THE HOSPITALLER ORDER OF SAINT JOHN OF GOD
FIRST STEPS ALONG THE PATH OF HOSPITALITY
USER’S HANDBOOK

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FIRST STEPS ALONG THE PATH OF HOSPITALITY

USER’S HANDBOOK

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INTRODUCTION

The Order's Charter of Hospitality is a document of fundamental importance to the whole of the St John of God Family, because it sets out the most important features of our identity: our roots and origins, the Hospitality which defines our Charism and mission, our culture and spiritual legacy, our ethos and philosophy, and the principles and values which underlie the provision of care, management, administration and research.

Since its publication it has been used for reference purposes both inside and outside the Order. It addresses many topics referring to a wide range of issues of relevance to our mission and our apostolate. It provides important ideas and suggestions for developing and fostering bonds of union within the St John of God Family, and describes and defines the basic elements of what we call ‘charismatic management’. For this reason it has also become a basic aid for the formation of Brothers and Co-workers.

It is a living and dynamic document which sets out to indicate what identifies us at all times. It must therefore be revised and kept up-to-date, so that it always provides a topical and current reflection of our institution, while preserving the foundations on which it rests.

To fully understand a document of this kind, it is clearly essential to have a basic knowledge of the Order and to be familiar with its language. This is why we felt it necessary to draft this "User’s Manual", with the main purpose of helping all the members of the Saint John of God Family to familiarise themselves with the language, culture, ethos and philosophy of our Institution, as a prior stage or introduction to a more thorough study of the Charter of Hospitality.

It is not a summary of the Charter, but a shorter document written in more accessible language and with a more educational approach, setting out the fundamental themes addressed in the Charter of Hospitality. This new document is intended for all the Co-workers of the Order, particularly those who are not familiar with the Charter of Hospitality, or for new members of our Centres and Services, and those who spend time with us – because they belong to other undertakings, or are gaining practical experience with us, as trainees – and in general anyone else who wishes to know us. It is a new instrument that we are offering the Provinces, Centres and Services of the Order to foster a broader and better understanding of what we stand for, and to encourage and improve the formation of the whole St John of God Family. It is a document to be disseminated widely, and has to be backed up by people who are able to answer the questions to which it may give rise.

I would like to thank the Commission that drafted the document, coordinated by Brother Gian Carlo Lapic, for all their work. There is no doubt that it will be of great help to the whole St John of God Family, to make more people familiar with our Charter of Hospitality and, above all, to make our Order better known and loved.

Bro. Donatus Forkan
Prior General
1. **THE ORDER**

1.1. St John of God: the man

1.1.1 Bibliographical note

John of God was born at Montemor-o-Novo (Portugal) in 1495. In his infancy he moved to Spain and spent years living an adventurous existence, from the perilous life of a soldier to working as a bookseller. In 1539 he was committed to the Granada Royal Hospital suffering from what was thought to be a mental disorder judging from his “outlandish” behaviour manifesting his conversion as a result of listening to the sermon preached by St John of Ávila. It was in the Royal Hospital that John had first-hand experience of the dramatic plight of the sick, unattended, abandoned to their fate, and marginalised, and it was this experience that led to his decision to devote the rest of his life to serving the sick.\(^1\) That same year he founded his first hospital in Granada. He died in Granada on 8 March 1550.

In 1630 Pope Urban VIII declared him Blessed. In 1690 he was canonised by Pope Alexander VIII. In 1886 he was proclaimed the Patron Saint of Hospitals and the Sick by Leo XIII. In 1930 Pius XI proclaimed him the Patron Saint of Nurses and Nursing Associations, and finally, in 1940, he was proclaimed the Patron Saint of Granada by Pius XII.\(^2\)

1.1.2. His charismatic profile\(^3\)

St John of God identified intimately with Jesus of Nazareth in his attitudes and in his acts of mercy and solidarity towards the poor and the sick: he gradually liberated himself from all forms of selfishness and the tendency to live a cozy kind of Christianity, interpreting the plight of the poor and the sick in Granada through the eyes of faith and mercy, and animated by his own personal experience of God he imitated Jesus Christ through his radical dedication to the needy of his age in order to reveal to them God's love and enable them to share his own experience, announcing salvation to them.\(^4\)

John of God was a charismatic man, and the way he acted attracted the attention of all those who met him. His influence spread from Granada to villages and towns throughout Andalusia and Castile. This Charism spread beyond John the man: it was not merely a matter of his humane attitudes and deeds, expressed in terms of love for the sick and needy, which caught the admiration of others and drove them to cooperate in his work, but it was also the demonstration of the power which stemmed from placing his trust entirely in God alone. The Charism of Hospitality with which John of God was enriched by the Holy Spirit, was embodied in him like a seed which still continues to live in men and women to this day, prolonging across the centuries the merciful

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\(^3\) [www.ohsjd.org](http://www.ohsjd.org)

\(^4\) Cf. Const. 1984, 1
presence of Jesus of Nazareth at the service of all those who are suffering, practised in the manner of John of God.\textsuperscript{5}

His work was always open to all, not only for the sick and the poor but for anyone else who wished to cooperate and work with him. He began using the alms given to him by the people of Granada. He was supported by the work that the poor people themselves did in his house and, with them, by the pilgrims and the prostitutes whose help he also sought. He was backed up by the nurses who worked in the hospital when he was away, begging for alms. In Angulo he had a faithful and trusted friend who accompanied him at all times, particularly when he went away. His benefactors always played a major part in hospital life with their help. All these people were the embodiment of his principles and his desire to embark on a project with the participation of everyone, valuing each individual person with a great spirit of outreach and universality. From the very beginning, everything he did was possible thanks to the cooperation of people from many different backgrounds, believers and nonbelievers alike. All they were asked to do was to identify with his humanitarian spirit towards the people to whom he wished to demonstrate the power of charity and love.

And to this very day, this kind of co-participation has never ceased. Cooperation takes place at many different levels: some people feel particularly attached to the Order through its spirituality, while others participate by playing an active part in its mission.\textsuperscript{6}

1.2 Charism and mission

1.2.1 The Charism

1.2.1.1. The Charism

In the religious sense, a Charism is any form of presence of the Holy Spirit which enriches the believers and enables them to perform a service, or a mission, for the benefit of others. Both of them, Charism and mission, are expressed in human existence through spirituality, which is the way of living and serving, enabling us to a personal identification with Christ.

