

# Carlisle Diocese Clergy Survey 2009



## SECTION 1: YOUR MINISTRY IN CARLISLE DIOCESE

**Q1** In total, how long have you .....

Served in Carlisle Diocese  Served in your current post

**Q2** Which of the following best describes the tenure of your main ministry role?  
PLEASE TICK ONE BOX FOR MAIN ROLE ONLY

Freehold	<input type="checkbox"/>	NSM with significant secular employment	<input type="checkbox"/>
Other stipendiary	<input type="checkbox"/>	NSM with little or no secular employment	<input type="checkbox"/>
Salaried (eg chaplaincy)	<input type="checkbox"/>	Curate in Training	<input type="checkbox"/>
House for Duty	<input type="checkbox"/>		

**Q3** Do you work full time or part time? (if several ministry roles, please combine for total time)

Full time  Part time

**Q4** Which of the following best describes your current benefice type?  
PLEASE TICK ONE BOX ONLY

Not in parish ministry	<input type="checkbox"/>	Multiple parish, single clergy	<input type="checkbox"/>
Single parish, single clergy	<input type="checkbox"/>	Multiple parish, multiple clergy	<input type="checkbox"/>
Single parish, multiple clergy	<input type="checkbox"/>		

**Q5** Which of the following best describes the area in which you mainly minister? PLEASE TICK ONE BOX ONLY

Village/scattered settlements	<input type="checkbox"/>	Urban	<input type="checkbox"/>
Small town	<input type="checkbox"/>		

**Q6** Which Deanery are you based in?

Not Deanery based	<input type="checkbox"/>	Calder	<input type="checkbox"/>	Kendal	<input type="checkbox"/>
Appleby	<input type="checkbox"/>	Carlisle	<input type="checkbox"/>	Penrith	<input type="checkbox"/>
Barrow	<input type="checkbox"/>	Derwent	<input type="checkbox"/>	Solway	<input type="checkbox"/>
Brampton	<input type="checkbox"/>	Furness	<input type="checkbox"/>	Windermere	<input type="checkbox"/>

**Q7** How many of the following are in your ministry team?

PLEASE WRITE IN NUMBER OF PEOPLE – INCLUDING YOURSELF

Full time clergy	<input type="text"/>	NSMs	<input type="text"/>	House for Duty	<input type="text"/>
Part time clergy	<input type="text"/>	Readers	<input type="text"/>	Other (please specify)	<input type="text"/>
Retired clergy	<input type="text"/>	CLMs	<input type="text"/>	.....	

## SECTION 2: MINISTRY & SUPPORT

**Q8 To what extent do you agree that the following are supportive of you in your ministry?**

	Strongly agree	Tend to agree	Tend to disagree	Strongly disagree	Not applicable
Bishop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Archdeacon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rural Dean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Training incumbent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Team Rector or equivalent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other members of ministry team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Churchwardens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PCC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Colleagues (outside ministry team)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Church House	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q9 Overall, to what extent do you agree your style of ministry is affirmed by the following?**

	Strongly agree	Tend to agree	Tend to disagree	Strongly disagree	Not applicable
Bishops	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Archdeacon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rural Dean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Training incumbent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Team Rector or equivalent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other members of ministry team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Churchwardens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PCC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Colleagues (outside ministry team)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q10 To what extent do you agree you have the support you need to implement the Diocesan Vision in each of the following areas?**

	Strongly agree	Tend to agree	Tend to disagree	Strongly disagree
Worship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ministry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discipleship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Young People	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Giving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q11 To what extent do you agree you have the resources (human and physical) you need to implement the Diocesan Vision in each of the following areas?**

	Strongly agree	Tend to agree	Tend to disagree	Strongly disagree
Worship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ministry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discipleship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Young People	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Giving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q12 What single thing would most help you to carry out your ministry more effectively?**  
**PLEASE WRITE IN**

**If you are not in parish ministry, please go to Q15, otherwise please answer the following questions. If you are responsible for more than one parish, please provide a score for EACH of your parishes.**

