Entrusted: The Moral Responsibilities of Trusteeship

David H. Smith
Indiana University Press, Bloomington, IN, 1995, 160 pp., $19.95

While much has been written about the ethical issues that confront medical practitioners in the changing healthcare field, few analysts have addressed the ethical challenges trustees and directors of healthcare organizations face as they struggle with decisions about their organizations' future. The deficiency has been remedied in an insightful book by David H. Smith, professor of religion at Indiana University. Entrusted is a must-read for all who are interested in the role of trustees in healthcare organizations. Its succinctness and readability also make it a superb resource for education and training programs for new (as well as veteran) trustees.

According to Smith, the trustee in a nonprofit organization is entrusted with the responsibility for establishing and defining the identity and vocation of that organization. In this role the trustee is guided by the founding commitments that define the organization over time and establish its place in the community and in society. The trustee must determine a shape and future direction for the institution that is faithful to its organizing commitments and consistent with its role in the community.

Three principles serve the trustee. The fiduciary principle requires a commitment from the trustee to the cause that the organization stands for. The common good principle requires a commitment to the overall values and reasonable moral obligations of the larger society. The obligation to establish the identity and the vocation of the organization requires the trustee to define the organization's place in a changing social climate. Smith outlines the implications of these principles in practical ways, citing examples for each.

Smith examines the objections and conflicts that arise as the role of the trustee intersects with the role of the professionals who operate a nonprofit organization. The book's particular strength lies in its understanding of how conflicts between principles can be resolved and how the role of trustees differs from that of those responsible for the organization's operations. Smith draws on a variety of settings—hospitals, universities, museums, philanthropic organizations, religious organizations—to show how the principles he has outlined apply to selected cases.

A delineation in chapter seven of the moral virtues that ideally characterize trustees can serve as a guide for understanding what qualities best serve the organizational purposes of nonprofit institutions. A final chapter of questions and answers about the dilemmas faced by trustees helps to organize the conceptual and practical intersections of the book.

Smith connects ethical principles to organizational purposes and shows how theory and practice interrelate. For trustees in Catholic healthcare institutions, Smith's religious sensitivities provide valuable assistance in clarifying the ethical relevance of the trustee's role. Entrusted provides a much needed contribution to the literature on ethics in the healthcare arena.

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BOOK BRIEFS

Anatomy of a Merger: BJC Health System


In 1993 three big St. Louis healthcare providers—Barnes Hospital, The Jewish Hospital, and the two hospitals making up Christian Health Services—merged to form BJC Health System, one of the largest in the nation. This book, written by current and former BJC leaders and consultants, tells how the merger came about. In 27 chapters and an epilogue, the authors describe the St. Louis healthcare market before the merger, merger negotiations, positioning for managed care, development of systemwide governance, creation of a regional strategic plan, the effect of BJC's formation on other area providers, and other pertinent topics.

The Complete Care Plan Manual for Long-Term Care, revised ed.


This practical handbook was written to give long-term care providers an easily used tool for developing resident care plans that not only meet Health Care Financing Administration standards but also maximize staff time and ensure the quality of each resident's care. The manual includes suggested checklists of treatment problems and goals, care plan worksheets and fact sheets, and a model for developing care plans that can easily be followed by all members of a multidisciplinary team, among other features. This revised edition contains an appendix in which resident problems are cross-referenced with new nursing diagnoses as approved by the North American Nursing Association.
Ethics for Everyone: A Practical Guide to Interdisciplinary Biomedical Ethics Education

Linda C. Graflus, EdD

**ETHICS FOR EVERYONE** is a well-written, substantive book that can be used to educate biomedical ethics committees. The author is obviously well versed in the overall functioning of ethics committees. The book’s eight chapters are basically divided into three sections: an introduction to biomedical ethics, a discussion of the various issues and topics in the field, and a guide to useful educational tools.

Chapters one and two describe the history of the biomedical ethics committee, its contemporary role and function, and the role of committee members. These chapters also offer advice on the orientation of committee members. And they urge healthcare organizations to educate not only committee members but all other employees as well.

Chapter three first gives an overview of the history of biomedical ethics and then introduces some of the field’s most significant topics. These topics, most of which the typical biomedical ethics committee will eventually have to respond to, include informed consent, advance directives, medical futility, the right to die, euthanasia, and physician-assisted suicide, to name but a few.

Chapter four describes a process for ethical thinking and reflection. The process consists of six basic steps: gathering the facts, developing an understanding of the ethical issues involved, clarifying the patient’s perspective, identifying the treatment alternatives, determining the best interests of all involved parties, and selecting the most appropriate treatment alternative.

Any healthcare organization would benefit from developing a model of ethical thinking that reflects its values, the author argues. Any healthcare organization would benefit from developing a model of ethical thinking that reflects its values, the author argues. Ethics for Everyone also contains an excellent, up-to-date bibliography; a list of resources; a glossary; and an appendix describing a grand rounds program for noncompliant patients.

Although the book is well written, informative, and very useful, it does suffer from one omission. Like other literature aimed at bioethics committee members, Ethics for Everyone lacks an introduction to the basic principles of ethics and social justice, written in clear and understandable language for those who lack an in-depth philosophical background.

However, this shortcoming does not keep the book from being useful for those who have responsibility for the orientation, formation, and continuing education of biomedical ethics committee members and other healthcare workers as they try to understand and respond to complex ethical issues in our society.

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