



CLERGY HEALTH, WELLBEING AND SICKNESS ABSENCE GUIDELINES AND
POLICY

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1. INTRODUCTION

Should a member of clergy be unable to perform their duties because of sickness, their obligations and rights are set out in **Regulations 27 and 28 of The Ecclesiastical Offices (Terms of Service) Regulations 2009**.

<https://www.churchofengland.org/sites/default/files/2017-10/terms-of-service-regulations-updated-to-july-2017.pdf>

The guidelines below outline the processes to be followed in accordance with these regulations. They also explain how practical and pastoral support from senior clergy and centrally can be provided.

It is important that stipendiary office holders follow these procedures as, to not to do so, could prejudice an application for state sickness benefits at that time or subsequently. There is further information on the Clergy Payroll Services section of the Church of England website including a link to a form for reporting sickness absence from duties.

<https://www.churchofengland.org/more/clergy-resources/clergy-payroll/what-happens-if-i-am-ill>

2. PRINCIPLES

These guidelines are based on the following principles:

- Respect for individual dignity and privacy – to ensure that sensitive information of any kind, including medical information, will only be shared with relevant people.
- Providing quality pastoral and practical care – to ensure that contact is maintained throughout the absence and, as appropriate, referrals and links be provided at appropriate times.
- Seeking medical reports and professional advice – to ensure practical advice, suggestions and recommendations can be considered in a timely fashion to enable the individual to return to full capacity as quickly and as safely as possible.
- Offering appropriate financial support – to ensure the payment of stipends and to advise on cases of hardship.
- Being flexible and focusing on the individual – to work with each individual to help them structure their schedule and workload in such a way that will give them the maximum flexibility to balance managing their medical treatment with maintaining effectiveness and efficiency in their office.
- Providing information and support – to work with individuals to seek out information that may help with their circumstances and, where appropriate and wanted, to put people in touch with others known to us who may have knowledge of/been through similar circumstances and can offer support.

3. SUPPORT AND WELLBEING

Archdeacon Mark Badger is pleased to accept the invitation from Bishop John to lead on Clergy Wellbeing within the diocese. Being an active member of the clergy can be a most rewarding job. At the same time, the role can also contain hidden difficulties such as isolation, loneliness and an overwhelming workload.

For some years the Church of England has become more aware of the effects of the stresses and strains of parish ministry on clergy and their families. We, as the Diocese of Worcester, commit together to promote the welfare of our clergy and their households in terms expressed in the Covenant for Clergy Care and Wellbeing. We undertake to work together to seek to coordinate and improve our approach to clergy care and wellbeing that ordained ministers flourish in their service of the mission of God within and beyond the Church.

You can find further information regarding the Covenant for the Care and Wellbeing of Clergy [here](#) (including support for reflection and action for both clergy and local congregations).

We hope you find the information on these pages helpful. If you have any questions do contact the HR Team. If you are wanting an informal conversation about support or advice about wellbeing, please do get in touch with your area dean or archdeacon for a chat.

4. FLOURISHING IN MINISTRY

Ideas, advice and support for lay and ordained ministers can be found in our Flourishing in Ministry booklet. Awareness of the need to focus on personal resilience and wellbeing is at an all-time high.

In 2019 the General Synod of the Church of England voted overwhelmingly to support a new way of improving the approach to the care and well-being of clergy across the Church and in February 2020 it proclaimed and affirmed The Covenant for Clergy Care and Well-Being in an Act of Synod. It invites parishes, dioceses and the wider church, as well as individual clergy, to share responsibility.

We seek to create greater awareness of issues of clergy care and wellbeing across the whole church. We believe that, when we care for and are accountable to one another, when we take some time to reflect on our own situation and needs, and when we are able to enter openly into dialogue with both the local and wider church about their well-being, this is a blessing for the whole church.

Whilst the Covenant for Clergy Care and Well-being is focussed on ordained ministers, our Flourishing in Ministry booklet, which can be downloaded below, is intended as a practical resource for all those exercising licensed lay and ordained ministry in the Diocese of Worcester. We hope that these resources will help to articulate principles that promote ministerial flourishing and support every minister to thrive in their life and ministry.

[Download the Flourishing in Ministry document.](#)

[Download the Wellbeing Signpost Poster](#)

3. HOW TO NOTIFY PERIODS OF SICKNESS ABSENCE

Common Tenure (Regulation 27(1)) provides that it is good practice for any stipendiary office holder who is unable to perform their duties of office for a period of one day or longer to report the absence to the HR Coordinator in the Diocesan Office (hrteam@cofe-worcester.org.uk) [as soon as reasonably possible](#) clearly stating the reason and duration of the absence.

