The First UU Church of Richmond
1000 Blanton Ave
Richmond, VA 23221

Dear Lay Pastoral Care Trainee:

Welcome to our Lay Pastoral Care training program. We extend to you the care and concern of the First Unitarian Universalist Church of Richmond. This training program has evolved with input from a number of Unitarian Universalists.

Following the attack on the Pentagon on 9/11, two members of the Unitarian Universalist Church of Fairfax started a program designed to help the congregants in their church come to terms with the tragedy. Marilyn Renfield, MD and Kathy Birnbaum were brave pioneers who wanted to provide comfort, hope, and relief to those members of their church suffering from personal loss and pain in their lives. In April of 2003, they trained us at the First UU Church of Richmond when Reverend Enid Virago started our Lay Pastoral Care Program.

John and Vicky Griffin were the co-chairs of the program in Richmond. They inspired us to be part of the research and development of Lay Pastoral Care. In the meantime, Rev. Jeanné Pupke was serving the Unitarian Church of Portland where a Lay Pastoral Care Program was thriving. She later was called to serve the First UU of Richmond and asked Carol Wayne to chair the LPCA Program when the Griffins retired. In 2011 Linda Ericson joined the LPCA Team and in 2014 she joined Carol as co-chair. It is our hope that someday our denomination will develop a curriculum for Lay Pastoral Care so that any UU congregation will be able to assist their minister(s) and support their members.

This is your manual; use it as a starting point as you begin the process of training in the Lay Pastoral Care Program. Add your ideas and help develop something even more effective.

Please feel free to email me if you have questions.

Sincerely,

Carol W. Wayne
Linda Ericson

Co-Chairs, Lay Pastoral Care

Associates

pastoralcare@richmonduu.org
## Lay Pastoral Care Program

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Lay Pastoral Care Training Schedule

Friday, 6-9 pm

Hymn #69 “Give Thanks”
Dinner
Chalice Lighting and Reading
Welcome
Getting to Know You
How Does Your Congregation Care for Your Members?
Break
What is a Lay Pastoral Care Program?
Questions and Wrap-up
Extinguish Chalice and Reading

Saturday, 9 am—3 pm

Breakfast
Worship
What is a Lay Pastoral Care Associate?
Listening Fully
Companioniing
Break
Being a Spiritual Presence
Active Listening
Lunch
Hymn #346 “Come Sing a Song With Me”
Practice Listening
Why do Congregants Need to be Seen?
Real Visits, Real Dilemmas
How Matches are Made
From the Appointment to the Synergy: Logistics
Questions, Wrap-up, Evaluation
Extinguish Chalice and Closing Hymn #298 v. 3 & 5 “Wake, Now, My Senses”
The Lay Pastoral Care Program is...

LPC is a ministerial program to provide a confidential, caring presence to congregants undergoing stressful life challenges.

- An extension of the Minister's own pastoral care presence
- A group of Lay Pastoral Care Associates (LPCA) recruited by, and reporting directly to the minister – a unique ministry independent of the staff and committee structure of the church
- A program visible to, and accessible by the congregation (its clients)
  - Provides bulletin board Care Request Sheets
  - Maintains LPCA presence at vespers or other worship services
  - Creates recognizable name-tags or pins for LPCA
  - Inducts and recognizes LPCA at Sunday services
- A system for continuing LPCA training and feedback
  - Chaired by an experienced LPCA, reporting to the minister
  - Mentored by the minister
  - Stresses strict confidentiality, practiced throughout the program
  - Provides initial, basic training (1-2days)
  - Meets monthly (“Synergy,”) reporting and discussing congregant contacts (1-2hr)
    - Continues training at each monthly meeting (~1hr)
    - Provides self-support of members’ own life stresses
    - Discusses questions arising from congregant contacts
    - Quantifies LPC effort – recording number and length of contacts (typically ~1hr/wk; phone, or face-to-face)
- A means for maintaining a sustained connection between the congregants and the church, especially when service attendance becomes impractical or impossible
- A program that provides a structure for responding to emergencies that affect the congregation

Notes
The Lay Pastoral Care Program is not...

- A program providing practical, logistical service -- the function of a Care Committee
- A “support group” for congregants
- A source of specific (especially professional) advice
  - Legal
  - Medical
  - Financial
  - Psychological

Notes
The Lay Pastoral Care Associate is...

