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ACCESSING RESOURCES

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| Explain | Outcome 4: Explain the rationale for the FCN's role in accessing appropriate resources. |
| Assess | Outcome 5: Assess individual consumer healthcare needs and resources available to achieve desired outcomes. |
| Implement | Outcome 6: Implement a method to access and evaluate internal and external resources, including the internet. |
| Assist | Outcome 7: Assist the healthcare consumer and family in identifying and securing appropriate and available resources in address health and spiritual needs across the healthcare continuum. |

Adapted from the Faith Community Nursing Course curriculum developed through the Wesley Institute for Faith Community Nursing, which curriculum is owned by the Spiritual Care Association, New York, NY

Outcome 4

Explain the rationale for the FCN's role in accessing appropriate resources.



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KEY WORDS

- Resources** include information, equipment and services.
- Population-focused health** is a wholistic approach and perspective that focuses on the broad range of factors and conditions that influence the health of populations. It considers the total health system from prevention and promotion to diagnosis, treatment and care. How would you define a population? What are some populations that FCNs might work with?
- Healthy people** is a science-based program of nationwide health promotion and disease prevention with established new goals established by the U.S. Department of Health and Human Services every 10 years.

About *Healthy People 2020*

Healthy People 2020 aims to reach four overarching goals:

- Create social and physical environments that promote good health for all.
 - Promote quality of life, healthy development, and healthy behaviors across all life stages.
 - Attain high-quality, longer lives free of preventable disease, disability, injury, and premature death.
 - Achieve health equity, eliminate disparities, and improve the health of all groups.
- You can find the proposed guiding framework for 2030 at <https://www.healthypeople.gov> or google Healthy People.

Why is this information important to an FCN?

- Using Healthy People objectives helps an FCN focus on relevant areas while serving diverse individuals across the lifespan in their community/faith community.
- Helping individuals/families to identify and secure resources is essential to empower them to make informed health decisions.
- Healthy People provides a plan that has achievable goals and objectives that can guide the actions of the FCN to improve the health outcomes of those they serve.

Goals for an FCN accessing resources are the protection, promotion and optimization of health and abilities of communities/faith communities.

- **Referrals** are the most common intervention that an FCN uses to help guide or direct an individual to appropriate resources or services to plan and provide nursing services that are safe, effective and financially responsible.
 - Considerations:
 - Economic impact of the plan on the individual/family or others.
 - Identify how other resources could be used (faith community resources or local community resources).

OUTCOME 5

Assess individual consumer healthcare needs and resources available to achieve desired outcomes.



Photo: Wikimedia Commons

Assessing the needs of members of the community/faith community includes choosing appropriate methods and identifying both internal and external resources. First, choose appropriate assessment methods, including the following:

- Interviews with ministerial staff
- Health care providers or the Health Cabinet within the community/faith community.
- Focus groups by age or special interest.
- Surveys of members a part of the community assessment.
 - Survey of what the faith community members need.
 - Member inquiries by the FCN for specific needs they may have

Identify resources within the community/faith community such as:

- Counseling
- Support or self-help groups
 - Grief
 - Weight loss
 - Parenting
 - Caregiver support
- Hospital Visitation Programs
- Small connect groups
 - Knitting or quilting
 - Prayer circles
 - Book clubs
- Benevolence funds
 - Gift card, food bags, limited travel funds, etc.
- Temporary housing

Locate external resources including the following: (I find that it is better if I find the resources that I need when I need them. Here are some basics to keep handy)

- Urgent care (Be sure you know insurance guidelines for the individual which may inform choices)
 - ✓ Hospitals for emergency care. (Is this a "911" call)
 - ✓ Hospital or outpatient ambulatory care
 - ✓ Urgency centers
 - ✓ "Minute clinics"
- Health-related programs living with chronic conditions (most, if not all, of these require a provider referral. As an FCN you can help direct the individual/family to ask for a referral or other questions).
 - ✓ Home care
 - ✓ Palliative care
 - ✓ Hospice
 - ✓ Dialysis
 - ✓ Mental Health Services (I keep the number for the mental health hotline and COPE in my phone).

