

**The Nuts & Bolts of the Eucharistic Visit:**

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EQUIPMENT AND MATERIALS

Each Eucharistic Visitor should have available:

- A pyx with sufficient consecrated Hosts
- Sufficient copies of the Home Communion Service Booklets (or *Communion Under Special Circumstances* [BCP, p 396] so that everyone present can participate..
- Sufficient copies of the church bulletin so that one may be left at each person’s home or bedside.
- Lectionary readings and Collect for the day included in the Church Bulletin.

**First Things First**

During the Eucharist, uphold the person(s) in prayer to whom you will be privileged to bear the Body and Blood of the Lord. Pray that you may be an able and compassionate Eucharistic Visitor.

**Getting Ready**

A few days before the visit, the Deacon or Priest will give you the names of one or more persons to whom you will carry the Holy Communion after the Eucharist.

If visiting an individual for the first time, be certain to obtain appropriate background information which will help meet the pastoral needs of the individual and make your visit more effective. You should be aware of other family members in the home, if the individual can answer the telephone or not, special interests or past involvement with the church, any special needs for assistance, or other advice or comments your supervising deacon or priest may provide.

The EV is responsible for preparing the kit in advance and placing it on the credence table before the service.

At the Eucharist just before the dismissal you may go to the altar to be commissioned by the clergy to take the Communion to a specific person immediately after dismissal.

### The Rite

When taking communion to an ill or shut in person, remember that you are not performing a "mini- Mass." Rather, you are bringing the Sacrament to be shared with a fellow disciple as members of the Body of Christ.

The service is on the single-fold bulletins in the sacristy. It provides for the Eucharistic Visitors to use the Propers of the day, the Collect and the Gospel of the day.

After the Gospel, the Eucharistic Visitor should tell the person(s) being visited about the sermon which was preached during Eucharist.

Prayers may be offered briefly for the Church, the World, and the concerns of those present.

Remember that you are a guest of the person you are visiting, whether in the home or the hospital. You are representing the Church, clergy and congregation and your actions (as well as apparel) should reflect the dignity of the ministry to which you have been called.

### Setting Up

Upon arrival, introductions should be made to the home bound or hospitalized person and others present including the statement, "I'm here to bring you Communion from the Eucharist at Christ Episcopal Church" This sets the tone for the visit and already designates this Communion as an expression of the Christian Community's one Eucharistic action.

Inquire about any physical limitations, swallowing difficulties or needs. [See *Frequently Asked Question (4) below.*]

Others present may be invited to join in the service. All are welcome to receive. Hosts may be broken to accommodate more than the planned number of communicants.

Conduct the service in a reverent manner: "Set the table" on a clean surface. Wash hands with Purell in the kit.

Remove distractions. Ask if you can turn the TV off or close the door.

Sit at eye level. If the person is in bed, this might mean moving furniture or sitting on the arm of a couch. Ask permission. Whatever it takes, do not stand over the person you are visiting.

Ask open-ended questions. Don't assume the person does or does not want to talk about the illness or even death, or children, grandchildren or a spouse.

The most important point is to take your time so that you can be fully present to God and the other person. Listen to understand rather than to cheer up or to change.

Stop talking. This is the first and last commandment, because all other commandments depend on it.

### Record Keeping

Note the date/name/location and other information in the parish register.

### Afterwards

After the last Communion, consume the remaining Hosts and Wine, or scatter on the ground. Clean the vessels and put them away in the Sacristy. Paper napkins with wine on them should be burned. Discard service bulletins; do not save or reuse them.

You may want to pause to reflect a few moments on what you have just done, on how God is using you, and to give thanks for this opportunity to serve Christ in your brothers and sisters.

Report back to the deacon or priests on your Eucharistic visits and make special note of any needs or pastoral concerns that came to your attention during these visits. Although you visit as a representative of the congregation bearing Christ's Body and Blood, you are also your Deacon or Priest's eyes and ears. Sharing your pastoral conversations and observations during your visit with the clergy is very important to their ministries as well. Do not discuss the person's health with others.

If there is a special need or concern which should be taken care of, the clergy should be made aware of this as soon as possible. The visit is considered "complete" only when this communication is made.

### Frequently Asked Questions

Experienced Eucharistic Visitors can recount any number of unexpected and sometimes very unique circumstances that they have encountered during their ministry. The following questions and answers may help you be prepared for some of these situations:

#### **1. What if no one is at home?**

This problem can be avoided by calling ahead and setting up a time that you will be visiting. This will depend when the Eucharist is ended and on the schedule of the family being visited.

