LAY PASTORAL VISITING



"I was sick and you took care of me, I was in prison and you visited me..." - Matthew 25:36

WHO: Lay Pastoral Visitors are trained lay people from a particular parish who have a sense of calling to serve God and others by visiting parishioners who are in need. This sense of calling to visit should be affirmed through others in the parish, and through the parish priest. The skills and assets that a Lay Pastoral Visitor should possess may be any combination of the following:

- good listener;
- warm demeanour;
- be able to show understanding and empathy towards those who are visited;
- ability to be thoughtful, caring, encouraging, kind, nonjudgemental;
- able to keep confidences;
- willingness to take training; and
- to be spiritually mature so that one's faith is able to be shared at appropriate times.

A good pastoral visitor will not only be able to accept themselves as they are but also able to accept others as they are, without judgement.¹

WHAT: Pastoral care is understood to involve those activities that promote spiritual and religious health and well-being. Such activities can include prayer, supportive counselling, constructive listening, and the ministry of presence.

To function as a Lay Pastoral Visitor, individuals must:

- Have the support and recommendation of their parish clergy.
- Complete the appropriate screening process of the Anglican
 Diocese of Nova Scotia and Prince Edward Island (such as criminal
 background and vulnerable sector checks, any SafeRChurch
 requirements, hospital orientation if applicable).
- Complete a Lay Pastoral Training program.
- Be willing to make a commitment of standards and time.

Lay Pastoral Visitors must be willing to meet for group meetings under a clergyperson's supervision, to continue in follow-up training, and be willing to commit a certain number of hours per week for a set number of months, as agreed with the rector/priest-in-charge.²



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¹ Peel, Donald, "The Ministry of Listening: Team Visiting in Hospital and Home. ABC, 1980. Page 28.

² Peel, Donald. Page 17.



Pastoral Conversations concentrate on:

- The person visited
- Accepting areas of tension
- Comfort through facing those things that cause tension
- Helping the person to share themselves
- Being understanding and empathetic
- Going through and echoing 'what is' as a way to process 'what should be'
- Being helpful by way of intimate sharing when the occasion calls for it and it seems appropriate. Though one has to be careful not to shift the focus from the one being visited to you as visitor.
- God and one's relationship with God
- Significant relationships and life events of the visitee.

WHEN: Lay Pastoral Visiting is a ministry that is parish-based, and functions under the supervision of the clergy. Trained Lay Pastoral Visitors visit members of the parish or community, providing pastoral care and support to those who request it during times of illness, grief and life stress³.

WHERE: Lay Pastoral Visiting can take place at a person's home, in a special care facility, in a prison institution, or in a hospital.

³ Church Effectiveness Nuggets: Volume 9; How to Develop a Congregational "Care Team", Herb Miller (Fifth Edition), 2009, Purpose of this Volume.

WHY: God has called disciples to care for the suffering.⁴ By visiting, we are participating with Christ in the ministry of healing by being present vehicles of God's grace.⁵ Lay Pastoral Visiting can help speed recovery for patients/parishioners by helping to keep morale and mental health in check. Lay Pastoral Visiting is part of a holistic approach to healing. When a parish sends lay visitors it meets a need that clergy contact cannot address - it becomes an expression of caring from the corporate body of Christ.⁶ Lay Visiting helps ensure that those in need do not "slip through the cracks." Simple expressions of care and concern during times of uncertainty, trauma, and sickness can make the difference between coping and not, healing and not, having hope or giving up.

It is important to affirm that Lay Pastoral Visiting is identified in the New Testament (See: Matthew 25:36b,c,70; John 21:15-17; Acts 6:1-4; 1 Corinthians 12:25-28; Ephesians 4:11; James 5:14-20; etc.). This ministry is NOT secondary or inferior to a clergy visit by a priest or deacon.

When we are healthy there are basic human needs: we all need to receive and give love; we all need a sense of worth and meaning; we all need to be forgiven and to forgive. For those who are ill or infirm, these basic human needs can go unmet. This is why Lay Pastoral Visiting is so important; it can serve as a life-line to those who are feeling isolated, separated, stagnant, depressed, off-track, traumatized, guilty, or unwell in any aspect of body, mind, or soul.

HOW (Do's and Don'ts): Before going into a visit make sure you are able to mentally check-in. It is very important to leave your own personal baggage at the door, so you can be *fully present* to your visitor. Pray for yourself, the person being visited and their situation. By mentally and emotionally checking-in you also prepare yourself for anything that you may see or hear during your visit.

