

# CHCC ANNUAL REPORT 2011/2012

CHCC COLLEGE OF  
HEALTH CARE  
CHAPLAINS



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## PRESIDENT'S REPORT

Mark Burleigh

It seems incredible that it is now over 6 months since I succeeded Mark Stobert as College President. I want to begin my report by paying tribute to Mark's enthusiasm, commitment, wisdom and hard work during his two and a half years as President. As members of the CHCC we all owe him a debt of gratitude – thank you Mark.

In the past few months we have also bade farewell to Carol English, who for many years has worked tirelessly for the interests of chaplains. She has travelled around the UK supporting chaplains and negotiated nationally – for example ensuring that chaplains' Agenda for Change bandings came out at the appropriate level. She also negotiated the national RRP for chaplains and more recently tried to fight to secure an accommodation allowance for chaplains when the decision was taken by the NHS to abolish the National RRP's. Thank you Carol - we wish you a very happy retirement! And rest be assured, Unite is still working on this issue.

During my first 6 months as President I have made it my aim to meet many key players in the Chaplaincy world. These have included representatives from the Multi Faith Group for Healthcare Chaplaincy, the Church of England's Director of Mission and Public Affairs, the UKBHC, the Free Churches Group and the Churches Committee for Health Care Chaplaincy.

In all these meetings I have been pleased to feel that all the bodies involved in healthcare chaplaincy are wanting to work together to promote Spiritual and Religious care to patients. At a time of financial stress in healthcare, it is vital that we all work together and present a united force of chaplaincy and for the care of patients.

I have also been to a number of training events. In particular I attended the Faiths Day training run by Rakesh in Birmingham in June. This worthwhile event left me reflecting on the two worlds we work in and the two languages we need to speak. We each have one foot in our faith community, and speak the language of faith when we talk about our work. However, where our services are publically funded, we also rightly have the other foot in the world of secular healthcare provision and need to speak that language too.

Some have argued that chaplaincy should not be funded from the public purse because chaplains do the work of the faith

communities. That is wrong! Chaplains are doing the work of the healthcare providers, by contributing to holistic care – particularly at times of great stress and sadness for patients and their families. For example chaplains are a part of NHS provision, and so are funded as such.

I am looking forward to the annual study course in Swanwick in September (11th-13th) and hope to see many of you there. The AGM will be held on the 12th, and it is an opportunity to meet a number of members and to hear what your concerns are at this time.

I am also immensely grateful to all the members of the Organising Professional Committee (formerly the National Professional Committee). Without their hard work and commitment it would be impossible for the College to function. Please support your local representatives in the work they do - acting as a vital bridge between the grass-roots members and the national direction and priorities of the CHCC.

May I also pass on your thanks to our Registrar, William Sharpe for his hard work. I know he is a great support to me in the work I do.

I hope you will find this annual report interesting and informative. If you wish to contact me, do drop me an email to [president@healthcarechaplains.org](mailto:president@healthcarechaplains.org).



## REGISTRAR'S REPORT

William Sharpe

### 1. Membership

Over the past few years, College membership has declined significantly, possibly due to the current financial pressures facing the NHS and colleagues moving into other professions. Other factors are a fraction of members reaching the retirement age and lapse of membership.

As at 1st July 2012, total membership of the College was 750, consisting of

Whole-Time	437
Part-Time	243
Retired	70

The following is the breakdown of members whose subscriptions are due:

SP1 (1 – 12 weeks arrears)	171
SP2 (13 – 26 weeks arrears)	24
SP3 (over 26 weeks)	96

The above figures show that the actual paying membership of the College currently stands at 630.

In order to have continuing Professional Liability Insurance Scheme (PLI) provided by Unite to cover for any claim made against you by a patient, colleague or member of the public, members are encouraged to pay their membership subscription by direct debit mandate to avoid falling into arrears.

In the first six months of 2012, I have processed 18 new members (compared to 28 in June 2011) of which 10 are full time chaplains and 8 part-time.

