# **Coordinating Care**



This resource offers tips on coordinating care for an individual family. It also provides information on setting up a care system so you can provide care to multiple families at the same time.

## **Caring for an Individual Family**

Families affected by disabilities or families facing a crisis may be feeling isolated, may have care and medical support needs, and may benefit from creative, practical support.

## **Appoint a Point Person**

Appoint someone who the family trusts to be the primary communicator between the family and the church body. Having a single person in this role allows the family to stay connected with the church without becoming overwhelmed by sharing updates and needs over and over. A point person can often recognize needs that the family may not see or articulate. They can identify things like how often meals are needed and how the family prefers meals to be delivered. Because they have taken time to build a relationship with the family, they can be trusted to facilitate quality care.

## **Gather Information**

The point person should speak first with the family to determine their specific needs, concerns, and dreams. Once that individual has a good understanding of the family's situation they can begin strategizing on how to best support them.

# **Build a Team**

Each church will have a unique approach to gathering a care team to support a family in need. In some cases, life groups or community groups will "adopt" a family. Other churches may already have an existing care ministry that can assemble a team to support a specific family. If your church already has teams in place to deliver meals or provide rides, consider coordinating support with them. The information gathered from the point person will help determine how large the support team should be and if members of the team should have specific skills.

# **Set Goals and Determine Time Commitment**

As you recruit individuals to help care for a family in need, we recommend setting clear expectations on how often their involvement is needed and for what time period. Having these expectations clearly outlined will strengthen your volunteer commitment. Your team can work together to be creative and have fun with the family. Continue to use the point person to schedule visits and gather feedback.

# Have a Back-up Plan

If someone on the team is unable to fulfill their commitment, have a plan in place to cover their involvement so the family's needs can still be met.

# **Ongoing Care System**

A system built on the following suggestions will help you evaluate needs, coordinate support, and monitor the health of your support team as you serve various families facing unique life circumstances.

# Share Vision and Gather a Team

Because a successful coordinated care system may last for many years, it's a good idea to build a strong foundation of support with your church. This may take time but having the church leadership as well as the church body on board with your vision will help sustain your efforts. As you gather a team of volunteers, look for a leader who has discernment and social wisdom—someone who will be able to care for the families as well as the volunteers. This person will help to keep the relationships between the families and volunteers healthy. Your team should include a variety of individuals who can meet different ministry needs: organization, recruiting, promotion, and creative dreaming.

#### **Recruiting Team Members**

If your church has life groups that regularly serve together, you could approach the leaders to see if they would be interested in adopting a family for a season. You might also find volunteers who are already serving within disability ministry but are looking to expand their involvement.

## **Create Guidelines for Each Group**

Using the information shared in this document as a base, create your own set of guidelines for each coordinated care group. If there is already a special needs ministry at your church, we recommend coordinating with the leaders of the ministry to determine how you can best approach families and establish relationships with them. You might even consider writing a script or building a process for the initial conversation to bring a new family into the system.

## Assign a Designated Point Person

As we mentioned in the previous section, because it can be overwhelming for a family to explain their needs to multiple well-meaning people, it is important to identify one person to communicate with each family.

## **Begin Care and Monitor Health**

Once a team has begun to care for a family, the ministry leaders should regularly check in to be sure that the family is comfortable with all aspects of the support. They should also make sure that volunteers are not being asked to do things that are beyond the scope of their commitment or comfort level. Having the ministry leader regularly checking in encourages all families, team leaders, and volunteers to freely express their concerns and joys.

In some cases, the support provided to families through coordinated care teams will allow them to "get back on their feet." The ministry leader will need to discern when it is time for a family to begin doing more on their own. In other cases, the care team will be meeting ongoing needs that the family will never be able to do on their own.

The wise care team leader should be watching for weariness in the volunteer team and will gently suggest bringing in new members or shifting responsibilities as needed. For chronic care needs, one family may work with several teams over the course of several years.

It is important to remember that the ultimate goal of offering practical care to families affected by disability is to be the hands and feet of Christ. Coordinated care teams should be designed with the purpose of pointing families to Jesus. Volunteers are not "fixing things" for families or in any way being the saviors of challenging situations. They are, however, allowing Christ to work in and through them so that He can be the family's Savior.