

GENERAL SYNOD

A Covenant for Clergy Care and Wellbeing

Executive Summary

Introduction

This paper outlines the draft Covenant for Clergy Care and Wellbeing, for debate and adoption at the July 2019 General Synod Group of Sessions. It follows extensive consultation with the wider Church of England since the publication of first draft in October 2018. The Working Group received over 30 institutional contributions and 66 contributions from individuals, clergy and lay. Members of the Working Group consulted six regional meetings of the College of Bishops in autumn/winter 2018/19. Postings on the Sheldon Hub encouraged many confidential comments from people in ministry. The Archbishops' Council and the Remuneration and Conditions of Service Committee also made significant submissions early in 2019, and presentations to the Houses of Clergy and Laity at the General Synod Group of Sessions in February 2019 inspired further comments and suggestions. The Group also invited a submission from the Methodist Church.

Overview

The paper outlines the approach taken by the Group, with its explicit focus on the nature of pastoral care within a Christian context, of encouragement rather than demand, and its goals of: a shift towards the preventative (better than cure); a shift towards mutual responsibility (a renewed sense of a caring discipleship community, and of partnership between individual ministers, laity, local church, the diocese and the national church, aligned with *Setting God's People Free*); a shift towards coordinated response (from ministerial discernment through to retirement); culture change (toward greater concern on the part of the *whole* church); and achievability (practical, pragmatic and useful at every level).

The report is in four main sections. Undergirding and intrinsic to the work of the Clergy Wellbeing Group and this paper is a *Theological Essay* contributed by Dr Margaret Whipp (following para. 19). We then offer a text of the Covenant for Clergy Care and Wellbeing itself (para. 20).

The third section, Our Shared Commitments (paras. 21-26), is based on the *Guidelines for the Professional Conduct of the Clergy*, distilled into four areas (Baptismal and Ministerial Vocation, the Call to Care and Self-Care, the Minister as Public Figure, the Minister's Household). Each section invites the Minister, the Local Church and the Wider Church (expressed through the Office of the Bishop), to consider their role and responsibilities in clergy care and wellbeing.

The fourth section (paras 27-32) seeks to initiate a Big Conversation on Clergy Care and Wellbeing arising from Our Shared Commitments, with a series of questions under each heading, inviting reflection and conversation on the issues they raise, to be considered in dialogue and discussion. The Working Group acknowledges that change will not come about through executive action alone, but through a shared learning culture. Beyond that, we wish to inspire a full and ongoing conversation across the Church of England (*between* the parties concerned as well as *within* the structures and institutions of the Church) about the care and wellbeing of the clergy, which will lead to action across the board.

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The paper makes a limited number of specific recommendations (paras 42-46), including:

- a) the creation of a culture where some form of *pastoral supervision and reflective practice* is the norm;
- b) *IME Phases 1 & 2: expectations and formation in wellbeing*: training needs to prepare both ordinands and clergy for 21st century ministry, embedding good practices;
- c) *Appointments to Posts and Licensing Services*: sufficient clarity and realism in the content and scope of Parish Profiles and Role Descriptions, with ongoing reviews of both (including in MDR); and a recommendation to the House of Bishops that resources be provided for use at Licensing and Induction services to highlight the commitment of Bishop and people to the minister's care and wellbeing;
- d) *Ministerial Development Review*: the value and further potential in MDR, to use Parish Profiles/Role Descriptions as a resource for ongoing reflection and review, developing greater consistency across dioceses to assure quality and sharing of good practice, with ministers being encouraged to reflect on their own care and wellbeing, with more effective signposting and follow-up from MDRs to give confidence that the minister has been heard.
- e) *Sharing good practice*: we encourage all involved, especially at national level, to share learning and resources, including via online presence/social media.

Implementation and an Act of Synod

The paper (para 43) proposes that General Synod be asked to debate a motion:

That this Synod:

- a. adopt the Covenant set out at paragraph 20 of GS 2133 as a statement of its commitment to clergy care and wellbeing;
- b. request the Business Committee, with the agreement of the Presidents, to make arrangements so that the Covenant can be affirmed and proclaimed an Act of Synod at the February 2020 group of sessions;
- c. request the Clergy Wellbeing Working Group to oversee the transformation of the proposals contained in GS 2133 into actual practice, in particular by making the Shared Commitments and Big Conversation (at paragraphs 21 to 32 of GS 2133) available online in a way that enables their practical use by clergy, parishes, deaneries and dioceses by the end of 2019;
- d. request the Appointments Committee to appoint members to a Clergy Care and Wellbeing Facilitation Group to encourage and evaluate progress in the field of clergy care and wellbeing across the Church of England, with a view to the Group reporting to the General Synod within the 2020-25 Quinquennium.

We further propose (paras. 44-46) that the Covenant at para. 20 be made an Act of Synod in February 2020 with the General Synod inviting various parties to:

- a. debate with a view to adopting the Covenant in Paragraph 20 by the end of 2020;
- b. invite PCCs and Deanery Synods to consider and adopt the Covenant themselves within a year of their Diocesan Synod debate and to subsequently engage in the Big Conversation;
- c. ask each Diocesan Bishop to sponsor a Clergy Study Day on Care and Wellbeing within eighteen months of the Act of Synod being made (if not already held within the previous two years)

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- d. within three years of the Act of Synod being made each diocese, along with TEIs, the NCIs, and (should they wish) those working in the Third Sector, report to a new Clergy Care and Wellbeing Facilitation Group on developments and learning since the Report was agreed.

Canon Simon Butler
Chair, Clergy Care & Wellbeing Working Group
Ascension Day 2019

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A Covenant for Clergy Care and Wellbeing

Introduction

1. The care and wellbeing of the clergy is crucial to the health of the Church at worship, in mission, and in pastoral care. Healthy, fulfilled, maturing, joyful clergy who feel valued and supported are an enormous gift to the Church of God. A sense of being cared for and loved will give energy and vigour when they face ministerial or pastoral challenges. Clergy who can reflect upon their own ministry – its strengths and weaknesses – are much better placed to enable the ministry of the wider People of God than those who struggle to do this. Clergy who are themselves growing in a sense of vocation and in self-awareness will find themselves more able to adapt when faced with the need to change or with the changed role of the ordained minister in church and the wider culture.
2. At the same time there has been growing concern at the pressures on today's clergy which at its most acute can give rise to burnout, with all its associated personal ramifications for the individuals concerned, and financial and practical implications for the mission of God's Church. Both opportunities and concerns lay behind the proposal in 2017 to establish a Covenant for Clergy Wellbeing.
3. In July 2017 the General Synod debated and approved a motion from the House of Clergy in the following terms.

That this Synod:

- a. welcomes and supports the proposal to establish a Covenant for Clergy Wellbeing as laid out in GS2072; and**
- b. invites the Appointments Committee to appoint a Clergy Wellbeing Working Group to bring proposals for such a Covenant back to this Synod by July 2019.**

4. The Appointments Committee appointed the Working Group in September 2017, which included a range of Synod members together with non-Synod members with specific expertise in the field of pastoral care and wellbeing. The Group has met six times since then.
5. The Working Group decided in its early stages that it would use the framework of the Guidelines for the Professional Conduct of the Clergy 2015¹ as the structure for its considerations of issues concerning clergy care and wellbeing. Individual members prepared papers on each of the fourteen heading areas in the Guidelines, and each meeting included input from those members on their paper, together with extensive discussion.² The Group looked for emerging themes and issues and these, over time, began to shape a common viewpoint. Alongside papers based on the 2015 Guidelines, a theological paper was prepared by an external consultant, ensuring that the work of the Group was undergirded by biblical and theological themes. That paper is now fully incorporated as part of the Report. The Working Group is indebted to Reverend Dr. Margaret Whipp for her input and openness to our thinking and ideas.

