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Organizing the Home Visit¹
The circumstances of visiting someone at home are different from those surrounding a visit to a hospital, hospice, nursing home or other facility, but the general ideas presented here are adaptable for any kind of pastoral visit. When visiting someone at home, for example, always call ahead and make an appointment.

Before the Visit
Make an appointment.
Even if you have a regularly scheduled time for visiting (after Mass every Sunday, for example,) call to confirm since the situation can change: The person may not be

¹ (Glen, Kofler, & O’Connor, 1997, p. 39)
up for a visit, relatives may have decided to come over, a Doctor visit might have been scheduled, and the like.

**Don’t visit if you are sick.**
The common cold may be seriously dangerous for a person who is already ill or quite frail. Call to cancel your appointment if you are not well.

**Spend time in prayer.**
If you’re going to be bringing communion, perhaps you can attend Mass that morning, spend time praying in the Blessed Sacrament chapel at church, reading a scripture passage, or a spontaneous prayer, or however you are led.

**Check your emotions.**
How do I feel today? How do I feel about going to the meeting today? How am I feeling about the meeting? Do I need to talk to someone else about what happened?

**Before the visit:**
How do I feel today? How do I feel about going on this visit today? Do I have any strong feelings about something else that might preoccupy me today?

**Gather what you need:**
Did you promise to bring something? Find your ritual book or pages, pyx and other needed items. Take a church bulletin.

**The ride over.**
This is your final opportunity to settle yourself. Turn off the radio and reflect. Pray some more. (But don’t let this be the only time that you pray!) Sort out your day and let it take a back seat to your visit.

**During the Visit**

**Be friendly.**
Be cheerful, open and warm. It is better to be moderately friendly at first: Be cautious about being seen as too friendly or overpowering. On the other hand, be careful not to let any natural shyness make you appear remote or distant. Start with a smile.

**Be flexible.**
Every visit is different. Be prepared for nothing to be routine. Interruptions may happen. You will be a better visitor if you can go with the flow.

**Be alert.**
Be aware of events, the people and the environment. Let part of yourself be an observer. Then if it is appropriate, you can use that observation in your ministry. For example, if you are visiting and the grandchildren—who were crying, playing and into everything—have just left, you might say, “Well, you certainly have an active group there!” or, “I admire your ability to make your grandchildren feel so welcome here,” or, “Tell me about your grandchildren!” No grandparent alive will pass up that chance.

**Be confident.**
No one is an expert all the time. Even the best extraordinary ministers of Holy Communion are not always as confident as they would like to be. But an air of confidence will help tremendously. Even if you don’t feel confident, quietly act as if you do. It will help you and the person you visit. This is called the “as if” principle in modern psychology: Though we don’t always feel something, we can act “as if”

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2 (Glen, Kofler, & O’Connor, 1997, p. 21)
3 (Glen, Kofler, & O’Connor, 1997, p. 39)
4 (Glen, Kofler, & O’Connor, 1997, p. 40)
we do. And many times when we act “as if,” we wind up feeling that we actually do. There is not a perfect way to be a minister—just your way.

Be personal.
Feel free to ask questions, speak of feelings, listen intently, nod and respect what is being told to you. It is the other person’s needs that are primary, not your own. That doesn’t mean that every visit delves into deep or intimate matters. Some people will want and need nothing more than a pleasant visit.

Be yourself.
You’ll be at your best when you can be yourself within the context of your ministerial role of being a person of prayerful presence. Even though we all need certain communications skills for this ministry, the interesting part of the ministry of care is that you really can be yourself with this service. Yes, some of us are a bit too timid at times, some too loud, some too careful and the like. Psychologist Frank Walton says that the point isn’t perfection, it’s about reaching out to another in need, and lovingly, however imperfectly, communicating to them that we are there with them—being prayerful presence with a purpose.

The Rite
Pace the ritual with sensitivity. Be aware of the sick person’s ability to follow. Adapt to the situation of each visit. If the family suggests setting a simple table with candles and holy water, agree with this but do not insist upon it when the family is not ready or unfamiliar with the practice.

Give a small portion of the host to a person who has difficulty swallowing. If the person is in an institution, check with the nurse or doctor in cases of special feeding. Watch for signs that the person can have nothing to eat or drink (NPO.)

Wait for the person to swallow the host. Offer water if necessary. Be prepared with a cloth in the event that the person has problems. Take time to pray reverently and to be present with the sick person and the family. Be sensitive to the proper time to depart.

