

Succession Planning for Mission

*The Wheaton Franciscan
System Has a New Method
for Training Mission
Leaders*

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Editor's note: This article has two parts. The first part, an overview of the program described in it, was written by Dr. McGuire. The second part, which concerns the experience of one program participant, was written by Ms. Rocolé.

What makes a Catholic health care organization Catholic? As the women and men religious who founded the church's health ministry in the United States retire from the scene, some of their organizations are devoting considerable energy and resources to the development of mechanisms that will ensure the continuation of the founders' Catholic tradition. One such organization is Wheaton Franciscan Services, Inc. (WFSI), Wheaton, IL.

WFSI is the parent organization of more than 100 health and shelter service organizations in the Midwest, including 17 hospitals in Wisconsin, Iowa, and Illinois. The hospitals are organized into seven regions. Each region has a mission leader responsible for overseeing mission integration and planning in the region. Each mission leader reports to his or her regional CEO and also has a collegial working relationship with this article's senior author.

As WFSI's senior vice president of mission services, I am responsible for ensuring that the system's mission, vision, values, and Catholic identity are known, understood, and used as a framework for action and decision making throughout the system. The regional mission leaders and I coordinate our efforts in accordance with a systemwide Mission Integration Policy. From this policy, we devise annual regional mission plans, which we then monitor. Once a year, when the members of WFSI's Sponsor Board visit each region, we report the plan's outcomes to the board.

CHOOSING A MISSION LEADER

In 2003 one WFSI member, All Saints Healthcare, Racine, WI, began a systemwide search process to identify potential candidates for

its newly created mission leader position.

Kenneth Buser, All Saints' president and CEO, chaired the search committee, to which I belonged along with WFSI's regional leaders (I was then the system's vice president of mission integration). In our discussions, we determined that a succession-planning approach would best serve the region, inasmuch as WFSI encourages promotion from within the system and doing so would provide new and expanding leadership for its Mission Services Department.

After deliberation, the search committee chose this article's coauthor, Terri Rocolo (who was then with another WFSI member, Covenant Healthcare, Milwaukee) to be All Saints' mission leader. Rocolo, who had an MBA degree with a focus on quality improvement, would bring impressive experience in that field. She had, moreover, served for a number of years as one of Covenant Healthcare's mission representatives and was familiar with the WFSI mission integration process.

THE "LEARNING CONTRACT"

The search committee agreed that a "learning contract" would be established between All Saints and Rocolo. Such a contract would help ensure that the mission leader benefited from educational opportunities and professional development, as well as from mentoring in the areas of mission, Catholic identity, spiritual development, and ethics. The committee appointed Buser as Rocolo's on-site mentor with respect to administrative and organizational issues; Linda Bronersky, who was then WFSI's director of clinical pastoral education (she is now vice president, spiritual services), would serve as her resource for spiritual services; Mike Douglas, EdD, the system's vice president for ethics, would serve as her

The search committee chose Terri Rocolo, this article's co-author.

ethics resource; and I would be her mentor for mission and Catholic identity and also oversee the learning contract. Sr. Jane Madejczyk, OSF, then WFSI's senior vice president of mission services (she is today a member of the Sponsorship Board), provided the liaison between the initiative and the system's sponsor. "Both WFSI senior management and the Wheaton Franciscan sponsors consider the development of lay leadership for our ministry to be essential and faithful to the deeper, ongoing, spirit-led growth of the church," Sr. Jane said.

In designing the learning contract, the search committee realized that it was important to break it into two complementary parts:

- *Internal aspects:* knowledge acquired and experiences processed through the mentorship of WFSI's mission leaders and the regional CEOs
- *External aspects:* knowledge acquired through more academic venues

Concerning the latter, Rocolo was asked to attend the Loyola University of Chicago Ethics Seminar and two programs offered by the Catholic Health Association (CHA): the Prophetic Voice seminar for new mission leaders and the Foundations in Catholic Health Care Leadership seminar.