¹ churchofengland.org/sites/default/files/2017-10/Clergy%20Guidelines%202015.pdf

² The papers are available online – see Annex D

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6. The motion as passed by Synod in 2017 referred to a *Covenant for Clergy Wellbeing*. In doing so, it took the Military Covenant³ as its inspiration. Although the parallels were never intended to be exact, it was thought that the Military Covenant offered a way of expressing mutual expectations that aligned adequately with biblical understandings of covenant. Nevertheless, in the light of our conversations, the Working Group adjusted the title of the proposed Covenant to *A Covenant for Clergy Care and Wellbeing*. We believe this inclusion makes more explicit the nature of pastoral care within a Christian context.
7. While the adequacy of the clergy remuneration package can clearly impact on clergy wellbeing, this issue was referred by the House of Clergy in July 2018 to the Archbishops' Council following a plenary discussion by the House. That concern is therefore being addressed outside the confines of this exercise.
8. From the outset, the Working Group has been concerned to provide something that would not languish in the annals of General Synod, but would contribute to actual change towards better and best practice. As our conversation has developed, five clear goals have emerged:
- **A Shift towards the Preventative:** it must be better to prevent a problem or crisis developing in the first place than to have one.
 - **A Shift towards Mutual Responsibility:** care and wellbeing are shared tasks involving a renewed sense of partnership between individual ministers, the local church/institution, the diocese and the national church. The Working Group is grateful to Dr Sean Cathie for his reminder that the care and wellbeing of the clergy needs to be firmly located within the wider framework of the church as a caring discipleship community. This also coincides with the feedback we have received through consultation regarding the need to align the work of clergy care and wellbeing with the work outlined in the report *Setting God's People Free*.
 - **A Shift towards Coordinated Response:** we believe that to shift to an approach to wellbeing that takes note of the needs of clergy from ministerial discernment through to retirement and beyond will develop a healthy culture of partnership.
 - **Culture Change:** what we propose offers a direction in which the church can shape its own culture towards greater concern for the health and wellbeing of its ordained ministers. It will be for the whole church to work at changing the culture.

³ "Soldiers will be called on to make personal sacrifices – including the ultimate sacrifice – in the service of the nation. In putting the needs of the nation and the Army before their own, they forgo some of the rights enjoyed by those outside the Armed Forces. In return, British soldiers must always be able to expect fair treatment, to be valued and respected as individuals, and that they (and their families) will be sustained and rewarded by commensurate terms and conditions of service. In the same way the unique nature of military land operations means that the Army differs from all other institutions, and must be sustained and provided for accordingly by the nation. This mutual obligation forms the Military Covenant between the nation, the Army and each individual soldier; an unbreakable common bond of identity and responsibility which has sustained the Army throughout its history. It has perhaps its greatest manifestation in the annual commemoration of Armistice Day, when the nation keeps covenant with those who have made the ultimate sacrifice, giving their lives in action." From 'Soldiering – the Military Covenant', Ministry of Defence, 2000. The consultation process around the first draft revealed considerable misgivings across the church about using the Military Covenant as a basis for the Covenant for Clergy Care and Wellbeing. The Working Party has therefore decided not to pursue the parallel in its final draft.

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- **Achievability:** what we propose is practical, pragmatic and useful at every level.
9. The Report below is in four main sections. It begins with Dr Whipp's theological essay. In the second section we offer a draft text for the Covenant for Clergy Care and Wellbeing. This begins with the preamble from the Declaration of Assent and then outlines the commitment we suggest the whole church can make to clergy care and wellbeing, with the focus on ministerial effectiveness and flourishing rather than competency.
 10. We then flesh out our Shared Commitments. These are based on the fourteen sections of the Guidelines for the Professional Conduct of the Clergy, distilled into four key areas: Baptismal & Ministerial Vocation, The Call to Care and Self-Care, The Minister as a Public Figure and The Minister's Household⁴. References are made to key biblical texts to support our shared commitments and to the relevant sections of the Guidelines. Each section invites the Minister, the Local Church and the Wider Church (expressed through the Office of the Bishop⁵) to consider their role and responsibilities in clergy care and wellbeing.
 11. The fourth main section attempts to initiate a Big Conversation on Clergy Care and Wellbeing arising from the Shared Commitments. Under each heading a series of mainly open questions is offered as a way of inviting active reflection and conversation on the issues they raise. These questions have been drafted with much of the Working Group's discussion implicitly in the background. They reflect the mind of the group on issues we consider important and often vital in the promotion of good care and wellbeing of the clergy. While these questions are grouped in such a way as to aim them at the minister themselves, the local church and the wider church, we do believe that the best way will be for dialogue and discussion to take place between the various parties involved. When clergy talk with their local church (or some representatives such as churchwardens), we believe this will help the local church understand their ministers' needs for care and support, and for the minister to know that s/he is being supported and encouraged by those with whom s/he most often meets and ministers alongside⁶. Equally, there is a conversation to be had between the wider church, the local church and its ordained ministers that we believe will help local ministers access more readily services offered by the diocese, charities and others and enable the wider church to offer to its ordained ministers what they actually need. The Working Group acknowledges that the desired changes will not come about through executive action alone but through a shared learning culture.

⁴ We have used this very general phrase, not to imply that the minister is in any way the head of the household, but simply to recognise that there are as many different households among the clergy of the Church of England as there are clergy. Similarly, such a phrase is intended to include, not exclude, retired clergy.

⁵ We have been aware that there is some confusion in the Church between the Person and the Office of the Bishop, which has also been a common misunderstanding in responses to the consultation process. While there are very many occasions where the bishop themselves will, as a person, wish to involve him- or herself in the care and wellbeing of their clergy, much of the care and wellbeing offered in any place will be given through the Office of the Bishop, which includes diocesan staff, professional services paid for by the diocese, Archdeacons, Area/Rural Deans and much more. There is a parallel here between a pastoral visit from the local Vicar to a parishioner and a similar visit which the Vicar asks a member of her ministry team to undertake. Both are in the name of the Vicar, but only one is a personal visit.

⁶ Some concern has been expressed in the consultation process about who exactly the 'local church' might be in the context of a conversation in which a minister might be making themselves vulnerable. We do not intend to be prescriptive: there is no 'one size fits all' answer.

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12. In all this this report does not bring forward a comprehensive set of proposals. Although the consultation process raised many issues of concern, we have resisted the temptation. In choosing to work in this way the Working Group recognises and accepts it cannot address the large number of specific issues that have been raised, which are many, often complex and wide-ranging. Nevertheless, it has become clear that the overall need for a consistency of approach to clergy care and wellbeing is welcome, and to some extent, overdue. We have come to see our task as one of essentially benchmarking and enabling the work that is the responsibility of others to deepen and flourish, but also of providing for the future. We wish to instigate and inspire a conversation across the Church of England about the care and wellbeing of the clergy, which will lead to action by all those responsible – ministers themselves, local congregations and PCCs, bishops and dioceses, the National Church Institutions, the Retired Clergy Association of the Church of England, and charities and other organisations involved. We suggest that such a conversation needs to be full and ongoing, *between* the parties concerned as well as *within* the structures and institutions that make up the Church of England. The instigation of such a conversation is given structural and institutional shape at the end of our Report, with a series of steps which could be set in train across the Church through the making of an Act of Synod passed by the General Synod.
13. There are a limited number of specific recommendations at the end of the paper which reflect concerns that either over-arch the whole Covenant or touch on matters we have considered especially important to highlight.
14. Our Report is written with parochial clergy primarily in mind to provide the necessary focus for what we have to say. That is not to say that the content is not applicable to other contexts⁷, nor that we are making any implicit judgement about the worth of parish ministry vis-à-vis other ministries. Indeed, we very much hope that what we have to say will be of great value to those ministering in other contexts.
15. We have been very aware of the risk of presenting this report as special pleading for the clergy. As a result we have kept in mind throughout the report *Setting God's People Free* [SGPF],⁸ and have been at pains to keep the focus of our report on ensuring that the clergy of the Church of England are supported and cared for in such a way as enables their own ministry (and those with whom they share their ministry) to thrive. Healthy, supported clergy are also effective clergy, able to focus on others as they address their own needs with realism and resilience. Many contributors to our consultation process have noted that SGPF (a key priority in the *Renewal & Reform* programme of the Archbishops' Council) is part of a wider vision for cultural change in the church that brings its own stresses and challenges to those who need to adopt and deliver it.
16. We have already emphasised the importance of encouragement. We could add the importance of mutual love as a shaping virtue. This has led us to focus on *mutual care and accountability* within the Church, encouraging clergy to enter openly into dialogue both with the local church/context where they serve and with the wider

⁷ These include chaplaincies, Fresh Expressions and other mission initiatives, sector ministry diocesan posts, Cathedrals, and the National Church Institutions.

⁸ GS 2056: A report from the Archbishops' Council on lay leadership, Feb 2017

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church. Therefore our report is shaped as a dialogue rather than a lengthy list of recommendations. In the field of care and wellbeing, it is not for the Working Group or the General Synod to impose themselves on the local church or its clergy; rather, this report is an attempt to express the mind of the church on clergy care and wellbeing at this moment, to be embodied in an Act of Synod, and to encourage the whole church to talk about these issues with a view to a shared approach, making changes together as they judge to be necessary. Where there are issues of specific concern, we name them in the recommendations towards the end of the report, but our tone and approach has been to try to enable and encourage rather than to insist.

