

Our ethic of care



Cabrini



Violets are connected with Mother Cabrini because as a child in Italy, she would pick wild violets near a river and place them in a paper boat, pretending they were missionaries sailing off to serve the poor.



A foreword on reflection

Cabrini's ethic of care module invites you to draw on reflection to bring an enhanced awareness to the work you do and the community of care to which you belong.

Reflection is an act of mindfulness. Being mindful of the impact your actions, motivation and behaviour have on your colleagues and the patient's and resident's experience of care, whether intentional or unintentional, is the first step in providing the type of care to which we aspire.

Twenty-first century living leaves us little time to pause and reflect. When we are busy, agitated or stressed, it is unlikely to happen unless it is actively embedded in the rhythm of everyday life. Yet studies have shown that time out of – as poet Banjo Patterson (Clancy of the Overflow 1889) so aptly put it – the 'rush and nervous haste' of daily life increases productivity and nourishes the soul, which is good for employers, staff, patients, residents and visitors alike.

On completion of this module, you will be asked to reflect on what you have encountered and have a conversation with your manager. Some questions have been provided at the end of this booklet to guide you.

*"I love working at Cabrini.
I feel I can do my best work here."*

Jenny | Nurse

Welcome



There's something about Cabrini...

Staff, patients, residents and visitors often tell us there is something special about Cabrini. This module introduces the perceptions, attitudes, values and beliefs that help us create this 'special' experience. These attributes are rooted in our Catholic faith and heritage.

That is not to say that what is special about Cabrini can only be expressed by Catholics. We welcome all people of good will and celebrate the diversity of our workforce in age, gender, cultural heritage, language, faith, sexual preference, marital status, ability, physical features and every other dimension. Together, we are called to be a community that cares about each other and those who seek our services. Understanding what motivates our care ensures we can authentically represent our Catholic tradition.

To care for someone is a privilege. It is not a task or a tick-a-box exercise, but rather an acknowledgement that to care for the whole person requires us all to respect those who we encounter, seek to understand their wants and needs and provide the communication and education required to empower them to make their own decisions and partake in their healthcare journey.

We must also acknowledge that every person, no matter their role (patient-facing or not), is actively contributing to the experience of everyone who walks through our doors. A smile, a gesture and a 'can I help you' and situational awareness enables us all to contribute to the dignity of the person and their journey.

I hope this short module will help you understand how you contribute to the care that makes Cabrini special. If you would like further information, please speak with your manager or a member of the Mission Integration team.

Thank you for playing your role in helping us fulfil our mission.

A handwritten signature in black ink, appearing to read 'Sue Williams'.

Sue Williams

Chief Executive, Cabrini Australia



This booklet accompanies, and is to be read in conjunction with, completing the online **'Our Ethic of Care'** module.

Learning outcomes

At the end of the module you can expect to:

1. Be confident in explaining our heritage as a Catholic organisation.
2. Be aware of the Code of Ethical Standards and other resources to support practice and decision making that aligns with our ethic of care.
3. Recognise and respect signs, symbols, rituals and practices that are distinctive of Catholic health and aged care.
4. Be aware of your role and responsibility for spiritual care of patients, residents and families.
5. Use reflection and collaboration to embed learning outcomes.



Our heritage

It is important to begin by remembering who we are, what we believe and what we do.

We are part of a network of Catholic health and aged care services operating across Australia. Our services are inspired by the person and mission of Jesus of Nazareth. Although Jesus lived more than 2000 years ago, we have an insight into his life from the gospels of Matthew, Mark, Luke and John in the Bible. In these accounts, Jesus was frequently moved with compassion, he encouraged and supported others, particularly those who were marginalised, and he healed the sick. He taught his followers through parables - simple stories with a moral purpose that illustrated the expectations for living a Christian life.

The parable of the Good Samaritan is the founding narrative for Catholic health and aged care. In this story, a man is robbed, beaten and

left to die on the side of the road. Several passers-by go out of their way to avoid him. When the Samaritan sees the man he stops, tends to the man's wounds, takes him to a nearby inn and pays the inn-keeper to look after the man until his return. Jesus urged us to be like the Good Samaritan – notice who needs help, act with compassion and never abandon those in our care.

All Catholic health and aged care services are inspired by this parable. The expression of this shared identity is nuanced by the religious founders of each service, in our case St Frances Xavier Cabrini (Mother Cabrini) and the Missionary Sisters of the Sacred Heart of Jesus. Their mission is to bring the love of Jesus to the world. We are part of this ongoing story at Cabrini.



