

chas communiqué

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Vision 2022—CHAS

Catholic Health Care was established and shaped by missionaries. That's a thought that keeps returning to me as we chart a course for the future of CHAS in the years to come.

In a proclamation titled, “Message of His Holiness Pope Francis For World Mission Day 2022,” the Holy Father says, “Christ’s Church will continue to “go forth” towards new geographical, social and existential horizons, towards “borderline” places and human situations, in order to bear witness to Christ and his love for men and women of every people, culture and social status.”

Borderline places are not easy places. When Sisters Agnes Rose Caron (27), Philomene Boucher (20), Sister Marie-Anne Pepin (28) came to Ile a la Crosse in 1860, it couldn’t have been easy. The missionary challenges of today’s Church are different but they are no less difficult than those faced by the Grey Nuns over a century ago.

Increasingly, the identity and ethical convictions of Catholic Health Care are being questioned. Indeed, the very existence of publicly funded Catholic Health care is up for debate in many quarters. And the ever present danger of adopting a defensive posture—one that is hostile toward secularism—threatens to drive wedges between people of good will and people of faith. Never has there been more need for patient listening.

In late January this year, I organized a Zoom conversation with Archbishop Murray and four lay indigenous leaders—two from the North and two from Saskatoon. One reality that propelled me to initiate this conversation was an awareness that within the Archdiocese of Keewatin-Le Pas there are no Catholic Health Care facilities. I also felt that talking with

people on the “borderlines” of our communities would help me to better understand some of the missionary needs for Catholic Health in our province.

The great distances people have to travel to access health care—in some cases a five hour drive—the plague of diabetes, and fear that prevents people from accessing care came up. Archbishop Murray expresses a concern for all those who are falling through the cracks and surfaced uncertainty about how to respond to a community harmed by the legacy of colonialism and residential schools.

When I began working for CHAS I also committed myself to meet with each of the Bishops in our province. In these meetings we discussed the value of attending to the social determinants of health, the Church’s voice in regard to vaccination mandates, the role that CHAS could play in the unfolding reality of Catholic Health in the province and the value of promoting our [Advance Health Care Directives](#) and the [Ethics Guide](#).

At the end of March the CHAS Board will spend a day on retreat. Bishop Stephen, from the PA diocese, has generously agreed to help facilitate our time together. An approach marked by Synodality will guide our conversation. I ask your prayers that our discernment and discussion root us in the love of Christ which is foundational to a missionary vision for Catholic Health.

Peter Oliver



The Compassion of Christ Compels Us

SISTERS IN HEALTH CARE IN SASKATCHEWAN— by Sister Teresita Kambeitz OSU



“The hospital served the best food in town” declared a patient at St. Joseph’s Hospital in Macklin. In their ministry of reflecting the “compassionate face of Christ”, the Sisters of St. Elizabeth provided nursing care and looked after their patients’ daily needs by keeping a large garden

and managing a dairy barn, chicken coop, hog sty and horse stables. They did the same at St. Elizabeth Hospital in Humboldt, while receiving no pay and taking no holidays.

Stories of heroism abound in the annals of Sisters in health care in Saskatchewan. During the first year of St. Paul’s Hospital in Saskatoon (1907-08), two Grey Nuns and their assistants received 117 patients (many sick with typhoid) in a house with no electricity, no central heating, no running water and no washroom facilities. Melted snow was used for laundry and coal oil lamps provided lighting.

The year after Sister Marie de la Croix came from France and opened the Gabriel Hospital in Ponteix, the region was hit by the 1918 Spanish influenza. The little hospital was so flooded with dying people that Sister Marie gave up her own bed and slept on the kitchen table for two weeks. During the epidemic, within two days at St. Michael Residential School at Duck Lake, 53 girls, 43 boys and six Sisters were sick in bed. Within two weeks there were four deaths. A Sister of Presentation, Sister St. Ovide, was head nurse at the school for 34 consecutive years. In 1929 she was alone in providing 24-hour care to 76 children sick and bedridden with measles. At Mont St. Joseph Home in Prince Albert, Sister Benjamin, Sister of Our Lady of the Cross, served as the night nurse aide for 15 consecutive years without a single night “off.” The Sisters cared for 80 residents, also without taking a salary.

