

Slower Is Faster

It Takes Time to Align Cultures

BY JULIE O'CONNOR, M.A.

After serving in lay ministry for 22 years at Saint Thomas Hospital, the only Catholic hospital in Nashville, Tenn., I learned in 2002 I would be “missioned” approximately three miles away to Baptist Hospital. Baptist had just been added to Saint Thomas Health Services’ regional health system (part of Ascension Health), but the thought of leaving a place I had practically grown up in to go to a place I knew little about was a bit frightening. To be the lone Catholic mission voice in a hospital with Baptist roots was even more incomprehensible.

The responsibility of this call weighed heavily. I harkened back to the many calls throughout Scripture where the response was so often “Who, me?” and “Surely you don’t mean me!” I agreed to go and was trusting — hoping — for any and all signs to give me confidence I had made the right choice.

The sign came on my first day at Baptist as vice president of mission. An electrician came into my office to repair the lights. As he stood on the ladder, I asked him about Baptist Hospital. He said he had worked there for three years: “Ma’am,” he said, “I get up every morning and look forward to coming to work!”

When I asked what it was about the place that made him look forward to coming to work, he said, “Because I know if I do a good job with the electricity or a bad job with the electricity, it can make a difference whether a person lives or dies. And if I can go into a patient’s room, fix something that is broken and get a smile on their face before I leave, I know I’ve done something important.”

“Here’s my sign,” I thought to myself. “Thank you, God. Maybe I can do this after all.”

Having been at Baptist Hospital for eight years, I can honestly say this story has played out over and over again through my encounters with as-

sociates, physicians and volunteers. The people here see greater meaning and sacredness in their work.

THE WORK BEGINS

As a Catholic mission leader, my goal was first to understand the culture and to be a presence at Baptist Hospital. Then my focus involved helping hospital staff, leadership and physicians further integrate spirituality, mission, values, care of the

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poor and Catholic concepts such as subsidiarity and common good into their daily work.

To prepare myself for this role, I reflected on and made note of all I had learned through graduate school, my formal and informal formation through the Daughters of Charity and work as the director of mission, ethics and pastoral care at Saint Thomas Hospital.

I remembered the many stories told by the more seasoned mission vice presidents in our system of their experiences with mission integration in joint ventures, acquisitions and partnerships. They also told of the importance of learning how



The Baptist Hospital chapel contains stained glass from predecessor Protestant Hospital, founded in 1918.

to engage and enter into a new organization. I remembered my theological and cultural studies from graduate school and the various models to engage with different cultures — models to help avoid the mistakes made by those early missionaries. (Although I wasn't going as a missionary to the hospital, I thought I would be entering into a new and foreign culture.) I remembered the advice from the incredibly competent and compassionate Protestant chaplains at Saint Thomas Hospital.

My approach was to be present, listen, learn and seek understanding — building relationships and trust. I didn't interject myself into things right away and waited to be invited. I assessed how the *Ethical and Religious Directives for Catholic Health Care Services* were being understood and practiced, and I initiated some education and dialogue around what it means to be part of Catholic health care.

Though it still carried the Baptist name, Baptist Hospital was a not-for-profit community hospital that had not been affiliated with the Tennessee Baptist Convention since 1991. I felt it was important to meet with convention leadership to affirm their longstanding ties to the hospital and its proud history.

Founded in 1918 as Protestant

Hospital, it was formed by an alliance of ministers from various denominations, including Methodist, Baptist, Disciples of Christ, Presbyterian, Lutheran and Episcopalian. The nonprofit hospital cared for both paying and charity patients. Known as the "baby" hospital in Middle Tennessee today with more than 7,000 births a year, the very first patient on opening day in March 1919 was a mother who delivered a baby girl, perhaps foretelling what the future would hold. In 2009, that baby girl attended her 90th birthday party at the hospital.

Protestant Hospital was located across the street from the Catholic hospital, the "old" Saint Thomas Hospital, and shared many of the same medical staff. Both Saint Thomas and Protestant Hospital had schools of nursing and prepared some of the best nurses to this day in this community.

When Baptist Hospital became a member of Saint Thomas Health Services in 2002, it was just

Tennessee has about 180,000 Catholics and about 1.4 million Baptists, according to data from the study *Religious Congregations and Membership in the United States: 2000* published by the Glenmary Research Center.

The Middle Tennessee Diocese of Nashville estimates it has 70,633 individuals registered in Catholic parishes. That number represents about 3.4 percent of the overall population of Middle Tennessee.

emerging from challenging financial times and had begun a time of renewal and reconnection to its healing ministry. As a part of that renewal over the previous year, it had involved staff, physicians and community members in developing a new mission statement and values. The hospital was gaining a real sense of community through leadership development and community circles. I could not come in and force our new mission and values on the organization. For several years, we posted the mission and values side by side, and I began conversations with leadership around the common themes of the two documents.

Today, we use a single mission statement and values throughout all the ministries of Saint Thomas Health Services.

I was blessed to have a leader in the pastoral services department, a Baptist chaplain who had been at the hospital for many years. He was the culture bearer and keeper of the history and would become an important ally in helping me navigate the unfamiliar and sometimes confusing waters and avoid any unforeseen sensitivities.

