Ministerial Guidance Manual
# Ministerial Guidance Manual

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>III Health Retirement</td>
<td>3</td>
</tr>
<tr>
<td>Occupational Health Procedure</td>
<td>7</td>
</tr>
<tr>
<td>Work place assessments</td>
<td>10</td>
</tr>
<tr>
<td>Psychological Assessments</td>
<td>12</td>
</tr>
<tr>
<td>Counselling Procedure</td>
<td>14</td>
</tr>
<tr>
<td>Procedure for carrying out Risk Assessments &amp; Stress Assessments</td>
<td>16</td>
</tr>
<tr>
<td>Recuperative Year Procedure</td>
<td>18</td>
</tr>
<tr>
<td>Learning Disability Guidance</td>
<td>21</td>
</tr>
<tr>
<td>Sabbatical Procedure for ministers joining the Connexional team</td>
<td>24</td>
</tr>
<tr>
<td>Useful contacts</td>
<td>25</td>
</tr>
</tbody>
</table>
Ill Health Retirement

What is Ill health retirement?

Ill health retirement is applicable for a Minister who is prevented by ill health from discharging his or her role and where ill health is likely to be permanent. Ill Health retirement, however, does not prevent a minister from becoming a supernumerary and or undertake a lay post. Therefore, ill health retirement is not necessarily permanent and ministers can return to ministry if a medical professional confirms the minister is able to do so.

What is the criteria for Ill health retirement?

Ill health retirement is only granted by the Medical Adviser once all medical documentation has been received and reviewed. Therefore, there are many reasons ill health retirement will be granted and it is important to remember each case is different.

- Genetic disease
- Severe mental health conditions
- Mobility and disability
- Cardiovascular disease
- Cognitive impairment

The ill health retirement application process

In order to apply for ill health retirement you will need to have exhausted all possible options if applicable, demonstrating that ill health retirement is the last and natural solution. These options include:

- counselling (if applicable),
- working with your GP (making regular visits and adhering to advice and guidance),
- working with a specialist consultant (if applicable),
- visiting Occupational Health, undertaking physiotherapy (if applicable),
- seeking spiritual guidance,
- working with your superintendent and district chair
- consulting with wellbeing

Once the minister has made the decision to undertake, the ill health retirement process the minister must inform the superintendent and or district chair depending on the role of the minister. Then the minister must contact the wellbeing adviser to
talk through the health concerns to receive further support and guidance if applicable.

If not applicable, the wellbeing adviser will send the minister ill health retirement documentation that consists of: a letter explaining the process and a consent form giving us permission to contact the ministers GP/Consultant. The minister is required to read all the information and provide the following; a cover letter outlining the reason for the ill health application, the date the minister will like to retire (please give a 6 week timeframe) and the date the stipend will stop being paid. As well as provide any other supplementary information like an OH report in addition to providing medical consent.

Upon receipt of the above, the wellbeing adviser will send the documentation to the medical adviser who will then contact the ministers GP. The timeframe of this process depends on the speed the GP or consultant takes to send the relevant information to the medical adviser, therefore, it is the minister's responsibility to chase the medical information required. During this time, it is also advisable for the minister to contact the pension department on pensionshelp@methodistchurch.org.uk to establish the pension entitlement and discuss options.

Once the medical adviser is in receipt of the required information from the ministers GP or consultant or both, the medical adviser will be able to make a decision on whether the application is successful or not. If the application is successful, the minister will be informed by the wellbeing adviser and be issued a letter, which will also go to; the district chair, superintendent, stipend, conference office, housing and the pensions department.

Successful applicants can retire at any point during the year, if a minister decides to retire mid-year then permission from the president is required. Once permission has been received, it is appropriate for the minister to contact the housing department if applicable.

If the application is not successful, the minister will have to review alternative options, which should be discussed with the minister's; superintendent or district chair depending on the role of the minister to seek further guidance. The wellbeing adviser can also be contacted to look at other options.

Role of the supernumerary

The term ‘appointment’ is used in what follows, but it must be understood that this is not an appointment in the technical sense of being appointed to the staff of the circuit (and therefore counted in the establishment figure). Supernumeraries are not listed on the staff of the circuit unless they have officially returned to the active work (see section 4 below).
Approval of appointment The appointment must first be approved by the Circuit Meeting, and the District Policy Committee must then be consulted.

