## **Cabinet Committee on Performance Improvement**

Meeting to be held on 4 March 2014

Electoral Division affected: All

# **Update on Attendance Management and Occupational Health Services**

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## **Executive Summary**

The purpose of this report is to provide details of the County Council's performance in relation to attendance management and an update of the new contract for the provision of Occupational Health Services.

#### Recommendation

The Cabinet Committee on Performance Improvement are asked to note and comment on the contents of the report

# **Background and Advice**

#### **Attendance Management**

During 2012 it became increasingly clear that the sickness absence statistics produced by the existing reporting arrangements had become unreliable in relation to the ability to compare statistics with previous years. This was mainly due to the many structural and organisational changes which had taken place and a series of changes to the Oracle system. Work was therefore done to improve the way in which the statistics are calculated to ensure that we have a robust system going forward. This work has been completed which means that a new "baseline" has been established and comparisons to previous years' data is no longer viable.

That said, using data produced via the old reporting system to ensure a like for like comparison, shows that the County Council has, over the last 5 years made significant improvements in attendance levels with a 23% reduction in sickness absence between 2008/9 and 2012/13.

All statistics referred to in the remainder of this report have been produced using the revised reporting method.



#### **Performance**

#### 2012/13

During 2012/13 a total of 8.05 days were lost per FTE. This was broken down as follows

Directorate	2012 / 13		
Directorate	FTE Days Lost		
A&CS	11.02		
CT	5.78		
CYP	8.45		
CYP Schools	7.36		
Environment	7.04		
OCE	7.66		
LCCG	11.11		

The results of a survey by the North West Employers organisation during 2012/13 show that Lancashire's performance was second best of the 18 authorities surveyed with the range of absences being 6.86 to 11.4 days lost per FTE. The average performance was 9.29 days lost per FTE.

#### 2013/14

It was agreed by the Management Team to set an overall sickness absence target of 8.00 FTE days lost per employee for 2013/14.

Seasonally adjusted quarterly targets have been set based on 2012/13 trends. Progress has been monitored during 2013/14, the results of which can be seen in the tables below.

### LCC Sickness Absence Targets for 2013/14

١	Qtr 1	Qtr 2 target	Qtr 3 target	Qtr 4 target	Yr end target
١	target				
	1.90	1.43	2.33	2.34	8.00

**LCC** 

#### Sickness Absence Forecast for 2013/14

Qtr 1	Qtr 2	Qtr 3	Qtr 4	Yr end	Yr end	Forecast
(actual)	(actual)	(actual)	(target)	forecast	target	performance
1.87	1.49	2.31	2.34	8.01	8.00	+0.13%

#### **Directorate Sickness Absence Forecast for 2013/14**

Directorate	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Yr end	Yr end	Forecast
	(actual)	(actual)	(actual)	(target)	forecast	target	performance
ASH&W	2.37	2.57	3.02	2.66	10.62	10.48	+1.3%
СТ	1.45	1.59	1.95	2.00	6.99	6.50	+7.5%

CYP	2.09	1.98	2.77	2.27	9.11	8.44	+7.9%
CYP	1.65	1.05			7.03	7.36	-4.5%
Schools			2.03	2.30			
Environment	1.78	1.57	2.10	2.07	7.52	7.14	+5.3%
OCE	1.53	1.88	1.99	2.23	7.63	7.62	+0.13%
LCCG	2.69	2.57	3.09	2.98	11.33	11.12	+1.9%

The latest absence figures available from North West Employers for the period April to September 2013 shows that the County Council's performance of 3.36 days lost per FTE again compares favourably with other authorities. Lancashire's performance is again second best of those authorities surveyed with the range of performance being 3.2 to 5.14 days lost per FTE. The average performance was 4.08 days lost per FTE.

