STANDARDS FOR CERTIFICATION

CATHOLIC HEALTHCARE CHAPLAINS

These Standards were revised by the Healthcare Chaplaincy Board (HCB) and approved for use by the Irish Catholic Bishops' Conference and the Conference of Religious of Ireland in 2013.

These Standards are effective from January 1, 2014

The Healthcare Chaplaincy Board (HCB)

The HCB is a Sub Committee of the Council for Healthcare of the Irish Catholic Bishops' Conference

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Introduction

Catholic healthcare chaplains are called to embody the church's ministry of evangelisation, offering hope and healing in a complex and changing modern Irish culture and society. The impact of an economic recession, financial crisis, high unemployment rates and uncertainty about the future are reflected in increased levels of human suffering that is manifested in anxiety, illness, deprivation, tragedy and social difficulties. In this era, the lives of many individual human persons, families and institutions are shaken and changed by painful and frightening experiences.

Serving an increasingly more diverse population, healthcare services are stretched to respond to growing healthcare needs and demands in the face of severe cutbacks and depleted resources. Catholic healthcare chaplains are representatives of a Church that finds itself challenged to rebuild trusting relationships, promote reconciliation and healing, and engage with renewal in the wake of an unprecedented abuse crisis. Acutely aware of the challenging context within which they minister, chaplains strive to be grounded in the vision and values of the Gospel. Through their ministry they endeavour to be authentic and effective witnesses of a compassionate, healing and incarnate God who accompanies us on our human life journey toward new life, entering into our brokenness and comforting us in our pain and sickness.

An authentic response to the vocation of Catholic healthcare chaplaincy is rooted in a desire to continue the healing ministry of Christ as it finds expression in the faith and tradition of the Church. At the forefront of the Church's Mission, Catholic healthcare chaplains have a privileged and important role in evangelisation. In an increasingly secularised Ireland, chaplains facilitate an experience of Christ's healing and redeeming outreach, offering care and comfort through presence, word and sacrament. Their ministry touches patients, family members and healthcare colleagues.

Focused on providing spiritual care and emotional support in the face of intense suffering, grief and bereavement, chaplains work in collaboration with professional colleagues within healthcare facilities in the provision of holistic healthcare. They are especially attentive to the pastoral needs of the dying. Certification requires that one is a committed and theologically informed Catholic whose life is nurtured through a living faith and Christian spirituality. The practice of chaplaincy necessarily involves the attainment and maintenance of appropriate levels of personal maturity, of spiritual growth and formation, and of theological and professional competence.

The Catholic Church is conscious of the intense need for, and importance of high quality pastoral care within healthcare institutions. These Standards of Certification aim at ensuring that candidates for certification have an appropriate understanding and appreciation of the role of healthcare chaplains, and that they demonstrate the ability to minister with the required levels of formation and competence.

Standards for Certification in Catholic Healthcare Chaplaincy are reviewed at least every four years.

1. INTERVIEW PROCESS AND COMPETENCIES

1.1 In order to be certified as a Catholic Healthcare Chaplain the applicant must prepare and submit the required documentation and engage effectively in the interview process. The applicant must demonstrate competence and integration in the following four areas in both the documentation presented, and during the interview.

1.2 Theology and Theory of Pastoral Care

The candidate for certification will demonstrate:

- 1.2.1 an understanding of canon law and church discipline as it relates to pastoral care, chaplaincy and the administration of the sacraments (cf Book II and Book IV Code of Canon Law 83);
- **1.2.2** an ability to articulate a catholic theology of pastoral care that is integrated with a recognised theory of pastoral practice;
- **1.2.3** an understanding of scripture, moral theology, ecclesiology, sacramental theology, and Catholic Social Teaching;
- **1.2.4** a knowledge of bioethics, and an ability to incorporate a working knowledge of ethics appropriate to the pastoral context;
- **1.2.5** a working knowledge of psychological and sociological disciplines, and of religious beliefs and practices in the provision of pastoral care;
- **1.2.6** a capacity to integrate the spiritual and emotional dimensions of human development into the practice of pastoral care.

