

## Analysis of Pastoral Care Questionnaire

Thank you to everyone who completed a pastoral care questionnaire back in May or June. Apologies for taking so long to feed back on the findings of the questionnaire; my time got taken up with other priorities.

I'm going to summarise the findings under the different headings of the questionnaire and then sum up briefly my conclusions from what was said.

### Visiting the housebound

82% of those who replied thought this was very important; the others agreed it was desirable.

*'If we are showing Jesus and caring for our community this should include those who are unable to join our gatherings or even those who choose not to.'*

### Home Communion

78% felt that taking home communion to those who can't get to church and request it, was very important.

One person commented *'people who have faith find this a very important time to be able to have communion.'*

### Hospital visiting

55% agreed that hospital visiting was important. In recent years this has become more difficult with COVID and visiting restrictions.

*'If the sick person has a large family and lots of friends a hospital visit is appreciated. If a person does not have that support then a hospital visit is very important.'*

*It was suggested this should be the Care team unless they are in their final days when Dan/Alison will visit if possible.*

## Care for those in hospital

### Sending cards

56% thought it was desirable to send a card to someone who is or has been in hospital.

## Care for those at home who are ill or have a health condition

### Sending Cards

39% thought this was very important, 52% desirable and 9% didn't think it was important.

Comments included:- *'A card or phone call or flowers to show we care. ' 'Let's them know they are not forgotten.'*

### Visiting

59% thought a home visit was very important and 41% thought it was desirable.

Comments included: *'It is hard for folk who have worshipped with us to suddenly be 'cut off' - a visit to show we still care and have time to pray and support them is vital.'*

*'I feel at times that the most vulnerable in our church feel overlooked.'*

## Care for those at home who are ill or have a health condition

### Provision of meals (short term)

Only 15% felt this was very important, perhaps realising our limited capacity. Suggestions included their Connect group offering this support. There was an acknowledgement that for some people this could be really helpful.

### Help with hospital appointments

This could be short term or more long term to help those with significant health conditions and little family support. 33% felt this was very important and 64% agreed it was desirable. It was thought that a rota of volunteers could be agreed in certain situations.

## People in crisis situations

From time to time crisis situations arise that need short term but quick support.

### Visiting

It was suggested that Dan or Alison, or someone with counselling skills may be best equipped for these situations. 58% felt this support was very important.

### Practical support e.g meals/ childcare/ financial support

One person commented: *'When someone is in crisis this is a way for St Mark's to show their support'*. 43% felt this was very important and 57% desirable. It was suggested this could be organised through the office.

### Mentoring/Pastoral listening

*'When someone is in crisis this is a way for St Mark's to show their support.'*

66% of those who responded thought this was very important with 33% agreeing it was desirable.

### Young families

#### Meals after the birth of a baby

68% thought this was desirable, but there was an acknowledgement that not everyone needs it.

Comments included: *'Only if no family or friend support'*.

*'Usually family rally round.'* *'This could usually be done by close friends and connect groups if church people.'*

### Help with Childcare

59% thought this was desirable with an acknowledgement that this would work better through friendship connections.

### Pastoral listening/support/advice

45% thought this was very important, 55% thought it was desirable.

It was suggested some training would be needed and the right person was very important.

One comment: *'It would be nice to know you're not on your own, especially first babies, additional needs, poor sleepers.'*

### Support offered to families

23% thought this was very important and 68% thought it was desirable.

Comments: *'This support could have a significant input on the family.'* *'We can't be all things to all people. It's nice to help but we can't take the place of medical people, social workers etc.'*

### Mentoring Youth/Children

52% thought this was very important and 48% desirable.

Comments: *'All of these 'good' things are desirable and in an 'ideal' world church would be doing them. But it takes quite a lot of committed folk to 'step up' and be part of these. But a commissioned team would be very appropriate.'*

*'It is important to provide young people with positive, supportive, stable role models. Mentoring may provide this if it is lacking in a young person's life.'*

*'This is something we have done before but we need to be careful to choose the right people. Our young people would not find it easy to say if it is not a good fit.'*

### The Role of Clergy

Key things it was felt clergy should be involved in were:-

Confidential matters

End of life care

Crisis situations

## Sick in hospital

Comments: 'The workload should be spread amongst all members of staff and congregation. We are a family, and we should not all be down to clergy and staff. '

'Sometimes a visit from clergy can mean a lot to someone who is housebound/sick. Not all the time but just once or twice. It does seem to raise the spirits of someone who is ill/housebound when clergy go to make the time to see them.'

'These things should be portioned out -Dan cannot possibly do all these things – but gathering appropriate teams is a must. Commissioning to do the work. However if one of the church family is in a serious/critical condition Dan should be notified and encouraged to visit.'

'From Dan and Alison more pastoral listening and interest. Spending quality time with church members (on electoral roll) who are struggling due to crisis, illness or transient vulnerability.'

## SUMMARY

### Key findings:-

- Pastoral care is something we feel is important
- We need a bigger team to offer these things
- We need better communication to ensure that Staff Team are aware of pastoral needs.

### Key priorities:-

- Visiting the elderly & housebound
- Offering communion
- Sending cards to show our care
- Offering help with hospital appointments
- Practical help e.g. meals, help with shopping

### Clergy to offer:-

- End of life communion/visit
- Hospital visit (if requested)

- Pastoral conversations
- Support in a crisis

Support for our children/young people could include:-

- Mentoring relationship
- Practical help to families

In view of these findings, you are invited to join one of the teams. The Visiting Team is run by Lynn Smith and they visit people on a regular basis. This includes visits to Care Homes. If you are interested in being part of this team, please contact Lynn on 07802182674.

I am aiming to set up new teams for Support for Families (which would include meals, practical help such as occasional childcare), and Hospital appointment transport. I am going to set up WhatsApp groups for communication and if you'd like to be part of either of these teams, please contact me at [alison.carson@stmarkshaydock.org](mailto:alison.carson@stmarkshaydock.org) or by phone: 07741453466.

Let's continue to love one another well because of the One who loves us completely.

Blessings,

Alison

