

Andrew Fergusson draws out five 'service standards' from the parable of the good Samaritan

Hallmarks for Healthcare

The Parable

And behold, a lawyer stood up to put him to the test, saying, 'Teacher, what shall I do to inherit eternal life?' He said to him, 'What is written in the law? How do you read?' And he answered, 'You shall love the Lord your God with all your heart, and with all your soul, and with all your strength, and with all your mind; and your neighbour as yourself.' And he said to him, 'You have answered right; do this, and you will live.'

But he, desiring to justify himself, said to Jesus, 'And who is my neighbour?' Jesus replied, 'A man was going down from Jerusalem to Jericho, and he fell among robbers, who stripped him and beat him, and departed, leaving him half dead. Now by chance a priest was going down that road; and when he saw him he passed by on the other side. So likewise a Levite, when he came to the place and saw him, passed by on the other side. But a Samaritan, as he journeyed, came to where he was; and when he saw him, he had compassion, and went to him and bound up his wounds, pouring on oil and wine; then he set him on his own beast and brought him to an inn, and took care of him. And the next day he took out two denarii and gave them to the innkeeper, saying, "Take care of him; and whatever more you spend, I will repay you when I come back." Which of these three, do you think, proved neighbour to the man who fell among the robbers?' He said, 'The one who showed mercy on him.' And Jesus said to him, 'Go and do likewise.' (Luke 10: 25-37 RSV).

The parables of Jesus generally make a single point and we should beware of reading too much into the details. In the case of this parable, however, it is recorded in only one Gospel - that of Dr Luke. Luke's account would have been informed by his outlook as a professional. It is possible, therefore, to discern a secondary meaning - permanent principles that, according to Luke, are hallmarks for healthcare.

Jesus tells the parable to a lawyer who gets the answers to his first questions correct with the two 'Great Commandments': 'You have answered right'. But Jesus goes further: 'Do this, and you will live'.

The lawyer now feels threatened and has lost face too. There's no way he can qualify love for God ('with all your heart, and with all your soul, and with all your strength, and with all your mind' draws on Deuteronomy 6: 5) but maybe he can regain credibility by establishing limits on neighbourliness. It's in answer to his supplementary 'And who is my neighbour?' that Jesus tells the parable.

Comprehensive compassion

But a Samaritan, as he journeyed, came to where he was; and when he saw him, he had compassion...

A traveller has been mugged. We are told nothing of him beyond his sex. He is just 'a man' left 'half dead'. 'By chance' a priest comes along, perhaps having spent a week in the Temple serving God. Now is his big chance to serve his fellow man, but 'when he saw him he passed by on the other side'. We don't know why. It may have been fear of falling victim or of ritual defilement by a dead body.

'Likewise' we know no more about the Levite - although as a Temple servant, he may have had the same motivation. Jesus has really wound up the audience. Who's going to be the good guy?

Probably, most are expecting a Jewish layperson in a story with an anti-clerical point.

We would need to live among ethnic conflict, with hatred in a divided community, to appreciate what follows. When Jesus says 'But a Samaritan . . .' there would have been outrage. 'Who is my neighbour?' was common in theological debate. For Jews, neighbour was fellow Jew or full proselyte. Pharisees excluded tax collectors and sinners. But that the real neighbour should be a Samaritan . . . !

He was the one who 'had compassion' and it is with compassion that healthcare should begin. The English roots mean 'to suffer with'. It's strong feeling for our fellow man, pity or mercy for others, sorrow for the sufferings of another.

In healthcare, compassion has to be more than a subjective feeling. It has to be objective, with a practical outcome. Who do you show compassion to? You show it to your neighbour. And who is my neighbour? Well, that's where we came in. The whole point of the parable is to make us sensitive to the responsibility placed on us by the need of any other human being. The compassion foundational for healthcare is comprehensive. There should be no limits to love for neighbour, and this is healthcare's first hallmark.

Costly commitment

and went to him...

The Samaritan first had compassion, then 'went to him'. This involved risk. The figure might have been a decoy, intended to lure others, but his compassion moved him. Compassion in healthcare takes action. It requires commitment. But we need to recognise the cost. If truly committed to comprehensively compassionate healthcare, we will certainly as individuals face financial cost.