**Q13 On a scale of 1-5, how do you think the following aspects of ministry in each of your parish(es) have changed over the past year?**  
 Please score each parish in a separate column out of 5, where 1 is decreased a lot and 5 is increased a lot

	Parish(es) A-J									
	A	B	C	D	E	F	G	H	I	J
Attendance at services										
Attendance at courses/groups										
Financial health of the parish										
Spiritual health of the congregation(s)										
Interaction with young people										
Interaction with adults										
Lay involvement										

**Q14 How would you rate each of your parish(es) against the following marks of a healthy church?**

Please score each parish in a separate column out of 10, where 1 is poor and 10 is ideal

	Parish(es) A-J									
	A	B	C	D	E	F	G	H	I	J
Energised by faith										
Outward looking focus										
Seeks to find out what God wants										
Faces the cost of growth and change										
Operates as a community										
Makes room for all										
Does a few things and does them well										

**Q15 On average, approximately how many hours a week do you spend on ministry duties? PLEASE WRITE IN NUMBER OF HOURS**

**Q16 On average, what proportion of your ministry time is spent on the following duties? PLEASE WRITE IN PERCENTAGE AND ENSURE ADDS UP TO 100%**

Sermon/service preparation	<input style="width: 50px; height: 25px;" type="text"/>	Development/support of lay ministry	<input style="width: 50px; height: 25px;" type="text"/>
Leading Services	<input style="width: 50px; height: 25px;" type="text"/>	Mission/outreach	<input style="width: 50px; height: 25px;" type="text"/>
Occasional offices	<input style="width: 50px; height: 25px;" type="text"/>	Other Deanery/Diocesan roles	<input style="width: 50px; height: 25px;" type="text"/>
Pastoral care/visiting	<input style="width: 50px; height: 25px;" type="text"/>	Study/theological reflection/prayer	<input style="width: 50px; height: 25px;" type="text"/>
Meetings/committees/admin/finance	<input style="width: 50px; height: 25px;" type="text"/>	Other ministry duties (please specify	<input style="width: 50px; height: 25px;" type="text"/>
School work (assemblies, Governor etc)	<input style="width: 50px; height: 25px;" type="text"/>	.....	
Teaching/leading groups/classes	<input style="width: 50px; height: 25px;" type="text"/>	.....	

**SECTION 3: TRAINING / DEVELOPMENT**

**Q17 How often do you feel you are asked to undertake tasks for which you do not have the skills?**

Regularly  Occasionally  Hardly ever  Never

**Q18 Overall, how would you rate the skills and knowledge you have against those required to exercise your ministry effectively?**

	Excellent	Adequate	Need a little improvement	Need a lot of improvement
Practical skills (eg how to do things)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge/wisdom (eg theology)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal qualities/attitudes (eg listening skills)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q19 To what extent do you agree you have sufficient opportunity to develop the skills and knowledge you need to exercise your ministry effectively?**

	Strongly agree	Tend to agree	Tend to disagree	Strongly disagree
Practical skills (eg how to do things)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge/wisdom (eg theology)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal qualities/attitudes (eg listening skills)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q20 Approximately how many days in the past year have you spent on the following forms of personal learning/development? PLEASE WRITE IN NUMBER OF DAYS**

Short courses (up to 1 day)	<input type="text"/>	Desk based learning	<input type="text"/>
Other courses (over 1 day)	<input type="text"/>	Other	<input type="text"/>
Conferences	<input type="text"/>		

#### **SECTION 4: REVIEW / APPRAISAL**

**Q21 Have you participated in the Ministerial Review process in the last 12 months?**

Yes  go to Q22                      No  go to Q28

**Q22 To what extent do you agree that the Review has enabled you to ....?**

	Strongly agree	Tend to agree	Tend to disagree	Strongly disagree
Reflect on your personal ministry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Set your personal objectives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Set your ministerial objectives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Review your objectives from the previous year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Identify your current training needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q23 How would you rate the following aspects of the Review .....**

