

Robust Referral System Training

Presented by the Duke Clergy Health Initiative & Partners in Health and Wholeness of the NC Council of Churches

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Our Goals Today

01

Explore

What is a referral system and why is it important?

02

Assess

Assess the referral needs of one's congregation

03

Develop

Develop a ready-to-go list of resources

Explore



**Why is a proper
referral important?**

Explore: Defining referrals

Define referral: an act of referring someone or something for consultation, review, or further action.

Define Robust Referral System: This includes a premeditated, ready-to-go list of resources that can potentially help the wide, various needs that a person can have. The list is meant to consider the full range of a person's needs. This list is utilized by those in supportive roles in a faith community, from staff, to administrative staff, to deacons, Stephen ministers, youth volunteers, VBS workers, and anyone who works alongside people that feel confident in their ability to recognize a need and provide support to that person.

Explore: Why referrals and how to frame referrals theologically

Why is this important?

- This is life saving.
- Our faith has the incredible ability and opportunity to promote genuine health, healing, and wholeness in our lives- including mental health (Jn 10:10).
- We should be able to bring our full selves to church and not be judged.
- We turn to each other, friends, and family when we have a concern, and we can learn how to support one another (Gal 6:2).
- Instead of promoting stigma, faith communities can instead promote the foundation for self-compassion, healthy reflecting, communication, learning, resilience, and self-esteem.



Other reasons why is this important?

- The professional training and scope of a faith leader does not normally include clinical training and has related limitations.
- Referrals help treat and prevent burnout.
- Referrals efficiently help the person in need, while protecting boundaries of a faith leader.
- Developing a referral network will empower others in your congregation to also be prepared to help, expanding the outreach of the ministry.
- Get away from triaging.
- COVID-19 has provoked all types of needs and deepened existing concerns. With all of the acute and ongoing needs that you face in ministry, it helps to have a system in place to offer support.



Assess

**The needs of your
faith community**

Assessing the referral needs of one's congregations

- What are common, recurring needs in your congregation?
- Think about your community holistically, what issues does your larger community face?
- What community and individual trauma causes barriers in your community?
- What are age-specific issues that need to be addressed?



Develop



**Create a Robust
Referral System**

Developing a Referral List

The Goal: To develop a ready-to-go list of resources that can potentially help the wide, various needs that a person can have. The list is meant to consider the full range of a person's needs. Consider adding and updating to this list as you learn about trusted resources.

Brainstorm contacts for: Individual Support

- Mental Health Professionals: individual-focused; couple-focused; family counseling. Consider speciality trainings: trauma; addiction; children/ youth; etc
- Guidance: Spiritual direction coaches; job-training specialists; chaplains
- Health Specialists: Doctors; Psychiatrists; Psychologists/ Psychotherapists; Out-patient clinics; nutritionists; music therapists; pain-management specialists that honor holistic approaches
- System needs: lawyers; connections to mental health or family court; social workers; principles/ superintendents; educators; transportation providers; accountants; rental agencies/ property manager

Brainstorm contacts for:

Group Support

- Twelve Step Groups: Gamblers Anonymous; AA; Al-Anon; Narcotics Anonymous; Food Addicts; Anonymous; Celebrate Recovery
- Grief Groups
- Support Groups for those recovering from sexual abuse
- Groups for life-changes: adoptions; new parents; aging
- Support groups for those in grief; chronic pain; illness; caregivers; veterans

Brainstorm contacts for:

Other Support

- Hotlines: Suicide help; crisis hotline. Example: Hope for NC Crisis Counseling hotline: 1-855-587-3463 and National Suicide Hotline: 988. Your local Mobile Crisis Team for mental health concerns.
- Agencies: hospice care; shelters; food pantries; rehabilitation and treatment centers; recreational centers for children; teenager resources; familiarity with public transportation

Helpful Links

[Substance Abuse and Mental Health Services Administration \(SAMHSA\) Treatment Locator](#)

[NC Cares 360 Provider Locator](#)

[Unite SC](#)

[National Domestic Violence Hotline](#)

[National Alliance on Mental Illness \(search for local affiliate\)](#)

[CareNet Counseling](#)

[Sanctuary Counseling Group](#)

[Psychology Today \(helpful filters\)](#)

[Online Therapists](#)

Helpful Links

[\(Webstie\) APA Mental Health and Faith Community Partnership](#)

[\(Article\) Pastoral Counseling: The Art of the Referral](#)

[Mental Health and Faith Bibliography](#)

[Mental Health Guide for Faith Leaders](#)

[Quick Reference for Faith Leaders](#)

Helpful Links

[The Compassionate Friends](#) - Support after the death of a child

[AARP Grief and Loss Resources](#) - Support after the death of a senior

[National Widower's Organization](#) - Support for men grieving a loss

[American Foundation for Suicide Prevention](#) - Support for suicide survivors

[Griefnet.org](#) - Support for adults grieving a loss

[Hellogrief.org](#) - Support for adults and kids grieving a loss

Group Discussion

Together, let's name fears around implementing a referral system in the congregation.

What are some things we can do to address these fears and challenges?

What are some opportunities for your congregation in implementing this referral system?

Questions

