

## POST GRADUATE CHAPLAINCY STUDY

*Editorial Comment: In the changing world of Healthcare Chaplaincy there is no doubting the increase in whole time-chaplaincy appointments. Recent discussions with the Scottish Executive show a commitment to chaplaincy training: at least one full-time training officer is not far away. As chaplaincy develops we are moving into a world where appraisal, clinical supervision, and professional development are the norm. In palliative care in particular new chaplains are being appointed on the understanding there will be a commitment (on both parties) to further professional study. The choice of courses for such study is limited, though what is around would seem to be of good quality. Three courses that are available are appraised by recent graduates who give us an insiders view of the courses, the costs, and the commitment involved.*

### ***MA in Healthcare Chaplaincy***

**University of Leeds**

**Semi-distance learning course over 2 years**

**Approximate cost: £4000**

This course was established in 1998 and specifically designed for people already working in Chaplaincy.

The course involved travelling to Leeds for 2 study days during each module. (7 weeks) The bulk of the study was done at home and a unit of study material was provided each week.

I valued the study days in that there was input from a variety of people and also because of the opportunity to learn from the other students. They came from hospitals throughout England as well as 3 of us from Scotland. It was a very supportive group as well as stimulating.

There are 3 compulsory modules at the start of the course, the first being a double module (14 weeks) covering chaplaincy in a broad way. This is followed by a range of optional ones. I chose to study: Ethics in Healthcare, Death and Dying, Issues in Women's Health and Multi-faith issues. The optional modules covered mental healthcare as well as acute hospital chaplaincy and there was something for everyone. Some groups included a number of nurses who were doing an MA in Independent Practice and this brought an additional dimension to our reflections.

One of the strengths of the course was the amount of study/reading material contained in each week's

package. It was very helpful and saved time in that so much was provided for you. I read a much wider range of literature than I would have otherwise. It was estimated that 15 hours each week should be set aside and this is a fair estimate taking into account the written assignments. (1 per module).

One of the difficulties was the pace of the course in that the written assignment was due in at the end of each module, ie. included in the 7 weeks - and the next module started the following day. You had to keep up and so it was a concentrated effort for 18 months until the modules were completed. The final 6 months were allocated to the dissertation.

The dissertation (12,000 words) could be on almost any subject of your choice and support was available from staff in either of the Departments. I chose to look at ethical issues in organ donation and transplantation and was supervised by a member of staff from the School of Healthcare Studies.

### **Personal Reflection**

I had been in post for 12 years when I started the degree. I found it really beneficial. It was very relevant to my work and had a firm clinical foundation. It made me reflect on my practice and examine what I did and why I did it. I had to consider the theological basis of much of what I did and think about how my own theological beliefs had been informed and

challenged by my experiences in hospital. It also resulted in discussions with other members of staff as I examined spiritual care in a hospital setting. It has given me more confidence in my input in teaching sessions with other disciplines, even at a basic level of updating the language I use!

I would recommend the course to people who have some experience of chaplaincy and to those who like

me, feel that they have got into a rut and need an update. You also need to have the time and energy to devote to it. It is a challenging course and I am glad to have done it.

*Anne Mulligan DCS, M.A.  
Assistant chaplain, Royal Infirmary of Edinburgh*

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### ***Postgraduate Diploma/MSc.(MedSci) in Palliative Care***

**University of Glasgow,**

**Full-Time: 9 months Diploma 12 months MSc.**

**Part-Time: 24 months Diploma 36 months MSc.**

**Approximate Cost: £2,800 - £3,500**

#### **Diploma**

Teaching takes place weekly, either an afternoon or evening and the occasional whole day Saturday, mostly in Glasgow, but also at other centres. Assessment is by written assignment and presentation during each module. A realistic time commitment is at least 6 hours per week.

The modules offered include:

- Palliative Care in Context
- Psychosocial and Spiritual Care
- Communication Skills
- Managing Chronic Pain
- Managing Symptoms other than Pain
- Chronic Illness and Bereavement in Children
- Palliative Care for those with Communication Difficulties
- Developing Teaching and Assessment Skills.
- Life, Death and Spirituality (New for 2001)
- Social Perspectives on Dying, Death and Bereavement

Course Modules may also be taken on their own and carry SCOTCAT accreditation.

It is now some 3 years since I graduated. It is, clearly, difficult to judge the right balance of content in, for example, a module dealing with symptom control, in order to make that module accessible for chaplains at one end of the scale and yet still holding

interest for medical practitioners at the other. From talking with students currently on the course many of the teething difficulties in offering such a wide-ranging multi-disciplinary course have been resolved.

Much of the reading material is from journals, and Research and Library Skills are now introduced much earlier in the course in order to indicate to students the level of study and presentation technique required by the postgraduate Medical Faculty.

#### **Personal Reflection**

I found this course very worthwhile, although it took some time to get into the method of presentation required for assessments. It was useful to be able to share and discuss case studies with professionals from other disciplines and to learn from their perspectives. The encouragement to examine and reflect on practice was extremely valuable. The course involved the keeping of a Journal and presentation of a Portfolio, both interests which I have maintained. 3 years post-Diploma, the course is proving useful in teaching assignments.

