

Some Questions Facing Chaplains – looking for answers

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Specific Questions

- What does the NHS require of its Chaplaincy service?
- What description of practice fits the needs of your Trust?
- What are the next steps?

“Responsibility rests on NHS trusts for delivering religious and spiritual care in a way that meets the diverse needs of their patients“

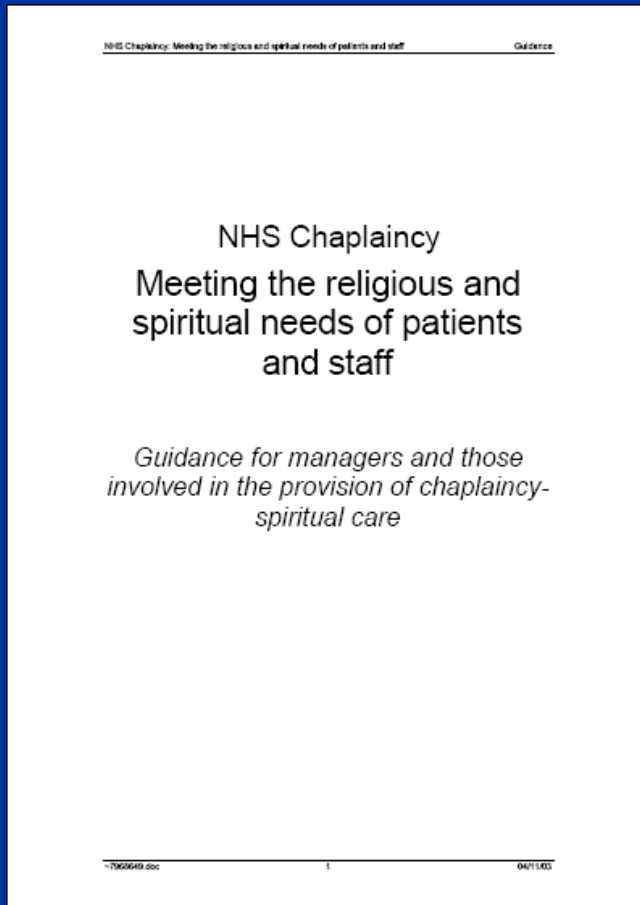
(Lord Hunt April 2007 Hansard)

Tony Blair hopes that

“they (Trusts) make them (Changes) sensitively, recognising the tremendous pastoral care that is given and its value to local patients; but I do not think it would be right for me to interfere directly in that process.

What does the NHS require of its Chaplaincy service?

Reference document



“Enable chaplaincy services to meet the needs of today’s multi-cultural and spiritually diverse society.” (Chief Nursing Officer - 2003)

“Patients’ religious and spiritual needs have to be addressed as part of an overall care package.”

(Tony Blair 2006 – House of Commons)

“The department remains committed to the guidance *NHS Chaplaincy: Meeting the Religious and Spiritual Needs of Patients and Staff*, ...irrespective of their faith or beliefs.”

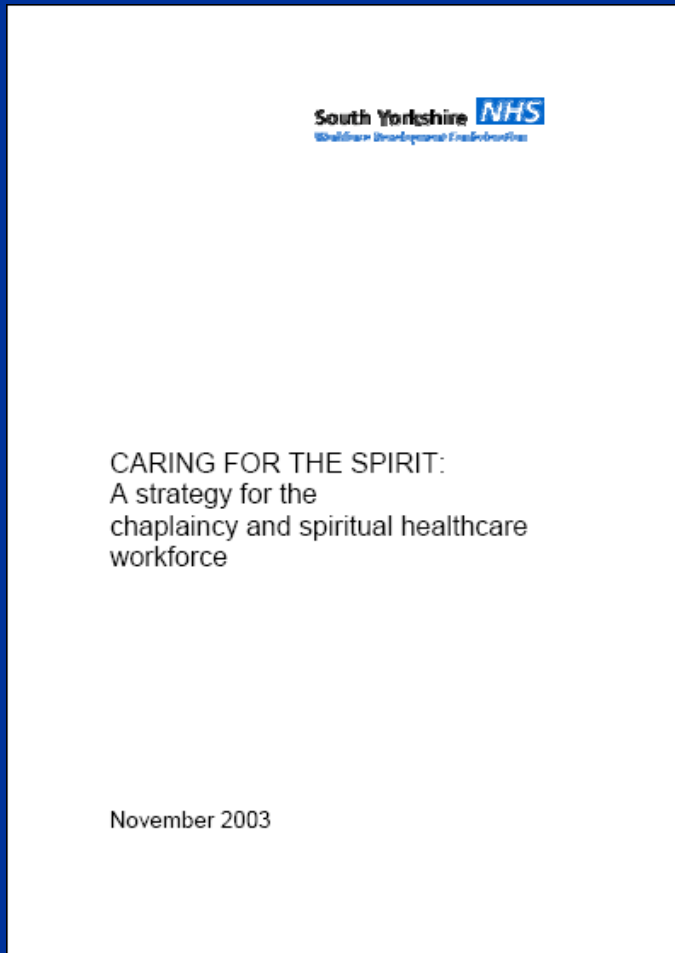
(Lord Hunt of Kings Heath – Hansard 20 April 2007)

One of the key aims of this guidance is to enable chaplaincy services to meet the needs of today's multi-cultural and spiritually diverse society.

Adequate arrangements are made for the spiritual, religious, sacramental, ritual, and cultural requirements appropriate to the needs, background and tradition of all patients and staff, including those of no specified faith. (NHS Chaplaincy 2003 p8).

What do we have to help us meet the challenge of this key aim?

What description of practice fits the needs of your Trust?



A conversation to be had with Employers and Commissioners

How does your Trust take account of the increasing religious complexity of our multi-faith society and the consequent diversity in personal spiritual needs?.

