

**BRISTOL CITY COUNCIL  
HUMAN RESOURCES COMMITTEE**

**24 JULY 2008**

**Title:                   Sickness Absence : OH&C / Withdrawal of  
Self Certification**

**Ward :                   City Wide**

**Report of:            Head of Human Resources**

**Officer presenting report:   Chris Dagger and Annie Harris**

**Contact telephone number: (0117) 922 2680/2856**

**1.    Report Summary**

1.1 The issue of withdrawal of self certification was raised by the trade union side at the June 2008 meeting of this Committee. This report responds to this “public forum” submission.

1.2 The Council is currently reviewing issues around sickness absence both in policy and in delivery terms.

1.3 The report to CMT at Appendix A gives information regarding an improvement plan for occupational health and counselling services to assist in reducing sickness absence across the authority and the introduction of a pilot sickness absence management system (SAM). It also raises the issue of whether to continue to allow managers to withdraw the right to self- certificate sickness absence.

**2.    Recommendation**

This report is submitted to this Committee for its information in relation to: 1) the Council's response to the public forum request from the Trade Unions (para 5.2 refers);and 2) the issues around the management of sickness absence, including implementing a sickness absence management pilot, as set out in Appendix A.

### **3. Policy**

The managing attendance policy is currently being reformatted into a framework policy. It is anticipated that there will be regular updating to assist the authority in reducing sickness absence.

### **4. Consultation**

#### **(a) Internal**

Further consultation will be carried out prior to the revised/framework Managing Attendance Policy, being brought to this Committee.

#### **(b) External**

N/a

### **5. Background and Assessment**

5.1 The attached report was considered by Corporate Management Team on 1 July 2008 for information and discussion. A verbal update will be given at the meeting. The report also summarises sickness absence trends since 2003/04.

5.2 Managers are currently authorised to withdraw an employee's right to provide self certificates once they've reached a trigger point. This is now being withdrawn following legal advice. In its place it is proposed that the Managing Attendance Policy will be strengthened regarding management action and will include the following:

*"Where employees fail to contact their manager or nominated representative on the first day of absence, it will be treated as unauthorised absence. Upon their return to work the manager will ascertain the reasons for non-compliance with the procedure for taking leave, and if the explanation is not satisfactory a disciplinary hearing will be held by the manager. Pay may be withheld for the period of unauthorised absence."*

5.3 The above changes will be incorporated in a revised Managing Attendance Policy which will be submitted to this Committee at its next meeting.

5.4 The proposed SAM was recommended by the independent OH consultant as part of his brief to review sickness absence practices generally, and to propose improvements

in the OH&C service.

- 5.5 The Resources Scrutiny Commission will further consider issues around sickness absence at its July 2008 meeting. Any significant changes sought by the Resources Scrutiny Commission will be reported back to this Committee asap.

## **6. Other Options Considered**

Other options will be set out in the follow up report to this Committee.

## **7. Risk Assessment**

Failing to seek all means possible to reduce sickness absence would lead to continued unacceptable levels of sickness absence in some areas, incurring high costs and having a negative impact on colleagues.

## **8. Equalities Impact Assessment**

There is no identified undue impact on specific groups.

## **9. Legal and Resource Implications**

### **Legal:**

There are no specific legal implications. However the Council should be aware of its obligation to support employees with illnesses covered by the Disability Discrimination Act 1995. The Council has a statutory obligation under the Act to make reasonable adjustments to their employment, and for them not to be placed at a disadvantage by reason of any 'provision, criterion or practice.

(Advice from Husinara Islam, Legal Services)

### **Financial:**

#### **(a) Revenue**

The cost of the pilot "Sickness absence management system (SAM)" will be met from existing reserves.

Subsequent implementation of the scheme would be

dependent on a Business case demonstrating the self financing nature of the system, ie that costs would be off set by the reduction in lost time.

(Advice from Stephen Skinner, Head of Finance, CSS and CEX)

**(b) Capital** N/A

**Land:** N/A

**Personnel:** As set out in paragraph 5.1 to 5.3 above

**Appendices:**

Appendix A                      Sickness Absence Report to CMT, 1 July 2008

Authors

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**LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985**

**Background Papers:** None

**Corporate Management Team**

**1 July 2008**

## **Sickness Absence**

### **Purpose of the report**

1. To report current levels of sickness absence and action that has been taken to reduce absence, and to propose further action.