17. Several members of the Working Group have raised the issue of *trust* as a vital element of any relationship of support and care. Trust is something that is given and earned and, where trust has broken down or is in short supply, none of our suggestions will easily be heard or appreciated. Nevertheless, we hope that, in inviting such a conversation as this, there is an opportunity to gain and offer trust afresh. Ministerial effectiveness and mutual care and accountability depend upon healthy, mature relationships; without trust, such relationships cannot thrive.
18. We recognise the importance of the implementation of the Covenant and its approach to clergy care and wellbeing. To that end, we propose towards the end of our report the establishment of a Facilitation Group, which can receive updates and responses over the coming years and make further recommendations to the whole church. We also invite the General Synod to consider receiving an update report from the Facilitation Group within the lifetime of the next General Synod. Our proposals are ones that have an eye to culture change which requires time to develop and grow.
19. The Working Group is grateful to Mr Jonathan Neil-Smith for his excellent administrative support over the lifetime of the Group's work and to all who have taken a close interest in what we are doing.

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Theological Essay (Dr Margaret Whipp)

Like the ordinal on which they are based, the Church of England's *Guidelines for the Professional Conduct of the Clergy* (Archbishops' Council, 2003) drew on a seam of Anglican theological reflection which is historic, pragmatic, and rich in scriptural wisdom. In the intervening years since those Guidelines were published, we have witnessed in the life of the Church both a keener challenge to the integrity of clergy conduct and an insistent concern for attention to clergy wellbeing, arguably as two sides of the same vocational coin.

Francis Bridger's theological reflection, published as an appendix to the *Guidelines*, sought to articulate key elements of that theological seam through a cluster of concepts of relationship and relationality, at the centre of which lay the idea of *covenant*. In taking up the theme of covenant as a model which is historic, pragmatic, and deeply scriptural, the Clergy Wellbeing Group has sought to enrich and extend the idea and practice of covenant as a fertile resource, not only for the formation and guidance of professional conduct, but also for the sustenance and renewal of clergy wellbeing.

Presented with mounting concerns about clergy wellbeing, the General Synod House of Clergy turned to a covenantal vision which was agreed for the Armed Forces (2010-2015). This Military Covenant articulates the mutual obligations which bind nation and government, army and individual soldier, and was commended as a potential model for the Church (HC(17)1). Although the parallels between clergy and military are in no way exact, it is remarkable that the ancient notion of a covenant should still find salience in civic as well as ecclesial life, providing inspiration and potential guidance for the outworking of complex and costly relationships of mutual care.

Building on this time-honoured model, the Working Group has not been content with fine words. We are seeking cultural change, and a new level of honesty in the Church about the impact of our practices on personal and corporate wellbeing. We have considered the realities of clergy life, for themselves and their households, and reflected deeply on the ways in which clergy wellbeing is bound up with the flourishing of the whole people of God.

The purpose of this essay will be to examine more deeply the understanding of covenant which is prized by the Church, to give theological context and grounding for the proposals embodied in a Covenant for Clergy Wellbeing.

The Eternal Covenant

You shall be my treasured possession (Ex. 19.5)

A vision of the Church as a covenantal community is deeply grounded in the witness of the scriptures; and it is an image which has been re-asserted with fresh prominence at various times throughout Christian history. Rooted in God's faithful relationships of creative and redeeming love, and building on the ancient covenants with God's chosen people of Israel, Christians rejoice in the experience of a gracious new covenant in Jesus Christ. These great historic narratives of interdependency, both Jewish and Christian, set a guaranteed seal of relational wellbeing for the future.

The narrative pattern of the covenant highlights the rich interconnectedness of human, social, and ecclesial life, within an ultimate dependence on the steadfast loving kindness of

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God-in-Trinity. The operative nature of a covenant takes the form of an agreement undertaken within relationships which are voluntary in nature, which generates commitments through the public exchange of promises (Doe, 2008).

Christian covenantal commitments reflect a fitting, and socio-historically particular, vocational response to the eternal grace of God. We commit to represent the loving faithfulness of God by reflecting it within the ordered relationships of Church life. This is expressed in public liturgical acts, such as ordination, which promise and seal between covenanting parties an enduring mutual commitment in the face of God's righteous love, and in dependence on God's blessing, for the sake of the common good and for the greater glory of God. The spiritual and moral character of Christian covenantal relationships thus reflects the covenantal faithfulness of God.

In the light of this covenantal vision, the sacred gifts of mutual trust create bonds of responsibility and care, expressed in openness and vulnerability, one to another, within the evolving life of a living and changing community. The promise of enduring mutual commitment entails privileges and emerging responsibilities which, of their nature, cannot always be fully specified in advance.

A vocation to ministry, motivated by gratitude, offers a means of grace to the whole community. This element of covenantal gratuity typically exceeds the limits of a contractual relationship, going the second mile in relationships which, whilst profoundly privileged, must to some extent involve an element of sacrifice. An unduly vivid sense of sacrifice, however, unless sustained by an equally vital experience of transcending grace and mutual generosity, can lead to exhaustion, guilt, and deteriorating personal and vocational identity.

It would be foolish to deny that human frailty and sin, within both individuals and institutions, may exploit and weaken the noblest of covenantal commitments and relationships. For this reason, contractual frameworks, such as role descriptions, by stipulating predetermined limits and safeguards, may provide some useful protection against the worst abuses of covenantal generosity. An unduly legalistic emphasis on entitlement and duty, however, can subtly debase and undermine the precious relational and gratuitous element which, within a fully theological understanding of covenant, is essential to our relationships of service and stewardship in the Church of Jesus Christ.

Sober warnings throughout the scriptural narrative teach us that covenantal commitments, explicit or implicit, are often broken. The consequence of such faithlessness brings pain and damage to the whole community, expressed most starkly in the form of curses (e.g. Deuteronomy 27-30). All communities, including the Church, face the temptation to forget the needs of their most vulnerable members, such as those who are no longer identified as contributing to visible or economic measures of success. Such faithlessness is condemned in the strongest terms within a covenantal moral code. Despite the damage and disillusionment caused by human irresponsibility, the grace of God remains an unfailing well of mercy and fresh hope that, with penitence and care, our fragile human commitments may yet be renewed and deepened for the future.

The Church is a community of deep memory, called afresh in each generation to witness to an eternal covenant of grace, and to a renewal of covenantal faithfulness one with another in the bonds of Christian service and mutual love.

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Covenant and Calling

You did not choose me, but I chose you. And I appointed you to go and bear fruit, fruit that will last. (John 15.16)

Within the new covenant of Christ, God calls his people into a royal priesthood. To serve this royal priesthood, according to the ordinal, 'God has given particular ministries ... that all may grow into the fullness of Christ and be a living sacrifice acceptable to God' (Common Worship, Ordination of Priests).

The purpose of ministry is directed towards fullness of life (John 10.10), which is properly understood as an unfolding of holiness within the lives of the Church's clergy and people. This theological conception of life in all its fullness is subtly different from, and deeper than, secular notions of 'wellbeing'. The 'wellbeing' or 'wholeness' to which clergy are called is rooted organically in their relationship to God, as branches of the living Vine, flourishing through the abundance of God's grace. In lives that are never less than fully human, we seek a holistic culture of wellbeing which flows from the grace of Christ into all the intricate relationships of the whole baptised people of God.

Grace comes first; and it is through the living flow of covenantal grace through the priests and people of God that the whole Church is called to fruitful service. The cyclical direction of this flow of grace was described by Frank Lake and Emil Brunner as proceeding out of a deep relationship of acceptance, through sustenance and secure status, to the outworking of achievement (Lake, 1986). This relationally resourced dynamic, from acceptance to achievement, is beautifully modelled for us in the life of Jesus, and runs counter to many prevalent and perverse understandings of service which conspire to drive the cycle in an opposite direction – from achievement to acceptance.

A virtuous cycle of grace will be one in which the ministers of Christ find vocational identity and nourishment for their self-expenditure in the service of all God's people. Fruitful ministry, in turn, will confirm their vocational identity, re-energising a life of service from a dynamic wellspring of mutuality and covenantal fulfilment. A constant flow of grace thus infuses a whole-some response to the call of discipleship, bringing glory to God and renewed blessing to others.

The challenge to wellbeing lies in those factors in the life of all clergy and churches which conspire to drive the cycle in a direction counter to grace. Many difficulties in our personal and collective experience spring from conscious, or less than fully conscious, feelings of not being accepted, and from the pervasive insecurity which this generates.

