



Parish Nurse/ Health Minister Letter

October, 2009

Dear Partners in Health,

Today we sent the 2008 Annual Report to the printer. The purpose of this document is to let people know how we are doing and to give people a flavor of what we are doing. It is designed to impress on people the important contributions that faith community nurses and health ministers make within their faith groups and communities. Even with the limited amount of data that we receive, the results are noteworthy. The following are some examples:

- In 2008 parish nurses within the Tacoma area logged over 8,000 volunteer hours, served close to 36,000 people, did blood pressure checks on 3,180 people, 12% of whom had elevated blood pressure and were referred to physicians.
- As part of a diabetes prevention and control program, the parish nurses within the Alaska Parish Nurse Resource Center in Anchorage provided 1,512 blood pressure/blood glucose screenings, offered foot care and assessment clinics for 250 homeless, logged over 229,000 miles in walking programs and offered 14 classes for self-management of chronic disease.
- Thanks to grants from Wheat Ridge Ministries and Providence Mission and Stewardship Committee, 52 leaders were trained as leaders in Powerful Tools for Caregiving and have offered classes to over 250 family caregivers.

We cannot begin to calculate all the good work that is happening throughout the Northwest. Easily tens of thousands of lives are touched by this ministry on a regular basis. If you wish to look at the 2008 Annual Report, it is posted on our webpage, www.npnm.org.

Putting together this report impresses on us the importance of good documentation of what we do. Such information is valuable for the following reasons:

1. It gives a concrete picture to your faith group or healthcare system of what you do and the number of lives you touch.
2. It validates your ministry and provides a sense of accomplishment. There is something about seeing the numbers on paper that make your work more real.
3. It provides NPNM with facts and figures that when pulled together help us "sell" faith community nursing/health ministry to funding sources, faith groups and potential partners. In addition, it establishes our rightful place at the healthcare table.

As a result, we strongly encourage you to document your work. We are including a documentation sheet in this letter for you to use and submit to us and your coordinator, if you currently do not have one that you are using. You can download an electronic copy at:

<http://www.parnurseministry.org/wp-content/uploads/2009/10/monthly-activity-report.doc>

Give us evidence that can't be ignored. Provide us with information that when compiled for our area serves as a compelling testimony to how we make a difference. As the title of the 2008 Annual Report suggests: *A Whole Lot of Caring Going On!*

Montana and Wyoming Invited In

Up until recently the Parish Nurse Resource Center at Carroll College in Helena, Montana offered Basic Parish Nurse Classes, hosted annual retreats, produced a newsletter and helped network and nurture parish nurses in Montana and parts of Wyoming. With the departure of Cynthia Gustafson, whose husband became pastor of a church in Copenhagen, the college decided to discontinue the program.

The question that plagued Cynthia, who has a deep passion for this program, was: "What happens to all the dedicated parish nurses who relied on us for coordination and support?" She then contacted NPNM and asked if we would be willing to bring these dedicated servants of wellness under our umbrella, which we indicated that we were happy to do if they so desired. We then sent out a letter, which accompanied Cynthia's farewell notice, to the parish nurses in Montana and Wyoming. We invited them to consider joining us and to let us know how we can support them during this period of transition. Since then, Ann Schellinger (ann_schellinger@yahoo.com) from Missoula, MT and a NPNM Parish Nurse Coordinator, has volunteered to serve in that capacity in Montana. We also are exploring the possibility of offering Basic Parish Nurse Training in the Spokane area. If the parish nurses/health ministers in Montana/Wyoming decide that they want to become part of NPNM, we would then encourage them to become members, include those members who desire to be listed in the directory and identify someone to represent that area on the board.