### 2. Organising Professional Committee (OPC) Elections

In bringing uniformity across all the structures in the health sector to have a professional and industrial focus, as well as giving support to members, Unite proposed all national committees to be called Organising Professional Committee (OPC) previously called National Professional Committee (NPC).

Also, Unite has moved towards one unified electoral cycle across all Regions, Branches and Workplaces with office for 3 years. This changes the College OPC representatives from a two year term

to 3 years. An election will be going out shortly to all the regions in UK.

It is important having regional representatives for all the regions, in order to have the College function fully and urge members to consider electing a Representative nearer the balloting date.

We acknowledged the retirement of Carol English, the Professional Officer CHCC/Unite, in May 2012, after 15 years of service in the health sector. She has worked very hard for Healthcare Chaplaincy. She will be dearly missed. Her post and one other vacant post have been advertised and there will be someone who will pick up her work in the near future.

In the meantime any issues can be related to me or Obi Amadi who is the Lead Professional Officer in Unite.

### 3. Communications with Members

Communicating to members is one of my key areas of getting vital information across. However, there are a few drawbacks where we do not hold the correct details for some members and unable to reach them. I will encourage members to update their records directly to me or via CHCC website.

I continue to arrange and attend OPC, Executive, regional and national meetings. Contact with the President, OPC and Executive members has been regular and frequent in keeping the running functions of the College.

### 4. Conclusion

CHCC needs to have its voice heard across the Healthcare professions in UK but with reducing numbers, we will find it difficult to "shout out loud". I therefore, encourage a growth strategy through areas such as the CHCC Introductory course, Faiths day conference, regional meetings and at members' place of work.

Chaplains are faced with some challenges in the current climate under the NHS with issues relating to NRRP, pensions, cutbacks, frozen posts and a major attack on Agenda for Change. I am aware of the impact to colleagues and therefore like to recognise the tasks of the Presidents of the Professional bodies in UK, the United Kingdom Board of Healthcare Chaplains (UKBHC) and Unite during this time, to continue to promote the role and work of Healthcare Chaplains.

As ever, it is great working for CHCC and in particular I must thank the Executive and OPCs for their work to members. I am also grateful to Carol English for being a good colleague and valuable experience to the excellent work done for CHCC and for the support given during her time in CHCC/Unite. I look forward to continuing to support members best as I can.



## HON TREASURER'S REPORT – YEAR ENDED 31ST DECEMBER 2011

Nick Flood

### BRANCH FUNDS

#### Receipts

Proportion of Members' Subscriptions	2106.00
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#### Payments

Web Site Maintenance/Development	838.80
ENHCC Subscription	196.16
Postages & Stationery	50.00
President's Travelling Expenses	434.50
Professional Fee re Questionnaire	300.00
Sub-Branches	288.10
Funds withdrawn under rule 20	17.08

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2124.64

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#### Excess of Payments over Receipts

18.64

Cash & Bank Balances at 1st January 2011

18.76

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#### Cash & Bank Balances at 31st December 2011

0.12

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### BURSARY & TRAINING FUNDS

#### Funds generated by

Annual Study Course	1837.07
MHRG Conference	4075.55
MHRG In-service training	555.00
Introductory Courses	1243.60
Faiths Day	(25.00)
Beyond the Boundaries	(205.75)
Registration Matters (2010)	60.00

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7540.47

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#### Payments

Journal Publication	6044.34
Bursaries	1700.00
Miscellaneous	117.47

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7861.81

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#### Net Payments

321.34

Cash & Bank Balances at 1st January 2011

20971.86

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#### Cash & Bank Balances at 31st December 2011

20650.52

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#### Notes

The accounts are prepared on a cash basis therefore income from Courses and Conferences is only accounted for when actually paid.





## TRAINING & EDUCATION SUB-COMMITTEE REPORT

Simon Betteridge

The last 12 months have seen successful and hopefully fruitful conferences, the annual study conference held at the University of East Anglia last September and the mental health conference at Hinsley Hall in Leeds in October. These were followed by a residential introductory course in November.