Location and scope of appointment It must be made clear (a) in what circuit(s) the person is to serve (b) what their specific responsibilities will be, both in terms of responsibility for local churches and other specific tasks associated with the appointment (e.g. local preacher tutoring) as far as can be foreseen at this stage. Given that things under this heading may emerge later, care must be taken about the time-limits specified in section 5.

The extent of commitment to offering appointments to the plan must be made clear, in terms both of (a) number of appointments per quarter and any special provisions about their distribution (b) specific commitments to particular churches etc.

Arrangements for weddings and funerals should be made clear.

Duration of appointment The length of time for which this appointment should last must be clearly defined, together with any arrangements for review and/or extension.

Accountability There must be clarity about the ways in which the minister (a) will be accountable for her/his work, and (b) will be accounted for by being supported.

Standing Orders (SO 792(3)) do not permit a supernumerary minister to have pastoral charge of a local church (unless they apply to the Stationing Advisory Committee for permission to return to the active work). This is so that proper accountability (through the obligation to attend staff meetings, circuit meetings and representative sessions of Synod) can be maintained. It is however appropriate for a member of the circuit staff to have formal pastoral charge (as in the case of a probationer) although the supernumerary has the hands-on pastoral responsibility. A supernumerary minister stationed in the circuit is permitted by SO 502(1)(a)(ii) to chair a Church Council ‘as and when requested by the Superintendent’.

It is important to specify the means by which the supernumerary minister will be able to ‘give an account’ of their work so as to receive proper colleagueship. Expectations about attendance at meetings should be very clearly spelled out.

Obligatory reimbursement Expenses incurred in the performance of ministerial duties must be reimbursed on a monthly basis. Mileage should be paid on the same basis as for ministers in the active work. The proportion of telephone and broadband charges and call costs to be reimbursed by the circuit must be agreed. Fees for weddings and funerals are to be offered on the same basis as to other ministers in the circuit.

Discretionary reimbursement If the work of ministry is to be carried out from the minister’s home, the circuit may offer to reimburse a proportion of heating and lighting costs. A book/resources grant may be offered.

Housing, allowances and pension In some situations a circuit may wish to offer payments, allowances or accommodation as additional support for the ministry of a supernumerary. If such arrangements are envisaged, they need to be set up with careful negotiation and safeguards for the circuit and the minister concerned. The
explicit consent of the District Policy Committee will be required and, since there will be implications in tax or employment law, proper professional advice must be taken.
Occupational Health

What is Occupational Health?

Occupational health (OH) are workplace specialists that focus on the physical and mental wellbeing of employees in the workplace, our OH provider is Thrive.

OH assessments are in place to support both the minister and the employer providing guidance and advice to address specific concerns or issues. The assessment is private and confidential but will always be sent to the wellbeing adviser to ensure the correct support is being implemented and advice and guidance is provided.

The aim of occupational health is to prevent work-related illness and injury by:

- encouraging safe working practices;
- ergonomics (studying how you work and how you could work better);
- monitoring the health of the workforce;
- Assess mental health conditions
- supporting the management of sickness absence
- conduct pre-employment health assessments;
- support health promotion and education programmes;
- provide advice and counselling to employees around non-health-related problems;
- Provide your employer with advice and guidance around making reasonable adjustments to your working conditions.
- Assessments on fitness to work
- Identify disabilities and health related matters whilst providing reasonable adjustments and guidance
- Make recommendations for Ill health retirement

Why would a minister attend an occupational health assessment?

There are various reasons a minister would attend an OH appointment but most appointments are derived from a concern about a minister’s health; psychically, mentally or both. OH work with wellbeing and ministers to ensure that staff are fully supported whilst at work. Below are some of the reasons why a minister would be referred to OH;

- Mental health and physical concerns
• Returning to work after a long period of absence
• Entering the stationing process
• Returning to ministry
• Ill health retirement
• Disability which requires reasonable adjustments

What to expect when you attend an OH appointment

Please refer to attachment A, the guidance document and attachment B, the OH referral form.

The OH referral form should be completed by; the minister who is being referred and his/her line manager, providing as much information as possible. Ministers are encouraged to be as open and honest as possible during the actual assessment to ensure the doctor has as much information as possible to be able to write an applicable and robust report.

