; you must do it.

Pete Carter

Yeah, I think overall, people have got belief systems. They are an important part of how they operate. Their thought-processes and their values in life are affected by such things. There is a lot of research that's been done across the globe which shows that people with religious beliefs actually enjoy better health and better health outcomes...and actually longevity of life, compared to those without religious beliefs...and that's not one particular religious belief, it's any religious belief as far as I can see. So, it's almost negligent not to take it into account with people, isn't it?

Mike Von Fraunhofer

Yeah, and also there's this divide. I think a lot of my colleagues - non-faith based colleagues - would feel it's all about the science. Their job is to present the science about this treatment or that treatment or whatever. But the thing is that actually 60% of the UK population believes in some form of God...and then I'm astonished, 25% of the population believes in angels, and 1 in 6 believe in miracles. And so, it's almost like - I've got a cartoon I sometimes show - of a

dog barking at a cat meowing. So you've got the doctor sitting there talking about science, statistics, probabilities and all that kind of thing and the patients thinking about miracles and angels. And we've got to include their beliefs in what we do.

Pete Carter

Well I think one of the challenges is the 'perceived' incompatibility of Christian faith and Science and it's something I've thought about a lot. It could be other faiths, but people seem to think that they are separate and I think one of the questions I've been asked more than any in my medical career and Christian career is 'Wow, you do those two things, how do you do that?' - as if they are like oil and water - they never mix! But in my mind, which went right back to when I was 16 - I never had any incompatibility in my mind.

So I've thought about that quite a lot, and I'd describe it like this - that science really is the discovery of things that already exist, and then the application of that knowledge into everyday life. So science isn't creating new things - it discovers what already exists so that...and there's a lot of hypothesis within science eg. 'we think this will work', so even science doesn't always start just with the facts, it starts with a lot of ideas, and a belief that 'maybe there's this subatomic particle, let's see if we can find it...' So the advance of science is not based on what we already know, it's actually trying to find out what is out there to discover. I say that if Science isn't moving forward, it just becomes a history...but the frontiers of medicine are being pushed out because people believe there are new antibiotics to be discovered, or there's new ways of treating cancer, which often starts in a hope and a belief system, and then that follows through. Christianity is basically the belief that God exists and if He exists, who is He, what's He like, and what way does He want to interact with our humanity, and then making that available on earth. And for me it's exactly the same theory as Science - discover what is already in existence and how do we use that knowledge on planet earth. So I have always seen these as compatible, but I think there's a lot of fear around how faith and medicine can interact and I think that's been one of the problems we've been trying to address, isn't it, in people's practice.

Mike Von Fraunhofer

and also I think over the years a lot of Christians see their profession of work in healthcare as entirely separate from their faith. I did a course years ago run by a Christian organisation in healthcare in the UK, and I was really disappointed because what I discovered was that basically, everyone there that was a Doctor that I knew was either about to leave medicine to go and be a Missionary somewhere because they felt the call of God on their lives, and they wanted to go and do their 'religious' side, or they basically were there but saying 'I don't bring my God with me into my Consultations - I leave Him at the door and I just do medicine'...and in truth I was the only one there who thought you could do both.

Pete Carter

Yes, I've had similar experiences. I remember going to a conference for

medical missionaries many years ago, and I was just surprised that there was a debate about whether medical missionaries should actually preach the Christian Gospel to the people they were with, or just solely do the medical work, as if these two had to be separate. I was amazed that this conversation was even happening, but it's quite common out there. So I think you've got a lot of Christians who work in the health world who think that they are not allowed to practice their faith effectively, so they have to check that...so they do their work, and then they do their Christianity separately, and that's what is a challenge.

Mike Von Fraunhofer

I think that's true and I think there is a real current in our culture of fear, not least because there have been a few Christians who have achieved national prominence in the UK for getting in trouble with their Governing bodies over praying, or talking about their faith..and I think there has been a shockwave through the Christian medical/healthcare world - 'Oh, it's not allowed then' - and certainly I've known people quote some of the governance around this kind of thing at them as a way of shutting down the idea that you can be of faith. I mean certainly for Doctors, the GMC, which is the governing body for UK doctors, I've heard people quote this (and it is a direct quote from their good medical practice document, which is like their 'bible' of how to do it) and they quote this, which is true, which is 'you may talk about your own personal beliefs only if patients ask you directly about them. And that's caused people to put things in their room like little praying hands, or posters or something in the hope that the patient might clock that and say 'Oh are you a Christian?', and they feel that's the only way they can talk about their faith.

