

Kansas Parish Nurses: Assessing and Addressing the Needs of the Chronically Ill and Their Families

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Kansas Parish Nurses: Assessing and Addressing the Needs of the Chronically Ill and Their Families

Executive Summary

The Kansas LIFE Project received funding from the United Methodist Health Ministry fund to engage Kansas parish nurses in a process of engagement, assessment and planning related to the role of parish nurses in meeting the needs of Kansans living with chronic illness. In this grant, the LIFE Project specified that the “primary outcomes” of the project would include “engaging parish nurses in envisioning action and prioritizing needs” and “generating recommendations for action.”

A central finding of the process comes in knowing that almost all parish nurses recognize the immensity of issues facing chronically ill Kansans, believe that there is a need for a parish nurse organization and agree that the organization needs to be staffed with professional and support staff. Further, there is great interest in having the staff site serve as a resource center, where parish nurses have access to a variety of resources. While the conversations of the day were repeatedly focused on meeting the needs of the chronically ill, parish nurses clearly value their functions in promoting health and wellness for all congregants.

With more than 1300 nurses in the database of the Kansas parish nurses, the realized and potential strength of these individuals is dramatically increased by strengthening the coordination and communication among the nurses, the congregations and the resources and opportunities that they have. The majority of parish nurses work few hours and without pay, and these two realities increase the need for staffing and coordination as critically important functions.

A central recommendation from the process is that funding be found to support both staff and resources to support and strengthen the work of the parish nurses and to focus their efforts on meeting the needs of the growing numbers of parishioners living with chronic illnesses.

The findings of this process come from the sharing of the participants in the planning process.

Major Findings and Recommendations Kansas Parish Nurses: Assessing and Addressing the Needs of the Chronically Ill and Their Families	
FINDINGS	IMPLICATIONS FOR ACTION
1. Kansas Parish Nurse Profile	
<ul style="list-style-type: none"> • Of the 91 participants in the planning process, 84% receive no salary for their work and serve as volunteers. Only one of the nurses receives a fulltime salary. • Fully 55% of the participants have been parish nurses for five or fewer years and only 1.5% have served for more than 15 years. • 61.5% of the participants work 5 or fewer hours per week in their role as parish nurses and only 8.5% work more than 20 hours per week. 	<p>The profile of parish nurses indicates the importance of staff function in maintaining and strengthening communications and education processes and in providing tools to support parish nurses in their work.</p>
2. Kansas Parish Nurses' Assessment of Needs of Chronically Ill Patients	
<ul style="list-style-type: none"> • Most parish nurses agree that chronically ill patients have multiple and complex needs that demand and deserve more services than they are prepared to give. • Needs of patients and families include medical, emotional, social and spiritual needs and parish nurses express concerns about their resources and areas of expertise. 	<p>Kansas parish nurses are well aware of needs and express a need for support in terms of meeting the many needs of chronically ill patients and serve in an important role to recognize and address these needs.</p>
3. Kansas Parish Nurses' Assessment of Preparedness: Strengths	
<ul style="list-style-type: none"> • Parish nurses note that their being available and offering one-on-one support are strengths of their ministry. • Provision of education, advocacy and support are critical to the work of the parish nurse. • Many parish nurses recognize that the support of the pastor is a major bridge to their work. 	<p>Kansas nurses rightly recognize the ministry that their presence offers to chronically ill Kansans.</p> <p>The support of the pastor is critical to successful parish nursing.</p>

<p>4. Kansas Parish Nurses' Assessment of Preparedness: Needs</p>	
<ul style="list-style-type: none"> • Almost all of the participants agreed that a lack of time, energy and money are key limitations to their ministries. • Many parish nurses recognize that the lack of support of the pastor is a major barrier in their work. • Parish nurses express a need for better tools and education in understanding and using interventions designed to support spiritual growth and spiritual issues, including prayer. • Parish nurses express concerns about their and the congregation's skills to work with people with mental illness. • Many parish nurses feel a need for tools to help with needs assessment and documentation. • Parish nurses often express a concern that people do not know who they are or what they do. 	<p>Kansas parish nurses consistently expressed their desire to more effectively minister to chronically ill and their need for staff, resource support and skills to do so.</p>
<p>5. Kansas Parish Nurses' Assessment of What They Believe Would Provide Most Support to Them in Their Ministries</p>	
<ul style="list-style-type: none"> • Parish nurses shared a clear consensus that staff and support services are critical to their ministries. • Parish nurses express a need for resources to support them, education and networking opportunities. • Parish nurses need more volunteers within their own congregations. • Parish nurses need support from pastors. 	<p>Because of the challenges faced by parish nurses, and the relatively few hours most parish nurses work, staff and support systems are critical. Prepared resources enable parish nurses to extend their presence and reach more people.</p> <p>Support from pastors is important to address and active engagement of pastors is critical to successful parish nursing.</p>