#### Sickness Absence Trends

The top 3 reasons for sickness absence during the first 3 quarters of 2013/14 are

Mental Health 24%Musculo Skeletal 13%Hospital / Medical 13%

The top 3 reasons for long and short term sickness absences during the first 3 quarters of 2013/14 are:

### Long Term

Mental Health 31%
Musculo Skeletal 14%
Hospital / Medical 14%

### **Short Term**

Digestive System 19%Respiratory System 14%Mental Health 13%

# **Ongoing Support for Managers and Employees**

A number of early intervention strategies have been put in place to target the main reason for sickness absence and these include:

- An e-learning package 'Managing Stress in the Workplace' has been developed for managers and headteachers.
- An e-learning package 'Identifying and Managing your Personal Stress' has been developed for employees.

LCC have promoted an initiative to share best practice in strategies to reduce absence rates amongst local authorities. This will be launched shortly with the first conference to be chaired by our OH service provider. This will give the local authorities involved the chance to learn from each other's successes and develop their own strategies to reduce absence rates.

One of the keys to reducing sickness absence is early intervention by managers and headteachers and adherence to the attendance management policy. This needs to be strictly enforced. Following are examples of support provided to managers

- periodic lists of the "top 20 absences" are referred to managers / headteachers to ensure appropriate action is being taken
- details of any late referrals to OHU picked up with managers
- absence Management training sessions provided for Directorate managers and headteachers
- briefings provided on conducting return to work interviews
- specific support offered in relation to cases where individuals have been absent for a period of more than 3 months.

Over the last year there has been a marked improvement in the 'total days lost' due to sickness absence in schools for the 'Top 20 absences' (a 25% reduction in days lost) and in those absent for more than 3 months (a 49% reduction in the average days lost per case).

#### **OCCUPATIONAL HEALTH UPDATE**

A review of the County Council's occupational health service during 2012/13 and subsequent procurement exercise resulted in Atos Healthcare continuing to be our provider from 1 April 2013. The contract will run for a three year period with the option of extending for a further year.

**Please Note**: on 14 February 2014 Atos Healthcare changed its name to OH Assist<sup>TM</sup>.

OH Assist<sup>TM</sup> has extensive expertise in the delivery of healthcare across large, complex and diverse organisations, and over the years it has been a key resource in assisting the County Council to reduce its sickness absence. It is difficult, however, to prove a direct correlation between occupational health and the levels of sickness absence within the Council.

The Occupational Health web site maintained by the Corporate Health Safety and Wellbeing Team has been re-launched to promote the benefits of seeking OH support and provides very extensive advice and support to managers on using the new contract.

#### **Key Differences in New Occupational Health Contract**

In addition to the web site the following key differences have been communicated to managers and schools in a number of ways i.e. via the Schools Portal, Team Talk, Staff Notices, the Health, Safety & Wellbeing's Latest News web page and in Lancashire County Commercial Group's (LCCG) Commercial News.

 The new contract is 'pay as you go' rather than an annual lump sum payment under the previous contract. This has resulted in substantial savings to the County Council. Projected savings are approximately £290k during the first year of the new contract.

- Referring managers / headteachers have direct access to the OH Assist<sup>™</sup> online referral system, Cosmas Vista. This means that referrals now go directly to occupational health rather than via the Business Services Team thus saving time and resources within LCC.
- Referring managers can track the progress of their referral on-line.
- Telephone assessment is now the primary intervention as opposed to face-to-face assessments. OH Assist<sup>TM</sup> has undertaken detailed investigations into the pros and cons of telephone assessments as opposed to face-to-face consultations and has found that, in the vast majority of cases, there is no added benefit from having a face-to-face consultation from a clinical advice perspective. This strategy, whilst representing a major change in the way the service is delivered, provides benefits to LCC and the employee:
  - over 70% of employees are now being assessed within 3 working days of the referral being made as opposed to 10 working days for a face-toface assessment. This facilitates a quicker intervention and a speedier return to work.
  - there is less time away from work for the employee (if they are in work), less travelling time and expenses
  - o far more convenient for employees who have mobility problems.
  - the accommodation provided to OH Assist<sup>TM</sup> by the County Council is being reduced.
- Face-to-face assessments will still take place where the clinical criteria applied by OH Assist<sup>TM</sup> indicates that a face-to-face assessment will benefit the case or where the manager specifically requests this.
- Employees can be reminded about their occupational health appointment by a text message if their mobile number is provided as part of the referral. This assists in reducing the potential for abandoned consultations.
- Occupational health review consultations are no longer arranged automatically by the provider. If a review is recommended in the OH report the manager can then make the re-referral at the appropriate time. This reduces the number of reviews taking place where occupational health cannot add anything further to the case from a clinical perspective e.g. if an employee is waiting for test results.
- The new contract provides direct access to a Medical Helpdesk, which allows managers to get help and advice on issues including:
  - o dealing with occupational health referrals
  - o whether a referral to occupational health is appropriate
  - how to make a good referral
  - o general occupational health issues

