

## ABSENCE MANAGEMENT AND REPORTING 2016/17

### SUMMARY

1. This report provides an update to Members with regard to absence management and reporting during 2016/17 and beyond, specifically in relation to an action arising from the 25 April 2016 HFA meeting whereby it was resolved that sickness absence would be reported to each meeting of the HFA.

### RECOMMENDATIONS

2. (a) Members note the Service's proactive approach to absence management.
- (b) That the targets set out at paragraph 5 of this report be adopted as the Service's sickness absence targets for 2016/17.
- (c) That a summary of performance, including sickness absence will continue to be formally reported on a quarterly basis, in accordance with our Performance Management Framework.

### ABSENCE MANAGEMENT REPORTING

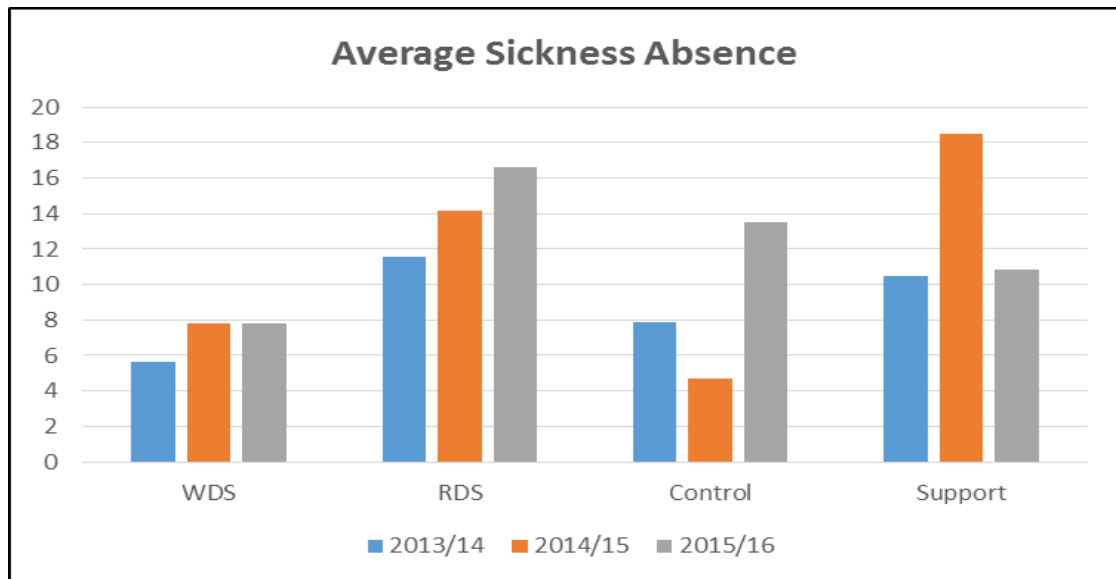
3. At the 25 April HFA meeting, Members commented on the sickness absence levels for some staff groups, within the period 2015/16. It was resolved at the meeting that sickness absence performance should be reported to each HFA meeting in order to give a clear picture on absence levels in 2016/17.
4. During the last two months a verification exercise was conducted to finalise the sickness absence figures for 2015/16 and hence the targets for 2016/17. The outcome of the verification exercise has resulted in final sickness absence figures for 2015/16, which have now been incorporated for performance target reporting during 2016/17. Figures reflect the average number of working days absence per employee, across each staff group and at Service level.
5. It is recommended that target setting for sickness absence is brought into line with other performance reporting in that a 3 year average baseline of actual performance, adjusted to stimulate or maintain improvement, is adopted from 2016/17 onwards (Table 1 refers).