<p>6. Kansas Parish Nurses Assessment of Their Statewide Organization, Structure and Support Services</p>	
<ul style="list-style-type: none"> • Parish nurses agree that a strong statewide organization is important for them and that the state organization dramatically impacts the work of individual parish nurses. • Parish nurses clearly express a desire to find ways to fund professional staff (JoVeta Wescott) and support staff. • Parish nurses express their desires to increase both the resources available to them and their access to these resources • Parish nurses would like to better utilize the Internet and a website. • Health insurance for parish nurses is a need identified by some parish nurses. • Funding for basic equipment is important for many parish nurses. 	<p>Parish nurses clearly identify a need for a strong state organization and connect their individual effectiveness to the presence and support of a state parish nurses group.</p> <p>Kansas parish nurses express a clear need for resources – physical and cyber—and education.</p> <p>Parish nurses express a need for assessment and documentation tools.</p>

Recommendations for Action:

- Secure funding for and employ professional and support staff for the Kansas parish nurse organization. Specify specific functions for addressing needs of the chronically ill. Funding for staff will need to be secured before any of the other recommendations can be moved forward with significant strength.
- Create a statewide steering committee, with regional representatives, that will help:
 - Identify priorities for the role of the staff for the Kansas Parish Nurse organization in improving care to the chronically ill
 - Review the educational offerings and make suggestions of topics, locations, speakers, etc.
 - Identify resources available and assess resources needed.
- Under the leadership of the staff, adapt and/or create needs assessment and documentation tools to support the work of the parish nurses as they minister to chronically ill patients and families. Include assessment of physical, social, emotional and spiritual needs..
- Under the leadership of the staff, identify key strategies to engage and activate pastoral support for parish nurses, foster better pastoral understanding of needs of the chronically ill and support fuller understanding of the importance of pastor/parish nurse partnerships
- Create educational opportunities and tools to increase parish nurses' skills in addressing spiritual needs and issues.
- Strengthen the implementation of an orientation program for new parish nurses and include skills and tools for understanding and addressing the needs of the chronically ill.
- Explore tools and processes to make the work and role of the parish nurse more visible and better understood.
- Create a parish nurse resource guide that includes Internet and other resources.
- Explore opportunities for collaboration with other groups and resources.
- Create, train and maintain a statewide steering committee, with regional representation, that helps staff with outreach and engagement and shares the tasks of leadership.
- Explore organizational practices and strategies that support shared leadership, shared benefit and shared costs. (Include consideration of dues, contributions toward resources, etc.)

- Assure that needs of the chronically ill are well tended to within the parish nurse role.
- Develop skills and expertise in advance care planning and honoring of wishes.
- Develop and/or adapt curriculum, tools and materials about the needs of the chronically ill, resource materials to help meet the needs and best practices.
- Develop a strategic plan to engage parish nurses in ongoing training to strengthen ministry and outreach to those living with chronic illness.

