

MISSION INTEGRATION IN WISCONSIN

A Chippewa Falls Hospital Works to Turn Employees into "Servant Leaders"

How is a Catholic health care organization to sustain its mission without the daily, hands-on leadership of the women religious who founded it? St. Joseph's Hospital, a 193-bed facility in Chippewa Falls, WI, provides one answer.

St. Joseph's traces its history to 1885, when four members of the Hospital Sisters of the Third Order of St. Francis came to Chippewa Falls, a small lumbering town in the northwestern part of the state, at the invitation of a parish priest. The sisters began their ministry by traveling to the homes of their patients, most of whom were lumberjacks. St. Joseph's Hospital was constructed in 1889. Sisters served as administrators, nurses, and technicians. Their leadership style was quiet strength. The sisters were unwavering in their dedication to unselfish service to any person who needed care.*

Both the hospital and the city have changed greatly in the past 116 years. Chippewa Falls is today the heart of Wisconsin's computer industry. St. Joseph's, which, over the years, has been served by 519 Hospital Sisters, is now staffed almost entirely by laypeople. Even so, the sisters' mission and values continue to guide the hospital's work.

SERVANT LEADERSHIP

By the early 1990s, the congregation's leaders had begun seeking a way to transmit their values and leadership style to St. Joseph's lay managers and employees. In 1992 they decided to create a program based on the ideas of the late Robert K. Greenleaf, author of *The Servant as Leader*.¹

Greenleaf (1904-1990), a management theorist, believed that the most effective leaders see themselves as *servants* to the people they lead. "The servant-leader is servant first," he wrote.²

The test for a "servant leader," Greenleaf maintained, is always: "Do those served grow as persons; do they, while being served, become healthier, wiser, freer, more autonomous, more likely themselves to become servants?"

The Hospital Sisters perceived in "servant leadership"—which requires setting oneself aside and placing others first—a notion highly compatible with their own primary value: serving with gratitude and humility in the spirit of Jesus and St. Francis. The servant leadership concept, the sisters saw, offered a holistic approach to work and promoted a sense of community. Servant leadership allowed people to stand for something bigger than self and to be called to work that was more than the source of a paycheck.

Sr. Frances Elizabeth Schmitz, OSF, an adviser to St. Joseph's, welcomed the initiative. "Passing on the tradition of our mission and values depends on everyone, not just the sisters," she says. "The hospital is not a building—it is people, and the people make the organization. We care about personal development and personal formation because we know if we can continue to be compassionate people, we live out our vocations. That creates an environment that is truly unique."

Sr. Schmitz, who first came to St. Joseph's in 1965, has filled many roles, including administrator. "Before we can become leaders, we have to be followers," she says. "Today colleagues at St. Joseph's see themselves as partners with their leaders."[†]

* St. Joseph's is one of 13 Wisconsin and Illinois hospitals sponsored by the Hospital Sisters Health System, Springfield, IL. The system is in turn sponsored by the Hospital Sisters of the Third Order of St. Francis, American Province, also based in Springfield.

† Employees at St. Joseph's are called "colleagues."

BY DAVID FISH



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How It Works

Since the fall of 1995, leaders from St. Joseph's have annually traveled to the Greenleaf Center in Indianapolis for training in the servant leader concept. On their return to the hospital, they help pass these ideas to its more than 600 employees.*

"This concept is not a quick fix or just another cute approach to life," says Carolyn Craft, St. Joseph's manager of human resources. "It must be taken in and practiced by all, from top management down. If our top managers don't embrace servant leadership, we certainly cannot expect our other colleagues to follow it. It doesn't take a rocket scientist to figure out whether someone is saying one thing but acting in another way. You have to be who you are, or your message is untrue."

Introduction to servant leadership begins the moment a person inquires about work at St. Joseph's. Even before filling out an application, he or she is asked to read "Valued Spirit," a statement of hospital values. A human resources staff member outlines the servant leadership idea and the applicant is asked to respond. "If potential colleagues are not interested in discussing how our mission might be served in terms of their own involvement, they are probably not a good match for our organization," says Craft. "We focus on simplicity, believing as an organization that we don't have to cling to power, privilege, or prestige and don't need to dominate or intimidate others. We don't worry about what we don't have—we focus on what we *do* have."

Once an employee is hired, he or she is scheduled to attend two Mission Integration and Christian Hospitality retreats. The first, a single-day retreat, is held at the hospital. Later, the employee attends a more intensive two-day meeting at the St. Anthony Retreat Center, a former monastery that sits in a peaceful wooded area along the Rib River near Marathon, WI.

Five main topics are discussed in these retreats. **"Mindfulness"** Sr. Schmitz explains that, to enjoy one's work, one must see it as a way of being of service to God. To serve God, one must be fully "in the moment," mindful of one's thoughts and actions. "Wash the dishes to wash the dishes, peel an orange to peel the orange, and dice your potato to dice your potato" she says. "Become one with your potato or orange; feel the warmth of the dishwasher. Be in the moment!"

Servant Leadership David Fish, St. Francis's executive vice president gives a talk based on Hermann

Hesse's novel, *Journey to the East*, in which an exemplary but apparently lowly monk turns out to be the leader of his order. The moral is that any person can, by improving his or her attitude, enhance performance and add value to the organization.