2010 Conference

Our current cycle is to have regional retreats one year and an agency wide conference the next. Since 2010 is the year for a conference, we are in the preliminary stages of planning for that event. We hope to put a committee in place by the end of this year. Our tentative plans are to hold the conference in Portland in conjunction with Humor and Health Fest V and to share the main presenter for both events. If these plans materialize, we will then have the conference on Friday, October 22, 2010 with Humor and Health Fest V on Saturday, October 23. We are in talks with Faith Roberts, the Parish Nurse Program Coordinator for Carle Foundation Hospital, Urbana, IL. She is putting the dates on hold for us. One hospital administrator says the following about Faith: *We laugh and we cry as Faith shares her experiences and wisdom; we are forever touched by the gifts that are "uniquely Faith."* Her ability to blend theory and reality make her presentations truly powerful and enjoyable. Her gift of storytelling captivates her audience to both the drama and humor found in nursing practice.



Forecast for 2010

Right now we are putting together the budget for 2010. In the process, we are identifying the following priorities for the coming year:

- Offering Basic Parish Nurse Preparation Classes in Redding, CA; Portland, Bend and Albany, Or; Bellingham and Tacoma, WA; Anchorage, Ak through Providence and Health Services; and a Parish Nurse Coordinator Class and Supplemental Class in Seattle.
- Increasing value-added opportunities for members, such as Trainings in a Box and members only section on the webpage, expanding our membership and donor base and developing partnerships with healthcare and related organizations.
- Submitting grant requests for an Outreach Coordinator, part-time regional coordinators, technology and software improvements, documentation program, hospital bridging pilot project and expansions of Living Well/Powerful Tools for Caregiver programs.
- Finding sponsors for the 2010 conference so that it is affordable and accessible to any faith community nurse that wishes to attend, organizing a successful fundraising event and being available to network and nurture people involved in health ministry programs, creating greater financial stability for NPNM.

None of the above can happen without your help. This is a joint effort that relies on the strength and wisdom of our interconnectedness. May God bless our ministry together.

Sincerely,

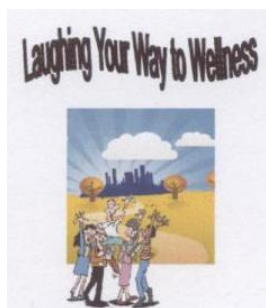
A handwritten signature in blue ink that reads "Bruce".

A handwritten signature in blue ink that reads "Debbie".

Activities and Events

The following Faith Community Nurse/Health Minister Trainings are projected for 2010:

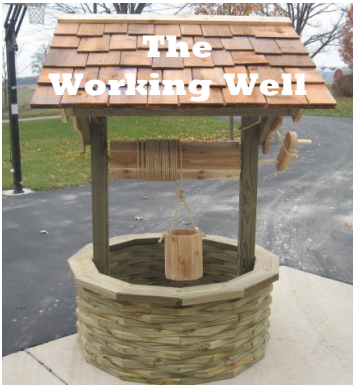
Basic Parish Nurse/Health Ministry Classes		
Place	Date	Contact
Redding, CA	February 12-12 & 19-21	Jean Krueger –530-842-4217 Debbie Waring – 503-413-2341 metropn@spiritone.com
Portland, OR University of Portland	May 6-7 & 10-11	Debbie Waring – 503-413-2341 metropn@spiritone.com
Bend, OR St. Charles Medical Center	April 14-17	Lyn Bogie –541-383-6861 lbogie@scmc.org
Portland, OR Concordia University	June 14-15 & 17-18	Debbie Waring – 503-413-2341 metropn@spiritone.com
Tacoma, WA Pacific Lutheran University	Spring	Terry Bennett – 253-535-7683 bennettl@plu.edu
Albany, OR Linn Benton Community College	Spring	Rachael Hagfeldt -- 541-812-4701 rhagfeldt@samhealth.org
Bellingham, WA St. Joseph Medical Center	Spring	Jeanne Brotherton – 360-788-6408 Beansle6@comcast.net
Anchorage, AK	Spring	Linda Shephard – 907-212-5053 lshephard@provak.org
Supplemental Modules Class		
Seattle, WA	Fall	Debbie Waring – 503-413-2341 metropn@spiritone.com
Preparation Course of Parish Nurse Coordinators		
Seattle, WA	March 18-20	Debbie Waring – 503-413-2341 metropn@spiritone.com



Humor and Health Fest IV

Humor and Health Fest IV is now history. The event attracted over 260 people who shared a fun evening with a great dinner, heard presentations on faith community nursing and got an extra heavy dose of humor from Jenny Herrick, motivational speaker, humorist, and nurse, who as promised was *warm, wise, witty with attitude galore*. Debbie Waring announced the results of the 2009 Annette Stixrud Parish Nurse of the Year Award. This year it went to two people: Rachel Hagfeldt of Albany, OR and Jean Vanberg of Gig Harbor, WA. There will be more information in the next Newsletter.

