

# Managing Attendance

Wirral Metropolitan Borough Council

Audit 2009/10

July 2010



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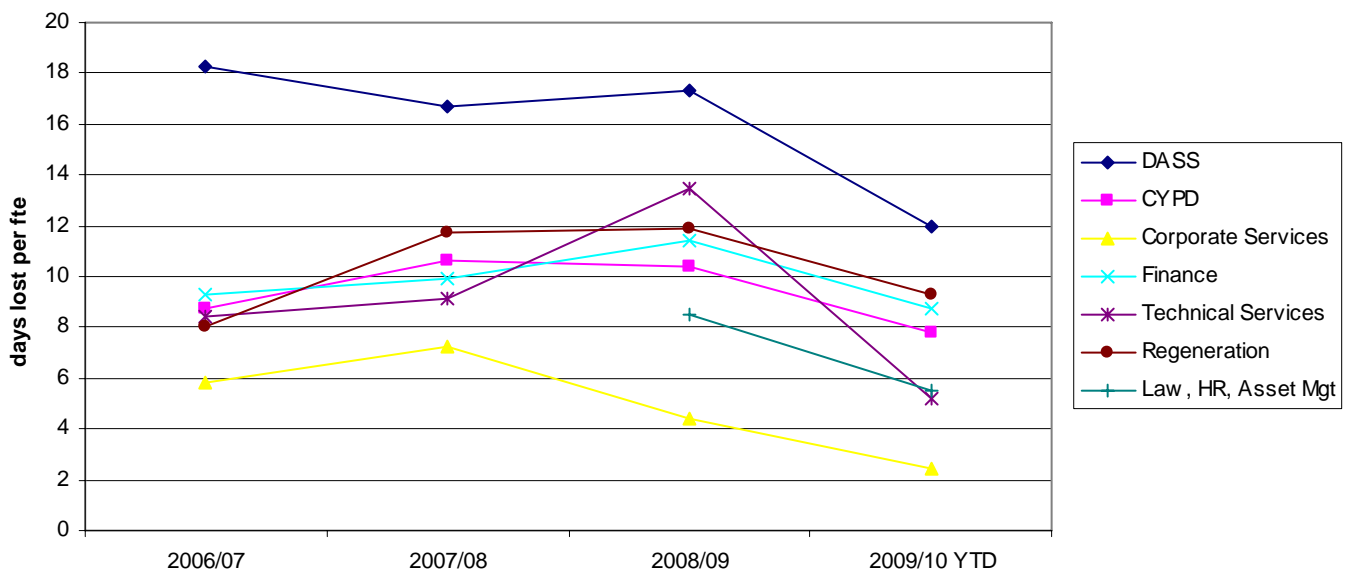
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# Introduction and background

- 1 Preventing people from falling ill at work and getting them back sooner, as well as discouraging abuse of absence, is a key component of public sector cost efficiency and change agendas.
- 2 However, effective management of sickness absence is not just about reducing costs. Staff sickness also results in `lost time' which can have a particularly negative impact on the quality of frontline services. Employers also have legal duties to protect their staff from work-related stress and illness.
- 3 Wirral Council has struggled to meet its sickness absence targets in the past but the situation is now starting to improve. The Council's target for sickness absence in 2009/10 was 10 days. This target was higher than that set by other metropolitan authorities in the North West and most of the other Merseyside councils. During the year, actual sickness levels for the organisation as a whole were consistently better than this target, and by December 2009 had fallen to 9.01 days.
- 4 Nevertheless, the overall sickness absence figure masks some variations between Directorates. These are illustrated in the chart below.



- 5 The Council is now working to strengthen arrangements across the organisation for managing attendance to help it achieve further improvements.

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# Audit objectives and approach

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- 6 We agreed to carry out a short review to support the Council in its work to strengthen organisational arrangements for managing attendance. This would, in turn, link to the Council's broader objectives of improving the quality of services and securing value for money.
- 7 The purpose of the review was to assess the extent to which corporate arrangements are being implemented within Directorates, but also to identify any examples of good practice within services which could be shared across the organisation.
- 8 The audit aimed to evaluate the Council's:
  - procedures for managing short and long-term sickness absence;
  - training and support for managers on managing attendance within their area of service;
  - the use of management information on sickness absence; and
  - systems to support staff welfare.
- 9 The review was carried out in two stages. To gain an understanding of corporate arrangements, we started with a brief review of Council documents and data on sickness absence levels. We discussed our findings from this review with the Head of HR and Organisational Development. We then agreed to carry out further work in two 'tracer' Directorates.
  - Technical Services.
    - Of all the Council Directorates, Technical Services has seen the most significant rate of improvement in staff attendance since 2008/09. In March 2009, the Directorate's sickness absence levels were 13.5 per cent which was the second worst figure recorded for the Council. By December 2009, sickness absence levels had fallen to 5.22 per cent placing the Directorate second best in the Council. Over this period, the Directorate has made some significant changes in the way a number of its services are provided which may have contributed to this improvement. Nevertheless, we felt that the approach taken by the Directorate to managing attendance warranted further investigation.
  - Regeneration.
    - In 2006/07 sickness absence levels within Regeneration were the second best in the Council, but increased markedly in 2007/08 and did not improve the following year. This increase may have resulted from the addition of services to the Directorate's portfolio around this time. Since 2008/09 there has been a strong push on improving staff attendance within Regeneration. This is reflected in a marked increase in the number of managers within the

## Audit objectives and approach

Directorate receiving absence management training. However, the rate of improvement in staff attendance has not been as rapid as in other Directorates. In March 2009, the Directorate's sickness absence levels were 11.88 per cent which was the third worst figure recorded for the Council. By December 2009, sickness absence levels had fallen to 9.3 per cent, but the Directorate's comparative position in the Council had deteriorated to the second worst. The varied and geographically dispersed nature of services provided by the Directorate coupled with significant changes it has faced will have undoubtedly made attendance management a more challenging issue to address.

