Clergy Health and Wellbeing (Sickness Absence) Guidelines

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Applies to: Office Holders of the Diocese of Bristol

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Clergy Health and Wellbeing (Sickness Absence) Guidelines

1.0 Introduction

1.1 Should a member of clergy be unable to perform their duties because of sickness, the obligations and rights for clergy are set out in Regulations 27 and 28 of The Ecclesiastical Offices (Terms of Service) Regulations 2009. These Guidelines outlines the processes to be followed in accordance with these regulations.

1.2 Additionally, these Guidelines provides guidelines upon how senior clergy and support centrally within the diocese will be offered, and co-ordinated. Key to this are the support networks, and the pastoral and practical care that local clergy and senior colleagues are able to provide.

1.3 A flowchart of the steps within the Management of Sickness process can be found in Appendix 1.

2.0 Principles

These Guidelines are 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, this will only be shared with the individuals’ express informed consent.

2.2 Quality pastoral and practical care – to ensure contact is maintained throughout the stages of illness and/or longer term treatment and that as appropriate there is the 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 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 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 in their office. The diocese may take independent medical advice to ensure we are giving the most appropriate support.

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, to put people in touch with others known to us who may have knowledge of/been through similar circumstances and can offer support.

3.0 Informing others of Absence

3.1 Whilst recognising that Clergy often deal with the practical consequences of sickness by re-arranging their duties, all Stipendiary Clergy should report absence on all occasions when they are unable to fulfil their normal duties and usual workload.

3.2 On the first day of absence the cleric should telephone the Churchwardens and the Area Dean. Where they are part of a Team they should notify the Team Rector. Where they are an Assistant Curate, they should notify the Training Incumbent.

3.3 If they are unable to arrange cover for their duties, the arrangements for cover should be undertaken by the Churchwardens or the Team Rector / Vicar / Priest-in-Charge/ Training Incumbent /Area Dean. However where this process causes difficulties, the Diocese will work with individuals to lighten this load and to help make cover arrangements with them where this is helpful.

3.4 In addition the cleric is required to contact the Human Resources (HR) Team (email clergysickness@bristoldiocese.org) as soon as reasonably possible clearly stating the reason and duration of the absence, and submit medical certificates (as per section 3.6) to cover periods of absence.

3.5 For the first 7 days of sickness, any absence should be captured on a Self Certification form and sent to the HR team. This is found in Appendix 2 and is also available from the HR Team or the Diocese of Bristol Website. If the period of sickness extends for more than seven days, then on the eighth day of absence a Medical certificate (statement of fitness), must be obtained from a doctor and submitted to the HR Team for onward submission to the Church Commissioners (Clergy Payroll).

3.6 Those in training posts are also required to inform the Head of Ministry Development as well as their Training incumbent.
3.7 The HR Team will notify the Archdeacon, the Advisor for Ministerial Support and the Pastoral Management Team of all notified sickness.

3.8 In the most serious of cases, it may be that an individual will not be able to return to, or maintain their duties. For more information, please refer to Section 10.

4.0 The Role of Occupational Health

4.1 The Diocese has a professional consultancy arrangement with a qualified and experienced and local independent Occupational Health provider.

4.2 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, and senior staff.

4.3 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. For some individuals, more than one Occupational Health 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. Appendix 3 provides more details about the Occupational Health Service.

4.4 Occupational Health referrals are made by the HR Manager, following a discussion with the Archdeacon (or Training Incumbent as appropriate) and the individual concerned.

Supporting Short Term Sickness Absence

5.1 Short term absence is defined as any absence(s) lasting between one day in duration up to four weeks.

5.2 Following an absence of more than seven days all clergy (including self-supporting) should make contact with the Area / Assistant Area Dean to inform them of the nature of absence and the likely duration. They, together with the Advisor for Ministerial Support will provide on-going pastoral support and keep the Archdeacon updated on the situation in confidence.

