

# Is it right to put a price on the spiritual tonic of our hospital chaplains?

**I**T is generally accepted that offering hospital patients spiritual support is a good idea. After all, hospitals can be dreary, impersonal places and having a cleric on hand of whatever faith will always help.

Giving comfort to a patient in need of spiritual support is fundamental to good health. But in recent months there has been growing pressure from the National Secular Society which insists that the NHS should not foot the £40 million bill which pays for hospital chaplains. They believe this money could be better spent elsewhere and that hospital chaplains should be paid for by the religious institutions.

The Rt Rev Bishop Tom Williams, who is in charge of Catholic hospital chaplains, says: "There is a total misunderstanding of what the chaplaincy is, as far as National Secular Society is concerned. A lot of the NHS money is spent in the training and organisation of hospital chaplains. The majority of chaplains from the Catholic perspective are voluntary and part-time.

"It costs a quarter of a million pounds to train a priest. I don't see the NHS paying for that. £40 million is an extremely misleading number to put out. To get it in perspective, if that is a true figure, it works out at about four pence for every thousand pounds spent by the NHS.

"It's the Government's responsibility to care about the spiritual needs of the patient. A chaplain does more than hold hands and smile at people. His role is fundamental to the whole context of caring for the sick and is not just for patients, it's for the family and the staff themselves."

In June *The One Show* (as the name implies, the signature magazine show for BBC1) carried an item on hospital chaplains. It featured Claire Rayner, probably best known as Britain's famous agony aunt.

She is a household name, and for the most part comes across as someone who appears practical and compassion-

*Susan Hegedus speaks to a number of clergy, healthcare professionals and campaigners and asks their opinions on the issue of the level of NHS funding being allocated to the area of hospital chaplaincy*

ate and, as a former nurse, she would have considerable understanding of these matters. However, she is a campaigner for the National Secular Society and is also former president of the Humanist Association.

She does not object to clergy visiting patients, but remonstrates passionately against the £40 million of the NHS' money being spent on hospital chaplains: "Fewer people believe and fewer people attend church. £40 million - that's 1,500 nurses salaries, that's 2,200 cleaners. What do you think of that?" Regarding the clergy she said: "I wonder what these chaps are doing with their time. They've got all day!"

Fellow campaigner Stephen Evans of the NSS, tells me that the two major reasons why the NSS think hospital chaplaincy should not be paid for by the NHS is because it is a non-essential service and discriminatory.

"Perhaps there is a place for a paid visitor but in that case why would it be religious? There's no reason why a social worker or patient advocate couldn't do that job just as well. What patients actually value about a chaplain is that it is somebody who they can talk to, someone who will listen and that is not the exclusive domain of religion. It

excludes 46 per cent of the population.

"The fact that imams, Catholic priests, rabbis and Church of England clergy are on the payroll is an absolutely disgraceful way to use funds.

"Regarding the Catholic Church - they are an unbelievably wealthy organisation. They sit on an enormous amount of riches. If they wanted to find the money for funding hospital chaplains - they could. Look at the millions that are needed to pay for lawsuits against abusers - they have a big chest of money."

**P**ETER MOUNT, chairman of Central Manchester University Hospitals NHS Foundation Trust, and a practising Catholic, also appeared on *The One Show*. He said: "The point I was trying to make on the programme was this: in a world where we are very preoccupied with the cost of the NHS, the cost of expensive drugs, technology and new hospitals in an economic turndown, naturally, we must look very hard at the cost of everything. It is perfectly legitimate, and not to do so would be irresponsible. So the further question of chaplains comes up. The question is, should we be paying for them?"

"My own personal opinion is we probably spend too much on the chaplaincy. A lot more can be done by volunteers and laity. We have, over the last 30 or 40 years, people retiring in their fifties with nothing to do. To create a role in society for volunteers and laity is hugely beneficial for everyone.

Mia Hilborn, head of chaplaincy and spiritual healthcare service at Guys and St Thomas NHS Trust in London says: "The vast majority of patients like chaplains. I have been a chaplain for 13 years and in that time I've I think had three patients out of the thousands I've seen who have asked not to see me.

"It's extraordinarily rare for someone not to wish to see a chaplain. Chaplaincy has grown tremendously over the 10 to 15 years in terms of the number of patients we see.

"55 per cent of our patients come from outside of our immediate vicinity. We have nowadays a transient population that may or may not have a religious background. When they are sick in hospital they may have no one else to go to.

"The spiritual side of health comes up more when you are very sick. The things that are spiritual are very broad. They tend to be the things that actually

leave a lasting impact on somebody in a way in which other things don't.

"A chaplaincy review last year showed the experiences of using a chaplaincy service. 80 per cent of respondents felt their visit from me helped them to adjust to their medical condition; 75 per cent "felt that the chaplain's visit made their stay in hospital easier"; 60 per cent wanted more time to talk to a chaplain and 95 per cent said "the chaplain made me feel more hopeful."

"There are three things I have learnt from the people I have talked to. The first is that patients may not have a faith, but welcome the comfort and support of a chaplain at times when they are in pain and can be reassured by another's belief, even if they don't share it and some patients may at this point start to have a faith.

"The second is a sense of a person's wholeness, of the connectedness of our different parts. We function as a totality and part of this totality is spirituality which some may not call upon until they become very ill.

"Finally, I have come to realise that a price cannot be put on the hospital chaplaincy - and its unique, 24-hour service."

**Unique support - 95 per cent of patients who took part in a chaplaincy review last year said that the chaplain made them feel more hopeful**

