Supporting ministers who experience ill-health: a good practice guide (part 2)

Section 1. Introduction and context to this guidance

Conference 2011 agreed a framework of guidance for supporting ministers who experience ill-health. Following on from this, Conference requested that further guidance be drawn up on these issues:

i. a framework for working with ministers who are reluctant or refuse to have contact with superintendents, district chairs or the warden of the Methodist Diaconal Order (MDO) whilst on sick leave;

ii. Guidance on approaches to working with ministers whose health is such that they cannot feasibly continue in active ministry but are reluctant to pursue alternatives such as ill-health retirement.

The guidance set out in this document starts from the basis of honouring the covenant relationship between the individual minister and the Church, and recognises the overall context of the call of God, within which all ministerial activity properly operates. It also accepts that ministerial ill-health may sometimes be a symptom of many different issues – for example, stress, work load difficulties, unhealthy circuit relationships, the onset of chronic health conditions or perhaps more profoundly a loss of congruence between call and vocation. Ministerial ill-health must therefore be approached sensitively, and with due pastoral concern. This underpins the principles set out in this guidance, which begins with a consideration of healthy working environments and practices, followed by advice on how to deal with specific issues. The advice contained in this guide should be read in conjunction with the document *Supporting ministers who experience ill-health: a good practice guide (Part 1)*, which is the primary reference document, along with the documents *Pastoral care in the Church* and *With integrity and skill*, which cover issues such as confidentiality and pastoral care issues in some depth.

The ill-health of a minister can never be considered in isolation. It can also potentially affect the wellbeing of the minister's family and of colleagues within the circuit and members of the churches. This is particularly true if the sickness continues for a long period of time. The approach taken in this framework seeks to respond to ministerial ill-health within this wider context and thus to ensure that there is adequate support for the minister, their family and the circuit in what can be a challenging time for all. The framework used assumes that long-term ministerial ill-health is addressed within the context of the annual stationing of ministers by the Conference and so proposes ongoing and dynamic conversation between the Connexion and the individual minister in order that the Church might support the minister in exercising active ministry in their current context where possible, and to explore alternative options for stationing where it is not. As with every stationing conversation the needs of the minister and their family, the needs of the circuit, and the needs of the wider Connexion all need to be considered.

Section 2. Healthy working environments

Before looking at the detailed mechanics of dealing with difficult ill-health situations, it is important to consider the wider context of health and wellbeing within the ministerial role. This guide therefore begins by providing information about what constitutes a healthy working environment (the Church's overall responsibility) and the hallmarks of a person's resilience and overall health (the individual minister's personal responsibility). This provides a helpful framework within which issues such as the breakdown of working relationships, ministerial co-operation (or non co-operation) with superintendents, the district chair or warden of the MDO may usefully be contextualised and considered.

There is a considerable body of secular research on the key elements of healthy ways of working. Whilst this is not always applicable in a Church context, this research provides a starting point to identify healthy practices which support effective ministerial service. Some key issues that affect health and the quality of life in the circuit are shown in diagram 1 (see page 2). Underlying each of these are the biblical imperatives to 'be compassionate' (1 Peter 3:8) and to 'bear one another's burdens, and so fulfil the law of Christ' (Galatians 6:2).

It is important that circuit relationships embody these principles, both amongst ministers, lay workers, members and volunteers in order to create a supportive, productive and creative environment for ministry and the furtherance of the mission of the Church. The circuit leadership team, and especially the superintendent and circuit stewards, has a key role in creating this healthy environment, and the individual minister also has their part to play.

Although provided as a tool to be used in situations of ill-health the tool (ie material in diagram 1) could also be used within the circuit stewards' vital role of care and support for indivudal ministers who are stationed to the circuit and to reflect together with others in the leadership team how the environment might be enhanced for both ministers, employees and volunteers.

Clearly, not all the features in this diagram will have the same level of importance to all individuals, but together they give a broad picture of the positive aspects which enhance and sustain ministerial service. Conversely, where one or more elements are missing this may have a negative impact on individuals and the team.

This model can provide a useful checklist against which to examine experiences of ministry and circuit life, and to help identify key issues when things are not as they should be.

Equally, it is important that individuals think about what they bring to their ministry and circuit life, both in a positive and negative sense, and the factors that shape the development of sustainable and resilient ministries. These are the issues that individuals bear personal responsibility and accountability for. Some of these qualities are set out in diagram 2 (see page 3).

The various elements of this model will have different levels of importance to individuals, depending (amongst other things) on their individual temperament and personality. Equally, some elements of support will be available from within the circuit, whilst others will best be found elsewhere. For example, in developing skills of reflection and continuous learning the minister may sometimes wish to seek support from outside the circuit, or indeed outside the local church structures. Equally, deacons will have the diaconal Rule of Life as a tool to enhance their resilience and wellbeing.