National Monthly Health Themes		
Month	Health Theme	Website/Contact
November	Diabetes Month Alzheimer' Disease Awareness Family Caregiver Month Pancreatic Cancer Awareness Month Great American Smokeout (15)	www.diabetes.org www.alz.org www.thefamilycaregiver.org www.pancan.org acsf2f.com/gaso/
December	World Aids Day (1) National Handwashing Awareness Week (6-12)	www.unaids.org/en/default.asp www.henrythehand.com
January	Glaucoma Awareness Month National Blood Donor Month National Folic Acid Awareness Week (5-11) Thyroid Awareness Month	preventblindness.org/news/observe.html www.aabb.org www.folicacidinfo.org www.thyroidawareness.com



Congregational Wellness Program

Two congregations with faith community nurses in North and Northeast Portland are participating in a Congregational Wellness Program with several other churches through Ecumenical Ministries of Oregon. The pilot project funded through the Robert Wood Johnson Foundation is designed to build support for children's wellness and obesity prevention efforts in the wider community. Barb Fritz and Alice McCarty from St. Charles Parish and Desiree Senffner from Holy Redeemer Catholic Church, along with Wellness Teams from their congregations, meet regularly with other project partners to develop a model for environmental and policy change that promotes and encourages people to make healthy choices. One major component of the project involves a Wellness Assessment conducted in each congregation. The information is then shared with each congregation and forms the basis for a plan of action or improvement plan. Each congregation also receives a mini-grant of \$500 to implement one or more of the action items. The goal is to extend any healthy changes within the faith community to the broader community. The leader of the project indicated to Bruce Strade, who serves on the Advisory Team for the project, that the churches with faith community nurses seem to have an advantage. They are more responsive and get more done.

A Tribute to Nancy Seitz

On Friday, October 16, 2009, Nancy Seitz, one of the faith community nurses at St. Matthew Lutheran Church in Beaverton, OR, lost her heroic struggle with cancer and won a place among the saints in glory. She was passionate about parish nursing and enjoyed serving the needs of people. It was not unusual to meet her in the halls of Emanuel or St. Vincent either on the way to visit someone in the hospital or returning from a visit and heading out to the home of another member. She was a model of compassion and care and even in the midst of pain and suffering, never complained but consistently radiated hope. The following are excerpts from her testimony to her congregation on Health Ministry Sunday, which appeared in the July, 2008, edition of *Northwest Parish Nurse News*:

After retiring, I felt like something was missing in my life. I felt God telling me that my work as a nurse was not finished. I took the Parish Nurse course and here I am. I have been blessed by so many experiences and many new friends. . . .

One of my visits was to see a lady at St. Vincent. I walked into the wrong room and found an elderly lady obviously in the process of dying. I held her hand and had a prayer with her. I realized that I was in the wrong room and left. I found the right lady. I believe that God led me to the wrong room.

Recently I experienced being with a beautiful, wonderful lady who passed on. I was with her the 2 days prior to her death and was there with her family as she passed from this world to her Heavenly Home. I could feel God's presence in the room with us.

My faith has grown stronger because I know when I have contact with a patient, it is not only Nancy there. God is working through me. He is the One who relieves anxiety, pain and fear. I pray daily that He will bless my hands and lips as I care for patients and their families. I encourage you to read the words of my favorite hymn – "Take My Life – Let It Be. . ." These words are for all of us. Parish Nurses care about the whole person – body, mind and spirit.

Finally – Nurse Nancy has an order for you to help you stay healthy. "Laugh, Hug, and Wash Your Hands!"

