

You need to know

- The Wellington Hospital Chaplaincy Trust was set up in 2005 as an on-going support for the continuation of chaplaincy services in Wellington Hospital.
- Donations of over \$5.00 are tax deductible

The Trust Board

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Margaret Rowe
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Legal Consultant
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Next Market Day for the Trust

Saturday August 22nd
Hill St Market 8.30am - 12.30am
Theme: Nearly Spring

I wish to donate to Wellington Hospital Chaplaincy Trust:



by cheque (enclosed)

or



by direct credit to:

06-0513-0258082-00

(ANZ Bank, Courtenay Place)

Please include your:

Name _____

Address _____

Email _____

Receipt required Yes No

Send to:

The Treasurer
Wellington Hospital
Chaplaincy Trust
PO Box 12197
Wellington 6144

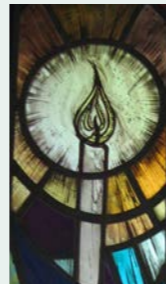
NOTELETS

The Trust has produced high-quality all-purpose notelets. The Candle (the image taken from one of the chapel windows) is eye-catching on the front fold, with the elegant art-photograph of the chapel on the back fold, both in full colour.

At \$10.00 for three, with envelope – good value.

Available from Prue Griffin, email pruegriffin@xtra.co.nz

Or leave a request for supply at the Chaplains' Office.



Changes and Chances for the Trust Board

Since the Trust was founded it has been fortunate to have been gifted the services of fully qualified auditors acting in an honorary capacity.

Peter Luckstedt, the Trust's foundation auditor, died in office (as it were) in 2012. He is still sadly missed. Alan White, generously and willingly took up this load, but had to relinquish it in November last year. The Trust is very grateful to him.

It is perhaps not widely realised that in today's climate, honorary auditors are birds of very rare feathers, so much so that at the 2014 AGM the Trust Deed was altered to allow for a "reviewer" as an acceptable legal "stand-in" for a suitably qualified auditor.

It was therefore with a great sense of relief that Anne Stephenson, of Stephenson Thorner, has accepted appointment as the Trust's honorary auditor, an assurance to everyone who has dealings with the Trust, of its financial transparency. She is most welcome.

Deputy Chair

A further change in the Board's effective operation has been the appointment of the Revd Barrie Keenan, a long-standing Trustee, as its Deputy Chair. This new position requires no constitutional change to the Trust Deed. The Deputy Chair position remains a flexible appointment as circumstances require.

The Rowe Memorial Trust

After consultation with the Trust's lawyer, it has become clear that this Trust, commemorating the connection of Jim Rowe with Brian Cunningham as supporters of chaplaincy services in Wellington hospital was so closely aligned in its intentions and wording to the initial Wellington Hospital Trust that the two should be amalgamated.

Accordingly, on 19 March 2015, at a regular meeting of the Wellington Hospital Chaplaincy Trust The Trustees of the Jim Rowe Memorial Trust unanimously moved to liquidate that Trust, gifting its capital to the Wellington Hospital Chaplaincy Trust and The Trustees of the Wellington Hospital Chaplaincy Trust unanimously agreed to accept that gift, with grateful thanks.



July 2015

Changes and Chances



It's a truism that **change** is a fact of life, with often disconcerting and unexpected outcomes. It's another one that it brings with it new possibilities, new **chances**.

In different ways that is what the last six months have been about for the Chaplaincy Service in Wellington Hospital. The loss of the particular skills of Fr Patrick Bridgeman at the end of 2014 and the Revd Dr Kirsten Dawson at the beginning of 2015 left a very special gap.

It was therefore with great pleasure and expectation that three chaplains were commissioned in April: the Revd Jinny Kean, a full-time ecumenical chaplain and Fr Dennis Nacorda and Michelle Lafferty, part-time Catholic chaplains.

