

Canterbury Crest 2009 Annual Meeting Executive Report

Given April 19th by Erroyl Hawley, Executive Director

Last year I shared with you how the Cottage related to our mission fulfillment, that even though it was not a replacement “small facility,” it definitely fills the void amply. It can be thought of as a vacation cottage that one shares with a friend as a spiritual retreat. There is no charge to Cottage guests, other than a commitment to spiritual growth and healing. (And, the nurses charge the patient just like any other home visit.) It is a resort located where Christian Science nurses can make round-the-clock visits in support of healing. And, let me assure you, the Cottage is fulfilling its purpose.

One of the things special about the Cottage, like at your own home, the nurse visits as a self employed professional, not as someone’s else’s employee. Therefore, there is no occasion for employee type regulations of the nurse/patient relations. That means, none of the onerous OSHA regulations including the modern fears of contagion, which are so imposing, consuming and expensive in a facility environment. To be sure, Christian Science nursing facilities are taking this challenge on seriously too, but it surely is an uphill battle. In the home environment, the nurse is liberated to focus on one thing, the commitment of the patient and practitioner to the spiritual fact in all things.

Now, this year, I would like to share with you the essence of our alliance with the Christian Science nurses. So let’s begin with some background; to practice Christian Science nursing is to start from a totally spiritual basis, from the spiritual basis of creation, from the perspective of “the only.”

We read in *Science and Health*,

The infinite has no beginning. This word *beginning* is employed to signify *the only*, — that is, the eternal verity and unity of God and man, including the universe. The creative Principle — Life, Truth, and Love — is God. The universe reflects God. There is but one creator and one creation. This creation consists of the unfolding of spiritual ideas and their identities, which are embraced in the infinite Mind and forever reflected. These ideas range from the infinitesimal to infinity, and the highest ideas are the sons and daughters of God. (S&H 502:24)

Is that a unique perspective or what? Now let me call your attention to a description of Christian Science nursing care which is in our published Scope of Services . . . The first four items focus on metaphysical encouragement and support. Isn’t this what sets any Christian Science practice apart as unique? Of spiritual value beyond measure!

OK, long story short; in the 80’s, the Board of Directors of The Mother Church commissioned a study on Christian Science nursing, which turned out to be quite illuminating. It brought the light of day to the spiritual essence of true nursing. The results included the publishing of a booklet “The Foundation for Christian Science Nursing.” . . . You can even say that Canterbury’s pioneering experience is part of the outcome.

So for trained Christian Science nurses, what are the opportunities for engaging in their spiritual ministry? There are about three:

Private duty - List in The Christian Science Journal and respond to calls from anywhere. This usually means being willing to travel extensively because there are

very few geographic markets with enough work to sustain a nursing practice.

Work in a facility - This is the most common and of course is the environment where most of the training takes place.

Independent contracting to facilities - A hybrid of the basic two. There are a number of nurses that travel between facilities as the case loads at facilities vary.

Now, back to Canterbury: In March of 2004, the Board wrote to you of the reorganization from a “facility centered to a Field oriented” mode of Christian Science nursing ministry. For the patient, that means, that Christian Science nursing care is provided by an individual Christian Science nurse, not an institution. For the nurse, that means leaving the institutional framework and venturing into a home environment as an individual witness to divine Love’s care. The Board envisioned a robust nursing service by “individual Christian Science nurses.” Individual nursing ministries. We have grown to see the genius of this vision. Like the healing treatment ministries of Christian Science practitioners, Christian Science nursing is also, at its core, an individual spiritual ministry. Gratefully, the whole Christian Science nursing movement is seeing this. It is an idea whose time is coming into full bloom.

Canterbury enters into a contractual arrangement with individual Christian Science nurses, in such a way that they cooperatively assure availability on a daily basis, 24/7/365.

Our vision of availability includes:

1. Prompt responsiveness to phone calls for care
2. Reasonable uniform pricing
3. Clerical/business office support for nurses so they can spend their time nursing
4. Access for all in our Field
5. Flexible capacity to meet a varying demand

For Canterbury, availability is of vital interest to our Field, and worth investing in. When you call for a family member or friend, you’re calling for assurance. (There is some parallel with calling the fire department. You expect readiness and capacity.) As Dick described in the Treasurer’s report, our expenses are about assuring availability in the fullest sense. The administrative support, the outreach to the Field, the visit mileage reimbursement, the mini-care workshops, and the financial supplements to patient visit charges, all of these are about retaining a viable availability to serve Canterbury’s Field. And over the last five years, we have become successful.

Right now, we have three permanent nurses, our core nurses, contracting with us to coordinate among themselves the perpetual availability of their individual ministries to our Field . . . They are not my employees. I’m not their boss. They work for the patients. This is a unique pioneering model. There is good reason to believe that if Canterbury did not promote and support its mission to assure availability, (if we did not take proactive steps to retain availability) nurses living in our Field would need to explore the basic three options for gainful employment, the ones I described earlier. So, locally based nurses would likely be otherwise engaged when a member of our Field calls for care. (Most of the nurses listed in the *Christian Science Journal* are not really available to respond to calls, like you would expect for listed practitioners.)

So you can see, with Canterbury’s mission to “assure availability,” retaining Christian Science nurses geographically available is a most important part. And as Dick pointed out, it is through your commitment and support that Canterbury’s mission is fulfilled. While, the nurses serve patients, you are really the primary constituents in Canterbury’s mission. You are appreciated and the whole Field is blessed.