



# T E N N E S S E E REGISTER

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## Catholic health care motivated by love of neighbor



Photo by Theresa Laurence

Sister Mary Diana Dreger, O.P., M.D., talks with patient Augustina McKlean during a follow-up visit at St. Thomas Family Health Center South in Nashville. As both a sister and a medical doctor, Sister Mary Diana continues the legacy of Catholic health care that has been firmly rooted in Middle Tennessee since the Daughters of Charity founded Saint Thomas Hospital here in 1898.

ANDY TELLI

The Catholic Church's dedication to caring for the sick and the ill, the wounded and the broken begins with Jesus Christ.

Scripture is full of accounts of Jesus healing the sick, giving sight to the blind, casting out demons. In the Gospel of Mark, Jesus "summoned the Twelve and began to send them out in pairs giving them authority over unclean spirits. ... They cast out many devils, anointed many sick people with oil and cured them."

With Christ as their model, his followers – particularly women's religious orders – have continued his ministry of healing. As human knowledge of disease and medicine has grown over the millennia, so too has the Church's ministry. Today, the Church is one of the biggest providers of health care in the world through small clinics in the remotest areas of the developing world to huge hospitals in the most cosmopolitan cities.

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## Priesthood Sunday collection to aid seminarian education

FROM STAFF REPORTS

On Sunday, Oct. 30, Catholics in Middle Tennessee will be able to show their gratitude for their priests and the men in formation to become the next generation of priests in the Diocese of Nashville.

Bishop David Choby has established a special diocesan collection during Masses the weekend of Priesthood Sunday to raise money to help pay for the education of the diocese's seminarians.

As the number of seminarians has increased in recent years, so has the cost of educating them. The diocese spends about \$960,000 a year on seminarian education.

The special collection on Priesthood Sunday will help offset part of that cost.

This year, the diocese has 26 seminarians and they are studying at four seminaries in the United States and Rome. Most of the seminarians are at the Pontifical College Josephinum in Columbus, Ohio, but there are also seminarians studying at Notre Dame Seminary in New Orleans, Assumption Seminary in San Antonio, Texas, and at the North American College in Rome.

"As a local pastor, I am pleased to promote the special second collection on Priesthood Sunday in support of the formation and education expenses of our many seminarians," said Father David Perkin, the pastor of St. Patrick Church in

Nashville and the diocese's vicar general and moderator of the curia. "Without the continued generous assistance of individual donors, the diocese would not be able to afford this expense."

Priesthood Sunday, celebrated on the last Sunday of October each year, is coordinated by USA Council of Serra International, an organization dedicated to promoting vocations to the priesthood and religious life. The day is set aside to honor the priesthood in the United States and to reflect on and affirm the role of the priesthood in the life of the church.

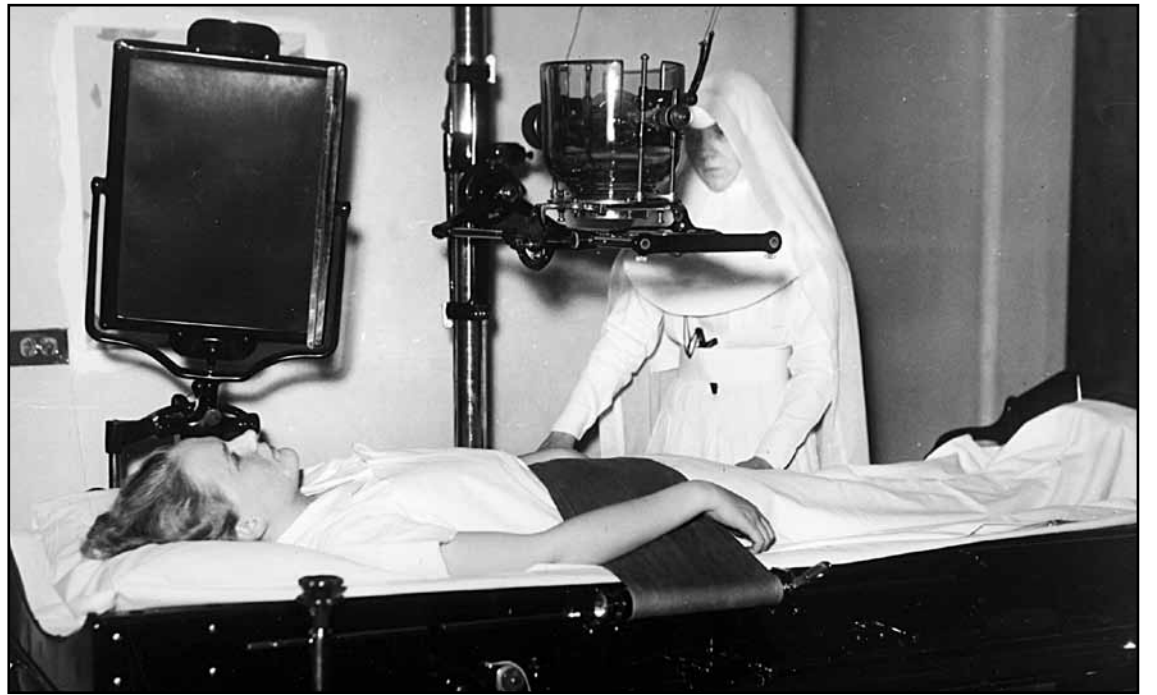
"The purpose of Priesthood Sunday is to engage every level of the church in the United States in a national conversa-

tion about the priesthood," said Father Richard Vega, president of the National Federation of Priests' Councils, which represents more than 26,000 U.S. priests.

"Affirming and supporting our priests are some of the most important things that we can do as Serrans," says Gary Davis, past president of the USA Council of Serra International. "Our priests give of themselves every day in so many different ways. It is an honor to recognize them in a manner in which entire parishes may join together in an outpouring of appreciation."

Archbishop John G. Vlazny of Portland is one of many bishops encouraging the faithful to participate in Priest-

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Sisters of Mercy, left, look over the chickens they kept on a farm that supplied all the food for Knoxville's St. Mary's Hospital. Sister Mary Magdalen Clarke, R.S.M., right, takes an X-ray of a patient after the hospital opened in 1930.

Courtesy of St. Mary's Hospital, Knoxville

## Catholic health care motivated by love of neighbor

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site of a Catholic hospital.

After Dewine died, his surviving daughter, Lillian Dewine Harris, took up the cause and offered the property to Nashville Bishop Alphonse Smith.

To operate the hospital, Bishop Smith turned to the Sisters of Mercy in Nashville. Since arriving in Tennessee in 1866, the Mercy Sisters had become an important part of Catholic life in the diocese, operating schools throughout the state. Although the sisters had never operated a hospital before, caring for the sick was part of the ministry the order's founder, Mother Catherine McAuley, envisioned when she established the Sisters of Mercy in Dublin in 1831.

As several sisters began building support and raising funds for the new hospital, five Mercy Sisters went to school to learn about running a hospital. They were Sister Mary Annunciata Danna for business and administration, Sister Mary Magdalen Clarke for X-ray, and Sisters Mary Celeste O'Rourke, Rose O'Keefe, and Bernard Fleming for nursing.

St. Mary's was dedicated in 1930, and under the strong leadership of Sister Annunciata, who served as administrator from its opening until her death in 1963, the hospital thrived and grew. By the 1980s, the hospital was admitting more than 20,000 people a year and treating another 60,000 in outpatient services.

"That is a considerable number of people to experience the ancient Catholic ministry of serving the sick when otherwise most would have had no contact whatsoever with the Church," Msgr. Campion wrote in 1987. "St. Mary's has represented Catholicity to more people in East Tennessee than any other single facility."

Earlier this year, the Mercy health system in East Tennessee, which includes seven hospitals and a total of 1,323 beds, was acquired by Health Management Associates. The system was renamed Tennova Healthcare, and several Mercy Sisters are still on staff.

### Saint Thomas, Nashville

In the 1890s, Bishop Thomas Byrne, the great builder bishop of Nashville, went to work establishing a Catholic hospital in Nashville.

For help, he turned to the Daughters of Charity in Emmitsburg, Md., which at the

time already staffed more than 100 institutions in the United States, including 35 hospitals. Their legacy of serving the poor and the vulnerable had been established by their founders, St. Vincent de Paul and St. Louise de Marillac. In 1633, the saints established a religious community in Paris, France, to organize and train young peasant women to care for the poor. Their mission quickly expanded to include educating children and caring for the sick.

On April 11, 1898, Saint Thomas Hospital, named in honor of the bishop's patron saint, opened in the Ensworth mansion on Hayes Street in what was then the western suburbs of Nashville. The sisters' first patient was Mrs. W.I. Feasall, the wife of the pastor of Centennial Baptist Church. The minister remarked that he did not like Catholics, but had heard the sisters, "took good care of the sick."

