

**Glasgow City
 Integration Joint Board
 Finance, Audit and Scrutiny Committee**

Report By: Sharon Wearing, Chief Officer, Finance and Resources

Contact: Christina Heuston, Head of Corporate Services

Tel: 0141 287 8751

ATTENDANCE MANAGEMENT

Purpose of Report:	To advise the IJB Finance, Audit and Scrutiny Committee of the latest absence levels across Glasgow City Health and Social Care Partnership.
---------------------------	--

Background/Engagement:	<p>Social Work and Health continue to address targeted areas where absence levels are consistently high.</p> <p>Attendance Management Plans will highlight priorities and focus for the months ahead with the overall objective to report to Committee a positive performance outcome and absence trend in the year 2019/20.</p>
-------------------------------	--

Recommendations:	<p>The IJB Finance, Audit and Scrutiny Committee is asked to:</p> <p>a) note the content of this report.</p>
-------------------------	--

Relevance to Integration Joint Board Strategic Plan:

As detailed from page 22 of the plan.

The Glasgow City Integration Joint Board is committed to ensuring that the people of Glasgow will get the health and social care services they need at the right time, the right place and from the right person.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	Outcome 9 – Resources are used effectively and efficiently in the provision of health and social care services.
--	---

OFFICIAL

Personnel:	Requirement to maintain level of scrutiny and implement action plans to maximise attendance.
Carers:	None
Provider Organisations:	None
Equalities:	None
Fairer Scotland Compliance:	None
Financial:	Cost pressure arises from need to cover absence in staff groups.
Legal:	None
Economic Impact:	None
Sustainability:	None
Sustainable Procurement and Article 19:	None
Risk Implications:	There is a risk that increasing absence levels impact on the efficiency of services and where replacement staff are required a financial impact.
Implications for Glasgow City Council:	As stated above.
Implications for NHS Greater Glasgow & Clyde:	As stated above.

OFFICIAL

1. High Level Quarter Comparison (Average Days Lost [ADL] / Percentage [%])

1.1 Quarterly absence trends for Social Work and Health are highlighted in Table 1, which shows a reduction for Social Work (ADL) and an increase for Health (%), compared to the same quarter last year. Quarter 1 ranges from 1st April to 30th June.

Table 1

	Empl No	Q1 17/18	Q2 17/18	Q3 17/18	Q4 17/18	Q1 18/19	Q2 18/19	Q3 18/19	Q4 18/19	Q1 19/20
Social Work	7322	5.50%	6.00%	6.8%	6.9%	6.1%	7.1%	8.2%	7.8%	6.6%
Head Count		2.6	2.6	3.2	3.3	3.4	3.3	4.0	3.9	3.2
		ADL	ADL	ADL	ADL	ADL	ADL	ADL	ADL	ADL
Health	4229	6.13%	5.3%	6.16%	6.42%	5.5%	6.4%	7.1%	6.9%	5.9%
WTE										

2. Service Level Breakdown

2.1 Table 2 shows a breakdown of absence performance for Social Work by staff group in Period 5 (6/7/19 to 2/8/19). **Average Days Lost (ADL) are the figures reported.**

Table 2 – Social Work

No.	Staff Group	Employee Head Count	No of Employees Absent	Days Lost	Ave Days Lost
1.	Social Work Services Overall	7059	827	7842.8	1.1
2.	Resources	751	71	698.4	0.9
3.	Adult Services	472	37	470.0	1.0
4.	Public Protection & Complex Needs	521	23	217	0.4
5.	Children Services	1039	95	1107	1.1
6.	Older People Services	1090	123	1156.2	1.1
7.	Care Services	3172	477	4187.3	1.3

OFFICIAL

2.2 Table 3 shows a breakdown of absence performance for Health by staff group for the month of July. **Percentage Absence (%) are the figures reported.**

Table 3 – Health

No.	Staff Group	Whole Time Equivalent (WTE)	Average No of Employees Absent	%
1.	Health Overall	4218.37	276	6.54
2.	Resources	159.58	7.95	5.0
3.	Adult Services	2011.46	145.91	7.3
4.	Public Protection & Complex Needs	165.31	12.40	7.5
5.	Children's Services	847.06	42.57	5.0
6.	Older People Services & Primary Care	756.06	53.79	7.1
7.	Clinical Director	32.20	1.28	4.0
8.	Health Improvement	125.08	6.52	5.2
9.	Hosted	121.60	5.58	4.6

3. Action Plans

3.1 Social Work

The Attendance Management Action Plan has been reviewed and updated, which highlights priorities for the next 3 months. This is attached as Appendix 1.

Absence levels remain high in particular within Residential (Older People, Children's and Day Care) and Care Services staff groups. HR resources will continue to be more focussed in supporting managers in these areas due to the financial costs of agency and overtime cover. This is reflected in the 3 monthly action plan.