Sisters
There for

the sick
others
the love of God.

Without
a salary
a holiday
even a bed.

Not for
acclaim
nor
wealth
nor
self.

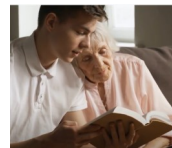
Therefore
take heart.

by Peter Oliver

In addition to serving directly in health care, the Sisters were also active in creating public policies and structures in keeping with Catholic principles. In 1941, rumors began to circulate about a federal government proposal to create a health insurance program to provide free and universal access to medical care. While being concerned that the state might permit practices judged contrary to Catholic morals, Sisters in hospital work saw that a health insurance program would unquestionably benefit the poor while also providing much needed financial assistance to Catholic hospitals. Soon they found themselves walking a tightrope between remaining obedient to their bishops who opposed the plan, while maintaining their openness toward medicine.

In 1942 when the government refused to negotiate with the Catholic Hospitals because they were part of an international organization, Mother Virginia Allaire, director of Grey Nuns Hospital in Regina, proposed the creation of the Catholic Hospital Council of Canada. This meant complete separation from the Catholic Health Association of the US and Canada. In 1943, with the “specter of socialism” looming in Saskatchewan, Mother Virginia Allaire and Mother Berthe Dorais of St. Boniface hastily organized provincial associations of Catholic hospitals in the three prairie provinces to serve as their official voices in negotiations with the provincial governments.

Continued on page 4



**National Hospice
Palliative Care Week
May 1-8, 2022**

This would be a great time to explore **Horizons of Hope: [A Toolkit for Catholic Parishes](#)** on Palliative Care found on the Canadian Conference of Catholic Bishops website.

Dr. Mary Heilman, Modern Missionary— connections on behalf of (CHAS)



During the 4th wave of the Covid-19 pandemic, Dr. Heilman made great strides to connect with facilities throughout the province, both virtually (V.) and in person (I.P.). She offered “Am I My Brother’s Keeper?” to Foyer St. Joseph Nursing Home in Ponteix (V.), St. Ann’s Senior Citizen’s Village and St. Ann’s Senior Citizen’s Village (x2) in Saskatoon (both I.P.), and at St. Joseph’s Hospital/Foyer d’Youville (x2) in Gravelbourg (V.). She collaborated with Cheryl Harrison to establish an SHA ethics committee for the Estevan/Weyburn area (SE 6,7,8,9). She also joined the staff huddles at Mont St. Joseph, Prince Albert as well as supporting their ethics committee (I.P.) and joined their committee meeting, as well as offering educational opportunities for the Centre staff (V.).

The Catholic Health Care Alliance of Canada (CHAC) Raises Awareness

A cover story titled “Divine Intervention” in the March 2022 issue of the Walrus Magazine raises questions and concerns about Catholic hospitals as it relates to restrictions on the treatments they will provide. In the 5,000- word article, reporter Wendy Glauser poses a thesis that there is an inherent tension between Catholic health care’s ability to fulfill its mission to care for the most vulnerable and its commitment to upholding Catholic teaching. In doing so, she acknowledges Catholic health care’s mission and contributions, but raises questions about the relevance and constitutional grounding of Catholic health care’s role today. The article draws on interviews with concerned staff and physicians who work in Catholic organizations about their workplace experiences and patients about their access to and experience of care. The cover headline reads: “The Conflict Inside Catholic Hospitals: Why healthcare workers are speaking out.”

John P. Ruetz President & CEO of CHAC

This doesn’t begin to acknowledge the excellent work Dr. Heilman has provided on behalf of CHAS throughout the last year. We could also speak of her personal reflection at the Candlelight Vigil at St. Ann’s Senior Citizen’s Village and several other program offerings such as, “When is it our Business? Responding to Expression of Sexuality in Long-term Care,” “Navigating in a Sea of Change,” and “Advance Care Planning”.

But what we need to say now is, **Thank you!** and Mary, with a baby about to arrive, we wish you well in your much deserved maternity leave.