### **Additional Occupational Health Interventions**

A number of additional (or bespoke) occupational health interventions continue to remain available to managers to speed up a return to work or prevent a recurrence. These include:

- Workplace assessments;
- Workplace counselling;
- Physiotherapy;
- Cognitive Behavioural Therapy (CBT);
- Mediation; and,

Trauma Support.

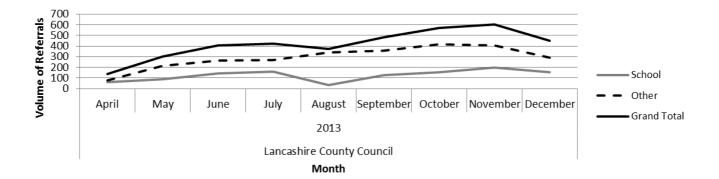
## **Developments to Occupational Health arrangements**

The new contract has meant a fairly significant change to the way in which managers access OH services. The Corporate Health, Safety and Wellbeing Team have worked collaboratively with OH Assist<sup>TM</sup> and a number of developments to the contract have been put in place to assist with the transition to the new arrangements

- A new Lead Occupational Health Advisor (OHA) has been appointed to work with the Council more collaboratively on understanding its needs and any cultural issues. The new lead will:
  - mentor and develop the OHAs and Doctor supporting the Lancashire contract.
  - o provide specific support where this is deemed appropriate.
  - facilitate monthly case conferences to provide a collaborative approach to target specific case issues.
  - facilitate decision making and support managers to understand and separate the medical versus non-medical issues and help managers understand their options.
  - o raise health awareness through campaigns and/or presentations throughout the Council.
- A new 'OH Plus' service has been added which enables managers to speak to the OHA immediately prior to the assessment to provide some context to the case. This new service is beneficial where there is a particularly sensitive or complex case that may require additional input from the OHA.
- 'Voice of the Customer' sessions for managers and headteachers, attended by key representatives from OH Assist<sup>TM</sup>. The sessions help to identify ways in which the Council and OH Assist<sup>TM</sup> can work together to improve the process for both referring managers and employees.
- An Occupational Health & HR Workshop is being arranged which will provide a
  forum for discussion around a joined up approach between occupational health
  and HR policy makers. The workshop will consider current contract
  expectations and how they can be achieved in practice though a joined up
  approach.
- Contract leads from the County Council have the opportunity to attend OHA
  Team meetings to discuss any issues. The outputs from these sessions are
  being used to inform the Council's occupational health strategy and to plan
  future improvements to the service.
- Contract review meetings are held regularly as are telephone conferences to address particular issues.

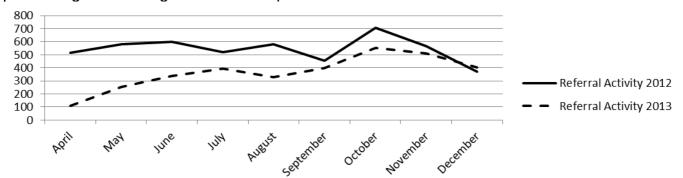
#### **Referral Volumes**

The current contract has seen a steady increase in volumes since its commencement in April 2013. There was a dip over the summer holiday period which is due to the impact of School holidays and then a peak in the lead up to Christmas.



Compared to the same period of the previous year fewer referrals have been made to the occupational health service overall. The chart below shows a dip in expected numbers at the beginning of the new contract due to the transitional period where managers and Schools were becoming accustomed to the changes in the new contract. The number of referrals to occupational health has increased and contract volumes now appear to be meeting the expected levels.

