



# One-on-One Caregiver Instructions

Once Assigned a Care Receiver

After your director (or pastor) contacts a potential Care Receiver to understand their situation more, explains One-on-One Care, and confirms if they're still interested, that care need is then assigned to an available Caregiver best suited for the situation. To get started, [watch the training video](#).

Please use the system to track care related to people assigned to you. It helps you keep organized, your leader aware, and in unique situations, another Caregiver able to easily pick up where you left off.

1. Watch for notification emails from One-on-One Care Ministry.
2. Go to [my.eaglebrookchurch.com](https://my.eaglebrookchurch.com) and log in the system.
3. Look in the bottom right for the One-on-One Care Receivers section. Names of Care Receivers assigned to you show there.
4. Click on a name to view or note activities related to caring for the individual. Add notes when you attempt or make contact. Your leader should have made a note with submission form details.

## To Add a Note

Click the Add Activity button (see pic at right). On the next screen (see below), select the best option from the Activity drop list (Called or Left Message, Emailed, Met With, Other, Texted, the 1:1 Care Relationship Ended as Planned), type in a note, and click Add Activity. Click the back arrow in your browser if needed to return to the main page.

## What to Note: Key Details

Example: If you met, include a brief recap (3-4 sentences) including the relationship's next step (e.g., increase, keep, or decrease meeting frequency, get counseling, end care), if you or care receiver committed to do something, and what to lean into next time.

Connection Request  
Eddie Eaglebrook

Connector  
Rebecca Arkell

Activity \*

Notes \*

ADD ACTIVITY

## One-on-One Care Receivers

Eddie Eaglebrook



Eddie Eaglebrook

Contact Information

(987) 654-3210 (Mobile)

(Home)

eddie.eaglebrook@gmail.com

Connector

Ashley Jones

Request Date

05/15/2024 (257 days)

+ ADD ACTIVITY

Date	Activity	Connector	Opportunity
02/28/2025	Other SUBMISSION FORM INFO Our twins were diagnosed with a life-threatening disease. It's all very overwhelming, especially given the other kids to also take care of and guide through this as well. One-on-One Care Birth Date 12/01/1990 Do you have children? If yes, please list the names and ages of your children Eleanor 14, Esmeralda 14, John 9, Lucy 4 Please provide the name, mobile phone number, and email address of someone we can contact in case of an emergency (include their relationship to you as well). Eddie Eaglebrook, (987) 654-3210, eddie.eaglebrook@gmail.com, husband Please tell us the city and state you live in to assist with matching you with a caregiver. Centerville, MN Please share with us your occupation Mom What is the best time of day to contact you? Evening How do you believe a One-on-One Caregiver can be of encouragement to you? Prayer and a listening ear Do you currently have anyone else (e.g., family member, professional counselor) caring for you? If yes, please give their name and contact information. No Are you currently part of a small group or serving team? Yes How did you hear about our One-on-One Care ministry? Eagle Brook website	Ashley Jones	1:1 Care Requests to Manage
02/28/2025	Assigned	Ashley Jones	1:1 Care Requests to Manage

BACK



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5. What you do in the system at the end of a care relationship depends on whether care ended as planned or if the care receiver withdrew or stopped responding.

### Care Ends as Planned

- a. When it's agreed that it's time for the care relationship to end, make a note of that in the system. Relationships may last up to 6 mo. Use this Activity to note that care ended:

**Activity:** The 1:1 Care Relationship Ended as Planned

**Example Notes:** Care ended as planned. Had last meeting Mar. 8. Celebrated progress and God's faithfulness, specifically with legal bills. Suggested Financial Peace University or women's small group as next step.

When you save the note, your leader is automatically notified that care ended and will send out a feedback form to you and a different one to the Care Receiver.

- b. Complete that form within a week of receiving it. Your leader will debrief the relationship with you, though they may wait until they've also received the Care Receiver's feedback.
- c. **Shred or delete any care records you have that were not in [my.eaglebrookchurch.com](https://my.eaglebrookchurch.com).**

### Care Receiver Withdraws or Stops Responding

If the relationship ends early either because the Care Receiver chooses to withdraw from One-on-One Care or stops responding to your repeated contact attempts over a substantial period of time:

- a. Make applicable notes in the system—don't select The 1:1 Care Relationship Ended as Planned. Examples:

**Activity:** Other **Notes:** Withdrew from care – too busy to connect.

**Activity:** Other **Notes:** Stopped responding. See prior contact attempts.

- b. Email your director that the care relationship has ended. They'll inactivate the care request and send out feedback forms. It's still important that both you and the Care Receiver have the opportunity to complete them. These forms help because:
  - Pastors who may interact with the individual
  - The One-on-One Care team in case the person re-applies for care in the future
  - You as a Caregiver learn insights and make future relationships better

