Education & Research

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Rev. Kevin S. Crowder

Focusing on Competence Instead of Learning

I am an ACPE Supervisor and BCC who has convened certification committees, presented candidates to committees and served on committees. As one who has served a stint on the APC Certification Commission, I have been surprised to find candidates who fail to demonstrate their competence, partly because they use a verbatim analysis tool designed to demonstrate learning opportunities when they should be demonstrating their competence. I write to suggest a philosophical and methodological adjustment for candidates who aspire to pass their next committee.

By applying for certification, a candidate is suggesting, "I am no longer a student. The level of my professional competence warrants my certification. I am ready to be a peer BCC." Unfortunately, some candidates don't make the mental shift from student to professional, and their verbatim tool betrays them. In CPE, verbatim dialogs are typically analyzed in a variety of ways from a variety of perspectives with a common theme: learning. The student may write what s/he has learned from a psychological, theological, and sociological perspective. S/he may discuss ministry, learning, and patient needs. S/he may discuss future learning opportunities and include a sample note for the medical record. My contention is simple: what is appropriate to demonstrate student learning in CPE is different from what is appropriate to demonstrate a candidate's competence. Students focus on learning; chaplain candidates for certification must focus on competence.

There is a simple solution that may be a common practice, but it has heretofore escaped the notice of too many candidates: use the competency standards as an outline to discuss the ministry encounter presented in the verbatim. This simple tactic accomplishes multiple goals. First, it illustrates that the candidate understands the difference between using a verbatim as a learning instrument and using it as a tool to demonstrate competence. Second, using the competency standards tells the committee that the candidate is serious about assessing her/his own competency. Third, using the competencies as an outline serves as a reminder to the candidate that the competency areas must be addressed in their clinical material.

Specifically, the Theory of Pastoral Care Competencies, the Identity and Conduct Competencies, the Pastoral Competencies, and the Professional Competencies are conducive for use in this manner. Obviously not every competency needs to be addressed in every verbatim. The goal is to use the clinical material to demonstrate legitimate proficiency in as many competency areas as possible.

With twenty-nine competency areas in which one must demonstrate proficiency, candidates must use every tool at their disposal to illustrate their clinical, professional and pastoral acumen. Using those same competency standards as the discussion platform for a candidate's clinical material might be a technique worth considering.

Rev. Kevin S. Crowder, BCC, is an ACPE Supervisor at Mary Washington Hospital in Fredericksburg, Virginia. He spent most of the last decade in service to the Association of Professional Chaplains on the national level, serving two terms as Board member and Secretary of the Association, one term as chair of the Personnel Committee, and one term as a member of the Certification Commission. In addition to his national service, he has served on numerous Board Certification and ACPE certification committees.

Kevin holds a Bachelor of Music degree from Ouachita Baptist University, a Master of Divinity degree from Southwestern Baptist Theological Seminary, and a Master of Science degree in Patient

Counseling from Virginia Commonwealth University. He is currently pursing a Master of Music degree in violin performance at Shenandoah Conservatory in Winchester, Virginia. He is endorsed by the Cooperative Baptist Fellowship.

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