The 26-bed hospital quickly outgrew the mansion, and in 1902 a new, modern, 150-bed hospital was built on the same site. Later a nursing school was added.

By the time Jean Johnson started studying at the Saint Thomas School of Nursing in the mid 1960s, the school's "reputation was an excellent one," she said.

The Daughters of Charity who ran the school were "excellent teachers," said Johnson, a parishioner at St. Ann Church in Nashville. "And they hired only the best."

"It was run definitely as you would expect a parochial school to be run," she added, "lots of rules, but you had to perform at a high level in order to graduate."

Johnson was part of the school's second to last graduating class in 1969 and went to work in the hospital's orthopedics department. Later during her 34-year career at Saint Thomas, Johnson was the head

nurse in orthopedics and director of hospital education. She currently is president of the Saint Thomas Volunteers, which is celebrating the 50<sup>th</sup> anniversary of its founding this year.

The old Saint Thomas eventually grew to a facility with more than 300 beds, but a larger facility was needed. In 1974, Saint Thomas moved to its current location on Harding Road.

"That was a day I won't forget," Johnson said. The new facility made equipment more accessible at the patient's bedside, which was part of a new philosophy in patient care, she explained. In the old hospital, most of the nurse's work was at the nurse's station. But in the new hospital, much of that work shifted to the patient's bedside.

"It was a whole different philosophy," she said. "In the new hospital you were

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Bishop James D. Niedergeses, in 2000, paused in the hallway of Saint Thomas Hospital to pray with Mildred Johnson of Pegram. The bishop served as a chaplain at Saint Thomas both as a young priest and as a retired bishop.

Tennessee Register file photo by Rick Musacchio

# Catholics showed courage, charity during yellow fever epidemics

ANDY TELLI

From the small bite of a mosquito was born three epidemics that left thousands dead and thousands more sick in Memphis in the 1870s.

It also produced one of the finest hours for the Catholic Church in Tennessee as priests, sisters and laypeople responded with selflessness and courage to the horrifying disease yellow fever that could fell people in a few short weeks or even days.

Yellow fever is a hemorrhagic fever caused by a virus spread by a particular species of mosquito. But in the 1870s, people didn't know that. They thought it was caused by a germ that spread through moisture in the air or was a gas that emanated from bayous and swamps.

What they knew for sure was the devastating impact of the epidemic. Most people who contracted the most serious form of yellow fever turned yellow, accompanied by chills and severe pains in the head and back, and vomited a black bile. Up to 50 percent of people with the more severe form of yellow fever die.

It first appeared in Memphis in the late summer and fall of 1873. The city, with its nearby swamps and poor sanitation at the time, proved an excellent breeding ground for the mosquitoes that spread the disease.

It was the city's Irish Catholic community that suffered the harshest blows from the first epidemic. "The fever began with them," wrote Thomas Stritch in his history of the diocese, "The Catholic Church in Tennessee: The Sesquicentennial Story." "Early in August 1873, a steamer from New Orleans brought it to Happy Hollow, a community under the bluffs inhabited entirely by the Irish. From there it spread to Pinch, also largely Irish."

During the epidemic, 5,000 people caught the fever and 2,000 died. Of the dead, Stritch said, at least half of them were Irish.

