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# GUIDELINES FOR HOSPICE AND PALLIATIVE CARE CHAPLAINCY

(Second Edition 2006)



ASSOCIATION OF HOSPICE  
& PALLIATIVE CARE CHAPLAINS

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## Introduction

The Association of Hospice and Palliative Care Chaplains (AHPCC) is the professional organisation for chaplains and those whose primary role is providing spiritual care in hospices and specialist palliative care units. This guidance is offered as an informed source of advice for those reviewing chaplaincy appointments.

Spiritual care is a core element of palliative care (World Health Organisation, 2002). While it is recognised that all staff and volunteers have the potential to provide spiritual care, chaplains have a particular role and expertise to offer patients, their families/carers, and members of staff and volunteers (AHPCC, 2003; MCCC, 2003).

Within western palliative care the spiritual dimension of the human being is widely interpreted as referring to that which gives transcendent meaning and aspiration to a person's life, and may or may not include God. Spirituality concerns all that makes for an individual's existence as a person and our capacity as human beings for self-transcendence, relationship, love, desire, creativity, altruism, self-sacrifice, faith and belief. It follows that all people have spiritual needs, and experience demonstrates that such needs and concerns are brought into sharp focus when people are faced with a life threatening illness in themselves or in those they care for.

## Chaplain (spiritual care coordinator)

A chaplain is a person appointed to provide spiritual and religious care to all patients, visitors, staff and volunteers in the healthcare setting regardless of faith or life stance. A chaplain can be ordained or lay with an acknowledged status within a mainstream faith community. A chaplain may also have the title spiritual care coordinator or similar (AHPCC, 2003).

## Chaplaincy and the multidisciplinary team

*Clinical Standards for Specialist Palliative Care* recognise chaplaincy as a core profession in the multidisciplinary team (CSBS, 2002). Hospices and specialist palliative care units in Scotland must have an appointed chaplain who attends multidisciplinary team meetings in order to meet their NHS Quality Improvement Scotland requirements. Other national documents such as the National Institute for Clinical Excellence *Guidelines for Improving Supportive and Palliative Care for Adults with Cancer* (NICE, 2004), though fully supportive of chaplaincy and multidisciplinary team working, do not detail or describe 'palliative care chaplaincy' as it is provided in hospices (NICE, 2004; NHS, 2003; NHSScotland, 2002). The AHPCC recommends that chaplains work as members of the multidisciplinary team and are resourced to attend multidisciplinary team meetings.

## Data protection

As recognised members of the multidisciplinary team chaplains should have the same access to patient notes as other team members and record their response to referrals and interventions (AHPCC, 2003 Standard 3; DoH, 2002 H2.1, H2.4).

## Standards and competencies

The clinical standards and national guidelines referred to above set standards for chaplaincy and the provision of spiritual and religious care in general (NICE, 2004; CSBS, 2002). The AHPCC (2006) *Standards for Hospice and Palliative Care Chaplaincy* give details of what hospices should expect to provide through a chaplaincy service:

1. Access to chaplaincy
2. Spiritual and religious care
3. Multidisciplinary teamworking

4. Staff support
5. Education, training and research
6. Resources
7. Chaplaincy to the unit

The particular expertise or 'competence' that can be expected from individual chaplains has been detailed in Marie Curie Cancer Care's *Spiritual and Religious Care Competencies for Specialist Palliative Care* (MCCC, 2003). The document details four levels of competence for members of staff and volunteers. Chaplains can be expected to meet or work towards the Knowledge, Skills and Actions at Level 4.

### **Code of Conduct**

The Association of Hospice and Palliative Care Chaplains endorses the *Health Care Chaplains Code of Conduct* and commends it to all hospice and palliative care chaplains as a reference document for best practice in contemporary healthcare chaplaincy (AHPCC, CHCC & SACH, 2005).

