

CHCC ANNUAL REPORT 2015

CHCC COLLEGE OF
HEALTH CARE
CHAPLAINS



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PRESIDENT'S REPORT

Mark Burleigh

It has been a busy but momentous year for Healthcare Chaplaincy! The 2015 Guidelines are now out and show how healthcare chaplaincy is changing very quickly. As a College we are at the forefront of supporting and seeking to influence the directions of travel.

It has been helpful in my thoughts about various issues through the year to focus on the primary roles of the College. I see these as:

- 1) Supporting our members - and in this context we have the full resources of Unite the Union where this becomes appropriate.
- 2) Promoting the profession of Healthcare Chaplaincy - and this is ultimately to ensure patients and carers have good experiences of spiritual, pastoral or religious care.

An important part of my role is to maintain good relationships between the key chaplaincy bodies and other key partners. I have attended meetings of the UK Board for Healthcare Chaplaincy (UKBHC), the Healthcare Chaplaincy Faith and Belief Group (HCFBG) and the Chaplaincy Leadership Forum and its executive as well as a very helpful meeting with the chief executive of the British Humanist Association.

The publication of our journal, *Health and Social Care Chaplaincy*, provides an excellent resource to healthcare chaplaincy. After initial delays in publication the issues are now just about on track. Thanks to the editorial board for their time and commitment freely given.

Last year the College was a member of the Leadership Alliance for the care of Dying People. Meg Burton is continuing valuable work maintaining links with End of Life Care groups. The CHCC is now a subscriber to the National Council for Palliative Care.

I am looking forward to the annual study course at the High Leigh Conference Centre in September (9th-11th) and hope to see many of you there. The AGM will be held on the 10th, and it is an opportunity to meet a number of members and to hear what your concerns are at this time.

Our regional reps really are the backbone of our College - providing the vital link and communication between our members and the centre. They have been very committed to the work of the College and our national meetings (the "OPC", held 4 times a year) have been very well attended. All but two have agreed to continue for a further term of office.

I want to pass on the thanks of members to our outgoing regional reps, **Gareth Rowlands** (who has also served as vice president) and **Peter Wells**. Thank you for the work you have done on behalf of the members of the College. I am also immensely grateful to all the other members of the OPC. Without their hard work and commitment it would be impossible for the CHCC to function.

Many thanks to **William Sharpe**, for his hard work and support as College Registrar and to **Jane Beach**, our Unite Professional Officer.

At the 2013 AGM members told me that they would like regular updates from the CHCC - to keep in touch with chaplaincy issues. Since then I have been sending out monthly updates - and I hope they are useful. If you want more, or less, detail - let me know!

If you wish to contact me, do drop me an email to president@healthcarechaplains.org.

Warmest regards



REGISTRAR'S REPORT

William Sharpe

INTRODUCTION

The CHCC OPC (Organising Professional Committee) and Unite the Union are committed to influence the public debate about the future of Chaplaincy in the Health service by addressing these issues and others to advance and develop to meet the challenges of a fast-changing atmosphere

Following the passing of the Health and Social Care Act (2012), the NHS reorganisation in England has forced its employers to merge functions and out-source services to try to save money. It is eroding pay (AfC), down banding and affecting terms & conditions of staff as a way to make some savings. This has devalued the morale of employees. In Northern Ireland, Scotland and Wales, there are parallel cuts in public services, although they are not subject to the Act.

MEMBERSHIP

We will be looking to promote membership with a new campaign in the coming year. Our membership has decreased slightly during the year, from 694 in June 2014 to a current position of 675, consisting of:

Whole-Time	395	(405 in 2014)
Part-Time	201	(216 in 2014)
Retired	44	(59 in 2014)
Other (Volunteers)	35	(23 in 2014)

We have 45 resigned members for various reasons, the majority due to retirement.

The breakdown of members whose subscriptions are in arrears is:

6 - 13 weeks	8	(12 in 2014)
14 - 26 weeks	10	(10 in 2014)
Over 26 weeks	9	(47 in 2014)

From the above figures, the actual paid up membership of the College currently stands at 648. I would encourage members who are not paying by direct debit to consider it as it keeps your membership from falling into arrears.

In the first half of 2015, I have processed 27 new members (compared to 26 in June 2014) of which 13 are full time and 14 part-time chaplains.

		COLLEGE OF HEALTH CARE CHAPLAINS NEW MEMBERS BY REGIONAL BRANCH 2015													
		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	TOTAL
East Midlands	W/Time		1											1	
	P/Time		1											1	2
Eastern	W/Time													0	
	P/Time		1											1	1
London	W/Time	1	1				1							3	
	P/Time	1	1				2							4	7
North East Yorks	W/Time													0	
	P/Time													0	0
North West & Ireland	W/Time			1			1							2	
	P/Time		1		1									2	4
Northern	W/Time					1								1	
	P/Time													0	1
Scotland	W/Time			1										1	
	P/Time		1											1	2
South Central	W/Time													0	
	P/Time													0	0
South East	W/Time													0	
	P/Time													0	0
South West	W/Time	1	1				1							3	
	P/Time						1							1	4
Wales	W/Time													0	
	P/Time													0	0
West Midlands	W/Time			1	1									2	
	P/Time				2	2								4	6
TOTAL															27

ORGANISING PROFESSIONAL COMMITTEE (OPC)

I am pleased to announce that as a result of the recent elections the following have been elected to serve in post till 2018:

Phillip Staves	East Midlands
Stewart Selby	Eastern
Tim Mercer	London
Kevin Tromans	North East
Philip Winn	North West & Ireland
Timothy Bennison	Scotland
Karen MacKinnon	South Central
Simon Harrison	South West
Alison Coles	West Midlands
Wynne Roberts	Wales - North & Powys
Lance Sharpe	Wales - South
Alisdair Laird	Yorkshire & Humber

The only region without a rep is South East. I will encourage a member of the region to consider taking up this role. It is the wish of the OPC to have full representation on the OPC so we can serve our membership effectively.

