

Executive Advisory Board Meeting				
Date of Meeting	Tuesday 03 September 2024			
Subject	Attendance Management			
Agenda No.	Meeting 45			
Paper No.	4.1			
Prepared By	[Redacted]			
Purpose	Discuss			

1. Background

- 1.1. Executive Advisory Board noted they would like to continue the discussion around increased absence rates and linking to capability of line managers in this performance area.
- 1.2. Discussions have been held with the Executive Team and C3 Leadership centring around culture, engagement, communications and manager capability to help influence absence management. The need for ownership and accountability across all leadership levels is essential
- 1.3. Average working days lost (AWDL) continues to exceed the 7 day target, at 10.1 for end of quarter one in 2024-25 (up from 9.5 end of the final quarter of 2023-2024). Scottish Government core report 8.4 AWDL for the same period. Please refer to Annex 1.
- 1.4. Increased levels of sickness absence are not confined to Social Security Scotland but are being reported across the economy. The Chartered Institute of Personnel and Development (CIPD) reports 7.8 AWDL across the UK and 10.6 in the public sector. The 23rd annual CIPD <u>Health and wellbeing at work</u> report, supported by Simplyhealth, shows the highest sickness absence rate for over a decade. The average rate of employee absence now stands at 7.8 days per employee per year, a considerable increase since CIPD last reported this from data collected before the pandemic in October/November 2019 (5.8 days per employee).

2. Absence Data

- 2.1. The number of Long-Term Sick cases (defined as absence over 28 days) has averaged 61 in the past six months. This average remains unchanged over the last 12 months.
- 2.2. To attempt to address this, the People Advice and Support team has focussed attention on long-term absence and has seen an average of 25 colleagues return to work each month. However, we have an average of 28 new cases each month.



- 2.3. At the end of the last quarter, we had 60 cases (54 at the start of July). People Advice are providing support and working closely with HR Business Partners and senior leaders to support these cases.
- 2.4. Mental health is prevalent within this caseload, accounting for 79% of the People Advice and Support caseload which runs consistently at 4-5% of total headcount.
- 2.5. We are seeing an increasing trend in short-term absence (see Table 1 in Annex).
- 2.6. The number of colleagues with four or more spells of absence has increased from 529 in the year to December 2023 to 576 in the year to end June 2024 (see Table 2 in Annex).
- 2.7. The top three reasons for absence remain consistent at stress, anxiety or upset 27.3% of all absence; respiratory (17.4%) and ill-defined (14%).
- 2.8. Top reasons for absence remain consistent with mental health (encompasses all mental health conditions, including anxiety, depression, stress, work related stress, psychological illness and emotional upset). 25% of our mental health absences are for stress (this is down 1% from last quarter), 29% anxiety (up 5%), 18% emotional upset (down 2%), 15% depression (down 2%), 14% work related stress (stayed the same).
- 2.9. Annex 2 presents a detailed analysis of AWDL long and short data across each division. This analysis reveals a general upward trend within most divisions over the past 12 months with particularly noticeable increases in Client Services Delivery (CSD) and Health and Social Care for long term absence and all Divisions reporting increased short term absence apart from Finance and Corporate Services.
- 2.10. CSD continues to have the highest AWDL in the organisation. Short term AWDL continues to increase in all areas except finance and corporate services. Long term AWDL has increased in both CSD and Health and Social Care. This has a direct impact to the service we can deliver to clients.

3. Potential Reasons for Higher Absence

3.1. Our recruitment principles emphasise the importance of building a workforce that reflects Scottish society. To this end, we have actively sought to attract candidates who have underlying health conditions and who may bring valuable lived experience of the benefits system. It is essential to acknowledge that, due to the significant number of employees with underlying health conditions within Social Security Scotland, we are more likely to experience higher absences. 10.2% of our workforce declared a disability (Source: quarterly published workforce information, data to March 2024 published June 2024). We suspect that this figure is significantly underreported based on the statistics from volume recruitment campaigns where 13.03% percentage of applicants stated they had a disability.



- 3.2. Our hybrid working model has recently evolved to require all staff to attend the office two days per week. This change is significant as our people adjust to this new arrangement and begin to apply the principles of hybrid working. Whilst this highlights our commitment to fostering collaboration and connection amongst our staff, additional support has been required to ensure adaptation towards this new working norm.
- 3.3. As financial constraints are at the forefront of Scottish Government spending, a requirement to streamline our work processes has occurred throughout the business to ensure we deliver the best value for money. We acknowledge this may cause pressure and anxiety for some of our people, as we strive for greater efficiency and implement measures that are essential for our success.