- 10 Our work within Technical Services and Regeneration comprised:
  - focus group sessions with a sample of line managers; and
  - meetings with the key HR contacts for these Directorates.
- 11 The outputs from the two focus group sessions are included as an appendix to this report.

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# Main conclusions

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- 12 The Council recognises that there is scope for it to strengthen its corporate approach to managing attendance. Whilst some work has been done at an organisational level, responsibility for establishing arrangements which underpin good attendance has been devolved to the Directorates.
- 13 This, in itself, is not necessarily a weakness. It is appropriate that Directorates should be encouraged to 'own' attendance issues rather than seeing them as being of concern only to corporate HR. At the same time, arrangements need to reflect local circumstances and service needs.
- 14 However, the degree of devolution has made it difficult for the Council to be assured that appropriate action is being taken within Directorates or, indeed, to share learning and good practice across the organisation.
- 15 The Council is now taking steps to address this.
  - The Council has had an organisational absence management policy for some time and some Directorates have supplemented this with locally relevant procedures to good effect. The Council is now working to strengthen the corporate policy as part of a scheduled review.
  - All training on attendance management has so far been delivered within the Directorates. The organisational absence management policy is used as a framework for training and corporate support is available on request. The Council is now developing an e-learning package to ensure consistency. However, levels of ongoing support available to managers on sickness absence issues have varied. Some Directorates have developed the role of their in-house support functions to provide managers with a point of contact for more routine queries. Others are still reliant on the corporate HR function which does not always represent a good use of HR managers' skills and expertise.
  - Some high level analysis of sickness absence data has been undertaken at a corporate level, but more detailed analysis has been carried out by the Directorates. This has resulted in duplication of effort and different approaches to presenting this information being adopted across the organisation. The Council is now implementing a new information system which will improve efficiency and the consistency of reports. However, there may be scope for Directorates to make more effective use of the information they receive on sickness absence as part of their overall performance management arrangements.

## Main conclusions

- 16 The challenge for the Council now is to establish a better balance and linkage between corporate and Directorate arrangements which, at once:
  - provides clear direction; but also
  - empowers managers across the organisation to deal with attendance issues within their area of service.
- 17 The Council is also now working to adopt a more strategic approach to staff welfare and well-being. This provides a good opportunity for the Council to rationalise the support services currently available and ensure that managers and staff are more clearly signposted to interventions appropriate to individual needs.
- 18 Our detailed findings and conclusions from the work are set out in a later section of this report.

# Recommendations

19 Our recommendations to the Council are as follows.

## Recommendations

**R1** To strengthen the overall policy framework for managing attendance:

- consider and address the specific opportunities for improving the corporate policy raised by managers in our focus group sessions;
- ensure that the revised policy clarifies respective roles and responsibilities for managing attendance;
- where appropriate, supplement the corporate policy with additional local procedures which have been formally agreed with staff and their representatives;
- take steps to ensure that a summary of the corporate policy and any supplementary procedures is made available to and understood by all staff.

**R2** Strengthen the approach to absence management training by, for example:

- making absence management training a mandatory requirement for all managers in the organisation;
- rolling out the corporate e-learning package on absence management and establish arrangements to ensure that all managers complete this;
- revising the approach to delivering absence management training across the Council to ensure that managers receive consistent messages concerning the corporate policy and detail of any supplementary procedures where it has been agreed that these need to be in place;
- taking steps to ensure that Directorates have arrangements for monitoring the take-up of absence management training delivered locally, and for following up any non-attendance.

**R3** To improve levels of ongoing support for managers on absence management issues:

- work with Directorates to identify and address any opportunities where the roles of support or other staff within the Directorate could be further developed to deal with more routine enquiries relating to attendance issues;
- following on from this, draw up service level agreements which specify the respective roles and responsibilities of the Directorate and of corporate HR. These should be consistent with the roles and responsibilities set out in the corporate policy (R1).



## Recommendations

**R4** To improve the use of management information on sickness absence:

- consider how the new HR information system may be utilised to ensure that key aspects of the corporate absence policy (e.g. completion and timeliness of return to work interviews) are monitored and reported, both corporately and at a Directorate level;
- following on from this, work with Directorates to ensure that there are no gaps or duplication in the information which is being collected and reported;
- work with Directorates to ensure that, as part of their overall approach to performance management, they have arrangements which allow managers to routinely and collectively identify factors which may account for sickness absence figures and explore opportunities for improvement.

