Promoting Goodwill and Respect in the Workplace

Cardinal Theodore McCarrick Leads the Effort to Overcome Differences Between Employers and Unions

n late June, the United States Conference of Catholic Bishops released a document called "Respecting the Just Rights of Workers: Guidance and Options for Catholic Health Care and Unions." The document, prepared by a committee led by Cardinal Theodore McCarrick, Ph.D., D.D., archbishop emeritus of Washington, and available online at www.usccb.org, draws on Catholic social teaching by affirming the rights of workers to a just workplace and offers groundbreaking guidelines aimed at resolving the often contentious relationships between Catholic health care organizations and labor unions.

In its introduction, the committee reports that the document "affirms two key values: (1) the central



Cardinal Theodore McCarrick speaks with Sri Nirmala, superior general of the Missionaries of Charity, after a January 2005 interfaith meeting in Galle, Sri Lanka, on responding to the devastation of the Indian Ocean tsunami.

role of the workers themselves in making choices about representation, and (2) the principle of mutual agreement between employers and unions on the means and methods to assure that workers could make their choices freely and fairly."

The document calls for unions and employers to agree on specific guidelines for demonstrating respect for one another's mission and goals and for assuring workers of equal access to truthful and balanced information from both sides. These "local agreements" would also assure workers of a pressure-free environment in which to participate in elections to determine whether or not they wish to be represented by a union.

The process leading up to "Respecting the Just

Rights of Workers" dates back to the late 1990s, when the bishops' domestic policy committee invited leaders of Catholic health care, the Leadership Conference of Women Religious, and two unions, the AFL-CIO and the Service Employees International Union (SEIU), to discuss the implications of Catholic social teaching for creating a just and fair workplace in Catholic health care. Members of the present committee besides Cardinal McCarrick were Sr. Carol Keehan, DC, president and chief executive officer of the Catholic Health Association; John Sweeney, president of the AFL-CIO; and Dennis Rivera, chairman of SEIU Healthcare. They were assisted by John Carr of the United States Conference of Catholic Bishops and Gerry Shea of the AFL-CIO.

In 1999, a subcommittee organized by U.S. bishops released a working paper called "A Fair and Just Workplace," which reflected Catholic teaching and affirmed the right of workers to decide through a fair and free process how they wish to be represented in the workplace. Why was another document needed?

"A Fair and Just Workplace" was a document that expressed principles, and everybody was saying, "OK, what do we do now? What's the best way to put these into practice?" All of us thought we could be more helpful by taking that document — an excellent document — and working out how it can be put into practice in the lives of our union people and our hospitals. That's the essential part. We needed something that both people in unions and in Catholic health care could understand, something that would bring them together.

"Respecting the Just Rights of Workers" appears to be based on a serious effort to recognize the value of both Catholic health care and unions. What was at stake in the process?

I think Catholic health care in the United States is at stake. Anything that distracts from the orderly and efficient running of a hospital and that isn't focused on taking care of people is always a danger. If we continue to have disputes between hospitals and unions, the whole matter we're all involved in, taking care of sick people, goes into jeopardy. Catholic health care is an apostolate. It's a mission. We want to make sure this mission can continue, so we want to make sure everyone is working together, and happily working together — to make sure that people have a right to do what they want to do, and that we are able to work together in a common quest of taking care of people who are ill.

What authority does the document have?

It has the authority of goodwill, and of a joint determination to accomplish the mission, which is to take care of the sick. It says that we're all in this together to make sure the sick are taken care of, and that we know this is what we want to do, so this is a way to pull it all together. That's the only authority it has.

How is the document being received by the people it is intended for?

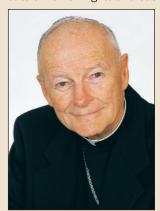
Obviously, there will always be people on both sides who will say it could have been done better. And I'm sure it could have been done better. But it was done by people motivated by a desire to make sure Catholic health care survives and is able to continue its mission. The better is the enemy of the good. If we had waited until we had a perfect document, it might have taken a hundred years.

Obviously the committee that put the document together regards it as a compromise. Briefly, what does it accomplish for each side: the Catholic hospitals and the unions?