Should the absence last 4 days or more this **must** be reported to the HR Coordinators – hrteam@cofe-worcester.org.uk who can offer appropriate support.

For all office holders, including those stipendiary office holders not subject to Common Tenure, a medical certificate is required from your doctor for any illness that lasts more than 7 days.

The HR Coordinator will inform the Church Commissioners who are required to maintain records of all sickness absences of stipendiary clergy and stipendiary licensed lay workers whose stipend is paid through the Church Commissioners' Clergy Payroll. The Archdeacon and your Area Dean will also be informed by the HR Coordinator. And if you are in a training post, your Training Incumbent will be informed.

Clergy Payroll will record sickness and make a claim for statutory sick pay on your behalf. You will need to make a formal claim after 4 days of sickness absence by completing form SC2 on the Government website:

<https://www.churchofengland.org/more/clergy-resources/clergy-payroll/what-happens-if-i-am-ill>

For all office holders, including those stipendiary office holders not subject to Common Tenure, a medical certificate is required from your doctor for any illness that lasts more than 7 days. This should be sent to the [HR Coordinator](#) in the Diocesan Office who will send a copy on your behalf to the Church Commissioners and also let the Archdeacon know.

Further medical certificates must be consecutive (eg: one certificate finishes on 4th August and the next starts **no later** than 5th August) and sent as soon as possible to the HR team. It is appreciated that non stipendiary clergy may need a medical certificate for other purposes, in which case a copy may be sent to the HR Coordinator. In addition to this formal notification of sickness absence for payment of SSP, clergy are also required to:

- As soon as possible, and no later than the fourth day of absence, all clergy (including self-supporting) should make contact with their churchwardens to inform them of the nature of absence and the likely duration. The churchwardens will provide on-going support and keep the Archdeacon and / or Area Dean updated on the situation in confidence.
- Those in training posts should also notify their Training Incumbent as soon as possible, and no later than the fourth day of absence .
- Following an absence of more than seven days, all clergy (including self-supporting) should make contact with their Archdeacon, Area Dean and team clergy colleagues to inform them of the nature of absence and the likely duration.

SPECIAL LEAVE:

Individuals will be granted up to **12** days special leave which may be comprised of but not limited to the types of leave listed below. You may be granted special leave if, for example:

- You need urgent compassionate leave e.g. to arrange or attend the funeral of an immediate relative.
- You carry out voluntary public service work
- You undertake reserve forces training
- You are called for jury service.

We also recognise that after significant life changes (especially bereavement, separations for example) there may be a particular need to assess additional support for pastorally sensitive work, especially funerals and weddings.

COMPASSIONATE LEAVE

- In difficult or special circumstances, unpaid leave of absence is subject to the approval of the Bishop in the first instance and at the discretion of the Archdeacon. This will be communicated to the HR team who will record dates of absence and offer support.

BEREAVEMENT LEAVE

- Individuals may be granted bereavement leave, especially if they have considerable additional responsibilities. This is subject to the approval of the Bishop in the first instance and at the discretion of the Archdeacon. This will be communicated to the HR team who will record dates of absence and offer support.

FUNERAL LEAVE

- Leave may also be given to attend the funeral of a dependant or close relative.

OTHER SPECIAL LEAVE

- Additional leave with or without pay may be granted in special circumstances at the discretion of the Bishop up to a maximum of 12 days.

4. STIPEND DURING ILLNESS AND STATUTORY SICK PAY

Stipend will be paid during sickness absence on the following basis:

- in full during the first 28 weeks of absence

- at half rate during the next 24 weeks of absence (this payment is by the Bishop and the WDBF exercising their discretion to make payments above the minimum level recommended by the Central Stipends Authority)
- zero stipend after 28 weeks full and 24 weeks half stipend.

This is subject to these benefits being the maximum payable during any rolling 12 months' period starting with the first day of your sickness absence.

This will include any Statutory Sick Pay (SSP) entitlement payable during the first 28 weeks of absence. If any further guidance is needed on the matter of SSP please contact the Church Commissioners.

Any period of part-time work recommended by a medical practitioner will be paid on its own terms pro-rata to a full stipend - subject to the stipend not being less than the level paid during a period of sickness as set out above. It is important that the Church Commissioners (and, if you are in receipt of the state benefit of "employment and support allowance", the Benefits Agency), are kept advised of any such part-time work. Any work, including that for therapeutic reasons, should only be undertaken during a period of illness when your medical practitioner has given written recommendation / certification.

