

## OVERVIEW AND SCRUTINY REVIEW – Attendance Management

Review of recommendations considered by CIOSC 17 November 2015 and Cabinet 16 December 2016

Review Recommendation	Progress Report of Action taken to implement recommendation	Responsibility	Timescale
<p><b>Recommendation 1</b> The Working Group recommends the adoption of the draft Attendance Management Policy subject to those comments identified within paragraph 37 of this review report being considered for inclusion therein.</p>	<p>The implementation of the new Attendance Management Policy was communicated to Extended Management Team and Tier 4 Managers on 6 April 2016.</p> <p>Senior managers were advised that the policy had been reviewed and of the main changes to the policy which included:</p> <ul style="list-style-type: none"> <li>• Early intervention from Occupational Health</li> <li>• Shorter timescales for arranging Attendance Management Interviews (previously Sickness Absence Interviews)</li> <li>• Revised procedure for managing short-term absences with no underlying medical condition which includes mandatory target setting and hearings where sanctions may be issued</li> <li>• Long term absence first stage interview to be held within 4 weeks</li> <li>• Consistent approach introduced for phased returns to work</li> </ul> <p>The new Attendance Management Policy together with Managers Guidance and supporting documentation was launched on the intranet.</p> <p>The policy was also published more widely to employees via a news item on the front page of the intranet together with articles in Buzz and the Employee Update publications. There was also a message on all payslips in June 2016. Managers were requested to advise their teams of the new Attendance Management Policy through team meetings etc and to ensure that their managers and employees familiarised themselves with their responsibilities.</p>	<p>Head of Corporate Finance and HR</p>	<p>Complete</p>

	<p>A mandatory e-learning course to support managers/supervisors to manage attendance under the new policy was also launched to be completed by <b>31 May 2016</b>.</p>		
<p><b>Recommendation 2</b> The Working Group recommends that the Council continues to target long-term sickness absence as the key cause of below target sickness absence performance.</p>	<p>Long-term sickness absence continues to be targeted as a priority area.</p> <p>The new Attendance Management Policy states:</p> <p>‘Before the employee reaches 6 months of continuous or aggregated absence within the rolling year, the manager must consider whether the absence can be sustained. At that point, the employee will be advised that any further assessment of their position will be made via a final stage interview. The manager must re-refer the employee to the OHS and have received their report prior to the final stage interview’.</p> <p>In 2015/16 56 employees were dismissed as a result of long term sickness absence.</p> <p>Key information is provided to Service Management Teams on the management of long term sickness absence together with exception reporting to both service management teams and CMT for employees who have been absent longer than 12 months to ensure that the appropriate action is being taken.</p> <p><b>Update April 2017</b></p> <p>A wide range of data is available to Service Management Teams on long term sickness absence through both the detailed quarterly attendance management reports and also through a suite of ‘real time’ sickness analytics via the Oracle Business Intelligence Tool (update provided below). HR Business Leads continue to work closely with managers to review and analyse data and agree appropriate strategies for intervention. Actions include performance clinics, workshops and manager events and work to ensure quality assurance and compliance with council policy.</p> <p>Long Term Sickness Absence (LTSA) continues to be given</p>	<p>Head of Corporate Finance and HR</p>	<p>On-going</p>

	<p>priority and targeted. As a result there have been ongoing year on year increases in LTSA referrals to the OHS.</p> <p>Within the Council there was a 19% increase in the number of management referrals in cases of LTSA during 2015/16, compared to 2014/15. Although 2016/17 data is not complete as yet, it is forecast that there will be a further 11% increase in the number of management referrals made to the OHS as part of the LTSA procedures .</p> <p>Increases have also been noted in Local Authority Maintained Schools, with a 9% increase in 2015/16 and a further 18% increase forecast for 2016/17.</p> <p>This year to date (1 April 2016 – 28 February 2017) the OHS has carried out 465 consultations with employees of the Council following management referrals requesting advice in relation to the LTSA procedures, and a further 197 consultations relating to LA School based employees.</p> <p>Since the launch of the new Attendance Management Policy to date (6 April 2016 – 31 March 2017) a total of 69 employees have had their employment terminated at a Long Term Attendance Management Hearing.</p>		
<p><b>Recommendation 3</b> The Working Group recommends that upon approval of the draft Attendance Management Policy, compulsory training be given to all DCC managers on the application of the new policy and associated procedures, making the links to such training as stress awareness, manual handling, workstation assessment and annual appraisal awareness and that this is incorporated into the Durham Managers' Programme. That the percentage of managers trained be reported to Scrutiny at appropriate intervals</p>	<p>The new Attendance Management Policy has been supported by training for managers through an e-learning course. There are 1,413 managers/supervisors enrolled on the course and since the launch of the policy on 6 April 2016, 703 managers have successfully completed this training as at 6 June 2016. The course is mandatory for all managers/supervisors who are responsible for managing attendance and completion is monitored through a learning management system and on completion of the course, training records are automatically updated on ResourceLink. Reminders were sent to tier 4 managers in June 2016 to ensure any outstanding training is completed by their managers/supervisors.</p> <p>Bespoke sessions have been delivered by the HR Advice and</p>	<p>Head of Corporate Finance and HR</p>	<p>On-going</p>

