

THE CHRISTIE NHS FOUNDATION TRUST

# PRO-ACTIVE OCCUPATIONAL HEALTH SERVICES IMPROVING STAFF HEALTH AND ATTENDANCE

## SUMMARY

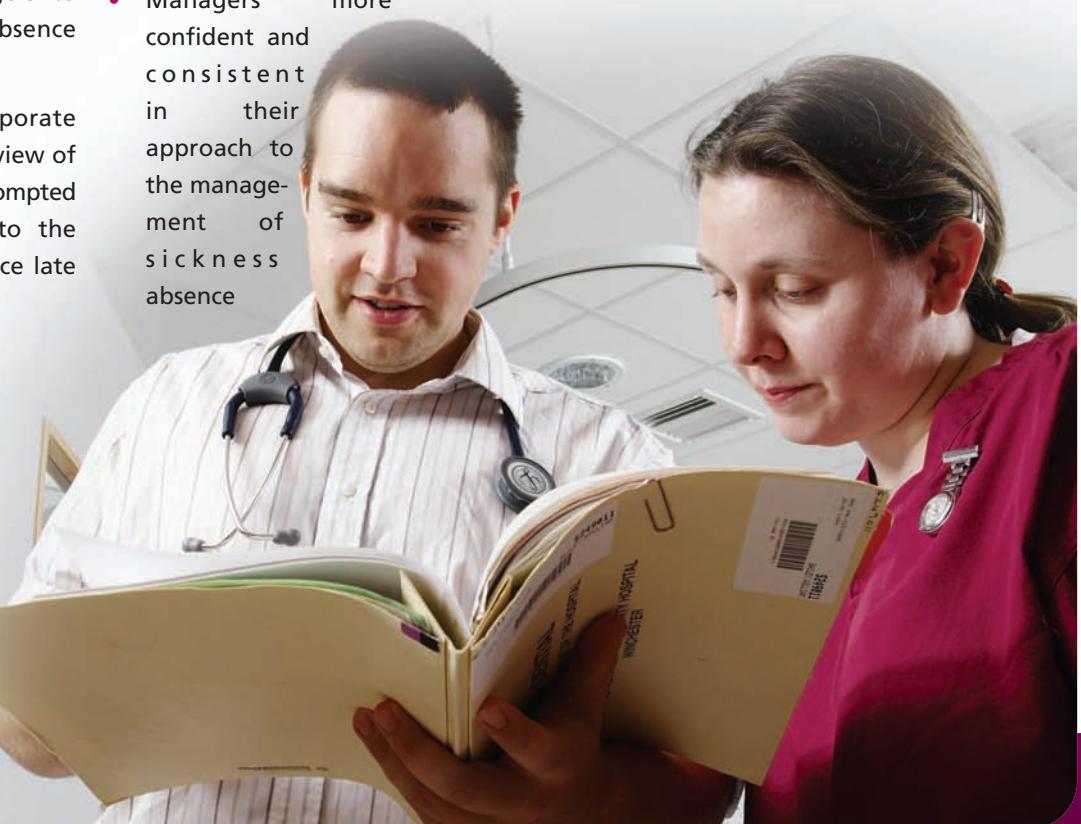
This Specialist Trust in Manchester aims to promote an attendance culture among staff to ensure the provision of high quality services to its patients. It has supported this aim by introducing a clear policy framework offering a fair and consistent approach to monitoring, managing and reducing sickness absence levels. The role of Occupational Health has been key in proactively working with HR and Managers to achieve and keep sickness absence below 4%.

The Boorman report, Corporate attendance objectives, and a review of Occupational Health provision prompted a new integrated approach to the management of attendance since late 2009.

- Improved attendance, wellbeing and productivity of staff
- Better support for staff in the workplace
- Employee Experience Working group established leading wider health and wellbeing support programmes for staff
- Reduced agency costs due to reduced sickness absence
- Managers more confident and consistent in their approach to the management of sickness absence
- More productive and focussed meetings with Occupational Health and HR to support people back to work after sickness
- Clearer and more structured attendance policy which is reported as being easier for managers to follow

## KEY OUTCOMES

- The Trust has seen a positive reduction in sickness absence with a current level of 3.89%
- Better quality of sickness information and reporting as part of the Trust's robust performance management systems



## BACKGROUND

The Christie NHS Foundation Trust is one of Europe's leading cancer centres, treating more than 40,000 patients a year.

The hospital is based in Manchester and serves a population of 3.2 million across Greater Manchester & Cheshire, but as a national specialist around 26% patients are referred from other parts of the country.

Annual turnover is £173 million and it has 2,500 staff, 350 volunteers and 16,500 public members.

The Christie places a high value on maintaining a healthy and safe working environment for all its employees and recognises that this duty of care extends to all aspects of health at work. It also needs to ensure that staff attendance levels do not adversely affect patient care.

Occupational Health staff play an important role in this but before the changes the Occupational Health Department were not working in a proactive way with managers. Some managers were struggling with managing staff attendance, the attendance policy lacked clarity and this resulted in inconsistent treatment of ill health and absence. However after the changes the Occupational Health team have spent time meeting with Divisions across the Hospital to explain the process of managing attendance and their objectives in supporting managers. They also provide monthly reporting including an analysis of sickness levels and trends which is presented in Divisional Board reports and forms part of the Divisional monthly performance reviews with the Chief Executive. This has been complimented by an annual audit of sickness carried out by HR working in conjunction with Occupational Health and managers.



