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Catholic Courier

DIocese OF ROCHESTER, NEW YORK ■ VOL. 108 NO. 49 ■ THURSDAY, SEPTEMBER 18, 1997 ■ 75¢ ■ 12 PAGES

HOSPITALS GUARD IDENTITIES

Nearly 80 percent of the country's Catholic hospitals now belong to a system of hospitals, whether a mega-system of about 65 hospitals, such as the new Catholic Health Initiatives out West, or something smaller, according to the Catholic Health Association.

"I'm sure there are people out there saying what the heck's going on here," observed Stewart Putnam, executive vice president and chief operating officer of a local manifestation of this trend, Unity Health System Inc. Unity is an alliance between St. Mary's Hospital and the secular, not-for-profit Park Ridge Health System, both based in Rochester.

The two hospitals now share governance, management and medical staff. Meanwhile, both now are part of the even larger Daughters of Charity National Health System.

"If we were not doing this affiliation, St. Mary's future was in serious jeopardy," Putnam said.

"The basic thing is there are too many hospitals, too many beds," noted Sister Marie Burns, DC, Unity's chairwoman. "New technology has something to do with that, new insurance packages, new medications, people are out faster and heal faster ... So these beds in all these hospitals are not required for the community."

Nor are they needed elsewhere, she added, so restructuring is the order of the day for all kinds of hospitals nationwide.

Catholic hospitals were at the forefront of this trend, noted Dave Sauer, who as vice-president of operations for the Catholic Health Association monitors the ever-changing trends in sponsorship, affiliations, partnerships, mergers and other hospital groupings.

"Catholic health care really led in many respects the organization of systems," he said from his office in St. Louis, Mo. Services "normally aggregated around religious congregations who sponsored health-care organizations."

However, he noted, "What is evolving now is you have the Sisters of Charity joining the Sisters of Mercy joining the Franciscans, to come together in a larger aggregation for its own purposes — economies of scale, the ability to staff for mission, the ability to provide more services to the low-income or the poor, or whatever the reasons are. It has been occurring within the last five to seven years, and it's been moving quite rapidly."

Partnerships between Catholic and non-Catholic not-for-profit hospitals are common, though not as prevalent, he said.

The whys and hows of affiliations — and other health-care issues — are so complex, bishops from around the country spent half a day in a private workshop on Catholic health care ministry, in Kansas City just before their June meeting. Bishop Donald Wuerl of Pittsburgh later told Catholic News Service

that while a local bishop is responsible for all local ministry including health care, the workshop did not offer a structure for bishop/health care relations — it couldn't, because every situation is unique.

However, diocesan-owned institutions require a bishop's approval for partnerships, while those sponsored by religious orders or institutes — as are most Catholic health-care ministries — should obtain his "nihil obstat," a declaration that "nothing obstructs," according to national bishops' directives.

Despite the complexity of new hospital affiliations, they often evolve from simple beginnings.

"It's absolutely fascinating how these things are happening around the country," said John Marshall, director of corporate communications for the Daughters of Charity National Health System (DC-NHS), in St. Louis, Mo. He has been documenting on video how each of the DCNHS systems have come about. In many instances, he said, a few people sat down together "and had a cup of coffee."

Also, he noted that two hospitals in Cumberland, Md., that were nearly identical in every way — except that one was Catholic — and "bitter enemies for 100 years" recently formed a health system between them.

"You are seeing on the one hand aggregations for purposes of presenting a strong Catholic presence, and at the same time, it's a way to remain competitive," Sauer of the CHA said. "All of these, I think, are open to other aggregations with other groups, if it makes any sense."

Diocesan affiliations

St. Mary's Hospital is not the only Catholic hospital in the Rochester Diocese to join forces with other health-care institutions.

In April, St. Joseph's Hospital in Elmira upgraded its membership as an affiliate to a full member in the Carondelet Health System based in St. Louis and founded by the Sisters of St. Joseph of Carondelet. That move provides access to such cost-saving programs as group purchasing, insurance and cash management, noted Sister Marie Castagnaro, SSJ, president/CEO.

"More importantly, our membership with Carondelet assures the preservation of the Catholic presence in this region's healthcare," she stated at the time.

In Hornell, St. James Hospital, as part of Eastern Mercy Health System, is becoming part of the emerging Catholic Health East. It is a collaboration of Franciscan, Mercy and Providence Sisters hospitals in 10 Eastern states.

"It's not going to stop. It's just going to get more confusing," said Julie Hart,

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