

I am not aware of any pastors who have performed miracles, but I suppose one aspect of pastoring is indeed modeled on Jesus' travels in which He "visited" the sick and responded to those in distress, like the woman with the hemorrhage and the grieving father in today's Gospel lesson. Lacking the ability to perform miracles, we try at least to reassure through our presence that Jesus never abandons His followers.

Pastoral care is a model — or rather, part of the model — for the Church — and I want to emphasize, *for the Church*, — that part of the model that comes from seeking to carry Jesus to those who need Him.

There is an irony in my having become a pastor, in that one of the factors that I believe kept me from throwing my hands up and yielding to God at least a few years earlier, was that I did not believe I could ever be able to put up with walking through the halls of a nursing home — they have largely disappeared as such for longer term care — or with visiting in hospitals.

In point of fact, I ignored that I occasionally — not *often*, but occasionally, — would visit some neighbor from Ogden Dunes who was in the Porter County hospital in Valparaiso, which is where I worked and had my business and where others were not so likely to have visited them.

But the pull I felt toward what I thought was returning something to God by throwing up my hands and becoming an ordained minister was such that I ignored that fact, and, well, it took a while, but here I am.

And wonder of wonders. I think I have shared even recently from one of the first pastoral calls I made while still in seminary, that to a man who lived in the middle of farm fields in Lake County, Indiana. What I had not mentioned was that the church — Range Line Presbyterian Church — asked me to do two other visits that day, one to a woman in a hospital in Munster, of which I really lack any memory, and the third that I remember vividly to a retired minister who had occasionally been attending worship

when I had preached at Range Line. He had non-Hodgkins lymphoma, but was indeed also not a young man. I subsequently visited him further in the hospital before he passed on to our maker, and whether it was his age or that he was not one of the many who survive that cancer, I do not know.

At any rate, he was the last stop that Friday, and he and his wife were truly delighted that I had come and were indeed waiting for me, and he asked me whether I had brought communion. Well, "No," I replied, and just for what it is worth, he and I knew that at that stage in my progress to become a Presbyterian "Minister of Word and Sacrament," as was then called the formal position to which I was ordained, he and I both knew that by the rules, I could not have administered the Sacrament we are observing here today, though that would not have stopped either of us.

But, to make a long story short, we got a bottle of prune juice out of his refrigerator and, I believe, some saltine crackers, and the three of us shared, at least in spirit and I do not think Jesus would have disapproved, we shared *The Lord's Supper*.

It was probably the last time he ever shared it, as I do not remember how soon was that last visit in a hospital.

My point today is a very simple one and it is has to do with your and our being Christ's Church. Some of you have indeed been on the "receiving end" of pastoral care from this church or either of its predecessors through visits from me. Ironically, or even sadly, they are often the time I best get to know people. Anita, for example, knows that her late husband, Jim, holds my record for most different locations in which I made pastoral visits for any one individual; Phyllis Carlson, who is now in Colorado, was the first person to whom I made such a visit as pastor here, and knows about my visits with her late husband and the one that occurred at what had to have been God's controlling me one Sunday on my way from the Phoenix airport to this church, because I had the time to stop *en route*, not because I knew he would be in the emergency room at Mountain Vista, and ne.

I personally place, partly but not exclusively because I believe it is what you want, I place a very high priority on such visits — I am headed for several this afternoon, because printer problems at church this week and plumbing problems at home Friday kept me from making them during the week. I place a higher priority on them than on written reports to the Session or on . . . well, at any rate, they matter, and rather than to shrink away when I first encountered the unpleasant smells in my first Indiana nursing home, I have found that pastoral visits offer a reward to the one making them that perhaps even exceeds what the one visited enjoys and appreciates.

Providing pastoral visits not only to members of the congregation, but at times to others — is part of our mission. I recently had a request to visit a man who had been placed in home hospice in Coolidge , which is of course within our area of ministry even though the man had not so far as I can tell ever have set foot in Community Presbyterian. Providing pastoral visits is one of the main ways a church serves *not just its own people*, but its Lord.

I am properly not going to be the one who leads the process of what used to be called a “Mission Study” to help determine the direction of this congregation after I leave, but helping churches do so was one of the main reasons I did throw up my hands and became a minister, for I had felt my call was to what is termed *interim ministry*, what both Presbytery Pastor Brad Munroe and I agree is what will be appropriate for you after I leave and before you call a new pastor. . . but please do not think I have any intention of slowing down or reigning in or in any way backing off from the privileges and responsibilities of being your pastor until I leave.

At any rate, as I led churches in this “Mission Study” and the subsequent pastor search processes, I used an image that I drew from one of my seminary professors and that I have shared in the past: a church is like a tripod, the most stable of geometric figures, because it stands on three legs, and the three legs on which a church stands are: worshipping together — and now I am going to change the order in which I normally

state things, — engaging the outside world in mission and evangelism, and sharing fellowship with *and supporting* one another.

That latter is something we do in substantial but not exclusive measure through providing pastoral care, including those pastoral visits. These visits are not a matter of preaching to a person in his or her hospital bed or rehab room or whatever; they might not involve much if any “God talk” other than a parting prayer. Yet they are a way of sharing Jesus and of all of our wishes and prayers for the person.

Jesus, whose earthly body is what the Church is; Jesus, who as we remember what He did on that long ago evening, know that He would not care whether we are using wine or grape juice or prune juice, let alone whether bread or crackers, or so long as we invoke His name and remember Him, remember Jesus.

Before we share in the gifts of that Sacrament, let us sing one more verse of our song:

We sing of Jesus, who on the night before He died, dined with His disciples, and following the meal. . . .