

HEALTH MINISTRY PROGRAM SURVEY

We would like to receive your input about the health focus of our health ministry. Please check the response that best describes your feelings about the following statements.

How familiar are you with the programs of our Health Ministry?

Very familiar ___ Some what familiar ___ Not at all familiar ___

How familiar are you with the Faith Community Nurse (FCN)?

Very familiar ___ Somewhat familiar ___ Not at all familiar ___

Please respond to the following statements

- I am becoming comfortable with the idea that a person's health results from interplay of lifestyles, behaviors, attitudes, faith and physical well-being? Yes ___ No ___
- Health and healing are becoming more important parts of our church's mission and everyday activities? Yes ___ No ___
- The FCN and the volunteers in our Health Ministry offer a variety of support services and activities to our faith community. We would like to know if you have ever used any of these services:
 - ___ Bulletins and newsletter articles on health topics
 - ___ Participated in health screening, health fair, educational program, support groups
 - ___ Have talked with the FCN about a health matter or concern
 - ___ I know someone who has talked with the FCN about a health matter
 - ___ The FCN has referred me to a health care provider or community resource
 - ___ I have changed my lifestyle as a result of the FCN
 - ___ I have participated as a volunteer in cooperation with the FCN
 - ___ A health ministry volunteer has provided support during a time of personal need
 - ___ The FCN has provided support to me or my family

Check the activities you would like the FCN to start or continue to provide in the future:

- ___ Articles on health topics in bulletins and newsletters.
- ___ Health education programs or support groups.
- ___ Opportunities for me to meet individually with the FCN
- ___ Information on other community groups, organizations and services.
- ___ Opportunities to participate as a volunteer.
- ___ Opportunities to discuss the relationship between my faith and my health.
- ___ Visiting shut-ins, hospitalized members, and follow up visits at home.
- ___ Other ideas(please specify) _____

Age: 13-17 ___ 18-30 ___ 31-50 ___ 51-65 ___ 66-75 ___ 76-85 ___ 86+ ___

Female ___ Male ___ Single ___ Partnered ___ Married ___ Widowed ___ Separated ___ Divorced ___

I believe the Health Ministry should continue its programs under the coordination of the FCN

Yes ___ No ___ If no, please explain:

I am willing to support the program with my: time ___ money ___ talents ___

Comments: