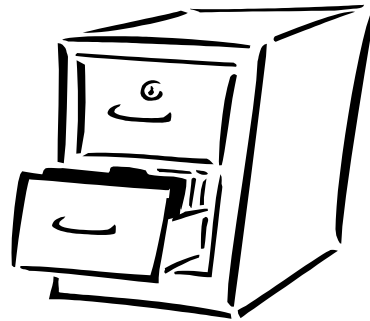


BIKUR CHOLIM RESOURCES



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WHAT IS BIKUR CHOLIM?

Bikur Cholim is hebrew for “visiting the sick” – but it is much more.

Bikur Cholim is one of the important deeds included in *Gemilut Chassadim* – the performance of deeds of loving kindness. These acts of loving-kindness was viewed by the sages as one of “three pillars of Judaism upon which the continued existence of the world depends,” along with Torah and *Avodah*/prayer (Pirke Avot, Ethics of the Fathers, 1:2). Some Rabbinical authorities maintain that *Bikur Cholim* is one of the 613 commandments of the Torah. Others also hold that it is derived from the precept, “You shall love your neighbor as yourself” (Leviticus 19:18).

The tradition of *Bikur Cholim* was part and parcel of Jewish life for centuries, wherever Jews lived. The mitzvah found expression in the formation of *Bikur Cholim* societies in villages, towns and cities in all parts of the Jewish world. It was an accepted practice for neighbors, friends and people in the community to visit those who were sick, disabled, elderly and lonely and to minister to their needs – to provide care for the sick, to bring them food, to maintain their households, and to care for members of their families.

The Jewish people view the mitzvah of *Bikur Cholim* to be an essential social obligation reflective of the mitzvot guiding “man’s relationship to man.”



The *Shekhinah* (Divine Presence) rests above the bed of one who is ill.
– Babylonian Talmud, Shabbat 12b

Do not shrink from visiting the sick; in this way you will make yourself loved.
– Ben Sira 7:35



TRADITIONAL TEXT AND BIKUR CHOLIM

1. When visiting the sick one should not sit on a bed or on a chair or on a bench nor in any high place (i.e., higher than the patient) nor above the head of his bed,
But one should wrap oneself up (*mit'ateif*, i.e., cloak oneself in a way connoting focus/purpose, as in prayer)
and sit below the head of the bed
and request divine mercy on the patient's behalf
(*um'vakkesh alav rahamim*)
and (only then) leave.
(*Maimonides, 1135-1204 CE; Mishneh Torah: Hilkhos Aveilus/The Laws of Mourning, Chapter 14, Section VI*)
2. "When a person becomes ill
it is a *mitzvah* for every person to visit,
for we find that the Holy Blessed One visits the sick,
as our Sages of Blessed Memory (*Talmud, Bava Metzia 86b*)
explained the verse (*Genesis 18:1*)
"And God appeared unto him in the plains of Mamre..."
teaching us that God came to visit Abraham when he was sick.
Relatives and friends
who are accustomed to visit this individual often
should go to visit as soon as they hear of the illness.
But strangers/casual acquaintances
should not visit immediately
but should wait until three days have passed
so as not to deter his chances of recovery
by labeling him a 'sick person.'
If, however, one became suddenly ill,
even strangers should visit him immediately.
Even a 'great' man should visit a less 'important' person,
even many times a day.
He who visits the sick frequently is praiseworthy,
providing he should not become troublesome to the one who is ill...
(*Kitzur Shulhan Arukh, 1800's; Chapter 193/1*)
3. The essence of the *mitzvah* to visit the sick
is to attend to the needs of the patient
to see to what has to be done for him/her,
and to ensure the ease/comfort/pleasure of his/her company (make him/her at peace with
family and friends)
also to consider his/her condition and
to pray for mercy on his/her behalf.
If you visited a sick person and did not pray for mercy,
you have not fulfilled the mitzvah...
(*Kitzur Shulhan Arukh, Chapter 193/3*)

Translated/compiled by Rabbi Simkha Y. Weintraub, New York Jewish Healing Center, JBFC

DOING GOOD IS NOT ABOUT BEING NICE – A CHALLENGE

Doing good is not about being nice.

You can do nice things all day long for many people,
but it could all just be more service of your own self,
food for your own ego.