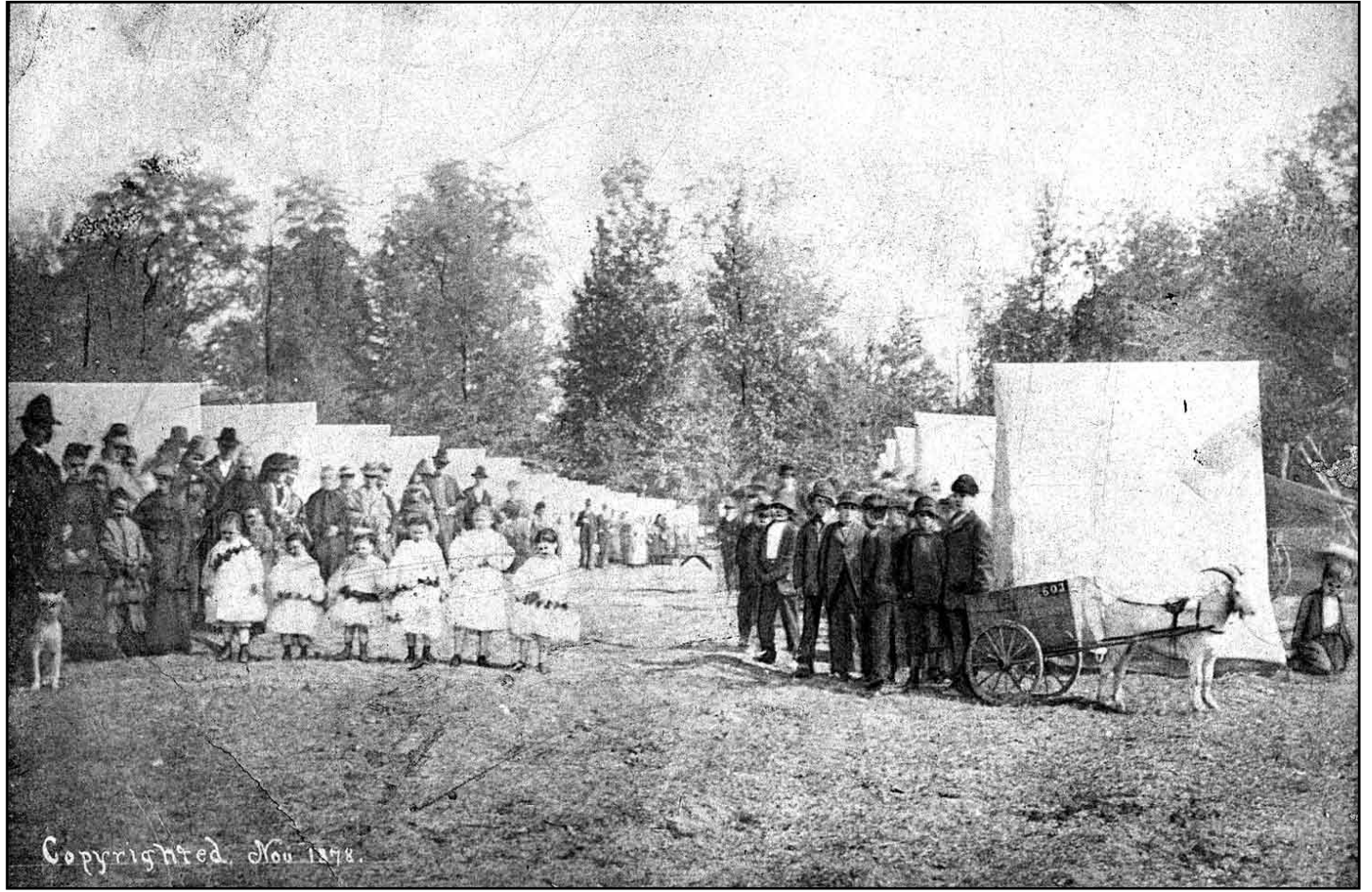
The fever took a terrible toll on the city's clergy. Three of the four Dominican priests serving at St. Peter's Church, the city's oldest parish, died, as did another Dominican priest sent to help them. One of the priests at the city's German parish, St. Mary's, also died.

The priests who survived, "performed prodigies of charity," wrote Stritch. "No less heroic were the sisters," several of whom were among the dead.

While the majority of the population fled the city, the Catholic clergy and sisters remained to tend to the sick and dying.

Nashville Bishop James Feehan "tried to encourage the religious not to volunteer recklessly, but ... he applauded and assisted those whose duty kept them at their posts," wrote Stritch. "It must have been a difficult decision, as it was a heart-rending task to orchestrate a tragedy so hopeless and so desolate."

The yellow fever returned to Memphis in the summer of 1878, and the death toll was even heavier.



In the yellow fever epidemic of 1878, that killed more than 5,000 people in Memphis including 2,000 Catholics, the Catholic Church established Father Mathew Camp, one of several camps for refugees from the city. During the epidemic, nearly 400 people moved to Camp Mathew on the outskirts of the city. The camp had its own school, chapel and hospital and was organized by Father William Walsh, below left.

The arrival of the fever again caused a panicked exodus as up to 30,000 of the city's 50,000 residents fled. A total of 5,150 people died, including more than 2,000 Catholics.

Again, the clergy and sisters were heroic in tending to those stricken. Among the dead was Father Martin Riordan, the vicar general of the diocese and the pastor of St. Patrick Church. He had survived the 1873 epidemic and was out of the state recuperating from an illness when the yellow fever returned. He rushed back to Memphis to help and soon became a victim. Sixteen priests and brothers and around 30 religious sisters died during the epidemic of 1878, according to Stritch.