KEY POINTS

Jesus' parable of the good Samaritan only occurs in the Gospel of Luke the Physician. In it, as well as answering the lawyer's question, 'who is my neighbour?', the Lord gives us five hallmarks for healthcare which we will do well to apply as Christian doctors today: comprehensive compassion, costly commitment, conscientious competence, continuing care and Christ's commendation.



Photo: Wellcome Trust Photo Library

Salaries for many will be higher in other walks of life. Whole nations responding would face even greater health bills than those they are not coping with now! We will face pressures on family life, may face physical risks of infection, may even lose our lives.

Counting the cost is a biblical principle, and again it is Dr Luke who reports the words of Jesus: *'Suppose one of you wants to build a tower. Will he not first sit down and estimate the cost...?'* (Luke 14: 28)

Conscientious competence

and bound up his wounds, pouring on oil and wine...

The Samaritan did the right things. They may seem quaint now, but oil and wine then were state-of-the-art. He did the best he could given the knowledge of his day, and the resources available. This conscientious competence is still vital today. Conscientiousness is a hallmark of all Christian service:

Whatever you do, work at it with all your heart, as working for the Lord, not for men...It is the Lord Christ you are serving. (Colossians 3: 23-24)

So, even if limited by resources, we must serve as best we can – we must be conscientious. But we must also be competent. We must perform as well as any in our specialty. Western medicine has rightly become concerned with quality. In the UK we may resent yearly appraisal, governance, and re-accreditation, but we must endorse them.

Christ was a carpenter who made tables and chairs well. We are doctors – we must work as well as any similar colleague reasonably could. We must show conscientious competence.

Continuing care

then he set him on his own beast and brought him to an inn, and took care of him. And the next day he took out two denarii and gave them to the innkeeper, saying, 'Take care of him; and whatever more you spend, I will repay you when I come back.'

We should beware reading too much into parables. It would be a mistake, for instance, to base transport,

accommodation and fiscal policies for a health service on this quote. However, there is clearly a concept here of continuing care. More words are spent on the chronic care than the acute situation.

No health manager purchasing care anywhere today would write a blank cheque to the provider. Even the richest nations face real challenges from the costs of continuing care. Emergency and intensive care are dramatic, glamorous, exciting – easy for fundraising and big budgets. The Cinderella specialties are the opposite, but patients in these categories matter every bit as much.

Down the years Christians have pioneered and maintained service in unpopular specialties. A God who longs passionately for justice and mercy wants his people to be wherever needed for as long as they are needed there. And that care continues appropriately until life reaches its natural end. At that point, those who die in Christ live in the new reality of John's vision: *'... God himself will be with them and be their God. He will wipe every tear from their eyes. There will be no more death or mourning or crying or pain, for the old order of things has passed away.'* (Revelation 21: 3-4)

Christ's commendation

'Which of these three, do you think, proved neighbour to the man who fell among the robbers?' He said, 'The one who showed mercy on him.'

'It is the Lord Christ you are serving'. (Colossians 3: 24). Is our motivation in medicine Christ's commendation, that 'Well done, good and faithful servant!' of Matthew 25: 23? Or is it rather to receive prestige and status, fame and fortune, that long list of honorary degrees? Are we doing it for office in the College? For honours or a knighthood? These rewards are not wrong but the lure of them can be a snare.

So, how sterling will our service be? What hallmarks will it show?

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My Shepherd

***The Lord is my Shepherd
I shall not want
(Psalm 23:1).***

Doctors are often impatient by nature. The pressures of over work and of life-threatening crises mingled with the subservience of our patients and high expectations of other team members, can lead to an arrogant and hasty approach to others, conducive neither to good patient care nor to a good team spirit. Tests of patience come in many guises: the intrusive 'phone call, the opportunist consultation ('while you're here, doctor'), the blocked drip or the over-booked clinic - we each have our own last straw. In time, we may learn to use each as an opportunity to run to the shepherd, choosing to stay close to him rather than running wildly out of control. Then we shall have daily exercises in seeing how he can, and does, lead us towards calmer waters. Then a more cohesive spirit will invade the team, patients will perceive a more restful attitude and we shall learn that when requests are made according to his will, he really does supply. I shall not want.

Extracted from a contribution by Janet Goodall in *The Doctor's Life Support* published by ICMDA/CMF