5.3 Up to the 5th week of absence, churchwardens are encouraged to organise other licensed ministers to take services to ensure their incumbent is relieved of duties at this time. The member of clergy and the Advisor for Ministerial Support should agree frequency of contact to keep updated regarding absence and for the purpose of keeping in touch.
6.0 **Supporting Long Term Sickness Absence**

6.1 Long term absence is defined as any absence more than 28 days in duration.

6.2 Following the 5th week the Archdeacon (and/or the Area Dean) will review provision of other clergy and readers with churchwardens to ensure that the Incumbent concerned is completely relieved of duties at this time.

6.3 Following the 5th week of absence the Archdeacon will arrange a visit to the member of clergy at home. The Archdeacon may ask the Advisor for Ministerial Support to undertake this role. A written summary of the discussion should be agreed and retained. The purpose of this visit should be:

- To understand the nature of the illness and likely duration, understanding the confidential nature of medical information
- To provide pastoral care
- To agree any support that may be required, which may include access to a counselling service, retreat, spiritual direction or support from other clergy depending on the nature of the absence. Support for the family will also be considered.
- To agree if there is any support that can be provided in order to assist the individual in returning to their duties.
- To agree how the absence is to be publicly described (e.g. in communications to other clergy, colleagues, churchwardens and with the wider public of the parish and church community) maintaining confidentiality regarding personal sensitive information.
- To make decisions regarding the involvement of an independent occupational health provider to provide information to support the individual will be considered at the appropriate stage or the ability to approach the individual’s GP for a full medical report.
- To agree frequency and means of contact and communication between the individual and the Archdeacon / Advisor for Ministerial Support.

6.4 The Archdeacon will keep in regular touch with the churchwarden to support the Parish (es) during the absence of their Clergy member.

6.5 When approaching 26 weeks of sickness leave the Archdeacon and HR Manager will arrange to meet with the member of clergy. The member of clergy will be asked if they wish to be accompanied at this meeting by another colleague or Union Representative.

6.6 A written summary of the discussion will be prepared and sent in a meeting outcome letter. The purpose of the meeting should be to:

- Establish the likely prognosis
- Consider whether any progress has been made and whether a return to work is feasible now or in the near future.
- Make a referral to an independent occupational health provider; this may be a review appointment where they have already been involved.
- Clarify with the individual what the possible options are
- Consider whether ill-health retirement needs to be considered
- Consider any other support that may be required for the individual and their family (including arrangements regarding their pay, see section 10).

*The training incumbent, Archdeacon or Advisor for Ministerial Support may also be present as appropriate to the circumstances.*

6.7 Where the period of absence continues beyond this point further review meetings will be arranged.

7.0 Occupational Health and Returning to Work

7.1 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.

7.2 A referral may be made by the Archdeacon (or a member of Bishops Staff) for the individual to meet with the Occupational Health service, who will give both the individual and the Diocese professional advice. This referral will be made using an Occupational Health referral form (a copy of which is available from the HR Team).

7.3 The HR Team will provide advice and guidance upon the completion of the referral form, and once competed this form should be submitted to HR who will then make contact with Occupational Health Provider regarding arranging an appointment to meet with the absent post holder.

7.4 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. Sometimes more than one Occupational Health appointment will be made so that the Occupational Health professional can advise and help the individual, the Bishop’s Staff and Advisor for Ministerial Support, to make adjustments, track progress and increase workload gradually and so return to their full duties safely.

7.5 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 (also referred to as a Phased return, see section 8 below) 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.

7.6 Where appropriate the HR Manager, the Advisor for Ministerial Support, the Archdeacon may arrange a health and wellbeing Case Conference 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.

8.0 Guidelines for Phased Return

8.1 The term ‘phased return to work’ embraces the idea of returning to work gradually, in stages, before a post holder can complete all of their normal tasks and/or is able to work all their allotted hours. Each individual’s situation is different, so any proposed solutions need to be flexible and well planned, including regular reviews of the arrangement and an agreed date to return to their normal hours/duties.