The new chaplains join Sister Sia Otuhiva, the Revds Ross Scott and Don Rangi to make a new team. In different ways, with a new mix of contribution, between them they present a **change**, a new **chance**, a new opportunity for chaplaincy in Wellington Hospital. Together with chaplains the Revds Kath McLean and Noel Tiano at Ratonga Rua-O-Porirua/Kenepuru they join with the medical staff looking towards the goal of total healing, that state where a quiet mind is as important as a pain-free body.



Meeting and greeting at Wellington Hospital: Sister Sia Otuhiva, Fr Dennis Nacorda, The Revd Jinni Kean; Michelle Lafferty, Revd Ross Scott, Revd Don Rangi.



At Ratonga Rua-O-Porirua/Kenepuru: The Revd Canon Kath McLean, Revd Noel Tiano.





A Labyrinth Walk

A Labyrinth Walk is a mindful activity which can help clear the mind, calm anxious thoughts, sort out choices, reduce stress and enhance personal and spiritual growth. It is a metaphor for life's journey towards the heart centre. Individuals can focus on a prayer, a poem, inspiration, tune in to their breathing and simply, place one foot in front of the other. It is a single path and walkers practise respect and compassion by letting others pass in front or around them. This Labyrinth Walk begins by facing east and ends by facing west.

It was a long-held dream becoming a reality for Kath and Noel when 155 people gathered in the Chapel in December. Craig Utting, Liz Sneyd and their children played Christmas music; and one of our psychiatrists played classical music. Everyone then went outside, into the afternoon's bright sunshine, where Nigel Farley, Director of Mental Health, officially opened the Labyrinth which was also given a Maori blessing by Kuni Shepherd.

Kath writes: "It was a blessing to experience so many people walking the Labyrinth; for me, the celebrations continue as the Labyrinth is Walked, day by day, not just by members of the Hospital community but also by casual passers-by".

From the photograph, it is plain to see the Labyrinth is an unfeared set of inter-relating pathways, already establishing itself as an unpretentious part of the landscape. When it was opened in December, more work was needed to make a permanent cover for the pathways. This has just been completed – the invitation to Walk is now even more welcoming and encouraging, a complement to what happens inside the Chapel.

Kath and Noel are very grateful to the generosity of those who made the dream come true for so many people: The Wallis Foundation, the Mana Community Grants Foundation, Te Korowai-Whariki and many anonymous and individual donors.

For more information, call the Porirua Hospital Chaplain's Office at 04 3855999 extn 7543 or visit labyrinthlocator.com

From Chaplains Kath McLean and Noel Tiano at Ratonga Rua-O-Porirua/Kenepuru.

Change comes in different ways...

Chaplain Ross Scott has made a very special contribution. He writes:

One of the first things I noticed when the New Regional Hospital in Wellington was opened was the lack of outlook from most patients' beds. Although the hospital was well planned in many ways, the position of beds means that many patients do not have a view other than an internal or external wall. The immediate effect of this was that I noticed patients' moods were lower and they needed more of my time. Patients talked of cabin fever, of spending hours staring at green walls. I believed that would be detrimental to patient progress, especially when already feeling miserable because of their health conditions.

With the new hospital came a policy to establish a quality art collection, which means that all art donated needs to be approved by the Art Committee. As a result, there is now a good art collection around the hospital. However, the art policy excluded art in patients' rooms, to protect it from damage and to reduce the number of surfaces that needed cleaning between patients.

After two years of seeing the effect on patients, I decided to challenge the policy. This involved my researching the effect of art on patients within the hospital. It was easy to find subjective evidence. We all know we like to look at pleasant views. But to present a convincing argument I needed objective evidence. I went looking, and this is what I found:

A trial in a high dependency unit for post-cardiac surgery in Sweden found that the art in the room had a economic and health impact. However, the kind of art was significant. Abstract art with sharp lines and contrasting colours increased the need for sedatives and pain control. Landscapes with open foreground and water decreased the amount of sedation and pain control required. Neurologists took this research and monitored the brain when viewing different art styles; they found that abstract and chaotic scenes activated the centre of the brain responsible for security, the fight/flight centre, while open landscapes allowed the body to relax.

