

# A Ministry, Not a Business

BY SR. MARY KEVIN FORD, CSJ

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cilia Moran, RSM, Award. This article is adapted  
from her speech at the awards ceremony, June 8,  
1996.*

**I**n recent years I have repeatedly heard people ask of the Catholic health ministry such questions as: "Is it really still a ministry?" "Should we even try to continue our involvement?" "Is this where we should be putting our limited resources and energies?"

These questions, or variations on them—always accompanied by a slight shrug of the shoulders, a rise in inflection, and a breathless pause at the end—clearly indicate the speaker's deep doubts about our continued involvement in the ministry.

But each time I hear such questions, I become more puzzled and amazed.

For Catholic healthcare is a ministry with a rich heritage. We simply cannot entertain for a moment the possibility that it might be abandoned. Jesus himself gave us the mandate to heal and teach. Encountering difficulties, even difficulties of an unprecedented magnitude, is no reason for losing hope. Pursuing a ministry is not the same thing as filling a slot, completing a task, or managing an industry. Yes, we face difficulties. But breaking longstanding relationships or seeking simpler ministries is not a solution to them.

Of course, we want to remain in this turbulent, challenging, person-oriented ministry that meets so many souls, each at a critical place, in ways and at times when everything fades except the needs of the moment.

Throughout its long history, the Catholic healthcare ministry

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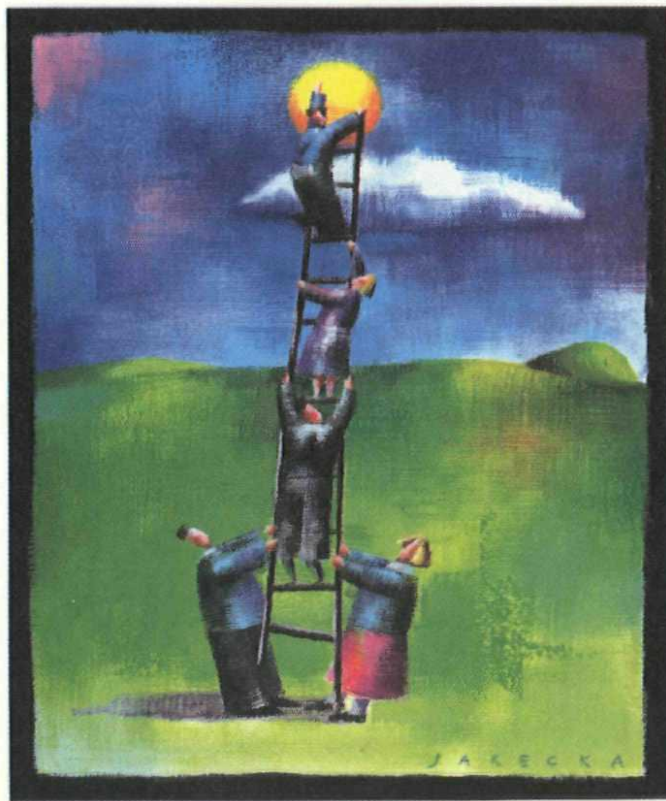
has been cultivated and nurtured by women and men religious, working with like-minded lay associates. Our forebears were risk takers, faith filled and person oriented, who brooked no interference when they were trying to provide for the needs of their neighbors, especially the poor. Those associated with the Catholic healthcare ministry today are just as determined—that is, people who recognize needs, who are not afraid to redesign the ministry, who pursue their goals with dedication and singleness of purpose, who continue to invest their lives in response to the call of Jesus.

The fact that people associated with the Catholic healthcare ministry today face high hurdles, including unresponsive social systems and unimaginably complex technological advances, gives them no pause. Rather, they are undaunted, stimulated, prudently determined. Indeed, it

is precisely the moral complexity of contemporary healthcare that shows them how much they are needed. I loved reading, in a recent issue of *Catholic Health World*, Sr. Bernice Coreil's statement: "I'm pessimistically optimistic. You can say I'm bloodied but unbowed."<sup>21</sup>

How could we have doubts about remaining in the ministry when so many have come to trust us? We have raised the hope and expectation that sound moral and ethical alternatives will be available to meet people's health needs. These services are part of the essential work of the Church. Knowing this—and being gifted with the capacity, education, and drive to perform the work—have we not an obligation to respond?

