NATIONAL CATHOLIC REPORTER
Published on *National Catholic Reporter* (https://www.ncronline.org)

# Catholic health care grapples with identity in a complex ministry

Alice Popovici | Oct. 24, 2011

Daughter of Charity Sr. Ellen LaCapria in front of St. Agnes Hospital's hanging sculpture, "Spun Grace" (Photos by Alice Popovici)

BALTIMORE -- Last May, St. Agnes Hospital opened its first new building in more than 50 years, a 200,000-square-foot addition to the existing campus, with 120 newly designed patient rooms, five operating rooms, a spacious main lobby and a seven-story-high, lighted cross that faces traffic on Caton Avenue. William Greskovich, the hospital?s vice president of operations and capital projects, said the new building -- part of a $200 million plan to expand the campus -- will take the 150-year-old, 314-bed hospital into its next 50 years.

But ?the spirit and mission of the hospital,? according to its president and CEO, Bonnie Phipps, are captured in the large, hanging sculpture that swings gently from the ceiling in the rotunda of the brand new lobby. Its title is ?Spun Grace.?

Daughter of Charity Sr. Ellen LaCapria, the hospital?s vice president of mission integration, was part of the team that commissioned the sculpture and planned the design of the modern lobby, as well as other projects leading up to the hospital?s 150th anniversary next May. Her job -- a position found in virtually every Catholic hospital in the U.S. -- is to ensure the institution maintains its Catholic identity, follows ethical and religious directives, and continues the mission of the founding religious order. In other words, LaCapria says, to integrate the business-driven environment of a hospital with the mission of the religious order that founded it.

It?s not an easy undertaking, considering how much the health ministry of the Daughters of Charity -- who opened the Baltimore hospital in 1862 to care for the area?s sick and poor in the midst of the Civil War-- has grown in the last 150 years. St. Agnes is now one of about 33 health ministries in Ascension Health, the largest Catholic health system in the country.

?Health care is very complex,? LaCapria said, ?and within that complexity, how do we keep our Catholic identity??

It is a question Catholic health care leaders have been asking for decades, a question that began to resonate more loudly about 20 years ago, when many of the mission integration leadership positions were formally created. Now, the 636 Catholic hospitals and 59 Catholic health systems in the U.S. (according to the Catholic Health

Association?s most recent figures) face some of the same difficulties as their secular counterparts: struggling financially while bracing themselves for an increased demand for services in the coming years, as baby boomers age and grow frail. But as they navigate a health care landscape that grows more complex and uncertain, leaders in Catholic health care ministry say they are keeping up with technology and trends in patient care, doing whatever is needed to continue the work into the future.

**Origins of the ministry**

Catholic health care in the U.S. goes back to 1727, when the French Ursuline sisters arrived in New Orleans and established a hospital for the poor, but many Catholic health care ministries operating today got their start around the same time as St. Agnes Hospital, roughly 150 years ago.

?Every community started in a little bit of a different way,? said Holy Cross Sr. Ruth Marie Nickerson, area coordinator for her community in Notre Dame, Ind. Sisters would go wherever they were called, to help in any way they could.

The Sisters of the Holy Cross had been involved with education ministries in Indiana, but in 1861 the governor asked them to help care for soldiers wounded in the Civil War, according to Nickerson. They ended up going not only to Cairo, Ill., where they were first called, but to neighboring towns, in each place caring for the wounded as well as they could in the unsanitary conditions of former warehouses and factories that served as hospitals. In the following year, the sisters provided nursing staff aboard the USS Red Rover, a Navy hospital ship that carried patients up and down the Mississippi River, and became the forerunners of what would later become the U.S. Navy Nurse Corps.

As women religious moved to new towns and expanded their ministries to serve needs they saw, they began to organize their work -- which included schools and parishes as well as hospitals -- into geographical provinces under an area leader called a ?provincial.? Around the 1960s and 1970s, as hospitals began to feel a number of external pressures, religious communities started to separate health care from their other ministries.

?Hospitals began to receive more government money, particularly Medicare and Medicaid, and it was necessary to separate the incorporation of the hospital from that of religious communities,? said Mercy Sr. Doris Gottemoeller, who is senior vice president of mission integration for the health system Catholic Health Partners. A lot of this was done to consolidate debt and allow more financial flexibility, but also ?to create a separate liability, so if someone sues a hospital, they can?t access the funds of the religious community.?

