



BUDDHIST HEALTHCARE CHAPLAINCY TRUST



Buddhist Healthcare Chaplaincy

Caring for all

Guide for all staff and managers / team leaders to maintaining wellbeing during the COVID-19 outbreak

The following is a guide to supporting staff and patients and caring for the welfare of all beings during the COVID-19 outbreak. We offer some simple ways to provide appropriate pastoral, spiritual and religious care in each of the following stages of the present crisis:

- Initial phase: No cases and first cases of COVID-19 in the wards / units
- Core phase: Full-scale, multiple cases of COVID-19 in the wards / units
- End phase: Immediate aftermath
- Long term: Ongoing difficulties

As this pandemic has spread, we have born witness to the increasing suffering through illness and death; equally we have empathised with the joys and happiness from the acts of unconditional kindness. The need for this guide has come about as Buddhist Healthcare Chaplains begin to re-evaluate their aims of:

- meeting religious care needs of Buddhist patients and staff, their families and friends
- providing pastoral and spiritual care for all, in a variety of ways that lead to enhanced wellbeing and better healthcare outcomes

This guide may be used by healthcare chaplains of any faith or belief who may be asked to minister to any Buddhist patients, their families or friends unable to be with their loved ones during these difficult times. The guide also highlights support Buddhist Chaplains can provide at each phase of the Coronavirus crisis.



To all those suffering from or affected by COVID 19 virus

*Please be comforted that all those affected by the COVID 19 crisis
are in the thoughts, prayers, chanting and meditations
of people who may not be known to you,
but who care for you as fellow human beings*

Managers' guidance on supporting Buddhist patients and on sustaining the wellbeing of staff during and beyond COVID-19

Phases	Healthcare needs	Possible BHCT contribution to healthcare and wellbeing
Initial phase	Most volunteers were necessarily withdrawn from hospital services – limiting healthcare needs being met through BHCT chaplains.	Awareness and recognition of increased anxiety, tension, lack of certainty and emerging fear. An unfolding question on the long-term effect of fear and isolation on wellbeing.
Core phase	Multiple sick and dying patients. Bodies of the deceased to be treated with sensitivity, dignity and respect. Staff support.	Make available a ' <i>BHCT Guide to Caring for Buddhists</i> ', including prayers and readings that may be necessarily short to meet frontline needs: <ul style="list-style-type: none"> - Simple readings for well-being - Simple readings for end-of-life care - Simple funerals. Fuller guidance on needs of Buddhists at the time of death, caring for the deceased and guidelines on body washing. Development of online meditation service.
End phase	Wellbeing support for staff with exhaustion. Support for COVID-19 and non-COVID-19 patients. Needs of bereaved families.	Remote online meditation contribution to pastoral and spiritual care. Develop local Community Chaplaincy support for patients. Bereavement support. Memorial services.
Long term	Ongoing post-trauma. Reflection and learning.	Development of Chaplaincy Services with a significant contribution from Buddhism. Providing greater contribution to reflective practice and supervision.

Who cares for the carers? Throughout all phases of the COVID-19 pandemic, chaplains themselves may seek supervision and thereby be in a better place to care for others.

Background to this guidance

Trained individuals from Buddhist backgrounds have been contributing to healthcare chaplaincy across the UK in an organised manner since 2005.

As a widely diverse minority faith community, Buddhists may have different needs based upon:

- the tradition / school / group with which they practice
- their ethnicity and cultural background

It can be helpful to discuss these needs with the patient and family.

Buddhist Healthcare Chaplains share central values of their faith in common: they pay respects to the *Buddha* as a teacher, to the *Dhamma* as a teaching to be investigated and to the *Sangha* as a community of those pursuing this path. They also have undertaken to work within the 'Code of Conduct' for healthcare chaplaincy.

CARING FOR ALL – INITIAL PHASE

In the Initial Phase some of the issues staff are facing, along with the associated impact on sustaining their wellbeing, are likely to be:

- Anticipatory anxiety about what's to come
- Feeling overwhelmed, difficulty concentrating / thinking clearly
- Tensions building in working relationships
- Communication errors
- 'Readiness' burnout
- Biggest risk period
- Fear of infection, and possible implication for families
- Overwhelming workload
- Adrenalin and 'automatic pilot' mode
- Exhaustion
- Distress linked to personal or family experience of COVID-19
- Experience of fear or stigma when out in public

Many of us have not experienced 'lockdown' before and know even less about the longer-term impact of isolation and other conditions consequent upon the necessary means available to combatting COVID-19.

