

Book Reviews

Achieving Success through Community Leadership

Peter A. Weil, Richard J. Bogue, and Reed L. Morton

Health Administration Press, Chicago, 2001, 104 pp., \$35

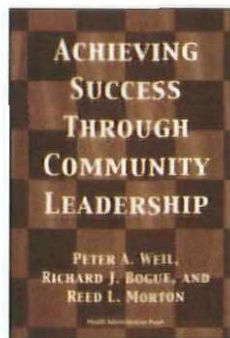
MISSION—THE REASON THAT AN ORGANIZATION exists—is fundamental to its existence. Board members know this. CEOs know this. Senior leadership knows this. But do these leaders truly believe and practice their hospitals' stated missions? Authors Weil, Bogue, and Morton emphasize from the start the importance of community health as a "driver" for a hospital's mission statement. *Achieving Success through Community Leadership* is about helping hospitals learn through "best practices" how to relate to their communities and ultimately how to improve community health.

I was delighted to recognize a name amongst the acknowledgments on page xi: Jane Oehm of Golden, CO. I appreciated the authors' inclusion of community members on their panel. Jane is a former member of my organization's board, and it was a pleasure working with her.

Achieving Success through Community Leadership is designed to reset priorities for financially focused health care leaders and reintroduce them to the importance of community leadership. The book's introduction describes the volatile history of health care over the past two decades and puts into perspective hospitals' current focus on the bottom line. The authors include seven strategies for linking performance expectations to community health improvement. They dedicate a chapter to each strategy, from visioning to process. Twenty-five "leading practices" are aligned with these strategies.

The book's conceptual framework and content are pertinent to health

care's current environment. In their introduction, the authors describe the multifaceted approach they used to identify "leading sites," hospitals that responded to their call for data. They then define and describe what they call "leading practices," and do so in a manner that makes them easily adaptable by other hospitals and health care systems. The authors also describe lessons learned from six "demonstration site" hospitals. The leading practices, they say, are intended to have an impact on the management and governance of hospitals or health systems; they are not meant to be community health initiatives.



The authors of *Achieving Success through Community Leadership* follow a consistent format as they proceed, chapter by chapter, to highlight each strategy. In discussing a particular strategy, they sometimes give exam-

ples from both the leading sites and the demonstration sites involved. Scattered through the book are concrete examples of curricula, surveys, and self-assessment tools that have been developed and implemented by the "leading sites." Chapter 1, "Visioning a Healthy Community," sets the stage for learning. Here, the authors elaborate on the ways that hospitals are "discovering new synergies and making better strategic decisions by embedding population and community health goals in the performance management system" (p. 1).

In Chapters 2, 3, and 4 the authors encourage leaders to invest in community health, invest in education, and make personnel decisions that foster community health. In their remaining chapters, they focus on marketing activities, structural changes, and developing processes that promote community health. Their goal is to change hospital leaders' behaviors so that they can develop a culture in which "community health is as important as financial performance" (p. 90).

I was intrigued by the diversity of hospital and public health relationships highlighted in the book's appendix, entitled "The Role of Public Health" (p. 97).

Both hospitals and local health departments will continue to face challenges. Collaboration seems imperative; I was happy to see that the authors noted some "leading practices" involving strong hospital and public health partnerships.

Weil, Bogue, and Morton have collaborated to publish a book with real application to hospitals and health care systems. They suggest that health care leaders should decide on a strategy (or group of strategies) that seems most appropriate for their organizations and then act on it. The authors conclude, and I concur, that it is possible for creative, mission-driven leaders to improve community health and regain the trust of the public and dedicated staff and physicians.

Carol Salzmann, RN,
Director, Community Development
Exempla Lutheran Medical Center
Wheat Ridge, CO

Claiming Power over Life: Religion and Biotechnology Policy

Mark J. Hanson, ed.

Georgetown University Press, Washington, DC, 2001, 192 pp., \$44.95 (hardcover)

THE EIGHT ESSAYS CONSTITUTING THIS book emerged from a three-year project on "Religion and Biotechnology" sponsored by the Hastings Center. Four of the essays—those by Mark J. Hanson, the book's editor; John H. Evans; Audrey R. Chapman; and Elliott N. Dorff—have appeared elsewhere but were revised or adapted for this volume. The other four—by Courtney Campbell, B. Andrew Lustig, Ronald Cole-Turner, and Gerald P. McKenny—are published here for the first time.*

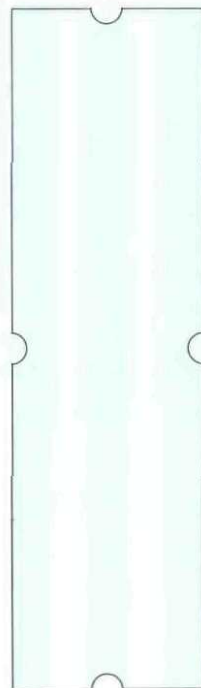
The subject of these essays is a difficult one, both internally and externally.

