



PROTOCOL FOR CHAPELS / RELIGIOUS SPACES WITHIN HOSPITALS IN NSW HEALTH

1.0 PROVISION OF CHAPELS

The provision of chapels/religious spaces is a vital part of holistic care of patients in NSW hospitals, and recognises that all persons are spiritual beings whether or not they adhere to a specific faith.

All hospitals shall include at least one chapel/religious space which is accessible to patients, their relatives and staff for religious services, prayer, meditation, reflection and contemplation. Chapels/religious spaces should be located in places which provide easy access for patients.

2.0 USAGE PRINCIPLE

People of any faith or none, from the hospital community, should be able to access a chapel/religious space appropriate to their needs.

3.0 FURNISHINGS IN CHAPELS

3.1 NEW CHAPELS

In constructing new chapels or providing new religious spaces within existing buildings, there should be no permanent placement of religious symbols from any one faith. However, a plain table, chairs, shelf and cupboard space should be provided. Artistic displays which are not specific to any one religious faith are encouraged to help identify the space as one set apart for religious purposes. [See note below*]

Construction and fit out of new chapels/religious spaces should be carried out in close cooperation with Chaplains Departments and representatives of different religious faiths, or where appropriate, with the Civil Chaplaincies Advisory Committee

[Note *The chapel/religious space at the Prince of Wales Hospital has no religious symbols permanently at the front, but there is a lighted glass locked cabinet with shelves where religious objects can be stored and taken out when needed for religious services. On one shelf is the Koran and a compass indicating the direction of Mecca. There is also a shelf containing a menorah donated by a local synagogue. There is a Catholic Christian shelf with a crucifix and tabernacle and a Protestant Christian shelf with a Bible and a plain wooden cross. Finally there is a small water feature representing nature type religions and Buddhism.]



3.2 EXISTING CHAPELS

Where possible consideration should be given to converting existing chapels in order to achieve the same result as described for new chapels/religious spaces.

- (a) In cases where the removal of symbols may be impractical or may impair the heritage significance of the building [for example, stained glass windows or symbols which are built into the fabric of the building] these should be retained.
- (b) In such cases the Hospital should give consideration to the provision of an additional space which can be used by those faiths which do not wish to use a designated Christian space.
- (c) Where practicable, consideration should be given to the removal of some religious symbols (e.g. Christian symbols) and their storage or replacement with symbols which can more easily be used for particular services.

4.0 CONSULTATION

It is acknowledged that different situations will arise in different locations. The adaption of hospital chapels/religious spaces to meet the needs of a multi-cultural and multi-faith society requires sensitivity to local needs. Therefore it is imperative that hospital administrations consult appropriately with chaplaincy departments in considering any changes to existing chapels/religious spaces or in providing chapels/religious spaces in new building projects.

5.0 MANAGEMENT OF CHAPELS

Management of chapels [bookings, rosters, furnishing arrangements] should be the responsibility of Chaplains Departments, in consultation with Hospital administrations. In hospitals where there is no chaplaincy department management should be undertaken by a designated staff person of the hospital who consults appropriately with representatives of different religious faiths or where appropriate with the Civil Chaplaincies Advisory Committee.



APPENDIX

The following comments and questions [which have been prepared by a multi-faith team at Prince of Wales Hospital] may be useful in reviewing the utility of an existing space or proposed new chapel/religious space.

RATIONALE

Central to the creation of a sacred space within the healthcare setting is a process of discussion with a wide range of interested individuals representing different faith traditions, no faith traditions, hospital representatives and others. If hospital policy stands for inclusion and support of people of all faiths and none, the process will be far more effective.

CONSIDERATIONS FOR THE SPACE

- Is at least one room available for worship, meditation, reflection and prayer? Is it possible to provide more than one (in the case of larger hospitals)? Is there any division within the space? Is the space truly a shared space?
- Have you considered appropriate naming of the space, furnishings and decorations? Have the connotations and meanings of the name been thoroughly considered from a variety of perspectives?
- Is the space cluttered? A multi-faith perspective says it's better to remove items than to add when converting a space. What can be removed?
- How accessible are the pastoral care offices to the sacred space? Is there some way for individuals in the space to contact pastoral care staff (for example, a phone with direct line to office, or a buzzer)?
- Is the sacred space as valued as the operating theatre? Is the space 'as integral to healthcare as the operating theatre'?
- How does the space appeal aesthetically? Is it simple? Is it beautiful? Have the colours and artwork been carefully considered? Have you considered lighting? Has symbolism been considered with integrity and authenticity? What permanent symbols can be made flexible in the space (and stored when not in use?)
- Does the space allow for regular, organised ceremonies and events, and spontaneous prayer and reflection? Are there separate spaces for simultaneous or singular use? Perhaps consider two distinct spaces; acoustically separate (larger communal space and smaller room for private reflection or discussion). Will it be accessible 24 hours per day? Is the space an appropriate size to meet the needs of the organisation? Is there an overflow area for large services that can be linked to a sound system?
- Are the seating arrangements flexible and moveable? Does the space allow for ease of access by wheelchair, walkers, beds, with IV equipment?



- Do you require access to kitchenette, sink, hot and cold water, boiling water unit, storage cupboard, microwave oven, small fridge? What about access to wash room and toilet, and room to change clothing if necessary?
- Are appropriate storage facilities provided to allow for multiple users of the space? Consider shoe storage, prayer mats, meditation cushions, accessories and equipment.
- Are there provisions for multimedia such as PowerPoint presentations? Are there suitable facilities for music? Are audio tapes/CDs of various religious and spiritual music, audio texts (for sight impaired), recitation, guided visualisation or meditation available?
- Does the space link to a courtyard, lobby or other outdoor space? Is it possible to create a garden for reflection or prayer?

MULTI-FAITH PERSPECTIVES

Best practice involves ongoing discussion with members of the various faith communities to encourage deepening interfaith dialogue and understanding; however we offer a number of questions to inspire conversation. These questions help in considering the needs of individuals and groups from local faith communities:

- Who will be using the space? What faith groups live within the service catchment area?
- Is the space welcoming to all people, inclusive and reflective of all faiths or non-faiths?
- Will the Wisdom Books be made available in the space? If displayed, are the books placed side by side, without privileging one over another?
- Will the space meet the needs of Muslim faith communities: Is the West (a few degrees north of West) wall free of figurative images? Is there a mark in the prayer room to signify the direction of Mecca? Is the room carpeted? Are prayer mats available? If permanent images, paintings or figures are in the direction of prayer, is it possible to arrange a quality “temporary” cover to be used during Muslim prayers?
- If multi-faith services are available, is a process in place that advertises the times and place?
- If alternative venues are used for prayer, is this information displayed in Chapel?

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