



Chartered Institute
of Personnel and
Development

Employee absence 2004

A survey of management policy and practice

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Survey report
July 2004

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Foreword

Absence management is an increasingly important issue for UK employers. The CIPD's Employee Absence 2004 Survey Report provides detailed absence rates across the UK's main sectors and regions, allowing employers to benchmark themselves against comparable organisations. It also provides an in-depth analysis of the costs, causes and solutions to absence and features a series of case studies.

This year's Survey Report includes expanded coverage of stress-related absence and aims to provide practical help to members to address this critical issue, which is a major and growing source of absence.

Our survey also reveals the views of HR professionals on the sick-note system, which is under review by the Department for Work and Pensions.

The CIPD believes it is vital that organisations establish a managed and co-ordinated approach to reducing absence. This means monitoring the causes and costs of absence, involving line managers through policies, such as return-to-work interviews and providing occupational health support for employees at an early stage.

Of course attempts to reduce employee absence will be undermined unless effective people management policies, which encourage employee motivation and commitment, are in place. Employees need well-defined job roles, challenging but realistic targets, and the support and training to help them achieve these targets. Effective absence management is to a large extent about creating work environments where employees are less likely to wake up and think 'I don't feel like going in to work today.'

We hope this report helps employers to improve the way they manage absence and contributes to a reduction in the cost of absence to business.

Ben Willmott, Employee Relations Adviser, CIPD

Executive summary

This report sets out the findings of the fifth national survey of sickness absence policy and practice by the Chartered Institute of Personnel and Development (CIPD). The analysis is based on replies from 1,110 organisations employing a total of over 2.9 million people.

Absence levels

The average level of sickness absence among survey participants is 4.0% or 9.1 working days per employee (based on a working year of 228 days).

The figure is 0.1% higher than the 2003 survey average of 3.9%.

Public services organisations have the highest average level of sickness absence at 4.7%, with the private services sector having the lowest at 3.4%.

Almost two-thirds (61%) of absence is accounted for by spells of fewer than five days.

Nearly four in ten (39%) respondents report a decrease in absence levels over the previous year, compared to 31% reporting an increase.

Changes in the method of recording absence, changes in workforce composition, tightened policies and changes to workload are reasons for increased absence, while tightening policies for reviewing attendance is a major influence on falling absence levels.

Causes

The most important cause of absence for both manual and non-manual workers is minor illness, followed by stress for non-manual employees and back pain for manual staff.

Back pain, musculo-skeletal injuries, acute medical conditions, stress and mental ill health are the leading causes of long-term absence for manual workers, while stress and mental ill health are the leading causes for non-manual employees.

As many as 80% of employers collect information on the causes of absence.

Focus on stress

Stress is identified as an increasing cause of employee absence. Over half (52%) of employers surveyed have experienced an increase in workplace stress in the past year.

The survey shows that the majority of organisations are responding to the problem, with more than three-quarters of organisations (77%) taking steps to identify and reduce stress-related absence.

The main causes of stress in the workplace are workload and management style/relationships at work.

Difficulties in defining and identifying stress, increasing performance targets and a lack of skills for dealing with stressed staff are identified as the main obstacles to addressing workplace stress.

Sick notes

The survey asked employers' opinions on proposals to transfer the responsibility for issuing sick notes from GPs to occupational health professionals.

In all, 93% of respondents believe sick notes are issued too easily but despite this nearly two-thirds (60%) want GPs to continue to issue sick notes.

If the task is taken away from GPs, it should, in respondents' views, be administered by NHS specialised health centres or done by private-sector or NHS-employed occupational health professionals working with individual employers.

What proportion of absence is genuine?

Almost a third of employers believe that more than 20% of absence is not genuine.

A similar proportion of respondents think between 6% and 10% of absence is not genuine.

A fifth of employers believe less than 5% of absence is not genuine.

Confidence in genuine absence is greater among organisations with fewer than 100 staff.

Costs

The average reported cost of sickness absence is £588 per employee per year, a rise of 3.7% on the CIPD's 2003 survey.

