New Millenium Challenges

The early years of the new millennium brought new challenges for chaplaincy and the association. In 2000 the NACC debated and adopted a new form of centralized governance, consisting of a board of directors of elected officers and extern members with special expertise. New statements of mission, vision and values were adopted. Positions for specialists in education and professional practice were created for leadership in the national office.

Under the new governance, the regions were disbanded. The NACC needed to find new ways for chaplains to come together in their area; a Strategic Plan was adopted to guide the association in the new structure and involve the membership.

In a post 9-11 world, the role of the chaplain and the settings for ministry are continuing to change, dramatically in some instances. Red Cross-trained chaplains are ready to respond to disasters caused by weather, terrorism, or plane or train crashes.

The need continues for networking and collaboration with other cognate associations in order to speak with a unified voice in changing times and new settings. An initial exploration of ways to collaborate by the Council on Collaboration resulted in four common documents that were affirmed by the cognate groups in 2004: Standards for Professional Chaplaincy; Standards for Pastoral Education/Supervisors; Code of Ethics for Chaplains, Pastoral Counselors, Pastoral Educators and Students; and Principles for Processing Ethical Complaints.

The Catholic chaplain today embodies both a profession recognized in the healthcare world and a ministry empowered in the healing Church. Clinically trained and certified lay, religious, and ordained ministers in the Church are the fruit of the vision of a group of priests in specialized work 40 years ago. This is the rich legacy of the National Association of Catholic Chaplains. This is a ministry coming of age, poised to meet the challenges the new millennium will bring.
To have been a bridge is a good metaphor for my role during my two-year term from 1999 to 2001. I was elected to continue the reorganization work of my predecessors and to respond to the emerging new needs that rapid changes in health care were creating for professional chaplains.

Fortunately, Sr. Suzanne Donovan, SC, who had already been an invaluable resource for NACC and the other chaplaincy organizations under the presidency of Sr. Monica Lucas, SC, agreed to continue to assist us during my term as president. I believe that NACC and the other chaplaincy organizations owe a tremendous debt of gratitude to her. The NACC and the other chaplaincy groups would not be where we are today in our endeavors to ensure that chaplaincy will continue to be an essential participant in whole-person health, had she not guided us beyond what chaplaincy had been in the earlier nineties. She challenged us to look beyond the vested interest of each chaplaincy association to what rapidly changing health care was demanding of us.

Certainly, the most painful demand of the changed healthcare landscape on NACC was the necessity to radically change its governance structure. As precious and meaningful as the regional structure was to many chaplains, it was no longer an effective model for NACC governance. Healthcare institutions were no longer able or willing to provide the financial support for the number of chaplains required to be in NACC leadership positions in the regional model. Nor were they willing to fund chaplains to attend both regional conferences and national conventions. A new model was imperative.

Suzanne Donovan provided NACC with the required skills to recognize the reality, as difficult as it was to do so, and to propose a new governance structure that would enable NACC to be more professional, more effective, and more relevant to whole person health care.

We were blessed that at the same time that NACC was reorganizing itself, the other chaplaincy associations were engaged in similar projects.
Presidents preceding me had joined with the leaders of these other chaplaincy associations to explore how the associations could unite resources to enable professional healthcare chaplaincy in the United States, and to a degree in Canada, to more effectively serve the people to whom we minister.

During her presidency, Monica Lucas had introduced Suzanne Donovan to the other associations. They quickly recognized how her talents could be utilized by all the associations as they addressed common chaplaincy issues and moved towards a greater sharing of resources. Therefore, in my presidency, through the combined strengths of Suzanne Donovan and Joe Driscoll as NACC’s Executive Director, our association courageously addressed both its own reorganization and bridged any gaps separating American chaplaincy associations. These efforts resulted in a meeting in Nashville, where, together with representatives of Canada’s chaplaincy association, we discovered that much more united us than separated us. As a result, the course for a unified use of our resources was set in motion, and projects that exist today were given birth.

Another positive result of chaplaincy associations cooperating with each other was that a united voice to communicate chaplaincy accreditation concerns to JCAHO became a reality. Our work with JCAHO was largely done under the able leadership of Michele LeDoux Sakurai. It now became possible for the joint commission recognizing the importance of spiritual care within whole-person health care to meet with a single group of chaplains who were the designated representatives of 15,000 professional chaplains.

A less successful encounter during my presidency was a meeting called by a healthcare commission of the Vatican. Presidents of all the national chaplaincy associations throughout the world were invited to meet in the Vatican to discuss contemporary spiritual care within Catholic health care. A major issue was the Vatican’s concern that non-ordained persons were titled chaplains. Unfortunately, the result was not what we had hoped for.

In my final months as president, preparations were initiated for the 2001 symposium on the Sacrament of the Sick. The ultimate success of this symposium is due in large part to the intense leadership that Joe Driscoll provided. Without his contacts with the bishops, and his understanding of the essentials of spiritual care, this symposium would not have been possible.

In a sense, this symposium marked the end of one form of governance and the emergence of a new form that would move NACC in new directions of self-understanding and the need to involve non-chaplains if
NACC were to reach its full potential. What continues to be a need is for NACC to be able to both sponsor such meaningful national symposiums and to share the fruits of these national endeavors on local or regional levels for chaplains unable to participate in national meetings — in sum, to preserve the values of the regional governance structure with the values of our present system. This was a goal when a new governance form was first proposed and remains one to be achieved — and perhaps always be a tension with which the NACC will struggle.

To have participated in NACC’s leadership during a time of transition was a privilege for which I will be ever grateful.

Rev. Stephen Ryan, OSM, is serving as Servite Pastor at Our Lady of Perpetual Help in Cottage Grove, OR.

2000: The National Leadership Council gathers after a consensus decision to accept the proposal to restructure the association. From left, seated: Steve Ryan, Eileen Grimaldi, Mary Lou O’Gorman; first row: Pat Walsh, Farroel Richardson, Jane Connolly, Mary Anne DiVinzenzo, Virgine Elking; second row: Joan Bumpus, Liam Casey, Richard Leliaert, Charlene Schaaf, Jane Smith, Nancy Siekierka; third row: Hugh Polensky, Jim Kunz, Joseph Driscoll, and Ellen Radday.
As I look back on my ten years in leadership with the NACC (1994-2003), I still stand in awe of the tremendous changes we underwent, as leaders and as an organization. The two changes that affected me the most were (1) the change from a regional governance model to a board governance model, especially 2000-2003; and (2) the momentous EPIC Conference in Toronto in 2003, when the boards of the six major pastoral care groups voted to collaborate on forging four common documents, including a common Code of Ethics and Universal Standards for the Certification of Chaplains. How grateful I felt when I learned of the approval of these documents on November 7, 2004, at the meeting of the cognate groups in Portland, Maine. It brought closure to a process that had long engaged us.

The NACC Symposium 2001 in Baltimore on the Anointing of the Sick was significant for our outreach to the Church as a whole as we energized our pastoral care to the sick and the dying. The major addresses of that historic conference were then published the following year in a book titled Recovering the Riches of Anointing: A Study of the Sacrament of the Sick, published by the Liturgical Press. It also drew the largest attendance (about 700) in NACC history.

Throughout 2002 we held a series of eight symposia throughout the country intended to further implement the ideas of Symposium 2001 in concrete and creative ways. I especially appreciated attending the Symposia in Seattle and Chicago.

The overall moment (actually a process) of grace for me as President/Chair of the Board of the NACC was the opportunity to work with the presidents of our cognate groups, especially the APC and the ACPE, toward collaboration efforts. Then I thought of those historic meetings of the cognate groups in Nashville (1999-2000) as we worked to approve the white paper on chaplaincy, Professional Chaplaincy: Its Role and Importance in Health Care, and to develop potential collaboration.

Another special moment for me came in the aftermath of the transition from the regional to the board model. I had been elected President
of the NACC under the regional governance voting model. But then came the switch; there was a new set of voting rules, so I chose to run again, and was [re]elected. I was grateful to the membership for their gracious trust during this interesting but somewhat frustrating time. They graced me by enhancing the importance of patience and humility. God's Spirit working through the membership does indeed keep all of us in the NACC courageous and creative.