Where identity and vocation are insufficiently nourished and supported, clergy may be tempted to drive the work of ministry through an anxious preoccupation with outcomes, in a futile attempt to secure affirmation and spiritual significance for ourselves and our community of faith. An unholy 'drivenness' in the life of the Church can be symptomatic of deep-seated frustrations and fears from which we are yet to be fully redeemed.

The redemptive dynamics of grace, like the opposite dynamics of unhealthy drivenness and anxiety, may operate within individuals, communities, and whole cultures. Clergy, as representative ministers within the Church of Christ, are especially called to live and work publicly out of a dynamic of grace, both for their own wellbeing, and for the wider good of their Church and community.

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Understanding the currents of anxiety within individuals and in the corporate life of the Church will therefore be essential to our shared growth in holiness. A church, for example, which faces decline in social influence and economic stability will be prey to potent collective anxieties; and clergy who uncritically embrace a strong sense of responsibility for the thriving of church communities can be prone to corrosive fears of personal, and vocational, failure.

Patterns of relationship within church communities naturally play into these complex psycho-spiritual dynamics, either of drivenness, or of grace. Church members (both clergy and lay) who perpetuate an uncritical paternalism conspire to increase the burden of anxiety laid on leaders; whereas church members (both clergy and lay) who work graciously to foster a covenantal spirit of mutual responsibility, and to challenge inappropriate dependency, help to liberate clergy from an undue burden of anxiety. Church members (both clergy and lay) who face their shared anxieties in a spirit of courageous honesty and compassion can be agents of profound liberation and spiritual renewal for others.

In a Church which has many reasons to feel anxious, one of the most redemptive uses of power is to relieve less powerful members of their fears of one another. Clergy, and especially supervising and senior clergy, have a particular role to play in modelling the good news of freedom from pervasive anxiety and slavish overwork, so that all may serve in joyful communion with Christ and one another.

Partners in Covenant

Bear one another's burdens ... For all must carry their own loads. (Gal. 6.2,5)

Our covenantal story invites us to reflect on how the structure and character of relationships within the Church may better express the vision of mutual blessing and burden-bearing which is offered to all people in Christ. This will never be a matter of simply loading all expectations of care onto one section of the Church, such as the bishops. Although some clergy will be charged with a particular ministry of oversight, it is part of the calling of all God's people to grow in unity and maturity, 'to the measure of the full stature of Christ' (Eph. 4.13). This is attested, for example, in the ordination service where, following the solemn promises undertaken by ordinands, the congregation commits to prayer, support, and encouragement, for deacons and priests whose work of ministry will be shared, in turn, with their bishop. We are bound together, one with another, in relationships of trust.

A degree of strength and clarity is required in the articulation of mutual expectations which operate in a context of significant, though sometimes subtle, relationships of power. It is for this reason that covenantal agreements may take on a quasi-legal tone. Equally important, however, is the underlying basis of willing commitment, which can never be reduced to formulaic promises, but is always renewed in a spirit of gentleness and shared delight. An ordination service, for example, which is both solemn and affectionate, within a setting of deep sacramental joy, can reflect the best of this delicate balance.

The outworking of mutual relationships of responsibility and care will be the practical fruit of this covenantal framework. Human partners make their mutual commitments before the merciful judgement of God, who mandates continuing justice and loyalty between

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covenanting trustees. Holding the righteousness of God as our plumb line of trustworthiness, we may then consider the realities of our all-too human relationships which frame the lived context for wellbeing in ministry.

In the light of this relational justice, clergy have a duty of care for themselves as a prerequisite of their office to be those who are able to care for others. It is precisely in taking due care of themselves that the ministers of Christ maintain their vocation of service in the wider Church and community. Similarly, clergy will have continuing duties of care to those with whom they are in close relationship, especially when the sacrifices of ministry are passed on to their family and friends. Deacons, priests, and bishops will need to develop strong self-awareness and to maintain healthy boundaries if they are to keep watch over themselves and over the flock entrusted to them (Acts 20.28).

The duty of care in the Church extends beyond those who are ordained. Whilst clergy will be entrusted with a particular care and oversight for members of the community, our bonds of shared discipleship oblige all Christian people to exercise an appropriate mutual care so that those called to lead may do so 'with joy and not with sighing' (Heb.13.17).

As a matter of shared stewardship, any honest discernment of reasonable rather than reckless self-sacrifice should involve the whole community. Since 'if one member suffers, all suffer together', it follows that clergy wellbeing is a concern for everyone in the Church (1 Cor.12.26). A healthy covenanted community will learn to bear the tensions of caring and being cared for in a balance which has been aptly described as 'moderated love' or 'good enough' ministry (Campbell, 1984, Percy, 2014). Providing and engaging with effective relationships of supervision and support for clergy will be a crucial element in maintaining this organic balance.

The Anglican way honours both the shared accountability of the whole people of God and the personal agency of her ministers in the serious pursuit of holiness and covenantal wellbeing.

Covenant, contract, and culture

Diligently observe the words of this covenant in order that you may succeed in everything that you do. (Deut. 29.9)

Just as the tensions between law and grace runs throughout the Judeo-Christian tradition, so our understanding of ministerial accountability will be framed by both contractual as well as covenantal models of relationship (Gula, 1996). The contractual model, which has no necessary reference to God, emphasises the limitations of human professional relationships, which must be contained within careful boundaries. The covenantal model, by contrast, looks to the abundance of Christ, setting expectations which overflow with generosity, freedom, and hope. Adopting the model of a *covenant* for clergy wellbeing, therefore, invites careful reflection on the character of relationships to which we are being called in Christ, and the underlying quality of faithful trust in God which sustains and inspires the whole Church.

Relationships in Christian ministry are often highly complex, and fraught with inherited patterns of privilege and duty which are not always conducive to contemporary wellbeing. In the name of Christ, we may be called to challenge structures of captivity and blindness which, wilfully or otherwise, afflict and oppress the lives of clergy and people. Naming and

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engaging these structural forces, with honesty and openness, will require an element of codification and explicit commitment to relationships of transparent justice. Such is the necessary and quasi-legal aspect of any effective human covenantal agreement. It will be through a myriad of small challenges, commitments, and conversations that deep and lasting cultural change can be effected.

How much detail it is useful or necessary to specify will be a matter of debate. An earlier covenantal code laid down countless details for the just ordering of common life before God, many of which can seem irrelevant or misguided for later generations. Even small points of detail, however, can still point to enduring truths. The Deuteronomist's prohibition on the muzzling of working oxen, which was twice taken up and reinterpreted in the New Testament epistles, is a telling example of this necessary and ongoing hermeneutic in the life of God's covenant people (Deut. 25.4; cf. 1 Cor. 9.9, 1 Tim, 5.18).

Transcending all our proper concerns for just and sustainable patterns of tenure and reward, work and rest, supervision and support, remains this larger vision of sheer covenantal grace. Seeking the spirit more than the letter of the law, we long for a deeper wisdom and mutual generosity among the whole people of God, above and beyond any legalistic charter of duties, rights, and entitlements. Trusting in the goodness and renewing power of the Spirit, a faithful covenant for clergy wellbeing will encourage, above all, the practices of prayer and silence, creativity and rest, which enable those who are called by God not merely to serve him well, but to dwell deeply in his love (John 15.10).

Margaret Whipp, April 2018.

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The Covenant for Clergy Care and Wellbeing

20. The proposed text of the Covenant for Clergy Care and Wellbeing is as follows:

The Church of England is part of the One, Holy, Catholic and Apostolic Church, worshipping the one true God, Father, Son and Holy Spirit. It professes the faith uniquely revealed in the Holy Scripture and set forth in the catholic creeds, which faith the Church is called upon to proclaim afresh in every generation.

In its formularies, the Church of England recognises that God calls some to serve as deacons, priests and bishops to build up and equip the whole People of God.

Conscious that such a calling is both a privilege and a demand, we commit together to promote the welfare of our clergy and their households.

We undertake to work together to coordinate and improve our approach to clergy care and wellbeing so that the whole Church may flourish in the service of the mission of God.