More than 90% of participants consider sickness absence to be a significant or very significant cost to the organisation, but only 46% monitor this cost.

Managing absence

Nearly nine in ten (87%) employers have a written absence management policy and three-quarters (74%) of organisations have introduced changes to their absence management policies or practices in the past two years.

Return-to-work interviews are regarded as the most effective method of managing short-term absence.

Involving occupational health professionals is seen as the most effective tool for managing long-term absence.

Targets

Nearly nine in ten employers believe that it is possible to reduce absence levels, although only 49% have set a target for this.

Almost two-thirds of public service organisations set targets, compared to 58% of manufacturing and production employers and just 33% of private services organisations.

The propensity to set targets for absence increases substantially with workforce size.

The most common type of target (sought by 57%) is a reduction to an absolute percentage of working time lost, with 40% having a 3% target figure.

In all, 43% of organisations benchmark their absence rates, with the public sector being the most likely to do so.

Table 1: Average level of sickness absence by sector

	Number of responses	Average percentage of working time lost per year	Average days lost per employee per year
Survey average	680	4.0	9.1
Agriculture and forestry	2	3.1	7.1
Chemicals	21	3.6	8.2
Construction	17	3.2	7.3
Electricity, gas and water	8	3.1	7.2
Engineering and metals	69	3.9	8.9
Food, drink and tobacco	52	5.2	12.0
General manufacturing	49	4.0	9.1
Mining and quarrying	4	4.9	11.2
Paper and printing	12	3.3	7.4
Textiles	10	4.1	9.3
Other manufacturing	75	3.9	8.9
All manufacturing and production	318	4.0	9.2
Consultancy	7	2.4	5.5
Financial services	41	3.1	7.2
Hotels, restaurants, leisure	10	3.8	8.7
IT services	14	2.5	5.6
Legal and property services	5	3.2	7.4
Media and publishing	10	2.6	6.0
Retail and wholesale	38	3.8	8.6
Telecommunications	25	3.1	7.0
Transport and storage	6	5.2	12.0
Other private sector	43	3.3	7.5
All private services	195	3.4	7.8
Central government (including defence)	5	4.8	11.0
Education	27	4.2	9.6
Health	59	5.1	11.6
Local government (including police and fire)	24	4.8	10.9
Other public sector	22	4.4	10.1
All public services	136	4.7	10.7
Non-profit organisations	31	4.4	10.0

Note: A small number of organisations identified themselves under more than one activity within a sector.

Rates of sickness absence

The average level of sickness absence revealed in our 2004 survey is 4.0% of total working hours, or 9.1 working days per employee. The public services sector had the highest figure at 4.7% of working time lost to absence (10.7 days). Employers in the private services sector recorded the lowest figure of 3.4% (7.8 days). Nearly two-thirds of absences (61%) were for fewer than five days.

Information on sickness absence rates is collected by 83% of respondents. This information is more likely to be collected by public services (89%) and organisations in manufacturing and production (89%) than in non-profit organisations (84%) or, especially, in private services (73%).

Survey average

Respondents were able to either provide the number of working days lost or the percentage of working time lost. Based on a 228-day working year, the average absence rate is 9.1 working days per employee and 4% for working time lost.

Sectoral variations

The public sector has the highest level of sickness absence, at 10.7 working days per employee, a slight increase from the previous year's figure of 10.6 days.

Absence rates among non-profit organisations have increased more significantly to 10 days, from 8.2 days. In contrast, absence levels among employers in the manufacturing and production sectors have fallen to 9.2 days from 9.7 days.

In the private services sector, absence has climbed slightly to 7.8 days, up from 7 days for the previous 12 months.

Table 1 shows a detailed sectoral breakdown, though care should be taken concerning the often very small bases involved. It can be seen that within manufacturing and production an above-average level is found in the food, drink and tobacco industries, where absence levels rates are 12 days per employee. However, this figure is an improvement on the

previous year when absence in these areas was 13.4 days. Absence among construction employees remains among the lowest within manufacturing and production at 7.3 days but has increased considerably from 5.8 days since the year before.