**R5** As part of work to strengthen the strategic approach to promoting staff welfare and well-being:

- review and rationalise services so that managers and staff are clear on the pathways of support which are available and know how to access these.

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# Detailed findings and conclusions

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## Policies and procedures

- 20 The Council is currently reviewing its corporate policy for managing absence and recognises that there is scope for this to be strengthened. As part of our focus group sessions, managers from both Directorates highlighted some specific opportunities for improvement. These were around:
- Accessibility
    - The Council's approach to sickness absence is referenced in not only the policy itself, but within several other corporate policies. Managers report that this can make it difficult for them to locate the information they need.
    - Information is held on the intranet but managers report that they are experiencing some difficulties in navigating through this.
  - Clarity
    - How do managers distinguish between long and short term absences?
    - How do they manage absence in cases of staff who work shifts, part time hours or flexible working arrangements?
    - How soon should return to work interviews be carried out? Managers recognise that these should be done as soon as possible, but the time limit is not currently specified in the policy.
    - Managers feel that they need to take action with staff as soon as they detect patterns of absence emerging, but that the policy does not make this clear or set out what action they can take.
    - Managers feel that clarity is needed on 'triggers', including more guidance on how to apply them.
  - Controls and incentives
    - Managers feel that the wording of the policy needs to be strengthened to provide a greater imperative (ie 'should' needs to be substituted with 'must').
    - Managers suggest that additional controls could be added to escalate staff through the capability procedures if they are abusing sickness absence (eg if staff have already reached stage 1 and have any additional absence within a defined period for which they are unable to produce a doctor's note, they will automatically be referred to stage 2). However, this suggestion indicates that further guidance is needed on the policy; managers already have provision to escalate staff through capability procedures as part of action plans agreed following capability hearings.
    - Managers feel that cases in the later stages of capability procedures could be heard by an independent panel to ensure objectivity and convey the 'right' message to staff.

## Detailed findings and conclusions

- Managers suggest that some provision could be made corporately for rewarding good attendance (eg two additional days' leave).

21 Our review has found some significant differences in the approach which has been taken by the two tracer Directorates to implementing the corporate policy. These are summarised in the table below.

**Table 1 Directorate approach to implementing policy**

Technical Services	Regeneration
<ul style="list-style-type: none"> <li>• Corporate policy supplemented by departmental procedures agreed with Unions - makes the organisational policy 'real' for services.</li> <li>• Guidance on departmental procedures issued to staff including a 'wallet card' which summarises the action staff need to take in the event of sickness - staff are clear on what is expected of them.</li> <li>• Staff required to report their absence from work to the department's central admin function and this is then followed up by a call from their line manager - managers feel that having to report to a third party initially has acted as a deterrent to staff who might otherwise abuse sickness absence, and also report that the incidence of text messaging has reduced as a result.</li> <li>• The department's admin function produces reports for senior managers on all absences within their section - enables them to check that absences are being followed up by line managers.</li> <li>• Corporate and local procedures supported by forms which managers are required to complete and return to the department's central admin function - facilitates monitoring of timeliness of return to work interviews, completion of paperwork etc which is then reported to the departmental management team.</li> </ul>	<ul style="list-style-type: none"> <li>• Corporate policy.</li> <li>• Staff issued with periodic reminders on the procedures which they should be following.</li> <li>• Absence is reported to individual line managers. Managers report problems with incidence of text messaging and staff getting colleagues to relay messages.</li> <li>• Departmental absence co-ordinator produces reports for managers.</li> </ul>

22 Technical Services has been proactive and established arrangements to help it implement the policy in a very systematic and co-ordinated way. Key to this has been the assignment of a dedicated officer to lead on the work, and a revision of the duties of the Directorate's administrative function to make optimal use of available support staff in the new arrangements. There is also a very strong element of collaboration between managers within the Directorate on sickness absence issues.

- 23 Managers within Regeneration have been working to implement the corporate policy, but they have been doing this more in isolation from each other than in Technical Services. This has made it more difficult to ensure that absences are managed in a consistent way across the Directorate.

### Recommendations

- R1** To strengthen the overall policy framework for managing attendance:
- consider and address the specific opportunities for improving the corporate policy raised by managers in our focus group sessions;
  - ensure that the revised policy clarifies respective roles and responsibilities for managing attendance;
  - where appropriate, supplement the corporate policy with additional local procedures which have been formally agreed with staff and their representatives;
  - take steps to ensure that a summary of the corporate policy and any supplementary procedures is made available to and understood by all staff.

### Training and support for managers

- 24 The Council has recognised that it needs to adopt a more corporate approach to absence management training. All of the absence management training which has so far been provided has been developed and delivered by the Directorates themselves. Whilst an element of this is clearly needed to ensure proper coverage of local procedures where these exist, the absence of any central training makes it difficult for the Council to ensure that the corporate policy is being correctly interpreted across the organisation. At the same time, the Council has not made absence management training a mandatory requirement for managers. This presents a risk of some managers in the organisation not being aware of either the corporate or local procedures which they should be following with their staff. The Council is now looking to develop an e-learning package on attendance management which will help promote greater consistency.
- 25 Optimal use is not consistently being made of available support resources. This is resulting in some inconsistencies in the nature and level of support available to managers on managing attendance within the two 'tracer' Directorates. Both Directorates have access to specialist advice from the corporate HR function. An HR Manager is nominally assigned to Technical Services (as well as Finance), whilst Regeneration has part funded an HR Manager post to provide support to the Directorate as part of a business partner relationship with the HR function. Both Directorates also have an absence co-ordinator post within their staffing structure, but this resource is being utilised in different ways.
- 26 In Technical Services, the absence co-ordinator has been involved in establishing the Directorate's arrangements for managing attendance, and their role has also evolved to incorporate a greater element of advice and assistance. Managers value and make good use of this local source of support with the result that fewer demands are placed on the HR Manager's time.

