

The Three Stages Of Leadership Development

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The corporate world has discussed at length the development of leadership programs for executives and administrative personnel. Throughout the United States, Fortune 500 companies spend billions of dollars for consultants in staff training and development. Programs are designed to imbue administrative personnel with a knowledge of and commitment to the company's mission and goals.

The corporate world is not alone in its desire to develop a deep sense of loyalty and understanding of the organization in the next generation of executives. As Catholic healthcare facilities struggle to survive in an increasingly competitive market, they feel constant pressure to attract and retain highly competent administrators. Faced with a critical shortage of vowed religious, they grapple with succession planning. In many cases, the professionals hired will not share the Catholic tradition. Many sponsors and board members express concern over the future Catholic identity of the Church's healthcare institutions. Many believe that an institution must have a critical mass of individuals who are both knowledgeable about and committed to the Catholic tradition in order to retain the institution's religious identity.

In an attempt to both preserve and rekindle the spiritual commitment that was once pervasive in these institutions, Catholic facilities throughout the United States are now developing "formation programs" for key administrators. Unfortunately, the term "formation" has been applied to a plethora of educational experiences that have little in common with what the Church has traditionally labeled as a "formation program." We believe that the term "formation" should not be used lightly and that this level of spiritual commitment should be entered into after a candidate has completed years of study and "hands-on" experiences in the Catholic environment. It is a process best reserved for candidates with a specific administrative focus and personal commitment to the Church's ministry. An administrator



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should never be coerced to enroll in such a program with the belief that this is a prerequisite to advancement up the corporate ladder.

THREE STAGES OF DEVELOPMENT

Leadership development for administrators of Catholic facilities has three distinct stages:

1. Education (knowledge of Catholic teaching)
2. Socialization (experience in a Catholic milieu)
3. Formation (integration and public commitment of personal faith to professional life)

Each of these stages involves different educational and spiritual experiences designed to provide staff with varying degrees of insight and commitment into the institution's mission. Although education and socialization alone may suffice for staff and some managers, we believe that formation is critical for those administrators, chief executive officers, and board members who will have both civil and canonical responsibilities for Church-sponsored institutions.

Level One: Education Education (exposure), in simplest terms, is the imparting of information from one individual to another. Education is more than simply the transmission of facts. However, in level one the focus is on the minimal or basic information a person must have. Adult learning models are incorporated into the formation process (level three), in which a person reflects on the knowledge base, discusses it with peers, and integrates it into behavior.

Education is a cerebral activity and can be accomplished without engendering commitment, acceptance, or belief in a set of doctrines or values. An individual's mastery of the subject matter is usually measured by knowledge of a subject, which can be assessed by an objective set of questions. A person could attend a series of lectures or educational days related to Catholic values and become familiar with them without ascribing to these values. Thus he or she might be able to recite the values contained in the institution's mission statement, know the sponsoring congre-

gation's history and charism, and be aware of the *Ethical and Religious Directives for Catholic Health Facilities* without having a personal investment in these essential elements of a Church-sponsored institution.

All employees, regardless of position, should receive some exposure to the institution's religious aspect as part of their orientation sessions and ongoing staff training. The content and scope of the curriculum would vary, depending on the individual's position.

Level Two: Socialization Education has to do with the cognitive aspect of the job setting; socialization has to do with the behavioral expectations of the individual while at the job site. As long as a person demonstrates the "expected behavior" (e.g., courtesy, professionalism, respect), we consider the individual properly socialized to his or her role obligations. Sociologists James Lugo and Gerald Hershey remind us that "no values are attached to socialization, that is, as long as the person learns the ways of a given society or social group and can function within it, he is considered to be 'socialized'" (*Human Development: A Multidisciplinary Approach to the Psychology of Individual Growth*, Macmillan Publishing, New York City, 1974, p. 169). Thus people are socialized into the army, the local fraternity, or the corporate world.

Sociological researchers tell us that one of the main goals of socialization is "teaching others how to fulfill social roles" (John Perry and Erna Perry, *The Social Web*, Harper & Row, New York City, 1983, p. 122). It is thus possible to fulfill a role and perform a function without having a *personal commitment* to either the activity or the institution. Administrative personnel who are professionally competent but either indifferent to Church teaching or not involved in a structural position would be candidates for level two. Such persons are *respectful of and compliant with* the religious tradition but observe certain norms merely because they are part of the job description. The institution's religious tradition and the administrator's faith dimension are not integrated or connected.

Level Three: Formation The formation stage should be reserved for those administrators who bring a genuine faith dimension to their professional commitment. A candidate for level three is not only knowledgeable about and supportive of the

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LEVELS OF DEVELOPMENT

1. Education: knowledge of Catholic teaching
2. Socialization: experience in a Catholic milieu
3. Formation: integration and public commitment of personal faith to professional life
 - a. Academic component
 - b. Spiritual component
 - c. Integration component

religious tradition, but also eager to become an *active agent* in promoting and integrating the institution's religious mission.