The retail and wholesale sector has one of the highest levels of absence within private services at 8.6 days per employee, a rate that has increased from 7.5 days for the previous 12 months. IT services employers are at the lower end of the absence scale among organisations in private services, with 5.6 days per employee, almost identical to the year before.

In public services, health now has a higher rate of absence than local government and is the highest in the public services sector. Absence in the health service has edged up from 11.4 days to 11.6 days, while local government has seen levels fall to 10.9 days from the figure of 11.5 days recorded in the 2003 survey. Absence levels at educational establishments have remained almost static at 9.6 days and are the lowest among the public services.

Effect of workforce size

Absence rates, in general, increase with the size of the organisation, except in the very largest employers. In organisations where there are fewer than 100 staff, the rate is 6 days, compared to a rate of between 10.9 and 11.3 days for organisations employing 750–1,999 staff. Only in organisations with 2,000 or more employees does absence decrease slightly to 10.3 days. The difference may be partly because absence is harder to compensate for and has more impact in smaller employers. Staff working for smaller organisations may be more reluctant to take time off sick because

of the added pressure it will place on their colleagues. The reversion in the biggest employers may also be because they are more likely to have more effective formal recording procedures. See Table 2.

Regional differences

The lowest levels of absence are found in London, where the level averages 6.9 days per employee, and in those organisations operating nationwide which have absence levels of 8.4 days. The highest rate of 10.7 days is found in Wales, followed by the north-west, where absence is 10.4 days. Outside London the lowest rates are in the south-east, the south-west and East Anglia. See Table 3.

Length of absence

In all, 56% of respondents provided data concerning the length of sickness absence. Nearly two-thirds of absence is for fewer than five days, a fifth is for between five days and four weeks, and a similar proportion is for four weeks or more. In general, the proportion of absence accounted for by periods of more than four weeks increases with the size of the organisation. Among employers with fewer than 100

staff, long-term absence accounts for 10% of the total, but this climbs to 27% among organisations with 2,000 or more staff.

Short-term absence (up to five days) is highest among private services organisations, followed in order by non-profit employers, manufacturing and production organisations and the public services.

Long-term absence is highest in the public sector, accounting for 30% of the total. Manufacturing and production employers have the next highest proportion of absence over four weeks, followed by the non-profit sector and the private services sector. See Table 4.

Table 2: Average level of sickness absence, by workforce size

	Number of responses	Average percentage of working time lost per year	Average days lost per employee per year
1–99	38	2.6	6.0
100–249	161	3.5	7.0
250–499	136	3.8	8.6
500–749	82	4.3	9.8
750–999	38	4.8	10.9
1,000–1,499	41	4.9	11.3
1,500–1,999	27	4.9	11.2
2,000+	101	4.5	10.3

Table 3: Average level of sickness absence by region

Region	Number of responses	Average percentage of working time lost per year	Average days lost per employee per year
East Anglia	33	3.8	8.6
East Midlands	47	4.1	9.3
West Midlands	63	4.2	9.6
London	51	3.0	6.9
North-east	38	4.2	9.5
North-west	87	4.5	10.4
Yorkshire and Humberside	62	4.2	9.6
Scotland	49	3.9	8.9
South-east (excluding London)	78	3.8	8.6
South-west	52	3.8	8.7
Wales	43	4.7	10.7
Northern Ireland	2	3.4	7.7
Nationwide	113	3.4	8.4

Table 4: Importance of short- and long-term absence, by workforce size and major sector

Average percentage of absence accounted for by absence of ...

Workforce size	Number of responses	Fewer than five days	Five days up to four weeks	Four weeks or longer
1–99	57	77	14	10
100–249	154	63	21	16
250–499	130	60	20	20
500–749	73	57	22	21
750–999	38	59	20	21
1,000–1,499	32	54	23	23
1,500–1,999	20	62	21	18
2,000+	81	51	22	27
Major sector				
Manufacturing and production	235	58	22	21
Private services	249	70	17	13
Public services	107	46	23	30
Non-profit organisations	32	59	21	20
Survey average	624	61	20	19

