

## Certification Commission Adds Sites to Handle Fall Interviews

**Sr. Anita Lapeyre, RSCJ**  
**Certification Commission Chair**

Twice the expected number of applications for certification greeted the Certification Commission members at our meeting in Milwaukee July 8-11, 2004. One hundred eighty-four potential candidates for a fall review had submitted their materials by the July 1 postmark deadline.

After reviewing and evaluating the materials for completeness, the Commission accepted 164 sets of materials. These candidates can now move forward for a fall interview. In order to accommodate this unexpectedly large number, the Commission has arranged for two more sites to be added for fall interviews, Baltimore and Los Angeles.

The Commission also sponsored a training session the same weekend for Interview Team Educators. This session was ably led by Ms. Cathy Connelly. [See Cathy's article about her ITE experience on page 14 of this issue of *Vision*.]

These ITEs have become the lynchpins for the certification process. The quality of the interview process falls under their capable leadership. Six new ITEs joined the present group.

The current group of ITEs, in addition to Ms. Connelly, includes: Mrs. Julianne Barber, Rev. Liam Casey, Ms. Annette Castello, Ms. Cam Hanemann, Ms. Charlotte Leas, Ms. Sharon Mason, Mrs. Jane Mather, Ms. Ellen Radday, Ms. Michele Ledoux Sakurai, Mr. James Willsey, Ms. Judy Hoelscher, and Ms. Judy Shemkovitz.

The Commission is grateful for the generosity and talents of this dedicated team of leaders. If you are a certified chaplain or supervisor and would like to serve on an interview team or become an ITE, please contact Acting Director Kathy Eldridge at the National Office.

We've added Baltimore and Los Angeles as sites to interview the huge number of fall applicants.

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*Surrounded by certification materials for fall interviews, Staff members Sandra Charlton (left) and Selena Barner begin to process the applications.*



## Report from the Chair

### Association Activities Ongoing This Summer



*Joan Bumpus  
Chair  
Board of Directors*

#### Thanks for your kind support

I would like to thank everyone for all the support you have given me since the time of my recent personal loss. Your cards, kind words and prayers meant a lot to me. It is really gratifying to belong to an association with members such as yourselves. I am so sorry I could not join you at our national conference in March as I had hoped. I have been told that the conference was absolutely wonderful, and I want to applaud and give a big thank-you to the members of our conference

executive planning committee, who put together such an excellent conference for our members: Ms. Cindy Heine; Rev. Martin DeMeulenaere, OSB; Rev. Dean Marek; Ms. Nancy Siekierka; and Rev. Ronald E. Verhaeghe.

#### Search is on for our Director

The Board is now searching for the individual who will become our next Executive Director. The Board took the opportunity to use the last several months to dialogue and clarify what qualifications we thought the NACC needed in our new executive leader. We have come to the end of that discernment process and are now actively engaged in the search process. We hope that we will have someone on board by November.

We are committed to finding the right person for the NACC. Consequently, if our search takes longer than anticipated, we know

### How do you meet your need for a priest?

Do you know of ways that hospitals are meeting the need for Catholic ministry through a formal arrangement with a parish or a diocese? Some hospital directors are looking to negotiate actual written contracts between themselves and local Catholic parishes or even the local diocese to specify what services will be provided by the parish and what the reimbursement will be.

The NACC office has received a request for information of any examples of this kind of formal arrangement for meeting the need for Catholic ministry. If you know of any, please notify Acting Director Kathy Eldridge at the NACC office, and she will share this information with hospitals and others looking for a model contractual agreement.

that we rest in the very capable hands of Kathy Eldridge, our Acting Director, and the rest of the National Office staff. Not to mention, we have an outstanding Board who continues to work on your behalf.

As you know, the issue of the title "Chaplain" has been resolved in a way that enables the bishops to stay within the boundaries of Canon Law, and enables some of our members to finally have the opportunity to be certified. We are extremely grateful for the work of Fr. Joe Driscoll and Bishop Melczek, who worked tirelessly on this issue on behalf of our members.

#### Good news on our investments

I am excited to tell you that for the first time in ten years, the NACC has been able to contribute into its financial reserves/investments rather than take from them. The Board, with the help of Elizabeth Piasecki, has put together a topnotch Finance Committee, from which we have already benefited. The committee suggested changes in how we were handling our financial structure, and recommended we work with Merrill Lynch. Merrill Lynch will actively work with our investments to enable us to receive the best possible returns. We are excited about this new development.

The committee also suggested we change our accounting year to a calendar year rather than keep it on a fiscal year basis. This will save hours of time spent on duplicative work and accounting process.

On behalf of the Board I would like to thank the following members of our Finance Committee: Matthew Lemke, Chief Financial Officer of Catholic Charities, Archdiocese of Milwaukee; Clifton Perryman, President of Milsco Manufacturing in Milwaukee and a permanent deacon for the Archdiocese of Milwaukee; Sr. Rosemary Sabino, RSM, former President and CEO of the Catholic Health Association of Wisconsin; and Ms. Theresa Vithayathil Edmonson, Board member.

#### Justice and staff salaries

Justice is one of our values as an association, and the Board thought it was time to take a look and be sure that the NACC was being just to our own staff. A salary survey of like positions to the national office staff has been completed and a salary structure has been identified for each position. This will enable the NACC to remain competitive, appropriate and up-to-date with comparable like jobs in the marketplace.

Taking into account any possible changes this may mean for the budget, the finance committee presented a balanced budget, which the Board has approved.

#### It's election time

Another election is upon us for two member-at-large positions. I want to strongly encourage you to use the benefit you have of voting. This is one way that your voice is heard. You also ensure that the NACC is in the hands of qualified Board members by your vote. Mark your ballots indicating those individuals that you believe will serve the NACC well. You may have a tough choice between candidates. The Governance committee of the Board has put forth to you, candidates that they believe to be qualified for the positions. Please take the time and return your ballot. Remember.....YOUR VOTE COUNTS.

## vision

Vision is published 10 times a year by the National Association of Catholic Chaplains. Its purpose is to connect our members with each other and with the governance of the Association. Vision informs and educates our membership about issues in pastoral/spiritual care and helps chart directions for the future of the profession, as well as the Association.

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The National Association of Catholic Chaplains is a professional association for certified chaplains and clinical pastoral educators who participate in the healing mission of Jesus Christ. We provide standards, certification, education, advocacy, and professional development for our members in service to the Church and society.

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## Is the Association accessible, supportive at grass roots level?

**In the June 2004 *Vision* I was struck by the quote: "...make what you have to say accessible to people in ways they can use." (Jean deBlois, CSJ, NACC 2004 Conference, Kansas City.)**

Given the strategic plan outlined, is the National Association of Catholic Chaplains (NACC) accessible and supportive to its own memberships locally, regionally and nationally, or, does it exist primarily to reach out to cognate groups? Do the goals support: creating leaders in our organization and participating in decision making at the grass roots level; is this newly developed "leaner and more efficient" NACC organization effective for the local chaplains?

Approximately four years ago, the NACC eliminated regionalization, which I think was a grave error in judgment. The loss feels significant. I have been waiting for the national organization to support me in a way that the regional conferences had in the past. I have yet to receive anything tangible except for the theoretical publication – *Vision* (a tool which is not easily put into practice by a chaplain).

I miss interacting with my regional colleagues who helped me put theory into practice. Regional meetings not only made the theory accessible to the ultimate user, but it made it come alive for me through colleagues' support, education and renewing old friendships. Regional meetings were a time to interact with the organization's leaders in a way that allowed for dialogue into the national agenda, and supported local efforts within my community. The current process does not lend itself to camaraderie, collegiality or development of our next leaders; the process has become a bureaucratic monolith!

Let me conclude where I began: "Is the strategic plan accessible to chaplains in ways they can use? I am deeply concerned about my organization. I wonder if there are any other chaplains who feel as I do.

**Bobbie Markiewicz**  
Chaplain  
Buffalo General Hospital

## Letters

*Buffalo, New York*

### Family presence is an option whose time has come

Chaplain Dennis McCann poses an interesting question in the June 2004 issue on whether or not family should be present during resuscitation attempts. Certainly this would expand upon the chaplaincy ministry if it were widely adopted.

Long before I ever dreamed of becoming a chaplain, I was visiting my mother in the ICU of a hospital when she "coded." My wife and I were not asked to leave but stayed there while the staff attempted to revive her. We witnessed first hand the compassion and intensity of the staff while they performed their various duties. While the resuscitation attempt was unsuccessful, the experience was a powerful example of the dedication and resourcefulness of the medical staff. And, having experienced their attempts, we were able to thank them for their efforts. In reflecting many times on our presence, I have always found this a positive and uplifting experience--being there as my mother entered a further phase of life.

Some 13 years later I found myself as a hospital chaplain in similar circumstances, but this time as an intermediary between the medical staff in the Resuscitation Room and the family elsewhere. In the dozen years since, I have often been this go-between for the staff and family. Some families could not handle the experience of watching the resuscitation attempt. But for others, there would be a much more positive Faith experience, given the preparations and precautions described in the article.

Family presence certainly is an option whose time has come.

**Deacon Larry Hammel**  
Certified Chaplain  
Christ the Redeemer  
Sterling, Virginia



## 2005 Conference

### Conference Objectives

- ▼ To heed the call of the Creator to seek restoration and renewal away from the stresses and strains of professional chaplaincy.
- ▼ To reaffirm and reclaim our ministry to the suffering and disenfranchised as advocates of healing and wholeness.
- ▼ To discover and celebrate how our ministry as professional chaplains nurtures personal, institutional and community transformation.