Diagram 1: some key elements of a healthy circuit environment

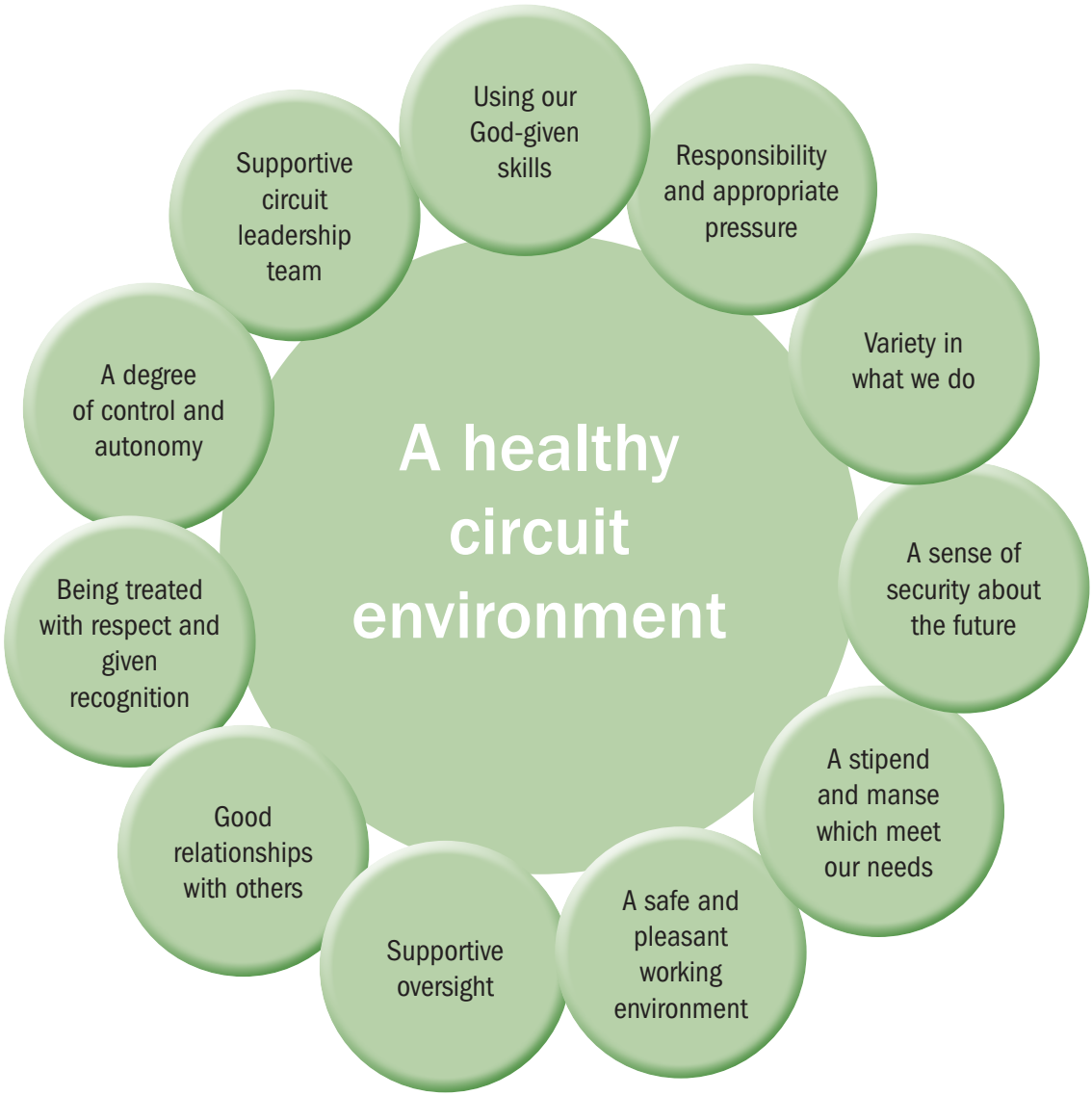


Diagram 2: personal resilience and sustainability in ministry: some key factors

Section 3. Healthy working practices

Another important factor in considering the health and wellbeing of a minister is that of the demanding ministerial workload, and how an individual minister is able to respond to this. ministers have significant personal autonomy in their work, which creates its own advantages and stresses. These are now considered.

For a minister, 'work' (for want of a better term) is not something that exists in isolation from the rest of the individual's life. Rather it grows out of the person's call to be a follower of Christ and to be an ordained minister. This ministry is then expressed within the context of being in Full Connexion and the Covenant Relationship, and is made manifest in a particular station or place of service. In diagram 3 (on page 4) the minister's 'work' is therefore expressed in the inner most circle, but is a constituent part of a much larger framework of vocation, calling and discipleship, and God's involvement in the world.

There are a range of ways of thinking about ministerial work. As a starting point, 'work' is defined as "An activity involving mental or physical effort done in order to achieve a purpose or result". However, this definition does not capture the sense of calling or vocation that is at the hear of ministerial activity, and which has been defined as "A calling from God to some particular living out of the believer's baptismal commitment. This calling is to a way of life rather than a particular job" (Source: Merriam Webster Dictionary).

Diagram 3: a context within which ministerial work and activity is located

What are the implications of this?

Using the framework provided in diagram 3 on page 4, it could be argued that a minister's 'work' is that which is contained in the inner most circle. It consists of the acts and tasks that an individual carries out to fulfill the requirements of being in Full Connexion and within a particular station within the Connexion, taking account of the minister's personality, gifts and sense of vocation and the needs of the Church, set within the context of the other circles in the diagram.

This framework gives the acts and tasks of ministry a context and significance not always present in secular employment. They are informed by a theological understanding of God's revelation and activity in the world, and the individual minister's response to this, to 'follow me' both as a disciple and a person with a vocation to serve the Church in a representative way.

One of the strengths of this approach to defining ministerial work is that it powerfully shows the context within which the day to day activities of being a minister take place. Work and ministry therefore become not solely 'what I do', but 'who I am', giving a holistic or 'whole life' approach which can be immensely fulfilling.

That said, this approach has some negative connotations of which we need to be aware. The wonderful sense of integration of action and purpose can become a place where there are no boundaries, and the minister is never able to switch off from 'work'. This can lead to a feeling of being always on duty, without sufficient space for family or self. The work which was initially so enriching to the minister becomes a constant treadmill without rest or refreshment.

Some of these issues are shared by other professions and those who are self-employed and/or work from home. It is important to note that the Scriptures speak of a Sabbath and

of God resting and encourage the observance of a Sabbath as a reminder, among other things, that it doesn't all depend on us as individuals.

The Conference stations ministers to circuits and expects them to work together with colleagues, lay and ordained, within their ministry. Special provision is made for those who are stationed to single minister circuits. Staff meetings and leadership teams can provide opportunities for supporting colleagues in reflecting on healthy working patterns which are appropriate within a particular context, recognising the impact on others. Our own patterns of work impact on others within the team and it is important that working patterns and holidays are negotiated within these teams. ministers, circuit stewards, lay employees, church members and other office holders all share in the mission and ministry of the circuit.

Some issues to think about

In light of these considerations, it might be useful to consider the following:

- Is praying on one's own for a member of the congregation who is ill defined as 'work', or something that the minister does as a fellow disciple? Where do the boundaries lie?
- If church members who have demanding full-time jobs give up two evenings a week to run a youth club, should the minister also 'volunteer' beyond the expectations of their circuit role? What would be defined as ministerial 'work' in this example?
- In secular employment people who hold down responsible jobs will often think about their work at the weekend and in the evening. They don't consider they are at work. Where would the boundary sit for a minister who is working from the manse for much of the time, and in an idle moment turns a thorny problem over in her mind?

These issues help to shed light on the particular stresses and strains of the ministerial role, which in some ways is unique, but in others shares problems with a range of secular occupations.

Some practical suggestions

The interface between the minister's personal life and their ministerial work will be a matter for individual ministers to work out in prayerful reflection, in conversation with family and friends, lay and ordained colleagues and stewards in the circuit and in other supportive relationships such as spiritual direction or supervision as appropriate, hopefully in a healthy and sustainable way. However, as noted above, it is always sensible to put some limits around 'work' or being on duty so that family, leisure and 'off duty' time is protected and prioritised, as far as is possible. Here are some tips to help with this:

- Install a personal telephone line in the manse with an answering machine, and route all District, circuit and church related calls through your 'business' or 'church' number. When on your day off, eating meals or having important family and friends time, make sure the answering machine is on and that the caller is able to leave messages. If you are waiting to take a call that you genuinely cannot avoid on your day off screen all calls so that you only pick up the one that relates to the urgent issue.
- Update the greeting on your 'church' line answering machine so that callers know when you are next working, and you thus manage their expectations of contact and support. If possible give an alternative number in case of emergencies.
- Ensure that the number for your personal line is only disclosed to those you want to have it, and that they are aware that the number should not be given out to anyone without your permission. Again, having an answering machine is a good idea so that you can screen calls before deciding whether to pick up – just in case a rogue work call comes through on this line!
- Have separate mobile telephones for personal and business matters in order to keep boundaries clear and ensure colleagues can easily cover if you have to take time off. Make good use of voicemail and ensure that your greeting is up to date so that people know when you are available.
- Make sure that you have separate home and 'business' email addresses and make use of the 'out of office' facility to redirect people where appropriate. If you simply use one email address you will be tempted to deal with business emails on your day off when you are catching up with personal correspondence. Such an arrangement with separate personal and "business" email addresses and phone lines when you are healthy makes it easier should you become ill for the answer machine and out of office assistant to be used to divert calls appropriately and emails and for a work mobile to be given to someone else.
- Set clear limits to the working day so that you have time for rest and refreshment, and pace yourself. Inevitably these will blur from time to time, so make sure that you protect personal rest and recreation time whenever you can. Consider how you might

apply the model shown in diagram 4 (page 6) to your own life.