- Health care providers (Be sure you know who the primary care provider and insurance provider is. ALWAYS work with the PMD and or case manager).
 - ✓ Physicians
 - ✓ Nurse practitioners
 - ✓ Dentists
 - ✓ Clinical psychologists
 - ✓ Specialists (podiatrists, foot care services, eye care providers)
- Health-related social services (These services can be facilitated by the FCN)
 - ✓ Basic economic needs (housing, food, WIC, transportation like Metro Mobility fyi FCN can complete and sign application for Metro Mobility)
 - ✓ Caregiver support (Cancer Society, Lewy Body Association, Mothers of Twins, respite care)
 - ✓ Support services (Case management, ARMS workers, handicap parking)
 - ✓ Counseling services for individuals, couples and families
 - ✓ Public Health Department for communicable diseases and immunizations. (Hennepin County Front Door (612-348-4111) is very helpful in navigating county services, it is a good place to start for Hennepin County residents reporting child abuse and vulnerable adults).
 - ✓ Legal Services (advance directives, wills, guardianship, conservatorship, power of attorney for financial affairs).
 - ✓ Disaster relief (local health department, Red Cross)
 - ✓ Clothing and household items (Goodwill, Salvation Army, Savers are good sources for affordable items).

CRITICAL THINKING (10 MINUTES)

• How does assisting individuals with accessing resources fit into your faith community's mission/faith statement?



10 minute Break

Outcome 6

- Implement a method to access and evaluate internal and external resources, including the internet.



The internet has become the first place that we go to find information about anything. As my granddaughter says:

"Google It!"



We look for information about illnesses, treatments and symptoms. Some websites are very helpful and give accurate and others, not so much and can even be harmful. Internet information cannot replace medical advice.

FCNs play an important role in steering people toward trustworthy, legitimate health information.

Use the internet to evaluate available resources for accuracy and timeliness.

- ✦ Investigate hospital networks (Childrens Hospitals are wonderful resources).
- ✦ Connect with FCN networks (FCNNTC is a very good site for information.)
- ✦ Take advantage of healthcare resource books distributed by health insurance companies, (Blue Cross/Blue Shield, Medica, Ucare, etc are good sources. I always look for information when I go to health fairs or educational offerings. I get some of my best resources there. The FCNN symposium [when in person] has great resources).
- ✦ Consult local resources for veterans.

❖ Locate mental health services ([National Alliance on Mental Health NAMI](http://NationalAllianceonMentalHealthNAMI.org) www.namihelps.org ; in the Metro area [mental health connects mhconnect.org](http://mentalhealthconnects.mhconnect.org) ; COPE - Mental Health Crisis Services for Adults - Community Outreach for Psychiatric Emergencies [Website: www.hennepin.us/residents/health-medical/adult-mental-health-services.mental.health.gov](http://Website:www.hennepin.us/residents/health-medical/adult-mental-health-services.mental.health.gov)).

Use the internet to gather available and appropriate resources. (I began by searching various government sites or disease specific sites. Often you can download or send for information. I started out keeping my information in a large note book but I found that I did not use it often enough so I now search new information as I need it. My note book has become a great resource for me to refer to).

When you find a resource:

- Include the name of resource, physical and/or internet address, phone number, and contact person if available. Include
 - Types of services
 - Hours of operation (especially weekends and evenings)
 - Other considerations like: languages offered, accessibility for disabilities.
- Include eligibility criteria for service such as
 - Demographics (age, gender)
 - Socioeconomic (fees, sliding, free, payments/co-pays)
 - Insurance (types accepted, with special attention to Medicaid and Medicare).
 - How can a referral be made (self-refer vs referral by healthcare provider)

When looking for resources:

- Start with **local** resources
- Move on to **State** resources
- **Federal government resources** next.
- **Voluntary agencies and local affiliates** (well-known agencies like **American Cancer Society** [with both national and local resources] you can drill down for the specific disease and what resources are available locally, the **Lewy Body Association** was very helpful for my client, **Honoring Choices** is a great resource for **Living Wills/Advance Directives** and related questions.)

When you are reading or listening to reports of new medical findings be very thoughtful.

Consider: (NIH National Network of Libraries of Medicine 2014)

- ✓ Study done on animals or people (and what population of people)?
- ✓ How big or small was the study?
- ✓ Was it a randomized, controlled clinical study?
- ✓ Where was the study done?
- ✓ If a new treatment, what were the side effects?
- ✓ Who paid for the research? (I worry about studies funded by drug companies).
- ✓ Who is reporting the results?

OUTCOME 7

Assist the healthcare consumer and family in identifying and securing appropriate and available resources in address health and spiritual needs across the healthcare continuum.

The first focus of the FCN should be on prevention at the appropriate time to improve health outcomes by preventing illness or injury rather than searching for a cure after an injury or illness.