**April 9-13, 2005**  
**Albuquerque, New Mexico**

## Creating Sacred Space

*On June 16-18, the 2005 Conference Planning Committee met on site in Albuquerque, New Mexico. As a body, they selected specific roles and responsibilities for themselves which are noted below. While the meeting dealt with many of the important logistical aspects of the conference, there was also much time for reflection and sharing. On behalf of the committee, Bro. Ed Smink offers the following:*

Creating Sacred Space in the land of enchantment is the challenge of each participant. Mountains, land, stream and sky converge and integrate into the spiritual tradition of *la pasado*, of welcoming.

Host and guest meet in what Spirit initiates and in what is heard and received as active participants. An attitude of hospitality, the core of creating space, becomes alive as skills of listening and receiving are awakened.

Creating Sacred Space, within and without, is entering into the interior and eternal streams in the desert of our hearts. Celebrating a spirituality of discovering these streams in the desert of our personal, institutional and communal lives is our professional call to renewal.

Welcome to Albuquerque!

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Sr. Mary Anne DiVincenzo, CSJ, NACC  
 Co-Chair

Rev. John T. Vanderzee, APC  
 Co-Chair

Sr. Norma Gutierrez, MCDP, NACC  
 Local Arrangements Co-Chair  
 Education/Plenaries Co-Chair

Rev. Darryl I. Owens, APC  
 Education/Workshops Chair

Bro. Edward M. Smink, OH, NACC  
 Spiritual Needs Chair

Rev. Marie L. Stockton, APC  
 Local Arrangements Co-Chair  
 Education/Plenaries Co-Chair

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In keeping with our conference theme, Streams in the Desert: A Call for Professional Renewal, we are asking for you to send us any reflections, readings, scriptural passages from your own sacred traditions for possible use within our conference publications. You can e-mail them to Susanne Chawszczewski, PhD, at [schaw@nacc.org](mailto:schaw@nacc.org).

## Destination: Albuquerque

Albuquerque, New Mexico's largest city, was named to honor a Spanish Duke, the 10th Duke of Alburquerque. Colonial Governor Don Francisco Cuervo y Valdez elected the name but over the centuries, the first "r" has been dropped.

In 1706, Albuquerque was founded by a group of colonists who had been granted permission by King Philip of Spain to establish a new villa (city) on the banks of the Rio Grande (which means big or great river). The colonists chose a place along the river where it made a wide curve providing good irrigation for crops, a source of wood from the bosque (cottonwoods, willows and olive trees) and nearby mountains. The site also provided protection and trade with the Indians from the pueblos in the area.

The early Spanish settlers were religious people, and the first building erected was a small adobe chapel. Its plaza was surrounded by small adobe homes, clustered close together for mutual protection against any threats posed by hostile forces in this vast and dangerous country. The church, San Felipe de Neri, still stands on the spot. The building itself has been enlarged several times and remodeled, but its original thick adobe walls are still intact. The church is the hub of Old Town, the historic and sentimental heart of Albuquerque, with activity revolving around shopping and dining. To this day, special holidays and feast days are still commemorated as part of the year-round attractions of this "original" Albuquerque.

Albuquerque stands with one foot in the past, one foot in the present and both eyes on the future. Home to some of the nation's finest high-tech research facilities, Sandia National Laboratory, Phillips Laboratory, and the University of New Mexico, Albuquerque is leading the way in technology transfer. Civilian application of military technology has provided the spark for many an entrepreneur and led to a technological boom. Albuquerque continues to set the pace for success in the southwest as a visitor destination and a great place to live.

A mention of Albuquerque's history would not be complete without the inclusion of Albuquerque's Old Town Plaza. Originally developed in 1706, Albuquerque's Old Town Plaza is where history and modern life merge to blend 18th century architecture with narrow brick paths, world famous artwork, the finest in jewelry, delicious food and rare specialty shops. To learn more about Albuquerque's Old Town visit [www.albuquerqueoldtown.com](http://www.albuquerqueoldtown.com).

*The text above is taken from the website for the Albuquerque Convention and Visitors Bureau: [www.itsatrip.org](http://www.itsatrip.org). Mailing address: 20 First Plaza NW Suite 601, Albuquerque NM 87102; e-mail: [info@itsatrip.org](mailto:info@itsatrip.org); phone: (505) 842-9918 (8:00 a.m. to 5:00 p.m., Mountain Time, Monday through Friday); 24-Hour Visitor Information: (800) 284-2282.*

## Isaiah 35: 1-10

*The desert and the parched land will exult;  
the steppe will rejoice and bloom.*

*They will bloom with abundant flowers,  
and rejoice with joyful song.*

*The glory of Lebanon will be given to  
them, the splendor of Carmel and  
Sharon;*

*They will see the glory of the Lord, the  
splendor of our God.*

*Strengthen the hands that are feeble,  
make firm the knees that are weak,*

*Say to those whose hearts are frightened:  
Be strong, fear not!*

*Here is your God, he comes with vindica-  
tion; with divine recompense he  
comes to save you.*

*Then will the eyes of the blind be opened,  
the ears of the deaf be cleared;*

*Then will the lame leap like a stag, then  
the tongue of the dumb will sing.*

*Streams will burst forth in the desert, and  
rivers in the steppe.*

*The burning sands will become pools, and  
the thirsty ground, springs of water;*

*The abode where jackals lurk will be a  
marsh for the reed and papyrus.*

*A highway will be there, called the holy  
way;*

*No one unclean may pass over it, nor  
fools go astray on it.*

*No lion will be there, nor beast of prey go  
up to be met upon it.*

*It is for those with a journey to make, and  
on it the redeemed will walk.*

*Those whom the Lord has ransomed will  
return and enter Zion singing,  
crowned with everlasting joy;*

*They will meet with joy and gladness, sor-  
row and mourning will flee.*

## Innovation Showcase

# How Does Pastoral Care Affect Behavior of Delinquent Youths?

*Study shows: 'Positive Effects of Pastoral Care on Clinical Outcomes in an Adolescent Behavioral Treatment Setting'*

**By Dr. Gene Hausmann**

The following are brief highlights from Dr. Gene Hausmann's presentation at the NACC National Conference in Kansas City, March 16, 2004. A more detailed article on Gene's dissertation study will appear in the Fall 2004 issue of *The Journal of Pastoral Care and Counseling*.

This was a study of 825 juvenile delinquents discharged from Holy Cross Children's Services programs [in Clinton, Michigan] during the years 1995-1997. The

chaplain contacts were documented and quantified and various outcome measures were correlated to chaplain contacts. The average length of treatment was about 12 months. The key outcome evaluated was the living situation of the client 12 months after discharge.

### Findings...

The campus with the best chaplain caseloads produced the highest average time between chaplain and youth: 35.5 hours or about three hours per month. At this campus, 20 youths spent no time with the chaplain outside of weekly chapel services; 14 youths spent less than one hour per month; 20 youths spent less than two hours with the chaplain, and 71 youths spent two or more hours per month with the chaplain. **The 71 youths who spent two or more hours per month with the chaplain during their placement were more likely to be living at home when**



Dr. Gene Hausmann

**they were contacted 12 months after discharge. See Figure 1:**

Figure 1 is a measure of the living situation one year after release as a function of chaplain time. Each set of

double columns totals 100 percent of the youths in one category. The first pair of columns indicates those youths who did not meet with the chaplain at all (except for weekly chapel services). The second pair of columns indicates those youths who met with the chaplain less than one hour per month; the third set, less than two hours per month. The set of columns to the far right indicates those youths that met

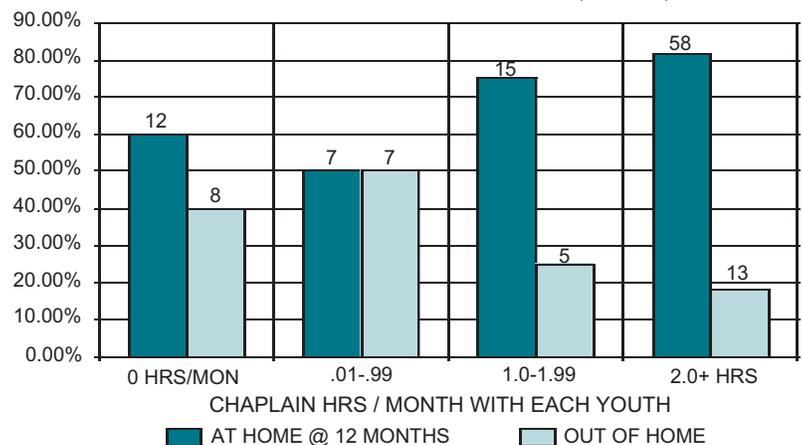
with the chaplain the most, two or more hours per month.

In each set of columns, the left column is a positive outcome and the right column is a negative; the left column being the percent of those youths who were living at home when the family was contacted 12 months after the youth was released from the campus. The right column indicates the percent of those youths who were not living at home when the family was contacted; i.e., they were AWOL or in a more secure institutional placement, e.g., juvenile detention.

As can be seen in this chart, the youths with the best living situations are in the columns with the most contact with the chaplains. This finding does meet scientific standards ( $p < .04$ ,  $r = .276$ ). This finding also was tested in a regression analysis of several significant variables to control for their effects. Chaplain time accounted for

**Figure 1 – Living Situation After 12 Months**

CLINTON CAMPUS RELEASES 95-97 (P = .04)



Youths who spent more time with chaplains were more apt to be living at home one year after discharge.

7% of the positive outcome (R squared = .07) in the regression analysis.

In this study, the effects of chaplain contacts can be measured in dollars and cents. When the data from phone contacts is charted in terms of where the program graduate is living 12 months after discharge, the whole class of 125 youths can be evaluated in terms of how much money each youth is costing the government per day (per diem). For example, if the youth is living with family, there is no cost to the state for care; if the youth is in supervised independent living, the cost was \$58 per day; foster care home, \$64 per day.