- Ensure, where possible, that there are defined areas of the manse that are set aside for your ministerial activities. This will help you to protect and define your home life.
- If you have caring responsibilities (for example, child care or elder care), think carefully about how you will manage this and with whom it should be communicated, in order to avoid misunderstanding and to secure the support you need.
- Consider what answer to give to casual callers at those times when you are off duty.
- If you find it difficult to protect time for self and for family, bear in mind the Scriptures that remind us of the need for sabbath rest, and the injunction

Diagram 4: key elements of wellbeing

Be active

- Seek out opportunities for physical activity in your day to day routine: you don't need expensive gym membership to do this
- Eat well - healthy eating supports physical activity
- Pace yourself - take breaks in the working day, and regular holidays as provided in CPD

Take notice

- Take regular breaks: balance your work and home life
- Vary your daily routine
- Be aware/mindful of the world around you: take opportunities to do this each day

Give/volunteer

- Seek out opportunities to work with and serve others, outside the ministerial context
- Look outwards, as well as inwards
- Create connections with others in ways that are positive and nurturing

Connect with others

- Develop a supportive network of friends and family, and invest in maintaining this
- Nurture your relationship with God - the bedrock and wellspring of our lives
- Take up opportunities for social interaction in and outside work in ways that are energising rather than draining

Keep learning

- Develop and use new skills - both within and outside work
- Pursue new interests
- Embrace change positively: seek learning opportunities, and where you are struggling make sure that you identify people who can support you in times of difficulty
- CPD suggests that ministers cultivate hobbies and other outside interests

to love our neighbour as we love ourselves. It can sometimes be our lack of availability that enables others to discover their own calling and gifts.

Section 4. Protecting and enhancing our wellbeing

In addition to the practical suggestions set out above, there are a number of more general ways that you can enhance your wellbeing, as shown in diagram 4 (page 6). You might want to think about how you can incorporate them into your life in practical ways which fit in with your daily routine.

Notwithstanding the difficult of defining 'work' for a minister, in terms of active working hours, it is also important to be aware of the provisions of the working time regulations. In broad terms, these provide for the following:

- A maximum of 48 hours per week working time, averaged over a 17-week 'reference' period
- 11 consecutive hours rest in each 24-hour period
- 24 hours rest in each 7-day period
- 20 minutes rest break after 6 continuous hours

These provisions were introduced as part of health and safety legislation and are designed to ensure health and wellbeing both for the individual and for those who are around them. They should be read in conjunction with the holiday provisions contained in CPD.

Be aware of the warning signs and take preventative action

Often our bodies give us clues when we are under stress or pressure, or have lost the balance and joy in our lives. Diagram 5 (below) offers some signs to watch out for.

Section 5. When things go wrong or relationships break down

The frameworks in diagrams 1 and 2 above show us what a healthy circuit and resilient minister might look like in overall terms. Clearly, not all of the elements described will always be present, or important. However, the models provide useful insights into understanding of some of the factors to consider when relationships break down, for example when a minister on sick leave refuses to have contact with their superintendent or district chair, or in the case of a deacon, the warden of the MDO. This situation is now considered.

The importance of communication

Meaningful and appropriate communication is always at the centre of healthy circuit relationships. In circumstances where a minister is away from work on sick leave, and refuses contact with the superintendent or chair or warden, it is essential to try to identify what is leading the minister to behave in this way. Here are some possible reasons, together with some case studies:

a) **The medical condition itself** – some mental-health conditions such as depression tend to lead to withdrawal from social contact, and may include symptoms such as general lethargy, loss of confidence in social situations, and tiredness. In cases such as this the minister will need help, including access to appropriate treatment, and it is important that the superintendent finds out what treatment and support the minister is receiving, and the likely timescale and prognosis. This may be achieved by direct contact with the minister, but in some situations close friends or family will be very involved and will be able to offer information of this nature, taking account of appropriate confidentiality boundaries. Once

Diagram 5: some typical signs of stress

Physical symtoms – might include:	Emotional symptoms – you are likely to:	Mental symptoms – you may:	Spiritual symptoms – you may experience:
tiredness *poor sleep* *changes in eating or drinking habits* *indigestion and nausea* *headaches* *aching muscles* *palpitations* *sexual problems* *frequent infections*	*get irritable or angry* *be anxious* *feel numb* *avoid people* *be hypersensitive* *feel drained and listless*	*be more indecisive* *find it hard to concentrate* *suffer loss of memory* *feel inadequate* *have low self esteem*	*neglect of calling* *loss of joy in service* *neglect of the means of grace, including prayer and reflection on the Scriptures*

clarity has been established about the nature of the treatment being offered, this will lead to the development of a strategy for retaining contact with the minister, perhaps via the help of a third party such as the spouse or other family member.

Case study 1

A circuit steward contacted the district chair expressing concern about his superintendent who, he said, had lost his temper at a recent meeting, been extremely verbally aggressive, dismissed several items on the agenda as being 'not worth the paper they're written on' and stormed off at the end leaving a group of shocked and upset people behind him. The circuit steward was initially unaware that the chair had received the same information from three other sources and was in the process of arranging to meet the superintendent. The chair enquired about any previous issues or possible warning signs and was told that 'he said a few weeks ago that he was depressed by [a local situation] but that's nothing new'.

When the chair met with the superintendent, he was quiet and seemed quite withdrawn. His wife was at work, he said he felt OK but admitted to having lost energy, to be finding life quite a struggle at present, though he wasn't sure why as the stresses were no different. The chair was aware of many of the family stresses there were, but not until the chair was leaving did the superintendent mention a double funeral that he'd taken three weeks before for a non-church couple who were of similar age to himself and his wife, and which when added to his personal circumstances clearly had affected him badly.

