



APC Professional Chaplaincy Webinar Slides and Handouts

“Are Your Chaplains Competent? Developing a Competency Validation Process & Measurement Tools for Chaplains”

presented by

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August 26, 2009

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Are Your Chaplains Competent? Developing a Competency Validation Process and Measurement Tools for Chaplains



Association of Professional Chaplains

August 26, 2009

Rev. Beth Collier BCC

Rev. Roy Olson BCC (retired)



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Outline

- Who we are
 - Polling questions: Who are you?
- What we did/why we did it
- Process – time for questions
- Content – time for questions
 - Polling questions: Your experience with competencies
- Outcomes – time for questions
 - Polling question: What will you do with this presentation?



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Alexian Brothers Hospital Network

- Alexian Brothers Medical Center (ABMC) - Elk Grove Village, IL
 - Average Daily Census (2008) = 231
 - Center for Spiritual Care: 9 chaplains (1 in Home Health)
 - CPE Center (Residency, Extended Units)



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Alexian Brothers Hospital Network

- Alexian Rehabilitation Hospital (ARH) - Elk Grove Village, IL
 - Average Daily Census (2008) = 52
 - Center for Spiritual Care: 1 chaplain



Alexian Brothers Hospital Network

- St. Alexius Medical Center (SAMC) - Hoffman Estates, IL
 - Average Daily Census (2008) = 188
 - Center for Spiritual Care: 5 chaplains



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Alexian Brothers Hospital Network

- Alexian Brothers Behavioral Health Hospital (ABBHH) - Hoffman Estates, IL
 - Average Daily Census (2008) = 125 ; plus average of 180 day-treatment patients
 - Center for Spiritual Care: 4 chaplains



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Describe your current department.

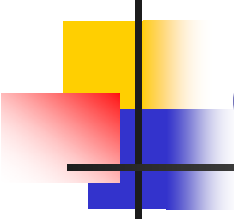
(Please select one.)

- One FT chaplain
- One FT chaplain plus on-call/resource chaplains
- One FT chaplain plus part-time chaplain(s)
- Department of 2-5 FT chaplains
- Department of 6-10 FT chaplains
- Department of more than 10 FT chaplains



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What is the primary setting of your chaplaincy? (Please select one.)

- Major medical center
- Community hospital
- Free-standing psychiatric facility
- Long-term care
- Hospice
- Other





What We Did

- As a Health Network, we engaged all chaplains in a process that:
 - Developed behaviors expected for chaplain competencies on fundamental and advanced levels
 - Developed the means to measure competencies



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Why We Did It

- Provincial gave mandate to System Director of Mission Integration:
 - Strengthen spirituality in the workplace
 - Strengthen the delivery of spiritual care
- Many chaplains in our system would not meet national certification requirements
- Existing job descriptions did not require national chaplaincy certification



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Why We Did It

- Common Standards:
 - Did not address need for ownership of competency
 - Did not identify behaviors that would demonstrate competence
- Even for those certified, are chaplains competent in our setting?



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Resistance

- More work to do
- Previous training should be validation enough
- Accountability is to God/bishop; what more should I need
- What we do is not measurable; chaplains are different
- Prefer to work independently, prefer solo practitioner model



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Process

- Began with initial list of competencies from Catholic Health Initiatives, Denver, May 2004
- Over 6 months in 3 day-long meetings, teams defined behavioral expectations of competence for our system at fundamental & advanced levels
- Coordinator Chaplains revised competency list from 14 to 10
- Chaplains identified tools for validation of each competency in day-long meeting, March 2006



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Process

- Each chaplain completed self-assessment at fundamental level
- Chaplains individually set timelines for validating each competency at fundamental level
- Chaplains set goals for validations incorporated into annual performance review



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Process

- Validations completed with Coordinator Chaplain, and others as necessary
- Consequences for non-compliance reflected in annual performance review
- Public recognition of completion of validations



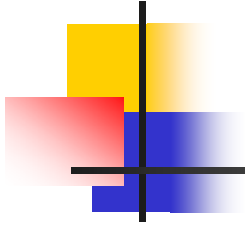
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Philosophy on Competencies

- All are presumed to have already given evidence of their being competent upon hire
- All of the behaviors are presumed to be relevant to chaplaincy, though not for all settings
- Evaluation begins with each chaplain describing how they are competent in each area
- Each chaplain will identify areas in which they commit to learning and/or improving their skill set
- All chaplains are expected to follow the *Common Standards for Professional Chaplaincy*





Questions from participants



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Centers for Spiritual Care

Competency #1: Ability to assess the need for, and to deliver spiritual/pastoral care and support that is both personalized and focused.



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Centers for Spiritual Care

Competency #1: Ability to assess the need for and to deliver spiritual/pastoral care and support that is both personalized and focused.

Performance Behaviors	Self-Assessment				
FUNDAMENTAL:	Need training/ Supervision 1	2 Competent 3	4 Exceptional 5	Not Applicable in my setting 0	



Centers for Spiritual Care

Competency #1: Ability to assess the need for, and to deliver spiritual/pastoral care and support that is both personalized and focused.

