

Life Changing Care

Home care that knows the hard part.

PASTORAL RESOURCE — CLEVELAND METRO

Supporting Congregants Who Are Aging at Home

A guide for pastoral care teams, ministers, rabbis, and faith community social workers who visit homebound and aging congregants.

What You Are Already Doing

Pastoral care visits are often the first place a family's struggle becomes visible to anyone outside the household. You sit at the table. You notice the dishes. You hear the fear underneath the reassurance. You see the adult child who drove ninety minutes and is holding everything together with very little left.

You are not a case manager, and you are not expected to be. But you are present in a way that no agency, no social worker, and no healthcare provider is. That presence carries real weight. Your role is not to solve what is happening. It is to open a door, at the right moment, to the people who can help carry it.

This resource was written to make that one conversation a little easier.

Signs That a Congregant May Need More Support

These are not clinical indicators. They are the things a pastoral visitor notices because they know the person, the home, and the family over years. Trust what you see.

- The home is less tidy than it used to be. Not a bad week. Something that has shifted over time.

- The congregant seems thinner, or mentions that cooking feels like too much effort now. Meals are being skipped or simplified to the point of concern.

- A family member looks exhausted and is making decisions under pressure. Caregiving has quietly become a second job for someone who already has one.

- The congregant mentions being alone for long stretches of the day, sometimes multiple days in a row, with no one checking in.

- Behavioral changes that feel new: confusion in a conversation that used to be sharp, irritability that is out of character, or a withdrawal from things they used to care about.

- A recent fall or health event that the family has not mentioned to the congregation, and may be minimizing even with each other.

How to Open the Conversation

These words are meant to feel like something you would actually say, not something scripted. They meet the person where they are and leave the decision entirely with them.

WHEN THE CONGREGANT IS MANAGING ALONE

"I notice you have a lot on your plate right now. Have you thought about getting someone to help around the house a few days a week? There are people whose whole work is this."

WHEN THE FAMILY IS NEARBY BUT STRETCHED THIN

"A lot of families in our community have found home care really helpful. Would it be useful to have a name to call? No commitment. Just a conversation."

WHEN THE FAMILY CAREGIVER IS VISIBLY CARRYING TOO MUCH

"Your family is carrying a lot. Is there support you would let us help you find? We want to make sure you are not doing this alone either."

What Home Care Actually Is

Many congregants and their families have never encountered home care before. What they picture, often, is a nursing home or a hospital. They associate getting help with giving something up.

It helps to say clearly: home care is not a nursing home. The person stays in their own home, in their own routine, in their own space. A trained caregiver comes to help with the parts of daily life that have become difficult: personal care and hygiene, preparing meals, getting around the house safely, keeping company through the long hours of the day when family cannot be there.

Home care does not mean the family is stepping back. It usually means the family can be more present in the ways that matter, because the daily weight is shared.

A framing that many families find helpful: Home care is not a concession. It is a bridge between where someone is now and the life they still want to be living. The goal is to keep the person where they belong, for as long as possible, with the support to do it well.

What to Look For Before Making a Referral

Not every home care agency is the same. If a congregant or family asks for your guidance, here are the questions worth asking before you give a name.

- ☐ Is the agency licensed in the state of Ohio to provide home care services?

- ☐ Does every caregiver hold a verified credential confirming their training and competency? The Direct Service Provider (DSP) credential is the standard to look for.

- ☐ Does the agency have experience with behavioral needs or memory-related conditions, including dementia? Many agencies have generalist caregivers. Complex needs require specialized experience.

- ☐ Is there a supervisor who visits the home in person, not just a phone coordinator managing from a distance? On-the-ground oversight matters for quality and accountability.

- ☐ Does the agency communicate openly with families, and does the family feel heard when they raise concerns?

Life Changing Care

Serving the Cleveland metro since 2019.

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SERVICE AREA

Cuyahoga, Lake, Lorain, Medina, and Geauga counties

CREDENTIAL

Every caregiver holds the Direct Service Provider (DSP) credential

We are glad to speak with any pastoral care team member directly. No referral is too small, and no question is too early in the process. If you are not sure whether what you are seeing warrants a call, call anyway. That is what we are here for.

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This document is for pastoral care teams and faith community leaders. It is not a medical resource or a legal referral.