## Detailed findings and conclusions

- 27 In Regeneration, the absence co-ordinator has dealt with referrals to occupational health, and supported managers on home visits and capability meetings. However, in terms of advice and dealing with queries, managers report that they are dependent on the HR Manager and greatly value this source of support. We acknowledge that the extremely complex and sensitive nature of some of the cases within the Directorate are likely to require this level of input. Nevertheless, establishing arrangements to promote a more co-ordinated approach to absence management (as referenced in the previous section) whilst making better use of the available resource within the Directorate would ensure that such cases are more effectively 'triaged'.
- 28 The Council is now considering how HR functions may be delivered in the future under its corporate priority of 'Excellent Council'. This provides a good opportunity to consider how existing resources are being used to ensure an appropriate balance between the ongoing support which managers clearly value as well as more specialist advice.

### Recommendations

- R2** Strengthen the approach to absence management training by, for example:
- making absence management training a mandatory requirement for all managers in the organisation;
  - rolling out the corporate e-learning package on absence management and establish arrangements to ensure that all managers complete this;
  - revising the approach to delivering absence management training across the Council to ensure that managers receive consistent messages concerning the corporate policy and detail of any supplementary procedures where it has been agreed that these need to be in place;
  - taking steps to ensure that Directorates have arrangements for monitoring the take-up of absence management training delivered locally, and for following up any non-attendance.
- R3** To improve levels of ongoing support for managers on absence management issues:
- work with Directorates to identify and address any opportunities where the roles of support or other staff within the Directorate could be further developed to deal with more routine enquiries relating to attendance issues;
  - following on from this, draw up service level agreements which specify the respective roles and responsibilities of the Directorate and of corporate HR. These should be consistent with the roles and responsibilities set out in the corporate policy (R1).

### Management information

- 29 The Council has recognised that it has not been making efficient and effective use of sickness absence data. Sickness absence data is collected centrally for the whole organisation. However, whilst some corporate analysis is undertaken (e.g. sickness absence rates by directorate, reasons for absence), more detailed analysis is presently carried out by the Directorates themselves. This represents a duplication of effort. It also increases the likelihood of inconsistencies in the nature of reports made to managers on sickness absence in their service area. For example, during our focus group session with Regeneration, Libraries reported that they have adopted the 'Bradford System' to help them identify problem cases of short term absence, but other managers in the Directorate were not aware of this system.
- 30 The Council is now working to address this situation. It is implementing a new HR management system. As part of this, template reports on sickness absence are being developed which will be automatically generated by the system. This will help improve efficiency, as well as the timeliness and accessibility of information at both a corporate and service level.
- 31 Some aspects of corporate reporting which needed strengthening are also being addressed. For example, the corporate management team is responsible for providing an executive overview of workforce issues across the Council but in the past has only received annual reports on sickness absence levels and performance against the corporate target. Quarterly reports are now going to be made, and we note that the first of these has also included information on sickness absence levels in other Merseyside and metropolitan councils. This will help senior managers to better monitor progress and take remedial action where it is needed. It will also provide the Council with a clear measure of its performance relative to other organisations.
- 32 The findings of our review suggest that there may be scope to make better use of absence information in Directorate performance management arrangements.
- 33 Attendance management forms part of core business within Technical Services. Sickness absence rates and performance against the policy (eg timeliness of return to work interviews) are reported and discussed on a monthly basis by section to the Directorate and Operational Management Team meetings. These measures are also posted on notice boards around the Directorate. This enables managers to make comparisons and encourages an element of healthy competition between sections. Although not reported regularly, the costs of sickness absence are understood to have been included in Directorate performance reports to raise awareness of the financial impact of poor attendance. Managers report that attendance issues are also considered at the Directorate Health and Safety and Equality and Diversity Groups. In overall terms, these arrangements are helping the Directorate to better understand some of the factors which may be affecting attendance and to identify ways of addressing them in a proactive way.

## Detailed findings and conclusions

- 34 Sickness absence rates have similarly been reviewed at Directorate Management Team meetings in Regeneration, but reports to this group have been made on a quarterly basis. Absence statistics have also been reported and discussed as part of Senior Management Team fortnightly meetings and locally within sections. At our focus group session, managers expressed concern about the lack of forums within the Directorate for them to work together to 'get underneath' absence figures, and reported that our session with them was the first opportunity they had had to consider attendance issues as a group. They went on to report that the Directorate Health and Safety Group does review absences, but only when these have resulted from an accident at work.