Our Shared Commitments

21. In 2015 the Convocations of Canterbury and York promulgated in Acts of Convocation the *Guidelines for the Professional Conduct for the Clergy*. This document, drawing upon scripture and the ordinal, sets out the expectations that the church places upon clergy for the proper performance of their duties. It was drawn up by the clergy for the use of the clergy as a distillation and expressed understanding of the commitments taken up when a person is ordained in the Church of England⁹. The *Guidelines* express out how those commitments find their outworking today, and seek to be supportive, clear and relevant. They are divided into sections covering different aspects of ordained ministry, based on the Ordinal, and lay out expectation regarding commitments that are outward, towards God, the church and community, and inward, to the minister themselves.
22. However such a calling is never one-sided. The church which calls a person into ministry makes a commitment to support them in that ministry so that they in turn may support the church by serving to the best of their ability. Ministry is always in partnership with all the baptised community, in which the institution of the church, through the office of the Bishop, and the community providing the local context of ministry, work together in a number of commitments which can be both explicit and implicit, aimed at ensuring that the ministry of the whole People of God is wholesome and effective. It is in this context that the commitments below are drawn up, building upon the work done in the 2015 *Guidelines*, and again drawing upon Scripture and the Ordinal. In them the minister, the local church and the Bishop offer a series of mutual commitments which together serve to emphasise that this shared ministry is mutually-dependent for the benefit of all, and that in caring for those whom it calls the church also enables them in turn to promote the health of the whole body of Christ.

⁹ It should be noted that the *Guidelines* have become a benchmark for clergy conduct, as can be seen from their use in judgments of Tribunals held under the Clergy Discipline Measure.

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23. **A. Baptismal & Ministerial Vocation**

Scriptural Insights: Matthew 28:1-20; John 10:1-18; John 21:15-19; 2 Timothy 4:1-5
Guidelines for the Professional Conduct References: Calling, Servant Leadership, Learning & Teaching, Care, Care for the Carers, Public Ministry, Faith

Called by God, ordained ministers exercise Christ's ministry, not their own. As one calling among many, ordained ministry is relational, collegial, professional and accountable to others. Guided by the Spirit, as servants and shepherds, ordained ministers are called to discern and foster the gifts of all God's people and to be willing to work with and respect others. Disciple and teacher, the ordained minister follows Christ in prayer, reflection and study, growing in faith and resilience¹⁰. Learning and teaching are part of shared discipleship, empowering and encouraging the people of God.

The minister commits:

- under God to attend to their own care and wellbeing as part of their discipleship and as an office holder;
- to set aside time for rest, recreation, retreat, training and study for their own and others' flourishing and growth;
- to initiate regular conversations about baptismal and ministerial vocation with others.
- to understand how their conduct of their ministry is perceived and experienced within and beyond the church.

The local church commits:

- to support in prayer and action the ordained minister in their vocation to serve and to seeing their ministry thrive;
- to review its expectations of its ordained ministers in the context of new projects or initiatives and within its own vision and strategy;
- to ensure that the ordained minister has, and takes, opportunities for rest, recreation, training, retreat and study;
- to understand how the life of the local church is perceived and experienced by the ordained minister.

The wider church, exercised through the office of the Bishop, commits:

- to develop and sustain God's call and care in the lives of ordained ministers, through prayer, provision of properly resourced education and training, useful in good times and in bad, and supported through good policies and procedures;
- to provide education and training opportunities that will enable and encourage others apart from the ordained minister to work in partnership with them;
- to provide processes of selection and formation in which candidates for ordination become aware of their own need for care and are provided with training to assist in this;
- to understand how the life of the wider church is perceived and how it impacts upon the ordained ministers it licenses.

¹⁰ Resilience is the ability to adapt well in the face of adversity, trauma, tragedy or significant stress. Any idea that it means 'to man up' [sic] is wholly misguided.

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- to carefully assess the impact of new missionary models of ordained ministry upon clergy care and wellbeing.

24. **B. The Call to Care and Self-Care**

Scriptural Insights: Galatians 6:1-10; Hebrews 13:17; 1 Thessalonians 5:12-13

Guidelines for the Professional Conduct References: Care, Care for the Carers, Ministry at the Time of Deepest Need, Wellbeing

Called by God to a shared stewardship as servants, shepherds, messengers and sentinels, the ordained minister is to be both a provider and recipient of guidance and pastoral care. At times of ministry to people at times of deepest need, the ordained minister works collaboratively with other providers of care to alleviate human suffering. Given the strong association between physical and psychological health and wellbeing, the ordained minister attends to their own health and fitness to promote resilience, thus linking care and self-care.

The minister commits:

- to good stewardship of their own health and wellbeing in support of their call;
- to engage with others in regular reflection to develop insight, wisdom and relational skills in support of their ministry of pastoral care;
- to establish and observe appropriate personal and professional boundaries in pastoral care and safeguarding. This includes the responsibility for maintaining awareness of what resources are available from the wider church;
- to grow in awareness of the limits of their pastoral ability, their vulnerability and the need for them to signpost those in their care to others, monitoring their own needs and health during periods when they are providing demanding levels of care to others or where they face powerful external stressors;

The local church commits:

- to be active in offering care for the wellbeing and development of the minister;
- to do what it can to safeguard the minister's availability for pastoral ministry, especially at times of deepest need, by relieving them of tasks that can be undertaken by others¹¹, and by facilitating support for those with disabilities where required and welcomed;
- to express its concern for the health and wellbeing of the minister directly to the minister and, where appropriate, to those with pastoral oversight of the minister.

The wider church, exercised through the office of the Bishop, commits:

- in its role of having joint cure of souls, to provide good role models of healthy ministry, encouragement and loving accountability;
- to equip the minister for the ministry of care and to providing opportunities to reflect upon their practice of pastoral care, supporting their engagement with the disciplines of prayer, spiritual direction and life-long learning;
- to provide extended and professional support towards ordained ministers, including access to specialist occupational and psychological health services to work towards their greater resilience, rehabilitation or reparation;

¹¹ Many ministries are already shared by Pastoral Teams of course.

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- to communicate clearly the resources for the care of ministers and their households that are offered. This includes arrangements for the maintenance and improvement to clergy housing.

25. **C. The Minister as Public Figure**

Scriptural Insights: Acts 20:28; 1 Timothy 3:1-7; 1 Timothy 4:11-16; Acts 6:1-7

Guidelines for the Professional Conduct References: Public Ministry, Life and Conduct, Discipline, Reconciliation, Mission, Trust

Called by God, ordained ministers are public servants of Christ called to represent the Gospel to all in their cure. This involves presence and engagement, with particular attention to the powerless and marginal and to the work of reconciliation and peace making. Ordained ministers, by the very nature of their calling, are always in the public eye, as to some extent are members of the minister's household. Ordained ministers share in their ministry with the bishop, fellow clergy, and the wider people of God. The fundamental context of their ministry is collaborative and mutually accountable.

The minister commits:

- as office holder under God, to the character, shape and boundaries of this public service in conversation with the local and wider church;
- to be aware of the way in which their own life history and experience impinge upon their conduct and the risks associated with it;
- to participate in the wider life of the church, in respecting the office of lay leaders, and in exercising care in all forms of communication, including social media.

The local church commits:

- to recognise that the calling of the minister is to both church and community, and to work with the minister in a mutually accountable way;
- to be aware of the vulnerabilities that clergy face as public figures and to support them in times of difficulty;
- to respect the boundaries that the minister and their household should properly place around their home life, and to ensure that the necessary space associated with being a public figure is respected and, where necessary, reinforced.

The wider church, exercised through the office of the Bishop, commits:

- to support ministers in their public service through clear role descriptions, parish education, appropriate CMD, MDR, and wise counsel;
- when any necessary interventions in a minister's work or ministry are required, to proper consideration of, and provision for, the minister's care and wellbeing and that of their household;
- to equip those among their number charged with the care and wellbeing of the ordained ministers (and their households) with the necessary resources for their work.

26. **D. The Minister's Household**

Scriptural Insights: Titus 1:5-9; 2 Timothy 1:3-7; Romans 12:9-13

Guidelines for the Professional Conduct References: Public Ministry, Wellbeing, Ministry at the time of Deepest Need, Care for the Carers

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Given the public nature of elements of the work of the ordained minister, the support and encouragement of those who share their intimate lives with ordained ministers is a significant contribution to their care and wellbeing. This is particularly true when ordained ministers inhabit a home associated with a cure or ministerial post. It is therefore part of the responsibility of the whole church to provide for the minister's household.

The minister commits:

- to ensure that their own approach to ministerial work gives due regard to the needs of those with whom they share their lives as part of their ministerial vocation;
- to working with the local church to ensure that boundaries in relation to the minister's household are respected and, where necessary, enforced.

The local church commits:

- to work with the minister to ensure that boundaries in relation to the minister's household are respected and, where necessary, enforced;
- to take account of the care and wellbeing of a minister's household when any initiative, project or other aspect of ministerial work is being considered.

The wider church, exercised through the office of the Bishop, commits:

- to the extent that it is welcomed or required, to offer pastoral care to the minister's household;
- to ensure that the arrangements for the provision and the standard of maintenance of any property for a minister and their household are regularly monitored and, where necessary, improved.