During the second epidemic, several camps for refugees were established outside the city, including one established by the Catholic Church, named for Father Theobald Mathew, an Irish priest who was a leader in the temperance movement in Ireland, Great Britain and the United States. The camp housed 400 refugees and had a school, chapel and hospital.

"This camp was organized by Father William Walsh, who had watched his predecessor (as pastor of) St. Brigid's Church die of the fever," Stritch wrote. "This fixed his determination to prevent more deaths if he could, and he gathered all he could from his and the other Memphis parishes and established the camp. Not a single life was lost at it during the three months of its life, and many a tale is



This painting depicts the story of a man who contracted yellow fever during the epidemic of 1879 that struck Memphis. Sisters of St. Joseph of Carondelet found the man leaning against a tree, suffering from the disease. They took him to Camp Mathew and cared for him in his dying days. "Whenever Sister came near he took the cross hanging from her neck to press it to his lips," according to one account. "Finally, she took the cross off and put it around his own head and he kept it until he died two days later." The sisters discovered the man had been walking from Winona, Minn., to Texas when he was stricken.

told of its charity and spirituality."

The camps saved many lives by moving people away from the mosquitoes' breeding grounds and to drier ground.

Bishop Feehan was determined to protect the orphans in the church's care in Memphis. When no one in Nashville would lease space to him to house the Memphis orphans because they were so afraid they would bring the yellow fever with them, he had a temporary home built for them on the grounds of St. Mary's Orphanage and moved 60 of

them to Nashville to stay until the epidemic subsided.

The yellow fever returned a third time in 1879 to claim still more victims. Throughout the decade, the church lost more than 20 priests and an estimated 50 sisters, as well as thousands of lay people. In his history of the 1878 epidemic, J.M. Keating, the editor of the *Memphis Appeal* and a member of the Citizens' Relief Committee, wrote: "The Catholic priesthood stood unrivaled in their zeal, self-denial and self-sacrifice." ♣

## Dominican nun, doctor strives to heal the whole person

HERESA LAURENCE

She enters the exam room clad in the standard physician's uniform: white lab coat, stethoscope, medical chart. But she is also wears the standard Dominican sisters' uniform: white habit, black veil, a long strand of rosary beads hanging from her belt.

As both a sister and a medical doctor, Sister Mary Diana Dreger, O.P., M.D., embodies the unique intersection of spirituality and science in her medical practice.

"The idea of serving others is what we do as sisters anyway, so there's a nice flow there being in the medical field," she said.

A primary care provider at Saint Thomas Family Health Center South, Sister Mary Diana continues the legacy of Catholic health care that has been firmly rooted in Middle Tennessee since the Daughters of Charity founded Saint Thomas Hospital here in 1898.

Sister Mary Diana completed her medical degree at Vanderbilt University in 2001, the first nun ever to do so, and wrapped up her residency in 2004. She has been working at the St. Thomas clinic since 2007. She also runs a Saturday clinic at the Dominican Motherhouse, and serves as the primary care physician for about 75 Dominican Sisters of St. Cecilia Congregation.

Sister Mary Diana lectures often in Nashville and around the country, and serves as the secretary/treasurer of the Nashville Guild of the Catholic Medical Association. She is also an assistant clinical professor of medicine at Vanderbilt and regularly hosts medical students for their rotations at the St. Thomas clinic.

Providing health care in a habit signals to patients that caring for the sick is a core value of the Catholic faith, and Sister Mary Diana is proud to be publicly carrying on the Catholic health care tradition.

The population she serves at the Saint Thomas clinic, located on Edmonson Pike, is predominately Spanish-speaking. At first, Sister Mary Diana used a translator during patient consultations, but then decided she had to learn the language. "If you can't communicate with people, that's not a good way to do medicine," she said. Now, she speaks fluently and easily with her patients in Spanish.

"She's lovely, very nice," said Sister Mary Diana's patient of three years, Juan Olivieri. "I wish all doctors would be like her."

It's important to Sister Mary Diana to put her patients at ease. Even though she is the only sister in Nashville who is also a medical doctor, "I've been pleasantly surprised with how welcome I've been wearing a habit," she said.

In her experience, wearing a habit



Photo by Theresa Laurence

**Sister Mary Diana Dreger, O.P., M.D., fills out patient paperwork at St. Thomas Family Health Center South, where she works three days a week.**

inspires more trust than skepticism among patients. "Patients are comfortable talking about just about anything with me," she said.

Sister Mary Diana even had a male patient inquire about a vasectomy procedure. According to his chart, he was Catholic, "we were in a Catholic facility, and I am obviously Catholic," she said. "It shows there's a lot of people who don't understand church teaching about a lot of things."

