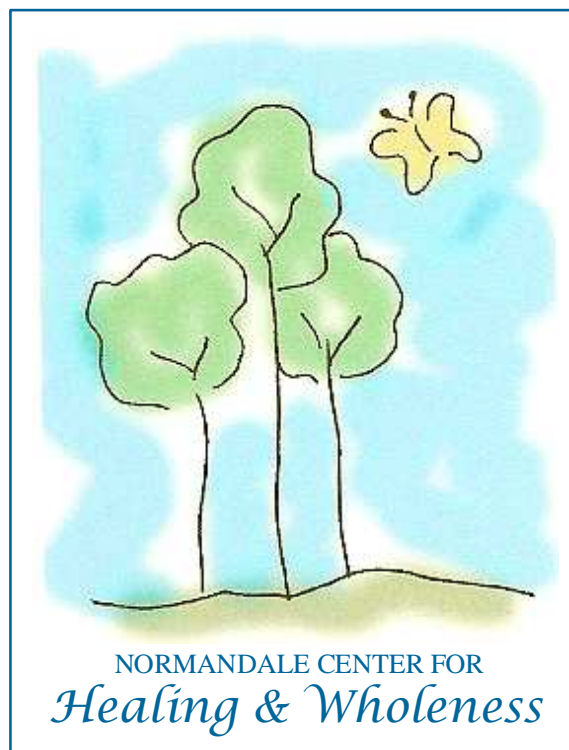


Normandale Care Team Ministry

Volunteer Guidebook



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(revised 2008)

Normandale Center for Healing & Wholeness
6100 Normandale Rd.
Edina, MN 55436



You shall love the Lord your God with all your heart, and with all your soul, and with all your mind. You shall love your neighbor as yourself.

Matthew 22:37,39.

Welcome!

We are excited to share the Care Team Ministry program with you! As a new volunteer you may have questions about the program. This *Guidebook* is intended to be a source of information for you. Read it and refer to it. Remember to also contact me, your Care Team Coordinator, with any questions or issues that arise.

We thank you, in advance, for your dedication and service on behalf of seniors and caregivers.

Shirley Pope
Care Team Coordinator, 2002-present
(952) 929-1697 ext. 31

NOTE: This Care Team Ministry Volunteer Guidebook was developed by the *Normandale Center for Healing & Wholeness* under a grant through the Metropolitan Area Agency on Aging and the State of Minnesota.

You are welcome to share this with other organizations who may wish to adapt the *Guidebook*, however we request that this work be cited as the reference source document as follows: **Pope, S. and Paone, D. (2005). "Volunteer Guidebook" in Care Team Ministry Replication Module. Normandale Center for Healing & Wholeness: Edina, MN. (Revised 2007).**

In an effort to keep track of organizations using the *Guidebook*, we request that you send us a letter or e-mail note with the following information: Organizational Name and Address, Key Contact Person, Phone Number, E-Mail address, and describe the purpose/use. Please send to: Care Team Coordinator, Normandale Center for Healing & Wholeness, 6100 Normandale Rd., Edina, MN 55436, www.healing.normluth.org

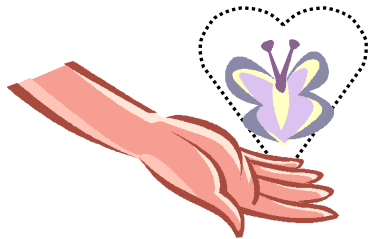
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What are Care Teams?

Care Teams: “Doing What A Friend Would Do For A Friend”

Throughout generations, compassionate, caring people have reached out to those who need help. You may have seen this in your neighborhood...in small hometowns...in church communities. Lifestyles may have changed, but our hearts have not. Now, however, that help for others has on-going support through the structure offered by the Care Team Ministry.



A CARE TEAM reaches out to the older person, the frail, the house-bound, the lonely—who need occasional help or support.

Care Team Ministry uses the following Terms:

Care Team – a team comprised of 1-6 trained volunteers, formed especially around the needs of a particular Care Receiver.

Care Receiver – usually a senior (older adult) who needs assistance from a family member(s) or friend to stay in his/her own home or in the community (avoiding permanent nursing home placement, if possible).

Caregiver – usually a family member, an adult child or a spouse, who participates in caring for a senior. Sometimes the caregiver is also responsible for making decisions on behalf of the senior. The family caregiver may or may not live under the same roof or in the same town or state as the Care Receiver. Caregivers may assist or support the senior emotionally, physically, financially, or in other ways.

What are the benefits of Care Team Ministry?

Benefits:

To Congregations:

- Provides opportunities for demonstrating faith and service
- Helps extend effective pastoral care for seniors
- Pastors can stay up-to-date on senior members' needs and conditions, if seniors are receptive

To Senior Living Communities:

- Provides a support system for members, residents and neighbors

To Seniors and To Caregivers:

- Enhanced capacity to maintain independence
- Increased opportunities for worship and for socialization
- Relief from loneliness
- Assistance with activities of daily living
- Assurance that they are not being overlooked by their communities
- Opportunities to explore emotions relative to aging, ill-health, loss of independence and control
- Gift of "free time" to Caregiver

To Volunteers:

- Provides new relationship(s)
- Promotes vitality and sense of purpose
- Offers new opportunities for learning
- Has health benefits (demonstrated through research)



Care Team Volunteers Are Valued by....

- **The Senior (Care Receiver)**
- **The Family (Caregiver)**
- **The Center, Congregation, or Community**

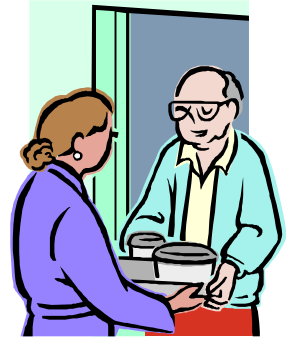
By serving, Care Team Volunteers become role models to others—neighbors, friends, and family members

You Are Giving:

- Your Time – Perhaps 2-4 hours per month
- Yourself
- Your Talents
- Your Attention
- Your Care and Concern

Remember: The time you spend as a Care Team Volunteer brings the Care Receiver a sense that someone cares. At the same time, you are giving the Caregiver respite and relief in knowing that someone recognizes the demands of his/her responsibilities.

Care Team Volunteer activities may include:



- Helping the senior with grocery shopping
- Making friendly visits to the senior
- Driving the senior to medical, hairdresser, barber appointments
- Reading to the senior
- Helping the senior write letters
- Being an “exercise buddy” by taking a walk with the senior
- Helping the senior with e-mail correspondence
- Running small errands – e.g., to drug store or post office
- Driving to worship or prayer services or other church/temple functions
- Sharing a meal with the Care Receiver at a local restaurant (with each person paying for their own meal)
- Calling the senior for a “telephone visit”
- Making short sight-seeing excursions by car
- Helping on occasion (short-term) with simple yardwork or with a household chore (for example shoveling the walk or doing a load of laundry when the senior has just returned from the hospital or rehabilitation facility)

In addition, Volunteers are encouraged to:

- Periodically call Care Team Coordinator with reports, updates on how things are going with their ministries to Care Receivers.
- Return completed Contact Logs to the Care Team Ministry Volunteer Coordinator at regular intervals
- Alert Care Team Coordinator of any significant changes or events in the lives of their Care Receivers.

[Adapted from Our Saviour’s Lutheran Church and Josephine Sunset Home Care Team Ministry, Stanwood, WA]

What Volunteers Say

What Volunteers Say About Being a Care Team Volunteer:

"These relationships bring new insight to me."

"My new friendships bring me joy and a sense of purpose."

"I feel I'm getting more than I'm giving."

"I'm able to stop...slow down... and relax during these times."

"I know that my time and every little kindness is so appreciated."

"I've learned more about myself as I've served."

"The training I receive helps me deal with other people in my life."

"I'm growing older myself and I may need help someday."

"The gratification is immediate."

(Don't just take our word for this...ask a Care Team Volunteer.)

Guidelines for Care Team Volunteers

Care Team Volunteers...

- Have a desire to serve
- Can give an average of one-two hours per week
- Are dependable
- Are willing to listen
- Are patient

Care Team Volunteers Agree to:

- Provide Care Team Coordinator with information needed for background checks and training
- Set boundaries
- Observe confidentiality at all times
- Fulfill accepted assignments
- Communicate with Care Team Coordinator

Serving Others, Care Team Volunteers...

- Show respect for all people
- Allow time to build trust
- Are on time and always follow through
- Remember that they are a guest in the Care Receiver's home
- Are good listeners
- Are interested in people
- Look for ways to be creative

Care Team Volunteers **Do Not** –

- Lift or physically transfer anyone from one place to another
- Serve as a bath aide or assist in toileting or feed someone
- Give medical service or advice
- Provide transportation to Emergency Room

[Adapted from Our Saviour's Lutheran Church and Josephine Sunset Home Care Team Ministry, Stanwood, WA]

Understanding and Knowing . . .

Know your Care Receiver - Most Care Receivers have experienced some kind of loss –

- A loss of hearing, vision or mobility
- A loss of clear thinking or memory
- A loss of relationships and community
- A loss of independence – including the ability to drive
- A loss of purpose
- A loss of control

It may be useful to find out about your Care Receiver's...

- Friends and family
- Interests and hobbies (discover common ground)
- Past experiences

You Are Providing the Care Receiver -

- Respect and Dignity
- Socialization
- Relief from loneliness
- A sounding board to express feelings and to share memories
- Support for living in own home
- Knowledge that a friend cares
- Assistance with matters of life
- A new friendship
- Something to look forward each week

You Are Providing the Caregiver-

- Respite from on-going responsibilities
- Relief from loneliness
- Reassurance of not being ignored
- Assurance that someone cares and understands
- A new friendship
- A listening ear
- Trust

[Adapted from Our Saviour's Lutheran Church and Josephine Sunset Home Care Team Ministry, Stanwood, WA]

The Gift of Listening



Listen to the Care Receiver. . . .

Listen by focusing your entire attention on the other person.

Listening is more important than talking or solving problems.

Body language is 55% of listening.

Paraphrase to make sure you understand.

Identifying emotions is the key to appropriate responses:

“You feel...”

“That must be difficult...”

“You’re sad about...”

“Tell me more...”

“What I hear you saying is...”

In giving the gift of listening you receive the gift of trust.

Listen to your Caregiver. She/He may be under much stress.

Give them some time away, but also listen to their feelings.

Be a sounding board for them.

Remember, also, to:

Listen to the other volunteers on your Care Team. They may have information that is useful to you in your volunteer service with the Care Receiver.

[Adapted from Our Saviour’s Lutheran Church and Josephine Sunset Home Care Team Ministry, Stanwood, WA]

Setting Boundaries

- Boundaries are an essential part of Care Team Ministry and being a volunteer.
- Boundaries establish your personal comfort level with the type of care you are willing to provide. At the same time, boundaries indicate the type of care your Care Receiver is willing to receive.
- Observing boundaries respects your needs and the needs of others.
- Boundaries make Care Team Ministry a positive experience for everyone.

BOUNDARIES –

Theirs:

- Remember to respect the Care Receiver's and Caregiver's boundaries as this new friendship/relationship is nurtured. They are opening up to you in a vulnerable time period in their lives.
- Provide only the services upon which all have agreed.
- Honor dignity. It is an important part of one's quality of life.
- Trust is earned over time. You must keep information confidential. Inform the Care Team Coordinator of anything that concerns you.
- Contact the Care Team Coordinator before contacting other Care Team members about issues you feel are sensitive.

Yours:

- Set boundaries on what you are willing to do; think of tasks you are comfortable doing
- Consider your experiences and interests
- No service is too small. No boundary is too small
- Your boundaries may change, however. It is okay to change.
- Set boundaries on your time; be realistic about your availability.
- Don't over commit.
- Make sure your Caregiver/Care Receiver know your boundaries and respect your boundaries.
- Set boundaries on your privacy, e.g., you have the right to request no phone calls at home from the Caregiver/Care Receiver.
- Gently turn aside any conversational questions which the Caregiver/Care Receiver may ask that you prefer not to answer.

