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The Faith Community Person-Centered Workgroup of the Coalition to Transform Advanced Care (C-TAC) established the groundwork for a movement to improve how faith communities and stakeholders (health systems, health plans, clinicians, and researchers) work together to care for our sickest and most vulnerable people. This blueprint is intended for faith communities and stakeholders to use to develop stronger partnerships, work together more effectively, and change advanced care delivery to be more person-centered more quickly.

The Workgroup

- Is rooted in the faith community, reflecting the centrality of faith for so many in the experience of advanced illness and in dying as well as the faith community’s mission and ability to reach the sickest and most vulnerable.
- Puts ubuntu at center. To practice the South African principle of ubuntu, is to grasp one’s own humanity by recognizing others’ humanity. People need each other to be fully human.
- Acknowledges that partnerships must build new paradigms to achieve change.

The Blueprint

Follow Engagement Principles
- Start right (understand context).
- Understand church decision processes.
- Develop common goals.
- Build in sustainability.

Build Trust
- Affirm your individual and group identity (and reaffirm over time).
- Develop a shared vision.
- Shared decision-making.

Develop New Care Paradigms
- New paradigms are required. Ubuntu stands in contrast to the common philosophy of rugged individualism, an American cultural product of the frontier.
- Learn from successes:
  - Alameda County Care Alliance
  - Pastors4PCOR
  - Congregational Health Network (in Memphis and Winston Salem)

The Future

The workgroup emphasizes that transforming advanced care is a movement, not merely a project with an endpoint. And, all movements are messy. So, the model is iterative. With the blueprint above, partners can come to understand one another, find common goals, and develop new paradigms for advanced illness care.

C-TAC thanks all those who are part of this movement. Together with the workgroup we encourage all partners to use the model and revisit it throughout your work. Likewise, the workgroup will continue to refine the model.