8.2 A phased return needs to be agreed by the member to ensure that it not only works for the post holder but also for the Parish within which they work. If the particular Parish is unable to sustain the phased return, or if returning to work would be deemed detrimental to the individuals health, then the individual will be required to remain on sick leave.

8.3 An ideal phased return to work should include:

• A gradual build up towards the post holders usual hours and duties that begins with hours of work that are manageable for the individual at the current stage of their recovery. Unless there are exceptional circumstances, It is usual that the minimum amount of hours worked should not be less than half their full time hours (i.e for a full time post holder, the phased return would usually commence at not less than 20 hours per week).

• The duration of a phased return may be as little as one week, and not usually more than 4 weeks, unless the individual has a condition with long-term fatigue issues.

• Consideration should be given to the timings of work that allow for periods of rest as required, for example hours that allow an individual to avoid early morning starts, or the allowance to work shorter days to allow time for recuperation in between duties.

• Duties during the phased return should assist the post holder to be confident in their return and so may initially exclude some of the more challenging duties. An example of this may be removing the requirement to attend Parish
meetings, or deal with Funeral arrangements during the first few weeks of their return.

8.4 At the end of the 4 week agreed phased return period, a review meeting should be held to ensure all is on track.

9.0 Critical Illness

9.1 It is important that as soon as possible after diagnosis of a life threatening illness the individual contacts their appropriate senior local colleague (eg Archdeacon, Advisor for Ministerial Support, Human Resources, Training Incumbent or another member of senior staff), so that both practical and pastoral support can be put in place.

9.2 The Archdeacon will arrange to meet the individual as soon as possible, accompanied by the Advisor for Ministerial Support, who will advise HR and the Area Dean. They will ensure the individual has access to these Guidelines 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.

9.3 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.

9.4 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.

9.5 During treatment an Archdeacon/Advisor for Ministerial Support or any other nominated contact person, should arrange to be in contact at regular intervals - purely for the purposes of keeping in touch.

9.6 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.

10.0 Where an Individual is unable to return to work

10.1 In the most serious of cases, it may be that an individual will not be able to return to, or maintain their duties.
10.2 Where their own doctor/specialist and the Occupational Health advice concurs that they are unable, by reason of ill health, to return to their role the Diocese through the HR Manager, will make the appropriate applications/arrangements through the Clergy Pension Scheme.

10.3 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.

10.4 Subject to individual circumstances, a period of 3 months will initially 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. Additionally, the Church of England Pensions Board have provision in place to support Clergy who are nearing retirement through the CHARM Scheme (Church’s Housing Assistance for Retired Ministry). The Housing Services Department can be contacted on the email below;

housingservices@churchofengland.org

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

11.0 Payments during Ill-health absence

11.1 Any Stipendiary member of Clergy who is unable to perform their duties because of sickness, are required report sick leave (see 3.1 above)

11.2 Although the reporting of absence is an added burden when unwell, reporting sickness in this way will satisfy the obligation to ensure proper administration and accounting of Statutory Sick Pay.

11.3 On notification of a period of sickness absence (i.e on receipt of the email to the clergysickness email account) the individual will be asked to complete a Self Certification form which enables them to claim Statutory Sick Pay. This form can be accessed by clicking the link below;


11.4 If the absence is to be for a period longer than seven days, then individuals must consult their doctor and obtain a medical statement (see 3.6 above). For longer periods of sickness absence doctor’s consecutive notes should be sent at regular intervals according to the dates given on each note.

11.5 This statement should be sent to the HR Manager, who will arrange for it to be forwarded to the Church Commissioners (Clergy Payroll Team).
11.6 The Diocese offers an Occupational Sick Pay Scheme during periods of certificated absence. The Scheme supplements Statutory Sick Pay and other Benefit so as to maintain normal pay during defined periods of sickness absence.

11.7 Under the Occupational Sick Pay Scheme individuals may receive:

- their usual stipend payment for a maximum of 26 calendar weeks within a 12 month rolling period which will be monitored by the HR Manager.

