

# CHAPLAINCY POLICY

#### 1.0 INTRODUCTION

The Komfo Anokye Teaching Hospital (KATH) recognises and appreciates the contribution of spiritual care in the provision of quality health care to its clients.

The growing diversity of religious beliefs and cultures within the population continue to increase the need for chaplaincy services at KATH. The Chaplaincy Unit was set up to provide spiritual support services to meet the spiritual needs of its clients and staff.

Chaplaincy Unit, among other things, provides highly skilled and compassionate pastoral, spiritual or religious support for patients, patient relatives and staff facing situations which are at times traumatic and stressful, including sudden infant death, psychosis, diagnosis of life-threatening conditions and end of life care, as well as various kinds of self-harm.

The KATH Chaplaincy Unit had been in existence for over a decade but without any policy to guide its operations.

This policy is expected to improve the smooth operation and management of spiritual and religious care to patients, patient relatives and staff at KATH.

## 1.1 VISION OF KATH

The vision of the Hospital is to become a centre of excellence in the provision of specialist health care services.

## 1.2 MISSION OF KATH

The mission of the Hospital is to provide quality services to meet the needs and expectations of clients. This will be achieved through a well-motivated and committed staff applying best practices and innovation.

## 1.3 CORE VALUES OF KATH

- Client-focused
- Staff empowerment
- Continuous quality improvement
- Recognition of hard work and innovation
- Discipline
- Team work

#### 1.4 CHAPLAINCY UNIT

The Chaplaincy Unit shall be responsible for the provision of spiritual and pastoral care to patients, patient relatives and staff. These include counselling, prayer support, bereavement and end of life care and many others. The Unit has two sections namely, (Administration/Registry, Chaplaincy, guidance & Counselling). The Chaplaincy shall report directly to the Director of Administration.

#### 1.5 VISION OF THE CHAPLAINCY UNIT

The vision of the Unit is to become a centre of excellence in the provision of spiritual care services.

#### 1.6 MISSION OF THE CHAPLAINCY UNIT

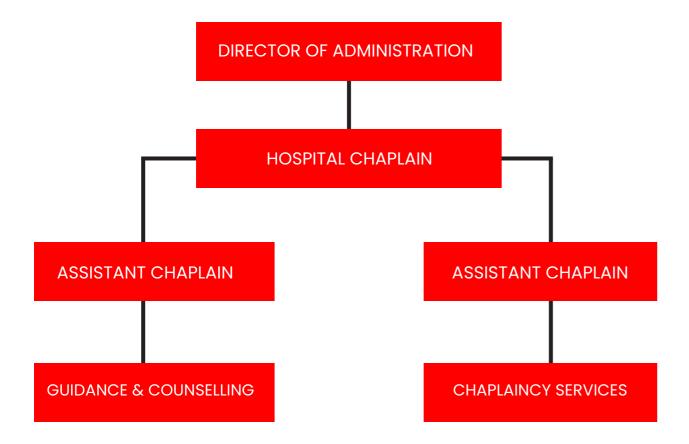
The Mission of the unit is to provide quality compassionate spiritual or religious support to meet expectations of clients. This will be achieved through well-motivated and committed staff.

#### 1.7 FUNCTIONS OF THE CHAPLAINCY UNIT

The Chaplaincy Unit shall perform the following functions:

- Deliver spiritual and religious care that meets the needs of patients, relatives and staff
- · Keep inventory of chaplaincy resources.
- Create awareness of spiritual and religious care services
- Assist in the development of musical instrument specifications for procurement.
- Assist in the development and review of the Chaplaincy Policy
- Develop musical instrument replacement plans
- Prepare program of work (POW) and budgets for the Unit.
- Offer periodic advice to Management on spiritual services
- Set performance standards for chaplains
- Monitor and evaluate chaplaincy services and performance.
- Develop and coordinate training programmes for chaplains and other staff.
- Respect the privacy and dignity of patients
- · Carry out other necessary spiritual and religious functions
- · The unit shall issue quarterly reports to management

## 2.0 ORGANOGRAM



## 3.0 OBJECTIVES OF POLICY

The main objectives of this policy are to:

- i. Provide a framework for spiritual and religious care at KATH.
- ii. Guide and serve as a reference document on efficient and effective spiritual and religious activities at KATH.
- iii. Assist in the allocation, use and operation of spiritual and religious resources at KATH.