Mark Burleigh was re-elected to continue as President of the College (since January 2012). Members have valued his dynamic leadership in moving forward CHCC with its allied professional bodies and other organisations. His term of office ends in 2017. Other members of the OPC to serve till 2017 are:

Nick Flood	Treasurer
Siddiq Diwan	Faiths Coordinator

COMMUNICATIONS WITH MEMBERS

A huge part of the Registrar's work is direct contact with individual members and prospective members by email and telephone, being the signage of CHCC - referring and communicating the needs of members to the needed sources, and also supporting all College study courses. I hope that my efforts have given some assistance and answers to members.

CONCLUSION

CHCC and Unite continue on our journey towards maximising membership density and in building a sustainable organisation within our workplaces. We need a strategy to grow our membership back to a time when we reached the 1000 peak mark. We can achieve this through a structured methodology, setting tasks and targets and sharing best practice.

I would like to acknowledge those who have taken on the tasks - Barrie Brown (Unite Health Sector National Officer), CHCC President and the OPC members during this time, to promote the role and work of Healthcare Chaplains.

I would also like to thank my colleagues in the Health Sector at Unite HQ for their collegiality.



TREASURER'S REPORT

Hon Treasurer's Report - Year Ended 31st December 2014

Nick Flood

BRANCH FUNDS

Receipts

Branch Administration Allowance	4731.70
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Payments

Web Site Maintenance/Development	838.80	
Journal Editorial Board Meetings	301.60	
Mental Health Chaplains Task Group	699.18	
Leadership Alliance Meetings	277.40	
End of Life Care Working Group	75.50	
NCPC	79.00	
Other Meeting Costs & Travelling	170.12	
President's Expenses	185.59	
Treasurer's Travelling etc	266.37	
Affiliation Fee ENHCC	98.36	
ENHCC - Conference Fee	441.37	
Conference Travelling etc	519.27	
Sub-Branches	289.50	
		4242.06
<u>Excess of Payments over Receipts</u>		489.64
Cash & Bank Balances at 1st January 2014		1033.02
<u>Cash & Bank Balances at 31st December 2014</u>		1522.66

BURSARY & TRAINING FUNDS

<u>Funds generated by</u>	6554.67	
Joint Annual Study Course	520.00	
MHRG Conference (earlier year)	27.90	
Mindfulness Day	80.00	
Faiths Day (earlier year)		7182.57
<u>Payments</u>		
Bursaries	500.00	
General	179.66	
		679.66
<u>Net Increase in Funds</u>		6502.91
Cash & Bank Balances at 1st January 2014		27944.68
<u>Cash & Bank Balances at 31st December 2014</u>		34447.59

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



PROFESSIONAL OFFICER'S REPORT

Jane Beach

As predicted 2014/15 has been another challenging year for the NHS! We have seen increased privatisation and fragmentation of services, increased waiting times and erosion of workers terms and conditions. The tough times look set to continue for the foreseeable future; as I write the government are presenting their plans for a 7 day a week NHS and we will wait to see the implications of these.

Within the OPC we are working hard to continue to promote, protect and develop the profession and have implemented a process for challenging organisations that advertise inappropriate bandings for Chaplaincy roles or attempt to down band existing roles, which is proving successful. However, we can only do this if we are made aware of such situations and so it is essential that you make your regional CHCC Rep aware where there are issues or concerns. They are your link to the OPC and can ensure that the National Committee is made aware of your views, issues and concerns so please make contact and keep in touch with them.

This year has also seen the publication of the revised *NHS Chaplaincy Guidelines* in England that OPC members and I contributed to. I also attended a task and finish group in Wales with William and the regional reps that made recommendations to the Chief Nursing Officer on how *the Standards for Spiritual Care* (2010) aligned with their proposed new Health and Care Standards that were subsequently published in April (<http://gov.wales/topics/health/publications/health/guidance/care-standards>).

More recently we are challenging the NMC on the fact that there is no reference to spiritual care in the new revised Code for nurses and midwives!

The professional officer team have again delivered a regional training programme to members; this year the focus has been on Continuing Professional Development (CPD) and raising concerns. Kevin Tromans the North East Rep delivered a *Unite in Health Thinking Time* online session on Spiritual Care for the wider Health Sector membership and my thanks go to him. It was a very well attended session, with excellent feedback and I hope is just the start of the sharing of expertise among our members. A Unite in Health Academy, which will be an online training resource, is being developed, so do keep an eye on the website for updates (www.unitetheunion.org/health).

May I take this opportunity not only to thank the OPC for their hard work and dedication but also you our members for the care and support you provide to patients and staff! Unite/CHCC will continue to work with you to protect the valuable services you deliver and improve the patient experience.

Finally, please like us on Twitter and Facebook to keep up to date with developments.

[www.twitter.com/uniteinhealth](https://twitter.com/uniteinhealth)
www.facebook.com/uniteinhealth



MENTAL HEALTH RESOURCE GROUP REPORT

Stephen Willis

The Mental Health Task Group (MHTG) has had a busy, challenging and interesting year. Following the retirement of some

'old contemptibles' the group has had to re-invent and rediscover itself with new members. This has been a fascinating process and, as many of us work on our own, a chance to experience some team working.

In addition to meeting at the CHCC Conference last year, we have met on four occasions and alternated the location between London and Birmingham so that we 'spread ourselves around' a bit and maintain ease of travelling.