Approval was given at the recent Workforce Sub Meeting to recruit 2 Senior HR Officers within the HR Wellbeing and Attendance Team, to help tackle consistently high absence levels within Social Work and reverse the existing trend. This means that there will be less restrictions to the case management involvement from an HR perspective in supporting managers in reducing absence within their own staff group.

OFFICIAL

3.2 Health

The levels of absence at a city level have remained steady March to June 2019 with a slight increase in July 2019. This has been seen in all areas and is consistent with previous years.

Absence levels have historically remained above the national target. This month the Absence Action Plan was reviewed and is attached as Appendix 2. The main actions detailed relate to:

- Continued detailed reporting with Locality Executive and Core Leadership Teams
- Individual Action plans in place for long term absence cases
- Improved access to absence information for managers to allow local reporting
- Further training on absence and Stress Awareness and an action to local Health and Safety committees to re-run Stress Audits, reflecting the primary recorded reason for absence is related to stress which remains high
- Engagement within inpatient areas (all Localities) are a priority with the relevant support being provided from HR, Learning & Education and Occupational Health.

Absence management is a focus of on-going activity across Glasgow HSCP. Monthly information is made available to all managers and management teams regarding their own service areas, the matter is routinely discussed with training and tool kits in place for managers to support their processes and interactions with staff. The absence information is reviewed monthly within Core Leadership Teams.

Although the Absence Support Team is no longer available for support, Absence Case reviews continue within in-patient areas with Management Support Nurses and Senior Charge Nurses to ensure action plans are in place for all absence cases (long term and frequent absence cases).

Over the coming months all areas within Older People Services which have above 10% overall absence will be reviewed and departmental managers met with to see what support can be provided and to agree an action plan to reduce absenteeism in their area.

Upper Trigger reports are being reviewed on a monthly basis to ensure all absence cases are within a process and appropriate management and HR intervention is in place.

4. **Recommendations**

4.1 The IJB Finance, Audit and Scrutiny Committee is asked to:

- a) note the content of this report.

Glasgow City Health and Social Care Partnership
Attendance Management Action Plan – 3 Monthly Plan (September to November 2019)
Social Work Services

Areas for Activity	Actions	✓	Comments
Review of SWS HR Strategy in Supporting Managers with Staff Attendance	<ol style="list-style-type: none"> 1. Streamlining processes and templates 2. Review of ex Cordia paperwork to be consistent with GCC / SWS 3. Review of CBS attendance documentation for SWS 4. Review of existing templates and pro formas available within the Manager Toolkit and the creation of new documentation 5. Standardisation of HR advice provided to managers, becoming a more automated service 6. Review of HR Accountability Process 7. Strengthening Manager / HR working relations through coaching 8. Enhancing the resources available to managers and employees within the Wellbeing and Attendance pages on Connect 9. Implementation of a more robust HR approach and case management in delivering an effective / efficient service to managers 	<p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p>	<p>Complete – no further action</p> <p>Complete – no further action</p> <p>OH referral to be finalised</p> <p>Partially Complete - Progress to be made – Sept-Nov 2019</p> <p>Complete</p> <p>Long Term Advice to be reviewed</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>
Occupational Health Provider, People Asset Management (PAM)	<ol style="list-style-type: none"> 1. Principal HR Officer meeting quarterly with the Clinical and Contract Lead from PAM to discuss and identify priorities for improvement, e.g. Priority 1 - Implementation of new OHS contract provided to GCC 		Meeting 11/9/19
Communication	<ol style="list-style-type: none"> 1. Implementing any change in processes/documentation and approach to Care Services Managers following Toolbox Talks held in March 2019 	✓	Complete

Areas for Activity	Actions	✓	Comments
Communication (cont.d)	2. Promotion of GCC's Maximising Attendance Policy, supports and resources via:- <ul style="list-style-type: none"> • HR Manager Bulletin • HR Employee Bulletin 3. Updating and further development of Wellbeing and Attendance pages on Connect to reflect the review of the HR Strategy in Supporting Managers with Staff Attendance		w/c 2/9/19 Partially Complete - Progress to be made – Sept-Nov 2019
Improved Working Relations with Services Areas	1. Principal HR Officer engaging with Service Managers and Heads of Service within the following service areas, in relation to improving local strategies and approach in managing staff attendance:- <ul style="list-style-type: none"> • Older People Residential and Day Care • Children's Residential • Care Services 		Ongoing Planned future attendance at local management meetings
Training for Managers	1. Identification of those managers that have still to undertake the mandatory GOLD training "Maximising Attendance – Effective Communication" and highlight to Heads of Service and Service Managers 2. HR briefings delivered to managers at Local Management Meetings and Development Days to reaffirm council policy and local processes / approach to ensure a level of consistent practice across the Service		Outstanding September 2019 Ongoing

