

GUIDELINES FOR SUPPORTING CLERGY AND THEIR FAMILIES THROUGH SICKNESS ABSENCE AND CRITICAL ILLNESS

<http://www.gloucester.anglican.org/downloads/282.doc>
Bishop Michael's occasional paper on Clergy Illness

1. Introduction

- 1.1 All clergy will be supported through the stages of short, medium and longer term sickness, and in critical illness.
- 1.2 Diocesan support – the guidelines set out in this document focus on how senior clergy and support centrally within the diocese will be offered, and co-ordinated. What remains key are the support networks, and the pastoral and practical care that local clergy, senior colleagues, and local communities are able to provide.

2. Principles

This policy is based on the following Diocesan principles:

- 2.1 **Respect for individual dignity and privacy** – to ensure that no sensitive information of any kind will be shared with anyone without an individual's prior consent or knowledge. In particular with medical information, in accordance with medical guidelines, medical information (see 2.3) will only be shared with the individuals' express informed consent.
- 2.2 **Quality pastoral and practical care** – to ensure that we stay in touch throughout the stages of illness and/or longer term treatment and that we can offer and/or link with local networks of colleagues, for the best professional, pastoral, and practical care.
- 2.3 **Seeking medical reports and professional advice** – to ensure that any medical reports obtained when needed, will offer practical advice, suggestions and recommendations phrased both in terms of fitness for duty, and short, medium and longer term adjustments which will enable the individual to return to full capacity at work as safely as possible.
- 2.4 **Ensuring appropriate financial support** – to ensure that stipends are maintained within the appropriate diocesan and Church Commissioner policies, and that in cases of hardship we will work to try and secure grants and other benefits from appropriate bodies on an individual's behalf.

- 2.5 Being flexible and focusing on the individual** – to work with an individual to help them structure their working schedule and workload in such a way that will give them the maximum flexibility to balance managing their medical treatment with maintaining effectiveness and efficiency at work. The Diocese may take independent medical advice to ensure we are giving the most appropriate support (for example through the advice of the Occupational Health doctor - see 3 below).
- 2.6 Providing information and support** – to work with individuals to seek out information that may help with their circumstances, and where appropriate and wanted, put people in touch with others known to us who may have knowledge of/been through similar circumstances and can offer support.
- 2.7 Providing assistance with cover arrangements** - often an individual is left to make their own arrangements at a time when they are feeling most vulnerable/ill. We will work with individuals to lighten this load and to help make cover arrangements for them where this is helpful.

3. The Role of Occupational Health

- 3.1** The Diocesan Occupational Health arrangements allow individuals to choose to see either a Consultant Occupational Health Physician who is also ordained, or to be referred to see the Occupational Health professionals based at the County Council Occupational Health Service (situated near Gloucester Docks).
- 3.2** Occupational Health advice focuses on how the individual's medical condition impacts on their ability to fulfill their role and what reasonable adjustments might be made to facilitate a return to full capacity. Advice may include a framework and guidelines for managing a gradual return process, and may also include, where appropriate, advice for family, colleagues, line managers, and senior staff.
- 3.4** The Occupational Health professional will look at nature of work, workload, current pressures, and priorities, and give their advice on what is realistic and what is not advisable. It is usual that more than one OH appointment will be made so that the OH physician can help the individual track progress and increase workload gradually and so return to their full duties.
- 3.5** Occupational Health referrals are made by the Diocesan HR Manager following a discussion with the Archdeacon and individual concerned.

4. Supporting critical illness

4.1.1 There are four key stages to critical illness

- diagnosis
- treatment
- recovery
- returning (not returning) to work

4.2 Diagnosis stage

4.2.1 It may be that an individual has taken some time to achieve a diagnosis of a critical illness, or that a diagnosis is a sudden shock.

4.2.2 It is important that as soon as possible after diagnosis the individual contacts their appropriate senior local colleague (eg Team Rector, Area Dean and/or their Archdeacon, Training Incumbent (or another member of senior staff), so that both practical and pastoral support can be put in place.

4.2.3 The Archdeacon will arrange to meet the individual as soon as possible and will be in touch with their senior colleague or Area Dean. They will ensure the individual has access to this policy and will talk through immediate plans for treatment and other hospital visits etc, the likely impact of treatment, whether or not it would be appropriate for the individual to continue to work and how this should be reviewed. They will also review local cover arrangements with the appropriate people. Most importantly they will focus on the likely impact of the diagnosis and ongoing medical treatment on the individual themselves, their family members; on their team/local senior colleagues; and on their local church communities.

4.2.4 The primary purpose of this meeting (which may be with the individual on their own or with a spouse or other family member or colleague – whichever they prefer) is to be as supportive as possible, to explain the diocesan priorities in supporting its clergy, and to offer practical and pastoral support and to be assured of local pastoral and practical support.

4.3 Treatment stage

4.3.1 The nature of treatment for critical illnesses will vary from person to person and will determine how much/what work an individual is able to maintain.

- 4.3.2 If an individual is absent for more than an initial 6 day self-certifiable period a doctor's certificate is required. For this, and for subsequent absences, all certificates should be sent to the Diocesan HR Manager as soon as possible.
- 4.3.3 During treatment (or with long term sickness for other reasons) an Archdeacon or any other nominated contact person, should arrange to be in contact at regular intervals - purely for the purposes of keeping in touch.
- 4.3.4 At any stage of an individual working through treatment they feel they are unable to work, or are advised not to for a period of time, they should let their Archdeacon know and send in doctor's certificates at the appropriate times.