- At the end of the 26 weeks of full stipend, a further period of three months (12 weeks) of half stipend may be agreed at the discretion of the bishop, only when the individual has been referred to the diocesan Occupational Health physician and a report/progress update and professional medical advice has been received.

- Should the period of absence extend beyond the 26 full stipend, and 12 weeks half stipend, then the individual will move to zero pay.

In addition, the diocese will continue to make pension contributions for officeholders for the first 6 months, and housing (where applicable) will continue to be provided.

11.8 Any clergy who do not qualify for SSP under government regulations or who have exhausted their period of SSP entitlement, will receive a letter informing them of this from the Clergy Payroll Team. This letter will provide guidance on how they can claim sickness benefit direct from the appropriate government department. Further information can be found at the following link:

https://www.gov.uk/employment-support-allowance/how-to-claim

12.0 Annual Leave during ill-health absence

12.1 Post holders will continue to accrue annual leave during sickness leave at the normal rate e.g. 6 weeks (pro rata for part time). There is no entitlement to accrue Bank Holiday hours during periods of sick leave.

12.2 Where the postholder has not been able to take their full leave entitlement in any given leave year (defined as 1st Jan to 31st December) due to long term sickness absence, they will be able to carry forward a maximum of 5 days’ leave (minus any leave already taken) to be taken during the next leave year. No payment will be made for any untaken leave, except where the postholder leaves the Diocese.

13.0 Professional counseling support for clergy and their families
13.1 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.

13.2 Individual members of the clergy are also able to refer themselves independently to the Diocesan Professional Counseling Service. If a member of clergy feels that they would benefit from some professional support / counselling, then they should contact the Advisor for Ministerial Support who will be able to offer a supportive ear and advice and also help the individual to identify specific professional support they may need. They can then connect the individual with an appropriate professional.

13.3 The Diocese of Bristol will pay for up to six sessions with a professional counsellor. If further sessions are required the individual should discuss this with the Advisor for Ministerial Support, and assess this need together. Where Counselling is extended beyond the first six session, it usually proceeds on a contributory basis for up to six more sessions with both the clergy client and diocese contributing to the costs. The diocese takes personal financial situations into consideration in this assessment.

For further information individuals can contact their Archdeacon, the Advisor for Ministerial Support or the HR Manager. All referrals are in confidence.

14.0 Disability

14.1 In its support of all sick clergy including their family circumstances, the Diocese will follow the spirit of the Equality Act 2010 (regardless of whether or not the individual’s circumstances falls within the legal definition of a disability which is set out in the Act).

14.2 Where a health issue 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 to ensure that appropriate reasonable adjustments are made that will enable the individual to work effectively.

14.3 The Archdeacon and Diocesan Ministry Development Team will work together with the individual to ensure the parish(es) are aware of, and have the training required, to ensure that local reasonable adjustments are in place.

14.4 Centrally, the Archdeacon, the Advisor for Ministerial Support, and the HR Manager will make the appropriate links with other departments (eg Property), 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.
14.5 In circumstances where specific equipment is required, e.g. specialist software, adaptations to property etc., the Archdeacon will provide advice on funding and resourcing in collaboration with the Head of Property and the HR Manager.

Appendix 1

Clergy Health and Wellbeing Guidelines Flowchart

1. Clergy post holder unable to perform duties due to ill health

   2. Report sickness to Human Resources (HR) using Self-certification form (Appendix 2)

   3. 7 days or less of sickness (Post holder arranges own cover)

      3.1 Self-certification form sufficient, clergyperson to resume duties once recovered

   4. More than 7 days of sickness

      4.1 Medical certificate (statement of fitness) required from GP to be submitted to HR Team (Section 3.6)

      4.2 Consideration given to whether an Occupational Health (OH) Referral is required

         - If return date is known, OH Referral not required

         - Clergy person returns to duties once recovered

         - If return date not known or medical advice sought, then OH Referral will be made

            4.2.1 OH professional meets with post holder and writes advisory report with recommendations (Section 7.4)

         - HR Team to notify Church Commissioners, Archdeacon & Pastoral Management Team (Section 3.7)

         - Advisor for Ministerial Support to make contact with post holder to offer support and advice throughout their period of absence
Appendix 2  
Self Certification Form

This form should be completed if you are off sick for periods up to 7 calendar days (including non-working days off) and must be received by your line manager within seven days of your first day of sickness.