The OH process

An initial conversation should take place between the minister (person of concern) and his/her line manager to discuss an OH assessment before the wellbeing adviser is contacted. In order to receive an OH referral form the minister (person of concern) has to agree to undertake the assessment. Once the initial conversation has taken place and the minister (person of concern) has agreed, the wellbeing adviser should then be contacted to discuss the concerns and to determine if an OH assessment is the most appropriate option. If the wellbeing adviser deems an OH assessment is the most appropriate option, the wellbeing adviser will send an OH referral to the minister (person of concern) and the line manager to completed and sent back to the wellbeing adviser electronically.

On receipt of the OH referral form the wellbeing adviser will liaise with the OH provider, Thrive, who will then contact the minister (person of concern) directly to arrange an appointment. Remote appointments will only be granted if the minister (person of concern) is unable to travel to London or logistically it is not feasible.

After the assessment, a report will be produced and sent to the minister (person of concern), wellbeing adviser and all other named persons the minister (person of concern) authorises to see the report. The wellbeing adviser will then ask for the minister (person of concern) and line manager to arrange a meeting to discuss the
content of the report. Both parties can seek further support and guidance if required from the wellbeing adviser.

The OH report and any other relevant wellbeing documents and communication will be saved in the ministers (person of concern) electronic wellbeing file.

**Recommendations**

The report will identify recommendations to be implemented for the minister (person of concern) and the employer. The recommendations should be adhered to, however, on occasion; a recommendation for the employer may not be possible or feasible. Therefore, what is reasonable should always be applied and implemented and a conversation addressing this should always take place to keep the minister (person of concern) involved in the process.

Phased returns to work are unique and based on particular circumstances; therefore, a phased return to work is guided by the minister, (person of concern), GP if possible and the line manager. Please see an example of a phased return to work outline.

*Please also refer to Procedure for carrying out risk assessments and stress risk assessments.*

*Please also refer to the counselling procedure*

**Phased return to work plan Example**

We agreed a return to work plan, which is detailed below:

**Week 1 & 2:** 1 session worked on Tuesdays and Thursdays at the Pastoral Centre, from approx 11am for 2/3 hours.

(Catch up meetings weekly)

**Week 3 & 4:** 2 sessions worked on Tuesdays and 1 session on Thursday at the Pastoral Centre, 1 session worshipping on Sunday at x.

(Catch up meetings weekly)

**Week 5 & 6:** 2 sessions worked on both Tuesdays and Thursdays at the Pastoral Centre, and worship on Sunday at x.

(Catch up meetings weekly)
Week 7 & 8: As Week 5 & 6

(Catch up meetings weekly)

It was agreed that a pattern of days off and study days would be set now so that there is some structure to your working pattern

Monday: study day
Friday: day off
Wednesday: Used for occasional meetings in preparation for regular work on x from September.

In the event that there are evening sessions to attend during this phased return then these could be exchanged for morning/afternoon session.

We discussed the importance of having a break during this period and your annual leave was agreed as:

From 1 – 10 July Inclusive.

(Catch up meetings weekly)

1 week in August – date tbc…… and so on ……. 

Work place assessments

What is a work place assessment?

This is an assessment of the work area (for example, the study in a manse) to ensure that it is fit for purpose. It may result from physical discomfort, which the minister experiences, such as neck pain, or because of a disability such as scoliosis or rheumatoid arthritis. Therefore, the range of adjustments required might be minor or significant. Work place assessments are carried out by Thrive, our OH provider.

The process

If a minister believes he/she requires a work place assessment, the minister should contact the wellbeing adviser who will then have an initial conversation with the minister to determine if a work place assessment is appropriate.

If the assessment is deemed appropriate, the wellbeing adviser will send a minister an OH assessment form to be completed by the minister who has requested the form. It is important that the minister makes clear on the form what type of assessment it is as there is only one OH referral form being used for several different assessments.
Once the form has been completed, the minister is required to send the electronic form back to the wellbeing adviser who will liaise with Thrive. Thrive will then contact the minister directly and arrange an assessment at their place of work.

After the assessment has taken place, similar to the OH referral process a report will be produced outlining the requirements to be put in place for that minister.

If the minister requires additional equipment or adaptations, the minister is encouraged to complete the MMBF grant application, identifying the requirements and the cost. On completion of the grant, it must be sent back to the wellbeing adviser along with any additional pieces of information.