On the other hand, if the youth is in jail, the cost is \$80 per day; group home, \$132 per day; a State training school, \$247 per day. A psychiatric hospital placement costs over \$500 per day. When we calculate the average per diem costs for youths in each of the chaplain contact categories, we can chart Figure 2.

The average per diem cost for living situations 12 months after discharge for the group that had no contact with the chaplain = \$78.95; the average cost for the group that had two or more hours with the chaplain = \$34.12. That's less

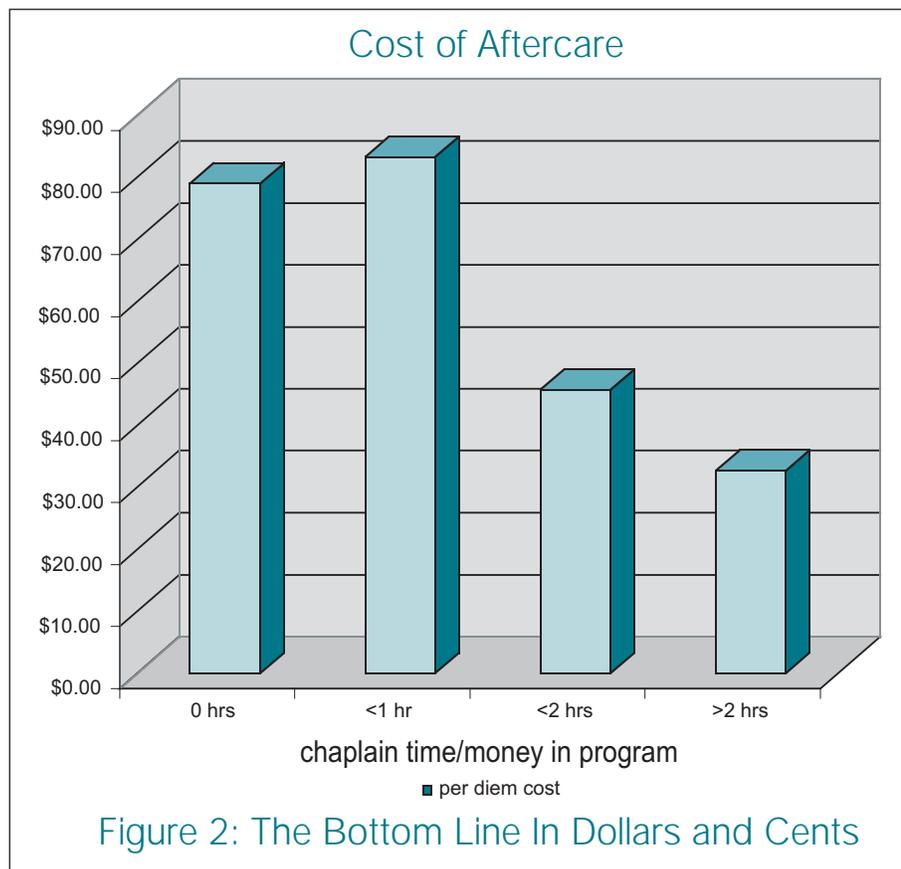


Figure 2: The Bottom Line In Dollars and Cents

than half the cost of the average youth in the no-contact group. In terms of costs to the state, it pays to have chaplains on staff.

*Dr. Eugene Hausmann, an NACC-Certified Chaplain, serves as President, National Chaplains Association for Youth at Risk, Holy Cross Children Services, Clinton, Michigan.*

### Please remember in your prayers:

▼ **Joan P. Clarke**, of Indianapolis, Indiana, who died June 6. She was the Director of Spiritual Care Services from July 1988 until the spring of 2000 at St. Francis Hospital and Health Centers, Beech Grove and Indianapolis. She was chair of the certification committee for the former Region VII for several years "serving the national organization with the same dedication, loyalty and love that permeated her years as spiritual care director," according to Fr. John H. Mannion, current Director of Spiritual Care Services at St. Francis Hospital and Health Centers. Mrs. Clarke also served briefly as Region VII Director. A year and a half prior to her retirement she suffered a stroke. Upon retirement she was diagnosed with colon cancer and fought the metastasized cancer over the last four years, until death came one day after her birthday. Fr. Mannion said, "To all of us who worked with her, she was a champion of Insight,

## In Memoriam

Inspiration, Infusion. We lost a valuable member of the NACC."

▼ **Reverend Donald J. Hoffman**, of St. Louis, Missouri, who died on October 27, 2003, of a pulmonary embolism. Fr. Hoffman, an emeritus member at the time of his death, joined the NACC in 1990 and was certified as a chaplain in 1992. Ordained a priest in 1954, Fr. Hoffman was the founding pastor in 1972 of St. John Bosco Parish in Creve Coeur, Missouri, and remained there until 1987, when he was appointed to the special pastoral counseling apostolate at St. Anthony's Medical Center in St. Louis. In 1994 he retired and became senior priest in residence at a parish in Crestwood, Missouri.

## Election for Members-at-Large to the NACC Board of Directors

Four candidates will compete for two member-at-large positions on the NACC board and the two elected candidates each will serve a three-year term on the Board of Directors beginning on January 1, 2005. This special section of *Vision* contains information about each nominee. Additional information, including information about each candidate, is posted on the NACC web site: <http://www.nacc.org/aboutnacc>.

The Board of Directors is the governing body of the NACC. Its membership consists of at least six members-at-large who are elected by NACC voting members, at least four external members who are appointed by the Board and an external Episcopal liaison appointed by the United States Conference of Catholic Bishops (USCCB). The executive director of NACC also serves as an ex-officio voting member of the Board.

Functions of the Board of Directors are described in the association bylaws as follows:

1. Steward the Catholic identity of the association.
2. Steward the mission and vision for the future of the association.
3. Ensure the integration of the values in the organizational culture.
4. Approve the strategic direction for the growth of the association.
5. Maintain and develop the association's relationship with the USCCB and other groups, institutions, and organizations within and outside the Catholic Church.
6. Approve association policies.
7. Ratify changes to the constitution.
8. Appoint members of the NACC Certification Commission and NACC committees.
9. Establish task forces or other bodies required by the mission.
10. Approve the annual budget.
11. Participate in the evaluation of the executive director.

All NACC voting members should watch for the arrival of the 2004 ballot in a separate mailing during the coming weeks. The ballot mailing will contain another copy of the candidate information along with a more detailed explanation of the new voting method. Voters must mail their ballots by a postmark deadline of September 24, 2004, and election results will be announced in the November/ December 2004 issue of *Vision*.

The NACC relies on vigorous and creative board members who are equal to the challenges of the coming years. Your participation in this election is vital to the continued growth of the association.

*The Governance Committee of the NACC Board of Directors*  
Ms. Bridget Deegan-Krause, Chair  
Mr. Patrick Bolton  
Sr. Maryanna Coyle, SC  
Ms. Emily John, PhD

### Q & A about our pilot voting method

In August you will receive in the mail a ballot for the 2004 NACC board election. For this election the NACC Board has approved the piloting of a new voting method. This method, called Instant Runoff Voting (IRV), asks voters to rank candidates in order of preference and uses the preferences to determine a winner (or winners). IRV has been used for over a hundred years in thousands of government and private association elections throughout the world, and more recently in leadership elections in professional membership organizations similar to the NACC.

### Why is NACC using a new voting method?

The most important reason for switching is efficiency. The current method of NACC board elections usually requires two rounds of voting. This is not only cumbersome but expensive and time-consuming. The new method will simplify the process into a single ballot but take into account your second choice (as well as your third choice and so on). Efficiency is not the only reason for the change, however. The new method actually represents an improvement over the current system in its ability to produce a board that reflects the preference of the NACC members. This system allows voters to vote for their preferred candidates knowing that their vote will transfer if their first-choice candidate does not win.

### How will I vote under this new method?

Instead of putting a checkmark or an X beside a candidate's name on your ballot, you will put a number showing your ranking, or preference, for the candidate. For example, on a ballot with four names, if you like Candidate A the best, then you would put a '1' beside Candidate A's name. If you like Candidate C next, you would put a '2' beside Candidate C's name, if Candidate B is your third choice you would put a '3' beside that name, and so on. You may rank as many candidates as you wish, with a numeral 1, 2, 3, or 4 clearly marked beside a candidate's name, but you cannot give the same ranking to more than one candidate. You cannot hurt your favorite candidate by selecting a second, third or fourth preference. If no candidate has enough votes to be elected, the lowest placed candidate 'drops out' and his or her votes are redistributed to the voters' next-preferred candidates.

### How can I get more information?

Additional information about this new voting method can be found on the NACC web site at: [www.nacc.org/aboutnacc](http://www.nacc.org/aboutnacc). If you have further questions, you can contact Governance Committee Chair Bridget Deegan-Krause at [krausebd@udmercy.edu](mailto:krausebd@udmercy.edu) or Susanne Chawszczewski, PhD, Director of Education and Professional Practice, at the National Office.

Joan Bumpus  
Director of Pastoral Care  
St. Vincent Hospital  
Indianapolis, Indiana



I have served in my current position for 15 years and have previously served NACC at both Regional and National levels.

Regional level: Regional Director of Region VII (three years); Chair of regional conferences (two years); Team captain for certification interviews (several years).

National level: National Leadership Council/ Board of Directors (six years); Chair of the National Development Committee (three years); Restructuring Task Force (two years); Cognate Steering Committee (three years); Currently, Chair of the Board; Currently on Council of Collaboration with other cognate groups.