Prior to April 2013 Schools HR teams processed referrals on behalf of schools and there was a central budget that covered the cost of school employee referrals. This changed on 1 April 2013 when schools received an additional amount in their local budgets and became responsible for a number of devolved local services including processing and funding their own occupational health referrals.



## **Contract Management**

OH Assist<sup>TM</sup> provide monthly management information that considers key elements of the contract e.g. the number of each type of activity that has been used and by whom, the number of complaints received, the number of cancelled consultations and comparisons against contract key performance indicators. Monthly face-to-face contract review meetings are held with OH Assist<sup>TM</sup> to consider the outcomes from these.

In addition to the above, OH Assist<sup>TM</sup> provide management information on the outputs from their own internal auditing and monitoring system in respect of the Lancashire County Council contract e.g. the number of occupational health reports from Lancashire that have been subject to internal auditing and the outcomes from this exercise.

Any issues raised with the Health, Safety & Wellbeing Team about the occupational health contract are logged and monitored for progress. Weekly teleconferences are

held with LCC contract leads and OH Assist to ensure complaints are resolved in a timely manner.

The outcomes from the 'Voice of the Customer' sessions are documented and considered as areas for future contract development and improvement.

During 2013 a customer feedback exercise was undertaken with managers who had made referrals which showed an overall satisfaction rate of just over 80% which is broken down as follows

	Results of Customer Feedback September 2013
Sample size	440
Response rate	164
Response percent rate	37.3%
Service Responsiveness	85.3%
Service Quality	76.3%
Overall service	80.3%
Overall satisfaction	80.8%

These results will act as a benchmark for comparison in future years. A similar exercise will be arranged for 2014 in order to evaluate whether recent strategies have helped to improve key elements of the contract that were highlighted in the original survey.

# **Employee Support and Wellbeing**

The decision was taken not to renew the provision of the Employee Assistance Programme beyond March 2013 when the previous contract expired as management information from this service evidenced a poor cost/benefit analysis. Instead a specific County Council support web site was launched on 1 April 2013, which provides advice and guidance on common concerns together with a signposting service to HR and other professional external agencies such as the Samaritans, NHS Direct, Financial Assistance web sites, etc.

This site provides Lancashire County Council employees with a range of information on health and wellbeing topics with links to where further information can be found. It also hosts a 'Wellbeing Zone' (developed with our Occupational Health partner) where employees can create their own accounts, set personal health and wellbeing goals and monitor their progress in achieving them. The Wellbeing Zone may also be used by friends and family members. The County Council will receive an annual report detailing how the Wellbeing Zone is being used by Lancashire Council employees and will consider the topics and pages visited most frequently. Over the last 9 months there have been 2,625 users accessing this provision.

The Health, Safety and Wellbeing team is working closely with colleagues in Public Health with a view to developing a Healthy Workplace programme including wellbeing information and events. Work undertaken so far has included the publication of articles in Team Talk and staff notices relating to alcohol awareness,

mental health issues and debt management. There has been the offer of free pedometers and general activity based information to employees. The aim is to achieve recognition in the form of an accredited healthy workplace for Lancashire County Council.

A piece of work will begin shortly to offer health checks to LCC employees delivered via Lancashire Care Foundation Trust.

# **Future Absence Management Strategies**

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Having gone through a transition occupational health contract, the continue to work closely with all Occupational Health to ensure the County Council and that strategic reduce sickness absence further	e Corporate Health Safe their strategic partners he provision continues t les are developed and i	ety and Wellbeing Team win HR, Public Health and to meet the needs of the				
Consultations						
N/A						
Implications:						
This item has the following implications, as indicated:						
Risk management						
N/A – report for information only						
Financial						
The report has received financia	ıl clearance					
Local Government (Access to List of Background Papers	Information) Act 1985	<b>;</b>				
Paper	Date	Contact/Directorate/Tel				
N/A						
Reason for inclusion in Part II, if	appropriate					
N/A						