A Hallmark of Catholic Mission

BY TINA PICCHI, M.A., B.C.C.

Encarta Dictionary defines “hallmark” as a mark of quality and a distinguishing feature often used on precious metal, gold, silver and platinum, to show that the metal meets the proper standards of purity. I believe palliative care is a hallmark of Catholic health care, intrinsically linked to our Catholic mission and values. It embodies our purist commitment to provide compassionate, high quality, patient- and family-centered care for the chronically ill and dying by anticipating, preventing and treating suffering.

Inspired by our rich faith heritage, Catholic health care must be distinguished as a leader in our country providing gold-standard palliative care services that address physical, intellectual, emotional, social and spiritual needs and facilitate patient autonomy, access to information and choice across all settings of care. As executive director of the Supportive Care Coalition, I am heartened by the achievements of many of our Catholic health systems in making this vision a reality. Like gold tested in the fire, they have established high standards and have hardwired accountability to ensure these services are consistently meeting the needs of their communities.

The Supportive Care Coalition, formed in 1994, is composed of 19 Catholic health care organizations with facilities nationwide. With a unified voice, we work to assure excellence in palliative and end-of-life care in all Catholic health care settings. Our members collaborate to develop educational opportunities, establish quality standards, share and promote leading practices and engage in advocacy efforts, partnering with other like-minded organizations. We envision a society in which all persons living with or affected by a chronic or life-threatening condition receive compassionate, holistic, coordinated care. Our goal is to assist these individuals live fully in community and to support their survivors in their bereavement. Through such care, we believe that God’s healing love is revealed.

The Supportive Care Coalition recently hosted our fourth national congress on palliative care, Recovering Our Traditions. During this three-day conference in St. Louis, nearly 300 participants representing diverse health care disciplines considered how the best of our spiritual and medical traditions help shape new palliative care paradigms across the continuum of care.

I am pleased that several of our congress presenters as well as Supportive Care Coalition member organizations have contributed articles for this special issue of Health Progress. Sr. Margaret Farley (Page 18) examines the challenge to hope that is so integral to palliative care. Mary Hicks (Page 38) describes a universal screening model that increases the likelihood of patients receiving upstream palliative care interventions. Mary T. O’Neill (Page 42) considers how spirituality is the bedrock of who we are as human beings and the caregivers’ role in healing spiritual pain. Sarah Hetue Hill and her Ascension Health colleagues demonstrate a conservative and defensible approach for hospitals in calculating the cost savings associated with palliative care consultations (Page 27).

Nancy Light and Beth Hoey (Page 56) share the story of Francis House, which much more than a residential hospice, is truly a home where people are welcomed into a family. Other Supportive Care Coalition member contributors include Providence Health & Services, Bon Secours Health System and of course, the Catholic Health Association. I hope these articles inspire palliative care innovations within your health care ministries. Together let us ensure that high quality, whole-person centered care for the chronically ill and dying is a hallmark of Catholic health care in every community we serve.

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