

Appendix - Management of Attendance

Children's Services - Home to School Transport

Background

Home To School Transport Service supports children and young people with SEND with travel arrangements to and from school which enables the Council to meet its statutory duty. The service is comprised of 250 (86 FTE) Passenger Assistants Grade 1.

In Quarter 3 18/19 the service had the highest absence in Children's & Education Services with:

- 833 days lost within the quarter.
- 5.8 days lost per FTE
- 32 long term absence incidences
- 136 short-term absence incidences
- 20% of absence relates to stress/depression

The service was identified as requiring an absence management intervention due to the absence levels. An action plan was co-produced with the management team with specific targets set in respect of reducing short-term absence and supporting staff with health and wellbeing. The action plan (set out below) was designed to address the causes of absence, workforce development requirements and management capability & capacity.

The intervention has been in place for 9 months and the absence levels within the service has significantly improved. In Q2 19/20, the service has one of the lowest absence rates within Children's & Education Services with:

- 502 days lost within the quarter
- 3.13 average days lost per FTE
- 16 long term absence incidences
- 52 short term absence incidences
- Stress/depression no longer the main cause of absence.

Action - Home to School	Target end date	Progress to date
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Transport		
Resilience Training	28/02/2020	<p>A resilience training package has been designed and approved by Michelle Devine</p> <p>The course will be delivered in October 2019 half-term and February 2020 half-term</p> <p>180 Passenger Assistants attended the training in October 2019</p>
Review Mandatory Training	28/02/2020	<p>Review of the quality and frequency of de-escalation concluded. A proposal to increase the frequency and duration of de-escalation training from once every 3 years for 30 minutes to once a year for half a day has been agreed by the Head of Service. This is in-line with similar services ie Children's Residential.</p> <p>A revised training plan to be developed and new de-escalation training to be delivered from February 2020 onwards.</p>
Set absence objectives within Head of Service's about you.	Completed.	<p>CLT agreed to include absence objectives for the top 3 services with the highest absence</p> <p>HRBP to meet DoE to draft/set objective.</p>
Absence calls to be taken by line managers	Completed.	<p>A letter has been drafted to staff confirming the expectations when reporting in sick.</p> <p>Service briefed by Head of Service re only management should take calls for sickness reporting</p> <p>Compliance report developed to track % of managers taking calls</p>
Child Rotation	Completed	<p>Proportion of the young people the service supports have greater needs (complexity, behavioural and physical). Manager to rota staff as and when service allows to support staff wellbeing.</p>
<p>Increase Occupational Health referrals for absence which relates to stress/depression</p> <p>Improve the quality/effectiveness of referrals.</p>	31/03/2020	<p>Alison Backhouse providing on-site support and is reviewing absence reasons to determine whether referral is appropriate.</p> <p>Alison Backhouse to assist with referral questions and training to be delivered on 23/09/2019.</p>

Review the quality of Return to Work & Attendance Management Reviews.	28/02/2020	<p>Service provided x 10 samples of RTW and AMR.</p> <p>HR has analysed and identified areas for improvement. Training session delivered to the management team on 23/09/19</p> <p>A further dip sample will be taken in February 2020 to review the impact of the training and assess the quality/improvements.</p>
Monthly absence management surgeries	Completed	Regular surgeries established for management to attend with absence cases.
Establish monthly reporting cycle	Completed	Monthly absence management information provided to the management team.
Establish additional management positions and capacity.	31/03/2020	<p>Service redesign to be implemented by November 2019.</p> <p>Proposal to be considered by CLT and HR sign-off in September 2019</p> <p>Staff and Trade Union consultation closed on 12 December. Implementation and interviews January - March 2020</p>

Corporate Core - Legal Services

Background

Legal Services was identified as a service area to focus on as part of the absence management plan as they are consistently in the top three highest level of sickness absence quarter on quarter across the Core despite doing a significant amount of work to reduce absence. The service have a head count of 253 (FTE 240) so are the second largest across the Core. The overarching aim of the review is to support the service to reduce absence and to support staff to feel happy, healthy and be successful in work. In order to support Legal Services and action plan has been pulled together between the HR Business Partner and the service, and agreed actions for resolution now form part of a project plan which will be delivered over a 12 month period.