For some years evidence-based practice has been developed demonstrating the impact of pastoral and spiritual care interventions to support staff struggling with any of the above emotions involved. Mindfulness and Meditation can be beneficial and is available through Buddhist Chaplaincy.

'Ananda, admirable friendship, admirable companionship, admirable camaraderie is not half but the whole of the spiritual life' [Upaddha Sutta SN 45.2].

CARING FOR ALL – CORE PHASE

As healthcare settings are re-organised to cope with the virus, some short and simple Buddhist prayers and readings have been made available in the Guide below.

- Guide to caring for Buddhists: Caring for All

This Guide is offered as a gift at the time when events are at their most challenging for the NHS as the impact of the coronavirus reaches its peak.

It celebrates the actions of all those helping to save lives and it offers compassion and kindness to all those suffering and dying.

All readings are written as simply as possible, given the difficult conditions in which frontline work is necessarily being carried out in this time of crisis.

The readings offered as prayers for wellbeing or for end-of-life care may be read to the patient as many times as may be possible and can be given to family and friends unable to be with their loved ones.

Acknowledgement is made of the wide diversity of Buddhist traditions and approaches; that in less difficult times many more and varied readings, prayers and further services are available in recognition of the very different expressions of Buddhism in the UK.

Every effort has been made to ensure that the words used here are as close as possible to those of the Buddha.

Short Buddhist Prayer for Wellbeing, Prayer for Healing

Paying Respects to the Noble Triple Gem:

*I pay respect to the Buddha (teacher), to the Dhamma (teaching),
to the Sangha (practitioners of the Buddha's teachings)*

*To avoid all evil – to cultivate good
to cleanse one's own mind – this is the teaching of the Buddha*

*May you overcome all difficulties – may all illnesses subside and be eliminated
May you be protected - May you live long in good health and comfort!*

*May there be every blessing! May heavenly beings protect you!
By the powers of the Buddhas, Dhammas and Sangha,
may you always be well!*

Short Buddhist End of Life Prayer

Salutations to the Noble Triple Gem: Buddha, Dharma and Sangha!!!

Buddha taught that all life is impermanent and that all those who are born must eventually pass from this life. However, everyone has within them the seeds of their past good actions, which have the power to bring a fortunate rebirth in the future.

We pray that through the power of this virtue, through the blessings of the holy beings, and through the force of our heartfelt prayers, you will experience great good fortune and everlasting peace and happiness.

May all beings without exception be released from suffering and find true happiness!

May you go freely. May you find peace.

Short Form of Buddhist Funeral Service (this can be offered online)

This form may be used as an active service or, in the absence of a chaplain, by the person supervising the burial.

In the presence of the Body, the officiant says (with a bow as a mark of respect):

Homage to the Buddha, All Enlightened One.

Homage to the Dharma, the teaching He expounded so well.

Homage to the Sangha, four-fold community of monks, nuns and male and female lay practitioners.

We are here to celebrate together the life of <name> and to mark their passage, each of us remembering them in our own unique way.

*Whatever comes into being out of causes and conditions is sure to have its end,
its nature is to arise and pass away.*

*When what was born goes back to the unarisen
then there is calm and peace.*

We return this body which we once knew as <name> to the Earth, its true owner. As the elements break up, may the departed one find release from the turmoil of life suffering into the peace of deathlessness.

*Those who cross to the further shore are few, most people only run up and down the bank
Difficult though it be to escape, those who practice diligently according to the Truth
Will surely go beyond Death's realm.*

We wish you well on your journey.

[Bow to conclude]

- Further guidance on needs at the time of death

In these challenging times and circumstances, there are no specific practices regarding the handling of bodies or religious requirements for washing the bodies.

In more normal times, within Himalayan Buddhist traditions, steps might be taken to wash the body thoroughly before wrapping in a white cloth. A Buddhist scarf and flowers are sometimes offered. The intention behind such practices is part of handling the body with 'sensitivity, dignity and respect'; an aspiration entirely consistent with the assurance given in the guidance issued by GOV UK '*Guidance for care of the deceased with suspected or confirmed COVID-19 (31/03/2020)*'.

