

***Forming Health Care Leaders: A Guide***  
**—Poster Presentation by Robert Czerny**

Robert Czerny of Agora Management Associates was the lead consultant and author for *Forming Health Care Leaders: A Guide*.

Participating in the CHAC Conference 2010 allowed me to talk to participants about this important publication. It also allowed me to market my services.

This text is in three parts: (A) an overview of the publication; (B) some information about myself and my company; and (C) quotations from users of the *Guide*. The table of contents of the *Guide* is appended.

**A. About the Guide**

***Forming Health Care Leaders: A Guide*** has been available since summer 2009. It is intended to assist in the preparation of learning activities in support of the distinctive Catholic element of Catholic health care in Canada. It can be used for personal study and as a resource or reference in organized learning activities and other situations. The content has been endorsed by the project funders, the Joint Associations and Sponsors and CHAC.

The core question for the *Guide* was about the distinctness of Catholic health care. The answer in the *Guide* arose from more than thirty interviews with Canadian Catholic health care leaders. That answer has four dimensions—

- Canadian Catholic health care organizations share a set of core **values** (not necessarily unique to Catholic institutions, but uniquely consistent across Catholic health care)...
- that they treat as a top **priority** and address with great energy and consistency, ...
- reflecting the status of the values as **mandatory** not optional;
- moreover, the **sources** of the values and how they are regarded are explicit and known—Jesus and the Gospels, the legacy of the founding Congregations, and the social teachings of the Church. This facilitates learning about the values and their treatment. It also means that they are a matter of living research and renewal; they are neither frozen in time nor lost to memory.

The interesting corollary of this synopsis is the question “What does this mean to non-Catholics? Is the Catholic character acceptable or inimical to people of other faiths, or to people with no religious affiliation?” This is the response I suggested at the Conference:

- Everyone (not just Catholics) finds the values agreeable. Who is against compassion? Respect for life and human dignity? Human wholeness including spirituality? Social justice? Of course there will be disagreements over interpretation and application; that’s what happens with any principles.
- High priority is fine; no one will argue that these values should be soft-peddled; in fact, Catholic institutions are admired for their energy and consistency in pursuing social justice and other goals.
- The status as mandatory (deriving from the relationship to the Church in the charter of Catholic health care institutions) reinforces the priority and energy. It is invisible to most, but obvious to those who apply for jobs in Catholic health care; if they disagree, they should withdraw their applications.

- The fact of the sources is, well, a fact. That’s where they come from. Those who are troubled by messages from ‘religious’ sources should focus on the content of the message rather than the messenger. Witness the prevalence of the phrase “good Samaritan”—people of any faith and of no faith can understand the meaning of the parable, and it is universally appreciated; quite probably there are many who have no idea that the source is a Gospel parable.

The table of contents of the *Guide* was part of the poster display and gives a good idea of the scope of the publication. See the Appendix to this text.

## **B. About Robert Czerny and Agora**

Working on this project was immensely satisfying. It required intense attention and thoughtfulness on our part—I speak for my colleague Margot Cameron too—both professionally and in an aspect of our personal lives that is supremely important to us.

I hope that those of you who are aware of our work will consider Agora Management Associates for other assignments. After all, we ‘speak your language’ and know your ideals and vision. We also know something about your challenges. So we can provide consulting services (see below) in a manner that fits who you are, and who you want to be.

Here is a synopsis of what Agora Management Associates does:

- management consulting; change management; organizational development; best practices benchmarking
- strategic studies
- training and education; workshops and seminars
- communications (plans, writing, editing, translation)
- facilitation
- performance management
- program evaluation; surveys

Agora’s services have focused frequently on the following domains:

- partnership, collaboration, corporate sponsorship
- governance
- health care
- social services
- arts and culture
- spirituality
- ethics and values
- organizational climate and management feedback (360 surveys)

How can we help you? Please contact Robert Czerny and Agora at [czerny@sympatico.ca](mailto:czerny@sympatico.ca); 613.728.0658; [www.agora-management.ca](http://www.agora-management.ca)

## **C. What Users Say about the Guide**

These comments were gathered by phone and email in February and March, from some of the health care leaders who were consulted during the development of the *Guide*.

### OVERALL REACTION

“It’s an excellent resource on the values and principles of Catholic healthcare leadership. I have had very positive comments back from our Boards and partner congregations.”

“This *Guide* resonates better than some other texts aimed at leaders. It may be due to its logical structure and modular approach, and the quotations from practitioners and authorities. Also the language—and it’s short.”

*In addition, at the Conference, several people commented very positively on the convenient size of the Guide and on the attractive cover—a modern medallion-like rendering of the Good Samaritan story.*

## LEARNING ACTIVITIES

“The *Guide* is excellent. We are using it in combination with the *Ethics Guide* and a book on servant leadership to design training sessions on leadership in the Catholic tradition, which we’ll give starting in the Fall.”

“We used it to create a sixteen hour curriculum for leaders.”

“One leadership development session for 100+ leaders used the Social Justice chapter, another looked at the chapter on Mission.”

“Leaders choose a passage from the *Guide* and prepare to lead a 15-minute discussion at the monthly management meeting. The senior leadership team considers it to be a valuable inspiration.”

“There is a discussion at the monthly leaders meeting, about 45 minutes long, using one of the *Guide* questions.”

“Our management staff throughout the hospital have a monthly Leadership Forum at which they review one section of the *Guide* —whichever interests them particularly at that time—in small group discussions followed by a plenary discussion.”

## SELF-STUDY

“We expect candidates for senior management positions who have not had Catholic leadership training, to commit to do so within 24 months. We give them the *Guide* to help them understand what such training will be about.”

“One new Board member initially felt that ‘Catholic’ negated respect for other faiths. We used the *Guide* to assist this person to deal with the misconception and understand our Catholic character positively.”

“We are putting more emphasis on Mission in the orientation for new Board directors and senior leaders. We give them the *Guide* as reference reading.”

## REFERENCE

“The *Guide* is being used by the newly established Board Mission and Ethics Committee to develop standards for Catholic Identity.”

“For organizational self-assessment—one person reviews our performance in relation to a relevant section of the *Guide* and reports his or her findings: what are we doing right already, where could we improve.”

“Combined with other documents, the *Guide* has provided us with a good comparator to evaluate our current educational programs.”

*The quotations are from British Columbia (Susan House, Gerry Herkel), Manitoba (Fr. Vince Herner), Ontario (Deb Miller, Cliff Nordal, Sr. Sarah Quackenbush), and New Brunswick (Robert Stewart).*

*To order the Guide online go to [www.chac.ca/resources/orderform.php](http://www.chac.ca/resources/orderform.php)*

## **Appendix: Table of Contents**

## Summary

1. Introduction: A Learning Link Between Past and Future
2. Overview of Catholic Health Care Service in Canada
3. Mission, Vision, Values
4. Social Justice
5. Spirituality and Human Wholeness
6. Ethics
7. Canon Law, Stewardship, Accountability, Community
8. Modalities of Learning

Appendix A. Catholic and Secular Leadership Capabilities Frameworks

Appendix B. Performance Appraisal

Appendix C. Christian and Catholic Values and Principles

(i) Christian Moral Values

(ii) Distinctive Nature of Catholic Health Care

(iii) Ten Principles of Catholic Social Teaching

Appendix D. Catholic Health Care: Some Historical Background

Appendix E. Resources for Reference and Learning

Appendix F. Reflection and Discussion

Appendix G. Acknowledgements