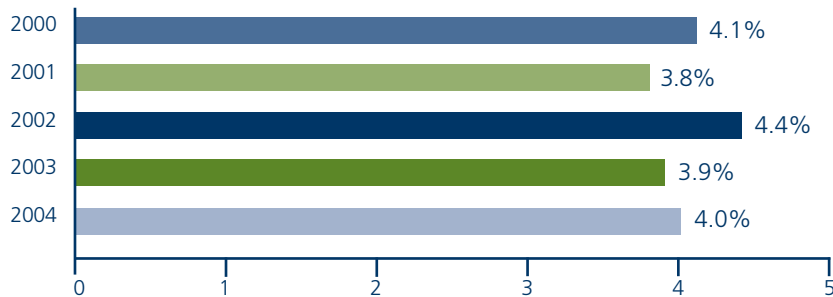
Changes in rates of absence

This year's survey shows a 0.1% increase over the 2003 absence rate. Among organisations that report an increase in absence, the main cause is changes to the method of recording absence. For those employers that report a decrease, tightened policy for reviewing attendance is cited as the main reason.

Comparison with previous surveys

The 2004 survey figure of 4% of working time lost to absence is 0.1% higher than in 2003 (3.9%), broadly in line with previous years.

Figure 1: Average percentage of working time lost, 2000–2004



Changes in level

More respondents reported a decrease in absence than reported an increase. Respondents were asked to indicate whether their organisation's absence rate had increased, decreased or remained the same compared to 2003. The results are shown in Table 5. Although overall there was a 0.1% increase in absence, 39% of respondents judged their organisation had seen a decrease, while 31% noted an increase. Private services retained the same position as in 2003, manufacturing and production had a 19% net decrease, and public services a net 7% decrease. The small number of non-profit organisations (not referred to in 2003) indicated a net 7% increase.

Reasons behind the changes in absence levels

The main reasons for an increase in absence levels are changes in the method of recording absence, changes in workforce composition, tightened policies for reviewing attendance and changes to workload.

A significant proportion of employers (14%) also attributed an increase in absence to the impact of several long-term absences on their overall figures.

A decrease in absence levels was mainly explained by tightened policies. Other reasons for falls in absence included changes in the method of recording absence and changes in work composition and work organisation.

The data shows that changes to the way absence is recorded along with tightened policies can explain increases as well as falls in absence. Improving the way absence is monitored and reported may result in an increase (particularly in the short term) because absence is recorded more accurately. However, the survey shows that changes to policies and the way absence is recorded may also be responsible for decreases in absence as a result of the increased control this gives employers in managing the issue. See Tables 6 and 7.

Table 5: Absence increasing or decreasing compared with last year, by major sector

	Percentage of respondents saying absence ...		
	Increased	Decreased	Stayed the same
Manufacturing and production	26	45	29
Private services	34	34	31
Public services	34	41	25
Non-profit organisations	33	26	40
Survey average	31	39	30

Table 6: Reasons for increase in absence levels

Reason	Percentage of respondents saying absence has increased for this reason
Changes in method of recording absence	27
Changes in workforce composition	26
Tightened policies for reviewing attendance (eg new trigger system)	24
Changes to workload	21
Several long-term absences	14
Changes in work organisation (eg shift patterns, flexibility, self-managed teams)	11

Table 7: Reasons for decrease in absence levels

Reason	Percentage of respondents saying absence has decreased for this reason
Tightened policies for reviewing attendance (eg new trigger system)	82
Changes in method of recording absence	28
Changes in work organisation (eg shift patterns, flexibility, self-managed teams)	14
Changes in workforce composition	14
Changes to workload	2

Case study

The absence policy at manufacturing firm The Epwin Group has been simplified to make it more accessible and understandable for managers and employees. Personnel Manager Martin Manning believes the change in policy has contributed to a reduction in absence over the last year.

The policy now spells out the absence procedure very clearly and emphasises that disciplinary action will be taken against members of staff who abuse it. For example, if employees take time off without notification for more than a week, they are likely to face dismissal.

The company uses the Bradford Factor system to highlight employees who are taking persistent short-term periods off work. However, managers have been advised not just to concentrate on high Bradford scores but also to consider any underlying reasons for absence by using return-to-work interviews to identify if there are any specific issues that need to be addressed.