Pete Carter

So you've done quite a lot of work on this and I have as well, trying to help people understand that not only is there a benefit in taking people's spirituality into account for their healthcare, but actually there is a requirement to do so that's even in some of our guidelines...

Mike Von Fraunhofer

So basically, as I said earlier, there's a GMC requirement that is a 'must' - you 'must' include their spirituality. But one of the things that was a revelation to me was that when I looked at the GMC guidance on this that talks about only talk about it if a patient asks you directly about it. Everyone treats it as if there is a full stop at the end of that - and that's it, end of discussion. But actually, there's a comma, and there's a very important rest of sentence which says or they indicate they would welcome such a discussion - and that is key, because that is about informed consent, because if you open up a form of discussion with them, and you say how would you feel about a discussion in this area, and they indicate that they would welcome it, you are completely covered, you are completely safe. And I know you found that.

Pete Carter

Yeah, again, throughout all my medical career, I knew that my first responsibility towards my patients was to deliver excellent healthcare, always, always always no. 1. I'm not there as an evangelist, I'm not there to convert

them, I'm not there to preach Christianity. I am there, hopefully, as a good doctor and I always was very careful to make sure that was delivered; that was my prime aspiration. But every now and then there are limitations that medicine doesn't quite fit everything; doesn't manage to fix everything. So the way I would usually approach this was that I would deliver that and say 'look, that is what I can offer you as a doctor. There is other stuff from my personal life that you might find beneficial - would you welcome a conversation about that?' And that way in people actually opt in and then you can take it through stages of the conversation where all the way through people have the ability to stop the conversation - they would say yes/no and that conversation is really in their control, and that's informed consent, and I think that's the principle that we've got to work by - is informed consent. It's a universal principle, and I think when people haven't got that - that's when people get into difficulty.

Mike Von Fraunhofer

...and I think some of it is about just understanding the person you're with so, for me, I know that 60% of the population believes in a God, but actually if you look at the statistics, the younger they are, the less likely they are to be of a faith and the older they are, the more likely. So I will routinely, as part of a consultation now, ask someone - if it's appropriate - 'Do you have any kind of faith or religious beliefs?' Now, if they've come in with a sore throat, that may not seem a relevant question and I won't ask it, but if they're talking about anything which is psychological or sort of 'social' problems or whatever, it's a logical, reasonable question to ask. And if someone says 'no', then there's not much encouragement to take it much further, and it's highly unlikely that I'm going to develop anything further than that. But if most people - 60% of people - say well, I like to think there's some kind of God...or I used to be a Christian...or I used to be involved...or I'm involved in a Mosque or whatever, then I will quite often then, like you, take it onto the next level and say 'There's something from my own personal life that you might be interested in...would you be interested in hearing about it?' Now I've found - I don't know about you - but as soon as you offer them the option to hear about something from your personal life, they get curious, because Doctors don't often talk about something from their personal life, so they almost automatically will say 'Yeah, I'm interested' and then I find that I need to then flag up that it's going to a faith-based thing. So I will say 'actually, I'm a Christian, and I think there might be something about my faith that may be helpful for you - would you be interested in hearing about that?'. And again, that's like you said, it's another level where they can say 'Actually, do you know what, I'm not sure that's for me'. And then I'll go to the final bit, which is 'I'm part of a church that routinely prays for healing...we've seen miracles...I think God would be really interested in interacting with you and having [bringing] good into your life - how would you feel if I prayed for you?' And I know you pray with your patients as well...

Pete Carter

Yeah, I often get the question of 'how many of your patients do you pray for?' and actually my answer to that is I pray for every one of them in a non-direct way, because I want them to benefit from my Christianity and I want my

Christianity to be beneficial to them, so already as I'm speaking, I'm covering my whole working life with my prayer life. But that's a different thing to actually where you going to go for a direct interaction where you do need to go down that informed consent process.