Distinguishing features of Catholic health and aged care

Cabrini is a Catholic health and aged care service. Our brand and reputation is based on Catholic tradition. This is what is being expressed in the love people experience when they are part of our organisation or recipients of our care.

The principles of Catholic Social Teaching are the touchstones for our work in Catholic healthcare. They give meaning to our mission and values and are embedded in the Catholic Code of Ethical Standards and principles for Catholic Health and Aged Care. The goal of Catholic healthcare is not to be better than others at all costs. Rather, it is to deliver care that authentically represents Catholic Social Teaching and Catholic Code of Ethical Standards and principles.

In many respects, Cabrini is like any other health or aged care service. The struggles of the financial context in healthcare today, the imperative to provide the latest, evidence-based care, the search to find new answers and strive to better reach the people who are most in need of care are all concerns of any modern healthcare service.

In other respects, our Catholic identity sets us apart from non-faith based services. For example, the prominence of symbols like crosses and crucifixes, participation in rituals like prayer, investment in pastoral care and the values and ethical principles we take into account in making 'good' decisions are clear signs of our Catholic identity.

There are also other, more subtle distinguishing features that have a profound impact on the services we provide and the way we provide them – our ethic of care. These features flow from three commitments.

We commit to:

- Respect life in all stages
- Care for the whole person, often beyond the limits of science
- Accompany patients and never abandon them

"You know when you walk into a Catholic hospital not only because of the visible cross but by the way the staff treat you. I feel welcome, safe. In a way I feel loved."

Julie | Patient



We respect life in all stages

We believe every person has inherent dignity from the very beginning of their life to its natural end. Dignity is not diminished by age, infirmity or disability, nor is it something you have to earn or attain. It is an essential quality of every human being. This is our starting point in developing a therapeutic relationship. **It means we care *about* people, we don't just care *for* them.**

Think of it like this: if you imagine the person who is most precious in your life (it could be your partner, your parent or your child), we would want every one of your patients, residents or clients to have the same experience of care you would want for this person.

Caring about people means being interested in their physical, spiritual, emotional, cultural and social needs. It means trying to understand other people's situations and struggles, to imagine ourselves in their shoes and to feel for them. It evokes empathy, compassion and action. This is the message of the Good Samaritan parable and this is *Our Promise* to our patients, residents, clients and their families.

Dignity also means that all human beings have a right to life, from conception to natural death. Based on this principle, Catholic services choose to provide some services, such as palliative care, while refusing to provide others, such as elective

termination of pregnancy or voluntary assisted dying.

Catholic tradition holds that we belong to one human family and are responsible for each other. We live in a web of relationships and only thrive and reach our potential in relationships with others. We do this through asking patients and residents what we need to know about them to ensure they feel welcomed, valued and safe at Cabrini.

Ill health can impact family relationships, which may become closer than ever, or may become strained. It may be the catalyst for exacerbating or forgiving long-standing hurts. Caring about a patient or resident also means being attuned to the needs and dynamics of their family and loved ones.

When a patient or resident dies, our care extends to those who are grieving. Pastoral and Bereavement Services offers bereavement support for the next of kin/primary carer of all patients and residents who die at Cabrini. The module involves making regular contact, hosting a group memorial service, offering bereavement counselling, providing a referral pathway for people suffering complex grief and acknowledging the anniversary of the death.

"I was sitting opposite the nurse's station, shivering while waiting for my procedure. An orderly walked past. He returned a few minutes later with a warm blanket and draped it around my shoulders and tucked it down my back. His kindness moved me to tears."

Connie | Patient

We endeavour to care for the whole person, often beyond the limits of science

Catholic health and aged care resists a mechanistic approach to disease and illness. That is to say, we see the patient or resident in front of us as a person who is suffering, and we seek to heal.

Healing is different to curing. Curing means eliminating all evidence of disease, while healing means helping the person to “become whole.” People can be cured without being healed. Equally, they can be healed without being cured. Our goal is to create a healing environment.

There are physical, psychological, social and spiritual aspects to a healing environment.

Reducing noise and clutter, making sure the patient or resident is comfortable or placing their things within reach can all impact the physical environment.

The psychosocial dimension relies on being a healing presence. A healing presence is more than physical presence. It requires attentiveness to the other – like the Good Samaritan, it involves noticing, attending and caring.