'I think raising the profile of absence management has made a difference in its own right. We want managers to be more proactive. It is line managers who are the ones inconvenienced most by non-attendance,' said Manning.

The firm, which employs 900 people, uses the recruitment process to filter out potential employees with poor absence records. New employees are also monitored closely during their probationary periods.

'For genuine sickness and long-term health issues I believe we are very supportive and sympathetic but prompt identification of those people likely to be persistent "one-day offenders" is vital,' said Manning.

The business buys in the services of a local occupational health provider when necessary to manage long-term sickness absence and to help employees back to work.

Manning said the firm will explain to staff who are resistant to being assessed by occupational health professionals that, if they refuse, the company can only make decisions about their capability on the information it has.

Wherever possible, members of staff on long-term absence are encouraged to return to work gradually as part of their recuperation on a part-time capacity or on light duties to help them re-adjust to the workplace.

Targets and benchmarking

Nine in ten respondents believe absence can be reduced and 49% have a target to achieve this. Just over 40% of employers benchmark their absence rate, almost all against their sector and three-quarters against their region.

Setting targets for reducing absence

The public services and manufacturing and production are much more likely to have targets to reduce absence than private services and non-profit organisations. See Table 8.

Particular differences concerning having a target to reduce absence can be seen in the public services. Almost 90% of local government employers set targets for reducing absence, and this falls to 70% among organisations in the health sector, 62% for other public services, and to just 33% for education. Within manufacturing and production, the industries most likely to set targets are food, drink and tobacco, general manufacturing, chemicals, and other manufacturing. Paper and printing organisations and construction employers are least likely to set targets. Among private services those in transport and storage are much more likely to have a target than other employers in the sector. Just over a third of non-profit organisations have a target for reducing absence.

In all, 49% of employers have a target for reducing absence, with 90% of respondents believing that it is possible to reduce absence – figures identical to those in last year's survey.

The likelihood of setting a target increases with the size of the organisation. Only 17% of organisations with fewer than 100 employees have a target, a figure that rises to 36% for those with 100–249 employees. Almost half of organisations with 250–499 employees set targets for reducing absence. This proportion increases to 57% for employers with 500–1,999 staff and reaches 70% among larger organisations.

Confidence in being able to reduce absence is highest in public services organisations (95%), and lowest in private services (85%). It is worth noting that absence

levels are highest in public services organisations and lowest among private services employers.

Types of targets

Among those setting targets, more than half of respondents are seeking a reduction to an absolute percentage of working time lost. Of these, 40% are aiming for a target of 3% and a quarter are targeting a reduction to 4% of working time. The mean target for all employers using working time as a benchmark for absence is 3.6%.

Just over a quarter of employers are targeting a reduction to a number of days lost per year. Targets typically range between four and ten days, with 84% of employers aiming for a reduction within this scale. The mean target for reducing absence to is 7.2 days.

One in ten respondents who have targets for reducing absence identify an annual percentage reduction in working time. Of these, 42% are aiming for a 1% reduction, 16% want to reduce absence by 2%, and 14% have their sights set on a 3% reduction.

Benchmarking absence rates

In all, 43% of organisations benchmark their absence rate against other employers, although this figure represents a fall of 6% on the previous year. Benchmarking is more common in public services than in manufacturing and production and particularly more so than in private services.

Almost all employers that benchmark do so by their sector, while three-quarters state that they also benchmark by region. Benchmarking by region is more likely in public services and manufacturing and production than in private services or non-profit organisations. See Table 9.