The underlying theme of the last year has been the ability to fund training or more to the point not being able to. We continue to make efforts to make training accessible although clearly, if like many, there simply is no training budget this

becomes very difficult. As promised efforts have been made to make events like the annual conference more affordable; places at this year's conference in September have been available at almost 40% less than last year. We also continue to work with others towards an online introductory training course.

This year's conference itself will be held at the Swanwick conference centre in Derbyshire from 11 – 13 September. We are pleased that this will be held concurrently with the mental health conference. This year's theme will be "Can we make compassion reliable?" and will be chaired by Revd Dr Derek Fraser. There will also be input from Chris Swift. Jason Leitch, Ewan Kelly, Peter Gubi, Valda Swinton and Chris Cook.

Responding to the changing climate and the needs of chaplains continues to be a priority and we will seek to provide training that is relevant and accessible. Please can I encourage everyone to be proactive in bringing forward ideas and sharing the rich resource which is our combined knowledge and experience.



## CONSULTATIONS & COMMUNICATIONS SUB-COMMITTEE REPORT

Anne Dougall

### Journal

The autumn 2011 issue of the Journal was published, with an excellent range of articles and book reviews. The sub-committee are grateful for the work of Revd Meg Burton, Editor of the Journal; Revd John Wood, book review Editor; and to Revd Dr Chris Swift for marketing the Journal. The College are also thankful for the contribution that Unite make in distributing the Journal.

The winter 2011 volume of the Journal included a questionnaire to gain the views of readers regarding the content, format, and distribution of the Journal. Five hundred questionnaires were distributed but only fifty one questionnaires were returned. Most responders were happy with the format, content and production

of the Journal. A number of members did indicate that they had not received a hard copy of the Journal, and members are encouraged to ensure that the College and Unite have their correct mailing address for the distribution of the Journal. Meg Burton is working on the production of the spring and autumn 2012 editions of the Journal.

### Website

The Journal and the Mental health resource group newsletter can be accessed by members on the College website. The sub-committee is grateful to Mark Burleigh who continues to be the webmaster for the College website. Regional representatives continue to keep their section of the web page up to date with news of local meetings and events. Members can now log in to the website to update their email address. The group are looking at ways of promoting the College website on other health related websites and in professional publications.

### Consultations

College members were encouraged to send responses to the draft report and recommendations of the Commission on improving Dignity in Care. Anne Dougall collated the College Executive's responses to the Council for Healthcare Regulatory Excellence (CHRE) consultation on Voluntary Registers.



## **SUPPORT & SUPERVISION SUB-COMMITTEE REPORT**

Chris Davies

At the April 2012 meeting of the Organising Professional Committee it was agreed to amalgamate two of the existing sub groups into a single working sub committee.

The Group continues to offer to members via e-mail and telephone links, support and advice on matters of employment, terms and conditions and HR issues.

With the retirement of Carol English the group has lost a valuable source of wisdom and expertise in such areas. However it is the intention of the CHCC executive committee to ensure that all members receive from Unite the best possible advice and support available.

Supervision is a key area of concern and interim guidance has been posted on the CHCC website. Further work on this important element of continuing professional development for healthcare chaplains will take place during 2012-2013.

The Electronic Patient Record system is being rolled out piecemeal fashion across England with a variety of providers offering different systems some of which do not appear to be able to communicate with each other. A more unified approach is needed and the group awaits further news from the Department of Health on this matter.



## **MENTAL HEALTH RESOURCE GROUP REPORT**

Richard Allen

Like other areas of healthcare chaplaincy, mental health chaplains are experiencing a time of considerable upheaval. Past evidence indicates that, at times of economic hardship and social uncertainty, the incidence of depression and anxiety increases considerably. Within the healthcare system, mental health chaplains are finding themselves caught up in the process of containing these emotions, especially within the staff cohort. Workloads are increasing, yet chaplaincy staffing remains the same or is on the decrease.