Our future remains bright and full of excitement as we continue our journey. I remain committed to the growth and strength of the NACC in service to our members. The strategic plan, ready for implementation, will guide our activities over the next several years. It will strengthen the core functions of the NACC and will allow us to go beyond them. It will allow us to measure our success and keep us focused and on course.

Increasing membership remains a core concern and is a component of our strategic plan. It is time for the NACC to think outside its own paradigm. I intend to engage the Board in serious discussion concerning the possibility of creating an institutional membership category. I believe with little effort, and supported by our strategic plan, we can present an exciting reason to institutions/systems where Chaplains work, as to why they would want to become a dues-paying institutional member. We have a wonderful opportunity to create collaborative partnerships with them. In doing so, it will extend the existing resources of the NACC and create an additional consistent financial base. Ultimately, 'institutional membership' will allow us to provide more membership services to you. It can be a win-win situation for all of us, and will enable the NACC to take leadership and provide the institutions something that they have been asking for, for a long time. Yes, you know it... 'Benchmarking/Best Practice' information, 'Standards of Practice' for the profession, and appropriate staffing and salary levels. Creating 'institutional membership' and collaborative partnerships will enable this to happen. Yes, I am just a little bit excited about this potential future.

I would consider it a privilege and an honor to help lead us into an exciting future.

Linda F. Piotrowski,  
MTS, NACC Cert  
Interfaith Chaplain  
Central Vermont Medical Center



While studying for my master's degree I took my first unit of CPE and fell in love with chaplaincy. Initially certified in 1990, I began chaplaincy in a religious community's retirement home. Since then I have served in nursing homes, acute care hospitals, and home hospice settings. I became director, then a regional director of spiritual care. As regional director for Covenant Healthcare, Inc., in Milwaukee, I utilized continuous quality improvement philosophies and techniques to form a system of spiritual care that continues to serve five acute care hospitals, three nursing homes, hospice and a parish nursing program. I was the Communications Chair for NACC Region VII, assisting with several regional conferences and presenting workshops at local and national conferences. I served on certification teams for nine years.

In November 2001 my husband and I moved to Vermont. I welcomed the challenge of establishing the chaplaincy program for Central Vermont Medical Center. Collaborating with community clergy, educating staff about spiritual care, serving on patient education, ethics and palliative care teams, providing bereavement services, leading newborn and infant loss support groups, acting as liaison to our local Alzheimer's Association and Vermont Ethics networks, leading prayer for the state legislature, writing for our employee newsletter, creating a system of communication for state-wide APC and NACC chaplains while ministering as chaplain in our hospital and nursing home are among the opportunities and challenges I successfully negotiate.

Ministering in a community hospital in Vermont opened my eyes to the opportunities and challenges found in rural and non-religious settings. Serving on the Collaborative Task Force on Universal Standards in professional ethics acquainted me with technology's potential for sustaining relationships when distance is a barrier as well as the possibilities in collaborating with colleagues from other countries, cultures, and faith groups.

Our future lies in partnering with others! I am excited and energized by the Board's Strategic Plan Tactical Items as outlined in the June 2004 *Vision*. I believe in fostering relationships, speaking the truth, and embracing change.

*Consult not your fears but your hopes and your dreams.  
Think not about your frustrations, but about your unfulfilled potential.*

*Concern yourself not with what you tried and failed in,  
But with what it is still possible for you to do.*

— Pope John XXIII

Chaplaincy is about facing the future with hope. Thank you for considering me for the NACC Board.

Karen Pugliese  
Staff Chaplain  
Central DuPage Health  
Winfield, Illinois



My desire to serve on the Board grows quite naturally now out of 20 years of richly diverse chaplaincy experience, service to NACC and to the Church. Since my early ministry in a medical center and rehabilitation hospital, I continue to serve on chaplain certification teams. I authored the self-study for an accredited CPE program, served as regional certification chair, and received the Regional Service Recognition Award. Workshops and presentations given at national professional gatherings include NACC, CHA, Congress on Rehabilitation Medicine, Mayo Clinic and the American Society on Aging. During eight years as Vice President for spirituality, ethics and personal and organizational transformation efforts with the Wheaton Franciscans, I led the healthcare System's redesign of spiritual care services in Illinois, Wisconsin and Iowa, with an emphasis on outcomes measurement and systems research. I was instrumental in defining and developing a system of parish nursing, and developed senior level and staff retreats on workplace spirituality. I continue to serve on a Wheaton Franciscan Foundation Board offering grants for healthcare ministries, and contribute to my Diocesan deacon preparation program, serving as an instructor and spiritual mentor.

I currently serve as chaplain for the suburban community hospital where I gave birth to five of my seven children. In addition to bedside ministry of pastoral care and counseling, my primary responsibilities include Women's and Children's Services (rituals and blessings in times of childbirth and loss), Oncology and Palliative Care (rituals, retreats and support groups for cancer patients, de-briefs, memorial services), Workplace Spirituality (co-facilitating "Spiritual Journeying at Work" programs and "Silent Lamp," peer ministry preparation for staff), and the Integrative Medicine Centre (spiritual counselor, facilitator of a monthly Women's Sacred Circle, seminars and workshops.)

I know myself to be a woman of faith and hope in the midst of life's paradoxes and ambiguities. I bring an uncompromising commitment to excellence in the provision of spiritual care, and strive for balance in life and ministry. Since Dialogue '88, I have supported efforts toward further collaboration among professional chaplains. I hope to bring to the Board insights and perspectives from the breadth of my ministry experiences, along with the depth of my passion for personal, professional and theological competence in our profession. My expertise is in working with persons, organizations and environments in significant transition. I desire to serve NACC in envisioning and implementing a meaningful, actionable and sustainable vision for the future of professional chaplaincy.

Rev. William F. Spacek,  
M.Div., BCC  
Catholic Staff Chaplain  
University of Maryland Medical System  
Baltimore, Maryland



John's Gospel is my favorite Gospel especially chapter 11:32-45 the raising of Lazarus. It's one of the few places we see a most human Jesus. A Jesus who knows, feels, weeps, communicates, learns, shares, prays and shows us all at one time how to be untied from that which holds us to this world. While showing us how to be free to do His ministry preparing for the coming of the Kingdom of God.

Throughout my five years of ministry at University Hospital I realize I do not just administer sacraments but rather I help people to learn about mending, renewing, reshaping, refocusing, reestablishing a way out of the tomb of darkness, hopelessness and death to seek a new relationship with a God of Love and Mercy.

At my hospital "WE CARE" represents Welcome, Engage, Communicate, Address customers' needs, Respect and Educate. Within Pastoral Care our mission statement "HOPE" translates to bring Hope to patients, families and staff who can find no hope or meaning in the suffering they encounter. Operate as part of an interdisciplinary team of professionals. Being Proactive in our ministry with patients, families and staff. To Educate patients, families, and staff. This statement and mission are not just words to me but tools which help me to see that I need to be more active with in my organization of the NACC sharing a Welcoming and Engaging CARE of HOPE. By becoming more active within NACC I hope to continue to seek out ways to bring forth high professional standards in order to minister in the light finding creative ways to help promote the Kingdom of God.

In Toronto I saw a monumental step brought forward in the recognition of the White Paper. It shows what can be accomplished when we hear the call of Jesus to leave the darkened tomb and come into the light of His ministry. Therefore, as I accept the nomination for Member at Large on the NACC Board I seek to help this great organization to be the best stewards of our pastoral authority and Catholic identity. I seek to look for Christ the light who steers our vision. As a priest I wish to help our membership to seek and develop better relationships with the USCCB. But most of all I hope to come to this position to learn and grow as a person, Chaplain and Priest who is proud to be a member of the NACC family.

I am 41-year-old ordained priest of the Archdiocese of Baltimore in Maryland. I have served in two parishes prior to my ministry as a hospital chaplain.

Successful  
conferences  
exemplify  
'best practice'

By **Susanne Chawaszczewski**

Pockets of our members have been meeting regularly across the country both formally and informally. One very successful group has been the chaplains / supervisors from Minnesota, South and North Dakota. They have continued to produce educational events emphasizing quality, community, and accessibility. We lift this group's success up to our members as a "Best Practice" activity for the NACC. They are continuing a program that is vital to the members in their area.

How can we support the members in their quest to gather without our taking over? How can we empower members to move forward with planning? We can tap into our leaders and talented members to help spread the needed education around the country, particularly theological education, and also to help them connect. We also know we need members like you to take the lead in these activities — with help from us in any way.

We use this group as a way to illustrate how easy it is for any of you to host an education event, or you can submit an event from your institution or area to be included on the list of education events. The "Prairie Chaplains" take on several responsibilities of hosting an event from organization, selection of speakers, and on-site assistance. The NACC office can provide administrative support if you choose to host an event. We can assist with publicity and evaluate the program for continuing education hours.

With your volunteer assistance, the NACC can offer excellent education events for our community of learners.

*Susanne Chawaszczewski, PhD, Director of Education and Professional Practice, can be reached at 414-483-4898 or by e-mail: schaw@nacc.org.*

## Best Practice in Education

### Spring Chaplains' Conference Blooms Annually on the Prairie

By **Mr. Bob Barnes and  
Sr. Joyce Iten, OSB**

We were asked after this past NACC National Conference to describe our experiences in the upper Midwest with our annual Spring Chaplains' Conference. This conference is a direct descendent of our former Region VIII Conference (Minnesota, South and North Dakota) and has continued uninterrupted even after the regions were disbanded.

