



Annual Report on Professional Chaplaincy Development 2010

The Next Station is *Moving Onwards*

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"We are not standing at the starting point and yet we are at the initial stage of development." ¹ The above statement truly reflects the reality of our progress in 2010. AHKHCCM (the Association) commits to promote the development of professional chaplaincy in Hong Kong with two main objectives—to further root professional chaplaincy into healthcare settings and to improve the professional competencies of chaplains. The followings are review of our progress in 2010 regarding six major areas.²

To Promote Mutual Communication

It always takes a long journey to experience how an idea, a movement, or even a dream is to be merged, nurtured, practiced and realized. During the first half of the year, we were pleased to be able to visit 19 chaplaincy teams and attend a few chaplaincy committee meetings to share the concept of professional chaplaincy development. In addition, we did share our progress with overseas fellows and gained experience from the forerunners.³ We have also

successfully recruited overseas and local consultant networks.⁴ With an aim to foster mutual understanding among the Association, frontline chaplains, as well as the chaplaincy committee representatives, two forums have been held in the second half of the year. While communication does not guarantee no-objection, we do consider sincere dialogues a constructive tension. We must admit that the team has not yet come to a consensus and we are still not at the same pace.





However, we do believe in reflective listening which is exactly what we are practicing in our ministry. Although we cannot fulfill every request, we can at least listen attentively and accurately to others so that we may be able to respond to the concerns accordingly.⁵ The Chinese interprets communication as "to dialogue with understanding". We definitely need that kind of continuing quality conversation among our chaplains and chaplaincy committees, as well as healthcare professionals and churches in the future.

To Enhance Continuing Education

Continuing education is essential for every professional team. Resource sharing and mutual assistance are also indispensable to build a healthy team. In 2010, the Association continued to hold regular training programs, including the Annual Chaplains' Day. Five of these programs, with a total number of 205 participants, were focused on reflecting the relationship between "our calling" "professional development of chaplaincy". Furthermore, issues on Advance Directives and hospital accreditation by Australian Healthcare Standards Council on (ACHS) opportunities to the unique contribution of chaplaincy service. Hence, the Association held a total of 4 seminars aimed to equip chaplains with knowledge for the above topics. Those 4 seminars were attended by 124 chaplains. In fact, we saw an overall increase in the number of participants as well as





team devotion when compared with the past. Moreover, the Association resumed conducting CPE programs in the fall of 2010 to provide advance education for chaplains. The Association plans to hold more diverse training programs and to formulate a more systematic scheme on continuing education for chaplains.

To Formulate Registration System for Professional Chaplains

In the past few years, apart from formulating two sets of professional document, namely Professional Chaplaincy - Its Role & Significance in Healthcare Service, and Code of Ethics, the Professional Development Task Force has also worked out a registration system for professional chaplains in line with the present situation. In the second half of the year, the Board of Directors of the Association appointed the Task Force as Professional Development Committee so as to execute duties concerned. The members of the Task Force became the committee members of the First Professional Development Committee in the transitional period. Furthermore, the Committee has worked out the document namely Introduction and Notes of Chaplain Registration, and initiated the registration of chaplains in Hong Kong for the first time. The proposed registration system works with two principles: (1) to be in line with the academic qualification, professional training, and year of service for present chaplains; (2) to provide a clear and comprehensive blueprint for continuously improving the professional competencies of chaplains. At present, the registration system has no statutory binding. It only involves spontaneity, self discipline and voluntary participation. A total of 75 chaplains have submitted their registration application, and it is about 55% of the whole team of The Association will continue to promote and encourage chaplains to apply for registration, as well as to draft the standards and guidelines for chaplain certification so as to provide certification for local chaplains beginning in 2012.

To Train CPE Supervisors

The professional growth of chaplains requires sustained CPE training as well as continuing education. The present demand for CPE program has clearly proven that the number of CPE supervisor is far from adequate.⁸ We should therefore formulate a long-term strategy as soon as possible so as to train and obtain a reserve of human resources for future pastoral education. At present, there are a very limited number of local CPE supervisors and supervisory education students (SESs) owing to the



fact that supervisory education does require tremendous human and financial resources. Hence, we have tried the model of joint learning which proves to be effective on both resource and experience sharing. In 2010 a joint supervisory learning group was formed by several CPE training centers and the operation gradually gets in rail. This learning model not only benefits the SESs, but also helps our collaborative efforts in the long run in professional development.

