

*“Enabling us to face well the reality set before us:”*

## **A Response to Tartaglia’s Proposal on Chaplaincy Education**

**Joseph F. Perez**

**D**r. Alexander Tartaglia’s “Reflections on the Development and Future of Chaplaincy Education” adequately addresses the necessity to advance the training needs of spiritual/pastoral care professionals in order to meet an evolving and ever-changing market environment. Professional chaplains must learn to delineate their roles within the milieus they serve and define the integration of their professional chaplaincy roles with other disciplines as they seek to provide holistic care. Clarity in regard to role definition is a must, and within this clarification process should emerge distinguishable measures that are not only meaningful to chaplains but to the clinicians and administrators they serve.

This response to Tartaglia’s article speaks to the need for a clear understanding of professional chaplaincy’s standards of practice. Even though the Association of Professional Chaplains (APC) and five other cognate groups came together and developed the Common Standards for Professional Chaplaincy, these standards are not used consistently or effectively. The APC recognizes the need for refinement and expansion of the standards, especially relating to research and to the business of professional chaplaincy. With regard to spiritual assessments and other common priorities of professional

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chaplains' practice, we (APC and cognate groups) must continue to work to develop best practices with intended outcomes that can be achieved. It goes without saying that these best practices have to coincide with the goals of the organizations in which chaplains serve. Also, there is a necessity to further the research and growth of spiritual pathways in acute care, long-term care, and hospice and palliative care, building on and integrating with the work that has already been done within the Standards of Practice for Professional Chaplains. Standards of practice for other specialty settings like pediatrics and mental health spiritual care will need to be developed as well.

Articulating the essential need for holistic care within the medical model will be crucial—emphasizing that healthcare organizations cannot care for the holistic health and wellness needs of patients and their families, as well as adequately meet the needs of organizational missions and responsibilities to the community they serve, without professional spiritual care practitioners. As the market forces change, professional chaplaincy's standards must adapt to continue to create value that can optimize holistic care in any environment served. As healthcare services are pushed to out-patient settings, how is professional chaplaincy adapting to meet the needs in these areas? Tartaglia writes, "Regular examination of standards of professional practice is necessary to ensure that their adaptation parallels the advancements in healthcare delivery" (p.?).

With market forces calling for evidence-based practice and performance improvement, professional chaplaincy will need a robust environment that embraces collaborative efforts with other disciplines to provide the best possible holistic care. Targeting the educational structure will make this happen. Tartaglia found that less than half of the Clinical Pastoral Education centers focus on the Common Standards for Professional Chaplaincy. This demonstrates a lack of cohesion between the Association of Clinical Pastoral Education and the Association of Professional Chaplains, but these two organizations are moving strategically to better align to face the challenging, changing healthcare environment.

I affirm Tartaglia's thoughts on refining and expanding the education of professional chaplains through research and program development, enabling us to face well the reality set before us. Curiously, this also coincides with my definition of health—living fully into the present reality.