Undoubtedly the saddest moment was the tragic events of 9/11. Yet again, the pastoral responses of the NACC and our cognate groups reflected our care and compassion. The foundations we built together through the efforts described above united us all in service and prayer and outreach.

When the original committee to revise the governance model of the NACC first met in Cincinnati [1999] under the facilitation of Sr. Suzanne Donovan, SC, I remember personally how astounded we were at the implications of changing from the regions to a board model of governance. This was a radical proposal. I and my colleagues weren't sure how the membership would react. We sensed we were on the right track, but still felt uncertain and uneasy. "Well," I quipped, "if they kill us, we'll have the consolation of being remembered as 'the Cincinnati six.'"

So many people walked with me during my years in leadership. I recall the invaluable contributions of Fr. Joe Driscoll; the great editors of Vision who patiently worked with my articles and book reviews; our first NACC Board; the leadership of the boards of the cognate groups; the facilitating of Sr. Suzanne Donovan as we prepared for the transition to board leadership; and the efforts of our regional leadership councils [1995-1999], especially that historic meeting of the regional directors in July 1999, when we made the decision to revamp our NACC governance. Their photo still stands in my office. Every time I look at it, I thank God for them. The NACC of the future will always owe them a tremendous debt of gratitude for their courage in making one of the most significant decisions in NACC's 40 years of growth and change.

Rev. Richard Lelienert, Ph.D., is Manager of Spiritual Support Services at Oakwood Hospital and Medical Center in Dearborn, MI.
My greatest NACC moment of grace came before what was to be my first appearance at our national conference as Chair of the Board. The morning I was to leave for the conference, my good friend and roommate of many years died. The journey with her had been a long, difficult road as she had been traveling through the memories of a horrible childhood. The gas tank of my compassion was nearing empty when she died. I called the staff of the NACC to tell them I could not come to the conference, but I had the utmost confidence in their ability to step in for me. The grace for me was receiving their care and compassion. It was as if they became the chaplains we know ourselves to be.

Care and compassion for me didn't stop with them. I received it from numerous members of our association. I had a very deep appreciation for my membership and affiliation with this wonderful group of people across the nation.

I believe that the landmark event of my term in office will prove to be the stronger foundation for the profession of pastoral care. In November 2004, the boards of six cognate groups led the way by signing a set of documents/standards that we hold in common with one another. The boards agreed that the Council on Collaboration should continue their work as we form stronger bonds with one another and continue to solidify our profession.

The COMISS meeting of 2004, however, was a mixed blessing. The anger towards the Council on Collaboration filled the room as other associations voiced their feelings of being left out or excluded from the collective conversations concerning common standards. We obviously had done something right to have stirred so much emotion. And we obviously had a great opportunity before us to become more inclusive to speak with an even stronger voice for our profession.

Other memorable events include this very celebration of our 40th anniversary, and Kathy Eldridge, our Acting Director, celebrated her 20th anniversary with us.
All of the staff and all of the Board have been significant for me. The relationships have been open and fostering a spirit of growth. Sr. Maryanna Coyle, SC, has been a faithful participant with the NACC for many years. She continues to help guide our growth as a professional Board. Bridget Deegan-Krause has been very affirming of my leadership at particular moments of my own doubt. Bridget has also taken leadership of the newly formed governance committee, which was very needed in terms of our own structure. Ann Hurst has given generously of her time and talent, like a dog on a bone revamping our bylaws and putting appropriate documents in place for our association.

Bishop Dale Melczer, DD, has been an outstanding advocate and guide in our relationship with the USCCB. His faithful involvement, care and concern for the NACC has been outstanding.

My sense of gratitude for all involved is profound as I work with all the Board and staff.

Joan Bumpus is Director of Pastoral Care at St. Vincent Hospital in Indianapolis, IN.

REFLECTION

By Sr. Maryanna Coyle, SC
NACC Board member, 2000-2005

The 40th anniversary of NACC offers a time for fond remembering and new beginnings. My own recollections of NACC begin with the national conferences in the ‘80s where I had the mixed blessing of facilitating the parliamentary procedures of the business sessions. With hundreds of proposals and some 800 members anxious to speak, this was no small challenge. But I witnessed the deep engagement of the members and the desire to strengthen and advance the professional face of NACC.