*Elliott N. Dorff and Courtney Campbell were among the contributors to a January-February 2002 *Health Progress* special section on technology and ethics.

SUBSCRIPTION
CHANGES?

Please Let Us Know!

Does your *Health Progress* mailing label need updating? Do we have your correct name, position, and address? To correct any problems with your subscription, please attach the mailing label from your last issue and write in the new information below.



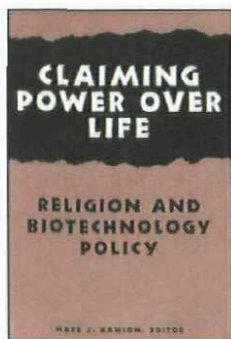
NAME _____
POSITION _____
COMPANY _____
ADDRESS _____
CITY _____
STATE _____ ZIP _____

Mail to:
Circulation Coordinator
Health Progress
4455 Woodson Road
St. Louis, MO 63134-3797
Or Call Us at
314-427-2500

The topic of religion and biotechnology is *internally* difficult for religious organizations because biotechnological breakthroughs have in recent years occurred too quickly for thorough analysis by such groups. Religious groups have, moreover, the general problem of determining how to use the resources of their particular traditions—formed at a time when even rudimentary genetics was unknown—to deal with such exotic topics as stem cell research, xenotransplantation, and gene therapy. This is not to argue that religious traditions have no resources or have not in fact responded. They have responded; many have done so very helpfully. Rather, the point is that this engagement is particularly difficult because of the highly specialized nature of new topics in genetics.

Religion and biotechnology is also a difficult subject *externally* because the current cultural climate hesitates to allow religion into public policy debates. This hesitance is partly a remnant of the distaste left by the posturing of the so-called Moral Majority and partly also a rejection of the premise that religion has anything positive to contribute to such debates.

Fortunately for those who want to engage the religious traditions in a dialogue with current genetics and public policy, we have this book. The eight essays—which focus on a variety of topics, ranging from religion and public policy, on one hand, to considerations of nature and the intricacies of patenting laws, on the other—are models of how to engage in such a dialogue. The general lesson of the essays is that we should do this knowledgeably, critically, constructively, and competently. All of the essays are characterized by an excellent degree of comprehension of the scientific or policy issues at stake. They also manifest a deep grounding in particular religious traditions or perspectives. If you are interested in a book that gives an excellent introduction to this area, this is the one to start with. On the other hand, several of the essays are not for the



faint of heart. Both Evans's and Hanson's articles on patenting go into significant detail in their analysis and show clearly both the religious and legal issues that are at stake.

The essay by Chapman on religious traditions and biotechnology is an excellent overview that provides a wonderful presentation of a variety of traditions and what they have said about biotechnology and genetics. This is an excellent first article for individuals unfamiliar with this material. The same is true of the essay by Dorff. Although he focuses mainly on providing an overview of Jewish bioethics, he does highlight several of the themes on genetics that are discussed by others.

The articles by Campbell and Lustig directly engage the issues of religion and biotechnology and provide an excellent engagement with many of the current biases against the presence of religion in the public arena. Not polemics, these essays are carefully considered arguments about the positive contribution that religion can make to public policy debates.

Cole-Turner and McKenny each engage religious traditions and perspectives to challenge religion to take a deeper look at their resources and begin a critical discussion of the issues.

Books on genetics, biotechnology, and religion have the inherent problem of being quickly made dated by ever-newer scientific developments or public policies. However, these essays are thematic enough to help us begin to think through carefully which resources a particular religious tradition offers in dealing with the ethical and religious implications of policy issues and particular scientific developments. Although not a particularly comforting book—it clearly lays out the difficulty of the tasks ahead—*Claiming Power over Life* nonetheless gives us a most useful framework for beginning this task.

Thomas A. Shannon, PhD
Professor of Religion and Social Ethics
Worcester Polytechnic Institute
Worcester, MA

JOURNAL OF THE CATHOLIC HEALTH ASSOCIATION OF THE UNITED STATES

www.chausa.org

HEALTH PROGRESS®

Reprinted from *Health Progress*, January-February 2003
Copyright © 2003 by The Catholic Health Association of the United States