3 LEVELS OF PREVENTION

- Primary prevention (education and health promotion)
 - Flu shots (immunizations in general)
 - Fall prevention education
 - Health education class like "Rethink your Drink"
 - Yearly wellness exam or sports physical
- Secondary prevention (health screenings that identify risk factors and lead to early diagnosis and treatment.)
 - Mammograms
 - Eye exams/hearing screening
 - Blood lead screening
 - Cholesterol screening clinics
- Tertiary prevention (continuing care after diagnosis to minimize complications and optimize well being to the degree possible).
 - Chronic conditions ongoing care to prevent complications
 - Rehab to promote maintenance for an irreversible disease or injury

FCNS MUST ALSO HELP INDIVIDUALS UNDERSTAND THAT, DEPENDING ON THEIR ILLNESS/INJURY, THEY MAY EXPERIENCE 3 DIFFERENT LEVELS OF CARE.

- **Primary Care** (first and most generalized level of care. Less expensive.)
 - Office/Minute Clinic visit for specific symptom with PMD, Nurse Practitioner or Physicians Assistant.
- **Secondary Care** (care by a specialist) May be referred by primary care provider.
 - Orthopedic specialist or OB/GYN specialist (this could be primary care for some).
 - Diabetes Educator
 - Otolologist or ophthalmologist
- **Tertiary Care** (highest level of care in a hospital or clinic. Expensive and specialized. Individuals needing tertiary care usually have ongoing conditions that are beyond what can be provided by primary of secondary care.)
 - Dialysis
 - Chemotherapy
 - Individuals with multisystem involvement

The number and types of health care and supportive services increases daily. We have come along way from PMD to specialist to hospital to nursing home. As an FCN you can help individuals and families navigate the health care system.

- **Providers:** Physicians, APNs, Clinical Nurse Specialists, Physician's Assistants, Clinical Educators, Physical/Occupational Therapists, Respiratory Therapists, Nutritionists and on and on.
- **Agencies or facilities:** Home care, hospice, palliative care, extended care, long-term care, rehabilitation, age in place for elders, community programs that are available ([Area Agencies on Aging](#) or [Innovations on Aging, senior day/partial day programs](#), [Senior Linkage Line 1-800-333-2433](#) is available through out Minnesota to help find help for seniors).

Critical Thinking Time



How does your role as FCN fit in your responsibility of identifying and securing resources relate to health promotion and prevention?
How aspects of this function relate to care coordination?

The Referral Process

The FCN role is to help the healthcare consumer in securing services to address health and spirituality needs by referring them to appropriate agencies or providers who can supply those services.

Referral Steps:

- Investigating community resources and assembling information about referrals. This can be done in general of to address the specific needs of an individual.
- Assessing the individual's or family's needs (often with agency information in mind).
- Discussing all referral options with individual or family to allow them to make choices.
- Exploring the individual's/family's receptivity to referral. Take note:
 - Past experience with referral may have been positive or negative. (past facility or service)
 - Personal values may or may not allow the individual/family to accept help from others. (individual or family is not ready/willing to accept help currently).
 - The family's ability to make self-referral may need to be determined.
- Referring individual or family to appropriate resource.
- Planning an evaluation of how the referral went
- Documentation (Who, What, Process, Outcome)

Best Practices for Referrals and Followup

- The FCN respects the client's right to refuse a referral unless there is a risk of abuse, neglect or harm to the individual. People can make bad choices for themselves (even if we think it is will not have the best outcome)! Autonomy/Self determination.
- FCNs makes referrals that are timely, practical, tailored to the client and coordinated.
- The individual/family participate in the process. The FCN is an objective sources of information.
- The client is encouraged to make a self-referral if possible (Call the resource, make appointments, etc. The FCN may need to assist/support the client for them to learn the process.)
- FCN collaborates with the health care team (work with case manager or clinic to arrange services).
- FCN provides correct, current and relevant information regarding resources needed.
- FCN follow up with individual/family after resources or referrals are provided to evaluate effectiveness.

Case Studies

1. What assumptions can the FCN make?
2. What additional assessments data are needed?
3. What local or national resources can the FCN suggest?

Please refer to page 302 in your manual. You will be divided into 3 groups to discuss the following cases. You will have 5 minutes to discuss and then report back.

Group 1 will take case #1 Senior housing

Group 2 will take case # 3 Social Isolation

Group 3 will take case # 6 Accessing Food and Clothing

Have fun! Perfection is not an expectation.

Thank you!



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