

URC Ministers' Sickness Absence Policy and Procedure

The Maintenance of the Ministry sub-committee (MoM) has recently completed a review of the Church's policy on sickness absence and the procedures to be followed in reporting absence and dealing with extended periods of sickness of ministers and CRCWs. These come into effect on 5 October 2016. A full copy of this is available from the MoM Office on request and will be posted on the website.

A Reminder - Notification of absence

Ministers/CRCWs are reminded that they should notify their Synod Office and the MoM Office if they are unable to work for more than three days due to sickness. This enables the proper records to be maintained.

The first seven days of sickness may be self certified (by letter, email or telephone) but after that all continuing sickness must be covered by a doctor's statement of fitness for work ('Fit note'). Copies of these notifications should be sent to the Synod Moderator and MoM Office.

Both MoM and Synod offices should also be informed when the minister returns to work after a period of certificated absence.

Summary of the Sickness Absence Approach

The URC aims to support ministers and Church Related Community Workers during periods of sickness absence, and to provide help and guidance towards returning to work.

Responsibility for carrying out these procedures is divided between the individual minister, their Synod Moderator (who may delegate some aspects of the Synod role) and the Maintenance of the Ministry sub-committee (MoM) through the MoM officer. In some situations input will be sought from others, for example in relation to potential ill-health retirement. Where ministers are not deployed within a synod their line manager will fulfil the role ascribed to the Synod Moderator.

Principles

The policy aims to ensure that during the course of an illness there is:

- Good pastoral and practical support
- Respect for an individual's privacy
- Use of professional medical advice at an appropriate time
- Clarity about the financial implications of extended absence

While individual needs and circumstances differ, the policy aims to ensure that ministers can and do take sufficient time off to recover from illness. It may be appropriate, on return from an extended period of absence, to build up to a full workload over a planned period.

Pastoral care during Sickness Absence

Pastoral care will be provided through the Synod Moderator who may delegate some elements of this to others. Regular contact will be maintained between the Moderator and those whose sickness absence extends beyond four weeks. The preferences of the minister and their family for the frequency and manner of such contact will be respected, subject to the minimum requirements of the procedures for regular Moderator reports to the MoM subcommittee.

After an extended period of absence, a phased return to work may be appropriate, normally over a period of up to two months. This will be agreed between the minister and the Moderator (or his/her delegate) to allow a gradual take-up of the full workload.

Continuation of Stipend

Stipend will be paid during periods of sickness in such sums as shall be determined from time to time by the MoM sub-committee.

Under the terms of the current Plan for Partnership, ministers who are unable to work because of sickness or accident are paid full stipend (less any State Benefits received) for a period of six months. Any sickness arising in the twelve months prior to the first day of a new period of sickness will be taken into account in the calculation of those six months.

At the appropriate time after the beginning of any sickness absence, the MoM sub-committee will determine, in consultation with the Synod Moderator and having taken independent occupational health advice, what further help, if any, should be given when the entitlement to full stipend comes to an end. One month's notice will be given of any cessation or reduction of payments.

Occupational Health Advice

The MoM sub-committee may seek advice about the impact of an illness on the individual and their ability to work from the Church's medical adviser and also from a specialist Occupational Health organisation. This may include a review of relevant medical records and a telephone or personal consultation.

Such advice requires the consent of the individual. Where consent is not given, the decisions of the MoM sub-committee will be based only upon the available information.

Ill-Health Pension

Where incapacity to work appears to be permanent, a minister who is a member of the URC Ministers' Pension Fund may apply to the Trustee for an ill-health pension. The decision will be based upon an assessment of whether the minister is, and will continue to be, unable to carry on his/her occupation because of physical or mental impairment. Any application for an ill-health pension may only be granted after obtaining independent medical advice.

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