

Our Lady of Mount Carmel

Formation Program for Extraordinary Ministers of Communion to the Sick and Homebound

“There was no needy person among them...they were distributed to each according to need.” Acts 4



The Formation Program for Extraordinary Ministers of Communion to the Sick and the Homebound (EMCSH) is designed and presented for the development of ministers who assist the sick and homebound parishioners of Our lady of Mount Carmel.

The Communion of the Sick ritual book is the primary tool used when conducting a visit. The handout is intended to assist in training the EMCSH and to also be used a reference tool.

“For the Son of Man did not come to be served, but to serve”. Matt. 20:28

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Formation Program for Extraordinary Ministers of Communion to the Sick and Homebound

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Formation Program for Extraordinary Ministers of Communion to the Sick and Homebound

Welcome

Thank you for your interest in participating in the formation and development of well-trained Extraordinary Ministers of Communion to the Sick and the Homebound. The desired outcome of the Formation Program is to have well trained extraordinary ministers who prayerfully and respectfully take the Body of Christ to the sick and the homebound.

Description of the training Program for Extraordinary Ministers of Communion to the Sick and the Homebound is designed for both experienced and new ministers.

These guidelines have been carefully reviewed to match the theological and liturgical role of the minister of the Eucharist reflection. The liturgical reforms that were required by the Second Vatican Council are now included in the Missal, and continue to renew the Eucharistic life of the Church.

Christ instituted the Eucharistic celebration at his last supper with his friends. His purpose was to provide the Church with a memorial of his loving death and resurrection: a sacrament of love, a sign of unbreakable unity, a bond of charity and justice, all filling us with grace.” (Vatican II: Constitution on the Sacred Liturgy, 47)

History

The program for the continued formation of Extraordinary Ministers of Communion to the Sick and the Homebound was motivated by the desire to standardize the training of the Eucharistic ministers for visits to parish homes, hospitals and care homes.

Leadership of the Program

A trained parish leader is required to conduct the Formation Program for Extraordinary Ministers of Communion to the Sick and the Homebound.

Resource Booklets and the Basic Texts for Extraordinary ministers

Each Eucharistic minister receives a small booklet, “Communion of the Sick” and the class-training guide.

Inspiration

The faithful who are ill are deprived of their rightful and accustomed place in the Eucharistic community. In bringing communion to them the Minister of Communion represents Christ and manifests faith and charity on behalf of the whole community toward those who cannot be present at the Eucharist. For the sick the reception of communion is not only a privilege, but also a sign of support and concern shown by the Christian community for its members who are ill. *Pastoral Care for the Sick, Chapter 3, Nos. 72-73.*

Introduction

Providing the opportunity for the hospitalized, the homebound and those in nursing homes and other health-care institutions to receive Holy Communion frequently is an important pastoral responsibility. The service of Extraordinary Ministers can be of significant assistance in taking the Holy Communion to those unable to be present for Mass.

Prayer of a Minister of Communion to the Sick and Homebound

*Gracious God,
I am in your Sacred Presence about to take
the Bread of Life to those who
are unable to participate in the parish celebration of the Eucharist.
Thank you for the honor to carry Christ to them.
Bless my hands that they may be
fitting instruments of this Holy Visitation.
Bless my heart that I may prayerfully carry
the Bread of Life to those in need.
May my attitude, my reverence and
my concern for others be of Your divine heart.
I ask this in the name of our Lord, Jesus Christ,
who lives with You and the Holy Spirit
now and ever. Amen.*

Canon Law and the Lay Minister of Holy Communion

Ideally, Catholics should approach the Eucharist during the Holy Sacrifice of the Mass. Nevertheless, it is not always possible for Christ's faithful to do so without grave inconvenience.

Providing the opportunity for the hospitalized, the homebound and those in nursing homes and other health-care institutions to receive Holy Communion frequently is an important pastoral responsibility. The service of Extraordinary Ministers can be of significant assistance in taking the Holy Eucharist to those unable to be present for Mass.