Our decision to continue the conference stemmed from a poll taken several years ago by our Regional Leadership Council (RLC) of the members at a regional conference. There was a broad consensus that obtaining theological continuing education credits was the biggest challenge faced by our members in this very rural part of the country. The second greatest challenge was financial, with sixty percent of those in attendance having to pay part or all of the conference costs themselves.

The RLC made a commitment to the members to provide the best possible educational program each year at the lowest possible cost. An education committee, consisting of seven chaplains, was established to this end with the task of ensuring this commitment. The committee set a goal for itself of planning the conferences two years in advance and set to work.

The last official Region VIII Conference was held in September of 2000. At this conference we announced that the regions were now officially dissolved and as a result regional conferences would also cease. However, since our education committee had already planned the next year's

conference, the members unanimously decided to go ahead with an "area" conference the next fall. Susanne Chawaszczewski from the NACC office attended this conference and was supportive and helpful.

At the 2001 conference the participants requested that we continue offering these programs, and the education committee agreed to honor this request. Our thinking behind this decision was to provide a local conference for the chaplains in our area who would otherwise not have the opportunity to attend a conference of this kind. With the help of Susanne Chawaszczewski we were always able to offer at least eight continuing education hours in theology to help chaplains seeking recertification.

One of the biggest challenges we faced was to create a structure to engage hotels and handle registration monies. And because we were all busy with our respective ministries we decided to simplify the process as much as possible. We used e-mail and an occasional telephone conference to coordinate our planning and only met in person at the conference itself.

We chose the name "North Central Prairie Chaplains" as representative of the area we served, and invited chaplains from neighboring states outside our former region. We also shortened the conferences to one overnight and set the schedule so that participants could travel on the same days as our start and finish.

Bob Barnes, the former Region Treasurer, continued in this capacity for the conferences. He obtained a Federal ID number and opened a checking account under our new name.

See [Prairie](#) on page 12.

## Prairie

*Continued from page 11.*

He also designed simple brochures that were inexpensive to print and could be revised each year with a minimum of effort.

Joyce Iten took on the responsibility of finding quality speakers. To keep costs down she relied heavily on faculty from St. John's University School of Theology and the College of St. Benedict, both of which are located in central Minnesota. Participants have been very pleased with the quality of the speakers she has engaged.

To avoid conflicting with the Symposia in the fall, we moved our 2002 conference to the spring, and the consensus of participants was to continue this. We decided to locate our conference at a hotel in Alexandria, Minnesota, which seemed most centrally located within our area. Having the same location each year has allowed us to develop a close working relationship with the hotel staff, which is now able to anticipate our needs.

We have now held four area Chaplains' Conferences since the end of the regional structure, averaging around 50 participants each year. Evaluations have been very positive, with special appreciation expressed for offering theological continuing education hours. It has also been a time for chaplains in this very large geographic area to connect with peers and renew friendships. With God's grace we will continue to offer our Spring Chaplains' Conference.

*For further information you may contact Bob Barnes at 715-356-8725 or [barnesb@hyhc.com](mailto:barnesb@hyhc.com), or Sr. Joyce Iten, OSB, at 320-251-8115 or [jiten@shsr.stcldio.org](mailto:jiten@shsr.stcldio.org).*

## 'I Wouldn't Miss It for Anything!'

*Conference participants enjoy education, networking, 'opportunity to touch skin'*

**By Becky Evans**

The North Central Prairie Chaplains who come together annually in the spring in Alexandria, Minnesota, appreciate their conferences for many reasons. Some regular participants who were asked to describe their experiences cited similar advantages: affordable cost, quality educational programs (especially theological education), community prayer and reflection, and networking and socializing.

And "the opportunity to touch skin," as **Fr. Richard McGuire** put it. Fr. McGuire, a certified Supervisor who serves as pastor of Immaculate Conception in Osakis, Minnesota, also uses the annual conference for the ongoing training of laypeople in his parish's BeFriender Ministry. He has brought along as many as six BeFrienders to participate in the gatherings to advance their professional education.

The parish pays the BeFrienders' registration fee, which includes not only speakers' fees but also meals. So far the registration fee has not exceeded \$75.00 "We as a parish see this as an important training opportunity for our people. The BeFrienders have said the conferences have been very informative and on their level."

Fr. Dick is also in charge of his parish retreat center and is running a CPE unit at Staples Memorial Hospital, a program under the umbrella of St. Mary's CPE Program in Duluth.

One of the biggest things Fr. Dick appreciates about the gatherings is "the chance to connect with people again. . . We just said hey, we've got to keep this up in order to touch skin once a year at least."

The conferences have been held at

the Holiday Inn in nearby Alexandria ever since the restructuring of the NACC's governance four years ago.

The conference runs all day Thursday and Friday. The timing on Thursday and Friday is excellent, he said, because it means that priests can attend. "We get a smattering of priests who've decided this is just as important as working at their center, and they consider it a workday."

Fr. McGuire also likes the professional caliber of the programs. This year, he recalled, the conference featured a program on alternative therapies, a presentation by a physician on the physiology of cancer, and other presentations on end-of-life issues and how chaplains deal with them. "The issues are timely and a neat way to keep abreast, because most of us don't get out to the national conference."

For **Mrs. Beatrice (Bea) Britz**, NACC-certified chaplain and manager of Spiritual Care at St. Gabriel's Hospital in Little Falls, Minnesota, the important thing is getting away from work and having time with peers. "It's just a good time for reflection, rest, and a night in a motel." She appreciates the educational offerings and prayer and reflection. "One part is more educational, and then another part is more reflective. We can rejuvenate ourselves. We open with prayer, usually for 15 or 20 minutes, and then we end the day with prayer."

Getting to know each other better is also important, she said. "At least I know names of people that I can contact if I need someone for something, if I have a question, or if I need someone to help with recertification."

"We've had good food, good company, good speakers, and it doesn't last long. I only miss two days of work. 'Comfortable' would be a good word to

describe the conference. It's not high-powered, it's food for thought, a good time to rest and reflect."

Mrs. Britz especially appreciates the economical cost. "Speaking from my own experience," she commented, "health care is in chaos financially. We're a small, rural hospital. We're struggling financially, and it's too expensive for us to go out in different directions, so it just doesn't happen."

In the past, she's been able to get her mileage and registration fee paid by her hospital, but this year even that was cut back. She has other meetings she also needs to attend, on ethics, for example, because in her small hospital she fills many roles.

She is grateful that these area conferences have continued, she said, "because my hospital cannot afford it, and I personally cannot afford it, to fly to attend a national meeting, much as I would love to go. I did attend a few years back; I think '95 was the last year I was able to go."

**Sr. Cecile (Cele) Schueller, SSND**, now an Inactive Supervisor who formerly was a Supervisor in a CPE Program at the Willmar Regional Treatment Center, goes to the conference every year. "I wouldn't miss them for anything. It's the one time a year that we can come together and get some real theological background and updating, and still do some socializing and know that we recognize one another and support one another. Most of us out here are kind of Lone Rangers in our ministries, so it's a real opportunity for us to come together and socialize and get about eight hours of theological input and reflection. I wouldn't miss it unless I was down in bed."

She said the conferences have excellent presenters from St. John's

University and St. Benedict's. "We had an excellent program on the whole history of hospital ministry for the first day, and then on the second day a Sister from one of the retreat centers in the area spent the whole day on taking care of yourself, ministry to yourself."

Sr. Cele served two terms as the Director of Region VIII in the latter half of the 1990's. She now works only part time. Her ministry is with patients rather than in supervision, as she found it was too difficult to do both at the same time, and the CPE Program at Willmar has ended.

**Ms. Dolores (Dodie) Noordermeer**, a chaplain at St. Mary's Healthcare Center in Pierre, South Dakota, was unable to go to the conference this year but she has attended previous conferences. "A lot of it for me is the networking. It's being able to speak to people who do the same work, the same ministry as I have. We're very much alone out here in Pierre. We're not close to any other facilities; the closest would be about three and a half hours away. It's important to be able to actually sit down with people who do the same ministry, who have the same understanding of not only what we do but why we do it, and the different ways we agree we do this ministry.

"To me, chaplaincy is as individual as each of our own personalities. So going and gathering in a group that would share their experiences, and then we can share an educational piece, it's something I always look forward to. The educational part of it is important because sometimes we have topics we don't otherwise get to hear much about. I do appreciate that part of it, but a lot of it is the networking, having those names and

those e-mails to contact people later on, where you can say, 'Remember me? We met at the conference. This is one of the things I'm working on; have you been working on that?' Trying to reinvent the wheel every time is tough!"

Dodie is the director of her department, with one part-time chaplain, and is extremely fortunate to have seven on-call chaplains. Her institution provides not only acute care but also long-term care and independent living. The year before last, she sent her associate and an on-call chaplain "to have the opportunity to network and to experience what the other chaplains had to say."

It's one thing to communicate by e-mail, she said, "but to be able to come together, to put a face and a name together, and to hear a voice" is all very important.

**Sr. Jodelle Zimmerman, OSB**, a certified chaplain who lives in Parkston, South Dakota, where she ministers at Avera St. Benedict Health Center, appreciates several aspects of the annual gatherings. "One is the renewal and refreshment of the conference for us as chaplains. The talks integrate theology with ministry. I am glad for the opportunity to meet with other chaplains of our area, especially as they become friends over the years. We support one another and form a spiritual network. It's also a fun and relaxing time, a big part of the renewal, considering what our ministry is!"

*Becky Evans is serving this summer as Interim Editor of the Vision.*

*'It's good food, good company, good speakers. It's comfortable, a good time to rest and reflect.'*

— *Bea Britz*

## Council on Collaboration produces key draft documents

**By Bridget Deegan-Krause**  
**NACC Representative**

The Council on Collaboration continues its monthly meetings at a virtual conference table that stretches from the northern Rockies of Canada to the flatlands of Texas. The council has been busy attending to important collaborative projects that will help the NACC fulfill its own strategic plan by promoting the profession of chaplaincy and ensuring the provision of high-quality pastoral care.