Formation is much more complex than mere knowledge of the sponsor's charism or compliance with certain institutional values and role expectations. Formation implies that the individual has absorbed the organization's values (education), has demonstrated compliance with the values (socialization), and wants to integrate a faith dimension into daily professional activity.

This does not imply that the administrator must be Catholic. Baptism alone does not automatically make a committed person. Rather, a candidate from another faith tradition could enter into a formalized formation process because he or she is deeply committed to the spiritual values inherent in a Church-sponsored institution.

The process called "formation" implies three distinct components:

- *The academic component*—mastery of Church teaching covering a broad curriculum (e.g., social encyclicals, the Sacraments, Scripture, canon law, healthcare ethics)

- *The spiritual component*—an intense retreat experience involving a close relationship and personal knowledge of the sponsor's charism

- *The integration component*—a demonstrated ability to successfully evaluate the theological, social, and professional aspects of a given situation and to be able to articulate and integrate the Church's position in that situation (e.g., in the areas of healthcare ethics, unionization, and termination policies within Church-sponsored institutions)

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Coming in the
Next Issue of

Health Progress®

REPORT OF THE 77TH ANNUAL CATHOLIC HEALTH ASSEMBLY

Coverage of this June meeting in Anaheim, CA, will include a report on the case for healthcare reform—implementation strategies and the role of CHA and its members. In the keynote address, sociology professor and author Robert N. Bellah, PhD, will examine the public's loss of faith in its institutions and how that loss may hinder healthcare reform. Professor and communitarian movement leader Amitai Etzioni, PhD, will address the need in today's society for a balance of rights and responsibilities, individualism and community. Healthcare Forum President and Chief Executive Officer Kathryn E. Johnson will give participants a glimpse at the leadership practices and organizational demands that will face healthcare leaders in the twenty-first century. Other topics include practice pattern variations, genetic technology, and cultural diversity.

LEADERSHIP DEVELOPMENT

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PRESERVING THE CULTURE

It is unfortunate that the term "formation" often conjures up negative images of novitiate training or an unspoken resentment that the sponsoring group believes it has a monopoly on the truth. This is not the sponsors' intent. Rather, the desire to develop leadership training programs stems from a genuine concern with the future of Church-sponsored institutions. Perhaps three of the most important questions facing sponsors of Catholic hospitals today are, How do we preserve the culture of an institution in the midst of unparalleled social change? How do we create a climate that motivates people to integrate a faith dimension into their lives? And, What is the commitment of those who will inherit our institutions to preserve their religious focus?

Too often in the recent past, sponsors and boards have hired administrators with strong managerial skills and left the transmission of the religious heritage to the office of mission. Such an administrative decision is foolish, for it makes observance of the religious tradition little more than window dressing and segregates the spiritual dimension as something outside the institution's daily operational decisions.

It is impossible to preserve a culture in our institutions unless administrators are imbued with the culture's beliefs, values, and norms and are personally committed to perpetuating them. If we are serious about ensuring the presence of Catholic healthcare facilities in the twenty-first century, then we must establish appropriate staff training and development programs.

We must recognize that education and socialization alone do not produce commitment. Education is essential for information. Socialization is essential for external compliance. Formation, however, is essential for perpetuating the essence of the Catholic culture into the next century. □

MARKETING

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centers, and news releases were sent to local newspapers.

The seminars were designed to help seniors learn more about their Medicare benefits, how to become eligible for Medi-Cal (California's Medicaid program), and the connections between medical ethics and healthcare costs. A local attorney and national expert on elder law spoke on protecting one's assets, medical and financial durable powers of attorney, conservatorships, trusts, and protecting assets within the federal Medi-Cal guidelines. Representatives from the Medicare Advocacy Project addressed the complexities of identifying and claiming Medicare benefits.

In addition, the hospitals' medical director addressed the ethical and legal issues involved in making end-of-life treatment decisions. Presentations also focused on the amount of money spent on healthcare during the last six months of life and the impact this expense has on funding for prenatal or primary care programs. Finally, the hospitals' patient representative talked about advance directives, explaining which are legally binding and which can result in legal confusion and heartache in a time of crisis.

The response from the community was overwhelmingly positive. Between 60 and 100 persons attended each of the seminars, and one session had to be scheduled a second time to accommodate the number of persons interested.

"Seniors are just as concerned about these issues as are the hospitals," Schnack concludes. "They don't like the idea that they won't be able to pay their bills or that healthcare expenses might deprive their children of an inheritance. They're also concerned about the ethical implications of certain treatment decisions and the questions surrounding 'death with dignity.'" □