The wellbeing adviser will then send the grant application off to be approved. Grant approvals normally take up to two weeks to be reviewed and authorised and then a further two weeks to be processed and paid by BACs to the minister. If a minister is concerned about the period, please contact the wellbeing adviser for updates.

**Follow up action after the Thrive assessment**

The assessor is likely to recommend new equipment and furniture, and may suggest changes to the office layout.
Psychological Assessments

What is a Psychological assessment?

Psychological assessments, otherwise known as resilience assessments are undertaken upon request by a minister or a minister’s line manager. Although, the minister (of concern) is required to provide consent for this process to be initiated.

Psychological assessments/resilience assessments is an option when a minister is undergoing a mental health crisis and requires additional support. Psychological/Resilience assessments are in place to support both the minister and the employer; the assessment integrates a set of key concepts to provide an alternative way of thinking about and practicing natural resource management and ensure a minister is able to undertake his/her role. The assessment is private, confidential, and undertaken by an external provider.

Psychological assessment process

An initial conversation should take place between the minister (person of concern) and his/her line manager to discuss a psychological assessment before the wellbeing adviser is contacted. In order for the process to go ahead the minister (person of concern) must agree to undertake the assessment and a cover letter must be written outlining the ministers concerns. Once the initial conversation has taken place and the minister (person of concern) has agreed, the wellbeing adviser should be sent the cover letter and contacted to discuss the concerns to determine if a psychological assessment is the most appropriate option.

If the wellbeing adviser deems a psychological assessment is the most appropriate option, the wellbeing adviser will then ascertain consent from the minister (person of concern) in writing. The wellbeing adviser will then contact the external psychological assessment provider who will then make contact directly with the minister (person of concern) and an appointment will be made.

After the assessment, the provider will produce a report providing further guidance and support. The report will go to the minister (person of concern), other named parties the minister provides and the wellbeing adviser. The wellbeing adviser will then ask for the minister (person of concern) to discuss the report with his/her line manager and device a plan to move forward. Wellbeing can be contacted to provide further guidance and support.
The report

The outcome of the report will be specific and tailored to the minister (person of concern) and will be used to determine if there are any psychological or resilience needs. In some cases, the outcome will determine that there are no further actions to be taken, in other cases, however, action will be required. That action may make clear that reasonable adjustments and counselling is required or the minister is unable to continue within ministry for example.
Counselling Procedure

What is counselling?
Counselling is a talking therapy that involves a trained therapist listening to you and helping you to find ways to deal with emotional issues.

Sometimes the term "counselling" is used to refer to talking therapies in general, but counselling is also a type of therapy in its own right.

What can counselling help with?
Counselling can help ministers to cope with:

- a mental health condition, such as depression, anxiety or an eating disorder
- an upsetting physical health condition, such as infertility
- a difficult life event, such as a bereavement, a relationship breakdown or work-related stress
- difficult emotions – for example, low self-esteem or anger
- other issues, such as sexual identity

What to expect from counselling
At your appointment, the minister will be encouraged to talk about their feelings and emotions with a trained therapist, who will listen and support the minister without judging or criticising.

The therapist can help the minister to gain a better understanding of their feelings and thought processes, and find solutions to problems. The therapists will not usually give advice or tell the minister what to do.

Counselling can take place:

- face to face
- in a group
- over the phone
- by email
- online through live chat services (learn more about online tools for mental health)
- Skype
It can take a number of sessions before the minister starts to see progress, but the minister should gradually start to feel better with the help and support of the therapist.

**Churches Ministerial Counselling Service**

All ministers have access to 12 free sessions of counselling from the Churches Ministerial Counselling Service (CMCS). To gain access to this counselling a minister is required to follow the link below and contact the area coordinator that is closest to the minister's location. The area coordinator will then find the best counsellor for the minister.

[http://www.cmincs.net/area-co-ordinators/4574629341](http://www.cmincs.net/area-co-ordinators/4574629341)

The counsellors on the CMCS list are not necessarily Christians, but are confidential and will have a sympathy or wish to work with those in ministry. They are all highly trained, accredited individuals and are vetted by CMCS.

This service is only for ministers; therefore, if a minister requires counselling for a family member, a minister is required to source a counsellor obtaining the cost for 12 sessions and complete the MMBF grant application for the counselling to be funded. This grant application form should be sent to the wellbeing adviser for approval. Please contact the wellbeing adviser to discuss further and to be sent the grant application form.