Kansas Parish Nurses: Assessing and Addressing the Needs of the Chronically Ill and Their Families

Introduction

Purpose and Background

Though there is no common definition of what a parish nurse is or what a parish work does, there is a database of more than 1300 persons who are identified as parish nurses in Kansas. **This report examines the current successes, challenges, concerns, wishes and hopes of Kansas parish nurses, as reported by Kansas parish nurses, in their work with chronically ill persons and families.**

Early in 2005, after conversations with staff at United Methodist Health Ministry Fund (UMHMF), the Kansas LIFE Project made a grant proposal to engage Kansas parish nurses in a process of engagement, assessment and planning related to the role of parish nurses in meeting the needs of Kansans living with chronic illness. In this grant, **the LIFE Project specified that the “primary outcomes” of the project would include “engaging parish nurses in envisioning action and prioritizing needs” and “generating recommendations for action.”**

The grant called upon the LIFE Project to engage parish nurses in planning and assessment related to eight key questions, each of which is note in Table 1. The questions address the needs and challenges of the chronically ill; identify the strengths and resources that parish nurses have in responding to these needs; assess the challenges, needs and concerns faced by parish nurses as they work to be more responsive to needs; and, identify support and action that would enable parish nurses to more effectively address these needs.

Upon receipt of funding from UMHMF, the LIFE Project, working with Joveta Wescott, moved forward with a strategic process to engage parish nurses in assessment and dialogue about caring for the needs of chronically ill persons and their families.

Information Sources

All parish nurses were invited to a day of sharing and planning and 91 attended the all-day conference on July 14, 2005 in Wichita. The letter of invitation is included as Appendix 1. The list of participants is included as Appendix 2. The feedback in this report comes directly from the parish nurses who attended the July 14 meeting and was gathered via group discussion – in both large and small groups—and in individual surveys. A profile of the individuals in this group of parish nurses is given in Section 1 of the report.

The Report

This report is organized in sections, each reporting on an area of discussion, sharing and dialogue that the parish nurses engaged in on July 14.

Acknowledgements

The LIFE Project recognizes that this process would not have been successful with the generous support of UMHMF, the active participation of Joveta Wescott and the input and sharing of the 91 participants during the July 14 workshop and the several nurses who sent written comments. We also express thanks to the Wichita Black Nurses Association for their support in providing continuing education hours for nursing.

Table 1

Questions for Exploration Kansas Parish Nurses

- **What are the needs and challenges faced by chronically ill persons, their families and their faith communities?**
- **How may parish nurses and faith communities respond to these needs?**
- **What are the greatest challenges and opportunities faced by parish nurses in responding to needs of the chronically ill?**
- **How may these challenges be addressed and opportunities be maximized?**
- **What priorities do parish nurses identify in becoming better equipped to respond to persons and families living with chronic illnesses?**
- **What support and action would provide most empowerment to parish nurses as they work to meet the needs of chronically ill persons and their families?**
- **What outcomes will indicate progress in addressing and meeting needs of the chronically ill and their families?**
- **What are the current resources and what are the perceived needs for resources?**

Process

To reach the goals of this project, the LIFE Project, working with Joveta Wescott, developed and planned for a day of learning, planning and sharing to which all Kansas parish nurses would be invited.

The invitations to participate were mailed to the more than 1300 nurses in the Kansas parish nurse database. Appendix I includes a copy of the letter of invitation and information sent to all parish nurses.

On July 14, 2005, a full-day meeting was held in Wichita and 91 parish nurses attended and participated in this meeting.

This report is based on the feedback given by these 91 participants. Findings are reported in the following chapters of this report.

1. Kansas Parish Nurses' Profile

Major findings

- There are more than 1300 parish nurses in the Kansas parish nurse database
- The vast majority of parish nurses are fully volunteer, receiving no payment at all. Of the nurses responding to the on-site survey, 16% reported that they are paid for one or more hours per week. Of those who are paid for their work, 80% work 20 or fewer hours per week and 50% work fewer than 12 hours per week. See Table 2.
- Of the nurses responding to the on-site survey, 55% have served as parish nurses for five years or less and 45% have served for longer than five years. Twenty-two percent have served for 10 or more years and 1.5% have served longer than 18 years. See Table 3.
- Of the nurses responding to the on-site survey, 10% work for less than one hour per week. Nearly 1/3 work for 1-3 hours per week. Sixty percent of the parish nurses work five hours or less per week. Only .5% work more than 30 hours per week. See Table 4.