During the year our main task is to provide a programme for the forthcoming Study Conference. We are given a direction by the conference delegates during the final feedback session, we then develop a working theme and start looking for speakers and workshop leaders. Some people respond to an invitation very swiftly (and we thank them for that), others however are very slow to respond making our organising lives complicated and uncertain. However, we are usually in a position to put together a draft programme in January. From then on it's just a matter of minor tweaks and clarifications. The result, we hope, is an interesting, challenging and relevant conference.

This past year we have had the opportunity to contribute to the new NHS Chaplaincy Guidelines. We had the draft proposals and were able to cast a 'Mental Health' eye over them and make some suggestions regarding the development of Mental Health Chaplaincy in working with the Community Mental Health Teams. We were very grateful and encouraged to see that in the final document our suggestions had been addressed. It is now recognised that Chaplaincy hours are not just linked to the number of beds in a hospital building but can be flexible enough to take into account that we now engage with our service users at home or in other community locations.

We are excited about the continuing consultation regarding the future of Healthcare Chaplains and the role we can play in its development.

In the past we have had a very helpful and welcomed Mental Health Chaplain's Newsletter that was published four times a year. Unfortunately, although repeated requests have been made, there have been no editions this year due to lack of contributions. It may be that the Newsletter has 'had its day'. If this is the case then we do not want to force through something that is not needed. It has played its part, now we look to other means of communication. If, however, this news shocks and distresses you, then let us know, provide an article and we will re-invigorate the provision.

We are in the process of putting together a Mental Health Chaplain's contact list. Once we have gone through the Data Protection loops we will seek ways of keeping in touch with each other between Conferences. Many Trusts are now multi-agency trusts, Mental Health being just one part. We do not always get it right, so if you think you are a Mental Health Chaplain or have any involvement in providing Chaplaincy services to Mental Health patients, then let us know and we can welcome you to 'the family'.

We are all living in a changing and challenging Healthcare world. As Chaplains we support those going through change but at the same time need to embrace change ourselves. We do not have to face this alone. We are here for each other. The MHTG seeks to be a focus of mutual support. If there is anything you think we can help with, let us know. If we can't help we will probably know someone who can.



FAITHS COORDINATOR'S REPORT

Siddiq Diwan

It has been a busy year as the faiths coordinator. Taking on board comments and suggestions received at the annual conference and after due consultation at the OPC an extensive national scoping exercise was undertaken.

The aim was to gain a better understanding of the level of chaplaincy service provision amongst minority faiths.

The results will be used to better engage with minority faith chaplains in matters of local and national importance to Chaplaincy in the NHS. It will also help inform the planning of a longer term CHCC strategy to better recognise, respect and respond to the challenges minority faith chaplains face in a changing NHS. I look forward to presenting the results of the exercise at the 2015 CHCC conference.



THE JOURNAL

Meg Burton

Health and Social Care Chaplaincy is now in its third year of publication. Of the original editorial team, Ian Stirling and John Wood have both retired. Mark Newitt has replaced John and John Swinton has replaced Ian. We have also been joined by Lindsay Carey, a chaplain and academic in Australia. The Editorial Board has also expanded and now consists of almost half of the members from the UK and half international, from Europe, North America and Australasia. One result is an increasing number of articles from all around the world being submitted.

Another result has been the number of people who have gone on to the Equinox website and accessed articles to read online. In 2013 the average was 419 views per month and in 2014 it was 807. In the first three months of 2015 it has already reached over 4,000.

A continuing problem has been that not all CHCC members appear to have registered with Equinox so that they can receive their copy of HSCC that comes as part of their membership. SACH has 96 subscribers whereas, until recently, CHCC had only 350, which amounted to approximately half the CHCC membership.

Two reminder emails has resulted in more members registering, but still not all members have registered.

As a new journal, it is commendable that HSCC did not make a loss in the first year. We did not have many institutional subscriptions but the number tripled from five to 15 for Volume 2. This is a very positive sign for the journal's future. Of the institutional subscriptions, six are in the UK, six in Australia, two in the USA and one in the Netherlands. Three institutions (one in Australia, one in the USA and one in Switzerland) take the HSCC as part of a bundle of journals, and five individuals (two in the USA and three in the UK) subscribe. If you have colleagues who are not members of the CHCC, please let them know that they, too, can subscribe to HSCC, by going to the Equinox website and following the links. And please encourage any colleagues who have not already registered, to do so.



GP CHAPLAINCY

Fiona Collins

This year 2014/15 the Interest group has begun to form plans to have a seminar for all those interested in the development of the service of Chaplaincy in General Practice. Because of the embryonic state of the service we hope to have a seminar the spring of 2016. It is planned that all those Chaplains in CHCC who are thinking towards Primary Care Chaplaincy and its development in General Practice will be able to relate and share ideas. It was felt that others should be invited to join in the discussion who are already embarking on this type of chaplaincy so that some co-ordination

and sharing of developed ideas can take place. There has been considerable interest by Doctors and commissioners from around the country.

The Association of Chaplaincy in General Practice is a small information web site and blog which provides materials and guidance for those wanting to set up Chaplaincy in General Practice. This can be accessed at <http://www.gpchaplaincy.com>



END OF LIFE CARE RESOURCE GROUP

Meg Burton

The virtual resource group was formed in 2014, following the publication of *One Chance to Get it Right*. It replaces the former Palliative Care Resource Group.

