# Pastoral Care Guidelines

## In-Room Visits in Hospitals, Nursing Homes or Hostels

**How to say Hello**

* Arrive when expected, and, to avoid disappointment, be sure that a resident receives your message if they are awaiting your visit and you can't make it
* Introduce yourself
* Shake hands or touch in some way if comfortable for you
* Ask the resident's name and try to remember it for future visits
* Don't use a first name without asking - some residents come from a generation that was much more formal about names
* Always treat them with the dignity and respect their long years deserve

**What to Talk About**

* Admire the resident's hairdo, or what they are wearing
* Comment on possessions displayed in their room - keep in mind that the things you see may be treasured mementos from the past
* Talk about current events - what's happening in the world, your state, town, office, home, etc. Such discussion with an interested listener gives residents valuable mental stimulation that can help them remain alert and involved
* Try to find a subject of mutual interest - perhaps it is music, books, travel, sports, or children
* Avoid controversial or depressing topics
* Ask questions that require more than a yes or no answer-"Tell me about your childhood"
* Be patient if the reply takes a while - residents have memories to sift through before finding the one that answers your question
* Share a hobby, bring pictures (large size) of animals, flowers or travel scenes
* Ask your children to join you in a visit or bring a pet

**How to Talk**

* Try to converse at eye level - residents can become uncomfortable looking up from a wheelchair or bed for any length of time
* Sit on a chair or ask if you may sit on their bed
* When addressing someone who is hard of hearing, be sure to let him or her see your face, or lean close and speak directly into one ear
* Talk slowly and distinctly - you don't have to shout
* To avoid startling a blind person, speak as soon as you enter the room - don't wait until you are right next to him or her, say where you are going to stand or sit. If such a resident is ambulatory, offer your arm for walking
* Don't ever come up behind anyone sitting in a wheelchair and start moving the chair without warning - such unexpected motion can cause a real scare
* A smile and touch can communicate your caring to residents who may not be able to speak to you or respond visibly in any way. Try to see through their disabilities and find the special person within

**How to Listen**

* Be attentive, be patient with repetition - encourage residents to share memories and experiences with you. Try to give your undivided attention to the story tellers. Respect confidences

**How to say Goodbye**

* Watch for signs of fatigue such as labored breathing, lack of concentration, restlessness, drowsiness, inattentiveness, and be ready to leave when such occur. A 10-15 minute visit may be just right one day, while an hour might do another day. Use good judgment
* A cheery good-bye, and a promise to come again is an easy way to end your visit - but DON'T make that promise IF you can't keep it

What to do if…

* A resident becomes ill or agitated? Call a nurse or aide
* A resident needs help getting to the bathroom, in or out of a wheelchair or bed? Call a nurse or aide - though your intentions are good, you may not know the proper techniques for lifting and moving residents. Don't take chances
* A resident becomes upset or tearful during your visit because of a subject you feel uncomfortable with or not qualified to discuss, such as, death, financial matters, family resentment? Do not attempt to give advice. Notify the Volunteer Director/ Social Services person, Nurse or Administrator; they will see that appropriate follow- up or counselling is provided
* A resident asks for sweets, cigarettes, medication, etc? Don't offer any of these things. Check with the Nurse or Volunteer Director. Some may be allowed, but others may be prohibited due to dietary or medical restrictions. Do not rely on what the resident may tell you
* A resident asks you to remove vest or waist restraints: Do not remove or untie. Check with the Nurse. These restraints are worn to prevent injury and can be used or removed only under a doctor's order
* You see something in the facility that you do not understand, or you hear something that causes concern? Talk it over with a staff member

Remember - Always

* Knock before entering a room
* Address the resident and introduce yourself
* Explain that you are a volunteer visitor
* If you should learn things of a confidential nature, please keep if confidential

## Parishioner Visitation Guidelines

**Purpose**

To offer the love of Christ

* by visiting or phoning those who are in need, either through illness, old age or other reasons
* connect with parishioners who are unable to attend services on a regular basis
* let them know they are loved and valued members of our fellowship

**Notification**

A co-ordinator

**When**

* As arranged by the Parish Visitor but at least once a month
* Telephone calls may be more frequently

**How**

* Always ring and make an appointment before a home visit and be punctual
* If your action is phoning, arrange a mutual time to ring
* Enquire how they are
* Listen
* Offer to pray with them
* Endeavour over time to build relationship and continuity of visits
* If the person you are visiting has specific needs that cannot be met by their own family you may be able to let them know if there are any community or church services available to them, e.g. LINC, Helping Hands
* Advise Reverend Desiree / Pastoral Care Co-ordinator if the person you are visiting is sick, hospitalised, just out of hospital or requests Home Communion

**Confidentiality**

* If you don’t have permission to share, whatever the issue, **don’t!**
* Lack of confidentiality breaks trust. But if you are concerned, speak with a Priest **Remember,** you are a representative of Jesus and Alstonville Anglicans