**Role Outline**

**Role title: Pastoral Visitor Level 1**

In Methodist Church

This pastoral visitor will not be expected to become involved in the day to day affairs of the person being visited or having contact with them other than to enquire about their general health and well-being and engage in social discussion (rather than more involved personal matters). If the Pastoral Visitor is visiting the individual as a friend and NOT as their Pastoral Visitor, the Pastoral Visitor should make this clear at the outset.

*Part 1*

**The Church takes the safety of everyone within the church very seriously and expects that everyone will work within the church safeguarding policy. In particular, the Church expects anyone who becomes aware of a safeguarding risk or of actual abuse, to immediately raise this with the Safeguarding Officer or the Minister\*.**

*The following tasks will be undertaken as part of the role outlined above.*

* To visit occasionally to generally engage with someone for social conversation and help reduce someone’s feeling of isolation; to act as a listening ear only for any matters of a personal or spiritual nature the person visited may wish to raise.
* To pass information to some perhaps not able to attend church or activities;
* To deliver the newsletter and to keep someone informed of life in the church;
* To ensure someone’s general health and wellbeing is monitored and report to the minister any concerns;
* To offer prayer if required
* To share pastoral concerns with the Minister\* and/or leader/s
* To notify safeguarding issues to the Safeguarding Officer or Minister\*.

*Part 2.*

This role is accountable to the Minister\*

This role does not require a DBS check. It is essential that if the role with someone develops into more involved work, then a DBS check is considered

*\*Minister means Presbyter, Deacon, Probationer or whoever has pastoral care of the church.*

Signed by (role holder) ……………………………………(print name)…………………………………..Date……………….

Witnessed by ………..……………………………………….(print name)…………………………………..Date ……………..