The Professional Status of Roman Catholic Healthcare Chaplaincy

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These briefings are compiled by the Healthcare Reference Group of the Catholic Bishops' Conference of England and Wales, and are written by serving health professionals, researchers and policymakers.

Key Points

- □ The Church agrees with Department of Health policy on ensuring chaplains are well trained, properly accountable and well managed.
- □ This should be done in partnership between the Church and the Faith Communities, not by the NHS alone, as envisaged by NHS guidance.
- □ The Church has produced a framework *Caring for the Catholic Patient* to help NHS Trusts and the Church work together to manage this process, and to produce improved outcomes for patients and NHS staff.
- The Church acknowledges the NHS expectation that Chaplains be part of the NHS workforce and paid as such – as recommended by NHS guidance on Chaplains.
- □ The Church recognises and appreciates the line management of chaplaincy under the office of the Chief Nurse.
- The Church advises that the NHS must employ Chaplains as a statutory necessity for every NHS Trust, and that they are representatives of major Christian denominations and major faiths.

Statistics

- The DoH's own figures taken from 2001 Census indicate that 8.3% of the population of England & Wales is Catholic. The Bishops' Conference of England and Wales estimates that there are 4.1 million Catholics in England & Wales.
- NHS Trusts treat 1 million people per day (approx) of these 83,000 would be Roman Catholic.
- Of 420 NHS Whole-time paid chaplains 27 are Roman Catholic. Three Roman Catholics are Trust Chaplaincy Team Leaders. The majority of Roman Catholic Chaplains are employed as part-time: 131.

Professional Status of RC Chaplains

The professional status of Roman Catholic Chaplains rests on four important areas.

- Firstly: that they are in good standing with the local bishop, and have been thoroughly checked, according to NHS and Church procedures, before appointment.
- Secondly, that they have received proper training and formation. This tuition may either be ordination training or a lay theological degree. An example of a professional qualification for Catholic Chaplains is the Foundation Degree in Healthcare Chaplaincy available at St Mary's University College, Twickenham.



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- Thirdly, Catholic chaplains work within a framework of lifelong formation. This is compatible with "Agenda for Change", and the increasing importance of reflective practice within the NHS. Catholic chaplains are encouraged to attend chaplaincy professional development days, study afternoons, and "collaboratives" thus to enable them to keep up to date with changes in NHS policy and good practice. Very often, however, RC Chaplains are part time and NHS trusts may be unwilling to pay for the time they need to do this important reflection and supervision.
- Lastly, Catholic chaplains are mentored, not only by NHS line managers, but also by the local Bishop Healthcare Chaplaincy advisor. The view of the Church is that all of these are necessary, and all are supported by NHS guidance, as well as the Church's own frameworks.

Recent NHS Guidance on Healthcare Chaplaincy:

- The Human Rights Act, introduced in October 2000, enshrines in law the right of the individual to religious observance.
- □ **The NHS Plan, Your Guide to the NHS** provides national standards for respect of privacy and dignity, religious beliefs and people's spirituality.
- NHS Chaplaincy: Meeting the Religious and Spiritual Needs of Patients and Staff, issued by the DoH in 2003 – an NHS document highlighting the necessity of Chaplaincy within a hospital setting.
- Caring for the Spirit a series of policy documents aimed at Chaplains and hospitals. An NHS initiative provided by the SHA of South Yorkshire to regularise and formulate a career pathway for chaplains
- **Employment Equality** (Religion or Belief) Regulations 2003 Religion or belief to be a core requirement of respect when employing NHS staff.
- Standards for Better Health 2004 an NHS document of self assessment. Standard D2 recognises the importance of meeting the spiritual and religious needs of patients.

The need for chaplaincy has also been specified in:

- A Policy Framework for Commissioning Cancer Services: Calman Hine Report 1995
- The Framework for Paediatric Intensive Care 1997
- The NHS Cancer Plan 2000
- NICE Guidance for Cancer Services 2004
- The NSF for Renal Services 2005
- The NSF for Long Term Conditions 2005
- The NSF for Older People in General Hospital Care 2005
- Kings College, Univ of London, Report to the National Cancer Action Team 2007.

Legislative evidence and clinical reports make it clear that the NHS must enshrine respect for religious and spiritual expression as a core principle as well as serving that need by requiring that all NHS trusts must employ chaplains.

For further information about our work contact us

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