Performance Behaviors	Self-Assessment				
	Need training/ Supervision 1	2	Competent 3	Exceptional 4	5 Not Applicable in my setting 0
1. Listens, engages in dialog, and offers honest feedback to patients/clients/residents.					
2. Collaborates with team members to identify body, mind, and spirit concerns.					
3. Assesses readiness for and initiates patient visits, identifying patient's needs, concerns, and fears.					
4. Communicates interest in the details of a patient's situation, establishes rapport, and ascertains the reason for admission.					
NARRATIVE SUMMARY*					



Centers for Spiritual Care

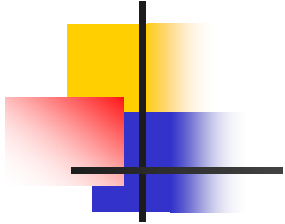
Competency #1: Ability to assess the need for and to deliver spiritual/pastoral care and support that is both personalized and focused.

Performance Behaviors	Self-Assessment				
FUNDAMENTAL:	Need training/ Supervision 1	2	Competent 3	Exceptional 4	5 Not Applicable in my setting 0
1. Listens, engages in dialog and offers honest feedback to patients/clients/residents.					
2. Collaborates with team members to identify body, mind, and spirit concerns.					
NARRATIVE SUMMARY*					
Validation Tool Options: Case Review/Case Study (do a minimum of one and, at the discretion of the Coordinator, an additional one) (it is recommended that the case be reviewed with two or more chaplain peers)			Validation Date:		



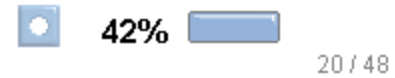
ADVANCED:	Need training/ Supervision 1	2	Competent 3	4	Exceptional 5	Not Applicable in my setting 0
1. Demonstrates pastoral leadership within health care team.						
2. Performs exceptional guest/customer relations' services.						
3. Shows in-depth interest in the patient/client/resident; listens beyond their presenting request, explores relevant family issues, identifies needs that are not obvious, etc.						
NARRATIVE SUMMARY*						
Validation Tool(s) to be determined in consultation with the Coordinator Chaplain. Validation Date:						



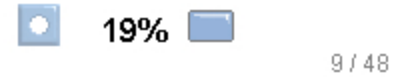


Do you have written competencies for chaplains in your department? (Please select one.)

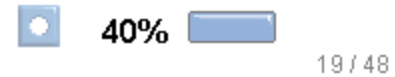
Yes

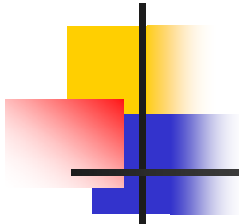


No, but in process of developing



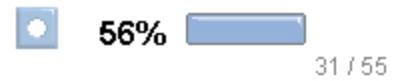
No, but thinking about it





Do you have written behavioral expectations for your chaplains? (Please select one.)

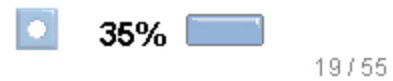
Yes



No, but in process of developing

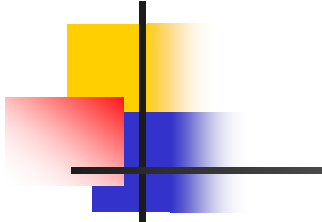


No, but thinking about it

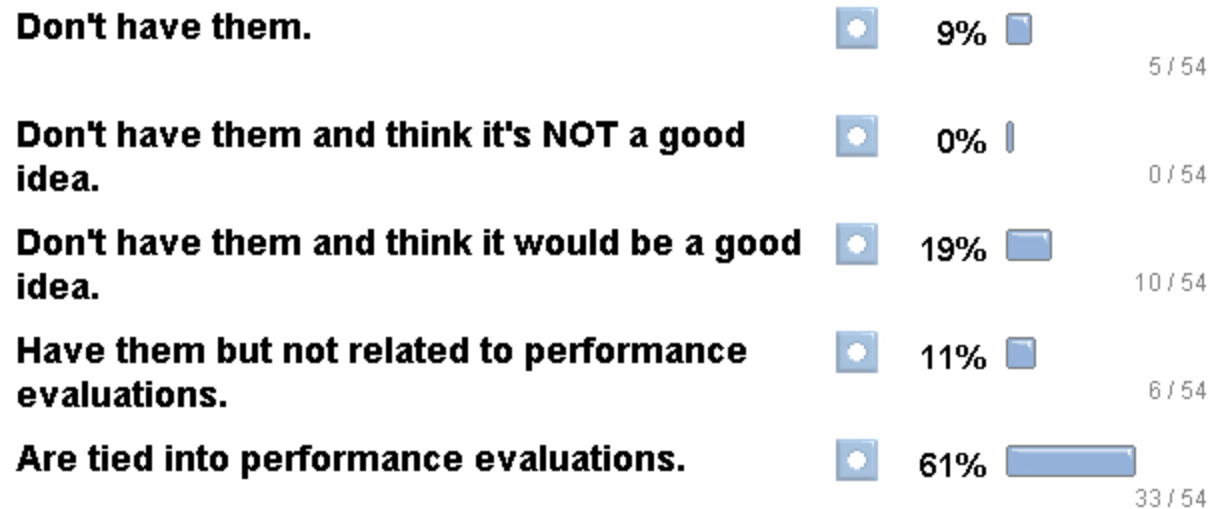


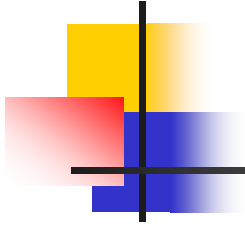
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If you have competencies or behavioral expectations for chaplains, is measurement of them incorporated into annual performance evaluations? (Please select one.)





