



## Halifax Baptist Hospital Chaplaincy Committee Report

For the 2023 Fiscal Year

As we present our Report for the 2023 Fiscal Year, we have much for which we are thankful!

We have three new members of our committee: Rev. Wayne Desmond who pastors in the African United Baptist Association (AUBA), Pastor Steve Baker from Queens County NS, and Licentiate Sharon White from Cumberland County NS (presently on an educational leave of absence).

The last three years have been full of change and challenge—both for the Hospital Chaplaincy Ministry and for the local churches and associations that give us their support. Fortunately, during COVID-19, our chaplains were considered “*essential workers*” in our hospitals and were welcomed even when local pastors were not.

Our new full-time chaplain, the Rev. Joe Green, completed his first year with us, working primarily at the QEII Halifax Infirmary and Victoria General sites.

On April 18, 2023 we received notice from the Canadian Association for Spiritual Care that Joe had been awarded the designation CASC/ACSS Certified Spiritual Care Practitioner. We celebrate with Joe!

About once each month Joe has been visiting local churches and associations to either speak about the Hospital Chaplaincy Ministry or to preach a guest sermon. This year, Joe also offered short “visitation workshops” for local pastors covering topics such as infection control, confidentiality and best practices that a number of pastors have found very useful. Please contact Joe directly ([joe.green@nshealth.ca](mailto:joe.green@nshealth.ca)) if you would like him to visit your church, would like to attend one of the workshops, or to suggest a topic for a future workshop.



The Hospital Chaplaincy Committee has endorsed Joe’s participation in the training of the next generation of chaplains through delivery of Clinical Pastoral Education (CPE) courses and supervision of the students as they do their practical work in the hospitals. This has helped to educate theology students from Acadia Divinity College and from the Atlantic School of Theology. The students assisted Joe in visiting our Baptist patients and families.

We are also blessed by the continuing ministry of the Rev. Dr. Ida Armstrong-Whitehouse, our part-time chaplain, who works an average of 12 hours per week primarily at the QEII Victoria General site, the IWK Health Centre and the Nova Scotia Rehabilitation and Arthritis Centre. Ida’s compassionate ministry brings peace and solace to many.

With the increasing number of patients desiring chaplaincy visits and the limited availability of local pastors from distant locations, Joe and Ida are in heavy demand.

Joe describes a typical morning. It begins with printing off a list of all registered Baptists in our hospitals. This morning that was 53 patients who have identified from within our denomination. We take note of

not only their presenting issue for admission but we also note from where they come from in the region. Today a little more than a third of the patients come from outside of the HRM. We prioritize those in ICU and those patients from much farther away as they may not have their support systems with them while in Halifax. For those within HRM on this day, 30% come from the Bedford/Sackville area, 45% come from Halifax, and the remaining 25% are evenly split between Dartmouth and rural places in HRM. Many of these HRM folk are connected to our HRUBA churches and we value the partnership and communication from the churches to enable us to effectively come alongside patients and their families.

We are thankful that financial support for the chaplaincy enables us to continue to supplement Joe's full time ministry with Ida's part time chaplaincy. Ida's stats for the 2023: 689 visits to patients and their families, 94 calling cards and greeting cards to patients, 203 interactions with staff, 83 charting. This is a significant additional ministry!

Ida notes that because of the nature of their team work with staff, our chaplains are in a unique position to do follow-up with medical staff following a visit with a patient. If that is not feasible, to chart, with the patient's permission, on the patient's binder some area of distress and gratitude. This helps the patient to have a more holistic healing experience. For example, when our chaplains discovered that a patient was having cancer treatment and had to be enclosed in a mask, she was claustrophobic. The chaplains were able to let staff know and, in turn, staff were able to assist the patient in her distress.