Table 8: Whether organisation has a target for reducing absence, by sector

	Number of responses	Percentage of organisations having a target
Agriculture and forestry	3	33
Chemicals	23	65
Construction	28	32
Electricity, gas and water	9	67
Engineering and metals	73	53
Food, drink and tobacco	53	68
General manufacturing	49	65
Mining and quarrying	5	40
Paper and printing	12	42
Textiles	11	45
Other manufacturing	78	60
All manufacturing and production	342	58
Consultancy	16	25
Financial services	69	32
Hotels, restaurants, leisure	29	31
IT services	35	26
Legal and property services	28	32
Media and publishing	21	5
Retail and wholesale	65	40
Telecommunications	10	20
Transport and storage	33	55
Other private sector	81	35
All private services	382	33
Central government (including defence)	12	75
Education	43	33
Health	56	70
Local government (including police and fire)	53	89
Other public sector	39	62
All public services	200	65
Non-profit organisations	46	35
Survey average	969	49

Table 9: Extent of benchmarking, by major sector

Among those benchmarking, the percentage benchmarking by section and region

	Percentage of organisations benchmarking	Sector	Region
Manufacturing and production	43	91	76
Private services	29	98	59
Public services	72	99	80
Non-profit organisations	42	100	54
Survey average	43	96	72

Cost of sickness absence

The average cost of sickness absence per employee in the 2004 survey is £588, a 3.7% increase on the previous year's figure. More than nine in ten employers (93%) consider sickness absence to be a significant or very significant cost to their business. However, only 46% monitor its cost.

Average cost of absence

A third of respondents provided data on the cost of absence, revealing that the average annual cost of absence per employee is £588 – a 3.7% increase over 2003 (an increase perhaps explained by higher salaries). The cost was highest in public services (£706), closely followed by non-profit organisations (£686). Absence costs manufacturing and production employers £575 per member of staff, and organisations in the private services £535. See Table 10.

Measuring the cost of absence is important because it can provide senior management with evidence of how managing absence impacts on the bottom line and why it is worth investing in.

Monitoring the cost of absence

In all, 46% of organisations monitor the cost of sickness absence, almost unchanged from the previous year's figure (45%). There is little variation by sector in the proportion of employers monitoring the cost of absence. See Table 11.

Organisations with up to 99 employees (30%) are far less likely to monitor the cost of absence than larger organisations (44–54%).

Components of the cost

Of those employers monitoring the cost of absence, occupational sick pay is most likely to be included in the cost of absence, followed by statutory sick pay. The other most common costs are replacement labour, overtime costs and the cost of reduced performance eg lost production. See Figure 2.

More than 90% of respondents judged sickness absence to be a significant or very significant cost to business. Not surprisingly, public services and non-profit organisations, which have the highest levels of absence, are most likely to see absence as a significant or very significant cost to the business, whereas private services respondents are least likely. See Table 12.

Smaller employers are less likely to see the cost of absence as a significant cost to the business than larger organisations. See Table 13.

Table 10: Average cost of sickness absence per employee, by sector

	Number of responses	cost (£) per employee per year
Agriculture and forestry	1	565
Chemicals	8	958
Construction	8	628
Electricity, gas and water	3	293
Engineering and metals	30	583
Food, drink and tobacco	26	564
General manufacturing	14	591
Mining and quarrying	2	725
Paper and printing	5	327
Textiles	4	313
Other manufacturing	36	553
All manufacturing and production	137	575
Consultancy	6	1175
Financial services	25	492
Hotels, restaurants, leisure	8	282
IT services	16	789
Legal and property services	7	507
Media and publishing	8	369
Retail and wholesale	20	403
Telecommunications	4	660
Transport and storage	16	597
Other private sector	22	486
All private services	129	535
Central government (including defence)	3	709
Education	11	717
Health	7	635
Local government (including police and fire)	17	620
Other public sector	17	811
All public services	53	706
Non-profit organisations	17	686
Survey average	334	588

Table 11: Monitoring cost of sickness absence by major sector

Major sector	Percentage of organisations monitoring the cost of sickness absence
Manufacturing and production	50
Private services	42
Public services	46
Non-profit organisations	48
Survey average	46