Actually, I remember probably one of my favourite stories with regards to this was when I was dealing with a gentleman and he came in with a lump on his neck, which was obviously quite 'suspicious' (is the medical word); I'm reasonably certain that he had a cancerous lump in his neck, and I knew I needed to refer him to hospital. I was just taking him through the process, and obviously not saying this is the diagnosis but you need more investigations and we need to find out what this is. So we're doing basically an online booking system, and while that was going on, he asked me a question he said 'Hello Doc' - because I was a Locum GP for quite a length of my career and not always in the same place - he asked me a question 'Where do you normally work?' So, he asked me a question about my life, and I said 'Well actually, working as a doctor is part of my life but I've got another part of my life, if that would interest you?' and he said, 'Oh, yeah what do you do?' and I said, 'Well actually, I go around the world teaching people about Jesus, and teaching people about miracles'. He said 'Oh that's interesting'. I said, 'Yeah, would you like to know a bit more about that?' He said 'Yeah, well, have you seen any miracles?' So I started to tell him some stories about miracles I'd seen throughout my life - in the medical world and actually just out in the church world - and he said 'That's fascinating...so you've actually seen some miracles?' And I told him some stories and then he said, 'So, do you think you could do a miracle for me?' Now this is him inviting, and I said 'Certainly'. Because I'm confident that the God who is in me is the God who does miracles, it's not just me, but we have a God of miracles, and I need to be confident in that and I said, 'Well, would that interest you?' and he said 'Yeah, I would really welcome that'. And then he said 'Well, what would it look like?' I said 'Well, it's very simple. I'll pray for you. It'll probably take about ten seconds, and if you don't mind I'd like - if I could - possibly to put my hand on your shoulder' (because that's just what the Bible tells us about the laying on of hands - it's non-threatening, and he had the option for that as well), and he said 'Yes, that would be fine'. So there, without closing my eyes, without being weird or going into religious mode. We were looking at each other, I put my hand on his shoulder, 10 seconds, then I said, 'Well, OK, let's see what happens' because that's an honest answer - and I gave him his referral to hospital - because that's me doing the correct medical thing - so he's getting good medicine and he got this in addition. So, cutting a long story short, four months later I was back in that Medical Practice, and I got the news that when he got to hospital, the lump in his neck had completely disappeared, so he didn't actually need the medical intervention, which is a fantastic outcome!

Mike Von Fraunhofer

...and I think it's important that - and I've had some funny experiences - I think when you get to the point of asking someone 'How would you feel about praying?' I've had some people, even Christians, when I've said 'How would you feel if I prayed for you...would that be helpful, or would that be weird?'

And some people have said 'actually that might feel a bit weird and I've said 'Well, shall I pray for you when you've gone?' That would be really nice. I've had one or two where they've said 'That'd be lovely' and then they get up and leave the room! So one of the things I've realised is that we're used to - in our [Church] culture - praying for people and how to do it, but the public doesn't know 'the rules'. They don't know the official 'receiving' prayer stance - that's not what they're expecting! They're more likely to just stare at you! So I've realised that actually, you have to be a little bit formulaic. So, I will say to them 'How would you feel if I prayed for you?' and if they say yes, I say 'How would you feel if I prayed for you now while you're here?' So then, you've got to explain what to do. So I will say: look, a lot of people when they're prayed for, they might open their hands like they're getting a gift and they might want to close their eyes so they're just waiting to see what God might do for them. But you don't have to. You might want to keep your eyes open. You do have to get used to praying with your eyes open, and you have to not mind if they're looking at you! And then, like you say, it's very important this whole thing about don't just reach out and touch someone, because that's an invasion. So I will say, 'How would you feel if I put a hand on you?' You talk about putting a hand on the shoulder....but a forearm is also very good, particularly in most consultations, the arm is near them...is near you.

Pete Carter

Yeah, don't put your hands on their head...very threatening...they don't like it... it's odd.

