Agenda item 9

The Queen Elizabeth Hospital King's Lynn NHS Foundation Trust

REPORT TO GOVERNORS' COUNCIL

RESPONSIBLE DIRECTOR:	REPORT FOR:		IMPACT ON BUSINESS:		
Libby McManus – Chief Nurse	Decision		High	Med	Low
	Consideration	✓	✓		
	Information				
LEAD MANAGER:	**REPORT TYPE:**		**BAF REFERENCES & RAG:**		
Cath Castleton, Associate Director of HR	Strategic				
	Operational	✓			
	Governance				
	IMPLICATIONS:		**RELATED WORK: (PREVIOUS PAPERS TO BOARD/COMMITTEE)**		
	Patient Care/Safety/ Experience	✓			
	Finance				
	Workforce	✓			
	Policy				
PEER ASSIST (inc. clinical engagement):	**PEER REVIEW:**				
CQC Domain: (safe, caring, effective, responsive, well-led, use of resources)	Well led				

Meeting Date: 3rd October 2019

Report Title: Absence Management

PURPOSE:
To provide a report to the Governors' Council Meeting which demonstrates the actions being taken to address the increasing absence rate within the Trust, to outline the agreed 12 month Trust trajectory which was agreed to ensure the Trust reaches the absence target rate of 4% by 31st March 2020 and details the anticipated impact of the actions to be taken.
SUMMARY:
The attached report demonstrates the actions being taken to address the increasing absence rate within the Trust. In August 2019 the monthly absence rate was 5.14%. Areas are continuing to experience a mixture of short and long term sickness cases which are being managed in accordance with the Trust policies and procedures. A number of initiatives will be put into place, and each one has been assessed in order to understand the impact of implementing the initiative. This is detailed further within the report. In addition, a trajectory has also been developed to ensure that the Trust reaches the absence target rate of 4% by 31st March 2020 and further work will be undertaken with the divisions and departments to develop trajectories per area to be in place by 1st November 2019.
Implications : Workforce Ability to retain and support staff to maintain their attendance at work and ensure that staff will recommend the Trust as a place to work and receive care.

Strategic / External	Operational	Financial	Clinical	Legal/ Regulatory	Reputational / Patient Experience	Workforce
		√				√

RECOMMENDATION/S:

To note the actions and steps that are in place to reduce the Trust absence rate and ensure staff are managed appropriately and in line with Trust policy.

Managing Absence Report

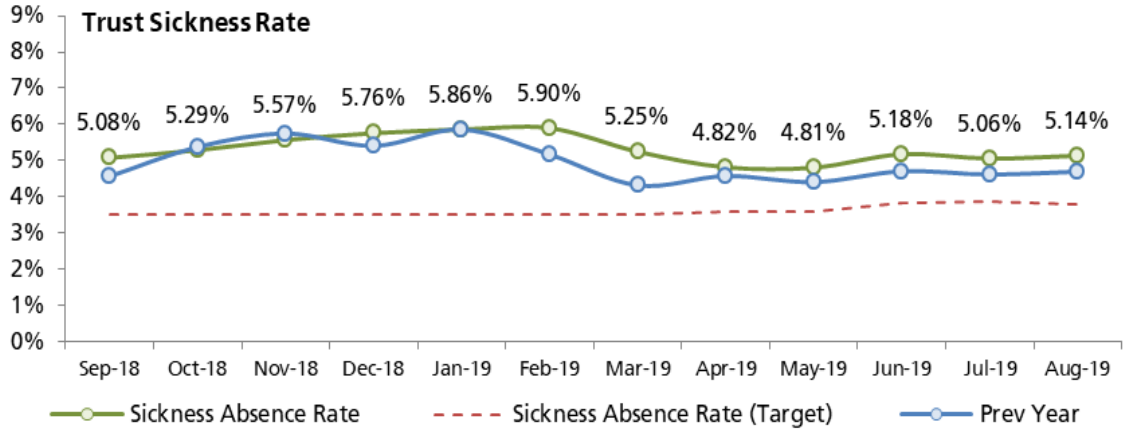
1) Introduction

The attached report demonstrates the actions being taken to address the increasing absence rate within the Trust. In August 2019 the monthly absence rate was 5.14%. Areas are continuing to experience a mixture of short and long term sickness cases which are being managed in accordance with the Trust policies and procedures. A number of initiatives will be put into place, and each one has been assessed in order to understand the impact of implementing the initiative. This is detailed further within the report.

In addition, a trajectory has also been developed to ensure that the Trust reaches the absence target rate of 4% by 31st March 2020 and further work will be undertaken with the divisions and departments to develop trajectories per area to be in place by 1st November 2019.

2) Current sickness rates – Trust wide

The graph below shows the trust sickness rate over the last 12 months. The absence rate is higher than it was the same time last year and when benchmarked against other NHS Trusts sits as an outlier.



Sickness has increased from 5.06% in July 2019 to 5.14% in August 2019. This is higher than the trajectory of improvement for sickness absence which was agreed by the Trust Board in March 2019. The target for August 2019 was 3.80 %.

Areas continue to experience a mixture of short- and long-term sickness cases which are being managed in accordance with the relevant Trust Policies and Procedures.

The reason for absence as a result of stress and anxiety has increased for the fourth month in a row and now equates to 21.5% of the overall absence total.

3) Reasons for Absence

The following table outlines the top 10 reasons for sickness in August 2019, the number of occurrences for each of these absence reasons, number of days lost, the estimated cost of the absence and the % of overall absences for the month related to the reason for absence.
The highest reasons for absence were anxiety/stress/ depression (this is both personal and work related), unknown causes and other musculoskeletal.