Meg Burton, Karen MacKinnon and Judy Davies (AHPCC) met with Claire Henry (Chief Executive) and Andrew Grey of the National Council for Palliative Care (NCPC) in October 2014 to explore how the CHCC and the NCPC might work in partnership. Meg, Karen and Judy have critiqued some documents for them and seek to inform members of NCPC activities. We can also feed back to them activities with which CHCC members are involved. At the January meeting of the OPC it was decided that CHCC should become a subscriber to the NCPC. This means that all CHCC members are eligible for reduced fees for any courses/workshops run by NCPC. Meg receives regular email newsletters and these can be accessed through the College website. In November 2014, Judy and Meg were invited to attend the House of Lords, when Lord Falconer's bill on Assisted Dying was at the committee stage.

We were not able to express our views during the committee itself, but subsequently exchanged correspondence with Lord Falconer.

The bill ran out of time and, at the moment, seems unlikely to become law.

Following the development and publication of the *Five Priorities for Care of the Dying Person* and the commitment made by the CHCC in *One Chance to Get it Right*, and the commitment to research that came out of the European Network of Health Care Chaplaincy meeting in May 2014, Meg and Debbie Hodge have begun a research project that is looking at whether the five priorities are evident in chaplains' stories of end of life care.

We hope that many of you will have been part of the project by sending in your own stories. We hope to present the results of the research at the next ENHCC conference in June 2016 and at the CHCC Annual Study Course in September 2016.

Meg continues to represent the CHCC on the End of Life Care Partnership Working Group, the follow up to the Leadership Alliance for the Care of Dying People. It is hoped that the document on which they are working will be published in the autumn.



RESEARCH NETWORK (CHURN)

Derek Fraser

The research network group consciously reformed itself back in October 2013 with a study day entitled, ***Rekindling the flame***. It was a great success and Steve Nolan wrote a full

report of that day for the professional journal. Vol 1, No 2 (2013) - *Conference Report: Research in Chaplaincy - A Day to Rekindle the Flame!*

Out of that meeting it was recognised that a wide range of people had gathered and so it was proposed to reframe the RNG as **CHURN – Chaplains in Healthcare UK-wide Research Network**. This was to recognise that we are a small community and it would be helpful if the net was cast as wide as possible within the UK.

CHURN held another study day in October 2014 where the topic of chaplaincy outcomes was addressed. This was in response to the leading editorial that had emerged from some of the international chaplaincy figures at the beginning of 2014. Again we are indebted to Steve Nolan for chronicling that day for everyone's benefit. Vol 2, No 2 (2014) - *Conference Report, Chaplaincy Outcomes – What the Future Looks Like?*

The publication of *Spiritual care in Practice*, edited by Steve Nolan and George Fitchett in March 2015 provided the substance for a study day for those interested in this particular aspect of developing a research culture in healthcare chaplaincy.

It is set against a backdrop, that is in some way just a drop in the bucket, for developing a research-rich profession. It has been helpful in writing this report to return to the resume of previous discussions which reflected thus:

- 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 in 2012 was 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 on-going CPD validation process.

The RNG coordinator concluded:

1. The national CHCC conference 2012 had a strand of research literacy /awareness woven through it so we could increase the understanding of that aspect. That dimension needs to be an ongoing dimension

2. We need to focus on what kind of evidence we need to gather as a profession.
3. The way forward is a challenge which needs to be wrestled with more fully.
4. Perhaps we need to keep talking on this subject, sharing ideas and resources.
5. It is vital we acknowledge the progress that has been made and advance that pace of change together.

Chaplaincy in England has seen the publication of the revised guidelines for chaplaincy 2015.

It has been agreed to host **another Study day for CHURN on Wednesday 21st October in Moeller Centre, Cambridge** which will focus on the research issues that emerge from that guidance.

Chris Swift and Derek Fraser who were involved in that revision work, plan to unpack some areas of research work that need attention if we're to see chaplaincy continue to be sustained and hopefully flourish. Further details of that day are available from chaplaincy at Addenbrooke's Hospital, Cambridge.

The idea of a research summit that will explore the way forward for the next few years strategically is being planned.

The CHCC executive has agreed to support that work so the research agenda can continue to have life and vitality. It is hoped that out of that gathering, it might be possible to be more robust and clear in the key issues that need addressing for chaplaincy in healthcare.

JISCMail continue to be a forum for on-going conversations and this is open to any chaplain who wishes to be part of that forum.

RNG of CHCC, now turned into CHURN, is committed to keep this conversation alive and we are keen that these aspects are picked up by a wide range of the chaplaincy community. We are grateful to CHCC for its continuing support of this dimension of our professional life.