Ida notes a particular problem with the IWK hospital, where the chaplains do not have the same access to a computerized registry of Baptist patients. They work on a referral basis only. This makes it difficult if they do not know when a child has been admitted and the child or family might need their services. Recently, the chaplains received a difficult referral. A five week old infant was flown in from a neighbouring province with cardiac arrest. The parents of the child spoke very little English but their faith was very important to them. Through technology, chaplaincy was able to provide a dedication service that the parents requested. They were very appreciative of this ministry as it reminded them of God's presence in the midst of such heartache. Please help us to know when a child has been admitted!

**Our chaplains have a particular message to local churches. "Church is Key to Care":** As you can imagine, a number of our patients are elderly and are often widowed and living alone. One of the central themes the chaplains attempt to address is loneliness and belonging. Recently, our chaplains were supporting a patient where these themes became apparent. They hadn't been to church in over 50 years, but read their bible and were eager to learn more. The patient really craved relationship and connection. As they were able to say these things out loud and felt heard about them, they engaged our chaplains on how to connect to a local church. Our chaplains were able to print off some information from a couple of churches in the patient's neighbourhood. At the patient's request, our chaplains connected them with a local pastor. This was important to the patient as it helped to meet their needs and brought some reassurance that their loneliness may be addressed once they were discharged. This is one way in which local churches can partner in our compassionate ministry.

Two things are apparent to our chaplains in this kind of moment. First, that while in hospital, when a patient is supported well they heal better. Second, those who are supported in community and have a faith connection have lower levels of distress on the whole. Churches and our partnership with them is a key to the overall level of care we can offer patients and to walk well with them as neighbours.

**Our chaplains have two important items to relay to our HRUBA Congregations.** First, upon admission, front line staff should ask the patient about their religious affiliation. When they do, if the patient identifies as "Baptist", then the patient will appear on the chaplain's daily lists and can be supported during their time in hospital. The other important thing our chaplains do is try to assess the layers of support that patients have. If it is clear that they are connected to a church then the chaplain will often ask if they would like them to contact their pastor. This can help church leaders to know how to support

a congregant either in hospital or when they get home. Conversely, it is always helpful for chaplains to know if a pastor is coming in to visit someone as they will spread out their visitation to support the local pastor's. Hospital visits by local pastors and support from local churches is important.

Our chaplains are always happy to have someone call them to say that a patient is coming to one of the Halifax hospitals. Contact information for the chaplains and a brochure that can be given to those anticipating a hospitalization is on the Hospital chaplaincy page of the HRUBA Website, <https://www.hrub.ca/ministries/hospital-chaplaincy>. Patient referrals from the local churches help to ensure that no one is missed.

As we look to the future, we recognize the challenge of keeping the Hospital Chaplaincy Ministry fully funded. The cost of providing the chaplaincy ministry has increased and so our financial support must also increase. Every donation helps and the support of local churches will help to meet our budget continuing to provide a full level of service to Baptists in Halifax hospitals. Faithful prayer and financial partners are so important to sustain this caring ministry and we give thanks for each one of you!

Unfortunately, in 2022, we had a significant shortfall in our fundraising, leaving us with a deficit of \$16,973 which significantly reduced our reserve funds. We were particularly concerned because we realize how difficult it is in these times for many churches to maintain the same level or to increase their financial support.

In 2023, we were right on target with expenditures and although at \$9,999 we had a larger deficit than what we had estimated in the 2023 Budget, it was down considerably from the 2022 deficit. Additionally, we were able to absorb the \$2,649 inflationary increase in expenditures we had budgeted for 2023. The 2023 Halifax Baptist Hospital Chaplaincy Statement of Revenue and Expenditures is on the following page. It includes comparative data from the previous four years.

Our success in 2023 was entirely due to an increase in donations. In fact, revenue was up by \$11,226 year over year. The first \$2,500 of this was an increase in the grant from HRUBA and another \$2,500 was an increase in the grant from the Atlantic Baptist Foundation. Without these critical supports, we would be in a precarious position. However, we are also starting to get donations from several Baptist Associations in other Regions, the first earnings from the Endowment Fund, and an uptake in "personal" and "memorial" donations. So, we are broadening our sources of income, with beneficial results.

