

**Application for
2005 International Spirit at Work Award**

Applicant: **Catholic Health Initiatives**
1999 Broadway, Suite 2600
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1. Basic Data

Catholic Health Initiatives is a national, non-profit health provider corporation based in Denver, Colorado (USA). Our health system includes 68 hospitals, 44 long-term care, assisted and independent living and residential facilities, and five community-based health ministry organizations. Our hospitals/facilities are located in 19 states, and include a wide diversity of local cultures (rural/urban; ethnic/multi-racial) and socioeconomic settings. We have approximately 65,000 employees and total annual revenues of \$6.7 billion. Our measurable community benefit provided to the poor or underserved in the areas in which we are located is 10.8% of total revenues (FY'04). We are the second largest Catholic healthcare system in the United States.

Catholic Health Initiatives was founded in 1996. Through a merger of four predecessor health systems and the ministries of twelve congregations of women religious, both our governance and also our sponsorship model exemplify a lay-religious partnership to advance our mission and vision. Because of the Roman Catholic faith heritage of the women religious who founded most of our hospitals and facilities over the past 150 years, we believe our work is making present the healing of Christ in the communities we serve and therefore we explicitly promote an organizational culture grounded in the spirituality of our four core values.

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3. Description

- 3 a)** **Mission:** The mission of Catholic Health Initiatives is to nurture the healing ministry of the Church by bringing it new life, energy and viability in the 21st century. Fidelity to the Gospel urges us to emphasize human dignity and social justice as we move toward the creation of healthier communities.
- Vision:** Catholic Health Initiatives’ vision is to create a national Catholic ministry which will live out its mission by transforming health care delivery and creating new ministries that promote healthy communities.
- Core Values:** **Catholic Health Initiatives’ core values define the way we do what we do. We divide four core values into sixteen cultural attributes (see Attachment A) in order to describe the “culture grounded in spirituality” that we espouse and routinely measure.** The four values are:
Reverence: a profound respect and awe for all of creation – the foundation that shapes our spirituality, our relationships with others and our journey to God.
Integrity: moral wholeness, soundness, fidelity, trust and open truthfulness in all we do.
Compassion: solidarity with one another, capacity to enter into another’s joy and sorrow, and passion for the common good of those we serve.
Excellence: preeminent performance, becoming the benchmark, putting forth our personal and professional best.
- Philosophy:** We believe that our consistent emphasis on the spirituality of our core values and cultural attributes has created a distinctive ministry culture that drives employee satisfaction, customer service (“person-centered care”), community value and financial/operational performance. The senior leadership of our organization, both nationally and locally, not only speak of these values and attributes as a consistent framework of reference but also “walk the talk” by holding staff accountable for the behavioral practice of these values through performance review and regular measurement (see “CVA” process below).

A summary of this philosophy of Catholic Health Initiatives can be found in the May-June, 2002 issue of *Health Progress* (publication of the U.S. Catholic Health Association, St. Louis), pp. 36-39, 67, entitled “Integrating Business and Spirituality” by Gerard Broccolo.

3 b) Meaning of Spirituality

Since the inception of Catholic Health Initiatives in 1996, an explicit effort has been made to develop a distinctive culture “grounded in spirituality”. Early on, the four core values of the organization (reverence, integrity, compassion and excellence) were identified, through a grass-roots upward process, as the hallmarks of this lived spirituality.

In Catholic Health Initiatives, we understand the “spirituality” of our distinctive culture to be synonymous with living these core values, as detailed through our sixteen cultural attributes (see Attachment A).

While we regularly provide opportunities for individuals and groups to engage in reflection and sharing of what gives meaning or purpose to their work (“vertical component”), we also expect staff to contribute to the spirituality of our ministry culture through certain values-based behaviors in their relations with those we serve and with one another (“horizontal component”). We have found that by establishing a workplace where staff feel free to pray or share their faith convictions in an environment of mutual respect we significantly enhance job satisfaction and retention. Furthermore, by attending explicitly to, and holding staff accountable for the practice of, the cultural attributes of the defined organizational spirituality, we significantly enhance job satisfaction and high performance. Measurable patient satisfaction, community value and quality care outcomes result from the focus upon and regular measurement of a well-aligned, person-centered culture of humble service to others and the common good.

In addition to using the broad sense of the word “spirituality” as a synonym for the daily practice of our core values in our distinctive ministry culture, we also use the word “spirituality” as a descriptor for one of our sixteen cultural attributes. In this slightly more narrow sense, we define spirituality as “our culture is recognized as a ‘holy place’, one in which the nearness of God is tangible and visible.” Of all the sixteen attributes, this behavioral standard is the one in which most of our facilities usually score the highest rating in the “core values assessment process” (see “CVA” below).