The world was designed so people would need each other,
not so that you could be nice,
but to give you the opportunity to escape the confines of your own self.

When you help those who show gratitude,
when you lend a hand to those who are on your side,
you are still within the realm of your own ego and self.

Help someone you don't want to help,
only because this is the right thing to do.

At first it may not feel so rewarding.
But you have sprung free.

Excerpt from "Bringing Heaven Down to Earth"
Meditations and Everyday Wisdom of the Rebbe, Menachem Schneerson
Compiled by Tzvi Freeman
Adams Media Corporation © 1996

SEVEN WAYS OF LISTENING

“We live in a world of sounds, but we seldom *listen*.”

1. Take time to listen; it may help to clarify the issues.
2. Be sensitive; try to put yourself in the other's person's place.
3. React verbally and non-verbally; use eloquent and encouraging grunts, head movement, facial and hand gestures as appropriate.
4. Don't probe for additional facts; deal with the feelings being expressed.
5. Refrain from making judgments of what's being said; don't give direct advice, even if asked. Reflect the question back.
6. Listen between the lines; be aware of feelings, body language, and areas of avoidance.
7. Remember they are really talking things out with themselves; given the chance, they will work things out. Let them make the decisions.

SEVEN WAYS OF ASKING

When we reach out to help someone who is ill, we often forget that there may be a loved one in the role of caregiver, who is equally in need of support and/or concrete help. But simply asking “How are you?” may not convey authentic, personal interest and may not open up an honest, expressive response. Some people who are suffering have criticized this common question because it doesn't seem to acknowledge the very different course their life has taken, and seems to come “attached” to automatic, expected answers such as “I'm okay” or “Fine, thanks,” which may not be a sincere reply, or may not be the whole story. So here are seven alternative ways of asking.

1. How are you doing with all of this?
2. How are your spirits?
3. How are you hanging in?
4. What do you need the most, right now?
5. What's helping you get through this?
6. What's been on your mind as you try to cope with all of this?
7. What are some of the obstacles to your managing/copeing?

TIPS FOR VISITING

Bikur Cholim visits may take place anywhere. Mentally prepare for the environment you will be entering– the sights, sounds or smells you may encounter.

Know what you can do, and offer only what you can.

If a person declines a visit, then a phone call or a get-well card conveys caring and you can try to visit later.

Prepare yourself to be present and attentive.

- Familiarize yourself with the person's condition.
- Center yourself. Leave your personal concerns at the door.
- Maintain eye contact and concentrate on the person you are visiting.

Give control as much as possible – ask permission of the person first before you do for them.

- Touch is a powerful gesture and should be done with permission.

Let the person take the lead in conversation.

Keep conversations centered on the patient. Acknowledge their feelings with statements reflecting their comments.

Respect and follow the person's lead.

- Sometimes the person being visited may prefer to talk about neutral or external topics, such as the weather, current events or sports, rather than personal experiences and feelings.

Be aware of how you empathize.

- Express your caring by listening and being attentive.
- Avoid clichés such as “hang in there,” “don’t worry,” or “it’s all for the best.”
- Don’t be too quick to say, “I know how you feel.” You might not. We all experience things subjectively and such statements might be seen as dismissive of a patient’s feelings.
- Unless you get a strong indication that you and the person you are visiting do indeed share similar feelings, it may be more productive to say, “I don’t know how you feel but I am here listening.”

Figure out how you can be of tangible assistance.

- Drop off a newspaper, magazine or book.
- Write a kind note or send a thoughtful card.
- Bring a glass of water or help prepare a meal.
- Straighten a blanket or fluff up a pillow.

Think about simple things you can do on the visit.

- Widen their world with news from outside.
- Help them walk around their room, or further, if possible, and if medically permitted.
- Look around the room/house for cues to engage in conversation.
- Use humor while remaining sensitive to the person's situation. (“He who laughs, lasts.”)

A basic tenet of *Bikur Cholim*: Confidentiality – A “sacred trust”

Those who are being visited need to know that those who visit them will keep the content of their meetings confidential. Respect patients' right to privacy. Keep information about them confidential. Emphasize this as an essential value and practice of *Bikur Cholim*.

Excerpted from: *Turn to Me* Study Guide; *Turn to Me* is the *Bikur Cholim* documentary produced by the Bikur Cholim Coordinating Council and available on DVD & VHS.