In addition, I surveyed the various graduate schools in our area that offered degrees in ministry, discussing them with Rocolo; Buser; and Sr. Coletta Dunn, OSF, chair of the Religious

SUMMARY

As part of a succession-planning approach to provide new and expanding leadership for its Mission Services Department, Wheaton Franciscan Services, Inc. (WFSI), Wheaton, IL, implemented a "learning contract" for new mission leaders in its member organizations. This article focuses on training for the mission leader at one such organization, All Saints Healthcare, Racine, WI.

The contract includes expectations for the new leader,

which, if met, provide the preparation thought to be essential for the new leader to perform effectively in the role. The contract has two parts: first, internal training, including formal mentoring relationships among the new mission leader, WFSI's mission leaders, and the CEOs of member organizations; and, second, external education, including participation in a master's degree program and attendance at various ministry educational programs that pertain to the role.

Studies Department, Cardinal Stritch University, Milwaukee. We decided that Rocolle should enroll in the master's degree program at Cardinal Stritch. Several factors influenced this decision. First, the curriculum's flexibility allowed Rocolle to work with me and Sr. Coletta in choosing courses that would both fulfill WFSI expectations and meet the university's degree requirements. Second, the institute offered in-depth study of the Franciscan tradition, which is the religious heritage from which WFSI was born. Third, the program allowed Rocolle to begin her studies at the same time she was starting her new job as mission leader at All Saints. In fact, it would allow her to do both for two years (2004-06), thereby integrating theory with practical application in the workplace.

The stage was thus set for implementation of the learning contract. I will let Rocolle describe what happened next.

Editor's note: This section of the article was written by Ms. Rocolle.

I had finished my MBA in June 2003, after three and a half years of intense study, and the thought of entering another master's program was, to be honest, a little bit frightening. At the same time, I was excited by the prospect. Although I had more than 10 years' experience as a mission services representative, that role had been only part of my job, another task on top of other full-time responsibilities. This new job opened the door to full-time mission work. I knew, however, that appropriate preparation would be essential if I were to perform effectively in the role. And so began my journey in pursuit of the personal, spiritual, and professional growth required for success in this role.

THE MASTER'S IN MINISTRY DEGREE

My university advisers and WFSI leaders helped me set the goals that would serve as a foundation for the master's degree and my learning contract. The goals were:

- Obtain an in-depth understanding of the Franciscan heritage.
- Build sound knowledge and a strong foundation in the Catholic moral tradition, particularly as it relates to the healing ministry of Jesus.
- Develop my ability to understand and provide guidance on

complex ethical, legal, organizational, and policy issues facing Catholic health care institutions in light of the *Ethical and Religious Directives for Catholic Health Care Services* and Catholic moral teaching.

- Better my understanding of the foundations of pastoral ministry and its application in the health care environment.
- Enhance my ability to identify and implement organizational activities that sustain and nurture Catholic identity, and at the same time heighten awareness of mission and recognition of our work in Catholic health care as a ministry of the church.

To achieve these goals, my individualized curriculum in religious studies at the university is focused on sacred Scripture, church history, Franciscan spirituality, theological studies and reflection, ministry foundations, moral and social ethics, and Christian spirituality. Near the completion of the program, in 2006, I will be required to develop a comprehensive paper or project involving the integration of classroom learning and practical applications in my mission services role in health care.

PROFESSIONAL DEVELOPMENT SEMINAR

Before beginning formal classroom study, a master's student at Cardinal Stritch must complete a course known as the Professional Development Seminar. The course I took was facilitated by Kay Pollen, a mentor in the Religious Studies Department. Pollen helped me to reflect on how my mission services role in Catholic health care would function as a part of church ministry, and to understand how the master's program would support me in this position. The course consisted of assigned reading, facilitated discussion, reflection on phone interviews I conducted with three health care mission leaders, and a final paper.*