3 c) Managing Boundaries

By living the foundational value of “reverence”, a profound respect for a diversity of religious traditions and faith backgrounds is prevalent at both national and local facility levels of the organization. As a matter of fact, one of our sixteen cultural attributes is “diversity” – which is defined as: “a diversity of people and a diversity of points of view are welcomed, respected and celebrated”. Whenever staff gather together for celebrations

or prayer services in our facilities or offices, great ecumenical sensitivity for the diverse religious backgrounds of those present is always demonstrated, even if the occasion for gathering happens to be a celebration of the faith heritage (“legacy of care”) of the organization.

Although our organization is explicitly Roman Catholic in its sponsorship and affiliated with the ministry of the Roman Catholic Church (as a “public juridic person”), and adheres to the *Ethical and Religious Directives for Catholic Health Care Services*, there is no expectation that leaders, employees, physicians or Board members must personally belong or subscribe to the Roman Catholic faith. Upon application for employment or affiliation, everyone is made aware of the Catholic identity of the organization and the expectation that they adhere to our organizational standards of ethical conduct as well as that they incorporate practice of the four core values into their behavior at work. (Once again, this is the “horizontal” component of our spirituality.)

But staff are also encouraged to develop a personal spirituality according to their own faith/religious persuasion and any semblance of proselytizing in the workplace is taboo. Opportunities are regularly provided for employees to reflect on what gives meaning to their life and work, and expression of that individual spirituality through outreach to those in need is consistently encouraged. (This provides the “vertical” component.)

3 d) Programs, Policies, Practices

Infrastructure

A national Vice President, Spirituality, has been in place since 1997 (i.e. within one year of the organization’s founding) to advance workplace spirituality and the integration of spiritual/pastoral care into care delivery services and processes. There is a team of eight persons at the national level who serve as facilitators and resources for the ongoing development of mission, ethics and spirituality integration across the organization. Every one of our 60+ local facilities also has a designated “mission leader” – a member of the local senior management team charged with promoting the distinctive ministry culture of Catholic Health Initiatives with all staff across a continuum of care settings. Specific, organization-wide “mission standards” are in place to focus the expected impact of these mission leaders within their sphere of influence. The national Human Resource division of Catholic Health Initiatives has also crafted a covenant of mutual expectations between employer and employees to promote each site becoming a “work community of choice” in that locale. This desired outcome is further reinforced by a focus on “People” as one of the five core strategies of Catholic Health Initiatives.

Activities

A wide variety of activities, processes and resources demonstrate the caliber of spirituality that is a hallmark of our organization. However, we must clarify that what is being presented and described in this award application is not a program. Rather, it is important to note that for Catholic Health Initiatives “workplace spirituality” or “expressing Spirit at work” is simply “**how we do what we do**” – i.e. a dimension of “who we are” that is integral to our values-based culture.

For this reason, significant time to address and experience the spirituality of Catholic Health Initiatives is explicitly provided in all of our leadership orientation and leadership development programs. Promoting opportunities for spiritual self-awareness is foundational to our leadership development because of our conviction that self-management is critical for effective managing of relationships that heal. Similarly, an in-depth introduction to the practical implications of living our core values is an essential part of new employee orientation in each and every facility and office of the organization. Behavioral indicators of how staff live the four core values are included in performance expectations and annual performance review. Likewise, prayer and/or reflection exercises are simply part of all meetings and programs on a daily basis.

Moreover, there is constant encouragement to share stories of the lived spirituality of our workforce (i.e. how people find a greater meaning in what they do every day); since 1999, some of these stories are collected annually (six volumes to date!) in a national publication entitled *Sacred Stories*. The conviction is that we foster spirituality by expressing spirituality. Widespread sharing of individuals’ spirituality and how they find purpose in their calling creates an environment where others feel encouraged (without pressure) to do the same.

Resources that enable such sharing and that demonstrate what individuals find personally meaningful in their daily care for others are made available nationally, but the provision of various forums for such activity are determined by the local mission leader. Catholic Health Initiatives is blessed with tremendous diversity in accommodating to specifics in the ethos of each local workforce. Materials from the national office support these efforts, such as suggestions for local observance of three “Feast Days” each year: the World Day of Healing on February 11, the birthday (1996 founding) of Catholic Health Initiatives on May 1, and the spirituality of our workplace in conjunction with Labor Day. In addition, suggestions for incorporating spiritual reflection into work routines are constantly provided, e.g. the *Workplace Spirituality Resource Manual*,

sample prayer formats, guidelines for achieving work-life balance, promotion of reflective dialogues, mini-retreats, and the use of reflective exercises such as “appreciative inquiry” in group meetings, etc.

