



Dear Member,

I've been asked to write to you on behalf of the AHPCC Executive to give an update on ongoing discussions regarding the future of the AHPCC.

At the AGM of the AHPCC in May 2024, the members present gave permission to the Executive not to run a conference in 2025 but instead, to gather information to present back to members on the possibility of becoming part of the College of Health Care Chaplains (CHCC). This was in response to changes in the national landscape of hospice and palliative chaplaincy, including the redundancy of several of our colleagues. The Executive felt that the membership also sensed our association's vulnerability to continue as a distinct grouping of chaplains, maintaining an Executive committee, organising a conference and generally existing in the way that we have done for over 30 years.

My personal experience of being an AHPCC member since 1999 has been one of support, encouragement and care. The association has been a backbone for my personal development as a hospice chaplain and I am deeply grateful for all that I have received through being part of AHPCC. Our work has changed beyond recognition during my years of working and we should be proud of the progress made to transform our place at the healthcare table from being 'people having a go' to being a trained, registered and professional discipline within healthcare. Our conferences, regional groups and opportunities for networking with each other have been invaluable. The work of the Executive group over the years has enabled our members to come together and connect with inspiring content at conference, as well as steering the association in a positive direction.

As part of the Executive's discussion, a short life working group of elected members – Ali Pandian and Martin McGonigle - and a co-opted non-executive member - Jo Hird - was formed to focus on this specific issue and report back. Jill Thornton proposed to the Executive that I join the group given my experience of working with the national chaplaincy bodies concerned.

Background of the discussion

The AHPCC held its first meeting in 1989 with 8 members. The AHPCC currently has 111 members - 96 Full and 15 Associate. This can be further broken down into the following working types: Full Time – 48, Part Time – 45, Voluntary – 18. For several years, the main focus of the AHPCC Executive has been arranging the annual conference. This is time consuming and not always cost effective. Recently questions have been raised about the purpose of the AHPCC, fuelled by situations where colleagues have faced job uncertainty. These questions have prompted the Executive to consider the future form of the AHPCC and how to best serve its members. They have felt for a while that our ability to maintain the current position is under pressure, hence these explorations and the desire to know the mind of the membership.

The Executive met in November, after relevant information had been gathered, to decide a way forward. They feel that our association has two choices:

Option 1. AHPCC continues in its current form.

Option 2. AHPCC becomes a Forum Group within CHCC.

Option 1 consequences:

Nothing changes. AHPCC continues to be a separate body of specialist hospice and palliative care chaplains which organises a national conference, regional support groups and education/training opportunities and is autonomous regards finance, governance and organization.

The Executive agreed that this way forward is possible but vulnerable in terms of falling membership numbers, which has a financial impact. Furthermore, it has proved difficult to recruit to the Executive due to individual's chaplaincy workload and therefore, hours available to chaplains to share the workload of the Executive. Organising the conference has been historically challenging, but we also recognise the value in gathering together as a distinct/specialist chaplaincy body. If this

choice is the preferred option, the membership would need to be fully committed to enable this to succeed.

Option 2 consequences:

To give a picture of what this option could look like, here are details of how the Mental Health Forum operates within CHCC. The process would be the same for AHPCC should members decide to proceed with this option. I'm grateful to Simon Harrison and Andrew Williams for the following information.

The Mental Health Chaplains' Forum has been under the umbrella of the CHCC for several years. CHCC is part of UNITE union and currently has 690 active members and 57 retired members. There were roughly 80 members attending the CHCC conference on a residential basis this year, with a further 20 attending as day delegates.

The Forum is organized by a Task Group, (a near-equivalent to our Executive) which currently has 9 members, with only the Chair and the Secretary required for meetings/decision making. The Forum has no Treasurer as the wider CHCC arrange conferences, fees etc. This Task Group is elected at their AGM, which normally happens annually, during the CHCC conference. The Forum Chair is automatically co-opted onto the CHCC national steering group (called, perhaps confusingly, the Organising Professional Committee or OPC). Currently the OPC Chair (President) and two OPC vice presidents (nominated from within the OPC) all happen to have significant Acute *and* MH experience.

