

- Participants in formal consultations or informal discussions to address issues in nursing practice as an application of education and knowledge.
- Identifies modifications or accommodations needed in the delivery of education based on healthcare consumer and family members' needs.
- Shares educational findings, experiences, and ideas with peers.
- Supports acculturation of nurses new to their roles by role modeling, encouraging, and sharing pertinent information relative to optimal care delivery.
- Facilitates a work environment supportive of ongoing education of healthcare professionals.
- Maintains a professional portfolio that provides evidence of individual competence and lifelong learning.

Learning Activities

■ Case Studies

Instructions:

1. These case studies are about professional boundaries, knowledge, and understanding of the state Nurse Practice Act and ANA/HMA *Faith Community Nursing: Scope and Standards of Practice* (3rd ed., 2017).
2. After reading or role playing the case studies, divide participants into small groups. Encourage participants to discuss the questions provided.

Questions:

After small group discussions, you may wish to have participants share insights with the larger group.

Case Study 1: Becki's Facebook Friends

Becki is one of the FCNs at Our Lady of Hope Community Church. She loves her job, and the congregation and staff all love her. She is also very active on social media and posts to Facebook daily, keeping her friends and family updated on her life. Kitty recently began attending Our Lady of Hope and has visited the clinic several times. She has shared with Becki her health problems and let her know that she has no family in the city. After Becki invited Kitty to a concert with other friends, Becki posted pictures of the outing on Facebook with this caption on the ones of Kitty, "One of the reasons I love my FCN job at Our Lady of Hope is because I'm able to provide support and encouragement."

1. Is this a boundary violation?
2. How would you respond to Becki concerning this situation?

Case Study 2: Saul is a Witness

Saul has been a member of Church on the Hill all his life. He knows many of the members very well, and he works as a full-time geriatric nurse specialist at the local hospital. He also works part-time as one of six unpaid FCNs at the church. You are the manager of the faith community nursing ministry. Mr. Johns is an 88-year-old member. Saul has known Mr. Johns and his family all his life. On a recent visit to the clinic, Mr. Johns, accompanied by one of his children, asked Saul if he would witness some forms to give his child power of attorney over Mr. Johns' finances as well as medical power of attorney.

1. What action should you take?
2. Does this raise any legal or boundary issues?
2. How can a situation like this be prevented from occurring in the future?

Case Study 3: Jancie Has a New Beginning

His Blessed Hope Church is a large faith community located in a metropolitan city. The spiritual leaders have decided to begin a faith community nursing ministry using an unpaid model. They know Jancie has a calling and

a passion for this ministry, and they have asked her to be the faith community nurse. She has read many articles and attended a half-day presentation about beginning a faith community nursing ministry. Although she has not attended a Foundations of Faith Community Nursing course, she will be responsible for the development of the program.

1. What would you recommend Jancie do first in establishing the program?
2. What processes should Jancie put in place to ensure that the program adheres to the state's Nurse Practice Act?
3. How should accountability be maintained?
4. What legal concerns should Jancie consider, and how will these be addressed?

Case Study 4: Robert Faces the Law

A member of the Morning Glory faith community, where Robert is the FCN, has filed a lawsuit claiming he was not given appropriate care at the faith community, resulting in complications. He came to the clinic during a Wednesday evening service and was seen by Robert. He states that he told Robert he was "feeling funny." Robert asked if he had taken his blood pressure pill that day, then asked a few other questions, but did not take his blood pressure or do any other assessment. Robert told him to sit and relax for a few minutes and see if the feeling passed. After about ten minutes in the clinic, he told Robert he felt a little better and was told by Robert, "You may want to call your primary physician tomorrow and let her know about this little episode." Later that evening he was rushed to the emergency room with a diagnosis of stroke.

1. How would you advise Robert to respond?
2. What concerns should he have? Is documentation important?
3. Does the faith community have any liability in this case?
4. What is the faith community's responsibility for having a health insurance rider that includes a healthcare professional, paid or unpaid, on the faith community's staff?

■ Legal Issues Quiz

Instructions:

1. This quiz is an opportunity to process and integrate information from the module.
2. Administer the quiz in small group discussions.
3. When all groups have completed their answers, lead the large group through discussing their responses.

Question:

Identify one or two legal issues in this module that shed new light on your ministry as a faith community nurse.

Quiz

1. Give an example of how nurses can unintentionally blur boundary lines.
2. Why should an FCN have professional malpractice insurance?
3. In regard to being held accountable by the Nurse Practice of your state, does it matter if the FCN is paid or unpaid?
4. How should the FCN respond to the spiritual leader who asks for information about the health status of individual members of the faith community?
5. How often should the FCN review the Nurse Practice Act?
6. For a legal finding of negligence, what elements must exist?
7. Give an example of how the FCN could be accused of breach of duty.
8. How does HIPAA impact faith community nursing practice?