



Storytelling Moves Learning from Head To Heart to Feet

By FR. JOSEPH DRISCOLL, MDiv, MS

A wide variety of expressions cross the faces of 40 leaders when they hear the “gathering question” for this, their third session as a community of learners: “Who believed in you?” Many speak of mothers, fathers, siblings, a grandmother, a coach, a teacher, a first boss. Almost every cohort will have somebody who teeter-totters between a desire for humility and expressing the bare truth: “I really am the one who believed in me.”

But this day, a shy, quiet voice speaks into the microphone and says, “The person who believed in me was my bus driver.”

And a beautiful story unfolds about a 5-year-old girl going to the bus stop for her first day of school, crying and clinging to her mother’s leg. All the kindness of this man, the driver, coming down from behind the wheel to greet her, cannot free her clutch — not that day, nor the next.

But the day comes when she takes his hand and climbs aboard the bus, and life is never the

same. Forty or so years later, now a nursing home administrator, she sits with her peers and traces her call and response to ministry back to the bus driver in rural Florida who believed in her.

Now I ask you: What business school would have allotted 100 minutes of precious class time for this kind of exercise? Yet storytelling is core to all the ministry leadership programs at Bon Secours Health System.

FORMATION AND STORYTELLING

People love stories. Our brains are wired for stories, from our primitive ancestors in the caves around the campfire to the instant Facebook click befriending the circle of a global Internet tribe. It can be argued that ministry formation, at its core, is storytelling, from the foundational stories of the biblical narrative of God with Israel to the stories of Jesus of Nazareth and the followers ever since. Our health care ministry in the United States is a compilation of heroic and inspiring stories of women and men blazing new ways of meeting new needs.

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When we hear these stories and distill their meaning and the values expressed in them, we are learning from the outside texts of the Judeo-Christian tradition's experiences of God in the world, in relationships, in suffering, in hope, in freedom and in restoration. These outside texts, read with the curiosity of the inquiring mind, need a conversation partner with the leader whose heart is ready to listen, interpret and then dialogue with her or his own story.

That process constitutes learning from an interior place, and the bus story is an example. It makes a series of revelatory connections that stem not from a text outside, but from a wisdom inside. The new skill for the ministry leader is to

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listen not only to the outside stories of our heritage, but also to the stories living in each of our experiences of the world, relationships, suffering, hope and restoration — through our experience of the Divine in and through them. And that is the first core principle of our philosophy of ministry formation: the heart of the work of ministry formation is inside out.

This way of learning is, in many ways, counter-intuitive, or, at least, it is not what we are accustomed to in our professions. There, we read textbooks, sit in classrooms or in front of computers, memorize information, take tests and acquire knowledge.

Acquiring skills is a good and necessary discipline for competence to master any profession, including ministry. But for ministry leadership, competence must be accompanied by confidence. Confidence means the ability to move from the inside of the self to the outside of the world. It means the ability to recognize that a voice inside called us to a ministry, thus we distinguish a vocation from a profession. Confidence means the ability to know faith, charism and community as the ultimate sources of sustenance for the work of ministry.

It also means the ability to discern through a process of reflective integration, rather than simply to make the snap decisions dictated by a business calculus. For example, with the bus story as

the starting point, such discernment might take the form of journaling, which is one of the tools for reflective integration. Here are some questions that would offer the journal writer entrance points for learning about her vocation:

Why did I remember this bus driver and choose him as the person who believed in me? What did I learn at that early age about the outside world from a stranger taking my hand and leading me to a new world?

Was God in any of this early story, then or now?

And further, how might this early experience impact my leadership today, where every day I walk out of my office and into a lobby to meet vulnerable people entering this strange world of the long-term care facility?

How do I approach families who are clinging to the security of a lifetime that they must now leave behind? And how I do coax them into trusting our ministry while taking their hand, carefully guiding them into this new place? Is God in all of the work I am called to do every day?

This leader's role demands competence in knowing regulations, implementing policies and procedures, assuring compliance and overseeing operations. But as a ministry leader in a Catholic health care setting, she also needs confidence to represent a healing presence infused with gospel values, to build a community that lives out and sustains these values. She needs the confidence to work at renewing her own sense of call and response in spiritual practices that deepen her own vocation as she integrates her inner life and her outer work.

CENTER FOR MINISTRY LEADERSHIP

In 2006, the Sisters of Bon Secours, along with the newly formed sponsor, Bon Secours Ministries, realized a long-standing vision to establish a center for ministry leadership for Bon Secours Health System. They put together an advisory group that includes the system CEO, operations and human resource executives, system sponsorship leaders and the chair of Bon Secours Ministries. The program the group devised comprises a four-level developmental frame for curricula, and the advisory group meets twice a year for program updates and to make the final selection of nominees for advanced-level programs.