### **Background**

2. 2007/08 absence levels are set out in Table 1. The council-wide total increased slightly from 2006/07 levels. Performance is just below the core city average, but in the bottom quartile for unitary authorities. The profile of BCC's workforce contributes to this, with above-average absence levels in some of the workgroups where BCC maintains relatively large in-house service delivery.

Department/division	Average number of working days/shifts lost per employee 01 Apr 2006 - 31-Mar-07	Target 2007/08	Average number of working days/shifts lost per employee 01 Apr 2007 - 31-Mar-08
<b>Adult Community Care</b>	<b>17.74</b>	<b>14</b>	<b>15.46</b>
Director of ACC and office	1	-	13.55
Learning Difficulties/ Provider Services	20.53	16	17.46
Older People/PSI/Care Management	12.3	10	12.08
Strategic Commissioning and Performance	8.93	6	10.7
Finance	n/a	TBC	5.03
Ex-Social Services and Health	21.47	-	9
<b>Central Support Services</b>	<b>7.55</b>	<b>7.4</b>	<b>7.19</b>
Corporate Finance and Procurement	6.08	6	7.28
Human Resources	6.25	7	6.23
Information and Communication Technology	8.35	8	7.23
Legal and Democratic Services	8.01	7	8.19
Property and Local Tax	8.34	8	7.16
<b>Contract Services</b>	<b>7.75</b>	<b>8.5</b>	<b>9.28</b>
Senior management team	1.17	-	3.57
Business Support Services	4.47	-	-
Catering	9.45	-	0
Cleaning	5.83	7.27	10.63
Construction	8.67	9.26	6.81
Fleet and Vehicle Maintenance	7.04	5.72	16.07
Grounds	7.57	6.46	6.99
Passenger Services	7.22	7.4	9.54
Print Services	5.46	4.11	21.38

<b>Chief Executive's</b>	<b>5.84</b>	<b>7</b>	<b>7.3</b>
Chief Executive and office	0	3	0.33
Corporate Communications	4.2	5	3.27
Community Safety and Drugs Strategy	5.78	6.5	8.72
Policy, Performance and Equalities	4.37	6	7.01
Regeneration	8.37	8.5	7.8
<b>Children &amp; Young People's Service</b>	<b>6.65</b>	<b>6.3</b>	<b>7.84</b>
Health Partnership	1	1	3.35
Integrated Youth Offer	0	0	3.97
Partnerships and Localities	4.69	4.4	8.07
Performance Improvement	5.16	4.9	0.67
Safeguarding and Specialist Services	10.04	9.5	9.82
Standards and Achievement	6.9	6.3	7.14
Transforming Learning	2.89	2.7	3.25
Ex-Education and Lifelong Learning	1.43	-	-
<b>Schools</b>	<b>8.19</b>	<b>7.8</b>	<b>7.98**</b>
<b>Culture and Leisure Services</b>	<b>5.94</b>	<b>5.5</b>	<b>6</b>
Director's Office	4.17	4	3.92
Arts, Events and Festivals	2.14	2	6.74
Cemeteries and Crematoria	10.38	9.4	7.7
City Docks	10.46	9.5	8.82
Colston Hall	7.55	7.2	8.47
Libraries	7.15	6.8	6.85
Museums and Archives	4.2	4	5.26
Parks	5.12	4.8	2.56
Sports	2.77	2.6	1.07
Youth and Play Services	4.35	4.2	6.73
<b>Neighbourhood and Housing Services</b>	<b>8.81</b>	<b>7.9</b>	<b>8.77</b>
Access to Bristol	7.71	6.8	8.52
Environmental Services	6.93	6.3	6.02
Housing Management	10.18	9	6.46
Housing Operations	11.35	9.5	12.94
Management Services	n/a	TBC	4.36
Strategic Housing	8.81	6.8	9.68
Technical Services	6.64	6	7.66
<b>Planning, Transport and Sustainable</b>	<b>10.22</b>	<b>7</b>	<b>8.77</b>
Planning Services	5.53	7	4.52
Business Services and Finance	6.98	7	4.84
Strategic Development	5.52	7	5.07
Transport Operations	14.65	11	12.78
<b>WHOLE COUNCIL*</b>	<b>10.62</b>	<b>10</b>	<b>10.93</b>

w hole council (not BV12)

bv12

leavers absence (days)

