Physicians and the Mission of Catholic Health Care: Catholic Imagination at Work



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iscussions about Catholic health care ministry vis-à-vis the larger health care industry in the United States are often marked by claims related to Catholic health care's unique characteristics. Commonly cited, for instance, is Catholic health care's focus on holistic care and its commitment to nurturing the "calling" of health care workers. Yet, when it comes to relationships with physicians and engaging physicians in mission, many in the field — CEOs, mission leaders and sponsors of Catholic institutions, along with physicians themselves — find that Catholic institutions rate no better than non-Catholic and secular institutions.

Why is this? It isn't that Catholic health care undervalues the contributions of physicians. Their role is obviously essential. It is possible, however, that the ministry has taken physicians for granted and failed to apply a "Catholic imagination" to strengthening ties with this critical group.

Consider, for example, the bottom-line focus of agreements between hospital administrators and physicians. Joint venture agreements, employment contracts and the like in Catholic health care read no differently from those of other not-for-profit or for-profit health systems. Further, the content of discussions that produce these agreements is often indistinguishable from the content in secular settings.

Why then should we be surprised that physicians, whether inside or outside Catholic facilities, see little difference between us and our secular counterparts?

The consequences of this flat-line view are obvious. It is rare for physicians to regard Catholic health care as a source of relief and hope as they face a growing list of stressors. These include declining reimbursements, increasingly burdensome regulatory requirements, longer work hours that take away time from family, greater likelihood of litigation and, as a consequence, rising premiums for malpractice insurance. We might add the changed doctor-patient

dynamic resulting from an increasingly savvy patient population armed with information unavailable in the past.

Add to these the strategies implemented by hospitals and long-term care facilities to improve safety, quality and efficiency. These include evidence-based care initiatives aimed at satisfying demands of pay-for-performance programs. While important, these strategies, common in health care today, are often an added source of physicians' stress.

We have often discussed the mission of Catholic health care in terms that define not only what we do, but also how we do it. It makes sense, for instance, to say there is no such thing

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as a "Catholic appendectomy." We define our mission less by the intervention itself and more by the quality and compassion we bring to it. Our relationships with physicians could well be improved, even transformed, were we to apply a similar principle. The "what" of these relationships is clear and is essentially the same as those in secular settings. Where Catholic health care could stand out, however, is by paying more attention to the "how."

The "how" — the attention we give to the development of our relationships with physicians — might be altered by applying what some theologians have described as "the Catholic imagination." Our incarnational theology is the basis of our commitment to holistic care as a hallmark of Catholic health care. We assign high priority to the role of pastoral care as we strive to care for the body, mind and spirit, seeing each of these as constitutive elements of the persons who are our patients.

What might we do to extend the same

CATHOLIC HEALTH ASSOCIATION



Shared Statement of Identity For the Catholic Health Ministry

e are the people of Catholic health care, a ministry of the church continuing Jesus' mission of love and healing today. As provider, employer, advocate, citizenbringing together people of diverse faiths and backgrounds— our ministry is an enduring sign of health care rooted in our belief that every person is a treasure, every life a sacred gift, every human being a unity of body, mind, and spirit.

We work to bring alive the Gospel vision of justice and peace. We answer God's call to foster healing, act with compassion, and promote wellness for all persons and communities, with special attention to our neighbors who are poor, underserved, and most vulnerable. By our service, we strive to transform hurt into hope.

As the church's ministry of health care, we commit to:

- Promote and Defend Human Dig-
- Attend to the Whole Person
- Care for Poor and Vulnerable Per-
- Promote the Common Good
- Act on Behalf of Justice
- Steward Resources
- Act in Communion with the Church

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In day-to-day care, we are challenged to use our imaginations to discover new ways to free physicians to be the healers they dreamed of being when they chose their profession.

principle of holistic care to our relationships with physicians? How might we use our "Catholic imagination," implicit in our statements of mission, to address this? One clue comes, interestingly enough, from another faithbased source, the Adventist Health System in Orlando, Fla. That system has established a vice president for medical mission, held by a physician whose job it is to develop programs that address the need to provide holistic care for physicians. This includes an employee assistance program, available at no cost, to help physicians address stress in all areas of their lives. Adventist has partnered with Catholic colleagues at Centura Health in Colorado to develop additional programs for physicians.

The Catholic imagination envisions human relationships rooted in justice, in keeping with a theology that is concretized in Catholic social teaching. A key element of that teaching is the principle of subsidiarity, which states that decisions should be made at the level closest to those affected. If applied to the numerous decisions in Catholic health care that directly affect the practice of medicine, such a principle could greatly improve relationships between physicians and leaders of Catholic health care.

The Catholic imagination envisions individuals and communities whose

lives are motivated by a sense of purpose. Our theological understanding of salvation and community leads us to define health care as a vocation, a calling. This definition is not unique to Catholic health care. The Hippocratic Oath is rooted in an understanding of the physician as a person called to a unique kind of service.

How do we honor and support a physicians' motivation to heal the sick? How do we avoid allowing a contentious business environment to create adversarial relationships?

The hard work of re-evaluating the "how" of our physician relationships calls us to translate our statements of principle regarding holistic care, subsidiarity and vocation into concrete processes that heal and transform the troubled partnership we live as coproviders of care each day.

Our desire, indeed our responsibility, to advance mission with integrity challenges us to use imagination in seeking common ground with physicians before venturing into potentially difficult financial discussions. And in day-to-day care, we are challenged to use our imaginations to discover new ways to free physicians to be the healers they dreamed of being when they chose their profession.



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