In 2000 I became one of the extern members of NACC’s new organizational structure. I was aware of the mixed emotions of the members at this time of letting go of the regional structures in order to design a new relationship. In serving on the national board I see the deep com-
mitment and energy among the elected members. The extern members bring valuable skills in finance, development, theology and health care systems.

Hopefully these additional skills enhance the effectiveness of NACC governance.

New beginnings will continue to challenge and change the direction of NACC. The vision of the organization faces the new realities in today’s healthcare environment — and each member must recognize the imperative for change and become actively engaged in shaping this transformation.

Transformation is a journey of conversion and relinquishment. Energy for transformation is fueled by the active response to a personal and communal invitation to advance the reign of God. Such transformation begins with deep reflection on the people we are called to serve and the myriad ways in which we respond to those needs.

Mindful of the people in need of this spiritual and healing ministry, and aware of the creative human potential of the NACC membership, now is the time to frame a future that widens the tents:

- **Embracing** extended ways of ministering beyond the bedside and the institution. Some approaches include designing models for chaplain service to other professionals, to executive staff and boards within the organization; working collaboratively with mission personnel in promoting spirituality in the workplace; and creating ways of connecting with the ever-increasing outpatient populations beyond a momentary encounter.

- **Imagining** other forms of inclusion beyond the current definitions of membership, such as affiliate relationships that welcome parish nurses, mission leaders, and ministers in educational and other fields.

- **Strengthening** the ongoing theological development of the members by providing area opportunities for workshops and retreats. The lodestar, the constant sustaining each member throughout these new ways, is a deep relationship with God, a faith life that is nourished in prayer and communion with others, and a generous openness to God’s invitation to transformation. For people rooted in faith, risk is not a threat but an opportunity.

*Sr. Maryanna Coyle, SC, is President and Executive Director Emeritus of SC Ministry Foundation in Cincinnati, OH.*
2000s Issues and Organizational Notes

2000

Issues: Dialogue on proposed major restructuring of the NACC; pastoral care as a profession; need to continue clarifying distinction between professional chaplain and local clergy/parish pastoral staff; changing perspective on white paper on Sacrament of the Sick; collaboration on white paper on professional spiritual care ministry; closer collaboration with nurses.

Organizational Notes: Implementation of major restructuring of NACC; Search Committee for director positions for new Board, including extern members with particular expertise; closing of regions at Fall conferences; closing of national and regional committee structure; collaboration of NACC- and ACPE-certified Supervisors about granting mutual recognition; ACPE, APC, CAPPE, NACC, and NAJC approve consensus document, “Professional Chaplaincy: Its Role and Importance in Healthcare”; online Membership Directory begins.

2001

Issues: Implementing the restructuring mandate; need to refine certification process for training/quality assurance; pastoral assessment of a patient’s needs and preferences; need to increase the diversity among certified chaplains; ministry in aftermath of 9/11; spiritual needs in long-term care facilities.

Organizational Notes: Most Rev. Dale J. Melczek, DD, Bishop of Gary, IN, becomes new Episcopal Liaison; continued restructuring of NACC; new Board of Directors oriented and begins meeting; Director of Education and Director of Professional Practice hired; ACPE and NACC reciprocity of Supervisors; model for collaboration of NACC, APC and ACPE proposed; design and creation of three new offices at national office; design and printing of new logo; membership dues increase.

2002

Issues: Council on Collaboration ranks priorities for collaborative efforts: letter to healthcare administrators re: HIPAA regulations; proposals for appointment to joint task forces: Universal Standards for Profession of Chaplaincy, Universal Standards for Supervised Pastoral Education, Universal Code of Ethics, Joint Cabinet of Liaisons; drafting a 2-3 year Strategic Plan for the association.

Organizational Notes: Planning for EPIC conference 2003 of North American pastoral care, counseling, and education groups; Council on Collaboration (AAPP, APC, ACPE, CAPPE, NACC, NAJC) meets in April, agrees to pursue three common sets of goals; collaboration with USCCB, CHA, health systems, etc., for eight fall symposium; formal request to the USCCB
to draft a "national pastoral plan" for comprehensive spiritual care for sick and dying persons; change in composition of Certification Commission from seven to nine, adding two certified chaplains.