In 1983, Gottemoeller held the role of provincial in the Ohio, Kentucky and Tennessee province of the Sisters of Mercy, which included 11 hospitals as well as schools and parishes. But because more professional expertise was needed to run the hospitals, she said, by 1986 the 11 institutions had merged under Catholic Health Partners -- a system that has since grown to 25 hospitals.

The merger was not without challenges. ?Trying to realign a hospital in Toledo to one in Knoxville,?

Gottemoeller said, ?took a little persuasion.?

But as the cost of health care started to go up in the 1970s and 1980s, and health ministry leaders saw a growing need to for better record-keeping and documentation of care, they became motivated to work together, said Providence Sr. Kathleen Popko, president of her congregation in Holyoke, Mass.

The changes led to ?a transformative movement as all these forces began to play on hospitals,? Popko said. ?Gradually you saw sisters transferring some of the roles, particularly in administration, to lay leaders.? In the 1970s and 1980s, sisters also began to talk about the role of sponsorship, and to envision larger systems that would better position Catholic health ministries within an increasingly competitive market. Provinces that had consolidated into small health systems then began to look for partnerships with the consolidated provinces of other religious communities.

?We were trying to build our capacity to continue this wonderful ministry, which was becoming more sophisticated,? said Popko, who helped form the system Catholic Health East in the 1990s. ?I think it was a great movement of soul-searching for women religious.?

**Mission integration**

Until 1999, St. Agnes Hospital was part of the Daughters of Charity National Health System, sponsored by four provinces of the Daughters of Charity of St. Vincent De Paul. It came under the umbrella of Ascension Health when the Daughters of Charity system merged with a system sponsored by the Sisters of St. Joseph of Nazareth, who are now part of the Congregation of St. Joseph. In 2002, the Congregation of St. Joseph of Carondelet became the third sponsor of the newly created health system.

?The sponsor is the official link to the institutional church,? explained Daughter of Charity Sr. Maureen McGuire, senior vice president of mission integration for Ascension Health, ?the link that makes these institutions Catholic.? However, last month Ascension changed its sponsorship model to a non-congregational ?public juridic person? -- so that instead of the religious communities, the system is sponsored by Ascension Health Ministries, an entity authorized to do the work in the name of the church.

The new structure ?allows more easily for new entities to join Ascension Health, and allows us to have shared sponsorship by sister and lay members,? McGuire said.

Catholic Health Partners is also implementing digitized patient records for easier accessibility. ?We use a system that has a patient chart, called ?my chart,? ? said Gottemoeller, who is mission integration leader of the system, which ?makes health care efficient and accurate, and gets away from doctor?s scribbles.?

Popko said the future of health care is ?patient-focused care? that improves a person?s experience, as opposed to the trend in 1990s, when ?the person got lost in the shuffle. ? Health care is now moving away from the institutional model, toward home-based care, she added, and there are many moving pieces to consider -- including the rising cost of health care and a growing older population. Mergers are another issue. ?In that model,? she asked, ?how do you continue to maintain Catholic identity??

LaCapria, who is an artist and art therapist by profession, says every mission integration leader brings unique talents to the job. She said, ?That gift that I have in my creativity can help enhance the healing ministry of Jesus in the hospital environment? and continue the original mission of the Daughters of Charity: ?Love of God through service of others.?

While helping plan the new building, LaCapria remembers having had a conversation with Mary Ann Mears, the artist who designed the hanging sculpture, and showing her photographs of the large, white coronets

traditionally worn by the Daughters of Charity. LaCapria says she might have also shown the artist images of a dove, which is the logo of St. Agnes Hospital.

Now, when LaCapria looks at the white loops arching in midair, she says she isn?t sure if the artist used the visual inspiration or not. But the idea seems to be there.

*This is the first of a three-part series on Catholic health care. Next: The challenges Catholic health care must meet.*

[Alice Popovici covers health care issues for *NCR*. Her e-mail address is apopovici@ncronline.org.]

**Support independent reporting on important issues.**

[1]

---

**Source URL (retrieved on *06/24/2017 - 11:25*):** https://www.ncronline.org/news/people/catholic-health-care-grapples-identity-complex-ministry

**Links:**
[1] https://www.ncronline.org/donate?clickSource=article-end