The Sisters of Bon Secours and Bon Secours Ministries also have reached out to partner with others, especially Catholic health care provid-



ers. In 2009, the Center for Ministry Leadership became a primary resource for ministry formation for Holy Redeemer Health System in Meadowbrook, Pa. To date, more than 120 of Holy Redeemer's leaders have joined Bon Secours leaders in ministry formation.

The Center for Ministry Leadership's four-level formation pathway progresses from the provision of basic resources for participation in the ministry (Level I); to the experience of building a community that will influence and be influenced in the ministry (Level II); to selecting courses and meaningful experiences that will strengthen one's ability to lead in a particular area (Level III); and finally, to an experience of participating in the

greater work of transformation, individually and collectively, in co-creating a more humane world (Level IV).

The goal, according to the center's philosophy statement, is to "empower competent and confident ministry leaders for our communities" by means of what the center calls reflective integration, its ultimate learning objective. All programs contain these components: theological content, practical leadership tools, spiritual practices, theological reflection, silence and solitude and intersession activity. Some programs are content and skills focused (competence), while others are process and reflection focused (confidence).

THE SOUNDS OF PROJECT ECHO

By JOEL STAFFORD

As a leader responsible for approximately 30 coworkers in central accounts payable, I am fortunate to have had the opportunity to experience and grow in the ministry leadership development courses offered to me. It was in the latest of these courses that I continued to realize the richness of our health care ministry, and how much my team and I miss this aspect of our business due to our off-site business location. The majority of our work is heads down, paying bills, resolving payment issues and creating efficient payment solutions. In other words, "we don't get out much!"

Last spring, I had the opportunity to visit one of our hospitals in New York. I went there to meet an employee and work on refining solutions for our accounts payable process. We met in a small workroom off the hospital's main hallway. As the morning went along, we were deep in discussions about transitioning processes and personnel, as well as holding intense conversations about ensuring we were meeting our payment obligations. It came time for lunch, and as I stepped out into the hallway, I was taken aback by the realization that I was

actually in a hospital. It brought home to me that the work my team performs was an important part of a health system, not just a team in the back office, paying bills.

This experience in the hospital, along with the realization from my latest ministry leadership formation class, inspired me to create **Project ECHO**, that is, **Exposing CAP (Central Accounts Payable) to Hospital Operations**. The purpose of this initiative was to ensure that my team got out of the office and experienced the core of our ministry. I wanted them to see the ministry that occurred in our hospitals so we could serve our internal customers more compassionately and more effectively.

The program takes small groups of about six employees at a time to one of our local hospitals approximately every other month. The intention is to ensure each member on our team gets to the hospital at least once a year. We have partnered with leaders in the hospital, which were in my ministry leadership cohort, who conduct an in-depth tour of the hospital.

An email I received from a team member after the first visit describes the impact of the program:

We had a chance to meet many individuals and see the mission of Bon Secours in action from many different areas. We got to feel the passion the employees have for their job, the company, the patients and community they serve. It reminded us that what we do affects many other people and that it's not just a job but that it's truly part of a broader mission. The passion of the people working for Bon Secours and the mission in action in Baltimore makes me proud to be part of such an incredible company.

The benefits of this program include an increased awareness of our ministry, better relationships with our internal customers and therefore a higher level of service provided to them. Like the resounding echo in a cavernous space, it is my hope that the meaning of "call and response" in ministry will reverberate to all 24,000 of our coworkers, whether back room or front line.

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THE POWER OF STORIES

Competent and confident ministry leaders know, love and serve others through listening, sharing and living the stories from the outer texts of the tradition and the inner wisdom of their experience. Our leaders get an example of the confluences of outer and inner stories when they make a daylong trip to Richmond, Va., and take the conversation of head and heart to their feet. They walk along the James River on a trail once walked by chained African slaves from the docks where ships unloaded them in the New World to the auction blocks from which they were sold.

Richmond was a center of the U.S. slave trade. After 1808, when importation of slaves was outlawed, the city continued as a major trading hub for buying and selling already enslaved men, women and children. Slaves shipped to market to be “sold down the river” — in this case, the James River — were transported further south to be plantation and farm field laborers, generally a brutal and feared fate.

The walk is led by an African-American male descendant of enslaved Africans and a Caucasian female descendant of plantation owners, each narrating different parts of stories that voice the pain of racism and oppression of peoples — both of which remain in the world. Walking the Richmond Slave Trail, just a few miles from our Bon Secours health care facilities, puts the issue of “margins” under a theological and business lens

in a dramatic physical and human landscape. The leader participants, walking in silence through the woods as they think about the stories they have heard, discern the meaning of ministry transformation in the light of human dignity and the common good — concepts they discover have moved into a deeper place of the heart.