The chair thought that the superintendent might be showing the early signs of illness, got the superintendent's consent to phone the superintendent's wife that evening, and subsequently put the wheels in motion for him to see his GP, be referred to the ministerial counselling service, and arrange some time off. The chair also ensured cover for his responsibliities, and with consent, enlisted the circuit steward's help in calming the troubled people following the meeting. In time the incident was forgotten and the superintendent continued to have the confidence of the circuit.

b) **The effects of medication or other treatment** – sometimes a side effect of medication or medical treatment (such as chemotherapy) can lead to the minister wishing to withdraw socially, either because they are lacking in energy, the physical effects of treatment, or their mood has been adversely affected by the treatment regime. In such cases the suggested approach is as described above, involving the minister themselves, close family and friends as appropriate, leading to a strategy for keeping in touch with the minister in a way which honours their wishes, is safe for them and ensures that the needs of the circuit are met.

Case study 2

C was having treatment for cancer, and had requested no phone calls or visitors. The superintendent while wanting to respect this was anxious about pastoral care for C and his family, and worried that in the shock of diagnosis and entry into an extended treatment regime, they had overlooked this aspect of their needs.

In the ministerial staff meeting he raised this concern, and a colleague observed that she knew a member of the chaplaincy team at the treating hospital. By agreement, this minister contacted the chaplain to alert her to the presence of C in the oncology unit, established that she visited the unit most days of the week, and had met C. The minister shared the circuit staff concern about pastoral care alongside the request of 'no visitors', and enlisted the support of the chaplain in bridging the gap that appeared to exist between minister and the circuit.

c) **A breakdown in key relationships within the circuit or district, or with the Diaconal Order** – sometimes critical relationships between the minister and certain people in the circuit breakdown, often for a variety of factors such as differences of opinion or outlook/attitude, personality clashes, alleged bullying or harassment, or clashes in styles/understanding of ministry. This may result in the minister not wishing, or refusing to have contact with one or more individuals. These are often the most challenging situations to deal with, and call for sensitivity by all parties.

Case study 3

N (a single person) was absent with a diagnosis of anxiety and reported not to be in the manse. With no response to phone calls, the superintendent sent a text expressing concern and seeking to make contact. With no reply in a week, she sent a second text suggesting that a family member might make contact, and had an angry phone call from N's friend accusing harassment and that the illness was all the Church's fault as N was the victim of abuse.

(continued…)

(…continued)

Eventually it transpired that N had been receiving 'silent phone calls' and a number of instances where the doorbell had been rung late at night (with the caller running away). Six months previously N asked the circuit stewards for a review of security at the manse, which had not received any serious response, nor had the circuit stewards registered that the request was on the advice of the police to whom he had reported some initial incidents (they had been told and dismissed it as 'kids messing about'). For reasons that were never clear, N did not make any further reports to the police or raise the matter again with the circuit stewards, but the calls had continued intermittently.

N refused to meet the superintendent, but agreed to meet the chair. He accepted counselling, and soon after requested a curtailment. With treatment and being removed from the situation, his health improved, and he was stationed without further problems, though manse location and security continued to be of heightened importance for him.

In cases of this nature it is important to ensure as a starting point that the minister is receiving appropriate pastoral support. Where relationships are difficult within the circuit it may be sensible to provide pastoral support from outside this environment, for example from a supernumerary minister in an adjoining circuit. Normally the superintendent would have a key role in moving communication forward where there are difficulties, but equally, the district chair may have a facilitative role. For deacons, the pastoral care coordinator can have an important role to play here.

Section 6. The role of the superintendent in dealing with ministerial ill-health

Sometimes the relationship difficulty is between the minister and their superintendent, resulting in the minister refusing to have contact with that person. Although it is often tempting to invite a third person into situations of this nature, it is important to state at this point that the position of the superintendent should be honoured within the agreed structures of the Church. Indeed the report to the Conference in 2005 *What is a superintendent?* set out their oversight role clearly:

> *"The circuit requires oversight in the broadest sense of that term, and in particular (but not exclusively), through theologically informed governance, theologically informed management and theologically informed leadership"*

This is further echoed in Standing Order 520 (2):

> *"It is the duty of the superintendent appointed to each circuit to enable the relevant courts, officers and ministers to fulfill their specific responsibilities under Standing Orders and to ensure that they do so."*

At this point it is useful to note that, in terms of roles and responsibilities, the superintendent has a responsibility for the minister within the context of their oversight of the circuit, whereas the district chair has a wider responsibility for the minister and the circuit within the connexional context, (and for deacons, the warden has a wider responsibility for the Diaconal Order), for example in matters of stationing. These distinctions provide complementary oversight and support of the individual minister.

It is also important to understand that absence because of ill-health may be for a variety of reasons, and may mask other underlying issues. This is covered in more detail in *A good practice guide (part 1)* (see section 3). However, in summary, it is useful to consider issues such as family difficulties, substance abuse problems, bullying or harassment, or more fundamentally, whether the individual is facing a period of intense crisis or personal change, perhaps seeking to understand afresh their call and what this means for their service to the Church. These factors suggest that superintendents approach matters of ministerial ill-health sensitively, pastorally and prayerfully, seeking appropriate advice and support where necessary. Due regard should be given to the need for confidentiality and appropriate boundaries in these matters, taking account of the provisions set out in documents such as *With integrity and skill*.

Section 5 paragraph 3 of *A good practice guide (part 1)* recognises that ministers have regular contact with their superintendent as a normal feature of circuit life. Conversations about ill-health should therefore be set within this context as a starting point, and a minister should feel free to access support at any point. Therefore, the minister who is unwell must initially give their fit note to the superintendent. This is because the fit note may contain information which the superintendent needs to be aware of (for example, a diagnosis of the condition, which impacts on any return to work strategy, or recommendations from the medical practitioner for a phased return to work). The superintendent must be aware that any health information contained on the fit note is confidential and needs to handle it sensitively. The superintendent will then need to forward the fit note to the Ministerial Benefits Office.

In this context it must be said that it is not acceptable for a minister to refuse to have contact with their superintendent (and in the case of deacons with the warden). Equally, it is essential that the superintendent supports the minister and handles matters in an appropriate way, with due regard to boundaries and confidentiality. If the superintendent does

not feel that s/he has the skills to do this they should themselves seek advice and support. It is recognised that tensions may occur in any relationship, and need to be handled sensitively by all parties. Appropriate contact between the superintendent and minister may be maintained and indeed enhanced in a variety of ways when a minister is absent on sick leave (or indeed when working), including the following:

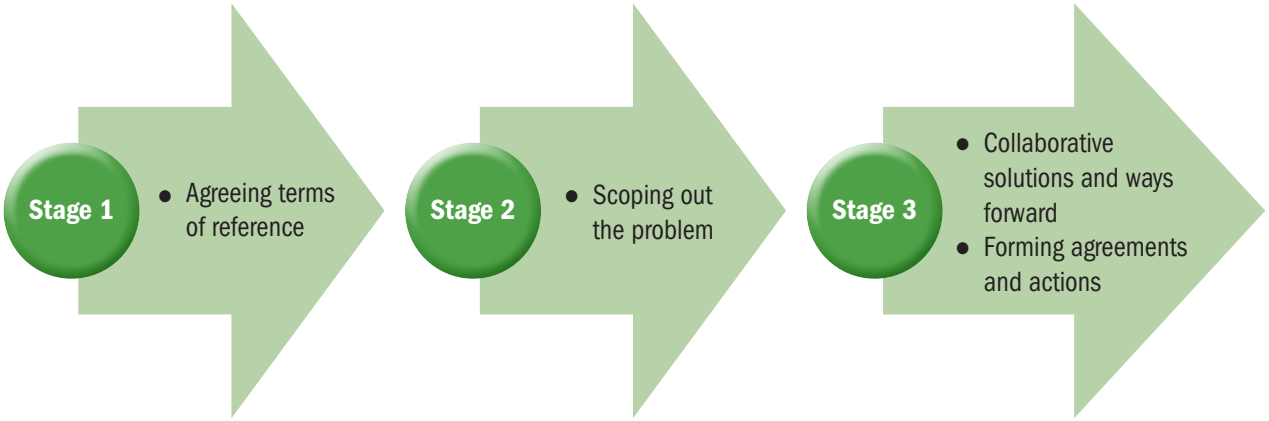
- allowing the minister to have a supporter present at meetings with the superintendent when issues of difficulty or conflict are being discussed;
- By agreement, including a supportive and sensitive circuit steward in the conversation
- By the superintendent bringing along a person who can act as a helpful outside presence for the meeting
- By holding a meeting on neutral territory, for example not in the home of either the minister or superintendent, but elsewhere
- By agreeing protocols for contact between the minister and superintendent, for example agreements on use of communication channels such as emails, telephone, text messages or faxes, timing and extent of communications, and topics which will be covered. Such measures often help to restore trust and confidence over a period of time.
- By either the minister or superintendent (or both) having access to an independent person who can help them to reflect on and think through their issues and concerns, and appropriate ways of behaving, such as a mentor, spiritual director or coach
- In circumstances where relationships have become particularly strained, the appropriate involvement of the district chair/warden to bring the two parties together in a constructive way, or if necessary a professional mediator.
- In some particularly strained situations, by the superintendent delegating responsibility for an important conversation to someone else, who will report back to the superintendent after it had taken place. This would not be usual but may sometimes be appropriate.

Where relationships have broken down, it is often useful to pursue a structured process of rebuilding these, and diagram 6 (below) provides a possible framework to take this forward.

Sometimes a process of this nature can usefully be facilitated by an independent person, particularly where it is necessary to rebuild trust and rapport. However, in all situations, it is important that the outcome of any such process includes a set of written agreements about key issues, which may include the following:

- the nature, frequency and scope of contact that the minister will have with the superintendent and others in the circuit;
- where appropriate, the steps that will be taken to support the minister in returning to work;
- the nature of any phased return to work, actions which the minister and superintendent commit to taking, along with timescales (see *A good practice guide (part 1)* for more information about how to set up a phased return to work process);
- external actions and support that may be helpful, such as access to counselling, occupational health advice, supervision, coaching or spiritual direction;

Diagram 6: a framework for collaborative problem solving and rebuilding relationships



- the provision of pastoral and any other support that might be required;
- arrangements for reviewing the freshly established relationships, which may be fragile in the early days and need regular attention and support.

Ill health of the superintendent

The guidance contained in earlier sections focuses on the relationship between a minister and their superintendent. It is useful to now consider the position when the superintendent is the person who is ill. In these situations the individual carrying out the discussions and actions referred to above would be the district chair, who would work pastorally and sensitively with the superintendent. In such a situation it is possible that, for whatever reason, the relationship between the superintendent and district chair is problematic. If this should be the case, the district chair is able to bring in a colleague district chair to assist them in working with the superintendent and to facilitate a positive moving forward in the relationship.

In summary, it is an unfortunate fact of Church life that sometimes relationships break down. However, the suggestions described above, together with the provisions of CPD, provide a set of tools for the supportive rebuilding of relationships within the context of 'watching over one another in love' (1 Peter 3:8).

Section 7. Dealing with situations where a minister's health is such that they cannot feasibly continue in active ministry, but are reluctant to pursue alternatives

Occasionally situations arise where a minister is unable to continue in active ministry due to their deteriorating health, particularly where it is not practical or appropriate to make any reasonable adjustments to their work as provided under the Equality Act 2010. However, they may hide or mask the seriousness of their condition as they do not wish to sit down. There may be a number of reasons why this takes place, for example:

- the minister's sense of the call of God on their life, giving them an expectation and wish to continue in active ministry, even where this causes struggle and stress for them;
- a reluctance on the part of the minister to accept that due to ill-health their ministry must now fundamentally change, along with their sense of themselves and their ministerial identity;
- practical considerations, such as perceived inability to live on an ill-health retirement pension, especially where they are the sole breadwinner, and issues about access to state benefits;
- concerns about housing provision if they retire;
- continuing family costs, which require a full income, such as dependent children or the cost of elder care;
- impact of a move on their family, such as proximity to schools or relatives living near by.

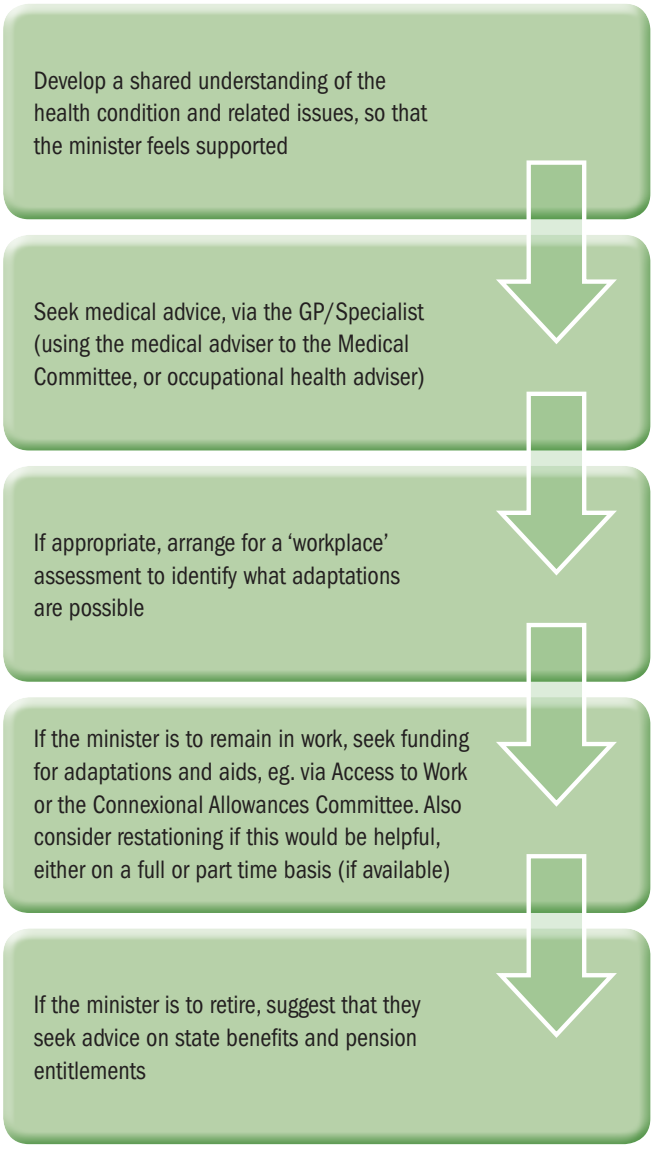
These situations are often very difficult and must be sensitively handled by the district chair (in consultation with the warden in the case of deacons) and other responsible persons. Whilst every situation must be looked at individually, it must be stated that if there is a perception that a minister is unable to cope with or continue in ministry due to ill-health this must be raised with the individual. Failure to do so could put either the minister or those they come into contact with in danger, particularly if the medical condition is a serious one. The Church has a duty of care to all parties in such situations.

