

STANDARDS FOR NHS SCOTLAND CHAPLAINCY SERVICES

SELF ASSESSMENT TOOL: NHS TAYSIDE

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Abstract: In 2007 the first Standards for NHS Scotland Chaplaincy Services, with a related audit tool, were published. NHS Tayside Spiritual Care Forum formally adopted these to measure the development of the work of the department of Spiritual Care. The audit carried out was the first of its kind in Scotland therefore a process had to be developed. Consideration was given to who should be involved, what the aims would be and where and when the process would be carried out. Two assessors were appointed and following collation of evidence and information and consultation with wider representation submission was made. Representatives were invited from the department and other areas involved in the work to attend the submission meeting. The resulting report was presented by one of the assessors to NHS Tayside Spiritual Care Forum. Reflection on the process is offered.

Key words: Standards, audit, process, assessors, report, reflection

Introduction

In 2007 the first Standards for NHS Scotland Chaplaincy Services¹, with a related audit tool, were published following the recommendations of the NHS Quality Improvement Scotland Report of the Scoping Study Group on the Provision of Spiritual Care in NHS Scotland (NHS QIS, 2005)¹. NHS Tayside Spiritual Care Forum agreed to adopt these standards as the audit tool for the department to ensure equity of provision of spiritual and religious care across its area of responsibility. By adopting these standards NHS Tayside Department of Spiritual Care seeks to develop the work it is involved in to provide best practice in the delivery of spiritual care to patients, carers and staff of all faiths and life stances using an informed and evidence based approach.

This work followed on from the publications of the first HDL (2002) 76 Spiritual Care within the NHS² which sets out guidelines for the delivery of an efficient and effective spiritual care service in all Health Boards throughout Scotland which require each board to have a Spiritual Care Policy, a De-

partment of Spiritual Care and a Spiritual Care Committee.

In adopting these standards NHS Tayside Spiritual Care Forum agreed that the department should be audited against them and this process was carried out over the summer months of 2007 with a review meeting held in the September and a report presented to NHS Tayside Spiritual Care Forum in November of that year.

Process

As this was the first such audit to be carried out there was no precedent set as to process therefore this was agreed by Chris Levison, Training and Development Officer for Spiritual Care in Scotland meeting with Gillian Munro, Head of NHS Tayside Department for Spiritual Care, at the beginning of July. Having agreed the process should be loosely based on QIS review visits, discussions led to what, who, where and when?

What did we want to get out of this audit?

NHS Tayside wished to review the service delivered by the department of spiritual care in facilitating spiritual and religious care for patients, carers and staff of all faiths and none. The aims of the audit therefore were to:

- Identify areas of good practice
- Identify gaps in service
- Consider use of available resources and requirement for further resources
- Reflect on the effectiveness of team working
- Identify areas of multi-disciplinary working

As a result of gathering information for the audit process the department work plan would be reviewed and submitted as evidence of forward planning to address the gaps and any weaknesses identified in the process of developing an efficient and effective department of spiritual care for NHS Tayside.

Finally, an open and honest report would be written by the assessors to be presented by them to NHS Tayside Spiritual Care Forum to inform their discussions on the development of the work of the department.

Who should be involved?

There were two groups to be considered, assessors to oversee the process and provide a report and those who would represent the department and forum to give a range of experience of the delivery of spiritual care in NHS Tayside.

It was agreed that there should be two assessors, the lead to be the Training and Development Officer for Spiritual Care in Scotland, Chris Levison, supported by Sandy Young, Lead Chaplain for NHS Lothian, a similar board area to NHS Tayside.

NHS Tayside department of spiritual care has chaplains working in whole-time, part-time and denominational posts covering a large acute hospital, a general district hospital, community hospitals of varying sizes, mental health care hospitals, a specialist palliative care unit and community mental health care in Dundee. In this spiritual care is

given from remote rural areas to county towns to a large city. It was agreed the audit should be informed by all of these areas.

Phase 1: the head of department populated the audit tool with general information relating to the work of the department.

Phase 2: four chaplains added information specific to their area. These included:

- lead chaplain for the main acute hospital
- lead chaplain for the district general hospital
- a chaplain working in mental health care
- a chaplain working in palliative care

Phase 3: once collated this was sent for comment to:

- two part-time chaplains
- two denominational chaplains
- two faith community Spiritual Care Forum representatives
- a belief community Spiritual Care Forum representative
- the designated senior manager for spiritual care

Phase 4: when the document had been further amended it was submitted to the assessors.

Phase 5: those who would represent different aspects of the work of spiritual care within NHS Tayside were sent the document and invited to attend the meeting to discuss the submission with the assessors. These included:

- lead chaplain for the main acute hospital
- lead chaplain for the district general hospital
- a chaplain working in mental health care
- a chaplain working in palliative care
- chairperson of the NHS Tayside Spiritual Care Forum
- designated Senior Manager for Spiritual Care
- representative of NHS Board Nurse Director
- lead officer for Diversity and Equality
- head of department

Where and when?

The process for gathering information was given the following timetable:

Date	Process
20 th July	Draft assessment tool completed by head of department
3 rd Aug.	Populated by information from four nominated chaplains
17 th Aug.	Comments received from other nominated chaplains and Spiritual Care Forum Members
17 th Aug.	Patient Experiences to be received from Dundee Clinical Governance Team from focus groups
22 nd Aug.	Final document sent to Assessors and those attending the meeting
7 th Sept.	Meeting of assessors with nominated representatives
19 th Oct.	Report to be received by NHS Tayside Department of Spiritual Care
6 th Nov.	Report presented to NHS Tayside Spiritual Care Forum

The assessors met together for an hour prior to the meeting with NHS Tayside representatives which lasted approximately two hours. The venue was a meeting room in the main administration accommodation for the Board, Kings Cross, Dundee.