WEBSITE ADMINISTRATOR

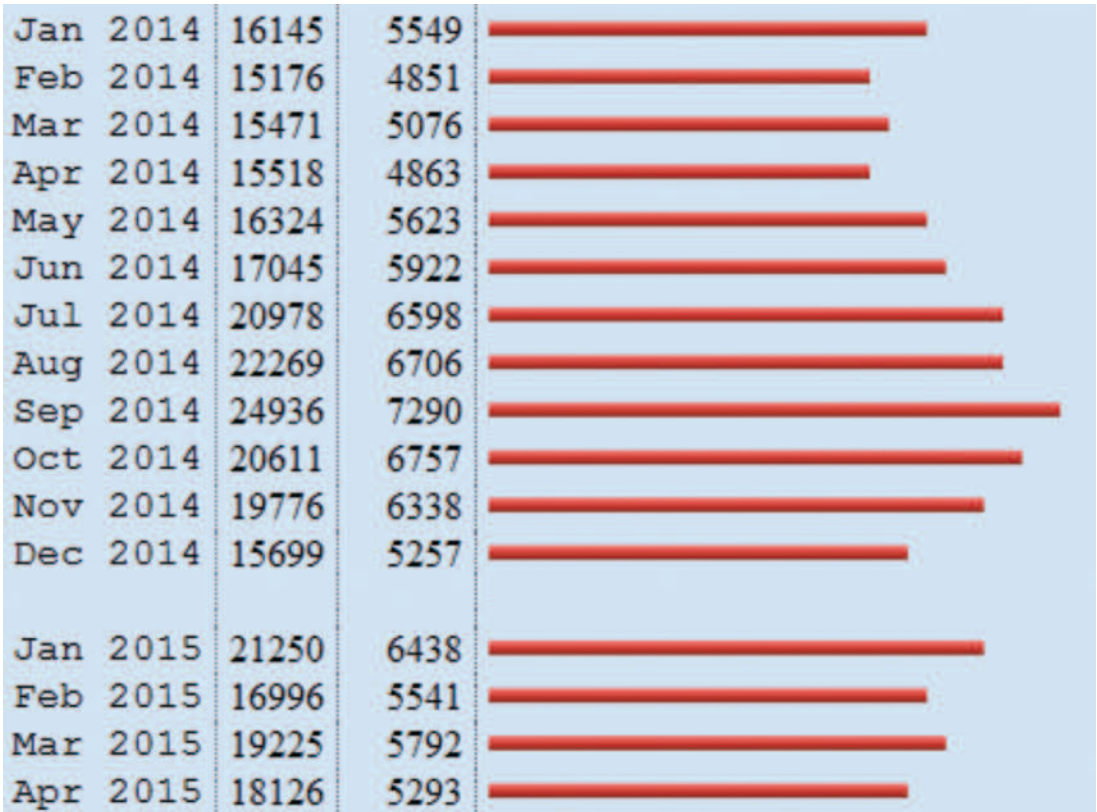
Mark Burleigh

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 whose subscriptions are in long-term arrears have their access disabled. Those who leave the College are removed.

There is a steady stream of requests for password reminders from members who are unable to log in. It is not possible to set up an automatic facility to reset passwords or request password reminders, as we do not hold email addresses for all the members.


























The website receives visits from over 900 different people a month. The following are the stats for visits to the website since the beginning of 2014. The first number is the number of requests to the website in the month and the second number the number of pages loaded:



The following chart shows which pages are initially requested from the site. It shows that many visits are made to the site by CHCC members.

Pages-URL (Top 25) - Full list - Entry - Exit					
61 different pages-url	Viewed	Average size	Entry	Exit	
/	194	9.03 KB	170	126	
/members/index.php	43	8.53 KB	8	14	
/homepage_animation.swf	30	1.05 MB	1	6	
/information/	29	6.60 KB	1	8	
/information/info_forms.html	25	9.23 KB	18	11	
/news/regional_groups/scotland.html	24	14.77 KB	18	17	
/membership/	21	6.51 KB	2	8	
/news/	20	10.39 KB		3	
/information/training.html	19	7.86 KB	4	4	
/contact/	17	4.92 KB	6	7	
/about/	16	8.29 KB		5	
/about/npc/officers.html	13	10.79 KB	9	10	
/information/training_plans.html	11	8.07 KB		2	
/information/journal.html	11	8.25 KB	4	4	
/about/past_presidents.html	9	7.85 KB	5	4	
/information/grants.html	9	7.01 KB		1	
/information/other_organisations.html	9	8.85 KB	4	4	
/information/resource_groups/	8	7.63 KB			
/information/links.html	8	8.08 KB		1	
/about/other.html	8	8.03 KB	4	4	
/news/regional_groups/southwest.html	6	13.78 KB	2	2	
/information/resource_groups/mental_health.html	6	9.97 KB	2	3	
/news/regional_groups/wales.html	5	14.28 KB	2	2	
/information/resource_groups/eol_care.html	5	9.31 KB		1	
/about/president.html	5	8.41 KB	1		
Others	98	11.48 KB	12	22	

The following shows that the website is also accessed internationally:

Countries (Top 25) - Full list					
Countries		Pages	Hits	Bandwidth	
 Great Britain	gb	259	834	65.73 MB	
 Romania	ro	101	102	1.79 MB	
 United States	us	100	225	52.17 MB	
 Germany	de	58	196	68.25 MB	
 China	cn	35	45	2.71 MB	
 Ireland	ie	23	53	9.58 MB	
 South Korea	kr	14	20	2.48 MB	
 France	fr	10	20	10.72 MB	
 Ukraine	ua	9	11	1.79 MB	
 Russian Federation	ru	9	26	1.86 MB	
 Unknown	zz	7	8	2.48 MB	
 Brazil	br	6	42	275.92 KB	
 Philippines	ph	3	10	1.33 MB	
 European country	eu	3	11	1.29 MB	
 Italy	it	3	15	101.33 KB	
 Israel	il	2	2	15.72 KB	
 Denmark	dk	2	8	94.30 KB	
 Canada	ca	2	4	745.86 KB	
 Poland	pl	2	3	411.60 KB	
 Vietnam	vn	1	1	9.15 KB	
 Nepal	np		1	1.12 MB	
 Turkey	tr		1	99.11 KB	
 Chile	cl		2	198.21 KB	
 Spain	es		1	810.89 KB	
 Australia	au		6	1.31 MB	
Others		0	5	16.87 MB	

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

the College. If you spot a problem with the website, please do send me an email at website.admin@healthcarechaplains.org

REGIONAL REPORTS



EAST MIDLANDS

Phillip Staves

I became OPC representative for the East Midlands Region and Chair of our local group in autumn 2013.

We have struggled in recent times to have a reasonable number at our own half-day East Midlands meetings and therefore this spring we decided to have a joint study day with West Midlands.

