The Sisters of Providence, Providence Health & Services, and all of Catholic health care are called to serve the poor and vulnerable, especially in desperate and difficult times. Our mission and values make it very clear we must answer this call with deep, unyielding compassion for those who entrust their lives and health. Therefore, it is very important to make sure compassion is fundamental to our care, both as connector and energizer of how we care. Compassion must be reflected always in the way we work together.

Compassion is more than a sense of sadness at the suffering of another: being sympathetic. It is more than understanding what another is feeling: being empathetic. Compassion includes a cognitive, affective, and active desire to alleviate suffering; borne from feeling with, and into the heart of another person. This powerful compassion connection drives the desire to bring comfort, especially when an immediate cure is not possible. We fix when possible, and heal always; by comforting, consoling and being present.

For the vulnerable recipient, compassionate care means being seen and understood, and not feeling isolated and alone. For the caregiver, being compassionate brings a deep feeling of connectedness with another, with their suffering or with their joy. This bi-directional connection allows for authentic sharing and creates a desire to bring comfort to the sufferer or to be fully joyful in the happiness of another.

At Providence Health & Services, compassion is the essence of the mission, core values and promise of our organization. The mission statement is a call to compassionate action, the core values echo that call, and the promise statement directly instructs us in the steps of compassion:

**Mission Statement**

“As people of Providence, we reveal God’s love for all, especially the poor and vulnerable, through our compassionate service”

**Core Values**

“Respect, Compassion, Justice, Excellence and Stewardship”.

**The Promise Statement**

Know me ~ Care for me ~ Ease my way
Thus, we are required to be compassionate in all we do, as individuals and as an organization. Most of us chose healthcare because of a deep desire to serve those who suffer, especially those who are poor and vulnerable. The Sisters remind us to see compassion at the core of all our work, both at home and abroad.

“Through compassionate service we continue . . . helping to make our world a more just, loving, and peaceful place for all.”
Sister of Providence, Hopes & Aspirations, 2009

Living our mission, values and promise means we must find the opportunity in every interaction to acknowledge suffering and extend compassion. For example, the definition of “poor and vulnerable” must include not just patients but also providers, staff and all caregivers who work in Providence. Who among us is not poor and vulnerable at times? At some point in our lives, each of us has struggled financially, emotionally and spiritually. We all suffer, and in suffering our hearts are vulnerable and we are poor in spirit. It is through connection with our own suffering that we become more compassionate with and for others.

Nearly every clinician has chosen healthcare as their vocation because of a “calling” and “desire to respond” to those in need and who suffer. Yet the intense reality of contemporary health care delivery and the emotional burden of caregiving, place clinicians at very high risk for burnout, and emotional disengagement from the work. Burned out caregivers are less engaged and carry an emotional burden that prevents fully authentic compassion. Few are equipped, through training or education, to effectively cope with the repetitive trauma that comes with witnessing suffering, sickness, despair and death. Consequently, maladaptive mechanisms such as avoidance, inflexibility, anger, denial and resentment replace compassion—and often harm the vulnerable patients being served. To cope effectively with the trauma and remain compassionate is not innate nor is it typically addressed in professional education or socialization. The suffering of caregivers in their daily experience must be acknowledged and managed. Intentional coping and healing strategies must be provided, reinforced and encouraged.

Compassion is essential to success with all strategic quality initiatives in healthcare, including the IHI Triple Aim, becoming a Highly Reliable Organization or achieving a Culture of Safety. Yet, compassion is rarely called out for its critical role in improving quality and safety. It is possible to implement any one of these strategies without compassion, but as such they become tactical and lack authentic and whole-hearted purpose. For example, a culture of high reliability without compassion—one driven solely by guidelines, directives and checklists—is possible. However, a culture of compassion without high reliability is not possible. Compassion requires a safe, reliable culture delivering the best clinical care of patients; a culture they can trust to protect them. In essence, when quality and safety strategy is infused with compassion, it synergizes heartfelt desire and intellectual motivation to achieve the best care for our patients and our people.
Our people yearn to reconnect with their healthcare “calling” and to find ways to support strategic initiatives in their work. They desire to reconnect with their hearts, the hearts of their patients, and to connect with one other. They long to feel energized in their work and their lives through intentional compassion.

It is this authentic, deep compassion connection – both in suffering and in joy – that strengthens us, enlivens us and gives us a sense of meaning that ultimately leads us back to being fully ourselves. As an organization, it is essential to focus strategically on compassion: with each other, with those for whom we care, and with our communities. Building and sustaining a compassionate workforce must be a very high organizational priority.

Compassion is more than just a “good and right” thing to do. A growing body of evidence now validates its importance. New science from neuroanatomy now specifies how compassion is hard-wired into our brains and can be strengthened by training. Social science research is identifying and predicting specific circumstances under which compassion grows or is suppressed. These studies inform us of the power of compassion that energizes us and connects us with our patients, with each other, and with our hearts. Accordingly, now is our call to action.

On this journey to create a culture of deep compassion, we propose the following Compassion Grounding Principles:

- Compassion is innate. It is ready to be unleashed and needs cultivation, encouragement and attention
- Recognition and acknowledgement of our own suffering (“self-compassion”) is crucial to giving compassion to others
- Compassion exists in the authentic connection between people. It is multidirectional and must play a part in every interaction, every day, between every person (not just provider and patient).
- Compassionate interactions are rejuvenating, not draining
- Compassion is created by the combined actions of everyone within Providence. It cannot be owned, defined, or directed from any single perspective
- Compassion energizes us toward success with all of our strategies (Building Healthier Communities, High Reliability, Safety, Innovation or Triple Aim)
- Compassion must be expected, encouraged and enabled by leadership and its ongoing creation must be the work of all People of Providence.

Moving forward together, we can build a more compassionate healthcare culture that deeply connects us with our heritage of the past, and our path to our Providence future. By permanently reconnecting the People of Providence to their compassionate hearts; to their internal calling to heal the suffering of the poor and the vulnerable, we allow compassion to become much more than “what we do”; compassion becomes “who we are.”