### Recommendations

- R4 To improve the use of management information on sickness absence:
- consider how the new HR information system may be utilised to ensure that key aspects of the corporate absence policy (eg completion and timeliness of return to work interviews) are monitored and reported, both corporately and at a Directorate level;
  - following on from this, work with Directorates to ensure that there are no gaps or duplication in the information which is being collected and reported;
  - work with Directorates to ensure that, as part of their overall approach to performance management, they have arrangements which allow managers to routinely and collectively identify factors which may account for sickness absence figures and explore opportunities for improvement.

### Staff welfare

- 35 The Council recognises that there is scope for it to strengthen its strategic approach to staff welfare and well-being.
- 36 At a corporate level, the Council already has a number of key services to support its staff. These include:
- an occupational health service, currently provided by Aviva; and
  - an Employee Assistance Programme (EAP) which was introduced in April 2009.
- 37 At the same time, a wide range of other work has been carried out across the organisation to promote well-being. Examples of this include:
- a pilot of training for managers on managing stress which was delivered in conjunction with NHS Wirral;
  - a pilot project undertaken within the Children's and Younger People Directorate to help people with mental health problems back into work;
  - programmes of health checks within services; and
  - surveys of work-based stress carried out within individual services.

- 38** The Council and its partners have established a new initiative (Wirral Working4Health) to help local people who have been on long term sickness or are at risk of going off stay in work or get back into employment. They are now working on another initiative (Fit4Wirral) to better co-ordinate welfare and well-being activities across the borough. This is still at a very early stage of development.
- 39** As part of our focus group sessions, managers expressed no concerns around access to existing corporate welfare services, but highlighted a number of opportunities where they felt these might be improved.
- 40** The Council is already aware of some of these opportunities for improvement. For example, managers believe that the EAP is currently under-utilised, but the Council is already planning to run further marketing exercises later this year to raise awareness of this service.
- 41** Nevertheless, feedback from managers suggests that there may be scope for the Council to make more efficient and effective use of its corporate welfare services. Under present arrangements, managers report that any member of staff who has been off work with stress is automatically referred to occupational health on their return and may then be referred for counselling. However, managers are aware that counselling services are also available through EAP and can be readily and directly accessed by staff. This means that the Council could, in effect, be paying for the same service twice. Managers also report that staff can sometimes find it difficult to stop having counselling sessions arranged through occupational health once they have started. This suggests that there may be scope to strengthen arrangements so that individuals only receive counselling for as long as they need it and are supported in 'stepping down' from full counselling sessions. Doing this may also help the Council to achieve some savings. Under the present contract, staff can access a maximum of six sessions but once this number has been exceeded the Council incurs additional cost.
- 42** The Council's contract for occupational health services is due to end this year and future options for delivery are presently being assessed. This presents a timely opportunity for the Council to consider:
- how the points raised by managers in our focus groups might be addressed in the specifications for a new occupational health service; and
  - how this service, in turn, could link into other services provided under the Wirral Working4Health and Fit4Wirral initiatives.

### Recommendations

- R5** As part of work to strengthen the strategic approach to promoting staff welfare and well-being:
- review and rationalise services so that managers and staff are clear on the pathways of support which are available and know how to access these.



# Appendix 1 – focus group outputs

## WMBC Managing Attendance - Technical Services Focus Group

15 April 2010

Short term/long term – there was some discussion about when short term becomes long term absence. The Councils' distinction –10 days of absence.

Monitoring systems are in place to graph out individual service areas and are produced on a monthly basis.

Sickness absence rates are currently slightly higher (fluctuations in different seasons) and the main reason has been colds and flu. Staff who had not been off for years were taking a few days to recover following sickness during Dec/Jan/Feb.

Some areas of service have experienced a spate of people having operations – 4-6 weeks off. All previously programmed in but number of staff off at same time.

Majority of absence within the directorate is short term, self certified (less than 7 days). Long term can skew stats.

Since April 09 sickness absence figs have been better – the directorate compares well with the Council as a whole. They are now applying capability procedures more consistently – in past this has not happened. Absences are reported centrally now. The directorate has been more prescriptive in terms of what they expect of staff (telephone in and speak to someone or leave a message – no text messaging or third party messages).

HR policies suggest people 'should' do this but thoughts in the room are that the wording of the policies should be strengthened to say people 'must'.

Senior managers are informed of the staff who are off sick so they are able to check that managers are following absences up – a calendar of absences is now routinely issued.

Managers are wary of centralising HR too much – local knowledge of what's happening within services is important and could be lost. They are also keen to ensure that the implementation of the new system does not result in additional tasks for them to do. The spreadsheets they currently receive are generated automatically for them.

Spreadsheets shows sickness dates on a calendar, type of sickness and number of days for individuals. ADs and services mgrs get a report after 12 days absence. The local spreadsheets help managers to detect patterns of absence sooner and it is good for staff to be shown this as sometimes it comes as a surprise to see this info in front of them.

The directorate has sent out a clear message to staff that action is taken on sickness absence. There is now consistency of actions around trigger points. Now if someone hits trigger formal action is taken. Clear process now. Removes any subjectivity.