## 4.0 SCOPE OF POLICY

The Policy provides clear guidance for spiritual care services and religious activities at the Komfo Anokye Teaching Hospital.

#### **5.0 HUMAN RESOURCES**

#### 5.1 RECRUITMENT AND SELECTION OF HOSPITAL CHAPLAIN

Management shall, in consultation with recognized Christian organizations (such as Catholic, Methodist, Presbyterian, Pentecostal and many others), select the Hospital Chaplain.

The Hospital Chaplain shall be a Senior Minister of the Gospel with a minimum of Masters in Theology or equivalence and ten (10) years experience in a similar position.

The eligible applicant must among other things have knowledge and understanding in the following:

- Health care services and administration
- Psychology and mental health
- Lav
- KATH administrative set up and operating procedures
- MOH Policies and programmes

#### **5.2 ASSISTANT CHAPLAINS**

Management shall, in consultation with recognized Christian organizations select three (3) additional Ministers of the Gospel for the Assistant Chaplain positions.

- Chaplains so appointed shall continue to be on the payroll of their parent ministries.
- The Hospital allowance shall be paid to such Chaplains where appropriate.

#### 5.3 ORIENTATION

Staff of the Chaplaincy (both new and old) will be orientated based on KATH HR policies and culture. They would be oriented on the following subjects:

- Governance
- KATH Polices and Programs
- Work ethics
- Discipline
- Health and Safety
- Job Description
- Conditions of Service
- Client Care

#### Chaplaincy Policy

#### **5.4 TRAINING**

- The Chaplaincy shall undertake quarterly in-service training (or external training if need be) on medico-legal issues, health administration, KATH/ MOH Policies and client care among others.
- Staff of the Chaplaincy shall also undergo periodic training in line with KATH HR policy and programmes.

#### **5.5 STAFF MOTIVATION AND DISCIPLINE**

- KATH Management shall recognize and equip the Unit to deliver efficient spiritual care to patients, patients relatives and staff.
- Any staff who misconducts him/herself shall be disciplined in accordance with the Hospital's Disciplinary Code.

#### **6.0 CHAPLAINCY SERVICES AT KATH**

In order to provide safe and effective spiritual care at the hospital;

- All Chaplains shall abide by the code of conduct and ethical requirements of their religious bodies and that of the Hospital.
- Patients, relatives and staff should be made aware of the nature, scope and means of accessing chaplaincy services at the Hospital.
- Patients, relative and staff should be able to access chaplaincy services at all times.
- Chaplains shall keep proper records to ensure safety, accountability and continuity of care.

#### **6.1 WARD VISITS**

The Chaplaincy Unit shall liaise with the various Directorate/Unit Management Teams to ensure patients at their wards and OPDs receive good quality spiritual care and counselling. The chaplaincy team will undertake regular ward rounds with teams on duty to give spiritual care and counselling to patients when necessary.

The chaplains should ensure patients confidentiality, privacy and dignity are protected. The chaplaincy should act with caution and discretion at all times during the ward rounds.

## **6.2 PROVIDING SPIRITUAL NEEDS TO PATIENTS/RELATIVE**

Nurse/Wards In-charge at the various wards are required to assess the spiritual needs of patients/relatives as part of the nursing process and report to the chaplain for support. Issues with patients and relatives necessitating support may include anxiety, serious illness, loss and bereavement, among others.

The Wards In-charge are required to contact the Chaplain through the Hospital Exchange and record the time, name of patient/relative and condition in the ward incident book.

The Chaplain on arrival at the ward shall introduce him/herself to the Nurse/Ward In-charge and meet the patient or relative(s).

The Chaplain shall offer pastoral support and minister in a manner that is pastorally appropriate to the patient/relative and consistent with the Chaplain's own integrity. The Chaplain will assist the patients/relatives to contact their own spiritual/religious leaders in situations where the Chaplain's ministrations are not acceptable to the patient or relatives.

