

# The SCA Difference: An Open Letter to Health Care Executives

Dear Health Care Executive,

As the Spiritual Care Association (SCA) marked our one-year anniversary, on April 11, 2017, we're excited to share with you our progress to advance professional chaplaincy and the spiritual care field. These developments provide unprecedented opportunities for the current and future chaplains on your staff to secure board certification based on evidence-based knowledge and observable clinical skill. We hope you'll agree that this bodes well for health care professionals, health care settings, and those you serve. After all, isn't optimal care what we all desire?

Our innovative approach features the first objective, comprehensive evidence-based model that defines and tests for the provision of high-quality spiritual care. **How do we know our chaplains will deliver competent, value-added care? We know because our process is based on evidence-based quality indicators for spiritual care and an internationally vetted scope of practice.**

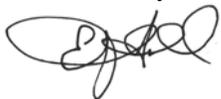
Today, evidence-based chaplaincy is coming into its own. Chaplains are taking our standardized clinical knowledge test and standardized patient exam—objective tests that ensure demonstration of clinical competencies and put the profession on par with other disciplines. Using this model, we've begun certifying chaplains—both chaplains who meet SCA's requirements and those currently certified by other organizations. The applications for SCA's board certification have been steadily increasing.

So, why encourage chaplains on your staff to pursue SCA's BCC, and, when hiring, look for and accept chaplains with these credentials? Simply, a chaplain with SCA's certification brings value to your organization because:

- Our certifying process is grounded in evidence-based knowledge and practice.
- Certification features the only standardized clinical knowledge test in health care chaplaincy and a standardized patient exam, which assesses communication and other skills as well as "human touch." Both are objectively scored.
- The evidence-based knowledge, which is tied to quality indicators and competencies, establishes what chaplains should be doing to provide evidence-based quality care and impact outcomes.
- Our online training and test prep course are available to bring chaplains up to the level of competence that you would hope for in this demanding health care environment.

You can learn more about our approach at [www.spiritualcareassociation.org](http://www.spiritualcareassociation.org). In the months ahead, we look forward to more and more chaplains becoming certified by SCA, demonstrating that they have the knowledge and clinical competencies we require—and that we know will bring value to your organization. Fully committed to this process, we believe the care of our patients and their families depends on this. As we have from our start, SCA welcomes insights and suggestions from the field. With this, we—and our profession—will continue to evolve.

Sincerely,



Rev. Eric J. Hall  
President and Chief Executive Officer

P.S. In addition to chaplains, who are the spiritual care specialists on the interdisciplinary team, we believe that other health care professionals, including physicians, nurses, and social workers, should be trained to provide basic spiritual care. For an overview, please read our recently released white paper entitled "Spiritual Care: What It Means, Why It Matters in Health Care" at [www.healthcarechaplaincy.org/spiritualcare](http://www.healthcarechaplaincy.org/spiritualcare)

# The SCA Difference: Education

By The Rev. Sue Wintz, MDiv, BCC

The value of any health care service is increasingly determined and reimbursed by the quality of that service rather than the volume of services that are produced. Determining quality of care rests on having an agreed set of quality indicators, the metrics that indicate the degree of quality present, and tools that reliably measure those metrics.

Education for professional chaplains is essential to produce better and more effective spiritual care that meets the needs of patients, families and staff. Current chaplaincy education processes include some of the same elements: group process, verbatim, discussion of patient interactions, and didactic. However, what is taught—particularly in the didactic knowledge area—varies widely depending upon the setting and the clinical pastoral education supervisor who designs the training.

Other than the Spiritual Care Association (SCA), no organization has engaged in the development of standardized education or worked to provide a basis for standardized chaplaincy care. The SCA Learning Center is unprecedented in that it is the first and only chaplaincy organization to develop standardized education based on Quality Indicators and Scope of Practice documents. The courses are developed from a core knowledge document identified from international guidelines, and research and tools that are evidence-based, providing learning and skills that are in-depth and consistent.

As a result, for the first time within the profession, SCA's education ensures that chaplains are trained in a set of competencies that are reliable and grounded in research to provide value-added care. This education prepares chaplains for the first and only evidence-based knowledge test in health care chaplaincy as a required part of their certification process through SCA.

As part of its uniqueness, the SCA Learning Center also offers courses for professionals in other disciplines, including social workers, nurses, physicians, therapists, and patient

Needs to Know About Spiritual Care.”

In addition to offering the courses directly, SCA also makes the curriculum available to other chaplaincy organizations and clinical

**Quality Indicators: [www.SpiritualCareQualityIndicators.org](http://www.SpiritualCareQualityIndicators.org)**

**Scope of Practice: [www.SpiritualCareScopeofPractice.org](http://www.SpiritualCareScopeofPractice.org)**

advocates, who desire to integrate spirituality and an understanding of the expertise of chaplains into their scope of practice as spiritual care generalists.

To meet the needs of participants regardless of their geographic location, SCA education is web-based, offering both self-directed and, most recently, several instructor-led courses. Each course is written by a recognized subject matter expert from a variety of health care disciplines, including chaplaincy, medicine, social work, nursing and psychology. Students receive reading materials, videos, study guides, and additional resources for each course. Every course contains requirements that students must meet to successfully complete the course to receive credit.

To meet the fast-changing demands of health care, the SCA Learning Center is constantly developing new courses and updating existing courses in response to new evidence and requirements in order to provide the best knowledge base for quality care to patients, families and staff. In response to student requests, four of the self-guided courses are now available as instructor-facilitated cohorts in which students participate in a collaborative learning environment: “Care for All: Cultural Competence, Inclusion, and Vulnerable Populations”; “What We Hear and Say: Spiritual Assessment and Documentation”; “Value, Obligations and Rights: Health Care Ethics”; and “What Every Health Professional

training programs that desire to standardize their training according to the Quality Indicators and Scope of Practice documents.