In addition to promoting development of each individual’s personal spirituality by providing workplace opportunities to express its unique dimensions (“vertical” component), we also believe that our organizational spirituality is best fostered by providing opportunities to demonstrate its common dimensions (“horizontal” component). Moreover, we believe that our organizational spirituality can actually be measured. While some might contend that the invisible cannot be measured, we believe that behavioral expressions of the invisible are visible, tangible and subject to appropriate measurement. (Similarly, one cannot measure the invisible reality of love, but it is possible to quantify an external expression of love; and if that love is never demonstrated in tangible ways, one can doubt its spiritual presence.)

This conviction about our organizational spirituality has lead to two extraordinary, system-wide initiatives that have been in place for over three years: our competency study on *Measures of Chaplain Performance and Productivity*, and our “CVA” (Core Values Assessment) process. (Since the prior refers to the delivery of spiritual/pastoral care to our patients and residents, and is not primarily staff/culture-focused, only the latter initiative is now briefly described.)

Sample Initiative : CVA

Every three years, an interdisciplinary team of national executives visits each local facility or “MBO” (Market-Based Organization) for an on-site “Core Values Assessment” (CVA) that primarily consists of interactive small group interviews over a full two-day period. By providing a balance of qualitative with quantitative feedback data, this process determines the degree to which the culture of that MBO demonstrates behavioral evidence of each of the sixteen attributes of Catholic Health Initiatives’ distinctive ministry culture grounded in spirituality. The outcome of the CVA process is not only affirmation of what is solidly in place but also a focused identification of two-three recommendations or priorities for further culture development. These recommendations or priorities are then incorporated into an overall MBO development plan for the coming year together with key clinical, financial and other performance indicators - in a type of balanced scorecard for that MBO. In other words, key indicators of the “horizontal” component of spirituality are part and parcel of the defined measures for which all leaders and staff are held accountable.

One of the sixteen cultural attributes in the CVA tool (see Attachment A) is entitled “spirituality”, defined as “the culture is recognized as a ‘holy place’ in which the nearness of God is tangible and visible”. This particular attribute contains a description of several gradated standards to determine the degree to which this attribute is embedded in the MBO culture. For example: “meetings begin with a prayer or reflective exercise”; “staff demonstrate a personal faith in God, a sense that there is more to life than work, and find meaning in their work”; “provision is made for staff retreats and other opportunities for spiritual development”; “staff are perceived as dedicated to healing the whole person”, treating patients “as a person, not a medical condition”. In other words, indicators of the “vertical” component of spirituality are included among these measures for which all leaders and staff are held accountable.

As of January, 2005, it is significant to note that of all sixteen cultural attributes measured in the CVA process, this particular attribute of spirituality is the one that consistently received the highest score for the majority of our MBOs surveyed over the past three years. Therefore, it seems fair to conclude that within the short span of our existence as a single, national health system, Catholic Health Initiatives has indeed achieved the distinction of being a “culture grounded in spirituality”.

Impact

In short, by integrating the hallmarks of our spiritual mission and the living spirituality of our ministry culture with other operational measures of success, we do not just give lip service to our core values but make “how we do what we do” practical - - and integral to our organizational identity.

Given the spiritual emphasis of our identity and culture as a values-based national healthcare provider, the most significant impact of integrating the vertical and horizontal dimensions of our lived spirituality is the type of care we therefore are able to provide to our patients and residents. The emphasis on organizational as well as upon personal spirituality results not only in job satisfaction, but also in high performance. The tag-line of Catholic Health Initiatives is “a spirit of innovation, a legacy of care”. Faithful to the key characteristics of our heritage, and energized by a living spirituality of reverence, integrity, compassion and excellence, our manner of care delivery is personalized (“person-centered” or “family-centered” care), comprehensive (attending and responding to the needs of body, mind & spirit), and collaborative. This is best demonstrated by our approach to “end-of-life care” across a continuum of care settings, in

collaboration with institutional and community partners. Experience of our care providers, particularly when cure is no longer an option, reveals, in a clear and inspiring manner, how our spirit at work becomes our spirituality in action.

4) Sustainable Effects for Stakeholders

As Catholic Health Initiatives prepares to celebrate its tenth anniversary in 2006, we take pride in the cohesive culture we have been able to build in such a short time. While the critical factors responsible for this success are several, yet a fundamental explanation is that, as we began our journey as a new organization, much time and effort was devoted to determine the core values of this new organization through a grassroots-upwards identification process.