If issues like birth control come up, Sister Mary Diana does her best to explain things to her patients from a scientific point of view, sparing them a moral lecture.

"I told him that it's my job to keep your body healthy, and if I destroy part of your body because it's working properly, that's not about me taking care of your health." She gave him a short lesson on Natural Family Planning, to which he was receptive.

While he was embarrassed about the situation, Sister Mary Diana said, he continued seeing her for routine visits.

At the Saint Thomas Family Health Center South, most patients pay \$20 for an office visit.

Even for the cash-strapped population the clinic mostly serves, this is not too much of a burden, Sister Mary Diana said. The problem is when a clinic doctor needs to refer the patient on to another specialist. Then the patient "really has to think about health care as a commodity," Sister Mary Diana said. For example, "if they need an orthopedic surgeon, I have nowhere to send them," unless she can find a doctor who will agree to provide services pro-bono.

Challenges like this, trying to work with patients' tight budgets and limited insurance coverage, can distract doctors from their mission of holistic healing. "It can get us thinking about patients as customers and consumers and that's

unfortunate," Sister Mary Diana said. "We want to address why the patient is suffering, not view them as someone coming in to buy a product."

"Medicine is about serving the whole person, not taking care of people's parts," she said.

Like many health care providers, Sister Mary Diana is concerned about drastically weakened conscience protections being written into federal law. With this could come more obstetrics, gynecology and nursing programs effectively hanging out the "no Catholics need apply" shingle, by requiring all residents to learn abortion procedures. "It's a little scary that the areas of medicine concerned with bringing life into the world would say that you must be willing to destroy that life," Sister Mary Diana said.

While other religiously affiliated health care institutions will be affected by the looming fight over conscience protection, it is Catholic hospitals that will bear the brunt of it. "No other religious institution has as big of a piece of the pie as Catholic health care institutions," Sister Mary Diana said.

An extension of the conscience protection issue that Sister Mary Diana is also concerned about is a movement toward total patient autonomy, a "customer is always right" mentality.

"This is driven by the idea that we should do whatever the patient asks us to do," said Sister Mary Diana, everything from prescribing an antibiotic for a minor cold to performing a sterilization operation. The former example clearly violates the principles of good medicine while the latter has the potential to violate a doctor's conscience.

This mentality can be a challenge for Catholic health care providers, but, Sister Mary Diana said, "It's an opportunity for Catholics in health care to help support the true dignity of the human person." ♣

## Catholic ethics, values continue to enlighten modern health care

ANDY TELLI

If St. Vincent de Paul and St. Louise de Marillac, the founders of the Daughters of Charity, were to walk the halls today of Saint Thomas Hospital, which their Daughters established in 1898, it's unlikely they would recognize much of modern health care.

When they were establishing orders to serve the poor and sick of Paris in the 16<sup>th</sup> Century, there were no CAT scans or computerized health records or heart transplants or any of the amazing medical technology that we now take for granted.

But they would recognize the Catholic spirit and mission that animates the work at Saint Thomas and Catholic health care facilities around the country.

"We believe we are continuing the healing ministry of Jesus," said Julie O'Connor, vice president of mission at Baptist Hospital, which is part of Saint Thomas Health Services.

"Catholic health care is a fantastic way to carry out the works of mercy that Jesus tells us about," said Dr. Rachel Kaiser, an emergency physician at Saint Thomas and president of the Nashville Guild of the Catholic Medical Association. "Caring for the sick is a wonderful way to participate in God's grace."

While providing health care is a humanitarian endeavor, it's more than that in a Catholic hospital, said Jerry Kearney, vice president of mission at Saint Thomas. The synoptic gospels include more than 20 accounts of Jesus healing people, he said. "There's more talk of that than any other ministry. But Jesus doesn't set up a clinic."

"He used curing the sick to point out the coming reign of God," Kearney said. "We see what we do as not only good work, but part of the continuing proclamation of the reign of God here on earth and in heaven."

The Daughters of Charity, the religious order that founded Saint Thomas, were formed to serve the poor, a mission that they inherited from their founders and still put into action at Saint Thomas. The hospital provides millions of dollars every year in charity care, and has several clinics and programs to reach out to the poor, uninsured and underinsured in the community.

"Saint Thomas makes it a priority to provide medical care for anybody, whether they can pay for it or not," Kaiser said. "In the emergency room we see a huge number of people who don't have insurance. Without Saint Thomas, they wouldn't have many other places to go."

