

Servant Leadership: Bring It Home



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At June's Catholic Health Assembly in Chicago, Sr. Doris Gottemoeller, RSM, PhD, senior vice president, mission and values integration, Catholic Healthcare Partners, Cincinnati, addressed a session on quality and safety. "Because we share the belief that the mission of Catholic health care flows from the mission of Jesus, we all agree that anything less than the highest quality is a betrayal of that mission," she said. "Well, since our commitment to quality and safety flows from our commitment to mission, why doesn't our performance exceed that of every *other* health care provider in the country?"

This is a powerful question, one that has implications that go beyond quality and safety. Sr. Doris concluded her remarks by stating that achieving high standards of quality and safety requires excellent leaders who show the way to others in the organization.

Drawing on this insight, it is not difficult to see that the challenge to exercise excellent leadership also flows directly from our mission and that anything less than the highest quality of leadership is also a betrayal of the mission. Our Catholic tradition contains plenty of clues for what excellent leadership looks like.

Indeed, the core of this leadership style is summed up by Jesus himself when, in the midst of settling a dispute among his disciples, he says to them, "You know that the rulers of the Gentiles lord it over them, and the great ones make their authority over them felt. But it shall not be so among you. Rather, whoever wishes to be great among you shall be your servant; whoever wishes to be first among you shall be your slave. Just so, the Son of Man did not come to be served but to serve and to give his life as a ransom for the many" (Mt 21:25-28).

Although many of us in the health care ministry will quickly embrace the importance of this challenge, we have, ironically, mostly left to people *outside* the ministry the work of developing it into an organized body of knowledge that may be applied to health care organizations.

SERVANT LEADERSHIP

A pioneer in this effort was the late Robert Greenleaf, who in 1970 published an essay called "The

Servant as Leader." He subsequently worked out a body of theory applicable to every possible level of organizational life. Although Greenleaf died in 1990, his work continues to be developed through the Greenleaf Center for Servant Leadership (www.greenleaf.org) in Westfield, IN.

Greenleaf's approach to what he called "servant leadership" may be summed up in a few of his important insights. Greenleaf first states that the servant-leader must be a servant first. Becoming a servant begins with the natural feeling that one wants to serve, he writes. Then, he says, conscious choice brings one to aspire to lead. Greenleaf believes that the best test of a person's leadership is to ask the following questions:

- Do those served grow as persons?
- Do they, while being served, become healthier, wiser, freer, more autonomous, and more likely themselves to become servants?
- What is the effect of this leadership on the least privileged in society? Will they benefit or, at least, not be further deprived?

An important outcome of servant leadership is the creation of a culture in which employees become partners in the enterprise of the organization rather than "capital" at the disposal of managers. Greenleaf was himself a man of deep faith who, while not always explicit in citing the religious roots of his convictions, remained motivated by the challenge Jesus offered in Matthew 21 cited above.

Others have built on his initial work. Margaret Wheatley, John Sullivan, and Peter Block are just a few authors who have done important work in developing and applying the tenets of servant leadership. A few universities have developed programs that promote servant leadership. Among them are the Harvard School of Business; Viterbo University in LaCrosse, WI, which offers the only master's program on the subject; and Gonzaga University in Spokane, WA.

Just as people outside the Catholic health care ministry have developed servant leadership as an organized body of knowledge, so others outside the ministry have mounted sustained and successful efforts to integrate the principles of servant leadership in the culture of their organizations. TDIndustries, a facility service and specialty con-

struction company based in Dallas, has explicitly promoted the servant leadership idea for almost 30 years. Perhaps as a result, the company has been on the *Fortune* magazine "Top 100 Companies to Work For" list for many years. Another familiar name, Starbucks, based in Seattle, has also made a concerted effort to integrate servant-leadership principles in its culture; the firm appeared on the 2006 *Fortune* list. Other organizations, ranging from police departments to restaurants, are making sustained efforts to implement the tenets of servant leadership. The size of these companies (TDIndustries has about 1,200 employees; Starbucks has more than 90,000) tells us that size matters less than does sustained commitment.

WHAT ABOUT HEALTH CARE?

Some might argue that health care is not like Starbucks or TDIndustries and faces challenges that make it unique. However, a number of health care organizations have also embraced the servant-leadership idea.

Parkland Health and Hospital System, Dallas, has been working to modify its leadership culture since 2001. Parkland has had its share of challenges, some of which are familiar to Catholic organizations. Parkland's challenges have included a large amount of charity care and bad debt, a licensed bed count 54 percent over capacity, and a dramatic reduction in force of 500 employees in 2004. Ron Anderson, MD, the CEO since 1982, recently initiated a campaign to integrate the servant-leadership principle in Parkland's culture. He sees it as an essential part of positioning the organization for future success.

Parkland is part of a group of 11 Dallas firms that have formed what they call a Servant Leadership Learning Community. Group members meet several times a year to share stories, learn from one another, and sustain each other in their efforts to transform their leadership cultures. Some of these companies are profiled in a new book by Ann McGee-Cooper, Gary Looper, and Duane Trammell called *Being the Change: Profiles from Our Servant Leadership Learning Community* (Ann McGee-Cooper and Associates, Dallas).

When we recall the question raised by Sr. Doris regarding leadership in quality and safety in Catholic health care, we may be a bit surprised, even disturbed, to discover that so many nonfaith-based organizations have developed an important piece of our own tradition into something applicable to contemporary organizations. If we are disturbed to learn this, we should recall another of Jesus' wise insights. When his disciples complained that one who was not of their company was casting out demons in his name, Jesus said simply, "Whoever is

not against us is with us" (Mk 10:40). If others have developed a simple Christian insight into an important and applicable body of knowledge, their success in doing so is a gift for which we should be grateful.

As a ministry, we should recognize the need to "bring home" an important idea in which others have found value. CHA's membership has affirmed the place of servant leadership as an expression of our Catholic identity. The concept is explicitly mentioned among our competencies in leadership development (see, for example, www.chausa.org/Mem/MainNav/Mission/Leadership/Resources/Defining/).

Some CHA members—for example, Ascension Health, St. Louis; and St. Joseph's Hospital, Chippewa Falls, IA—have developed programs to better integrate servant leadership into their culture. CHA's Ministry Leadership Development Committee is publishing a new training module entitled *Servant Leadership*. This module contains ready-to-use presentation materials, including videos, which explain and illustrate servant leadership. Covering two 90-minute sessions, the module is meant to be used initially with department heads and people of equal, or higher, rank in any organization. *Servant Leadership* is a good resource for introducing the basic concepts of servant leadership to employees. By the time this article is published, it will have been distributed to CHA-member sponsors, mission leaders, human resource directors, and CEOs. Perhaps the resource will be a step toward the recovery by our ministry of an idea that is deeply rooted in our theological tradition, an idea that resonates across a spectrum of organizations, no matter what the faith orientation involved. It is another example of what our ministerial tradition has to offer people of faith, and even people of no faith.

OUR MINISTRY REQUIRES SERVANT LEADERS

The future of Catholic health care will be determined by the kind of leaders we select today. Sr. Doris closed her assembly remarks by saying, "We need women and men who can tell the stories in fresh and compelling ways, who can inspire personal choices for the good by the way they demonstrate it in their lives, who are transparent in their own accountability for the mission entrusted to them. Recruiting and supporting these leaders, whether at the sponsor, board, or management level, has to be the greatest priority of Catholic health care in the coming years."

In other words, the future of Catholic health care depends on servant leaders. May our practice be a benefit to others in health care, leading the way to a culture of dignity, service, and compassion. ■

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