	<p>Support Team to Service Management Teams to advise of the main changes to the policy and to identify support and initiatives to manage attendance within individual areas.</p> <p>Face-to-face attendance management training continues to be delivered as part of the Corporate Training Programme.</p> <p>An e-learning course is also available to managers on recognising and managing stress in the workplace which has been promoted through attendance management groups. 209 managers had completed this training as at 6 June 2016. A requirement of this training is for managers to complete the Health and Safety Executive Line Manager Competency Indicator Tool to identify their own behaviours to help alleviate work related stress. This training provides a timely intervention for managers who have to deal with stress related issues in the workplace.</p> <p>Courses continue to be offered through the Durham Manager programme on health and safety together with softer skills such as dealing with difficult conversations. These courses support managers to deal effectively with employment related matters such as attendance management.</p> <p><b>Update April 2017</b></p> <p>As at 4 April 2017, 85% of managers have successfully completed the Attendance Management training module. HR Business Leads previously provided all Service Management Teams with the details of their managers that had not completed the course for appropriate follow up and a final deadline was set of 31 March 2017.</p>		
<p><b>Recommendation 4</b> The Working Group recommends that the current automated “reminder triggers” within the My View system be amended to send a reminder to managers after 20 calendar days that a Sickness Absence interview needs to</p>	<p>A reminder alert has been added to the suite of alerts to advise the manager at 20 calendar days that an Attendance Management Interview is still outstanding. The first escalation message to senior manager has been brought forward by 7 days to 37 days to reinforce this change (as well as the existing 44 day reminder).</p>	<p>Head of Financial Services and HR</p>	<p>Complete</p>

be undertaken in the event that this has not already occurred and the escalation to senior manager e-mail after a further 7 days.

#### **Update April 2017**

In addition to the Business Alerts, there are also now a suite of HR reports available to all Senior Managers down to Tier 4 level to access directly at their PCs. Further developments mean that access is being extended further to Tier 5 Managers with effect from early April 2017. These analytics which are designed to drive management action are produced using the 'Oracle Business Intelligence' tool which will greatly assist sickness absence management and performance. These reports specifically cover Open Ended Absences, Return to Work Interviews, Attendance Management Interviews and current Sickness Absence rates. Senior Managers can use this facility to ensure that sickness absences are managed robustly within their service areas, and will provide them with an up to date view of where the service stands in terms of short, medium and long term absences.

**Open Ended Absences** – provides a breakdown of open ended absences into **short term** (<7.5 working days), **medium term** (>7.5 working days to <20 working days) and **long term** (>20 working days).

**Return to Work (RTW) Interviews** – provides the number of **completed** RTW interviews in the rolling year period and the number of **outstanding** RTW interviews relating to absences which have ended in the rolling year period.

**Attendance Management Interviews (AMIs)**– provides a summary of AMIs which have been **completed** in the rolling year period, **outstanding** and/or **overdue**.

Each analytic provides a further breakdown based on the post to post reporting hierarchy allowing the manager to drill down through the reporting hierarchy to view information relating to all staff within their area of the organisation.