In the case of sickness, this grave inconvenience may be physical or it may be moral. If the sickness deprives the individual of all his energy and thus lacks the strength to get out of bed, then the grave inconvenience is physical. If the person is able to get out of bed and move around, but his/her illness is a highly contagious disease, then the grave inconvenience is moral in that he ought not risk the health of the general public.

Regardless of whether the illness causes moral or physical impossibility, the Church is still obliged, insofar as it is possible, to meet the spiritual needs of her faithful.

From these needs arise the Church's ancient pastoral practice of visiting the sick. This practice includes taking the Eucharist to the elderly, the sick and the infirm. It involves sharing in prayer and the word of God during these visits. These Eucharistic visits may take place in the home, at the hospital bed, or in any institution that provides basic care and day-to-day living arrangements to the elderly, the sick and the infirm.

A minister of Holy Communion typically encounters three types of situation when taking Communion to the sick.

1. The first is a regular visit to someone suffering from the effects of age, illness or infirmity.
2. The second concerns a visit to someone who is dying. In this situation, the Church refers to the Holy Eucharist as *Viaticum*. This last word means "*food for the journey*," keeping in mind that death is a journey into the afterlife.
3. And the third situation concerns a sick or dying child. A lay minister of Holy Communion should be aware of how to proceed in each situation and should contact the parish pastor to arrange a visit to the gravely ill individual.

A minister of Holy Communion is simply a baptized Catholic who lawfully takes the Eucharist to other Catholics.

Please note: **Canon 910** distinguishes between an ordinary minister of Holy Communion and an extraordinary minister of Holy Communion.

Ordinarily, the Church entrusts bishops, priests, and deacons with the ministry of taking Holy Communion to the sick. Thus clergy are *ordinary* ministers of Holy Communion.

When a layperson takes the Eucharist to the sick, he or she acts as an *extraordinary* minister of Holy Communion.

In other words, he or she acts in an extraordinary capacity because the priests and deacons are unable to meet the needs of all the Catholics in a specific area.

A common example is that of a priest who pastors a large flock within a geographically dispersed parish, without any available permanent deacon or assistant pastor to help him.

In keeping with canon 910, a layperson may become an extraordinary minister of Holy Communion in one of two ways.

The first is by law. This applies to any layman who receives the stable ministry of acolyte. According to canon law, an acolyte automatically becomes an extraordinary minister of Holy Communion, in much the same way that a deacon becomes by law an ordinary minister of Holy Communion upon his ordination. Subsequently, the acolyte has precedence over any other potential extraordinary minister of Holy Communion.

Yet what happens when the number of clergy and acolytes within a given parish is insufficient to meet the pastoral needs of every sick parishioner?

Sometimes it is simply impossible for the clergy and acolytes to take the Eucharist to every sick parishioner.

Fortunately, the Church does not abandon her sheep in these circumstances. Having foreseen such a need, Canon 230 provides for the possibility of other lay people fulfilling the duties of extraordinary minister of Holy Communion. Yet they may only do so when the number of clergy and acolytes are insufficient to carry out this duty in a timely and orderly fashion.

Pastoral Principles for Lay Ministers

A lay minister of Holy Communion should always maintain open, pro-active communication with the ministry leader who oversees the layperson's ministry to the sick, this can be the pastor, as parochial vicar or deacon.

Good communication is important for two reasons.

1. First, it insures that the layperson fully understands his or her proper boundaries as a lay minister in taking the Eucharist to the sick. The extraordinary minister of Holy Communion fulfills a certain ministerial function that is ordinarily carried out by a priest or deacon. As a lay minister, the extraordinary minister of Holy Communion does not replace the pastor or any other clergy.
2. Second, good communication facilitates the pastor's capacity to exercise wise pastoral judgment in his day-to-day ministry. A priest can only base his pastoral decisions upon the information available to him.