In the social sciences, people may be called "charismatic" to indicate that they possess qualities that are able to influence a group of people or broader sections of society.

In everyday language we use the expression "a charismatic person" to apply to people who have left an impression of themselves in the course of their lifetime either on society or on history. Their way of thinking, their lifestyle and their deeds ensure that that their work and memory lives on after them, influencing people and encouraging them to live with the same spirit.


1.2.1.2 Guidelines

St John of God was a charismatic man, in both the religious sense and in the sociological meaning of the term. The way he acted caught the attention of all those who met him and, in one way or another drew people to him attracted by the power of his total dedication to his neediest neighbours. The Charism of Hospitality with which God enriched John of God was embodied in him like a seed, which scattered its fruits among so many men and women who, across the ages, have continued to spread the merciful presence of Jesus of Nazareth by serving the suffering, in many different different ways.

Our Order defines the Charism in the Constitutions in the following terms: “In virtue of this gift, we are consecrated by the action of the Holy Spirit which makes us participate in a special way in the Father's merciful love. This experience communicates to us attitudes of lovingkindness and self-giving, enables us to carry out the mission of proclaiming and bringing about the Kingdom among the poor and the sick, transform our existence, and results in our lives manifesting the Father's special love for the weakest, whom we try to save after the example of Jesus.” (Const 2b)

The Brothers and the Co-workers participate in the Charism of St John of God. The Brothers live it through their Religious consecration, while our Co-workers who identify with the Christian faith live it through their baptismal consecration, and all the members of the St John of God Family live it by sharing and promoting the values of Hospitality.

1.2.1.3 Further information and inputs

- The Constitutions. See the Order’s web page: www.ohsjd.org
  Especially nos. 2 and 6a.
- The General Statutes of the Order. See the Order’s web page: www.ohsjd.org
  Especially nos. 47, 87 and 94.
  Especially chapters 1 and 3.
  Especially nos. 90-100, 100, 110, and 122-123.
  Especially 2.3.3, 2.4.2, and 3.4.1.
1.2.1.4 A& in the Provinces

This section must be completed by each Province.
Who are the people to be contacted in relation to this issue?
How and where can we find information materials in the Province on this issue?

1.2.2 Mission

1.2.2.1 The Mission

The Mission, resulting from the Charism received, is the tangible way of expressing service in the Church and in the world, on behalf of people who – in the case of our Order – are sick, poor, or in need.

The Constitutions define the Mission in the following terms:
“Encouraged by the gift we have received, we consecrate ourselves to God and dedicate ourselves to serving the Church in the assistance for the sick and those in need, with a preference for the poorest” (Const. 5a)

1.2.2.2 Guidelines

The Church's Mission is evangelisation, that is to say, proclaiming the Good News of the Gospel in word and deed, as Jesus Christ, the Good Samaritan, did as he went through the world doing good to all (cf. Acts 10,38) and healing all manner of sicknesses and infirmities (Mt 4, 23). We may therefore say that the Order’s Mission is “evangelizing the world of pain and suffering by promoting healthcare and/or social centres and institutions which provide comprehensive assistance to the human person in the manner of our Founder, St John of God” (CoH 1.3).

This is the way in which our Order carries forward St John of God's mission, as he performed it in the city of Granada, through the exercise of hospitality as the central and crucial expression of the Order’s philosophy, style and cultural and spiritual heritage. The parable of the Good Samaritan is the icon, and the great allegory, of hospitality.

The Order performs its mission through its Centres and through its works, acting on behalf of suffering humanity, as the expression of the merciful love of God. Consequently:

- We work in our own hospitals, cooperating with the provision of care by the country concerned and giving necessary services to its citizens.
- We accept the Centres entrusted to us provided that they are consistent with our Charism and the principles of our identity.
- We establish Centres and organisations on behalf of those who are marginalised by society and are not protected by national legislation.
- We work in the places where poverty is evident, addressing the needs created by poverty.
- We cooperate with other institutions or promoting a more dignified life, thereby contributing to improving public health.

The mission of the Order, in all its Centres and Apostolic Works in many parts of the world continues to be performed thanks to the work which the Brothers and Co-workers – employees, volunteers and benefactors – are performing together in the pursuit of the same project, namely, to serve the sick and the needy as our source of inspiration as our Founder, St John of God, did.

1.2.2.3 Further information and inputs

- The Constitutions. See the Order’s web page: www.ohsjd.org Especially nos. 5, 44-49.

1.2.2.4 A&E in the Provinces

This section must be completed by each Province.
Who are the people to be contacted in relation to this issue?
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1.3. The Hospitaller Family

1.3.1 The St John of God Hospitaller Family

St John of God shared the gift he had received with people from every section of society, and they felt "infected" by his way of living, serving and dedicating himself to people in need, which gave rise to a movement of hospitality which has continued throughout the ages until today.

The Charism and the work begun by our Founder have constantly expanded cross the ages, even reaching those who are not always animated by the values of the Christian faith, and have demonstrated amazing creativity, consistently with the times, the places, different cultures, and the needs of the sick and suffering.
We now realise that the Charism of Hospitality in the manner of St John of God ranges far more broadly than what the Brothers alone can do, and they are ready and willing to share the Charism, the Spirituality and the Mission with all the Co-workers with whom we make up the St John of God Hospitaller Family.

1.3.2 Guidelines

The manner and degree of participation obviously varies according to circumstances: there are those who feel particularly close to the Order in terms of its spirituality and their personal allegiance to the Christian faith; others are attracted by the mission, and are committed to and identify with the Order’s project; lastly, there are those who participate professionally, committing themselves in practical terms through their daily work.

In the mission of serving the sick and needy, our Co-workers play a more direct part in the life of the Order, albeit at different levels. But what is important is that the gift of hospitality which John of God received should establish forms of communion between the Brothers and Co-workers, driving them on to perform and fulfil their vocation, and be the visible sign to the poor and the needy of God’s merciful love towards all men and women.

At the present time, the Hospitaller Family comprises twelve hundred and fifty Brothers, and over five thousand Co-workers, including employees and volunteers, together with about three hundred thousand benefactors. It is present in all five continents, and in fifty-one countries, with three hundred Centres, in which over twenty million sick or needy people are cared for and nursed every year.