4. Actions

- 4.1. To address the increasing levels of absence we have implemented several key actions. Firstly, we are enhancing line manager performance and capability through the introduction of a robust training and quality assurance and review framework, incorporating case conferences, escalation processes and insights from HR Business Partners. This quality assurance process is scheduled for launch in September.
- 4.2. HR Business Partners discuss management information with Deputy Directors and their senior leadership teams on a quarterly basis. It is expected that this information is then cascaded by C band colleagues to their line management chains to ensure that management information is effectively disseminated and that relevant conversations are being held through management channels.
- 4.3. C band colleagues have a key role to play in ensuring that line managers in their areas have the necessary skills and support to effectively manage actual or potential absence and that they actively engage with tools, training and support already offered by People teams. They should be cascading information on average working days lost and business impacts to their teams and coaching line managers to have robust but supportive conversations with colleagues who are absent or are experiencing issues which may lead to sickness absence.
- 4.4. To address the rising trend of employee absences, we have introduced a range of training initiatives aimed at enhancing managers' confidence and skills in effectively managing this issue.
- 4.5. Drawing from insights gathered, we have developed a best practice guide for absence management to ensure that key components of attendance management are executed effectively. This guide covers essential topics, including absence prevention, best practice for maintaining communication and strategies for managing both long-term and short-term absences.
- 4.6. People Advice are hosting attendance drop-in sessions to provide managers with the opportunity to seek advice on attendance-related issues. These



- sessions will allow participants to engage with the questions and answers posed by other managers across the agency, thereby enhancing their understanding of various aspects of the attendance management policy.
- 4.7. Tailored sessions have been conducted for departments experiencing a rise in AWDL to equip them with the tools and strategies necessary for effective attendance management.
- 4.8. A learning product has been developed with the business and is currently pending approval, addressing the costs associated with AWDL in terms of missed client hours and potential financial implications. It includes several calls to action directed at senior leaders, managers and individuals to help them recognise their responsibilities in absence management while highlighting the collective role we all play in reducing absenteeism. It is hoped that this will clearly demonstrate the impact of not addressing sickness absence in a way which colleagues can engage with.
- 4.9. As mentioned earlier in this section, organisational change will be contributing to increased stress-related absence as colleagues adapt to the uncertainty and disruption this inevitably creates. We are collaborating with senior leaders in Client Services Delivery to create and pilot an attendance management quality review and assurance framework which will be shared across the organisation following testing.
- 4.10. Following the People Survey in 2023, the organisation has also been considering how to improve our management of change and communication of that to the wider workforce to improve understanding and reduce the anxiety which change can cause.
- 4.11. We are also targeting additional resource to understand the increase in absence in Health and Social Care Division and develop solutions to address this.
- 4.12. Line managers have a wealth of training available to them, including Aspire and Ignite programmes. Organisational Development have ran a reduced number of Ignite classes since January 2024 due to low engagement from the business. This may be due to the high volume of Ignite delivery that was completed for CSD from May to October 2023 therefore we are scheduling courses at 6 weekly intervals rather than 4 weekly. Failure to attends for Ignite averages at 18% (1,581 attendees 287 failure to attends recorded since May 2023).

5. Wellbeing Counselling Pilot

5.1. Our Wellbeing Offer was created for our people to access a variety of options to support and enhance their wellbeing. The offer is designed for individuals to feel empowered to take responsibility for their own wellbeing. Additionally, the offer also has resources for managers to aid them in supporting their teams.



- 5.2. It was identified that some colleagues were ineligible for counselling via our Employee Assistance Provider (EAP) due to not fitting clinical criteria highlighted by the EAP. Delayed access to support presented a risk of potential worsening of challenges for the individual. A pilot offer was created to support these colleagues, using a solution focused approach over the course of up to six sessions with an in-house Counselling and Wellbeing Specialist. The aim of this was to provide support to colleagues during the working week so that they are empowered to prioritise their wellbeing while at work. An additional benefit is the minimal waiting time for colleagues to begin their counselling sessions, lessening the impact of presenting challenges worsening over time and hopefully reducing the risk of colleagues reporting sick.
- 5.3. The pilot wellbeing offer has already seen colleagues report that they are utilising this support so that they do not reach a point where they feel that long term absence is the only option. The pilot has also successfully supported colleagues through phased returns following periods of absence. This exemplary offer is bespoke and specific to Social Security Scotland only, differing from Scottish Government's offer.