If a priest requires the assistance of lay people to take Holy Communion to the sick, then the priest will also likely rely upon his lay ministers to act as his eyes and his ears during their pastoral visits to the sick and the homebound.

In practical terms, the lay minister should make every attempt to administer Holy Communion within the larger context of a pastoral visit to the sick, the aged, and the infirm. If possible, the pastoral minister should inquire about the seriousness of the illness or infirmity.

If the person's health has substantially worsened since the last visit, then the lay minister should immediately report this to the pastor or Ministry lead.

Another pastoral principle is that proper reverence should be shown toward the Eucharist at all times.

This includes the time spent transporting and handling the Holy Eucharist.

Fictitious example: *"The was an very serious incident in which a minister placed the Holy Eucharist in an envelope and sent it to his sick and elderly parishioners via regular postal mail. Not only is this highly inappropriate, it is a sacrilege. If done for a sacrilegious purpose, such an action even carries an automatic excommunication"*.

3. A third important pastoral principle concerns the right to receive Holy Communion. In keeping with canon 912, every baptized Catholic has the right to receive the Holy Eucharist unless he or she is prohibited by canon law.

A lay minister of Holy Communion must always be mindful of this fundamental right when approached for Holy Communion. Because this concerns a basic right of every Catholic, a lay minister must presume that canon law does not prohibit a baptized Catholic who presents him- or herself for Holy Communion. In practical terms, this means a lay minister of Holy Communion should not refuse anyone Holy Communion unless instructed to do so by the diocesan bishop or the pastor of the parish.

4. The fourth important pastoral principle concerns the purpose of pastoral ministry. It is to serve Christ's faithful.

A lay minister to the sick does not assume a higher place within the local church community upon becoming an extraordinary minister of Holy Communion.

Others will perceive the conduct of a lay minister in carrying out his or her ministry as a reflection of the Church. Thus a lay minister should remain Christ-like in his or her conduct, as well as focused upon the purpose of his or her ministry. The context of his or her ministry is visiting and administering Holy Communion to the sick, the elderly, and the infirm.

5. Fifth, a lay minister should observe the proper liturgical rite when taking Holy Communion to the sick. Depending upon the particular circumstances, there are a couple of liturgical rites a layperson may use outside of the Mass. A lay minister should consult with the ministry lead when he or she is uncertain which rite to use.

A lay minister should also prepare carefully, making sure that he or she is familiar with the rite and completely understands it. If the lay minister remains uncertain about a prayer, a reading, or an action to be carried out during the rite, he or she should consult with the Ministry lead.

Ordinary Visits to the Sick, the Elderly, and the Infirm

A lay minister of Holy Communion may be called to visit the sick in a number of different surroundings. These may include private homes, hospital rooms, or nursing homes. There may be one sick person to visit or there may be several. Some will suffer the physical and mental effects of sickness, age or infirmity more strongly than others.

Whenever it is possible, celebrating the Rite of Communion and the Celebration of the Word should be part of a more comprehensive visit with the sick.

Because there is a short form and a long form of this rite, the lay minister of Holy Communion should carefully weigh each of the aforementioned facts. For instance, the long form is generally considered more appropriate for communal celebrations where those gathered are just beginning to feel the affects of their illness, infirmity, and age. Thus this rite is more appropriate in retirement homes or assisted-living facilities, where the sick and the elderly are gathered in great numbers and remain highly functional. The long form is also recommended when visiting the homebound.

On the other hand, the shorter form is designed to be used when visiting a person in the hospital or an elderly/ very sick person in their own home, especially when neither friends nor family are present.

Of course a minister of Holy Communion should always use the shorter rite when the health of the individual has degenerated past the point where he or she can comfortably partake in the longer form.

These factors also help the lay minister to determine the level to which the sick, the elderly, and the infirm are capable of actively participating in the liturgy. If their condition is weak, their capacity to participate may be restricted to minimal responses. Some may not even be capable of those.