Questions from participants



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Outcomes

- Some chaplains embraced validation process and quickly moved through it
- Some chaplains slowly engaged validation process
- Some chaplains resisted process entirely and have accepted minimum merit increases as a consequence



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What We Discovered

- Need to maintain focus and energy
 - through definition process
 - through validation process
- Needs regular attention of coordinators for some uniformity in the use of validation tools
- Impact on group supervision
- Reluctance of peers to comment on competence



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What We Discovered

- Outcome of 2008 APC presentation discussion: identify motivating factors and rewards for completion of competency validations
- Proposed 3-tier clinical ladder with merit increases: lukewarm reception by chaplains to ladder





Into the Future

- Advanced level of competence:
 - Chaplains identify own means of validating competence, which may be outside of the tools used at fundamental level
 - Validation of Advanced level adds to quality of spiritual care being offered
 - Use of competency validation in chaplain goal-setting





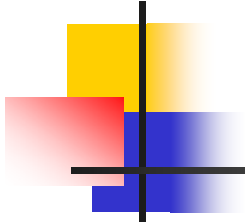
Into the Future

- Use of negative consequences for lack of engagement with validation process?
- Re-visit chaplain clinical ladder as motivator?



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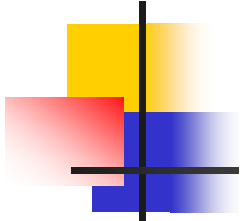
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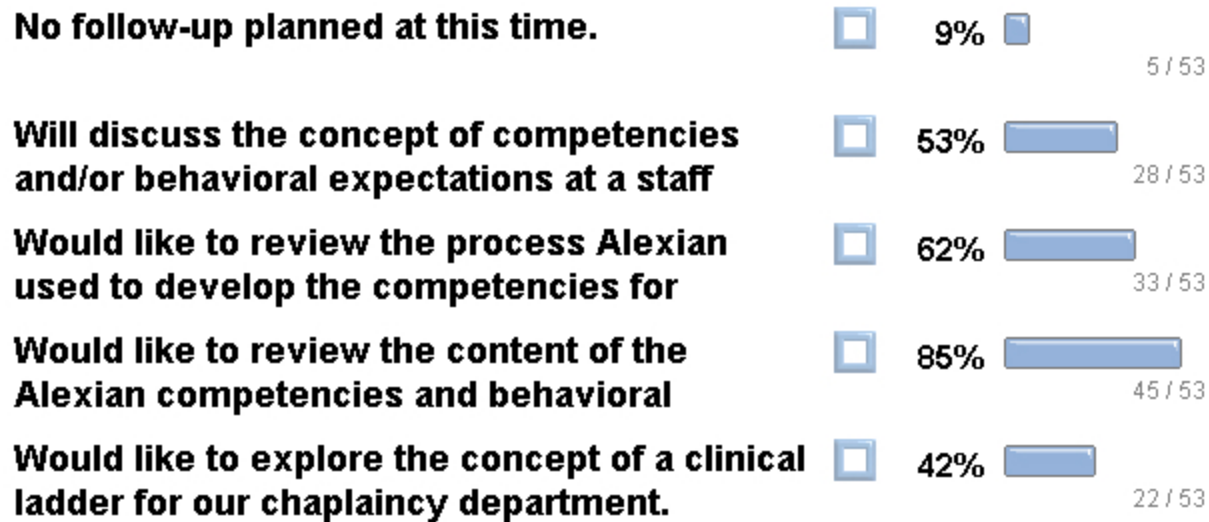
Questions from participants



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What are you thinking your own follow-up will be to this presentation? (Select all that apply.)





Contact Information

- Rev. Beth Collier
 - colliere@alexian.net
 - 847.593.8102 (office)
- Rev. Roy Olson
 - olson612sr@sbcglobal.net

Thank you for participating. APC will e-mail an evaluation to you.

