

FAITH COMMUNITY NURSE NETWORK



Overview

In June of 2020, the Faith Community Nurse Network conducted a survey of 150 faith community nurses (FCNs) in order to form an updated understanding of the content and scope of their practice. Respondents answered questions about their professional background, activities, services, compensation, and unmet program needs. We also sought to understand how the early stages of the Covid-19 pandemic were affecting FCN practice.

Who are faith community nurses?

Of those who responded to our survey...



- ❖ Around half – 52% - are not paid for their work as faith community nurses. For those in paid positions, hourly rates range from \$15 to \$35. The average total annual budget for FCN programs is \$7,484.
- ❖ In addition to faith community nursing, respondents had experience in nursing specialties such as medical/surgical, gerontology, public/community health, education, critical care, hospice, pediatrics, and mental health, among others.

FCN practice

Faith community nurses serve in congregations with an average of 855 families, ranging from 50 to 2,000. The earliest that a congregation launched its FCN program was 1985. The newest program began in 2019. Exactly 50% of FCN programs work in conjunction with a health council or health team.

While FCNs spend the majority of their time providing care to their congregation, nearly 20% of their time in their role is spent serving their neighborhood or community at large.

Among respondents, 40% serve Lutheran ELCA congregations, 23% serve Catholic congregations, 10% serve Evangelical congregations, and 9% serve Methodist congregations. Other denominations represented include Baptist, Jewish, Presbyterian, and “Other”.

FCN practice

FCNs offer a wide range of services within their practice. The most common services that FCNs reported providing include:

- Making home/hospital visits (68% of FCNs)
- Blood pressure screenings (64%)
- Offering health education classes (62%)
- Personal counseling (62%)
- Organizing CPR/AED training (54%)
- Providing medication information (51%)
- Sharing scripture (50%)
- Facilitating evidence-based health promotion programs (32%)
- Grief counseling (40%)

Other activities included exercise programs, funeral planning, equipment loans, healing services, health fairs, needs assessment, blood donor drives, Medicare information, and flu clinics, among others.

Below in descending order is the proportion of time that FCNs spend in various functions:

31% Personal health counseling (individual home/hospital visits or health screenings)

22% Health education (classes, articles, other communications)

20% Integrating faith and health (spiritual assessment, prayer, scripture reading, referrals, home communion)

10% Community resource referrals (placement assistance, consultations)

7% Volunteer coordination/training

5% Health advocacy (advocate within health institutions)

5% Support group development/training

COVID-19 Experiences

Faith community nursing practice has not been immune to the impacts of the COVID-19 pandemic. As of June 2020, COVID-19 required 88% of FCNs to change the types of services they provide. A smaller proportion had their positions temporarily furloughed or hours reduced.

Below are select illustrations of the ways that FCN practice has changed to meet the needs of communities during the early part of the pandemic:

- ❖ Increased coordination of volunteers to make calls to isolated older adults
- ❖ Using technology such as Zoom to make visits and provide educational programs and support groups
- ❖ Serving as a credible source of information about prevention and treatment
- ❖ Involvement in creating re-opening plans for services
- ❖ Addressing depression, social isolation, and trauma to individuals, families, congregations, and communities