



Report of the Economic Development and Corporate Issues Scrutiny Panel

Revisit of the review of sickness absence in
North Lincolnshire Council completed in
December 2003

February 2010

The Economic Development and Corporate Issues Scrutiny Panel's role is to monitor or examine corporate, strategic, economic development or cross-cutting services delivered by the council and its partners, It also monitors the work of the Cabinet and individual Cabinet Members within these terms of reference.

This report is the end result of a review into a particular subject. It sums up how the review was carried out, the panel findings, consideration, conclusion and recommendations for any improvements that could be made.

SCRUTINY REPORT

Policy Review – Re-visit - The Review of Sickness Absence in North Lincolnshire Council December 2003

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INTRODUCTION BY THE CHAIR OF THE ECONOMIC DEVELOPMENT AND CORPORATE ISSUES SCRUTINY PANEL

Attendance and absence is a vast subject area, with extremely complicated inter-relationships between relevant factors. Sickness absence reviews are not new to this council it has been examined by Overview and Scrutiny on two previous occasions prior to this review and is a subject we are keen to keep an eye on.

We have to remember that the question of how the council as an organisation manages attendance will invariably provoke an emotive response. No one likes to have their performance questioned, not least when the cause of poor levels of attendance may be very personal or emotionally distressing. However, staff delivers council services, and they are therefore our principal resource in delivering quality services to our residents.

Many of the concerns voiced about attendance management as a practice emanate from a concern that it is unfair to penalise in employment those who are 'genuinely ill'. I want to make it clear that this panel was not seeking to pass judgement on whether sickness is real, feigned or exaggerated. Our driving concern in managing attendance is to reduce the levels of sickness where possible and ensure we are able, as a council, to deliver the services that we have an obligation to provide. In doing so North Lincolnshire council employs 7,307 staff and it is a fact that people are going to be ill from time to time.

It is important in looking now at how attendance is managed in the authority. We need to look to revise not only the process by which we manage, but also the way we train, develop and encourage managers to affect that process.

I would like to thank anyone who has, in any way, been involved. I believe that our review has 'added value' to the work previously undertaken and to ongoing debate.

**Councillor Allan Smith
Chair of the Economic Development and Corporate Issues
Scrutiny Panel**

**MEMBERSHIP OF THE ECONOMIC DEVELOPMENT AND
CORPORATE ISSUES SCRUTINY PANEL**

Councillors: Allan Smith (Chair)
Ivan Glover (Vice-Chair)
Mashook Ali
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ABBREVIATIONS

This report is written as far as possible in plain English with the minimum of jargon. All acronyms are spelt out in full when they first appear but for the sake of clarity their meanings are repeated here.

FTE - Full Time Equivalent

PIP - Performance Improvement Panel

HR - Human Resources

OHS - Occupational Health Service

1. THE SELECTION AND SCOPE OF THE REVIEW

The Economic Development and Corporate Issues Scrutiny Panel is responsible for carrying out the relevant functions relating to services delivered by the council and its partners. This includes local and regional economic development and corporate and strategic services or cross cutting issues.

In October 2001 the former scrutiny panel 1 commenced a review on sickness absence within North Lincolnshire Council with a brief to: -

- Review existing policy and practices within North Lincolnshire Council with an overall aim to reduce sickness levels.
- Identify measures of absence, understand its main causes, and examine the steps the council was taking to manage sickness.
- Investigate the cost to the council through sickness absence, and try to identify ways to reduce it, and
- to make recommendations to the Executive.

The reason for the initial selection of this review and the above brief was because of the effect that high levels of sickness can have on an authority to deliver high quality services reliably and to achieve best value. Absence is a concern for most public sector organisations, who traditionally have higher absence rates than private sector employers. The Cabinet Office previously set challenging targets for all government bodies to reduce their absence levels by 30% by 2003, unfortunately, the council was not able to meet.

The panel's report identified why sickness absence was high within the council, how the council dealt with absence, and made firm recommendations to the cabinet as to what changes needed to be made.