If your sickness continues beyond the 7th calendar day you should also obtain a medical certificate from your Doctor and submit this to your line manager immediately.

**Basic Details**

<table>
<thead>
<tr>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Position:</td>
</tr>
<tr>
<td>Parish/Team:</td>
</tr>
</tbody>
</table>

**Absence Details**

I certify that I was unable to attend work due to sickness/ injury from ……/……/…… to ……/……/…… inclusive (including non-working days)

Please detail reasons for absence.

I can confirm that the total working days lost during this sickness absence episode was ___ Days

Was this absence related to a workplace accident or incident? Yes | No

If Yes, please confirm who this was raised with?

**Absence Notification**

Date of absence notification

Method of notification (i.e. phone call, email, text message)
Appendix 3

Occupational Health – Information for Post Holder

Who are IMASS?

IMASS has been appointed as the provider of Occupational Health Services for the Diocese of Bristol. Established in 1941, the vision of IMASS (Industrial, Medical and Safety Services) is to provide an integrated, holistic service that is focused on results.

IMASS recognise that while the requirements of a work role can impact on an individual's health, equally the wellbeing of an individual can impact on his or her work. The Diocese is keen to promote the health and wellbeing of postholders, and in order to support this principle, access to a professional assessment of health issues via Occupational Health is promoted. Having a clear understanding of their health is key to empowering individuals to work towards a safe and sustainable return to their role following a period of Sickness Absence.

The IMASS approach to the complex matter of managing attendance integrates several disciplines into an effective solution tailored to suit the needs of the individual;

- Guidance from the Archdeacon and the Advisor for Ministerial Support
- HR support
- Health and Wellbeing Guidelines
- Provision of information required to facilitate decisions
- Reliable data to determine the effectiveness of interventions
- Awareness and utilisation of external resources such as Access to Work (Access to Work: Overview - GOV.UK)

What happens when you are referred to an Occupational Health Practitioner?

It is understandable that you may feel apprehensive about being referred to an Occupational Health Practitioner; however this leaflet is intended to help you understand what will happen and how it can help with your health problems.

Why have I been referred?
You will usually have been asked to see the Occupational Health Practitioner because a possible health problem has been identified which may affect your ability to work.

**What is an Occupational Health Practitioner?**

They are medically qualified Doctors and Occupational Health Nurses Specialists, with specialist training in occupational medicine. They assess an individual’s fitness for work through:

- Considering the ways previous, existing or potential health problems may be affected or helped by different work demands, working practices, factors in the workplace and/or the time spent undertaking different tasks at work.
- By their understanding of the health risks associated with exposure to various hazards of the workplace.

**Is it confidential?**

Yes. No other party, outside of the Occupational Health department, is entitled to see the medical notes recorded during the consultation without your explicit written permission.

**What will they do to me?**

Once an Occupational Health referral form has been sent (sent electronically in an encrypted email), you will be contacted by IMASS direct who will arrange a suitable time and date for an appointment as soon as possible. The Doctor or Nurse will explore your health problems with you, and consider the main condition that is having an effect on your work and any other health problems, past or present, that may have a bearing on your role. Sometimes, but not always, a physical examination may be needed. This examination usually focuses on the specific health problem being experienced rather than on being a general examination. The emphasis is on your capability for work and how the work, workplace, duties or working hours might need to be adjusted, temporarily or permanently, to help you with your health problem.

**What will I be asked?**

You are able to direct how your appointment with Occupational Health will run, however the Occupational Health Practitioner will use the referral form to look at any specific issues that you have identified during the referral process.