On the other hand, others may be capable of sharing in the readings and, in the case of communal celebrations, assisting the lay minister in presiding over the rite. Of course the lay minister should also invite those present; friends, family, and persons who care for the sick to participate in the liturgy.

Alternatively, the person may not have or be in close contact with friends and family.

Sadly, many of today's sick and elderly suffer from the poverty of loneliness and neglect. In such cases it is all the more important that the lay minister take the necessary time to inquire directly of the person about his or her condition. Not only does this keep the lay minister abreast of what is happening — information that he or

she may subsequently need to share with the pastor — but it also provides the sick with much-needed human contact.

This alone is a tremendous comfort to those who lack anyone else with whom to share their daily burdens. Nevertheless, the lay minister should avoid imposing conversation or an extended visit where an individual's condition is too weak to allow for it.

Sometimes, simply sitting by the sick person's bedside and quietly praying brings the most comfort.

Finally, while the Church still prescribes a fast of one hour from all food and drink prior to receiving the Holy Eucharist, canon 919 dispenses the elderly and the sick from this requirement.

Additionally, recognizing that they, too, require their strength, the Church also dispenses those who care for the sick and the elderly from the requirements of the Eucharistic fast.

The Eucharist is the source and the summit of every Catholic's life of faith. It is in partaking of Holy Communion that Catholics receive the Body, Blood, Soul and Divinity of Jesus Christ.

It is important that Catholics not be deprived of the opportunity to receive the Blessed Sacrament due to illness, age, or infirmity. Yet ordinary ministers of Holy Communion cannot always fill the great need among Christ's faithful. Therefore extraordinary ministers of Holy Communion must be properly prepared according to both pastoral theology and canon law to fulfill this need in taking the Eucharist to the sick.

Extraordinary Ministers and the Sick:

Extraordinary ministers who assist in the distribution of Holy Communion at parish Masses may also make themselves available to assist with the distribution of Communion to the sick and the homebound, but additional instruction and formation is required. (*Diocesan Statute of the Third Diocesan Synod, #108*)

Eligibility for Service

- Extraordinary Ministers of Communion must be faithful Catholics who have received the Sacraments of Baptism, Confirmation, and Eucharist, and are at least eighteen years of age, and participate regularly in the sacramental and liturgical life of the Church.
- Extraordinary Ministers of Communion must be persons whose good qualities of Christian life, faith and morals recommend them. Let them strive to be worthy of this great office, foster their own devotion to the Eucharist and show an example to the rest of the faithful by their own devotion and reverence toward the sacrament of the altar.

Selection and Appointment

- A. In the Diocese of Sacramento, pastors, priests-chaplains, and deacons have the authority to appoint extraordinary ministers of Holy Communion in their parishes and institutions.
- B. The priests have the authority to appoint extraordinary ministers for a specific occasion where a genuine need for it exists.
- C. Extraordinary ministers must be mature, eighteen years of age or older, living an exemplary Christian life and are recognized and respected by the community of faith.
- D. After the requirements have been considered, it is appropriate that the minister lead (pastor, priest-chaplain or deacon) have a personal interview with each of the nominated candidates.
- E. In addition candidates must undergo training through special classes, before the date they are commissioned to the ministry, this is done so that they can be identified as such through a clear understanding of your new role, as well as to extend their knowledge in the theology of the Eucharist.
- F. Whenever there is a priest or deacon available, extraordinary ministers may receive communion themselves, can be delegated to give it to other faithful, sick or disabled.
- G. The extraordinary ministers of Holy Communion should limit the exercise of his/her ministry to the parish or institution they are serving.
- H. Always allow some time for silent prayer
- I. Follow-up individualized training with practice in the customs and traditions of particular parishes and institutions is encouraged.
- J. Candidates selected for Lay Liturgical Ministries need to reflect the diversity of the parish community which includes individuals of various ages, abilities, social and ethnic background; male and female; married, single and widowed.
- K. The number of ministers is determined by the need. There should not be so few as to require multiple services on any one day nor so many that each does not have the opportunity serve at least monthly.
- L. The lives of potential ministers need to reflect service to the community. The ministry is not a reward for those active in the parish or the creation of any type of elite status.
- M. The Christian Community, who calls forth the Lay Liturgical Ministers, needs to be instructed so that the ministry may be fully appreciated as service at the Eucharist.