In August 2003 the Environment Scrutiny Panel agreed to undertake a review of the progress and effectiveness of the cabinet's action/action plan responding to the report's recommendations.

The revisit reiterated the need to effectively manage sickness absence and noted that even though slight improvements could be seen, the targets set by the Cabinet Office had yet to be met.

The Annual Audit and Inspection Letter, published in March 2009 identified a number of key issues where action needed to be taken, which included the reduction of staff sickness absence rates. The report identified that the council's capacity was hampered at its operational level by increasing levels of staff sickness absence, and that this was an area of poor performance.

Members learned that performance had deteriorated from 9.07 days per person in 2006/07 to 10.24 days in 2007/08 which was close to the figure achieved by the worst performing 25 per cent of councils. The letter summarised that North Lincolnshire Council was losing more days, per person, due to sickness absence than most other councils.

In July 2009, the Economic Development and Corporate Issues Scrutiny panel agreed to once again revisit sickness absence, taking on board and contributing to the council's response to the comments made in the aforementioned letter.

2. HOW THE REVIEW WAS CARRIED OUT

The council's Economic Development and Corporate Issues Scrutiny Panel agreed to carry out a review (re-visit) on sickness absence in North Lincolnshire Council. During the process they interviewed the following: -

Date of Meeting	Witnesses
14 September 2009	Jeff Tattersall, Service Director Human Resources
12 October 2009	Caroline Barkley, Head of Strategy Development
26 October 2009	Janette Murray, Well work, North Lincolnshire Council's Occupational Health provider.
9 November 2009	Graham Sykes, Operations Manager (Waste Services), Sharon Seddon, Head of Catering and Cleaning, Jackie Campbell, Development Manager Residential Support and Leslie Parker, Development Manager Localities
23 November 2009	John Rennison, Head of Health, Safety & Welfare
7 December 2009	Simon Driver, the Chief Executive of North Lincolnshire Council and the Council's Management Team
18 January 2010	Jeff Tattersall, Service Director Human Resources.
25 February 2010	Dr S P Deacon, Medical Director, Well work Ltd, Councils Occupational Health provider.

Desktop Research

Documentation including-

- Data on absence levels within North Lincolnshire Council
- Annual Audit and Inspection letter March 2009
- North Lincolnshire Sickness Policy
- Other Authorities' Sickness Policies
- Internal Audit documentation
- Local and National Articles
- A wide range of Websites and national journals were also used as part of the information collection process

Panel Meetings

A series of public meetings were held for witness interviews and presentations, together with planning and evaluation meetings to consider information collated and presented to members

3. THE PANEL'S FINDINGS/CONSIDERATIONS

This section outlines the main evidence considered by the panel in relation to sickness absence.

3.1 NORTH LINCOLNSHIRE COUNCIL - STATISTICS

As mentioned previously, it was the Audit Commission's Inspection letter of March 2009 which highlighted that action was required by the council to reduce staff sickness absence. It indicated that in 2007/08 sickness had deteriorated to 10.24 full time equivalent (fte) days per employee and was close to the figure achieved by the worst performing 25 per cent of councils.

In addition the council's internal quarterly performance indicators highlighted that the council's target of 8.8 sickness days per employee for 2008/09 was not achieved. The latest preliminary figures suggest that the 2008/09 result will be 10.19 days per employee reflecting a slight reduction in days per employee but not nearly enough of a reduction to meet the target. The national average for 2008 provided by the Local Government Association was 9.5 fte days per employee.

The council's Service Director Human Resources attended a panel meeting and provided members with all the latest graphical information on how service areas were performing on sickness absence throughout the council. He explained that currently stress and depression were the major factors contributing to the high sickness absence rates, accounting for 12831 days lost in 2008/09. Members were advised that the majority of stress cases were not work related, and were often a result of situations such as financial difficulties, breakdown of marriages/partnerships or bereavement. He also advised the panel that recently there had been a drop in long-term sickness absences. However, the short-term absence rate had increased to a level above the national average, and it was this that was giving greater cause for concern.