Another piece of the Catholic identity of Saint Thomas is the pastoral care it provides to patients and their families, O'Connor said. "We care not only for the physical needs but we meet the spiritual needs of the patients as well," regardless of their own faith tradition.

"I am extraordinarily appreciative of the extra dimension that faith brings to health care," said Dr. Michael Schatzlein, president and chief executive officer of Saint Thomas Health. "We know that spirituality is important to the majority of the people in Middle Tennessee and, since we treat more patients than any other regional health system, it is evident that people are responding to our approach to health care. All people, regardless of faith tradition, respond to the compassion and concern for the whole person that we provide." Saint Thomas brings its Catholic identity



Photos by Rick Musacchio

**Father Abraham Panthanalical, above, a chaplain at Saint Thomas Hospital, bows before the tabernacle in the hospital chapel before bringing the Eucharist to patients. Father Abraham, below, reviews his list of patients while making rounds.**

into its business decisions as well, Kearney said. Contracts with service providers and vendors are written to ensure they are operating in accordance with Saint Thomas' values and Catholic social justice teachings and health care directives, he explained.

"We call that mission due diligence," O'Connor added.

When Saint Thomas was founded and through the decades that followed, Daughters of Charity held key administrative positions at the hospital. But as the membership of the Daughters has declined over the years, as has been the case from most orders of religious sisters in the United States, they have tried to educate lay people who now work at their hospitals and instill in them their mission and values.

"We place great attention on the formation of leaders of Catholic health care," Kearney said.

Saint Thomas is part of Ascension Health, the largest Catholic health care system in the country. Ascension health provides a two-year program for all of its senior managers on the history and values of Catholic health care and Catholic social teaching so they will understand the mission of the hospital's founders and be able to carry it out in the future.

Ascension also has a 12-month program for regional executives and Saint Thomas has a 12-month program for directors and managers in its system.

Saint Thomas employees of all faiths have a better understanding of Catholic social teaching than most Catholics, because of the emphasis the system places on teaching employees about those issues, O'Connor said. "We have a title but mission is every-



one's responsibility," O'Connor said.

Health care is undergoing tremendous changes, not only in Catholic hospitals, but across the system.

"Health care is changing at a dizzying pace, far faster than anything I have seen in 35 years," said Schatzlein. "There have been so many advances in drugs and devices that we need complex information technology just to keep track of everything and avoid harm to patients."

"We can do so much more for folks today than ever before, but studies show that a quarter of what we do has no measurable benefit. And costs are now

beyond what we can afford," he said. "The insurance premiums for a family of four last year were more than \$15,000, not including out of pocket expenses. That's almost three quarters of poverty-level income. We've got to transform the health care system to get better quality at lower costs."

Saint Thomas is in the midst of launching a new model for delivering health care. The program is called MissionPoint Health Partners, which will provide total care for a distinct population, such as an employee group. The goal is to keep people healthy rather than wait until they

need treatment, Kearney said.

Patients in the program will be given a health care home where they can form an ongoing relationship with their physician's office, whose job it is to keep that patient well, through routine doctor visits and preventive services and education.

If more specialized treatment is required, the office's staff will help navigate patients through the process.

MissionPoint will also offer Care Partner Teams, a group of nurses, social workers and others, who will consult regularly with the patient and help them manage their health care needs.

Payment for MissionPoint services will be based on "outcomes" – whether the patient becomes and remains healthy – instead of the number of doctor's visits, hospital stays or procedures a patient undergoes.

"In many ways Catholic health care is best positioned to lead this transformation, because of the traditional high quality and service orientation of organizations like Ascension Health," Schatzlein said.

There are some challenges to maintaining the Catholic identity of Catholic health care. Catholic morals, teachings and health care directives forbid some treatments and procedures in Catholic hospitals that are common in secular hospitals.

"I've never felt any pressure to compromise my Catholic beliefs in the emergency room," Kaiser said. "I feel like I'm in a protected environment where I'm not pressured to compromise my moral values."

But Kaiser sees the pressure from secular society growing. "It is getting more and more difficult to practice medicine in the framework of the teaching of the Catholic Church, and I think it's going to get worse."

One example is a recent requirement proposed by the U.S. Department of Health and Human Services, as part of the implementation of the health care reform act, that would require all insurance policies cover contraceptives, including abortifacients, and sterilizations. The exemptions for religious organizations are so narrowly written in the rule that employers like Catholic hospitals would not qualify.