We met at Derby in March and held a day on End of Life Care under the title - "From Here to Eternity". Our speaker, Revd Meg Burton (Head of Chaplaincy, Rotherham Doncaster & South Humber NHS Foundation Trust) was a member of the Leadership Alliance for the Care of Dying People.

Meg was able to share about the Alliance's report - "One Chance to get it Right" and to talk about a research project into end of Life Care, which she is now working on.

The longer study day format not only provided us with time to engage with Meg and what she had to say, but also gave us opportunity to meet over lunch with colleagues from elsewhere in the Midlands.

As Lead Chaplain in a District General Hospital (Kettering General), I regret that it is difficult to find time to visit other Trusts. However I'm very happy to talk through issues on the telephone and, where necessary, raise members' concerns at the quarterly OPC meetings.



EASTERN

William Sharpe (Registrar)

Gareth Rowlands stepped down this year. We are especially grateful to him for serving the region over the past two additional years as no one else had come forward since he expressed his wish to step down. He also served as the Vice President of CHCC. We thank him for his dedication to both OPC and the region.

CHCC held elections recently for all the regions and elected Stewart Selby to be the rep for the Eastern region.

We look forward to working with him at national and local levels.



LONDON

Tim Mercer

The London Region has been thoughtfully led by a small steering committee. There have been several meetings during the year on topics which enabled both proper attention to ourselves and recognition of our context and relationships in the sphere of healthcare.

We have two new chairs, job sharing: Claire Carson & Tim Coleman. We were very grateful to Ruth Lambert for being our chair until she moved to a new post.

The sessions arranged were as follows - with the last due to happen after the time of writing this brief report.

- Royal Free Hospital, Tuesday 1 April 2014: *Creative Conversations for hospital Chaplains today (part 2): A whole group exercise in reflective practice*
- St George the Martyr Crypt, Borough High St., Thursday 19th June 2014: *Spiritual Resilience ... for longevity, for quality, for life!*
- Unite Headquarters, Monday 17 November 2014: *What kind of Service do we want? Celebrating life: Developing inclusive liturgies (Interfaith Week)*. Sharing Spirituality and Resources: Viewpoints from different faith / belief backgrounds: Brief overviews from Buddhist, Jewish and

Muslim perspectives. Speakers included: Keith Munnings (Buddhist Health Care Chaplaincy Group), Bernd Koschland (Royal Free) and Yasar Zaman (Homerton University Hospital NHS Foundation Trust).

- March 19th: *Capacity Act: Speakers: David Flood – Adult Safeguarding : Capacity Act;*
- Jen Tulloch - Lead Dementia CN: *Dementia*.
- Planned on 18 June: *People We Work With* (multi-disciplinary teams and volunteers).

The meetings were attended by approximately 20 people per session. Our membership is 106. The Revd William Sharpe, Registrar CHCC, and a London region member kindly provided information about our membership and meetings.

It has been difficult for chaplains to attend in great numbers with the site workloads and on-call requirements. However those attending have found the supportive nature of the meetings and the agendas very encouraging.

The chaplaincy teams in our locality have remained in good spirits in challenging times. Some lead chaplains have retired or are soon due to retire. It is good to see new leadership emerging locally.



NORTH EAST

Kevin Tromans

A rather more “routine” year than some have been recently, with chaplains across the region just busily getting on with “being there” and, very effectively, serving their healthcare communities. Summer 2014 saw the retirement of Malcolm Masterman after some 30 years’ service both across the region and in national roles.

Regional meetings were held on three occasions, at venues across the patch – though getting numbers together is proving somewhat more challenging as workload increases.

There was also a very successful overnight retreat/reflection in early November. A number of colleagues met over five evenings through the year, hosted by Newcastle chaplains, to listen to the presentations on reflective practice from the US APC Webinar series. These proved interesting and informative, and stimulated some useful discussion.

In the forthcoming year we hope to follow the webinar presentation pattern to encourage reflection and discussion at our own regional meetings.



NORTH WEST & IRELAND

Philip Winn

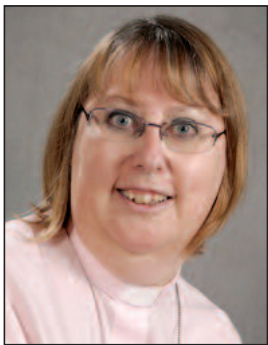
The regional AGM was held in Manchester in October. After the business meeting Chaplains from Central Manchester Foundation Trust spoke about developing involvement in community healthcare.

The Greater Manchester Chaplaincy Collaborative and CHCC organised a study day in May, at which Rev Dr Chris Swift spoke about pluralism in chaplaincy.

Chaplains from around the region, and further afield, came to one of the regional consultations on the Chaplaincy Guidelines, held in Wrightington in July 2014.

CHCC membership numbers amongst full-time and part-time remain steady, with new chaplains moving into the region at about the same rate as others retire or leave the area. There are a few CHCC members amongst Chaplaincy volunteers; perhaps this is an area in which existing members need to share the benefits of membership more widely.

If members have questions please feel free to contact me I may not have the answers, but I can usually suggest someone who can help.



SOUTH CENTRAL

Karen Mackinnon

This year has really flown by. In terms of regional activity:

- In June 2014, a compassion day for chaplains was held at Wisdom House in Romsey with excellent feedback & subsequent requests from other chaplaincy teams to repeat this session for them.
- In November the Oxford end of the region hosted a successful day with Chris Swift looking at the revision of the NHS England Chaplaincy Guidelines.

This latter project generated a proliferation of work both for the organising committee and locally in terms of sending in feedback from CHCC, chaplaincy services and from our supportive nursing & medical colleagues, especially around the information governance section in the first draft.