The Order works with a twofold legal status: as an organisation performing a specific task in society, it operates under current civil legislation in whatever country it is established; as a Church institution, it is governed by Canon Law.

Under Canon Law, the Order is structured into 21 Religious Provinces, 1 Vice Province, 1 General Delegation and 8 Provincial Delegations. The General Government of the Order is in Rome and is elected by the General Chapter which is held every six years. The Government of every Province or Delegation is elected by the Provincial and Delegation Chapters, which are held every four years, and sits in the place specifically appointed for it. The Provinces, Vice Provinces and Delegations are made up of local Communities of Brothers and Apostolic Centres, which are established in a given place to perform the Order’s mission there.

There are widely differing types of Centres and ways of being present in the world. We have some highly specialised Centres: Centres providing mental health care, and caring for people suffering from mental and physical disabilities; Centres for the chronic sick, the elderly and the terminally ill; Centres in the developing countries; Centres for the homeless and for people suffering from different types of substance dependency. For the Order is always ready to promote the establishment of Centres to meet newly arising needs. To manage the Centres, the Order cooperates with government departments and agencies, and with other Church and social entities and organisations, with which there
is obviously a similarity of approaches and aims. On some occasions, the Order promotes its Centres in places that lie beyond the reach of governmental and other institutions and organisations, to nurse and assist the most vulnerable people.

Map of the Order

1.3.3 Further information and inputs

1.3.4 A&E in the Provinces

This section must be completed by each Province.
Who are the people to be contacted in relation to this issue?
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2. THE ORDER’S VALUES

2.1. The Order’s values

The Order has defined HOSPITALITY as its core value.
Hospitality is embodied in the following four guiding values:

- **Quality** which means excellence, professionalism, comprehensive service, sensitivity to new needs, being a model of union with Co-workers, St John of God's care model, welcoming architecture and furnishings, collaboration with third parties.

- **Respect** which means recognising others in all their complexity, humanisation, the human dimension, mutual responsibility between Co-workers and Brothers, understanding, a holistic approach, fostering social justice, involving family members.

- **Responsibility** which means fidelity to the ideals of St John of God and the Order, (bioethics, social ethics, management ethics), respect for the environment, sustainability, justice, and the equitable distribution of resources.

- **Spirituality** which means providing a pastoral service to give spiritual and religious care, Evangelisation, making a spiritual offering to members of other faiths, ecumenism, cooperation with parishes, dioceses and with other faiths.

Hospitality encompasses both human values and Christian values. This enables all our Co-workers who share our faith in Christ, and those who do not, to work in the Brothers of St John of God Centres all over the world.

**Human Values** which take the form of positive attitudes conduct with a particular emphasis on perseverance, consistency, the spirit of service and altruism. Through this kind of conduct we can fully understand the significance and meaning of truth, upright conduct and love.

**Christian Values** which bear witness to the desire to promote and defend life, foster respect for the human person, and love according to the spirit of the Beatitudes.
2.2. Guidelines

Every day, and in every latitude, the Brothers of St John of God come into contact with the suffering and the difficulties facing humanity. Suffering which affects the emotional dimension of the members of St John of God Family. St John of God's hospitality can, through the practical actions of individuals, instil courage through the belief that it is possible to make sense of daily life through work and partly relieve the sufferings of others by opening up virtuous pathways of justice and charity.

Meeting the health needs of children, the elderly, the suffering and the other guests we care for in the Brothers of St John of God Centres demands a deep subjective sense of responsibility. When we see the projection of ourselves in others we establish an empathetic relationship with our guests, and are able to bring them help and relief through our conduct, actions and professional competence which embody the basic core values of Hospitality.

This takes us out of a standby position and makes us protagonists, becoming infected by the suffering we see, convinced that although it cannot eliminated, it can certainly be soothed. The highest reference we have to human values is “compassion” for the human person, which affects both work and life.

For those who believe in the Order's values, membership of the St John of God Family helps to give a sense and meaning to their life project.

Our Co-workers who identify with the Christian faith, and are driven by love, urged on to act according to Christ's message, draw on the Gospels to acquire all they need to point to the path they should follow in society, in the family and at work. For them, cooperating with the St John of God Centres is an ideal place for bearing witness, where dealing with others does not give rise to the fear of conflict, but meets the need to meet others in a way that will generate fruits.

The Brothers of St John of God and the Co-workers inspired by the values of hospitality are a source of support amid suffering and pain. Led by the ethics of care using professional skills and empathy they directly educate others to respect the various phases of human life, from birth to sickness and from sickness to death. In short, “the human person”, each one with their unique and unrepeatable personal individuality, is always the focus of our care and assistance work.

The St John of God workers are trained to provide hospitality without qualification. They take in the sick, the guests and their families through:

- Merciful hospitality.
- Solidarity-based hospitality.
- The hospitality of communion.
- Creative hospitality.
- Comprehensive hospitality.
- Hospitality which generates volunteers and co-workers.
- Prophetic hospitality.
2.3. Further information and inputs

The Charter of Hospitality: www.ohsjd.org
Humanisation – History and Utopia– Ed. Velar
The Gospel
The Universal Declaration of Human Rights adopted by the United Nations General Assembly on 10 December 1948

2.4. A&E in the Provinces

This section must be completed by each Province.
Who are the people to be contacted in relation to this issue?
How and where can we find information materials in the Province on this issue?

3. MANNER OF IMPLEMENTATION

3.1. Comprehensive care

3.1.1. Comprehensive care

Every Centre provides services that are capable of responding to all the needs of our guests. When we talk of ‘comprehensive care’ what we have in mind is taking on responsibilities towards the guests, considering every aspect of their humanity. People come to our Centres for some specific need (because they are sick, or require assistance, or human company, or because they are sick, infirm or disabled …), and they bring with them a whole range of demands to which we wish to try to respond. Our houses are therefore equipped to meet their material and spiritual needs, and provide answers to questions that have to do with their health and their family, social and religious relations.
To be effective, the Order's comprehensive care model demands interdisciplinary and multidisciplinary teamwork.\(^7\)

3.1.2. Guidelines

The concept of the person (in the anthropological model) is the key for defining and performing the Order's mission, tasks, treatment and style of care.
“We must provide care that considers every dimension of the human person: physical, psychological, social and spiritual.”\(^8\)
These four dimensions are to be considered as constituent and essential components of the human person.