“In its first year as a new national system, formed through the merging of several smaller health systems, CHI engaged in a deliberate, dedicated process of core values identification that, in itself, was an opportunity for personal spiritual growth. Hundreds of CHI employees participated in reflective sessions in which they could tell their own stories of ministering through their work and name the values, personal and organizational, which motivated their service. From my perspective as an observer of CHI's evolution since its inception, I can now see that this core values identification process was foundational to creating a common identity and shared culture across the system.”

- Ed Giganti, Catholic Health Association
(see Attachment B)

From the outset, Catholic Health Initiatives was thus grounded in the spirituality of the lived values of its employees. What was identified as the “soul” of the approximately 70,000 member workforce (in 1997), by asking a large sample of those employees what was important to them in their daily work, became the officially, publicly-espoused values of the organization itself. Subsequent efforts to foster a spirituality expressive of those values and to delineate behavioral measures of its development, to which all could be held accountable, were successful because they were grounded in the lived “reality” of what gives meaning and purpose to the those employees.

This is the reason why “the culture grounded in spirituality” of Catholic Health Initiatives has been so sustainable, and why “spirit at work” for us is not a “program” but simply an expression of how we do what we do.

At every national leadership conference and other stakeholder gatherings since its inception, we have been able to celebrate this spirituality as an integral component of our corporate identity.

The effect of this embedded spirituality is awesome. Here are three testimonies of **this effect from three stakeholder perspectives**: an employee, a customer, and our national President and CEO.

- (1) “I worked for many years in an organization that encouraged employees to express an on-the-job commitment to the spiritual mission it embraced. My own job responsibilities included printing religious materials, training students and providing daily devotionals. Sadly, over time the genuine sense of vision and mission that had once enlivened the organization began to fade. When that happened, I felt a tremendous loss of spiritual focus in my work life and found myself in need of mental healing.

“Then a wonderful thing happened. I applied and was hired for a printing position at St. Anthony Hospital (Pendleton, Oregon – a subsidiary of Catholic Health Initiatives). During my interview I learned that this organization believes its spiritual mission is core to its purpose and function. I learned that each day would begin with a Morning Prayer. I found myself coming alive again when I heard the mission statement of Catholic Health Initiatives. A true sense of mission was coming back into my work.

“I have been at St. Anthony Hospital now for several years. I have found acceptance and appreciation for my skills and talents. I sincerely believe that more healing goes on here than just the physical healing of our patients. When we lift up a fellow worker who is feeling down, that’s healing. When we encourage the discouraged around us in the workplace, that’s healing.”

- Don Zeigner, *Sacred Stories*, Fifth Edition, pp. 66-67.

- (2) An organization so grounded in spirituality, one that tries to demonstrate reverence for each person through “relationships that heal”, also has an impact on the patients, residents and communities we serve. This stakeholder effect was noted by a woman (“customer”) in Little Rock, Arkansas, in writing about the staff leadership in one of our facilities.

“A broken spirit can be as painful as a broken bone, but healing the spirit presents challenges that are not always easy to resolve. I know the healing power of the Perinatal Bereavement Program at St. Vincent Health System (another subsidiary of Catholic Health Initiatives) after experiencing the stillbirth of my full-term daughter, Madeline Grace. While I prepared for every aspect of pregnancy, childbirth and parenting, I had no idea how to handle the tragedy of pregnancy loss. At a time when my husband and I were paralyzed by shock and grief, Lynette, the program coordinator, guided us through some of the darkest hours of our lives.

“When time came to plan my daughter’s memorial service, I wanted to read a story that had elicited much response from her when I read it to her while I was pregnant. However, I was not emotionally strong enough to read the story myself. Lynette became my voice that day. Sitting in a chair next to my daughter’s tiny casket, her own eyes filled with tears of compassion as she read my daughter’s favorite story.

“Lynette did more than help a grieving mother pay tribute to her baby girl. She gave me the gift of a memory that will be treasured always, and memories are everything to a parent forced to say goodbye much too soon.”

- Tina Bowers Lee, *Sacred Stories*, Sixth Edition, pp. 32-33.

- (3) This impact on the families and communities we serve is not happenchance, but deliberate and intentional. In the words of our national

President and Chief Executive Officer:

“My role as leader of this healing ministry is to recognize that any achievements in clinical and operating performance -- the business and bottom-line motivation we must sustain to nurture the ministry-- must never, ever, be at the expense of compassion and the human touch as a direct expression of our spirituality. My passion as leader of this healing ministry is to ensure that what people like about our focus on the whole person -- healing body, mind and spirit -- is never compromised. And while people presume they will receive appropriate medical care and attention within a hospital, I am unabashedly proud of our healers who embrace curing and caring as zealots, as mission, because they see the fundamental connection to spirituality and service for those who come to us for care.”