Mike Von Fraunhofer

It is, and it messes up their hair! But I have my own personal rule which is if they're younger than me, and definitely if they're a different sex to me, I will not touch them. That is unwise. And then again, they don't know what's going to happen, so I'll say, like you said, 'It won't take very long'. I mean, generally you and I have got 10 minutes to have a consultation with a patient, so this is an adjunct to what we're doing anyway, so I'll say 'it'll be very brief' and then I'll say 'You'll know I'm done because I'll say Amen'. Because people don't know when prayer is finished. So basically I'll do that with them. And one of the things that I have changed personally in my practice now - I'm a Senior Appraiser for NHS England and I'm also on the Governing body for a CCG. So, I have a degree of prominence. (The CCG is what commissions healthcare for the local population, so basically it has the money to spend for hospitals and General Practice services). So, there's a degree to which I'm fairly well known in this area. So NHS England who run the governance of the NHS know about me, and so one of the senior people wanted me to talk through this process, and I have done that. So I have talked with senior people at NHS England about how I do this, and also I have been asked to directly talk about it in my own appraisal...so this has been vetted.

Pete Carter

and how did it go for you?

Mike Von Fraunhofer

It was amazing actually! I spent nearly an hour talking to my appraiser about the Healing Centre, about how I do it and he was very interested, and basically was talking about how he felt he couldn't have an intellectual and heart approach to spiritually and medicine, so he was quite interested in the whole thing which is very positive. But one of the things I did in preparation for that is when I do one of those things – when I pray for a patient – it's a procedure, so like joint injections, like having a smear, it's a procedure, and so I code it in the records. I don't hide it. I keep a record of it and it's coded in the patient records. So, this year, I knew I was going to be asked to talk about how I pray for patients at my appraisal, so I sent out a feedback questionnaire to all the patients that I'd prayed for – because I could search off the records – and I looked at all the feedback that I'd got, and in the time I had I had 16 responses, and the vast majority was incredibly encouraging, as you found, with patients. They are very open and pleased with it. But actually I had two patients who clearly were surprised and clearly felt it was a bit of an invasion; something they weren't expecting. Now, I approached them in exactly the way we've talked about. They said yes, they consented all the way. And there was no indication at the time of the consultation or afterwards, there was no formal complaint or anything, but when they filled in the feedback questionnaire, they made it clear they weren't so happy. So now, what I've started to do, is I've devised a consent form. So one of the steps I now do, is that when I get to the point where someone says would you like to have prayer and they say yes, I will now give them a form to read, and it makes clear that if they say no, it doesn't affect their patient relationship with me; it doesn't affect their healthcare, and I'll get them to sign it, so I can put that in their records.

Pete Carter

So you adjusted according to your feedback, which is good medical practice isn't it? Because medical practice is always developing, and medical practice that stands still will soon be out of date. I think it's really important for people to understand that as Christians we are regularly evaluating our performance, and actually if we can adjust it to make an improvement. It's worth saying isn't it that actually most doctors when they have interactions with patients that patients consent to, actually, a lot of them aren't necessarily happy with the outcome, so it's not specific to prayer. But it is important that we adjust to the feedback isn't it?

Mike Von Fraunhofer

It is, yeah. I think 90% of my patients were highly positive. Now a 90% success rate on a procedure is really quite good, but you want to try and eradicate the 10% that weren't happy.

Pete Carter

So I think that's excellent practice, and that whole wisdom concept takes us back to the idea that God has given us a spirit of love, power and a sound mind. And this bit about wisdom and a sound mind in practice is one of the keys to HiH isn't it? Because if we are not wise in the way we try and deliver it, then we will become, well, a nuisance or unwanted...excluded. So the ability to actually learn how to practice our Christianity wisely in the workplace is one

of the keys. And I think, again, we've looked at other people who have got into difficulties haven't we? Christians – and it's worth saying that some people have got into difficulty with this – and without making it absolutely universal, I think our reading of the narratives of those stories would say that probably some unwise practice entered into that which actually gave cause for question and complaints.

Mike Von Fraunhofer

I've noticed over the years that even if you're a Christian as a healthcare professional, and you're talking to a Christian, you can't make an assumption they are going to want you to approach them in a religious way. Certainly once or twice I have had my own patients come back highly upset that a specialist they've gone to see had launched in and prayed for them. I know that the GMC guidance about this is clear in the UK, but there are code of ethics that the AMA has for the US and there will be governance for Europe, and basically it will always be the same sort of thing. There is a really good passage which I came across and love, which is 1 Peter 3:15 which is 'Always be prepared to have an answer for those that ask you about the hope you have' but the key thing is, do this with gentleness and respect. But when you launch in and pray for someone and they don't want it, what happened to gentleness and respect?