4.4 Recovery and returning to work

- 4.4.1 During a period of recovery and the road to returning to full capacity/duties the Diocese may take professional medical advice on what is most appropriate for an individual.
- 4.4.2 Through the Diocesan HR Manager a referral may be made by the Archdeacon, for the individual to meet with their chosen Occupational Health (OH) service who will give both the individual and the Diocese professional advice.
- 4.4.3 The Occupational Health professional will look at nature of work, workload, current family and other pressures, and priorities, and give their advice on what is realistic and what is not advisable. It is usual that more than one OH appointment will be made so that the OH professional can advise and help the individual, their senior colleagues, senior staff, to make adjustments, track progress and increase workload gradually and so return to their full duties safely.
- 4.4.4 The Occupational Health professional will advise throughout the period of recovery, and the phased return to work, appropriate adjustments. These may include a range of temporary changes which may include eg:
- ✓ reduced working hours
 - ✓ reduced days
 - ✓ only working one or two `session's' a day/week etc
 - ✓ change in role
 - ✓ reduced responsibilities
 - ✓ recommendations to assist plans for transport to and from work engagements
 - ✓ onward referral for other professional specialist advice and guidance (where appropriate these costs will be met by the Diocese), and

✓ any other reasonable adjustments that would be helpful.

4.4.5 Where appropriate the diocesan HR Manager, the Archdeacon, or a local senior colleague, may arrange a 'round-table' discussion to ensure that the professional advice and guidance, and diocesan and local pastoral and practical support which are in place for the individual and their family, are well planned and coordinated.

4.5. Where an Individual is unable to return to work

4.5.1 In the most serious of cases, or for example, where the disability is degenerative, it may be that an individual will not be able to return to, or maintain their duties.

4.5.2 Where their own doctor/specialist and the Occupational Health advice concurs, the Diocese through the Diocesan HR Manager will make the appropriate arrangements through the Clergy Pension Scheme.

4.5.3 Where the individual is not able to move from the diocesan property into their own accommodation the Diocese will do all it can to provide assistance and/or advice.

4.5.4 Initially a period of 6 months will be given to remain in the current property during which time the Diocese will work with the individual and their family to help them find appropriate alternative accommodation.

4.5.5 Pastoral support to both family members and the individual will be paramount at this time.

5. Payments during Ill-health absence

5.1 This link is for the statutory sick pay form which an individual should complete and return to the Diocesan HR Manager as soon as they are able <http://www.cofe.anglican.org/info/clergypay/sc02>

5.2 A certificate must cover all days of absence through sickness, although for the first seven days a "self certificate" is acceptable.

5.3 If the absence is to be for a period longer than seven days, then individuals must consult their doctor and obtain a medical statement giving the reason for their absence from work. For longer periods of sickness absence doctors consecutive notes should be sent at regular intervals according to the dates given on each note.

- 5.4 This statement should be sent to the Diocesan HR Manager, who will arrange for it to be forwarded to the Church Commissioners. Once the Commissioners have received the statement you will receive a letter of acknowledgment from the Clergy Pay Department.
- 5.6 The Diocese offers an Occupational Sick Pay Scheme during periods of certificated absence. The Scheme supplements Statutory Sick Pay and Incapacity Benefit so as to maintain normal pay during defined periods of sickness absence.
- 5.7 Under the Occupational Sick Pay Scheme individuals may receive full stipendiary payment for a maximum of 26 calendar weeks within a 12month period which will be monitored by the Diocesan HR Manager. The diocese has the discretion to make further payments depending on circumstance.
- 5.8 Any clergy who do not qualify for SSP under government regulations or who have exhausted their period of entitlement can claim sickness benefit direct from the appropriate government department.

6. Professional counseling support for clergy and their families

- 6.1 Through the Occupational Health referrals, individuals may be recommended referral for professional counseling - this may be to an external therapist or to the Diocesan Service as most appropriate. Other referrals may be for other short term medical interventions/support such as physiotherapy.
- 6.2 Individual members of the clergy, and their families are however, also able to refer themselves independently to the Diocesan Professional Counseling Service. Information can be found on-line; <http://www.gloucester.anglican.org/resources/handbook/counselling/> or for further information individuals can contact their Archdeacon or the Diocesan HR Manager. All referrals are in confidence.

7. Disability

- 7.1 In its' support of all sick clergy including their family circumstances, the Diocese will follow the spirit of the Disability Discrimination Act (regardless of whether or not the individual's circumstances falls within the legal definition of a disability to which the Act applies).
- 7.2 Where a critical illness has left an individual with a disability, or where an individual with a disability is appointed to a clergy role, the Diocese will take responsibility for working with the individual (and where appropriate

- local senior colleagues) to ensure that appropriate reasonable adjustments are made that will enable the individual to work effectively.
- 7.3 The Archdeacon and Diocesan HR Manager will work together with the individual and their local senior colleagues to ensure the parish(es) are aware of, and have the training required, to ensure that local reasonable adjustments are in place.
- 7.4 Centrally, the Archdeacon and Diocesan HR Manager will make the appropriate links with departments (eg Property, Ministry, etc), to ensure the individual is supported, and their needs addressed appropriately; and will also ensure that there is access to appropriate professional advice and support which will ensure that the individual is able to take up/continue their role effectively.
- 7.5 In circumstances where specific equipment is required, eg specialist software, adaptations to property etc, the Diocesan HR Manager and Archdeacon will provide advice on funding and resourcing.