It is suggested that making a simple bow before a body is touched, and if the deceased is a monastic then a bow with folded hands would be appropriate.

Different Buddhist traditions have different understandings of the dying process – including the definition of the time of death and the time taken for consciousness to leave the body.

Carrying out traditional religious practices can be problematic in healthcare settings handling pandemic; encouraging the dying moment to be as peaceful as possible is helpful.

- Development of online meditation service

The availability of group meditation sessions in healthcare settings was withdrawn with the introduction of social distancing. Until then Buddhist Chaplains held open meetings for staff to develop meditation practice in the workplace, to help them cope better with stress and thrive better in the work context. Buddhist Chaplains offer one-to-one sessions with patients within a governance framework agreed with a specific department or ward.

Continuing to provide these services online, and often remotely, has been developed with due attention paid to quality assurance, safeguarding, record keeping and using video conferencing products that provide appropriate levels of confidentiality for the meetings. Pastoral / spiritual care sessions, that may include meditation practice can be delivered both one-to-one and as a group activity.

These are times when our joys and sorrows can swing rapidly; methods of meditation engaging body, heart and mind enable us to work more skilfully with our emotions to bring about a steadier balance.

CARING FOR ALL – END PHASE

- **Remote online meditation contribution to pastoral and spiritual care**

The possible benefits from online meditation are becoming more apparent in addressing many matters of wellbeing and the continued use and development of this approach into the future will be possible.

Carrying out regular service review of all aspects of this provision can further demonstrate the impact of meditation on health and healthcare and to capture the effectiveness of the adapted ways of working.

- **Develop local Community Chaplaincy support for patients**

The need for a fuller Community Chaplaincy service has been with us for some while, given the need for greater availability of healthcare support to patients within their community. COVID-19 highlights opportunities already being taken for the development of a greater community contribution from all faith and belief groups to better care for each other.

- 1) There may be the opportunity to start chaplaincy projects in the community both with:

- those individuals and their families / friends affected by COVID-19
- those individuals whose healthcare is not well supported in our currently over-stretched hospitals

For example, Buddhists have experience providing listening services in GP surgeries and delivering mindfulness programmes in the community for people with terminal illness.

- 2) Training new Community Chaplains as a follow-on from the taster introductory course 'Starting Out in Healthcare Chaplaincy'.
- 3) Carry out academic and action-based research to demonstrate the efficacy and cost effectiveness of Community Chaplaincy.

- **Bereavement support and memorial services for families and friends**

Professional services are available within NHS Trusts, often working closely with Chaplaincy teams. Other services, such as Cruse Bereavement Care, are widespread across the UK; likewise, the availability of local Death Cafes provide an opportunity for talking about end of life and the impact of death.

The phase during the COVID-19 crisis with multiple dying patients in difficult hospital conditions, results in patients dying alone and relatives being unable to say farewell.

Buddhist Healthcare Chaplains involved with end-of-life care may be asked for Bereavement support and for help with preparing and delivering a memorial service.

CARING FOR ALL – LONG TERM

- **Delivery of Chaplaincy Services with a more significant contribution from Buddhism.**

Applying Buddhist teachings and practices have the potential to transform situations of fear and danger and to restore happiness and peace. Their relevance to healthcare may be apparent through the following four qualities of body, heart and mind:

- Loving kindness: caring for oneself, caring for others
- Compassion: open to the pain of others - neither by trying to 'help' nor by turning away
- Joy: gladness at the good fortune of others
- Equanimity: a greater sense of evenness of mind

Cultivation of positive qualities of mind, through practices like mindfulness and meditation, do directly impact on the process of recovering good health and help working with suffering and ultimately dying well.

Health is the highest gain; contentment is the greatest treasure.

Confidence is the greatest friend; freedom is the greatest joy. [Dhammapada, v15]

- **Development of reflective practice and supervision contribution**

Different models of reflective practice amongst Buddhist Chaplains are used for supervision:

- The Three Wisdoms Buddhist model: Listening, Contemplating, Cultivating
- Values-based Reflective Practice (VBRP)

Buddhist Healthcare Chaplains employ these practices as part of their professional development and can lead sessions for other chaplains.