2003
Issues: Title of "chaplain"; the changing role of chaplain; certification process undergoing transition; challenge of changes in conduct of certification interviews under the new governance structure; HIPAA Final Privacy Rule.
Organizational Notes: Council on Collaboration clarifies distinctions between "professional chaplain" and "area clergy" re: the HIPAA Final Privacy Rule and drafts letter to be sent to all board-certified chaplains and CPE supervisors of APC, ACPE, NAJC and NACC. Certification process changed to include Interview Team Educators to train interviewers and provide quality assurance; Presidents of EPIC conference organizations with Council on Collaboration finalize proposals to boards in Toronto; Rev. Joseph J. Driscoll resigns as NACC President and CEO.

2004
Issues: Spiritual and/or religious aspects to the Human Genome Project; the "profession" of chaplaincy; the changing role of the chaplain; universality/ particularity and Catholic identity; technology in service to the membership; recruitment of new chaplains; and financial and operational stability.
Organizational Notes: JCAPS becomes CCAPS (COMISS) Commission for Accreditation of Pastoral Services; Rev. Richard Leliaert represents NACC at the seventh annual conference of NCHPEG; search for new executive leader of the NACC begins; Kathy Eldridge serves as Acting Director; Council on Collaboration meets to affirm four common documents: Standards for Professional Chaplaincy, Standards for Pastoral Education/Supervisors, Code of Ethics for Chaplains, Pastoral Counselors, Pastoral Educators and Students, Principles for Processing Ethical Complaints.

2005
Issues: Implementing the Strategic Plan; collaboration with health systems to work together to develop leadership tools/resources for chaplains, directors and mission leaders: e.g., electronic discussion groups or chat rooms, and greater opportunities for education and networking on state or regional levels.
Organizational Notes: New Standards for certification as chaplain go into effect that require a master's degree in theology, divinity, religious studies, pastoral ministry, or spirituality.
2001: The restructured Board of Directors meets for the first time in Milwaukee in February. Pictured (from left, front row) Sr. Maryanna Coyle, SC, Extern Member; Bishop Dale J. Melczek, Episcopal Liaison; Sr. Shirley Nugent, SCN, Member-at-Large; (back row) Fr. Walter J. Smith, SJ, Extern Member; Nancy Siekierka, Vice President; Sr. Janet Bielmann, RSM, Secretary/Treasurer; Fr. Liam Casey, Member-at-Large; John Lore, Extern Member; Fr. Joseph Driscoll, Executive Director; and Fr. Richard Leliaert, President. (Not pictured: Extern Member Sr. Jean deBlois, CSJ.)

2002: Newly certified Chaplains and Supervisors celebrate their accomplishments at the Symposium in Oak Brook, IL.
2003: Gathered at the EPIC Conference in Toronto, the four association presidents join Rev. Walter J. Smith, SJ, (center), President and CEO of The Healthcare Chaplaincy (HCI), after the agreement on further collaboration among the associations was announced. Father Smith reported that HCI pledged a $100,000 challenge grant to fund the collaborative projects. From left: Rev. Joseph J. Driscoll, NACC; The Rev. George Handzo, APC; Father Smith; Rabbi Stephen Roberts, NAJC; and The Rev. Dr. Neil E. Ford, CAPPE.

2003: Certification Commission members meet in Milwaukee to conduct certification business. From left are Sr. Virginia Yeager, SSJ; Rev. Jim Yeakel, OSFS; Sr. Barbara Ann Brumleve, SSND; Ms. Ann O'Shea; Sr. Anita Lapeyre, RSCJ.
2004: Executives of six pastoral care organizations met in November in Portland, ME, to affirm new standards for chaplaincy. In the front row, from left, are Anne Ross Stewart, AAPC President; Rabbi Barbara Speyer, NAJC President; Rev. Catherine Cornutt, CAPPE President; Rev. Art Schmidt, ACPE President; and Kathy Eldridge, NACC Acting Director. In the back row are Doug Ronsheim, AAPC Executive Director; Joan Bumpus, NACC Board of Directors Chair; The Rev. George Handzo, APC Past President.