Table 2 Parish Nurses Paid and Unpaid	
Parish Nurses Paid	16%
Parish Nurses Unpaid	84%

Table 3 Number of Years of Service for Parish Nurses	
Parish Nurses serving five or less years	55%
Parish Nurses serving for 6-15 years	43.5%
Parish Nurses serving for more than 15 years	1.5%

Table 4
Parish Nurses Average Hours Per Week

Less than one hour per week	10%
One to three hours per week	31.5%
Four hours per week	10%
Five hours per week	10%
10 hours per week	8%
12-15 hours per week	12%
20 hours per week	10%
20 to 30 hours per week	8%
30-60 hours per week	.5%

2. Kansas Parish Nurses' Assessment of Needs of Chronically Ill Persons

The participants in the July 14 session identified the needs of chronically ill persons and their families. Table 5 has a complete list of needs that the group participants identified and the lists below identify those needs that were identified most often. Top tier priorities were identified by the highest number of nurses; important priorities by the second highest; and, all priorities in Table 5.

Kansas parish nurse assessment of the most critical issues faced by those who are chronically ill:

Top priority needs:

- Need advocacy with and for patients and family
- Need advocacy with healthcare providers and help in understanding medical information
- Need for resources and education
- Need for companionship
- Need for respite care for caregivers
- Need help to address spiritual issues
- Need for financial counseling and assistance
- Need to be listened to; to identify and address personal needs and wants
- Need good pain management

Important needs:

- Need for help with transportation
- Need help in compliance with medication
- Need social support
- Need knowledge of community resources
- Need affordable medications
- Need companionship and help in dealing with loneliness
- Need help with nutrition

Table 5
Needs of Chronically Ill Persons and Families as Identified by Participants
Random Order

- Explanations and information, discussing their disease/illness, in terms that they can understand
- Personal connections –especially when there is no family close by to make connections with or use as a resource
- Connection between pastor and congregation
- Need help asking for help
- Communications between all consulting physicians
- Help in sorting out what the needs are
- Identifying available community resources
- Someone to listen
- Someone to give a hug
- A coordinator of the family members
- Coordinator of transportation, meals, etc
- Respite care for caregivers
- A goal – reason to go on and a job to perform
- Someone to be able to contact 24 hours a day
- Love
- Handyman to do tasks or other help with simple tasks (changing light bulbs, etc)
- Financial support and resource identification (i.e., can they get prescription meds cheaper, etc)
- Information on medications and interactions
- Information on promotion of good health
- To talk about spirituality
 - Resolve unfinished issues
 - Feelings of helplessness/hopelessness
 - “Am I saved?”
- Forgiveness
- To know: “Is my loved one safe?”
- “People question their purpose on earth”
- Feeling guilty for being angry at God
- Needs assessment
- Ways to meet spiritual needs
 - Mass at home
 - Communion at home
 - Bible study
- Acceptance of their situation/illness
- Validation of their feelings
- Family as a whole needs permission to help – accept the change in roles
- Diversion or entertainment and humor to help change focus from the negative impact of the illness
- “What happened to all those people who said they loved me?”

- Herbal medications and alternative therapies – what are the options and the implications of their use
- Caregivers need to know their limits and where to go for help
- Someone to talk to about death and dying
- Help in dealing with denial
- Praying with the dying and supporting the family
- Permission to die
- Someone to ask: “What are YOUR 3 wishes?”
- Someone to ask: “Who would you like to help you and who would you not want to come here to help you?”
- Write their own obituary/life story
- Make a list of people to call when there is a death
- Visit with the caregivers of Alzheimer’s patients
- Permission to laugh
- Good nutrition
- Adequate information from physician regarding illness – what to expect long term

Social Support

- Knowledge of community resources
- Advocacy
- A Listener
- Transportation
- Affordable medication
- Need for trained caregivers
- Financial assistance
- Responding to spiritual needs and wants
- Doctors who will listen
- Recognition/communication by their pastor
- Letting them know we are here for them and we can help and we want to help
- Dealing with loneliness
- Physical exercise
- Understanding normal aging and illness
- Need for education in own language
- Knowing how to access resources and information
- Grandchildren caring for grandparents
- Compliance with medication
- Dealing with denial
- Dealing with spirituality
- Feeling connected
- Supportive culture within our churches for healthy lifestyles
- Ways to help make critical skills understandable and applying to their daily life
- Management of health
- Challenge of multiple medical conditions
- Coping with health/limitations