Faith tells us that when  
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trust is placed in the provident presence of God and the tasks are carried out in his name and for his people, no matter how complex the activity, how daunting the tasks, how hopeless things may appear, we cannot succumb to inaction. The healing ministry is a vital work of the Church, a work of the Lord Jesus, a work that respects the dignity and worth of our fellow pilgrims. Of course we shall continue in the ministry. Of course we shall support all those dedicated and selfless persons who labor on despite obstacles and lack of appreciation.

The new and expanded ways in which we must carry out our ministry are exciting. Let's not allow the accountants to dictate what our ministry is, changing it into a simple commodity. We're following Jesus' command—let's not contaminate it with undue influence from the money changers. Our ministry is informed by prudent business principles; but it is a ministry, not a business.

I am reminded of a talk given by Sr. Andree Fries, CPPS, of the Sisters of the Most Precious Blood, based in O'Fallon, MO, in which she reflected on the opportunities that would be available if only we would take advantage of the many new forms of leadership emerging in our time. Sr. Fries quoted Peter Senge, who said in his book *The Fifth Discipline*, "The key function of [successful] leadership is to facilitate vision-driven, value-based learning . . . [and to] expand associates' [ability] to understand complexity, clarify vision and improve shared mental models."<sup>2</sup> We need leaders who take responsibility for learning, for we certainly have much learning to do as we move into the next century.

Healthcare will be far more diversified in the future, and our leadership will face new challenges in the coming world of managed care, physician partnerships, ambulatory care, preventive care, expanded elder care, chronic care, rehabilitation, hospice, and the many other varieties of care. The greatest challenge will probably lie in finding ways to fund these expensive modalities under capitation. I believe that we are still unaware of all the pressures capitation will impose on us. Our goal is to be of service to our neighbor. An insurance company's goal is to get a good return on its stockholders' investment. We must ensure that our ministry endures.

Our Carondelet Health Care System has developed a statement that says:

We believe that the refounding of the Church's healing ministry is a faith process which is inspired by hope. It necessitates letting go of the familiar in order to allow the as yet uncreated newness to emerge. Some chaos is inevitable, and we must be aware and supportive of our people so that there will indeed be room for the creativity of all. We are sensitive to the fact that movement

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toward change may not be welcomed by everyone. But we believe that if we keep our focus on Mission, the structures will follow.<sup>3</sup>

This statement has deep significance for those associated with our system. It implies that we must be aware that current forms of governance and sponsorship need exhaustive study, plus flexibility, a collaborative orientation, and a more global vision than a single congregation can possess. We must acknowledge that interdependence is the way to go; isolation, independence, and autonomy can no longer ensure viability. We must actively chart our future if we want to transform and strengthen the healing ministry at the regional and national levels, as true works of the Church, shared ever more openly with our lay associates and with other congregations. In the new world dominated by for-profit healthcare, it won't always be easy for us to remember that we are about God's work, first and foremost.

As our strategic plan states: "We must seek systems and partners with compatible mission, philosophy and organizational culture that will allow us to strengthen our presence in geographical locations—(perhaps different from our present location). We must recognize in partnering that we work with peoples of all faiths and that everything we do must be done in a way that respects the dignity, spirituality and culture of each human person."<sup>4</sup>

The bottom line is: We Catholics have to get together. We've said that for eons—now let's do it. The Omaha-based Catholic Health Corporation successfully paved the way years ago. The new Catholic Health Initiatives, bravely launched this year, demonstrates its owners' conviction that healthcare is truly a ministry mandated by Jesus.

A national Catholic HMO would make a good adjunct to such organizations. There are already many small Catholic HMOs around the country. Let's unite and get on with it! We need to be headed down the same road, in the same direction—and in the same vehicle.

When we do at last unite, we will simply be following the example and vision of Sr. Mary Concilia Moran, RSM, which she demonstrated throughout a beautiful, productive life dedicated to our Lord Jesus. Should we strive for less? □

#### NOTES

1. "No Room in the Marketplace": A Decade Later, It's Even More Relevant," *Catholic Health World*, May 1, 1996, p. 1.
2. Peter Senge, *The Fifth Discipline: The Art and Practice of the Learning Organization*, Bantam Doubleday Dell Publishing Group, New York City, 1990, pp. 9-12.
3. Carondelet Healthcare System, *Faith Process and Goals*, 1996, p. 3.
4. Carondelet Health Care System.