⁴ Baxter, Column 1.

⁵ Peel. Page 16- 17.

⁶ Herb Miller, page 2 and Baxter, Samuel. Handout. Hospital Visitation: Some 'Do's and Don'ts"

⁷ Miller. Page 2.

It is also important before embarking on a visit to make sure your personal appearance is in a good state. By being neat, clean and 'put together' you are telling the person you are visiting that they are worth your time and important to you. Check your breath too.

Upon arrival, be sure to identify yourself: who you are and what organization you are with. Be sure to wear your Pastoral Visitor identification badge (includes your name, the parish you represent, contact info., etc.). In a culture where security and safety are a priority, this may give assurance to the one being visited and their family members.

When visiting, be sure to keep your ears open more than your mouth. You do not need to have all the answers. Remember that you are there to help someone else. There is no need to burden the person you are visiting by talking about your problems. Be careful about gossip. It is hard to avoid and is sometimes seen as a way to open up conversation, but if it becomes anything other than news then change the subject.

Conversations of gossip can quickly escalate and it is unprofessional as a Christian minister.

Observe your surroundings. What are they telling you?⁹ Does it look like the visitee has many supports from family, friends, extended community, the medical world? If you are visiting at a hospital it would be beneficial to take a short orientation if it is possible. It can be useful to introduce yourself to the nursing staff or other care staff.¹⁰



⁸ Baxter. Column 2 paragraph 8. Peel, page, 48.



It may be challenging, but resist being nosey. Stay with the patient's needs. Giving someone the third degree can make them unnecessarily on edge. ¹¹

Be sensitive to the parishioner. If they are unwell, shut in, anxious, or hospitalized, chances are good that the person is experiencing grief over the loss of independence, abilities, freedom, privacy, dignity, etc. So be aware of their situation, be sensitive to it and look beyond what ails the person to see the person for who they are as a human being. Try to avoid assumptions, judging, shaming, scolding, arguing, or giving advice during your conversation (even if you whole-heartedly disagree with them). ¹² It is also important not to hover; once the visit begins, be sure to sit down. Take your outdoor wear off, so the person you visit does not get the impression you have one foot in the door and one foot already out the door.

Be aware of personal space: don't encroach on a person's 'comfort zone' by being too close, by sitting on their bed, or by leaning over them. It is, however, equally important that you are not so far away the person feels like a leper. If your parishioner is in hospital, or bed-ridden, if they happen to be unconscious or are unable to talk, be mindful that while one faculty may be hindered, other faculties may be working just fine. Be careful not to be unintentionally disrespectful. If the person, for example, cannot speak then do not get right up in their face and talk loudly and slowly as if their hearing or cognitive abilities are impaired.

⁹ Baxter, Column 2, paragraph 9. Peel, page 48.

¹⁰ Peel, page 47.

¹¹ Baxter, Column 2 paragraph 10. Peel, 44.

¹² Baxter Column 3, paragraph 1. Miller, Pages 11- 13

Also remember not to whisper when speaking with other family members or medical staff near the patient or even outside their door; even if you are not talking about them at all - they may think you are!¹³

Maintain eye contact throughout the visit to show your interest, but be careful not to stare. Be aware of your body language, that you are fully present to the person.

Be a good active listener. Echo back and paraphrase to show you are listening and understanding what the person is saying to you. For example by asking, "Are you saying X, Y, and Z?" or asking "It seems that you are saying A, B, C is that right?" - this allows the person being visited to agree or disagree. The person knows they've been heard. If incorrect, it allows the person to more fully explain and explore what it is they are trying to express to you. It also gives them a chance to hear their own thoughts said back to them, which can be helpful for their own self-reflection. In particular, pay attention to the person's feelings, and name them.

Active listening allows for the listener to check the perceptions behind the facts. By listening to how the parishioner is expressing their thoughts, the listener can then better get underneath what is at the surface of the conversation. By saying, for example, "It sounds as if you're angry about that," allows for the conversation to continue at a deeper level because the visitor would then qualify the perception/interpretation of the listener.¹⁴

If a parishioner has had a setback but is now showing progress and is on the mend it is sometimes helpful and appropriate to challenge them about what the future holds. For example, if a person's spouse has died and you've helped them through part of the grief process and they seem like they are in a healthy emotional state but still feel night times are lonely and long, you might ask them what they might do to change their nightly routine so that it doesn't trigger their grief so acutely.¹⁵



It is important to not hold your visitee captive. Don't use the opportunity to spout truisms or hollow platitudes (For example, don't say, "Your deceased loved one is in a better place." Or, "I know how you feel.") Also, don't try to 'fix' the person. Just listen. Use prayer and scripture, but do so appropriately and selectively.