- The LPCA is an extension of the Minister.
  - Distinct from other caring members of the congregation
  - Represents the church as the Minister would
  - Is responsible only to the Minister
  - Is an addition to, not a substitute for, the Minister

- An LPCA provides care that is:
  - **Sustained.** Conducts regular, dependable, progressive meetings, and conversations that can continue to explore a line of thought.
  - **Trained.** Knows how to listen, recognize needs, be sensitive and empathetic, guide or prompt spiritual thinking, and support needs for spiritual practices.
  - **Confidential.** Accepts secrets, admissions, or other non-public thoughts.

- The LPCA is:
  - A recorder of life events, attitudes, attributes, desires for end-of-life, and other recollections.
  - A non-judgmental listener for thoughtful discussions, perhaps biased toward bringing forward the values of our faith.
  - Actively focused on the needs of the congregant rather than their personal dilemmas/situation.

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**Notes**

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The Lay Pastoral Care Associate is Not...

- Practical solver of everyday problems, a “fixer”
- Chat partner, unless it opens routes to deeper discussions; sometimes, chat may be the only communication possible
- Cheerleader, Pollyanna, “yes-man,” absolver
- Decision-maker
- Judge, approver
- Professional counselor (though trained to recognize when such services are needed)
- Searcher for own spiritual beliefs

Notes
How Pastoral Care Compares

Psychotherapy Counseling
- Treats diagnosable mental orders
- Helps congregant to change feelings, thoughts, and behaviors
- Helps congregant to ease conflicts
- Needs license

Pastoral Care
- Offers to hear congregants feelings and problems
- Visits with congregant in a neutral setting, their home, or hospital
- Provides forum for congregant to talk about current problems so that a greater understanding may be achieved
- Is more like what is called “Life Coaching”
- Helps congregant structure what needs to be done in the situation when congregant is overwhelmed
- Refers to professional mental health worker or one of the church ministers for counseling or therapy if needed
- Helps congregant find other professionals as needed
- Does not need a license and is not a therapist or counselor
- Is under the auspices of the minister, who meets with the team monthly

Care Committee
- Provides phone calls and cards of care and sympathy to congregants
- Sends birthday cards to church members
- On time-limited basis:
  - Provides meals
  - Helps with shopping
  - Provides transportation to and from the doctor’s office
  - Runs errands
  - Writes notes or letters
  - Makes phone calls
  - Provides child care
  - Visits congregants at home when needed, particularly after a hospital stay

Notes
**Listening Fully**

**What if...**

you could explain everything to someone who wants to hear the whole thing all the way through, the entire range of your experience, and you could finish your thoughts without interruption?

**What if...**

you didn't have to hear about how so and so handled it such and such a way, or get any other well intentioned but sometimes irrelevant advice?

You had compassionate support and the time to talk completely through the issue?

**Would it help you sort it all out?**

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**Notes**

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Nine Practices of a Good Listener

1. Listen to understand what is meant, not to ready yourself to reply, contradict, or refute. This is extremely important as a general attitude.

2. Knowing what is meant involves more than the dictionary meanings of words used. It involves, among other things, the tone of voice, the facial expressions, and the overall behavior of the speaker.

3. Observe all this and be careful not to interpret too quickly. Look for clues as to what the other person is trying to say, putting yourself (as best you can) in the speaker’s shoes, seeing the world as the speaker sees it.

4. Put aside your own views and opinions for the time being. Realize that you cannot listen to yourself inwardly and at the same time listen outwardly to the speaker.

5. Control your impatience because listening happens faster than talking. The average person speaks about 125 words per minute, but can listen to about 400 words per minute. The effective listener does not jump ahead of the speaker, but gives time to tell the story.

6. Do not prepare your answer while you listen. Get the whole message before deciding what to say in return. The last sentence of the speaker may give a new slant to what was said before.

7. Show interest and alertness. This stimulates the speaker and improves sharing.

8. Do not interrupt. When you ask questions, it is to secure more information not to trap or force the speaker into a corner.

9. Expect the speaker’s language to differ from the way you would say the “same thing” yourself. Do not quibble about words, but try to get at what is meant.

Notes
Exercise

**Situation 1:**
Jane’s grandmother moved in with her about six months ago because she was suffering from Alzheimer’s disease and had been living alone. Jane is an only child and is also a single mother of two young children. She can’t afford to put her grandmother in a home and can only afford part time help for her grandmother during the day while she is at work. She works all day as a waitress, and then comes home to care for her grandmother and two children. The financial strain, emotional stress, and physical labor are wearing Jane down and she doesn’t know whom to turn to.

**Situation 2:**
Scott was driving home late one night from work when he fell asleep at the wheel and hit another car head-on. It left Scott and the other driver hospitalized for weeks. The other driver suffered multiple fractures and had surgery to repair the damage. Scott also had surgery to fix two shattered legs. This left him disabled and unable to return to work as a contractor. Scott’s wife had to work two jobs to support Scott and their three children. Scott has horrible guilt over the accident and major feelings of inadequacy because he can no longer provide for his family.

**Notes**

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Companioning
A ministry of presence.

- Put everything aside before you begin visits so you are fully present to your congregants
- Stand WITH your congregants as they struggle with challenges so that they know they are not alone
- Convey unconditional positive regard, empathy, compassion, assurance, affirmation, understanding, and acceptance
- Talk about the feelings and the process of wrestling with the challenge. Resist the temptation to fix or cure the problem
- Assist them in identifying community resources that may be helpful
- Create a space in which congregants can acknowledge the multiple feelings they may have about their issues
- Don’t rush the process; progress will happen when the time is right
- Part of being caring is being honest; there may be times when you’ll want to reflect to your congregants your concerns about ideas they may have
- Be dependable. Keep appointments and confidentiality

Remember: It’s an honor to be part of such a personal, in-depth exploration
Why Do Congregants Need To Be Seen?

Life challenges that, “leave us feeling very alone and overwhelmed, or demand great contemplation”*

- Reasons for our 26 congregant requests (2007-2008)
  - Serious Injury/Illness  9
  - Isolation            9
  - Caregiver           4
  - Depression          3
  - Grieving            1
- Expect employment or financial issues to arise from current economic crisis
- Isolation is not specifically in the stressor list, but can arise out of many of the events listed in the “Top 15 Life Change Stressors.”
- Some stress is normal; but too much, too concentrated, can lead to increased illnesses or accidents and may warrant Pastoral Care
- “Top 15 Life Change Stressors” according to Dr. Rahe’s Life Change Stress Test provide some circumstances that may require Pastoral Care
- Other issues come to the Minister directly

* From the Lay Pastoral Care description sheet for congregants

Notes
Top 15 Life Change Stressors
(according to Dr. Richard Rahe’s Life Change Stress Test)

1. Death of a child
2. Death of a spouse
3. Death of a parent or sibling
4. Divorce
5. Separation from spouse due to work or marital problems
6. Being held in jail
7. Serious injury or illness
8. Loss of job
9. Death of a close friend
10. Pregnancy
11. Birth or adoption of a child
12. Miscarriage
13. Major business readjustment
14. Parent’s divorce
15. Relative moving in with you

Notes

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Lay Pastoral Care

Who might want Lay Pastoral Care?
Challenges come our way in life. Some are pretty manageable. Others leave us feeling very alone and overwhelmed, or demand great contemplation.

Lay Pastoral Care is available to offer sustained personal support to those enduring grieving, illness, injury, disability, marital changes, unemployment, relocation, caregiving, isolation, inability to attend church, or other difficult life situations.

Our ministers train and commission the Lay Pastoral Care Associates to provide an ongoing, caring, listening presence, spiritual support, and hope in times of need. This program is fundamental to our congregation’s mission statement, which includes:

“We grow in search of Wisdom, we care in support of Community, we act in service of Justice.”

How can I receive Lay Pastoral Care?
Call our ministers at 555-xxxx or the coordinator of the program, Carol Wayne at 555-xxxx. This service is available to members and friends of the congregation. There are no fees. This care is offered with strict confidentiality and under the supervision of the Minister.

Notes
How Matches Are Made

- The Chairperson meets privately with LPCA trainees to review their application forms, discuss their interests in depth, and develop a sense of their strengths.
- The Chairperson also keeps a zip code map of the area with an indication of the location of each LPCA.
- Congregants may contact the minister or the chairperson to request Lay Pastoral Care, or the minister may identify a congregant as needing care.
- If an LPCA finds out about a congregant needing care from either the congregant needing help or someone else, it should be discussed with the chairperson.
- The Chairperson identifies the LPCA best-suited to help the congregant based on strengths, interests, and location.
- The Chairperson calls the identified associate to explain the circumstances and be sure the associate can respond by phone within 24 hours.
- The Chairperson calls the congregant to let them know which LPCA will be in contact.
- The LPCA calls the congregant within 24 hours and arranges the first visit to

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From the Appointment to Synergy: Logistics

- Maintain confidentiality so that others near you or the congregant during calls or visits will not become aware of the Lay Pastoral Care (LPC) relationship. The only other people who should know are your Minister, church staff which the Minister has authorized, and the LPC Chairperson. (The relationship may be slightly less confidential in the case of dementia.)