	<p><b>‘Sickness Absence Rates by Personnel Hierarchy’</b> – These analytics are based on the reporting of Sickness Absence in line with corporate performance indicators:</p> <p><b>RES/012 Average Days Lost</b> – managers can view the average working days* lost to Sickness Absence per FTE in the rolling year period. This analytic will also show ‘% time lost’ (RES/020) as well as identifying corporate and service grouping level performance targets.</p> <p><b>RES/019a-c % of Sickness Absence</b> – provides a breakdown of working days lost in the rolling year period. Absences are categorised into <b>short term</b> (&lt;7.5 working days), <b>medium term</b> (&gt;7.5 working days to &lt;20 working days) and <b>long term</b> (&gt;20 working days) based on the duration of the absence.</p> <p><b>RES/052 % Employees with no absences in reporting period</b> – % summary of current employees with no absences in the rolling year period (based on postings as at the end of the reporting period).</p> <p>All Managers will continue to receive relevant MyView Alerts which will inform them of upcoming and overdue appraisals, open ended absences, Return to Work Interviews and Attendance Management Interviews.</p>		
<p><b>Recommendation 5</b> The Working Group recommends that a review of the current OHS referral process be undertaken to include establishing a target for referral into the OHS service of 30 calendar days; an analysis of the impact upon OHS of implementing this target and an immediate referral into OHS for those employees whose absence has been due to mental wellbeing.</p>	<p><b>Referral Target to OHS of 30 days</b> The new Attendance Management Policy requires staff on long term sickness absence to undergo a First Stage Attendance Management Interview with their manager at c. 2 weeks of absence. This is consistent with good practice and has an evidence base for effectiveness in reducing subsequent time away from work [NICE, 2015; NICE 2009]. OHS referral should follow where no plan for return to work is established after this initial encounter. Consequently the impact on the OHS of a stricter implementation of existing policy would result in an increased referral rate to the OHS.</p> <p>It is hoped that this increase in demand for OHS advice will</p>	<p>Head of Corporate Finance and HR</p>	<p>Complete</p>

be accommodated within existing resources.

**Immediate referral of all absences attributed to mental health issues**

This approach would require a change to the current Attendance Management Policy, and the following points relate to reasons why this may not be a priority.

- Line managers are already encouraged to provide employees on sickness absence attributed to mental health issues to make contact with the DCC sponsored Employee Assistance Programme (24h telephone helpline)
- There may be potential discrimination issues in partial treatment of a particular category of sickness absence (although the intention, from the employer perspective, would be 'good').
- Work has been undertaken to further understand the reasons behind absences attributed to mental ill health. In only a minority of cases are these recorded as work related, with other issues such as bereavement cited. This may attenuate the value of immediate referral to the OHS, where local arrangements for workplace adjustments during periods of disrupted work-life balance may be most effective.
- There is no evidence that such early medical intervention for mental health issues is any more effective in reducing long term absence than for any other reason for absence. As such a more general approach of ensuring manager compliance with the policy and achieving the 2 week referral target of the new AMP, for all categories of absence, is best supported by the evidence for effectiveness.
- Immediate referral to the OHS would result in a major increase in OHS referrals and run counter to the current Attendance Management Policy, in that the first stage of attendance management should always involve the line manager. This approach is supported in national evidence

	<p>based guidance.</p> <ul style="list-style-type: none"> <li>It is of note that the OHS already accepts referrals for 'management concern' where advice on the impact of health issues on work is sought even before any associated sickness absence. This is an example of good management and OHS practice and represents c. 30% of all clinical encounters in the OHS. These referrals frequently involve issues relating to mental health.</li> </ul> <p><b>References</b>  NICE 2015 <a href="https://www.nice.org.uk/guidance/ng13">https://www.nice.org.uk/guidance/ng13</a>  NICE 2009 <a href="https://www.nice.org.uk/guidance/ph19">https://www.nice.org.uk/guidance/ph19</a></p> <p><b>Update – April 2017</b></p> <p>There continues to be an improvement in referral delay times from managers to OHS with current statistics indicating a referral rate of approximately 30 working days, further work on this with service groupings and managers will provide the required outcome of 30 calendar days if current trends continue.</p>		
<p><b>Recommendation 6</b>  The Working Group recommends that staff, managers and Trade Unions be engaged in the examination of suggested changes to the Attendance Management policy arising from this review in respect of My View Sickness Absence Interview reminders and the development of OHS referral targets.</p>	<p>A comprehensive consultation exercise took place prior to the introduction of the new Attendance Management Policy.</p>	<p>Head of Corporate Finance and HR</p>	<p>Complete</p>
<p><b>Recommendation 7</b>  The Working Group recommends that a more comprehensive Council wide staff survey be undertaken to inform organisational development, which would gather staff opinions on such issues as Health and wellbeing; attendance management; appraisals; council policy; training and</p>	<p>An annual internal communications survey is currently undertaken which includes questions on appraisals and training and development. However, options are being explored for a Council wide survey to establish a baseline to identify areas for improvement.</p> <p>An action outlined in the ACE and Resources Service plan is to undertake a council wide survey in line with agreed</p>	<p>Head of Policy and Communications/  Head of Corporate Finance and HR</p>	<p>On-going</p>

development and organisational culture. With councillors having direct input into the content of the questions via Scrutiny.