It was also reported to the panel that when the above audit inspection letter was submitted to the council's cabinet for consideration, it recommended that sickness absence should be considered at a future Performance Improvement Panel (PIP). PIPs give special attention to areas of poor performance within the council and across the Local Strategic Partnership.

Whilst meeting with the council's Chief Executive and Service Directors the Scrutiny Panel was informed that sickness absence had already been subject to two PIP reviews. The reviews undertaken identified that the problem was largely with the services not dealing with absences properly in accordance with the council's sickness absence policy. The Chief Executive explained that the PIP reviews had not met the targets of reducing the number of days lost due to sickness absence, and that the decision had been made to refer it for a 'peer' review. The panel was informed that a peer review allows a team of professionals from another council who understand the pressures and challenges of running a local council to review the practices of our council in a challenging but supportive way. The process allows constructive discussion on our council's strengths and weaknesses and provides recommendations on how improvements can be made.

The panel are eagerly awaiting the outcomes of this peer review.

3.2 MANAGEMENT

As part of the re-visit process the panel was provided with findings from an internal audit review carried out on sickness absence in September 2009. They also met with various managers from different service areas within the council and the following issues raised cause for concern.

- Not all self – certification of sickness forms were found in the HR files
- Self - certification forms are not always completed
- Sickness documentation is not always found in Human Resources (HR)
- There was insufficient evidence to suggest that return to work interviews with employees are being carried out, as discussion forms were not found in all cases.
- Assurance could not be given that Absence Review meetings are taking place.
- Assurance could not be given that persistent short-term absences are being referred to the Occupational Health Nurse.
- Managers do not always forward signatory lists of the services sickness to HR.

These failings concerned the panel greatly, and are all areas where members felt managers have the ultimate responsibility to manage properly in accordance with the council's sickness absence policy, but are not all necessarily doing so. Most importantly, the return to work interviews and the referrals to Occupational Health have previously been quoted in the former scrutiny reports as vital areas in combating sickness absence, and members were very disappointed with the evidence received.

If managers are not forwarding signatory lists to HR, instead of sending them straight to payroll, then it is making it difficult for the professionals within the HR teams to manage hot spots of absence and provide the necessary support to managers

Some service managers were reported to the panel as being very efficient and effective in managing their employee's absences. However, others were reported as not managing them at all. The panel was very concerned to find out that not all self-certification forms are being completed for every sickness absence, and could not be found in employees' files. This is a requirement of the council's sickness absence policy for short-term self-certification of absence, otherwise if it is not completed a doctor's note is required. It is crucial that this form is completed on every occasion, along with a return to work interview on the employee's return.

Members of the panel were told that if absence was short-term, not all managers felt that a return to work interview was necessary, as they 'know their staff'. However, the council's sickness absence policy clearly states that these must take place with details forwarded to the HR section on every occasion of sickness. Return to work interviews were introduced into the council's policy to help managers and employees have two-way dialogue and can identify any underlying problems.

'Trigger points' were also introduced into the council's sickness absence policy following the original scrutiny review published in October 2001. Trigger points provide managers with information on the frequency and of duration periods of sickness for all their employees, enabling them to address problem areas. Slight improvements were evident following this and the figures slowly began to drop.

As mentioned, a second scrutiny review was then carried out on the Executive's subsequent action plan in 2003, but since 2006 sickness levels once again started to deteriorate.

The panel was informed that one reason for this could be as a result of managers not using the trigger points, as they should be. When employees are approaching sickness trigger points, the Absence Review Meeting process should be instigated. However, from the information provided to the panel, assurances could not be given that these are always taking place and that, once again, forms were not always provided to HR to be entered on personal files.

However, managers did have their own concerns with the trigger point management system, and the fact that they are sent through to managers on a quarterly basis instead of a monthly basis. Due to the nature of trigger points and timescales waiting 3 months could mean that an employee has dropped off trigger points requiring action because of timescales, leaving management with no course of action.