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A Big Conversation on Clergy Care & Wellbeing: Questions for Consideration

27. Any process of benchmarking or detailed consideration of shared commitments will inevitably address a wide range of existing approaches. What follows therefore will apply to a greater or lesser extent to different ministers, local churches and the wider diocesan and national institutions. The Working Group believe that the illustrative set of questions below will assist in places where clergy care and wellbeing is not yet as fully considered and addressed as it might be, and in those contexts where such matters are already well-advanced and resourced. The questions can be used selectively to the extent to which they are helpful in different contexts.

28. **A. Baptismal & Ministerial Vocation**

Questions for the minister

- *How do you cultivate Christ-like habits? How do you keep the ‘tools’ of your ministry in good order? To what extent are you actively and enthusiastically engaged in ministry? What should you stop doing?*
- *How many conversations about vocation have you had with others in the past year? What would prevent you from having such a conversation, say, once a month?*
- *To whom do you talk about your care and wellbeing, within and beyond the place you serve?*
- *Some senior clergy and wellbeing professionals describe some clergy as ‘hard to reach’ in terms of offering care and promoting wellbeing. Some clergy experience senior clergy and wellbeing services as ‘hard to access’ in terms of receiving attention and accessing support. If any of this applies to you, what can you do to change the situation?*
- *What resources are offered to you by your diocese to promote care and wellbeing, both for prevention and in crisis? What steps do you need to take to be better informed about these? What do you most need in these?*

Questions for the local church¹²

- *How do you demonstrate your care for your ordained minister(s)? How do you know how this is received?*
- *In setting and reviewing local strategy for mission and ministry (e.g. a Mission Action Plan), what consideration will you include for the care and wellbeing of your minister(s)?*
- *Do you know when your ordained minister(s) has their Ministerial Development Review? Is there an opportunity for you to feed in to this or for your ordained minister(s) to share outcomes with you?*
- *How confident are you about identifying and raising matters of personal wellbeing with your ordained minister(s)? In cases of significant concern, how confident are you about raising such matters with the bishop¹³?*

¹² Throughout these questions, care needs to be taken to identify how best the local church can express its concern for clergy care or wellbeing. Given the wide variance of practice, such concern could be offered in many ways. It should always be offered in a way that is welcomed by the ordained minister.

¹³ Either in person or through Area Dean or Archdeacon. What matters here is the office of the bishop.

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Questions for the wider church and the bishop

- *What policies, procedures, education and training are in place to promote and encourage the care and wellbeing of the ordained ministers under your care, both for prevention and in crisis? How much of this training is undertaken by ordained ministers and lay people together?*
- *How have you embedded the 2008 Dignity at Work Policy in your diocese?*
- *How do your ordained ministers know what care and wellbeing resources are available to them? How do you know what your ordained ministers value or need in this?*
- *How do you ensure that informal encouragement of and concern for ordained ministers is offered alongside more formal opportunities¹⁴?*
- *How can you be better informed about successful programmes and ideas in place elsewhere in the Church of England and among our ecumenical partners? What can the NCIs do to promote such information sharing?*
- *What do you expect TEIs to do to prepare ordinands for the stresses and strains of ordained ministry? And what do you look for in Training Incumbents in IME Phase 2?*

29. B. **The Call to Care and Self-Care****Questions for the minister**

- *With whom do you regularly reflect on the practice of your ministry¹⁵? How can you develop your skills in reflective practice?*
- *To what extent are you enjoying good physical and mental health?*
- *The Guidelines for the Professional Conduct of the Clergy encourage the setting of healthy boundaries to which ordained ministers should aspire. What boundaries of time, space, skill and competency, both physical and psychological, do you aspire to? How are you doing?*
- *What signs of resilience do you recognise in yourself? How can you build on your qualities?*
- *What are the warning signs of stress and burnout as they affect you? Do you know where to go to find help, whether for diagnostic stress tests or other self-help tools, or support from within or beyond your diocese?*

Questions for the local church

- *What are your expectations of your ordained minister(s)? How reasonable are they and have you discussed them with your minister(s)?*
- *How do you encourage your ordained minister(s) to give the best of themselves in their care of others?*
- *How can you assist your ordained minister(s) in preserving healthy boundaries around their use of time and their homes?*
- *How can you help the ordained minister(s) to spot or avoid developing unhealthy patterns of work and ministry?*

¹⁴ Again, this question applies to anyone in an oversight role: Area Dean, Archdeacon, Bishop, training incumbent or line-manager.

¹⁵ These could include a work consultant, a deanery chapter, a supervisor, an accountability partner, a cell group, a ministry team,

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- *How do you support and facilitate the ministry of your ordained minister and/or their households, should disability¹⁶ and/or health problems restrict them or at times when extra help is welcomed?*

Questions for the wider church and the bishop

- *How are your bishops perceived as examples of giving care and attending to their own wellbeing¹⁷?*
- *How are your policies, procedures and provision geared towards preventative care, in promoting healthy ministry and preventing harm or evil? How are your senior team made aware of the latest research and developing good practice in clergy care and wellbeing?*
- *In achieving best practice in care, self-care must be matched by quality provision and explicit expectation from the wider church. What expectations and provision do you make available in your context?*
- *What resources do you make available to ordained ministers to reflect on their practice of pastoral ministry?*
- *In considering pastoral reorganisation or major initiatives across a diocese, how do you take into account issues of care and wellbeing among the clergy involved, including senior clergy?*
- *How well do you signpost resources available beyond the diocese that could assist ordained ministers?*
- *How well do you facilitate support for, and mutual sharing of experience between, ministers with disabilities, as and when they judge appropriate?*

30. **C. The Minister as Public Figure****Questions for the minister**

- *How much of your ministry is spent with those within and those not yet in the church? What do you think about a balance of 50/50 and what are your aspirations?*
- *What opportunities do you have to speak into the public space?*
- *How does your personality type (particularly the introvert/extrovert element) affect your ability to inhabit the public character of ordained ministry? What do you need to help you here?*
- *How do the 'givens' of contemporary church leadership (e.g. safeguarding, GDPR, fundraising, etc.) affect your ministry? Do you feel you are making the best use of the skills of the congregation and community to help you?*
- *Where are you vulnerable as a public figure? Are you able to manage this in a creative way?*
- *How are you perceived by others to respond to feedback and complaints?*

Questions for the local church

- *Do you think your expectations of the amount of time your ordained minister(s) spends with church members and those who do not (yet) go to church are reasonable?*

¹⁶ These should include chronic mental and psychological conditions as well as physical disabilities.

¹⁷ During the consultation process with the College of Bishops, there was widespread acknowledgement from members of the College that it was much harder to model good self-care and wellbeing than it is to encourage it in others. This clearly has to change and we would encourage the College to continue to reflect on how this can be done.

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- *Have you had a conversation with your ordained minister(s) about what are appropriate boundaries around their time and space, including when in their homes?*
- *There is widespread concern that many parish profiles and role descriptions are unrealistic and over-ambitious. When preparing and reviewing these, what do you think needs to be included to demonstrate your commitment to the care and wellbeing of the post holder you seek?*
- *Are you aware of the vulnerabilities of your ordained minister(s) as public figures? What might these be in your context?*

Questions for the wider church and the bishop

- *What do you need to ensure is included in parish profiles and role descriptions in terms of pastoral care and wellbeing?*
- *What training do you offer to assist ordained ministers in their role as public figures?*
- *In times of intervention in the life of a parish or minister (such as safeguarding, grievance or discipline), what additional resources of care and support are made available to those involved (members of their household, churchwardens, PCCs, and congregations)? And how do you obtain feedback on the experience of those who have faced such interventions?*
- *Do your licensing services reflect the commitments of the Clergy Covenant?*
- *What training, reflective practice and support do you provide to those, such as Area Deans, Lay Chairs, MDR Reviewers, Archdeacons and Bishops, who support ordained ministers in their work? How well do you consider they are resourced?*

31. **D. The Minister's Household¹⁸****Questions for the minister**

- *Where are the 'pressure points', if any, in the relationship between your intimate, family relationships and your wider ministry? How are these addressed or mitigated?*
- *Can you have an appropriate conversation with your local church about the boundaries between your wider ministry and your household's needs? If not, is there someone who can assist you?*

Questions for the local church

- *How can you most helpfully take part in a conversation with your ordained minister(s) about the 'pressure points' referred to above, and the ways the local church can support those in intimate relationship with them?*
- *Where an ordained minister has children who are members of your local church, what steps can you take to protect them from being 'singled out' or judged by different standards to other children?*

Questions for the wider church and the bishop

- *What support do you offer to clergy spouses, partners, children and others with whom they share their household lives? How do you know you are offering what they need?*

¹⁸ We stress the use of this phrase is meant to be inclusive, and not to imply that the minister is either 'head' of the household or entirely responsible for it. Human living is inextricably linked with those with whom it is most closely shared. We would encourage thought to be given by ministers and others as to how to include their households within this Big Conversation.

