I have a confession to make: I was a mission leader for seven years before I had a good understanding of what sponsorship in Catholic health care is all about. I used to be embarrassed by it, until I discovered that many other senior leaders and middle managers also have no idea what sponsorship is. Many leaders are not able to tell you the names of the individuals who make up their sponsoring board or PJP. And the term PJP — public juridic person — is understood by even fewer leaders within Catholic health care. Unfortunately, for many leaders and front-line associates, sponsorship and the individuals who make up our sponsoring boards are shrouded in mystery. One of the goals of this *Health Progress* issue is to pull back the curtain and begin to demystify sponsorship. This article will show the relationship and connections between sponsorship, governance and mission integration.

**A DEFINITION**

According to one CHA definition, a sponsor’s primary role “is to ensure that the mission of Catholic health is carried out, now and in the foreseeable future. A sponsor is a steward, accountable to the church for the organization’s Catholic identity and ministry, as well as its financial health and property ownership.”

In short, sponsors are responsible and accountable for the integrity and perpetuity of the healing ministry. The members of the sponsoring board or PJP, therefore, must first themselves understand what that means. It is never assumed that anyone — even a person in a religious congregation or with a strong Catholic education — who serves as a sponsor member, understands what the role and responsibilities of sponsorship entail. Sponsors go through a formation process that prepares them by providing the theological, ethical, canonical and spiritual resources they need to shepherd the ministry entrusted to them.

The Catholic Health Association and its members developed a sponsorship formation program that identifies key competencies for sponsors, as well as a core curriculum of formation. The program’s purpose is to root sponsors in the tradition of the Catholic Church so that the identity and integrity of Catholic health care are maintained, while, at the same time, the emerging needs of the community are assessed and addressed.

**CHURCH RELATIONS**

Although sponsors have the ultimate responsibility for maintaining Catholic identity and addressing the needs of the community, they work in partnership with the church and the diocesan bishop, as well as the health system’s functions of governance and mission. Sponsors serve as connectors between the Vatican and the local ministries. Sponsoring boards and PJPs are required to submit an annual report to the Vatican and make an in-person visit every three years to the Congregation for Institutes of Consecrated Life and Societies of Apostolic Life. Staff have told CHA that although the financial reports demonstrating viability are important, the Vatican is more interested in how the needs of the poor and marginalized are being addressed and how the lay leaders and associates of Catholic health care are receiving ongoing formation so the ministry endures.
BLESSED ARE THE POOR IN SPIRIT FOR THEIR IS THE KINGDOM OF HEAVEN.
BLESSED ARE THOSE WHO MOURN FOR THEY WILL BE COMFORTED.
BLESSED ARE THE MEEK FOR THEY WILL INHERIT THE EARTH.
BLESSED ARE THOSE WHO HUNGER AND THIRST FOR RIGHTEOUSNESS FOR THEY WILL BE FILLED.
BLESSED ARE THE MERCIFUL FOR THEY WILL RECEIVE MERCY.
BLESSED ARE THE PURE IN HEART FOR THEY WILL SEE GOD.
BLESSED ARE THE PEACEMAKERS FOR THEY WILL BE CALLED CHILDREN OF GOD.
BLESSED ARE THOSE WHO ARE PERSECUTED FOR RIGHTEOUSNESS SAKE FOR THEIRS IS THE KINGDOM OF HEAVEN.
BLESSED ARE YOU WHEN PEOPLE REPROVE YOU AND PERSECUTE YOU AND THEIR TALK BADLY OF YOU IN THE SAME WAY THEY PROSECUTED THE PROPHETS WHO WERE BEFORE YOU.
BLESSED ARE YOU. WHEN THEY HATE YOU AND PERSECUTE AND TALK EVIL ABOUT YOU BECAUSE OF ME.
Similarly, sponsors meet regularly with local bishops to share how Catholic health care facilities within the diocese are continuing the healing ministry of Jesus. Catholic identity, ethical issues, proposed partnerships with other-than-Catholic entities and formation of lay leaders are the typical areas discussed. Because the CEO and mission leader of the Catholic health organization also routinely meet with the diocesan bishop, it is essential that there be a mutual understanding between sponsors, governance and mission about how Catholic identity and integrity are being demonstrated within the organization and how that message is being communicated.

RELATIONSHIP TO GOVERNANCE
The relationship between sponsorship and governance has not always been easy to define. One of the reasons is the variety of models of how sponsors and governance share the responsibility for oversight of the ministry. Some systems have a distinct sponsorship board, or PJP, and a board of trustees. Others have a “mirror board” whose members act both as sponsorship board and board of trustees or directors.