1.3 Personal and Spiritual Identity

The candidate for certification will demonstrate the ability to:

- **1.3.1** articulate a spirituality nurtured through prayer and sacraments, and grounded in a relationship with God, self and others as a practising member of the Church community;
- **1.3.2** function pastorally in a manner that respects the physical, emotional, and spiritual boundaries of others;
- **1.3.3** use pastoral authority appropriately;
- **1.3.4** identify one's professional strengths and limitations in the provision of pastoral care;
- **1.3.5** be self-reflective;
- **1.3.6** articulate ways in which one's feelings, attitudes, values, and assumptions affect one's pastoral care;
- **1.3.7** advocate for the persons in one's care;
- **1.3.8** attend to one's own spiritual, emotional, and physical well-being;
- **1.3.9** communicate effectively orally and in writing;
- **1.3.10** present oneself in a manner that reflects professional behaviour, including appropriate attire and personal hygiene.

1.4 Practice of Pastoral Care

The candidate for certification will demonstrate the ability to:

- **1.4.1** establish, deepen, and terminate pastoral relationships with sensitivity, openness, and respect;
- **1.4.2** offer and provide effective pastoral care and support that contributes to the wellbeing of patients, their families, and staff;
- **1.4.3** offer and provide pastoral care to persons experiencing loss and grief;
- **1.4.4** offer pastoral care resources appropriate to the care of patients, families, and staff that respects diversity and difference;
- **1.4.5** develop, coordinate and facilitate the celebration of liturgy, public worship, and spiritual practices appropriate to diverse settings and needs;
- **1.4.6** facilitate theological reflection in the practice of pastoral care;
- **1.4.7** triage and manage crisis in the practice of pastoral care.

1.5 Professional Competence

The candidate for certification will demonstrate the ability to:

- **1.5.1** promote the integration of pastoral care in the life and service of the healthcare institution:
- **1.5.2** establish and maintain professional and interdisciplinary relationships;
- **1.5.3** build peer relationships for the purpose of collaboration and active participation in the creation and maintenance of a healthy work environment;
- **1.5.4** adhere to the recognised standards for the safeguarding of children and vulnerable adults;
- **1.5.5** articulate an understanding of institutional culture and systems, and systemic relationships;
- **1.5.6** articulate a conceptual understanding of group dynamics and organizational behaviour;
- **1.5.7** support, promote, and encourage ethical decision-making and care, and document one's contribution of care effectively in the appropriate records;
- **1.5.8** foster a collaborative relationship with parish clergy and faith group leaders.

2. CERTIFICATION REQUIREMENTS

- 2.1 Candidates for certification require a degree in Catholic Theology that meets the requirements as laid down in Appendix I, from an institution recognised by the HCB, and which includes an adequate faith and pastoral formation (c/f Appendix I).
- 2.2 The theological appointee of the Irish Bishops' Conference to the Healthcare Chaplaincy Board will evaluate all theological requirements for certification in healthcare chaplaincy and advise the Board accordingly. (c/f Appendix I).
- 2.3 All queries in relation to qualifications in theology must be submitted in writing to the Healthcare Chaplaincy Board. Such queries will be referred to the Irish Bishops' Conference theological appointee who shall advise the Board accordingly.
- **2.4 EQUIVALENCY:** An equivalency may be granted for a unit of Clinical Pastoral Education (CPE) after successful completion of at least one unit of CPE in an accredited CPE centre.
- 2.5 All students of CPE, ordained, religious and lay people who wish to apply for an equivalency for one unit of CPE, are required to submit a completed application to the Healthcare Chaplaincy Board.
- **2.6 RECIPROCITY:** Candidates who are certified as healthcare chaplains in countries which have a reciprocal certification arrangement with Ireland, are required to undertake a familiarisation programme following consultation with the Healthcare Chaplaincy Board.
- 2.7 Candidates from outside of Ireland who wish to work as catholic healthcare chaplains in Ireland must present evidence of successful completion of the requirements for certification, as outlined in Appendix I. The Healthcare Chaplaincy Board will establish an interview with the candidate to assess the evidence presented.

APPENDIX I: THEOLOGICAL REQUIREMENTS FOR CERTIFICATION OF CATHOLIC HEALTHCARE CHAPLAINS

1. It is the role of the theologian appointed to the Healthcare Chaplaincy Board (HCB) by the Irish Bishops' Conference to evaluate all theological qualifications of applicants for certification and to advise the Board accordingly.

2. Level and duration of theology/religious studies course

Candidates for certification must possess a primary degree in Theology or Religious Studies. The degree programme must be of three years duration or equivalent. Each year of the degree programme must contain elements of either Theology or Religious Studies.

