

From the USA

THE CHALLENGE CONFRONTING CHAPLAINCY TODAY: RELEVANCE Aligning Chaplaincy with the Needs of Consumers and Employers April 2014

By Bruce Fenner

The nation has witnessed a challenge to the relevancy of chaplaincy in the world's pluralistic society. Within organizational systems chaplaincy programs are under intense scrutiny as witnessed by the emerging trends of lay-offs, position cutbacks, the shifting of spiritual role responsibilities into other disciplines, and management's requirement of demonstrated value through evidence-based outcomes. While several factors have contributed to this significant challenge (i.e., increasing secularization of American culture;¹ economic stressors of the paradigm shift in Healthcare;² and increasing First Amendment legal challenges posed by the chaplain's role in religious accommodation vs. establishment³), it is apparent that chaplaincy must evolve and adapt to the needs of those being served and to the economic conditions of the marketplace.

Significant financial concerns are typically at the root of this paradigm shift, whether it be in governmental, non-profit, or for-profit organizations. For instance, government-employed chaplains (i.e., military, Veterans Administration, prison, and mental health) must be understood as nothing more than the government's attempt to ensure the accommodation and protection of religious/spiritual beliefs without establishing a religion, as set forth in the First Amendment of the U.S. Constitution. The chaplain is employed, not as a certified pastoral care provider, but as a public servant whose purpose is to manage the government's duty to accommodate and protect the free exercise of religion. Failure to ensure either exposes the government with significant legal, policy, and financial risks. Everything else the chaplain brings in service to the employing agency is value added (i.e., skills in pastoral care, counseling, conflict management, preaching, etc.).

When these are done well, it is a great asset for the institution. However, it must be reiterated that the baseline for employment is dependent upon the ability to accommodate and protect diverse religious beliefs and practices.

Additionally, it must be understood that government is a reactive system. When challenged, it reacts in a defensive posture. This poses two threats to chaplaincy. First, anytime the public servant chaplain's personal beliefs "trump" or legally challenge the accommodation of those being served, greater scrutiny of the chaplain's relevancy is likely to follow. "Does the government require highly trained and costly professional chaplains to meet the baseline need of religious accommodation?" "Can less costly public servants coordinate the religious accommodation needs for the population the agency serves?"

The second challenge comes when chaplains do their jobs really well; the population served has their needs met and there are few legal religious challenges confronting the agency. All is quiet, until the agency must deal with appropriation budgetary cutbacks. However, because chaplaincy has historically dealt with the spiritual realm with little expectation for demonstrating value, the positive impact of chaplaincy is seldom realized by organizational leadership. Given the shifting paradigm, chaplaincy must identify and deliver metrics that communicate impact and value on the greater mission of the agency/organization. This too, is a matter of relevance.

In many ways, the employment of chaplains in non-governmental settings (i.e., healthcare, hospice, etc.) is also based upon the ability to provide religious/spiritual accommodation. While spiritual assessment and pastoral care assume a greater role, the relevance of chaplaincy is often based upon the chaplain's ability to accommodate/coordinate religious services and provide pastoral/spiritual care as a "billable service." The true impact of chaplaincy is often misunderstood, and therefore, is challenged by management's need to make financial decisions impacting the profit margin of the corporate structure or the organization's own survival.

So why is relevancy important? Merriam-Webster defines relevance as "that which has a direct bearing on the matter at hand." The British television sitcom series of Mr. Bean has a comedic episode, titled "*The Department Store*,"⁴ which demonstrates a unique insight into this definition as it helps describe the predicament and present reality of organizational relevance. In this episode, Mr. Bean is on a shopping

adventure with his newly acquired American Express Credit Card, a card he embraces as giving him relevance. Throughout this farce-filled journey, Mr. Bean's shopping experience goes unnoticed, even as he manages to lose his credit card in another man's pocket at check-out. Attempting to retrieve his card, Bean's hand gets stuck in the man's pocket and the man walks away with Bean following behind all the way to the men's rest room water closet. It's there at the "flusher," that Bean is discovered and becomes *relevant*; not because he had reclaimed his financial validity, and not because he was able to offer a gift of toilet paper to a man in need, but because his irrelevance was finally *noticed* and *recognized*. When applied to chaplaincy, this is an emerging reality. We claim a title that has had historical relevance, but its meaning and value has drastically shifted for both our primary customer (e.g. patient, service member, inmate) and secondary customer (i.e. management). Ironically, while chaplains may believe they are relevant, chaplaincy has not stayed attuned to the shifting dynamics, and, as with Mr. Bean, the relevance of chaplaincy is only discovered at the financial "flusher," when decisions within the organization require drastic attention.