Pete Carter

No I think respecting the person and their belief systems – and that goes for all faiths doesn't it? So again, it's worth saying, that actually we're offering our Christian resources to people of all faiths. We're not exclusive in any way, but we're not trying to push our Christianity onto people, I think this is a really important concept. We are offering a resource rather than pushing our religion, and that's a really important philosophy for us, isn't it, and HiH is a resource within the beings of Christians that is there to be offered, not something that is trying to pull people towards the Christian religion so to speak.

Mike Von Fraunhofer

Exactly, and you talked about an amazing story of healing. My first ever miracle was with a patient, and it was an ingrown toenail! Now I was very upset with God about that! I thought blindness, yes...raising from the dead, yes, ingrown toenail...not quite! But what was amazing was that I wasn't even thinking of praying for this patient, and they said to me 'Is there nothing else that you can do?' A bit like with your guy. And I said, 'Well actually I could pray for you' because actually, they had gone through all sorts of trouble and nothing was helping, and they were really upset with it all, so I just prayed this quick prayer. I think what you said was really vital – in church you've got the worship band and you're with your team, and you're in the 'zone', and when you're in a hospital or in your surgery there's none of that, you can't get yourself...hang on a minute I've just got to get the Spirit in me and get warmed up. You know, basically you've just been chatting about something and then you've got to launch in!

Pete Carter No warm-up act!

Mike Von Fraunhofer So I just basically prayed this prayer and got about my day – like you did – and she came back two weeks later and said ‘Are you a healer?’, and I said ‘Why?’ and she said ‘My toe is completely better!’ and I was able to say ‘Well I’m not, but I know a Jesus who can’. So I think it can be just really innocuous problems that we deal with – it doesn’t have to be, oh it’s cancerous, so now I’m going to bring in the healing thing!

Pete Carter But even an ingrown toenail can be massively impacting upon someone’s life, so we learn to rejoice over every healing, every interaction, because that’s about valuing the person who’s in front of us, not just the more spectacular moments.

Mike Von Fraunhofer and I think it may seem a bit formulaic, this idea of have you got any kind of faith... would you like to hear about something from my personal life...I’m a Christian, would you like to hear something about that etc. I know it sounds a bit formulaic, but it’s important because if you do that, you are not likely to run into problems because people can say no, and you need to be able to say, ‘Fine, it’s not a problem!’

Pete Carter I would say in all my years of medical practice, since 1982, I’ve never had a complaint about any spiritual interactions, so that’s a good record I think – a good track record. Yeah, and I’m the same. I have prayed for hundreds of patients, and there was a time when I was actually counting, so I actually recorded them all and I’ve prayed for hundreds of patients and I too have never had a formal complaint. Because what I’ve found is even if they don’t ‘get’ a healing, even if they don’t come back and say ‘That thing you prayed for has gone’, the one thing I’ve always noticed is that whenever I pray, when I’ve finished praying – even though time is tight – I’ll just roll back in my chair, and I’ll just wait a moment and see, and nearly always – even if people have said they have got no faith whatsoever, if they’ve consented to prayer....I’ve found they just stay in the moment, God is doing something with them and sometimes they’ll be just quietly crying.

I think people feel cared for. If you do it well, people feel cared for, respected. And I think the other side of things that we should just say is obviously (we can talk about miracles, and that’s great) but the other side of things is that ability to be loving and kind like you said. It’s really important that people need to feel like they’ve been cared for in that process, not targeted with anything, and that we bring that resource, love and compassion with us as well. And I would say again, joy and peace – that ability to actually have an interaction with somebody. We have to deal with people in very serious moments of life, and it’s not that we don’t take it seriously, but we have to be able to do it in a way that actually creates hope and doesn’t extinguish joy, and enables them to experience peace, is very powerful. How many people when they’re coming

to the Doctor – they have a degree of anxiety about something, which is very significant. I was taught this when I was training to be a GP: that basically anybody who is coming through that door has an anxiety that they are about to express to you. Probably....you know, with a few exceptions. But if we can deal with that in a peaceful way where they go out feeling more peaceful, that is a fantastic success as well isn't it? We have the Prince of Peace living within us, and we have a peace that passes all understanding to offer to people, and I think that's a very powerful offering as well.