Taking this research, I presented an argument for landscapes to be placed in patient rooms. Slowly my proposal moved through the system and agreement has been reached. Having talked to a lot of people on the way, I now believe that landscapes with some human interest, such as a road, a fence, building etc, help patients to enter into the scene, leading them on to create their own story. Story is important to our wellbeing; it is particularly good for the progress of patients on the healing journey.

So it was with a great sense of achievement that the first landscape was in place for New Year's Day in the Medical Assessment and Planning Unit, an area where there is no natural light.



Note from the Editor

This first landscape, a print from a photograph by professional photographer Glen Howey, was donated by Chaplain Ross himself. Understandably, the hospital requires all art work to be approved by the Art Committee; as you have just read, very careful selection is important. Ross reports that there is now a store of approved images, suitable for medical wards. All that is needed are the funds to purchase them for printing and framing. What a change has begun.

❀ Farewell from The Revd Dr Kirsten Dawson ❀

At her last meeting with the Trustees, Kirsten Dawson spoke about her time at Wellington Hospital:

I've been at Wellington Hospital for fourteen months. It's been an amazing and enriching journey. There are a number of things to reflect on. In addition to the daily rounds of visiting patients, urgent calls, training workshops both attended and facilitated, I have a few special highlights:

- **Retreat Day for our fantastic team of Voluntary Chaplains' Assistants**
- **Recent chaplains' conference in Auckland**
- **A day spent with ordination candidates at S John's Clergy Training College, in Auckland.**

There have also been a number of significant changes. Some of our VCAs have finished, other new ones have started. There have been exciting developments at ICHC aimed towards improving the way chaplains are supported to ensure a sustainable and forward-thinking chaplaincy service for healthcare in Aotearoa.

And, of course, change does not stop. (Kirsten has taken up an appointment as Lecturer in the Pacific Theological College in Fiji.) In many ways I was sorry to leave the hospital so soon. It is a wonderful place to work – sometimes difficult, but always challenging, fast-paced and rewarding...

At the chaplains' conference one of the many things we talked about was the importance of stories, real human stories, in the work we do. Our guest speaker, John Swinton, talked about chaplaincy as "the imagination of the healthcare system". When a person is going diagnosed and treated in hospital, it's very easy for the narrative about them to become purely about illness and symptoms, about a diagnosis and a treatment – it's almost as if they can be reduced to a problem looking for a solution. Now, this is no criticism at all of the wonderful care people generally receive here; it's entirely right that medical personnel do the work of diagnosis and treatment. That's their job, and they do it incredibly well.

But as we know, people's lives and stories are bigger and more complex than this slice of life spent in hospital. For their overall wellbeing, it's really important that they are also able to remain connected to the rest of themselves – with their social world, with the natural world, and with their spirituality. One of the ways of defining spirituality goes something like this: Spirituality denotes the multitudinous ways we come to terms with the world, the awareness of our mortality and our limitations... and it is also this that enables us to live well.

One of the most meaningful things I have done as a chaplain is simply to listen to people's stories, to listen as they narrate for me – and for themselves – how they are coming to terms with their mortality, how they are finding their path through life, and how they are finding what they need to live well, and die well. In some ways it seems a simple thing - just to listen with my whole attention and my whole heart. And yet it is also a profoundly difficult thing to do well. It is a skill – or perhaps better, a way of being present with someone – that I will need to keep working on for the rest of my life..

I have taken many things away from this place – a raft of new skills, an abundance of diverse experiences, rich friendships, and, I hope, a little more wisdom. I am a much better priest for having been here. In the midst of these taonga, there's one thing in particular that I value and will keep on treasuring. It's the way in which people have trusted me with their stories. I have been privileged to be a small part of some extraordinary, significant moments in people's lives. Some of these moments have been painful, some beautiful, some are both. I will treasure them all.

To the Trustees

Thank you for the work you do to support chaplaincy at Wellington Hospital. That service does make a difference to people. I trust that whoever is blest to be part of the new chaplains' team will find it as richly rewarding a place as I have done, and that they may always depend upon your generous support.

The Revd Dr Kirsten Dawson

Visit our website: www.whct.org.nz