Purpose

A pivotal goal of faith community nursing practice is empowering members to be good stewards of their personal health resources. To that end two faith community nurses (FCN) have partnered together with a workplace wellness company since 2001 to conduct an Annual Congregational Health Screening for members of two protestant churches. The screening has involved comprehensive lab screening along with blood pressure, height and weight. Individual assessment of health habits, health values and setting goals for health modification are also part of the process.

Design and Population Served

The screening is conducted each fall. Adults age 18 and older are invited to participate. Publicity for the event starts in August and continues until the week before the event. Health Maintenance Institute, a workplace wellness company, sends lab technicians to draw blood. Volunteer nurses are recruited to help with blood pressure and height and weight. Church members pay out-of-pocket for the screening and everyone must have the Basic Blood Panel which includes fasting CBC, Chemistry Panel, full Lipid Panel and Glucose. Over the past 18 years, the Basic Blood Panel has ranged in price from $20-$55. Additional optional tests which can be added to the participant’s screening for an additional fee are CRP $40, Vitamin D $45, Thyroid Panel $40, PSA $40 and Colo-care stool kit $6. Participants do not need a doctor’s order to participate and they receive literally several hundred dollars of tests for very low cost. In the early years of the screenings, participants completed a Testwell Health Values Clarification tool which was electronically scored by the company. As the number of repeat participants each year grew, fewer and fewer people completed the tool and so use was discontinued. Each participant agrees to a follow-up consultation with the FCN after the screening. During that consultation results are reviewed with the participant being educated about the meaning of each test and the significance of their personal results. Health values and health goals are discussed during the consultation. The participant is given a copy of the results to give to their primary care physician and a copy for their personal health file. If they are in need of referral to a primary care physician or other practitioners, those referrals are made at that time. The follow-up consultation is the beginning of an ongoing health coaching relationship between the faith community nurse and the participating church member. Many of the participants have participated yearly for at least 5 or more years. With each year, participants bring their previous year’s results to their follow-up consultation so comparisons can be made and achievement of health goals analyzed.

Outcomes and Implications for Practice

The event helps clients to grasp the integration between faith and health and promotes continuity of care across the lifespan. Over time young members of the churches growing into adulthood begin to participate in the screening. The FCN helps members get a solid screening baseline on their health and becomes a personal health coach, ultimately enhancing the health of the whole congregation. Over the years the screening has been conducted, the following disease states have been identified and addressed in participants: Hypertension, high cholesterol, pre-diabetes and diabetes, thyroid disease, chronic kidney disease, anemia, hemochromatosis, polycythemia vera, chronic leukemia, prostate disease, and vitamin D insufficiency and deficiency. In some cases where primary care physicians have failed to address abnormal results with the member, the faith community nurse has been pivotal in making alternate physician referrals to get treatment initiated. Many participants participate yearly and schedule yearly physicals around the annual screening. Ultimately, participants perceive greater control over their health and personal health resources. The trusting relationship developed with their FCN allows for ongoing coaching that increases their ability to make changes and communicate with their doctors. Educational program opportunities are revealed to the FCN by screening results.