In July, the council's task forces produced three significant draft documents:

- ▼ Universal Standards for the Certification of Chaplains
- ▼ Common Standards for Supervised Pastoral Education
- ▼ Model Code of Ethics for

Professional Chaplains.

The council includes representative leaders from the NACC, the Association of Professional Chaplains (APC), the Association for Clinical Pastoral Education (ACPE), the National Association of Jewish Chaplains (NAJC), the American Association of Pastoral Counselors (AAPC), and the Canadian Association of Pastoral Practice and Education (CAPPE/ACPEP).

During the coming months the members of the council and its task forces will work together closely to refine these drafts to produce final documents to be adopted by the constituent boards at a joint meeting in Portland, Maine, on November 7-8, 2004.

In addition to the projects on joint standards, the council has also moved

ahead with plans to create and oversee a Cabinet of Liaisons comprised of individuals from the constituent organizations who will, for maximum impact, represent the interests of all of the council's pastoral care organizations as liaisons with various key human service organizations who are willing to explore the impact and integration of spirituality in their missions.

Finally, council members have expressed interest in the possibility of a joint conference for members of all organizations in 2008. NACC Acting Director Kathy Eldridge and NACC Director of Education and Professional Practice Susanne Chawszczewski have joined a task force with administrators of the council's other member organizations to explore the viability of this combined effort.

## ITE training designed to assure quality interviews

**By Ms. Cathy Connelly**

When I was certified nearly five years ago, the interview process was decentralized with critical regional variations. By the Spring of 2003, the certification process had been centralized and new opportunities had evolved. Six certified chaplains came to Milwaukee for the start-up of a new role that March. This dynamic group spent hours developing an understanding of Certification Commission and NACC staff concerns about application of national Standards for certification, interviewer concerns about lack of adequate training, and candidate comments.

Collaboratively with the commission under which we serve, we developed a teleconference training process and began mentoring interviewers to assure the quality and integrity of our national Standards and certification process. We renamed our role Interview Team Educator to reflect our primarily proactive approach to quality issues.

The May 2003 interview results showed the difference. Interviewers were

more comfortable in their roles as a result of their preparation and the on-site problem solving and quality control we were able to provide. There was a noticeable improvement in the quality of the Presenter's Reports. Based on that success, a second group of ITEs was trained and began functioning last fall.

This spring, I was asked to become the Lead ITE, and met recently with both our ongoing ITEs and this year's new ITEs. What an energized group, so willing to share experiences in an effort to improve the critical process of certifying competent chaplains!

In our continuing quality assurance responsibility, we carefully review the evaluations from those who were involved at each interview site: the candidates, interviewers, site coordinators, and ITEs. We look at both trends and the most recent status to improve the process. Our recommendations have led to tweaking the interview schedule to allow more time for the interview team to adequately deliberate and write their Presenter's Reports. We also implemented ways to

improve our training and communication for both candidates and interviewers, including use of the website, mentors for candidates, and report examples for interviewers.

In collaboration with the Certification Commission under which we serve, we have looked at the quality of Presenter's Reports to identify crucial elements for both teaching and on-site assurance. That has led to an improvement (reduction) in both the percentage of recommendations that the commission has overturned as well as the appeals considered and/or granted.

We spend many hours behind the scenes but are available to one another, the commission and staff, and especially the interviewers to support our NACC mission. Our critical need at this time is for good interviewers for our fall interviews October 2-3. Share your self, experience our assistance, and discern whether you might be called to the role of ITE.

*Cathy Connelly, an NACC-certified chaplain, ministers at Providence Hospital in Columbia, SC.*

## Praying the Scriptures

By Demetrius Dumm

*Liturgical Press, Collegeville, MN; 2003, \$8.95.*

### Reviewed by Sr. Colette Hanlon, SC

This gem of a book (and at a bargain price) would make a wonderful guide for those who have spirituality study groups in their parish or institution. Father Demetrius is a Biblical scholar from Saint Vincent Archabbey in Latrobe, PA. After fifty years of being a professor he says that the only question of his students that matters to him is whether the knowledge of the Scriptures made a difference in their lives. He explores this as he reminds the reader that while the Hebrew Scriptures are all written in the light of the Exodus, the Christian texts are all anchored in the second and definitive Exodus — the death and resurrection of Jesus.

He reflects on various passages as guiding words in the hope that each individual might participate experientially in the saving events described. This calls, he believes, for personal honesty and integrity and a lifelong journey from selfishness to love of others — possible only with God's help and our embrace of suffering and grief. He invites the reader to grow in trust — “a wonderful gift that exists halfway between the anguish of petition and the joy of gratitude.” (p. 58) In this and so many other instances he illustrates his words with a delightful story.

He is most dynamic in bringing to life key persons in the Scriptures: David and Saul (favorites of his), Solomon and Judith, Moses and Miriam, Abraham and Isaac, Martha and Mary, and especially Mary, Mother of Jesus. The Scripture index at the back of the book is helpful for those who might wish to use it as a study guide.

For those whose pondering will be more from the point of view of spiritual reading, an opening comment will leap out: “...the only animal on earth that does not know why it is here is

the human animal!” (p.1) For Father Demetrius, steeped in wisdom, grace, and God's Word, the questions we will be asked when we meet our Creator will be, “Did you let my people go? Were you a gift in the lives of others?” Questions for all of us to take to heart.

*Sr. Colette Hanlon, SC, MED, MA; NACC Chaplain Advanced, is Director of Pastoral Care and Patient Relations at The Hospital of Saint Raphael; New Haven, CT; chanlon@SRHS.org*

## The Anatomy of Hope: How People Prevail in the Face of Illness

By Jerome Groopman, MD

*Random House, New York, 2004, \$24.95*

### Reviewed by Becky Evans

The title of Dr. Jerome Groopman's popular new book is intriguing for readers interested in pastoral care. We are bound to wonder what role chaplains have played in Dr. Groopman's experience and analysis of how people find hope in the face of dread diseases like cancer and AIDS. Who on the medical team is better qualified to deal with the role of hope in life-threatening illness than the certified chaplain?

The author of two previous popular books, *The Measure of Our Days* and *Second Opinions*, Dr. Groopman is a staff writer in medicine and biology for *The New Yorker* magazine and a professor at Harvard Medical School. As a researcher he has focused on hematology and oncology. As a writer of popular books and articles, he is gifted in explaining medical science in layman's language.

The 200+ pages of this book are a quick and fascinating read. Groopman is an excellent writer and riveting storyteller. Through patient anecdotes, as well as research, he intends to answer the question “why some people find and hold on to hope while others do not.” He draws upon his 30 years of practice, his blunders and successes, to

## Book Reviews

document the lessons learned from patients and colleagues. He also includes his own history of struggling with, and ultimately overcoming, years of debilitating back pain.

Two of the vignettes portray cancer patients who were connecting God with what they were going through in their illness. In distinguishing true from false hope, Groopman offers another story of the mistake of giving a patient an unrealistically optimistic prognosis.

Of particular interest to chaplains is the story of Dan, a Vietnam veteran who was refusing treatment for a cancer that held out the prospect of cure. Baffled by Dan's unyielding resistance to treatment, Groopman first tries to refer Dan to a psychiatrist to perhaps treat him for depression.

When Dan refuses to go that route, Groopman finally decides that perhaps a chaplain might help. So he asks Dan, “Are you religious?” Dan says no, he isn't. Groopman adds, “Would you like to see a chaplain, anyway?” Of course Dan says no, he doesn't. The professional chaplain will be dismayed by such an ignorant approach to being included in the patient's care. A patient doesn't need to consider himself “religious” to benefit from the emotional and spiritual care of the chaplain, who is trained to help even a patient claiming to lack religious faith. Such a patient will no doubt have a set of values or a belief system that a chaplain can tap that may affect his illness, help him cope, and aid in his recovery. (Compare Groopman's “referral” with Joan Carlson's front-page *Vision* article in May 2002 headlined, “Do You Want to See the Chaplain?”)

That exchange between doctor and patient took place in 1995. If Groopman has more recently had a positive learning experience with a chaplain and professional spiritual care,

— See [Book Reviews](#) on page 16.

## Book Review

it isn't revealed in this book.

Groopman has good things to say about nurses, how important and valuable they are as members of the medical team, but chaplains are missing entirely from the picture.

Despite this disappointment, readers interested in the body-mind connection will find in the final chapters a readable discussion of the current scientific research, including studies on the placebo effect and the role that memory plays in summoning and sustaining hope. But with only a cursory reference to "clergy," when Groopman brings "faith" and "soul" into his writing, the chaplain may well fault his attitude toward appropriate spiritual

care and wonder if the doctor is practicing outside the field of his competence.

I recommend that chaplains read this book for enjoyment, for insight, and for "ammunition" to advocate for holistic care that includes the role of the professional chaplain. In a book that purports to explain how hope can change the course of illness, the glaring absence of the chaplain as partner and resource in holistic patient care provides further evidence of the need for chaplains to communicate with colleagues outside their specialty. This book can provide an excellent starting point for beneficial conversations with physicians and other medical personnel.