### **Job summary**

Chaplains, as members of the multidisciplinary team, are appointed for the spiritual and religious care of all patients, visitors, staff and volunteers, regardless of faith or life stance. They seek to support others in their search for meaning and hope, and to provide an informed ethical, theological, spiritual and pastoral resource for individuals and as part of their unit's education, training and research programme. The chaplain will facilitate the provision of inclusive worship and religious expression, reflecting the faith groups represented in the unit, and in response to individual need.

## Core duties

- The spiritual and religious care of all patients, visitors, staff and volunteers in the hospice/unit.
- To ensure the hospice chaplaincy service meets the *Standards for Hospice and Palliative Care Chaplaincy* (AHPCC, 2006).
- To ensure the hospice/unit meets the relevant NICE *Guidelines* or *Clinical Standards* (NICE, 2004 Section 7: England & Wales; CSBS, 2002: Scotland).
- To work towards achieving the Knowledge, Skills and Actions of the *Spiritual and Religious Care Competencies for Specialist Palliative Care* (MCCC, 2003).

## Professional qualifications and experience

- An acknowledged status within a mainstream faith community.
- Theological qualification.
- Postgraduate qualification in palliative care (or undertake study).
- At least five years' parish/chaplaincy or similar life experience.

## Chaplaincy provision

The AHPCC believes that the growing complexity and development of hospice and specialist palliative care is not reflected in national NHS guidelines (NHS, 2003; NHS HDL (2002) 76) and recommends the following provision:

- units under 16 beds - minimum of a half-time appointment;
- units with 16 beds or more - minimum of a full-time appointment

Chaplaincy commitment to day services and community services should also be taken into consideration.

## Salary, terms and conditions

The AHPCC recommends that employers follow the scales, terms and conditions for chaplaincy set out in the NHS Agenda for Change (DOH, 2003). Hospice and specialist palliative care chaplaincy is a 'specialist' chaplaincy as defined by the South Yorkshire Strategic Health Authority (SYWDU, 2003).

## Interview panel

It is recommended that:

- an experienced hospice or specialist palliative care chaplain should form part of an interview panel;
- all panel members have an understanding of the relevant documents referred to in the **Core duties** section above (AHPCC, 2006; NICE, 2004; MCCC, 2003; CSBS, 2002).

## Induction, professional development and supervision

It is recommended that:

- all newly appointed chaplains be given an induction programme within their organisation;
- all chaplains receive an annual appraisal as part of their personal performance review and development, and identify and agree their education and training needs (AHPCC 2006 Standard 6.a.5.);
- all chaplains keep a record of evidence of continuing professional development (AHPCC 2006 standard 5.5);
- all chaplains receive external professional supervision (AHPCC 2006 Standard 6.a.6).

## Advertising chaplaincy appointments

It is unlikely that local advertising will attract suitable applicants.

It is recommended the following be considered:

- Church press
- National press
- Healthcare Chaplaincy Training and Development (NHS Education Scotland) <http://www.chaplains.co.uk/>
- HealthJobsUK.com [www.healthjobsuk.com](http://www.healthjobsuk.com)
- Hospice Information <http://www.hospiceinformation.info/>

## Further information

Further information may be available from the AHPCC secretary.

Current contact details are available at [www.ahpcc.org.uk](http://www.ahpcc.org.uk)

## References

**AHPCC** (2006) *Standards for Hospice and Palliative Care Chaplaincy*. Association of Hospice and Palliative Care Chaplains, Help the Hospices, London. [www.ahpcc.org.uk](http://www.ahpcc.org.uk)

**AHPCC, CHCC & SACH** (2005) *Health Care Chaplains Code of Conduct*. Association of Hospice and Palliative Care Chaplains, College of Health Care Chaplains, Scottish Association of Chaplains in Healthcare. [www.ahpcc.org.uk](http://www.ahpcc.org.uk)

**CSBS** (2002) *Clinical Standards Board for Scotland: Clinical Standards for Specialist Palliative Care*. NHS Quality Improvement Scotland (formerly the Clinical Standards Board for Scotland), Edinburgh. [www.nhshealthquality.org](http://www.nhshealthquality.org)

