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Book Review of The Department of Pastoral Car: A Guidebook

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Book Review

THE DEPARTMENT OF PAS-TORAL CARE: A GUIDE-BOOK. Compiled by Robert Wheelock, O.F.M., Cap. The Catholic Hospital Association, St. Louis, Mo.

The Guidebook cannot begin to do justice to the wealth of new and original ideas it contains. The controversial issues it raises could touch off hours of lively discussion, and it may be a book with a great impact. Generally, its format is well organized, but the seven sections could be more concise and less repetitive.

tions of a given Trying to read all for each job destrather perplexing.

Sections Two easily have been one section with differentiating dubility. Also in the versus "non-pries

A question is raised in Section One regarding the statement: "The Catholic Hospital Association is on record as supporting the establishment of a Department of Pastoral Care in its member hospitals." It would have been more prudential not to print an isolated statement like this. Is merely being "on record as supporting" sufficient? It appears to this reviewer that many people will challenge this statement for, in fact, support is not always evidenced on a state, diocesan or local level. It is all "on record" but in reality it is not apparent.

If the Department of Pastoral Care is to be considered a vital department of a health care facility with significant contributions of its own toward total patie care. then why a separate philose y for each aspect of the departr it? Is it not sufficient to have an verall departmental philosophy b d on the general hospital phi sophy from which all activities ar funcflow? tions of a given departmen phies Trying to read all the phile for each job description 1 omes

Sections Two and Three could easily have been combine into one section with some intation differentiating dual role reponsibility. Also in the area of priest versus "non-priest" role reponsibility, perhaps those requirements that apply to both could be stated and followed up by the that differ.

Section Four could readily be the "Patient Visitation Program," instead of the Sister Visitor Program, eliminating verbosity by including religious and lay visitors. Should a large or small number of "patient visitors" determine the need for a coordinator? If several persons are involved, it would seem desirable to have someone coordinating the program outside of the director or chaplain.

It would have been apropos to consider the extended role of the Religious as Pastoral Associate and Visitation Coordinator in one area. Duplication of functions is evident, although responsibility is broader in Pastoral Associate than in Visitation Coordinator.

As for the "heart" of the Guide-book — Section Six — this reviewer feels that Clinical Pastoral Education is a most rewarding experience. However, there is a challenge for the National Association of Catholic Chaplains and/or the Catholic Hospital Association to develop a clinical training program that would incorporate the "soul" of the Apostolate to the Sick —

the SACRAMENTAL role of the ministry.

And . . . what could be more inviting than living in "Agreement?" Section Seven offers the essentials and invites creativity on the part of those formulating "Statements of Agreement" . . . THE CHALLENGE . . . harmony through implementation.

Reviewed by Rev. Ray W. Wawiorka Acting Chaplain-Supervisor St. Francis Hospital Milwaukee, Wis.

REV. JOHN J. LYNCH, S.J.

Fr. John J. Lynch, S.J., a former medical-moral consultant to the National Federation of Catholic Physicians' Guilds, and the Catholic Hospital Association, died April 23 in Kingston, Jamaica. He had been serving as vice-chancellor of the Diocese of Montego Bay, Jamaica from 1970 until his death. Prior to that he had been professor of moral theology at Weston (Mass.) College. He was a frequent contributor to *Linacre Quarterly* and other journals, and collaborated with Fr. Gerald T. Kelley in conducting medical-moral institutes for physicians and Catholic hospital personnel.