The table below shows the top five reasons for sickness in August 2019;

Absence Reason	Headcount	Abs Occurrences	FTE Days Lost	Abs Estimated Cost	%
S10 Anxiety/stress/depression/other psychiatric illnesses	64	64	995.41	£81,681.38	21.5
S99 Unknown causes / Not specified	82	84	697.51	£62,952.78	15.1
S12 Other musculoskeletal problems	46	47	525.88	£38,246.62	11.4
S25 Gastrointestinal problems	106	106	464.18	£35,033.76	10.0
S28 Injury, fracture	18	18	307.09	£19,809.92	6.6
S11 Back Problems	35	36	253.13	£20,647.10	5.5
S13 Cold, Cough, Flu - Influenza	44	44	232.92	£25,742.24	5.0
S98 Other known causes - not elsewhere classified	33	33	210.56	£16,566.31	4.6
S19 Heart, cardiac & circulatory problems	12	12	116.61	£10,475.98	2.5
S29 Nervous system disorders	6	6	105.13	£5,349.72	2.3

4) Sickness by Staff Group

The table below shows the absence rate per staff group in August 2019 with the biggest sickness amongst Estates and Ancillary (Facilities staff) and Additional Clinical Services (predominantly unregistered nursing workforce).

	August 2019				
	Abs (FTE)	Avail (FTE)	Absence % (FTE)	# Absence Occurrences	Absence Estimated Cost
Add Prof Scientific and Technic	102.87	3,434.75	2.99%	19	11,656.89
Additional Clinical Services	1,193.45	17,997.56	6.63%	149	69,993.91
Administrative and Clerical	922.58	17,485.20	5.28%	95	66,776.06
Allied Health Professionals	127.40	4,525.28	2.82%	20	11,802.71
Estates and Ancillary	941.64	9,815.66	9.59%	95	53,149.02
Healthcare Scientists	6.00	868.60	0.69%	3	717.50
Medical and Dental	205.80	11,231.06	1.83%	27	46,767.44
Nursing and Midwifery Registered	1,122.50	24,556.38	4.57%	174	111,913.27
Grand Total	**4,622.23**	**89,914.49**	**5.14%**	**582**	**372,776.80**

5) Trajectory of Improvement to 4%

The table below shows the Trust Trajectory Target per month agreed at the board in March 2019. This is based on the average monthly sickness rate for the last five years with the change in absence rate in line with seasonable variations. This remains a

challenging target for all areas but will give an end of year sickness rate of 4% in line with the Trust overall target for sickness.

The summary trajectory is detailed below:

	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Av.
Actuals 2018/2019	4.58	4.41	4.71	4.62	4.70	5.08	5.29	5.57	5.76	5.82	6.28		5.17
Target 2019/2020	3.58	3.60	3.84	3.88	3.80	3.90	4.32	4.43	4.61	4.74	4.55	3.00	4.02
Change in Absence rate from 2018/2019	1.00	0.81	0.87	0.74	0.90	1.18	0.97	1.14	1.15	1.08	1.73		
Actual sickness rate	4.82	4.81	5.18	5.06	5.14								

In addition we are in the process of all departments and areas within the Trust will also being set a target based on the same principle as above, to ensure the overall Trust target reaches 4%. All Divisions and Corporate areas will be given 12 month sickness targets which will be monitored at performance review meetings. This will be agreed at HMB in October 2019.

6) Actions to address and Impact of Intervention

An action plan has been developed for initiatives and actions to be undertaken to address and reduce the absence rate for the Trust. This action plan covers

- Training for Managers including "Supporting you sessions" has been undertaken and further training is planned in October and November.
- Management Guidance and support
- Review and audit of internal processes and data
- Promotion and access to services
- Developing targeted work in reducing absence rates for worst 20 areas in both long term and short term absence
- Promotion of "Be well" initiatives
- Developing incentives and rewarding individuals with no sickness
- Non-recording of sickness absence is highlighted at Divisional Boards and speciality meetings with all managers asked to amend their records to show the actual reasons for sickness. Once this action takes place there is a slight reduction in the overall absence rate but this is not shown until the next month. For example in July initial data showed an absence rate of 5.24%, however once all sickness was closed it decreased to 5.06%
- All long-term sickness cases have been reviewed and plans are in place to inform next steps.
- There has been a roll out of training for mental health.
- A support package has been agreed with UNISON and commenced in September 2019, providing training on mental health first aid, resilience training, and mental health awareness.
- Mindfulness training is being made available to all staff during September and October which is being funded and run in conjunction with Macmillan.

- All Divisions and Corporate areas will be given 12 month sickness targets which will be monitored at performance review meetings. This will be agreed at HMB in October 2019.
- Our Health and Wellbeing offering will be reviewed and updated, with closer working with the College of West Anglia. This will include students working at the Trust to offer treatments to members of staff.
- Fruit stall to be set up at the front of the hospital
- Leadership Development training will be commencing in November 2019 for 200 leaders across the Trust.
- Listening events will continue with all staff groups.
- Running club will be set up
- A walking group has been established and a group of staff are competing in a 100 mile challenge
- The Trust is currently in discussion with the local council to negotiate a reduced rate gym membership
- A range of external support is available for staff on smoking cessation, healthy eating, alcohol and drugs support
- All staff have access to an employee assistance programme
- Flu campaign started on 28th September 2019
- Option for flexible working is being promoted across the Trust.
- The Trust is currently exploring options for providing financial support from an external company.

4.0 Summary and next steps

All Divisions and Corporate areas will be given 12 month sickness targets which will be monitored at performance review meetings. This will be agreed at HMB in October 2019.

A number of initiatives are in place or in the development stages to enhance the health and well-being offering of the Trust.

The Governors Council is asked to note the actions taken and identified initiatives to address the Trust sickness rate.

Cath Castleton
Associate Director of HR
October 2019