When considering ways forward for the individual minister, it is often important to distinguish between a person continuing in their current station or in active ministry elsewhere. This latter option could be on either a full or part-time basis, subject to the needs of the individual and the circuit or other receiving body. That said, it is important to note that there is no automatic right for a minister to continue on a part-time basis in their current station.

When dealing with individual situations it is important not to jump to conclusions about the likely outcome of any discussions. Whilst the circuit may have concern about the sustainability of a person's ministry, it is imperative that they are engaged with in a sensitive and meaningful way, without preconditions or expectations. Diagram 7 over page provides details of some issues which may be considered in such discussions, and a framework for doing so.

Diagram 7 – a framework for discussions in cases of deteriorating health

Please also see the document *Guidance on supporting ministers with disabilities*.



Section 8. A framework for supporting ministers who are absent on long-term sick leave

Context

Ministers who are taking long-term sick leave (defined in *A good practice guide (part 1))* as "a continuous absence in excess of one calendar month" sometimes have particular support requirements, thought the exact nature of their medical condition will often determine what these are on an individual basis. This section provides a framework within which support and appropriate action should be taken by superintendents and district chairs/the warden of the Diaconal Order.

Guiding principles

The document *Supporting ministers who experience ill-health - a good practice guidance (part 1)* agreed by the Conference in 2011 provides an overall context for dealing with issues of ministerial ill-health. This additional guidance is not designed to supplant any of the provisions in Part 1, but rather deals specifically and in more detail with the issues raised when a minister is on long-term absence. The identification of appropriate pastoral and spiritual support for both the minister and their family is essential in the case of long-term sickness and the superintendent or district chair should seek to ensure that such support is offered.

Standing Order 365 states:

> *If at any time ... a circuit minister, circuit deacon or probationer has by reason of illness or injury been unable for a total of 26 weeks during the preceding 24 months to discharge the responsibilities of his or her appointment any circuit involved shall on application be reimbursed out of the Methodist Church Fund for all sums (less the credit for Social Security benefits and statutory sickness pay) paid by the circuit to that person under Standing Order 801(4) in respect of any continued or further periods of incapacity during the next 12 months*

Therefore, responsibility for funding the stipend of a minister passes to the Methodist Church Fund after 26 weeks of continuous absence. During the first 26 weeks of absence the individual circuit is responsible for payment of stipend, and responsibility for provision of support to the minister rests primarily with the circuit (supplemented where appropriate by the district chair and warden of the Methodist Diaconal Order). However, once the 26 week watershed is passed, the arrangements for support and funding may shift from the circuit to more central provision, as agreed on a case by case basis.

Strategies for supporting ministers who are taking long-term absence

In some situations the reason for long-term absence is clear and reasonably time bound. For example, a minister recovering from major surgery is likely to receive relatively clear medical advice about when they are likely to return to ministerial duties. This may also be the case where the minister is recovering from treatment such as chemotherapy, but will not always be so. Indeed, in some situations, such as where a minister is absent due to significant mental-health issues, or a physical condition which has not resolved within expected timescales, the course of recovery can be

unpredictable and much slower than expected. However, in all situations the procedure set out below should be adopted, appropriately modified to suit the individual needs of the minister experiencing ill-health.

Step One – ***three month review***

It is important that ministerial absence is kept under review as provided within the *Good practice guide (part 1)*. This ensures that appropriate support is provided to the minister who is absent from the point when it is known that they are experiencing ill-health. Sometimes people within the circuit or the Diaconal Order will not always know when a minister becomes ill or develops a debilitating condition. This is because not all conditions (at least at their outset) require a person to take time away from ministerial duties and that the occasions when ministers work alone mean that some conditions can be hidden. However, this does not mean that the minister is in health, and for the purpose of this guide an individual is considered to be unwell when the conditions that they have prevent them from carrying out some or all of their ministerial duties. This means that although superintendents must be alert to sickness absence, they will also need to consider whether a minister who continues to work, with or without a fit note, has specific support needs that can or should be addressed under the scope of this guidance.

Where a minister has been absent for a continuous period of three months (or where they have a condition that is debilitating or impacting on their ministry, even if they continue to work) the superintendent should exercise appropriate pastoral oversight. This should take place by means of a conversation with the minister in which the superintendent seeks to understand the nature of their condition and how it is impacting on the minister's life and ministry. The implications for the next few weeks and months of ministry should be considered, and the superintendent should offer oversight in order to help the minister understand what their needs are in the context of circuit ministry. In this conversation it will be important to discuss the minister's current health, its impact or perceived impact on their ministry, and the likely timescales for recovery (if known). Reference should also be made to the fit notes which sometimes provide a diagnosis and additional information. Any existing medical evidence should discussed, for example a letter from a medical practitioner responsible for the minister's treatment, and the minister's own perception of their condition. If necessary, the district chair should be alerted (who in turn will contact the warden of the Methodist Diaconal Order), for example where specific support is required or where concerns exist about how the minister is coping. Having considered all the above the superintendent will ensure the minister and their family is appropriately supported and that the work of the circuit continues to be covered. The superintendent will agree arrangements to support the minister as a result of this conversation. This may cover (as appropriate), arrangements for pastoral support, ways of keeping in touch with the life of the circuit (if this would aid the minister's recovery) and any other actions deemed necessary.

Step Two – ***six month review***

If the medical advice indicates the minister is likely to be off for some considerable time, not only will connexional funding become available at 26 weeks, but in addition it will then be possible to access other connexional support. At this point, if the minister remains absent or is continuing to work in a limited way , with or without a fit note, the prime responsibility for supporting the minister moves from the superintendent to the district chair, not least because the Connexion has a greater role to play, rather than just the circuit. That said, any support provided by the circuit and superintendent may continue at this point, if appropriate.

At 26 weeks, if the minister remains absent, the Connexion becomes responsible for providing the stipend, and the circuit retains responsibility for providing the manse. The minister remains stationed in their circuit, but the connexional payment of the stipend allows the circuit to fund cover for the minister, if required.