Anecdotal evidence indicates that, where they existed, non-pay budgets including those associated with training have been significantly cut. Whilst few mental health chaplains are involved in issues around on-call payment, there is growing evidence to suggest that the impact of the removal of the national Recruitment and Retention Payment is causing general distress and, in some cases, actual financial hardship.

Within the College, there have been considerable changes in the organisation of the Task Group that represents the Mental Health Resource Group. Julia Head stood down as Chair after three productive years, along with some long-standing

colleagues, including Stephen Bushell who was the group's representative on the Organising Professional Committee.

These changes have necessitated the recruitment of new members to the Task Group. They have brought experience and perspectives from different backgrounds and have enriched our deliberations. However, at least three members of the Task Group have found that time given to the Task Group has been questioned by their employers. Indeed, one was not allowed to attend meetings in work time and has had to subsequently resign. It's yet another sign of the straightened times in which we live and work.

Despite these setbacks, during the last 12 months, the Task Group agreed its Terms of Conditions, which were formally adopted at the AGM. It organised the study conference in 2011, which explored the subject of complex emotions encountered in spiritual care and was attended by over 40 delegates. It also offered two day seminars on Mindfulness and contributed to the College's Introductory Course for Healthcare Chaplains. This year, the Resource Group is meeting in conference in September alongside the remainder of the College.

At its quarterly meetings, the Task Group is now allowing itself some time beyond its business, in order to reflect on some of the significant issues within the College and in the wider healthcare environment. The future is far from clear, but the Task Group wishes to develop its relationships within the College and play a full part in what will be some difficult years ahead in the healthcare arena.



## FAITHS COORDINATOR REPORT

Rakesh Bhatt

I very much enjoy working as a multi-faith co-ordinator. Two years have flown by very quickly and in this time I have done some work towards CHCC and I have found some issues which I would like to share with other CHCC members.

1. I have organised two Faiths study days, one in Leicester and one in Birmingham. Both days chaplains enjoyed themselves but these study days still need more support from CHCC and the OPC. Members need to encourage part-time chaplains to attend so we can make the day more successful.
2. I have provided support and guidance to the appointment of an open post chaplain in London. I am involved in this process so I would like to urge CHCC to do more about chaplains from different faiths becoming GENERIC CHAPLAINS in the NHS because other faiths chaplains are working as part time chaplains and only one or two chaplains are working full time.
3. CHCC members ask various questions about multi-faith work and I try my best to answer these questions.
4. Locally in the West Midlands I have been in contact with local chaplains and encourage them to become CHCC members.
5. I have provided support to local schools about the Hindu Faith.

I have also identified a number of issues relating to professional development and training for faiths chaplains and passed them on to the OPC.





## RESEARCH NETWORK REPORT

Derek Fraser

The research network group has not met formally this year for a number of reasons. That is not to say that all has been quiet on the research front in chaplaincy!

### Summer 2011

A number of interested parties from across the UK gathered in London to brainstorm the agenda and consider ways forward beyond the usual routes we have travelled. Some notes were taken, some actions agreed and we planned to meet in summer 2012 again.

The Scottish chaplains held a conference in Perth in June 2011 which was an exciting day with a variety of contributions from chaplains both north and south of the border. It was a particular pleasure to listen to Daniel Grosseohme from Cincinnati.

### A foundation for research

The creation of the chaplaincy research database was also announced which has begun to develop thanks to pump priming by CHCC funding.

### Glasgow 2012

In March of this year there was an excellent conference which was an opportunity to connect with a range of people from a variety of contexts and settings from across the world. At the end of that conference a dozen or so people with an interest in chaplaincy research gathered to ponder ways of developing this agenda. Some of those people were practitioners and some were theoreticians. Those conversations were worthwhile and valuable in allowing everyone to gain a sense of what was happening and where the future might lie.

- The reality is that few people have dedicated resources to engage with the research agenda.
- The pressure to run the service in these economically pressured times cannot be underestimated.
- The value and vision of chaplaincy research has not been grasped yet.

