



Narrative Statement II – Board Certification

- The Narrative Statement II document should note how the Applicant meets each of the Common Competencies required for certification.
- Applicants who have had previous interviews will need to address recommendations from previous Presenter’s Reports Part II. (See last page)
- Please follow the document formatting instructions:
 - **The Narrative Statement II document may not exceed sixteen (16) pages.** This includes your response, this instruction page, and the headings. (Applicants who have had previous interviews may add one page to the page count for a total of seventeen (17) pages.)
 - The template text (Instructions, Competencies, Writing Guide) must not be altered by the Applicant.
 - All written text must be formatted in single-spaced, 12-point type (Arial, Garamond, or Times New Roman), with one-inch margins (CP131.3). This template is already formatted to meet these requirements.
 - Applicants must provide responses using this template; responses are to be typed into the fields marked with brackets: []. If text is copied/pasted into the bracketed area, be sure to retain a 12pt font and delete extra blank spaces to stay under the required page limit.
 - Before submitting this document to the NACC, the document must be converted to PDF and the file name updated with the Applicant’s last name and first name.

Listed below is a grid which shows which Competencies will be addressed in this essay:

	Integration of Theory and Practice (ITP)	Professional Identity and Conduct (PIC)	Professional Practice Skills Competencies (PPS)	Organizational Leadership (OL)
Common Competencies	ITP1 ITP5 ITP2 ITP6 ITP3 ITP4	PIC1 PIC5 PIC2 PIC6 PIC3 PIC7 PIC4	PPS1 PPS5 PPS9 PPS2 PPS6 PPS10** PPS3 PPS7 PPS11** PPS4 PPS8	OL1 OL4 OL2 OL5 OL3

** PPS10 and PPS11 are also addressed in Spiritual Care Encounter.

Writing Guide

The writing guide is designed to provide a clearer understanding of each Competency and what your Interview Team will look for when reading your responses. As you write, please keep these thoughts in mind:

1. The Narrative Statement provides an opportunity for you to articulate the theory and/or theology and practice that you have developed through your education, formation, training and experience.
2. Your Interview Team will look for ministry examples to demonstrate you meet the Competency.

APPLICANT NAME:

INTEGRATION OF THEORY AND PRACTICE

The primary emphasis of these competencies is your theory and its congruence with your provision of spiritual care.

ITP1: Articulate an approach to spiritual care rooted in one's spiritual tradition and integrated with a theory of spiritual care.

Describe your practice of spiritual care in terms of your own spiritual tradition. Describe at least one theory of spiritual care that you apply in your practice. Provide at least one example demonstrating how you integrate your caregiving with your stated approach.

ITP2: Provide spiritual care that incorporates a working knowledge of an academic discipline that is not explicitly religious/ spiritual (e.g., psychology, sociology, anthropology, history).

The social sciences (e.g., psychology, sociology, anthropology, history) provide lenses into aspects of religion and spirituality such as beliefs and practices, affiliation, symbols, and rituals. Articulate at least one insight into spiritual care that you have gleaned from an academic discipline that is not explicitly religious/spiritual. Provide at least one example of how you incorporate this insight into your understanding and work with the religious/spiritual affiliation(s), practice(s), and/or belief(s) of your care recipient(s).

ITP3: Incorporate the spiritual and emotional dimensions of human development into one's practice of care.

The cognitive, emotional, social, and spiritual dimensions of the human person develop over time. Articulate at least one framework for understanding human development. For each of two distinct stages of human development described by that framework, give at least one example showing how your spiritual care differs, depending on the care recipient's developmental stage.

ITP4: Incorporate a working knowledge of at least one ethical theory appropriate to one's professional context.

Describe at least one ethical framework (e.g., consequentialism, biomedical ethics, virtue ethics, deontology), and provide at least one example demonstrating how you apply that framework in your ministry.

ITP5: Articulate a conceptual understanding of group dynamics and organizational behavior.

Essential to the provision of effective spiritual care is an understanding of how people interact in groups. Describe a conceptual framework that interprets and predicts how individuals function in groups (e.g., as

members of a team or a family) and how groups function in larger organizations (like hospitals or prisons). Illustrate this framework with examples from your ministry.

ITP6: Articulate how primary research and research literature inform the profession of chaplaincy and one's spiritual care practice.

Summarize a published peer-reviewed report of primary/clinical research and provide an example of how the cited study has influenced your ministry of spiritual care.

PROFESSIONAL IDENTITY AND CONDUCT

The primary emphasis of these competencies is your understanding of your professional identity and how it influences your conduct as a spiritual care provider.

PIC1: Identify one's professional strengths and limitations in the provision of spiritual care.