Appendix 8

CHAPLAIN COMPETENCIES ²⁰⁰²

Consistently Mentioned by All Groups Interviewed in Phase Two

Including the Pilot Site Chaplains

1. Ability to deliver spiritual/pastoral care and support that is both personalized and focused.
2. Ability to conduct a multifaceted assessment of a patient.
3. Ability to participate in interdisciplinary conferences and contribute significant data for comprehensive and holistic care/treatment plan.
4. Ability to help others explore options and empower them to identify and take the next step(s) toward spiritual fulfillment.
5. Ability to network with community clergy and congregations, providing a continuum of spiritual/pastoral support within a variety of care contexts.
6. Ability to initiate and facilitate institutional or community-based meetings for systemic improvement.
7. Ability to negotiate mutually acceptable outcomes among diverse viewpoints.
8. Ability to employ systems thinking and systems management (e.g., facilitating relationships, building partnerships, networking constituencies) toward more comprehensive, personalized and holistic outcomes for patients and staff.
9. Ability to interface with community and staff regarding holistic care.
10. Ability to function as an organizational symbol of mission, spirituality and values.
11. Ability to help others (patients/residents, families, staff) identify and manage their inner resources.
12. Ability to help others (patients/residents, families, staff) pursue the next step in their personal development.
13. Ability to help organizations or systems identify and manage inner resources and pursue the next steps in their development.
14. Ability to assess and respond sensitively to cultural and religious diversity.
15. Ability to help groups and individuals reflect on their lived experience from a theological or faith perspective without imposing any personal bias.

From "Measures of Chaplain Performance and Productivity," by Catholic Health Initiatives, 2002 (June), p.37. Copyright 2002 by Catholic Health Initiatives. Reprinted with permission.

**ALEXIAN BROTHERS HOSPITAL NETWORK
CENTERS FOR SPIRITUAL CARE
CHAPLAIN COMPETENCIES
2004**

Competency #1: Ability to deliver spiritual/pastoral care and support that is both personalized and focused.

Competency #2: Ability to conduct a multifaceted assessment of a patient.

Competency #3: Ability to assess and respond sensitively to cultural and religious diversity.

Competency #4: Ability to participate in interdisciplinary conferences and contribute significant data for comprehensive and holistic care/treatment plan.

Competency #5: Ability to help others explore options and empower them to identify and take the next step(s) toward spiritual fulfillment.

Competency #6: Ability to network with community clergy and congregations, providing a continuum of spiritual/pastoral support within a variety of care contexts.

Competency #7: Ability to interface with community and staff regarding holistic care

Competency #8: Ability to function as an organizational symbol of mission, spirituality and values

Competency #9: Ability to negotiate mutually acceptable outcomes among diverse viewpoints

Competency #10: Ability to employ systems thinking and systems management (e.g., facilitating relationships, building partnerships, networking constituencies) toward more comprehensive, personalized and holistic outcome for patients and staff

Competency #11: Ability to help others (patients/residents, families, staff) identify and manage their inner resources.

Competency #12: Ability to help others (patients/residents, families, staff) pursue the next step in their personal development

Competency #13: Ability to help organizations or systems identify and manage inner resources and pursue the next steps in their development

Competency #14: Ability to help groups and individuals reflect on their lived experience from a theological or faith perspective without imposing any personal bias

**ALEXIAN BROTHERS HOSPITAL NETWORK
CENTERS FOR SPIRITUAL CARE
CHAPLAIN COMPETENCIES
2006**

- Competency #1:** Ability to assess the need for and to deliver spiritual/pastoral care and support that is both personalized and focused.
- Competency #2:** Ability to interface with other staff members, to participate in interdisciplinary conferences, and contribute significant data to the process of developing a comprehensive and holistic care/treatment plan.
- Competency #3:** Ability to help patients/clients/residents explore options that empower them to identify and take the next step(s) toward spiritual fulfillment.
- Competency #4:** Ability to network with community clergy and congregations, providing a continuum of spiritual/pastoral care contexts.
- Competency #5:** Ability to function as an organizational symbol of mission, spirituality and values.
- Competency #6:** Ability to utilize systems thinking and systems management in negotiating mutually acceptable, holistic outcomes for patients/clients/residents and staff from diverse viewpoints.
- Competency #7:** Ability to help others identify and manage their inner resources.
- Competency #8:** Ability to help others pursue the next step in their personal development.
- Competency #9:** Ability to help organizations or systems identify and manage inner resources and pursue the next steps in its development.
- Competency #10:** Ability to help groups and individuals reflect on their lived experience from a theological or faith perspective, responding sensitively to cultural and religious diversity, without imposing any personal bias.

Centers for Spiritual Care

Competency #1: Ability to assess the need for and to deliver spiritual/pastoral care and support that is both personalized and focused.

Performance Behaviors	Self-Assessment					
FUNDAMENTAL:	Need training/ Supervision	Competent		Exceptional		Not Applicable in my setting
	1	2	3	4	5	0
1. Listens, engages in dialog, and offers honest feedback to patients/clients/residents.						
2. Collaborates with team members to identify body, mind, and spirit concerns.						
3. Assesses readiness for and initiates patient visits, identifying patient’s needs, concerns, and fears.						
4. Communicates interest in the details of a patient’s situation, establishes rapport, and ascertains the reason for admission.						
5. Acknowledges and validates feelings of patients/clients/residents.						
6. Listens actively for spiritual issues.						
7. Begins spiritual assessment upon entering room.						
8. Completes initial spiritual assessment of level of hope, community support, and relationships with God and local faith community.						
9. Offers relevant resources of the hospital to the patient.						
10. Defines and stays focused on a “contract” for patient/client/resident care.						
NARRATIVE SUMMARY*						
Validation Tool Options: Case Review/Case Study (do a minimum of one and, at the discretion of the Coordinator, an additional one) (it is recommended that the case be reviewed with two or more chaplain peers)			Validation Date:			