Nancy's job is done. Her mission is complete. We in turn honor her memory by following her model of service.



Notes and Quotes

Jesus' Health Care Strategy

In response to all the news about health care reform, George Barna, founder of The *Barna* Group, a market research firm specializing in studying the religious beliefs and behavior of Americans, has written an editorial in which he outlines *Jesus' Health Care Plan*. He summarizes his understanding in the following:

In short, Jesus Christ showed us that anyone who follows Him is expected to address the most pressing needs of others. You can describe Jesus' health care strategy in four words: whoever, whatever, whenever, wherever. Whoever needed to be healed received His healing touch. Whatever affliction they suffered from, He addressed it. Whenever the opportunity to heal arose, He seized it. Wherever they happened to be, He took care of it.

Contrast the Jesus model with the preferred American model. The latter might be described as deciding to throw some money at the problem – but not too much – so that somebody else can do what needs to be done for those who qualify, in a manner that does not inconvenience us.

At the end of the article he concludes: *I don't know what God is asking or preparing you to do in relation to the needs of the poor and disadvantaged. All I know is that we have been told to imitate Christ, and His health care strategy is whoever, whatever, wherever, whenever.*

You can find the entire article at: <http://www.barna.org/component/wordpress/archives/70>

The \$10 Billion Dollar Dream

John Allen Jr in the July 26, 2009, *National Catholic Reporter* (<http://ncronline.org>) speculates what he would do if someone gave him \$10 billion to make the world a better place. His response was: *I asked myself this week what I would do if somebody offered me a blank check to spend on some project in American Catholicism. The more I think about it, the more my . . . reply would be, 'Hire a nurse for every parish in the county.'*

**NATIONAL
CATHOLIC REPORTER**

He concludes that *the Catholic Church in America should be worrying a bit less about the priest shortage and a bit more about the nurse shortage. Attracting and retaining qualified nurses for parishes—and for social service centers, schools, and other Catholic institutions – may not garner headlines or excite the blogs, but it would be an incredibly valuable service to the Catholic future. Note to Catholic philanthropists: Give me \$10 billion, and I'll see what I can do.*

Diet, Exercise Increase Longevity

A 10-month-old effort to improve the dietary, exercise and lifestyle habits among residents of Albert Lea, MN has resulted in participating individuals gaining an average of 3.1 years of longevity, according to the Associated Press. The multi-faceted Vitality Project was created by Dan Buettner, adventurer and travel writer, after he identified five areas around the world where people tend to live longer and healthier lives. The key to extending resident longevity in Albert Lea, according to Buettner, was encouraging weight loss and healthy habits, while also fostering family relationships and as sense of purpose. Experts worked with residents to develop healthy eating habits, improve cooking practices., establish community gardens and launch walking programs. To make exercise easier, the city "crammed five years of sidewalk and bike trail construction into a year."



Links and Literature

Quick Guide for Daily Living



The following link provides information and tools to help people stay healthy:

<http://www.healthfinder.gov/prevention/default.aspx>

Topics include: Nutrition and Fitness; Important Screening Tests; Pregnancy; For Parents; Heart Health;

Public Health and Safety; Hiv and STDs; Cancer Screening and Prevention; Everyday Health and Wellness; Diabetes; For Women; and For Older Adults.

Leafy Greens Heads Risky Food List

Ten types of foods account for nearly 40% of all foodborne illness outbreaks linked to FDA-regulated foods since 1990, according to a report from the Center for Science in the Public Interest. Based on U.S. Centers for Disease Control and Prevention data, the 10 riskiest foods are:



- **Leafy greens:** 363 outbreaks involving 13,568 cases of illness
- **Eggs:** 352 outbreaks with 11,163 reported cases of illness
- **Tuna:** 268 outbreaks with 2,341 reported cases of illness
- **Oysters:** 132 outbreaks with 3,409 reported cases of illness
- **Potatoes:** 108 outbreaks with 3,659 reported cases of illness
- **Cheese:** 83 outbreaks with 2,761 reported cases of illness
- **Ice Cream:** 75 outbreaks with 2,594 reported cases of illness
- **Tomatoes:** 31 outbreaks with 3,292 reported cases of illness
- **Sprouts:** 31 outbreaks with 2,022 reported cases of illness
- **Berries:** 25 outbreaks with 3,397 reported cases of illness

The report noted that foodborne illness outbreaks are becoming more common in the United States because of a complex, globalized food system, outdated food safety laws, and the rise of large-scale production and processing. For more information on foodborne illness, go to the following link:

http://www.cdc.gov/ncidod/dbmd/diseaseinfo/foodborneinfections_g.htm

Overweight Kids and Sleep-disordered breathing

Overweight children are more likely to have sleep-disordered breathing, a condition associated with behavioral problems, hyperactivity and difficulty staying awake at school, a new study shows. Researchers examined 700 children between the ages of 5 and 12. Each child had a physical exam and was monitored for nine hours at a sleep laboratory using polysomnography, which measures brain electrical activity, airflow, respiration and oxygen saturation during sleep. About 25 % of the children had mild sleep-disordered breathing and 1.2% had moderate sleep-disordered breathing, defined as five or more breathing pauses per hour. More than 15% had primary snoring. Those with sleep-disordered breathing tended to have a larger body-mass index and a higher waist circumference relative to their peers. Study author Edward O. Bixler of Penn State University College of Medicine states, "Because sleep-disordered breathing in children is not just the outcome of anatomical abnormalities, treatment strategies should consider alternative options, such as weight loss and correction of nasal problem." For more about obstructive sleep apnea and sleep breathing disorders in children, check <http://www.aasmnet.org/FactSheets.aspx>, www.nhlbi.nih.gov/health, and www.sleepeducation.com (sleep disorders).

Living Well: Your guide to Nutrient-Rich Eating

The Nutrient Rich Foods Coalition gives tools, tips, and tactics to adopt a healthier eating plan, without a lot of time, but with a lot of great taste. www.nutrientrichfoods.org/index.html includes:

NAVIGATING
the grocery store

RECIPES
& meal ideas

MYPYRAMID
& you

Monthly Activity Report

(Return completed to: Debbie Waring, 2801 N. Gantenbein Ave., #E1072, Portland, OR. 97227 or fax to: Deb @ 503-413-2147; or email to metroprn@spiritone.com)

Faith/Community Name: _____

Month/Year _____

Your Name: _____ Total miles: _____ Reimbursed? (√one) Yes ___
No ___

Total Hours: _____ Paid Hours: _____ Unpaid Hours: _____

Number of Visits/Contacts (Do not include BPs – see below) in EACH Category

Church	Phone	Home	Hospital	Nursing Home	Other	Total

Number of Contacts in Each Category

Age	0-12	13-20	21-40	41-60	61-70	71-80	80+
Male							
Female							

Number of Referrals Made/Received (Do not include BPs – see below) Total #: _____

	To	From		To	From
Medical Professional			Mental Health		
Clergy			Hospital		
Health Agency or Clinic			Support Group		
Community Agency			Volunteer		

Blood Pressure Screenings (Monthly hours: _____)

Number of people screened	
Number of Hypertensions Recorded	
Number of Referrals Made	

Other Activities (classes, newsletters, support groups, meetings, etc.)

Activity descriptor/Handout/ mailing	Number of Attendees/Readers	Prep Time	Class/Meeting time

Volunteers

Number of volunteers	Number of Hours	Type of Support Provided



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In My Moment of Unsureness

Dependable Lord.

Whose hand reached out to children
pushed aside and frightened
to draw them close
and to embrace them

reach out to me

that my chilling fears
and lonely hours
may be displaced
as I remember
your presence
here with me.

Help me to realize that you include me
among those whom you regard
as your very own --

about whom you were talking
when you first spoke these reassuring words:

“. . . and no one shall snatch them from my hand!”

Into your hands
I commend myself.

AMEN

From
Karl E. Lutze
We need to talk, Lord!
Home Mountain Publishing Co, Inc.
Valparaiso, Indiana