

Older Adult Ministry Survey For Local Church Leaders

Please read the following entries and rate the quality of the ministry in your church by circling 1-4 (4=Very Good, 3=Good, 2=Fair, 1=Poor). If your church does not have a particular ministry, please circle 0=N/A, indicating that the ministry or program is Not Applicable to your church.

KEY 4=VERY GOOD 3=GOOD 2=FAIR 1=POOR 0=NOT APPLICABLE
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OUTREACH/SERVICE/MISSION

1. Transportation for Older Adults (e.g., to/from Sunday school and worship services)	4	3	2	1	0
2. Transportation for Older Adults (e.g., to/from medical/legal appointments, physical therapy)	4	3	2	1	0
3. Meals on Wheels Ministry	4	3	2	1	0
4. Visitation Ministry Involving Older Adults	4	3	2	1	0
5. Our church provides these ministries to local nursing homes:					
a. Worship	4	3	2	1	0
b. Bible Study	4	3	2	1	0
c. Hymn Singing	4	3	2	1	0
d. Communion	4	3	2	1	0
e. Other Ministry to Nursing Homes _____					
6. Adult Day Care Ministry	4	3	2	1	0
7. Respite Care Ministry	4	3	2	1	0
8. Congregational Health Care Ministry	4	3	2	1	0
9. Parish Nurse Ministry	4	3	2	1	0
10. Healing Ministry with Older Adults	4	3	2	1	0
11. Prayer Ministry with Older Adults	4	3	2	1	0
12. Intergenerational Ministry (older adults involved with children and/or youth)	4	3	2	1	0

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13. Short-term Mission Projects Involving Older Adults					
a. Local	4	3	2	1	0
b. National	4	3	2	1	0
c. Global	4	3	2	1	0

HOME MINISTRIES

14. Visit Homebound Members	4	3	2	1	0
15. Take Communion to Homebound Members	4	3	2	1	0
16. Provide Tape Ministry	4	3	2	1	0
17. Minor Maintenance and Home Repair (e.g., painting, carpentry, auto repair)	4	3	2	1	0
18. Home Chore Ministry (e.g., cooking, cleaning, sewing, paying bills)	4	3	2	1	0

WORSHIP/CHURCH SCHOOL

19. Our Church Has an Annual Older Adult Recognition Service	4	3	2	1	0
20. Large-Print Materials Are Available in Worship (e.g., Bibles, hymnals, songbooks, worship bulletins)	4	3	2	1	0
21. Large-Print Materials Are Available in Sunday School Classes (e.g., Bibles, hymnals, songbooks, curriculum)	4	3	2	1	0
22. Hearing Devices Are Available in Our Sanctuary	4	3	2	1	0
23. Church Buildings are Physically Accessible (e.g., ramps, doors and doorways, bathroom facilities)	4	3	2	1	0
24. Our Church Administers an Annual Accessibility Audit	4	3	2	1	0

ENRICHMENT OPPORTUNITIES

25. Our Church Offers Educational Seminars Covering These Topics:					
a. Health care	4	3	2	1	0
b. Computers and New Technology	4	3	2	1	0
c. Finances	4	3	2	1	0

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d. Pre-retirement	4	3	2	1	0
e. Caring for Aging Parents	4	3	2	1	0
f. Raising Grandchildren	4	3	2	1	0
g. Alzheimer's Disease	4	3	2	1	0
h. Grief and Loss	4	3	2	1	0
i. End-of-Life	4	3	2	1	0
j. Advance Directives (e.g., living will, durable power of attorney)	4	3	2	1	0
k. Other Topics (please be specific) _____					

SUPPORT GROUPS

26. Telephone Reassurance Ministry	4	3	2	1	0
27. Widow-to-Widow Ministry	4	3	2	1	0
28. Caregiver Support Ministry	4	3	2	1	0
29. Adult Children of Aging Parents	4	3	2	1	0
30. Alzheimer's Disease	4	3	2	1	0
31. Other Support Groups (please be specific) _____					

RECREATION/SOCIAL MINISTRY

32. Our Church Has These Activities Available to Older Adults:					
a. Travel/Trips	4	3	2	1	0
b. Fellowship Meals	4	3	2	1	0
c. Fine Arts/Senior Theatre	4	3	2	1	0
d. Other Activities (please be specific) _____					

33. Would you tell us about any other ministries and/or programs your church offers to older adults?

(Please be specific and attach a separate sheet, if necessary.) _____

Tell us about your church: (please print or type)

34. Your Name _____
(FIRST) (LAST)

35. Church Name _____

36. Church Address _____

37. City _____ 38. State _____ 39. Zip Code _____

40. Does your church have a Church Council/Committee/Team on Older Adult Ministries?
___yes ___no

41. Does your church have a paid Church Staff Coordinator/Director for Older Adult Ministries?
___yes ___no

42. Does your church have a Church Volunteer Coordinator/Director for Older Adult Ministries?
___yes ___no

43. Church Telephone _____ 44. Church E-mail _____

45. Church Website _____ 46. Annual Conference _____

47. Church Size: Total # of Members _____ 48. # of Members 65 Years & Older _____

49. What best describes the location of your church?
a. Metropolitan area ___ b. Suburb ___ c. Town ___ d. Rural ___ e. Other ___

50. Identify the primary ethnic group represented in your church:
a. White ___ b. Black (this group includes African, African American, Haitian, etc.) ___
c. Asian (this group includes Filipinos) ___ d. Pacific Islander ___
e. Hispanic/Latino ___ f. Native American ___ e. not specified ___

Thank you for taking time to complete and return this survey to:

Dr. Richard H. Gentzler, Jr., Director
Center on Aging & Older Adult Ministries
General Board of Discipleship, The United Methodist Church
POB 340003, Nashville, TN 37203-0003

***By completing and submitting this survey you agree to become a part of this information sharing connection.
May God bless your ministry with older adults.***