\(^7\) CoH 5.3.2.6.
\(^8\) CoH 5.1.
They are so closely interwoven that when any one of them malfunctions, the repercussions trickle down through all the others. It follows from this that the Order's care model has to be "comprehensive." When providing care, all the dimensions of the person must be taken into account and must be addressed by properly trained and skilled professional workers, and obviously this applies equally to spiritual and religious care.

“It is only by providing care that takes account of all of these dimensions, at least as a working criterion and as an objective to be obtained, that we can consider that we are providing comprehensive care." 

In addition to the anthropological and care-oriented motivation there is also the religious motivation, which drives us to adopt the model of comprehensive care following the example of Jesus Christ who healed the sick, forgave their sins and brought them eternal salvation.

3.1.3. Further information and inputs

- The Charter of Hospitality: 5.1.; 1.1.; 1.3.; 2.1.3.; 3.1.5.; 3.2.2.; 5.3.1.1.; 5.3.1.2.; 5.3.2.5.; 5.3.2.6.; 6.1.1.; 6.1.2.; 6.3.1.; 6.3.2.
- The Constitutions: 41-46
- The General Statutes: 50-52
- Humanisation, part three, chapter 1, 5.
- Brothers and Co-workers Together to Serve and Promote Life: 15, 26, 45, 51, 87.
- Hospitality towards 2000: 21, 67, appendix
- Formation Handbook: 15, 26

3.1.4. A&E in the Provinces

This section must be completed by each Province.
Who are the people to be contacted in relation to this issue?
How and where can we find information materials in the Province on this issue?

3.2. PASTORAL CARE

3.2.1. Pastoral Care

Every Centre and facility in the Order has a pastoral or spiritual and religious assistance service consistently with the dimensions of the facility, the needs of the guests, the operators, and all the people involved in the organisation. The pastoral service has its own specific premises and professionally trained human resources, and adequate funding.

The Brothers and Co-workers are particularly concerned to give their work a pastoral perspective which is mainly evidenced in the way they care for the spiritual and

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9 CoH 5.1.
10 CoH 5.1.3.2.
religious dimensions of the people they serve, and their needs, and how they put their pastoral principles and criteria into practice in tangible terms.\textsuperscript{11}

This sector involves the Brothers, the Sisters, the chaplain, the pastoral team and everyone else, workers and volunteers alike, who wish to offer their own specific contribution in the name of their faith.

3.2.2. Guidelines

“Pastoral care means evangelizing by accompanying people who are suffering, offering them the Good News of salvation through our words and our witness, just as Jesus did, but always fully respecting the beliefs and values of each person.”\textsuperscript{12}

The pastoral or spiritual and religious assistance service is intended to meet the spiritual and religious needs of the guests, the staff and anyone else involved in the work of the Centre in any way, “taking a broad approach to evangelisation, which is not necessarily nor exclusively of a Sacramental nature. It is ecumenical pastoral care, open to religious pluralism and capable of providing spiritual accompaniment in the broadest sense of the term, regardless of the faith or religious convictions of the people concerned.”\textsuperscript{13}

Pastoral work must be performed as part of the more general strategic plan of the Centre, with a specific project containing all the necessary indications, and which can be appreciated by the other professionals. Sound programming makes it possible to organise the pastoral care service, harmonising it with the other services available in the Centre, and responding with professional competence.

What sets the pastoral carers apart is their attitude of love towards their neighbour which becomes readiness to serve, generosity, welcoming, listening and sharing. These features not only emerge as a result making a serious effort to develop them personally, but they are also the fruit of the Spirit and, as such, must be invoked as a gift from our Father in heaven.

3.2.3. Further information and inputs

- The Charter of Hospitality: Chapters 1-3; 4.6.; 5.1.3.; 5.3.6.5.;, and 7..
- The Constitutions: 50-52
- The 2006 General Chapter. Priorities and proposals; the Mission of the Order 2.E.
- The Order's document on Pastoral Care 2011
- The General Commission on Pastoral Care
- \textit{Dizionario di Teologia Pastorale Sanitaria}, Ed Camilliane
- Comolli-Monticelli, \textit{Manuale di pastoralie sanitaria}, Ed Camilliane
- Rivista \textit{Dolentium Hominum}

\textsuperscript{11} CoH 3.2.2.
\textsuperscript{12} CoH 5.1.3.2.
\textsuperscript{13} Father General’s circular, 25 December 2006
3.2.4. A&E in the Provinces

This section must be completed by each Province.
Who are the people to be contacted in relation to this issue?
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3.3 Ethics

3.3.1 Ethics

The Hospitaller Order of Saint John of God has, as its main purpose, the comprehensive care of people suffering from any kind of sickness or marginalisation. And this is always done respecting each person's dignity and freedom, seeking at all times the highest level of quality in the care provided, and in teaching and research. Professionalism, the use of the best available scientific and technical facilities, coupled with an excellent level of humanisation and quality, form the essential basis for performing the Order's mission.

3.3.2 Guidelines

The phrase we are currently passing through is extremely complex: there are increasing conflicts of values, particularly in the fields of health care, welfare and social care, as well as in the field of biomedical research, and ever-increasing problems and ethical dilemmas are emerging which require us to reflect very carefully on them, to adequately respond to them in ethical terms. These are conflicts relating to the initial phase of life, from the moment of conception to natural death. Others have to do with the sphere of mental health and physical and mental disabilities, the chronic sick, the excluded, and the elderly. In biomedical research there are frequent conflicts regarding respect for life, and human dignity and freedom. We are also faced with ethical problems with regard to the management, proper distribution and use of our resources, which are usually in very short supply. Then there is a whole long list of ethical and bioethical conflicts which are increasingly confronting our Centres and facilities, directly relating to the Institution as such, but also and above all, the people involved: the Brothers, the Co-workers, the sick, the guests and their families.

Mindful of this situation, the Order is reflecting, guiding and advising all those involved in any situations that give rise to ethical conflicts and those with which it comes into contact, in order to be able to jointly work out the most appropriate responses. Implementation of ethical principles based on fidelity to the Magisterium of the Catholic Church, as an Institution of the Church, therefore on the principles and fundamental guidelines set out in the Order's Charter of Hospitality (Rome, 1999), in addressing the real-life situations in which people find themselves, and through
interdisciplinary ethical dialogue (theological-moral, healthcare and behavioural sciences legislation and law, users, etc).

