# Clergy Illness Policy - *Guidelines*

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Process Re Clergy Illness Policy

1. Clergy Illness Notification
   - Ongoing support once return to duties

2. Joint planning meeting for return to ministry
   - Refer to procedure under Constitution of Church of Ireland (§ 34 of Chapter IV)

3. Return to Ministry?
   - Yes
     - Plan regular repeat appointments if necessary
     - Maintain regular contact
   - No

4. Plan regular repeat appointments if necessary
   - Yes
     - Refer to occupational health advisor?
     - No

5. Refer to occupational health advisor?
   - Yes
     - Maintain regular contact
     - No

6. Diocesan secretary notifies Archdeacon
   - Less than 4 weeks
     - Notify archdeacon to arrange cover
   - More than 4 weeks
     - Furnish medical certificate detailing nature and likely duration of absence to diocesan secretary

7. Archdeacon or other designated person maintains regular contact with member of clergy and liaises with Central HR

8. Archdeacon notifies diocesan secretary.
   - Furnish medical certificate detailing nature and likely duration of absence

   - Furnish medical certificate detailing nature and likely duration of absence

10. Central HR
    - Notify occupational health advisor

11. No
    - Ongoing support once return to duties

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1. Introduction

A long-term period of illness can be a difficult and worrying time for a member of the clergy and his or her family. The combination of physical, psychological and emotional concerns can lead to significant stress for those experiencing an illness. The Church of Ireland is conscious of the impact of long-term illness on members of the clergy and it is also conscious of the need to ensure that its commitments to the parish and the diocese are maintained during the period of absence. The Church’s Clergy Illness Policy lays out clear, consistent and fair procedures for dealing with long-term illness.

An important objective of a long-term illness policy is to enable those who are on long-term absence due to illness to return to their duties as soon as possible. The procedures outlined in the Clergy Illness Policy not only deal with the proactive management of absence during the period of illness but also address the practical financial aspects of the absence and provides for ongoing pastoral support for a member of the clergy. The policy addresses the situation where a member of the clergy has to vacate his or her office due to incapacity in accordance with procedures as set out in the Constitution of the Church of Ireland. Finally, the policy also looks at ways of promoting the ongoing health and well-being of members of the clergy.

These guidelines explain the Clergy Illness Policy in greater detail. They are intended as a reference document to support its implementation.

2. The Long-Term Illness Policy Explained

2.1 Background

In 2015 the Church adopted the ‘Dignity in Church Life Charter’. This enables the Representative Church Body (RCB) to develop policies, regulations and rules to give effect to the Charter. The Clergy Illness Policy is one such policy. Each policy and any amendments thereto must be approved by Standing Committee prior to being implemented in the Church.

2.2 The Policy

The Clergy Illness Policy lays out clearly its purpose and aims:

‘The purpose of this policy is to promote the well-being of members of the clergy and to describe clearly the procedures of the Church of Ireland in assisting members of the clergy and parishes where a member of the clergy is unable to fulfil the duties of his or her office for a prolonged period of time due to illness’.

The Clergy Illness Policy has a number of aims:

- To promote the health and well-being of members of the clergy
- To describe clearly the procedures in assisting a member of the clergy where he or she is unable to fulfil the duties of his or her office for a prolonged period of time due to illness
- To assist those who are on long-term absence due to illness to return to their duties as soon as they are fit and able
- To support the management of permanent incapacity
- To reduce the re-occurrence of short-term and long-term illness.
In dealing with long-term illness, the Church must balance the need to support the individual member of the clergy with its responsibility to ensure that normal ministry continues for the duration of absence.

2.3 To whom does the policy apply?

This policy is available to all stipendiary members of the clergy except those employed under a Contract of Employment or Contract for Services. For the purposes of this policy, the definition of stipendiary members of the clergy shall include an archbishop or bishop. If a member of the clergy is employed under a Contract of Employment or a Contract for Services, the long-term illness procedure under that Contract shall be used.

2.4 What is Long-Term Illness?

For the purposes of this policy, long-term illness is defined as an absence from carrying out duties of office due to illness for a period of four weeks or more in a single occurrence or an absence of four weeks over a three month period. This definition is used to commence the process of monitoring the absence under this policy.

3. Roles and Responsibilities under the Long-Term Illness Policy

The specific roles associated with the implementation of the policy are as follows:

3.1 Individuals and Office Holders

The Dignity in Church Life Charter states that everyone who participates in Church life has a duty under the Constitution of the Church of Ireland to uphold the Charter together with such policies, regulations and rules as may be adopted to uphold its principles. It also states that those who hold office within the Church, including both members of the clergy and the laity have a specific responsibility to promote its provisions.

3.2 Central HR

The Central HR function has a responsibility to support the implementation of the Church’s policy, by:

- Raising awareness and developing best practice in the implementation of the policy
- Ensuring consistency in application of the policy across the Church
- Providing advice on handling instances of long-term illness
- Providing advice to those who are absent due to long-term illness
- Ensuring adequate and appropriate records are kept and that the relevant parties are kept informed as appropriate
- Supporting the development of initiatives to promote clergy health and well-being.