Mission Integration Sr. Schmitz discusses the history and mission of the Hospital Sisters, connecting the congregation's founding values to the present-day work at St. Joseph's Hospital. Compassion is strongly emphasized. "Compassion is born out of the knowledge that we are all made out of the same clay," says Sr. Schmitz. "The heart of compassion is living patiently with others while seeking their well-being. Compassion is power because it breaks through boundaries. Compassion is essential to all service-related professions, particularly health care."

Spirituality in the Workplace Rev. William Jablonske, a retired priest and a religious consultant to St. Joseph's, leads a session on spirituality. "Spirituality is highly individual and intensely personal," says Fr. Jablonske. He discusses the basic belief in a higher power, explaining that spirituality is a feeling of interconnectedness. "Life puts us here basically to do good," he says, "so we must strive to serve all humanity. It is wrong to assume that we cannot change how we live, act, or feel. You *can* choose your attitude."

Personal Strength Craft introduces retreat participants to the Birkman Method Assessment tool, which helps people understand their personality traits and work styles. "When you know more about yourself and your own complexities, you will have the great satisfaction of friendships in all aspects of your work and home life," she says.

Health care workers must be self-aware, Fr. Jablonske agrees. "As health care providers, we must make sure that our first act of compassion is being competent. We owe it to each other to be knowledgeable in our art. We believe that St. Joseph's staff members will be most committed when their service is a true expression of their inner selves, their values, and personal vision."

Rev. Roger Skatrud, a Lutheran minister who has served on St. Joseph's local advisory council, is another session leader. He asks participants to be conscious of the potential impact of their work on the hospital's patients. He urges them to be aware of the blessings they have received and to consider how they might share those blessings with others.

CHALLENGES AND SUCCESSES

Few people are capable of fully examining themselves and jettisoning outmoded or selfish habits in a single one- or two-day retreat. "When we

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* In recent years, some St. Joseph's staff members have attended the annual International Conference on Servant Leadership in Indianapolis as presenters.

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first began holding these sessions, we did not have good participation from the groups attending them," recalls Craft. "People were unsure about what we were going to do with them. No one had ever sent them off to a retreat center before. They wondered what the point was—whether we were trying to convert them to Catholicism, to make them something they were not."

Most people tend to be skeptical when asked to do something out of the ordinary. Some St. Joseph's staff members are simply reluctant to spend a night away from home at the retreat house. And a few remain unenthusiastic about the overall program. "This program is perceived as a threat by some staff members," says Craft. "They have a fear of self-discovery and do not want others to see their humanness."

But such responses to the retreats have been rare. "We have had some incredible stories," says Craft. "Some people were at first so unwilling to participate that they turned their backs to the session leader and sat with their arms crossed, totally tuned out. In time, though, those same people have admitted that they really had no one to be angry at but themselves and have wound up apologizing to the group."

Most participants become so comfortable in the retreat sessions that they return to work urging those colleagues who have not yet had the experience to take part. Craft says, speaking of participants in the first retreat, "By the time we brought them back together for the second training session, we could hardly control the group—they were so engaged!"

CARRYING THE MISSION FORWARD

St. Joseph's servant leadership initiative has not been inexpensive. But the money has been well spent, according to Robert Koehler, the hospital's chief financial officer. "What would be the

cost—to the Hospital Sisters, to our community, to our colleagues, to ourselves—if we failed to do all we could to ensure that the sisters' mission was carried forward in the spirit they taught us and lived out for us over all these years? In gratitude to them and in respect for their example, can we do any less?"

In January 2001 St. Joseph's conducted a survey of staff attitudes. Nearly 90 percent of staff members responded. The survey's questions focused on employees' perception of trust, honesty, and observance of the servant leadership principle. Results indicated that staff members trusted management, believed that managers dealt fairly with employees, and had a strong desire to continue working at the facility.

St. Joseph's, like health care organizations across the country, faces the challenge of staffing service-level positions. "If colleagues can get beyond the six-month point, the point of becoming part of our family kicks in," says Craft. "Money is a big factor for some, and we cannot compete financially with some of the much larger health care systems in neighboring cities or with some other local employers. But staff members who have left St. Joseph's and then later returned often tell us that they felt as though they *belonged* here. And new staff members often say they've come here because they seek meaning in life through giving service. They're not interested in a work life of scripted responses or shallow gestures, they tell us. That says a lot about our environment here at St. Joseph's." □

NOTES

1. Robert K. Greenleaf, *The Servant as Leader*, Greenleaf Center for Servant Leadership, Indianapolis, 1998.
2. "What is Servant Leadership?" at <http://greenleaf.org>.

NICHE SERVICES

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the organization can help discover new opportunities. The development of niche services such as the ones described here can lead to new revenue streams and may also provide a needed service in the community, improve quality of care, and increase patient satisfaction. □

NOTES

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2. Omnibus Sleep in America Poll (OSAP), National Sleep Foundation, Washington, DC, 2000.
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7. Bryant, RA, editor, *Acute and Chronic Wounds*, Mosby Publishing, St. Louis, 1992, pp. 164-204.
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13. "Integrator Special Project: Benchmarking Clinic Development: Report #2," *The Integrator*, February/March 1999, vol. 3, p. 7.

The authors thank Erica Baittinger and Jennifer Jones for their contributions to this article.