More than 30 years ago, the Order set out to encourage the establishment of Care Ethics Committees in our Centres to address all the ethical dilemmas that may emerge in the Centres, in addition to setting up Clinical Research Ethics Committees, to address matters specifically falling within their sphere of competence in the field of biomedical research. Even though many of these Committees are already present throughout the Order, we must continue to urge their institution in the Centres where they are not yet present.

The Care Ethics Committee is an advisory and interdisciplinary body, serving the health workers and the guests, established to analyse, reflect on and provide consultancy on matters of an ethical nature that may arise in the course of our care work, taking account of all the aspects which, together with scientific and technical criteria, may infringe the human rights of the sick and all those who use our healthcare services, as well as social, personal and institutional values, with the final aim of improving the quality of the comprehensive care provided to patients.

The Ethics and Clinical Research Committee is required to contemplate all the methodological, ethical and legal aspects involved, as well as the risk/benefit ratio, in the clinical protocols proposed in its particular field, in order to guarantee the protection of individuals participating in clinical trials, and the quality of research conducted on human beings.

The introduction of these Committees – the Care Ethics Committee and the Clinical Research Ethics Committee – is an ideal model that should be fostered throughout the Order. Yet every Province and every Centre in the Order should also comply with the legislation that every country and/or region lays down in this area, seeking at all times to respond adequately to both these ethical aspects.

It is obviously very important to focus on the major ethical conflicts that emerge in the performance of the Order's mission, such as abortion, problems relating to sexuality and procreation, organ donation and transplants, euthanasia, restricting treatment and administering futile treatment, conscientious objection, the problems raised by research on human beings and others relating to the mentally ill and chronic sick. The Order therefore considers it essential to encourage excellence in the field of ethics, which is closely bound up with the performance of its mission, and we define as ‘Hospitality’. In all we do, in our care work, research or management, from the simplest to the most complex things, we must always act in compliance with the values and ethical principles that underpin the Order.

To behave consistently with the project and mission of our Institution, in ethical terms, it is essential to encourage ethical and bioethical formation for the Brothers, Co-workers and Volunteers in our Centres, laying down the most appropriate programmes for them with the most appropriate methodology and with all the resources that are required.
3.3.3 Further information and inputs

- The General Statutes of the Order. See the Order's web page on: www.ohsjd.org especially Nos. 48-50; 87.
- The New Evangelisation and Hospitality at the Portals of the Third Millennium. Bogotá 1994. See the Order's web page on: www.ohsjd.org. Especially nos. 3.6.3; 4.3; 4.44; 5.6.3.
- The General Bioethics Commission. See the Order's web page on: www.ohsjd.org. Especially the Commission's framework document and all the documents it has published.

3.3.4 A&E in the Provinces

This section must be completed by each Province.
Who are the people to be contacted in relation to this issue?
How and where can we find information materials in the Province on this issue?

3.4. Charismatic Management

3.4.1. Charismatic Management

It might appear strange at first sight to combine the two terms in the words charismatic" with "management", considering them to be mutually incompatible. The adjective "charismatic",\(^{14}\) with its powerful spiritual and religious overtones, might seem at odds with the substantive "management" which recalls the cold and rational language of economics. What does the Hospitaller Order of Saint John of God understand by this expression, then? The answer is to combine an efficient and sound style of management with the values of the Order: hospitality – quality, respect, responsibility and spirituality.\(^{15}\) In order to avoid misunderstandings it should be made clear at once that charismatic management is not a managerial model specific to the corporate world, but is a style of management peculiar to the Order. Charismatic management must at all events be based on efficient and professional management, and the managerial model chosen is of secondary importance.

\(^{14}\) “Charisms: gifts and skills which the Spirit of God operates within Christians to serve the community”, Duden, Dizionario dei Forestierismi, Mannheim 1997

\(^{15}\) Cf. Bro. Donatus Forkan, Circular Letter, The Order's Values, February 2010; see also the glossary.
3.4.2. Guidelines

The concept of efficient management is often associated with the negative image of business oriented purely towards profit, ignoring people. This may often be the case, and unfortunately it is. However, we must avoid “throwing out the baby with the bathwater”, by indiscriminately demonising all management theories. An example from the Bible, the parable of the shrewd steward, can help us to understand this aspect better.\textsuperscript{16} This parable, speaking by analogy, says that Christians can and indeed must learn from the business world (from the children of this world) provided that they place what they have learnt at the service of the good cause. Applying this to us, it means that we must place knowledge about modern management at the service of hospitality. Efficient management, even though it may sometimes not be convenient, cannot be accused of indifference or immorality if our objective is to offer a better service to the sick and needy. But there is also another important aspect of charismatic management: it enables our Centres and our services to retain both the warmth and the fascination of a family-run business, while operating the latest managerial structures.

We are obviously speaking about a highly ambitious aim which can only be achieved thanks to teamwork and an interdisciplinary approach, because management presupposes a complex set of duties, rules and expectations. Management also has the task of constantly contrasting the actual position in terms of the programmed objectives, in order to guarantee the highest possible level of compliance with St John of God's ideals.

The life of the Brothers of St John of God (The Life of the Brothers) and the main features of the management of our Centres (The Mission of the Order) are defined in terms of their main characteristics in the Constitutions and in the General Statutes of the Order. These documents are therefore extremely important for the "St John of God Family". The Constitutions, on the subject of management, say that, "The administration of property must be carried out to the advantage of the sick and those in need, in conformity with the laws of the Church, our Constitutions and General Statutes, and the just laws in force in the different countries" (no. 100). It follows from this that our management rests on three pillars:

- It must focus on the good of the people we care for
- It must be directed towards the Magisterium of the Church
- It must comply with just laws in force in every country.

These three pillars stand on a common foundation - "transparency": transparency within (Brothers and Co-workers) and transparency without (provincial government and general government, governmental authorities, insurance companies, donors). The Church and its organisations cannot complain about mismanagement and corruption practised by others while at the same time being indulgent towards, or even concealing the very errors they are denouncing in others. When the Order speaks of excellence, quality and models, this is obviously a primary reference to care and treatment, but the same criteria must also apply to organisation and management.