Jack Zenger and Joseph Folkman⁵ recently reported their analysis of a Fortune 100 company that had undergone an organizational downsizing. The analysis tried to identify factors that might predict which people were likely to be let go. One factor that wasn't predictive turned out to be one's history of good performance reviews. Only 23% of the people laid off had received a negative performance review the previous year, leaving an implication that 77% of those asked to leave had no clue they were vulnerable. In a 360 degree assessment of the managers who had identified these persons for lay-off, six factors were identified. Everyone shared at least two of the following:

1. They were not viewed as strategic.
2. They failed to consistently deliver results.
3. Their ethics or integrity had been called into question.
4. They had very poor interpersonal skills.
5. They were resistant to change both personally and organizationally.
6. They had lost their sponsors.

When one considers the realities confronting healthcare today, it is striking to note the number of hospitals and health systems cutting jobs from the workforce. Amongst the largest:

1. Cleveland Clinic – 3,000 employees (potentially impacted by proposed fiscal cuts)
2. LSU Hospitals –2,340 employees
3. Franciscan Alliance –1,050 employees
4. Vanderbilt University Medical Center –1,033 employees
5. Indiana University Health –900 employees

But healthcare is not alone in dealing with workforce cutbacks. The U.S. military is also preparing for major reductions-in-force. John Kirby, Department of Defense spokesman, noted, “*Personnel costs reflect some 50 percent of the Pentagon budget and cannot be exempted in the context of the significant cuts the department is facing. Secretary Hagel has been clear that, while we do not want to, we ultimately must slow the growth of military pay and compensation.*”⁶ Such a draw-down will definitely have a corollary impact on chaplaincy.

The full impact of these cutbacks on pastoral care can only be surmised as our data at the United Methodist Endorsing Agency is soft (i.e. based on correspondence and resource support).⁷ Yet we do know the workforce reduction had a significant impact upon the Spiritual Care Department at Vanderbilt University Medical Center (the department had a 50% reduction in staffing). In 2011, North Carolina laid off most of its prison chaplains (26 full-time) in an effort to close a 2.6 billion dollar budget gap.⁸ President and CEO of Kalispell Regional Healthcare recently noted that the impact of continuing cuts to Medicare would lead to cuts of the chaplaincy department because it is not absolutely essential to saving a person’s life.⁹

What is the outlook? Sadly, the 2014 January employment numbers from the US Bureau of Labor Statistics suggest that last year’s remarkable slowdown in healthcare hiring is more than a fluke for a sector that is typically a bright spot in bad times. Ani Turner of Altarum Institute’s Center for Sustainable Health Spending stated: “We may be entering a period of even greater slowdown of healthcare employment as we enter 2014.”¹⁰ Compounding the issue is the continued decline in hospital admissions forcing realignment in organizational strategic planning. With a growing number of Americans receiving coverage from high deductible health plans, there has been a weakening demand for elective procedures that require hospitalization. At the same time, a growing number of procedures can now be undertaken in more affordable outpatient settings. Moreover, Medicare policies have boosted financial incentives for hospitals to streamline their management of

chronic disease and keep patients from being admitted.¹¹ In other words, workforce cutbacks continue to be on the horizon for many in the healthcare industry, including chaplaincy.

Given this reality, chaplaincy must be proactive in its response. To simply rely on the old paradigm of chaplaincy being solely responsible for ensuring pastoral care for its primary customer (i.e., patient, service member, resident, inmate, etc.), is no longer sufficient for it is filled with significant risks which may communicate irrelevance with both primary and secondary (i.e., management) customers. If one communicates irrelevancy, it is the demise of chaplaincy in the public arena. Amongst other things, chaplaincy must embrace the complexity of the organization and integrate itself into the system as a much needed and complementary part of the organizational team.

