

REGISTRATION OF CHAPLAINS

John Birrell

Abstract: A former representative for Scotland on the Council of the College of Health Care Chaplain (CHCC), and while in post, chair of the CHCC Professional Services and Registration Group, reflects on the questions, issues and process of professional registration for healthcare chaplains. The editors.

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My daughter and her husband moved house at Christmas time. Much of the renovation and redecoration work was done by their friends, but when it came to fitting the gas appliances they made sure that they employed an installer who was registered with CORGI – the regulatory body under the auspices of the Health and Safety Executive. With an eight month old child, it was important for her safety and for theirs that the person carrying out the work knew what they were doing, was properly trained, and worked to the standards set for this kind of work. It was also important that they had some come back if the installer did not fulfil his obligations.

As chaplains in healthcare we seem to have been talking about registration for a long time – with little apparent progress. In this article I want to address four questions which may help to clarify what has happened – and what has still to happen.

- Why register?
- What would we register?
- Who would be registered?
- What are the steps to registration?

Why register?

There is one major and over-powering reason for the registration of any health profession – and that is the protection of patients. Registration is the way of setting and maintaining standards of professional training, performance and conduct, and ensuring that anyone describing themselves as a practitioner in that profession meets those standards.

As Spiritual Care becomes increasingly recognised as a part of healthcare, there is always a risk that people may present themselves as spiritual care givers with no qualification for the job, and may pursue practices which might be questionable at best and downright dangerous at worst.

In the delivery of spiritual care, healthcare chaplains receive confidences from vulnerable people; they mediate in complicated inter-personal relationships; they advise other professionals on the spiritual aspects of treatment based on their own assessment of a patient's spiritual pain or distress; they seek to bring solace and comfort to the distressed, but run the risk of increasing that distress if their assessment is wrong. Good spiritual care can complement good physical, and psychological and social care. Bad spiritual care can undermine all three.

It is to avoid these pitfalls that registration is essential.

There are, of course, other benefits which will accrue from registration – including the way the profession is viewed by other professions, protection of the profession from scandal and possibly even a glimpse of hope in the whole data protection quagmire. But the main argument is for patient safety.

What do we register?

If we were to apply to Health Professions Council (HPC), which the majority of chaplains would agree is the appropriate body, registration is by protection of title. In other words what is registered is what the practitioners call themselves. That will lead us back into some interesting discussions in due course. But if, for the sake of argument, we were to register

the title “Healthcare Chaplain” then it would become illegal for anyone to call themselves a “Healthcare Chaplain” unless they were on the register. Anyone receiving spiritual care from a practitioner using that title would therefore be assured of the training, ethics and professional standing of the chaplain.

Who would be registered?

If and when healthcare chaplaincy is registered, registration will apply to all those working as healthcare chaplains, regardless of whether they are whole-time or part-time, and regardless of the faith group they may represent, if any. Others may work in spiritual care in their own way – for example as faith visitors – and work in an unregistered way. But all those seeking to work as healthcare chaplains would require to be registered, and it is therefore probable that NHS bodies would make it a condition of employment that a healthcare chaplain held an up-to-date registration just as nurse cannot work in the NHS unless he or she holds the appropriate registration.

What are the steps to registration?

While there may be alternative routes, if we stay with example of the HPC, that body lays down very clear guidelines for aspirant professions. A profession wishing to be registered must first satisfy one of three initial criteria, and then all of a further ten conditions.

The initial criteria are that the profession involves one of

- Invasive procedures
- Clinical intervention with potential for harm
- Exercise of judgement by unsupervised professionals which can substantially impact on patient health or welfare

It is clear that healthcare chaplaincy qualifies for this under the third bullet point

The ten further conditions are:

1. The occupation must cover a discrete area of activity displaying some homogeneity
2. The occupation must apply a defined body of knowledge
3. The occupation must practise based on evidence of efficacy

4. The occupation must have at least one established professional body which accounts for a significant proportion of that occupational group
5. The occupation must operate a voluntary register(s)
6. The occupation must have defined routes of entry to the profession
7. The occupation must have independently assessed entry qualifications
8. The occupation must have standards of conduct, performance and ethics
9. The occupation must have Fitness to Practise procedures to enforce those standards
10. The occupation must require commitment to continuous professional development (CPD)

All of these ten require to be evidenced, not just claimed!

Once healthcare chaplaincy is satisfied that it can aspire to all of the ten secondary criteria, there are three things which are required:

1. We need to set up a joint working group of the professional and representative organisations to take forward the process.
2. We must move to becoming self-regulated – that is we must set up the processes such as Code of Conduct, Disciplinary procedure etc. which would be required for registration - and administer them ourselves, creating a voluntary register which could then become the statutory register in due course.
3. We must gather all the evidence that supports our claim to meet the other criteria – for example we need to prove that we “apply a defined body of knowledge”.

Once all that is done, we can apply to become registered.

There is clearly a great deal of work to be done to take this forward, and while the College of Health Care Chaplains has initiated the process, it is now time for the three professional organisations to join together to take it forward.

The whole process will take a number of years but I believe it is important for healthcare chaplaincy that we don’t let that put us off. The establishment of a regulatory system for health care chaplains, whether

in the end that is self-regulation or statutory regulation, will serve to address the Protection of the Patient, which is an imperative for all health professionals.

John Birrell is Chaplain at Perth Royal Infirmary, and until July 2005 was one of the two Regional

Representatives for Scotland on the Council of the College of Health Care Chaplains. As chair of the College's Professional Services and Registration Group he was responsible for taking forward the registration agenda.