It accomplishes the same for both. It gives them a way to moderate the tension that comes from deci-

Cardinal Theodore E. McCarrick, Ph.D., D.D. Archbishop Emeritus of Washington

Cardinal Theodore McCarrick, former archbishop of Washington, D.C., and chairman of the committee that developed "Respecting the Just Rights of Workers," has long been noted as a strong advocate of human rights and Catholic education. He is past chairman



of the U.S. Conference of Catholic Bishops' committees on domestic policy, international policy, migration, aid to the Church in Central and Eastern Europe, and has served on several other committees. He also headed the bishops' task force on Catholic bishops and Catholic politicians.

He remains active in retirement, traveling extensively on behalf of Catholic Relief Services and to promote interreligious understanding

and peace in such areas as the Middle East and Eastern Europe. He is active with the U.S.-based National Interreligious Leadership Initiative and works closely with the Council of Religious Institutions of the Holy Land, an interreligious group that is working toward peace. He serves the Vatican on four pontifical councils: for promoting Christian unity, for justice and peace, for Latin America and for pastoral care of migrants and itinerant peoples.

Cardinal McCarrick has visited many nations to advocate for human rights and to survey humanitarian needs, including China, Cuba, Saudi Arabia, Vietnam, the Philippines, South Korea and Rwanda. He was invited in 1996 to serve on the U.S. Secretary of State's Advisory Committee on Religious Freedom Abroad. From 1999 to 2001, he was a member of the United States Commission for International Religious Freedom. In 2000, he was honored by the presidents of Lebanon and the United States for his work in human rights.

He became a bishop in 1977, serving first as auxiliary bishop of New York, then as bishop of Metuchen, N.J. In 1986, he was named archbishop of Newark, N.J., where he remained until his appointment to Washington, D.C. He was elevated to the College of Cardinals in February 2001.

A native of New York City, Cardinal McCarrick holds a bachelor's and master's degree (in history) from St. Joseph's Seminary, Yonkers, N.Y., as well as a master's degree in social sciences and a Ph.D. in sociology from The Catholic University of America. He was named president of the Catholic University of Puerto Rico in Ponce in 1965 and oversaw its development into a major institution. Through the years, he has served Catholic University of America as assistant chaplain, dean of students, director of development and, during his tenure as archbishop of Washington, as chancellor.

Cardinal McCarrick speaks four languages besides English: French, German, Italian and Spanish. sions that are made. It's a tough question, but it would seem to me that what it does is give us another way of guaranteeing that the decisions that are made by workers are made in an atmosphere of trust and of mutual support.

Do you think this will put an end to the ugly, contentious campaigns that have characterized some of the standoffs between unions and hospitals?

On the one hand, unions are hoping that it will put an end to ugly corporate campaigns, and hospitals are hoping it will put an end to ugly union campaigns; that it will get rid of the ugliness and present something that can be accepted by both sides. Whether it will do that depends on how joyfully and helpfully people want to move together. We were so impressed by the extraordinary willingness of both management and unions to come up with something both could live with and that would be of benefit to the people they serve.

What motivated union leaders to participate in the process?

The motivation was the same on both sides. They see Catholic health care as a good work and they want it to continue.

What do you see as the next steps now that the document has been released?

People will have to read and study the document. Then we'll wait to see how it's working and then determine whether it needs to be tweaked or modified to ensure that it serves the needs of both sides.

Putting the process described in the document into practice depends on hospitals and unions making "local agreements" — that is, agreeing to follow the terms set forth in the document. Does the committee expect that such agreements will take place? Who is expected to initiate them?

We hope they will happen. We hope there is enough goodwill on both sides that people will want to

make sure they are following the process, a process that will help them better serve the people. [The process could be initiated by] any of the parties, including the bishop of a diocese, who might say, "Let's take a look at this and see if it could be helpful."

What were some of the major challenges in getting all sides to agree to the process?

The first major challenge was the need to make sure there was trust and a willingness to work together. We had extraordinary people working together. It would have been much more difficult if we had had people in the health care field not willing to make this work, and the same with the union leadership. John Sweeney appreciates Catholic social teaching and he loves the church. Sr. Carol Keehan is one-in-a-million in her ability to guide and lead and keep the focus on the care of people who are ill.

Was there any point at which you thought the process might break down?

Any time you have conversations that go over a long time, they are always fascinating in the way they develop, but I don't think anyone ever lost the goal, which was to take care of people.

Is there anything else you would like to add?

I would just like to say how blessed we were. This would not have been possible without the leadership of union people who really had the same goal as our hospital leadership, or without hospital leaders who understand this difficult area. There were challenges, but we never lost sight of the goal — to continue Catholic health care as an authentic and excellent apostolate in the church.

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