3. Minimum theology or religious studies course

It is required that 35% of the applicant's primary degree is in either Theology or Religious Studies.

4. Degree course content: specific requirements for Catholic healthcare chaplains

In addition to Systematic Theology, Moral Theology, Scripture and Liturgy there are some areas of study required, which are specific to Catholic Healthcare Chaplaincy. These include:

- **4.1** Specific consideration to the ecclesial nature of sacraments and ministry;
- **4.2** Sacramental ministry: Pastoral practice and Catholic regulations surrounding the administration of the sacraments;
- **4.3** Bioethics/Moral Theology;
- **4.4** Ecumenical and Inter-religious Dialogue.

APPENDIX II: REQUIREMENTS FOR CERTIFICATION INTERVIEW IN HEALTHCARE CHAPLAINCY

1. Candidates for certification in healthcare chaplaincy shall be required to demonstrate at their certification interview that they are familiar with and adhere to the Safeguarding Children and Vulnerable Adults: Standards and Guidance Document for the Catholic Church in Ireland.

Written confirmation that they have read and understand the contents of the document, and are fully compliant in their ministry will be required of all candidates.

- **2.** The applicant shall apply for interview for certification to the Healthcare Chaplaincy Board. When the applicant has been granted an interview, he/she will be informed of the chairperson and members of his/her interview panel, and also of the date, time and place of interview.
- **3.** The applicant shall make available to the chairperson, the following documents at least three weeks prior to the interview:
 - (a) A detailed up-to-date autobiographical history. (3 copies)
 - (b) A detailed curriculum vitae. (3 copies)
 - (c) Recommendation from ecclesiastical authority for lay or clergy, i.e. his/her bishop, religious superior/congregational leader, or parish priest.
 - (d) A copy of CPE Supervisor's evaluation of the candidate's final unit of CPE.
 - (e) A one thousand-word paper on the candidate's concept of healthcare chaplaincy. (3 copies)
 - (f) Two one thousand word essays (3 copies) demonstrating the candidate's knowledge and integration in any two of the following:
 - (i) Theology and Pastoral Practice
 - (ii) Theology and practice of Sacramental Ministry to the sick
 - (iii) Ministry in a multi-faith context
 - (iv) Bioethics and Moral Theology
- **4.** The fee must accompany the application. After an applicant has been granted an interview the fee is non-refundable.
- **5.** Interviews will normally be held three times each year, February, May and October.
- **6.** Candidates who are unsuccessful in their certification interview may re-apply for interview twice. The report(s) from the previous certification panel(s) must be included as part of the application form for the subsequent interviews.

APPENDIX III: INTERVIEW PANEL

The panel shall be appointed by the Healthcare Chaplaincy Board and will have three members, all of whom are Catholic, and one of whom shall have an advanced qualification in Catholic theology.

Candidates will be assessed according to their ability to demonstrate the required competencies as outlined in these Standards, in the documentation presented and in their engagement with the interview panel.

A report of the interview shall be sent by the chairperson of the interview panel to the secretary of the Healthcare Chaplaincy Board. The result of the interview shall be notified to the applicant after the next meeting of the HCB. All documents are then returned to successful candidates. Documents are returned to unsuccessful candidates after the time for appeal has expired.

