

CATHOLIC IDENTITY, ETHICS AND AUDITS

Threat or Opportunity?

Of late, there has been increasing talk of audits — mission audits, ethics audits, Catholic identity audits, Catholic health care audits and audits of compliance with the *Ethical and Religious Directives for Catholic Health Care Services* (ERDs). Several church leaders from across the country have raised the possibility of requiring audits in Catholic hospitals in their dioceses. A few already require them, and several systems have initiated ethics and/or mission audits on their own. In response to this growing interest in and desire for audits, CHA ethics staff, over the next months, hope to develop a process and supporting materials that could be used for such organizational self-assessments, as well as assessments by third parties.



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The reasons for audits are varied. For some, audits serve an oversight or policing function to measure compliance with the ERDs. They arise out of a concern that particular Catholic health care facilities are somewhat less than rigorous about their Catholic identity, or that their Catholic identity might have been diluted due to a partnership with a secular health care organization.

For others, audits are a way to take stock, to identify areas of strength as well as opportunities for improvement. The goal is to build on strengths and to focus attention and efforts on those areas where there is a gap between what is and what could or ought to be. Audits become a tool to better the organization in some particular area or areas related to mission or ethics.

For these kinds of audits, various tools or approaches are available: for example, several systems have employed or are in the process of using the Catholic Identity Matrix, developed by the Veritas Institute at the University of St. Thomas, St. Paul, Minn., in conjunction with Ascension Health. CHA Healthcare, a group that provides internal audit services to nonprofit health care organizations, also offers ERD audits.

The CHA ethics staff has conducted several assessments, as we prefer to call them — two were

ethics assessments, relatively broad in scope, and one was a Catholic identity and ERD assessment. The ethics assessments both sought to get a sense of the organization's ethics culture — the breadth and depth of commitment to and expression of Catholic identity, mission and values — and to explore the ethical character of the organization and its ethics services, especially the ethics committee and ethics consultation. In both cases, the assessments involved systems and included the system office and each of the facilities.

The Catholic identity and ERD assessment concerned a single facility, and it was somewhat more limited in scope. It focused mostly on awareness and manifestation of the organization's mission and values as well as knowledge and implementation of the full range of ERDs.

Though the content differed somewhat, the process for all three assessments was similar and consisted of four parts: a review of ethics-related policies; an on-line survey open to all front-line staff, nurses, physicians, pastoral care personnel, members of the ethics committee, administrators, board members and sponsors; a site visit that included one-on-one interviews with key leaders and several focus groups, one of which consisted of members of the ethics committee; and a final report that described the process, findings, strengths, opportunities for improvement and recommendations.

Part of each report was a separate assessment of the ethics-related policies, along with recom-

mendations. We conducted the policy reviews and the online surveys prior to the site visits and, to some degree, the information we gathered shaped at least part of the subsequent interviews and some of the focus group questions.

The emphasis of the CHA assessments is not primarily or solely compliance, but rather the extent to which the organization's mission and values, the ERDs and ethical concerns, processes, and practices are integrated into the very fabric of the organization — its policies, its decision-making, its everyday life, and its delivery of care.

When focused on compliance, especially compliance with a very limited number of ERDs, audits or assessments can have a negative connotation and be viewed and experienced as a threat. They also do not do justice to the fuller meaning of Catholic identity or of an ethical culture or to the quality of ethics services. An emphasis on compliance can breed minimalism.

The goal of an assessment should be to assist an organization to grow into a more virtuous and ethical organization. Assessments should assist an organization in looking at its identity (who it claims to be and actually is) and its integrity (whether its decisions and behavior are consistent with who it claims to be).

There seem to be at least three major benefits

to ethics and mission assessments. First, they provide an opportunity for a third party with nothing at stake to take an objective look at certain aspects of an organization. By giving such a third party access, the organization gains a perspective that is different, or somewhat different, from that gained from within. Second, an assessment raises certain aspects of an organization to conscious awareness in a way that would not otherwise be the case and generates conversations across the organization. The heightened awareness and the conversations can themselves lead to measures that foster improvement. Third, they can provide something of a road map for improving and strengthening an organization's identity and integrity, and the structures that support them.

With all the changes occurring in Catholic health care these days, assessments can be a most valuable endeavor in order to keep an organization moving in a positive direction with regard to its Catholic identity, the integration of its mission and values, and its ethical culture. Assessments can truly be an opportunity for growth and betterment.

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