In some cases there will by this stage be a much clearer idea about when the minister will be able to return to work. This will allow the circuit to plan for this with the minister, and the guidance provided in the *Good practice guide (part 1)* may be useful, for example in developing a supportive return to work strategy on a phased basis. However, in some situations there will be no clarity about if or when the minister will be able to return to work, and for a range of reasons it may not be appropriate for the minister to apply for ill-health retirement (not least if the medical prognosis is that there will eventually be a recovery).

In circumstances where there is at this point no clarity about if or when a minister will be able to return to work, it is also essential that a stationing conversation takes place between the circuit and district chair. This conversation will not focus on the minister and their medical condition (indeed, the minister will not be present), but focuses on the needs of the circuit and how they might best be met. These issues are independent of the minister and their health.

In tandem with this, the district chair will have a separate conversation with the minister about their health. It will be essential to review the medical and other information previously considered at the three month review, in light of any changes to the medical condition or health of the minister during the intervening three months. At this stage

it is a requirement that independent medical information is sought, and the district chair is responsible for arranging this in consultation with appropriate connexional officers. The medical advice sought may be in the form of a medical report based upon information from the minister's general practitioner and/or any other medical practitioner treating them (obtained via the Medical Adviser to the Medical Committee), or an occupational health assessment. When obtaining medical advice it is essential that consent is given by the minister to enable this information to be shared with appropriate individuals within the circuit, district, Diaconal Order and Connexional Team respecting issues of confidentiality.

Following discussion of the medical evidence, the minister's own experience and understanding of their condition and their future wishes, the district chair/warden will consider this information, along with the outcomes of the stationing conversation held with the circuit. The chair/MDO warden will consider whether the needs of the circuit and minister are compatible. If all are agreed that they are, the minister will remain in the circuit, where they make their recovery and on a phased basis resume ministry. If there is not compatibility the chair/warden will have a discussion with the minister about this, and a likely outcome will be that the minister will need to move on to another appointment. It will be important for the chair/warden to have a sensitive conversation with the minister about this, including a consideration of what kind of ministry the minister believes they will be able to exercise, both in light of their sense of calling and the medical information available. If agreement is not reached between the minister and the chair/warden, the chair will ask a neighbouring district chair to gather together a small panel to meet with the minister in order to review the situation, in a process which parallels as closely as possible the curtailment process set out in SO544 (6-11). This panel will then make its recommendation to the Stationing Committee, and inform the district chair and where appropriate the warden who shall inform the circuit and the presbyter/deacon. Representation may be made to the Stationing Committee if either the circuit or the minister are dissatisfied with the recommendation but there will be no other right of appeal.

The options available as a result of the discussion between the minister and district chair/warden of the MDO are:

- the minister and district chair/warden explore part-time working or restricted duty options (if available);
- the minister and district chair/warden explore full-time working, possibly with restricted duties (if available);
- the minister enters stationing in the normal way;
- where there is the possibility that the minister will be fit enough to return to ministerial duties within a period of time, and is therefore likely to make a recovery, the minister is provided with a recuperative year during which they will have the opportunity to recover their health (This is considered further below.);
- the minister applies for ill-health retirement.

Features of the recuperative year

During this period of time (which might be less than a year, depending on the point reached in the stationing process when the recuperative year begins) the minister would be notionally stationed at Methodist Church House under the oversight of the Secretary of the Conference and would be without appointment at the Connexion's expense. The housing and stipend will be paid by the Connexion. It may be that the minister will be required to relinquish the manse they occupied whilst in the circuit, especially if another minister is stationed to the appointment, and the Connexion will provide if necessary the minister and their family with accommodation appropriate to their needs during this period of time.

In return for this the minister agrees in writing to follow a detailed support plan (see appendix 1 for an example). This will set out the measures the minister will take to nurture their health, the support provided, by way of pastoral support, mentoring, spiritual direction, counselling etc, any other actions that the Connexion believes will aid the minister in their recovery or are recommended by medical professionals. The Connexion will review the minister's progress on a quarterly basis during the recuperative year by means of a named individual who will meet regularly with the minister to carry out on-going discernment of their development, including how best they may serve the Church in the future. The minister's existing district chair or the warden will work with the minister and connexional representatives on this, but if relationships with the chair/warden of the MDO have broken down another district chair may be appointed for this purpose. The arrangements for the minister during this period will be overseen by the Secretary of the Conference or their nominated representative.

During the recuperative year much of the support which had been provided during the first 26 weeks of absence will continue to be required. For example, it would be expected that pastoral support will continue, and if necessary counselling, and ongoing spiritual direction.

In addition, the following provisions may be helpful, depending on the nature of each case:

- a formal work place assessment by a qualified occupational health adviser. This would identify any adjustments or adaptations to the working environment of any future manse or other building required as a result of the medical condition;
- a structured programme of mentoring with an experienced mentor assigned to work with the minister on specific issues which have arisen as a result of their illness or condition. An example of this might be engaging the minister in reflective work on their reaction to stress and pressure in a case where this has been a strong feature of the absence, or working on behavioural/attitudinal issues;
- an ongoing assessment of the minister's health by the medical adviser to the Medical Committee or an occupational health adviser;
- arrangements for periodic feedback from the minister about their progress towards recovery. To this end, there will be discussions every three months, carried out by the secretary of the Conference or their nominated representative. At these, consideration will be given to the likelihood of the minister being able to return to work at the end of the recuperative year, and what kind of station might be appropriate, including serving in an appointment outside the control of the Church. The possibility of ill-health retirement may also need to be considered;
- planning for a phased return to work, when this is recommended by the minister's medical practitioner.

Actions which may take place at the end of the recuperative year

At regular intervals during the recuperative year (usually on a quarterly basis) the secretary of the Conference (in consultation with other appropriate persons) will review the progress made by the minister, if necessary seeking fresh medical evidence. A full consideration of all the options available to the minister will be made, including re-entering stationing, serving in an appointment outside the control of the Church, being without appointment at the minister's own expense, and ill-health retirement. There should be no expectation of any further connexional support for the minister at the end of this period of time. If it is discerned that re-entering stationing is the appropriate course of action, the minister will be expected to do so at this point (or sooner if the stationing timetable requires this). If agreement on a course of action is not reached with the minister they will be required to be without appointment at their own expense.

The overall support process is shown in diagram 8 (see page 16).

