## EDITOR'S NOTE

or most of us there are lots of random press releases and news bulletins that come in our email and never get opened. But recently I clicked on one about the Land-O-Lakes Statement 50-year update. Sometimes it's just an intriguing title that will take you down a rabbit hole, and you discover it was worthwhile.



The Land-O-Lakes Statement was a seminal document following Vatican II that set forth a vision for Catholic higher education. In 1967, a group of Catholic intellectuals, theologians and educators, led by Fr. Theodore Hesburgh, CSC, at the University of Notre Dame, opened discussions of academic excellence, Catholic identity, ecumenical

engagement and secular interaction. They produced the Land-O-Lakes Statement. How interesting that the nexus of Catholic identity and excellence — academic and clinical — would be driving forces of the ministries of education and health care for at least the next 50 years.

There are many parallels in the development of Catholic health care and Catholic education. Both ministries underwent enormous change as their founders and foundresses envisioned, then transitioned, leadership to lay boards, administrators, faculty and caregivers. Both ministries strive to uphold Catholic identity as they commit to increased cultural competence and respect for other faith traditions. And both ministries operate in industries where rising costs far exceed the rate of inflation, which can make their mission statements seem at odds with their financial statements.

Those parallel tracks cry out for intersections, especially now. This issue of *Health Progress* investigates how the Catholic ministries of education and health care should and can support each other in the best pursuit of their missions. The points of connection between teaching and healing originate in the person of Jesus. Early in Matthew's Gospel, the evangelist describes Jesus' joint mission in a single sentence: "He went around all of Galilee, teaching in their synagogues, proclaiming the gospel of the kingdom, and curing every disease and illness among the people."

It's not merely a mission message. Until we get the connection between teaching and heal-

ing more in line, we have little chance of accomplishing the Triple Aim of improving population health, reducing health care costs and increasing patient satisfaction. The Quadruple Aim — which adds improving the experience for health care providers — demands ever better alignment.

Burnout among nurses, suicide among physicians and general disenchantment within health care are at all-time highs. In his address at this summer's American Hospital Association Leadership Summit in San Diego, Abraham Verghese, MD, described a disillusioned new physician who wondered why all his education and idealism were being put to use as a highly paid data entry person. Plugging info into the ever-present computer, he felt he spent more time with his e-patient than his real patient.

Verghese is not a Luddite calling for a return to the practices of yesteryear. He is, however, advocating for medical school education that aligns with real-life practice, and real-life practice that optimizes the education and love of caring for patients that physicians begin with.

There is evidence of hope in the following pages: interprofessional learning experiences are building a culture for true patient-centered care; targeted investments in high school and community college students are driving diversity in health care professions; health care systems are partnering with nursing and medical schools to help with student debt and recruit new practitioners; and discussions of what schools are doing, and can do better, to prepare health professionals not only for the practice, but also the *ministry*, of health care are underway.

These are practical ways to focus on the intersections of Catholic health care and Catholic education. Thanks to each of our authors for describing the new approaches to training and practice, and special thanks to our guest co-editor Fred Rottnek — physician, professor of community medicine and student of theology — who helped us identify the topics and find the best authors for the magazine.

## HEALTH PROGRESS

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