Community Care and Referral Boundaries

A quick-reference sample for teams deciding what belongs inside their role.

Synthetic concept resource

This file demonstrates how downloadable curriculum could appear inside a consultant website. It is not Rory's curriculum, therapy, diagnosis, emergency guidance, or a substitute for qualified clinical care.

Care the community may be able to offer

- Listening without coercing disclosure.
- Practical support such as transportation, meals, accompaniment, or help locating services.
- Spiritual practices that are optional, culturally appropriate, and within leader competence.
- A calm explanation of confidentiality, safeguarding, and documentation limits.

Needs that generally require another role

- Diagnosis, medication advice, or individualized mental-health treatment.
- Emergency assessment or management without trained responders.
- Legal, medical, or financial advice outside verified qualifications.
- Promises that spiritual practice alone will resolve illness, abuse, or immediate danger.

A warm referral script

> **“I want to stay with you while also being honest about my role. I can listen, help you identify the next support, and remain part of your community care. I cannot provide the assessment or treatment this situation may need.”**

Before publishing referral language

- Confirm local emergency and crisis resources.
- Clarify who is responsible for contacting services.
- Train leaders on safeguarding and mandated-reporting duties where applicable.
- Avoid collecting detailed histories through insecure forms or casual email.

This is a synthetic portfolio resource, not jurisdiction-specific policy. Qualified legal, clinical, safeguarding, and organizational review is required for real implementation.