Section 9. Sources of further advice and guidance

Advice on sources of funding and how to arrange for appropriate medical advice to be sought can be obtained from *Supporting ministers who experience ill health: a good practice guide (part 1)* or the wellbeing officer. In addition the following resources may be helpful:

Information on state benefits and associated advice:
www.direct.gov.uk/en/moneytaxandbenefits/benefitstaxcreditsandothersupport/index.htm

Access to Work (Government Agency):
www.direct.gov.uk/en/disabledpeople/employmentsupport/workschemesandprogrammes/dg_4000347

Methodist Church website – wellbeing pages:
www.methodist.org.uk/ministers-and-office-holders/wellbeing

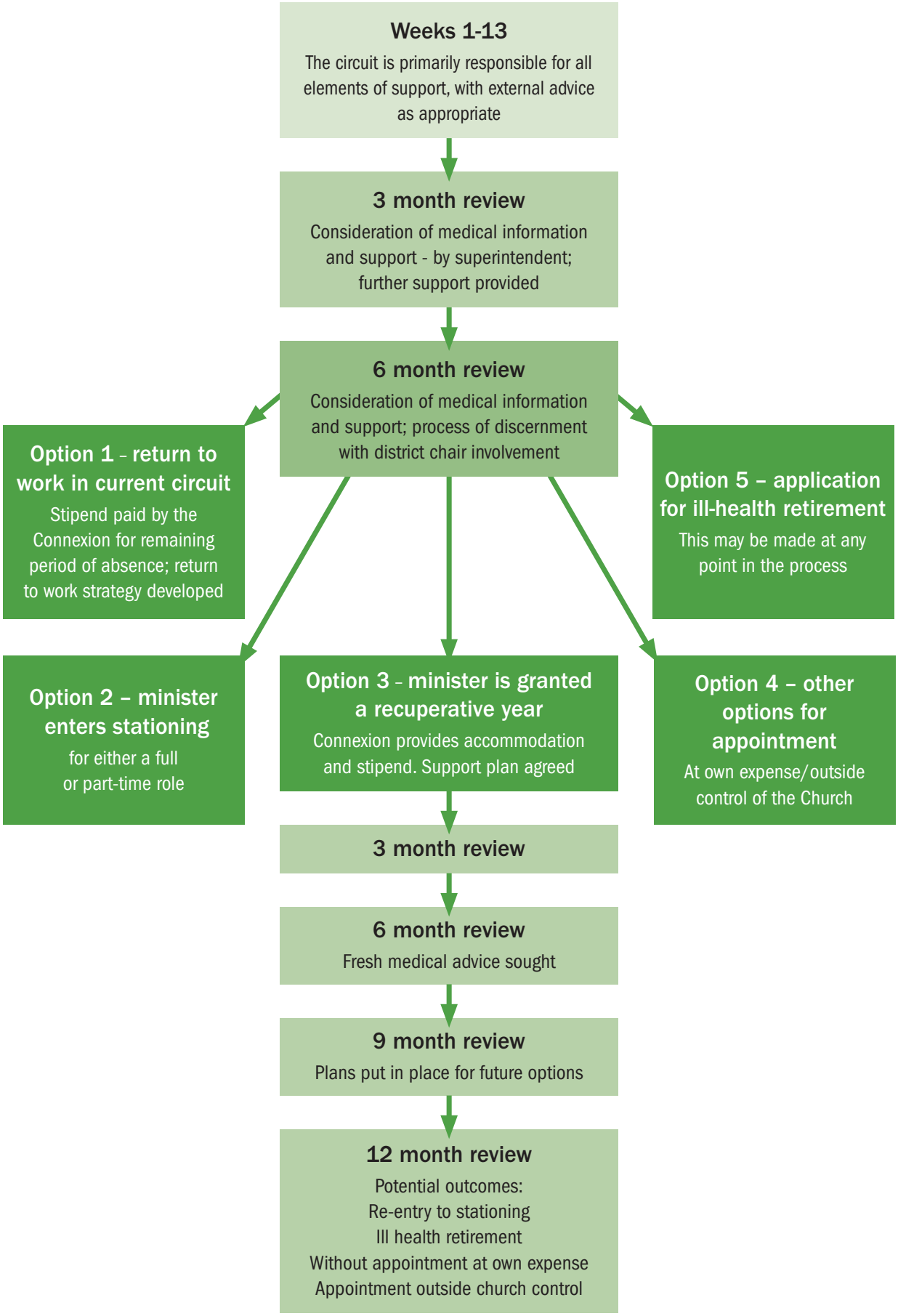
Supporting ministers who experience ill-health – Good practice guide (part 1) (Conference Report):
www.methodist.org.uk/downloads/cl_well_beings_supporting_ministers131011.pdf

Living with disabilities and impairments – practical support for ministers and their chairs/superintendents/the warden of the Diaconal Order:
(Add in weblink)

Guidance on dealing with stress in the ministry:
(Add in weblink)

Guidance on general risk assessments:
(Add in weblink)

Diagram 8: framework of support for a minister experiencing possible long term ill-health



Appendix 1

Model support plan for the recuperative year

Preamble

The support plan for the recuperative year is intended to reflect the covenant relationship between the Conference and its ministers. A support plan is not intended to create a contractual relationship between the parties.

1. Parties:

Name (minister) The Revd A
Name (Connexional Team representative) The Revd B

2. Duration:

The plan commences on 1 July 2012 and concludes on 31 August 2013.

3. Stationing arrangements:

The Revd A has agreed to a curtailment of his appointment at circuit C. This curtailment takes effect on 31 August 2012, and the Revd A agrees to enter the stationing process in September 2012 in accordance with the Church's timetable and requirements.

4. Manse provision:

The Revd A will remain in their current manse in circuit C until August 2012. They will vacate this manse by the week of the first Monday in August 2012.

For the connexional year 2012/2013 he will be provided with accommodation appropriate to his needs, at the Connexion's expense (including water rates and Council Tax). They will move to a new manse as provided in their new appointment in accordance with SO 785(5)(b).

5. Stipend and expenses arrangements

The Revd A will receive a stipend for the duration of this agreement. Reasonable travel expenses will be reimbursed by the Methodist Church Fund. These will include travel to pastoral meetings, coaching sessions and attendance at medical appointments arranged by the Connexional Team or the secretary of the Conference. Any other expenses will only be paid if agreed with the Revd B in advance.

6. Person exercising oversight of the minister:

The secretary of the Conference.

7. Person providing pastoral support to the minister:

District chair D.

8. Monitoring and review arrangements pertaining to this Support Plan:

The Revd A will meet with the Revd B as a minimum at three monthly interviews during the period covered by this support plan. Further medical evidence will be sought during the period of the plan to ensure that he is fit to undertake a ministerial role from 1 September 2013.

9. Actions which the minister agrees to undertake:

a) to participate fully in the stationing process, and assume a new appointment on 1 September 2013, on the understanding that this may be in a location other than the current one;

b) to continue to undertake regular coaching sessions as deemed necessary;

c) to receive pastoral support from district chair D;

d) to submit to appropriate medical processes, either review by Interhealth or by the connexional medical adviser obtaining a medical report from their GP/ specialist.

10. Outcomes:

The Revd A will be stationed to a new appointment on 1 September 2013. If they decline an appointment which the secretary of the Conference deems to be suitable they will be considered to be without appointment at their own expense and will forfeit any entitlement to stipend or manse provision from that date. Equally, if they are not fit to take up a new appointment on 1 September 2013 they will be considered to be without appointment at their own expense and will forfeit any entitlement to stipend or manse provision from that date. If they are unfit to be stationed on medical grounds Standing Order 774 (9) will apply.

11. Signatures:

Minister: .....

Date: .....

Connexional Team Representative: .....

Date: .....