

**Meeting:** Trust Board  
**Date:** 18 March 2009

**Title:** Sickness Absence Management

**Executive**

**Summary:** Staff sickness absence has been rated as red in the Trust dashboard for the past two months. The % absence has been :

- November 2008 6.3%
- December 2008 6.7%

In January 2009 the percentage sickness absence reduced to 6.2%. It is too early to see whether this is the start of a positive trend and still clearly exceeds the Trust's maximum target of 4.2%.

In January 2009 the Executive Committee decided that managing sickness absence will be a key priority for the Trust 2009/10. An action plan was developed to support this work and is attached. The key areas of work identified are summarised as follows:

- 1 Objective setting which includes:
  - All directors, managers and supervisors 2009/10 objectives to include reducing sickness absence
- 2 Managers' activities
  - Action individual plans for staff with high sickness absence
  - Review monthly absence of department
- 3 Sickness absence data
  - Improve management reporting of sickness absence data
  - Introduce managers' self service inputting of sickness absence data onto the Employee Staff Record database (PID in place)
- 4 Increase HR support
  - Additional dedicated HR support to managers
  - Dir of HR to review support and progress with all directors and general managers

<p>5 Information for managers</p> <ul style="list-style-type: none"> <li>• Improve information available to managers to support their management of sickness absence</li> <li>• Launch intranet information page through CEO's briefing</li> </ul> <p>6 Maximise Health &amp; Work Centre support to staff and managers to reduce sickness absence</p> <ul style="list-style-type: none"> <li>• Deliver regular Managers' forums to discuss best practice and ways of overcoming difficult issues</li> </ul> <p>7 Increase support to help staff return to work in a timely way</p> <ul style="list-style-type: none"> <li>• Update relevant policies eg Rehabilitation at work policy</li> <li>• Devise agreement for providing early access to Trust's services to facilitate early return of staff to work</li> </ul> <p>8 Review of incentives</p> <ul style="list-style-type: none"> <li>• Examine feasibility of introducing incentives to staff to minimise sickness absence</li> </ul> <p>The Executive Committee will review the achievement of this action plan on a quarterly basis.</p>
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<b>Action:</b>	To discuss
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<b>Report from:</b>	Margaret Boltwood, Director of Human Resources
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<b>Sponsor:</b>	
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Financial Validation Lead: Director of Finance	Name of finance officer
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Compliance with statute, directions, policy, guidance Lead: All directors	Reference:
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Compliance with Healthcare Commission Core/Developmental Standards Lead: Director of Nursing & Clinical Development	Reference:
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Compliance with Auditors' Local Evaluation standards (ALE) Lead: Director of Finance	Reference:
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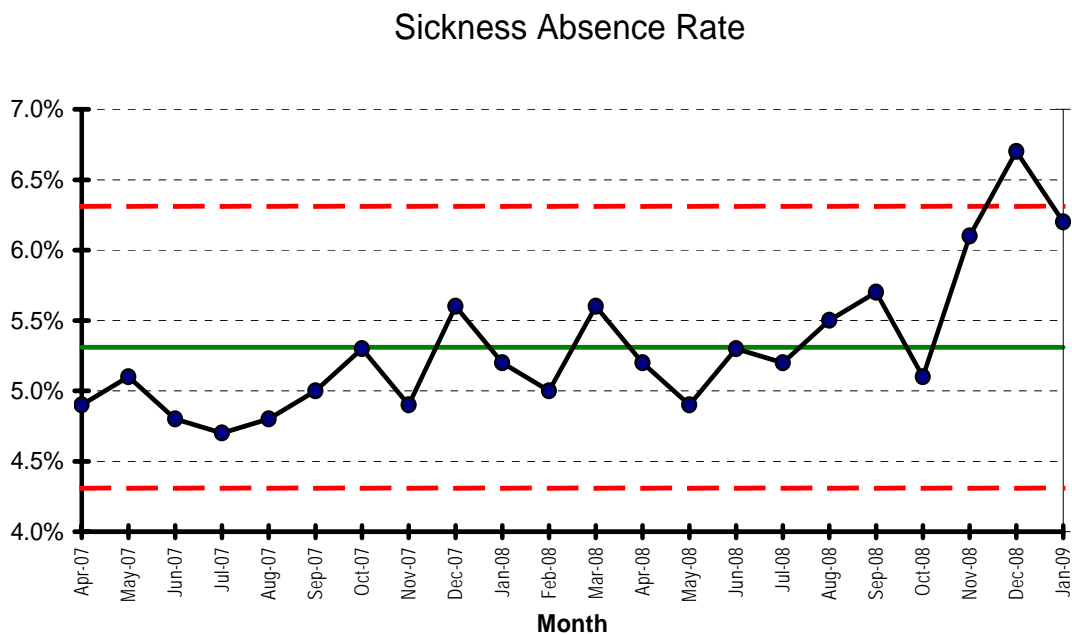
Evidence for self-certification under the Monitor compliance regime Lead: All directors	Compliance framework reference:
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## Sickness Rates - Current Position

Sickness rates across the Trust from February 2008 had been averaging around 5%, however November and December saw a sharp increase to 6.3% and 6.7% respectively. In January 2009 the sickness absence reduced to 6.2%. The target maximum sickness absence set by the Trust is 4.2% (see green arrow).

The run chart below shows the sickness trend across the Trust since April 2007.