3. In 2003/04, the Resources Scrutiny Commission examined sickness absence management. Their recommendations are set out in Appendix A, with a note of action taken. Policy and practice has been improved. To support the active management of attendance of managers, monthly trigger point reports have been introduced. Assistant HR managers have worked with managers on particular cases and on particular workgroups. Training has been provided for many managers. The medical redeployment policy has been changed. From 2004 – 2007, a Management of Attendance Board met to provide a forum for sharing good practice and for reviewing progress.
4. Performance has also been reviewed by a Scrutiny Select Committee (staff health and welfare) and consultants have advised on healthcare solutions (the Jelf Group 2007) and occupational health services (Split Dimension 2007).
5. Over the last 5 years, Council-wide performance has been:

	days/shifts per employee
2003/04	12.00
2004/05	11.82
2005/06	10.95
2006/07	10.62
2007/08	10.93

6. There has been some improvement, but overall progress appears now to have stalled. We therefore need to consider what further action to take.

## Proposals

7. **Sickness Absence management** : examination of practice elsewhere indicates that a number of organisations are now changing their arrangements so that employees who are sick phone specially trained practitioners, rather than their line managers. The employees are questioned about the nature of their illness/injury, given advice, and asked about anticipated return to work. The manager is advised, and follow-up calls are made as appropriate. Substantial reductions of sickness absence are reported as being achieved.
8. It is proposed to implement such an arrangement, using an external provider, on a pilot basis for residential/home care services in ACC and one of the CSS Divisions. The outcome will be evaluated with a view to council-wide implementation in due course, if the pilot demonstrates a strong business case.



9. The Management of Attendance Policy is currently under review as part of the HR Division's programme for simplifying policies and procedures. The review is due to be completed in September 2008. This will incorporate some revised provisions around self certification and unauthorised absence (including a response to the increasing refusal of GPs to issue 'private' medical certificates). New e-developments in the OH&C medical records system will assist in giving up to date information regarding sickness absence trends.
10. **Application of the existing policy** : there is some anecdotal evidence that the requirements of the existing policy (eg suspected abuses of the scheme leading to disciplinary action and possibly suspension of occupational sick pay) are still not being consistently applied across the organisation. It is proposed that the Chief Executive should write to all managers to inform them of the most recent figures and to remind them of the key elements of the management of attendance.
11. It is important that senior managers continue to reinforce the importance of good management of attendance, and that DMTs continue to consider absence data on a regular basis.
12. **Occupational Health and Counselling** : an improvement plan is being implemented, to increase the value added by the service. Measures include the introduction of medical consultations by telephone, electronic referrals (with a clear indication of information required) and reports, streamlining the approach to pre-employment questionnaires, and improved communication between the OH & C service and managers to ensure mutual understanding of respective roles and responsibilities.
13. The LGPS ill health retirement provisions have been radically changed from 1 April 2008. This has resulted in a 'three tier' system, the full impact of which will not be known until transitional arrangements have ended.
14. **Stress** : approximately 11% of sickness absence is reported as caused by stress. The Council's stress policy is being reviewed with a view to incorporating further advice about how to reduce stress by good management practice.

### **Other options considered**

15. There are many additional staff welfare services that could be considered, some of which were recommended by Scrutiny Select Committee. However, these are not proposed at this stage because there is no finance for such developments.

16.It would be possible to depart from NJC arrangements and, for example, withdraw pay for the first day of sickness. This is not proposed at this stage because of the industrial relations implications.

### **Recommendation**

17.That CMT endorse:

- the proposed Sickness Absence Management pilot; and
- the action proposed to reinforce the application of the existing policy.

### **Director of Central Support Services**