The following figures provide key sickness information from Q2 2018/19 & Q219/20:

- Average Days lost per FTE over 12 months (Q218/19) - 11.49 (Q2 19/20) - 15.05

- Days lost in Quarter (Q2 18/19) - 726 (Q2 19/20) - 577
- Top reason for sickness absence is Stress/Depression for days lost with Gastrointestinal being the highest for number of incidences.
- Long Term sickness cases (Q218/19) -8 (Q219/20) -12
- Medium Term sickness cases (Q218/19) - 9 (Q219/20) - 5
- Short Term sickness cases (Q218/19) - 91 (Q219/20) - 61

Action - Legal Services	Target end date	Progress to date
Pilot a number of workshops to compliment skills managers need to become a more person centred service, these to include; Strengths based and difficult conversations; Being the best manager you can be; Mental Health Awareness; Review and understanding personality types. Managing sickness absence.	31/03/2020	Currently looking to commission the workshops and outline the scope for the agreed outcome objectives.
Promote Mental Health First Aiders.	Completed	Discussed at Health & Wellbeing Board and Legal are one of the pilot services.
Creating mentally healthy legal workplaces	31/12/2019	Mel to review the spec and costs of the LawCare offer and if cost effective then we can progress to commission.
Objective on pro-active management of all sickness (LT/MT/ST) absence to be included on all manager About You performance reviews.	Completed	Raised at LMT to ensure that this is included as a performance measure for 2020.
Review patterns of sickness and recognise early signs of trends or behaviours.	On-going	TH currently holding fortnightly MoA meetings with David Green to review top 10 cases/ patterns and trends. LMT need to ensure managers who have issues are invited and engaged with these sessions.

Ensure vacancies are managed in a timely manner	31/01/2020	A number of new posts are currently being created to support both the Childcare Legal/Commercial/Regeneration teams due to a number of resignations and increase workloads.
Review the quality of Return to Work & Attendance Management Reviews and ensure a quality discussion takes place.	31/1/2020	Tracey to work with ELT managers to review the quality of the return to work forms and Mel to support with any strengths based conversations to ensure quality conversations take place between manager and staff member.
Fortnightly absence management surgeries	On-going	Surgeries are currently taking place on a fortnightly basis and are well attended, Need to ensure those managers who have issues and are not attending are invited via LMT.
Providing monthly absence statistics	Completed	Currently providing monthly data to David Green to present at LMT as a standing item. HR BP attends on a bi-monthly basis to review.
Attend Legal staff briefings sessions in January 2020	31/01/2020	HR have 20 min presentation at each of the two sessions booked in January 2020. Presentation slides to include data relating to Legal Services as well as support already in place. Discussion with staff to understand issues and what solutions or suggestions they may have.
Attend ELT (Extended Leadership Team)	Completed	Next ELT date for this is 17 October. Agreed slot for HR to discuss Dashboard and the MoA presentation. Looking to provide workshops.
Review concerns raised by LMT regarding the issues on SAP in relation to the entry of RTW's.	31/12/2019	Significant errors raised by LMT regarding the data accuracy of RTW's. Issue raised at LMT with Leanne Edwards SBP for ICT.

Adult Services - Disability Support Accommodation Services (DSAS)

Background

The Disability Supported Accommodation Service has historically experienced high levels of sickness absence and appears frequently in the top 3 Directorate Services for highest number of days absence per FTE each quarter. The service is comprised of a workforce of circa 300 FTE and operates on a citywide basis across North, South and Central areas of Manchester. The workforce are front line and support some of the most vulnerable, challenging and complex citizens with learning and physical disability needs in the city.

The work can be extremely physical with manual lifting and handling, and can also be challenging in terms of citizen behaviour which can sometimes be aggressive or quite complex in terms of health requirements. Musculoskeletal, injury, surgery and stress and depression are the main reasons for absence across the service.