*Sickness absence trend for the Trust April 2007 – Jan 2009*



The breakdown of sickness absence across Directorates and Divisions for January shows a considerable range of sickness absence, although in some areas the number of staff employed are relatively small and therefore the percentage is skewed. The sickness absence percentages are as follows:

<b>January 2009</b>	
<b>Directorate</b>	<b>%Sick Days</b>
Clinical Development	10.34
Diagnostics, Outpatients & Scheduled Services	9.05
Facilities	6.12
Finance	11.11
HR	2.76
IM&T	6.04
Medicine & Therapies	5.84
Operations	1.15
Pharmacy	5.19
Strategy & Performance	4.76
Surgical	3.77
W&C	6.40
<b>Total</b>	<b>6.17%</b>

### **Key priority for the Trust**

The Executive Committee agreed in January 2009 that reducing sickness absence should be a key objective for the team during 2009/10. The actions agreed by the team are attached in Appendix 1. This action plan has also been developed in conjunction with the Sickness Absence Management Partnership Steering Group which has active trade union involvement.

The Executive Committee will review the achievement of the action plan on a quarterly basis.

### The Whittington Hospital: Priorities for the Management of Sickness Absence 2009

Workstream	Action	Lead	Timescale
<b>Workstream 1</b> Objective setting	<ul style="list-style-type: none"> <li>All directors and general managers' objectives to include reducing sickness absence, for regular review</li> </ul>	CEO	04/09
	<ul style="list-style-type: none"> <li>All managers and supervisors' objectives to include reducing sickness absence, for regular review</li> </ul>	All directors/ general managers	04/09
	<ul style="list-style-type: none"> <li>All directors/GMs to review sickness absence management as part of regular team meetings and this to be cascaded through the Trust</li> </ul>	All directors/ general managers	04/09
<b>Workstream 2</b> Managers' activities	<ul style="list-style-type: none"> <li>Maintain and action individual action plans for staff with high sickness absences</li> </ul>	All directors/ managers	Ongoing
	<ul style="list-style-type: none"> <li>Review monthly absence rates of own departments</li> </ul>	All directors/ Managers	Ongoing
	<ul style="list-style-type: none"> <li>Utilise trust support and advice eg HR, Health &amp; work Centre, Oasis in terms of minimising sickness absence</li> </ul>	All directors/ Managers	Ongoing
	<ul style="list-style-type: none"> <li>Utilise managers self service on ESR for sickness absence management</li> </ul>	All directors/ managers	Details in PID

Workstream	Action	Lead	Timescale
<b>Workstream 3</b> Data completeness	<ul style="list-style-type: none"> <li>• Introduction of Managers' self service ESR for sickness absence management</li> <li>• Improve current system of capturing sickness data across Trust.</li> </ul>	Asst Dir of HR  HR Project manager	PID to EC 27/1/09 Complete introduction planned for 07/09  Work commenced and ongoing
<b>Workstream 4</b> Increase HR support	<ul style="list-style-type: none"> <li>• Dedicated HR support; HR Manager with overall responsibility for sickness absence project, plus w/t Project manager funded through CIP</li> <li>• From 2/09 additional dedicated 0.80 wte Sickness management advisers with specific caseloads</li> <li>• Dir of HR to meet individually with directors &amp; general managers to ensure they have sufficient help and support to reduce their sickness absence</li> </ul>	Dir of HR	In place  In place  Almost complete

Workstream	Action	Lead	Timescale
<p><b>Workstream 5</b></p> <p>Information for managers</p>	<ul style="list-style-type: none"> <li>• Monthly information reports to directors and general managers on sickness absence and update on progress in their area (<i>accuracy will depend on achievement of workstream 2: to improve data completeness</i>)</li> <li>• Launch intranet page containing sickness related documents, case studies, FAQs, Mgrs Responsibilities etc</li> <li>• Re-launch of return to work interviews</li> <li>• Run regular publicity on email and intranet</li> <li>• Article in every Link related to different sickness absence topics</li> </ul>	<p>HR project manager</p>	<p>Commencing 03/09</p> <p>In place – publicity launch 04/09 04/09</p> <p>In place</p> <p>In place</p> <p>Commenced 2/09</p>
<p><b>Workstream 6</b></p> <p>Maximise Health &amp; Work Centre support to staff and managers to reduce sickness absence</p>	<ul style="list-style-type: none"> <li>• Wellbeing day</li> <li>• Working jointly with HR to deliver Managers forums and Training sessions.</li> <li>• Will see staff within 10 days of referral but will also see emergency appointments if needed on the same day.</li> <li>• HAWC to publicise to managers advice on best use of their expertise</li> </ul>	<p>HAWC</p>	<p>March 2009</p> <p>Started and on going</p> <p>On going</p> <p>05/09</p>

Workstream	Action	Lead	Timescale
<p><b>Workstream 7</b></p> <p>Increase support to help staff return to work in a timely way</p>	<ul style="list-style-type: none"> <li>• Devise agreement for providing early access to Trust's services for Whittington staff to minimise sickness absence and facilitate earlier return to work</li> <li>• Update &amp; re-publicise the Rehabilitation at work policy &amp; the Continuing in Employment : Opportunities for Employees with a Disability policies</li> <li>• Review application of the Capability Policy and revise if necessary</li> </ul>	<p>HR project manager</p> <p>Asst dir of HR</p> <p>Dir of HR</p>	<p>Draft by 07/09 for discussion - link to Employer of Choice</p> <p>By 03/09</p> <p>Review by 05/09</p>
<p><b>Workstream 8</b></p> <p>Incentives</p>	<ul style="list-style-type: none"> <li>• Develop proposals/business case for introducing incentives for: <ul style="list-style-type: none"> <li>*staff</li> <li>* managers</li> </ul> <p>to minimise sickness absence based on research and best practice</p> <p><i>(NB the achievement of workstream 1 will be essential precursor to individual incentives)</i></p> </li> </ul>	<p>HR Project manager</p>	<p>Initial discussion paper to EC 3/09</p>



