

Multi-Faith Group for Healthcare Chaplaincy



BULLETIN 11 – December 2006

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Welcome

Welcome to Bulletin 11 from the Multi-Faith Group for Healthcare Chaplaincy. In this edition, is information from the Council meeting held in September 2006.

Welcome to new members

The Council has recently welcomed Mr Kobad Avari on behalf of the Zoroastrian Community, Mr Simon Goulden and Rabbi Meir Salasnik on behalf of the Jewish Community and Mr Keith Munnings on behalf of the Buddhist Community.

And farewell to the Chairman

Rabbi Martin van den Bergh has taken up his new post as Rabbi to the Ohel Leah Synagogue in Hong Kong. Council members paid tribute to his work as a Rabbi within healthcare and also as the chairman of the MFGHC. Mr Sital Singh Maan will act as Chairman until the New Year.

And welcome new Honorary Officers for 2007-08

Mr Sital Singh Maan has been elected as Chairman and Mr Manhar Mehta has been elected as Vice Chairman for the period of 2007-08. Elections of Co-Chairs for Education and for Standards are taking place in December.

The Mirfield Report

The Council has discussed this report twice and the Executive Committee has also considered how best to respond. The Council takes the view that all stakeholders including the faith communities represented on MFGHC should have an effective role in determining the direction of spiritual healthcare services along the lines suggested and that the process should evolve and not be imposed.

Members were supportive of the action proposed and the Council has agreed to provide an event which would support the faith communities, the professional associations and the NHS in working "more closely together in sustaining and valuing healthcare chaplaincy

and its care of the healthcare family." They agreed also that great care should be taken to ensure that a longer-term vision acceptable to all chaplaincy bodies could be achieved through this work.

The Council has asked Revd Debbie Hodge to lead the detailed planning of this event working with a small planning group.

European Network of Health Care Chaplaincy

The Chief Officer had attended the recent meeting of the European Network of Health Care Chaplaincy held in Lisbon. The Network had 38 groups in membership from across Europe. Council agreed to invite the Co-ordinator of the Network to meet with the Council when appropriate. It was also agreed to determine whether the work of MFGHC might attract a grant from the EU.



Publicising the MFGHC draft quality standards

The Standards Committee had met in November 2005 to review the outcome of the listening exercise with chaplains on quality standards of spiritual healthcare held during the summer period. Several comments had been received and a clearer and fuller document is available as a result.

The second stage of the listening exercise was planned to be a consultation with NHS bodies via SHAs intended for early in 2006. This has not taken place because of

the re-structuring of NHS management allied to which those in place currently have been tasked with resolving issues of financial stewardship against which the issue of standards in spiritual healthcare looks minor.

The Council agreed that the listening exercise with NHS bodies should be re-planned for 2007 when the nature and scale of the bodies themselves was clear. In the meantime, they agreed that the current set of quality standards should be commended to NHS Bodies.

An NHS Standard for spiritual healthcare

Despite the difficulty of the NHS restructuring, the Chief Officer was able to report that discussions with the Healthcare Commission had established that the Commission would link the inspection of core standard C13a (healthcare organisations have systems in place to ensure that staff treat patients, their relatives and carers with dignity and respect) to the need to take "...into account different interpretations of dignity and respect for people from different faiths...." Effectively this provided for an inspection of spiritual healthcare albeit one which was rather extended.

In discussion, it was agreed that there was still a necessity to establish care of spiritual needs as a core NHS standard on its own rather than either an adjunct to privacy and dignity or as a development standard for consideration in due course.

The Council agreed that, as an objective, it would seek to reach agreement with the Departments of Health that the current NHS developmental standard D2 (b) (Patients receive effective treatment and care that take account of their individual preferences and meet their physical, cultural, spiritual and psychological needs and preferences) should be made a core standard by the end of 2007.

The MFGHC allocation of the FCDF grant for 2006-07

The Council noted that the Executive Committee agreed at its July meeting that grants of £1500 should be made to the Jain and Sikh communities, and also to the Buddhist community subject to clarification of some detail.

The Sikh community intended to use these funds to support a day conference in Birmingham when the concept of Sikh chaplaincy would be explored and volunteers sought. The Jain community was intending to make presentations for community meetings with the same purpose.

The central allocation for chaplaincy 2006-07

The Council had been supportive of the James Report issued in 2005 which had proposed a new basis for the use of these funds including leadership posts for the Free Churches, Jewish and Muslim chaplaincies and

the use of the remaining funds to support other faith communities and their chaplaincy development. Members expressed concern that the allocation for 2006-07 had not been issued and hoped that some assurance for the future could now be given.

In response, Alan Wittrick on behalf of NHS Yorkshire and the Humber emphasised that the allocation was for one year only and that the serious concern over NHS funding had lead DH officials to review all central allocations including that for hospital chaplaincy. He understood that no news was likely for another month or two and that the grant may also be reduced in size as a result of these considerations.

NHS financial strategy and its impact on chaplaincy

The Council has discussed a paper prepared by the Chairman which indicated that, as part of the NHS' effort to achieve financial balance in 2006-07, NHS Trusts were being supported in making strenuous efforts to achieve this target. Considerable effort was going toward persuading NHS Trusts to take a moderate approach to financial savings within chaplaincy. The Council needed to agree an approach to this issue based on concern about individual Trust action whilst also surveying and reporting on the NHS-wide position.

After further discussion, the Council agreed that the Chairman should write to the Chairman of the Worcester Acute Hospitals NHS Trust to register concerns about the situation there. The Council also agreed to seek a meeting with Ministers to discuss the policy and standards for chaplaincy-spiritual care in health and social care.

Communicating the work of the MFGHC

The MFGHC has established a website (www.mfghc.com) where its work will be highlighted. It intends to publish an e-bulletin about its progress every four months. For routine communication, Edward Lewis can be contacted at the address given above.

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