

GUIDELINES FOR TREATMENT OF A CHEMICALLY DEPENDENT PROFESSIONAL LEADER

At a meeting of the Committee for Theological Education and Leadership, the following guidelines, which are designed to assist a chemically dependent pastor recover from an addiction, were adopted.

PREAMBLE

Chemical dependency is a treatable human disease which manifests itself in physical, mental and spiritual impairment of individuals and families. The church, as a redemptive community of Christians, has a responsibility to minister compassionately to the needs of everyone afflicted by this illness, through intervention, guidance and education, helping them to experience the love of Christ and his healing ministry. It is understood that the treatment of chemical dependency needs to be approached with caring, rather than punitive actions.

1. In keeping with the synod bishop's responsibility to "serve as a leader and counselor to the congregations and ordained ministers..." (MNO Synod Constitution Article XI, Section 7 (a) the bishop will facilitate treatment and care for professional leaders who are chemically dependent.
2. The chemically dependent professional leader is encouraged to seek treatment and/or the assistance of the bishop without fear of punitive action.
3. If there is evidence of chemical dependency, which interferes with the performance of ministry, and the professional leader denies such dependency, the bishop can require an assessment by a certified agency that deals with chemical dependency (e.g. Alcoholism Foundation of Manitoba).
4. Following an assessment by a certified agency that there is chemical dependency, a treatment plan will be drafted and implemented by the agency. The bishop and the congregation or the employing agency will be consulted regarding the treatment.
5. If the treatment requires absence from employment the sick leave provision of the call applies.
6. Provincial health Care Insurance normally covers the cost of treatment.
7. The congregation or employing agency is encouraged to provide job security following treatment.
8. Recovery is an ongoing process. The professional leader is encouraged to participate in an ongoing treatment plan (e.g. AA).
9. Relapses may occur and should not be viewed as ultimate failures, if the professional leader returns to an approved treatment.
10. The bishop shall be in regular contact with the professional leader and the congregation or employing agency regarding the professional leaders ability to function effectively in ministry. If the congregation or employing agency believes that the professional leader is unable to function effectively in ministry, an advisory committee may be requested. (Synod Constitution: Article VII, Section 7).