Awareness of how one's strengths and limitations impact one's actions is critical to the provision of spiritual care. Analyze your strengths and limitations with examples of their influence on your ministry.

PIC2: Articulate ways in which one's feelings, values, assumptions, culture, and social location affect professional practice.

Your feelings, values, assumptions, culture, and social location (e.g., race, ethnicity, class, gender, sexual orientation, age, disability, nationality, immigration status) affect the spiritual care you provide. They also can serve as resources. Identify some of the feelings, values, assumptions, and aspects of culture and social location that influence your ministry. Illustrate how each impacts your professional practice.

PIC3: Attend to one's own physical, emotional, and spiritual well-being.

To provide effective spiritual care for others, one must practice holistic self-care. Provide one or more examples of how your boundaries, practices, and/or relationships promote your physical, emotional, and spiritual well-being. Include how you integrate "head and heart," and how you search for and respond to what you hold sacred.

PIC4: Respects the physical, emotional, cultural, and spiritual boundaries of others.

Competent spiritual care requires identifying and respecting the boundaries your care-recipients set. Provide an example of each of the following types of boundaries as set by a care-recipient: 1) a physical

boundary; 2) an emotional boundary; 3) a cultural boundary; 4) a spiritual boundary. For each example describe how you respected that boundary.

PIC5: Use appropriately one's professional authority as a chaplain.

Authority, appropriately engaged, is an inherent dynamic in your role as a spiritual care provider. Identify at least one legitimate source of your authority as a chaplain. Give an example of when you drew on that authority to serve the institution that employs/employed you as a chaplain. Then give an example of when you drew on that authority to stand up to the institution that employs/employed you as a chaplain.

PIC6 Advocate for the persons in one's care.

Advocacy – including knowing when and how to advocate -- is central to the provision of competent spiritual care. Provide one or more examples that illustrate how you speak up for the needs of your care recipients.

PIC7: Function within the APC/NACC/NAJC Code of Ethics.

Members of the APC, NACC, and the NAJC are obliged to comply with the Code of Ethics for their respective associations. Cite at least one section/subsection of the NACC Code of Ethics and illustrate how you comply with that norm.

PROFESSIONAL PRACTICE SKILLS

The primary emphases of these competencies are your skills in providing spiritual care.

PPS1: Establish, deepen and conclude professional spiritual care relationships with sensitivity, openness, and respect.

The ability to connect spiritually with care-recipients while engaging them with sensitivity, openness, and respect is essential to developing rapport and building relationships, especially as they evolve over time. Provide an example of spiritual care over the course of at least one relationship that demonstrates a blend of sensitivity, openness, and respect in three phases of the relationship: at the beginning/establishing; in the middle/deepening; at the ending/concluding.

PPS2: Provide effective spiritual support that contributes to the wellbeing of care recipients, including patients (or the relevant analogue in a non-healthcare setting), their families/friends,

and staff.

Demonstrate your understanding of "effective spiritual support" and "well-being" by articulating at least one desired outcome of your spiritual care and hypothesizing how your ministry contributed to the outcome(s). Provide three examples: 1) one involving a patient (or inmate, student, service member, frontline worker, etc.); 2) another involving the patient's (or analogue's) family/friends; 3) a third involving institutional staff (e.g., nurse, doctor, guard, support staff, management).

PPS3: Provide spiritual care that respects diversity, relative to differences in race, culture, gender, sexual orientation, etc.

Competent spiritual care respects diversity and requires chaplains to serve others with cultural humility. Illustrate your openness to and honoring of the self-understanding of care recipients who differ not only from you but from one another by providing examples of your care to: 1) two or more care recipients whose racial identities differ from one another; 2) two or more care recipients whose cultural identities differ from one another; 3) two or more care recipients whose gender identities differ from one another and 4) two or more care recipients whose sexual orientations differ from one another.

PPS4: Triage and manage crises in the practice of spiritual care.

Chaplains often face multiple needs, including crises, at the same time. Describe at least one moment at which you accurately assessed there to be competing spiritual-care needs; then describe how you prioritized/ranked them appropriately; then how you took effective action; and finally, how you realistically evaluated the outcomes of those choices.

PPS5: Provide spiritual care to persons experiencing loss and grief.

Loss and grief are universal phenomena and part of what it means to be human. Explain your understanding of loss and grief, including how experiences of loss/grief are wider than death per se. Illustrate by example how you model best practices in offering support for loss and grief.

PPS6: Provide religious/spiritual resources that are appropriate to given care recipients, their spiritualities/religions, their contexts, and their goals

Provide one or more examples of providing a care recipient with a religious resource (e.g., text, object, service, ritual, prayer, song, meditation). Explain the rationale by which you intentionally selected the resource, given the care recipient's particular spirituality, circumstances and hopes or goals.