**Accessing long term counselling**

If a minister requires longer term counselling, the minister will need to apply for a MMBF grant to fund the additional counselling sessions. Please contact the wellbeing adviser if this is the case. Counselling is a confidential service and all request will remain so unless the minister possess a risk to themselves or other people.

*Grant applications are applications and not a guarantee therefore please keep this in mind.*
Procedure for carrying out risk assessments and stress risk assessments

What is a risk assessment?
A risk assessment are about identifying sensible measures to control the risks in your workplace. For some risks, other regulations require particular control measures. Your assessment can help you identify where you need to look at certain risks and these particular control measures in more detail. These control measures do not have to be assessed separately but can be considered as part of, or an extension of, your overall risk assessment.

What is a stress risk assessment?
A stress risk assessment is a careful examination of what in a workplace could cause staff to suffer from work-related stress, so that you can weigh up whether you have done enough, or should do more to prevent harm.

When might a risk assessment be appropriate?
The following case examples illustrate this.

Case 1 – a minister wishes to return to work following treatment for breast cancer. She had surgery that she has recovered well from, but is restricted in her movement, particularly bending and lifting. She is taking medication that makes her tired at times, and sometimes leaves her feeling emotionally vulnerable. Her GP has recommended a phased return to work.

In this situation, a general risk assessment would be helpful in identifying a sustainable working pattern, allowing her time to rest during the day, particularly where there were evening meetings. It would also identify issues that she might find emotionally difficult such as conducting funerals or difficult pastoral meetings.

The findings of the risk assessment can be used to inform the nature of her phased return to work. This approach can also be useful where ministers experience fluctuating conditions such as MS, rheumatoid arthritis or CFS/ME.

Case 2 – a minister is finding it difficult to cope with the stresses and strains of ministry. He feels emotionally drained by some fairly low level conflict in the circuit, and has been working very hard for a number of months due to the pressures he
feels are on him. He describes himself as feeling burnt out and becoming increasingly anxious.

A stress risk assessment will help to identify the main sources of stress. When carrying out a stress risk assessment it will be useful to look at the factors such as the length of his working day and week, and the emotional and physical demands that he faces. An outcome from this assessment will be the development of a sustainable working pattern that helps him move forward, supplemented by interventions such as counselling, spiritual direction or mentoring, whereby he can take time to reflect on his practice.

Additionally some GP’s request a stress risk assessment to be undertaken to determine if a minister is fit to return to work after an illness.

What other options may be available?

The two case examples above give an indication of the sort of conditions that might be helpfully addressed by the risk assessment process. In addition (or instead of these) the following might be helpful:

- Referral to Thrive, OH provider
- Obtaining a medical report from the ministers GP

How to carry out a risk assessment

These assessments are undertaken by; the superintendent or district chair and minister (person of concern) during a wellbeing/pastoral visit. Contact the wellbeing adviser for the form which is required. Once completed a conversation should take place with the minister (person of concern) to discuss the content in addition to devise an action plan moving forward, the wellbeing adviser can be contacted for further guidance and support if required. On completion of the process, all documents should be sent to wellbeing to be filed on the minister's (person of concern) electronic wellbeing file.

Reviews and follow-ups

Depending on the nature of the condition under consideration, it is useful to have reviews, perhaps on a three monthly basis, and these should take place with the minister (person of concern) and the superintendent or district chair with feedback provided to the wellbeing adviser. The review outcomes should be recorded and issued to all parties.
Recuperative Year Plan

What is a recuperative year?
A recuperative year will be granted when a minister (person of concern) has a serious illness, but has the prospect of making a recovery and returning to ministry after one-year. The minister is taken out of their station (they must complete a curtailment form available from the Conference Office) and is stationed at the church’s expense. For technical reasons they are deemed to be stationed in the Connexional Team for the duration of the ministers recuperative year, and are shown as such on the minutes of Conference.

Eligibility
To be considered, a minister must have an illness of significant duration, but with the prospect of recovery within a period of one year. A recuperative year will only be granted by; the Secretary of the Conference and the wellbeing adviser based on the evidence provided, (in most cases a recommendation from a GP or OH will be used as supplementary evidence).