Areas for Activity	Actions	✓	Comments
GCC Staff Health Strategy 2017/19 (which is based on the Healthy Working Lives Framework)	<ol style="list-style-type: none"> 1. Promotion of the Drink Wise Age Well Campaign Training and determine if scope for further rollout across Residential Services (Older People, Day Care, Children's) 2. Identify any other Corporate planned health initiatives that could be promoted within staff groups that have limited access to health promotional activities 		<p>Outstanding Sept-Nov 2019</p> <p>Outstanding Sept-Nov 2019</p>
Partnership Working	<ol style="list-style-type: none"> 1. Liaise with Health partners to identify any new strategies implemented, that been successful in having a positive impact on their absence performance and determine the operational feasibility of introducing these within Social Work 		<p>Outstanding Sept-Nov 2019</p>

**Glasgow City Health and Social Care Partnership
Attendance Management Action Plan – January 2019 (Update July 2019)
Health**

Objective	Actions Required	Responsibility	Timescales	Progress	Completed (✓)
Local Actions					
Provide Locality Executive Teams / Core Leadership Groups with monthly reports on Absence, highlighting key issues	Review current format and content , frequency - Exec & Core Leadership	PCM's GK	Monthly	PCMs action monthly for Core Leadership Group. Standard HR report used	
Each member of staff with 6 months + absence to have an individual action plan	Through case discussions with HRSAU, OH and manager	HRSAU PCM OH Manager	Monthly review	PCMs to set next date for Case Review with HRSAU Late Aug/Early Sept UTReport to be discussed with local managers	
Roll out of Micro-strategy to managers to increase access to information	Workforce Information Rep to attend management meetings	PCM's / JP	Extend until Aug 19	PCM to arrange training for CL, Health and SW managers	
Link to Healthy Working Lives activity to ensure focus on key reasons for	Link into action plan to ensure supporting activities to target key areas of concern	PCM's HWL's leads	Extend until Aug 19	PCMs to link with HWLs leads and action	

OFFICIAL

absence and maintaining attendance					
Provide regular information regarding attendance training and Stress Awareness training for managers	Circulate links to management training and promote uptake	PCM's	Ongoing	PCMs circulated dates for Aug – Nov shared with management teams.	
Deliver attendance training for GCC managers managing health staff		MK / HRSAU	Extend until Aug 19	PCMs will update CL and SMT with changes link with HRSAU to commence training once Once for Scotland Policy introduced	
Locality H&S groups to plan stress survey	Discuss with exec groups and in local H&S groups	PCM's	Extend until Aug 19	PCMs - will discuss at H&S Meetings August and then at Sept reporting to CL and Exec Meetings	
Absence Support Team/ Local input					
AST to progress input to Mental Health inpatient sites across Glasgow City HSCP	Identify priority areas to be referred to AST for dedicated input - Action Plan created for each area and full support from AST	PCM's	Complete	Completed – AST no longer exists	

OFFICIAL

OFFICIAL

Identify/ agree next areas of concern to implement AST approach	Identify other priority areas of concern and link with HRSAU to agree input <ul style="list-style-type: none"> - Meeting lead nurse/service manager - Agree action plan: Support to SCN's Training provided Attendance clinics 	HOPC/ PCM's	Extend until Aug 19	To be actioned – discuss at next PCM meeting based on review of 10% plus areas Currently being done for Adult in-patient – L'dale and Stobhill	
Audit Action Plan					
Monthly meetings with HR SAU team & or Team leader (DW)	Opportunity to review cases, including codes and OH discussions Consider review of cluster meeting SMcG – to progress with DW	PCM's/DW	Ongoing	PCMs to schedule new dates	
Ensure managers are aware that unacceptable to leave absence reason blank (Not Specified)	Regular review of SSTS information and highlighting via management structures	PCM's	Ongoing	PCMs ensure this is highlighted as part of HR Reports to Core and Exec Meetings	
Spot check audit of attendance management process	Agree audit criteria and regularity	HOPAC/PCM /Hd's of Service	Extend until Aug 19	PCMs to consider areas on 10% plus stats and ensure action plans in place.	

OFFICIAL

OFFICIAL

Support the uptake of i-matter and review feedback in respect of attendance issues	Work with OD colleagues to support update and follow up action plans. Identify issues that may impact on attendance and follow up with managers. Review of Action Plans	PCM's / OD / Hds of Service	Ongoing	PCMs to ensure Action Plans are developed and taken forward	
Review points of contact for reporting sickness absence	Link with local managers to ensure robust process in place for the reporting and recording of absence	PCM's / Hds of service/ local managers	Complete	Complete	
Audit approach to be adopted by line managers to seek assurance that activity is undertaken	Discuss with Core Leadership Grps, Exec and service managers and supply audit criteria	Local managers	Extend until Aug 19	To be actioned	
LEAN review of attendance management process	LEAN review of current Attendance management practice. Commence project with a half day review of process.	HRSAU; HOPC; PCM; OH; Staff Partners; Line Managers	Ongoing	Ongoing	
Participation in case study and complex situation discussions	Case studies to be undertaken with PCM network	PCM's	Ongoing	PCMs to discuss at Network meeting. HOPC and PCM meetings	

OFFICIAL