PPS7: Develop, coordinate, and facilitate public/ semi-public liturgy appropriate to a range of settings and needs.

People of diverse religious/spiritual traditions may engage their spirituality privately and/or by gathering in community to worship the Holy as they understand it. Give at least two examples—different both in terms of setting and need addressed—of your leading a ceremony/service within your institution but beyond one family of care recipients (e.g., a memorial, worship, weekly meditation sessions, prayer service). In each example, describe how you selected/designed the service/ceremony, how you organized/ publicized the particular service/ceremony, and how you officiated the particular service/ceremony.

PPS8: Facilitate care recipients' own theological/spiritual/ philosophical reflection.

Facilitating a care-recipients' own theological/spiritual reflection can lead the person to increased understanding and insight. Provide at least one example of how you facilitated a care recipient's reflection. Include the following in your example: how you helped the care recipient access his/her spirituality or beliefs to find meaning in the person's lived experience; and/or how you helped the care recipient probe his/her lived experience to reveal new meaning in his/her spirituality or beliefs.

PPS 9: Facilitate group processes in the provision of spiritual care.

How do you facilitate spiritual care through group processes? Provide examples of your active participation as a spiritual-care provider in group settings (e.g., support group, intra-family meeting, staff-family meeting, after-trauma care, team debriefing, interdisciplinary rounds).

PPS10: Make and use spiritual assessments to inform chaplain interventions and contribute to interdisciplinary plans of care.

Illustrate how you have (1) used a spiritual care assessment to determine a plan of care; (2) taken an intentional spiritual care action informed by that assessment; and (3) shared at least some aspect of your assessment with at least one non-chaplain member of the care recipient's interdisciplinary team. In describing your spiritual assessment, include evidence of the care recipient's main spiritual concern, history of his/her present spiritual concern, and past history of spiritual distress, and/or your review of at least one spiritual system/resource for conducting spiritual assessments.

PPS11: Document one's spiritual care accurately, cautiously, and usefully and in the appropriate records.

Documentation of your spiritual care is one way to facilitate interdisciplinary communication. Illustrate the accuracy, caution, and usefulness of your documentation by providing at least one example (actual or

hypothetical) of on-the-record documentation of a spiritual-care encounter (e.g., a note in the electronic healthcare record, an email handoff to a chaplain colleague, a progress note in the chaplain's log). Describe your rationale for what to include in the given example of documentation (e.g., what policies require, what is relevant to the interdisciplinary team) and what not to include (e.g., language beyond the chaplain's scope of practice, superfluous details).

ORGANIZATIONAL LEADERSHIP

The primary emphasis in these competencies is your ability to lead within the setting(s) in which you provide spiritual care.

OL1: Promote the integration of spiritual care into the life and service of the institution in which one functions.

State the mission of the institution (e.g., the hospital, the prison, the university) where you serve as chaplain. Describe how your ministry has supported that mission. Include at least one example of a positive, intentional activity you have undertaken to deepen, widen, or elevate the role of spiritual care in that institution.

OL2: Establish and maintain intradisciplinary and interdisciplinary relationships.

Illustrate by example how you have begun and sustained relationships with chaplain colleagues and with non-chaplain colleagues.

OL3: Understand and function within the chaplain's institutional culture and systems, including utilizing business best practices appropriate to one's role in the organization.

*Reflecting on the institution where you serve as chaplain (e.g., hospital, prison, university), identify at least one of its **systems** (e.g., organizational structure, compliance, risk management, human resources, branding/ marketing) and at least one aspect of its **culture** (i.e., its characteristic norms, attitudes, beliefs, habits, values, etc.), and describe how you function within them. Illustrate by example how you embody best practices of management (of self and/or others), administration, and/or customer service.) appropriate to your role in the institution.*

OL4: Advocate for and facilitate ethical decision-making in one's workplace.

Professional organizations define and abide by a set of ethical principles. Give an example of how you have encouraged members of your organization to consider ethical principles in making a particular choice. (i.e., advocated for ethical decision-making). Give another example of how you have assisted in the actual

process of discerning and applying ethical principles to a particular choice (facilitated ethical decision-making).

OL5: Foster a collaborative relationship with community clergy and faith group leaders.

As a spiritual care provider, you serve as a liaison, connecting care-recipients to their spiritual/religious communities. Provide one or more examples of how you have collaborated with spiritual leaders outside of your institution to serve care recipients within the institution.

FOR APPLICANTS WHO HAVE HAD PREVIOUS INTERVIEWS

List the recommendation(s) made to the chaplain during the previous interview. For each recommendation demonstrate your growth and progress.