*Becky Evans, MA, Vision editor from 1990 to 1999, freelances as an editor in her retirement.*

## This Step

*Somewhere  
around the middle of your life*

*you understand that  
it is not the destination.*

*Nor is it what is waiting  
where the road turns next.*

*It is the step  
that you are taking now*

*or maybe what has stopped you.*

*It is this soft light, sifting  
through the leaves,*

*the red-winged blackbird  
calling from the mountain-ash.*

*It is the secret whispered  
in this breeze...  
this breath.*

— Deborah Gordon Cooper

## In Brief

### Priest chaplain honored

Congratulations to Rev. Thomas Kamenski, OFM, a certified chaplain at Our Lady of Lourdes Regional Medical Center in Lafayette, Louisiana. He was honored with the Franciscan Service Award for the month of May.

Fr. Tom is a Friar priest and member of the Franciscan order of the Assumption Province in Franklin, Wisconsin, where he originally served as a Brother and was later drawn to the priesthood.

Fr. Tom joined the Lourdes ministry in 1996. He is known for his devout Franciscan philosophy of a humble, simple life. His most obvious role at Lourdes is as celebrant of weekday masses, and he is often called to provide the Sacrament of Anointing and the Sacrament of Reconciliation to accident victims or to seriously ill patients. He often celebrates mass in the surrounding parishes on weekends and provides spiritual care to the elderly in the apartment complex where he resides.

A co-worker stated, "Fr. Tom goes beyond the call of duty in meeting the needs of others. His personal plans and time never come first." An admirer described Fr. Tom's compassion

interpreted in an excerpt from the Prayer of St. Francis, "He seeks to console, comfort and support colleagues and patients rather than be consoled and comforted himself."

### Disaster group publishes online introductory document on care

"Emotional and Spiritual Care, an introduction on basic concepts" is the title of a working document from the Emotional and Spiritual Care Committee of the National Voluntary Organization Active in Disaster. The 40-page document (dated May 24, 2004) is now available to read online at [www.nvoad.org/articles/ESCCchapterB.pdf](http://www.nvoad.org/articles/ESCCchapterB.pdf), or the reader can go to the NVOAD web site and click on "documents."

The document's table of contents includes major headings of Summary on: Stress and Emotional Health; Spirituality; The Emotional and Spiritual Relationship; Emotional Impact of a Disaster, and Spiritual Impact of a Disaster. Another twenty pages are devoted to Resources, both for the person impacted by disaster and for the care giver.

Therese M. Becker, the NACC special representative to the American Red Cross Disaster Network, recommends this work in progress to NACC chaplains. "What I have read so far is really good," Terry commented.



## Prayers for Healing

If you know of an association member who is ill and in need of our prayers, we ask that you (1) request permission of the person to submit his or her name, need (cancer, stroke, surgery, etc.), and city and state and (2) send this information to the *Vision* editor at the National Office. You may also send in a request for yourself. Names will be posted here for three months; then we ask that you resubmit the person's name if there is a continuing need.

## Plan Now for 'Imagining Peace' in October

**D**on't forget to plan ahead to celebrate Pastoral Care Week, October 24-30, 2004. The menu of information under "Resources" at [www.pastoralcareweek.org](http://www.pastoralcareweek.org) includes: Ways to Celebrate, Theme, Prayer Resources, Press Release, Proclamation, Statement, Celebration Ideas, and Artwork. You can also find a link on the web site to the "Sadako Story."

The theme for this year's celebration, "Imagining Peace," features an appropriate peace symbol, the folded paper crane. According to a Japanese legend that anyone who folds a thou-

sand paper cranes would be granted a wish, a young Japanese girl named Sadako completed over 1000 before dying of leukemia, "the atom bomb disease," in 1955 at the age of 12.

A new product you can order this year is an origami paper kit with instructions to fold your own paper cranes. Use the resources on line to get information or order products, or the order form published in the July *Vision*.

The deadline for custom orders is October 6; for other orders October 13, while quantities last.



### ▼ CHAPLAIN

**Los Angeles, CA** – Seeking part time or full time Catholic priest to join the Pastoral Care Division of QueensCare. Chaplain would provide pastoral care for Catholic patients in the Queen of Angels Hospital in Los Angeles, California, assist with noon masses at the hospital and have some on-call responsibility. Bilingual Spanish/English is a plus. Applications from retired priests are welcome. Compensation would include salary and could include some meals. Send resume to Rebecca O'Neill, Director of Human Resources, 1300 N. Vermont, #706, Los Angeles, CA 90027; fax (323)953-9979; e-mail to [rhoneill@queenscare.org](mailto:rhoneill@queenscare.org). Please visit our website at [www.queenscare.org](http://www.queenscare.org). QueensCare is a faith based nonprofit that provides innovative health services in the multicultural communities of Los Angeles County.

### ▼ CPE RESIDENCY

**Scott & White Hospital, Temple, TX** – Scott & White Pastoral Care Department is currently recruiting for the 2004-05 CPE Residency Program. Scott & White Memorial Hospital and Clinic is one of the largest medical specialty clinics in the

## Positions Available

United States and is affiliated with the University of Texas A&M Health Science Center. Scott & White recognizes the importance of the mind, body and spirit connection and therefore provides a supportive environment for pastoral ministry. Through ministry experiences and weekly seminars, students develop pastoral and interpersonal skills, fine tune an operational theology, and gain insights into physical and mental health issues. Competitive residency stipends are offered. Tuition is not required. Moving allowance may be provided on a case-by-case basis. Applications must accompany a \$25 application fee. If accepted, there is a \$75 confirmation fee. For more information and an application packet contact, CPE Supervisor Marty Aden, Department of Pastoral Care, Scott & White Memorial Hospital, 2401 South 31st Street, Temple, TX 76508; phone: (254)724-5280; e-mail: [maden@swmail.sw.org](mailto:maden@swmail.sw.org).

## Positions Available

### ▼ CHAPLAIN/PRIEST

**St. Vincent's Medical Center, Bridgeport, CT** – We are seeking a chaplain/priest to join our Pastoral Care team. SVMC is a value's driven Catholic health care facility that focuses on healing the sick and improving the health of the community. The selected candidate will participate in an inter-disciplinary approach to meeting the spiritual and sacramental needs of our patients, families and staff. The duties will include Anointing, celebrating Mass and responding to emergencies on a 24-hour basis several nights of the week. The candidate should have hospital experience and be NACC or APC certified or eligible. The candidate must have ecclesiastical endorsement. Excellent salary and benefits package. Interested candidates should send a resume via e-mail to: Dennis McCann, Director of Pastoral Care; dmccann@svhs-ct.org. For further information call: (203)576-5117.

### ▼ CPE RESIDENCY PROGRAM

**Resurrection Health Care, Chicago, IL** – Currently we have two openings for a one-year Clinical Pastoral Education residency available September 1, 2004 – August 31, 2005 with annual stipend and health benefits. Residents complete four units of CPE and there is a significant progressive curriculum focus from Level I to Level II CPE Outcomes throughout the year. Residency program at Resurrection Health Care has a variety of specialization areas including ministries in the acute care setting, nursing and rehabilitation centers, retirement communities, and behavioral health. The following are required at the time of application: at least one unit of CPE; a theological degree (M.Div. or equivalency) and commission to function in Health Care ministry by appropriate religious authority. Send your application materials to Resurrection Health Care, Director Clinical Pastoral Education, 1127 N. Oakley Avenue, Chicago, IL 60622; Fax: (312)770-3352; apply on line at [www.reshealth.org](http://www.reshealth.org); e-mail: [rmanching@reshealthcare.org](mailto:rmanching@reshealthcare.org).

### ▼ TWO STAFF CHAPLAINS

**St. John's Hospital, Springfield, MO** – St. John's is sponsored by the Sisters of Mercy and is located in Springfield, Missouri, a large "small town" nestled in one of the most scenic and vital areas of the Midwest. The positions offer an exciting opportunity for lay, ordained or professed Religious chaplains to join a diverse team of 16 highly qualified and dedicated professional Chaplains. The 800-bed hospital provides a wide range of healthcare services including all major specialties and Level I Trauma Services to a large regional community. The St. John's system maintains a strong commitment to provision of spiritual care integrated within the services that have earned it "Top 100 Health Systems" status. Candidates must be certified by the NACC or APC, possess strong ministry skills and have the ability to minister in the context of the overall healthcare team. For information on this exciting opportunity, contact Rick Erickson, Director of Pastoral Services, St. John's Regional Health Center, 1235 E. Cherokee, Springfield, MO 65804; phone: (417)820-2734; e-mail: [eerickson@sprg.mercy.net](mailto:eerickson@sprg.mercy.net).

### ▼ DIRECTOR OF PASTORAL SERVICES

**Valley Regional Medical Center, Brownsville, TX** – The primary role is to develop a multidimensional approach to pastoral care services with respect to meeting the needs of the

patient, family, staff and community. Keeps reports of pastoral care statistics regarding number of patients/families/staff seen, ministering at codes and deaths. Provide an atmosphere that respects the uniqueness of each person's spirituality and faith and offers spiritual support. Focus on patient and employee satisfaction, offer support to help utilize faith in coping with illness, confront suffering and loss, and positively impact end-of-life decisions. Coordinate local clergy service and build strong community ties. Requirements: Clinically trained at an accredited institution. Knowledge of JCAHO standards. Strong interpersonal skills. Ability to communicate effectively both orally and in writing. Bilingual (English/Spanish) preferred. Bachelor of Arts degree required with advanced seminary/divinity school degree in theological studies. Certification by a national group or eligible for certification. Endorsed and/or ordained by a faith group. At least two years pastoral/chaplain experience. We offer a generous compensation package including vacation, 401k, and medical insurance. Valley Regional Medical Center, 100 E. Alton Gloor, Unit A, Brownsville, TX 78526, Attn: Ernie Marroquin, HR Recruiter; phone: (956)350-7144; fax: (956)350-7145; e-mail: [Ernest.Marroquin@hcahealthcare.com](mailto:Ernest.Marroquin@hcahealthcare.com).

