

Leadership for the Ministry

Will lay
leaders be
able to keep
Catholic
health care
Catholic?

For Catholic health care, no question is more momentous than that concerning its leadership. Since 1727, when a dozen Ursuline Sisters landed in New Orleans, the U.S. ministry primarily has been led by women religious. Today laypeople are succeeding the sisters. Will they be able to keep Catholic health care *Catholic*?

Yes, says Ed Giganti, if those lay leaders undergo what he calls “formation.” Giganti, who is CHA’s senior director, ministry leadership development—and guest editor for this issue of *Health Progress*—introduces the idea in his article, “What Is ‘Leadership Formation’ Now?” (p. 18).

In “Nurturing the Ministry’s Soul” (p. 38), William J. Cox describes the new Ministry Leadership Center that five western Catholic systems have collaboratively launched for the development of their leaders. Meanwhile, Paul Marceau, ThD, in “A Fellowship Program for Mission Leaders” (p. 44), outlines a mentoring program at Trinity Health, Novi, MI.

In “Profiling Catholic Health Care Leaders” (p. 30), Diane Irvin and Blair Gawthrop of Strategic Programs, a Denver-based research and consulting firm, discuss a kind of “snapshot” they have developed of the typical Catholic health care leader. In “Beyond Best Intentions” (p. 47), Michael O’Brien, EdD, a Cincinnati consultant, and Jon Abeles, EdD, of Catholic Healthcare Partners, also based in Cincinnati, write about leadership coaching at that system.

In “Health Care and Community” (p. 34), John Glaser, STD, and Kevin Buck, both of St. Joseph Health System, Orange, CA, encourage the ministry to return to its communitarian roots. Ken Homan, PhD, a professor of systematic theology at Aquinas Institute of Theology, St. Louis, argues in “Formation and Governance” that the ministry should create formation programs for its board members (p. 23).