The discussions held with mission leaders were critical to my understanding of how the mission role is carried out in a health care organization, which was in turn key to my ability to set appropriate educational goals. From these three people I learned that effectiveness in this role depends heavily on relationship building. They empha-

* The mission leaders I interviewed were Thomas F. Nehring, system vice president, mission and leadership Development, Provena Health, Mokena, IL; Marguerite Stapleton, vice president, mission effectiveness, Sisters of Charity Health System, Lewiston, ME; and Rosemary Anton, JD, senior vice president, mission and ethics, Covenant Healthcare, Milwaukee. I am grateful to them for their help.

sized that if a mission leader is to educate and motivate senior leaders, employees, physicians, and board members, he or she must first earn their respect, confidence, and support. Accomplishing that requires building positive working relationships at all levels of the organization and with community leaders and the archdiocese.

I also learned that, besides building relationships, mission leaders must:

- Help develop organizational leadership that is focused on serving others
- Nurture a corporate culture that is driven by the organization's mission and values
- Enhance physician awareness of mission and values
- Respond to the spiritual needs of patients, families, and staff through pastoral ministry
- Ensure a high standard of organizational and clinical ethics
- Work for social justice
- Create a "ministry of exchange," in which the stories of WFSI's heritage can be shared, heard, and understood.¹

The course work provided me with an even deeper understanding of how our Catholic identity and Franciscan heritage influence the work we do. Health care today faces many challenges. To respond to these challenges, institutions are often required to make very difficult financial and operational decisions. These decisions are especially difficult in a Catholic health care organization, where rationales for them cannot be focused on the bottom line alone, but must also reflect the organization's religious traditions and beliefs.

STARTING THE JOB

When I assumed my new role as director of mission services at All Saints in 2004, I felt that I brought to it solid experience from my previous mission activities. The job description clearly outlined the performance expectations set for me. Even so, my recent training—my work at Cardinal Stritch, my participation in the Loyola ethics seminar and the two CHA seminars, the counseling from my WFSI mentors, and the guidance I received from my All Saints CEO and executive peers—showed me that I still needed to learn even more in order to fully undertake these new responsibilities.*

As a mission leader, one of my primary roles is to serve as a member of the All Saints executive team. Each team member is expected to bring the knowledge and perspective from his or her area of expertise "to the table." My role is to raise questions, pose challenges, and frame the team's decision making in a way ensuring that decisions concerning staffing, operations, and clinical practice

are in alignment with WFSI's mission and values. To do this, I, as mission leader, must build positive working relationships with the other team members and earn their respect, confidence, and support. Since starting my new job, this has been my primary focus, along with meeting the expectations of my learning contract.[†] I have also worked to better understand and familiarize myself with those All Saints operational areas for which I am specifically responsible, including spiritual care services, ethics, interpretation and translation services, and volunteer services.

My studies at Cardinal Stritch have proved to be very beneficial. As the result of a course I took there on the Franciscan intellectual tradition, I was prepared to participate in All Saints' annual Mission and Heritage Week in the fall of 2004. I was able to develop reading materials and brochures on our Franciscan heritage and share my knowledge about the lives of St. Francis and St. Clare with employees during facilitated lunch-hour discussion groups. Such activities help us sustain a mission- and values-based culture at All Saints.

In addition, I have been able to apply my newly acquired knowledge to help ensure that All Saints' policies and contracts are clearly aligned with the system's mission and values. This includes making sure that all contracted employees understand, and agree to comply with, values-based behavior standards.

THE "DAILY CONNECTION"

In September 2004, a team of frontline leaders at All Saints began developing a mechanism that would, on a daily basis, heighten staff members' awareness of the organization's mission and set expectations concerning how staff should live out the organization's values within the context of their daily lives.* This mechanism, called the "Daily Connection," has six key components:

* I want to thank Ken Buser, my executive team colleagues (Susan Boland, Jim Beck, Loren Meyer, Mike McAvoy, Pat Harger, and Rebecca Banks), and my WFSI mentors (Terry McGuire, Mike Douglas, Linda Bronersky, and Sr. Jane Madejczyk, OSF) for their support.

