

Managing Sickness Absence

Bury Metropolitan Borough Council

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Action Plan

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Introduction and background

Sickness absence is an issue that faces all employers. It is inevitable that employees will fall ill and will periodically be absent from work as a result. As this involves a cost both in terms of financial loss and disruption to service delivery, it is important that attendance is managed effectively.

With an average of almost 14 days sickness per full time equivalent employee in 2001/2002, Bury Metropolitan Borough Council was one of the worst performing metropolitan authorities. In response the Council made sickness absence a corporate priority and in June 2002 introduced a revised policy and procedure, 'Managing Attendance at Bury MBC'. The introduction of the arrangements has been supported by the production of documentation that is published on the Council's intranet, briefing sessions for management teams and training for line managers. Departments have developed their own action plans.

Audit approach

The scope of the review covered two key issues:

- a review of the effectiveness of the new revised corporate arrangements
- 'probes' into two key operational service areas to test the implementation of the new arrangements and the approach to long term sickness.

To focus on the arrangements for long term sickness, we undertook a file review of a sample of cases in the Social Services and Education departments. The source for the selection of cases was the 'trigger report' produced on a monthly basis by Central Personnel. Individual cases were reviewed and discussed in the presence of senior personnel officers to maintain confidentiality.

Main conclusions

Introduction of the new corporate arrangements

The new corporate policy is a positive start but the increased resourcing implications of some of its requirements mean that it is not being fully delivered. Centrally and operationally based personnel officers are generally very encouraged by the introduction of the new arrangements, which are seen as initiating a proactive approach to the management of sickness absence as well as raising its profile. The feedback on the briefings and training sessions were that they were helpful and the introduction of further policies and training on capability is seen as an important step forwards. The two largest operational departments accept the principle behind the policy's statement that staff on long term sick leave should get a home visit. The department cannot resource the policy requirement and similarly are struggling with the completion and filing of the standard 'return to work' record form. The non-compliance means that the majority of the Council's staff are not being covered by elements of the new policy and this impacts on the effectiveness of the policy.

Implementing the new corporate arrangements

Roles and responsibilities for implementing and maintaining the policy now that it has been introduced are vague. Training on the new policy was delivered by the central training function but it is unclear who is responsible for analysing the attendance for gaps and for ensuring that new managers get the training as part of their induction and for ensuring that there is resolution of problems and issues raised at the training sessions.

Communication between the corporate centre and operationally based personnel functions could be improved. The departmental view that operational issues are not fully understood threatens to weaken the interaction even further. The different roles and terms of reference of the two corporate personnel working groups [Personnel Managers' Network and the Personnel Liaison Officers Group] needs to be clarified. Resources need to be allocated to implementing and monitoring the new policy to ensure that it is effectively translated into practice and the corporate targets are achieved.

Absence monitoring information

The configurations and limitations of the existing personnel system mean that sickness monitoring to Management Board and scrutiny and review committee is still reported at the highest aggregated level using the previous management structure that includes Personal and Community Services. Subsequent tables in the reports detail departmental structures that are more up to date. A separate calculation of the average sickness absence per full time equivalent employee is necessary for the production of Best Value Performance Indicator 12 which is not currently calculated at departmental or employee category level.

One of the largest operational departments has no validation of the sickness returns that form the basis of the sickness monitoring reports.

A review of absence data for 2002/2003 as part of the BVPI audit found that corrections were needed where:

- end dates were missing for some staff who had left, and
- bank holidays and weekends were included for some staff inappropriately.

Absence for 2002/2003 has been calculated at 13.2 days, an improvement on the previous year but still a high figure. No amendment to Bury's BVPI has been made in respect of school holidays for teachers off long term.

Key issues from file reviews

The approach for the management of long term sickness absence is not as robust as that for short term absence and departments have responded by developing their own approaches. Key issues and some examples of existing management responses are:

- Profile of absence management. Regular senior management team reporting, use of corporate monitoring information and accountability for results sets a clear focus and culture for the whole department and particularly helps line managers discharge their responsibility
- Setting timescales for resolution. In one approach a deadline of a year from the date of long term sickness commencement is set for a decision to be made. There are examples of a number of members of staff being off for over 18 months, one person has been off for over 780 days, with no expectation of return

- Clarity about resolution options. To be able to achieve timely resolution both staff and management need to be clear about all of the possible options available as early in the process as possible. One service includes and uses 'compromise agreements' where staff's employment is terminated and they receive an agreed lump sum after signing an agreement that they will not take any further action against the Council
- Management of Occupational Health. The previous arrangements have been universally recognised as a major barrier however there are examples of a proactive response which involves individually tailored referral letters that request specific information, individual challenge to opinions and a systematic chase-up of follow-up referrals. The new occupational health tender is seen as a positive step forward.

Long term sickness is a particular drain on the capacity of the Council and its ability to provide good services. The Council is starting to see the benefit of focusing on short-term absence and now needs to expand its attention to incorporate long term sickness.

Recommendations and action planning

Recommendations	
In order to improve the effectiveness of its arrangements, the Council should:	
R1	Ensure that the corporate policy is operationally deliverable by building in flexibility into the requirements around home visits and completion of the return to work forms.
R2	Make sure that the policy is effectively turned into practice by: <ul style="list-style-type: none"> • clarifying and publishing the responsibilities for managing the training process • manually amending the high level departmental/directorate categories to reflect the Council's current structure in reports to Management Team and scrutiny and review • introduce validation systems for sickness returns • reviewing the terms of reference of the existing corporate working groups.
R3	Introduce a corporate focus to long term sickness absence that builds on some of the existing good practice within departments.

The way forward

Since the time this report was written the Council has introduced a number of initiatives designed to focus management attention and address the underlying causes of the high performance indicator for this area. We will continue to monitor the progress of the Council and work with you where appropriate to help reduce absence levels at Bury.

Status of our reports to the Council

Our reports are prepared in the context of the Statement of Responsibilities of Auditors and Audited Bodies issued by the Audit Commission. Reports are prepared by appointed auditors and addressed to Members or officers. They are prepared for the sole use of the audited body, and no responsibility is taken by auditors to any Member or officer in their individual capacity, or to any third party.