History Of The Department Of Pastoral Care

Previous to the founding of the Department, the major denominations assigned a parish pastor or chaplain to the Clinic to call on patients who came from outside the greater Cleveland area. On January 1, 1961, the Department of Pastoral Care was founded, when the Reverend Bernhard A. Loeschen was chosen to become Chaplain. He had served for 25 years and had reached retirement age. He remained full-time until August 1, 1986 and worked part-time until June 1, 1987. In 1991, the department instituted the Bernhard Loeschen Pastoral Care Award to honor its first chaplain.

Over the years assistance has been provided through the Catholic Diocese of Cleveland, the Jewish Community Federation, the Greek Orthodox Church, and the Islamic tradition. The Clinic wanted someone to creatively expand the Department’s staffing and someone committed to interdisciplinary teamwork. The Reverend Ronald K. Morgan was chosen to fill that role and began his work on December 8, 1986.

The Administration made a strong commitment to the development of the Department with the intent to increase the size of the department, develop an advisory committee, increase interdisciplinary teamwork, develop an accredited CPE program, and improve relationships with area clergy.

In February of 1988, the Foundation received its Candidacy for Accredited Membership and began immediately to recruit students for programs of Basic and Advanced CPE. In 1990, full accreditation was granted for Basic, Advanced, and Supervisory CPE.

The Rev. Patrick M. Persaud became the Director of CPE in October, 1988. Five stipended Chaplain Resident positions were established beginning in September, 1988, and the first unit of CPE began at the Foundation on September 5, 1988. Rev. Persaud began the supervision of residents in December and Rev. Morgan supervised the first class of extended part-time Chaplains. In 1991, two women became the program’s first Supervisory CPE students.

In October, 1988, the department began to have a chaplain on duty 24 hours a day, seven days a week. The program has been so well received by patients, families, and staff that sustaining the CPE program became an essential priority. Chaplains respond to all deaths, triple pages and referrals, conduct up to seven worship services each week, offer crisis intervention and memorial services to staff at the time of an employee death, and in 1991, began assisting patients with Advance Directives for their health care. Chaplains serve now on several key Foundation committees. An annual employee prayer breakfast was innovated in 1989 with the cooperation of the Office of Professional Staff Affairs. Since 1987, there has been an annual National Pastoral Care Week schedule of activities. In 1991, the Department conducted its first Pastoral Care Grand Rounds for CCF.

Since 1992, as many as 25 students are completing as many as 46 units of CPE annually. In 1998 the Rev. Ron Morgan retired. The Rev. Patrick Persaud was named Director of the Pastoral Care Department and a search was begun for a Coordinator of Clinical Pastoral Education. The Rev. Elizabeth H. Price joined the staff in February, 1999, and left at the end of August. The Rev. Nancy Dietzsch began work with CCF in February, 2000 but resigned in August, 2001. The Rev. Jon C. Paulus, who had done his CPE at the Clinic, was invited to join the staff and came on as a Staff...
Chaplain on September 1, 2002. He resigned in May of 2006. The Rev. Patrick Persaud retired in August, 2006 and the Rev. Dennis Kenny became the new Director of Pastoral Care.

Much can be said about the success of the Pastoral Care Department and the CPE program at CCF. The CPE program continually fosters the spirituality of staff by the fact that Pastoral Care Services are integrated into clinical, educational and research areas of CCF. The CPE program, in its one, three and five-year vision, routinely benchmarks itself to address emerging community and health-care needs that its residents and interns will be addressing in the future. By anticipating such needs through trends analysis, the CPE program revitalizes itself quarterly and annually, thereby maintaining its relevance as a market provider in such areas as in-patient care, hospice, home care and pastoral referral ministries.

The CPE program in its unit structure consistently develops leadership characteristics of its residents and interns as part of its objectives and expectations to meet emerging trends of pastoral leadership vacuums in institutions. The CPE program routinely engages in Improving Organizational Performance projects for customer satisfaction and customer loyalty, through data collection and survey analysis. Out of this process, the pastoral care givers of the department have been able to create partnerships with patients, family and staff to ensure the delivery of holistic care defined by patients perceptive of their personal and spiritual needs.

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