The purpose of the review is to reduce absence and support the managers/supervisors to be confident and have the skills to manage attendance effectively, developing interventions and utilising the relevant tools to support the workforce to sustain an improved level of attendance.

The following figures provide key sickness information showing a comparison from Q2 2018/19 to Q2019/20:

- Average Days lost per FTE over 12 months (Q218/19) - 17.5 (Q2 19/20) - 15.60
- Days lost in Quarter (Q2 18/19) - 1253 (Q2 19/20) - 1551
- Top reason for sickness absence is Stress/Depression. Top reason for highest incidences of absence is Gastrointestinal.
- Long Term sickness cases (Q218/19) - 27 (Q219/20) - 31
- Medium Term sickness cases (Q218/19) - 17 (Q219/20) - 18
- Short Term sickness cases (Q218/19) - 28 (Q219/20) - 40

Action - DSAS	Target end date	Progress to date
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<p>OD Lead to work with Service and Team Managers to identify solutions where skills gaps and additional training across identified areas is required</p>	<p>31/3/2020</p>	<p>A Training Focus Workshop facilitated by the OD Lead and Service Manager was held earlier in the year following a meeting with the Head of Service. All managers from across the Service were invited to attend the morning workshop and all Heads of Service were invited to attend the afternoon session.</p> <p>The purpose of the workshop was to identify the required training courses for each service and the expected numbers of places required on each training course over the next 12 months. The workshop enabled the services to identify the mandatory training required for new and existing staff, including refresher training, and also identify additional training and development opportunities that managers/supervisors will be required to ensure staff have the knowledge, skills and confidence to perform in their roles.</p> <p>The results were incorporated into the overall Adults directorate training plan and has been used as a base to commission the required training for the service for 2019/2020.</p>
<p>Resilience/Restorative Supervision Training to provide a foundation for maximising effective staff management</p>	<p>31/12/2019</p>	<p>Sessions for restorative supervision have already been commissioned within other service areas. In DSAS whilst it has been agreed that resilience training and restorative supervision will be commissioned the Head of Service would like this to progress at the point a number of new Support Coordinators take up their new roles. The timescale for this is the end of December. There are also further conversations to take place with regard to considering whether the service would benefit from MIND or Remploy delivering some sessions.</p>

HR Induction in key people policies	30/1/2020	Content for supporting the induction process is ready in draft and will be presented to a select group of managers for comment in January 2020
Reinstate the HR Casework support clinics for absence and conduct	Completed	DSAS meetings have been reinstated on a monthly basis with Head of Service and Operational Manager. Active discussions on cases and relevant actions being monitored.
Focus on the management of Medical Redeployees	Completed	A thorough review of all employees deemed to medical redeployees has taken place which has resulted in a significant reduction from circa 35 to 7. Some returned to substantive post with reasonable adjustment. There is now a systematic review of each case on a monthly basis to track progress. HR are supporting the managers in identifying suitable alternative posts for employees. In conjunction with MAES, basic skills training has been commissioned for medical redeployees to support increased skill base and better opportunities for alternative employment
Identify and focus on staff with regularly occurring absence	Completed	Currently identified 4 cases. Managers have been contacted to arrange to meet with HR to agree an action plan for each of these. Meetings held by the end of October.
Review the cases of absence due to stress/depression from the Q1 dashboard.	Completed	Information and overview of each case is being prepared for discussion with Service Manager and Head of Service by end of Sept. Further actions to follow from this
Review the quality of Return to Work conversations. Review the quality of Attendance Management Review meetings/conversations	30/01/2020	Managers have been asked to send x 10 RTW forms to Sarah Hampson and David Marsh by end Sept 2019 - this has been extended until the end of Jan Managers have been asked to send x 10 AMR letters to Sarah Hampson and David Marsh by end Sept 2019. This has been extended until the end of Jan

Distribution of Return to work compliance reports	Completed	Reports now being sent. This action is ongoing
Create additional management positions	Completed	Business case, finance and relevant approvals in place. New structure to be implemented by mid-October.