\textsuperscript{16} Cf. Lk 16, 1 - 13
Five principles stem from this, and are examined in chapter 4.4 of the Charter of Hospitality:

- We must be aware that health care has a cost, and create a corresponding awareness of this in the people.
- We must effectively and efficiently manage resources by using high-quality management tools and quality control techniques.
- The key feature of our Centres must be the holistic approach we take to the human person, namely, the person considered as a whole.
- We have to create a human climate which increases not only the return on our resources, but also has a positive influence on our quality of care.
- We have to consider the rights and duties of the labour force.

With these preliminaries in mind, the following diagram offers a graphic representation of the way Charismatic Management functions.

Closer analysis of these four elements shows that technical expertise and the ethical profile form part of the so-called hardcore criteria, while the human profile and the religious dimension rather belong to the soft-core criteria. This simple fact shows that all four elements must complete and complement one another.

Let us briefly examine two horizontal elements: technical expertise and the human profile. True quality is not only a matter of professional skills; it also needs the human profile. It is only when technical expertise is supplemented by an adequate human profile that real quality is achieved.

The same applies to the two components "the ethical profile" and "the religious dimension". Ethical standards laid down by the State generally fail to meet up with our needs as a Catholic institution. Government ethical standards are usually society's minimum common denominators. This is why the Brothers of St John of God often go further than the general ethical profile because we know that hospitality springs from a special responsibility (the religious dimension). The two classic examples are euthanasia and abortion. But from the ethical point of view, the Order is not only
interested in these major burning issues, because there is a whole area of daily ethical practice that concerns the Order. Here are two examples that sum them up: the fair distribution of resources and respect for human dignity in every area of care. We might also define it as Christian charity (the religious dimension).

Let us look at everything in terms of the vertical line beginning with the relationship between technical expertise and the ethical profile. Pure technical expertise without the ethical profile may well lead to degeneration. Furthermore, ethics cannot only be governed by the heart, but also needs specific technical competence. The same applies to the human profile which is certainly a fundamental criterion for the identity of every Brother of St John of God Centre. But the human profile also runs the risk of becoming pure and simple "sentimentalism" if it is not upheld by a religious dimension focusing on the likeness of man to God. The religious dimension itself needs the human profile in the sense of reaching out to others, because otherwise it runs the risk of becoming empty pietism. In theological terms, let us remember that the main commandment of the Christian faith is love God and love your neighbour.¹⁷

Now let us look at the diagram diagonally. Technical expertise is complemented in the religious dimension, and vice versa. A key element in this relationship is respect for human dignity. The human profile and the ethical profile also complete each other. Everyone can discover the implications here on the basis of the examples mentioned earlier.

If any single component in this diagram predominates over the others, or is crushed under the weight of the others, there can be no Charismatic Management because Charismatic Management comes about precisely as a result of balancing these four elements. It is only when these four elements interact and are integrated and mutually complete one another that we can talk about successful Charismatic Management. The graph can also be used as a kind of litmus test to guarantee the level reached by Charismatic Management.¹⁸

Another matter that is often ignored when addressing Charismatic Management is the question of relations with trade union representatives, an issue that is certainly not tension-free in the Order's Centres and services. We must recognise that trade union representatives are the legitimate representatives of our co-workers, but at the same time they must avoid acting solely or overly ideologically. In the Brothers of St John of God's Centres trade union representatives must also feel that they are bound to support the ideals of the St John of God Family, and primarily the guests, who are our core concern. The interest of the trade union representatives must therefore not only be to defend the interests of the people they represent, but as members of the St John of God family they are also responsible and under an obligation to consider all just interests, growth opportunities, and the needs of the Centre or service as a whole. In exchange, the management of every Centre must demonstrate outreach and sensitivity towards the just interests of the Co-workers. This attitude must also emerge spontaneously as a result of everyone realising their membership of the St John of God Family.

¹⁷ Cf. Mt 22, 34–40
¹⁸ The appendix contains three practical examples of the way Charismatic Management is applied by the members of the St John of God Family in daily life in a Brother of St John of God Centre. The three examples are designed to stimulate discussion and can obviously be expanded upon.
To sum up, we might say that Charismatic Management "works" when there is a balanced relationship in any Centre or service between technical expertise, the human profile, the ethical profile and the religious dimension, and when this balance produces substantial satisfaction on the part of the guests and the workers.

The English word “management” comes from the Latin “manus agere = getting to grips with”. This root enables us to interpret the term much more broadly and usefully because all of us are called to "get to grips" with Charismatic Management by supporting it and fostering it. In other words, charismatic management is not only the task of the Centre's management, but of everyone there.

3.4.3. Further information and inputs

- The Order’s Constitutions. See the Order's web page: www.ohsjd.org
  Especially:
  nos. 20 and 24 on Hospitality in the manner of our Founder
  no. 44 on the sense of our Apostolate
  no. 45 on the beneficiaries of our mission
  nos. 46 and 49 on the style and forms of Apostolate
  no. 51 on Hospital pastoral care
- The Order’s General Statutes, see the Order's web page: www.ohsjd.org
  Especially:
  nos. 18 and 19 on Hospitality in the manner of our Founder
  nos. 20 - 30 on Co-workers in the Order
  nos. 46 and 55 on the community of apostolic service
  nos. 162 and 164 and 167 on the management of property
- The Charter of Hospitality, see the Order's web page: www.ohsjd.org
  A copy of the document (if available), can be provided to your Centre or service upon request. If your centre or service has a library, the document can certainly be consulted in printed format.
  The following paragraphs are particularly relevant:
  4.1. The dignity of the human person
  4.2. Respect for human life
  4.4. Effectiveness and good management
  5.3. Management
  With regard to ethics and pastoral care:
  5. Application to real-life situations
  7. Personal uprightness as the basis for action
  8.3. Human-divine vitality of the Charism of hospitality
- The Path of Hospitality in the Manner of St John of God, Rome 2004
- Benedict XVI, Deus caritas est, Rome 2005
- Benedict XVI, Caritas in veritate (Social Encyclical), Rome 2009
- The strategic plans of the Centre or Service
- Certification documents and quality control documents
3.4.4. A&E in the Provinces

This section must be completed by each Province.
Who are the people to be contacted in relation to this issue?
How and where can we find information materials in the Province on this issue?