[Adapted from Our Saviour's Lutheran Church and Josephine Sunset Home Care Team Ministry, Stanwood, WA]

TTEAM...**I**DEAS...**P**ERFECT...**S**ERVICE

T.I.P.S. from experienced Care Team volunteers:

- Call Caregiver or Care Receiver the first of the week to set up a time for your visit.
- Call to see when their appointments are for the week.
- Pray for them when you're "off duty."
- If you can, remember them on holidays or their birthdays. (Flowers from your garden, balloon(s), home-made greeting cards or gifts, or bake and give the surplus above your own needs, or share copies of interesting newspaper or magazine article.)
- Be aware of any dietary restrictions on food you may plan to provide.
- If you're asked: "What have you done today?" or "What are you going to do when you leave?" answer honestly if you feel comfortable doing so. This is the Care Receiver's way of getting outside and experiencing life—getting beyond the familiar routine.
- Share your background, interests, hobbies, experiences and bits of your family life, as you feel comfortable. This nurtures the friendship.
- On occasion, you may feel led to sing, to play a piano which may be in the home, to pray, or to read. Ask their permission, and respect their feelings. But let the moment be shared, if acceptable.
- Smile...Be happy...Be cheerful. It's infectious!
- Put yourself in their shoes.
- Remember you are a guest in the Care Receiver's home.

A Volunteer's Story **from serving as a Care Team Volunteer for** **the Center for Healing & Wholeness**



"The volunteer experience has added so much to my life. The lady I serve has actually done more for me and my family than I can say...in terms of her wisdom and life experience.

I've been seeing her about once every two weeks for over three years. I do her grocery shopping.

Some weeks I can hardly wait to talk with her. She has lived 80+ years and has such wisdom to share. You know, sometimes people think that an older person has nothing to add to contemporary life—that the experiences that an older person has had must not relate to modern life—how misguided this thought is! The wisdom of years helps put things in perspective. They see things that we cannot. They understand the ups and downs of life.

My own Mom has been very ill, and hasn't been able to give me advice. The lady I visit/do shopping for has turned out to be like a trusted older aunt. She is a blessing in my life for which I am truly grateful.

I would encourage anyone who can, to make space in their lives for volunteering with an older person. Even though not everyone's experience will be the same, you will benefit in ways you did not expect.

With regard to going through an organized program, like the Center, I would highly recommend it. The coordination and structure is just what volunteers need. The Care Team Coordinator makes a match between you and the person you are helping. If things need to be changed, or something isn't working right, the Coordinator is there to help you.

I can't recommend this enough. Just try it out for yourself."

F.Y.I. for Volunteers . . .

Guidelines for dealing with an urgent situation. i.e. Care Receiver falls or has a sudden illness. If the Caregiver or other responsible party cannot be reached, the volunteer should call 9-1-1 (see "Emergency Warning Signs," on the next page of this Guidebook). And, please observe the "DO NOT'S" on the bottom of page G-10.

Set personal boundaries for the type of care which you are comfortable providing.

Anytime you have concerns, please talk to the Care Team Coordinator/Lay Team Leader. The Lay Team Leader/Care Team Coordinator is here to make your efforts easier. The Lay Team Leader/Care Team Coordinator would like to know about your joys, as well.

Remember, you are part of a TEAM and we serve as **ONE**.

If you feel you can no longer handle the duties, or need another volunteer on the Care Team, please let the Lay Team Leader/Care Team Coordinator know as soon as possible.

Emergency Warning Signs . . . When to Call 9-1-1

The following warning signs, compiled by the American College of Emergency Physicians, suggest you should seek immediate help:

- Sudden pain at any location in the person's body. Chest pain or pressure in the upper abdominal area, for example, can signal a heart attack
- Sudden dizziness, headache, or change in vision
- Weakness, fainting, or loss of consciousness
- Difficulty breathing or shortness of breath
- Severe or persistent vomiting or diarrhea
- Suicidal or homicidal feelings
- Significant bleeding, whether or not accompanied by pain

Some common-sense ground rules to follow...in addressing an emergency situation:

Keep calm. Try not to panic. Often a few deep breaths will help you.

Reassure the victim. A hand on the shoulder or a light, reassuring touch on the arm may help.

Do no harm. Do not move a person who has fallen, been injured, has lost consciousness, or who complains of neck pain.

Be prepared. Keep the numbers of emergency contacts and emergency services posted near the telephone.

If in doubt, call 9-1-1. As a volunteer, you are not expected to be able to assess medical symptoms. Call 9-1-1. If there is time, call the emergency contact person (e.g., relative) to let them know you have contacted emergency services personnel.

Calling for help. Be calm and clear. Clearly give the emergency dispatcher the key information including: the person's location, what the problem is, your name, the victim's name, the telephone number at your location, and directions, if asked. If it is after dark, make sure the house numbers are visible and a light is on outside/inside.