Spirituality is often mistakenly confused with religion. We are all spiritual beings, whether or not we identify with a religious tradition. Our spirituality is about what brings meaning to our lives. It impacts on how we make sense of the world and our place in it.

There are a wide range of spiritual practices. Some are secular, such as contemplation, engaging with and enjoying nature, appreciation of the arts, practicing yoga or tai chi. Others take a religious form and are based on belief in something or someone that is greater than or transcends human existence.

In the Christian tradition, this transcendent being is God – Father, Son and Holy Spirit. Prayer and celebration of the Eucharist (Mass) are some of the spiritual practices you will encounter at Cabrini, reflecting our Catholic identity.

Spiritual care always involves compassion, listening and encouragement of hope. Hope is an important element in healing. Hope, in this sense, is not hope for perfect health or a longer life, but the choice to live our best lives, no matter the disease or condition.

Often when people are confronted by a sudden illness or diagnosis that threatens their mortality, they begin to ask spiritual questions, for example *What have I done to deserve this? Why is this happening to me? What has my life been about? Who am I really? What do I believe in? Will my life have any lasting meaning?*

Recognising and responding to cues of emotional and spiritual need is an important dimension of whole-person care. Like any other diagnostic tool, a spiritual assessment helps elicit how a person’s spiritual needs are impacting on their health status.

Sometimes the needs you uncover will be easy to address, for example sitting beside the person and reassuring them their feelings in this situation are normal. At other times you may need to refer the person to Pastoral Services for specialist spiritual care and support.

The pastoral practitioner can assist the person to identify and draw on the resources and support they need to engender or restore hope. Where the person belongs to a faith tradition, the pastoral practitioner can provide relevant resources and can connect them with a priest, pastor, rabbi or faith community visitor if desired.

It is helpful for carers to be in touch with their own spirituality so they are able to recognise and respect the expression of spirituality by others.



“Spirituality does not mean Catholicity, Christianity or even religiosity. Spirituality transcends any particular faith tradition to recognise in all people the fundamental reality that lies beyond the physical being... yes spirituality is powerful and meaningful to those for whom we care and for us, the caregivers.”

R.G. Porter *‘The Essence of Catholic Healthcare’* Catholic Health Association USA 2000

We accompany patients: we never abandon them

When Jesus said “love your neighbour as yourself,” the type of love to which he referred is the love demonstrated by the Good Samaritan. That is, an altruistic, selfless, unconditional love, just as you would want your own loved ones or yourself to be treated. This is the patient and resident experience to which we aspire.

For patients and residents to feel loved in this way, the care relationship must be built on compassion, respect, trust and honest communication – that is, genuinely caring about the individual. At its best, it becomes a trusted collaboration, united in a common purpose for the person’s good. This type of relationship is at the heart of our commitment to a positive patient or resident experience.

Unfortunately, there are many factors that can impact negatively on the care relationship, for example, the imbalance of power that exists between healthcare professionals and the people seeking our care, or increased anxiety

associated with being unwell. Another factor may be a moral conflict we may feel with the choices the patient or resident makes about their care. The *Staff experiencing values conflict* policy may assist you in managing such situations. Every encounter is an opportunity for staff to choose to be their best, to give their best and get the best outcomes for others.

Our ethic of care acknowledges patients and residents have the primary responsibility for judging which treatment and care options they wish to pursue. All patients and residents should be active participants in their healthcare. We have a duty to provide them with all the information they need to make wise decisions about their options.

“You have said something very important to me. I will get someone who can assist you with this...”