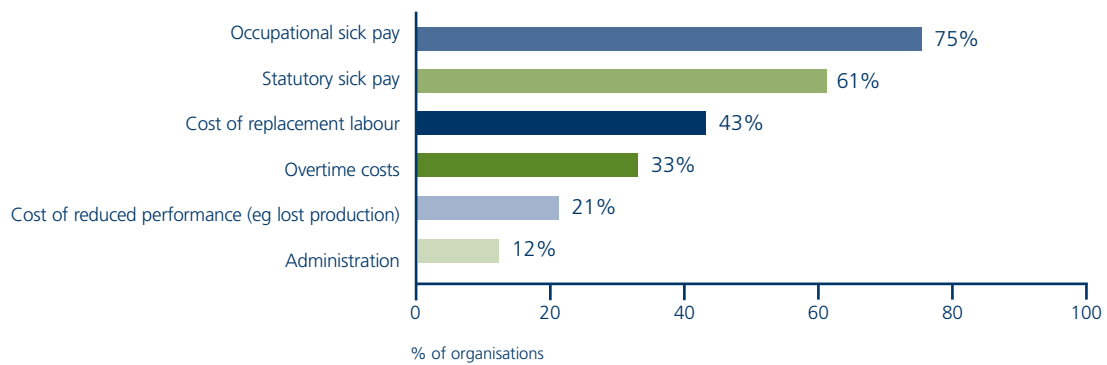
Figure 2: Elements included in cost of sickness absence

Table 12: Significance of cost of sickness absence to organisation, by major sector

	Percentage of respondents saying cost of absence is ...		
	Insignificant	Significant	Very Significant
Manufacturing and production	6	71	24
Private services	13	69	19
Public services	3	60	38
Non-profit organisation	3	60	38
Survey average	8	68	25

Table 13: Significance of cost of sickness absence to organisation, by workforce size

Number of employees	Percentage of respondents saying cost of absence is ...		
	Insignificant	Significant	Very Significant
1–99	27	63	12
100–249	13	69	19
250–499	5	68	26
500–749	3	72	26
750–999	6	61	33
1,000–1,499	2	67	31
1,500–1,999	–	65	35
2,000+	1	67	33

Causes of sickness absence

Minor illness is the most important cause of sickness absence for both manual and non-manual employees. Beyond this, the main causes of absence for manual workers are back pain and musculo-skeletal injuries, and the main cause for non-manual workers is stress.

The main causes of absence

Four-fifths of organisations collect information concerning the causes of sickness absence. Respondents were asked to rank the top five reasons for employee absence within their organisations. These have been analysed to show 'any mention' of the cause concerned and also the frequency with which a cause was identified as the main cause. See Table 14.

For manual workers, minor illness (eg colds, flu, stomach upsets etc) is clearly the most frequently mentioned reason for absence, with 95% of respondents citing this as a cause. The next most common causes of absence, in order, are back pain, musculo-skeletal injuries, stress and recurring medical conditions.

The top six reasons for absence among manual workers remain ranked in the same order as the previous year, with the exception of home/family responsibilities, which has climbed into sixth place, replacing work-related injuries/accidents. This emphasises the importance of, wherever possible, providing work-life balance opportunities for employees.

Other absence not due to ill health has climbed one place, from eighth to seventh (see Sick notes and non-genuine absence, page 40).

For non-manual workers, minor illness is also the most frequently mentioned reason, followed by stress, recurring medical conditions and back pain. See Table 15.

Musculo-skeletal injuries has jumped ahead of home/family responsibilities as the fifth most significant cause of absence for non-manual workers in an otherwise unchanged top six. Other absence not due to ill health has also jumped one place to eighth compared to last year's survey.

Case study

The provision of work–life balance opportunities for employees at Southport and Ormskirk Hospital NHS Trust is an important part of its approach to managing absence.

The trust was one of the first to be awarded Improving Working Lives Practice Plus status for its flexible working initiatives. These include emergency care leave and a system that allows staff to buy up to four weeks' extra holiday a year as well as a combination of flexi-hours, self-rostering, annualised hours and part-time working.

The trust's HR Director, Sharon Partington, said that the commitment to managing absence at the trust starts at the very top of the organisation. The trust's chief executive and the director of finance meet every two months with the directors of all departments and their accountants and HR managers to consider all the key performance indicators – including employee absence levels.

The results are then cascaded down so all managers are aware what levels of absence exist throughout the trust and how their own departments are faring.

