NHS Grampian Spiritual Care Committee

Report on the work of Healthcare Chaplains in NHS Grampian
January 2007

NHS Grampian is committed to providing holistic healthcare which is
responsive to the physical, psychological, emotional and spiritual needs of its
patients. Appropriate spiritual, pastoral and religious care will be offered to
patients, their relatives and carers and to staff. This care is available to
people with or without specified religious beliefs.

Spiritual Care in NHS Grampian November 2005

1. Introduction

This statement from the Grampian Spiritual Care policy sets the parameters
for the work of our healthcare chaplains. Chaplains are expected to be at the
forefront of the provision of spiritual, pastoral and religious care; they are
required to offer this care to people with or without specified religious beliefs
as part of the multidisciplinary team. A team of whole-time chaplains provide
care in the Aberdeen hospitals, while sessional, part-time chaplains are
appointed to each of the community hospitals and to Dr Gray’s hospital in
Elgin. This year, steps have been taken towards and integrated chaplaincy
service, led by the head of spiritual care who works from Aberdeen Royal
Infirmary.

The past 18 months have been a time of great change for chaplaincy. This
Annual Report was due to be presented in November 2006, but because of
the uncertainties at that time about the long expected transfer of employment
of the whole-time chaplains and the excessive additional workload generated
by the Agenda for Change process, the report was delayed. Most of the
whole-time chaplains transferred from the Church of Scotland to NHS
Grampian on 1 January 2007 and it is anticipated that chaplains will be
assimilated into Agenda for Change pay bands at the end of February.

2. Staffing

Because of the uncertainties mentioned above it was decided that vacant
chaplaincy posts in Aberdeen should be filled on a temporary basis until the
end of January 2007, to allow time for a detailed consideration of the
configuration and grade of posts required to deliver the service. Together with
an examination of the additional costs that might be required because of
transfer of employment. The chaplaincy team is very grateful to the staff who
filled these temporary posts willingly and with great skill. As the temporary
posts come to an end, we would like to record our thanks to John Duthie,
Trudy Noble, Alison Swindells and Anita van der Wal.

In the summer of 2006 Marian Cowie resigned the post of assistant chaplain
which she had filled with great skill and dedication for a number of years. She
has now been appointed minister of the Midstocket Church of Scotland
congregation in whose parish are the hospitals on the Foresterhill site. The
chaplaincy team looks forward to building on the relationship with that congregation which has existed for a number of years. The final permanent configuration of the acute sector team has now been decided: two assistant chaplain posts have been upgraded to chaplain grade and 2 part-time assistant posts are about to be advertised. We now look forward to a period of stability after the long period of change and uncertainty.

There have also been a few staffing changes outside Aberdeen: Canon Alistair Doyle moved from serving as Roman Catholic chaplain at Elgin and is now sharing in the ARI Catholic chaplaincy team. His place in Elgin has been taken by Deacon Vincent McQuaid. Rev Syliva Dyer has retired from the chaplaincy at Turriff. The situation about the appointment at Insch still remains to be clarified.

The arrangement with NHS National Services for chaplains in Aberdeen to offer spiritual care to the staff at the Blood Transfusion Service and at the offices at Bridgeview came to an end in November 2006 as a new national approach for this Board was initiated. Informal contacts, however, still remain in place.

3. Delivering Spiritual Care

The NHS Grampian Spiritual Care Policy was revised in the latter part of 2005. Comments were received from a wide range of organisations and individuals and the final version was approved by the Spiritual Care Committee in November 2005. This policy is the basis on which spiritual care is provided.

Chaplains provide religious support to many patients, relatives and staff through prayer and sacrament. Much of their work, however, is in the area of spiritual care, helping people who may have no connection with any religious group reflect and make sense of their situation as they find themselves facing illness or injury. Their responsibility is not just to the few who may profess a particular religion but to the many.

One particular example of this is the practice of the chaplain at the Oaks palliative care day unit in Elgin. For part of his time he works with patients in the garden, getting to know them and offering support as they carry out manual work together. Chaplaincy is not just about saying prayers with patients!

