

**Minutes of meeting: Wednesday 26 September 2012**  
**Faith and Community Centre, University Hospital Birmingham**  
**10.00am – 3.30pm**

**Present:** Martin Bradley (MnB), Judy Davies (JD), Derek Fraser (DF) (later arrival), Derek Johnston (DJ Tom Gordon (TG), Malcolm Masterman (MM) (later arrival), David Mitchell (DM), Mark Stobert (MS), Stephen Thornton (ST),

**Apologies:**, Mark Burleigh (MkB) Iain Macritchie (IM), Lyn MacIntyre (LM) and Ewan Kelly (EK)

Due to the late arrival of DF DM chaired the meeting.

**1.0** Minutes of Board Meeting held on 20 June 2012 were agreed

**2.0** Matters Arising:

**2.1** AGM Agenda for the AGM was agreed

UKBHC Constitution would be reviewed for proposal at the AGM

**2.2** other items to be discussed in the agenda

**3.0** Constitution

The draft Constitution having been proposed at the UKBHC AGM of September 2011 and posted on the UKBHC website for comment was reviewed. The following changes were made:

**D5** 5. Appoint a professional conduct sub-committee.

to

5. Appoint lead officers to cover issues relating to Academic Standards, Professional Advisers, Fitness to Practice and Professional Registration.

**D12** 12. Liaise with organisations in other countries which have the same or similar objects as the Board.

To

12. Provide advice to Governments, health care sector, educators, patients, faith and belief communities and the general public on best practice for the optimal provision of healthcare chaplaincy.

**E 1 c** c. Four persons elected as lay members of the Board. A person shall be eligible for election as a lay member of the Board if he or she:  
i. has never exercised a role directly or indirectly related to healthcare chaplaincy;

- ii. has a demonstrable interest in promoting the objects of the Board; and
- iii. has no persisting conflicting interests with the purpose and objectives of the Board.

To

- c. Four persons elected as lay members of the Board. A person shall be eligible for election as a lay member of the Board if he or she:
  - i. has not practiced as a health care chaplain;
  - ii. has a demonstrable interest in promoting the objects of the Board; and
  - iii. has no persisting conflicting interests with the purpose and objectives of the Board.

- I 1 1. The Board shall appoint a Professional Conduct sub-committee. The committee shall have the following composition as a minimum:
  - a. a chairperson who is the Lead Officer for Professional Conduct;
  - b. a person who is a member of a professional association which is not the same as that of the chair person; and
  - c. two lay members.

to

- 1. The Board shall establish 'Screening' and 'Conduct, competence and health' committees under its Fitness to Practice procedures.

- I 2 2. The Board may consider appointing three further sub-committees to oversee work relating to:
  - a. Academic Standards,
  - b. Professional Assessors, and
  - c. Professional Regulationwhere it considers the Lead Officer needs additional support in their area of work. Where necessary, The Board may consider co-opting members to these sub-committees in terms of section G2 above.

to

- 2. The Board may consider establishing further sub-committees as required.

The Constitution will be formally proposed at the AGM 2012

## 4.0 Governance

TG presented and talked to the Governance Paper that he presented. The following points were discussed:

There should be a right touch annual appraisal for all board members.

TG proposed a managed rolling program of appointment/reappointment of Board members.

UKBHC Newsletter would be used to advertise vacancies

The board recognised the need to identify specific professional skill sets that potential board members may offer and that the board might require to further its work and development.

Someone with an HR background was seen as one such person.

## 5.0 Fitness to Practice

MB talked to the Fitness to Practice Document

The following points were made:

8. Further work may be required to produce advice and support for those wishing to make a complaint  
A complaint panel may be required.

14. The sentence:

*'No longer in good standing with the Faith Community'*

should be removed

15. *'The employer/faith community will then recommend to the UKBHC their view on continuing registration'*,

be changed to

*'The employer/faith community will then inform the UKBHC of their view on continuing registration'*.

CHRE requires a section how to make a complaint about the Board.

DM will provide the e links within the document

MB asked if UKBHC felt if it was ready to go the CHRE with the document.

MB suggested that it would be helpful for someone with HR experience to be co-opted on to one of the committees.

MB would update the document and informally seek CHRE opinion. Then it would be offered to the Faith communities (and belief groups?) for comment.

Thanks to MB

## 6.0 Lead Officers Reports

### 6.1 Academic Standards

Introductory Course Syllabus has been finalised

DM has produced a draft e-learning package as an Introductory Course that has e links to documents.

It will be available through the use of MOODLE

A Certificate of Completion will be provided as will CPD points.

Thanks to DM

### 6.2 Professional Advisors

MM reported that there have been 39 requests for advisors and 3 requests for telephone consultations.

20 of the 29 advisors have been used.

Feedback highlights that the numbers of candidates is matter of concern are issues about Terms and conditions, particularly RRP and on call payment arrangements.

There have been only two failures to appoint.

A further meeting of the Reference Panel took place

MM reported that Malcolm Brown will step down as chair with new chair to be appointed from the panel.

There will be a Training and Refresher study day on 19 November 2012

Initial funding for the advisors will cease in 2013 requiring a renewal of sponsorship to continue the work and the lead post

JD noted that AHPCC is often approached for advisors. MM suggested that hospice appointments may need a separate panel of advisors as hospices may have local terms and conditions. MM drew attention to the formation of PAHCC and wondered where that fitted into the arena.

MS has been working with the GP practices that have set up chaplaincies locally and is keeping a supporting and watching brief.

## 6.3 Treasurers Report

MM raised his concern that the administration costs that CtE was incurring for the administration of the Advisors Panel was excessively high and will raise the issue with Barry Mussenden.

## 6.4 Website

DM reported that the UKBHC website has been updated and will be able to respond to the board's development. It now contains a self management function.

DM will begin to update the content

JD commented that information about the AGM was lacking and only available from the Newsletter.

The need for one Board member to have responsibility for communications was identified.

## 6.5 Newsletter

TG was thanked for the hard work in producing the Newsletter TG announced that the next Newsletter would be his last one.

MM asked why it was that hard copies were sent out as well as the email copies. DF said that hard copies were sent out to all Chaplaincy Departments, because not all chaplains were on the register.

TG asked for items for the Newsletter which he will be producing to be circulated pre Christmas.

## 6.6 CPD

It has been highlighted on the website that the requirement for registration has changed.

It was also reported that there will be oversight and scrutiny of CPD submissions in 2013.

## 7.0 AOB

7.1 The Agenda for AGM was agreed.

8.0 AGM will be held at 14.00 on Wednesday 26<sup>th</sup> September at Faith and Community Centre, University Hospitals in Birmingham

9.0 Next meeting of the UKBHC - 6th Dec at CTE London

10.0 Dates for UKBHC Board Meetings in 2013 will be

Wednesday 20 March @ CtE

Thursday 20 June @ CtE

Wednesday 18 September TBA also AGM

Thursday 28 November @ CtE