This month marks the first anniversary of a Catholic Health Association effort to help sponsors understand changes affecting the Catholic health ministry and their implications for future sponsorship. This column is a “progress report” on CHA’s project. As the column shows, the project has changed over the year as it has been shaped by sponsors’ input, and it will continue to evolve.

First Step: Sponsor Forum
In January 1997, the Catholic Health Association, prompted by an article by Sr. Helen Amos, RSM (“A Moral Quandary for Sponsors,” *Health Progress*, January-February 1996, pp. 20ff) and guided by its strategic plan and members’ requests, convened an invitational Sponsor Forum to explore sponsorship’s theological foundations (see *Health Progress*’s report, “Sponsorship: With Radical Change Comes Opportunity,” March-April 1997, pp. 14-16). At the forum, Catholic sponsors and ministry leaders (see Box, p. 14) met to examine how evolving concepts of sponsorship would continue to affect the Catholic health ministry.

Theological Groundwork
CHA enlisted the expertise of Sr. Patricia Talone, RSM, PhD, and John A. Gallagher, PhD. Sr. Talone, who is ethicist, Unity Health System, St. Louis (she was then ethics consultant, Mercy Health Corporation of Southeastern Pennsylvania, Bala Cynwyd), and Gallagher, vice president for systems organizational integrity/ethics, Holy Cross Health System, South Bend, IN, provided theological groundwork for discussions on the current understanding of sponsorship and the internal and external forces affecting it. Their presentations and ensuing discussions were meant to help forum participants articulate sponsorship’s core elements and create a common vision of sponsorship.

Realities Affecting Sponsorship
With Sr. Virginia Gillis, RSM, EdD, a Phoenix consultant, as facilitator, participants and presenters spent the forum’s three days in dialogue about sponsorship’s changing structure for the new millennium. Participants agreed that sponsors are experiencing healthcare realities in various ways: in tensions between mission and business, in new types of partnerships, in shifts in traditional relationships, and in threats to an organization’s Catholic identity and presence. The challenge, they said, is addressing all these realities while confronting the idea of a changing sponsorship.

Common Concerns of Religious and Laity
As the forum ended, participants realized they had only begun to address the ambiguous and complex issues of sponsorship and ministry, particularly in relation to the shift to greater participation by the laity. With this new realization, they voiced the need for a theology of sponsorship. They also reaffirmed the notion that both religious congregations and the laity share the belief that healthcare is a ministry of the Church. We need “to name more clearly and develop more explicitly the commonality” of religious and lay perceptions of sponsorship, noted Gallagher.

Diverse Views Emerge
In the following months, it became clear that further reflection on the theology of ministry and its implications for sponsorship would be beneficial to sponsors—current and future. If CHA was to facilitate a foundational understanding of sponsorship, sponsors first had to reach consensus on exactly what they are sponsoring.

Thus Sr. Jean deBlois, CSJ, PhD, CHA’s vice president of mission services, composed a draft paper titled “Toward a Theology of Ministry,” which included discussion questions about the meaning of ministry. Reflecting on healthcare as a ministry of the *Church*, the paper prompted dialogue about how future sponsorship would support and enhance this ministry.

CHA used this paper as the basis for a breakout session on sponsorship at the June 1997 Catholic Health Assembly. The large attendance confirmed the great interest in this topic. To con-
SPONSORSHIP

PARTICIPANTS AT CHA
SPONSOR FORUM, JANUARY 1997

Sr. Helen Amos, RSM
President/CEO
Mercy Medical Center
Baltimore

Msgr. William Broussard
Executive Director
Texas Conference of Catholic Health Facilities
Austin, TX

Sr. Eileen Croghan, SP
Provincial
Sisters of Providence
Spokane, WA

Sr. Beverly Dunn, SP, JCD
Canonical Consultant
Archdiocese of Seattle
Seattle

Sr. Pat Eck, CBS
Chairperson of the Board
Bon Secours Health System
Mariottsville, MD

Sr. Dorothy Ettling, CCVI
Director, Interconnections
Visitatin Health Ministry
San Leandro, CA

Sr. Nannette Gentile, DC
Visiatrix
Daughters of Charity of St. Vincent De Paul
St. Louis

Br. Cornelius Hubbuch, CFX
Vicar General/Director of Formation
Xaverian Brothers Generalate
Baltimore

Sr. Ruth McGoldrick, SP
President
Sisters of Providence
Holyoke, MA

Diane Moeller
Formerly President/CEO
Catholic Health Corporation
Omaha

Sr. Mary Mollison, CSA
General Superior
Congregation of Sisters of St. Agnes
Fond du Lac, WI

Sr. Nancy O'Connor, CSJ
General Superior
Sisters of St. Joseph
Orange, CA

Sr. Kathleen Popko, SP, PhD
Executive Vice President, Northeast Division
Catholic Health East
Holyoke, MA

Rita Raffaele
Formerly Corporate Director of Mission Values
SSM Health Care System
St. Louis

Sr. Sharon Richardt, DC
Vice President, Mission Services
St. Vincent Hospitals and Health Services
Indianapolis

Sr. Christine Riley, SSJ
President
Sisters of St. Joseph of Wheeling
Wheeling, WV

Sr. Pat Smith, RSM, PhD
Assistant to the President/Theology, Mission & Ethics
Mercy Medical Center
Baltimore

Sr. Rosemary Smith, SC
Director, Women's Advocacy
Sisters of Charity of the Incarnate Word
Houston

Br. Edward Walsh, CFA
Provincial
Alexian Brothers United States Province
Elk Grove Village, IL

continue the Sponsor Forum dialogue, Gallagher and Sr. Talone presented material from their papers, followed by highlights from “Toward a Theology of Ministry.” Session attendees then reacted in small groups and open-floor discussions and, on evaluation sheets, indicated their level of agreement with proposed elements of sponsorship.