The panel was also informed that trigger points may not be working as well as they did when they were initially introduced because a minority of employees who know the system can manage their absences in such a way that means they never fall into the trigger point action categories. The levels of absence at which an absence review meeting would normally be triggered are:

- Employees on their probationary period: **2** absences or **6** working days in a 6 month period.
- Employees after probationary period: **4** absences or **12** working days in any 12 month period.

Judged against some other authorities this measure appears to be generous, especially when the authority's target is to reduce absence to 8.8 days per employee yet the council's sickness policy allows up to 12 working days before any action is even taken!

If short-term absence is persistent then the council's sickness absence policy states that employees should be referred to the Occupational Health Nurse.

Unfortunately, as previously reported, due to the lack of return to work and absence review meetings taking place it was not possible for the witnesses that attended the meetings to identify how many absences have not been referred to Occupational Health that should have been. The Service Director Human Resources outlined that the lack of paperwork evident in some of these areas did not mean that this is not always taking place.

The panel would particularly hope for more monitoring and support around return to work interviews. These are key to ensuring short-term problems are identified at an early stage and enable managers to plan cover, for example, for recovery post elective surgery, cover should be sorted prior to the absence. The panel is very concerned that these do not always take place. This issue was also highlighted in the internal audit letter reiterating the requirement for clear policy procedures and a need for information to be cascaded down to staff level. It was acknowledged that procedures for back to work interviews were not consistent throughout the council and that all Service Directors and their managers need to comply with the sickness absence policy.

3.3 TRAINING ISSUES

Throughout the review, training was mentioned on numerous occasions. As part of the council's 'corporate management induction programme' that is a course designed for managers covering all aspects of management skills and requirements to enable them to carry out the role effectively. One session of that training course concentrates on sickness absence and it was questioned by witnesses if this was sufficient. Some managers who were interviewed indicated they had received good training on sickness absence management, others said they had never received any, and a number of them indicated that they had received some training after requesting refresher courses. However, it is appreciated by the panel that the council does operate a number of courses that managers might come across (some of which might address absence), but they would expect sickness absence management training and refresher courses to become mandatory, so all managers are aware of support available to them and to learn necessary competencies around:

- Policies and procedures,
- Their role in absence management (including well-being),

- Legal and disciplinary issues,
- Significant Occupational Health inputs available to improve team health,
- Operation of trigger points,
- Return to work interviews.

The panel also understands that particularly for the management of long-term sickness, managers need crucial skills to make the right interventions and maintain an appropriate level of contact. Without suitable training not all managers are able to deal with the challenges they are faced with.

The panel appreciates that it is a big training task, and whilst there is no hard evidence to prove it, it feels – from anecdotal evidence that without an element of compulsion some managers have become ‘set in their ways’ and reluctant to change. It appears that there is a culture issue in some areas. Some managers need to get ‘tougher’ on persistent absentees that may again be down to a training need. On the other hand, some managers indicated they do try and be tougher but always come up against barriers from Human Resources or Occupational Health. The counter argument on this from Human Resources was, because not all managers follow the correct procedures set out in the council’s sickness absence policy during the process it makes it difficult for any further action to be taken.

3.4 OCCUPATIONAL HEALTH

Throughout this review the panel heard on numerous occasions about the provision and effectiveness of the Occupational Health Services (OHS) provided to North Lincolnshire Council. The major concerns coming from some senior managers who were interviewed said that there was no direct involvement with Occupational Health; therefore the OHS are not in tune with the job. The following points were highlighted: -

- OHS are not contracted for enough hours;
- They are not quick enough to suggest capability action;
- OHS would benefit from clarity of the employees role from the line manager before making any recommendations;
- Telephone interviews are not satisfactory, neither is the practice of employees failing to attend appointments, this is costing the service approximately £55 each time;

Whilst meeting with the Service Director Human Resources he assured the panel that a new Occupational Health Service provider called 'Well Work' was appointed in July 2009 and that many of the issues and concerns were with the previous provider. However, he did acknowledge the fact that North Lincolnshire does make referrals later than most other authorities.