- When you are matched with a congregant, call them within 24 hours and schedule the first appointment to be held within a week.

- Give them your phone number and let them know when it’s okay to call.

- Reschedule your appointment if you become sick with anything contagious.

- Meet on neutral ground that provides privacy.

- During the first meeting:
  - Explain what Lay Pastoral Care is
  - Explain the confidentiality of the relationship
  - Listen and provide companionship
  - Establish a plan of the frequency and duration of the visits (generally each week for an hour)
  - Schedule the next visit

- After the first visit:
  - Note the data needed for synergy meetings (# of visits, # of hours, etc.)
  - Record the key points discussed with your congregant
  - Record the issues you want to discuss on the next visit

- Call the LPC Chairperson if you have questions that must be answered NOW instead of waiting for the next synergy meeting

- Protect this relationship to focus on listening fully
  - Set boundaries
  - In general, transportation, meals, and similar needs should be met by others in the congregation

(cont’d on next page)
From the Appointment to Synergy: Logistics

- Attend the monthly training and synergy meetings:
  - Give the group a little information about the circumstances for your congregant without revealing identifying information
  - Ask the group for help if you have questions
  - Allow the groups to offer suggestions
  - Participate in helping your fellow associates with their congregants
  - Take notes during training so that you can refer to them later as needed

- As the congregant begins to come to terms with their challenges, you will sense when it’s time to close the relationship
  - Discuss with your congregant and determine their readiness and the best way to taper visits
  - Discuss any closure plans at synergy meeting
  - You may find a deeper connection to your congregant that keeps you in touch long after the supervised LPC relationship has closed—and this is normal

Notes

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Examples of Topics for Monthly Training

- Entering into discussion on Spirituality
- Dementia: Guest speaker from the Alzheimer’s Association
- Death and dying: anticipating grief
- How to be effective at Vespers
- Community catastrophe and grieving
  - Use a current event as example in training
- How to recognize when a congregant needs a referral to a professional: Guest psychiatrist as speaker
- Death and Dying: Stages of Grief
- Tuning in to disability and accessibility
- How we encounter one another and self care
  - Suggested reading: The Little Book of Spirituality for Atheists, Here If You Need Me by Kate Braestern; Difficult Conversations: How to Discuss What Matters Most by Douglas Stone
- Resources for aging: Guest speaker from the local Office on Aging
- Aromatherapy
- Death and dying: Planning your services and final arrangements
- Hospice services
- Review of Annual Report
- How to reach the congregant who is difficult to reach (example follows)
- Social Event
- Mental illness: Guest speaker from the National Alliance of Mental Illness Resources

Notes
How to Reach the Congregant Who is Difficult to Reach

(Monthly Training Example)

- Mention that you bring greetings from the congregation
- Read the church newsletter
- Read selections (lyrics, responsive readings) from hymnals
- Play a recording of Sunday service
- If congregant was on the BOD, check past minutes for information about his or her contributions to the church and read those sections to the congregant
- Bring a chalice to touch, hold, see, and light
- Show photos from daily life in prior decades when congregant was younger
- Bring a fruit or vegetable to see, touch, and eat
- Bring a seasonal nature item to see, touch, hold
- Read to the congregant from his or her library
- Show the congregant photos from his or her photo albums
- Bring something pleasing to touch
- Take congregants around their living quarters so they can give a tour and describe their belongings and the stories that go with them. Help them touch items they may not normally be able to reach
- Bring recordings of UU hymns to hear and sing along with
- Bring in art object for the congregant to see, touch, hold
- Show congregant church membership directory photographs from a range of years during the congregant’s membership
- Your loving, caring presence and tone of voice will be received probably more than you can tell

Notes
Evaluation of Lay Pastoral Care Training

Top three helpful sessions and why
1. 
2. 
3. 

Least three helpful sessions and why
1. 
2. 
3. 

Please provide feedback about the trainers

Overall suggestions to improve training