

**STANDARDS FOR CERTIFICATION
OF
CATHOLIC HEALTHCARE
CHAPLAINS**

Healthcare Chaplaincy Board

**STANDARDS FOR CERTIFICATION
OF
CATHOLIC HEALTHCARE CHAPLAINS**

*Approved by the Irish Episcopal Conference
and The Conference of Religious of Ireland in June 2008.
These Standards will be effective from 1 January 2009*

June 2008

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INTRODUCTION

The context of Ireland at the beginning of the 21st Century is changing and complex. A robust and successful economy has developed alongside an increasingly secular society that is evolving with a multicultural and multi-faith population. It is within this context that Catholic Healthcare Chaplains are called to respond. Catholic Healthcare Chaplains take their place as part of a multi-disciplinary team, dealing in a responsible, professional and accountable way with those in its care. They offer spiritual, psychological and emotional support to those to whom they minister and at all times they will recognise and honour professional boundaries.

Catholic Healthcare Chaplains are at the forefront of the Church's mission. They offer both sacramental ministry and pastoral care in their ministry with patients, their families and the staff of the hospital. In living out this mission they need to draw on a deep spiritual and inner strength that builds upon a consciousness of the importance of faith formation.

Two thousand years ago, Jesus brought healing into a broken world and hope to the most difficult of human situations. Catholic Healthcare Chaplains continue this ministry of caring in today's world. It is a ministry that is grounded in the faith and tradition of the Catholic Church. The Standards that follow are intended to provide Catholic Healthcare Chaplains with the training and competence to enable them to fulfil the aims of the Introduction.

These Standards will be reviewed at least every four years.

1. GUIDELINES

- 1.1 These standards set out herein are for the Catholic Chaplaincy Service. It is hoped that they may be helpful to other Churches and that they will promote co-operation between chaplaincy services.
- 1.2 Full and part-time Chaplains are 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.
- 1.3 Certification of an applicant by the Healthcare Chaplaincy Board (HCB) demonstrates that the applicant is qualified as a Catholic Healthcare Chaplain.
- 1.4 It is recommended that all full-time and part-time Chaplains should meet the following standards.

2. COMPETENCIES

- 2.1 In order to be certified in chaplaincy the applicant must give evidence of his/her personal, professional and theological ability to minister effectively as a healthcare Chaplain.
- 2.2 Candidates will be assessed at interview in the light of the documentation that is sent to the interview panel under the following headings:
 - (a) Personal Identity
 - Self-awareness/Spirituality
 - Personal authority/Conflict
 - Faith formation/ Faith commitment

(b) Professional Identity

- Role acceptance/fulfilment
- Interpersonal skills
- Professional competencies

(c) Theology

- Integration of Theology and Pastoral Practice
- Theory and Practice of Sacramental Ministry to the sick
- Ministry in a multi-faith context
- Bioethics and Moral Theology.

3. CERTIFICATION REQUIREMENTS AND RECIPROCITY

- 3.1 The Irish Bishops' Conference theological appointee to the Healthcare Chaplaincy Board will evaluate all theological requirements for certification in healthcare chaplaincy and advise the Board accordingly. (cf Appendix I).
- 3.2 From 1 January 2012, a degree in Catholic theology that meets the requirements as laid down in Appendix I from a recognised college/university/institution, recognised by HCB, which includes an adequate personal, faith and pastoral formation will be necessary. (c/f Appendix I) In the interim, candidates with one-year full-time qualification in Catholic Theology from a College recognised by the HCB, with certificate, (c/f Appendix I), may be interviewed to assess their suitability.
- 3.3 Successful completion of three units of Clinical Pastoral Education (C.P.E) in an accredited training centre, or its equivalent.
- 3.4 It is necessary for candidates certified as Healthcare Chaplains in countries that have a reciprocal certification arrangement with Ireland, to undertake a familiarisation programme following consultation with the Healthcare Chaplaincy Board.