Some of the reason that will be considered are as followed but not exhaustive;

- Mental health and physical concerns preventing a minister from undertaking his/her roles and responsibilities
- Work place trauma
- Long term absence/ Ill health

Every wellbeing case is assessed on its own merits; therefore, the reason why a recuperative year is accepted and not accepted will ultimately vary.

Key elements of the recuperative year
Stipend – this will be paid from the Methodist Church Fund (MCF) rather than from the minister’s circuit. The stipend paid is usually at the level that the minister received in Circuit, including any allowances. Finance must be informed so that the stipend can be correctly paid; this is the responsibility of the Conference Office and the wellbeing adviser.

Accommodation – If the Circuit is prepared to allow the minister to remain in their manse (even though they are no longer stationed in the Circuit during the recuperative year) there are no additional housing costs. That said, sometimes the Circuit will request rent from the Connexion as it will be forgoing rental income if
there had been an intention to rent out the vacant manse, this is rare. In either scenario, the Connexion becomes liable for the Council Tax and Water Rates.

If the Circuit is unable to allow the minister to remain in the manse alternative accommodation will be needed, either a vacant manse or by means of a rental in the private rented sector. The minister must organise this, with the Church taking on the tenancy agreement and paying rent, Council tax and water rates to the property owner. This is funded from the MCF and requires the approval of the Secretary of Conference.

Arrangements for oversight and pastoral support

This will be provided by the District Chair who will also arrange for the named person to provide pastoral support.

Stationing

At some point during the recuperative year, the minister will enter stationing. However, it is mandatory for an OH assessment to take place two months before the minister is stationed to assess if that minister is fit and well to be stationed. If OH confirms the minister is fit to continue with the process the stationing will continue. If the OH assessment makes clear the minister is not fit to enter into stationing a conversation will take place to discuss the following:

- Being without appointment at the ministers own expense
- Retirement through asking permission in the usual way
- Ill-health retirement

The process

An initial conversation should take place between the minister (person of concern) and his/her line manager to discuss a recuperative year before the wellbeing adviser is contacted. Once both parties have agreed that they want to continue with the process the minister (person of concern) must contact the wellbeing adviser and send via email a cover letter outlining why a recuperative year is a viable option, in addition to any supporting documents. The cover letter should detail how the minister arrived at the decision to make an application. Once the wellbeing adviser has received the cover letter and had the conversation with the minister (person of concern) the wellbeing adviser will liaise with the Secretary of Conference to make a decision.
This process usually takes between two – three weeks. If a decision cannot be made, alternative options will then be considered.

If a recuperative break is granted, a recuperative plan will be produced and a meeting will be held between the minister (person of concern), Secretary of Conference and the wellbeing adviser. After this meeting the plan will be finalised and sent out to the minister to be signed and then sent back to MCH to be countersigned by the Secretary of Conference. This process should take place before the end of the Connexional year in order for the minister to commence with the recuperative year on the 1st September and finish on the 31st August of the following year.

During this year the minister should be focused on recovery, therefore, grants are available to him/her to fund retreats and getaways to aid recuperation. Please contact the wellbeing adviser to discuss further and receive the relevant forms for completion.
Learning Disability Guidance

What is a learning disability?

A learning disability affects the way a person learns new things throughout their lifetime and affects the way a person understands information and how they communicate. This means they can have difficulty:

- understanding new or complex information
- learning new skills
- coping independently

Around 1.5 million people in the UK have a learning disability. It is thought up to 350,000 people have a severe learning disability. This figure is increasing.

Severity of learning disability

A learning disability can be mild, moderate or severe.

Some people with a mild learning disability can talk easily and look after themselves but may need a bit longer than usual to learn new skills. Other people may not be able to communicate at all and have other disabilities as well.

Some adults with a learning disability are able to live independently, while others need help with everyday tasks, such as washing and dressing, for their whole lives. It depends on the person's abilities and the level of care and support they receive.

What Is Dyslexia?

Dyslexia is a common learning difficulty that can cause problems with reading, writing and spelling.

It's a specific learning difficulty, which means it causes problems with certain abilities used for learning, such as reading and writing.

Unlike a learning disability, intelligence isn't affected.

It's estimated up to 1 in every 10 people in the UK has some degree of dyslexia.
Dyslexia is a lifelong problem that can present challenges on a daily basis, but support is available to improve reading and writing skills and help those with the problem be successful at school and work.