In terms of attendance at events during the last year in addition to the annual CHCC Conference at High Leigh, a national meeting around the new guidelines, and the regular meetings

of the organising professional committee, I also joined Meg Burton & Judy Davis in London for a meeting with the CEO of the National Council for Palliative Care (NCPC) to explore how we could work more closely together. CHCC is now an NCPC subscriber.

With the OPC, I have also been heavily involved in drafting letters to CEOs regarding making appropriate chaplaincy appointments on the recommended banding for those positions, including stressing the importance of chaplaincy service leads being chaplains themselves.

The new clarification of funeral legislation in the CofE has generated much email correspondence and I am involved both with the OPC and locally in trying to navigate a sensible path through this difficult and painful process for many of our Anglican members. In the southern end of the region there have been lots of changes and vacancies which we hope and pray will have positive outcomes.

I continue to be available for support/advice/signposting for any members in our region who might find this helpful and I am grateful for being elected again as your representative. It is my privilege to serve in this way. Thank you.



SOUTH EAST

William Sharpe (Registrar)

Peter Wells took the role of South East rep in January 2014 and worked effectively, attending Collaborative meetings and networking with many of the chaplains in the region. Unfortunately, due to work demands in his Trust, he has had to step down.

We would like to thank him for his dedication to both the OPC and to the region during his term of office.

CHCC held elections for all regions recently but had no name was put forward for the South East region. I therefore look forward to receiving a nomination of someone to represent the region on the OPC and to continue the work of the College at the local level.



SOUTH WEST

Simon Harrison

I have enjoyed representing the south-west this year, even if I have not been able to travel to as many new departments as I would have liked. I have been able to engage with several individuals/departments both in person and with regular telephone support in challenging circumstances,

but have been pleased to see an increased level of engagement between chaplaincies across the region. Lead chaplains from several Trusts are now working together to prepare the annual conference for 2015.



WEST MIDLANDS

Alison Coles

I have valued various opportunities this year to meet with members from across the West Midlands. Membership of the College in our region remains healthy and it has been good to welcome a number of new members too.

Chaplains continue to meet together within three distinct geographical areas and I have enjoyed meeting with all three groups.

Last Autumn I was able to attend the AGM of members in the Coventry/Warwickshire/Worcestershire areas and also meet with the Shropshire/Staffordshire chaplains.

Based in Walsall I meet regularly with our Birmingham and Black Country Chaplains' Collaborative. It has been interesting to hear about new initiatives and ways of working as well as sharing in some of the challenges facing us all.

Within parts of the region the development of GP and community chaplaincy continues (see the separate report from Fiona Collins), as does the training and deployment of volunteers.

Chaplains representing some of the minority faith groups are keen to raise their profile and address the needs of their communities.

Issues around recruitment and resourcing of services are also areas for some concern.

In March we joined with members from the East Midlands for a study day.

Kindly hosted by David Ashton at Derby and facilitated by Meg Burton, we discussed End of Life care and heard more about the '*One Chance To Get It Right*' document.

Those who attended asked to meet again and we plan to arrange another study day for spring next year.

If I can be of any support or help to you, either individually or as a team, I would be pleased to hear from you.



YORKSHIRE AND HUMBER

Alisdair Laird

This year two particular projects effectively sum up issues that are of concern to Healthcare Chaplaincy, not only in this region but also nationally:

1. How chaplains, both individually and in their teams, can more effectively co-operate, share experiences and ideas, and support each other in providing spiritual care; and
2. How actual research can be enabled, supported, and conducted across dispersed groups of chaplains who may well lack the confidence or management support to 'go it alone' (notwithstanding the immediacy of digital communications).

Locally we have pursued these initiatives to address the above issues:

1. **North Lincolnshire & Goole (NLaG) and Hull & East Yorkshire (HEY)** teams formed a geographically manageable collaborative which has now been working effectively for about a year;
2. **Regional Research Network** - this is another instance of employing a geographically manageable/sensible area, in this case an attempt to enable and encourage local teams and individuals to develop and support research, with a view to drawing on and feeding into research at a national and international level.

The catchment loosely covers the areas embracing the population centres of Hull, Leeds, and Sheffield (including North Lincolnshire and York). Initial response to the initiative has been very encouraging, and hopefully will lead to long term engagement by teams in the region.



SCOTLAND

Tim Bennison

Health and social care chaplaincy in NHS Scotland works on a generic model with all chaplains providing or facilitating spiritual and religious care to people of all faiths and none. We work hard at fostering good relations with local faith communities but there is no requirement for chaplains to be authorised or licensed by their faith groups or to demonstrate that they are in “good standing” - though past experience of pastoral care, a theological education and evidence of a mature and reflective spirituality or worldview are important pre-requisites.

Health and social care integration took place in Scotland in April and this, along with NHS Scotland’s “Twenty-Twenty Vision”, calling for assets-based approaches to healthcare, and the building of resilience and well-being in all areas of

practice, has had practical implications for the delivery of health and social care chaplaincy. A new Spiritual Care policy is being developed to reflect this paradigm shift, along with a National Delivery Plan.

This will emphasise assets-based work across primary care and community settings as well as the acute sector; robust structures for staff support; a reliable evidence base; and the development and sustaining of a flexible and reflective workforce within the context of service-wide structures for consistency of practice and accountability.

Three national projects cohere with these principles: Community Chaplaincy Listening (CCL) is a listening service run predominantly from GP surgeries and in the process of being rolled-out across all health-board areas. The CCL PROM is a research project aimed at evaluating the usefulness of the listening service from the patient’s perspective. Values-based Reflective Practice (VBRP) is a way for healthcare staff to reflect on different aspects of their practice and, at the same time, re-connect with the values and motivations which brought them into practice in the first place.