George Fitchett in his address to the Glasgow conference entitled, *"Evidence-Based Spiritual Care for Chaplains: Desirable? Feasible? How do we get there?"* painted a way forward in the current context which might be helpful to share:

1. Teach research literacy skills to all chaplains so they become research aware.
2. Create research journal clubs in each department.
3. Make research literacy part of chaplaincy registration and the ongoing CPD validation process.

### Conclusions

1. The national CHCC conference this year has a strand of research literacy/awareness woven through it so we can increase the understanding of that aspect.
2. We need to focus on what kind of evidence we need to gather as a profession.
3. The database needs more attention.
4. The way forward is a challenge which needs to be wrestled with more fully.
5. Perhaps we need to keep talking on this subject and sharing of ideas and resources.

It is vital we are not too despairing since progress over the years has been made and we need to advance that pace of change together.

# REGIONAL REPORTS



## EAST MIDLANDS

Jeremy Pemberton

Trent region continues to be active in supporting members. We meet three times a year and welcome speakers as well as taking news from around the region. Members have shared how the current pressure in the national service

has been affecting chaplaincy provision, with a number of trusts experiencing a squeeze on chaplaincy posts. Local negotiations over RRP have only just started to take place, so we do not yet have much experience of how the withdrawal of the national agreement may be replaced. There is a feeling that this part of the package may be lost in many areas, and that this will filter through into a negative effect on recruitment, but there is not enough evidence for this to be something that can yet be used in negotiations. There have been some comings and goings and it has been good to welcome new members.



## EASTERN

Gareth Rowlands

We last met for our AGM on November 17, 2011 at QE II hospital in Stevenage. Derek Fraser and I updated colleagues on developments within healthcare chaplaincy. It has been difficult to get together on a regional

basis but I have been continuing to support colleagues who are currently experiencing challenges. I have also acted as Professional Adviser for a couple of Trusts in the region. I hope that our group will be re-invigorated over the next few months.



## NORTH WEST

Pat Harvey

The CHCC group in the North West has 88 members and is a strong, active, friendly and vibrant group who meet twice a year. We hold study days in collaboration with Chaplaincy Teams and Chaplaincy Collaboratives across the region.

Recruitment and Retention Premium (RRP) and On-call payments are issues which continue to affect members both in this region and nationally.

A study day was held in June 2012. The Keynote Speaker was Revd Tim Presswood, who until recently was Chairman of Thameside NHS foundation Trust. The Annual General Meeting took place as part of the day.

Revd John Hall Chair and Revd Sandra Purvis Secretary agreed to continue in post.



## LONDON

Tim Mercer

Our meetings this year have been well worthwhile, with wide-ranging and useful topics. I will outline the themes for some of our meetings, a few changes in the committee's leadership and membership, and our responses,

through our topics, to the current climate in Hospital Chaplaincy. Chaplains' work in the National Health Service and Private Hospitals, their professional status and their position within communities of religion or belief remain very significant.

Our March 2011 half day meeting was held in the Large Prayer Room at St Thomas' Hospital, Westminster Bridge Road, SE1. The theme was 'Public Affairs and Areas of Concern'. The topics were Assisted Suicide (Irene Carey, Guys and St Thomas' NHS Foundation Trust); the role of The Mission and Public Affairs Committee of the Church of England, which includes healthcare chaplaincy in its remit (Malcolm Brown, MPA); Burrowswood's Ministry (Sue Faunchon-Jones, Burrowswood); and Unite Business especially NRRP advice (Carol English, UNITE).

Our June half day meeting, again at St Thomas, was on the theme of Emergencies/Trauma. The topics were approached through an exploration and workshop (breakout conversation and whole group responses) led by Mark Stobert (Lead Chaplain, Dudley Group of Hospitals and CHCC); 7/7 trauma considered by Paul Hawkins (local priest near the Russell Square bomb) and Chaplaincy in the Metropolitan Police Service with Senior Chaplain, Jonathan Osborne).