- BP monitoring
- Pain management
- Fear of dying
- Nutrition
- Dealing with depression
- Identifying their personal needs and wants
- Advocacy with their family and healthcare providers
- Finding adequate resources
- Companionship
- Assistance
- Sense of control over own care
- Assistance with food, laundry, cleaning and transportation
- Understanding physician communications
- Respite care
- Dealing with grief

3. Kansas Parish Nurses Assessment of Preparedness: Strengths

Kansas parish nurses identify multiple and complex needs of those who are living with chronic illnesses. Knowing these needs, the parish nurse participants in the July 14, 2005, meeting assessed their own preparedness to be responsive to the needs. The areas of strength that received highest feedback are listed below and Table 6 identifies all feedback given by participants.

Where Kansas parish nurses feel most prepared to be responsive to these needs:

Top tier of preparedness:

- Being available when called upon
- One-on-one relationships

Second tier of preparedness:

- Provide education to patients and families and help them understand health information
- Provide advocacy
- Have support from pastor*
- Congregational support*

* In addition to being listed as a strength, this was also listed by some as a need, weakness or challenge

Table 6 Parish Nurses' Assessment of Where and How They Feel <u>Best</u> Prepared to Respond to Needs of the Chronically Ill Random Order
<ul style="list-style-type: none"> • Helping in coordination of health care • Monitoring and coordinating in-patient care • One-on-one relationships • Health education • Community resources • Providing respite care • Pool of people who respond to needs • Making health information understood – using layman's terms • Providing transportation • Pastoral cooperation and support • Congregational support • Personal contact • Advocacy • Education

- Availability
- Listening
- Spirituality
- Translating medical info into layman's terms
- Prayer
- Advanced directives
- Bi-lingual assistance

4. Kansas Parish Nurses' Assessment of Preparedness: Needs

Kansas parish nurses identify multiple and complex needs of those who are living with chronic illnesses. Knowing these needs, the parish nurse participants in the July 14, 2005, meeting assessed their own preparedness to be responsive to the needs. The areas of need, weakness and challenges received highest feedback are listed below and Table 7 identifies all feedback given by participants.

Where Kansas parish nurses feel least prepared to be responsive to these needs:

Greatest needs of parish nurses in order to minister to those who are chronically ill:

- Education
- More time to give to this work
- More volunteer support
- More money to support the work
- Tools for needs assessment so that patient and family needs are really understood and addressed
- Tools for documentation
- Ways to be sure that HIPPA compliance is met
- Help with record-keeping
- Resources
- Support from pastor*
- Skills to deal with mental illness
- Ability to address liability issues
- Visibility of and appreciation for role of the parish nurse
- Greater understanding of spiritual needs, including prayer, and tools and resources to address these needs

Table 7 Parish Nurses' Assessment of Where and How They Feel <u>Least</u> Prepared to Respond to Needs of the Chronically Ill Random Order
<ul style="list-style-type: none"> • Needs assessments – including ways to deal with HIPPA • People who have been doing care are now the ones who need care • Network of caregivers • Pastoral support • Pastoral education • Physician engagement – open doors to conversation • Equity in helping parishioners – Some get a lot of attention; others not enough • Specific diseases get more attention than others – need equity among illnesses

- Record keeping and good tools for the job
- Drawing the line/boundaries on what you can and can not provide the parishioner and making it clear to the client and their family
- Community resources and knowing how to access them
- Relationship with discharge planners
- Introduction and management of spirituality and prayer
- Patient safety issues
- Substance abuse issues
- Better visibility and awareness of Parish Nurses
- How to move from being a volunteer position to a paid position
- Perception of the Parish Nurses and what they do
- Liability issues
- Good documentation
- How to make the best use of the medical providers within the parish
- Major medical disorders – how to reach out to the mentally challenged parishioners
- Health insurance for Parish Nurses
- Visibility/understanding of concept for those who do not utilize our services
- Help with what we are doing--Volunteers
- Staying in touch
- More nurses available to help
- Educate about medications and teach importance of following orders
- Knowing resources for middle/high income people
- Helping people be active long distance caregivers
- Measuring outcomes
- Doing PN job as a volunteer along with a full time job
- Developing a strong resource base
- Assistance in getting free or reduced meds
- Helping people deal with depression
- Better structure in church organization
- Dealing with family neglect
- Promoting life style changes
- Managing pain
- Time and Energy
- Getting more community help
- Networking
- Providing strong advocacy
- Respite care