#### **6.3 GUIDANCE AND COUNSELLING**

The services of the Chaplaincy in terms of spiritual guidance and counselling support will equally be available to members of staff and shall be handled by the Guidance and Counselling section of the Chaplaincy.

#### **6.4 STAFF TRAINING AND DISCIPLINE**

The Chaplaincy shall collaborate with the Human Resource Management Unit (HRMU) in the training of staff and maintenance of discipline in the Hospital.

#### **6.5 PALLIATIVE CARE SERVICES**

The Hospital recognises the importance of spiritual care in palliative care as people in need of palliative care may often experience spiritual distress together with their clinical symptoms.

The Chaplaincy shall be part of the palliative care teams of the directorates involved in palliative care. The Chaplain shall be part of the palliative outreach teams and offer spiritual support to patients and relatives.

The Chaplaincy, as part of palliative care, shall regularly seek accurate information about patients' religion or belief, as well as their pastoral or spiritual needs.

#### 6.6 HOLY COMMUNION, BAPTISM AND OTHER SERVICES

The Chaplaincy Unit shall liaise with appropriate Directorates and Units to offer extraordinary activities such as baptisms, naming anointing and confessions at the hospital. All these religious activities shall be approved by management. The families shall pay appropriate fees for such services.

The Chaplaincy shall liaise with the Public Affairs Unit of KATH to organise Annual Thanksgiving Service, Carol Services and other church activities at the hospital.

#### Chaplaincy Policy

#### **6.7 BURIAL COMMITTAL SERVICES**

The Chaplaincy shall, in collaboration with the Mortuary Services Unit of the Laboratory Services Directorate (LSD), arrange burial and committal services at the hospital. The relatives shall apply to Mortuary Services Unit of the LSD for the organisation of such services. The families shall pay the appropriate fees for the provision of such services.

The Chaplaincy Unit shall liaise with the Laboratory Services Directorate (LSD) to offer pre-bereavement and bereavement care to patients' relatives such as the conduct and organisation of patients' committal, memorial services and other related services at the hospital. The relatives shall apply to Mortuary Services Unit of the LSD for the pre-bereavement and bereavement care services. The families shall pay the appropriate fees for the provision of such services.

#### 7.0 RELATIONSHIP WITH OTHER RELIGIOUS BODIES

The Chaplaincy Unit, in going about their duties shall not discriminate among people of different faith and where necessary, shall endeavour to make contacts with leadership of other religious faith on the request of patients, relatives and staff.

## **8.0 COLLECTIONS AND DONATIONS**

The Chaplaincy shall not engage in collecting offertory from patients, patient relatives or staff at the hospital.

However, the Chaplaincy with approval from KATH Management may receive donations or solicit for financial and material support from religious bodies, benevolent organisations and individuals to support religious activities and clinical care at the hospital. This activity shall be in line with the KATH donation policy.

## 9.0 AUTHORIZED HOSPITAL PREACHERS

Proper authorization shall be given to Hospital Preachers to minister to patients and relatives at the wards. The preachers shall be issued with hospital ID cards and shall be mandatory to be worn at all times.

Unauthorized Preachers shall not be permitted to preach at the hospital. The Chaplaincy Unit shall liaise with the Security Unit to prevent such preachers from the hospital.

## 10.0 CHAPEL OR PRAYER ROOM AND MUSICAL INSTRUMENT/ CHURCH MATERIALS

#### **10.1 USE OF CHAPEL OR PRAYER ROOMS**

The Hospital Chaplain shall be responsible for the day to day running of the chapel or prayer rooms. The chapel or prayer room shall be accessible, safe and welcoming place where staff and patients or relatives can pray or worship and shall be opened 24 hours a day. However, the Chaplain shall place entry restrictions when necessary.

The Director of Administration shall be responsible for the safety and security of the facility.

The facility shall be well signaged for easy identification by staff, patients and relatives.

## 10.2 PROCUREMENT OF MUSICAL INSTRUMENT/CHURCH MATERIAL

The hospital shall procure new musical instruments or church materials in accordance to KATH/MOH Procurement Procedures and Guideline as well as Public Procurement regulations.

## 10.3 DONATED MUSICAL INSTRUMENT/CHURCH MATERIAL

Donations of musical instruments and church materials shall be in accordance with KATH Donation Policy/Guidelines and approved technical specifications.