APPENDIX IV: APPEALS PROCESS

- 1. An unsuccessful applicant for certification in healthcare chaplaincy who is of the opinion that the interview process was not adhered to, has the right to appeal to the Healthcare Chaplaincy Board (HCB) within thirty days of receiving notification of the decision regarding their interview.
- **2.** An appeal should be made in writing to the Chairperson of the HCB outlining the grounds for the appeal.
- **3.** On receipt of this document, the HCB will investigate the issues raised in the appeal and will communicate its decision in writing to the applicant.
- **4.** Any unsuccessful applicant who is still dissatisfied with the decision of the HCB may make a further appeal to the Council for Healthcare, through its chairperson. This appeal will be by way of a written submission setting out his/her grievances and shall be submitted within thirty (30) days of the final written decision of the HCB not to certify the applicant as a Healthcare Chaplain. The appeal applicant shall submit a copy of his/her appeal to the HCB at the same time.
- **5.** Within thirty (30) days of receipt of said submission, the Council for Healthcare shall establish an Appeal Board and appoint three members whose expertise shall be determined by the council, based on the nature of the grievance. One member shall be appointed chairperson.
- **6.** The Council for Healthcare shall seek from the HCB its report in writing indicating the reasons for the non-certification of the candidate with such observations on the appellant's submission and the recommendations of the HCB (if any) as it may wish to make.
- 7. The HCB shall within twenty-one (21) days of such a requirement for its report, complete and furnish same to the Council for Healthcare and the council shall forthwith send a copy of same to the appellant.
- **8.** Within sixty (60) days of the expiration of the twenty-one (21) days previously mentioned above, the Council for Healthcare will arrange a meeting between the Appeal Board and the appellant for the purpose of affording a further opportunity to consider all aspects of the matter and for the Appeal Board to decide if the noncertification should be upheld or over-ruled. The appellant shall be entitled to bring one person to this meeting to assist him/her but any cost or fee involved in such assistance/attendance shall be borne solely by the appellant.
- **9.** If as a result of new information coming to the attention of the Appeal Board at its meeting with the appellant, it may decide to seek further written or verbal clarification from the HCB prior to making a final decision.

10. Within thirty (30) days of such meeting, (outlined in paragraph 8 above), the Appeal Board shall make its decision on the grievance(s). Its decision shall be communicated in writing to, and shall be accepted by and binding on the appellant and the Council for Healthcare and the HCB. If the decision is to over-rule the original refusal of certification, the council shall forthwith direct the HCB to duly certify the person as qualified to be a Healthcare Chaplain.

Appendix V: Information regarding the Nomination and Sponsorship of Catholic Healthcare Chaplains

- 1.1 Certification of an applicant by the Healthcare Chaplaincy Board (HCB) attests to his or her qualification to work as a catholic healthcare chaplain. However, it does not entitle them to a position as a chaplain; that remains a matter in which the appointing authority needs the agreement of the competent ecclesiastical authority.
- **1.2** It is required that all full-time and part-time chaplains should have attained the standards for certification.
- 1.3 Full and part-time chaplains are nominated and sponsored by the appropriate Bishop and are appointed through open competition conducted by the healthcare facility. They are accountable to the Bishop and the management of the healthcare facility in accordance with the terms of their contract.
- 1.4 In keeping with the legitimate requirements of a contract of employment, if a Bishop should withdraw his sponsorship from a chaplain, she or he would cease to hold the position.

APPENDIX VI: JOB DESCRIPTION FOR HEALTHCARE CHAPLAINS (as agreed by the Catholic Healthcare Commission (CHC)¹ and HSE 2006)

1. Visiting

Patients on all wards, especially acute wards, and clinical departments will be visited by the members of the chaplaincy team appropriate to the patient's denomination, as soon as possible after admission.

The patient will control continuing contact.

Patients who specifically request no chaplaincy visit will have their wishes honoured.

2. Availability

The on-call chaplain will operate a 24-hour on-call emergency service, via the hospital pager system where appropriate.

All referrals will receive attention. The chaplaincy service will be offered irrespective of gender, race, creed or colour.

3. Pastoral Care

The chaplaincy will provide 24-hour cover to respond to the pastoral need of patients, relatives and staff within the resources available.

4. Spiritual/Religious

The chaplaincy will recognise and value other people's belief systems in a developing multi-cultural society through co-ordination with representatives or minister of all faiths.

As appropriate to faith and culture, the chaplaincy will provide opportunities and resources for individual and corporate prayer and worship.

The chaplaincy will provide 24-hour access to sacramental ministry where appropriate.

Mortuary Service: the chaplain will conduct prayers where appropriate and bring the hospital service to a dignified conclusion.

5. Professional Development

The chaplaincy will be committed to continued professional development through in-service training as provided by the chaplaincy organisations and associations to which members of the department are affiliated.

¹The role of the CHC was assumed by the newly established Council for Healthcare of the Irish Episcopal Conference as part of its work in 2013: See Appendix VII.

The chaplaincy shall follow the professional codes of conduct of the Health Service Executive/Hospital and the chaplaincy organisation.

6. Managerial

The chaplain will accept managerial accountability and will be directly responsible to the designated officer of the Health Service Executive/Chief Executive Officer of the Hospital or designate, as well as to the appropriate ecclesiastical authority.

The chaplain will liaise and link with all staff in providing an appropriate service to the patient.