During your visit it is important to not interrupt those with whom you are visiting. Watch that you don't finish their sentences or cut them off to insert your own thoughts. It is important to resist the urge to be overly-agreeable as a way to withdraw or divert. Try not to use praise as a substitution for listening or as a way of avoiding tension/unpleasantness. ¹⁶ Likewise, allowing another to overly indulge in negative or oppressive thoughts is also not helpful. ¹⁷ And remember, not every pause or silence must be filled with words. Allow for quiet moments. The Holy Spirit works in stillness.

Know your own limitations as well. If the needs seem beyond your scope, don't be afraid to refer that person on to another who can give them the appropriate care. Don't pretend to know more than you do¹⁸ and never give medical advice or opinions.¹⁹

¹³ Peel, page 52.

¹⁴ Miller, page 11. Peel, page 45.

¹⁵ Peel, page 53.

¹⁶ Miller, pages 9- 14.

¹⁷ Peel, page 52.

¹⁸ Peel, 46.

¹⁹ Peel, 50.



As the visit winds down, make sure to reflect on it and offer the visitee the opportunity to pray with you. You may offer a prayer extemporaneously or read from a book or devotional resource. Ask the person if it is their wish to be prayed for publicly in the Parish (listed in the Sunday bulletin, etc.). Respect the parishioner's wishes, limitations and privacy. Keep confidences.

Be aware that you are visiting someone who is unwell or in distress and with that knowledge gauge the length of your visit accordingly. If the person is unwell and in hospital, for example, 15 minutes is a good length of time to stay. ²⁰ Most regular pastoral visits are one hour. As the visit is winding down be aware of what you are promising and keep your word: If you say you will return, then you need to do so. Schedule a future visit if it seems appropriate.

As a Visitor it is natural to want to help the person you are visiting, but it is important to keep that in perspective and not let your sympathy run away with you. Allowing one's self to become overly concerned or

entangled in another person's situation, behaviour or feelings is not productive or fruitful. It does an injustice to the parishioner because they are not actively making changes for themselves, which will subsequently hinder healing or a positive move in the right direction.²¹ It is equally dangerous for the Pastoral Visitor to take on another's emotions and problems. The carer cannot effectively minister if they themselves are in a state of distress, depression or anger.

AT THE PARISH LEVEL: The Lay Pastoral Visitor is a part of the Pastoral Team of a Parish. Each such minister should participate in regular meetings and training. It is important to report all visits (names and dates) to the Rector/Priest-in-charge. Advise him/her of any critical updates with the visitee, without breaking confidentiality. Be sure to let the Rector or Priest-in-charge know of any sacramental needs or other requests.



²⁰ Peel, 51. Baxter, column 3, paragraph 4.

²¹ Miller, page 9.



CONCLUSION:

Lay Pastoral Visitors are trained lay people with a sense of calling to serve God and others by visiting parishioners who are in need. This ministry offers the parish an opportunity to connect on a deep level with those in the church community who may be struggling, suffering or perhaps trying to make difficult choices that are causing family conflict. Providing training and support to those with the skills to provide this ministry can create opportunities for parish growth, an increased sense of community, and connections to the wider community as resources are identified and accessed to support members in need.

OTHER PASTORAL VISITING RESOURCES:

The Book of Alternative Services

Occasional Prayers, pages 679 – 684 Home Prayers, pages 687- 697

The Book of Common Prayer

General Prayers, pages 54-61 Family Prayer, pages 728-736

<u>Pastoral Care & Prayer</u> – Anglican Fellowship of Prayer Canada www.anglicanprayer.org/resources/PG-42_Pastoral_Care_Brochure.pdf

Resource Author: The Rev'd. Anna Gillis-Hoeg



"Are any among you sick? They should call for the elders of the church and have them pray over them, anointing them with oil in the name of the Lord. The prayer of faith will save the sick, and the Lord will raise them up; and anyone who has committed sins will be forgiven. Therefore confess your sins to one another, and pray for one another, so that you may be healed. The prayer of the righteous is powerful and effective." – James 5:14-16