The CHCC regional committee in Scotland has been quiet for several years but I hope it can be reformed and refocused over the next year.



WALES

Lance Sharpe

First of all a big thank you for electing me for a second term! Apparently, my first term was the end of Trevor Williams’ one to whom I want to thank for his service to us all.

I have to say we had a very fine CPD day at the end of last year hosted by the chaplaincy at UHW on behalf of CHCC where we heard from Professor Jean White (Chief Nursing Officer for Wales) and Revd Dr Chris Swift (Head of Chaplaincy at Leeds Teaching Hospital & Visiting Fellow Leeds Metropolitan University) . Again a big thank you to Trevor and others who made it possible. I hope to begin work on planning another CPD day with Wynne Roberts very soon.

I attended the review of the Standards of Spiritual Care in NHS Wales 2010 in December and January. While it was labelled as a review, it came out of a desire of the Welsh Assembly Government to weave the standards into their new Health and Care Standards document (available on their website). To that end, the Standards were always going to remain unchanged which was felt by colleagues as an opportunity missed to refine them so that they reflect more the job we do on the ‘coalface’.

I can also report that I have attended two OPC meetings in London and can assure members that the committee is made up of some of the most experienced chaplains in England, Scotland and Wales who really do have their finger on the pulse concerning the future development of healthcare chaplaincy.

I have to give my apologies for not being around in April & May due to the fact that I was acutely unwell. However, I am back now and please trust that any issues you raise with me will be looked at robustly.

Appendix: Current CHCC Business Plan

CHCC BUSINESS PLAN – UPDATED 24 JUNE 2015

Aim	Actions	Timescale	Responsible
Effective communications with members	<p>Ongoing publishing of the <i>Journal Health and Social Care Chaplaincy</i></p> <p>Convene meeting with Editorial Board in Spring 2015 prior to contract review meeting with Equinox 6 Aug 2015.</p> <p>Update Website with Minutes</p> <p>Send monthly email updates to members</p> <p>Produce booklet outlining the benefits of CHCC membership for use in recruitment</p> <p>Ensure CHCC addresses issues relevant to Scottish chaplains and arrange meeting for Scottish members</p>	<p>Meeting with journal Board 6 August 2015</p> <p>On-going</p> <p>On-going</p> <p>Final edit for printing Summer 2015</p> <p>On-going through President's update Meeting in 2016</p>	<p>Journal Editors, Registrar, Jane Beach, President</p> <p>Registrar & Web Administrator</p> <p>President</p> <p>Simon Harrison, OPC & Registrar</p> <p>Tim Bennison, Registrar, President</p>
Manage CHCC business	<p>Review and update business plan</p> <p>Run Elections for Regional Reps for SE regions</p>	<p>Ongoing</p> <p>By Sept 2015</p>	<p>OPC meetings</p> <p>Registrar</p>
Promote implementation of NHS guidance	<p>Promote 2015 Guidance in England by sending letter to CEOs, and do similar for Wales</p> <p>Repond to CLF strategy document</p> <p>Promote model Job Description and Person Specifications.</p>	<p>July 2015</p> <p>June 2015</p> <p>Requested from UKBHC Apr 15</p>	<p>Registrar to send out. Lance Sharpe re Wales</p> <p>President</p> <p>President</p>
Promote and Support Chaplaincy Research	<p>Support a collaborative "Research Summit" to help shape the future of and to encourage UK research into Chaplaincy.</p> <p>Provide pump priming support to chaplains in Yorkshire & Humber to run a series of research meetings and to report back to the OPC</p>	<p>21 Oct 2015</p> <p>During 2015</p>	<p>Derek Fraser with financial underwriting from CHCC</p> <p>Alisdair Laird to coordinate with lead chaplains in his area.</p>
Support the Chaplaincy Profession	<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>Support chaplaincies in specific difficulties</p> <p>Maintain active participation in the End of Life Care "Ambitions Partnership Working Group"</p> <p>Monitor implementation of "One Chance to Get it Right" for EOL by collating chaplains experiences</p> <p>Use FoI to scope minority faith chaplaincy across UK</p> <p>Arrange an initial GP Chaplaincy network meeting</p>	<p>On-going</p> <p>Through 2015</p> <p>On-going</p> <p>On-going</p> <p>Each OPC</p> <p>Present findings ay CHCC Conference Mar/Apr 2015</p>	<p>President</p> <p>OPC & President</p> <p>Regional Reps and President</p> <p>Unite Media Dept</p> <p>Meg Burton</p> <p>OPC</p> <p>Minority Faiths OPC Rep, Philip & Alison</p> <p>Fiona Collins</p>
Training	<p>Organise annual study course and concurrent Mental Health study course</p> <p>Support and publicise regional training events</p> <p>Produce training event material to be used for regional training days on Multi-faith chaplaincy</p>	<p>Conference in September 15</p> <p>Through 2015</p> <p>October 2016</p>	<p>Registrar, Stephen Willis & SW Collaborative</p> <p>OPC Regional Reps</p> <p>Minority Faiths OPC Rep</p>
Terms & Conditions	<p>Regional reps monitor banding in their regions and report to OPC.</p> <p>Monitor advertisements on NHS jobs and NHS Scotland jobs for Band 5 jobs that look as if they better fit the band 6 national profile and Band 6 jobs that look as if they better fit the band 7 national profile.</p> <p>Send letters to employers in the above circumstances.</p>	<p>On-going</p> <p>On-going</p> <p>On-going</p>	<p>All Regional Reps & OPC</p> <p>Registrar</p> <p>President or Industrial Officer.</p>