The chaplain shall receive all internal communication directly.

The chaplaincy shall, if required, provide a report on departmental issues and initiatives.

7. Training, Education and Development

The chaplain will

- Have an input into nursing and staff training modules as requested
- Provide on-going training for chaplaincy staff
- If applicable will provide training for students in pastoral ministry
- Recruit on a voluntary basis people to assist him/her in their duties and to
 provide training for them in pastoral ministry as may be approved by
 the Health Service Executive or hospital, and in accordance with such
 procedures as may be set down by the Health Service Executive or
 hospital from time to time.

8. Theological and Ethical Issues of Healthcare

The chaplain will keep informed about current ethical issues of healthcare and shall be prepared to address ethical issues with those in authority within the Health Service Executive /Hospital.

9. Personnel Policies

The chaplain will acquaint himself or herself with the existing policies.

10. Miscellaneous

All religious groups and individuals offering a chaplaincy service, other than those accredited by the Health Service Executive /Hospital shall firstly be approved by the chaplaincy and shall be co-ordinated by the appropriate chaplain.

APPENDIX VII: OTHER CURRENTLY RELATED ORGANISATIONS

The Council for Healthcare:

The Council for Healthcare is a council of the Irish Catholic Bishops' Conference, which was established in 2013. The Catholic Healthcare Commission (CHC), which was a joint commission of the Irish Catholic Bishops' Conference and the Conference of Religious of Ireland, and of which the Healthcare Chaplaincy Board was previously a subcommittee, was dissolved in 2013. The role of the CHC was assumed by the Council for Healthcare as part of its work. The Healthcare Chaplaincy Board became a subcommittee of the Council for Healthcare in September 2013. All members of the Council for Healthcare are appointed by the Bishops' Conference.

Healthcare Chaplaincy Board (HCB):

The Healthcare Chaplaincy Board is a sub-committee committee of the Council for Healthcare and is convened by the council.

The Healthcare Chaplaincy Board oversees and promotes catholic healthcare chaplaincy services in Ireland. Its memberships includes representatives of the Irish Bishops' Conference, the Conference of Religious of Ireland (CORI), the Association of Clinical Pastoral Education (Ireland) Ltd. {ACPE (I)}, the National Association of Healthcare Chaplains, (NAHC), and others with specific experience and expertise appointed by the Council for Healthcare

Dublin Roman Catholic Diocesan Healthcare Chaplains Association:

The Dublin Roman Catholic Diocesan Healthcare Chaplains Association is a professional association of Roman Catholic chaplains who are appointed by the Archbishop to chaplain positions in hospitals and other healthcare facilities in the Diocese of Dublin. A significant number of Ireland's major acute care hospitals, long-term care facilities, hospices, paediatric services, maternity hospitals, mental health facilities etc., are located within the Diocese of Dublin. The association offers support and peer-ship, as well as resources for on-going theological and spiritual development, and opportunities for continuing professional development and up-skilling to members.

Cork and Ross Roman Catholic Diocesan Healthcare Chaplains Association

The Cork and Ross Roman Catholic Diocesan Healthcare Chaplains Association is a professional association of Roman Catholic chaplains who are appointed to chaplain positions in hospitals and other healthcare facilities in the diocese. The association offers support and peer-ship, as well as resources for on-going theological and spiritual development, and opportunities for continuing professional development and up-skilling of members.

It is envisaged that an **Association of Roman Catholic Chaplains for all of Ireland** will be established, which will offer support and opportunities for continuing theological and professional development for Roman Catholic chaplains ministering in all diocese throughout Ireland.

National Association of Healthcare Chaplains (NAHC)

The National Association of Healthcare Chaplains is a professional association whose members serve as chaplains in hospitals and healthcare facilities in Ireland. The purpose of the NAHC is the mutual encouragement and support of its members in ministering to patients, their relatives and staff in healthcare facilities.

Association of Clinical Pastoral Education (Ireland) Ltd. (ACPE (I) Ltd):

ACPE (I) Ltd. is a professional and interfaith association, which certifies persons as pastoral educators in the clinical pastoral education (CPE) method. CPE supervisors direct CPE programmes and administer accredited CPE centres. The standards of ACPE (I) Ltd. have been accepted and ratified by the Healthcare Chaplaincy Board. Any changes in these standards must be submitted for approval to the Healthcare Chaplaincy Board.