To Extend Pastoral Education to the Public

As we know in real life situations, the number of out-patients is far more than those who are

hospitalized. We can see people who are ill and in need of care just around us every day. Although in recent years individual chaplaincy teams have already started community chaplaincy services, there is still a large demand for pastoral care in the community. While a hospital chaplain has the role to nurture a caring culture in the hospital, pastors and believers as a whole should also bring forth caring families, churches and even local communities. The concept and practice of chaplaincy service has to be further educated especially in the Mainland or neighboring countries of Hong Kong. Last year, we were invited to Guangzhou of China as well as Singapore and held seminars with topics on pastoral care. Public education not only equips pastors, seminary students and congregations with theory and practice of pastoral care, it also motivates more





professional chaplains to become educators which in turn help building up reserves for the increasing demand from hospitals, churches and communities as well as volunteer training. The more we educate, the more we gain the support from the public. This will be our long term goal and we will continue to commit ourselves in pastoral education locally and beyond.

To Upgrade Chaplaincy Volunteer Training Program

The volunteers are great asset to our chaplaincy teams. Therefore, we should provide quality training in order to keep upgrading their knowledge and skills on patient visitation. At present, various chaplaincy teams have regular training programs for volunteers. While we can't give our priority here now due to limited resources, the Association will plan for launching more quality training for volunteers including a train-the-trainers program which will be designed and conducted by our professional chaplains.

Conclusion

We have quickly concluded what we have done for the past year. Of course we will not just stop here. Our next step will be KEEP MOVING. We will keep reviewing and changing our objectives and strategies whenever necessary. The key is we do not owe a personal or organizational mission, but the mission of the chaplains as a whole as well as the mission for the whole congregation of believers.

March 31, 2011.

Notes:

- 1 "What Kind of A Road It Is?" Tender Voice Bimonthly. Vol.115, March 2010.
- 2 To understand the interlocking effectives of the six major areas, please refer to "What Do We See? The Check Points of Professional Chaplaincy Development." *Tender Voice Bimonthly.* Vol.116, May 2010.
- 3 For details please refer to the Chaplain Continuing Education Seminar in May 2010 in which a report and a reflection were made after the trip to annual conferences of CPSP, APC and ACPE in April 2010.
- 4 Overseas Consultant Network includes 1 corporate member Association of Professional Chaplains (APC), and 13 individual CPE supervisors and chaplains who had ministry experiences in Hong Kong, namely James Pollard, Theodore Hodge, Kjell Aas, Wayne Robinson, Mark Jensen, John Moody, Kathy Turner, Dennis Kenny, Sandra Yarlott, Courtney Peterson, Hendrik van Sluijs, Robert Kidd, and John Swift; Local Consultant Network includes five individual members, namely, Professor Simon Shui Man Kwan, Dr. Tao Man King, Dr. Raymond Chung-I Chen, Dr. Susie Lum, and Mr. Ng Kin Yuen.
- 5 For feedback and comments from chaplains and chaplaincy committees, please refer to "What Do Chaplains Think of Professional Development?" *Tender Voice Bimonthly.* Vol.118, September 2010, and "To Grinding Out a Consensus Comments on Chaplain Registration from Committee Perspectives" *Tender Voice Bimonthly.* Vol.119, November 2010.
- 6 The tenure of office of the 1st Professional Development Committee is 2 years (2010 2012) and the 7 members are: Chairman Rev. Lo Wai Chuen, Vice Chairman Rev. Lam Wai Lim, Secretary Chaplain Fong Wai Sum, and Members Chaplain Tong Sun Nam, Rev. Luk Nai Ting, Rev. Chui Chun Nei and Rev. Law Kit Choi.
- 7. From present to year 2014, the registration of chaplains will be divided into 4 categories: Certified Chaplain (CC), Registered Chaplain I (RC I), Registered Chaplain II (RC II) and Auxiliary Chaplain (AC).
- 8. "Supervision A Short Supply Ministry", *Tender Voice Bimonthly*. Vol.113, November 2009.
- 9. CPE centers participate in the joint supervisory learning group are, namely, Hong Kong Baptist Hospital (1 supervisor and 2 SESs), Alice Ho Miu Ling Nethersole Hospital (1 supervisor and 1 SES), Bethel Bible Seminary (1 supervisor and 2 SESs), and Association of Hong Kong Hospital Christian Chaplaincy Ministry (1 supervisor and 1 SES).

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