5. Kansas Parish Nurses' Assessment of What They Believe Would Provide Most Support to Them in Their Ministry

Parish nurses, after assessing the needs of the chronically ill and their own strengths and weaknesses, spent time exploring their own needs and expressing what they felt would provide the most support to them as they work to strengthen their personal ministries. Highest areas of feedback are noted below and Table 8 has a complete list of responses.

What Kansas parish nurses believe would provide most support to them:

Greatest support:

- Professional and support staff at the state level
- More educational opportunities
- More volunteers
- Networking and support
- Resource materials

Other support:

- Better local funding

Table 8 Parish Nurses' Assessment of Support <i>Services that Would Help Them Personally</i> Meet Needs of the Chronically Ill Random Order
<ul style="list-style-type: none"> • Pastoral support • Paid/full time position • Support from others • Cooperation • Education • Volunteers • Having JoVeta or Donna speak to our group of medical persons to motivate to work as a team • More resource material • Grants • Small congregation with a high needs list – lots of elderly with chronic illnesses • Speakers • Record keeping forms • Assessment forms • Website and resource guide • Retreat/seminars with CEUs that are free or affordable for those of us who are unpaid

- Training on issues of spirituality
- Time
- Parish nurses working with nursing students
- Networking
- Money
- Laptops and PDA's, free or available at affordable price
- Caring for the caregiver
- Resources for rural areas
- Larger numbers
- Lay term explanations to family and patient

6. Kansas Parish Nurses’ Assessment of Statewide Organization, Structure and Support Services that Would Most Strengthen the Ministries of Kansas Parish Nurses in Working with the Chronically Ill

In addition to envisioning ways to maintain and strengthen their personal ministries, the participants spent time exploring and addressing the needs of the statewide system of parish nurses. Nurses identified organization strategies and mechanisms that would strengthen their work as a whole. Key areas of focus are listed below and Table 9 provides a complete list of suggestions made by the nurses.

What statewide organizational system and processes might support the work of Kansas parish nurses:

- Paid staff for state parish nurses group
- Resource center with access to a variety of resources, tools and materials related to chronic illness
- Funding for basic equipment for all parish nurses (equipment and educational tools)
- Access to healthcare insurance
- Tools for needs’ assessment
- Building in systems for networking and sharing of information
- Development of statewide organization
- Funding for staff and resources
- Having staff to promote parish nursing and bring visibility to the role of parish nursing
- More educational events that provide CEU credit
- Website for resources
- Working to strengthen support from pastors and congregations
- Some way to get health insurance for parish nurses
- Funding for basic equipment
- Strengthening pastors’ support

<p>Table 9</p> <p>Kansas Parish Nurses’ Assessment of Needs of Statewide System and Organization of Parish Nurses: What would offer most support to strengthen parish nurses statewide?</p> <p>Random Order</p>
<ul style="list-style-type: none"> • Paid spokesperson to promote parish nursing, serve on boards – bring PN to the table • Resource Center • Networking

