

# COVID-19 Advice on pastoral support in the community, including care homes

## Version control

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*This document is for planning purposes only until present restrictions are lifted. It will be kept under review and updated as events develop, with each update issued as a new version. The current version will always be available to download from the Church of England website via the [Coronavirus FAQs page](#).*

One of the church's most important areas of ministry is pastoral care. The usual ways of undertaking this have been very significantly affected by the coronavirus pandemic. Whilst innovative ways are being found to keep in touch and offer care, the usual route of face to face visiting has not been possible in most situations. This has been challenging and distressing for very many clergy and lay ministers as well as for those who receive such care.

As we move from 'lockdown' a greater range of pastoral contact may become possible in some situations. This guidance aims to enable pastoral support and visiting while minimising risk as far as possible.

## Can clergy visit people at home?

The current government advice suggests that limited pastoral visiting is now permitted based on a local risk assessment <https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/homes>

We would suggest that before you undertake a home visit, you consider:

- Whether it is necessary,
- The situation of the individual and their household. For example, are they shielding or does anyone have symptoms of COVID-19. In cases where people are isolating because one or more family members have symptoms or where an individual has been formally advised to shield, government guidance states that visits should only be made if this is "to remedy a direct risk to the safety of the household."
- Your own situation: whether you are clinically vulnerable or have someone clinically vulnerable in your household (see below)
- Whether there are other ways that you could offer pastoral care without a face to face visit.

## **What should I consider if I do visit?**

If you do decide to visit we encourage you to think through the following issues:

- When visiting a household where somebody is clinically vulnerable, but has not been formally advised to shield, for example, the home of someone over 70, try to make prior arrangements to avoid any unnecessary face-to-face contact with other members of the household.
- Pay particular attention to hygiene practices such as handwashing before and after the visit and observe good coughing and sneezing hygiene: covering your nose and mouth and disposing of single-use tissues.
- If physical distancing might be difficult, consider wearing a face covering. Please change your face covering between visits, and wash after use.
- Try to avoid touching things, and avoid any physical contact with the person/people you are visiting. This will be difficult as touch is an important part of interacting with people, but it also poses an additional potential risk.
- After the visit, please do not go directly to another visit, but go home, wash hands, shower and change clothes. Members of your household should not be greeted physically until this is done.

## **What if the person has been confirmed with COVID-19**

It is suggested that clergy and lay visitors should NOT visit (remember, it is likely that other members in the household will also have it). Government guidance indicates that only essential carers, wearing appropriate face masks and other personal protection equipment should attend those who are ill with COVID-19. Clergy and lay visitors are unlikely to be familiar with how to wear full PPE safely, thereby putting themselves at risk. Unlike healthcare professionals, they would also be required to self-isolate afterwards, rendering themselves unavailable for future pastoral service. In this situation they should offer support by other means such as by phone or video contact.

## **Who can visit?**

We suggest that any visits by lay visitors (including lay ministers) should be agreed with the incumbent.

Those aged over 70, those with specific chronic pre-existing conditions and pregnant women are considered clinically vulnerable. The Government advises that they should continue to take particular care to minimise contact with others outside their households, and so we would advise they should not be undertaking pastoral visiting to others at this time.

Those in the clinically extremely vulnerable group are strongly advised to stay at home at all times and avoid any face-to-face contact and so should not be undertaking any pastoral visiting.

If visitors have someone who is 'high risk' in their own household they should consider very carefully whether to visit in person.

### **What about visiting the dying?**

While comforting those who are dying is something that clergy and lay ministers will want to do, advice on physical distancing and hygiene apply. In particular, if there is reason to believe that the dying person *might have* COVID-19:-

- Laying on of hands should be avoided.
- It is preferable not to anoint with oil as it is not possible to observe physical distancing, but where the priest considers this to be an indispensable part of care for the dying he or she should apply the oil with an applicator that must be disposed of safely and immediately if it comes into contact with the dying person. Physical distancing should be compromised for as brief a period as possible.
- Inevitably the person dying will find it difficult to communicate. The temptation is for clergy to move as close as possible to the person to hear them and to communicate with them. Difficult as it might be, clergy must resist this; a cough or exhalation of breath can transmit the virus. Maintaining physical distance and not touching the dying person will feel strange and unnatural, but as hearing is one of the last of the senses that those who are dying lose, words of comfort and reassurance and tone of voice, all communicate signs of care and support.

### **What about visiting those in care homes?**

We advise that you contact the relevant care home and discuss with them whether they would be content for this to happen. Any visits would need to abide by the care home's policies.

Finally, it is important for everyone to recognise that clergy and others offering pastoral ministry can only do what is possible, which sometimes in these situations, might not feel enough. This can unfairly add to stress: please do not take care of your own physical, mental and spiritual health.