'Well Work' attended a couple of panel meetings and reiterated what has already been indicated in the findings so far and that they hoped to work closer and more effectively with managers. The OHS representatives highlighted the fact that health is part of life and not just work, and managing absence is part of management's responsibility but some still feel it is 'too hot to handle' and would rather refer the problem than try and deal with it. They also stated that it is essential that contact is sustained when employees are absent from work at all times, that the return to work interview is the KEY management tool, and that there is a need for more effective referral times. As a provider to the council they felt that some management referrals are poor, often limited in their descriptions as to why an employee is off work. Well work said this is inadequate to be able to provide a quality medical report and that this needs to improve and be included in any manager training.

An interview was held with Dr Deacon, the Medical Director from the councils Occupational Health Provider. Dr Deacon has worked with North Lincolnshire council for several months now and supplied the panel with some interesting facts and experiences. Members were concerned that he felt occupational health reports within the council often seemed to disappear into a 'black hole' with no engagement or feedback on employee medical progress. He indicated that increased engagement and involvement of OHS in HR and managements processes to support and manage employee absence and/or return to work would improve performance of the sickness absence management process.

3.5 LEADERSHIP

The Chief Executive and his Senior Management Team have a great deal of influence over what the council achieves and they need to be fully committed to reducing sickness absence as an organisational objective. The panel wishes to emphasise that it is

a team game in every sense of the phrase: we can only achieve overall if everyone achieves. Management have the responsibility to manage and motivate staff to deliver. Managing requires consistency and motivation using positive and negative influences to achieve results. But to expect managers to do so without clear and structured measurement of performance from the Chief Executive or Service Directors, without the training and expert support necessary to do so, is unacceptable.

3.6 RECOGNISING GOOD ATTENDANCE

As discussed with the new OHS provider Well Work performance tools and measurements are often perceived as a tool for chastisement, but the panel was told that there are also incentives that can be used to assist in reducing sickness absence. Part of winning the battle involves changing peoples' minds: getting people to reconsider whether they do genuinely need to be off sick. Clearly, this generally only applies to short-term absences.

Some areas within the council already have good practice as witnessed by panel members. This does however need to be consistently applied across the authority. Measures that might be considered include:-

- Praising good attendance – showing it is valued
- Offering incentives for good attendance
- Showing what the team has achieved from good attendance (either through performance or savings)

The panel agree that it is important to note that even where absence is high, there are still people who do not have any absence at all. This is above average performance and praising such people shows others that good attendance is valued. This could be done in team meetings, on staff notice boards and in newsletters etc.

Incentives can be a double-edged sword. To achieve satisfactory performance is an obligation of all employees and they get paid to do so in their salary. However, above satisfactory performance can also be rewarded simply and cheaply. This could include offering additional days off with pay, gift vouchers, small presentations and awards.

It is just as vital to be positive about good performance, as it is to challenge poor performance. In the long run the amount of money spent rewarding exceptional attendance could outweigh the costs of high sickness levels.

3.7 ABSENCE REDUCTION AND MANAGEMENT SPECIALISTS

A special meeting was held with 'Diagnostic Health Solutions' (DHS) who are the leading Absence Management Service providers in the UK. They specialise in tracking employees' attendance and reducing sickness absence levels for both public and private organisations.

DHS work in partnership with clients to achieve business objectives, increase operational efficiency and maximise their investment on existing employee structures.

They informed members that they have proven to reduce related costs associated with absenteeism in the workplace by an average 30% whilst fully supporting their most valuable asset – the staff!

They provide the authority with an Absence Support Centre available 24 hours a day, 365 days a year, staffed entirely by Occupational Health and Registered General Nurses (RGN) at all times. The service is also available for all employees' families for support and advice.