### The Appendix on the subsequent pages includes:

- An example One-on-One Care Request form attenders complete prior to beginning care
- System-generated emails your leader sends:
  - Email to Care Receiver at End of Care which includes a Care Receiver Feedback form
  - Email to Caregiver at End of Care which includes a Caregiver End of Care Summary form



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## Appendix

### One-on-One Care Request Form

This example request below gives you an idea of the questions a potential Care Receiver answers when submitting their request. Your leader will add key details in the system's note area about your Care Receiver's responses for awareness. **You are required to treat and handle such information in a secure and confidential manner, e.g., avoid leaving your computer open and walking away if others may see it, even if they are people you trust.**

#### One-on-One Care

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Birth Date

1/1/1985

Do you have children? If yes, please list the names and ages of your children

yes

Please provide the name, mobile phone number, and email address of someone we can contact in case of an emergency (include their relationship to you as well).

NA

Please share with us your occupation

Test

What is the best time of day to contact you?

Test

How do you believe a One-on-One Care Giver can be of encouragement to you?

Test

Do you currently have anyone else (e.g., family member, professional counselor) caring for you? If yes, please give their name and contact information.

Test

Are you currently part of a small group or serving team?

No

How did you hear about our One-on-One Care ministry?

Family member or friend



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## System-Generated Emails the Director/Pastor Sends

### Email to Care Receiver at End of Care

From: Eagle Brook One-on-One Care Ministry [Note: Replies go to Sender's email]  
Subj: One-on-One Care, how'd it go?

Hi [First Name],

Hopefully, you were encouraged and supported when facing whatever difficulties led you to find support. While caregivers are not intended to be counselors or therapists, our hope is that you were reassured of God's work in your life. You matter to us, and as a church, we are curious how it went from your perspective. Would you please let us know so we can continue to make One-on-One Care better?

[Care Receiver Feedback](#)

Blessings,  
[Director/Pastor's name]  
Eagle Brook One-on-One Care Ministry

### Email to Caregiver at End of Care

From: Eagle Brook One-on-One Care Ministry [Note: Replies go to Sender's email]  
Subj: Request for End of Care Summary

Hey [First Name],

Hopefully, you were able to encourage and support your care receiver in their difficult situation. While caregivers are not intended to be counselors or therapists, our hope is that you were able to reassure the person of God's work in their life. With that in mind, please let us know how it went from your perspective.

[Caregiver End of Care Summary](#)

Blessings,  
[Director/Pastor's name]  
Eagle Brook One-on-One Care Ministry



# One-on-One Caregiver Instructions

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## One-on-One Care | Care Receiver Feedback

Our desire is that you were encouraged and supported while facing whatever difficulties led you to request care. While caregivers are not intended to be counselors or therapists, our hope is that you were reassured of God's work in your life. With that in mind, please let us know how it went from your perspective so the care offered to others can continue to be improved.

### Looking Back

Indicate to what extent you agree with each statement below:

This experience was helpful to me. \*

☐ Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree

Overall, I felt understood. \*

☐ Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree

Overall, I felt cared for. \*

☐ Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree

Overall, I felt encouraged. \*

☐ Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree

We established wins/goals for my care. \*

☐ Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree

Those wins/goals were accomplished. \*

☐ Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree

What about this relationship and experience was most helpful to you? Be specific (e.g., my caregiver listening, praying, sending Scripture, giving words of encouragement, other caring gestures). \*

What's the main way this relationship and experience could have been better? Be specific. \*



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## Looking Ahead

Were there any next steps that were talked about? Yes/no. If so, are you clear on what they might be? \*

## Comments

What else is important for us to know?

SUBMIT



# One-on-One Caregiver Instructions

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## One-on-One Care | Caregiver End of Care Summary

Our desire is that you were able to encourage and support your care receiver in their difficult situation. While caregivers are not intended to be counselors or therapists, our hope is that you were able to reassure the person of God's work in their life. With that in mind, please let us know how it went from your perspective and share enough so that if someone else had to provide care for this person in the future, they would be prepared. Please keep your comments brief and objective.

### Care Summary

Caregiver  
Rebecca Arke

Care Receiver  
Rita Olson

Care Start Date

Care End Date  
5/15/2024

Method of Care: We mostly met via \*

Frequency of Care: We generally met \*

When we met, our meetings were \*

Imagine you just got on the elevator with someone who might have to care for this person in the future and you want to tell them the 2-minute version of this care relationship.

Care Need: The main reason the person sought care was \_\_\_\_ (e.g., their chronic illness, spouse's infidelity). \*

Care Wins/Hopes: We (established, didn't establish) a main win(s) or specific hope(s) for our care relationship. \*

Ownership: The person was (really engaged, engaged, not engaged, really not engaged) in their own care (taking responsibility for their care, showing up for meetings, etc.). \*

End of Relationship: The relationship ended (really well, well, not well, really not well). \*



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## Next Steps

We (discussed, didn't discuss) next steps for care with them. \*

## Comments

What else is important for someone to know if they provide care to this person?

SUBMIT