Ending the Visit
End with appropriate verbal encouragement. Say something like, “Thank you for letting me visit with you today. Please keep me in your prayers. I’ll keep you in mine.” This can be a very encouraging statement, since it helps the person offer service back to you through prayer. It might be helpful to connect the verbal encouragement with nonverbal communication, for example, making the sign of the cross on the person’s forehead (one more time, if you concluded a rite that way), a handshake or a smile of encouragement.

One-Time Visits
Sometimes you will be called upon to visit a person just once. A person may be in the hospital for routine tests or the person is to be discharged soon. It may be helpful to say things like, “This is the phone number of the parish office; they can get in touch with me.” Do not say something like, “I’ll see

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5 (Diocese of Green Bay, WI, 2007, p. 2)
6 (Glen, Kofler, & O’Connor, 1997, p. 41)
you next time I come,” because many times people take that literally. They may think that you are promising to see them again and that is not the case.

Long-Term Visits
Many extraordinary ministers of Holy Communion prefer these visits because they can develop a rapport with the person. They come to know what to expect and they can develop a friendship. Some ministers, however, are not able to commit the time or the energy to something that could last a long time.

Be sure that the visits continue to be pastoral; don’t let them become simply social visits. That’s a fine line, especially hard when you develop a friendship. Do a lot of reflecting on the visits, alone and sometimes with your parish coordinator.

Sporadic Visits
Because of the nature of a person’s illness or hospitalization, you may see a person once, then a couple of times a few months later and then perhaps not again for a year. These intermittent, unpredictable visits create a relationship, but also a frustration. Try to link the visits together in conversation remembered from the last time. “How have you been? What’s been going on since we met a few months ago?” Help the person reflect on the changes that have happened.

Sometimes these visits occur with cancer patients who go into the hospital for periodic treatments. Such people see you when they are involved with this special kind of pain in their lives. It is all right if you don’t remember details about the person and have to ask again, but when asking, acknowledge having met before. For example: “You know, I’ve forgotten your children’s names. Could you tell me again?” Such a question shows a continuity—and also shows that you are human. If you forget quickly, you will find it helpful to make notes after a visit and to keep a simple file to which you can refer if you visit again weeks later.

After the visit.
Extraordinary ministers of holy communion have found these suggestions to be useful in working through the visit after it is over.

Write in a journal.
Many extraordinary ministers of holy communion write about their visits in a confidential journal just for themselves. Don’t use people’s names, but name your own experiences and feelings. The purpose is not to diagnose the person you visited, but to help you process your own thoughts and feelings.

Reconnect with your community.
Join other extraordinary ministers of Holy Communion on a regular basis and talk through your own experiences. Extraordinary ministers of Holy Communion need to be ministered to!

Debrief.
Especially after a tough visit, call another minister of care or your parish coordinator or the Parish Nurse and talk it over soon after the visit. Not all visits will go smoothly. Part of our job is to learn from each visit. This debriefing process helps. It also has another advantage: It’s more practice using our skills. Use all your skills as much as possible, even with another minister of care. You’ll get better and more natural with each practice.

Follow up.
Did you promise to do something for the person you visited? Do you need to inform the Parish Nurse or the pastor of a change in the person’s condition? Follow up when necessary.

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7 (Glen, Kofler, & O’Connor, 1997, p. 42)
8 (Glen, Kofler, & O’Connor, 1997, p. 42)
**Make notes.**
When you are likely to make many visits to the same person, it can be helpful to keep a card with the person’s name, interests, dates of visits, and the like, to stimulate your memory. If an index card can help you recall something of particular interest (a special anniversary, a good experience with a grandchild and other things of that nature,) then you can be that much more comfortable in showing active interest in the person you are visiting.

**Keep your visit confidential.**
Communion Ministers to the homebound do not disclose personal information about those we visit without their permission, including putting the person on the prayer list. This preserves human dignity and fosters trust and hope between the volunteer and the recipient.

**Take quiet time.**
Reflect on the experience. We do not learn from the experience, only the reflection of the experience. Communion Ministers to the homebound is a mutual ministry—many times we gain more than we give. Ask yourself the following questions: How do I feel now? (Glen, Kofler, & O’Connor, p. 21) What feelings have stayed with me? Which feelings do I need to reflect on? Which feelings do I need to talk about with someone else?

**Prepare for the next visit.**
While it is not possible to predict the future, reflecting on what you just experienced can help you be ready for the next time. You may want to make notes for yourself.

**Spend time with family and friends.**
Take time to enjoy your own family and friends. And remember, you don’t have to be a minister of care to them! The people you visit in your role as a minister of care will benefit from your involvement with your own family and friends. The healthier you are, the healthier your ministry will be.

**Bibliography**


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9 (Glen, Kofler, & O’Connor, 1997, p. 43)
10 (Glen, Kofler, & O’Connor, 1997, p. 43)