6. HR Business Partner's Approach

- 6.1. HR Business Partners have been working closely with divisional leaders to ensure regular discussions are taking place and key actions are identified to improve current absence levels. Management information relating to sickness absence and key trends are produced specifically for each division's needs. In Client Services Delivery and Health and Social Care divisions attendance management discussions take place monthly at senior leadership team meetings. In the remaining divisions these conversations take place quarterly, or more frequently when required.
- 6.2. Deputy Directors and senior leaders have a clear understanding of the sickness absence challenges faced by their divisions and have been taking proactive steps to improve sickness absence levels. Within Client Services Delivery and Health and Social Care Operations, operational leads now have a much clearer understanding of their AWDL and have introduced regular reviews with their teams on long term sick cases and absence triggers.

7. Conclusion

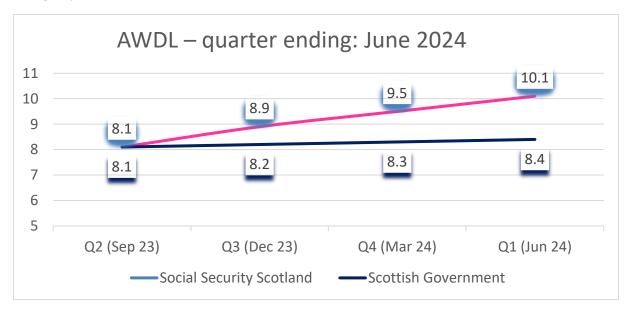
- 7.1. Absences have shown an upward trend over the past year, leading to an increase in our average working days lost. In response, we have implemented various initiatives aimed at reversing this trend. As management at all levels begins to adopt these learning interventions and staff adjust to hybrid working arrangements, we anticipate a decline in absenteeism.
- 7.2. This is dependent on leadership accountability throughout the organisation in driving the culture and behaviours we expect to see in Social Security Scotland. Line managers need to engage with the support and tools which



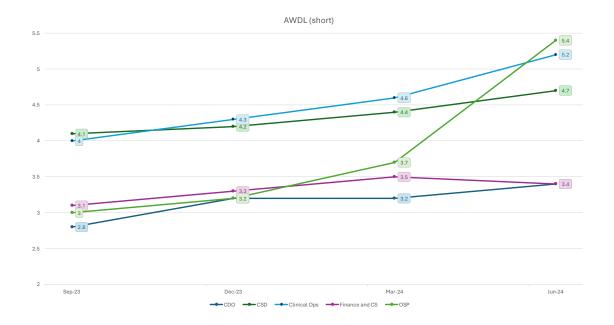
- have been developed for them and conversations on absence and its impacts need to be held in all Divisions from Senior Leadership Teams down to individual team level.
- 7.3. Leadership accountability in attendance management is key; line managers need to drive the culture and behaviours we expect to see in the Organisation, and support a reduction in AWDL. Essential to this is the right conversations at leadership levels, managers discussing AWDL, ensuring understanding and ensuring messages being cascaded to the right level.



Annex 1:



Annex 2 AWDL Short and Long Across Divisions





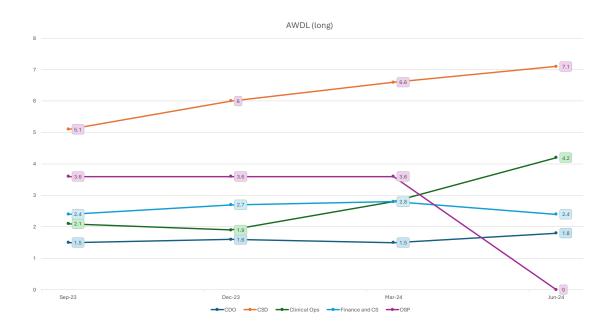


Table 1: SSS - AWDL per Staff Year by directorate

	AWDL/FTE		%			
Directorate	Total	Short	Long	Short	Long	
Chief Digital Office	5.2	3.4	1.8	66.1%	33.9%	
[Redacted]	[Redacted]	[Reda cted]	[Redac ted]	[Redacted]	[Redacte d]	
Client Services Delivery	11.8	4.7	7.1	39.6%	60.5%	
Health and Social Care	9.4	5.2	4.2	55.0%	45.0%	
Finance & Corporate Services	5.7	3.4	2.4	58.6%	41.4%	
Organisational Strategy And Performance	7.1	3.7	3.4	52.0%	48.0%	
Sss	5.4	5.4	0.0	100.0%	0.0%	
SSS total	10.1	4.4	5.7	43.5%	56.5%	

AWDL/FTE is a measure of the level of absence within a business area relative to its size and is useful for comparaison with other business areas. Cells have been coloured green if the AWDL/FTE figure is less than the 7-day target, red if this figure is greater than the 7-day target, and blue if the total number of staff years is less than 10 (and hence, AWDL/FTE can be influenced highly by a few individuals.)