Mike Von Fraunhofer

It is, and I think one of the other things that helps – and I'm very lucky because I practice only 15 minutes away from the church – but I would encourage people to try and have links with a local church. Because one of the things you might find is that some patients you interact with may not want personal prayer, but they might be interested in somewhere else to go. Somewhere external. And if you feel a little bit uncertain about whether it's appropriate to pray for someone, you can refer them – this is partly why I was so desperate to get the Healing Centre as a recognised centre. So I have cards for the healing centre in my surgery, so if I feel uncertain about whether to pray for someone, or even if I've prayed for someone I can say why don't you try these people – I trust them; I know who they are and they can go...and I'll talk to them and say why don't you get involved in the church if you found this helpful. In fact I had one of my patients – she always loved it when I prayed, so I invited her to go to Eastgate and I saw her one day at Eastgate and she thought it was fantastic, so peaceful, and after a couple of weeks I saw her again and she said her husband made her come – he said you always come back different when you've been to Eastgate, and she started to do that, and then Eastgate ran a course – a basic introduction to Jesus type course – and then ultimately, after a few months I got texted a picture by a friend, and it was my patient getting baptised. That was all from just taking that initial step of saying 'How would you feel about learning something about my personal life?' which led to her becoming a Christian.

Pete Carter

So that can be an ultimate outcome can't it? That somebody decides that they want to know more about Jesus for themselves. Which is fantastic.

Mike Von Fraunhofer

But if they just come back like your guy – do you remember that guy you talked about that came with a pain in his side?

Pete Carter

Oh yes, very funny (well, it wasn't funny at the time – this guy was very seriously ill, and I was in the middle of one of those really hectic clinical sessions) I was way behind time, and there were lots of emergencies waiting for me, and this guy came in and you're just desperate to have something that's simple to solve. Well, this guy came in and he was grey. You can see when someone is obviously ill, and this guy was very ill, and I had to discover what was wrong with him quickly, cause I had a waiting room of people waiting...but I was certain I'd have to send him to hospital – just looking at him

and way he described his pain and everything. Well what was remarkable was that I was just doing what was necessary medically, and actually during the consultation all his symptoms disappeared! And he was surprised...I was very surprised and then he started to apologise to me. Before that he was in agony and I when asked him to do something and he said 'that really hurts Doc', and so I asked him to try and help me, and then he suddenly realised that he could do these things, and that suddenly the pain had disappeared. All of a sudden it seemed that there was an intervention of God that came from left field - there was no direct spiritual intervention, but this is actually the power of God that is at work within us. Like I said previously, I cover all of my work with my prayer life, and God turned up and did something. Now again, I did all the medical things, so told him if the pain comes back, this is what you need to do, we'll check up on you and probably follow up. But he literally left that consulting room a completely different colour, feeling completely well, astonished and happy. And I was pretty happy as well!

Mike Von Fraunhofer

It's amazing, isn't it? I find some of my best interactions with patients spiritually are when I'm running late or under stress! It's almost like God gives you a choice: so now what are you going to do? One of the things I've realised is that also you've got to be open. If you get to this point where you're thinking about bringing spirituality in, you need to be open to what God wants to say to you for them - and that can be difficult when you're thinking about medicine, and what to do right and how to do it.

I had one patient, who gave me consent to talk about this story, where she wanted prayer and she had huge psychological problems...major social issues, she had a very sad life and was very upset. And normally I would just pray a blessing type prayer over them or healing...and straight into my mind a picture of a white horse came, and I waited a moment just to think OK, so what's that about God and what do you want to tell me about this, and nothing more came, and obviously she's sort of in 'prayer mode', so I can't spend a minute going off to think about God and what he's going on about, so in the end I just said 'Does a horse mean anything to you?' and she said 'What colour?' And as soon as she said what colour I thought, here I go, I'm onto something now. And I said 'It was white horse - does a white horse mean anything to you?' and she looked at me and she welled up and she said 'That's my only happy memory'. She said I was crossing a field and this white horse came up to me and nuzzled me, and I spent some time stroking the horse's neck and it was nuzzling me and it's my only happy memory from my life. And I was able to share with her that God brought that moment to my mind because he wanted to show her that He cared for her; He knew her...He knew her so intimately and He knew that happy moment and He loved her, and basically I could just briefly talk to her about the love of God. He wanted to intervene in her life. So we just need to be open to these things - very quick little thoughts that God can drop into us.