3.5. Formation/training and research

3.5.1. Formation/training

3.5.1.1. Formation/training

Everyone knows the saying, "Everyone knows the price of things but few know their true value". Basic and continuing formation/training have a price and a value. It is decisively important to invest in basic training and continuing training, but this investment must not only be made by the Centre or the service because the individual operator must also invest in his or her own formation/training: firstly, they must be ready to undergo training and take refresher courses, and secondly they must apply the new knowledge they acquire and hand it on to others. It is therefore obvious that basic and continuing training are of great value to everyone.

3.5.1.2. Guidelines

Investing in basic and continuing formation/training is a constituent part of the Order’s tradition. Our Founder, St John of God, journeyed all the way to Guadalupe to learn the necessary professional know-how.19 The Order’s Centres have always had institutions providing vocational training. Antón Martín, the first successor of St John of God, demonstrated a particular sensitivity to formation and teaching when, in 1553, he set up the first school for surgeons in Madrid.20 This tradition has remained unchanged to this very day with the continuing establishment of more new training centres. The latest example is the school for psychiatric nurses founded in 2010 in Malawi/Africa.

The Order is dedicated to basic and continuing education and training for the primary purpose of more firmly entrenching its whole raison d'être; secondly for the advancement of the human resources; and thirdly to offer a comprehensive range of training opportunities. For the Order, training can never merely refer to technical and professional aspects alone. According to the philosophy of charismatic management, training must also promote specific human, ethical and pastoral skills and competence. It is important for our Co-workers to be ready to take up whatever training opportunities are available. Another factor which is becoming increasingly more important in our post-modern age is transmitting the Order's values to the Co-workers. This is why the

19 Javierre José María, Juan de Dios – Loco en Granada, Sigueme, Salamanca, 1996
20 Plumed Moreno C., “Jornadas Internacionales de Enfermería” San Juan de Dios, Madrid 1992
Order has established the “Schools of Hospitality”. The Order has also published a Co-workers Formation Manual which, to a certain extent, can be equated with a full syllabus containing the most important curricula items. The book is designed for all Co-workers, in terms of the three at levels which, according to no. 22 of our General Statutes, the Co-workers can link into the Order’s Charism, spirituality, and mission:
- Through their professional work, well done;
- Through their endorsement of the Order’s mission based on their own human values and/or religious convictions;
- Through their commitment to the Catholic faith.

3.5.1.3. Further information and inputs

- The General Statutes of the Order, see the Order's web page: www.ohsjd.org
  Especially: nos. 20 - 30 on Co-workers in the Order
- The Charter of Hospitality, see the Order’s web page: www.ohsjd.org
  Your centre or service can also obtain a copy of this (if one is available) upon request. If you have a library it will certainly be possible to consult it in book form.
  See in particular:
  6.1. Formation/training
  6.2. Teaching
- Co-workers’ Formation Handbook, Rome 2011
  Your centre or service can also obtain a copy of this (if one is available) upon request. If you have a library it will certainly be possible to consult it in book form.
- Certification documents and quality management documents
- Literature on the history of the Order (the works should be indicated by the Provinces, giving the titles in their respective languages)

3.5.1.4. A&E in the Provinces

This section must be completed by each Province.
Who are the people to be contacted in relation to this issue?
How and where can we find information materials in the Province on this issue?

3.5.2. Research

3.5.2.1 Research

There was a time when people acquired knowledge and made progress by trial and error. But this causal-based method was soon abandoned, and replaced by serial experimentation. This gave rise to modern scientific research. Since the Order has always interpreted its commitment in the world of healthcare and social welfare work as a comprehensive commitment considering every aspect, it has also
invested in research, even though the focus of its work has always remained the provision of care. Commitment to research from the Order's point of view is therefore something to be advocated, but it is not a duty incumbent on every Centre.

3.5.2.2. Guidelines

Since research does not form a direct part of the Order’s main mission, there is some doubt about the sense of its financial commitment to research. It is obvious that resources devoted to research cannot be "deducted" from the patients or guests, but it must not be forgotten that the advances in research are to the benefit of the patients and guests. Since the Order's commitment is to improve the situation of the guests and patients from every point of view, based on this concept of comprehensive quality (see the Order’s Values), as far as possible it also dedicates its efforts to research. It is obvious that in the matter of research, particular consideration must be given to the values of respect and responsibility (cf. The Order's Values), particularly when defining contents and research methods.

Within the Order, "research" is too often reduced merely to biomedical and pharmacological research. But this does not reflect the tradition and wide range of activities within the Order. Our Centres and services must therefore also be receptive to research projects in the fields of nursing, geriatrics, education and teaching, psychology, ethics and, not least, pastoral care.

3.5.2.3. Further information and inputs

- The Charter of Hospitality, see the Order's web page: www.ohsjd.org
  Your Centre or service can also obtain a copy of this (if one is available) upon request. If you have a library it will certainly be possible to consult it in book form.

  See paragraphs:
  6.2. Teaching
  6.3. Research

- Literature on the history of the Order (titles should be indicated by the Provinces in their own language)
- The Centre/Service’s strategic plans.

3.5.2.4. A&E in the Provinces

This section must be completed by each Province.
Who are the people to be contacted in relation to this issue?
How and where can we find information materials in the Province on this issue?
APPENDIX

1. **Practical examples for applying the charismatic management matrix (3.4.1.)**
Three practical examples will help to understand how Charismatic Management can be applied in daily practice in a St John of God Centre in both operational and personal terms by the members of the St John of God Family. The following questions can obviously be supplemented or expanded upon.

**Restructuring or reorganising a unit or a service**

**Technical expertise**
- Is account being taken of the new criteria (in medical, care, educational, psychological, geriatric terms) or is past practice merely being copied?
- Are architectural elements and decoration linked to improving treatment being considered?

**The human profile**
- What value is placed on an environment made to the measure of the guest?
- What value is placed on an environment made to the measure of a care worker?

**The ethical profile**
- Do the structural plans and furnishings respect the right to autonomy of the patients and guests?
- Is data confidentiality and personal privacy guaranteed?

**Religious dimension**
- Does everyone have access to chapels (oratorios, liturgical areas)?
- Are pastoral criteria taken into account when restructuring and reorganising?

**Handing over a unit of service**

**Technical expertise**
- Is accurate professional information handed over?
- Are the operators’ stress levels taken into account when organising shifts and distributing tasks?