Length of Service

Extraordinary Ministers of Holy Communion should be appointed for a specific period of time, usually **three years**.

The advantages of this are:

- √ Provides the opportunity for more people to participate in the service;
- √ Avoids the frequent reliance by the parish of the same people,
- √ Permits an assessment of the ministers and makes it easier to deal with those who are not suitable for this ministry.

- ✓ If the minister moves from the parish or institution from which he or she was appointed during the period of three years, it will be necessary to again be appointed by the pastor of the new parish to which he or she has moved to.

Rite of Appointment (Commissioning)

Commissioning ministers for their role is recommended in accordance with the Rite found in the Book of Blessings, Chapter 63, #1871-1896. It is appropriate that those selected as liturgical ministers be formally commissioned during the weekend liturgies.

In this way the prayer of the people they will serve will support them. Commissioning some ministers at each liturgy gives the entire parish the opportunity to participate and becomes a means of catechizing all on the importance and meaning of this ministry. New parish members who have been Lay Liturgical Ministers in their former parishes are commissioned in the same way.

Prior to Visiting

- **Collect information** about the person who is sick and other helpful information for your visit to the home or hospital.
- **Make an appointment.** Even if you have a regularly scheduled time for visiting, call to confirm since the situation may change. The person may not be up for a visit because of various circumstances. You may also want to ask if additional family members or the caretaker want to receive communion so that you can the required number of hosts.
- **Prior to mass:** Arrive a minimum of 15-20 min. before mass and place the empty Pyx on the altar. Make sure the required number of host are indicated on the bottom of the Pyx.
- **Spend time in silent prayer** prior to mass when taking communion to the sick.
- **Transporting of host:** carry the host in a Pyx. Have respect and reverence for the presence of Christ. When transporting the Eucharist to the sick, ministers should avoid any activity not in keeping with the reverence due to the Blessed Sacrament. Visits should start immediately after leaving the church.

Canon 935: *“No one is permitted to keep the Eucharist on one’s person or carry it around or store in their own home”.* All host taken on a given day must be consumed on the same day or returned to the church.

- **Don’t visit if you are sick.** Because of its frequency today the common cold or flu may cause serious complications for a person who is already ill. If you are not feeling well seek a replacement for yourself and if unable to find one, then cancel your appointment.
- **Appropriate attire for all Lay Liturgical Ministers:** as what would be worn for business or similar circumstances, also make sure to use your nametag.

Prayers of Blessing and Dismissal

A rite of blessing and dismissal is appropriate as the ministers of communion are sent forth to the sick or elderly. *Pastoral Care of the Sick 73 and Canon 922*

- ❖ Note: This rite of Dismissal from Mass for Extraordinary Eucharistic Ministers who take Communion to the Sick will need to be adapted according to the customs of each community.
- ❖ Extraordinary Eucharistic ministers who take communion to the sick may be called forth from the assembly prior to the final dismissal.
- ❖ The Extraordinary Ministers approach the Sanctuary and stand at the base of the steps, the celebrant or deacon then hands them the Pyx to each minister.
- ❖ They remain there as the Priest addresses the assembly and the ministers, with prayers of blessing and direction, using one of these or similar words:
"As you go to the sick and the homebound, take with you not only the sacrament we have celebrated, but also the Word of God which we have heard, as well as the affection of this parish community. Ask for the prayers of those whom you visit in return. Go, now, with God's peace and blessing." or
"Brothers and sisters, you are sent from this assembly to bring the Word of God and the Bread of Life to the sick and homebound members of our parish family. Go to them with our love, our care and our prayers in the name of Jesus Christ, our Lord and gentle healer."
- ❖ After the final blessing the ministers will process out of the church behind the altar servers.
- ❖ It is required that the extraordinary Eucharist ministers who take communion to the sick then depart immediately for their visits to the sick.