## 10.4 IDENTIFICATION MUSICAL INSTRUMENT/CHURCH MATERIAL

All procured or donated musical instruments or church materials shall be registered and embossed with the hospital's logo. The Chaplain shall liaise with the Asset Registry section of the Technical Service Directorate to register and emboss procured or donated items received.

#### **10.5 MUSICAL INSTRUMENT MAKE, TYPE AND MODEL**

Instrument make, type and model procured for the Hospital Chaplaincy Unit shall be appropriate for its intended use or purpose.

## 10.6 PROCUREMENT OF USED MUSICAL INSTRUMENT/CHURCH MATERIAL

KATH shall not procure used musical instruments and church materials for the Chaplaincy Unit except donated.

## 10.7 STORAGE OF MUSICAL INSTRUMENT/CHURCH MATERIAL

The Hospital Chaplaincy Unit shall ensure the safe keeping of all musical instruments and church materials at all times.

#### 10.8 MAINTENANCE OF MUSICAL INSTRUMENT/CHURCH MATERIAL

The Hospital Chaplaincy Unit shall regularly take stock of all musical instruments and church materials and ensure they are in good condition at all times.

## 10.9 HIRING OF MUSICAL INSTRUMENT/CHURCH MATERIAL

KATH shall hire musical instruments/church materials from event management organizations for its activities when necessary and deemed cost effective.

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#### 10.10 DISPOSAL OF MUSICAL INSTRUMENT/CHURCH MATERIAL

The procedure for disposal of obsolete musical instruments and church materials shall follow the prevailing regulations for disposal of government assets. All instruments and materials earmarked for disposal must be boarded by the Board of Survey before the disposal process is initiated.

## 11.0 INSTITUTIONAL ARRANGEMENT

#### 11.1 CHIEF EXECUTIVE

The Chief Executive shall lead the implementation, monitoring and evaluation of this policy.

#### 11.2 DIRECTOR OF ADMINISTRATION

The Director of Administration shall be responsible for the supervision and monitoring of the Chaplaincy Unit.

#### 11.3 DIRECTORATES AND UNITS

The Directorates and Units shall among other things:

- Support activities of the Chaplaincy Unit
- Collaborate with the Chaplaincy Unit to offer spiritual care support to patients, relatives and staff.
- · Respect the privacy and dignity of patients
- Plan and budget spiritual care activities appropriately.
- Submit periodic performance report on spiritual care activities to Managment.

#### Chaplaincy Policy

**11.4 STAFF** 

Staff shall be responsible for the following:

- Support and participate in spiritual and religious activities.
- · Utilize chaplaincy activities.
- Ensure good interpersonal relationship with patients, relatives and colleagues (especially, staff of the Chaplaincy Unit)
- · Respect the privacy and dignity of patients.

#### 12.0 COLLABORATION

It is expected that the Chaplaincy Unit and the various Directorates and Units shall ensure continuous collaboration in the provision of spiritual care services at KATH.

#### 13.0 ADHERENCE TO POLICY

This Policy provides a framework for the smooth operation of spiritual care services at KATH.

It is imperative that all members of staff and users observe the policy components in this document.

#### 14.0 ULTIMATE DECISION MAKING AND ADJUDICATION

Within the context of this policy, the Chief Executive of KATH is the final decision-making authority in the case of determining the essence and interpretation of the components. All cases related to conflicts shall be adjudicated by the CEO and his/her delegated authority.

## 15.0 AMENDMENT OF POLICY

Components of this policy shall be amended when prevailing conditions and regulations change over time. It may be done through administrative instructions and all other necessary procedures and guidelines until such a time when the changes shall be adopted and incorporated into a revised policy.

## **16.0 REVISION OF POLICY**

This policy shall be assessed every five years to determine its effectiveness and appropriateness. It shall be revised to reflect substantial organizational, physical and service changes at the hospital or any change required by law.

## 17.0 POLICY AWARENESS/EDUCATION

The Chaplaincy Unit shall liaise with the Public Affairs Unit to inform and educate the public and religious bodies as well as KATH staff on the Chaplaincy Policy.