Scrutiny recommendation by September 2016.

It is intended that survey information will be circulated to members of the CIOSC for information and comment prior to the council wide survey being undertaken.

**Update – April 2017**

The annual internal communications survey was reviewed in the light of the additional topic areas suggested by Members.

As part of this, officers explored best practice advice from other organisations including the Health and Safety Executive (HSE) on surveying staff on mental health and wellbeing. The HSE's recommended standard methodology includes questions which address many of the issues Members had highlighted. It is a tried and tested methodology, which would potentially allow the council to compare and benchmark its performance against 136 other public sector bodies and staff opinions against those of other organisations and sectors.

It was therefore suggested that the council augmented its existing internal communications survey with the HSE's standard methodology to produce the more comprehensive staff survey requested by Members. Scrutiny Members were consulted on this at the end of January and no objections were received.

The augmented survey was therefore conducted from 28 February – 21 March, principally online but with hard copies distributed to employees who do not have access to computers. The survey responses will be analysed using the HSE's analytic tool to produce organisational and service grouping related results which will enable further analysis of specific work related causes of stress and implementation of appropriate interventions. There have been in excess of 3700 (40%) survey responses, with good representative information from all service groupings. This response rate is significantly in excess of previous surveys.

	<p>An action plan will then be developed by the Employee Mental Health and Wellbeing Working Group which comprises of service group representatives</p>		
<p><b>Recommendation 8</b> The Working Group recommends that that the Council review its current provision for the promotion of “Better Health at Work” and examine the potential to develop a more proactive and targeted approach to health and wellbeing promotion amongst its workforce.</p>	<p>A mental health and wellbeing task and finish group, represented by all service groupings, was formed in 2015 to evaluate the current interventions and assess:</p> <ul style="list-style-type: none"> <li>• if they enable the Council to evidence compliance with current legal requirements, national best practice and research;</li> <li>• if they are adequate and effective in relation to reducing sickness absence and current foreseeable mental health and wellbeing risk factors.</li> </ul> <p>The current mental wellbeing intranet pages have been redesigned and were launched in quarter 4 of 2015/16. These pages provide improved guidance and information to managers and staff on mental wellbeing management, support, advice and guidance. They will also link all other council procedures and guidance which directly or indirectly impact on mental wellbeing.</p> <p>New mental health awareness training for managers has also been launched via e-learning, which is being promoted through attendance management groups. This will be targeted at managers to raise understanding and awareness of mental wellbeing issues and how to manage them effectively.</p> <p><b>Update – April 2017</b></p> <p>The employee health and wellbeing focus group, chaired by Interim Director Public Health, has continued to meet and has completed its initial objective in relation to design and delivery of an employee health and wellbeing survey. Further work will be undertaken via the group in terms of addressing more broader health and wellbeing challenges across the Council.</p>	<p>Head of Corporate Finance and HR</p>	<p>On-going</p>

	<p>The Council is proceeding with the registering for the Better Health at Work Award. The Better Health at Work Award recognises the efforts of employers who promote healthy lifestyles and consider the health of their employees. This award will recognise the achievements of the Council and help move forward in a structured and supported way.</p> <p>The next step is an assessment of Council activity against the bronze award criteria. The assessment identifies areas for taking work forward and building on existing activity. This includes the provision of healthy food choices, addressing employee welfare, monitoring sickness absence rates, promoting mental wellbeing and the delivery of health related campaigns.</p> <p>Some of this work has already started for example, a standalone wellbeing strategy is being developed and healthier options in the canteen are being offered. It is envisaged that the Council will move quickly through bronze and progress to silver. It is essential that progress is corporately driven and all elements of the Council are engaged and contribute. Once the Council achieves the standards for the bronze award, which is through an assessment, the award would be granted.</p>		
<p><b>Recommendation 9</b> The Working Group recommends that following implementation of the Attendance Management Policy and in the event that attendance management performance has not shown improvement following sustained monitoring, a review of all trigger points within the policy be undertaken. It is further recommended that a systematic review of the report and progress made against recommendations should be undertaken after consideration of this report by Cabinet, within six months.</p>	<p>The new Attendance Management Policy was implemented on 6 April 2016 therefore this review will be due to be undertaken when the Quarter 2 performance information is available as at 30 September 2016.</p>	<p>Head of Corporate Finance and HR</p>	<p>December 2016</p>