	Excellent	Good	Moderate	Poor
Questionnaire & report forms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer's understanding of your role/responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer's ability to ask constructive questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewer's listening skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q24 Overall, how useful did you find the Review process?**

Very useful       Useful       Not particularly useful       Not at all useful

**If you would like to comment further about the Review process, please do so here.**

**Q25 Have you participated in the Appraisal process in the past 3 years?**

Yes  go to Q26 No  go to Q28

**Q26 To what extent do you agree that the Appraisal has enabled you to .?**

	Strongly agree	Tend to agree	Tend to disagree	Strongly disagree
Assess your professional development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assess your ministerial performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Identify issues that need to be addressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Review your recent ministry objectives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Identify your current training needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q27 Overall, how useful did you find the Appraisal?**

Very useful  Useful  Not particularly useful  Not at all useful

**If you would like to comment further about the Appraisal process, please do so here.**

**SECTION 5: WORKLOAD / QUALITY OF LIFE**

**Q28 Which of the following best describes your view of the balance between your ministry and home life? PLEASE TICK ONE BOX ONLY**

- I spend far too much of my time working and not enough at home/leisure
- I spend a bit too much of my time working and not enough at home/leisure
- I am happy with how my time is divided between working and being at home/leisure

**Q29 Where do you see yourself in 3 years' time? PLEASE TICK ONE BOX ONLY**

- |   |                          |   |                          |
|---|--------------------------|---|--------------------------|
| Due to retire within 3 years                                      | <input type="checkbox"/> | Non-parish ministry role in this Diocese      | <input type="checkbox"/> |
| Parish ministry in same parish as now                             | <input type="checkbox"/> | Non-parish ministry role in different Diocese | <input type="checkbox"/> |
| Parish ministry in different parish but still in Carlisle Diocese | <input type="checkbox"/> | Not in any form of ministry                   | <input type="checkbox"/> |
| Parish ministry in different Diocese                              | <input type="checkbox"/> | No opinion / prefer not to say                | <input type="checkbox"/> |
| Same non-parish ministry role as now                              | <input type="checkbox"/> |   |                          |

**Q30 On balance, how satisfied are you with your life in general at the moment? PLEASE TICK ONE BOX ONLY**

- |                |                          |                   |                          |
|----------------|--------------------------|-------------------|--------------------------|
| Very satisfied | <input type="checkbox"/> | Dissatisfied      | <input type="checkbox"/> |
| Satisfied      | <input type="checkbox"/> | Very dissatisfied | <input type="checkbox"/> |

**If you live in Diocesan property, please go to next question, otherwise go to Q32.**

## SECTION 6: HOUSING

**Q31** If you currently live in Diocesan property how satisfied are you with the following?

	Very satisfied	Satisfied	Dissatisfied	Very Dissatisfied	N/A
Contact with Church House on property issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speed with which <u>ongoing</u> repairs & maintenance works are completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard of work on <u>ongoing</u> repairs & maintenance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speed with which work <u>arising from inspection</u> is completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard of work <u>arising from inspection</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## SECTION 7: ABOUT YOU

**Q32** Are you?

Male

Female

**Q33** Which of the following age groups are you in?

Under 25

35 – 44 years

55 – 64 years

25 – 34 years

45 – 54 years

65 or over

**Q34** Do you consider yourself to have a disability or long term limiting condition that affects your daily activities or the work you are able to do?

Yes

No

Prefer not to say

If you would like to make any comments about any aspect of ministry in Carlisle Diocese, please use the box below (NB: if you require a response, please provide your contact details; doing so will not affect the confidentiality of your other responses).

*Continue overleaf if necessary*

Thank you for taking the time to fill in this questionnaire. Please return it no later than 30<sup>th</sup> September 2009 to ELM Research, PO Box 2096, WIGTON, Cumbria CA7 7AF or email to [surveys@elmresearch.co.uk](mailto:surveys@elmresearch.co.uk)