

## **Spiritual Care Encounter**

## **Instructions**

- The written description is a narration that demonstrates the Applicant's competency rather than what the Applicant learned through the encounter.
- One (1) dated written description is required. It should be from the Applicant's current ministry setting
  within one (1) year of application submission. The encounter will demonstrate the Applicant's
  current level of functioning.
- Each written description must demonstrate, at minimum, these three competencies:
  - 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). A descriptive reflection and analysis should be used to demonstrate this.
  - PPS10 Make and use spiritual assessments to inform chaplain interventions and contribute to interdisciplinary plans of care. Spiritual assessment model(s) utilized within the encounter should be included to demonstrate this competency.
  - PPS11 **Document one's spiritual care accurately, cautiously, and usefully and in the appropriate records.** At the end of the written description, provide an example or narrative of spiritual care documentation to demonstrate this competency. Provide an example of spiritual care communication deemed appropriate within the Applicant's setting. **Please be mindful of HIPAA regulations**. Applications sent with HIPAA violations will be reported, as required by law.
- Other Competencies may also be demonstrated in the written description of your spiritual care encounter as long as they are clearly identified in the analysis. For example: To address PPS5, the narrative would include spiritual care to a grieving person and the narrative analysis would identify how the spiritual intervention provided effective support. PPS5 would be identified clearly in both the encounter and your theological reflection.
- The Applicant is encouraged to consult with a mentor before submission of the Spiritual Care Encounter.

## **Structure of Written Spiritual Care Encounter:**

- Part 1. Context of Encounter: What did you know about the situation? What were your personal observations?
- **Part 2. Narrative of Encounter**: Include verbatim content of the encounter: i.e. word-for-word. Also clearly identify where you met the demonstrated competencies.
- Part 3. Spiritual Assessment (PPS10): Describe the spiritual assessment model(s) you used within the
  encounter.
- Part 4: Analysis of Spiritual Care Encounter (ITP2): Clearly identify how you demonstrated this competency. Include your self-evaluation of the encounter, your theological reflection on the encounter and identified ethical considerations applicable to the encounter.
- Part 5: Documentation (PPS11): Include your spiritual care documentation of the encounter.
- Please follow the document formatting instructions:
  - The Spiritual Care Encounter document may not exceed twelve (12) pages. This includes your written response plus the 2 instruction pages.

- o The template text (Instructions) 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.
- o 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.
- Applicants must provide responses using this template; responses are to be typed into the fields marked with brackets:
- 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.

## **HIPAA Regulations**

A requirement of the Spiritual Care Encounter is to demonstrate PPS11: Document One's Contribution of Care Effectively in the Appropriate Records. The instructions indicate that the Applicant should provide an example of spiritual care documentation. This should be a narrative or explanation of the spiritual care communication deemed appropriate by the Applicant's setting. NACC certification interview teams use this information to determine if the Applicant meets the Competency. Eliminate all identifiers of the individual, their relatives, employers and/or household members from all application documents. 18 identifiers that NACC uses to check for HIPAA violations are:

- 1. Names (Both first and last).
- 2. All geographic subdivisions smaller than a state, including a street address, city, county, precinct, zip code, and their equivalent geocodes, except for the initial three digits of a zip code if, according to the current publicly available data from the Bureau of Census, (1) the geographic unit formed by combining all zip codes with the same initial digits contains more than 20,000 people, and (2) the initial three digits of a zip code for all such geographic units containing 20,000 or fewer people are changed to 000.
- 3. All elements of dates (except year) for dates directly related to an individual, including birth date, admission date, discharge date and date of death; and all ages over 89 and all elements of date (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or over.
- Telephone numbers.'
- 5. Fax numbers.
- 6. E-mail addresses.
- 7. Social Security numbers.
- 8. Medical record numbers.
- 9. Health plan beneficiary numbers.
- 10. Account numbers.
- 11. Certificate/license numbers.
- 12. Vehicle identifiers and serial numbers, including license plate numbers.
- 13. Device identifiers and serial numbers.
- 14. Web Universal Resource Locators.
- 15. Internet Protocol addresses.
- 16. Biometric identifiers, including finger and voice prints.
- 17. Full-face photographic images and any comparable images.
- 18. Any other unique identifying number, characteristic or code (This would include a patient identifying number).

It is important that all of the listed identifiers be removed, and that no parts or derivatives of any of the aforementioned identifiers be included in any of the certification application documents submitted to NACC. Applications sent with HIPAA violations will be reported, as required by law.

APPLICANT NAME:
DATE OF SPIRITUAL CARE ENCOUNTER: