

To Our Clients and Friends...

Ready Hands has warm relationships with many of the wonderful senior serving professionals in our area, and has periodically featured articles on a particular field or profession. In this issue we highlight the critical role played by faith community nurses. We hope you find the information on this growing field to be of interest.

Since the flu season is again upon us, we also include an article about influenza, as

well as a fun quiz to check your state of knowledge on this important topic.

Ready Hands celebrated its fifth anniversary on October 1. Our service volume grows each year, and the third quarter of 2007 was our busiest ever. Thanks as always to the clients, eldercare professionals and friends who have placed their trust in us over the years!

—Granger Benson, MD

—Sue Benson, RN

The Growing Role of Faith Community Nurses

Sally Norton (not her real name), an elderly woman with severe chronic lung disease, has just been discharged from the hospital with instructions to receive continuous oxygen supplementation. Visiting Mrs. Norton is Maryann Greer-Carpenter, a nurse who has dropped by to make sure things are going well. She notices that Mrs. Norton is planning to resume cooking her meals on her gas range, which would be a safety hazard in the presence of oxygen. She alerts Mrs. Norton to this and makes arrangement for her to receive Meals on Wheels instead.

Before she leaves, she checks the bathroom and notes a slippery floor with a bunched up terry cloth floor mat. Recognizing this as posing an increased risk of falls, she makes arrangements to have it replaced with a non-skid mat that has a rubberized backing.

Visiting seniors in need and offering counseling and support are all in a day's work for Maryanne Greer-Carpenter, a seasoned professional with over 40 years of background in nursing. But she doesn't work for a traditional medical organization. She is a faith community nurse with the Arlington United Methodist Church. She is part of a movement that has been around since the mid-1980's but has grown significantly over the years.

Faith community nursing, also called parish nursing or congregational nursing, seeks to integrate faith with traditional health care to bring a spiritual dimension to healing and pre-

vention. As Ms. Greer-Carpenter says, her job is to "nurture body, mind AND spirit."

According to a recent survey by the National Council of Churches (NCC) in collaboration with the Robert Wood Johnson Foundation, about 70 percent of 6000 surveyed congregations provide direct health services of some kind. Sixty-five percent offer various kinds of preventive services within their communities. Reporting congregations have an average of 13.07 health-related activities each. Examples include health screenings, 12-step programs, emergency medical funding, influenza vaccinations, senior health programs, counseling and emotional support and programs for managing diverse conditions ranging from obesity to HIV/AIDS.

"It is not surprising to find that churches see health care as a part of their faith mission and mandate," said Rev. Dr. Eileen W. Lindner, deputy general secretary of the NCC for Research and Planning, who supervised the survey. "The results of this survey confirm a higher energy for health care than we might have thought, however, and show that effective health care ministries are being developed by congregations of all sizes to meet the urgent needs of their communities."

For many places of worship, the faith community nurse is a key member of the team that carries out the health care ministry. The movement is active not just in the U.S., but in other countries. Including Britain, Canada, New

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Influenza: It's That Time of Year Again!

Annual epidemics of influenza ("the flu") appear in the United States during the late fall and winter seasons, unfortunately killing an average of 36,000 people per year. Rates of serious illness and death are highest among the elderly, children under 2 years old and persons at increased risk due to underlying medical conditions.

As we all know, annual vaccination is the most effective way of preventing influenza infection and its potentially serious complications. The best time to be vaccinated is October or November, but vaccination can still be effective if given in December or even later. Among adults, the U.S. Centers for Disease Control and Prevention recommends the influenza vaccine for all of the following:

- ◆ All persons who want to reduce the risk of becoming ill or transmitting the infection to others.
- ◆ All persons aged over 50 years.
- ◆ Women who will be pregnant during the flu season.
- ◆ Persons with chronic pulmonary, cardiovascular (except hypertension), renal, hepatic, hematologic or metabolic disorders, including diabetes mellitus.
- ◆ Immunosuppressed persons, whether caused by medications, HIV infection or other causes.
- ◆ Persons with any condition that can compromise respiratory function or the handling of respiratory secretions or cause increased risk of aspirating material into the lungs.
- ◆ Residents of chronic care facilities like nursing homes.
- ◆ Health care personnel.
- ◆ Healthy household contacts and caregivers of children less than five years old and adults over 50.
- ◆ Healthy household contacts and caregivers of persons with medical conditions that put them at higher risk for severe complications of influenza.

Influenza infection is characterized by the abrupt

onset of constitutional and respiratory symptoms including fever, muscle aching, headache, malaise, dry cough, sore throat and runny nose. Uncomplicated infection resolves after three to seven days in most people, although cough and malaise can persist over two weeks. However, influenza can also cause a primary viral pneumonia, aggravate underlying medical conditions or predispose a person to bacterial respiratory infections.

Ready Hands provides educational materials on influenza to all employees each year, encourages all aides to receive the vaccine and pays for the cost.

Check Your Knowledge About the Flu:

True or False?

1. The flu shot can cause influenza.
2. Persons with moderate to severe illness accompanied by fever should not be vaccinated until they are well.
3. Diarrhea is a common manifestation of influenza.
4. The flu vaccine's side effects are worse than the disease.
5. Wearing gloves and a face mask are adequate protection against getting influenza.
6. Influenza can spread via both airborne particle transmission and direct contact.
7. The flu shot is only effective if given before December.
8. The commonest side effect of the flu vaccine is soreness at the injection site lasting less than two days.
9. The nasal spray vaccine (FluMist) may only be used for healthy people aged 2-49 who are not pregnant.
10. People become contagious even before they actually experience flu symptoms themselves.

Answers: 1. False, 2. True, 3. False, 4. False, 5. False, 6. True, 7. False, 8. True, 9. True, 10. True.

Faith Community Nurses, continued

Zealand and Australia. In our area, dozens of churches and synagogues have a volunteer or paid nurse on staff. Their activities generally focus on the needs of their congregation. A nurse at a church with many young families may spend much of his/her time on well baby visits and helping new parents adjust. Arlington United Methodist Church, where Ms. Greer-Carpenter serves, has an older congregation, so much of her work revolves around the needs of the elderly.

As the field grows, it is finding new areas of support and recognition. In 1997, the American Nurses Association designated faith community nursing as a recognized specialty. No specific educational credentials are required, but numerous continuing education courses and symposia are available through organizations like the Health Ministries Association, the International Parish Nurse Resource Center and the Association for Clinical Pastoral Education. College and university nursing programs also offer courses.

Nana Yaa Kwabia Receives Quarterly Recognition Award

It is never easy to select one particular aide for special recognition from among the many wonderful employees working for Ready Hands. However, in Nana's case, it's as easy as it gets! Nana is just a great employee.

Nana joined Ready Hands in May of 2006. Since then she has worked with several clients, including two extended live-in assignments. The feedback is always very complimentary from clients and other professionals who see



Nana at work. She approaches her job with a cheerful, positive attitude. She is highly reliable, takes her job seriously and always follows Ready Hands' policies.

THANK YOU, NANA!!!