HINTS FOR VISITORS IN INSTITUTIONAL SETTINGS

Bikur Cholim may be as simple as walking into your friend's or fellow congregant's hospital room. However, if your group is seeking to obtain a list of Jewish patients from the admissions department, there are rules of which to be aware.

Most hospitals or institutions have regulations for visitors that are important for safety and risk management. There are also often policies that may limit the number of visitors allowed in a patient's room. Groups who want to make hospital visits are advised to consult with the hospital chaplain, and/or speak with the Office of Volunteer Services. This will ensure that your group can become welcome guests and a kiddush Hash-m (honor to the Jewish people).

Training seminars offered by the Bikur Cholim Coordinating Council receive instruction in listening skills and sensitivity training. Below are some suggestions:

When entering a patient's room

Do

- Knock first. Do not enter suddenly.
- Introduce yourself to the patient as a *Bikur Cholim* volunteer and give the name of your group.

Don't

- Enter if it is crowded with other visitors or if a doctor is with the patient.
- Wake a sleeping patient. Return, if possible, before leaving the hospital. Try to leave a note from the group by the bedside.
- Stay if the patient appears sleepy, excessively irritable or otherwise uncomfortable by your presence.

When interacting with the patient

Do

- Maintain a cheery disposition. Talk to all patients in the same room.
- Make sure that any books brought to the patient are not too heavy in weight or content. Remember that a patient's attention span may be shorter than normal.
- Wish the patient a quick and complete recovery and ask if there is anything you can do for him/her or the family.
- Respect the religious level of the patient. It may differ from yours.

- Recognize that patients can be cranky and even abusive. It is not a personal attack.
- Notify hospital staff if a patient asks for help moving or getting out of bed, or have the patient press the “call” button near the bed.

Don't

- Shake hands. This is for the patient's sake.
- Stare at a scar or disfigurement.
- Bring sad news, or bring up subjects likely to upset the patient.
- Ask why the patient is in the hospital or offer medical advice.

Other general suggestions

Do

- Check with the family or a nurse before visiting someone who is very ill. Ask if there are any specific restrictions or suggestions.
- Know that a red bag indicates infectious waste.
- Funnel additional patient needs (homemaker, visiting nurse, etc.) to the chaplain or social services department.
- Remember the importance of confidentiality both in and out of the hospital.

Don't

- Visit the sick immediately after they have fallen ill.
- Visit during the first three hours and the last three hours of the day. Mornings can interfere with staff activities. Evenings the patient could be tired.
- Give patients food or drinks unless it is checked with a doctor or nurse.



Be reliable and consistent!

It's important to be available as planned.

Don't make promises for other people. Don't make promises you can't keep.

COMMUNICATION WITH ELDERLY PERSONS

Communication is the giving and sharing of time, ideas, experience, interests and companionships. It is concentrated listening which says "I care about you".

When you effectively communicate with the elderly you help:

relieve loneliness	stimulate thinking
establish mutual respect	exchange ideas & experiences
foster friendships	restore self-worth

Remember, *an open invitation to talk is a gift.*

Here are some suggestions to keep in mind for more effective communication:

EXPLAIN YOUR ROLE

- Give simplified explanation of why you are there and your interest in the resident and home. Introducing yourself; state why you are there and how long you are staying.

OBSERVE AS YOU LISTEN

- Note the residents' reasoning powers, possible deafness poor vision, memory losses, the people and things that mean something to him, current interests and strengths that can be built on.
- Observe the residents ability to understand, reason, see, hear and remember. Adapt accordingly.
- Never look bored; concentrate with full attention.
- Speak slowly, clearly and simply in a normal voice never shout
- Use humor and laughter whenever possible. It has therapeutic properties
- Encourage the other person to talk – do not monopolize the conversation.

BE A GOOD LISTENER

- Many older people have a real need to talk. Some have rich backgrounds to share. Let this information come voluntarily to avoid probing into a painful past. Others have problems and complaints and although the volunteer does not interfere or give advice, it is helpful for the resident to express his feelings. Encourage the resident to talk. Don't monopolize the visiting time by talking about yourself.

REMEMBER NAMES

- It is easy to lose your individuality when living in a nursing home with others. To be remembered by name means a great deal. Ask resident how he/she likes to be addressed (ex. Mr./Mrs./Miss or by first name). Remember names, even if yours is forgotten.