### A statement from Cheshire Occupational Health Service (COHS) – the new provider

Following a formal tendering process, March 2010 saw Cheshire Occupational Health Service (COHS) being appointed as the Occupational Health provider to The Christie. From the outset, COHS has worked closely with the Trust to address some of the underlying issues around managing attendance and

*proactively improving the health and wellbeing of staff. Service Manager for COHS, Bobby Sharma confirmed*

*"This is a team effort in every sense. We want to offer a high quality service that meets the needs of staff at The Christie and we believe we can do that best where we work closely with colleagues in HR, staff-side and managers to ensure we are delivering the best outcomes for all concerned".*

*There is a coherent plan to improve the health and wellbeing of the workforce and COHS believe it is important to invest a significant amount of time and effort in building relationships with colleagues and becoming familiar with the culture of the organisation such that it is fully integrated into The Christie.*



# GOOD PRACTICE CASE STUDY

## PURPOSE

- To improve productivity and reduce agency/temporary staffing costs through better staff attendance and to meet the Trust sickness target
- To improve the quality of sickness information and reporting
- To enhance the skills of managers in the consistent management of sickness absence through training and support
- To develop a more proactive Occupational Health function working closely with HR and managers
- To relaunch a revised and updated Health and Wellbeing policy and Managing attendance policy involving Occupational Health
- To tender Occupational Health services to identify a provider that was best able to meet the needs of the Trust and add value to the Health and Wellbeing agenda

## KEY STAGES OF SET-UP

- Revised Managing Attendance Policy, which is more prescriptive to ensure consistency across the Divisions, was re-launched
- ESR data cleanse to ensure accurate sickness information
- Tendered Occupational Health services and changed external provider
- Ran 'Managing Attendance Key Skills for Managers' training and tailored individual sessions where appropriate
- Re-launched the Health and Wellbeing Policy
- HR set up proactive monthly reviews of sickness with managers

## HOW IT WORKS

**Occupational Health has worked closely with managers across the Divisions and the HR Team to provide a more proactive and business focussed service. They do not 'sit on the fence' when decision making, a criticism often made by managers, but offer welcome advice on the management of an individual member of staff with health issues. They also play an active role in health promotion activities including smoking cessation and stress management.**

**A number of managers across the Trust input sickness information into the SMART system. Key elements of this information are then downloaded into ESR. The HR managers provided training to those managers to emphasise the importance of accurate data which contributes to ESR reporting.**

**Their monthly monitoring reports provide not only sickness levels but referrals, DNAs, lead time to referral and other associated measures. This forms a significant part of Divisional reviews and the overall Trust performance management 'dashboard'.**

**Not only has Occupational Health built close relationships with staff side but it has an important role in case conferences of staff on long term sickness working with the individual, their representative, an HR manager and the line manager.**

**The relationship that has been built between managers, the HR team and Occupational health staff has been critical in implementing the new policies and improving the management of sickness. A proactive approach by all concerned has begun to change the attendance culture in the Trust. It is no longer acceptable for managers to delay referrals or action as the policy has clear triggers and timescales which are monitored. Staff are seeing actions being taken to both support their health improvement and wellbeing as well as an expectation that with Occupational Health advice they will return to fitness and work at the earliest opportunity.**

# GOOD PRACTICE CASE STUDY

## RESOURCES

- No additional resources over and above the basic cost of the Occupational Health service contract and existing levels of HR staff have been necessary to make the improvements
- A more proactive Occupational Health service has resulted from a well composed specification to meet Trust needs at no extra cost – it has been about added value from the existing investment
- Wellbeing events are run at no cost with internal and external support

## KEY LEARNING

- Communication with managers and staff was vital in both changing the Occupational Health provider to ensure a more proactive role, and in the re-launch of the revised policies
- Engagement with managers, staff and staff side has been critical to the smooth transition
- It is important to record accurate information so that action can be taken in a timely manner
- Consistent advice ensuring that all sickness cases are managed according to Trust guidelines is critical to all involved and needs to be reinforced through training and communication

## NEXT STEPS

- ESR developments to enable the system to alert managers when trigger points have been reached. This is done manually at the moment
- Build on the Wellbeing and staff engagement work being done in the Trust through communication and future activities
- Working with the Risk and Health and Safety Manager, to launch the HSE 'Management Indicator Tool'
- Obtain feedback from managers and staff on the Occupational Health service

## KEY CHALLENGES

- The implementation of the revised Managing Attendance Policy required managers to follow a strict framework that put more onus on their actions and time. This initially caused some concern but has now, been accepted as necessary. This has been as a result of communication and training for managers. They have welcomed clarity about what they need to do to manage sickness, producing better outcomes and reducing absence
- Sickness wasn't always recorded well and support has been provided to assist managers to develop spreadsheets and systems for their staff
- The previous Occupational Health provider had been in place for over 3 years and in March 2010 considerable time was invested in the tendering process to find the most cost effective provider. A big factor for the Trust and HR team

## SUSTAINABILITY

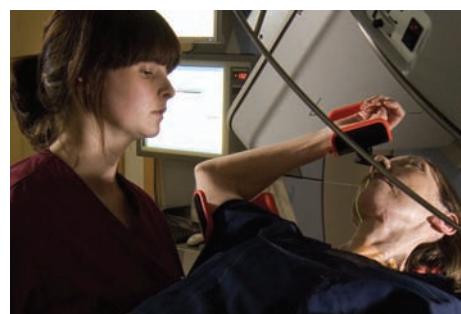
The new policies are in place and being followed and manager training has taken place. The Occupational Health function has built relationships with managers, HR and staff side and offers both support to individual staff and advice to the Trust on sickness. The success of this approach has been evidenced by the achievement of sickness levels below the Trust target with some Directorates aiming for 2%.



## SUPPORTING MATERIAL

The following resources are available as an appendix to this case study

- Revised Managing Attendance Policy
- Protection and Promotion of Health and Wellbeing Policy



## CONTACT FOR FURTHER INFORMATION

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