The intention is to maintain such diversity in the President/vice president roles going forward. It has been suggested that this model would be extended to the AHPCC if they were to join, both with the AHPCC chair automatically co-opted onto OPC and seeking hospice/palliative care specialist knowledge among the President/Vice president make up.

Other benefits and features of the Mental health Forum as part of CHCC include:

- Members of the Mental Health Forum pay no separate admin fees and have full access to CHCC admin support for mass mailings and assistance with booking UNITE meeting rooms.
- The Forum has a section on the main CHCC website, and all tech support and costs are provided through CHCC.
- There are no regional group structures in for the Mental Health Forum. The OPC has no sub committees (which is why the MH Forum is named as such), but each regional representative is free to establish regional groups crossing all specialties. Simon Harrison could see no reason why our regional groups could not continue, as there are no hard and fast rules. The College also blends into regional collaboratives (an initiative set up in 2003 by NHS England in some areas) and is not precious about how these are labelled, as long as people get together and support each other. E.g. about 70 people meet in a Manchester collaborative.
- The Mental Health Forum runs regular open sessions on Teams, to which all CHCC members are invited, as well as a culture of openness beyond those within CHCC.
- The theme of the CHCC annual conference must always be one that is also applicable to MH Chaplains; sometimes with an explicit strand allowing MH chaplains to follow a parallel set of events.

In addition CHCC members have free access – both as contributors and readers – of The Journal of Health and Social Care Chaplaincy; an independent peer-reviewed, international journal, that assists health and social care chaplains to explore the art and science of spiritual care within a variety of contexts. Access to this resource is of significant benefit if someone does not have access to an academic library.

UNITE are a non-striking union and they played a significant role in establishing the current banding for NHS chaplain's pay scales. In the economic context of uncertainty and cuts, they've

proved an invaluable resource for chaplains experiencing management decisions, harassment and budget cuts.

Current membership rates are as follows:

Full-time waged members (over 21 hours) £17.20 p/m,
Part-time members (21 hours or less) £10.80 p/m.
Retired members pay £2.38 p/m and unwaged pay £2.60.

When calculating 'low pay' rates- Unite take into consideration all income- (not just that earned through chaplaincy). All the rates are set by Unite as standard.

At present, and unlike some groups, CHCC does not ask for an additional levy from members – and relies on a percentage of UNITE's membership fee.

Where do we go from here?

These are the choices as the Executive sees them at present. At their meeting in November the committee felt strongly that this conversation needs to be continued among our wider membership before any proposal is brought before our AGM in May 2025 and therefore a period of consultation was decided upon.

Although the Executive felt that it would be wrong for them to try and unduly influence the membership decision in one way or another, they also voted on a proposal – as custodians of the AHPCC - that considering the situation we now find ourselves in and the structure of our proposed place within the CHCC, that it is: 'their considered view that the AHPCC would benefit from becoming part of the CHCC/UNITE'. This was accepted as a majority decision, with one abstention.

Therefore, over the coming months please think about these two options, discuss them with your AHPCC colleagues and send your views to secretary@ahpcc.org.uk

The Executive meets again in February and would hope to have your response by January 31st.

Following this consultation, an online AGM will take place in May (date TBC) and a decision made by the membership.

Finally, at the November meeting the Executive explored the financial situation over the coming year and decided it was not appropriate to suspend membership for 2025. There were two key reasons for this:

- (i) because to do so might appear to pre-empt any decision by the membership regarding our decision whether to join CHCC or not (i.e. suspending subs assumes AHPCC will be winding down);
- (ii) we will not be able to cover our running costs for the following year without the subscriptions. Should the membership decide to join CHCC the Executive have some options for the membership to consider with any residual funds. We're sorry for any confusion and inconvenience this may have caused. Please remember that there is an option to pay by standing order if this would support your financial management.

My apologies for this being such a lengthy letter but the Executive felt it right that the wider membership have as much information as they need before a decision can be made. Thank you for taking the time to read and think about this important next step.

With warm regards,

Karen Murphy
Former President, AHPCC