- Kevin E. Lofton, FACHE
President and Chief Executive Officer
Catholic Health Initiatives

Additional testimonials can be found in Attachment B.

5) Business Results

For FY'04, Catholic Health Initiatives had an 8.1% net income margin (4.8% before investment income). Our solid financial base is the result of hard work and dedication by a large number of national and local MBO leaders and employees. Their testimony about what motivates their job satisfaction and their high performance behaviors consistently harkens back to a deep-seated conviction about the core values and community-focused mission of Catholic Health Initiatives. In many of our local communities, we repeatedly hear testimonials from employees who, for a variety of reasons, decided to leave the organization but then returned because they could not find elsewhere a comparable culture with which they could experience a similar, strong sense of personal belonging. When asked what it is about Catholic Health Initiatives that attracts them, our employees invariably respond in terms of their individual resonance with the values and spirituality of our organization. Sometimes they refer to the “feeling of family”, and sometimes to the pervasive commitment to mission and values, but almost always in terms of their experience of the “spirit at work”. This may explain why our current turnover rate is flat to slightly less than the previous year.

System-wide, CHI ratings of overall job satisfaction and job retention rank 78th and 67th percentile in a national employee database. Overall job satisfaction for the national staff subset improved from the 88th percentile to the 91st percentile in just 18 months time; in that same period, retention also showed a slight incremental gain (81st to 82nd percentile). A focus on the nine questions in the quality of work life section reveals significant gains in all question areas by 0.12 to 0.36 points.

St. Joseph Medical Center in Reading, Pennsylvania is a local CHI subsidiary (Market Based Organization). A few years ago, it had an avoidable turnover rate of 19.8%. By focusing on development of the sixteen cultural attributes and by engaging employees in action planning, this facility reduced its avoidable turnover to 10.5% in three years time (as well as overall turnover from 25.5% to 15.6%). Its most recent CVA (Core Values Assessment) in January 2005 revealed qualitative data and anecdotal stories of significant improvement in employee engagement, teamwork, and quality of work life.

For Catholic Health Initiatives, as a healthcare provider, the principal “business result” of employee purpose and well-being at work must, necessarily, be the quality of the care we deliver to our patients, residents and communities. One example of this is our coordinated national effort to improve the quality of our “end-of-life” care. For those for whom cure is no longer an option, our ability to deliver comprehensive, collaborative, family-centered, person-centered care is a hallmark of the difference we make as a healing presence in the lives of those we serve. Effectiveness in “being there” with those whose vitality is waning demands a spirituality that is genuinely “other-centered”. It is the integrity, humility and holistic approach that are embedded in our organizational spirituality that allow us to continue our legacy of care in a way that assures others that they are not alone but that “God is with them”.

6) Inspiration for others in the industry

In January, 2004, Jerry Broccolo, the Vice President, Spirituality, for Catholic Health Initiatives was invited by the Catholic Health Association of the United States to its annual meeting of U.S. Catholic Health System Mission Leaders as keynote speaker and meeting facilitator on the topic of workplace spirituality. Due to his expertise and experience over the past seven years in developing spirituality as integral to the culture, care delivery and business processes of Catholic Health Initiatives, he has also been asked to serve as a presenter and/or resource person for colleagues at Ascension Health, Alexian Brothers Health System, Trinity Health, Provena Health, Providence Health System and Catholic Health West.

Maureen McGuire, SC, of Ascension Health in St. Louis writes:

“In organizational life and practice, Catholic Health Initiatives has provided a strong witness to the centrality of fostering workplace spirituality and has been most generous in sharing their experience and expertise with others. One of their major contributions has been to assist us as leaders to seek ways to bring the same rigor in planning and in measurement of desired outcomes relative to spirituality as we do in other areas of organizational life. We at Ascension Health have certainly benefited by learning from and collaborating with CHI in this essential endeavor.”

- Maureen McGuire, SC
(see Attachment B)

Ed Giganti of The Catholic Health Association states:

“...by publishing the six editions of *"Sacred Stories,"* the system has moved and inspired people across its enterprise and beyond. The *"Sacred Stories"* program has become a model adopted by several other Catholic health systems in the United States.”

- Ed Giganti
(see Attachment B)

Stakeholder References (4)

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