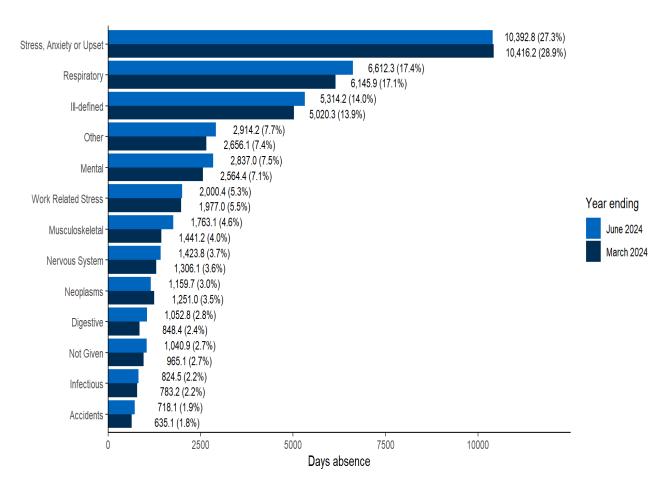
Table 2: SSS - No. of Spells taken in period July 2023 to June 2024

The data below includes all staff who worked during the 12 month period including those who worked only a part-year, so it underestimates absences taken annually.

Directorate	0 Spells	1 Spell	2 Spells	3 Spells	4 or more Spells	All staff	% Staff not off sick	% Staff off sick
Chief Digital Office	156	101	57	35	39	388	40.2%	59.8%
[Redacted]		[Redac ted]					[Redacted]	[Redacted]
Client Services Delivery	977	683	463	276	430	2,829	34.5%	65.5%
Health and Social Care	88	82	50	32	28	280	31.4%	68.6%
Finance & Corporate Services	188	135	76	36	48	483	38.9%	61.1%
Organisational Strategy And Performance	93	54	44	23	31	245	38.0%	62.0%
Sss	0	1	1	0	0	2	0.0%	100.0%
SSS total	1,502	[Redac ted]	[Red acte d]	402	576	[Red acte d]	35.5%	64.5%



Chart 3: SSS - Sickness Absence by Reason



The biggest challenge at present is the businesses engagement with level 3 (post event) evaluation for Organisational Development materials. Since April 2024:

- 1,186 learners have been invited to complete a level 3 evaluation survey and only 250 have completed it (completion rate = 21%)
- 13 focus groups have been re-scheduled due to no-shows and decline notifications
- 3 focus groups for separate learning events were cancelled completely after being rescheduled 3 times with no attendees appearing for each focus group
- Only 6 focus groups have been completed successfully with an average of 3 attendees per focus group

Ignite attendance

The Governance team consumed responsibility for the planning and administration of Ignite learning from May 2023 onwards therefore figures are only reflective of this time period. The following number of colleagues have attended an Ignite session

Event name	Number of attendees
Embedding Core Values	394
Health and Wellbeing	395
Conduct and Discipline	408
Attendance and Performance	384
Total	1,581

Aspire programme

Between April 2022 and December 2023, the Aspire leadership programme supported and development 102 internal leaders across the B grades. The strategic outcomes of the programme was to enhance the capacity of participants to

- Understand, communicate and align team deliverables to organisational priorities.
- Manage wellbeing, workloads and colleague motivations to sustains quality service delivery and performance
 Create and sustain progressive peer relationships to role model leadership behaviours; based on organisational values

Results obtained from long-term evaluation of the impact of the Aspire programme highlighted the following benefits to the organisation:

- Increased accountability of leaders in supporting their teams through change and transitions
- Stakeholders commended participants of the Aspire programme for their credibility in collaborating with colleagues across other divisional areas
 A marginal increase in the wellbeing, attendance and performance figures of the teams managed by the participants on the Aspire programme