
MINUTES OF MEETING: 10 JUNE 2015

Churches Together in England, 27 Tavistock Square, London, WC1H 9HH.

1. Welcome and Introduction

2. Present:

Martin Bradley (MnB), Mark Burleigh (MkB), Derek Fraser (DF), Paul Graham (PG), Iain Macritchie (IM), Karen Murphy (KM), Mark Stobert (MS), Stephen Thornton (ST), Phil Wright (PW)

3. Apologies

Mary Currie (MC,) Derek Johnston (DJ), Brenda Maitland (BM), David Mitchell (DM).

4. Welcome to Karen Murphy, President of AHPCC

5. Minutes of the meeting held on 4 March 2015 were agreed

6. Matters Arising

i. Current Update on NHS England Guidelines

The meeting noted the production of the guidelines, but DF highlighted that an EIA had not been conducted and that the British Humanists Association (BHA) had not been consulted and wished for a revision of the document.

Data on the number of requests for humanist chaplaincy contact was needed

There was a need to build a relationship with the BHA.

MS reported that he had made contact with BHA but was still awaiting a reply.

UKBHC C&C documents includes humanists.

ii. CofE Funeral Fees

PW notified the meeting of the new Funeral fees arrangement for CofE Chaplains

7. PAS and Accreditation Application

- MB, DF, IM and MS met to develop the application in response to the comments received from PSA.
- UKBHC receives requests for feedback on applications to PSA by other regulatory bodies and registers. MS, MB and DF agreed to triage and engage with the PSA on behalf of UKBHCs
- PG raised a concern about the effectiveness of communication and consultations. It was noted that a UKBHC had committed itself to develop a strategy for communication during 2015 at March Board
- MB highlighted the need for a Document on Governance of UKBHC and agreed to prepare such.
- PG asked whether it was possible to include Sheila Mitchell, Ewan Kelly's replacement at NES, on the Board. EK had previously been on the board as registrar.
- MkB suggested that there should be a listening exercise with the chaplaincy community
- DF informed the meeting that he constantly receives and responds to emails from chaplains
- IM also reported that he receives and responds to emails particularly regarding CPD. He also receives and responds to many requests for information from employers.
- CPD there were currently 255 registrants who had returned their CPDs. There remains 178 registrants who had not returned CPDs. The meeting was disappointed with this failure rate.
- MkB noted that his team did CPD but were not registrants
- PG noted that the application of UKBHC to be a AVR with PSA will have a pronounced effect on the profession
- MB had observed that CPD was problematic in many professions and that it may require further work with the professional associations.
- ST similarly noted that we may be expecting too much from registrants and that there were the same conversations taking place in each healthcare profession. Professionals may not see the full personal value of CPD.
- MB stated that there was a need to sell registration and CPD
- KM suggested that CPD should be on local agendas and indicated that AHPCC was adopting a regional model to support members.

- DF and IM agreed to develop CPD promotional material.
- ST agreed that there was a need to promote CPD and UKBHC. He suggested that the working of CPD might need more clarity.
- MkB suggested that the professional associations might need to be asked to reaffirm their support for the direction of UKBHC

PSA Application

Application for UKBHC and Company Limited by Guarantee was underway.

There was a discussion on the structure and governance of UKBHC as a company limited by guarantee

It was agreed that there should be a single tier structure with members of the board being shareholders and directors with them having equality in accountability and responsibility

MB suggested that there should be legal oversight of the whole process of PSA application for which funds would be available if NHS England were agreeable to funding for the application

DM was pursuing insurance as a company limited by guarantee.

Thanks were expressed to MB and MS

8. Lead Officers Reports

i. Professional Advisors

The appointment process for a coordinator was underway

ii. Registrar

It was reported that Scottish Lead Chaplains had decided that the requirement for chaplains to be in good standing with their faith community need not apply.

Future Job Descriptions for generic chaplains would require that candidates should be able to demonstrate a mature and reflexive theological/spiritual world view.

After a lengthy discussion it was agreed that UKBHC should determine what its standards should be not the NHS or other employers. There is a distinct separation between the role of the regulator and employers.

The meeting reaffirmed that it considers faith recognition is a vital requirement for registration as a Health and Social Care Chaplain.

It urges the Scottish Lead Chaplains to reconsider its decision as a matter of importance.

iii. Treasurer

There was no treasurers report other than things were OK.

iv. Academic Standards

Following consultation process, revised competencies were now completed and adopted.

IM reported that Sheila Mitchell would be conducting a review of the Scottish Standards for Spiritual Care.

CPD Audit Pilot

There was little or no clarity about what are minimum requirements for CPD and confusion about the link between the audit and CPD summary.

For instance, there were many interpretations of what RP is and how to record it.

It was decided to keep a watching brief on CPD responses with a recognition of the need for scrutiny.

v. Fitness to Practice

The recent case in Scotland was progressing
A Scrutiny Committee had been convened and had reported

7.0 AOB

Website was under review.

MS would contact the designer of CHCC website for ideas of a redesign.

DF re announced a conference in Cambridge on 4 November 2015 on Professionalism and Faith.

ACPE in Ireland requested that CPE be recognised by UKBHC

**AHPCC website carries job adverts
Palliative Care supplement to C&C is underway**

Thanks were expressed to JD for here committed contribution to UKBHC .

MS proposed that UKBHC should make a discussion on strategic leadership and clinical leadership a future agenda item.

DM reminded the meeting that he would be stepping down as an elected board member in September 2015, but remaining as treasurer. There was therefore a vacancy to be filled. Application process needs to proceed at end of April 2015.

8.0 Next Board Meeting:

Wednesday 10 June 2015 CTE, Tavistock House, London

11.0 Future Dates

The next board meeting will be on Wednesday 7 October 2015 at a venue in Belfast
This will be a morning meeting, followed in the afternoon by the UKBHC AGM.