- Assessment tools
- Team meetings
- Churches in districts meet and share problems and solutions
- PDA's
- Recordkeeping forms
- Statewide organization
- More respite care in the community
- CEU events
- Scheduling with structure to include all who could be of assistance
- Consensus for rural areas
- Support system for someone who has no caregiver or family members
- Time
- Pastor support
- State and Church Paid Resource Person
- Lending Library – videos, books, as well as audio visual equipment
- Speakers Bureau – motivational speaker to show how all can be involved
- List of Interested People to Help Within Church – health ministry committee
- Funding/Scholarships for Basic Parish Nurse Training Course
- Funding for Basic Parish Equipment (BP cuffs, care notes, office equipment, educational material)
- Collaboration with Dept of Aging, AARP, WICK, Health Wave, (State Wide)
- Funding, scholarship for Parish Nurses
- Volunteer recognition at Annual Parish Nurse Convention
- Provide transportation reimbursement to attend educational events
- Strengthen local parish nurse network – incorporate as non profit organization
- CD for each patient for appointments of doctors instructions or all information – for auditory, visual learners and for primary care giver to avoid repetitions of instructions
- Consolidating scattered records of the patient
- Continuity – same nurse
- Focus proactive care and teaching vs. palliative
- Lobby school lunch programs for healthier food
- Need quality volunteers, organizational skills to make responses connect
- Organize meeting to develop educational material – need more people to put their input for the development
- Ways to deliver the resources to the congregation – bulletins, small meetings to present information, advertise information, newsletters
- Paid interpreters
- Resources on healing services (Lutheran Missouri Synod)
- Resources for pastoral staff on health/wholeness ministry and how to communicate to congregation
- Problem with daytime meetings for working – need evening meetings
- Need an e-mail “chat group” – a BLOG

- Need local resources in up to date manual – need time to find these resources
- Need ideas for getting more volunteers
- Newsletter and resources from JoVeta
- Public Relations For Visibility – TV, radio, public service announcement, newspaper
- Get Congress Involved
- Get AMA Involved
- Sponsored Health Fairs – Health Care providers to give out info at annual Parish Nurse meetings
- Regional Area meetings
- Providing Day Care for younger PN to attend without having to pay sitters fees
- Collection House for Donated Health Equipment (wheel chairs, walkers)
- Support for non-nursing volunteers
- Diversified Health Cabinets
- Form to assess talent/gifts within congregation – ie, provide meals, transportation, visitation, etc
- Develop volunteer meetings – over viewing different cultural aspects – English language, Hispanics, Vietnamese community
- Develop materials involving different languages using speakers with multiple languages
- Develop materials for all ages groups – children, 30s,40s, besides over 65
- Develop materials for the chronically ill
- Focus health wellness information
- Support groups for PN ministry
- Computerized record keeping
- Kansas home for PN – JoVeta
- Ready made curriculum for various ages/topics
- Linking funding and parish nurses that want to develop programs
- Salary with benefits for parish nurses
- Sister churches together (those with more resources and help those with less)
- Community support group of other parish nurses in area
- Know how to meet needs of community not just our church
- Meet with other denomination nurses in community
- Start clinic for people that are underserved or uninsured
- Health Education center for wellness care, health education, support group
- Concern – Rising health care and insurance costs with a decrease in coverage and access to healthcare (long waits for specialists)
- Get Drs. out to rural areas – specialists
- Hope – strengthen advocacy role
- Proactive health attitudes – accountability of the individual
- Research on own because often things that are really good for us are not on our sources of information ie – TV, ads, in magazines or newspaper
- Frustration with being able to continue program if don't have ongoing

financial/resource support

- Reach more people
- Burnout/overwhelmed with everything to be done
- Public education regarding issues ie DNR, Advance Directives, Consent of procedures
- Community relationship with faith communities
- Dream that PN practices would be available 24/7
- Enough people available to take call
- Patient information sheet to take to hospital giving consent for information to PN and pastor notification
- Local Office – resources of pamphlets, informational material, equipment in different languages, current website, speakers for presentation, CEU for nurses, Bulletin monthly on new information, CEUs up-coming events, lobby for better health care services for those children and under privileged people, resources for medical purchases
- Public Awareness – addressed better in nursing schools and seminaries and medical schools
- How to fund parish nurses in churches – memorial funds?
- How to involve an entire congregation in a health ministry

7. Kansas Parish Nurses' Assessment of Frustrations

Participants identified their greatest area/s of frustration and one single topic was most identified: the lack of time to devote to this ministry. Several other frustrations were noted repeatedly and these are listed below. Table 10 has a list of all of the frustrations that were noted.