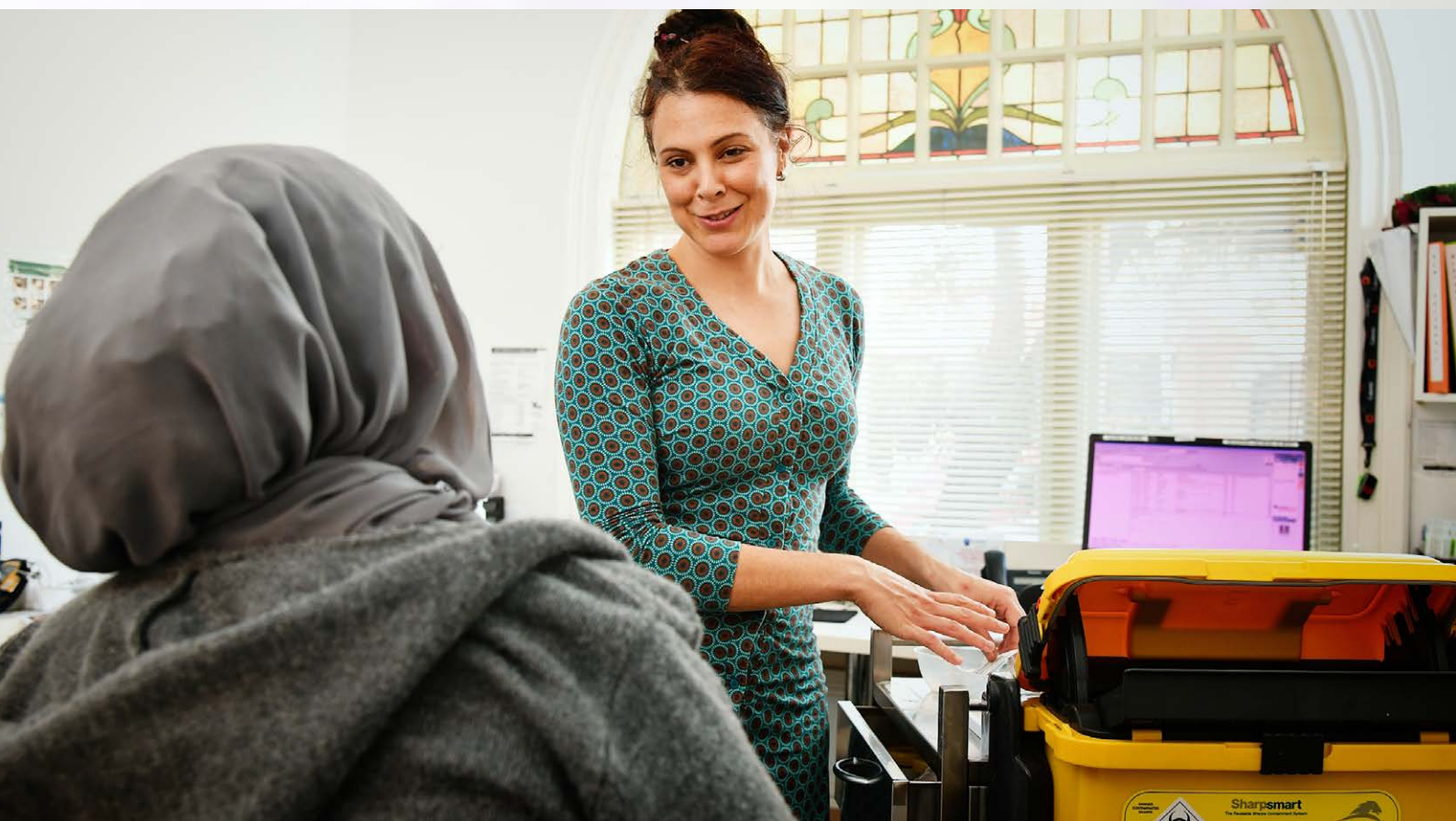


Shared decision-making is a trusted collaboration, united in a common purpose for the person's good. This type of relationship is at the heart of our commitment to a positive patient or resident experience. When people are incapable of making their own decisions, their substitute decision maker has the responsibility of discerning what the person would choose if he or she were able to, in light of what is known about the person's wishes. We therefore encourage patients and residents to consider their future healthcare wishes, to talk to their substitute decision maker and family and to record their personal values and preferences on an Advance Care Directive form.

In Western society today, a high value is placed on independence and autonomy. People desire control over their lives and fear being dependent on others. Suffering has a negative connotation and we tend to ignore the inevitability that we will all die one day.

Embedded in our ethic of care is the understanding that suffering is an inevitable part of the human condition. Suffering is more than physical pain. It is a subjective, multifaceted and complex phenomenon involving physical, emotional, psychological and social elements. We rightly always seek to alleviate suffering, acknowledging we will not always be successful in this goal given our human and scientific limitations. We will always continue to accompany a patient or resident who is suffering, we stand in solidarity with them and do not abandon them.

Our ethic of care also includes the understanding that life is a sacred gift and death completes the natural cycle of life. Therefore, we avoid or withdraw treatments that are therapeutically futile or burdensome and will never participate in treatments where the intended goal is to bring about death.



These differences in worldview mean we will not always be able to provide the care people may desire, such as participating in Victoria's voluntary assisted dying service.