CREATE A COMFORTABLE ENVIRONMENT

- 60% of communication is body language - be informal.
- Use positive feedback.
- Maintain eye contact, an open, friendly relaxed position and SMILE.
- Draw up a chair close enough for good vision and hearing, but not too close.

BE PATIENT

- Older people may be slow to respond and may not show immediate enthusiasm for new activities. They may repeat themselves. They may be very frank about likes and dislikes.

ENCOURAGE

- Encourage residents to do as much as they can for themselves. Allow them to proceed at their own pace. It is wise to examine carefully the basis for their refusal to participate. They may be afraid of being embarrassed in a situation in which they feel they are unable to cope. Make light of any mistakes made.

CONSIDER ALL MEMBERS OF THE GROUP

- When working in a group setting, remember the shy and retiring may need extra support while the aggressive may need to be directed from dictating to others. You will find someone easier to relate

THE M'SHEBERACH

A traditional prayer for one who is ill, usually recited during the Torah service at synagogue. Offering to say it at someone's bedside may offer comfort and healing. The individual's and individual's mother's Hebrew names can be included in this blessing.

He who blessed our forefathers Abraham, Isaac, and Jacob, Moses and Aaron, David and Solomon, may He bless and heal (Hebrew name of the one who is ill) the son/daughter of (mother's Hebrew name). May the Holy One, Blessed be He, be merciful and strengthen and heal him/her. Grant him/her a complete and speedy recovery- healing of body and healing of soul.
And let us say: Amen.

PRAYER FOR HEALING

G-d of wholeness,
G-d of healing,
Hear our words,
Accept our prayers;
Send a special blessing of healing to (Hebrew name)
Son/daughter of (mother's Hebrew name),
Among all those of Your children
Who are in need of Your healing blessing.

- Rebbe Nachman of Breslov
(1772-1810)

MOSES' PRAYER

Address G-d in your own words. A brief prayer for healing that we find very early in our tradition comes from Moses, our teacher. The prayer is a simple and urgent plea for his sister Miriam's recover.

Please God, please heal her.
- Numbers 12:13

A HEALER'S PRAYER

Most High G-d, before I begin my holy work,
healing those whom you have created,
I send my prayer before before your Throne of Glory,
that you may give me courage and energy to do my work in good faith,
and that the aspiration for public acknowledgement should not blind my eyes from
seeing the truth.

Make me worthy to look upon every sufferer who comes to ask for my advice,
as a person, without making a distinction between the rich or poor, friend or foe,
good or wicked – that I only see the person in pain.

If greater healers than I try to teach me understanding,
give me the desire to learn from them, for there is no end to the knowledge of healing.
Let not foolish persons try to affect my knowledge.
I love this work.

Please strengthen my resolve, so that I don't consider the age or honor of those who are
trying to mislead me.

Let only the truth guide me, for overlooking anything can lead to a great tragedy or
illness to one of your creations.

I beseech you, O Lord, the Merciful One,
to make me strong and energetic in body and soul,
and to plant in me a perfect spirit.

– Moses ben Maimon (Maimonides)
12th century

KOHELET AND COMMUNITY

Two are better than one; because they have a good reward for their labor. For should they fall, one can lift the other; but woe to him who is alone when he falls and there is no one to lift him.

- Kohelet/Ecclesiastes 4:9-10

The strength and continuing vitality of a community rests on the ability of its individual members to care for one another, especially in times of need. Kohelet suggests the positive benefit of helping one's fellow, and cautions that the individual alone, living in isolation cannot thrive and flourish. Thus, out of practical necessity, we must be alert to and mindful of the needs of our fellow and in turn, have the confidence that they will be similarly responsive to our needs. Such "compassionate reciprocity" assures all community members the ongoing support and attention necessary to live secure and meaningful lives, and to receive "a good reward for their labor."

Building on centuries of tradition, the mitzvah of bikur cholim continues to be critically important as the embodiment of each individual's commitment to create a caring, inspired, compassionate community.

We visit, we grow, we build; *we* make a vital difference.



A hug. A kind word.
A hand to hold. The greatest gifts of all.
May you give them freely, and receive them abundantly.

- Lands End Holiday Catalog, 2007