

EDITORIAL

In the course of the opening act of worship at the recent 'Chaplaincy for Tomorrow' conference, of which more in the Autumn edition of the journal, the chaplain made reference to the words of Christ to the church at Philadelphia (Rev. 3:8) :-'Behold, I have set before you an open door, which no one is able to shut'. The metaphor of the open door set before us seems particularly apposite and resonant in the context of healthcare chaplaincy today. The long awaited and much anticipated publication of the Guidelines on Chaplaincy and Spiritual Care in the NHS in Scotland is evidence that a door is well and truly open, enabling a level of communication, support and mutual working between chaplains and the institutions we serve, which has the potential to lead to the enrichment of both. Particular encouragement can be found in the document's early exposition of the background and broader role of chaplaincy. The changing role of chaplaincy in a changing society is set out with clarity, and what to many has proved an immensely helpful explanation of the distinction between religious care and spiritual care is given. There follows a sensitively framed description of the nature of spiritual need and spiritual distress with which healthcare chaplains are called upon to deal, and an affirming acknowledgement of the importance of spiritual care to the person centred healthcare which the modern NHS aims to provide. Much of this is hardly news to some of us; yet it will help greatly in our sometimes less than coherent attempts to explain to our colleagues in healthcare the nature and value of what we do.

The devil, as they say, is in the detail. And the detail is being worked out in every healthcare area in Scotland, as spiritual care committees meet to consider the integrated planning and delivery of spiritual care services across the area they serve. Chaplains have the opportunity to be fully involved in this process, and to be influential in shaping the future direction of the chaplaincy service, perhaps to be more proactive in this than ever before.

One of the many fascinating aspects of this whole debate over the nature and future of chaplaincy is about the language used, or rather, the different languages which co-exist, perhaps at times a trifle uneasily. Andrew Hill, writing from a Unitarian

perspective, chooses to preface his remarks on the guidelines with a poem which for him captures the very essence of spiritual care. It describes the 'white haired man' who incarnates the love which creates wholeness, healing and holiness wherever and for whomever it touches. Pass on now to the world which Chris Johnson inhabits for the purposes of his contribution, as he takes on the challenge of managing chaplaincy service delivery in the NHS of today, and employs the language of management in a rigorous and clear sighted manner. It surely can be said that the two approaches are not mutually exclusive, and yet to look from one to the other is to catch something of the dilemmas, even anxieties with which chaplains have to deal at this time of great change. In our efforts to come in from the cold, as it were; in our eagerness to learn and to embrace the language of NHS managers; in our attempts to define spirituality in such a way as to command the broadest possible agreement, are we, as some fear, in danger of losing something of the poetry, the spontaneity, the sheer and of-the-moment indefinability of the Spiritual, or even of stripping it of its transcendent, Godward aspect? Does the perceived recognition and status of becoming a 'department of spiritual care' bring with it, as several of our contributors fear, a demotion of the spiritual to just one more discrete element of healthcare, when in truth it should underpin the whole?

And yet, despite these and other concerns of a more practical kind, our contributors welcome the guidelines, and see them as evidence of the door which is open to us. Here we are offered a chance to shape our future; an opportunity for affirmation, recognition of our training, support and resourcing needs; a forum in which to listen and be heard (a thing difficult to do from our traditional peripheral stance, as Mike Ward reminds us), and to engage creatively alongside other healthcare professionals in this oh so practical and oh so mysterious business of healing. Perhaps there is a sense in which chaplains have to lay aside what could be interpreted as the arrogance of assuming that we are always different, apart, not subject to the same scrutiny as our colleagues, not under any obligation to explain ourselves in a language other than our own.

There is surely much to be gained. The challenge for chaplaincy is to grasp the nettle, and to think long and hard about our role, our value, and our values. Deep rootedness in our various faith communities

surely gives us the courage to do this, so that we and our healthcare colleagues together may be effective in the pursuit of excellence, motivated by that 'moral passion' which we have in common.

Request for articles

The Editorial Board are currently considering papers for Volume 7 (2004). We are interested in a variety of articles including: research based articles, papers from academic study, conference presentations, and more general papers from all aspects of healthcare.

The Editors are keen to support authors who may be new to writing papers, or are unsure of the process and format of writing. We will be pleased to discuss your ideas prior to submission, offer advice, and can offer constructive criticism on a first draft.

Full *Instructions for Authors* are contained on the inside the back cover of this issue.

The Journal of Health Care Chaplains, CHCC

The editors have made contact with the editor of the *College of Healthcare Chaplains (CHCC) Journal* and look forward to a spirit of mutual co-operation and working together to promote relevant issues concerning chaplaincy and spiritual care among chaplains and the wider healthcare community. It is also hoped that such co-operation will increase the readership of both journals and extend the influence and growing respect and professionalism of the journals.
