

23rd April 2013

Susan Davis
request-154338-a4a41e48@whatdotheyknow.com

Dear Ms Davis,

Further to your request for information received on 25/03/2013 and allocated reference number **FOI - 2013 - 1443** please find below our response to your questions.

Questions

I would like to request the following information on standards, policies and procedures relating to hospital chaplains in your Trust.

Could you please:

1. Tell me whether policies or procedures exist to:
 - a) Establish whether a patient admitted to any of your hospitals does or does not wish to receive contact from a hospital chaplain
 - b) Ensure that patients (or their visitors, next-of-kin etc.) do not receive unsolicited contact from chaplains
 - c) Safeguard patients' personal and medical data such that hospital chaplains by default do not have access to it
 - d) Ensure that hospital chaplains, when given access to patient data, do not share any of it with third parties

If you answered yes to any of the above, please could you provide me with copies of the relevant policies or procedures.

2. Outline your approach for monitoring adherence to the policies and procedures above
3. Provide me with a summary of the results of this monitoring for the last five years, including rates of compliance with the policies and procedures, and severity of any non-compliance events
4. Provide me with details of any action taken in respect of any non-compliance identified (e.g. tightening of procedures, disciplinary action – in the latter case, taking care not to disclose any personal information).

Response

Question 1

- a) No policies specifically cover this. Patients/carers should be asked about their religious beliefs as part of the initial nurse assessment carried out during the admission process. Also, they should be asked if they have any specific worship needs so that they can be provided with information about what resources are available on site at Alder Hey. This is also done so that staff can remain alert and aware of any special requirements which may need to be taken into consideration during the patients stay at Alder Hey (e.g dietary requirements, religious / cultural observances). If a patient or carer wishes to see a chaplain, or wishes to know of the arrangements in place to make contact with the chaplaincy, this can be discussed if requested, but would not be necessarily be initiated by our staff.

Normally ICU, staff do tend to offer spiritual care assistance to families when children are in very desperate situations. Staff would certainly not offer contact with a chaplain, unless requested, but equally, they would not record that a family had specifically requested not to receive contact. Our Bereavement policy and pathways include notification of the chaplaincy department in the event of a death at the hospital, but this does not trigger a visit by the chaplain, unless the family have requested to see one. A conversation will usually take place with the Bereavement Care Team or nurse caring for the child and family, asking the family if they would like to see a chaplain. An offer will also be made to contact the family's own religious leader, or a religious leader from a faith not represented by our chaplaincy team. The reason for the chaplaincy team being notified, is more about keeping them well informed, so that they are then able to anticipate the potential need, and be aware that other children and families may be affected by the death of a patient, and may want to see a chaplain. They also don't want to inadvertently arrive on a ward without prior knowledge that a death has occurred.

- b) Our chaplains may be present on wards and strike up conversations with families who have not requested a specific visit by a chaplain, but this would be done in the context of polite and social conversation, rather than a religious one. Our chaplains are a friendly bunch, and will, at times chat to people. However this is not considered to be unsolicited contact.
- c) Even in the event of a death in hospital the patient's medical information would not be made available to chaplains. They would receive the patient name and probably age, but any corresponding medical data concerning that patient would only be available if the family chose to share it with a chaplain.
- d) By Law, chaplains are bound in the exact same way as all other health care staff/professionals are bound in terms of confidentiality. They would only share information with third parties if it was at the request of the family concerned.

Questions 2, 3 and 4.

As there is no specific policy in place, no monitoring has taken place during the last five years. One of the designated duties of Chaplains is to ensure that, in the event of the death of a child, families do receive, as is required, on-going support after they have left the hospital. This service may be provided by chaplains, if requested by the family, or via other community based services, or directly provided by our own Bereavement Team. In circumstances where the Bereavement Team are not involved in on-going support, they will usually know who else has been made responsible for supporting the family, therefore some records may be held in relation to the family.

If you have any queries about this response or wish to discuss your request further please contact the Information Governance team.

If you are unhappy with the response provided, you are entitled, under the Freedom of Information Act to request an internal review.

Yours sincerely,

Information Governance Team
IM&T Department

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