The Reverend Ronald Oliver, Ph.D., BCC, System Vice President at Norton Healthcare, recently gave a lecture on aligning Chaplaincy with emerging healthcare realities (APC 2014 Chaplaincy Symposium).¹² In his lecture he identified three key components that strengthen chaplaincy in the workplace:

- 1) A chaplain's identity is focused upon answering two questions:
 - a. How does my calling inform what the consumer (i.e., patient, inmate, service member, resident) needs me to be? and
 - b. What does my employer require me to be?
- 2) The ability of the chaplain to initiate and apply a competent model of pastoral care/spiritual accommodation which integrates and communicates the value of one's work in the mission of the employing organization. Such a model incorporates quantitative and qualitative measures that reflect organizational value.
- 3) The chaplain must continually analyze their work and identify needs and opportunities which may expand one's role and value in the organization. This takes initiative and fosters one's competence. When successfully accomplished, chaplaincy is more deeply integrated in the fabric of the institution. Such integration means that something undesirable happens if the chaplain goes away.¹³

As the paradigm on the role of chaplaincy in the public arena rapidly shifts, it is vitally important for chaplains,(regardless of ministerial setting), to be vigilant in understanding the trends of the marketplace and the expectations

of the employer without losing site and attending to the spiritual needs of those they are called to serve. As noted by Oliver from the Harvard Business Review,¹⁴ this requires each chaplain to:

1. Be viewed as strategic by one's employer, perfecting as many leaders promote, an elevator speech (i.e., 'any kind of short speech that sells an idea, markets you as an individual)¹⁵ that aligns one's value with the mission, objectives and strategic plan of the organization. To do so, however, means that one understands and claims the full mission of the organization.
2. Consistently deliver results. To do so, Chaplains must learn how to inform management of the significant contributions they make in meeting the needs of the customer and the organizational mission. Note: It is imperative that chaplains showcase what is accomplished in the language of their management/command structure as they assess spiritual care and its organizational/community impact. A means to helping one get started is to identify (3) job tasks important to the command structure the chaplain relates and get organizational buy-in. Then ensure that those tasks get appropriate attention and are thoroughly analyzed for evidence supporting the outcome desired. Tweak the plan as necessary to accomplish the goal. Ensure that the customer served will answer "Yes" to the question, "Would you pay cash for the service I just provided?"
3. Ensure one's ethics and integrity are impeccable and there is never an opportunity for this to be called into question.
4. Develop great interpersonal skills. Think relationally, know the audience. Sit down over coffee with key decision makers. Note, track and remember key events (i.e., funerals, births, weddings) in the lives of colleagues at work (including management).
5. Lead and support change both personally and organizationally. Volunteer for a committee. Be recognized as a problem solver. Don't whine. Fix something. If the chaplain doesn't see anything in their scope of responsibilities to fix, go back and review the needs of the customers (i.e., primary and secondary). Identify the need and the change that must occur. How will this change be measured?

6. Build and maintain sponsors or support (to include leadership). Accept the reality of Murphy's Golden Rule: "Whoever has the gold makes the rules." Chaplains have historically had unparalleled access to departments and people (management and staff) throughout the institution. Build upon this relational access. Occasionally do a pastoral check-in with organizational management. When done well, it allows leaders to know one's genuine concern as it provides an opportunity for them to share their needs and concerns. Learn to appreciate that support is different than commitment.

Chaplains have great value and much to offer and, to be relevant, they must reevaluate how they align, demonstrate, and communicate their value to the primary and secondary customers they serve.

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15. Graziadio School of Business and Management, www.bschool.pepperdine.edu/career/content/elevatorspeech.pdf . An elevator speech is as essential as a business card. You need to be able to say who you are, what you do, what you are interested in doing and how you can be a resource to your listeners. If you don't have an elevator speech, people won't know what you really do