**DoH** (2003) *Agenda for Change – a modernised NHS pay system*. Department of Health <http://www.doh.gov.uk/agendaforchange/>

**DoH** (2002) *National Minimum Standards and Regulations for Independent Health Care*. Department of Health, Her Majesty's Stationery Office, Norwich



## PROMOTING CHAPLAINCY IN PALLIATIVE CARE

**MCCC** (2003) *Spiritual and Religious Care Competencies for Specialist Palliative Care*. Marie Curie Cancer Care, London  
<http://www.mariecurie.org.uk/downloads/healthcare/spirit.pdf>

**NHS** (2003) *NHS chaplaincy: meeting the religious and spiritual needs of patients and staff*. Guidance for managers and those involved in the provision of chaplaincy – spiritual care. Department of Health, London [www.doh.gov.uk/chaplain](http://www.doh.gov.uk/chaplain)

**NHS HDL** (2002) *Guidelines on Chaplaincy and Spiritual Care in the NHS in Scotland*. NHSScotland Health Department Letter (2002) 76, Scottish Executive Health Department, Edinburgh.  
[http://www.chaplains.co.uk/hdl\(2002\)76.pdf](http://www.chaplains.co.uk/hdl(2002)76.pdf)

**NICE** (2004) *Improving Supportive and Palliative Care for Adults with Cancer Manual*. National Institute for Clinical Excellence, London. <http://www.nice.org.uk/pdf/csgspmanual.pdf>

**SYWDU** (2003) *Caring for the Spirit*. South Yorkshire Strategic Health Authority (Formerly the South Yorkshire Workforce Development Unit): [www.sywdc.nhs.uk](http://www.sywdc.nhs.uk)

**World Health Organisation** (2003) WHO Definition of Palliative Care. World Health Organisation.  
<http://www.who.int/cancer/palliative/definition/en/>

### Professional chaplaincy organisations

**Association of Hospice and Palliative Care Chaplains (AHPCC)**  
[www.ahpcc.org.uk](http://www.ahpcc.org.uk)

**College of Health Care Chaplains (CHCC)**  
[www.healthcarechaplains.org](http://www.healthcarechaplains.org)

**Scottish Association of Chaplains in Healthcare (SACH)**  
[www.sach.org.uk](http://www.sach.org.uk)

**Chaplaincy Academic and Accreditation Board (CAAB)**  
[www.cabwed.org.uk](http://www.cabwed.org.uk)

## Healthcare organisations

**Healthcare Chaplaincy Training and Development, NHS**  
Education for Scotland. [www.chaplains.co.uk](http://www.chaplains.co.uk)

**South Yorkshire Strategic Health Authority (SYSHA)**  
[www.southyorkshire.nhs.uk](http://www.southyorkshire.nhs.uk)

## Religious organisations

**Church of Scotland, Chaplaincies Task Group**, Ministries  
Council, 121 George Street Edinburgh EH2 4YN

**Hospital Chaplaincies Council of the General Synod of  
the Church of England (HCC)**  
[www.nhs-chaplaincy-spiritualcare.org.uk](http://www.nhs-chaplaincy-spiritualcare.org.uk)

**Multi-Faith Group for Health Care Chaplaincy (MFGHC)**  
[www.mfghc.com](http://www.mfghc.com)

**The Free Churches Group Healthcare Chaplains Steering  
Committee, Churches Together in England**, 27 Tavistock  
Square, London WC1H 9HH

**The Roman Catholic Conference of Bishops**, 39 Eccleston  
Square, Victoria, London SW1V 1BX

## Professional journals

*Contact* The interdisciplinary journal of pastoral studies

*Journal of Health Care Chaplaincy*  
[www.healthcarechaplains.org/journal](http://www.healthcarechaplains.org/journal)

*Scottish Journal of Healthcare Chaplaincy*  
[www.sach.org.uk/journal](http://www.sach.org.uk/journal)