A chaplains group, including all Baptist chaplains and now one Catholic deacon, would be an important first group for relationship building and dialogue. In an effort to find common ground, I shared the CHA *Shared Statement of Identity for the Health Care Ministry* and the *Directives* to serve as starting points for conversation, education and gaining advice. This reinforced my initial approach that “slower is faster.”

Other efforts took place throughout Saint Thomas Health Services to bring together a common culture through the integration of the human resources, information technology and patient and financial departments across campuses. These courageous leaders blazed the way, with all the bumps and bruises that come along with being the first down the trail, by developing common staff, policies, procedures, etc.

Baptist Hospital got a new chief executive, Bernie Sherry, who already had worked in the Saint Thomas Health Services system when he moved into the role. Of Baptist faith, he is a spiritually

grounded person who had a great appreciation for the mission and respect for our founders. He became my partner in aligning our cultures.

The Integral Model for Workplace Spirituality, developed by Ascension Health, played an important role in my foray onto the floors and with the frontline staff. This model broadens our understanding of spirituality and the diversity of experience of finding meaning. It also provides a framework for integrating spirituality into all the elements represented in a work environment. It became a tool for dialogue, provided a common language and helped calm the fears that we were here to convert everyone to Catholicism. The model continues to serve as a foundation today in engaging staff.

FORMATION

During my first year at Baptist Hospital, I took a small group of leaders to a weeklong mission and mentoring intensive at St. Vincent's in Indianapolis, one of our sister hospitals. This began our journey of formation, and participants came back with a better sense of the church and our mission and values.

Saint Thomas Health Services began a common orientation for new associates, which included our hospitals' histories and reflection about our mission and values as they are being lived out in our daily ministry.

Through the help of Ascension Health, we participated in two formation programs for senior leaders. We had six participants, including our chief executive, in a two-year Ascension Health leadership formation program in St. Louis. Saint Thomas Health Services also had a local ongoing executive formation program that

brought together all senior leaders from Saint Thomas Health Services for a yearlong series of modules covering ethics, the *Directives*, Catholic social teaching, heritage of our founding sponsors and of each hospital and what it means to be a leader in a ministry. These formation sessions



Stained glass in the chapel from the old Saint Thomas Hospital building

and future sessions served as a time of building relationships across hospitals, learning about each culture, seeing that we were more similar than different and inspiring leaders towards a common vision of ministry.

Once formation for senior leaders was underway, a new formation program was developed for middle managers. The monthly sessions covered many similar topics, in addition to visits to our outreach ministries to the poor and focus on self-reflection. The fruits of this program have far exceeded anyone's imagination.

Formation is essential, and we continue to weave it into our culture. Most recently, we trained our leaders about the Catholic principle of subsidiarity. It is astounding how many people within Baptist Hospital understand the word and its meaning.

SYMBOLS OF OUR JOURNEY

Many events have served as the symbolic culmination of our journey so far. We have the presence of a full-time Catholic ethicist. This year, a Daughter of Charity was the first sister to be missioned to Baptist Hospital where she serves our Hispanic patients. Two recent events — the building of a new chapel and the celebration of Baptist Hospital's 90th anniversary — also have been critical.

Building a new chapel at Baptist Hospital was a collaborative effort involving many diverse associates and conversations with our local bishop. Our guiding principles were honoring our traditions, creating a chapel where everyone would feel comfortable to worship in a way that would feel familiar and developing for non-Christians an adjacent prayer room with no religious symbolism.

The result is a beautiful chapel located in one of the main lobbies where it is the first thing visitors see, in contrast to the previous chapel, which was small and hidden. The chapel has an altar and tabernacle, a beautifully designed cross on the wall and a processional crucifix on a stand. But most importantly, two stained glass windows border the chapel — one window from the old Saint Thomas Hospital and another from the old Protestant Hospital. For the chapel's opening, we held two services, a Catholic Mass with the bishop and

an ecumenical service. Today, we hold an ecumenical worship service weekly and celebrate a Catholic Mass on the first Friday of each month.

Baptist Hospital's 90th anniversary celebration in 2009 would reinforce my initial commitment to understand and honor the history of Baptist Hospital while continuing to integrate our cultures as a Catholic hospital. We gathered members of the old Baptist Hospital board to serve as our advisory committee. The yearlong celebration began

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with a chapel service involving members from our founding congregations and ended with the unveiling of a history wall. The celebration brought together former associates, physicians and community members in a spirit of collaboration.

FINDING COMMON GROUND

Ascension Health was only two years old when Baptist Hospital became part of a Catholic ministry, but its resources were invaluable. As Ascension Health was exploring ways to integrate the sponsors' vision and the new hospitals within a new health system, we were also the beneficiaries of the fruits of its work, specifically through the integral model for workplace spirituality and the efforts of leadership formation. However, the mission and values are where we found common ground first.

It has been a blessing to serve in this ministry. I will be forever grateful for the welcoming and open spirit of Baptist Hospital associates and their ongoing dedication to the sacredness of this ministry in our community. It is they who have formed me.

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