DHS guarantee all new clients a minimum 10% reduction in their absence rate during the first year of the service or their money back. Numerous local authorities have successfully used this company to reduce their sickness levels with outstanding results. Southend on Sea Borough Council achieved a 26% reduction in recorded absence on 2007-2008 that resulted in an annual efficiency saving of £639,000. Rochdale Council also indicated that they found it to be cost effective and they said 'The Management information, on-line, in real time is very useful. It is also possible to monitor what managers are doing, so you can see who is using the system and taking the appropriate action'.

3.8 COST OF SICKNESS

The Professional Personnel system used by the council holds information relating to the cost of sickness absence but this is not currently being reported on within the suit of management information produced. Therefore it is not being reviewed regularly and the data compared to those of similar councils. Although managers can request a report to detail this information from the system this is not a standard report and in view of the current climate this may highlight an area where services could identify savings.

Sickness absence does cost the council, but the panel was aware that this is not a simple matter of expenditure. There are both direct and indirect costs of absence that need to be taken into consideration including:

- | | | |
|----------------|---|---|
| Direct Costs | * | Covering of absence (overtime/temp staff) |
| | * | Services not provided |
| | * | Revenue not collected |
| | * | Materials wasted because there is no one there to use them |
| Indirect Costs | * | Lost productivity: more work could be done in the same time or the same work could be done in less time |
| | * | Training others to cover the role |

The lack of cost provided on sickness absence was also highlighted as a failure in the councils internal audit report.

The Medical Director who attended from the Occupational Health services also reinforced the fact that it is often effective to cost the potential savings for target reductions in sickness absence and manage the target within the context of other council financial targets. The Chief Executive, Service Directors and managers would then be held accountable for managing these targets within their service areas.

4. THE PANEL'S CONCLUSIONS & RECOMMENDATIONS

This scrutiny review has highlighted the continuing failure to reduce significantly the level of sickness absence in North Lincolnshire Council as they did in the two previous scrutiny reports. It is clear that the council will not achieve significant improvement and set targets unless something is done about the situation and the recommendations are put into action. It is difficult to estimate the impact of any particular change, but any change that helps to encourage firm and timely action across all council services is likely to be beneficial.

The aims of the panel's recommendations in the report are largely directed at achieving greater consistency and a corporate approach to managing attendance. Some of the recommendations are already in place in some services, but more energy is still required to ensure that the authority as a whole achieves.

4.1 MANAGEMENT

Once again the panel found overwhelming evidence as they did in their previous reports on sickness absence that management are the ones who hold the key to reducing sickness absence rates. They are the closest to the employees within the service and they need to be much more pro-active and spend more time managing rather than doing. It is their responsibility to assess levels of sickness in their service, and tackle the issues as they arise in accordance with the council's sickness absence procedure.

Members have heard evidence to suggest that this is not happening across the council and are very concerned with some of the review findings. The Chief Executive, Service Directors and managers need to understand that it is a mandatory part of their role to manage sickness absence and that it should be carried out consistently across the council.

Human Resources (HR) also have a role to play in assisting managers on sickness absence, and if some managers are not complying with the council's sickness absence procedures steps should be taken to rectify this. Having the right information on absence is at the heart of managing it well.

The first step in being able to manage a problem is to know the exact nature of the problem. This is about managers having the right information to manage the job, and show that the job is being managed.

RECOMMENDATION 1

That all managers be reminded of their obligation to manage the absence of all their employees through the diligent and fair application of the council's sickness absence procedure.

RECOMMENDATION 2

That Human Resources produce a manager's checklist to be used by all managers when (a) an employee notifies them of their absence, (b) steps to be followed during absence providing advice of different scenarios, (c) actions to be implemented upon the employees return, and (d) be used for every employee absence.

RECOMMENDATION 3

That once the employee has successfully returned to work the above checklist be signed by the line manager and returned to HR for audit purposes.

RECOMMENDATION 4

That the mandatory completion and return to HR of the checklist form be part of individual service areas Quarterly Performance Review meetings. This will allow Service Directors to ensure that managers are complying with the council's sickness absence procedures.

