

Thinking about Healthcare Chaplaincy? Consider this article by Tony Kyriakides, the Bishop of London's Adviser for Healthcare Chaplaincy

Introducing healthcare chaplaincy: a personal perspective

Over the years, I have gained huge enjoyment and fulfilment as a healthcare chaplain. If you, like me, are a team player committed to interfaith partnership and dialogue and willing to work at the edge, in the liminal space, the in-between place of uncertainty and shadows, this could well be a vocation to which you are called. I've made many friends from the different faith communities and have loved the freedom to be creative and innovative in sacramental, liturgical and pastoral ministry.

At the same time, I have needed to be clear, in my own mind and practice, about my spiritual and religious roots, not in ways which might inhibit positive and lively engagement with people of all faiths and beliefs, but in order to be held as I journey into the wilderness of ill-health, broken bodies and terminal illness where God is ready to be found and experienced. I have needed to be flexible, adaptable, ready to learn and apply the language of healthcare, and to be supportive of colleagues of whom so much is asked and required. Whether it has been mental unwellness or physical illness or end-of-life care, the challenges and opportunities in the NHS and charitable sector have stretched me. As both an Anglican priest and healthcare worker, I have been pulled in different directions and have needed to navigate two institutions, the Church and the NHS. Don't misunderstand me, It has not always been easy but it has always been extraordinarily rewarding.

That's me – what about the job?

Healthcare chaplaincy

On 5th July 1948, at Park Hospital, Urmston (later renamed Trafford General Hospital), Sylvia Beckingham became the first patient to be formally treated on the National Health Service. It is unlikely that she would have seen a hospital chaplain as, at that time, there were only twenty-eight full-time chaplains working in the NHS and they were largely based in teaching hospitals. By 2010, within the Church of England, there were approximately 325 full-time healthcare chaplains (75% of the total number of full-time healthcare chaplains) and 1,500 part-time healthcare chaplains (50% of the total number of part-time healthcare chaplains). Since 2017, the UK Board of Healthcare Chaplaincy (UKBHC) has maintained a voluntary professional register accredited by the Professional Standards Authority. The Register demonstrates the accountability of healthcare chaplains to the public and to promote high standards of practice and behaviour. Chaplains registered with the Board are entitled to refer to themselves as a 'Board Registered Chaplain'.

Why do people become healthcare chaplains?

While some clergy become healthcare chaplains because of difficulties they experience within the institutional Church (see Hancocks, Sherbourne & Swift, 2008), others do so in response to a 'vocation within a vocation'. It is important to remember that chaplaincy is a specialist

area of ministry: 'not everyone is called to exercise this genre of public ministry and not everyone has the skills or capacity to do so' (Slater, 2015: 93).

Where do healthcare chaplains work?

Chaplains work in NHS, independent and charitable healthcare facilities: hospitals, hospices, GP surgeries, rehabilitation units and the community.

Is healthcare chaplaincy an authentic expression of priestly ministry?

The model of ministry most associated with Anglican priesthood is one rooted in the parish. This encapsulates a functional view of ministry which is not only limited but mistakenly assumed, by many, to be definitive. It is not. Slater (2013) argues that across a wide range of social contexts such as nursing and care homes, the police, courts, emergency services, the retail industry, the commercial sector and sports clubs, chaplaincy represents a distinct category of priestly and lay ministry: 'embedded in a particular social context, seeking to understand that context from within while still maintaining their identity as representatives of a faith community and their capacity for prophetic witness alongside pastoral care and service' (Slater, 2015: 93). In healthcare chaplaincy the focus is on health, healing and well-being; on suffering and theodicy, therapeutic practice and Christian ethics, mortality and pastoral care, as well as 'wounded healers' and reflective practice.

What type of ministry is this?

The NHS Guidelines: Promoting Excellence in Pastoral, Spiritual and Religious Care (2015) sets out to 'respond to changes in the NHS, society and the widening understanding of spiritual, religious and pastoral care'. Chaplaincy, with no affiliation to any one religion or belief system, is recognised as including not only religious care, but non-religious pastoral and spiritual care. It emphasises the needs of those 'who do not hold a particular religious affiliation' (NHS England, 2015: 6) and the assertion that 'patients and service users have a right to expect that chaplaincy care will be experienced as neither insensitive or proselytising' (NHS England, 2015: 9). It acknowledges the chaplain as a healthcare professional who shares good practice and draws on a body of professional knowledge and emerging research. It is, of course, a ministerial context in which often there is no worshipping community: if patients 'are well enough to attend the chapel service then they are probably well enough to be discharged' (Threlfall-Holmes & Newitt, 2011: 36).

Healthcare chaplaincy training/academic courses

- Via UKBHC, the Department of Health has sponsored the development of an on-line course entitled: Introductory Training for Newly Appointed Healthcare Chaplains. This course was developed by UKBHC and is administered by an Academic Advisor experienced in on-line

chaplains education. Admission to the course is at the discretion of Lead Chaplains who issue an enrolment key. The course is appropriate for all newly appointed healthcare chaplains and some Lead chaplains also include chaplaincy support workers such as chaplaincy volunteers. The course is available at <http://learn.ukbhc.org.uk>

- PG Diploma / MA in Healthcare Chaplaincy (Cambridge Theological Federation)
- [PG Certificate / Diploma / MA Chaplaincy Studies +UKBHC Registration \(St Padarn's, validated by Durham University, Common Awards\)](#)
- PG Certificate Healthcare Chaplaincy (London South Bank University) provided by Guy's and St. Thomas' NHS Foundation Trust. For further information contact the Course Director at PGCertSpCare@gstt.nhs.uk
- PG Diploma / MA Existential and Humanist Pastoral Support (Middlesex University, London) provided by the New School of Psychotherapy and Counselling.
- Practitioners in Healthcare Ethics, Theology and Care - St Mary's University College, Twickenham, London (Formerly the Foundation Degree in Healthcare Chaplaincy)

For an informal conversation please contact:

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Suggested reading

- Hancocks, G., Sherbourne, J. and Swift, C. (2008) 'Are they refugees?' Why
- Church of England Clergy enter Healthcare Chaplaincy', *Practical Theology*, 1, 2, pp. 163-179.
- NHS England. (2015) NHS Chaplaincy Guidelines 2015: Promoting Excellence
- in Pastoral, Spiritual & Religious Care. Leeds: NHS England, [online], available: <https://www.england.nhs.uk/wp-content/uploads/2015/03/nhs-chaplaincy-guidelines-2015.pdf>
- Slater, V. (2015) *Chaplaincy Ministry and the Mission of the Church*. London: SCM.
- Swift, C. (2014 [2009]) *Hospital Chaplaincy in the Twenty-first Century: The Crisis of Spiritual Care on the NHS*. 2nd edn. Farnham: Ashgate.
- Threlfall-Holmes, M. and Newitt, M. (2011) 'Chaplaincy and the Parish',
- *Crucible: The Christian Journal of Social Ethics*, October–December, pp. 33–40.

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