**Role Outline**

Role title: **Pastoral Visitor**

[NAME OF CHURCH]

[Name of Volunteer]

The pastoral visitor will not be expected to become involved in the day-to-day affairs of the person being visited or have 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 Role

**The Church takes the safety of everyone within the church very seriously and expects that everyone will work within the Church’s 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 duties 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 those not able to attend church or activities.
* To deliver the newsletter and to keep someone informed of life in the church.
* To ensure that if there are any concerns about someone’s general health and wellbeing it is reported to the appropriate person.
* To offer prayer.
* Attend regular meetings of the pastoral committee.
* To share pastoral concerns with the Minister\* and/or leader/s.
* To notify safeguarding issues to the Safeguarding Officer or Minister\*.

#### Part 2 – Accountability

This role will be accountable to the Church Council through the Pastoral Committee.

#### Part 3 – DBS

**Has the Safeguarding officer confirmed that a DBS check is required?**

Yes – Date completed

No (Please complete the self-declaration form [CSD/2](https://www.methodist.org.uk/safeguarding/safer-recruitment-including-dbspvg-ddc-forms-policy-and-guidance-documents/forms/confidential-safeguarding-declarations/))

#### Part 4 – Training Required

Safeguarding (If yes, please indicate the date received)

Other –

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

# Volunteer Agreement

This is a sample agreement and should be altered according to the specific person involved. The agreement describes the arrangement between the volunteer and the local Methodist Church and should be used alongside the volunteer’s work outline.

This Volunteer Agreement is a description of the arrangement between us, the [Name of Church] at [Location of Church], and you [Name of Volunteer] in relation to your voluntary work.

The intention of this agreement is to assure you that we appreciate your volunteering with us and to indicate our commitment to doing the best we can to make your volunteer experience with us a positive and rewarding one.

This agreement is binding in honour only. It is not intended by the parties to be a legally binding agreement nor to create an employment relationship between us but sets out expectations of The Methodist Church and the volunteer.

We, on behalf of [Name of Church] at [Location of Church], accept the voluntary service of [Name of Volunteer] beginning [Date]. We have agreed that you will work [X] hours over/on [X] days.

Your role will be [Name Role].

In addition to this agreement, you will receive key pieces of information including the role description and our policies and procedures which will provide important guidelines for your volunteering.

**Part 1 – The Methodist Church**

We commit to the following:

* A full induction and any training necessary for the volunteer role.
* Provide a personal supervisor who will meet with you regularly to discuss your volunteering and any achievements and problems.
* To be treated with respect and in line with the organisation’s policies on equal opportunities, health and safety.
* To provide adequate insurance cover for volunteers whilst undertaking voluntary work approved and authorised by us.
* To reimburse the following expenses you incurred in your voluntary work. All expenses must be submitted, with receipts where possible, to [Name Church treasurer and provide email or contact details] within [period]: Please only select the relevant section(s):
1. Travel to and from home to (the office) and during your work as necessary
2. Meal allowance to a maximum of £(x) with a receipt (to be eligible for lunch allowance you must work around meal times or for a minimum of (x) hours a day.)
3. Special clothing, where this is provided by you
4. Actual cost of crèche, childminding fees or other dependant costs incurred in order to be available for voluntary work.

**Part 2 – The Volunteer**

I, ………………………………………… (Full name in CAPTIALS), agree to be a volunteer with the [Name of Church] and commit to the following:

1. To help the [Name of Church] at [Location of Church], fulfil its vision to respond to the gospel of God's love in Christ and to live out its discipleship in worship and mission.
2. To perform my volunteering role to the best of my ability.
3. To follow the Church’s procedures and standards, including health and safety procedures and its equal opportunities policy in relation to its staff, volunteers and anybody they work with.
4. To maintain the confidential information of the Church and of all who become involved with it.
5. To meet the time commitments and standards undertaken, other than in exceptional circumstances, and provide reasonable notice to make alternative arrangements.
6. To provide referees, as agreed, who may be contacted, and to agree to a police check being carried out where necessary.

My agreed voluntary time commitment is [Insert hours/days]

Agreed to: …………………………................................................Volunteer signature

........................................................On behalf of [Name of Church]

.............................................................................................................................................Date

* Volunteer Contact details
* Emergency contact details