4. EQUIVALENCY

- 4.1 All students of CPE, ordained, religious and lay people who wish to apply for equivalency for a unit of CPE, are required to make a written application to the Healthcare Chaplaincy Board.
- 4.2 All queries in relation to qualifications in theology are required to be made 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.
- 4.3 Those coming from abroad seeking approval as Catholic Healthcare Chaplains must present evidence of successful completion of the requirements for certification as outlined in Standard 3 above and be interviewed by the Healthcare Chaplaincy Board in the light of the foregoing standards.

APPENDIX I:

THEOLOGICAL REQUIREMENTS FOR CERTIFICATION OF CATHOLIC HEALTHCARE CHAPLAINS

1. The Irish Bishops' Conference theological appointee to the Healthcare Chaplaincy Board will evaluate all theological requirements for certification in healthcare chaplaincy and advise the Board accordingly.

2. **Level and duration of Theology/Religious Studies Course**
Theology or Religious Studies must have been studied to a degree level for at least three years or equivalent and in each year of the applicant's primary degree course. Theology or Religious Studies must have been studied as a subject in each year of the course.

3. **Minimum Theology or Religious Studies Course**
Theology or Religious Studies must have been studied for not less than 35% of the total taught time throughout the applicant's primary degree course.

4. **Degree Course Content: Specific Requirements for Catholic Healthcare Chaplains**
Over and above the general topics in Systematic Theology, Scripture, Liturgy and Moral Theology that one would expect to be covered in a recognised Theology or Religious Studies degree programme, there are specific requirements for Catholic Healthcare Chaplains that must be addressed. These include:
 - Specific consideration to the ecclesial nature of sacraments and ministry
 - Sacramental ministry, Pastoral practice and Catholic regulations surrounding the administration of the sacraments
 - Special issues in bioethics/Moral Theology
 - Ecumenical and Inter-religious Dialogue

APPENDIX II: REQUIREMENTS FOR CERTIFICATION INTERVIEW IN HEALTHCARE CHAPLAINCY

1. 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 of their interview panel and of the date, time and place of interview.
2. 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, or religious superior/congregational leader for religious.
 - (d) A copy of CPE final evaluations or its equivalent.
 - (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:
 - Theology and Pastoral Practice
 - Theology and practice of Sacramental Ministry to the sick
 - Ministry in a multi-faith context
 - Bioethics and Moral Theology
3. The fee must accompany the application. After an applicant has been granted an interview the fee is non-refundable.
4. Interviews will be held three times each year, February, May and October.
5. 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, one of whom shall have competency in Theology.

Candidates will be assessed at interview in the light of the documentation that is sent to the interview panel under the following headings:

- (a) Personal Identity
 - Self-awareness/Spirituality
 - Personal authority/Conflict

- (b) Professional Identity
 - Role acceptance/fulfilment
 - Interpersonal skills
 - Professional competencies

- (c) Theology
 - Theology and Pastoral Practice
 - Crisis experience.

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.

APPENDIX IV: APPEALS PROCESS

1. An unsuccessful applicant who is of the opinion that the interview process was not adhered to, has the right to appeal to the Healthcare Chaplaincy Board within thirty days of receiving notification, by registered post, of the decision regarding their interview.
2. An appeal should be made in writing to the Chairperson of the Healthcare Chaplaincy Board outlining the grounds for the appeal.
3. On receipt of this document, the Healthcare Chaplaincy Board will investigate the issues raised in the appeal and will communicate its decision to the applicant.
4. Any unsuccessful applicant who is still dissatisfied with the decision of the Healthcare Chaplaincy Board may make a further appeal to the Catholic Healthcare Commission, through its Chairperson.
5. On receipt of this communication it is the responsibility of the Catholic Healthcare Commission to appoint an Appeals Board. To ensure that the right of appeal is seen to be fair and unbiased, the Appeals Board must be independent of the parties originally involved in the process that gave rise to the alleged grievance.
6. Copies of the protocol for appeals are available from the CHC office:
The Catholic Healthcare Commission,
c/o C.A.S.S., P.O. Box 10858, Blackrock, Co.Dublin
Tel: (01) 2782693
Email: danielle_cass@ireland.com www.catholichealthcare.ie

APPENDIX V: JOB DESCRIPTION FOR HEALTHCARE CHAPLAINS AS AGREED WITH THE HEALTH SERVICES EXECUTIVE

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 Developments

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.