"There was no needy person among them...they were distributed to each according to need." Acts 4

Opening Exercise

The following list contains 5 proper practices and 5 practices that are improper for a visit with the sick or homebound.

Check the five items that are practices we want to avoid.

- ___ 1. Begin the prayers with the Sign of the Cross, the sign common to all prayer.
- ___ 2. Comment on how the house needs to be better organized for the sick person.
- ___ 3. Talk about the last visit to another house and comment about its cleanliness.
- ___ 4. Be aware of the sick person's ability to follow the prayers and the ritual.
- ___ 5. Comment on the lack of interest of the parish priest in visiting the homebound.
- ___ 6. Show respect and reverence for the presence of Christ in the Blessed Sacrament.
- ___ 7. If the person cannot receive Communion, offer a blessing.
- ___ 8. Follow the Catholic Rite for Communion to the Sick but adjust as needed.
- ___ 9. Question family members about their worthiness to receive communion.
- ___ 10. Ask who pays for their care and then give advice for saving money.
- ___ 11. Assure the sick/elderly person that their parish remembers them in prayer.

Share your results with a person near to you.

Discuss why these practices are improper.

... Reflection Questions

1. What is your personal experience in relating to those who are ill, or in visiting the elderly or homebound that has called you to this ministry at this time in your life? Please share a personal experience.
2. What gifts did God give you that will help you in this ministry?

As You Begin Your Visit

- Be punctual, arrive at the pre-arranged time or call in advance to inform them of your delay.
- Be friendly but not too overpowering. Be careful not to let natural shyness give you the appearance of being remote or distant.
- If you are taking Communion after mass: take notes of the homily during the mass and share the reflection after reading of the day.
- Please share the bulletin news with them. Make sure to leave them a copy of the parish weekly bulletin. Some may wish to give an offering, so make sure to have parish envelopes. Turn in all sealed donation envelopes to the parish office.
- Strive to be patient and not allow interruptions to bother you, as it happens especially in care homes and hospitals. You will be a better visitor if you are able to be flexible as interruptions may happen.
- Be confident and personal in your ministry of service but remember that the other person's needs are primary. Endeavor to avoid prolonged visits, as the sick need their rest.
- After listening to the conditions and desires of the person who is sick, ask if the person desires communion at this time. Invite the Catholic family members to also receive Communion.
- On weekday visits, choose a scripture reading suited to the person. Be aware of the need for short and comforting passages. The reading and homily should help those present to reach a deeper understanding of the mystery of human suffering in relation to the paschal mystery of Christ.

Practical Considerations

- Know that the relationship with the person who is sick is a key factor. The minister brings the comfort and concern of Christ.
- Be aware of feelings that may arise when you enter a person's home or room. If you find it difficult to look at the person because of their physical condition, concentrate on their eyes.
- Take proper time for introduction and personal sharing. Listen attentively, so you are aware of what the sick person desires or preferences prior to beginning the Communion Rite.
- If the person does not wish to receive Communion at this time, ask if they would like to receive in a short blessing.
- Be aware of making referrals when other services are needed (confessor, counselor, doctor, etc.). Do not try to solve problems.
- If the sick person wishes to celebrate the sacrament of Reconciliation, encourage the family to contact the parish priest or offer to relay the message yourself.
- Maintain complete confidentiality at all times.