ADVANCED:	Need training/ Supervision		Competent	Exceptional		Not Applicable in my setting
	1	2	3	4	5	0
1. Demonstrates pastoral leadership within health care team.						
2. Performs exceptional guest/customer relations' services.						
3. Shows in-depth interest in the patient/client/resident; listens beyond their presenting request, explores relevant family issues, identifies needs that are not obvious, etc.						
4. Addresses patient's/client's/resident's emotionality (i.e., fear, anger, despair), and/or catastrophic fears.						
5. Uncovers unresolved discharge issues and refers them to a social worker/case manager.						
6. Selects and implements appropriate in-depth spiritual assessment.						
7. Communicates breadth of available resources.						
8. Integrates concepts and adapts behaviors appropriately in each pastoral situation.						
NARRATIVE SUMMARY*						
Validation Tool(s) to be determined in consultation with the Coordinator Chaplain.				Validation Date:		

Competency #2: Ability to interface with other staff members, to participate in interdisciplinary conferences, and contribute significant data to the process of developing a comprehensive and holistic care/treatment plan.

Performance Behaviors	Self-Assessment					
	Need training/ Supervision	Competent	Exceptional	Not Applicable in my setting		
	1	2	3	4	5	0
FUNDAMENTAL:						
1. Asks for assistance from or makes referrals to other staff as needed.						
2. Is present and participates in interdisciplinary team conferences.						
3. Comprehends the overall treatment plan developed by the patient care delivery team.						
4. Asks clarifying/focusing questions during the development of the treatment plan.						
5. Shares spiritual data derived from the initial spiritual assessment; knows the patient's/client's/resident's needs.						
6. Is attentive, listening for points of consensus and dissidence.						
7. Participates in unit staff meetings and family consultations when appropriate or requested to do so.						
NARRATIVE SUMMARY*						
Validation Tool Options: 360 Evaluation of Performance (specific to your site) (And at St. Alexius Medical Center, the <i>Interdepartmental Survey</i>)				Validation Date:		

ADVANCED:	Need training/ Supervision		Competent	Exceptional		Not Applicable in my setting
	1	2	3	4	5	0
1. Acts as a leader in interdisciplinary team conferences.						
2. Provides educational and spiritual input.						
3. Facilitates resolution of contentious situations.						
4. Provides critical stress debriefings.						
5. Invites other disciplines to join team conferences, when appropriate.						
6. Raises awareness of issues of cultural diversity and clinical ethics.						
NARRATIVE SUMMARY*						
Validation Tool(s) to be determined in consultation with the Coordinator Chaplain.				Validation Date:		

Competency #3: Ability to help patients/clients/residents explore options that empower them to identify and take the next step(s) toward spiritual fulfillment.

Performance Behaviors	Self-Assessment				
FUNDAMENTAL:	Need training/ Supervision	Competent	Exceptional	Not Applicable in my setting	
	1	2	3	4	5
1. Leads patients/clients/residents to their own identification of options for their spiritual fulfillment.					
2. Assists patients/clients/residents in the development of concrete action steps towards the attainment of increased spiritual fulfillment, urging them to move from the vague to the concrete.					
3. Assists patients/clients/residents in assessing whether their action steps are realistic and constructive.					
4. Offers suggestions for spiritual community resources (e.g., spiritual directors, pastoral counselors, communities of worship/parishes, etc.).					
NARRATIVE SUMMARY*					
Validation Tool Options: Log/Diary or one Verbatim (use of the Alexian Brothers Medical Center's Meditech Spiritual Assessment can be considered, as well)			Validation Date:		

ADVANCED:	Need training/ Supervision	Competent	Exceptional	Not Applicable in my setting		
	1	2	3	4	5	0
1. Offers new models of theology for patients/clients/residents with damaged, conflicted, or nihilistic spirituality (e.g., persons who view God primarily as a punishing God).						
NARRATIVE SUMMARY*						
Validation Tool(s) to be determined in consultation with the Coordinator Chaplain.				Validation Date:		

Competency #4: Ability to network with community clergy and congregations, providing a continuum of spiritual/pastoral care contexts.

Performance Behaviors	Self-Assessment					
	Need training/ Supervision		Competent	Exceptional		Not Applicable in my setting
	1	2	3	4	5	0
FUNDAMENTAL:						
1. Believes in the value and importance of a patient's/client's faith community and articulates a commitment to the hospital -congregation connection.						
2. Acts as an agent for congregational connections and assists patients/clients to access outside spiritual resources, as needed.						
3. Acknowledges and shows appreciation for local clergy's visits to hospital patients.						
4. Maintains confidentiality while determining and honoring what patients/clients want from his or her community congregation.						
5. Understands that patients can be listed on a hospital directory as available for a visit from their church.						
6. Gathers basic information regarding a patient's connection with a local congregation, asking whether they wish to have them notified of their admission.						
7. Identifies, differentiates, and helps patients select among a range of ways that their community congregation can be supportive (e.g., prayer list, visitation, bringing communion, assistance upon discharge).						
8. Knows how to be in contact with area clergy and parish communities. Requests clergy visits, as needed. Assists other local congregational visitors.						
9. Communicates accurately the assessed needs of patients/clients to their congregation, upon receiving his or her consent.						
10. Contributes to departmental responsibilities in maintaining community resource information.						
NARRATIVE SUMMARY*						
Validation Tool Options: Documentation or Log/Diary			Validation Date:			