Neighbourhoods - Highways Maintenance

Background

The Highways Maintenance team (previously known as 'Manchester Contracts') disaggregated from the Highways Service in July 2019 and transferred to Commissioning and Delivery, therefore only Q2 2018/19 information on sickness absence is available. During July 2019, the team were managing 7 long term sickness cases which has now reduced to nil as a result of the actions below. The service is made up of 71 FTE predominantly male craft workers and have historically struggled with physical ailments and mental health issues.

The following figures provide key sickness information from Q2 2018/19:

- Average Days lost per FTE over 12 months (Oct 18 - Sept 19) is 20.04 per FTE
- Days lost in Quarter - Q2 - 355 days
- Top reason for sickness absence (Q2 2018/19) - joint reason for most days lost and number of incidences is Stress/Depression and Musculoskeletal
- Short Term sickness cases -13 (Q2 19/20)
- Medium Term sickness cases - 5 (Q219/20)
- Long term sickness cases 6 - (Q219/20)

The intervention has been in place for 4 months and long term absence levels within the service has improved.

The service is closely linked with with Grounds Maintenance which also comes under Commissioning and Delivery and a summary of the actions proposed and delivered to manage absence management is below:

Action - Highways Maintenance	Target end date	Progress to date

Develop career plans (and succession planning) for employees in manual roles who develop physical (and age related) conditions that prevent them from carrying out their roles.	Complete	The Service Manager has now met with all employees in the service and development plans have been created for each employee in order to assist them to fulfil their ambition. Three operatives have now been placed on Engineering Technician Apprentices.
Deliver training on management of attendance to service areas - includes roles of responsibilities for managers/employees/HROD, reasons for compliance, triggers, meaningful conversations and AMRs	Complete	<p>Training was delivered in November 2018 with a refresher training scheduled for September 2019</p> <p>At the sessions, managers raised the difficulty in handling disability related absence and applying sanctions to short term absence. They were generally unsure about how to take employees through the entire absence management process and they weren't aware of the support available at the Council such as flexible working practices, parental leave, carer's passport and mental health offer. There was a general lack of confidence in distinguishing and supporting employees with sickness issues and those that had caring responsibilities.</p>
HROD to undertake absence surgeries on a monthly basis to help educate managers to review cases and build experience and self reliance in the process.	31/03/2020	HR Specialist started the monthly meetings with managers and supervisors starting from April 2019. They review the actions agreed from the last meeting and focus on long term sickness cases and look at strategies to resolve issues. Progress has been made so far on improving compliance with sickness procedures, and setting and following up actions does seem to focus managers' minds. More progress to be made on forward planning, strategic thinking and on using the AMRs to challenge patterns of sickness, and also a particular issue of using Annual Leave in the first part of the year to mask sickness, leading to an increase of sickness later

		in the year.
Targeted support to help managers to write detailed Occupational Health referrals to Healthworks	Ongoing	HR Specialist has been checking the referral forms and advising managers of suggested amendments. As a result, the report has now included more clearer medical information and there have been examples of employees coming back to work sooner. In particular, the service are being supported to provide much more background to Healthwork about the management of the case so far which makes it more difficult for the employee to provide information unchallenged at the appointment.
Review the quality of Attendance Management Review (AMR) meetings/conversations	15/11/2019	HR Casework colleagues have been providing support on AMR outcomes. It was agreed that five would be checked by mid November 2019. To date these have not been forthcoming but the service will be reminded at the next surgery that this offer in place.
Monthly absence reports for Manchester Contracts to be provided to the service	31/07/2020	HR has been sending absence reports from July 2019
Objective on reducing short and long term sickness absence to be entered into relevant managers' annual performance measures	31/03/2020	This is a new measure added to action plan

Growth and Development - Manchester Adult Education Service (MAES)

Background

MAES was identified as a service area to focus on as part of the absence management plan as they were consistently in the top three highest level of sickness absence quarter on quarter across Growth and Development (however they are the second largest service area). MAES was identified as a service requiring extra support because their number of days lost in the quarter peaked to 637 days lost in Q4 2018/19. There are currently three long term sickness cases support by HR Casework team. The service is made up of 177FTE teaching and support staff.