Procedures For The Communion Rite

- **Outline Of The Ritual:** Use the ritual booklet: “**Communion of the Sick booklet**”
- Knowing the conditions and desires of the person who is sick, choose a Scripture reading suited to the person. Use Sunday’s readings when visiting on weekends. Be aware of the need for short and comforting passages. The readings and the homily should help those present to reach a deeper understanding of the mystery of human suffering in relation to the paschal mystery of Christ.
- Carry the host in a Pyx. Ensure respect and reverence for the presence of Christ. When transporting the Eucharist to the sick, ministers should avoid any activity not in keeping with the reverence due to the Blessed Sacrament. Go directly from tabernacle / Mass to the pastoral visit.
- Decorate a small table with a Corporal or small tablecloth, a cross, a votive candle (battery operated), and the Pyx.
- Begin with the sign of the cross; it is a common call to prayer. Be a prayerful presence with a purpose.
- Pace the ritual with sensitivity, read slowly and reverently. Be aware of the sick person’s ability to follow.
- Give a small portion of the host to a person who has difficulty swallowing. Check with the caregiver, nurse or doctor for special feeding requirements before starting.
- Wait for the person to swallow the host. Offer water if necessary. Be prepared with a cloth in the event that the person has problems. Allow some time for silent prayer.
- Take time to pray reverently and to be present with the sick person and the family.

Ending The Visit

- Be sensitive to the proper time to depart.
- End with appropriate verbal encouragement such as
 - “*Thank-you for allowing me to visit with you today.*”,
 - “*The community and I will be praying for you*”,
 - “*Please pray for our parish that God will be with all of our families and parish leaders.*”,
 - “*Please keep me in your prayers and you will be in mine.*”

These can be encouraging words, since it helps the person offer service back to you and our extended community through prayer.

The parish staff or trainer of communion ministers for the sick should be available to those visiting the sick in order that they might share their feelings and experiences.

Prayer of Personal Commitment

I remember with gratitude that I have been entrusted with the ministry of taking Communion to the sick and the homebound.

I have accepted this responsibility of being an example of Christian living in faith and reaffirm my desire to strive for greater holiness through this sacrament of unity and love.

I remember that, though many, we are one body because we share the one bread and the one cup.

I resolve as an Extraordinary Minister of Communion to the sick and homebound to serve my brothers and sisters with utmost care and reverence.

I ask God to bless me in my ministry of care that I may be strengthened by God's grace, and that I may continue to be of service to those in need.

Amen

*Commissioning Blessing **Book of Blessing** Chapter 63*



Appendix

FAQs concerning Communion to the Sick and the Homebound

- **WHEN DO I TAKE COMMUNION TO THE SICK PERSON?** It is best to take Holy Communion directly from the community's celebration of Eucharist in the church to the person in the home. If this is not reasonable, and no substitute is available, please take it as soon as possible, showing respect for the presence of Christ.
- **IF TAKING HOLY COMMUNION IS ONLY PART OF MY VISIT WITH THE SICK OR HOMEBOUND PERSON, SHOULD PRAYER AND COMMUNION BE AT THE BEGINNING OR END OF OUR TIME TOGETHER?** There is no set rule but most people find it more comfortable to spend some time in conversation before sharing prayer and Holy Communion. The conversation could include ideas from the homily and reassurance that the parish community prayerfully supports that person. If the sick or homebound person prefers time for private devotion, it is suggested that you visit before prayer and indicate that you will leave immediately after distribution of Communion so as to allow time for quiet reflection and devotion. This respects the privacy of the person while also honoring the importance of communal prayer as part of Eucharist.
- **IF OTHERS ARE PRESENT, SHOULD I INVITE THEM TO PRAY AND RECEIVE COMMUNION WITH THE SICK PERSON?** Yes, others should be invited to join in prayer. All Catholics who are participating may be invited to receive Communion.
- **ARE THE SICK OR HOMEBOUND REQUIRED TO FAST AN HOUR BEFORE RECEIVING COMMUNION?** No, they may receive Communion at any hour and need not adhere to the normal fasting regulations.
- **WHAT IF THE SICK PERSON IS UNABLE TO SWALLOW THE ENTIRE HOST?** Water may be offered to the sick person receiving Communion to aid in swallowing the host. If warranted, just a small portion of the host can be offered if the person is too ill to receive the entire host. The remaining portion of that host must be consumed by someone who is participating in the prayer or by you as minister of Communion. Remember that the divine presence in the Blessed Sacrament is the same regardless of the size of the portion of the host. Consult with the family concerning the condition of the person regarding swallowing.