From: Mayo Clinic Family Health Book, Second Edition, Morrow and Company, Inc. New York, 1996.

GUIDELINES FOR CARE TEAM MINISTRY LEADERS

Lay Team leaders/Care Team Ministry Coordinators assume responsibility for the management of the Care Team Ministry on behalf of the congregation or organization. This may be a shared position.

Care Team Coordinators' or Leaders' Duties & Responsibilities:

Receive referrals for Caregivers/Care Receivers who may have needs for help and who may possibly be supported through Care Team Ministry Volunteers. Referrals come from priests, pastors, family, friends, community members, and neighbors.

May make the first contact and visit with new or potential Caregiver/Care Receiver. Determine at this visit, what area of activity is the most needed and that may be fulfilled by Care Team Volunteers.

Perform background checks, recruit and screen potential Care Team Volunteers; Develop Care Team(s).

Train volunteers on an individual and ongoing basis; convene and facilitate volunteer meetings as needed.

Encourage and support individual Care Team Volunteers.

Make sure boundaries, comfort levels, and confidentiality are being honored. Be sensitive to the needs of Care Team volunteers, Care Receivers, and Caregivers.

Make sure that individual Care Team Volunteers are maintaining their schedules and agreed-upon tasks for the Care Receivers.

Make sure adequate support is provided to Care Team Volunteers. Pay particular attention to issues of grief.

Maintain close communication with congregational staff (if appropriate).

Motivate and encourage Care Team volunteers

- Pray for them
- Offer praise for service
- Assure them of your continuing support
- Keep open lines of communication

Communicate with the pastors/priests/rabbis, directors, or staff (where appropriate)

[Adapted from Our Saviour's Lutheran Church and Josephine Sunset Home Care Team Ministry, Stanwood, WA]

GUIDELINES FOR CARE TEAM MEETINGS

Purpose:

Teamwork is essential to Care Team Ministry. By participating in Care Team meetings, you are engaging with a group of people dedicated to serving others. The meetings present an opportunity to focus on your own feelings as you serve the needs of others. Care Team meetings connect you with your fellow Care Team volunteers as you share one another's journey of service.

Confidentiality is a must

Share only what will help volunteers serve more effectively.
Respect the privacy of others. Do not name names.

Share joys and concerns

Share joyful stories – this reinforces the desire to serve.
Share concerns – this helps volunteers from becoming overburdened.
Share issues with Care Team Coordinator - this promotes creative problem-solving.

Process feelings

Encouraging team members to receive/give emotional support to one another is vital to the team's strength.

Help manage grief

Listen to Care Team volunteers who may be grieving.
Attend funerals, write sympathy cards, explore opportunities for closure.

Stay within your comfort level

Reinforce boundaries.
Set your own limits on commitments.
Stay within your comfort level at all times.
Recognize when other Care Team volunteers are taking on too much.

Share responsibilities

Remember, you are part of a Team.

[Adapted from Our Saviour's Lutheran Church and Josephine Sunset Home Care Team Ministry, Stanwood, WA]

Risk Management – What You Need To Know About Reporting in MN

Vulnerable Adult Act of 1995 (Revisions 2005)

Definitions:

Vulnerable Adult

1. 18 Years of Age or older
2. "Categorical" – Resident of a facility or recipient of licensed home health care services or MA-funded personal care attendant services
3. "Functional" – Physical, mental, or emotional infirmity or dysfunction that...
 - Impairs ability to provide for own basic needs, and
 - Impairs ability to protect self from maltreatment

Maltreatment

1. Abuse – Conduct producing pain or injury
 - Hitting, slapping, kicking, corporal punishment
 - Rule 40 violations
 - Involuntary confinement, deprivation
2. Neglect – Failure to provide for basic needs
 - Food
 - Shelter
 - Health Care
 - Supervision (when needed)
 - Absence or likelihood of absence of same
3. Neglect may be by *Caregiver or *Self

It is not neglect for an individual or an authorized person to make decisions to give or withhold healthcare, feeding, spiritual means of healing, etc. through pre-determined decision-making authority (i.e. durable health care power of attorney, advance directives.)

Reporting:

WHO MUST MAKE A "VULNERABLE ADULT MALTREATMENT" REPORT?