4. Roman Catholic Chaplaincy

There has been a radical reorganisation of how Catholic patients in Aberdeen are cared for. Canon Bill Anderson retired at the beginning of 2006 as Catholic Chaplain at ARI. As part of a reorganisation of priest’s duties in Aberdeen, the Bishop has now appointed a team of 5 priests to respond to emergency calls by a radio pager. Regular visiting of patients is carried out by various priests, deacons and volunteers in different hospitals.
During the year Sr Gina Chua who had been appointed by the Bishop to work at Aberdeen Royal Infirmary was moved by her order to Dublin. This left two volunteers, Jackie Cozzie and Trudy Noble to do the bulk of the regular visiting and taking communion to patients, supported by a group of priests who visit on 2 afternoons a week. Jackie has recently resigned and we extend our grateful thanks for all that she has done through the years to care for and support Catholic patients at Aberdeen Royal Infirmary.

5. Head of Spiritual Care

The Head of Spiritual Care seeks to develop spiritual care, Grampian wide, and leads the team of healthcare chaplains. Limited finance has dictated that only one day a week has been funded for this post. Fred Coutts continues to combine these duties with his chaplain post in the Acute Sector.

6. Data Protection Act

At the end of 2006 the Department of eHealth in NHS Grampian decided that the access to information about patients previously enjoyed by the chaplains was a “clear breach of the Data Protection Act” and must be restricted to patients recorded as having given their consent. Unfortunately the accuracy of the information stored on the computer system about the wishes of patients is far from complete and accurate. Attempts are being made to improve the data quality. Chaplains are required, and do, offer care to patients and relatives who are not recorded as having given their consent. Much extra time must now be spent trying to locate patients, discover if they have been discharged or transferred, either by visiting or phoning individual wards or enquiring at Health Records.

The chaplains are grateful for the new lists of patients, restricted to those who have consented, which have now been developed for them. However the work which the chaplains are required to do by the Spiritual Care Policy has been severely compromised by this unwelcome decision. Further, the amount of information which they can provided to denominational chaplains and to visiting faith group leaders is also now greatly reduced.

7. Employment Issues

Much extra work was generated in 2006 because of the decision by the Church of Scotland to transfer the employment of whole-time chaplains to the NHS. After a long period of uncertainty, the transfer of 8 chaplaincy posts took place on 1 January 2007. There is still uncertainty about one post which has not yet been transferred. The next stage of the transfer will be national negotiations about the transfer of part-time sessional chaplains, including those who serve in the hospitals outwith Aberdeen.

At the same time the NHS has been going through a change in employment practice called Agenda for Change. The chaplains have been involved in the lengthy tasks of preparing detailed job descriptions and discussing the associated Knowledge and Skills Framework for the posts. It is anticipated
that the whole-time chaplaincy posts will be assimilated into *Agenda for Change* at the end of February 2007.

8. **Volunteers**

Chaplains are very grateful to the large group of volunteers who support their work through acting as Sunday Escorts bringing patients to and from the services, and also the smaller group of trained visitors who visit in different wards throughout the hospitals. A new 6 week training course has just started with 14 potential ward visitors participating.

9. **Chapels**

Since the last report the new chapel and office facility for the chaplains at Royal Cornhill Hospital has been opened. On the positive side the chaplains report the great benefit to their work of being located right at the centre of the hospital. This allows patients, relatives, carers and staff to pop in, and much support is enabled in this way. It is also good to have a quiet chapel facility available to those who would wish to use it for personal prayer and reflection. However on the negative side the chapel is now proving too small for the number of patients who wish to attend the Sunday Services held there. Forward planning is required to seek to resolve this situation.

The long awaited chapel/spiritual room facility at Dr Gray’s Hospital seems one step closer with a location and budget now identified. It is hoped that this development will now take place in the near future. This will also be the future home for the Sunday service provided by the chaplains (itself a comparatively new development). At present the service takes place in the Education Suite which was also the location of the first memorial service for stillborn babies held in Elgin.

10. **Religions and Cultures**

Chaplains played a major role in the preparation and publication of *Religions and Cultures in Grampian* – a practical guide for health and social care staff to the diversity of beliefs, customs and cultures of the people of Grampian. This booklet which provides information about faith and culture groups has been widely distributed round NHS Grampian and has been widely welcomed by other groups too.

11. **Website**

Spiritual Care pages can now be found on the NHS Grampian public website: [www.nhsgrampian.org](http://www.nhsgrampian.org) where visitors can access information about chaplains, chapels, religion and cultures, bereavement and the Spiritual Care Committee etc. More detailed information appropriate to NHS staff is available on the NHS Grampian Intranet.

12. **Conclusion**
After a long period of uncertainty the chaplains are looking forward to some more stability over the next period so that they can focus again on their main task of providing spiritual, religious and pastoral care to patients, relatives and staff.

Fred Coutts
Head of Spiritual Care
January 2007