3.3 Archdeacon or ‘Nominated Other’

The archdeacon or other person designated by the archdeacon (‘nominated other’) plays a key role in supporting the member of clergy who is ill and in assisting him or her on their return to duty. Their responsibilities include:

- Arranging appropriate and ongoing pastoral support throughout the illness
- Arranging any cover required in the parish during the absence
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- Maintaining ongoing communications with the member of clergy who is ill regarding their prognosis and progress
- Arranging with the member of clergy to attend an occupational health specialist, if appropriate, or arranging another referral as relevant
- Arranging a return to ministry meeting and jointly preparing a plan for the return of the member of clergy to his or her office. This may include putting in place any special provisions as may be necessary in relation to duties to be undertaken and/or reasonable adjustments to support a smooth transition to the duties of office.

3.4 Diocesan Secretary

The diocesan secretary is responsible for receiving and tracking notifications regarding illness within the diocese. A member of clergy who is absent due to long-term illness shall notify the diocesan secretary, who will in turn notify the archdeacon and Central HR.

3.5 Occupational Health Advisor

An Occupational Health Advisor is a medical doctor whose role is to provide medical advice and assistance to the Church in ascertaining how best to support the member of the clergy who is absent from office due to a long-term illness and also regarding his/her rehabilitation.

3.6 Bishop

The bishop has overall responsibility for overseeing the implementation of the policy in the diocese. In the event that it appears to the bishop that a member of the clergy is unable to return to the duties of office due to permanent physical or mental incapacity, the bishop may invoke the procedure set out in section 34 of Chapter IV of the Constitution. Prior to invoking this procedure, the bishop must be satisfied that adequate provision can be made for the future maintenance of the member of the clergy.

3.7 Church Panel and Medical Panel

In the event that it appears that a member of the clergy is unable to return to the duties of his or her office due to permanent physical or mental incapacity and the bishop is satisfied that adequate provision can be made for the future maintenance of the member of the clergy as set out above, a Church Panel will be convened to ascertain if a member of the clergy is permanently incapacitated. As set out in section 34 of Chapter IV of the Constitution, the Church Panel shall consist of an honorary secretary of the General Synod, a bishop or archbishop and the Chief Officer and Secretary of the Representative Church Body. The Church Panel shall be advised by a Medical Panel of not less than three medical experts. If the Church Panel is of the opinion that a member of the clergy is unable to return to the duties of office due to permanent incapacity, the office of the member of the clergy shall be vacated and this decision will have the same effect as a resignation. This decision may be appealed by the member of the clergy.

The member of the clergy who is absent due to long-term illness, the archdeacon and other persons who have responsibility for the management of the procedure may at all times seek guidance and advice on the management of the absence from Central HR.

3.8 Confidentiality

Information in relation to a member of the clergy’s medical condition will only be
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shared with those directly involved in supporting the issue. The Church is committed to maintaining the confidentiality of medical information and those with responsibility for supporting the long-term illness policy have a duty to respect and preserve the confidentiality of the information to which they have access.

3.9 Record Keeping

The relevant medical reports will be held by the diocesan secretary and will be made available to the archdeacon or the nominated other who has responsibility for providing direct support to the member of clergy who is ill. The information will also be communicated to Central HR who will be responsible for providing ongoing support to all parties in the implementation of the Clergy Illness policy.

Centralised records will also be used to analyse and understand incidences of ill-health in the Church with a view to implementing health promotion measures. All records shall be maintained by the Church in accordance with data protection legislation and in accordance with best practice.

4. Our Procedures

4.1 Step 1: Notification

The policy requires that a member of clergy who is absent on long-term illness shall notify the diocesan secretary. The diocesan secretary will then inform the archdeacon of the absence. In most cases, the member of clergy who is absent will have been in touch with the diocesan secretary and the archdeacon throughout the period of short-term illness (i.e. up to 4 weeks). It is important, however, that there is formal notification of commencement of a period of long-term illness. Early engagement can do much to improve the outcomes from a period of long-term illness.

The notification must be accompanied by a medical certificate detailing the nature and likely duration of absence. The member of the clergy should also submit further medical certificates for each subsequent week of absence or at such intervals as may be agreed with the archdeacon or nominated other person designated to support the process.

4.2 Step 2: Occupational Health Advisor

The member of the clergy who is absent from office due to a long-term illness may be referred to an Occupational Health Advisor nominated by the Church. It is generally accepted that occupational health services are the most effective means of helping people with health problems to return to their duties. The Occupational Health Advisor will advise the Church on how best to support the member of clergy from a medical perspective.

4.3 Step 3: Ongoing support

The archdeacon or nominated other will maintain ongoing contact with the member of clergy who is ill. The member of the clergy has a duty to update the archdeacon or nominated other on any changes or developments in relation to their condition.