Save the Date

CHAS CONVENTION

**Oct. 27th evening —
28th all day**

The Convention Committee

aims to make this event

Affordable

Hospitable

Engaging



Wendy Glauser is an award-winning Toronto writer and editor who writes about health and science. Her articles have appeared in the Walrus, Canadian Medical Association Journal, Chatelaine, The Globe and Mail, Reader’s Digest, Today’s Parent, The Medical Post, and The Toronto Star.

The Walrus has a circulation of over 30,000 with an audience that is highly educated, wealthy and influential—including MPs, Senators and industry leaders. Total monthly reach is reported as 631,000.

John P. Ruetz President & CEO of CHAC

Responding to these concerns: page 4 ➡

Sister Jeanne Mandin, the Grey Nun Director of St. Paul's Hospital, was elected as president of the association originally called the Catholic Health Conference of Saskatchewan. When the CHCS agreed to cooperate with the government, it gained a great deal of credibility with government leaders who then consulted the Association regularly. Together they reached consensus on common principles. At the time Catholic hospitals, which provided more than half of the hospital beds in the province, were entirely dependent for their survival on the generosity of the Catholic Sisters. Sister Mandin was instrumental in creating a 'point system' for calculating Sisters' donated services and negotiating salaries with the government along with Bishop Pocock.

She urged its members who were engaged in much heated debate, to "roll up their sleeves and get down to work" and develop principles of cooperation

Chairing the 1957 CHAC convention held in Saskatoon, the president, Mother Dorais, pointed out that the government hospital insurance plan presented a challenge to Catholic Hospitals. She urged its members who were engaged in much heated debate, to "roll up their sleeves and get down to work" and develop principles of cooperation between Catholic hospitals and a national hospital insurance plan. Upon completing their task, they took their proposals to the next floor where the Minister of Health, Hon. Paul Martin was waiting. Years later, when universal health care came into effect, Mother Dorais said, "Finally, social justice took the place of social charity".

In some instances the Sisters not only administered hospitals but owned and operated them as well, for example, the Sisters of St. Joseph of Peterborough who funded and built the state-of-the-art 40-bed St. Joseph's Hospital in Estevan. The Grey Nuns operated six hospitals, totalling over 7,000 Sister-years of healthcare in the province.

They also conducted two Schools of Nursing. For 92 years, from 1907 until 1999, they administered St. Paul's Hospital in Saskatoon. The Sisters of St. Elizabeth administered St. Elizabeth's Hospital in Humboldt for 89 years, served in five others and operated a School of Nursing. Other religious congregations with a history of long term care in Saskatoon are the Sisters of Providence of St. Vincent de Paul who served at Providence Hospital in Moose Jaw for 93 years and the Sisters of Charity of the Immaculate Conception who operated Holy Family Hospital in Prince Albert for 87 years.

Since the first three Grey Nuns came to Ile-a-la-Crosse in 1860, over 2,100 Sisters have served in 37 hospitals and senior care homes in Saskatchewan. Representing 18 religious communities the Sisters totalled over 23,000 Sister-years of health care, thus laying the foundations for the province's medical system. Their ministry helped to shape a gentle province and prepare for Saskatchewan's leadership role in creating a national health care system to reflect the compassionate face of Christ.

CHAS Mission Award

Nominate someone who:

- Has provided leadership in the work of Catholic Healthcare Ministry.
- Exemplifies CHAS Vision, Mission & Values
- Has made a particular contribution to Catholic Healthcare in Saskatchewan.
- Is recognized by one's peers as worthy to receive this award.

More information: chassk.ca Awards tab

Responding to Critiques of Catholic Health Care

Here are a few thoughts from John Ruetz to keep in mind:

- ⇒ **"Catholic health care is for everyone.** Our legacy is that we welcome and care for whoever knocks on our door, regardless of race, faith, circumstances, or life choices."
- ⇒ It is important to remember that the mission of Catholic Health Care "depends on a just culture that supports human vulnerability and **welcomes questions and concerns as essential** for quality care"
- ⇒ Ethicists in Catholic facilities **"do not** independently make or **direct clinical decisions** or policy."