Book Review of *The Department of Pastoral Care: A Guidebook*

Ray W. Wawiorka
Book Review

THE DEPARTMENT OF PASTORAL CARE: A GUIDEBOOK. 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.

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 prudent 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 patient care, then why a separate philosophy for each aspect of the department? Is it not sufficient to have an overall departmental philosophy based on the general hospital philosophy from which all activities and functions of a given department flow? Trying to read all the philosophies for each job description becomes rather perplexing.

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