Deepest frustrations of Kansas parish nurses:

- Lack of time to give to this ministry
- Lack of funding to support this ministry

Other frustrations:

- Lack of support from pastor
- Lack of support from congregation

Table 10 Parish Nurses' Assessment of Greatest Frustrations Random Order
<ul style="list-style-type: none">• Not enough time• Maintaining good contacts with members• Lack of money for services• Not knowing how to help people• Record keeping• Need for knowledgeable pastor• Not reaching someone or being misunderstood• Combining faith with factual information• People who don't get the PN role• Poor outcomes• Apathy• Lack of volunteers• Lack of support• HIPPA

8. Kansas Parish Nurses' Assessment of the Rewards of Their Ministry

Clearly, Kansas parish nurses find greatest satisfaction in fulfilling their ministry to help others. The most frequently listed rewards of parish nursing are listed below and Table 11 has a list of all of the rewards that were noted by one or more participants.

Greatest rewards for Kansas parish nurses:

- Helping others

Other rewards:

- Being appreciated
- Joy of seeing healing
- Affirmation of my own sense of purpose
- Sharing information

Table 11 Kansas Parish Nurses' Greatest Rewards Random Order
<ul style="list-style-type: none">• One on one relationships• Helping however I can• Appreciation• Joy of seeing healing• Helping "catch" or prevent a crisis before it gets out of hand• Developing my spiritual life• Being a advocate for the person in need• Volunteering for my church• Affirmation with my sense of purpose• Sharing information

9. Kansas Parish Nurses' Ideas for Resources and Topics

When asked for their ideas for resources and topics of interest that would support their work with chronically ill, participants identified a number of ideas. Those listed below were mentioned by most participants and Table 12 lists all comments.

Resources and topics of highest interest to Kansas parish nurses:

- Paid staff for state parish nurses group
- Resource center with access to a variety of resources, tools and materials
- Funding for basic equipment for all parish nurses (equipment and educational tools)
- Access to healthcare insurance
- Tools for needs' assessment and documentation

Table 12

Kansas Parish Nurses' Identification of Resources and Topics of Most Interest in Helping them Support those with Chronic Illness Random Order

- State and Church Paid Resource Person
- Lending Library – videos, books, as well as audio visual equipment
- Speakers Bureau – motivational speaker to show how all can be involved
- List of Interested People to Help Within Church – health ministry committee
- Funding/Scholarships for Basic Parish Nurse Training Course
- Funding for Basic Parish Equipment (BP cuffs, care notes, office equipment, educational material)
- Collaboration with Dept of Aging, AARP, WICK, Health Wave, (State Wide)
- Parish Nurse Website
- Funding, scholarship for Parish Nurses without internet access
- Volunteer recognition at Annual Parish Nurse Convention
- Provide transportation reimbursement to attend educational events
- Strengthen local parish nurse network – incorporate as non profit organization
- CD for each patient for appointments of doctors instructions or all information – for auditory, visual learners and for primary care giver to avoid repetitions of instructions
- Consolidating scattered records of the patient
- Continuity – same nurse
- Focus proactive care and teaching vs. palliative
- Lobby school lunch programs for healthier food

- Needs Assessment
- Computer/Data Base of Support PN's
- Own office (telephone, secretary, fax, computer)
- Paid Parish Nurse Positions with insurance
- Need quality volunteers, organizational skills to make responses connect
- Organize meeting to develop educational material – need more people to put their input for the development
- Ways to deliver the resources to the congregation – bulletins, small meetings to present information, advertise information, newsletters
- Paid interpreters
- PDA with needs assessment tools and resources data base (Wisconsin)
- Tools for dealing with HIPPA
- Resources on healing services (Lutheran Missouri Synod)
- Resources for pastoral staff on health/wholeness ministry and how to communicate to congregation
- Scholarships for educational opportunities – grant provided education
- Problem with daytime meetings for working – need evening meetings
- Need an e-mail “chat group” – a BLOG
- Need local resources in up to date manual – need time to find these resources
- Need ideas for getting more volunteers
- Newsletter and resources from JoVeta

Table 12

Kansas Parish Nurses' Other Comments

- As volunteers, we as PN feel we don't have empowerment...in terms of liability to offer “professional advice”
- Our parish nurse program is just beginning – all we've done so far is blood pressures. I'd love to answer these questions 1, 2 or 3 years from now.
- Am interested in PN ministry, but at this stage in my life I am in the caregiver role (for elderly parent and elderly neighbors)
- Get a sponsor and support staff for Jo