In November we held a day conference at Unite HQ in Theobold's Road, WC1 on the broad theme of 'Health Policy-National Trauma'. After a welcome from Revd Mia Hilborn, Hospitalier, Guys and St Thomas' NHS Trust, in the morning we heard from Revd Debbie Hodge, Chief Officer-The Multi-Faith Group for Healthcare Chaplaincy; The Rt Revd James Newcombe, Bishop Of Carlisle and CofE Bishop for Healthcare; and Baroness Julia Neuberger DBE, Senior Rabbi, West London Synagogue. After a good lunch, we heard from Barry Mussenden, Deputy Director, Equality and Partnerships (Department of Health); Gerry Jackson, Psychosocial/Trauma Specialist and then Peter Gudaitis (President, National Disaster Interfaiths' Network, New York) by a video link (which was reduced to an audio link). We were updated by Carol English, Professional Office – Unite/CHCC and finally engaged in reflection with a panel.

Revd William Sharpe, Registrar CHCC, and a London region member kindly provided information about our attendance and membership. The average attendance for meetings was 25, with 45 for the 10th November 2011, and 10 for a recent meeting on June 12th 2012. The membership number in 2011 was 120 and stands at around 101 as present. Our Committee served us well.

Revd Ruth Lambert, from the Chaplaincy at Barking, Havering and Redbridge University Hospitals NHS Trust became Chair of the London Region and Mia Hillborn (GSTT) was thanked for her time as Chair at the November meeting. Ruth now works at Guys and St Thomas.

We looked at other issues, which I will list for consideration in the next report: The Health and Social Care Act; The UKBHC; The Journal; Research; reflective practice; professional registration; supervision; training for chaplaincy volunteers and courses for prospective chaplains. The value of meeting fellow chaplains, mulling over issues and finding out about ways forward can never be underestimated, especially in difficult times.



## NORTH EAST

Kevin Tromans

The region includes the following trusts, all of whom employ chaplaincy teams:

- Tees, Esk and Wear Valleys
- Northumberland, Tyne & Wear
- City Hospitals Sunderland
- South Tees Hospitals
- County Durham & Darlington
- North Tees & Hartlepool
- Newcastle
- Northumbria (North Tyneside)
- South Tyneside
- Gateshead

In addition, some chaplains are employed by, or work under service level agreements in, several hospices of the region, including those in Sunderland, Teesside, and Hartlepool.

At the start of the year our local college membership was 39. One has since retired, one will retire shortly and another will be moving out of the area. Two further retirees have returned taken their pensions and returned to their posts on a part time basis (one also having taken on a national role). One new member has joined.

Three meetings held during the year (Autumn, Spring and Summer) with an average attendance of approximately 18 members.

Main issues exercising members have been the changes to on call as local agreements have replaced AfC, and the removal of nationally agreed RRP/Housing allowance. The picture is varied on both counts, some trusts having negotiated to pay AfC on-call rates as their locally agreed rates, some maintaining payment of RRP. It is perhaps too early to discern the effect these changes will have on recruitment and retention of chaplains, and any picture emerging may be potentially clouded by Trust decisions to change staffing levels among their chaplaincy teams as posts are relinquished. We must wait and see...

Access to patient lists has also been something of an issue highlighted by one trust's removal of any access by chaplains to patient information.

On a more positive note, due honour and praise should be given to the team in North Tees and Hartlepool Hospitals for their excellent work in palliative and end of life care. Paul Salter and colleagues published a full and detailed report of their work in a recent edition of the college magazine – this is worth at least a second read – and the team's work has, I understand, been commended by NICE/CQC.

Perhaps a national benchmark for chaplaincy work with palliative and end of life care has been set here in the North East!



## SOUTH WEST

Chris Davies

The region is a large and complex area geographically. It is therefore extremely difficult to hold a single branch meeting. Chaplains meet in sub groups across the region either under the umbrella of CHCC or as a development

arising from the 'Caring for the Spirit' collaborative project some years ago.

