

The Standards for Spiritual Care Services in the NHS in Wales (2010) requires of Health Boards that *Spiritual/Religious needs are assessed and addressed* (1.a.1 and 1.b.1). Furthermore the Guidance on Capabilities and Competences for Healthcare Chaplains/Spiritual Care Givers (2010) requires a *Chaplain/Spiritual Care Giver demonstrate an ability to maintain appropriate documentation of referrals, assessment, interventions and outcomes*. So the need for good record keeping is fundamental to the Spiritual Care Standards the nature of the records to be kept is not specified except in the broad terms described above. Chaplaincy departments in the three legacy Trusts, Northwest Wales, Conwy and Denbighshire and North East Wales all maintained records of Chaplaincy activity and with the formation of Betsi Cadwaladr University Health Board (BCU) the record keeping for Chaplaincy was standardised across BCU. Chaplains are required to maintain records of:

- Referrals for patient care (spiritual/religious) by staff, carers, family or patients themselves, these referral may involved one visit or several visits over a longer period
- Record of calls by wards, drop in visits to Chapel, encounters while out and about in the hospitals during Duty Hours (8am-6pm) and Out of Hours (6pm-8am, weekends and Bank Holidays). These records are kept under the detailed headings shown on the chart page 2.
- Activity undertaken by Chaplaincy volunteers, including religious care i.e. receiving Holy Communion
- Funerals taken by Chaplains usually following pregnancy loss, including miscarriage, still birth and neonatal/child death but also adult funerals provided by the Health Board when there are no next of kin

As Chaplains we are aware that this recording of numerical data reflects only a small part of the work of spiritual/religious care and within BCU we work with the Service User Experience Team to capture wider patient experience through the use of patient/carer stories. We are also currently working on a project to capture intensive data on chaplaincy work over a period of one week across the three acute sites. A spiritual awareness week is planned for autumn 2013 which will include a patient/carer/staff survey to evaluate the awareness of chaplaincy and the broad range of care offered. Within BCU the Chaplaincy Team sits within Nursing, Midwifery and Patient Services Team and reports annually to the Improving Service User Experience Committee on Chaplaincy Activity. Each Health Board in Wales is also required to submit an Action Plan on the Spiritual Care Standards to the Chief Nursing Officer annually.

Revd Kathy Collins, Pastoral Care Manager

Chaplaincy Sessions April 2012 - March 2013 for Betsi Cadwaladr University Health Board

Session can be 15mins - 2hours, includes both Duty Time (8am-6pm) and Out of Hours (6pm - 8am)

The total sessions are for the 3 Acute District Hospitals of Glan Clwyd, Gwynedd and Maelor (does not include Community Hospitals)

	SESSIONS
Referrals for patients requesting spiritual/religious care (may include more than 1 session/visit)	584
Spiritual or Religious Care of Patient at/after time of Death	135
Bereavement support for Family/carer	34
Spiritual/Bereavement care following pregnancy loss, including miscarriage, still birth and neonatal/child death	120
Support for Mental Health Learning Disability Patients	52
Support for distressed Patients	54
Staff Support, including bereavement support following death of staff member	66
Religious Care provided/facilitated by chaplains for all Faith/Belief groups	96
Hospital provided funerals, all Faiths and Civil, for adults and babies, including bereavement support	88