



Collaborative Planning for Pastoral Care Ministries

Over the past few years, the National Association of Catholic Chaplains (NACC) has been in partnership with a variety of professional and ministerial associations to promote, educate, support, and certify priests, deacons, and religious and lay men and women in the ministry of pastoral care. In communication with these various partners, we recognized the value of undertaking collaborative planning for educating, forming, and equipping those involved in the pastoral care ministry in the name of the Church.

We realize that the shifts in health delivery affect every person and institution in the United States has been affected by the Affordable Care Act and its health care reform. In the US, health care reform is:

- Shifting from acute/rescue care to preventative/wellness care,
- Shifting from inpatient services to coordinated outpatient care,
- Shifting from provider-centered care to person-centered care, moving people from passive recipients of service to active partners,
- Redesigning payment systems from pay for volume to pay for value, and
- Involving communities in the solutions.

The impact on providing spiritual/pastoral care in this environment is enormous, as pastoral care is not a reimbursable service, thus often being an expendable service. Thus, pastoral care in health care settings is undergoing significant changes. NACC's board certified chaplains are often the vital agents in health care settings to provide leadership in pastoral care, and to help reshape pastoral care services in these transforming times.

However, in the midst of all these changes, the Catholic Church is still living out its mission to provide healing pastoral care for all who are broken and vulnerable, especially the sick, aging, dying. This ministry is provided in a variety of ways and settings, and those Catholic members providing this ministry require different levels of competencies and education/formation to develop these competencies.

So why do we need for this planning process? While many Catholic dioceses and organizations have initiated formation/education programs in pastoral care, nationally, as a Church, we do not have consistent sets of standards/competencies, nor approaches for preparing those providing the service to ensure the highest quality of pastoral care in our Catholic pastoral care ministry.

Our collaborative planning process brings together representatives of these, and others to share current practices, and systematically identify:

- Those with the most critical pastoral needs and the settings where they are most found;
- The type of needs and types of pastoral care needed;
- The competencies needed to meet those needs;

- The diverse ministries (board certified, pastoral associates, volunteers, parish nurses) needed with these competencies;
- The standards/training/formation required to obtain those competencies;
- The core elements for professional and volunteer pastoral care formation... and accountabilities required;
- An agreed upon organization approach to provide the ministry preparation needed in response to what we learn.

There are many high quality examples of pastoral care preparation and practices. This planning process will lead to a common vision and understanding among, and a commitment toward implementation, by the planning partners.

Collaborative Planning for Pastoral Care Ministries

Desired Outcomes

- Those with the most critical pastoral needs and the settings where they are most found;
- The type of needs and types of pastoral care needed;
- The competencies needed to meet those needs;
- The diverse ministries (board certified, pastoral associates, volunteers, parish nurses, diverse chaplain ministries) needed with these competencies;
- The standards/training/formation required to obtain those competencies;
- The core elements for professional and volunteer pastoral care formation... and accountabilities required;
- An agreed upon organization approach to provide the ministry preparation needed in response to what we learn.

Partners in Planning

1. NACC - reps
2. NACC Episcopal Advisory Council
3. USCCB Subcommittee on Certification for Ecclesial Ministry and Service
4. Hispanic/Latino Community pastoral care training
5. Catholic Health Association's Pastoral Care Advisory Committee
6. Catholic Health Systems with volunteer programs
7. Association of Graduate Programs in Ministry
8. American Catholic Correctional Chaplains Association
9. National Conference of Veterans Affairs Catholic Chaplains
10. Catholic Charities USA
11. National Association of Diaconate Directors
12. Alliance for the Certification of Lay Ecclesial Ministry
13. Representatives of programs that link healthcare to diocesan training programs
14. Directors of Diocesan Health Care Ministries
15. Faith Community Nursing
16. Representatives of Long Term Care and Outpatient settings

Settings

- Homebound
- Long term care
- Outpatient settings
- Inpatient settings
- Hospice
- Correctional settings

Those providing care:

- Pastoral Associates
- Permanent Deacons
- Faith Community Nurses
- Pastoral Care Visitors
- Board Certified Chaplains

Critical Issues (sample)

- Isolation of illness, aging, and dying
- People preparing themselves for making health care decision (advanced directives/power of attorney)
- People needing assistance when making choices – ethical decision making
- Older people reflecting on life's meaning and utilizing their spiritual/religious resources
- Those incarcerated and their family/social networks, as well as time of re-entry

Some Ecclesial Organizational Issues:

- Who oversees pastoral care in one's diocese?
- Who aids in the preparation of those who provide pastoral care?
- How does one provide ongoing preparation and spiritual enrichment to those who provide care?

Two Planning sessions

Session One: Three Days

Tuesday, October 11, 2016, noon, until Thursday, October 13, 2016, noon, Milwaukee

Session Two: Two Days

Spring, 2017 TBD