The sponsorship role is focused on carrying forth the healing ministry of Jesus and preserving Catholic identity. Most models agree that finance, operations, management, quality and strategic planning are traditional roles of governance. However, most systems recognize that sponsors also must be included in the strategic planning process. Part of the responsibility of sponsorship is to ensure that the ministry will endure, and it is critical for the sponsors to know what the future looks like and how the organization will respond in a manner consistent with Catholic tradition.

CHA’s members have asked for a task force to clarify the emerging role of the sponsor and the relationship between sponsorship and governance. The goal is to explain and distinguish the roles and responsibilities of these two aspects of ministerial stewardship. The task force will be composed of CEOs, sponsors and trustees and will begin meeting in 2017.

PROPHETIC ROLE
From the Industrial Revolution, when religious congregations emerged to deal with the health and social needs of the poor and vulnerable, to today, when sponsors are clear voices in the call for basic health care for everyone, sponsors have been prophetic. For example, they recognized that religious congregations would one day no longer oversee the health care ministry and that it was time to invite and form lay leaders to first partner, then one day lead the ministry.

Their vision resulted in the creation of PJPs — each composed of religious and laypersons, although some now are made up entirely of lay members; formation programs for senior leaders; and the creation of mission leadership departments that help other leaders learn how to integrate mission, ethics and spirituality within their departments.

More recently, sponsorship boards and PJPs have taken a prophetic role by directing their system leaders to become more involved in caring for vulnerable populations, including immigrants and refugees, victims of human trafficking and persons with mental illness. At times the sponsors have challenged us by asking why our systems have not eliminated disparities in care delivered to minorities and the poor; why our boards and senior leadership teams are not as diverse as the populations we serve; and what we are doing to address the social determinants of health in our area.

Some sponsors have become advocates for protecting the planet and have asked governance and senior leaders to adopt environmental sustainability practices.
Although the prophetic role of sponsorship is central to stewarding the church’s health ministry, leaders and associates don’t usually see the sponsors, which may contribute to some of their mystique and the misperception that sponsors deliver oracles from on high. It is crucial for senior leaders and sponsors to maintain a relationship.

**SPONSORSHIP AND SENIOR LEADERS**

Sponsors are responsible for keeping the mission and ministry of Catholic health care vibrant. Senior leaders are responsible for operationalizing it. Sponsors create the vision and inspire others to share in the mission of Catholic health care, steward the ministry and maintain accountability to Rome and the diocesan bishop. Senior leaders, including the mission leader, are responsible for creating the policies, procedures, practices and culture to make sure the vision is being realized. For vision and practice to come together, sponsors, senior leaders and mission leaders must establish working relationships.

Operationalizing mission, or mission integration, is the day-to-day work of leadership. It occurs not only in formative moments like new-hire orientation, but more importantly in the day-to-day work of caring for the sick, infirm and those who are most vulnerable. Mission integration takes place when a manager or a senior leader pauses to reflect and use a values-based decision-making process rather than making a quick decision.

Leaders operationalize mission when they help create an environment that invites the spiritual dimension of holistic healing to be experienced by patients, families and staff. These are the hands-on, daily moments when leaders connect associates to the higher calling of the mission and ministry. Such nuts-and-bolts work is not the role of sponsorship, it is the work of senior leaders — but obviously there is a connection.

**SPONSORSHIP AND FRONT-LINE STAFF**

I believe we have an opportunity within our ministries to make the connection between sponsorship, senior leaders and front-line staff more visible. Recently, I facilitated a retreat for members of a PJP. While discussing the relationships between sponsorship, governance, senior leaders and front-line staff, one of the members stated, “Our leaders and associates don’t know the name of our public juridic person, much less the names of the individual members. How can we help them see they are a part of something bigger than the facility where they work? That the work they do is rooted in a tradition and charism that ultimately goes back to the ministry of Jesus?”

One person thought the answer was in educating leaders and staff, publicizing the name of the PJP and showing pictures of the members of the PJP board. But another said, “It is our responsibility as sponsors to go to the facilities where ministry is taking place. It is not enough for us to read reports that tell us all the good things that are going on. We should be seen by leaders and associates, and we should be out on the floors thanking them for partnering with us in this ministry. They need to know us, and we need to know them.”

That certainly would go a long way toward demystifying who and what sponsorship is.

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**NOTE**