In particular, you will be asked about how the factors listed below may be affecting the health problem or problems you are experiencing;

- Details of your specific role and what you are exposed to when doing it;
- Individual tasks/duties/responsibilities you may have at work and how you are required to undertake them;
- Patterns of working
- Relationships with colleagues;
- Specific physical, emotional or psychological demands of the work that you undertake will be considered.

**Do you need to contact my GP?**
Often the OH Practitioner will need to know your previous medical background to assist them in assessing your capability for work. As mentioned previously this is in strict medical confidence and can only be undertaken with your informed, signed consent. The OH Practitioner will ask you to sign a Consent form confirming your permission.

**How can the referral help me?**

As an example of what help can be given, the Occupational Health Practitioner may recommend to the person requesting the referral; that temporary or permanent alternative duties be conducted; The hours or days that you work adjusted; Recommend additional control measures be implemented to reduce exposure to risks at the workplace.

**How does this help the Diocese?**

The purpose of the Occupational Health assessment is to:

- Ensuring fitness for your role
- Establish More effective treatment of injuries and illness at work;
- Improve management of sickness absence;
- Enable a confidential opportunity to explore questions of under performance that may be linked to a health problem;
- Establish ways of improving resilience;
- Consider if an application for early ill health retirement is appropriate;
- Ensure the Diocese complies with current legislation.

Following the initial Occupational Health appointment, which can take around 30 - 45 minutes, review appointments of some 15 minutes may, periodically, be needed. Their purpose is to assess the steps that have been taken to help you and your employer and to explore if anything else needs to be done. The Occupational Health Practitioner will discuss any need for follow-up appointments with you.

**Further information**

Should you have any further questions about the Occupational Health Referral process, or any aspect of the management of your health and wellbeing whilst at work, please contact the Diocese of Bristol Human Resources Team on 0117 9064128.
Appendix 4  Frequently Asked Questions

Process

- Although I have been unwell for a couple of days, I will ensure that I make up any lost time. Since I have not missed any of my commitments, do I have to report my absence in this instance?

Please refer to Section 11.2, and 3.2

The Diocese asks that all Stipendiary Clergy who are unable to work due to sickness absence report this via the Clergy Sickness email account clergysickness@bristoldiocese.org

The reason for this is three fold;

1) So that the Diocese is aware of any factors that may be impacting your wellbeing and so offer support where required
2) To assist the Diocese accounting of Statutory Sick Pay.
3) To enable monitoring of trends; eg if there is a recurrent pattern of absences within certain Deanery’s, or if the data indicates that there is a particular time of year when several Clergy are absent.

- Do I have to self certificate if I am only off for one day?

As per the response to the question above, the Diocese does ask that you report all absences, albeit just one day. This can be done using the Clergy Sickness email account.

- If my Doctor has signed me off, but I feel much better and able to return prior to the GP Certificate (Fit note) end date, is there a process that I need to follow?

Where you may have recovered quicker than was expected, or you have identified some adjustments that could be made to enable you to return to work sooner, e.g. on different duties, then this should be discussed with the Archdeacon (or Training Incumbent as appropriate). The purpose of this discussion will be to establish whether your return to work could potentially exacerbate your illness or slow your recovery. In addition a risk assessment will need to be undertaken as required by the Diocese Liability Insurance. Where there is any uncertainty about whether an early return to work would be appropriate, you may be asked to return to your GP who may then provide a fit note indicating that you are “fit to work”, or “may be fit to work” with certain adjustments to your duties, or hours.

- Where do the Self Certification forms go?

On receipt of Self-Certification forms into the ClergySickness inbox, the Human Resources Team will record you absence upon the secure spreadsheet (access is restricted to members of the HR Team only, and is password protected).

In addition, a copy of the form will be passed to Clergy Payroll in order that they can then register your absence and ensure that Statutory Sick Pay is paid.

Furthermore, the Archdeacon will be notified of the absence; where a period of Self certificated absence extends into the 8th day of absence and requires a GP note, this will be
flagged to the Archdeacon and the Advisor for Ministerial Support, so that assistance can be offered as required.