In these situations, we respect the person's right to make decisions about their care and do not judge them for holding a different worldview. We are truthful, explaining why we are not able to provide the care they are seeking. We offer to continue to support and assist them to the best of our ability and in a manner consistent with our ethic of care.

*"In the provision of health and aged care, patients, residents, practitioners, family and carers become a small community united in working for a person's good. The relationship which unites them is best understood as one of trusting collaboration in a common purpose."*¹



1. Catholic Health Australia, Code of Ethical Standards for Catholic Health and Aged Care Services in Australia (2001), 7.



Our ethic of care for each other

Our ethic of care extends beyond those we serve and encompasses those who we serve beside.

Our staff work together to foster a culture that makes everyone feel safe, supported and able to flourish. This enables the provision of quality, compassionate care.

At Cabrini, we expect staff to demonstrate care and respect for one another through building collaborative, professional relationships based on trust and honesty. You can demonstrate you respect and care about your colleagues by using people's preferred name, stopping what you are doing to engage with them, making eye contact, smiling, acknowledging their presence and making time to give them your undivided attention.

All staff are encouraged to participate in an active culture of professional inquiry to support continuous learning, improvement and professional development, and to support their colleagues to do so as well.

Caring about your colleagues doesn't mean always agreeing with them – staff should use constructive processes to address differences of opinion and negotiate outcomes.

To care for your colleagues, you need to know who they are. Staff are encouraged to get to know the people who work in their immediate area as well as staff and volunteers from across different areas of Cabrini.

Be patient with one another as you would be with your patient or resident.

We are committed to safety and quality

"Let's figure out a solution..." vs "you can't do that..."

We exhibit a positive attitude

"Let me find out this for you..." vs "I don't know..."

We work together to achieve the best outcome

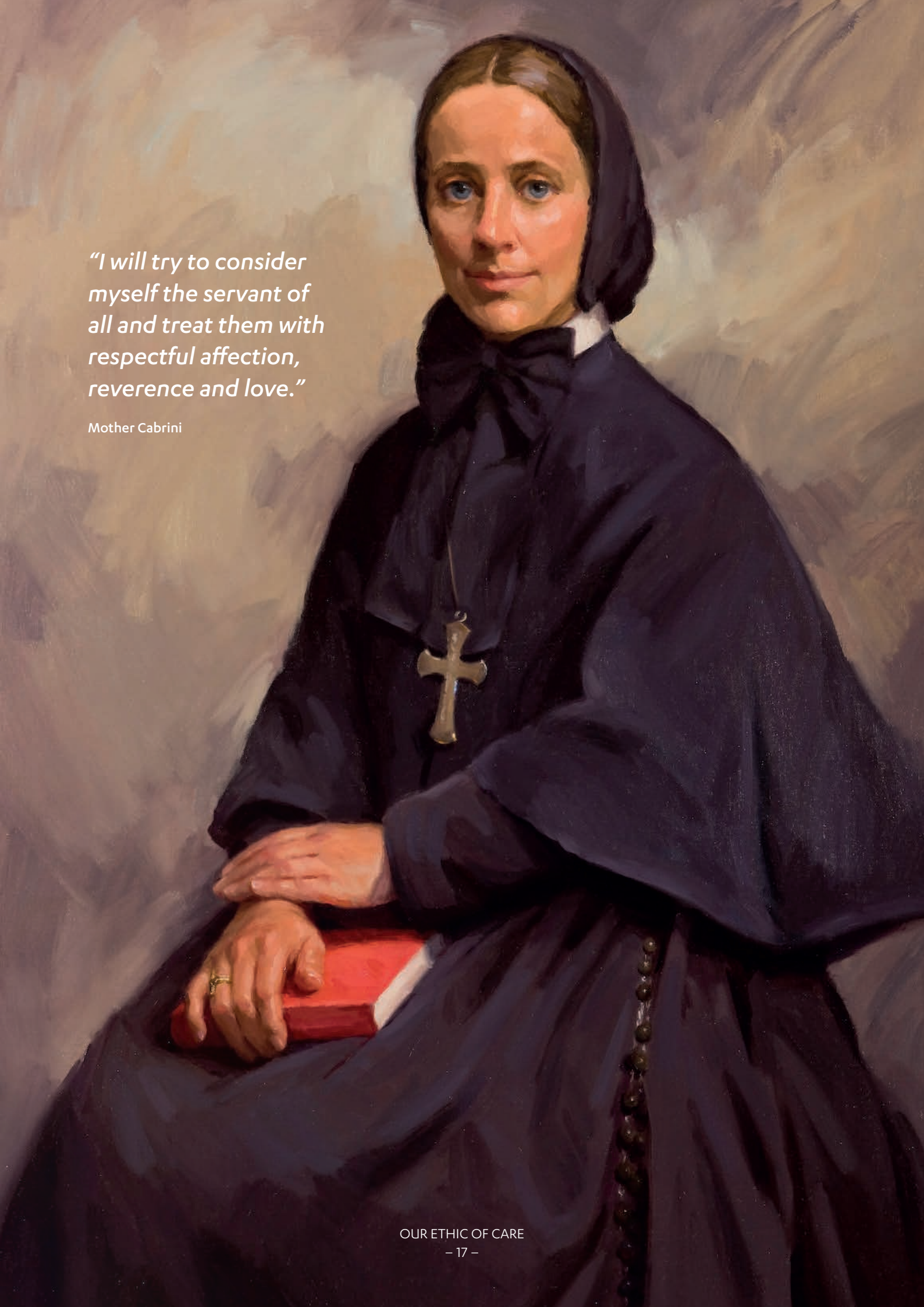
"I'm happy to help you find the right person to better answer your question..." vs "that's not my department..."