Report

Members of the department felt encouraged by the report which acknowledged the work that is being done and the plans to take this forward in the future.

Sandy Young represented the two assessors at the Spiritual Care Forum and gave his report summarising the reflections of the assessors, using the SMART acronym as an aid-memoir: The following account is taken from the minute of NHS Tayside Spiritual Care Forum of 6th November 2007.

SERVICE. It was evident that the NHS Tayside Spiritual Care Team had successfully negotiated the journey from the generally single site, individual vocational approach to Chaplaincy, prior to the 2002 launch of HDL 76, to the provision of a departmentalised Service, working on a cross-site basis, with a shared philosophy of care and a good 'family likeness' in provision across the various sites. The assessors were confident that the departmental action plan was an accurate appraisal of progress and work pending.

MEASURING. The Spiritual Care Team was encouraged to continue with and develop work with the Tayside Audit Team in order to find the ways and means for staff to write up and record their work.

ACHIEVEMENT. It was encouraging that individual team members were being supported to develop areas of personal professional development. The assessment team stress the importance of personal professional self-development and the effective linking with the Knowledge and Skills Framework, both for team and the individuals concerned. One of the three spiritual care strands, which require further strategic thought and planning, was around the issues of admissions documentation for religious and cultural information.

RELIGION, RESPECT and REALISM. Mr Young described the challenge of holding together such a broad spectrum of interests in a genuinely inclusive philosophy of care. This had lead to a need to review and re-organise strategy in relation to two issues: the development of spaces in ways appropriate to such a broad spectrum of interests and the future development of Religious Faith Community Chaplaincy.

TIMESCALE and TEAMWORK. In conclusion Mr Young reminded the Spiritual Care Forum that it was still less than five years since the launch of HDL 76 and that, while there was every reason to congratulate the Tayside Spiritual Care Team on their evidently

successful teamwork, more time would be required, both in Tayside and across NHS Scotland to advance carefully the more challenging aspects of the Spiritual Care development agenda.

How was it for you?

From the view point of being assessed

Nerve wracking, overwhelming, awesome, humbling, exciting, frustrating, encouraging, challenging. All of these words could express the different emotions that faced the department during this process. Being the first to go through this meant there was no process or previous experience as a guide so we were starting from base, everything had to be thought through. Would we get it right?

That there was nothing to measure ourselves against was a negative and a positive. The body of information gathered from across NHS Tayside and the enthusiasm of people to take part in the process could not have been more encouraging and humbling as we began to see what had been achieved over the four years, building on the firm foundations of the chaplains, and the perception people had of the work we were doing.

There were a number of challenges which arose from the Standards and from the process:

The standards are written based on a hospital setting therefore it was challenging to audit a service which is delivered across many varied hospitals which all have their own distinctive and effective ways of working. A great deal of evidence was collated.

Timing challenged us. While the tight timetable kept us focused on what we were doing, holding the audit process over summer was very challenging.

One of our Spiritual Care Forum members who had commented on the audit tool for us highlighted that he found the report difficult to follow because we had sent the document without the evidence.

The Spiritual Care Forum has agreed to audit the delivery of spiritual and religious care in NHS Tayside every two years so the next challenge is to review our process in the hope that some of same

words such as exciting, humbling, challenging and encouraging may be appropriate but we can leave behind nerve wracking, overwhelming, awesome and frustrating.

From the view point of being an assessor

As an introduction to the final report of the assessors, the following statement was made:

As the first of its kind they were aware that this would be a learning opportunity for all who were taking part. The hope was that it would be seen and experienced as an event which affirmed the work which was being done and helped through discussion, to forward the future direction and developments of the department of spiritual and religious care and the service it provides.

For the assessors it was a new experience also. We hoped that the above aspiration had been realised that of a learning opportunity which would affirm the positive work being done and help in the direction finding for those who were planning for the future.

We wanted it to be a meaningful exercise, not overly daunting, but a clear examination of the service in relation to the audit tool. We were aware that Tayside had been served by a dedicated departmental lead with enthusiastic managerial input from the Board from early days of HDL (2002) 76. It was for us a learning opportunity as well and the full participation of a departmental head from another health board increased the peer learning aspect in a mutual way.

There was a good degree of sharing of practice methods and tools with some ready comparison. It was not a nit-picking exercise looking for flaws or weaknesses, but rather a fact-finding exercise with a critically supportive remit. Our hope was and is that it helped the Tayside spiritual care community to examine their practice from a fresh perspective, recognising where work needed to be done and being encouraged by a knowledgeable commendation from peers with complementary experience.

Our hope is that other spiritual care teams will also be willing to undergo this exercise. We think it will be helpful at whatever stage of development they are.

Conclusion

This was a very worthwhile exercise. If we had the choice would we do it again? The answer to that is yes, even if we do not have a choice as NHS Tayside Spiritual Care Forum has set this as part of its work-plan, that the work of the department will be audited every two years. In agreeing to this they have recognised the value of gathering information to evidence and acknowledge good practice in the work being done by members of the department, identify gaps in service and resources to build informed business cases which will give equity of service and identify development potential to provide best practice in spiritual and religious care to patients, carers and staff of all faiths and none across NHS Tayside.

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Chris Levison has recently retired as Healthcare Chaplaincy Training and Development Officer/Spiritual Care Advisor and was based at the NHS Education Scotland offices in Glasgow.

Gillian Munro is the Head of NHS Tayside Department of Spiritual Care based in Dundee.

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