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Sickness Absence Arrangements Follow-up Review – **Wrexham County Borough Council**

Audit year: 2017-18

Date issued: July 2018

Document reference: 709A2018-19



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[Mae'r ddogfen hon hefyd ar gael yn Gymraeg. This document is also available in Welsh.

The team who delivered the work comprised Richard Hayward, Paul Goodlad and Jeremy Evans under the direction of Huw Rees.

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Summary report

- 1 In February 2016, the Auditor General published his report on the Corporate Assessment at Wrexham County Borough Council (the Council). The report contained five Proposals for Improvement (PFI), including to strengthen the Council's arrangements for monitoring, recording and reporting sickness absence.
- 2 A follow-up review during early 2017 found the Council had reviewed its HR capacity, updated the arrangements for supporting line managers and implemented new mechanisms for absence reporting and monitoring. It was too early to assess the effectiveness of these actions. The Council's 2017-18 external Audit Plan included a second follow-up review to provide the Council with assurance on the new arrangements for sickness absence management.
- 3 In this review, we found **the Council's arrangements for managing sickness absence are helping to reduce absence levels**. We came to this conclusion because:
 - line managers receive appropriate HR support to manage sickness absence;
 - revised arrangements for notifying, recording, reporting and monitoring sickness have improved the accuracy of sickness data, but some aspects of the process could be streamlined; and
 - improved arrangements are helping to reduce sickness absence levels in the majority of service areas.

Detailed report

The Council's arrangements for managing sickness absence are helping to reduce absence levels

Line managers receive appropriate HR support to manage sickness absence

- 4 Ongoing support from the Council's Human Resources (HR) team has improved the capability of line managers to manage staff sickness absence. HR has provided managers with a range of support and training to manage sickness absence, and other workforce-related issues, effectively. For example, all managers have received training on 'having difficult conversations with employees'; this prepares managers to handle conversations on sensitive or emotive issues. Some 40 managers are also accredited 'mental health first aiders', able to recognise the signs of mental health issues and to help employees who need support.
- 5 In addition, the Council holds regular well-being events that aim to improve the general health of employees through initiatives such as promoting healthy eating and stress management. Supporting these sessions, the Council has introduced a risk assessment process, which helps managers develop an action plan to support any employee who reports feeling stressed.
- 6 The introduction of 'My View' a web-based self-service system for employees and managers to view and edit personal details online, has enhanced the capacity of line managers to manage sickness absence. The system allows managers to run absence reports that identify employees within their teams who have reached a threshold set out in the Council's sickness policy. The system provides a simple and efficient way for managers to identify sickness management issues. However, some managers continue to use spreadsheets to monitor staff sickness rather than the reports available via 'My View'. HR view this resistance to change as a cultural issue that will improve over time as managers become more familiar with the system and the features it can provide.
- 7 There are some concerns amongst line managers regarding the effectiveness of the Occupational Health service. A new Occupational Health provider was appointed in July 2017. Mostly line-managers make referrals to the service in consultation with HR, although employees can self-refer. The feedback we received was some managers feel the advice and interventions from Occupational Health are not beneficial in helping managers manage sickness absence. However, some managers might expect more from Occupational Health than its remit of providing advice from a medical perspective to support the employee.

Revised arrangements for notifying, recording, reporting and monitoring sickness have improved the accuracy of sickness data, but some aspects of the process could be streamlined

- 8 The Council's sickness absence policy, introduced in April 2016, is clear and comprehensive. The policy is intended to help managers support employees who are ill and to manage unjustified absences. It defines the specific roles and responsibilities of managers, HR, employees and trade unions in relation to sickness absence and emphasises that line managers have overall responsibility for monitoring absence.
- 9 A new process for reporting sickness, which promotes a more consistent way of recording the nature of sickness, has helped to improve the clarity and accuracy of sickness data reporting. The Council-wide figure for 'no reason' for sickness has reduced from 26% in 2017 to 11% in 2018. The timeliness of sickness absence reporting has also improved. Payroll officers now update the sickness absence database daily, rather than on an ad-hoc basis, whenever competing priorities allow. They also take a more proactive approach to chasing up missing return-to-work forms, which helps to ensure that data held on the HR system is up to date.
- 10 An electronic process to record sickness data would be more efficient than the current manual, paper-based approach. Managers currently complete a paper pro forma (the SSP1 form) when an employee reports in sick, which they send by internal mail to the Payroll team. Payroll officers then input this data into the integrated HR and Payroll system 'Resource Link'. Allowing managers to enter sickness information directly into 'Resource Link', using the 'My View' section of the system would be more efficient. While HR has identified the potential benefits of using a single-entry electronic solution, HR department capacity is focused on completing what the Council considers higher priority tasks.
- 11 The Council has taken action to improve the way managers engage with staff who are absent on sick leave. Managers now contact absent staff at an early stage, to understand more clearly what support the employee might need in order to return to work. This approach is helping, in some cases, to reduce the duration of sickness absence and to avoid situations that might otherwise trigger a further absence.
- 12 Corporate arrangements for reporting sickness management information are comprehensive. However, there is a discrepancy between the type of information produced to inform the Customers, Performance, Resources and Governance Scrutiny Committee and the Senior Leadership Team (SLT). Workforce monitoring information, including sickness absence, is reported twice yearly to Overview and Scrutiny and, from 2017-18 onwards, quarterly to the SLT. Both reports are detailed and clearly written, but provide information about sickness absence in different ways. The report to the SLT covers 'sickness rate per month and quarter', but does not provide information or analysis about the 'reason for sicknesses'. Conversely, the report to Overview and Scrutiny does not provide data on sickness

rates but does include an analysis of the reasons for sickness absence. Both reports reference the national performance indicator for monitoring sickness 'average number of days lost per full time equivalent (FTE)'.

Improved arrangements are helping to reduce sickness absence levels in the majority of service areas

- 13 Overall sickness absence levels across the Council have improved. Both relatively and comparatively. Days lost to sickness, per full time equivalent (FTE) employee, reduced from 11.9 in 2015-16, to 11.3 in 2016-17. This reduced further to 10.9 for 2017-18. The Council's sickness absence performance compared to others in Wales also improved, from 18th out of 19¹ in 2015-16, to 17th out of 21 in 2016-17.
- 14 The actions taken to improve absence management have encouraged a cultural change within the Council. The managers we spoke to believed that Council staff are significantly more aware of the consequences of taking unwarranted absence than in 2016.
- 15 Despite the overall improvement in sickness absence, performance during 2017-18 deteriorated in two service areas, Adult Social Care and Environment and Planning. This is a particular concern for Adult Social Care, the service with the highest overall sickness rates during 2016 -17. Our discussions with senior officers indicate the Council is aware of this issue and there has been an increase in the scrutiny of short-term absences in Adult Social Care during 2017-18.

¹ Nineteen of the 22 unitary authorities in Wales submitted sickness absence performance data in 2015-16; 21 submitted data for 2016-17. Comparative data for 2017-18 is not yet available.

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