CHA Pastoral Care Consultation Paper, September 2011 Summary of Survey Feedback February 2012

Data Summary

49 respondents.

97% agreed the paper addressed the key issues.

90% agreed the appropriate strategies in response were identified.

Data indicating respondents' top three issues from among the six strategies identified suggests all six issues are almost equally significant with a slight preference for Numbers 2, 3 and 5:

- Map available courses that provide suitable qualifications and competency; progress with relevant educational bodies the development of a Graduate course in Pastoral Care or similar qualification;
- Map the provision of pastoral care services across the Catholic sector to provide a snapshot of structures of reporting and accountability, models of practice, qualifications, staff ratios, age demographic, formation requirements, denominational profile, remuneration, recruitment issues and the role of volunteers across urban, regional and rural settings;
- Be a conduit between member services and the bishops and clergy about the practical impact of declining clergy on the delivery of pastoral care services.

Additional suggested issues requiring strategic response:

- 1. Attracting and recruiting younger lay staff
- 2. Partnering with other bodies eg SCA, CHA, parishes, education
- 3. Provision by CHA of a PC network and in-service opportunities
- 4. Communicating and delivering an integrated pastoral approach across a service so all staff, clinical and administrative, participate effectively
- 5. Promoting the 'spiritual' as a key element of holistic care
- 6. Accountability for professional development establishing requirements for 'registration'
- 7. Developing inter-faith awareness
- 8. Defining suitable patient/staff ratios
- 9. Provision of suitable PC funding in aged care.

The first three above issues suggest possible strategies to be pursued when those already identified have been progressed. Issues 4-8 can be incorporated into the currently defined action items. The issue of funding remains problematic but needs to remain part of the awareness of all with influence from an ongoing advocacy perspective.

Other responses

Be aware of connections and resources beyond the Catholic sector.

Diocesan support is needed for CPE training.

Promote the ministry of pastoral care via parishes.

Encourage training of lay deacons.

Take care not to impose the parish Sacramental model on health and aged care.

CHA has an important role as peak body for Catholic pastoral care.

A CHA Forum is needed for PC practitioners to gather and discuss progress around the chosen strategies.

Networks are needed for pastoral practitioners within Catholic health and aged care.

CHA publications have great value as resources and guidelines.

Access to distance education would be valuable.

A variety of formation and training is needed.

Importance of remaining flexible in PC delivery and avoid becoming too rigid in defining the practice Flexible approach to formation/courses is needed.

Differentiation is needed around the role of chaplains and pastoral practitioners.

Awareness needed of the role of pastoral care for people of no faith.