ADVANCED:	Need training/ Supervision		Competent	Exceptional		Not Applicable in my setting
	1	2	3	4	5	0
1. Helps facilitate a patient's/client's theological reflection on the role of the local congregation.						
2. Articulates within the interdisciplinary context the importance of networking with congregations.						
3. Completes in-depth assessment of the level of patient's/client's connection with local congregation.						
4. Identifies issues to be handled by chaplain versus issues more appropriately left to community congregations.						
6. Establishes and follows a working Pastoral Care Plan with patient's pastor/priest/congregational representative, wherever possible, to insure a continuity of pastoral care/support from hospital upon return to local congregation.						
7. Initiates and participates in activities which demonstrate a systemic level of commitment to the hospital - congregation connection, such as promoting Eucharistic ministry as a form of networking, offering retreat or educational opportunities, welcoming parish visitors through easy access to the hospital, or periodic communication to clergy through e-mail or other means.						
8. Cultivates and maintains knowledge of and familiarity with local churches, temples, synagogues, mosques, nursing homes and their pastors, ministers, chaplains, and staff.						
9. Provides education to community clergy/visitors regarding HIPAA and its effects on communication regarding patients/clients/residents.						
NARRATIVE SUMMARY*						
Validation Tool(s) to be determined in consultation with the Coordinator Chaplain.				Validation Date:		

Competency #5: Ability to function as an organizational symbol of mission, spirituality and values.

Performance Behaviors	Self-Assessment				
FUNDAMENTAL:	Need training/ Supervision	Competent	Exceptional	Not Applicable in my setting	
	1	2	3	4	5
1. Models the five core Alexian values through one’s behavior and interaction with patients/clients/residents, their family members, and staff.					
2. Teaches, translates and interprets the five core Alexian values to staff members in one’s clinical areas through in-service presentations.					
3. Facilitates the inclusion and partnership of other persons who will enhance increased attention to and appreciation for the spiritual dimension of care.					
4. Dialogs with other staff, assisting them to come to their own individual understanding of the spiritual dimension of care, with the goal of eliciting a common commitment to the spiritual dimension of care.					
5. Educates patients/clients/residents in Spirituality Groups regarding spirituality through use of the Alexian core values.					
6. Actively participates in and/or works cooperatively with an Alexian Spirit Committee.					
NARRATIVE SUMMARY*					
Validation Tool Options: Documentation and 360 Evaluation of Performance (or if needed/when all else fails, direct observation/participation)			Validation Date:		

ADVANCED:	Need training/ Supervision	Competent	Exceptional	Not Applicable in my setting		
	1	2	3	4	5	0
1. Questions whether decisions being considered are consistent with the Alexian values.						
2. Introduces concepts of spirituality to staff members and in program areas that have not previously had and/or have believed that it was inappropriate to have a spiritual component in their treatment area.						
3. Assists in the creation of a treatment environment that affirms a variety of expressions and understandings of religion and spirituality.						
4. Actively participates in or co-leads an Ethics Committee.						
5. Introduces concepts of spirituality in the workplace to staff.						
NARRATIVE SUMMARY*						
Validation Tool(s) to be determined in consultation with the Coordinator Chaplain.				Validation Date:		

Competency #6: Ability to utilize systems thinking and systems management in negotiating mutually acceptable, holistic outcomes for patients/clients/residents and staff from diverse viewpoints.

Performance Behaviors	Self-Assessment					
	Need training/ Supervision		Competent		Exceptional	Not Applicable in my setting
	1	2	3	4	5	0
FUNDAMENTAL:						
1. Identifies needs and carefully listens to and solicits viewpoints and emotionality of all parties; attends to dynamics of situation.						
2. Identifies common ground.						
3. Manages negotiation process and assists others in valuing and accepting diverse ideas.						
4. Assists others in identifying and exploring options and possible outcomes.						
5. Keeps the focus on each party's satisfaction with the process and outcomes.						
6. Communicates outcome to appropriate parties, including an entry in the patient's/client's/resident's medical record.						
7. Actively listens to and seeks input from partners in ministry in day-to-day interactions to establish collegial working relationships.						
8. Provides a non-threatening, safe environment when soliciting feedback. Respects the input of others. Offers feedback for the good (effectiveness) of one's ministry, the good of others within the organization, and the good of the whole organization (solidarity).						
9. Participates in decision-making processes. Engages the required participants (and/or authorities) in responding to a need and facilitates the development of an action plan, always respecting the primary importance of seeking input from those we serve (principle of subsidiarity).						
10. Maintains integrity. Acts on the values of the organization and one's own values by taking risks consistent with those values.						
11. Evaluates an action plan and clarifies, re-visits or re-writes it, as necessary, with the common good in mind.						
12. Maintains an attitude of servant leadership, offering a "spiritual" as well as professional presence in the process.						
13. Offers to facilitate, mediate, or initiate conversations with others, be it a family member, those committed to the care of the patient or administrative personnel.						