The Church Commissioners will advise as to procedures for claiming the state benefit of "employment and support allowance" after the first 28 weeks of sickness. Such benefit payments will not affect the adjustment of your stipend as referred to above. You would, however, need to keep the Benefits Agency advised about payments of stipend and return to work, whether full or part-time.

A link to the Government website providing more information is below:

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

5. SUPPORTING SHORT TERM SICKNESS ABSENCE

Short term absence is defined as any absence lasting between 1 day and 28 days (4 weeks).

- Common Tenure (Regulation 27(1)) provides that it is good practice for any stipendiary office holder who is unable to perform their duties of office for a period of one working day or longer to report the absence to the HR Coordinator in the Diocesan Office (hrteam@cofe-worcester.org.uk) as soon as is reasonably possible clearly stating the reason and duration of the absence. Should the absence last 4 days or more this **must** be reported to the HR Coordinator.
- As soon as possible, and no later than the fourth day of absence, clergy (including self-supporting) should make contact with their churchwardens to inform them of the nature of absence and the likely duration. The churchwardens will provide on-going pastoral support and keep the Archdeacon updated on the situation in confidence.
- Following an absence of more than seven days all clergy (including self-supporting) should make contact with their archdeacon and team clergy colleagues to inform them of the nature of absence and the likely duration. If it is anticipated that the absence will be longer it would be useful to notify the Rural Dean who will be able to support your colleagues in providing cover.

- Up to the 5th week of absence, churchwardens are encouraged to organise other licensed ministers to take services to ensure the office holder is relieved of duties at this time. The member of clergy should agree frequency of contact to keep updated regarding absence and for the purpose of keeping in touch.

6. SUPPORTING LONG TERM SICKNESS ABSENCE

Long term absence is defined as any absence lasting more than 28 days (4 weeks).

- During the 5th week the Archdeacon (and/or the Area Dean) will review provision of other clergy and readers with churchwardens to ensure that the office holder concerned continues to be completely relieved of duties at this time.
- Following the 5th week of absence the Archdeacon will arrange a visit to the office holder at home. The Archdeacon may ask a member of the HR Team to accompany them or undertake this role. A written summary of the discussion should be agreed and retained. The purpose of this visit should be:
 - To understand the nature of the illness and likely duration, understanding the confidential nature of medical information
 - To provide pastoral care
 - To agree any support that may be required, which may include access to a counselling service, retreat, spiritual direction or support from other clergy depending on the nature of the absence. Support for the family will also be considered.
 - To agree if there is any support that can be provided in order to assist the individual in returning to their duties.
 - To agree how the absence is to be publicly described (e.g. in communications to other clergy, colleagues, churchwardens and with the wider public of the parish and church community) maintaining confidentiality regarding personal sensitive information.
 - The involvement of an independent occupational health provider to provide information to support the individual will be considered at this stage as well as consideration to approach the individual's GP for a full medical report.
 - To agree frequency and means of contact and communication between the individual and the Archdeacon.
- The Archdeacon will keep in regular touch with the churchwarden to support the Parish (es) during the absence of their Clergy member.
- When approaching 24 weeks of sickness absence the Archdeacon and HR Coordinator will arrange to meet with the office holder who may be accompanied at this meeting by another colleague or Union Representative.
- A written summary of the discussion will be prepared and sent in a meeting outcome letter. The purpose of the meeting should be to:
 - Establish the likely prognosis
 - Consider whether any progress has been made and whether a return to work is feasible now or in the near future.
 - Make a referral to an independent occupational health provider; this may be a review appointment where they have already been involved.

- Clarify with the individual what the possible options are
 - Consider whether ill-health retirement needs to be considered
 - Consider any other support that may be required for the individual and their family (including arrangements regarding their pay, see section 10).
- Where the period of absence continues beyond this point further review meetings will be arranged.

7. THE ROLE OF OCCUPATIONAL HEALTH

Regulation 28 of the Ecclesiastical Offices (Terms of Service) Regulations 2009 provides that the bishop may, if he/she has reasonable grounds for concern about the physical or mental health of an office holder, direct that the office holder shall undergo a medical examination. Where the office holder refuses to comply with such a direction, or fails to disclose or authorise the disclosure of any relevant medical records, the bishop is permitted under the regulations to draw such inferences as appear appropriate having regard to all the circumstances.