† Concerning these tasks, Buser has noted that Rocolle "has done an excellent job of building relationships with her executive team colleagues. In addition, she has provided exceptional leadership to key initiatives and collaborated effectively with key stakeholders in a manner that promotes our faith-based culture."

Sample "Daily Connection" Items

The following is taken from All Saints Healthcare's Daily Connection for January 1, 2005:

Value: Respect

Supporting Behavior: Promote the sacredness of life from conception through death

Reflective Message: "There is much suffering in the world—physical, material, mental. But the greatest suffering is being lonely, feeling unloved, having no one. I have come more and more to realize that it is being unwanted that is the worst disease that any human being can ever experience"—Mother Teresa.

Commitment: No matter how busy you get today, let those you work with, and those patients in your care, know that you have time for them. Let them know they are wanted and cared about.

- The organizational value (respect, integrity, development, excellence, or stewardship) to be highlighted on a given day.
- Specific behaviors that, because they embody that value, will be emphasized that day.
- A reflection, quotation, or Scripture passage that, because it articulates a message related to the value, is to be emphasized that day.
- A personal commitment that each staff member is to carry out that day.
- A key operational update to inform staff of significant organization-wide news. (An example is the February 2005 visit to All Saints by the archbishop of Milwaukee, who led a blessing ceremony for the facility's new emergency care center. All Saints staff members were encouraged to attend.)
- A few minutes reserved for staff acknowledgement of personal celebrations, professional accomplishments, or exceptional service. Among those recognized are staff members who demonstrated the Daily Connection commitment from the day before.

Each Daily Connection—the value, supporting behavior, reflection, and commitment, as well as space for the organizational update and the names of staff members to be acknowledged—appears as a page in a special daily calendar we have distributed to all All Saints departments (see **Box**). Department leaders (or staff members designated by them) read each day's Daily Connection to their department members. The Daily Connection is thus delivered in person, not via

* Besides Rocolle, the Daily Connection team members are Rosi Fowler (the team's leader), Michael Carter, Cathy Smith, Sandy Hansen, Patty Gedemer, Tim Thrall, and Sharon Coffie.

e-mail or posting on a bulletin board.

Implementation of the Daily Connection began January 1, 2005, with the distribution of calendars for 2005 to all department leaders. The overall response from leaders, staff members, and physicians has been quite positive. Although we have encountered logistical challenges in some of our more complex and dispersed departments, we have been able to provide direction and support to most department leaders as they seek creative, innovative ways to engage their staffs in the Daily Connection process.

GOING FORWARD

As I look back over my first six months in my new job, I am amazed at the amount of activity, learning, and growth that has taken place. It has been a very exciting and challenging time for me, both personally and professionally. I find that the ongoing guidance and direction from my CEO and executive team peers, as well as the coaching from McGuire, help keep me grounded and focused.

As I reflect on how far I've come, and look to what lies ahead, I find strength and inspiration in what I see as my reason and purpose for making this "journey." I hope, through formal education and practical experience as a new mission leader, to initiate a "ripple effect" throughout the All Saints organization. By acting as a role model, helping to nurture a strong Franciscan culture, and serving as a formal voice for mission in operations and decision making, I can help All Saints' leaders stay true to their course. If we stay true to our course, the essence of who we are as a Franciscan Catholic health care organization will touch people both inside and outside our walls.

Our mission, values, and Franciscan tradition will perpetuate compassionate action and permeate the very core and fabric of our organization. Health care will continue to face daunting challenges. But if we who serve All Saints understand the strong Catholic and Franciscan foundation on which we stand, we will be firmly guided as we walk in the footsteps of St. Francis, living out the healing ministry of Jesus. ■

Note

1. The term "ministry of exchange" is borrowed from Elise Saggau, ed., *Franciscans and Healthcare: Facing the Future*, Franciscan Institute, St. Bonaventure, NY, 2001.

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