Staff have become aware that they are approaching the triggers and are given the opportunity to take action. No longer a surprise when they hit them. Return to work interviews are being completed quickly, on the day of return or as near to the date on which they returned to work but this is not Council policy. Information on the timeliness of RTWs is reported to the directorate's joint OMT and SMT.

Sickness absence is covered in team briefs. Team briefs were used to do a push on long term absence which has aided the recent improvement.

Departmental charts are produced showing sickness absence rates for each section which allows for comparisons with other members of service. This has decreased occurrences of sickness absence. Encourages managers to act quicker to improve their team's absences and raises awareness.

Managers feel that they receive a good level of support. Internal HR contacted more or less daily for advice. Managers feel that they have to be careful about what to say and do about sickness absence with staff so feel that advice is needed. One member of staff had odd days off so looked at working arrangements/work pattern and things have improved. This person is now off the trigger. They feel that they are better able to have a dialogue with staff about absence.

They feel that there has been a change the culture. It's ok for people to seek advice from Occupational Health. Occupational (Occ) Health no longer a stigma, now a positive thing. Managers also feel that they benefit from having H&S based in the directorate and the same building as them – used them for risk assessments on improving work stations to help staff. Managers are required to manage H&S in the workplace (IOSH).

Regular work place inspections take place.

Absence regularly discussed at the departmental H&S working group and Equality Group – these forums for discussion help them to proactively identify issues.

Absence management isn't part of the KIE unless it's an issue. Policies are in intranet and staff are now required to confirm their understanding of sickness absence policies.

Managers have received absence and performance capability training. Focuses on what policy is, useful to gets answers to questions, half day course and refresher courses available.

Training is 'spot on'. Internal HR provides post-training support.

Managers feel that training should be compulsory as aids understanding of process and gives more consistency. Before training managers and staff unsure of what to say or saying the right thing. All staff should have the training. Culture at Council is not to have compulsory training. Only Quality & Diversity training is compulsory as is statutory requirement. If someone ended up at tribunal and manager not had training – problem. Absence management training has been made more or less compulsory within the directorate.

Council policy gives timescales, sets expectations, provides letter templates.

Policy can be a little bit vague in places and sometimes contradictory Eg 12 working days lost, then look at patterns. Somewhere else says action could be taken if patterns emerge before 12 days absence.

Problems about applying the policy with part-time working and pro-rata. Confusing if people work only a few hours each day – difficult to determine what time has been taken off. Needs to take account of flexi-working arrangements. Staff and managers are all confused by this and cannot find guidance.

Also Policy does say 'working days lost' but people have been counting weekends – this requires clarification.

Not one policy eg absence management is mentioned in a few places which can contradict each other. – code of conduct, HR Hand book etc. Also problems about how

## Appendix 1 – focus group outputs

these different sources of information are laid out on the intranet – makes it difficult to navigate to the information managers need.

Directorate has issued a card to each member of staff giving bullet points of what needs to be done and which number to phone in the event of absence to clarify expectations.

In terms of staff wellbeing, managers contact staff, Home visits follow, then back-to-work. If someone off with stress there is an immediate referral to Occ Health.

Wellbeing days are held throughout the Council.

Referral to Occ Health can be done before sickness absence triggers hit.

NB some uncertainty now re EAP. Should staff be referred here before Occ Health (EAP covered by fixed contract but payment for Occ Health is by visit)

Managers like the fact that EAP can be accessed by staff and all family members, but not sure if staff are aware of that or of the range of services provided. A seminar was held on EAP but the service needs to be promoted more. Also need to raise awareness that staff can access Occ Health as a preventative measure i.e. before a person goes off sick.

Departmental drive for staff to complete display screen equip questionnaires as preventative measures re back problems.

**WMBC Managing Attendance - Regeneration Focus Group**

**15 April 2010**

Regeneration has just been split up so comments from them with comments also from individual area. Regeneration 2nd from bottom on absence so could do better.

Main reasons for absence – person off for operation (91 days) in a small team so had impact. Also ear/nose/throat took similar length of time. Stress has been an issue for some but not all sections. Ongoing treatment for cancer has skewed figs, also DDA illnesses (diabetes, epilepsy). Lifestyle stress eg bereavement can be difficult to manage.

Long term sickness is difficult to resolve and is time consuming and drawn out process. Managers feel that they receive conflicting advice from Occupational (Occ) health. Occ Health gives advice that is not easy to work with on a practical level eg a person may be able to do some duties but not the job which they are employed to do.

Staff can access counselling through Occ Health – this is supposed to be short term but view that staff get on counselling ‘treadmill’ and can’t get off.

Managers feel they ask OH specific questions but don’t get specific answers. Information can be ambiguous and different officers can reach different conclusions. Small percentage can be exceptionally complex and time consuming.

Doctors can withhold specific information and this is within their rights to do so. Individual has discretion whether to disclose so Dr not obliged to do so – this can make things difficult.

Managers feel that an increasing amount of physical stress put on managers to deal with intense staff cases of problems and stress and feels way out depth with area of expertise. They feel they don’t know how to help the person and give the right pastoral care. Occ health is a fantastic tool but more clarity is needed from them and more support for managers.

**Occ Health**

The Directorate has an Absence Support Officer.