But Kearney and O'Connor don't see a broad trend that would make it harder to maintain the hospitals' Catholic identity, and they are hopeful the conscience protections in the HHS rule will be rewritten before it takes effect.

According to the Catholic Health Association, which represents Catholic hospitals across the country, 12.7 percent of all hospitals in the nation are Catholic, and they have 15.1 percent of all hospital beds.

In some communities, the only hospital is Catholic, Kearney said.

He hopes the federal government will recognize that Catholic hospitals are so important to the country's health care system that it will rewrite the conscience protections in the rule. "We are big enough you would think that in the end the government will have to make provisions to accommodate these very few non-negotiables that we have."

Change is nothing new for Catholic hospitals, O'Connor noted. "Our founders always faced changes and obstacles. They continued to focus on what they were there to do."

Catholic health care providers have to take the same approach. "We will find a way if we're doing it out of love." ♣

# Love of neighbor

Continued from page 12

a care giver ... so the level of care improved. We were one of the first in the nation to come up with that concept. Now I think it's much more prevalent."

Although the facility changed, the hospital's Catholic identity and focus on treating the patient, body, mind and spirit, continued, Johnson said.

As the director of education, Johnson led many orientation sessions for employees, during which the hospital's values of respect, service of the poor, dedication, creativity, integrity, wisdom and reverence, were discussed. "How do they apply to your work life and what do they mean personally to you," Johnson said. "If you don't have those values, you're not going to be happy working here."

Saint Thomas continued to grow and today is part of Saint Thomas Health Services, which includes Saint Thomas and Baptist hospitals and the Center for Spinal Surgery in Nashville, Middle Tennessee Medical Center in Murfreesboro, Hickman Community Hospital in Centerville and several clinics in Middle Tennessee. Saint Thomas Health is part of Ascension Health, the largest Catholic health care system in the nation.

As is the case with many religious or-



Courtesy of St. Thomas Hospital

**The first class of the Saint Thomas School of Nursing graduated on Jan. 20, 1905. The school was founded in 1902 and closed in 1970.**

ders involved in health care, the number of Daughters of Charity has slowly decreased over the last five decades. With the dwindling number of Daughters, more and more of the responsibility for administering their hospitals and their ministry of service has been shifted to lay people.

There are a few Daughters still working at Saint Thomas, Johnson said. "Seeing them reminds us too why we're here and who we are."

At the dedication of St. Mary's Hospital in Knoxville in 1930, Bishop Smith described the mission of Catholic health care:

"It is not always bread and medicine alone that the sick need, and that is prized by those stretched on a bed of pain. Nor is

it solely the X-ray picture or the hypodermic needle. It is the smile, the soft caress, the kind hopeful word. The heart oftentimes rather than the mouth must be fed, and the soul rather than the body must be warmed.

"All this is done without effort, and done with the best effect, when there is a motive power behind the work of the hospital that is higher than the base desire for monetary gain, higher than mere professionalism, higher even than a mere natural philanthropy. That motive is, and can be alone, the exquisitely delicate and beautiful virtue of charity, love for neighbor and particularly for our neighbor in distress." ☩

## White Mass for health care workers set for Oct. 22

The Nashville Guild of the Catholic Medical Association will sponsor its annual White Mass for all health care providers, including physicians, nurses, pharmacists, physical therapists and others, at 7:30 p.m. Saturday, Oct. 22, at the Cathedral of the Incarnation.

Bishop David Choby will celebrate the Mass, and the Nashville Guild will host a reception following the Mass, which will fulfill the Sunday obligation.

"The purpose for this Mass is for health care providers to gain grace and strength for the unique work they have, especially in today's environment," said Rachel Kaiser, an emergency room physician at Saint Thomas Hospital and president of the Nashville Guild.

The Catholic Medical Association is open to all Catholic health care providers and "anyone supportive of our mission," Kaiser said, which is to promote the practice of health care within the teachings of the Catholic Church.

For more information on the Nashville Guild of the Catholic Medical Association, visit its website at [www.nashvillecma.org](http://www.nashvillecma.org). ☩



# Where does your path begin?

## At Father Ryan's 2011 Open House.

October 16 - 12:30 p.m. - 4:00 p.m.  
Catignani-Drennan Fieldhouse

October 18 - 6:30 p.m. - 9:00 p.m.\*

\*For families unable to attend the 10/16 open house.

Pre-register online at [www.fatherryan.org/open\\_house](http://www.fatherryan.org/open_house).



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