The diocese has a professional consultancy arrangement with a qualified and experienced independent Occupational Health provider. The benefits of using this facility are many including:

- helping keep clergy in active ministry
- supporting clergy back to work after sickness
- providing advice in cases of long term sickness
- assisting with adjustments where required

Occupational Health advice focuses on how the individual's medical condition impacts on their ability to fulfil their role and what reasonable adjustments might be made to facilitate a return to full capacity. Advice may include a framework and guidelines for managing a gradual return process and may also include, where appropriate, advice for family, colleagues, and the Diocese.

The Occupational Health professional will look at the nature of work, workload, current pressures and priorities and give their advice on what is realistic and what is not advisable. For some individuals, more than one Occupational Health appointment will be made so that the OH physician can help the individual track progress and increase workload gradually and so return to their full duties.

Occupational Health referrals are made by the HR Coordinator following a discussion with the Archdeacon and the individual concerned.

8. OCCUPATIONAL HEALTH REFERRAL AND RETURNING TO WORK

During a period of recovery and the road to returning to full capacity / duties the Diocese may take professional medical advice on what is most appropriate for an individual (see "The Role of Occupational Health").

If a referral to OH is made this will be done by the HR Coordinator following a discussion with the Archdeacon and the individual concerned. A copy of the referral form template is available on request from the HR Coordinator. The completed form will be agreed by the Archdeacon and the individual concerned prior to submission to the OH provider.

The OH provider will make an appointment with the individual concerned – either by telephone or face to face. At the appointment the Occupational Health professional will look at the nature of work, workload, current pressures and priorities and give their advice on what is realistic and what is not advisable.

The Occupational Health professional will advise throughout the period of recovery, and the phased return to work, appropriate adjustments. These may include a range of temporary changes (also referred to as a Phased Return, see section below) which may include:

- reduced working hours
- reduced days
- only working one or two 'session's' a day/week etc
- change in role
- reduced responsibilities
- recommendations to assist plans for transport to and from work engagements
- onward referral for other professional specialist advice and guidance (where appropriate these costs will be met by the Diocese), and
- any other reasonable adjustments that would be helpful.

The Archdeacon, HR Coordinator and individual concerned will meet once this report is completed to ensure that the professional advice and guidance is implemented where practically possible. Pastoral and practical support for the individual and their family will also be agreed.

9. GUIDELINES FOR A PHASED RETURN

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

A phased return needs to be agreed by the member of clergy, the Archdeacon and the HR Coordinator to ensure that it not only works for the post holder but also for the parish. If the particular parish is unable to sustain the phased return, or if returning to work would be deemed detrimental to the individual's health, then the individual will be required to remain on sick leave.

An ideal phased return to work should include:

- A gradual build up towards the post holders usual hours and duties that begins with hours of work that are manageable for the individual at the current stage of their recovery. Unless there are exceptional circumstances, It is usual that the minimum amount of hours worked should not be less than half their full time hours (i.e for a full time post holder, the phased return would usually commence at not less than 20 hours per week).
- The duration of a phased return may be as little as one week, and not usually more than 4 weeks, unless the individual has a condition with long-term fatigue issues.
- Consideration should be given to the timings of work that allow for periods of rest as required, for example hours that allow an individual to avoid early morning starts, or the allowance to work shorter days to allow time for recuperation in between duties.

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

At the end of the agreed phased return period a review meeting will be held with the member of clergy, the Archdeacon and the HR Coordinator to ensure all is on track.

10. CRITICAL ILLNESS

It is important that, as soon as possible after diagnosis of a life threatening illness, the individual contacts their Archdeacon or the HR Coordinator so that both practical and pastoral support can be put in place.

The Archdeacon will arrange to meet the individual as soon as possible, accompanied by the HR Coordinator. They will ensure the individual has access to these guidelines and will talk through immediate plans for treatment and other hospital visits, the likely impact of treatment, whether or not it would be appropriate for the individual to continue to work and how this should be reviewed. They will also review local cover arrangements with the appropriate people. Most importantly they will focus on the likely impact of the diagnosis and ongoing medical treatment on the individual themselves, their family members; on their colleagues; and on their local church communities.

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

The nature of treatment for critical illnesses will vary from person to person and will determine how much / what work an individual is able to maintain. During treatment the Archdeacon or any other nominated contact person, will arrange to be in contact at regular intervals - purely for the purposes of keeping in touch.

At any stage of an individual working through treatment, if they feel they are unable to work, or are advised not to for a period of time, they should let the HR Coordinator know and send in doctor's certificates at the appropriate times. The HR Coordinator will notify the Archdeacon.