**What are the signs of dyslexia?**

Signs of dyslexia usually become apparent when a child starts school and begins to focus more on learning how to read and write. However, dyslexia can also be diagnosed in adulthood.

A person with dyslexia may:

- read and write very slowly
- confuse the order of letters in words
- put letters the wrong way round (such as writing "b" instead of "d")
- have poor or inconsistent spelling
- understand information when told verbally, but have difficulty with information that's written down
- find it hard to carry out a sequence of directions
- struggle with planning and organisation

But people with dyslexia often have good skills in other areas, such as creative thinking and problem solving.

**How Dyslexia assessments take place**

Ministers who believe they have a learning disability or may require a dyslexia assessment should contact the wellbeing adviser to arrange a meeting to discuss his/her concerns. After the conversation with the wellbeing adviser, a decision will be made on how to proceed. Depending on the learning disability, the following options will be considered and actioned upon:

- A minister will be referred to undertake a diagnostic assessment which will set out the nature of the disability with reference to the test scores and give an indication of the support required
- Then the minister will have to undergo a workplace assessment that is context specific, relating to the specific needs and circumstances of the minister's workplace.
- If a diagnostic assessment has already taken place, the minister will be referred to undertake a workplace assessment, using the findings of the diagnostic report as a starting point.
Funding

The diagnostic assessment, workplace assessment and any equipment, resources and coaching will be funded by (the first £1000) by the MMBF grant. Therefore, the minister will have to complete the MMBF grant application once the process has been completed and the monetary sum is established. The wellbeing adviser will send the minister the grant application form in preparation. If the monetary value exceeds £1000, the minister is required to make contact with Access to Work for the remainder of the funds required. Access to Work can be contact by following this link https://www.gov.uk/access-to-work

The legal position

The Equality Act 2010 places a duty of care on the organisation to make “reasonable adjustments” when considering the needs of people with disabilities. There is no legal definition of what is considered “reasonable”, however the Equality and Human Rights Commission provides the following advice:

When deciding whether an adjustment is reasonable an employer can consider:

- How effective the change will be in avoiding the disadvantage you would otherwise experience
- Its practicality
- The cost
- Their organisation’s resources and size
- The availability of financial support

Although the Church is not an employer of ordained people, the principles set out in this advice apply equally to ministerial candidates, students and ministers.

The Church is only required to make reasonable adjustments if it knows, or could reasonably be expected to know that an individual has a disability and that this person is, or is likely to be, at a substantial disadvantage as a result.
Sabbatical Procedure for Ministers stationed in the Connexional Team

Introduction and context

All ministers in full connexion and in an appointment in the control of the Church have an entitlement to sabbatical leave. Initially, a minister has to wait 10 years for a sabbatical after commencing in ministry. Thereafter, the interval is every 7 years.

Ministers stationed in the Connexional Team are required to submit a proposal for their sabbatical to the Sabbaticals Advisory Group (SAG). This consists of Jonathan Hustler, Secretary of Conference, Rev Tom Stuckey and the Wellbeing Adviser.

The Procedure

Ministers are required to approach the Wellbeing Adviser for advice about how to seek permission for their sabbatical proposal. The Wellbeing Adviser will then send the minister the following documents:

- The Good Practice Guide on Sabbaticals for Ministers Stationed in the Connexional Team
- The Sabbaticals Template
- A model Sabbatical Proposal

Ministers usually complete their sabbatical proposal using the Sabbaticals Template referred to above. This sets out the key issues that the SAG would wish to be included.

The draft proposal should be sent electronically to the Wellbeing Adviser who may offer some initial feedback if required based on the requirements needed to make a decision. If no feedback is required, the Wellbeing Adviser will then send the draft proposal to the other members to be reviewed. The minister will receive an electronic response.

What should be included in the proposal?

The sabbatical proposal should include the following:

- A balance between activity and reflection
- A realist and achievable proposal

For further guidance, please contact the Wellbeing Adviser.
Important Contacts

**Interim Wellbeing Adviser:** Josephine Chuks - chuksj@methodistchurch.org.uk

**Wellbeing Adviser:** Linda Robotham - robothaml@methodistchurch.org.uk

**Housing:** Mairi Johnstone - MJohnstone@mmhs.org.uk

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**Stipend:** Payroll Manager, Jane Gasengayire stipends@methodistchurch.org.uk