BACKGROUND

Both the theology and practice of pastoral care are deeply rooted in the historic Christian tradition of the “cure of souls,” focused fundamentally on the moral, spiritual and interpersonal care of the faithful. Such activities as healing, sustaining, guiding, and reconciling have most typically been associated with its exercise.

However, like so many other dimensions of Christian faith, pastoral care has been continually reinterpreted in response to the culture and time in which it functions. For example, in the early church, confession, prayers and pastoral visitations were at the core of ministry to the community of faith. Contributions to the poor also were encouraged. By the Middle Ages, pastoral care came to encompass the functions of counselor, lawyer, teacher, physician and friend. The constant, however, was that these tasks were grounded in and framed by the sacraments. Consequently, while all the faithful were encouraged to participate in the care of each other, the responsibility for it largely fell to the clergy - bishops, priests and deacons.

More recently, however, the church has broadened its perspective. First, our concern includes not only the spiritual health of the individual but the needs of the broader community. Second, issues of social, economic and political justice have increasingly been understood to be central to the pastoral ministry of the church. And third, pastoral care has clearly evolved as the mutual ministry shared by both the clergy and laity.

Each denominational tradition has a distinct understanding of and approach to pastoral care. For Anglicans, its practice is shaped by a specific process for “doing theology,” our sense of who the church is and the essential importance of the Incarnation for understanding the human condition and God’s response to it. Theologically, we expect pastoral care to assist people in deepening their faith and their ability to apply it in their individual and corporate lives. As a creedal church, the sacraments ground our common life and are vital in the pastoral care we share. And third, we affirm that the Incarnation - God made flesh among us - necessitates an especially broad understanding of the breadth of our pastoral concern, including issues of faith and spiritual direction, as well as those of physical and mental health and justice within society.

RATIONALE
The purpose of this document is to integrate our theological understanding of pastoral care with its actual practice within the Holy Communion community. Although there is a broad consensus among Episcopalians regarding the dimensions of pastoral care, individuals - both lay members and clergy - interpret them within the context of their own lives. Parishioners, for example, have unique experiences and perceived needs that frame their expectations for the kind of pastoral care they receive, those who should provide it and how frequently they receive it. Likewise, clergy have been shaped by their own experiences, professional practice and perspective on the needs of the parishioners they serve.

Clearly, the expectations of those who desire pastoral care and those who provide it can differ - sometimes significantly. The following principles are intended to strike an appropriate balance between the needs of parishioners and the ability of clergy and lay caregivers to respond to them.

**PRINCIPLES & PRACTICE**

- While provided under the guidance and direction of the rector, pastoral care is a mutual ministry shared with the laity through the Pastoral Care Committee.

- Pastoral care is understood to include spiritual direction, short-term and crisis counseling, visitation and sacramental ministry for those unable to participate in scheduled worship, individual and collective prayer for those with special needs, the distribution of flowers to mark particular occasions in the lives of parishioners and support for the advocacy of social, economic and political justice.

- Sensitive pastoral care information will be held in strict confidence except to the extent that specific information is authorized by the individual for broader release.

- Regular training, as well as opportunities for reflection and ongoing formation, will be provided for those engaged in pastoral care.

- Individual members of the congregation and their families are responsible for notifying the clergy or church office of the need for pastoral care.

- Those requesting prayer will be asked whether they wish to be included in the parish prayer list.

- Clergy and Lay Eucharistic Ministers (LEMs) will attempt to visit and bring Communion to those unable to participate in the worship life of the congregation every 4 - 6 weeks. A specific request for a **clergy** visit (as opposed to a LEM visit) should be communicated to the clergy by the individual parishioner or family member.
• If notified of a hospitalization or placement in another institutional setting (for example, nursing home), clergy will make every effort to visit the parishioner at appropriate intervals during his or her stay.

• If requested, clergy will make every effort to be pastorally available to parishioners preparing for surgery or other serious medical procedures.

• Clergy will limit pastoral counseling sessions to not more than six with an individual during a 12-month period.