

# Add ethics to health-care officials' training

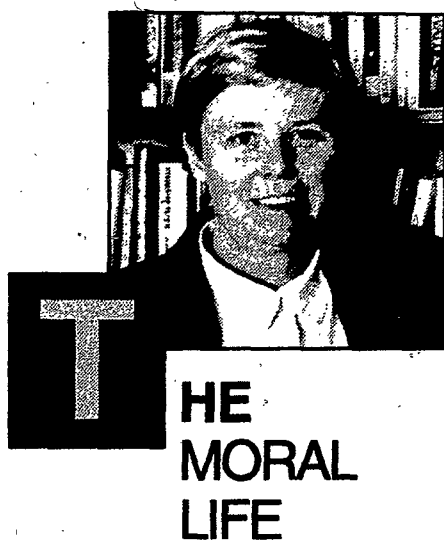
By Patricia Schoelles, SSJ  
Courier columnist

For the last few weeks I've taught a course on introductory ethics to students enrolled at St. Bernard's Institute's extension site in Albany. Since the class ends at 9:30 in the evening, I have found myself driving back to Rochester during some very late hours.

During those hours, I learned that "talk radio" consumes the airwaves around midnight and beyond. It is a great way to pass time and stay awake, since many colorful and interesting people from around the country call in with opinions on almost any imaginable topic.

My last trip took place the day after Mickey Mantle received his now-famous liver transplant. It seemed to me that almost everyone in the country had some opinion about this procedure. For some callers, a major issue seemed to be the fact that Mickey Mantle is known to have been a heavy drinker for much of his life. They thought that since his own actions were at least partly responsible for his liver disease, Mantle should not have received the replacement liver.

Other callers complained that while Mr. Mantle was selected for transplant only a few days after being diagnosed as critically in need of one, other less-known people have faced long waits, sometimes even dying before a liver can be found for them. They thought that Mantle received privileged treatment because he is a celebrity.



But some callers thought it appropriate that Mickey Mantle be given privileged treatment. He is a role model and baseball hero, they said, so he has a unique social position among us and in our society. These people seemed not to worry about the distinction between the haves and the have-nots.

Some medical people were interviewed across those nighttime radio waves, too, and most of them expressed the belief that it was the combination of Mr. Mantle's extreme need, the compatibility of the liver available for transplant, and "insurance factors" that actually led to his receiving the liver in favor of some other patient who was possibly less well-known.

I was grateful that night for the in-

teresting conversation and varied opinions about this surgery. It surely lessened the monotony of nighttime drive across the Thomas E. Dewey Thruway. But listening to it also reminded me that there are some very important ethical issues surrounding this type of procedure and its availability in our society.

For a long time, we have recognized that life and death decisions are made every day by physicians and other health-care professionals. But lately, we are recognizing that other people make health-care decisions that carry implications for life and death, too. Administrators of health-care institutions, government officials, and managers of semi-public agencies also make decisions that affect the living and dying of others — even though these decisions may appear to be unrelated to the care of individual patients.

Who gets care — when, where, how much, of what quality, and with what technology — is determined, for the most part, not so much by clinical care givers as by administrators whose decisions are made invisibly and at considerable distance from patients and their physicians.

These decisions and those who make them must be thoroughly rooted in good business practices, of course, since health care is VERY big business in our society. Financial systems, insurance companies, and bureaucratic arrangements helping us to pay for, deliver and receive health care are essen-

tial parts of life in the United States today. Such business skills as budgeting, staffing and reimbursement procedures are essential for those who manage health care today.

But the talk-radio opinions I listened to during those hours a few weeks ago pointed out to me that these administrators also need training on the ethics of health care. It occurred to me that some callers sounded rather naive about the fact that both physicians and patients today are controlled in many ways by bureaucratic regulations and arrangements over which they have little control. Legislation, management practices, the interaction between insurers and hospitals determine very much about which medical procedures are available to which patients.

If administrators today are good at business skills alone, and are not concerned about the common good and the care of all people, we surely will become worse off than we are now. Mickey Mantle's doctor may or may not be a baseball fan, and his level of interest in the sport probably was irrelevant anyway. Mickey Mantle was cared for because he is able to buy insurance and access the health care system in a way that made his treatment possible. In many, many segments of our population, people cannot gain access to adequate health care. Administrative decisions affect the health, life and death of patients, and we desperately need moral decisions to be made at these levels, too.

## A 'whiz kid' bids farewell to a beloved mentor

By Karen M. Franz  
General Manager/Editor

How can I express to you the very mixed emotions engendered by the retirement of someone who has been our leader, mentor, counselor and dear friend for more than a decade? I have struggled for two weeks to write this column, and now realize that no words can convey what I feel.

Bishop Dennis W. Hickey, who has been general manager of the *Catholic Courier* since late 1984, often has stated that he does "very little" at the paper because the staff performs so efficiently. But, as many of you know, Bishop Hickey is an extremely humble man; he grossly underestimates what he has contributed to this newspaper and to its personnel.

Some of you may know that Bishop Hickey actually has been associated with the *Courier* for many years, serving throughout his tenure as diocesan vicar general as an ex-officio member of the paper's board of directors. His role was magnified beyond all expectation in late 1984, however, when Bishop Matthew H. Clark asked him to guide the paper through a complete restaffing process.

Soon, oversight became hands-on involvement, as the board of directors



"hired" Bishop Hickey to be (unpaid) general manager. More than 10 years later, I am the only remaining staff member who was present in those difficult early days, as Bishop Hickey struggled to obtain the financing and parish support that would enable the paper to survive.

I can only imagine the humiliation he suffered in pleading with vendors to continue serving a paper that had not been able to pay its bills for months. Or in begging pastors to give the new staff a chance before cancelling sub-

scriptions to a newspaper whose quality admittedly had deteriorated.

We've come a long way since those "transition" days, and much of our success is due to the untiring efforts of Bishop Hickey. We at the *Courier* are blessed by the fact that Bishop Clark stands virtually alone among the U.S. bishops in his support for editorial independence and integrity in the diocesan press. But we — and Bishop Clark, as well — realize that it would have been very difficult to establish and maintain those ideals had it not been for Bishop Hickey's expert diplomacy throughout the diocese.

Parish circulation has been Bishop Hickey's area of special interest for the past several years. Working with the board of directors, he has endeavored to persuade pastors of the *Courier's* critical role in diocesan communication and — perhaps more importantly — in re-evangelizing Catholics who do not regularly participate in church life.

With respect to the *Courier's* content,

Bishop Hickey has carefully avoided intervening in the editorial process, while always remaining available as an invaluable source for background, history and context on the issues we cover.

Bishop Hickey also has supported the paper in myriad small ways, including his decision to patronize only restaurants that advertise in the *Courier* and his efforts to work references to the paper into homilies, lectures and cocktail-hour small talk.

But, in my mind, his greatest contribution to the *Courier* has been the wise, caring and gentle leadership he has provided to this staff — the now-aging band an observer years ago branded "Bishop Hickey's Whiz Kids."

We all applaud the opportunity for travel and relaxation this third retirement affords Bishop Hickey, but we will miss him sorely. I, for whom Bishop Hickey has been a beloved mentor, may miss him most of all — especially as I endeavor to fill his shoes. Fortunately, he has promised to visit regularly, and I, for one, plan to hold him to that promise.

Thank you, Bishop Hickey, for all you have done for the *Catholic Courier* and for us. We offer you our prayers and best wishes for a joyous retirement — and all our love!

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