The Self Certification Form (and any subsequent GP notes) will then be placed on your Blue File held at the Bishops Office.

**Occupational Health**

- *Can I do a Self referral to Occupational Health?*

The Diocese contractual arrangement with IMASS requires that all referrals to the Occasional Health team are submitted via Human Resources.

Should you feel that you could benefit from a visit to Occupational Health, but this has not yet been offered to you, please contact the Human Resources Team on 0117 9064128 who will be able to advise you on the process to be followed and assist you with a referral.

- *How many times am I allowed to see Occupational Health?*

After your first visit to the Occupational Health team, the Occupational Health practitioner will advise upon whether they feel a follow up appointment would be appropriate or necessary. In addition, should you remain unwell for a long period, then the Diocese may ask for a further Occupational Health appointment to be arranged to review your progress and consider what further support can be offered to enable you to plan for a phased return to work.

**Confidentiality**

- *I am going for some quick day surgery, and would prefer that this is not referenced on my Blue File, is there a way to report my sickness absence to the HR Team without this being registered on my file?*

All sickness certificates/ self certification forms will be placed on the Blue file, with the Copy sent to the Clergy Payroll.

- *When I report my absence to the “ClergySickness” email, who is this information shared with?*

Please see question above. In addition, where the sickness absence extends beyond a few days (usually this is beyond 8 days), the Archdeacon and the Advisor for Ministerial Support will also be made aware so that assistance can be offered as required.

- *How secure is my data; who can access the spreadsheet on which the Sickness is recorded?*

Information about your sickness dates, and duration can only be accessed by the Human Resources Team (HR Manager, HR Administrator and HR Assistant) as is held upon the locked and password protected files upon the computer.

Information from this spreadsheet may be requested by the Archdeacon or Ministry Development Team only where they are involved in support you during your absence.
Pay

- How can I find out when I am nearing the point of receiving Half Stipend?

The Human Resources Team keep a log of all sickness absence about which they have been notified. Based upon this, they will be able to calculate the number of days/weeks absence you have had in the preceding 12 months.

If you would like to find out how much absence you have had to date, please contact the HR Team on clergysickness@bristoldiocese.org

The start of that 12 month period will commence from the first day of your current period of absence i.e., if your current period of absence started on 12th January 2018, then the preceding 12 months would take you back to 13th January 2017, and we would total up any absence that you have had from 13th Jan 2017 onwards.

- I am confused about Statutory Sick Pay, can I claim it, and how long can I claim it for?

Although you are not employed, you are entitled (because you pay Class 1 National Insurance contributions) to receive Statutory Sick Pay (SSP) if you are ill. Under this Scheme, Bristol Diocese is responsible for paying Statutory Sick Pay for up to 28 weeks.

Once you have notified the Human Resources Team of your sickness absence, they will inform the Church Commissions (via Clergy Payroll) who will make arrangements for you to receive contractual Sick pay.

As stated in Section 11.7 of these Guidelines, Contractual Sick pay is paid at full stipend (inclusive or Statutory Sick Pay) for a period of 26 weeks. Should you remain unwell after this point; your sick pay will reduce to half stipend (which will again be inclusive of the remaining two weeks of SSP).

After the 23rd week of absence the Church Commissioners issue form SSP 1 to the member of Clergy which gives details of the actions needed when statutory sick pay ends after the 28th week, concerning claiming other state benefits and invalidity allowances.

- I am really worried about my pay dropping to Half Stipend, what help is available to me at this point?

After the 23rd week of absence the Church Commissioners will send you form SSP 1 which gives details of the actions needed when statutory sick pay ends after the 28th week. This will provide information concerning claiming state benefits and invalidity allowances.