NARRATIVE SUMMARY*
Validation Tool Options: Group Supervision <i>or</i> a Case Study Validation Date:

ADVANCED:	Need training/ Supervision	Competent	Exceptional	Not Applicable in my setting		
	1	2	3	4	5	0
1. Distinguishes between presenting and underlying needs.						
2. Seeks and obtains information regarding legal issues, medical criteria, institutional practices, culture, customs, and traditions of persons involved, as well as ethical concerns.						
3. Clarifies key issues, players, and roles, and assembles information into a negotiation plan.						
4. Assists others in exploring resistance or capitulation to options/outcomes.						
5. Involves other members of the health care team, and other community support persons, as appropriate, in exploring, deciding upon and participating in carrying out an action plan that upholds the values of the organization, as well as respecting diversity and ethical concerns.						
6. Assists others in reconciling themselves to the outcome, even if they do not accept it, including grief, frustration, etc.						
7. With integrity, actively offers input to administrative personnel in regards to ongoing issues or concerns that impact the effectiveness of one's ministry.						
NARRATIVE SUMMARY*						
Validation Tool(s) to be determined in consultation with the Coordinator Chaplain.				Validation Date:		

Competency #7: Ability to help others identify and manage their inner resources.

Performance Behaviors	Self-Assessment				
FUNDAMENTAL:	Need training/ Supervision	Competent	Exceptional	Not Applicable in my setting	
	1	2	3	4	5
1. Succinctly describes the chaplain’s role and leads others (i.e., patients/clients/residents, family members, staff) into conversations that include theological or spiritual reflection.					
2. Actively listens to life events, strengths, weaknesses, threats, and opportunities so as to facilitate actionable reflection.					
3. Assists persons of faith to access and deepen their spirituality as a resource during a health crisis.					
4. Helps others articulate their own unique spirituality and theology with increasing clarity.					
5. Helps others who resist an overt search for religious/spiritual resources to find another pathway to access inner resources.					
6. Provides or arranges for the provision of sacramental ministry to patients/clients/residents.					
7. Leads worship in a manner that enables those persons in attendance to draw upon their own spiritual resources.					
8. Leads Spirituality Groups in which patients/clients share their spiritual journeys as a means of drawing upon their spiritual resources.					
NARRATIVE SUMMARY*					
Validation Tool Options: Spiritual Assessment, Documentation, or Direct Observation (choose two of the three options)			Validation Date:		

ADVANCED:	Need training/ Supervision	Competent	Exceptional	Not Applicable in my setting		
	1	2	3	4	5	0
1. Enables others to describe their spiritual journey who are initially resistant or hostile to that approach.						
2. Elicits the context for the spiritual stance of those who describe themselves as atheistic or agnostic.						
NARRATIVE SUMMARY*						
Validation Tool(s) to be determined in consultation with the Coordinator Chaplain.				Validation Date:		

Competency #8: Ability to help others pursue the next step in their personal development.

Performance Behaviors	Self-Assessment				
FUNDAMENTAL:	Need training/ Supervision	Competent	Exceptional	Not Applicable in my setting	
	1	2	3	4	5
1. Discerns their culture and/or situation.					
2. Invites others (i.e., patients/clients/residents, family members, staff) into dialogue.					
3. Provides a welcoming and hospitable environment, both physical and emotional, where others feel safe.					
4. Creates an environment of mutual trust.					
5. Asks questions to generate dialogue.					
6. Clarifies, summarizes, and explores a situation as well as possible options.					
7. Attends to the feelings of others and helps them to name their emotions.					
NARRATIVE SUMMARY*					
Validation Tool Options: review three Progress Notes <i>or</i> Direct Observation (possibly supplemented by a case study/verbatim)			Validation Date:		

ADVANCED:	Need training/ Supervision		Competent	Exceptional		Not Applicable in my setting
	1	2	3	4	5	0
1. Checks assumptions of where a person is or needs to be. Probes whether his or her issue reflects an ongoing emotional or behavioral pattern.						
2. Recognizes boundaries around system issues; redirects to appropriate authority, as necessary.						
3. Determines what is the core underlying issue.						
4. Assists others to address their emotions and invites them to move forward.						
5. Explores “worst case scenarios” and possible responses.						
6. Explores meanings and implications associated with proposed options.						
7. Moves from empathic listening to active engagement and pastoral guidance around issues being raised.						
8. Develops the next step in an encounter with other persons.						
9. Empowers a person to take necessary steps.						
NARRATIVE SUMMARY*						
Validation Tool(s) to be determined in consultation with the Coordinator Chaplain.				Validation Date:		

Competency #9: Ability to help organizations or systems identify and manage inner resources and pursue the next steps in its development.