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 ongoing 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 VI: OTHER CURRENTLY RELATED ORGANISATIONS

Catholic Healthcare Commission (CHC):

The Joint Healthcare Commission was formed in October 1987 to represent the needs of the Catholic Church in healthcare. In 2001 the Commission changed its name to the Catholic Healthcare Commission. The composition of the Catholic Healthcare Commission is as follows: -

- The Irish Bishops' Conference
- The Conference of Religious of Ireland
- The National Association of Hospital Chaplains.

Healthcare Chaplaincy Board (HCB):

The Healthcare Chaplaincy Board is a standing committee of the Catholic Healthcare Commission.

The Healthcare Chaplaincy Board oversees and promotes Catholic healthcare chaplaincy services in Ireland. The Catholic Healthcare Commission convenes this Board. It has three representatives from each of the following: The Irish Bishops' Conference, The Conference of Religious of Ireland (CORI), Association of Clinical Pastoral Education (Ireland) Ltd. {ACPE (I)}, The National Association of Hospital Chaplains, (NAHC).

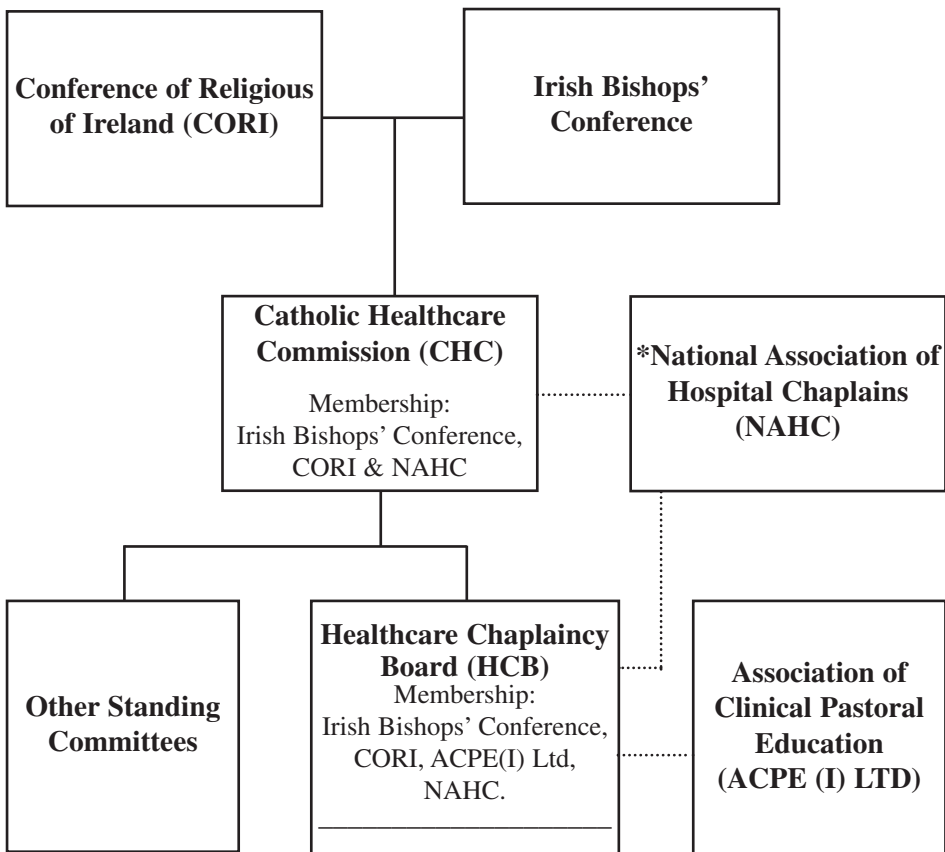
Association of Clinical Pastoral Education (Ireland) Ltd. (ACPE (I) LTD):

ACPE (I) Ltd. is the organisation which has the responsibility for the certification of CPE Supervisors and for the direction and administration of courses in Clinical Pastoral Education. 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.

National Association of Hospital Chaplains (NAHC)

The National Association of Hospital 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.

APPENDIX VII ORGANISATIONAL CHART



*The National Association of Hospital Chaplains is an independent body and is represented on the CHC & HCB