

Evolution of the Chaplain's Role

(based on work of Pastoral Services leaders at Mercy <http://www.mercy.net/>)

Chaplain Prior to 2000	Chaplain today and into Future
Health Care Service Environment <ul style="list-style-type: none"> • Inpatient hospital acute care settings • Long term care 	Health Care Service Environment <ul style="list-style-type: none"> • Inpatient decreasing • Outpatient, non-acute care becoming 40-90 percent of patient volume • Person-centered care requires flexibility and accountability
Focus <ul style="list-style-type: none"> • One-on-one, or one-on-one family • Non anxious presence in crisis • Death and bereavement work • Initial visit 	Focus <ul style="list-style-type: none"> • One-on-one and one-on-one family work as well as group work • Spiritual/pastoral care expert • Builds relationships with other health care professionals (physicians, religious leaders in community, resources in community) • Focus on contributing to healing and health outcome within a team • Keep updated on the latest research on spirituality and health • Can educate/teach others about spiritual needs • Aware of organizational needs and goals
Self-identity... As a chaplain, I... <ul style="list-style-type: none"> • Work in hospital or on hospital unit • Provide pastoral care • Generally work alone • Am a “keeper of the ministry” • Am the “pastor” to the staff....they are my “congregation” 	Self-identity...As a chaplain, I <ul style="list-style-type: none"> • Work where patients are • Am the spiritual care professional/expert within the interdisciplinary care team • Play a part in the ministry provided • Am an educator/coach/mentor to others • Am part of the mission integration team
When asked what one does, the chaplain will respond, I... <ul style="list-style-type: none"> • Provide a listening presence • Visit everyone or see everyone • Have no agenda with a patient • Pray with someone that has a need • Offer healing through complementary therapies (e.g., healing touch, music therapy, etc.) • Spend most of my time in initial visits 	When asked what one does, the chaplain will respond, I... (CF ESSENTIAL FUNCTIONS OF A CHAPLAIN) <ul style="list-style-type: none"> • Focus on the spiritual needs of patients and staff to facilitate healing and health • Empower others to carry on the healing mission by helping others to attend to the spiritual needs as part of their work • Lead support groups (e.g., grief, care giver support, chronic disease management) • Lead formation efforts and enable spiritual development with our co-workers • Partner with local clergy/congregations/ religious organizations to meet the spiritual/ religious needs in a geographical area • Facilitate the ethical decision-making of patients and families, in consort with the ethics committee
Chaplain's Organization of Work/Priorities <ul style="list-style-type: none"> • Try to see every patient • Respond to crises, codes, deaths, traumas within the facility • Get some referrals 	Chaplain's Organization of Work/Priorities <ul style="list-style-type: none"> • Use professional judgment using department's determined priorities that are assessed regularly • Respond to crises, codes, deaths, and traumas that may occur outside the hospital, as well as within

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<ul style="list-style-type: none"> Encounter people local face-to-face 	<ul style="list-style-type: none"> Respond to referrals or orders for consults from which most of my ministry comes Triage needs daily (sometimes hourly) Interact with people both locally face-to-face and virtually (which may also be face—to-face)
<p>How chaplains fit organizational</p> <ul style="list-style-type: none"> Often work alone in a hospital and may or may not hand-off work to another chaplain, depending on size of the facility Work with the other disciplines of the interdisciplinary care team 	<p>How chaplains fit organizational</p> <ul style="list-style-type: none"> Part of a dynamic pastoral services team that serves multiple locations and includes other professionally qualified chaplains, volunteers, CPE residents, and students Pastoral services team is part of the overall health care giving team
<p>Measurement/Quality Improvement/Research</p> <ul style="list-style-type: none"> Little or no quality measures or data Little or no engagement in research 	<p>Measurement/Quality Improvement/Research</p> <ul style="list-style-type: none"> Contributes to patient health and outcomes Charts one's care plan Articulates role of pastoral care to organizational strategic goals and patient care Involved in quality improvement
<p>Education and Qualifications</p> <ul style="list-style-type: none"> Different standards and expectations in diverse settings and for lay, religious or clergy 	<p>Education and Qualifications</p> <ul style="list-style-type: none"> Established professional qualifications agreed to by certifying organizations and within _____ <ul style="list-style-type: none"> Masters/graduate theological degree Clinical pastoral education (CPE) 1600 hrs. Board certified (BCC) Expectations (50 hrs.) for continuing education, and keep up with research Career ladder/opportunities for professional growth
<p>Profile of the staff generally included</p> <ul style="list-style-type: none"> Vowed religious sisters Priests Retired pastors from community Individuals with spiritual director background 	<p>Profile of professional chaplains will include</p> <ul style="list-style-type: none"> Religious diversity reflective of community needs Trained and experienced for the work Lay persons Vowed religious sisters Priests Deacons Ordained ministers
<p>Use of technology</p> <ul style="list-style-type: none"> Some chaplains were very good at it, but it was not expected 	<p>Use of technology</p> <ul style="list-style-type: none"> Use of technology expected: <ul style="list-style-type: none"> Electronic medical records E-chaplaincy Email Video conferencing Enables encounters with patients and families via <ul style="list-style-type: none"> Virtual presence Diverse connections