**The human profile**
- Are the human and social needs of the patients and guests considered in addition to the technical and professional aspects?
- Are the relatives involved?
- Is space set aside for guests to express their emotions, fears and joys?

**The ethical profile**
- Is data confidentiality and privacy guaranteed?
- Do you discuss the ethical aspects that emerge in daily practice? Are they referred to the Ethics Committee?

**Religious dimension**
- Is the pastoral care officer routinely invited when handovers take place?
- Is all the necessary information forwarded to the pastoral team?
- Are pastoral elements considered, at least from time to time, when handing over?

**Personal continuing education plan**

**Technical expertise**
- Am I only interested in technical updating?
- Am I ready to address new topics or am I only interested in those I prefer?
The human profile  
Does my plan also take in my colleagues' justified expectations?

The ethical profile  
Do I engage in difficult ethical issues or do I hope that somebody else will do it for me? If

Religious dimension  
Am I interested in knowing about other religions and faiths?

2. Glossary

Charter of Hospitality
This document, which was published in 2000 by the General Curia, sets out and defines the identity of the Order's Apostolic Centres. Charismatic management is also described and given a basic definition in the Charter of Hospitality.

Constitutions
The Hospitaller Order of Saint John of God lives according to the rule of St Augustine. To codify particular needs, since it began its activities it introduced its own Constitutions setting out the constituent elements relating to the life of the Brothers and the mission of the Order. The Constitutions are drafted and approved by the General Chapter. See also General Statutes.

Corporate Social Responsibility
Corporate Social Responsibility (CSR) incorporating and showing ethical concern within the corporate strategic vision: it is the commitment by companies to make a greater contribution than is required by law to achieve sustainable development, such that it is a manifestation of the intention of small, medium and large business to effectively manage the social and ethical impact issues internally and within their areas of activity. See the European Union’s Social Corporate Responsibility Green Paper.21

Co-workers
Within the audit, the term "Co-Workers" is the expression of a basic attitude which sees the people working with the Order not as mere employees, but as co-protagonists, and as such co-responsible for performing the Order’s mission. The term "Co-workers" is also used in a very broad sense, to include not only the people employed in the Order's Centres but also volunteers and benefactors.

General Statutes
The General Statutes supplement and complement the Constitutions of the Order governing the way they are to be applied. They are written and approved by the General Chapter. See also the Constitutions.

Hospitality
The Brothers of St John of God not only take the three traditional vows of poverty, chastity and obedience, but also at the fourth: the vow of Hospitality.

But the Hospitality of the Brother of St John of God must not be understood in the ordinary sense of the term, but has to be interpreted in the light of the Bible and the tradition of St John of God. For the Brothers, the main key for interpreting Hospitality comes from the life of the Founder of the Order, St John of God. The Charter of Hospitality puts it this way, “His Hospitaller attitudes were surprising, disconcerting, but they acted as beacons to point the way to new paths of care and humanity towards the poor and the sick. He created from nothing an alternative model for the citizen, the Christian, and the Hospitaller serving those who were abandoned by all. This prophetic hospitality was a leaven of renewal in the world of care and in the Church. The model created by St John of God also acted as a critical conscience and guide to sensitize others to take up new attitudes and practise new ways of aiding the poor and the deprived.”

**Hospitaller Order of Saint John of God**
This is the official canonical name of the Order. The Order is made up of the Brothers and affiliated members. See also the *St John of God Hospitaller Family,*

**Humanisation**
Humanisation was already one of John of God's primary commitments, but had acquired a new and enriched significance and meaning thanks to the Humanisation document by the former Prior General, Fr Pierluigi Marchesi. The Order considers humanisation to be a style of care, treatment and rehabilitation, but also management, focusing around the person.

**Order’s Mission**
Religious Institutes today generally draw a distinction between the life of the Brothers (the religious life) and the mission of the Institute. While the “Life of the Brothers” Area refers to the Brothers’ spiritual and community life, the “Mission of the Order” refers to the actual service and apostolic mission of the Institute. We are all called to direct the mission to the signs of the time setting the poor, the sick, the elderly and the disabled at the centre of our concern. Our primary and original vocation, as Brothers of St John of God, is to offer an alternative care model following the example of our Founder, St John of God. The key to the model is to provide the type of care that is both highly professional and human, and brings people close to God. See also *Hospitality.*

**Order’s Values**
The 2006 General Chapter instructed the new General Government to provide a universal definition of the values of the Order. The General Council fulfilled this mandate in 2010 and in a circular letter in February 2010 the Prior General announced the Order’s chosen values: Hospitality – quality, respect, responsibility and spirituality. These values have been tailored to meet the different situations in the Provinces, and some of them also been published in specific folders.

*Hospitality* is our core value which is expressed and embodied in the four guiding values of equality, respect, responsibility and spirituality.

*Quality* stands for:
Excellence, professionalism, comprehensive service (holistic care and assistance), sensitivity to new needs, the model of our union with our Co-workers, St John of God's care model, welcoming architecture and furnishing, co-working with third parties.

Respect stands for:
Respect for others, humanisation, the human dimension, mutual responsibility between Co-workers and Brothers, understanding, a holistic vision, promoting social justice, involving family members.

Responsibility stands for:
Fidelity to the ideals of John of God and the Order, ethics (bioethics, social ethics, management ethics), respect for the environment, social accountability, sustainability, justice, fair distribution of our resources.

Spirituality stands for:
Pastoral service, evangelisation, a spiritual offering for members of other faiths, ecumenism, collaboration with parishes, dioceses, other faiths.

Quality management
This essentially refers to all the measures that are organised to improve products, processes and services of all kinds. Quality management is an essential task of management. In some countries quality management is a statutory requirement in healthcare establishments and social facilities. The most common quality management models are EFQM and ISO 9001.

Religious Life
A distinction is generally drawn today in Religious Institutes between the life of the Religious and the mission of the Institute. While the life of the Religious (the Religious Life) refers specifically to the spiritual and community life of the Religious, the mission refers to the actual service which the Institute performs.

St John of God Hospitaller Family
As a religious institution with juridical recognition by the Church, the Order and its Co-workers have established deep bonds across the ages. This is specifically documented in the second chapter of the General Statutes. All the individuals and groups who take their inspiration from the ideals of St John of God make up the St John of God Hospitaller Family.