Pete Carter

..and this is one of our great desires, isn't it, through Heaven in Healthcare?

To help people know that this is normal Christianity [and work out] how can you do this. So it's not just a few of us seeming specialists who do this, but every Christian who works in the realm of healthcare can deliver these resources – from the cleaner, porter, receptionist, consultant surgeon, nurse, physiotherapist. Any Christian working in that realm has the same HS inside of them and through their interactions with the people in those settings they can actually deliver heaven on earth.

Mike Von Fraunhofer

Yes, and I think it's important – I suppose you and I have been doing this for a long time, and probably the threshold for doing this seems low now where we are not quite so worried about doing it. But in the early stages of doing it, you can feel very nervous. It can feel very nerve-wrecking changing the consultation to involve this kind of thing.

Pete Carter

...and that's where just learning from others who have gone here before, wise practices, learning and keeping on developing, and finding your own ways of having conversations that are natural to you. I think that's really important – because you and I do it – it's the same context but in slightly different ways, and I think that's really important, that you are who you are. Patients want to interact with you and not a formula that you have picked up from somebody else.

Mike Von Fraunhofer

Exactly, there is no rigid formula. I think ultimately there is a step of faith you need to take. I remember vividly, I was in a conversation with a senior GP in a locality, and they were in a lot of pain with their back; they were in agony, every five minutes. I didn't need to be that good a doctor, because basically they stood up, wandered around, they were clearly in pain. I was there for a meeting, a formal professional meeting, and I felt God say 'Offer to pray for her' – and I really did not want to do it. Because I thought this woman is very senior, she could make my life a misery here....I could get in trouble. I spent 5 minutes having that debate with God – you know the kind of thing...no I don't want to do it...just do it. I thought, in the end, OK I have a choice – either do it or don't do it, so I did the things that we talked about doing and I prayed for her and the pain went, and she just looked at me in total astonishment...and we got on with our meeting. But what was interesting was that about a month later the pain came back and she contacted me and asked me to pray for her again. In the end we started to meet, started to talk and in the end I managed to lead her to Christ, and had that wonderful privilege. But I remember that moment – and I do encounter it every now and then – where you feel God say 'Talk about this' and my Spirit was going 'I don't want to!' and there is a moment where you have to cross that Rubicon.

Pete Carter

Yeah, brilliant.

The principle of informed consent is one that runs throughout the whole of health provision, and it's not just doctors obviously, but anybody who is

offering an intervention, that principle would be universally applied, wouldn't it? And not just in the UK but right across the UK, as far as I'm aware.

Mike Von Fraunhofer

That's very true, and obviously our world is 'Doctor world', but I have looked at other guidance as well...I mean the Nursing guidance is very similar, to be honest. It basically talks about who initiated the interaction and obviously if the patient initiated it, you are on a lot stronger ground. If you initiate it, then you need to be conscious that that means that you have to be very careful about what you do, and again they ask 'Has that consent been given?' So they are very interested in consent. Does it comply with your professional codes of conduct? And most interesting is what they say - because they have realised that most nurses are salaried, they are working for an employer - does it comply with your employer's code of practice? I think this is really key in terms of you and I have the luxury as GPs of being self-employed; we work for ourselves, but most people work for someone else. Obviously we know of a colleague who is really pioneering - healing and praying for healing. I don't know if she is going to be appearing in some of the other episodes, Sasha. I had a conversation with her about how she was going to do this within the context of being employed.

Pete Carter

Yes, we have got another one: a lady who works as a physiotherapist. She is actually now working with her governing authorities on how Christians can actually practice their Christianity in the workplace, and they are actually asking her to help formulate the good practice guidelines for that. We have got to be aware that people have employment contracts which they need to respect.

Mike Von Fraunhofer

...They need to read them!