### ▼ DIRECTOR, PASTORAL CARE

**Jacksonville, FL** – St. Vincent's Medical Center, a member of Ascension Health, is seeking a Catholic Director of Chaplain Services to lead an ecumenical team of chaplains. Candidates should possess proven professional skills in implementing and improving quality spiritual care. Requirements include professional learning in theology, NACC and/or APC certification and extended quality chaplaincy experience in a hospital setting. For additional information, contact Dona Overstreet, Senior Recruiter, phone: (800)937-7862, e-mail: [doverstr@jaxhealth.com](mailto:doverstr@jaxhealth.com).

### ▼ PRIEST CHAPLAIN

**Austin, TX** – SETON Healthcare Network is seeking Priest Chaplains for network of five acute hospitals that include Brackenridge Hospital, Level II Trauma Center, Children's Hospital of Austin. Minimum qualifications: Four CPE units are required. Bilingual in English/Spanish is strongly preferred. Current ecclesiastical endorsement from the Bishop of the Diocese of Austin. Current certification with either the National Association of Catholic Chaplains or the Association of Professional Chaplains is required within six months of employment with SETON. At least one year of service in a hospital environment or similar institution is also required. If interested, please e-mail formal resume to [mfaulks@seton.org](mailto:mfaulks@seton.org); fax: (512)380-7524; mail: 1201 W.38th Street, Austin, Texas 78705. An official Seton HealthCare Network application is available [www.seton.org](http://www.seton.org). SETON is an EOE.

### ▼ PRIEST CHAPLAIN

**Gary, IN** – The Methodist Hospitals headquartered in Gary, Indiana is seeking a Priest Chaplain to join its multi-dimensional, Spiritual Care team. The successful candidate will be responsible for sacramental ministry to Catholics, as well as comprehensive spiritual care to all patients. Two units of CPE, strong team skills, and outstanding references will be required. Responsibilities include call duty and care delivery to two campuses. Located in beautiful NW Indiana, The Methodist Hospitals is a Mission focused center of excellence serving a diverse, faith-based population. Its close proximity to Chicago, the south shores of Lake Michigan, and a variety of academic centers of national renown offer many cultural and recreational advantages to Methodist employees. Interested candidates

are invited to submit resumes to Monica Hall, Dept. of Human Resources, The Methodist Hospitals, 600 Grant Street, Gary, IN 46402; fax: (219)886-4249; or e-mail: mhall2@methodist-hospitals.org. EOE.

#### ▼ CHAPLAIN

**Lourdes Hospital, Paducah, KY** – Full-time Roman Catholic Chaplain in good standing with ecclesiastical endorsement to join our Spiritual Care Team committed to Catholic Healthcare Partners mission and philosophy. Qualifications include CPE certification or actively working towards certification. Willing to work as a multidisciplinary team member to provide spiritual care to inpatient, outpatient, home care patients, and families and staff of all cultures, ages, and faiths. Ability to enhance Catholic identity in carrying out the healing ministry of Jesus through a compassionate, pastoral presence and excellent communication skills. Responsible for the sacramental needs of our Catholic patients. Must possess a high level of flexibility on a daily basis. Share in on-call and weekend coverage. To apply for this position please submit a resume with three professional references to: Lourdes Human Resources Department, 1530 Lone Oak Rd., Paducah, KY 42003, Attn: Jamie Hairgrove; fax: (270)444-2976; e-mail: jhairgrove@lourdes-pad.org.

#### ▼ ADMINISTRATIVE DIRECTOR OF SPIRITUAL CARE

**Mechanicsville, VA** – Choose to be among the best. A strong community of caring. A strong commitment to your career. At Bon Secours Richmond Health System, providing a spirit of compassion and a dedication to superior, quality health care is our mission. Our award-winning hospitals make us one of metropolitan Richmond's largest employers, offering a variety of services and community outreach programs, and healthy careers. You will organize and direct spiritual care; manage and lead a diverse team of interfaith chaplains, and create and maintain a spiritual support infrastructure across disparate organizational boundaries. Requires a Masters degree (or equivalent), endorsement or ordination by a recognized ecclesiastical authority, and a solid foundation in Catholic health care and ethical issues. Visit us online at [www.bonsecours.com](http://www.bonsecours.com), and send your cover letter and resume to: ATTN: Gil Logan, Bon Secours Richmond Health System, 8220 Meadowbridge Rd., Suite 302, Mechanicsville, VA 23116; fax: (804)764-6519; or e-mail: [Gil\\_Logan@bshsi.com](mailto:Gil_Logan@bshsi.com). Equal Opportunity Employer. Candidates only; no recruitment firms.

#### ▼ CHAPLAIN

**Pensacola, FL** – Certified Chaplain wanted for full-time position at Sacred Heart Health System in Pensacola, Florida. Sacred Heart is a member of Ascension Health and consists of a 449-bed acute care hospital. Benefits include competitive salary, paid time off and retirement package. Sacred Heart is an equal opportunity employer. Please fax resume to (850)416-6740.

#### ▼ DIRECTOR OF SPIRITUAL CARE

**St. Louis, MO** – SSM St. Mary's Health Center is seeking an experienced Director of Spiritual Care. Primary responsibilities are the leadership of Spiritual Care Department including staffing, scheduling, budget compliance and staff development. In addition the Director will coordinate and delegate the liturgical and ecumenical services for patients, families and staff within the Health Center. Qualified candidates will have a Master's Degree in theology, spirituality or related field. Three to five years' ministry experience within a health care system is preferred. Certification in NACC is required. We offer a comprehensive compensation/benefits package in addition to

tuition/loan forgiveness. Qualified candidates may fax to: (314)768-7131; apply in person Monday-Friday, 7:00 am to 4:00 pm; or online at [www.ssmhealth.com](http://www.ssmhealth.com). St. Mary's Health Center is part of SSM Health Care named best place to work four years in a row by the St. Louis Business Journal. The SSM Health Care organization is to receive the Malcolm Baldrige National Quality Award. EOE.

#### ▼ DIRECTOR OF MISSION SERVICES

**Apple Valley, CA** – St. Mary Medical Center, the High Desert's leading medical facility, is located in beautiful Apple Valley. Offering an array of medical and surgical services, St. Mary Medical Center is a full-service, 186-bed acute care, not-for-profit facility serving the entire Victor Valley region. As part of the prestigious St. Joseph Health System, St. Mary Medical Center is committed to serving all High Desert communities through the values of Hospitality, Dignity, Justice, Service and Excellence. The Director of Mission Services assists the Vice President of Sponsorship in ensuring that the Mission, Vision, and Values of the Sisters of St. Joseph of Orange are vital and operational in the local health care setting. The position provides assistance in leadership, direction, and administration of processes in integrating sponsorship, Catholic identity, spirituality, and ethics into the operations of St. Mary Medical Center as well as provides for the management, coordination and delivery of the biopsychosocial and spiritual care of the patient, families, and health care providers. Additionally, the Director of Mission Services plans and coordinates spiritual life activities at St. Mary Medical Center and provides direct supervision to both the Spiritual Care department and staff as well as manages and directs supervision of lay volunteers, local clergy volunteers, Eucharistic Ministers, and seminarians. A Masters Degree is preferred. This position requires a Bachelors Degree in an applicable field, two years management or project coordination experience, certification as a chaplain desirable and Ecclesiastical endorsement from the Catholic Diocesan Bishop may be required prior to job offer. The ideal candidate possesses understanding of Catholic health care and its fundamental Gospel mission, is versed in Catholic Social Teaching and has excellent oral and written communication skills. We offer a competitive compensation and benefits package. Send your resume to: SMMC, HR Dept., 18300 Hwy.18, Apple Valley, CA 92307. Phone: (760)946-8886; Fax: (760)946-8136; e-mail: [sjclark@stjoe.org](mailto:sjclark@stjoe.org). EOE.

#### ▼ CATHOLIC PRIEST CHAPLAIN

**Indianapolis, IN** – St. Vincent Hospital and Health Care in Indianapolis, Indiana is seeking a full-time Roman Catholic Priest Chaplain to supplement its large ecumenical pastoral care staff. Successful candidates will be NACC or APC certified, have a Master's degree in theology or behavioral science, have completed a minimum of four units of CPE, and have ecclesiastical endorsement. Excellent salary and benefits package. Interested candidates may apply online at [www.stvincent.org](http://www.stvincent.org). EOE.

## Position Wanted

NACC Certified Chaplain seeks a position as a staff chaplain, preferably in the North-Central Pennsylvania area, beginning after August 9, 2004. Has completed seven units of CPE. Please contact Rosemarie Witt, 1634 Pulaski Avenue, Coal Township, PA, 17866; e-mail: [rosemariewitt@yahoo.com](mailto:rosemariewitt@yahoo.com).

# Board of Directors

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# Calendar

## October

- 2-3** Certification Interviews – at multiple locations
- 4** Copy deadline for November/December issue of *Vision*
- 5** National Day of Prayer for Mental Illness Recovery and Understanding: God's Ministry for Mental Wellness (National Alliance for the Mentally Ill)
- 24-30** Pastoral Care Week: Imagining Peace
- 28-31** Certification Commission Meeting Milwaukee, WI

## November

- 6-8** NACC Board Meeting Portland, ME
- 7-8** Council on Collaboration (Joint Meeting of the Boards) Portland, ME
- 10-13** ACPE Annual Conference Portland, ME
- 15** Copy deadline for January *Vision*
- 15-18** USCCB General Meeting Washington, DC
- 25-26** Thanksgiving Holiday National Office closed

THE NATIONAL ASSOCIATION OF  
CATHOLIC CHAPLAINS

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