According to evaluation feedback, students have praised the courses’ foundation in evidence and thoroughness in covering the topics. They have also welcomed the ancillary materials for the courses.

One chaplain, for example, who was enrolled in “When Care Is Tough: Supporting the Interdisciplinary Team,” said: “While I greatly appreciated the skills and knowledge I learned to provide more effective support to staff, I really liked the opportunity to read the various articles and material. I found the material intellectually stimulating and inspirational for my profession.”

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**The Rev. Sue Wintz, MDiv, BCC,** is director of education at the Spiritual Care Association; director, professional and community education at HealthCare Chaplaincy Network (HCCN); and the managing editor of HCCN's online journal, *PlainViews*®. She has more than 30 years of experience as a professional chaplain, consultant, educator, writer, and community leader. She is a past president at the Association of Professional Chaplains and the recipient in 2013 of its highest honor, the Anton Boisen Professional Service Award.

# The SCA Difference: **Certification**

By **The Rev. George Handzo, BCC, CSSBB**

The SCA certification process breaks new ground in health care chaplaincy certification. It shifts the basic paradigm of certification from who one trained with, for how long, and in what particular subjects to whether the chaplain has the knowledge and skills necessary to deliver quality, value-added spiritual care.

The process features the first and only evidence-based knowledge test in health care chaplaincy. The test was developed after a lengthy process, including two international panels of interdisciplinary experts who used current research to develop the first set of evidence-based Quality Indicators for spiritual care and the first evidence-based Scope of Practice for health care chaplaincy. These documents then guided the writing of a core knowledge document that, in turn, generated the questions on the test. Thus, every question on the test maps to at least one evidence-based quality indicator.

The second major innovation is the clinical test that, for the first time, uses Zoom remote video conferencing to enable candidates to interview a simulated patient and have that interview scored according to a set of objective

criteria. This standardized patient exam replaces the use of a chaplain's written self-report of a patient interview as the mechanism for determining clinical competence. It enables evaluation of the non-verbal as well as the verbal components of the visit. Finally, since the testing is done completely online, it is fully available to candidates for whom attending a live committee interview would be a significant barrier.

Other than SCA, current chaplaincy certification processes are based on a long-accepted set of training requirements and a highly subjective evaluation process. However, there is currently no evidence that any particular set of training requirements for health care chaplaincy reliably produces chaplains who add value to patient care. For instance, we do not know how much clinical training is optimal. More than likely, it will vary from individual to individual but that theory is untested. Thus, any claims that any set of requirements is a gold standard or best practice based on a set of training requirements is unsupported.

However, what we can do as a profession is establish what constitutes

competence and then test for that competence. This is the goal that the SCA certification has set for itself. SCA engaged in an extensive process resulting in the first Quality Indicators, Scope of Practice, core knowledge document, and evidence-based testing that will increase the focus on competence. As a process that is highly objective, the extent to which this procedure produces competent chaplains will be measurable, and the tests are quickly adaptable to new evidence and to the fast-changing requirements of the health care context.

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**The Rev. George Handzo, BCC, CSSBB**, is the director of credentialing and certification at the Spiritual Care Association; and director of health services research and quality at HealthCare Chaplaincy Network. He has authored or co-authored more than 50 chapters and articles on the practice of spiritual care and chaplaincy care. He is a past president of the Association of Professional Chaplains, which in 2011 awarded him the Anton Boisen Professional Service Award.

## What Makes CPE.org Click?

By **Rabbi Maurice Appelbaum, BCC, ACPE**

Clinical Pastoral Education (CPE) has been a fundamental element of pastoral training for seminarians, clergy and chaplains for nearly a century. CPE teaches students of a diversity of faiths to offer spiritual care to a multi-faith population in a manner that is authentic to their own beliefs while respecting and being present to their patients' faiths.

For nearly its entire history, CPE was taught exclusively at physical sites for both its academic and clinical components. But, it had become increasingly clear that some prospective students needed a different approach to achieve their educational and professional aspirations.

Many don't live near local CPE centers and would have to uproot

their families in order to enroll in CPE. Others already work as chaplains in some capacity and desire CPE for board certification, but cannot afford to leave their jobs and volunteer at a CPE center.

To address this, HealthCare Chaplaincy Network (HCCN) introduced CPE.org in May 2016 in line with the newly created distance learning standards of the Association for Clinical Pastoral Education, Inc. (ACPE), [www.acpe.edu](http://www.acpe.edu). HCCN is accredited to offer Level I/Level II CPE by ACPE.

What makes CPE.org different? Its distance, online academic study is built around convenience and accessibility, and, moreover, incorporates a standardized, evidence-based curriculum.

With CPE.org, students video conference for the majority of the educational hours, including group process and supervision, and also take self-guided online courses. They then perform clinical hours at local facilities.

So far, more than 100 students from across the U.S. have participated in CPE.org. These include aspiring chaplains like Sheila. After Sheila left her church ministry in Mississippi, she felt a calling to become a chaplain. The closest CPE center was a four-hour drive. She had scouted out apartments where she would live during the week, away from her husband and two sons. Days before she signed the lease, she found CPE.org.

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**Rabbi Maurice Appelbaum, BCC, ACPE**, is director of CPE.org, and coordinator of chaplaincy and education at HealthCare Chaplaincy Network.