**Table 1**

Sickness Absence		3 year average baseline (days/employee)	2016/17 Target (Adjusted to stimulate or maintain improvement) (days/employee)
Staff Group	2015/16 Actual performance (days/employee)		
<b>WDS</b>	7.8	7.0	7.0
<b>RDS</b>	16.6	14.1	14.1
<b>Control</b>	13.5	8.7	8.7
<b>Support</b>	10.8	13.3	10.0
Average	12.1	10.7	9.9

6. Table 2 below sets out the Service's average sickness absence for the years 2013/14, 2014/15 and 2015/16. Pleasingly the WDS absence performance is stable between 2014/15 and 2015/16 and for the same period for Support the figure has decreased significantly.
7. There is however an upward trend across the RDS and Control employee groups. The increase in sickness for Control is attributable to a small number of individuals with long-term absences, within a relatively small employee group. The more consistent increase in sickness absence for RDS employees will be subjected to further analysis by our HR team and line managers, in order that we can fully understand the reasons for the increase and apply appropriate management actions.

**Table 2**



#### ABSENCE MANAGEMENT POLICY

8. A new Absence Management Policy is currently under development with a view to its implementation in the 2<sup>nd</sup> quarter of 2016/17. This will move away from the use of the Bradford Factor to the use of trigger points within a rolling year. This will help to identify employees who regularly have poor attendance. Frequent short-term absence is much more disruptive to the Service than long-term absence, although we recognise that both need to be carefully and sensitively managed.
9. The trigger points are:
  - Three separate absences in any six rolling month period;
  - 8 working days absence in a rolling twelve month period (pro-rata for part-time employees);
  - Patterns of absence e.g. after annual leave, the weekend or a bank holiday; or any pattern that arises from an employee regularly avoiding hitting a formal trigger;
  - Any periods of absence resulting, whether from aggregation or not, in the employee going onto half pay.
10. An absence lasting 21 days or more will be deemed to be long-term sickness for the purposes of the policy.

11. On a monthly basis HR will produce confidential absence reports known as “trigger reports” for Managers which will highlight those employees whose attendance record is giving ‘cause for concern’. Sickness statistics will also be reported to the Tactical Management Team (TMT) for discussion (Group Manager and Grade 13 Management Group).
12. The recent appointment of the Human Resources Manager (Michelle Taylor took up post in March 2016) and the impending HR Director appointment (this process will be concluded by 30 June 2016) will further support the strategic development of recording, assessment, management/resolution and reporting of sickness absence across all employee groups in addition to significantly raising the profile of HR at HFA and CMT level.

#### STRATEGIC PLAN COMPATIBILITY

13. Effective management of sickness absence is a key enabler towards achieving all of our Strategic Objectives.

#### FINANCIAL/RESOURCES/VALUE FOR MONEY IMPLICATIONS

14. A rise in sickness absence and the loss of personnel through sickness absence have an impact on both the finances of the Service and the resources available for deployment.

#### LEGAL IMPLICATIONS

15. See paragraph 16.

#### EQUALITY IMPACT ASSESSMENT/HR IMPLICATIONS

16. Equality assessments will be developed where appropriate and all of our approaches to Human Resource Management are designed to ensure fair and reasonable application of employment legislation.

#### CORPORATE RISK MANAGEMENT IMPLICATIONS

17. No direct issues arising.

#### HEALTH AND SAFETY IMPLICATIONS

18. No direct issues arising

#### COMMUNICATION ACTIONS ARISING

19. No direct issues arising

#### DETAILS OF CONSULTATION

20. The new Absence Management Policy has been through a staff consultation process and is tabled for final review at the Joint Consultative Committee (JCC) meeting on 23 June 2016.

#### BACKGROUND PAPERS AVAILABLE FOR ACCESS

21. Draft Absence Management Policy.

#### RECOMMENDATIONS RESTATED

22. (a) Members note the Service’s proactive approach to absence management.

- (b) That the targets set out at paragraph 5 of this report be adopted as the Service's sickness absence targets for 2016/17.
- (c) That a summary of performance, including sickness absence will continue to be formally reported on a quarterly basis, in accordance with our Performance Management Framework.

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