

MINISTRY BEYOND MEASURE

In early spring, as I was shopping at my favorite grocery store on the Hill, St. Louis's Italian section, I discovered a button with a declaration that made me laugh out loud in recognition of truth. It proclaimed "What recipe? I'm Italian!" Now, I come from a long line of excellent cooks and, over the years, never being able to wangle an authentic recipe from my Italian aunts, I instead perched on a stool beside a stove, pencil and paper in hand, and tried to write down formulas that would bring about the miracles they wrought in their kitchens.



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Whenever I asked "How much?" or "What temperature?" the answer was always the same: "It depends." If it was a small egg, then put in two; if a large egg, then only one. If your stove tends to get too hot, then 375 degrees is right, but if it does not, then set it at 400. These cooks knew, from years of experience, from trial and error, from being at the table and the stove

with their mothers and grandmothers, that cooking is both an art *and* a science, and an excellent cook is always cognizant of both aspects of the craft.

Similar to cooking, medicine (and by inference, health care) is both an art *and* a science. In 1979, Edmund Pellegrino, M.D., speaking about Catholic health care, noted that "Science is necessary to specify the causes of the patient's illness and to determine what modes of therapy are available, which are effective and how safe they are. Art is required to assure perfection in carrying out the decision of a skillful examination, operation or manipulation." The practical decision, Dr. Pellegrino asserted, focusing on the particular patient in question, is what is most essential to excellent medicine.

In contemporary Catholic health care, our mission urges us to excellence out of respect for the dignity of each person. Similarly, health care leaders' experience, education and mentoring

compels them to focus on outcomes, measurements and quantifications to continually improve their service. Every system leader can readily recite his or her current Standard and Poor's rating, as well as the system or facility's latest score from The Joint Commission. Everyone in the C-suite can enumerate current number of beds filled, average length-of-stay, patient outcomes for oncology, cardiology, surgery and infection rates. Senior and middle managers all know (and play to) patient and employee satisfaction survey results, and they Twitter and blog about the organization.

In a sense, everything that counts can be put on a dashboard, and if it doesn't fit on a dashboard, then it doesn't matter.

At the University of Notre Dame's 2011 commencement, upon receiving the university's famed Laetare Medal (shared with her collaborator, Joan McConnon), Sr. Mary Scullion, RSM, sagely observed, "We live in a society so mesmerized by its view of success that it considers only that real which can be touched, weighed, measured and counted, a culture in which human and spiritual values have almost vanished from its consciousness."

Named in 2009 as one of *Time* magazine's 100 people who most affect our world, Sr. Mary is an advocate for the homeless. Her venue is the streets and alleys of Philadelphia. For over 30 years she has committed herself to end homelessness in that city. Her words rang a clarion call to those of us engaged in Catholic health care when she urged the Notre Dame students, we "must be people who see beyond what we can touch and weigh and measure and count. We must be people



who believe — believe in the essential dignity of the human person.”

Listening to Sr. Mary’s words, one is reminded of another religious and advocate of the poor, Mother Teresa of Calcutta, who declared, “Intense love does not measure, it just gives.”

This is not to say that measurements are not often important. Woe to the cook who neglects to carefully measure ingredients before popping a cake into the oven. In this issue of *Health Progress*, my colleague Brian Yanofchick recounts the remarkable work being done by many Catholic health systems in the area of leadership formation. Brian and CHA’s leadership formation com-

mittee have worked diligently over the past two years to assess, describe and evaluate these robust programs. None of them would be successful without measurable curricula, evaluations and long-range outcomes. Nor would our ministry be responsible stewards of time, talent and treasure if we did not offer a careful accounting of these gifts to our colleagues, trustees and sponsors.

Because we are citizens, employers and providers, we must commit ourselves to measure, weigh and account for our actions. We recognize that this accountability flows from our mission and commitment to offer the best care

that we can, to every person whom we encounter. This is part and parcel of the healing ministry of Christ.

With Elizabeth Barrett Browning, we declare, “How do I love thee? Let me count the ways.” But even as we measure our success, it behooves us to remember that the work we do is both science and art. The best of who we are as a healing ministry evades and transcends measurement.

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