Pete Carter

Yes, they need to be aware of them and they need to respect them and also, if you are trying to take any initiative you need to talk it through with effectively the governing authorities, the people who have responsibility over you in that workplace and that's really important because that's a whole respect issue as well. We are not there to be subversive. We are there to be working within the system, to enhance the system...and sometimes to ask questions about the system.

I remember actually Sasha (who is going to come into this series later on). She works at a minor injuries unit and she said she went to her manager and said 'Look, when people come to benefit from this service, they fill out a form, which actually asks them if they have a religion. We ask them to tick a box'. And then Sasha said, 'So, do we do anything with that information? Is just irrelevant information, or do we believe that's important to people?' And they said, 'Ooh, that's a very good point, we tend to ignore that'. So she said 'Well, would it be beneficial if I looked at that for you and actually worked out how we can use that information for the person's benefit - if religious belief is

important to them?' So I think what Sasha did is she went to her bosses and said 'look, this is actually here, but effectively we ignore it'.

Mike Von Fraunhofer

...and Sasha and I talked and one of the things she realised is that she needed to go to her managers and say 'Look, I'm going to start doing this thing' - like I did when I first started years ago - I had non-Christian partners in the Practice I was working with. I needed to sit down with them and say 'Look, I'm going to start doing this...you're going to start seeing entries in the records'. I really encouraged Sasha that she needs to make it upfront. We talked about it not being sort of 'under the radar' or some sort of 'closet' thing and there is - for those who know about coding - there is now a Snomed code for 'Laying on of hands with prayer', and I encouraged her to have a look, and lo and behold that code was in her matrix of things that she could code on her records! So she talked to her manager and said 'Look, how would you feel if I did this interaction with patients?' ...explained how she was going to do it and document the fact that she'd done it in the records, and we really encourage people to have those conversations.

When people have run into trouble, it's when they have given assurances or been told to not do something and they have gone against it. Certainly there was a nurse who ran into national prominence and she was sacked from a local hospital to us. Because she prayed with patients, there were some complaints. She went to a disciplinary procedure, and she made an agreement with the managers that she wasn't going to do it, and then she promptly broke that agreement, and that's what got her into trouble - because she said she was going to do something and she didn't keep to it. And ultimately we need to respect the people we are working with and for, and if there is a reason why they say 'Don't wear that cross' or 'Don't pray', you can try and work around it and talk about equality laws and use equality laws to have an equal right as someone else to have your faith respected, but ultimately if you are given an instruction not to do something you do need to respect it.

Pete Carter

That was a big story. Fortunately, that lady has been restored back into her workplace now because she followed the disciplinary procedures of her workplace, and now she has been restored. Which is a great outcome for all concerned I think.

Mike Von Fraunhofer

and I think it's also important to remember - I know we have talked about UK guidance, but the AMA has a code of ethics, and they talk about what to do about praying with patients and that kind of thing, and there will be guidance in Europe. I don't think we need to get too bogged down in what the specific wording is. I have quoted some because I think it's helpful for our UK audience but the things we have talked about - the ethics of informed consent and respect - will be universal, won't they?

Pete Carter

Yes they are, and I think whatever country you're in you have to be aware of the guidelines. I know some countries in Europe are more restrictive about praying for patients, so you just have to be aware of that. And then, I love the bit in the Bible which says 'if you lack wisdom, ask for it and God will give it to you generously and without finding fault'. Everybody is going to need to find the wisdom of how this will work in their own contexts. We have worked out how to do it in the UK...but ultimately our confidence is that God has an unending supply of wisdom which He can offer to us.

Mike Von Fraunhofer

...and also, use your friends and colleagues. I helped Sasha talk about what she was going to say to her manager...and that physio you mentioned, I helped write the protocol that she wanted to give to her managers, and whenever I do something - the feedback questionnaire and the consent form - you and I have worked on that together and...I have run it through you and some other people I trust. Don't just think you have to do it alone.

Pete Carter

No, and that's one of the beauties of the HiH, because we are trying to create a community where people can find others, and actually, where you can think with others and work this out together. Again, for us that's one of the beauties of HiH is this emerging community which has got an online presence and local groups, and hopefully that's will continue to grow and grow so that more and more people are benefitting from the resources on offer.