#### **2. Do I leave for my visit immediately after the Eucharist has ended, or can I attend Christian Education and/or the coffee hour before I leave Church?**

Taking communion from the Church's Eucharist means bringing the person who is "shut in" into the corporate body of Christ and the parish by your actions, and as such should be as close to the end of the service as possible.

#### **3. Upon arriving at the home, hospital or nursing home, I do not have enough hosts for the people present. What is the correct way to handle this situation?**

First, ask if everyone would like to take part in receiving communion. Next, if there are more people than hosts it is acceptable to break the hosts in half. Be careful not to crumble them into small pieces.

#### **4. If the person I am visiting has difficulty in swallowing, how is Communion administered?**

It depends upon the severity of the swallowing difficulty. Even a small piece of host can cause choking, blockage on the airway or aspiration pneumonia for someone with a swallowing difficulty (*dysphagia*). In a home setting, a family member should be consulted. In an

institutional setting, the Nurse-in-Charge or Medication Nurse should be asked regarding any swallowing restrictions.

If the person being visited is able to swallow, it is acceptable to place just a small piece of the Host in their mouth.

In a case where a person is unable to swallow, the following rubric from the *Book of Common Prayer* [p. 457] should be read, or communicated in other simple words:

*If a person desires to receive the Sacrament, but, by reason of extreme sickness or physical disability, is unable to eat and drink the Bread and Wine, the Deacon is to assure that person that all the benefits of Communion are received, even though the Sacrament is not received with the mouth.*

#### **5. Several times when I have visited people in the hospital, staff persons have come in to take blood pressure or some other procedure. How is this handled?**

In many cases the medical staff will give you the time needed to complete whatever you are doing. Just tell them you will only be a little while longer. You might wish to ask the medical staff if they would like to join you in prayer or communion. Many times we forget this part of our ministry. If an emergency situation occurs during your visit, get out of the way and pray for the person and the medical team ministering to the person. Notify the clergy.

#### [The Episcopal Diocese of Olympia Eucharistic Visitors: Traveling Two by Two](#)

Diocesan policy requires that Eucharistic Visitors, especially when they are visiting private homes or apartments, take another person with them. The reasons for this are biblical, in the spirit of community, and have legal and financial implications.

- Jesus sent his disciples out two-by-two for a reason.
- It is a more robust representation of the community from which we come, and which we represent.
- Our insurance agency requires it.
- Legal advice recommends it.

This does not mean that both people need to be trained Eucharistic Visitors, although both people visiting must be age 18 or older. In a private setting, it is usually not a good idea to have only other family members present. This is to protect both the person being visited and the visitors themselves. It helps to maintain a safe environment for everyone, most especially those committing to these ministries.

If the visit is to be made in a nursing home or hospital, with open doors and other people in the room, or at least in a visible environment where there are other people nearby who could witness the interaction, an exception may be made to this policy.

Effective May 2010

### Eucharist Ministers: Basic Requirements and Education in the Diocese of Olympia

- Confirmed adult communicant in good standing
- Completed Eucharistic Minister training /recurring training (every three years)
- Knowledge of the liturgy of the Book of Common Prayer 1979 and the role of lay ministers in this liturgy
- For those serving as EV, additional basic requirements:
  - Safeguarding God's Children training (every five years)
  - Safeguarding God's People (every five years)
  - Background check completed

### Requirements for Eucharistic Visitors (Diocese of WA)

These ministers are responsible for visiting sick and shut-in members with Holy Communion who are unable to participate in Sunday worship. The requirements for this ministry include:

- Pastoral skills including being able to address issues related to the home-bound or nursing home residents, the terminally ill, death and dying;
- Understanding aging and family dynamics;
- Willingness to keep confidentiality;
- Knowledge of when to notify clergy if changes have occurred in those visited;
- Commitment to report regularly to the clergy about pastoral visits;
- Commitment to visit regularly;
- Understanding of the liturgical services used in ministering to the sick and shut-in including services and prayers for healing and anointing, Holy Communion under Special Circumstances

Competency in these requirements can be demonstrated by:

- Clergy-directed study/mentorship to develop these skills with a particular focus on the healing ministry as described in the BCP, the Book of Occasional Services and Enriching Our Worship 2
- Participating in the Christ Church Pastoral Care Circle