When they walk back into their ministry settings, the proof that their learning has been inside out emerges as they, in their leadership, ask: Who is hidden and forgotten among our residents, patients, coworkers? Who are the enslaved peoples in our day, and who will give voice to their cry for exodus and deliverance?

COMMUNITY

If there is one essential component of ministry formation that the founding congregations of women and men religious offer, it is that this ministry originated in, is sustained through and ultimately will thrive only in community. In the documentary “Women and Spirit: Catholic Sisters in America,” Sr. Mary Daniel Turner, SSND, summed it up like this: “Our foundress used to say, ‘Just give me 12 women; if I have 12 women, we can make a difference.’”

Community for lay leaders obviously will be different from community for vowed religious. However, the essential components are the same: faith; relationship building; the source of power in charisma and story; and a commitment to respond to the needs of God’s people, especially those on the margins. Just give us 12 ministry leaders today — and the courage to move from our head to our heart and then to our feet — and we can and will make a difference too.

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BON SECOURS HEALTH SYSTEM'S FOUR LEVELS OF MINISTRY FORMATION

LEVEL I: MINISTRY RESOURCES

Introductory; required within first year in position. Leaders participate in the "Foundations of Catholic Health Care Leadership," the two-day course collaborative with CHA, as well as other Catholic health systems.

Themes: Biblical foundations, church, ministry, Catholic social teaching, organizational ethics.

Leadership Tools: Moral Instincts Inventory,¹ Bon Secours 8-Step Ethical Decision-making Model.

Theological Reflection: *A Shared Statement of Identity for the Catholic Health Ministry.*²

Spiritual Practice: Silence and solitude.

LEVEL II: MINISTRY COMMUNITY

Advanced; required within third year in position. Leaders participate in "Legacy and Leadership Empowering the Ministry," a six-module, two-day community gathering for 40 leaders every other month for a year, held in a retreat setting.

Themes: Same as "Foundations," but each receives a two-day focus. The final module is an integrative retreat.

Leadership Tools: Greenleaf Servant Leadership Ten Characteristics³, Bon Secours Organization Ethics Inventory.

Theological Reflection: Personal story table narrative exercise, partner walk using the "Four Divides" social justice lens.⁴

Spiritual Practice: Journaling, heritage pilgrimage to Bon Secours U.S. Baltimore Foundation.

LEVEL III: MINISTRY LEADERSHIP

Specialized; self-initiated program designed for teams through the Center for Ministry Leadership, CHA or identified other ministry formation resources to supplement the basic and advanced programming above. Themes may include:

- Chief medical officer ministry formation
- Physician formation
- Chief nursing executive ministry formation
- Offerings through Bon Secours Mission Department
- Ethics champions
- Spiritual direction resources
- Front-line immersion experience
- Retreats
- Executive team building

LEVEL IV: MINISTRY TRANSFORMATION

Intensive; participants are selected to take part in the "Ministry Leadership Formation Intensive," a leadership formation collaborative with the University of Notre Dame's Mendoza College of Business. Held in cohort community of 30 leaders in retreat setting.

Content: Five sessions using Bernard Lonergan's five steps of moral conversion⁵ as processes for inner and outer transformation of individuals and communities: Be attentive, be understanding, be discerning, be committed, be loving.

Leadership Tools: 360 *Leadership Circle* survey feedback instrument,⁶ four quadrant integral leadership model,⁷ polarity thinking model.⁸

Theological Reflection: Same as Levels I and II, plus *Vocation of the Business Leader*⁹ didactic and process.

Spiritual Practices: Each session introduces two new spiritual practices from diverse faith traditions, such as meditation, the labyrinth walk, yoga, chanting, breathing and guided-imagery techniques.

NOTES

1. Brian O'Toole, "Four Ways People Approach Ethics: A Practical Guide to Reaching Consensus on Moral Problems," *Health Progress* 79, no. 6 (Nov.-Dec. 1998): 38-43.
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4. Daniel G. Groody, "A Theology of Migration: A New Method of Understanding God on the Move," *America* 204 (Feb. 7, 2011): 1-4. americamagazine.org/issue/763/article/theology-migration.
5. Bernard Lonergan, *Collected Works of Bernard Lonergan*, vol. 3, *Insight: A Study of Human Understanding*, 5th ed. (Toronto: University of Toronto Press, 1992).
6. The Leadership Circle, LLC. *Authentic Leader Workshop*.
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9. Pontifical Council for Justice and Peace, *Vocation of the Business Leader: A Reflection* (St. Paul, Minn.: University of St. Thomas, 2012).

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