- **WHAT SHOULD I DO IF THE HOST IS DROPPED OR THE PERSON REMOVES IT FROM HIS/HER MOUTH?** If the host is dropped and there are no health concerns, the host may be picked up and consumed. If the dropped host presents health concerns or the person removes the host from his/her mouth, it should be dissolved in water and the water poured into the church sacarium, not down a drain. Of course, if anyone declines or refuses to receive Communion, you should respect their request.
- **WHAT DO I DO WITH THE PYX WHEN I AM NOT USING IT TO TAKE COMMUNION TO THE SICK?** The pyx should be kept in a safe and respectful place when not in use. Take the pyx to the community's celebration of Eucharist on the day of visiting the sick. When a minister no longer needs the pyx, it is returned, if borrowed, to the parish office or the pastor.
- **AM I ALLOWED TO TAKE A FRIEND TO ACCOMPANY ME ON THE VISIT?** Yes, only if they are trained extraordinary ministers for the Sick and Homebound.
- **WHAT SHOULD I DO WITH EXTRA-CONSECRATED HOSTS AT END OF VISITING THE SICK?** You are expected to consume them or return them to the tabernacle.
- **HOW MANY TIMES PER DAY CAN AN EXTRAORDINARY MINISTER RECEIVE COMMUNION?** Per Canon law extraordinary ministers are allowed to receive communion twice in one day.
- **SHOULD I USE A CANDLE DURING HOUSE VISITS?** It is recommended to use battery-operated candles, as some of the sick visited may be using oxygen and may pose a risk of fire.
- **WHAT PRAYERS DO I USE WHEN I TAKE COMMUNION TO THE SICK?** It is best to use the prayers in the booklet. Do not attempt to improvise.

References from Scripture and Lessons from the Scriptures

For I received from the Lord what I also handed on to you, that the Lord Jesus, on the night he was handed over, took bread, and, after he had given thanks, broke it and said, "*This is my body that is for you. Do this in remembrance of me.*" 1 Cor 11: 23-25

As a body is one though it has many parts, and all the parts of the body, though many, are one body, so also Christ. For in one Spirit we were all baptized into one body, whether Jews or Greeks, slaves or free persons, and we were all given to drink of one Spirit. Now the body is not a single part, but many. 1 Cor 12: 12-14

“Is anyone among you suffering? He should pray. Is anyone in good spirits? He should sing praise. Is anyone among you sick? He should summon the presbyters of the church, and they should pray over him and anoint (him) with oil in the name of the Lord, and the prayer of faith will save the sick person, and the Lord will raise him up. If he has committed any sins, he will be forgiven.” James 5:13-15

Lessons from Scripture

1. We receive the Eucharist that is truly the Body and Blood of Christ.
2. We, the assembly of the baptized, also “*become*” the Body of the Risen Christ.
3. This “*becoming*” unites us in love, and should change our lives.
4. Just because an individual is ill, homebound, or unable to be present at the assembly of the baptized, that person does not stop being a member of the Body of Christ. Just because a baptized member of Christ is sick and homebound, that person does not stop functioning as a member of the priesthood of Christ.
5. We believe in the Communion of Saints.
6. We should not view ministry to the homebound solely as a service TO the sick. This is a ministry of the Body of Christ to the Body of Christ. It is the members (us) building up one another. Ministry TO the sick is just as much ministry BY the sick. Those ministering, and the assembly itself, are blessed and built up, by the presence of those to whom one ministers.