The regional rep offers telephone and e-mail support to members in the region as and when required.

Key issues this past year as with all other regions have been:

- The end of a National RRP.
- Local Harmonisation consultations regarding On Call arrangements.
- Difficulties in recruitment and retention as a result of constantly changing information regarding terms and conditions.
- New ways of the development of funding streams whereby corporate functions are devolved to individual divisions/directorates within Trust organisations. Questions are beginning to be asked as to why say department x should contribute financially to the cost of chaplaincy when it rarely calls upon that service. This is an example of the great changes taking place in the commissioning of tertiary and secondary healthcare provision.

A number of study days have taken place throughout the region and have been advertised on the CHCC website.



## WEST MIDLANDS

Simon Betteridge

The activity of the College broadly functions in two areas which are loosely Coventry and the south of the area and then Birmingham and the Black Country. There are meetings and training held throughout the year in

both parts with mutual support given to colleagues across the region. Sessions have included input on neonatal loss and end of life care.

As with other areas there have been some difficulties and pressure where posts have been under threat and/or not filled when they become vacant. The preservation of RRP has been very mixed across the region, some keeping it with little problem, some staying at 50% and other losing it completely. I am aware there are others who never had it in the first place. There is a general air of uncertainty and concern for the future but this could be said for many other groups within the NHS.

We continue to look at creative ways of promoting the work of chaplains and building positive relationships. In the Coventry and Warwickshire area it is hoped to develop relationships with whoever ends up commissioning services and develop more community based work.



## YORKSHIRE AND HUMBER

Anthony Ruddle

Since my appointment to the NPC, now OPC following Unite reorganisation, I have attended each of the committee meetings held throughout the year.

In these I contribute on behalf of Yorkshire and Humber chaplains seeking to represent their views gathered from contact by phone and email. This has been a difficult period for all due to changes to pay and conditions. As these changes are being worked through OPC members have been exercised as to best support the constituency.

As a result on behalf of the OPC I managed a survey of chaplains both regionally and nationally regarding negotiations around RRP and any changes that led to downgrading of posts. The executive received these findings in July 2012 and it is for them, in due course, to disseminate a view of the overview picture gained from this snapshot.

Our area continues to be without meetings, as reported by my predecessor, as the distances and time required to meet are a significant drawback for our region. It is hoped that in 2013 we will find a suitable venue and time for us to meet for the first time in several years.

For the record the Yorkshire and Humber Region were offered the opportunity to have a new representative in 2012. The consensus was for me to remain until December 2013. I will continue to support colleagues and enable easy contact after my official retirement from full-time hospital work in July 2012.

During 2012 a conference is planned by leading lights in the research field of Chaplaincy in Association with York St John University to promote more active participation. The title "Charting Chaplaincy in Action", seeks to promote and develop research amongst Chaplains. This will be on Monday 10 September 2012, 10:00-4:00pm at a cost of £25 per delegate.

Currently our Region has approximately 60 chaplains from Sheffield (south) to Harrogate (North), Hull (East) to Halifax (West). Some work in teams with its obvious benefits and others work almost lone handed with the additional pressures that brings. All are continuing to seek to support their nearest neighbours in a fraternity of care that spans the whole area. As we listen to each other and when a need arises for support it is available not just from those appointed to help, such as myself, but from those with appropriate expertise to give advice and care.



## WALES

Trevor Williams

No report has been received.



## SCOTLAND

Anne Dougall

The Scotland branch AGM was held on 2nd November 2011 in Glasgow, with a good attendance of chaplains. Carol English, Unite Professional Officer, William Sharpe, CHCC Registrar and Gordon Casey, Unite Health Sector

co-ordinator for Scotland, all gave updates to members after the AGM.

The current members of the Scotland branch committee are:-

- Anne Dougall, Chairperson and Secretary;
- Paul Russell, Treasurer;
- Judith Huggett, representative on the Chaplaincy Training and Advisory Group (Scotland);
- Ann Purdie;
- Carol Campbell.