"Mandated Reporters" include professionals or professionals' delegates while engaged in certain listed occupations, including "the care of vulnerable adults," law enforcement, education and most health care related professions, including nursing home administration, nursing, medicine, social work and psychology.

WHEN MUST A MANDATED REPORTER MAKE A VULNERABLE ADULT MALTREATMENT REPORT?

A mandated reporter who has a reason to believe a vulnerable adult is being or

has been maltreated, or has knowledge that a vulnerable adult has sustained a physical injury that is not reasonably explained, shall be reported immediately. Immediately is defined as "as soon as possible" but within 24 hours. When in doubt, make a report.

ARE THERE ANY EXEMPTIONS FROM THE REPORTING REQUIREMENTS?

Accidents: (Defined exemption from maltreatment: Sudden, unforeseen and unexpected events which are not likely to occur and which could not have been prevented by exercise of due care and facility is in compliance with relevant rules and laws.)

WHERE MUST REPORTERS MAKE VULNERABLE ADULT MALTREATMENT REPORTS?

Volunteers for the Center for Healing & Wholeness must submit such concerns in person or by telephone to the Care Team Coordinator, the Director of the Center, or the Parish Nurse.

PENALTIES AND PROTECTIONS

1. Protections for Reporters

- *No civil or criminal liability for good-faith report
- *Identity of reporter not divulged; exemptions exist (consent of reporter; by order of a court.)
- *Penalties for retaliation against reporter
- *Civil protections for good-faith investigative activities

2. Penalties Related to Reporting

- *Intentional false report
- *Negligent or intentional failure of mandated reporter to report
- *For retaliation against reporter

Common Entry Point (CEP) Phone Numbers

ANOKA COUNTY - 763-422-7168
CARVER COUNTY - 952-361-1600
DAKOTA COUNTY - 651-554-6000
HENNEPIN COUNTY – 612-348-8526
RAMSEY COUNTY – 651-266-4012
SCOTT COUNTY – 952-445-7751
WASHINGTON COUNTY – 651-430-6484
WRIGHT COUNTY - 763-682-7481

Impact of Elder Abuse

Elder abuse has devastating results, especially if it comes at the hands of someone connected to a faith-based organization. Some the results include:

- The victimization of the elder
- Hurt family members
- Emotional trauma for other volunteers and the leaders of the faith-based organization and church involved
- Litigation, and it's cost
- Media coverage
- Shattered trust
- Undermining of the elder's spiritual or faith connection

(Compiled by Judy Urban, Shared Ministry Systems, in cooperation with Lyngblomsten Care Team Ministry)

Why Elders are Susceptible to Abuse

Frail seniors are susceptible to abuse because they may:

- Be physically unable to live independent lives and may be nearly “homebound;” dependent on others for rides, help, or support
- Find it too difficult to sever ties to relatives who are abusing them, since that relative may be their only connection to family memories/ties
- Find it emotionally painful to admit they have an abusive child or spouse
- Lack the resources to move to a safer environment
- Be unaware of programs that are available to help them pay for quality services or pursue legal protections
- Fear the repercussions if they do report the abuse
- Be afraid of change, even though it might bring relief

Why Faith-based Groups are Vulnerable

Why are church, synagogue or other faith-based programs vulnerable to potential abuse? Because these organizations have the following characteristics:

- They are trusting; most people see their faith communities as safe places.
- They are open, accessible; most churches, temples, synagogues, or other faith institutions do not have security checks, they leave doors open for worshippers. Programs extend at all hours of the day and night and into the weekends. This “openness” extends to programs that the church/faith institution operates as well.
- Many faith communities offer programs of assistance for elders in the elders’ own homes where there are one-on-one services.
- Many faith communities are unaware/ignorant of the potential for abuse or deny that this could be a problem in their own churches/synagogues/temples.

(Adapted from information compiled by Judy Urban, Shared Ministry Systems, in cooperation with Lyngblomsten Care Team Ministry)

Sending Forth Volunteers

Thank You!

In giving of your time through the Care Team program, you make immeasurable differences in the lives of seniors and caregivers.

May you, and they, be blessed.

Shirley Pope,
Care Team Coordinator

Therefore, my beloved brethren, be steadfast, immovable, always abounding in the work of the Lord, knowing that in the Lord your labor is not in vain.

1 Corinthians 15:58