The Directorate has a dedicated HR person – this has been a master stroke, he provides exceptional levels of support and some managers feel that they can’t do without him. NB recognition that the HR person is under pressure so limited resource. Some managers are known to feel isolated and unable to cope.

EAP though AVIVA has been useful – has prevented absence in some areas of service. Managers do signpost staff to EAP at RTW but don’t know if this is taken up.

‘Trigger dodgers’ - triggers are not realistic and staff work a way around the triggers.

Managers don’t feel that the policy enables them to address patterns of absence at an early stage.

Managers feel that there is scope to tighten up on the policy. For example, could say that at stage 1, if the member of staff has any further absences in next 3 months, they will automatically reach stage 2. Or they could ask for docs note for any sickness absence.

## Appendix 1 – focus group outputs

Need something for persistent offenders. Individuals are known to have 30 days off each year and managers feel that nothing can be done. Managers see the same people coming through on stage 1 and stage 2 proceedings but feel unable to do anything about this.

At the same time, people who are never off sick year in year do not receive any recognition for good attendance apart from a 'well done' from managers. People who are off routinely takes up a disproportionate length of managers time. Each stage has 'routine offenders'. Perception by junior staff is that managers are doing nothing. No lateness procedure guidance. Are they absent or late? How much time is considered as an absence? Corporate policy is used by unions but is not always the best for local departments to fit with – local arrangements could be better used. Leave arrangements produce problems with everyone having same leave year and using up excess leave in March.

Local management meeting have not debated this before - this is first time a forum like this has happened for managers to discuss sickness absence. EMT looks at headline figures but deep issues are not discussed. Locally common problems are not discussed. Sickness absence does not feature at H&S meetings. Libraries have own senior managers strategy group (4x mgrs) discuss absence at weekly meetings. Absence only discussed if happened because of accident. Sport and Rec report to Head of Service monthly.

Reports locally produced each month gives breakdown of figures and this gives profile of last 12 months. Sickness always goes up at Christmas and during school holidays. Large majority of staff keep holidays.

View that some staff treat managers with contempt - cited examples of staff not turning up for capability meetings.

Staff have to phone in by 10.00am and speak to someone. They keep having to remind staff that they shouldn't be texting or speaking to a third party. Staff want to text as avoids proper explanation or possible confrontation. In libraries staff must phone in as near to 9.00am as possible and speak to the manager in the building and not leave a message.

Absence Coordinator responsible for co-ordinating Occ health referrals and speaking to occ health if manager has an issue of concern that they do not want to put in writing. They assist with difficult process and provide support for managers at each stage. They sit in and support in disciplinary discussions or accompany managers on home visits. HR contact is invaluable. Can phone him for advice and gives credible answers. Managers feel that there is a grey area in terms of when they should move from sickness to capability proceedings.

People have no penalty to not turning up to meetings etc, showing contempt for system. Has negative affect on the 'good guys'.

Policy is here but needs to be tighter. Lateness and calling in can be a problem. No calling in procedure.

Policy needs revision, eg no triggers – 3 absence only with 6 months.

Managers feel that there is some tension in applying the policy when they know sickness is genuine. Managers don't want to be over zealous with genuine cases. Note there was

## Appendix 1 – focus group outputs

some discussion around the table about the need for applying the policy consistently so not show favouritism. Recognition for the need to be pragmatic – bring people in for stage 1 but if their absence record has been exemplary in the past and they've then just had a bout of illness, do they really need to issue a warning..

Managers aware of positive things are going on. Health and Wellbeing Group at strategic level etc. Make use of the Council's good greenspaces, sport centres, incentives.

'Bradford System' being used by Libraries to highlight problem cases of short term absence. Very useful but not used across the directorate. Designed to tackle short term absence. Picks up on frequency and not patterns.

Suggestion made that cases of absence after stage 2 are appraised by independent panel.

View that the Council needs to reward good attendance – 2 days holiday?

# Appendix 2 – Action Plan

Page no.	Recommendation	Priority 1 = Low 2 = Med 3 = High	Responsibility	Agreed	Comments	Date
12	<p>R1 To strengthen the overall policy framework for managing attendance:</p> <ul style="list-style-type: none"> <li>Consider and address the specific opportunities for improving the corporate policy raised by managers in our focus group sessions;</li> <li>Ensure that the revised policy clarifies respective roles and responsibilities for managing attendance;</li> <li>Where appropriate, supplement the corporate policy with additional local procedures which have been formally agreed with staff and their representatives;</li> </ul>	3	<p>Head of HR/OD</p> <p>Head of HR/OD</p> <p>Departmental Chief Officers</p>	<p>Yes</p> <p>Yes</p> <p>Yes</p>	<p>Managing Attendance Policy is currently being reviewed by a working group consisting of representatives from all departments as part of the Council's People Strategy. Draft policy does address the issues raised at the focus groups.</p> <p>Policy clarifies roles and responsibilities for managing attendance including: HR, Occupational Health, Managers and employees</p> <p>Audit Commission report will be shared at Chief Officers Management Team (COMT) where it will be recommended to Chief Officers to supplement corporate policy with local procedures.</p>	<p>September 2010</p> <p>September 2010</p> <p>September 2010</p>