*I shall begin to practice listening deeply and speaking lovingly,
according to the way which benefits the practice and my fellow practitioners,
so that communication can be quickly restored. [Thich Naht Hahn, 2007]*

- **Resources**

A greater range of more detailed and different resources from various Buddhist traditions, schools and groups are available on <https://www.buddhisthealthcare.org.uk>

The website is developing a collection of prayers, services and rituals suitable for different healthcare and end-of-life care contexts, including from different traditions and cultures.

Please feel to contribute info@buddhisthealthcare.org.uk

CARING FOR BUDDHISTS

- Diversity within Buddhism

What is described as the 'the Buddhist community' in the UK is a wide and diverse group of individuals. Producing helpful guidelines to enable Healthcare Staff to appreciate the different nuances around culture, ethnicity and Buddhist school of practice is a major challenge.

The 248,000 people (0.4% of the population) identifying as Buddhist from the 2011 Census of England & Wales (2011) includes those with ethnic roots in the following cultures:

- Southern Buddhist: Cambodia, Laos, Myanmar, Sri Lanka and Thailand
- Eastern Buddhist: China, Korea, Japan, Malaya, Singapore, Taiwan, Vietnam
- Northern Buddhist: Bhutan, Nepal and Tibet
- Western countries: Australia, USA and throughout Europe
- Indian Buddhism
- Secular Buddhism: an increasing number of people who find aspects of Buddhism helpful

The above categories may be helpful - but may fall short for the purposes of identifying the spiritual and religious needs of someone experiencing ill health or facing death.

- Questions for a Buddhist patient

Experience has shown the value in asking some key questions of a Buddhist patient and their family or spiritual friends, whether the context is one of a possible pastoral care encounter between chaplain and patient, an end-of-life care situation or for the purposes of a funeral.

- What is the ethnicity (country, culture etc) of the person?
- Are there any specific cultural values and rituals important to the person?
- How does the person engage with spiritual practice? Is this through a specific school of meditation or through other sources of spiritual nourishment?
- What are the most meaningful aspects of the person's life?
- How does the person understand their health condition?
- How does the person understand what will happen as they die?

Buddhist Healthcare Chaplains are working in hospitals and other healthcare settings across the UK. They provide religious care and can minister in any of the services described in this guide, including online. Buddhist Healthcare Chaplains can be contacted through *Buddhist Healthcare Chaplaincy Trust* info@buddhisthealthcare.org.uk

- Buddhist Healthcare Chaplaincy Trust has worked with the NHS since 2005 as the official group within Buddhism responsible for standards in Buddhist Healthcare Chaplaincy.
- Our thanks are extended for contributions from the *Buddhist Chaplaincy Support Group*, *London Buddhist Vihara* and the *Buddhist Society* to the production of this gift.

WHAT NEXT?

What next for Buddhist Healthcare Chaplains?

- How do we go about developing and providing additional healthcare chaplaincy services?
- Building a database of our activities?
(to be available on <https://www.buddhisthealthcare.org.uk>)
- Greater engagement with healthcare, both within NHS Trust Hospitals and within the community.
- An appraisal of our personal training needs?
(Please contact info@buddhisthealthcare.org.uk with your interests)

What next for engagement with NHS and healthcare settings?

Working with staff and managers / team leaders to maintaining the wellbeing of all giving or receiving healthcare. Some examples of areas of engagement include:

- Greater awareness of healthcare chaplaincy recruitment criteria, including for taster 'Starting Out in Healthcare Chaplaincy' course
- Tracking subsequent career path development
- Better grasp of skills, knowledge and understanding acquisition through sustaining reflective approaches to learning
- Minority faith / belief communities becoming more engaged and contribute more readily to the development of inclusive professional standards
- Clear progress through a series of conversations that generate better understanding of faith / belief community needs and engagement

What next for the contribution of Buddhism to Chaplaincy?

- Locally
- Regionally
- Nationally
- Globally: International Buddhist Healthcare Chaplaincy Conference for 2021?

HELP DESK

If you wish to make contact for further information about any of the matters raised here,
or

if you would like an urgent conversation with someone from the Buddhist community,
please contact:

Buddhist Healthcare Chaplaincy Trust

info@buddhisthealthcare.org.uk

May the merit of this gift be of benefit to all sentient beings.

United Kingdom, April 2020