

CHAPLAINCY AND SPIRITUAL CARE POLICY

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DOCUMENT CONTROL

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1. INTRODUCTION

- 1.1 The NHS is committed to holistic care. This means that we view people as individuals with varied and complex needs – and not just as patients, carers, staff or volunteers.
- 1.2 The United Kingdom has a diverse population of people who adhere to and celebrate different religions and beliefs. Freedom of religion and belief is a human right, protected by legislation. Somerset Partnership NHS Foundation Trust seeks to provide appropriate spiritual, pastoral and religious care. This care is available to all patients – regardless of religious affiliation or belief.
- 1.3 The 2011 Census data for Somerset shows that 64% of residents identified themselves as Christian, a reduction since 2001, when 75% of respondents did so. 27% of respondents claimed not to have any religious beliefs, and 8% did not respond to the question.

2. PURPOSE & SCOPE

- 2.1 This policy and procedure details how the Trust will deliver its services and treat its staff in a personal, fair and diverse manner in relation to religion and belief.
- 2.2 The Trust has a legal responsibility to ensure that the services it provides and the way it manages its staff do not unfairly discriminate against anybody on account of their religion or belief.
- 2.3 The Trust recognises it is important that patients' religious or spiritual practice should be respected and that it can enable recovery.
- 2.4 This policy relates to all staff, patients, carers and volunteers and impacts on the Trust's relationships with the communities it serves.

3. DUTIES AND RESPONSIBILITIES

3.1 Duties within the Organisation

Duties in respect of the requirements of this policy are as follows:

- The **Director of Governance and Corporate Development** has overall responsibility for the implementation of this policy
- The **Co-ordinating Chaplain** leads and manages the chaplaincy and spiritual care team; ensures that Chaplaincy Standards are agreed and maintained; recruits and manages suitable chaplains for faith groups represented in Somerset; including volunteers, liaises with local faith communities.
- **Chaplains:** provide leadership in the provision of spiritual and religious care to patients, carers and staff. Chaplains will not assume ongoing responsibility for the spiritual care of individual patients.
- **Matrons, Ward Managers and team leaders:** are responsible for ensuring that the services they manage or commission adhere to this

policy, and that their team members are made aware of key aspects of religious life that may impact on their patients and their associated requirements. They are responsible for maintaining adequate procedures to ensure that patients are enabled to give information about their religion or belief at any point in their care pathway, and that such information is correctly recorded and used throughout their care.

- **All Trust staff** have a duty to respect different faith groups within their community, to work in ways that include people of different religions and beliefs, to report bullying or harassment, and to enable service users to advocate for their spiritual and religious needs. All frontline clinical staff should acquire a basic awareness of major religions and beliefs and how to secure the practical requirements of diverse religious groups, including an understanding of non-belief.

4. EXPLANATION OF TERMS USED

- 4.1 **Spirituality:** The term is accepted as a broad one that means different things to different groups, including: religion; an existential meaning (the 'meaning of life'); and the act of caring compassionately for other people.

The H.O.P.E. model of describing spirituality is similar to the above in the way it breaks down the definition of spirituality into four areas:

- H Sources of hope, meaning, peace, comfort, strength, love, connection, relationships, a sense of vocation, prior coping strategies
- O Organised religion
- P Personal spirituality and practices
- E Effects on care, end of life issues, support, treatment, empowerment, affirmation, respect, handling of challenging experiences and feelings

- 4.2 **Religion** is a system of beliefs, encompassing belief in the existence of, for example: a human soul or spirit, a deity or the divine, and higher being or self after death. Some of the main religious groups include Buddhism, Christianity, Islam, Judaism and Sikhism. Religious life may affect language, culture, diet, clothing, and rituals at significant life stages. People may affiliate to more than one religion, or may consider themselves to be spiritual but not affiliated to any religious group.

- 4.3. **Belief** includes belief in religious doctrines or tenets and also non-religious belief such as atheism or humanism. As religion encompasses both belief and culture, it is possible for a person to be both religious in identity and yet atheist in belief.

- 4.4. **Chaplain:** a person, ordained or otherwise recognised, within a faith community and appointed by an NHS Trust to work within and alongside its multi-disciplinary teams

- 4.5 **Chaplaincy Volunteer:** volunteers from faith communities working for the Trust under the supervision of chaplains.

5. IMPLEMENTING THE POLICY

5.1 **Members of Staff** are encouraged to communicate their religion or belief sensitively to their colleagues. Bullying or harassment should be reported immediately.

5.2 Staff should facilitate a welcoming and supportive environment for all faith groups. Staff should seek help from chaplains if they feel unsure about appropriate responses to religious need or distress, or if the service user requests additional support.

5.3 **Chaplains** will be led by the **Co-ordinating Chaplain** appointed by the Trust. The Chaplaincy team will include permanent and voluntary chaplains.