4.4 Step 4a: Return to ministry

This long-term illness policy outlines procedures for return to ministry where a member of the clergy has recovered from his or her illness and feels well enough to return to the
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duties of office. Prior to returning to office, the following procedures must be followed:

i. Certified fit

The member of clergy must be certified fit in order to return to his/her duties following a period of long-term illness. Depending on the circumstances of the illness, the member of the clergy may be required to visit an Occupational Health Advisor nominated by the Church or alternatively a certificate from their own medical expert may be reviewed by the Occupational Health Advisor. This is an essential step as a premature return to duties may result in a relapse or in a worsening of the original condition. The medical review should also provide advice on any provisions or special accommodations that may be taken to support a smooth transition back to duties of office.

ii. Joint planning meeting

Once the medical review is complete, the archdeacon or nominated other and the member of the clergy shall meet to prepare a plan for his or her return to office. They will consider how any special accommodation can be facilitated in the return to duties.

4.5 Step 4b: Cases of permanent incapacity

Where a member of clergy is unable to return to his or her duties due to permanent physical or mental incapacity, he or she may be required to vacate their office in accordance with the procedures set out in Section 34 Chapter IV of the Constitution. Section 34 states that where it appears to the bishop that a member of the clergy is unable to fulfil the duties of his or her office due to permanent physical or mental incapacity, the bishop may refer the matter to the Church Panel (defined above at section 3). Prior to making such a referral, the bishop must be satisfied that adequate provision can be made for the future maintenance of the member of the clergy. The Church Panel will then convene a Medical Panel (as defined above in section 3) and based on the advices of at least two members of the Medical Panel, the Church Panel is tasked with reaching the decision as to whether the member of clergy will be able or unable to return to the duties of office. If a decision is reached that a member of the clergy is able to return to the duties of office, then the procedures in relation to returning to office as set out at section 4(a) above should be followed. If a decision is made that a member of the clergy is unable to return to the duties of office, the office of the member of the clergy will be vacated which will have the same effect as if the member of the clergy had notified an intention to resign.

5. Payment of Stipend and Allowances during a Period of Long-Term Illness

The Church acknowledges that experiencing illness over a long period is a challenging time. The following procedures apply in relation to the payment of stipend and allowances during a period of long-term illness with a view to bringing clarity and consistency of application to those affected. All payments are contingent upon the member of the clergy notifying the diocesan secretary in relation to any of the entitlements outlined here.

5.1 Payment of stipend

Members of the clergy who are absent from office due to a long-term illness shall be paid their full stipend for a period of 12 months while they are unable to perform the
dUTIES OF OFFICE. Thereafter, the member of the clergy may receive payment based on Permanent Health Insurance (PHI) and/or membership of the Clergy Pensions Fund.

5.2 State or other benefit

The long-term illness policy states as follows: ‘If a member of the clergy receives or is entitled to receive any State Sickness/Disability Benefit or any payment by way of compensation for loss of earnings from a third party, or under any health insurance scheme, in respect of any period of absence from office during which stipend payments are being made, there shall be a corresponding reduction in the stipend payment’.

The member of the clergy shall be responsible for claiming relevant state or private benefit, and shall inform the RCB/Parish Treasurer (as appropriate) of amounts received.

5.3 Locomotory and Office allowances

Locomotory and Office allowances shall be paid for a period of 6 months calculated from the date of commencement of the period of illness, after which the allowances shall be reviewed and may be reduced or withdrawn.

5.4 Housing

A member of the clergy who is unable to perform the duties of his or her office due to long-term illness may continue to occupy the Glebe or other housing provided by the Church for a period of 12 months calculated from the date of commencement of the period of illness. After this period, the Church will begin reviewing the housing arrangements taking into account the needs of the member of clergy and his or her family. The Church will assist the member of the clergy in the identification of adequate alternative accommodation where requested.

6. Illness Prevention and Promoting Health and Well-Being

The health and well-being of members of the clergy is a priority for the Church of Ireland. It is important for the Church and for members of the clergy to seek to promote and improve the health of members of the clergy where possible.

Prevention is the best form of treatment and it is therefore important to monitor patterns of both long and short-term illness. Early intervention in treating short-term illness is important in avoiding and/or reducing a period of long-term illness. In addition, studies have shown that within the working population, in general, acute medical conditions (for example stroke, heart attack and cancer), stress, musculoskeletal injuries (for example neck strains and repetitive strain injuries), mental ill-health and back pain are most commonly responsible for long-term absences. Gathering information on the causes of long-term absence of members of the clergy may assist in the identification of appropriate measures to prevent the re-occurrence of certain illnesses where possible.

It is anticipated that the implementation of the policy in a consistent manner throughout the Church will also assist in identifying the best way to deal with incidences of long-term illness where they occur. This should be combined with a focus on health promotion and prioritising the physical, emotional and psychological health and well-being of members of the clergy. The demands of modern life mean that everyone must concentrate on well-being initiatives that lead to improved physical and mental health.
7. Policy Review

Progress on the implementation and effectiveness of this policy will be regularly monitored and reviewed. If you wish to comment on any aspect of the policy, its guidelines or its implementation you may contact any of those with particular responsibility for the implementation of the policy including Central HR.

8. Useful Contacts

If you have any queries regarding the implementation of this policy please contact the Central HR as follows:

Telephone: +353 (1) 4125 655
Email: hr@ireland.anglican.org

This policy will be subject to review on a regular basis.