

Collaborative Name	Essex
Date of Event	25 September 2006.
Attendance	Jenny Thompson; Peter O'Driscoll; Gareth Rowlands; Susan Iskander; Guy Goodall; Louise Morrissey; Mark Thompson; Richard Smith
Summary of discussion	<ol style="list-style-type: none"> 1. Brief consideration of the responses to the Baseline Questionnaire. 2. Data: <ol style="list-style-type: none"> a. Broomfield beginning to find out much more about what is needed <ol style="list-style-type: none"> i. A significant encounter every 8 beds. A significant encounter means focus on spiritual and/or religious issues and/or if patient talk about hobby, football team etc for at least 10 minutes. ii. 26 bed ward covered in 1.5 hrs. iii. Chapel attendance matches % church attendance. 3. Brief discussion about Models of chaplaincy and access to patients 4. SH provided update on the DH Project: patient access to spiritual care and compliance with the DPA. 5. Basildon & Thurrock: preparing to roll out their own version of the data system in use by Sheffield chaplaincy in 01/07. 6. Discussion following Paul Taylor's proposal for chaplains to work on short-term project wrt cost benefits of chaplaincy. Overall support for this piece of work. 7. Local issues: <ol style="list-style-type: none"> a. Planned PFI at Colchester now cancelled; an alternate build now proposed. New chaplaincy centre going ahead with this new plan. <ol style="list-style-type: none"> i. Priorities – keep multi-faith centre on track ii. Go ahead with Business Plan for 2 w/t chaplains – one for PCT and one for acute site. iii. MH with Essex Rivers chaplaincy requiring resolution. b. Basildon <ol style="list-style-type: none"> i. – Business case for 3rd w/t post going before CD Board soon to request 0.7 funding stream. ii. S Essex MH chaplaincy now alert to MH chaplaincy and provided 4.0 sessions/wk. S Essex MH Trust is now a FT. iii. NICE Ch.7 Project Group – progress report endorses creation of a chaplaincy service representing major world religions. iv. Specialist Cancer ward to open at Basildon and the Macmillan nurses want chaplaincy input. v. The questionnaire from chaplaincy to staff regarding service improvement now approved with roll-out due in 3 -4 months. vi. Completion of Operational Standards Document will form basis of this audit. c. Mid- Essex <ol style="list-style-type: none"> i. Turnaround team expected ii. All paed and maternity services to be based at Broomfield iii. PFI not going ahead; this affects chaplaincy plans

	<ul style="list-style-type: none"> iv. Has policy wrt care of the dying and the dead, but no-one in a position to take it further so that it becomes Trust policy. v. New LM for chaplaincy d. PAH <ul style="list-style-type: none"> i. Fetal disposal ii. Data collection roll-out iii. Intranet – chaplaincy page iv. 06/07 chaplaincy strategy e. N Essex MH <ul style="list-style-type: none"> i. SLA with 3 Acute chaplaincy services currently. Meeting set to gain more detail in relation to the development of spiritual care policy using W Sussex policy as a template ii. Intranet based information about chaplaincy resource available to staff in the Eastern region as a whole iii. Networking with ‘Mind and Spirit’ groups in local communities, especially those with interest in MH and spirituality. Conference planned on this for 2007. 8. General discussion about disposal of non-viable fetuses; KSF for chaplaincy 9. Steering Group <ul style="list-style-type: none"> a. Involvement of p/t chaplains b. HEI links + educational input – short audit c. Invite Archdeacon of Chelmsford (Bishop’s Officer) to attend when diary permits d. Next meeting 5 December 2005 at Stapleford House, Chelmsford at 1230.
Summary of action agreed	1. SH to contact PT to arrange time to meet with Project Officer to discuss proposal in more detail
Resources generated for inclusion	