We are here to provide service

"Let me see how I can help you with this..." vs "it's policy..."

We want to build a just and sustainable community

"Here are some alternatives for you ..." vs "we don't do that..."

A full-page portrait of Mother Cabrini, a woman with brown hair and blue eyes, wearing a dark blue or black habit with a large bow at the neck and a cross pendant. She is seated, holding a red book in her lap with both hands. The background is a soft, textured wash of light brown and beige tones.

*"I will try to consider
myself the servant of
all and treat them with
respectful affection,
reverence and love."*

Mother Cabrini

Final reflection

Please take time to reflect on what you have learned that has resonated with you and how well our ethic of care is expressed in your work.

You may find the following questions and conversations with your manager useful to guide your reflection:

1. What motivates you to do the work that you do?
2. What does being compassionate and connected look like to you?
3. How confident do you feel noticing and attending to spiritual and emotional needs?
4. Would the people you care for feel “loved” or “cared about?”
5. What do you feel you need to adapt or change to model the values-in-action expected in a Catholic health and aged care organisation?



Glossary

Accompany

The act of caring for a patient or resident and their family with genuine concern for their wellbeing, which is reflected in compassionate touch, active listening, honest communication, a non-judgemental attitude and competent clinical practice.

Catholic Social Teaching

The four core principles at the heart of the Catholic tradition that inform the Catholic view of the world and the way in which we should operate in it are:

Human dignity: the belief that every person is of infinite value and worth because each of us is made in the image and likeness of God.

Common good: our responsibility to work for social structures, systems and institutions that enable every person to meet their needs and reach their potential.

Subsidiarity: the commitment to enable those most affected by a decision to be involved in the decision-making process.

Solidarity: the acknowledgement that we are responsible for one another because we are all children of God and therefore seek to understand other people's situations and struggles and to make decisions that preference the needs of the poorest, most vulnerable or marginalised.

Formation

The process of socialisation into the Catholic and Cabrini culture that is at the heart of our mission and the context for our work.

Healing environment

An environment that has a therapeutic effect such as enhancing a sense of safety and trust, reducing anxiety and stress and promoting a sense of wellbeing and care.

Pastoral care

Care that addresses the emotional and spiritual wellbeing of patients, residents and families. Every member of the health care team provides pastoral care. The Pastoral Services department comprises pastoral practitioners who provide a specialist service and an extended ministry team who provide faith-based support.

Spirituality

A universal human experience that involves making sense of the world and our place in it. It typically involves a sense of connection to something bigger than ourselves and may be linked to faith-based and/or secular practices.

References

Code of Ethical Standards for Catholic Health and Aged Care Services in Australia Red Hill: Catholic Health Australia (2001)

Principles of Catholic Social Teaching: <https://social-spirituality.net/social-spirituality-catholic-social-teaching/introduction-to-catholic-social-teaching/principles/>

*“What is needed is a personalised approach to the sick, not just of curing, but also of caring, in view of an integral human healing. In experiencing illness, individuals not only feel threatened in their physical integrity, but also in the relational, intellectual, affective and spiritual dimensions of their lives. For this reason, in addition to therapy and support, they expect care and attention. **In a word, love.**”*

Pope Francis | Message for the World Day of Sick, 11 February 2020