Performance Behaviors	Self-Assessment					
	Need training/ Supervision		Competent		Exceptional	Not Applicable in my setting
	1	2	3	4	5	0
FUNDAMENTAL:						
1. Knows and lives the values of the organization: 1) dignity of the person; 2) compassion; 3) holism; 4) care of the poor; 5) partnership.						
2. Continually reflects on the ongoing behavior within the organization and discerns its assets or limitations in light of the mission and values of the organization.						
3. Affirms and rewards positive behaviors.						
4. When in conflict situations or when addressing limitations, always seeks the common good of the whole and continuously calls the organization to the higher values that it espouses.						
5. Offers to mediate conflict (where appropriate) or offers to approach appropriate authorities with concerns or issues. Is willing to be a part of the group that is addressing the problems or issues, offering appropriate input from a spiritual or professional perspective.						
6. Acts with integrity, willing to take risks to achieve the organization's values.						
7. Continually is aware of one's own words or actions and how they reflect or fail to reflect the values of the organization.						
8. Affirms the positive behavior of co-workers and fellow staff members, and clearly states the values being reflected in their behavior.						
9. Gently and compassionately asks for clarification when seeing a behavior that is <i>perceived</i> as contrary to the organization's values, reporting unacceptable behavior to the proper authorities, if necessary.						
10. Becomes aware of ongoing needs (internally or with the community) that have yet to be addressed.						
11. Seeks and attends to the feedback and insights of one's fellow employees and shares it with those who have the power to act on it, crediting the employee where credit is due.						
12. Becomes increasingly aware of organizational situations or patterns that inhibit effective implementation of the organization's values.						

NARRATIVE SUMMARY*
Validation Tool Options: Direct Observation and Log/Diary (and, if desired, documentation as an optional supplement) Validation Date:

ADVANCED:	Need training/ Supervision	Competent	Exceptional	Not Applicable in my setting		
	1	2	3	4	5	0
1. Willingly approaches appropriate authorities and offers feedback in regards to concerns, needs, questions or ideas. With proper authority, initiates conversations with others who have a participating role in a situation.						
2. Offers to be a part of the solution, actively participating in the groups or teams that are addressing a particular problem or concern. Does what one can within a group to move it from reflection to action to evaluation (and back again). Supports the decisions that are made.						
3. Is willing to be a spiritual or mediating presence in a conflict or difficult situation. In the midst of conflict, is willing to hold up the values of the organization as guiding principles.						
4. Is willing to be an advocate on behalf of other persons, a value or a need. Seeks an effective means of affirming that value or responding to a need.						
5. With the organization's values in mind, is willing to ask for what is needed to implement those values.						
NARRATIVE SUMMARY*						
Validation Tool(s) to be determined in consultation with the Coordinator Chaplain.						Validation Date:

Competency #10: Ability to help groups and individuals reflect on their lived experience from a theological or faith perspective, responding sensitively to cultural and religious diversity, without imposing any personal bias.

Performance Behaviors	Self-Assessment						
FUNDAMENTAL:	Need training/ Supervision	1	2	Competent 3	Exceptional 4	5	Not Applicable in my setting 0
1. Achieves a basic understanding of a patient's/client's/resident's religious affiliation, socialization patterns and/or cultural attitudes.							
2. Listens respectfully to a patient/client/resident whose faith tradition is different than one's own, without expressing negative judgment or bias toward that tradition.							
3. Listens to and tolerates criticism of one's own faith tradition without becoming defensive or critical in response.							
4. Remains professional in demeanor including a non-anxious presence in the face of any challenges by a patient/client/resident or their family member.							
5. Shows interest in learning about faith traditions other than one's own.							
6. Admits to limitations in understanding faith traditions other than one's own and remains within one's area of knowledge during pastoral care visits.							
7. Uses good judgment in offering self-disclosure during pastoral visits, and by not shifting the focus to the chaplain's own spirituality.							
8. Leads Spirituality Groups with patients/clients/residents from a variety of religious traditions, maintains an atmosphere of respect and tolerance, and sets limits on those who are not respectful or tolerant of views other than their own.							
9. Assists persons to reflect on their experience or concern by making explicit any implied theological or faith perspective.							
NARRATIVE SUMMARY*							
Validation Tool Options: Personal Reflection Paper (interfaith/interculturally-based, and presented to a peer group of chaplains) (conversation afterwards with the Coordinator, and further presentation at his or her discretion, is required to achieve validation)				Validation Date:			

ADVANCED:	Need training/ Supervision		Competent	Exceptional		Not Applicable in my setting
	1	2	3	4	5	0
1. Uses knowledge of faith traditions and religions other than one's own to provide meaningful spiritual care to persons in other traditions or religions.						
2. Discerns whether a patient/client's/resident's perspective is normative within their faith tradition or if they have a unique understanding of their faith tradition, and explores that with them.						
3. Discerns when and how to speak in the language of 'spirituality' rather than religion (e.g., Higher Power, nature, values).						
4. Relates to persons who are agnostic or atheist in a non-judgmental manner, while helping them explore the origin and development of their theological positions.						
5. Helps patients/clients/residents to explore the implications of conflicts with their faith tradition as well as available alternatives.						
6. Identifies and addresses spiritual abuse.						
NARRATIVE SUMMARY*						
Validation Tool(s) to be determined in consultation with the Coordinator Chaplain.				Validation Date:		