Anne Dougall is the Scotland branch representative on the CHCC Organising Professional Committee, and a member of the Communication and Consultations sub-committee. In April 2012, Anne Dougall was appointed as chairperson of the Communication and Consultations sub-committee and is now a member of the CHCC Executive.

Regular updates have been emailed to CHCC Scotland branch members over the last year.

Anne Dougall and Carol Campbell set up a CHCC display at the NHS Education for Scotland International Conference, in Clydebank on 13th and 14th March 2012. One hundred and twenty delegates attended the conference. Many delegates took free copies of the CHCC Journal, membership forms and details about Unite.

This was a great opportunity to promote the work of the College and Unite. Mark Stobert, former president of the College was a delegate at the conference, and Mark also assisted, Carol and Anne at the exhibition stand.





## WEBSITE ADMINISTRATOR'S REPORT

Mark Burleigh

The College website continues to be regularly updated, at the request of the College Registrar. Updates are usually uploaded within 24 hours. The existing content is also periodically monitored and out of date material is removed. If anyone is aware of information that should be removed, please email the website administrator email address.

The Members' Area login database is also regularly updated. Members who are in long-term arrears have their access disabled and are sent an email informing them. Those who leave the College are removed.

A major update to the Members Area now allows member to change their log-in password and their registered email address. The revised email address is then passed on to the College Registrar for the records he keeps.

This change has also enabled periodic emails to be sent to the registered addresses of members. If you have not received these please:

- Log in and check your email address.
- If you have used a work address this may block the emails, so try using a home email address if you have one.

A number of members have emailed me when they have not been able to log in and I have been able to send a reminder of their log-in details. In some cases these are referred to the Registrar to check their membership number is correct.

There is still a need to put more information on the Regional Pages, and will add information sent by the regional reps.

If you spot a problem with the website, please do send me an email!

I am glad that the website is being well used and continues to work to ensure that it continues to serve the cause of Chaplaincy and the interests of the members of the College.



## APPENDIX A

### Appendix A: Current Business Plan: CHCC Business Plan – updated 24 July 12

Aim	Actions
Effective communications with members	<p>Ongoing discussions with SACH to facilitate if possible a joint Journal</p> <p>Website update – inc adding material to the regional pages</p> <p>Produce annual report</p>
Manage CHCC business	<p>Review and update business plan</p> <p>Review / monitor the efficacy of the revised committee structure of CHCC as agreed April 12</p>
Support Chaplaincy Profession	<p>OPC reviews proposals for Professional Advisers Panel.</p> <p>Promote Chaplaincy supervision amongst members</p> <p>Build good relationships with other Chaplaincy bodies</p> <p>Engage with and support the work of the UKBHC to help the development of an appropriate regulator for chaplains</p> <p>Engage with Unite to ensure we have more robust support from a Professional Officer (attending OPC &amp; Exec meetings) and from Unite regional reps</p>
Training	<p>OPC reviews training requirements in the UK (including for new chaplains) in conjunction with the Regulator.</p>
Terms & Conditions	<p>Monitor, collate and report on chaplaincy UK wide including making of appointments, banding issues, on-call, RRP &amp; staffing levels</p> <p>Review and circulate guidance to chaplains on RRP negotiations with local trusts</p> <p>Conclude discussions on chaplains accommodation allowance</p>

Timescale	Responsible
Autumn 2012 March 2012 Summer 2012	Communications & Consultations, & Journal Editor Web Administrator & all regional reps President to collate
Ongoing Spring 2013	OPC & Exec OPC
November 2012 Review progress Exec July 12 & OPC Nov 12  2012 2012  July 2012	Professional bodies Support & Supervision  President OPC & President  Exec & President
At each Exec & OPC	Training & Education committee
Report to OPC Nov 2012  November 2012  November 2012	Support & Supervision, & Vice President  Support & Supervision  Professional Officer

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