*Rev. Elizabeth Crumlish BD, Cert.Min., Dip.Pall.Care.  
Chaplain, Inverclyde Royal Hospital, Greenock.*

### **MSc.(MedSci)**

On completion of the Diploma students can choose to graduate or continue to Masters level.

The Masters option is a research-based year. It includes a taught module on research methods and skills. Once the area of research has been agreed a research proposal is submitted and, if required, ethical approval is sought. The research is carried out over the remainder of the year and written up in a 20,000 word dissertation, 5,000 of which is an extensive literature review.

This is a professionally based course very much grounded in practice and professional development. It allows the student to carry out a research project based on their practice and area of interest. Those completing the course are encouraged to publish their results.

#### **Personal reflection**

One real benefit to this course is studying alongside healthcare professionals from different professions. Not only does it broaden the chaplain's understanding of how other professions think, they too get to

understand chaplaincy. The three-year part-time option allows good relationships to develop in the class, and encourages much needed mutual support and encouragement.

Neither the Diploma or the Masters is an easy option, the framework for literature review and presentation of work is distinctly different from theological study. However, there is real benefit in the course since it introduces chaplains into the way in which our colleagues in the other healthcare professions work and study. Studying alongside healthcare colleagues, and being encouraged to research and publish in healthcare, has distinct advantages for chaplains who want to contribute to the healthcare agenda and debate: not least the healthcare understanding of the chaplain's professional discipline: Spiritual Care.

*Rev. David Mitchell BD, Dip.P.Theo. MSc.(MedSci),  
Chaplain, Marie Curie Centre, Hunters Hill, Glasgow.*

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### ***Doctor of Ministry,***

**Princeton Theological Seminary, USA.**

**4 years part time: Attendance at workshops, peer groups and e-mail!**

**Approximate Cost: £1650. Does not include travel to Princeton for workshops.**

**(Princeton bursary covers US tuition fees which are substantial)**

The Princeton D.Min aims "to provide a systematic correlation of theological theory and ministerial practice". In other words it is designed to make you think about what you do and why you do it. Its structure is intended to make this process happen by reaching deep down into an individual's fundamental values and practices, asking, what does the very concrete human experience that we as chaplains encounter every day have to say to theological reflection? Can the very act of reflection serve to inform the praxis of chaplaincy?

Throughout the course the D.Min seeks to cultivate a 'habit of mind' in which this infusion of praxis and reflection shape each act of ministry. This way of thinking comes through exploring real ministerial situations from within the framework of what are called Ministry Experience Reports. Each report is structured so as to draw out the theological thinking behind the act under scrutiny, the human dynamic at play, and a self critical assessment of the minister's actions.

There are three main components to the D.Min. Residential workshops- one at the start of the course and two in each of the subsequent years; an Individual Study Plan and the Final Project or Thesis:

The workshops last for 2-3 weeks each. They are attended by all those in your workshop group and by members of faculty. The first introduces you to the method and structure of the D.Min 'habit of mind', and to the Ministry Experience Report. The second examines four MER's (each one approximately 5000 words long) that you have prepared through the year for critical analysis by peers and faculty. Ideas are also floated about Final Project topics. The third workshop examines an MER and other papers on the theme of your Final Project, which theme is examined exhaustively!

The study plan is tailored to suit the individual's needs and includes books, articles, lectures etc, on areas of interest or ignorance!

The Final Project is the culmination of all the aforementioned. It begins life during workshop two and never leaves the student's mind for the next two years growing to such a size as to take over one's consciousness! Your project proposal will go through many drafts before it is accepted and the real work begins.

Every project must be based on the concrete situation of the student. In my case this was, of course, health care chaplaincy, and specifically the issue of discernment and apprehension of spiritual matters by hospice staff.

Since the D.Min is firmly based in the context of the ministry in which you are engaged it is highly rele-

vant to dealing with the kind of issues that we face in wards and corridors and waiting rooms. For example, one of my MER's was about the request of a couple to baptise their stillborn son. There are very real human, pastoral and theological angles to consider here, whatever decision is taken.

The D.Min blurb tells you to set aside one day a week for study, but we all know how impractical that is. In truth, some weeks I did nothing at all. At other times the D.Min was all consuming, usually when a deadline was approaching. However in a very real sense your own issues and situation are the focus of the D.Min so you don't really have to stop being a chaplain to do the doctoral program.

I thoroughly enjoyed doing the Doctor of Ministry. There are no exams. No interminable reading of texts that have no bearing on what you do in real life. In my peer group I found a group of people who were not only fun to be with, but also truly constructive in their criticism, as well as greatly encouraging. The thing that I found most difficult was finding a research question and sticking to it through thick and thin. Losing sight of that nearly done for me!

The D.Min allowed me to examine my ministry in a way that I had not done before since Divinity College does not, and maybe cannot, fully prepare you for the rigours of life in parish, hospital or shop floor. The program has not given me all the answers, but I do feel that now I have some more critical tools at my disposal.

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Chaplain, Raigmore Hospital and Highland Hospice, Inverness.*