

***Chaplain's Winter Report for Classis Hamilton & Niagara***

As many of you now know, Shalom Manor & Gardens is presently being administered by an interim CEO and an interim DOC (Director of Care.) The Board of Directors is actively seeking out new persons to fill these two vital positions. Who becomes the next CEO and who becomes the next DOC will greatly influence what Shalom Manor & Gardens will look like in the future. The Board has asked that I hold this situation before our Lord in my personal and public prayers. I ask that you as delegates and a Classis do the same.

As chaplain, I am interested that the persons who fill these positions have a holistic vision of the deliverance of health care that includes a developed awareness of a person's spiritual dimension. It cannot be taken for granted that every candidate has this awareness. I am interested in this because the future CEO's and DOC's vision of holistic health care and its delivery will significantly affect the spiritual well being of the residents. And besides, the spiritual, Christian character of Shalom Manor & Gardens defines who she is. I would like it to stay this way. I talked about this to the interim CEO. She was very receptive. She requested that I write a number of questions focused on spiritual care, which I did. These questions were written to allow the candidate to disclose and enable the interviewing committee to discern the candidate's strengths/weaknesses in this area. Ultimately, I hope that they will enable those responsible to make a good, informed decision.

Bit by bit, my chaplaincy is becoming integrated into the delivery of care at Shalom Manor & Gardens. I am now a participant in Care Conferences. Participants in a Care Conference are representatives from the dietary, recreation, nursing, sometimes environmental services departments and members of the resident's family. A Care Conference is scheduled approximately six weeks after a resident moves in and after that, once a year. Being a participant of the Care Conference gives me an opportunity to meet the resident's family. Previously, often I first met the family when their loved one was dying. It also offers an opportunity for the family members to tell me their family and loved one's story.

This is important. Let me give an example. Not that long ago, a resident was admitted who was not of Dutch ethnic background and who was nominally Anglican. Religious rituals played no role in her life. I visited with her a number of times, careful not to push prayer or Scripture reading. (This already happens before and after every meal time!) During this resident's Care Conference, I asked her daughter about their family's religious history, about her mother's attitude toward God, church, worship. I asked if her mother would be offended if I prayed with her. She said that her mother would not. During my next visit with this resident, she talked about something that frightened her. She expressed concerns about two of her grandchildren. Before I left, I asked if I could pray with her. She gave me permission. In my prayer I mentioned her name, her daughter's name, the names of her two granddaughters. I don't think she had ever heard her name and the names of those who she loved named in a prayer! When I said amen, she had a laugh of delight on her face and said, "Is that what you do here??!! You can come back anytime!!" Walking out of her room, I had a laugh of delight on my face.

Visiting with residents is a large part of my ministry. To help me make contacts with residents and in response to a number of requests from residents, I will be leading a number of small, group Bible discussion in February. I am doing this together with the Recreational department. We envision three groups; two groups of women and one group of men. I am curious to see how this goes and am looking forward to participating in these groups.

*(Submitted by Rev. Fred VanderBerg)*