The following figures provide key sickness information for the service:

- Average Days lost per FTE over 12 months:
 - Oct 18 - Sept 19 - 10.11 per FTE
 - Oct 17 - Sept 18 - 9.67 per FTE
- Days lost in Quarter:
 - Q2 - 344 days
 - Q1 - 448 days
 - Q4 - 637 days
 - Q3 - 425 days
 - Q2 - 399 days
 - Q1 - 240 days
- Most days lost - Stress/Depression
- No of incidences - Cold, Cough and Flu
- Short Term sickness cases -31 (Q2 19/20)
- Medium Term sickness cases - 16 (Q219/20)
- Long term sickness cases 53 - (Q219/20)

The following actions were agreed with the service to help lower sickness absence:

Action - MAES	Target end	Progress to date
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	date	
OD development work to help managers take responsibility for their role and understand accountabilities. This will include workshops and different ways of working (e.g. using youtube, webinars, learning styles)	31/03/2020	<p>OD development work includes:</p> <p>Role of manager - sitting with service and helping them to understand their role</p> <p>Using different learning styles with team members</p> <p>Management charter - accountabilities</p> <p>Mental Health Awareness</p> <p>Review and understanding personality types</p> <p>In January 2019, the service held a staff conference and invited a consultant to discuss handling difficult conversations as well as the Council's Employee Assistance Programme.</p>
As colds, coughs and flu is the top reason for the number of incidences, the Directorate will offer flu vaccination at employee's work location to ensure it is easily accessible.	Completed	Flu vaccination sessions were offered at a number of adult learning centres from 2 Dec to 12 Dec and take up was high (approx 300 vaccinations across Neighbourhoods and Growth and Development). Employees can continue to claim back £10 toward the cost of vaccination if offered elsewhere.
Offer drop in sessions to help managers tackle difficult sickness cases	Ongoing	HR Specialist delivered the sessions an hour prior to the MAES team meeting and in the afternoons. In total, there were sessions for two hours every fortnight starting May 2019 and scheduled up to February 2020. Any impact will likely be seen in Q 2019/20.
Deliver training on management of attendance	Completed	<p>Session took place 22 Nov.19. 15 managers from across MAES attended with more to be added to the session.</p> <p>The sessions lasted 3 hours and included: roles of responsibilities of managers/employees/HROD, reasons for compliance, triggers, meaningful conversations and AMRs</p>

Review the quality of Attendance Management Review (AMR) meetings/conversations	Part Completed	HR Casework requested at least 6 AMR letters from MAES service areas. So far they have only seen 2 AMR outcome letters, and these were relating to cases they were advising on. HR emailed service manager on 1 November for a reminder for other letters.
Monthly absence statistics to be provided to MAES	31/12/2020	To start from October 2019. SAP updates has caused issues with producing sickness data therefore this has not been provided on a monthly basis, however HR shared detailed sickness data with the Head of Office in October relating to all sickness data for academic year Sept 2018 - Aug 2019
Objective on reducing short and long term sickness absence to be entered into relevant managers' annual performance measures	31/03/2020	This is a new measure added to action plan
Consider MAES structure to look at lines of reporting and capability of lower graded managers to deal with sickness issues. Links to action 1 (on OD development work to determine if a restructure is needed)	31/03/2020	<p>HR has worked with the service to clarify management structure.</p> <p>At the moment, the lowest grade of manager responsible for staff is paid Grade 4 and there are three of these managers (managing between 4-5 staff each). However there are queries whether these Grade 4 are undertaking true management responsibilities.</p> <p>There are 7 Grade 5 managers managing 3-6 staff each on the non teaching side.</p> <p>There are two Grade 6 managers managing 3-5 staff each.</p>

Implement Mental Health First Aid service in MAES	Ongoing	This has been discussed at Health & WellBeing Board MAES has been selected to be involved in the pilot starting during October/November.