CHA: Uniting Our Individual Strengths

BY SR. DORIS GOTTEMOELLER, RSM

Our recent assembly was momentous on two accounts: the commissioning of our new president, Rev. Michael Place, STD, and the adoption of far-reaching changes in our membership categories and dues structure. The enthusiasm in the assembly was palpable as Fr. Mike pledged his commitment to the mission of the association and as we pledged our commitment to him and to one another to collaborate in our shared ministry of healing. The ceremony was an opportunity for all of the staff and members present to affirm their support for the mission and goals of CHA.

The organizational changes in the association are the result of a long-standing desire to make our structure more closely mirror that of the ministry. Extensive design, consultation, and dialogue led to the unanimous adoption of the proposed changes at the annual business meeting. It will be well to bear in mind as we go forward that these organizational changes, no matter how carefully crafted and implemented, will create new questions. We rely on the good will of everyone to make the transition as smooth as possible.

With our new leader at the forefront, and with a new definition of membership in place, we need to focus with renewed energy on the work ahead. CHA must be a member-driven organization, in which we pool our collective wisdom and energy in order to accomplish goals that none of us could achieve alone. It can be a vehicle for uniting our individual strengths as sponsors, as systems, as regional and local organizations, and as leaders. There is no need for CHA to duplicate what its members can do individually. But together, as an association, we can enhance and augment our independent ministry initiatives.

A BLUEPRINT FOR THE YEAR AHEAD

In March we held a series of regional meetings with system leaders to guide Fr. Mike as he began his term. At these meetings participants were asked to describe the role CHA should play in adding value to the work of systems. Some of the words we heard were “challenger,” “convener,” “advocate,” “leader,” and “unifier.” Our board of trustees is committed to bringing these words to life as we work with Fr. Mike during the coming year. Our blueprint for doing so is contained in the Strategic Plan (see p. 93). Let me highlight a few of the projects which I believe should be “front page” in the months ahead.

The Case for Catholic Healthcare We have already begun an initiative called “Making the Case for Catholic Healthcare.” Drawing on the experience of several members, this resource package will help local healthcare organizations prepare and convey to the public a positive, proactive case for our contribution to healthcare and to the community. It is naive to think that good information will automatically drive out bad information and misrepresentation. To be effective, information about us must be accurate, timely, and delivered in an appealing manner. Unfortunately, some of our members are currently facing public challenges against our right to exist, challenges made by groups opposed to our ethical principles. This package will provide tools for responding.

For other members, we hope the package will be a resource for ensuring that Catholic healthcare becomes better known, not just for what we stand against—unethical procedures—but also for what we stand for—compassionate care focused on the whole person, accountable to communities, and committed to the poor.

Being a Voice for the Vulnerable This is a year when our combined voice for advocacy must make a real difference in the lives of the poor and uninsured. CHA’s Strategic Plan includes several advocacy initiatives designed to keep this issue in the public forum, such as educational seminars for congressional leaders, active promotion of Medicare reforms, and joint efforts with other faith-based groups. Our approach to healthcare reform and wider access will be incremental, but nevertheless it must be consistent, persistent, and consistent with our basic mission. In fact, everything we do as an association must be done from
the perspective of how it affects the vulnerable and underserved. CHA is noted for its effective lobbying on behalf of its members and their concerns. In this era of general prosperity in the United States, we need to use our voice as never before to address the needs of those who are being left out.

**Refreshing Our Sense of Purpose** The future of our ministry depends on renewing our shared vision. It has been 10 years since the National Commission on Catholic Health Care Ministry engaged a wide cross-section of the ministry in a process of creating a shared sense of purpose and direction. Many elements of the commission's report, "Catholic Health Ministry: A New Vision for a New Century," have been enacted. It is time now to refresh the vision and to identify new directions that correspond to our changed situation. The New Covenant Steering Committee is currently testing this concept with focus groups around the country. However we approach this challenge of refocusing, it will need to be done in close collaboration with the National Coalition for Catholic Health Care Ministry, the New Covenant Steering Committee, and other groups that share in our commitment to the ministry.

**WE NEED MEMBERS’ FEEDBACK**

As chairperson of CHA's board of trustees, I know I speak for all board members when I say that we are enthusiastic about the coming year and committed to giving our best service to the association. We count on equally enthusiastic cooperation and communication from you, the members. For our committees and task forces to serve us well, for our programs and other initiatives to be effective agents of change, we need your input and honest feedback. Please let me know what you like and do not like and how we can do better. Working together, from an explicit, shared vision, we can have a powerful impact on the delivery of healthcare and we can be effective agents of Christ's healing ministry. This would truly be, to quote from our recent assembly, to do "mission in the marketplace."

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