5.4 The **Co-ordinating Chaplain** will:

- ensure there is an appropriate number of staff in the Chaplaincy/Spiritual Care Team, who are recruited in accordance with the Trust's staff and volunteer recruitment procedures and are appropriately managed and professionally supported
- maintain an overview of the work of the Chaplaincy/Spiritual Care Team, especially in terms of developing local relationships, keeping and updating the spiritual support resources database on the Trust intranet and fostering understanding of the relationship between health, religion and spirituality
- support chaplains and staff to access, on behalf of patients, spiritual support from other faiths or denominations, as required
- provide managerial and professional supervision to the Trust's chaplaincy team members
- ensure that chaplains are equipped with the resources to provide spiritual care and are suitably qualified and trained
- ensure that regular supervision of pastoral and caring work of Chaplains takes place - either individually or as a chaplaincy group.
- undertake and publish a report of the annual review of Chaplaincy services and accompanying action plan

5.5 **Chaplains** will:

- provide opportunities for worship and religious expression within each hospital/ward within the Trust and will assist those of all faiths and beliefs to access and receive the support of their particular community.
- undertake all appropriate employment checks and all mandatory and essential training appropriate to their roles
- have regular supervision with the Co-ordinating Chaplain and an annual appraisal with the Co-ordinating Chaplain and the Matron/Ward Manager.
- be responsible for providing regular supervision to Chaplaincy Volunteers
- support carers and staff at times of crisis or significant life events
- be aware of the needs of diverse faith groups at times of significant life events, and will offer guidance to staff about delivery of care at these times, particularly where that care may impact on clinical procedures (for example, around end of life care)
- adhere to the confidentiality regulations that govern all healthcare workers

5.6 Chaplains are not considered to be a key part of staff support, which is provided through other services; such as Well@Work. However, staff may use chaplains for support around religion and spirituality, especially if they perceive that their religion or belief is leading to stigma or discrimination, or if their work is felt to challenge their religion or belief.

5.7 **Chaplaincy Volunteers** will:

- enhance the Trust's ability to respond to the needs of diverse faith groups. They will work under the supervision of chaplains and ward staff in inpatient wards
- be supervised on a quarterly basis by Chaplains. They will be expected to declare any contact with patients which occurs outside Trust premises to ensure full accountability e.g. a member of their faith community/support group etc.
- seek the support of the Co-ordinating Chaplain between Supervision session if they encounter distressing situations within their work for the Trust
- be given additional training by Chaplains, and may be recommended to attend elements of staff internal training
- be expected to have DBS and other volunteering checks in line with all those who have access to patients and carers who may be highly vulnerable.

The Chaplaincy Service

5.8 Information on the chaplaincy service and access to support for those of diverse faiths will be available to staff on the Trust intranet and will be maintained and updated by the Co-ordinating Chaplain.

5.9 The Chaplaincy Service seeks to:

- support patients, their families and carers
- provide a caring, confidential listening ear to anyone who wants to talk through their experience, whether or not they have a specific religious faith
- enable the provision of appropriate religious care, for example religious services from hospital chapels, quiet rooms, day rooms or other designated spiritual spaces and Holy Communion at the bedside, prayer, religious or spiritual readings, special services to mark the seasons, Christmas, Easter, Harvest, Remembrance etc.

6. TRAINING REQUIREMENTS

6.1 A brief introduction to religion, belief and spirituality will be provided within the Trust staff induction programme.

6.2 Specific elements and/or training will be provided by the Chaplaincy and Spiritual Care team, as required or requested.

7. EQUALITY IMPACT ASSESSMENT

7.1 All relevant persons are required to comply with this document and must demonstrate sensitivity and competence in relation to the nine protected characteristics as defined by the Equality Act 2010. In addition, the Trust has identified Learning Disabilities as an additional tenth protected characteristic. If you, or any other groups, believe you are disadvantaged by anything contained in this document please contact the Equality and Diversity Lead who will then actively respond to the enquiry.

8. MONITORING COMPLIANCE AND EFFECTIVENESS

8.1 An annual review of chaplaincy services will be undertaken by the Co-ordinating Chaplain, to ensure their continued effectiveness in supporting the needs of patients, families and staff.

8.2 The review will consider:

- staffing provision
- direct patient/family and staff support activity undertaken
- appropriateness of physical resources
- information provision about chaplaincy services.

8.3 The report of the Review and accompanying Action Plan and any recommendations will be considered by the Regulation Governance Group.

9. COUNTER FRAUD

9.1 The Trust is committed to the NHS Protect Counter Fraud Policy – to reduce fraud in the NHS to a minimum, keep it at that level and put funds stolen by fraud back into patient care. Therefore, consideration has been given to the inclusion of guidance with regard to the potential for fraud and corruption to occur and what action should be taken in such circumstances during the development of this procedural document.

10. RELEVANT CARE QUALITY COMMISSION (CQC) REGISTRATION STANDARDS

The standards and outcomes which inform this procedural document, are as follows:

Suitability of staffing	12	Requirements relating to workers
	13	Staffing
	14	Supporting workers

11. REFERENCES, ACKNOWLEDGEMENTS AND ASSOCIATED DOCUMENTS

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11.2 **Cross reference to other procedural documents**

Learning Development and Mandatory Training Policy

Record Keeping and Records Management Policy

Risk Management Policy and Procedure

Staff Mandatory Training Matrix (Training Needs Analysis)

Training Prospectus

Untoward Event Reporting Policy and procedure

All current policies and procedures are accessible in the policy section of the public website (on the home page, click on 'Policies and Procedures'). Trust Guidance is accessible to staff on the Trust Intranet.

12. APPENDICES

For the avoidance of any doubt the appendices in this policy are to constitute part of the body of this policy and shall be treated as such.

Appendix A Chaplaincy Structure

Appendix B Chaplaincy and Spiritual Care Flowchart

CHAPLAINCY STRUCTURE

Please note:

the Chaplaincy Structure will be added once agreed

CHAPLAINCY AND SPIRITUAL CARE FLOWCHART

APPENDIX B