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What are the next steps?

What is the evidence for the chaplaincy's strategically helpful contribution to the delivery of healthcare which supports the Mission Statements and the Objectives of the Trust's who employ us?

Chaplains accompany people as they navigate the uncertain territory in which they find themselves when confronted by illness, either their own or that of those for whom they care, and to comfort and support the bereaved.

Models of “Doing” Chaplaincy

“Theoretical models are developed to describe and define the way things work through structuring what occurs and providing a rationale for it”.

(Models of Healthcare Chaplaincy Practice. Folland, M. 2006)

- Develops the understanding of what we do.
- Encourages examination of practice using different approaches to theological reflection.
- Promotes and profiles good practice.



Health reform in England: update and commissioning framework

Annex
the commissioning framework



The commissioning framework sets out an over-arching vision for the commissioning role of the Primary Care Trust (PCT).

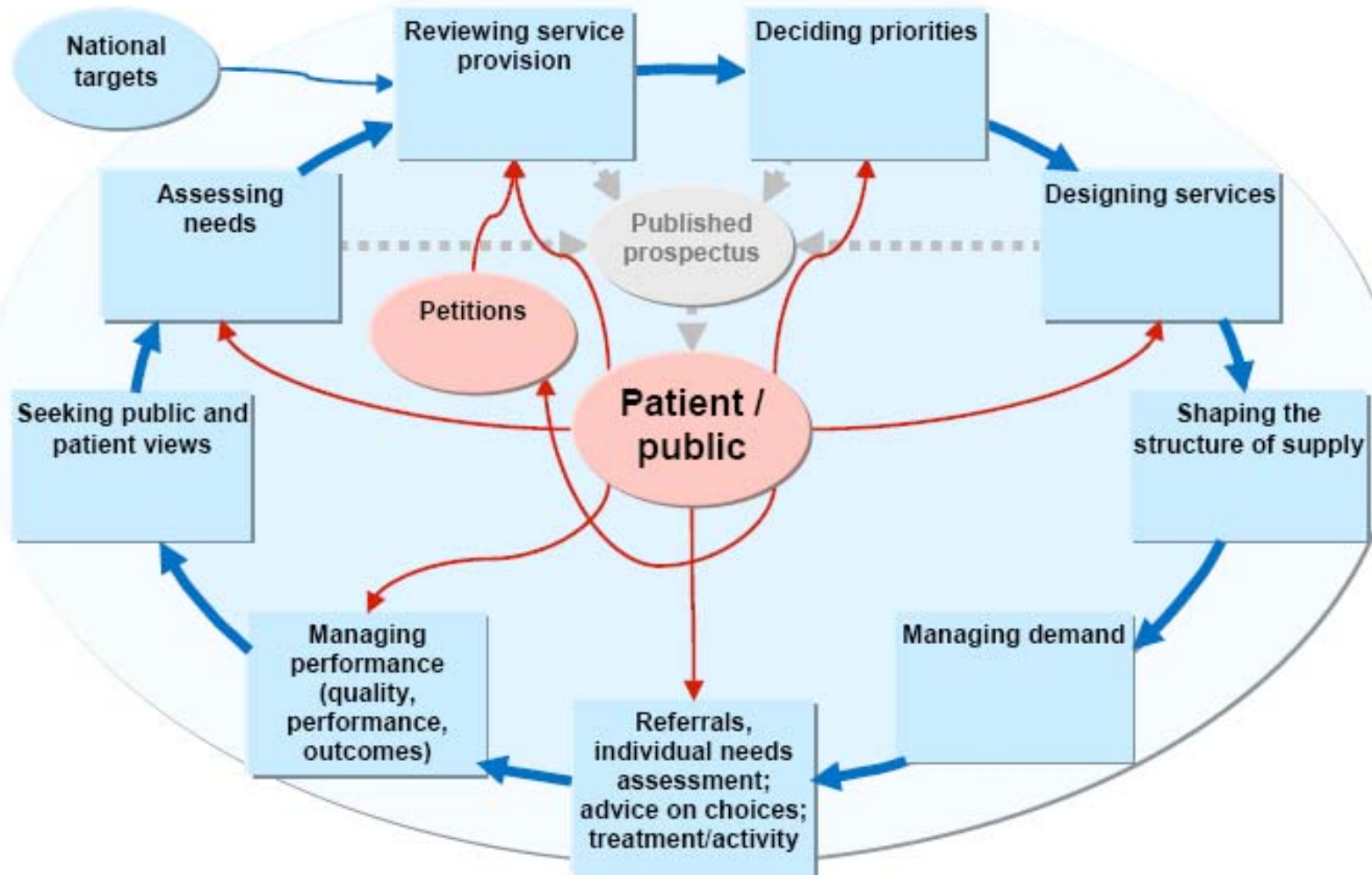
The framework has been informed by the valuable work of the Third Sector Commissioning Task force

The document defines the goals of effective commissioning and describes how these goals will be achieved.

Moving to the future

	Current Chaplaincy service model	Proposed chaplaincy service model
Determination	Provided in accordance with policy guidance and local agreements	Commissioned by PCTs with other healthcare services
Service area	Linked to healthcare institutions	Focusing on geographical areas and populations
Demand drivers	Related to ratios established in 2003	Driven by User and Patient experience
Educational framework	Developed according to local chaplaincy interest	Related to curriculum development through HEIs
Research framework	Developed according to local chaplaincy interest	Related to evidence base published in 2007

Health reform in England: update and commissioning framework (DH 2006)



The spiritual healthcare workforce practice model

- A multi-professional perspective.
- Chaplains as trainers to the healthcare team. .
- Imaginative approach (See Handout)

Implementing changes in chaplaincy provision

A Strategy to discuss