Page no.	Recommendation	Priority 1 = Low 2 = Med 3 = High	Responsibility	Agreed	Comments	Date
	<ul style="list-style-type: none"> <li>Take steps to ensure that a summary of the corporate policy and any supplementary procedures is made available to and understood by all staff.</li> </ul>		Head of HR/OD & Departmental Chief Officers	Yes	As part of the launch of revised managing Attendance Corporate policy, provision will be made for training managers and resource allocated to the internal communication of the new policy. Departments are responsible for ensuring the effective communication of supplementary, local procedures.	From September 2010
13	<p>R2 Strengthen the approach to absence management training by, for example:</p> <ul style="list-style-type: none"> <li>making absence management training a mandatory requirement for all managers in the organisation;</li> <li>rolling out the corporate e-learning package on absence management and establish arrangements to ensure that all managers complete this;</li> <li>revising the approach to delivering absence management training across the Council to ensure that managers receive consistent messages concerning the corporate policy and detail of any supplementary procedures where it has been agreed that these need to be in place;</li> <li>taking steps to ensure that Directorates have arrangements for monitoring the take-up of absence management training delivered locally, and for following up any non-attendance.</li> </ul>	3	<p>Head of HR/OD</p> <p>Head of HR/OD &amp; Departmental Chief Officers</p> <p>Head of HR/OD &amp; Departmental Chief Officers</p> <p>Head of HR/OD &amp; Departmental Chief Officers</p>	<p>Yes</p> <p>Yes</p> <p>Yes</p> <p>Yes</p>	<p>Training will form part of Managers Toolkit and will be recommended to COMT that it is compulsory for all managers to attend.</p> <p>It will be recommended that an E-learning package will be rolled across the Council and will be compulsory for all managers to complete. Records of training will be held centrally.</p> <p>Training will form part of Corporate Managers Toolkit to ensure consistency of message. Departmental, local procedures to be cascaded to managers by departments.</p> <p>Records of management training for absence will be maintained centrally. Non-attendance will be reported to COMT for action by Departmental Chief Officers.</p>	<p>From September 2010</p> <p>From September 2010</p> <p>From September 2010</p> <p>From September 2010</p>



## Appendix 2 – Action Plan

Page no.	Recommendation	Priority 1 = Low 2 = Med 3 = High	Responsibility	Agreed	Comments	Date
13	<p>R3 To improve levels of ongoing support for managers on absence management issues:</p> <ul style="list-style-type: none"> <li>work with Directorates to identify and address any opportunities where the roles of support or other staff within the Directorate could be further developed to deal with more routine enquiries relating to attendance issues;</li> <li>following on from this, draw up service level agreements which specify the respective roles and responsibilities of the Directorate and of corporate HR. These should be consistent with the roles and responsibilities set out in the corporate policy (R1).</li> </ul>	3	<p>Head of HR/OD &amp; Departmental Chief Officers</p> <p>Head of HR/OD &amp; Departmental Chief Officers</p>	<p>Yes</p> <p>Yes</p>	<p>HR will discuss where support can be utilised within departments.</p> <p>Service level agreements considered. Role &amp; responsibilities will form part of the policy update.</p>	<p>December 2010</p> <p>October 2010</p>
15	<p>R4 To improve the use of management information on sickness absence:</p> <ul style="list-style-type: none"> <li>consider how the new HR information system may be utilised to ensure that key aspects of the corporate absence policy (eg completion and timeliness of return to work interviews) are monitored and reported, both corporately and at a Directorate level;</li> <li>following on from this, work with Directorates to ensure that there are no gaps or duplication in the information which is being collected and reported;</li> </ul>	3	<p>Head of HR/OD</p> <p>Head of HR/OD</p>	<p>Yes</p> <p>Yes</p>	<p>HR and Payroll system team will ensure that optimum use of the functionality of the new system will be made on the attendance management workstream.</p> <p>The reporting system implementation will be brought forward.</p> <p>An evaluation of the arrangements in place will be made to ensure that no gaps or duplication in information is reported.</p>	<p>January 2011</p> <p>2011</p>

Page no.	Recommendation	Priority 1 = Low 2 = Med 3 = High	Responsibility	Agreed	Comments	Date
	<ul style="list-style-type: none"> <li>work with Directorates to ensure that, as part of their overall approach to performance management, they have arrangements which allow managers to routinely and collectively identify factors which may account for sickness absence figures and explore opportunities for improvement.</li> </ul>		Head of HR/OD Head of Policy and Performance	Yes	This will form part of our overall approach to attendance management including, launch of policy, training etc. All of which will be evaluated as above.	2011
16	<p>R5 As part of work to strengthen the strategic approach to promoting staff welfare and well-being:</p> <ul style="list-style-type: none"> <li>review and rationalise services so that managers and staff are clear on the pathways of support which are available and know how to access these.</li> </ul>	3	Head of HR/OD	Yes	<p>This work is currently being reviewed as part of the Council's Fit4Wirral Initiative. As part of this an internal communication strategy will be developed to ensure a clear understanding from managers and employees.</p> <p>Work in conjunction with NHS Wirral.</p>	October 2010

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# The Audit Commission

The Audit Commission is an independent watchdog, driving economy, efficiency and effectiveness in local public services to deliver better outcomes for everyone.

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