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- *What support and training do you offer to retired clergy, to the spouses/partners of deceased ordained ministers and to those who experience marital breakdown where one or both members of the couple are ordained ministers?*

32. To underline, we would strongly recommend that, as much as is possible, the discussion prompted by these questions is shared not only among the groups mentioned, but between them as well. We would encourage dioceses, parishes, and individual ordained ministers, to use this conversation to prompt new consideration of issues of clergy care and wellbeing across the board, and to use them as a template for ongoing conversations. A final recommendation below will invite dioceses to share their conversations with one another via a virtual forum.

Specific Recommendations

33. The Working Group has wanted to avoid, as much as possible, being too prescriptive about what should or should not be done in any specific place by any individual. However, there are a few issues that bear on the entire practice of ministry and our shared commitment to care and wellbeing of the clergy, which we wish to highlight.

34. **Pastoral Supervision & Reflective Practice.** Among many issues considered by the Working Group, none has attracted greater support and enthusiasm than the need for clergy to engage in some form of Pastoral Supervision. Pastoral Supervision is not line management but describes a disciplined, work-focused approach to reflecting upon the relationships that are key to ministry. While the Working Group recognises that opportunities for exploring ministerial practice in an informal way arise in well-organised Chapters and Cell Group meetings, best practice indicates that a structured process with a frequency and regularity, where clergy take time out to reflect upon their experiences and pay attention to their feelings, is required to enable them to remain congruent in their ministry. This reflection cannot only be done in isolation; nor can it be done effectively on an occasional, informal, basis; we all need others to help us develop our self-awareness, insight and skills in pastoral relationships.

35. Bishop David Walker has commented, “Those who are called to the most regular and intense pastoral work will almost certainly benefit from having supervision in the form common in the counselling world.”¹⁹ Here he is describing an approach to ministerial practice that is an accepted norm by the other caring professions, a resource that may be offered individually or in groups, by access to coaching, work consultancy or formal mentoring. The Working Group notes it would be particularly valuable at times of transition such as the move to curacy, and from curacy to first incumbency. A Consultant Psychiatrist known to a member of the Working Group has remarked that clergy are, to his knowledge, the only group of caring professionals who are not provided with access to the sort of pastoral supervision regarded as a norm elsewhere. Although we recognise that most clergy are office holders rather than employees, this merits serious reflection by the whole church.

36. ***We therefore would like to propose to the Church of England that we take the first steps towards establishing a culture where some form of non-***

¹⁹ David Walker, Clergy in a Complex Age: Responses to the Guidelines for the Professional Conduct of the Clergy, SPCK 2016

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managerial pastoral supervision becomes accepted practice rather than an exception. Today's clergy face increasingly demanding pastoral needs that are especially complex in a world where inadequate social care, poor provision of mental health services and social and emotional deprivation are often encountered in the course of their ministry. Clergy are in the front line of the church's response to such realities; the provision of pastoral supervision, will be a tangible sign of the church's commitment to responding to these needs. We recognise that this will take expertise and funding, but we believe its time has come and there is considerable commitment from the third sector organisations to support the church in this endeavour. Survey and anecdotal evidence bears out the positive impact of reflective practice groups and other forms of pastoral supervision on ministers' sense of wellbeing, e.g. *Salisbury Diocese Results of 2016 Wellbeing Survey*.²⁰ The Working Group have been reluctant to make definitive statements of what the Church of England most needs in terms of the care and wellbeing of the clergy, but if we were to make just one, it would be the vital need for provision for non-managerial pastoral supervision.

37. **IME Phases 1 and 2: Expectations & Formation in Wellbeing.** We have concluded very easily that one of the best contributions to preventative care is to ensure that training prepares both ordinands and the newly ordained for the life of a 21st century minister. We recognise from the outset that IME is already a very crowded field, with more added and little taken away. Nevertheless, in preparing men and women for a lifetime of ordained ministry - even more needed with the welcome emphasis on younger vocations – **there are good practices that can be embedded into the life of the ordinand and newly-ordained minister, in IME Phase 1 and Phase 2.** These include:
- an exploration of the nature of expectation – of self, church and God. We encourage TEs and Diocesan Directors of Training/Ordinands to make use of long-serving parochial clergy and retired clergy to assist in such work;
 - the inculcation of 'holy habits'²¹. Alongside the usual focus on prayer, study of scripture, confession and other 'spiritual' disciplines, we would want to add the promotion of a healthy lifestyle, an awareness of stress and burnout indicators and stress management, developing resilience, time-management (e.g. taking time for refreshment and renewal in a personal Sabbath from sundown the previous day to sun-up the day following a rest day), self-awareness²², spiritual direction and accountability, the minister as a public person, and financial management. We recognise that ordinands with considerable professional experience may well be an asset in enabling others to explore these issues, and we should avoid "infantilising" those in training by ignoring what their prior experience and knowledge bring to their formation;
 - working collaboratively with other clergy and lay people;
 - developing appropriate vulnerability and receptivity to feedback as a preparation for curacy and future MDR;

²⁰ salisbury.anglican.org/resources-library/ministry/clergy-terms-of-service/results-from-2016-wellbeing-survey-final-complete/view

²¹ "Our only hope is not more willpower; it is for a new set of habits" (Thomas Aquinas)

²² We would draw attention to Kahler's five common drivers that motivate us: Be Perfect, Be Strong, Hurry Up, Please Others and Try Hard. These drivers can lead to some very positive, as well as destructive behaviours.

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- in IME Phase 2, reflecting on early experience of pastoral ministry and the ability to engage in reflective practice. The encouragement of such reflection in TEIs needs to be accompanied by its ongoing use in the curacy period, especially in supervision with training incumbents. This could helpfully be monitored by diocesan training departments.
38. Nothing in what we say above should also take away the need for good in-service provision of training in the field of care and wellbeing. Continuing Ministerial Education programmes should all have elements which allow ordained ministers to access training in this area.
39. **Appointments to Posts and Licensing Services.** We have considered that one of the greatest sources of stress and burnout among ministers is the lack of focus and clarity over the nature of the ministerial task. Parish Profiles and Role/Job Descriptions²³ often reveal an over-challenging set of expectations, ranging from large numbers of churches to serve, unrealistic and competing sets of tasks, and the absence in them of any evidence of commitment to clergy care and wellbeing. We do not believe this to be deliberate, but rather that it can easily be addressed by some simple steps that would make a significant difference. These include:
- sufficient clarity and realism in the content and scope of Parish Profiles and Role/Job Descriptions. The role of the priest in the parish or ministry context could be given more thought in the context of drawing up profiles. It is open to the bishop to add a statement to a Parish Profile if s/he felt there were things that need to be said. We would recommend that care and wellbeing are referenced in parish profiles;
 - ongoing reviews of Parish Profiles and Role/Job Descriptions. Given that Parish Profiles and Role/Job Descriptions form the basis of the appointment of ministers, they could be used more actively in MDR as a basis for reflection on ministry. Furthermore, a Parish Profile and Role Description can be a living document, accompanying such strategic tools as Mission Action Planning (e.g. “in the light of this MAP what do we need our ordained minister(s) to focus upon, and how is that shared with and supported by the congregation/PCC?”), which could provide ministers with greater clarity about the role they need to be undertaking;
 - we are particularly keen to see care and wellbeing of the clergy acknowledged in the context of Licensing and Induction Services. Such liturgical acts bring together minister and local church, public and congregational figures, the minister’s nearest and dearest, and other local clergy. This is a fitting place in which commitments can be made to the minister’s care and wellbeing (and to any family) by those present. It has been noted that, in some ways, a licensing or induction service is akin to a marriage, with open-ended commitments being given and received. **We would recommend to the House of Bishops that resources be provided for use at such services that would highlight the commitment of bishop and people to the minister’s care and wellbeing, alongside the more familiar commitments of the minister to serve church and community and the swearing of oaths.** Similar opportunities exist at the swearing-in of Church Wardens.

²³ Most clergy have a Role Description, but clergy employed in various posts can have a more formal Job Description.

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- we are also grateful to those in Non-Stipendiary and Self-Supporting ministry who highlighted the need for clarity in their roles, especially when parishes are in vacancy or when maternity/paternity/parental leave is taken, given that these can be particularly stressful times.