In addition, grants to assist clergy in a wide variety of circumstances are available from a number of institutions, a number of which are listed below:

- Sons and Friends of the Clergy is a clergy support charity, established in 1655, which provides financial grants to Anglican clergy households in times of poverty, hardship or illness. Eligible beneficiaries include serving and retired Anglican clergy and their families, divorced and separated spouses and civil partners of eligible clergy, and widows, widowers and surviving civil partners of eligible
clergy. Support is also currently provided to Anglican ordinands training for ministry in the UK.

- **Churches' Mutual Credit Union (CMCU)** is a mutual society, a savings and loans co-operative owned and controlled by its members. Savings and Loan accounts are available to individuals who hold a recognised position within The Anglican Churches of Great Britain, The Church of Scotland, The United Reformed Church, The Methodist Church of Great Britain, The Catholic Church in England & Wales and The Catholic Church in Scotland in either a paid or voluntary capacity. This includes a wide variety of associations including lay or ordained ministers, church council members, elders, office staff and trustees of church charities including church schools. The CMCU are also able to offer accounts to household members of people who qualify and to retired ministers.

- **Henry Smith Charity** aims to bring about lasting change to people’s lives, helping them to benefit from and contribute to society.

- **English Clergy Association** provides grants to make a significantly helpful contribution to clergy (and their family’s) enjoyment of human life.

- **Money Advice Service** is a government website giving free, impartial advice on money matters including the steps to consider if facing divorce or separation.

- The **Society for the Relief of Poor Clergy** offers grants to Evangelical clergy and evangelical Accredited Lay Workers in times of bereavement, illness, removals, family support to enable young people to participate in a ‘ministry experience’ during a gap year before university, family support to enable children/young people of evangelical ministers to attend Christian camps, for their spiritual benefit and to develop leadership potential, other special needs (at the Trustees’ discretion).

Please contact the Archdeacon if you would like to apply for assistance via this route.

- **State Pension Entitlement** This website will help you to calculate your state pension entitlement at retirement.

- **Turn2us** is a charitable service helping people access money available to them through welfare, benefits, grants and other help. It gives a wealth of information.

- **Elizabeth Finn Trust** may provide grants to those facing hardship and savings of under £16,000 or help with nursing home fees.

- **The Foundation of Edward Storey** may provide help, grants and accommodation or offer a number of services to those professionally connected to the Church of England - at the discretion of their Trustees.

- **Adviceguide** is the online help from Citizens Advice Bureau and provides information on your rights covering a range of topics.

**Returning to Work?**
• **What happens if I return to work too soon, and need to take a further period of sickness absence?**

As stated in section 8.2, it is usual that a phased return will be for 4 weeks; the expectation inherent within this is that you will be ready to resume your full hours and duties at the end of this time.

If this is not possible, then a discussion will be held between you and the Archdeacon/Member of the Archdeacons Team, to consider whether a short extension to this period will be sufficient to allow you to resume full duties, or whether you may need to return to a further period of sickness absence. Advice will usually be sought from the Occupational Health Practitioner at this time to ascertain a medical perspective on which route would be most appropriate for you.

• **Can I extend my phased return as I don’t feel ready to take on the full duties, but don’t want to go back off sick?**

As per the question above, where a phased return is deployed, the expectation is that this will be for a short 4 week duration, in order to help you build up to your full duties. Where a full return is not deemed possible at the end of the 4 weeks, advice will be sought from you GP/Occupational Health about anticipated recovery times. Should the anticipated recovery time be significantly longer than the usual 4 weeks, consideration will be given to whether it may be appropriate to reduce your hours (and correspondingly the amount of stipend pay received) for a short period.

In such circumstances it is advised that the reduction in hours be limited to 2 month duration and then reviewed to establish if this reduction in hours is sustainable in the longer term.

• **Can I have a second period of phased return?**

In the majority of cases it is usual that only one period of full pay phased return is necessary per period of absence. Where ill health necessitates a further period of sick leave within 12 months of the first phased return that is related to the same health condition, then you will not usually be offered a second phased return.

However every situation will be reviewed on its own merits, and in exceptional circumstances, a discussion may be held to establish to most appropriate course of action. For further guidance upon this, please contact the Human Resources Team.