RECOMMENDATION 5

That the scrutiny panel be consulted on the checklist prior to its implementation.

RECOMMENDATION 6

That as part of managers' Employee Development Reviews held annually, a specific part of their appraisal be their performance in implementing the council's sickness absence procedures, failure by the manager to have achieved 100% completion and return of the checklist to HR be dealt with according to the severity of failing to comply with mandatory requirements.

RECOMMENDATION 7

That a Sickness Absence Panel/Board be formed and led by the Chief Executive. This would provide specific management coordination of sickness absence and should be made up of Human Resources officers, senior managers and a representative from Occupational Health.

RECOMMENDATION 8

That in future managers receive details of sickness costs for their service and these should be incorporated into their performance targets.

4.2 TRAINING

From evidence gathered during the review it was apparent that the council's sickness absence policy is not applied consistently across all service areas, and not all managers feel they have had the necessary training to be able to competently deal with various sickness absence issues. The panel would like to see a specific training package just for managers that will communicate the importance of consistency in applying the policy, recognising trends and providing appropriate support to employees who are either off long term or short term, in addition to raising awareness of the affects sickness absence has on the service.

RECOMMENDATION 9

That a new comprehensive mandatory training package be developed and brought into use for all managers with supervisory responsibilities.

RECOMMENDATION 10

That mandatory refresher training courses be introduced once all managers have attended the above training, particularly when any amendments are made to the council's sickness absence policy.

4.3 COUNCIL'S SICKNESS ABSENCE POLICY

The council's sickness absence policy is the key tool used by managers and HR within the council to consistently manage staff sickness absence. Therefore, it is vital that as a council we get this right, and eventually reductions in absence will follow.

It is obvious from the evidence received by the panel that a review of the procedure is necessary. To enable managers to deal with short-term absences more effectively the current trigger points of up to 12 days per employee are felt to be too generous based on the council's target of 8.8 days. Members would also like to see referrals initiated sooner to the Occupational Health Service (OHS).

RECOMMENDATION 11

That in addressing amendments to the sickness absence policy the panel would like the Trade Unions to be consulted on any proposals.

RECOMMENDATION 12

That the reduction of the current trigger points for short-term absences be investigated with immediate effect.

RECOMMENDATION 13

That consideration be given to reducing the referral times to the OHS, and detailed in the council's sickness absence policy for managers guidance.

4.4 RECOGNISING GOOD ATTENDANCE

The panel would like to express once again that the majority of staff working for the council have excellent attendance, some with 100%, and the members appreciate all their hard work. The panel have not carried out this review to just penalise staff for bad attendance, but also to reward employees for excellent attendance.

Evidence from other council's suggest that praising good attendance shows everyone that it is valued and that this can easily be achieved through team meetings, information on notice boards or in newsletters. There are other incentives detailed in the findings of the report and have indicated that it is just as vital to be positive about good performance, as it is to challenge poor performance.

RECOMMENDATION 14

That the Council Management Team investigates the possibilities of praising and rewarding good attendance and showing employees they are valued.

4.5 ABSENCE MANAGEMENT SPECIALISTS

Members were of the conclusion that the absence management company that attended to give a presentation on their abilities to reduce sickness within the council was very interesting and worth further investigation. However, members were of the opinion that the tools provided by this company could 'in the main' be carried out by the council if the appropriate mechanisms were put in place, for example: a checklist for managers that could be completed on e-forms or through the e-personnel records system.

RECOMMENDATION 15

That the Service Director Human Resources carries out further investigations/consultations with other service providers before making any commitments.

4.6 GENERALLY

To conclude, the panel would like to inform the council's Executive that they expect changes to be made from the recommendations highlighted in this report. The current poor performance is not acceptable and management and employees have to be accountable for their responsibilities in reducing sickness absence across the council.

RECOMMENDATION 16

That the council's leaders, service directors, managers and employees be aware that scrutiny will be re-visiting this review on an annual basis in order to scrutinise implementation of the recommendations and any progress that has been made.