11. WHERE THE INDIVIDUAL IS UNABLE TO RETURN TO WORK

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

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

Subject to individual circumstances, a period of 3 months will initially be given to remain in the current property during which time the Diocese will work with the individual and their family to help them find appropriate alternative accommodation. Additionally, the Church of England Pensions Board have

provision in place to support Clergy who are nearing retirement through the provision of modest and affordable retirement housing through the **CHARM** Scheme (Church's Housing Assistance for Retired Ministry). The Housing Services Department can be contacted on the email below;

housingservices@churchofengland.org

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

12. ANNUAL LEAVE DURING SICKNESS ABSENCE

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

13. PROFESSIONAL COUNSELLING SUPPORT FOR CLERGY AND THEIR FAMILIES

Through the Occupational Health referrals, individuals may be recommended a referral for professional counseling - this may be to an external therapist or to the Diocesan Service as most appropriate. Other referrals may be for other short term medical interventions / support such as physiotherapy.

Individual members of the clergy are also able to refer themselves independently to the Diocesan Professional Counseling Service either through the HR Team or directly through the [diocesan website](#):

When seeking counselling through this service you will initially talk to the advisor to determine whether counselling is appropriate or if some other form of help would be more suitable. Where counselling is offered you will usually be put in touch with one of a team of counsellors who will work with you (and your spouse if appropriate). Normally a maximum of 12 sessions are offered. The DBF will pay for the first 6 sessions and we normally ask that those who are able, make a contribution for the remaining sessions.

Counselling offers a confidential relationship with a qualified and experienced person (who has no other role in a client's life) through which to explore personal issues and values, increase self-awareness, facilitate personal growth and develop new ways of addressing problem areas of life.

Some of the kinds of issues which people bring to counselling are:

- anxiety and panic attacks
- depression
- bereavement and loss
- difficulties in relationships, both personal and professional
- sexuality
- the pressure and stresses of ministry
- suicidal thoughts and feelings

- transitional life events or crises

It is important to stress that you do not need to be in crisis to seek or benefit from counselling. Seeking help is not a sign of weakness, rather it signifies courage and maturity.

The counselling team

The Bishop of Worcester appoints and finances the work of an Adviser in Pastoral Care and Counselling whose primary role is to co-ordinate the Diocesan Counselling Service. The Adviser also holds a wider brief for the well-being of clergy and is involved in other initiatives which aim to support clergy in their personal and ministerial development.

The Worcester Diocesan Counselling Service is co-ordinated by Dr David Mair. In the first instance, he should be contacted and will offer an exploratory consultation to determine whether counselling will be appropriate or whether some other kind of help may be more suitable.

14. FURTHER INFORMATION

Should you have any further questions about any aspect of the management of your health and wellbeing please contact the Diocese of Worcester Human Resources Team on 01905 730730 or 01905 732818.

15. FREQUENTLY ASKED QUESTIONS

PROCESS QUESTIONS

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

The Diocese asks that all Stipendiary Clergy who are unable to work due to sickness absence report this to HR at hrteam@cofe-worcester.org.uk

The reason for this is three fold;

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

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

Where you may have recovered quicker than expected, or you have identified some adjustments that could be made to enable you to return to work sooner (e.g. on different duties) then this should be discussed with the Archdeacon. The purpose of this discussion will be to establish whether your return to work could potentially exacerbate your illness or slow your recovery.

Where there is any uncertainty about whether an early return to work would be appropriate, you may be asked to return to your GP who may then provide a fit note indicating that you are “fit to work”, or “may be fit to work” with certain adjustments to your duties, or hours.

Where do the Self Certification forms go?

The form will be passed to Clergy Payroll in order that they can then register your absence and ensure that Statutory Sick Pay is paid.

OCCUPATIONAL HEALTH QUESTIONS

Can I do a self-referral to Occupational Health?

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

Should you feel that you could benefit from a visit to Occupational Health, but this has not yet been offered to you, please contact the Human Resources Team on 01905 730730 who will be able to advise you on the process to be followed and assist you with a referral.

How many times am I allowed to see Occupational Health?

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

PAY QUESTIONS

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

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

If you would like to find out how much absence you have had to date, please contact the HR Team on hrteam@cofe-worcester.org.uk

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

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

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

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

Contractual Sick pay is paid at full stipend (inclusive of Statutory Sick Pay) for a period of 28 weeks. Should you remain unwell after this point; your stipend will reduce to half stipend.

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

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

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

In addition, grants to assist clergy in a wide variety of circumstances may be available. Please speak to the HR Team on 10905 730730.

RETURNING TO WORK QUESTIONS

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

It is usual that a phased return will be for 4 weeks; the expectation inherent within this is that you will be ready to resume your full hours and duties at the end of this time.

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

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

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

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

Can I have a second period of phased return?

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

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