The dialogue in the breakout session, as well as the evaluation sheets, yielded mixed responses. Some participants were disappointed that the session did not provide a definitive document on the theology of sponsorship. Others were frustrated that the project still focused on ministry aspects of healthcare and urged CHA to move on and address more specific sponsorship concerns. Still others wanted further dialogue on ministry before making a statement on future sponsorship.

From this mixed feedback, CHA concluded that how to ensure Catholic health ministry in the future and how to facilitate strong lay sponsorship remain controversial topics.

COMMITTEE PROVIDES DIRECTION

To address the needs of a constituency with such a wide range of opinions about ministry and sponsorship, CHA staff sought guidance from its Sponsor Services Committee (see Box, p. 15). Chaired by Sr. Doris Gottemoeller, RSM, president of the Institute of the Sisters of Mercy of the Americas, the committee’s purpose is to recommend ways that CHA can meet sponsors’ needs through education, collaboration, and advocacy.

At the fall 1997 committee meeting, these sponsor leaders offered guidance to CHA on the project’s future direction.

The committee agreed that continued research and writing on the theology of ministry would be premature, considering sponsors’ diverse responses at the assembly sessions. Committee members emphasized the need for further dialogue with laypersons about their role as ministry leaders to help determine the competencies necessary or desirable for future sponsors.

NEXT STEP: MEETING FOCUSING ON LAY LEADERS

The committee recommended that CHA invite a select group of lay executives to identify, through dialogue with committee members, the experiences that contributed to their preparation and formation as ministry leaders. A unique one-day meeting in January 1998 will focus on the knowledge, skills, and abilities required to succeed in sponsorship now and in the future. The group
will explore what it means to be accountable for a ministry and what resources should be available to lay leaders for their personal and ministerial development.

The meeting will begin to identify the core elements sponsors must value, regardless of the “who” or “how” of sponsorship. One of the core elements of sponsorship may well be a deeper grounding in the theology of ministry. But CHA, rather than assuming this, will respond with appropriate resources after the needs are identified by the process.

The January meeting will also incorporate the foundational work accomplished at CHA’s Sponsor Forum a year ago. We believe that, although it is tempting to seek quick answers, facile responses to complex questions about ministry and sponsorship are likely to be unproductive in the long run. CHA’s role is to facilitate an evolving process (after all, the Church has debated questions regarding ministry for centuries). We believe that careful exploration of the skills and experiences of successful sponsors will provide a strong foundation to sustain healthcare as a ministry of the Church into the next millennium.

For more information, contact Joanne Elden Beale at 201-296-6315 (jbeale@chausa.org) or Sr. Barbara McMullen at 314-253-3420 (bmcmull@chausa.org).

BRs. Stephen De La Rosa, OH
Vicar Provincial
Hospitaler Brothers of St. John of God
Los Angeles
Sr. Nannette Gentile, DC
Visitatrix
Daughters of Charity of St. Vincent de Paul
St. Louis
Sr. Doris Gottemoeller, RSM, Chairperson
President
Institute of the Sisters of Mercy of the Americas
Silver Spring, MD
Sr. June Ketterer, SGM
Provincial Superior
Sisters of Charity of Montreal
Lexington, MA
Sr. Margaret Mary Kopish, ASC
Provincial Superior
Adorers of the Blood of Christ
Red Bud, IL
Sr. Patricia McDermott, RSM
President
Sisters of Mercy—Regional Community of Omaha
Omaha
Sr. Joyce Meyer, PBVM
President
Sisters of the Presentation of the BVM
Aberdeen, SD
Sr. Mary Mollison, CSA
General Superior
Congregation of the Sisters of St. Agnes
Fond Du Lac, WI
Sr. Nancy O’Connor, CSJ
General Superior
Sisters of St. Joseph
Orange, CA
Magr. John P. Quinn
Diocesan Director
Catholic Charities
Manchester, NH
Sr. Roberta Rorke, SP
Provincial Superior
Sisters of Providence of the Sacred Heart
Seattle
Sr. Patricia Simon, OP
Vicaress
Dominican Sisters Congregation of the Most Holy Rosary
Adrian, MI

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much kindness will cost them.” Hence the attraction of capitated managed care, where one can tell the politician what healthcare costs to expect. Reinhardt bolsters his case by pointing to the growth of Medicaid managed care: “Until that deal came along, Medicaid didn’t expand. Now it’s expanding in some states.”

However, all predictions, even those made by seasoned policymakers and expert policy observers, are fraught with risk. “I had predicted the number of uninsured would go down,” Reischauer wryly observed, “so I’m still smarting from being wrong.”

As we enter 2004, the message from Washington policy observers seems to be:
- Redouble your efforts on cost cutting
- Watch closely to see what impact all the reforms in the BBA have on the health system
- Do not expect any major policy changes anytime soon

Incremental reform continues to be the watchword. The healthcare reform debate on universal coverage “was a very bitter experience for a lot of people on both sides of the issue,” said Cox. But, ever hopeful, Cox suggested that if the Medicare Health Care Reform Commission set up by the BBA really does delve into the issue of reforming health insurance for the elderly, “it may not be able to avoid getting back into larger discussions of the uninsured.”

NOTES