

COVID-19 Pastoral support for those dying at home

Currently, while much attention is focussed on those who may die from COVID-19 in hospital, there will continue to be a large number of people who die at home either from apparently unrelated conditions or, as the epidemic develops, from COVID-19. Clergy will be accustomed to making pastoral visits, perhaps anointed the sick, laying on hands in prayer or administering the last rites. In the current situation we need to think through how we can best support people in their last days of life.

1. Can Clergy visit those who are dying at home?

- Whilst *a person may not be dying from COVID-19, they may die with it*: COVID-19 might be a co-morbidity, but it is not the main disease from which they are dying. Unless already confirmed as having COVID-19, clergy are unlikely to know if a dying person has the virus as the presence of the disease may be masked by other end of life symptoms. It is essential that we approach each situation mindful that the person concerned could have COVID-19. *Every contact represents a transmission risk not only for clergy, but consequently for all those with whom they come into contact.*
- **If a person has been confirmed with COVID-19 clergy should NOT visit** (remember, it is likely that other members in the household will also have it). Government guidance is clear that only essential carers, wearing appropriate face masks and other personal protection equipment should attend those who are ill. Not only are clergy unlikely to be familiar with how to wear PPE safely, thereby putting themselves at risk, but they would also be required to self-isolate afterwards, rendering themselves unavailable for future pastoral service. *In this situation they should offer support by other means such as by phone or video contact.*
- **If (as far as you know) a person does not have COVID-19**, consider whether the visit must be face to face or whether support can be offered by other means. Non-urgent visits to terminally ill parishioners are to be discouraged because of the risk that the virus might be present.
- If clergy have someone who is 'high risk' in their own household they should consider very carefully whether to visit in person .
- If clergy do visit, the principles of personal distancing and personal hygiene measures must be stringently followed. Minimum necessary contact should be made with other members of the household (one other person throughout the visit).
- As the situation worsens, clergy might not be able to respond to all requests to offer pastoral support to the dying as well as to others in need. Recognised lay leaders should be identified and equipped to assist clergy, particularly in offering non-contact pastoral support.

2. How should any visit be conducted?

- All hygiene precautions must be carefully followed including washing hands before and after the visit and observing personal distancing throughout. It is important for clergy to avoid touching their faces; this might be particularly difficult to achieve given our natural human tendencies to touch our faces in stressful or demanding situations. Shaking hands or hugging those in the household must be avoided even though this will go against many clergy's

pastoral instincts. Similarly, no physical contact should be made with the dying person. It is also important to avoid touching bed linen or anything that might be contaminated.

- A short celebration of Holy Communion can safely be held, but only the priest should take the elements, and there must be no offering of a wafer or placing a wafer on the tongue of the dying person.
- Laying on of hand should be avoided.
- It is preferable not to anoint with oil as it is not possible to observe physical distancing, but where the priest considers this to be an indispensable part of care for the dying he or she should apply the oil with a spoon or other applicator that must be disposed of safely and immediately if it comes into contact with the dying person. Physical distancing should be 'broken' for as brief a period as possible.
- Inevitably the person dying will find it difficult to communicate. The temptation is for clergy to move as close as possible to the person to hear them and to communicate with them. Difficult as it might be, clergy must resist this; a cough or exhalation of breath can transmit the virus. Maintaining physical distance and not touching the dying person, will feel strange and unnatural, but as hearing is one of the last of the senses that those who are dying lose, words of comfort and reassurance and tone of voice, all communicate signs of care and support.
- These restrictions will have a profound effect on some clergy as it feels "wrong" not to touch etc. These are unprecedented times, however; clergy also carry a responsibility to themselves and others in the community. Showing God's love and care by being present and praying with the dying person concerned is the most important thing.
- After the visit, clergy must not go on directly to another visit, but should go home, wash their hands, shower and change clothes. Family members should not be greeted physically until this is done.

Finally, it is important to recognise that clergy and others offering this ministry can only do what is possible, which sometimes in these situations, might not feel enough. Consequently, they must take care of their own physical, mental and spiritual health with supportive pastoral care being offered to them by others.