Clearly, there is more work to do in 2024--with Regional Baptist Associations, with the Endowment Fund, and with continued efforts to increase awareness among our supporting churches and individuals. We are also examining the possibility of support from Acadia Divinity College and the Atlantic School of Theology in consideration of our chaplain's work instructing and supervising Clinical Pastoral Education in the hospital for Divinity and Chaplaincy students. The broader we can make our sources of revenue, the more secure the ministry will be.

Going forward, it will only be with the prayerful support of all our financial partners that we will be able to maintain the present level of our shared Chaplaincy Ministry to our Baptist patients and families. For each local church, association, foundation and individual partner that is able to help us we give thanks!

Respectfully submitted,



Chair: Alan Barkhouse

Secretary: Rev. Dr. Marlene Knowles; Treasurer: David Gibson

Members: Rev. Wayne Desmond, Rev. Steve Baker, and Lic. Sharon White

Chaplains: Rev. Joe Green and Rev. Dr. Ida Armstrong-Whitehouse

# HALIFAX BAPTIST HOSPITAL CHAPLAINCY

## 2023 Fiscal Year Statement of Revenue and Expenditures

			Actual	Actual	Actual	Actual	Actual
	Year ended December 31	2023	2022	2021	2020	2019	2019
<b>Revenue</b>					(COVID-19 Reduced)	(COVID-19 Reduced)	
Donations from Churches							
PEI		\$ 1,250	\$ 1,250	\$ 1,250	\$ 1,100	\$ 2,000	
New Brunswick			1,250	750	750	1,500	
Halifax Region		12,760	9,420 *	15,146	13,302	17,729	
Rest of Nova Scotia		22,821	22,791	25,791	24,239	24,777	
Donations from Churches Subtotal		36,831	34,711	42,937	39,391	46,006	
Grants and Special Donations							
HRUBA Budget		20,000	17,500	17,500	17,550	17,500	
Other Associations		2,650					
Atlantic Baptist Foundation		12,500	10,000	10,000	10,000	10,000	
Christie Fund						2,000	
Earnings from Endowment Fund		760					
Personal and Memorial Donations		8,308	1,812	1,056			
Chaplain Retirement Donations			5,800				
Grants and Special Donations Subtotal		44,218	35,112	28,556	27,550	29,500	
<b>Total revenue</b>		<b>81,049</b>	<b>69,823 *</b>	<b>71,493</b>	<b>66,941</b>	<b>75,506</b>	
<b>Expenditures</b>							
Full-time Chaplain: Salary and Benefits		70,972	63,102	58,395	43,955	56,405	
Chaplain Retirement			5,000				
Part-time Chaplain: Salary and Benefits		17,531	16,698	13,138	12,780	15,495	
Chaplains Subtotal		88,503	84,800	71,533	56,735	71,900	
Membership Fees		1,037	532				
Professional Development							
Supplies, Advertising, and Travel		1,508	1,464	469	820	1,069	
<b>Total expenditures</b>		<b>91,048</b>	<b>86,796</b>	<b>72,002</b>	<b>57,555</b>	<b>72,969</b>	
<b>Excess of revenue over expenditures</b>		<b>-9,999</b>	<b>-16,973</b>	<b>-509</b>	<b>9,386</b>	<b>2,537</b>	
CBAC Accounting reconciliation		-1	-1		-1	-37	
<b>Cash balance, beginning of year</b>		<b>38,897</b>	<b>55,871</b>	<b>56,380</b>	<b>46,995</b>	<b>44,495</b>	
<b>Cash balance, end of year</b>		<b>\$ 28,897</b>	<b>\$ 38,897 *</b>	<b>\$ 55,871</b>	<b>\$ 56,380</b>	<b>\$ 46,995</b>	
* Corrected by \$-3,104 to reverse a deposit incorrectly made to the this account							
Updated 20240211							