40. **Ministerial Development Review.** MDR is now an established part of the life of the ordained minister in the Church of England. For many it is proving an invaluable opportunity to reflect upon their life and ministry with a third Group; for others it remains a duty to be undergone; a few choose to avoid it altogether by virtue of their being the remaining freehold incumbents. Nevertheless, despite the challenge it presents to capacity in smaller dioceses, the Working Group sees the great value and further potential in MDR and wishes to see it develop further and embedded more deeply into ministerial life. **During our discussions some issues have emerged for consideration by dioceses and the national church** including:

- the use of Parish Profiles, Job/Role Descriptions as a resource for reflection and review (see para 39 above);
- the development of a degree of consistency across dioceses to develop some degree of quality assurance, with a higher level of sharing of good practice across the national church;
- the importance of giving ordained minister(s) the opportunity to reflect on their own care and wellbeing within the MDR process;
- more effective signposting and follow-up from MDR interviews to give confidence that the minister has been heard.

41. **Sharing Good Practice.** The ability of the Church of England to work in silos and to develop local responses independent of what has been learned and experienced elsewhere is well-known. We have also discerned that this is the experience of those in the church's 'Third Sector' as well, who often work independently of one another, and occasionally in unacknowledged competition²⁴. In these days of social media, and where every diocese and Third Sector organisation has an online presence, we do not believe it would be difficult for someone to take ownership of encouraging the sharing of expertise and good practice. **We would encourage all involved, especially at national level, to give thought to how best to share learning and resources, perhaps through some virtual forum.**

Implementation and an Act of Synod

42. Mutual accountability is a hallmark of Christian life within the church. GS 2072 (the original paper considered by General Synod in July 2017) noted that "the mechanism of an Act of Synod enables the [General] Synod to express the mind of the Church on an issue". The Working Group believes that the Covenant for Clergy Care and Wellbeing proposed would mark the beginning of a culture change towards greater awareness of our shared responsibility to promote clergy care and wellbeing, and a significant move towards preventative alongside responsive care. As such, and noting that an Act of Synod has moral, not legal force, we believe the Covenant's commitments are suited to such an expression.

²⁴ Members of the Working Group attended a Symposium organised by St Luke's Healthcare in Spring 2018 which gathered to address this very challenge. We were pleased to note that there was great enthusiasm to continue to meet.

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43. We ask that the Business Committee, in accordance with the Synod resolution of July 2017, schedule a debate on this paper in July 2019, with a view to the following motion being adopted:

That this Synod:

- a. adopt the Covenant set out at paragraph 20 of GS 2133 as a statement of its commitment to clergy care and wellbeing;
 - b. request the Business Committee, with the agreement of the Presidents, to make arrangements so that the Covenant can be affirmed and proclaimed an Act of Synod at the February 2020 group of sessions;
 - c. request the Clergy Wellbeing Working Group to oversee the transformation of the proposals contained in GS 2133 into actual practice, in particular by making the Shared Commitments and Big Conversation (at paragraphs 21 to 32 of GS 2133) available online in a way that enables their practical use by clergy, parishes, deaneries and dioceses by the end of 2019;
 - d. request the Appointments Committee to appoint members to a Clergy Care and Wellbeing Facilitation Group to encourage and evaluate progress in the field of clergy care and wellbeing across the Church of England, with a view to the Group reporting to the General Synod within the 2020-25 Quinquennium.
44. Following such a debate, we would ask that the Business Committee schedule a debate under Standing Order 41 at the February 2020 Group of Sessions that the Covenant in Paragraph 20 be made an Act of Synod. **Such a motion would need to be moved by one of the Presidents, and we are encouraged to hear of their willingness to do this.** The Working Group believes making this Covenant an Act of Synod will go some way to underlining that this is a commitment of the whole church to clergy care and wellbeing and thus mitigate the risk that it be seen solely as a central initiative imposed on the wider church.
45. In the intervening time between July 2019 and February 2020, the Shared Commitments and Big Conversation elements would be transformed into a user-friendly suite of documents prepared to assist the three audiences addressed by this report (the minister themselves, the local context and the wider church) in engaging in as constructive and helpful a way as possible in the Covenant process.
46. The Working Group notes that Section 4(1) of the Synodical Government Measure 1969 invites Diocesan Synods “to consider and express their opinion on any matters referred to them by the General Synod”. Further to this Section, we would invite the Business Committee to table a motion for brief debate in the February 2020 Group of Sessions, alongside the debate on the Act of Synod referred to above, as follows:
- in respect of *Diocesan Synods*, to invite them to–
 - debate and consider the Covenant for adoption by the end of 2020
 - ask PCCs and, if they wish, Deanery Synods of each diocese to consider and adopt the Covenant within a year of their Diocesan Synod debate and to subsequently engage in The Big Conversation using the resources referred to in paragraph 45;
 - in respect of *Diocesan Bishops* that, unless a bishop has done so within the previous two years, to invite each of them to sponsor a Clergy Study Day on

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Care and Wellbeing in their diocese within eighteen months of the Act of Synod being made;

- in respect of *Diocesan Synods, Diocesan Bishops, TElS, NCIs and (if they wish) those working in the charitable Third Sector* report back to a Clergy Care and Wellbeing Facilitation Group (established by this Synod) on developments and learning since the Report was agreed. We note that the issue of clergy care and wellbeing involves a number of staff at Church House currently supporting the Ministry Council and RACSC. This Facilitation Group could help bring them together with others working in this area to help ensure a fully joined-up approach to clergy care at the national level. Draft Terms of Reference for the Facilitation Group are contained in Annex A.

Canon Simon Butler
Chair, Clergy Wellbeing Working Group
Ascension Day 2019

GENERAL SYNOD**Annex A: Draft Terms of Reference for a Clergy Care and Wellbeing Facilitation Group²⁵**

The Clergy Care and Wellbeing Facilitation Group would be a time-limited group with a brief to report back to General Synod within the 2020-25 Quinquennium on the progress on

- (a) The extent to which dioceses are making provision for supervision/reflective practice and other related support;
- (b) The extent to which the culture within the Church is changing regarding clergy care and wellbeing (as manifested in such areas as IME Phases 1 & 2; MDR processes; Induction Services and Parish Profiles/Clergy Role Descriptions).

The Group should also report on:

- i. The outcome of the debates in each Diocesan Synod on the Covenant that will have taken place by the end of 2020, together with any new issues raised ;
- ii. Developments within dioceses, parishes and TEIs which have taken place in the light of The Big Conversation encouraged by this report and by clergy study days and other initiatives;
- iii. The availability of online and other support for implementation in dioceses, and the ways in which sharing across parishes, dioceses, TEIs and the Third Sector has developed; and
- iv. its own reflections and further recommendations about how to make continuing progress in the area of clergy care and wellbeing.

It is envisaged that the group would include representation from a cross section of dioceses, TEIs and Clergy Charities. The expertise residing in the group would be made available for the encouragement of dioceses and others in their discharge of the above.

Whilst the group would be supported by staff from the Ministry Division, staff supporting RACSC who are also involved in clergy care and wellbeing would contribute to its work, thereby encouraging a joined-up approach to the issue at national level.

²⁵ These terms of reference can be refined by the Appointments Committee once the Report is approved.

GENERAL SYNOD**Annex B: Members of the Clergy Wellbeing Working Party**

The Revd Canon Lisa Battye, Team Vicar of Didsbury #
 The Revd Canon Simon Butler (chair), Vicar of St Mary Battersea & Prolocutor of the Lower House of the Convocation of Canterbury #
 The Revd Preb Simon Cawdell, Team Rector of Bridgnorth #
 Mrs Debbie Childs, Diocesan Secretary, the Diocese of Leeds
 Dr Simon Clift, Consultant in Occupational Medicine, Thrive Worldwide #
 Ms Jan Korris, Trustee, St Luke's Healthcare for the Clergy
 The Revd Preb Alan Moses, Vicar of All Saints' Margaret Street #
 The Ven Pete Spiers, Archdeacon of Knowsley and Sefton #
 Mrs Jacqueline Stamper (deputy chair), former senior manager in higher education #
 The Rt Revd Dr John Thomson, Bishop of Selby
 Dr Yvonne Warren, Psychotherapist, and clergy wife #

Consultants

The Rt Revd Karowei Dorgu, Bishop of Woolwich
 The Revd Canon Dr Margaret Whipp, Lead Chaplain Oxford University Hospitals NHS Foundation Trust

Member of the General Synod

Annex C: Contributory Papers by Members of the Working Party

<https://www.churchofengland.org/media/11773>
<https://www.churchofengland.org/media/11770>
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