## **UK Board of Healthcare Chaplaincy Conference**

# A Body of Knowledge for Chaplains

Moeller Centre, Churchill College, University of Cambridge Thursday 7<sup>th</sup> March 2019

# **Body of Knowledge - Its Purpose and Content**

David F. Ford

Regius Professor of Divinity Emeritus and Fellow of Selwyn College
University of Cambridge

#### Outline

## 1. The Journey So Far

2003 Chaplaincy Academic and Accreditation Board

2008 UK Board of Healthcare Chaplaincy

Set of Competencies, Code of Conduct, Standards of Practice

Chaplains as accredited health professionals within the Professional Standards Authority for Health and Social Care (9 Statutory and 26 Voluntary bodies)

What is needed: A Body of Knowledge that has clarity of purpose and content, expressed in appropriate concepts and categories, and that serves the 'wise and professional, faithful and fair' practice of chaplaincy in the National Health Service (in line with the High Leigh Healthcare Chaplaincy Manifesto)

The Elephant in the Room now: Religion – How do justice to it, when the NHS is overwhelmingly secular, and none of the other 35 bodies in the Professional Standards Authority for Health and Social Care is concerned with its questions of meaning and purpose?

### 2. Purpose

High Leigh Healthcare Chaplaincy Manifesto 1 Sections 1-6 gives the main elements in the chaplaincy 'settlement' of the NHS worked out over many years and advocates developing it further.

Key concepts and categories behind that settlement:

(i) A national vision of a society that is *multi-faith, multi-secular, and* healthily plural, with a pluralism of multiple depths – in the public sphere communities and individuals can be fully Christian, Jewish, Muslim, fully humanist, etc., and can engage in respectful conversations, collaborations and long term joint commitments

- (e.g. in institutions such as the NHS) for the common good, yet with no expectation of uniformity.
- (ii) A national practice of stakeholders slowly arriving at negotiated settlements that are always open to improvement. Analogies relevant to a Body of Knowledge for the formation of healthcare chaplains include:

  Theology and Religious Studies in universities;
  State-funded schools, religious and non-religious.

  As regards religion, the UK has historically not moved in the direction either of Saudi Arabia and Iran (completely religious) nor of France and China (completely secularist) but has developed a complexly plural settlement (just as have, in different ways, Germany, the Netherlands, and Scandinavian countries).
- (iii) Knowledge and theory are in the service of wise and professional practice, inseparable from particular wisdom traditions as sources of meaning, compassion, dignity, and hope (High Leigh Healthcare Chaplaincy Manifesto 1.4). Chaplains have a responsibility to draw on such sources for the sake of patients, staff, and the flourishing of the whole NHS.

#### 3. Content

This especially concerns academic educational bodies involved in the formation of chaplains – see High Leigh Healthcare Chaplaincy Manifesto 2 **To Academic Educational Communities.** 

- (i) As regards religion, good academic theology, understood as *the* academically-mediated wisdom-seeking of a religious tradition in relation to its core understandings, convictions and commitments, is essential. The range of authors should reach back to the origins of traditions and also around the world today.
- (ii) Of particular importance in chaplaincy is an understanding of faith in its various manifestations (wiser and more foolish, more and less intelligent, well-informed and ignorant, peaceful and violent, etc.) and *the cultivation of mature faith in particular traditions* (e.g. faith that is not only about affirmations and commands, but also about desiring, questioning and imagining).
- (iii) Intensive engagement with, and conversation around, classic texts (especially scriptures and others that carry special authority in particular traditions) of both one's own tradition and those of others, is essential if multiple depths are to be appreciated.
- (iv) A canon of excellent literature and other materials on chaplaincy needs to be identified and continually expanded, not least by the encouragement of appropriate research.
- (v) The *Body of Knowledge* incorporating such elements and others needs to be reconceived in the light of the Purposes already proposed, integrated around their contribution to the formation of chaplains who are 'wise and professional, faithful and fair'. Some remarks regarding the original CAAB headings:

- <u>Sociological Context</u>: add social anthropology, and relate both to the 'thick description' of UK society.
- <u>Pastoral Care</u>: integrate with all the other elements on this list, with special attention to meaning-seeking in particular traditions, ethical discernment, and the understanding of human relationships.
- Moral Thinking: integrate with theological thinking, and pay special attention to medical ethics.
- Organizations: attend to how organizations are shaped and can be transformed for better or worse, with study of the history and present shape of the NHS, and attention to ideological and political dimensions.
- World Religions: Consider them both from a 'religious studies' perspective (through various academic disciplines) and from a 'theology' perspective (their truth and wisdom), and through learning about them not only from books and other media but also through face to face encounter and study with actual members.
- <u>Knowledge of one's own Faith Tradition</u>: this should include the best available academically-mediated understanding of it, within a global horizon.
- Human Relationships: All the above converge here, and one concern should be to look at other members of the Professional Standards Authority for Health and Social Care and assess how chaplaincy relates to their approaches to human relationships.

#### 4. Outcomes

The main outcome is the formation of chaplains who:

- Are rightly confident in their identity as wise and professional, faithful and fair
- Are equipped to serve patients, staff and volunteers in the NHS
- Converse and collaborate with others relevant to their work
- Help the NHS to flourish
- Give excellent value for the money and other resources invested in them
- Are well resourced by academic educational institutions
- Have the confidence of communities of faith and belief

## Cadenza

'Chaplaincy is an improvisational art'