



A Guide for

*LOCAL HEALTHCARE CHAPLAINCY
SUPPORT PROVIDER COMMITTEES*

Prepared by

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*Healthcare Chaplaincy is by presence and action
a true reflection of the Love of Jesus Christ*

Healthcare Chaplaincy:

Healthcare Chaplaincy Services in the Public Health Sector are made possible through the existence of a network of concerned organisations principally the Christian Churches and individuals. This facilitates the flow of finances, support, training, liaison, quality control, appointments and national and local awareness of the service.

The essential link between the Interchurch Council for Hospital Chaplaincy in Aotearoa, New Zealand Charitable Trust (the co-ordinating body - 'the Council') which contracts with the Ministry of Health (the Government) to provide the national chaplaincy service and the actual delivery of the service by Stipended Chaplains and voluntary Chaplaincy Assistants in any particular hospital, is the Local Healthcare Chaplaincy Support Committee (Local Committee).

Local Committees:

'Local Support Provider' is a generic description of such Committees many of which have a 'body corporate' structure with their own Trust Deed or similar documentation specifying membership, purpose and structure. They may or may not be registered under the Charitable Trusts Act, but all should be registered with the IRD as 'charitable bodies'.

Any Local Committee constituted and registered as a Charitable Trust has a primary duty to act in accordance with the Trust Deed and the Act under which they were constituted. Generally speaking the intentions of any Local Committee as expressed in their Constitution will be the same as those of the Interchurch Council.

Working together the Local Committees and the Council, bring strength and unity to their common purpose.

The Agreement/Covenant entered into between the Local Committee and the Council:

In most cases the Agreement between the Local Committee and the Council sits parallel to the Local Committee's own Constitution or other 'establishing documentation', and to the Council's own Trust Deed. The Agreement may be seen as the document which shows where the two interface.

The Agreement does no more than formally acknowledge this. It is not intended to be prescriptive but rather to establish in general terms the responsibilities that each party accepts as 'theirs' and those they undertake together. It expresses 'good faith' and mutual interdependence along with recognition of the worth of each party's contribution.

The essence of the Agreement is co-operation - working together to achieve the best outcomes from the shared mission.

The network in action:

- Council negotiates on a national basis with the Ministry of Health and with (some of) the Churches, for the provision

of Healthcare Chaplaincy services in Public Hospitals/ health facilities/community settings to agreed standards of service and funding.

- Ministry of Health funding is paid monthly by the Council, to the Local Committee or their nominee paymaster as a subsidy contribution toward the stipend for each Stipended Chaplain.
- The Council provides services to all allied bodies that they would find difficult if not impossible to maintain as individual units e.g. indemnity insurance for committees and Chaplains see section “Indemnity Insurance”.
- The existence of Local Committees allows the Council to assemble national data that demonstrates the involvement of Local Churches, Clergy and Lay people to make the service financially and physically effective.
- The Council is accountable for maintaining the standard specifications and providing the documentation required by the Ministry Health to ensure the continuance of Healthcare Chaplaincy.

Local Committee Structure:

It is preferable for each Local Committee to have a formal structure that will generally embody the following general principles:

Membership:

- (a) representatives nominated by the local churches which are members of the Interchurch Council and other interested Churches (*representatives of other interested Churches may be invited to become*

members of the Committee - any formal structure for the Committee should allow for this)

- (b) a representative (or representatives) from the Hospital/s facilities/community settings served by the Healthcare Chaplain/s in the area;
- (c) the Chaplain or a representative of any chaplaincy team;

Operation:

- (a) Dependent on the Local Committee's Constitution all committee members enjoy equal rights and have responsibilities in common;
- (b) The Local Committee will meet regularly, follow standard procedures for the conduct of meetings, and ensure regular financial reporting;
- (c) Prepare an Annual Report to accompany audited Annual Accounts, copies of which should be supplied to the Hospital Administration and the Council.

Purpose:

The primary purpose of any Chaplaincy Committee is to support, spiritually, physically, administratively and financially, the Healthcare Chaplain/s.

It will also promote the Service within the Hospital, the Community, the local congregations of the representative Churches and other Community groups.

Practice:

- Ensure continuing financial support for the positions;
- Provide, where possible, Chaplaincy Assistants to give pastoral and administrative support for the Chaplain/s;
- Ensure the provision of locum assistance when

Chaplain/s are participating in a Clinical Pastoral Education (CPE) course, taking leave, sick or any other notified absence, or when a vacancy occurs;

- Make provision for the Chaplain's initial CPE training and subsequent professional development, including awareness of the Treaty of Waitangi in the Health sector context;
- Promote good and active communication links between the chaplain and the hospital staff and administration, including pastoral care and ethics input;
- Where necessary may administratively assist Chaplains and Chaplaincy Assistants in the completion and forwarding of the monthly Quality Assurance Statistics to the Council's Executive Officer, so contractual obligations with the Government can be met;
- With Council facilitate the Chaplain's periodic Review;
- Ensure that in conjunction with Council , a ministry review be initiated no less than once every 3 years or earlier if a chaplaincy vacancy occurs before the next review is due;
- Participate with the Council in making chaplain appointments, including the gathering of pre-appointment data and reviewing any existing Job Description;
- Support recruitment and training programmes for Chaplaincy Assistants;
- Maintain links with local denominations, in matters of referral and use of the Chaplains for pastoral

services such as funerals, weddings and blessings, and promote opportunities for the Chaplain to address local congregations about the provision, practice and outcome of Healthcare Chaplaincy;

- Ensure Chaplains and Chaplaincy Assistants receive appropriate supervision.

Performance:

Some Local Committees act as paymaster or have a church administration act on their behalf. This does not make the Local Committee an 'employer', but it does mean that a responsibility devolves upon the Local Committee to ensure that the Chaplain/s stipend/s and allowances and those for any locum are provided for in order to attract the Ministry of Health subsidy paid by the Council.

The particular financial arrangements that need to be supported are:

- Stipends and allowances for Stipendiary Chaplain/s (in order to qualify for Ministry of Health Subsidy)
- Provision for Locums during absence of Chaplain on leave or for training (a cost which does not attract a Ministry of Health subsidy as the chaplain is on paid leave); Provision for locums during a vacancy, such costs may attract a Ministry of Health subsidy after the incumbents stipend payments cease.
- A training budget for Chaplaincy Assistants (costs for CPE courses for stipended Chaplains are subsidised by ICHC, but not for Chaplaincy Assistants or any locum costs)
- Committee costs

- Any 'paymaster costs' that may be incurred

The Covenant/Agreement entered into between a Local Committee and Council is the basis for much that is included in this Guide. But in addition Committees should be aware of the Service Agreement, and Job Description/s for the Chaplain/s which are prepared by the Council's Executive Officer and signed by the Chaplain, the Council's representative, the Local Committee's representative and a representative of the Chaplain's denomination.

Allegations or Complaints of Misconduct

Any acts of professional / ethical misconduct are dealt with by the Council and if necessary the relevant denominational court. This is not a responsibility of the local Committees

Indemnity Insurance

Indemnity is provided by ICHC insurance for costs arising from any legal action brought against committee members resulting from their performance under this Covenant / Agreement or brought against Chaplains, Chaplaincy Assistants or CPE students who are working under Service Agreements with ICHC. Any allegations or complaints against any of these parties which could lead to legal action being brought against them must be brought to the attention of the ICHC executive officer without delay, so insurers may be notified and appropriate legal advice obtained.