Absence is also discussed at the trust's personnel strategy subcommittee when the manpower report is considered. The report, which goes to the trust board, contains a breakdown of absence by staff group.

Partington said this approach ensures that absence management is given a high priority by managers throughout the trust.

In addition, the trust has recently reviewed its sickness absence procedures to help those employees who are on long-term sick leave back to work. A renewed focus has been placed on early occupational health intervention and the organisation has also introduced phased return to work on full salary.

Table 14: Causes of absence – manual workers

	Percentage of employers	
	Any mention	Main cause
Minor illness	95	71
Back pain	68	9
Musculo-skeletal	51	9
Stress	42	4
Recurring medical conditions	41	1
Home/family responsibilities	35	1
Other absences not due to genuine ill health	35	1
Work-related injuries/accidents	27	2
Mental ill health	27	2
Injuries/accidents conditions	25	*
Acute medical conditions	23	2
Drink- or drug-related conditions	4	*

Table 15: Causes of absence – non-manual workers

	Percentage of employers	
	Any mention	Main cause
Minor illness	98	81
Stress	68	9
Recurring medical conditions	48	1
Back pain	45	2
Musculo-skeletal injuries	39	1
Home/family responsibilities	38	*
Mental ill health	32	2
Other absences not due to genuine ill health	27	1
Injuries/accidents not related to work	27	*
Acute medical conditions	24	1
Work-related injuries/accidents	7	*
Drink- or drug-related conditions	2	*

Causes of long-term absence

Respondents were asked to identify the leading cause of long-term absence in their organisation, defined as periods of four weeks and above, for both manual and non-manual employees. A number of respondents provided more than one cause of long-term absence, which our survey shows accounts for 19% of total absence.

Back pain remains the number one cause of long-term absence among manual workers, followed closely by musculo-skeletal injuries, acute medical conditions and stress.

There are significant differences between the main sectors in the causes of long-term absence among manual workers. For employers in manufacturing and production, the leading reasons for long-term absence are back pain, acute medical conditions and musculo-skeletal injuries. In private services the main causes of long-term absence for manual workers are back pain, mental ill health, acute medical conditions and stress.

But, in public services, musculo-skeletal injuries are cited as the top reason for long-term absence among manual staff, followed by stress, back pain and mental ill health.

Among non-profit organisations, acute medical conditions was the most significant cause of absence with stress, mental ill health and recurring medical conditions given as the next most common reasons. See Table 16.

Stress is the leading cause of long-term absence among non-manual workers by some distance. More than four in ten employers cite stress as the leading reason for long-term absence, well ahead of mental ill health, the next most significant cause identified.

The top causes for non-manual workers in manufacturing and production ranked in order are stress, acute medical conditions, mental ill health and operations and recovery.

In private and public services and non-profit organisations, stress is followed by mental ill health, acute medical conditions and operations and recovery to make up the four leading causes of absence among non-manual staff. See Table 17.

Table 16: Causes of long-term absence, by major sector – manual workers

Percentage of respondents citing this reason as leading cause

	All	Manufacturing and production	Private services	Public services	Non- profit organisation
Back pain	22	22	23	19	10
Musculo-skeletal injuries	20	18	13	38	10
Acute medical conditions	18	22	17	7	33
Stress	15	10	17	24	29
Mental health	14	11	19	16	14
Operations recovery	9	10	8	9	10
Recurring medical conditions	6	8	6	3	14
Work-related injuries/accidents	5	7	4	–	5
injuries/accidents not related to work	4	5	4	1	–
Minor illness	3	3	3	4	–
Home/family responsibilities	1	2	1	1	–
Other absences not due to genuine ill health	–	–	–	–	–
Drink-or drug-related conditions	–	–	–	–	–

Table 17: Causes of long-term absence, by major sector – non manual workers

	Percentage of respondents citing this reason as leading cause				
	All	Manufacturing and production	Private services	Public services	Non-profit
Stress	42	30	45	56	47
Mental health	23	14	28	28	33
Acute medical conditions	19	25	19	10	17
Operations and recovery	11	14	9	10	14
Recurring medical conditions	8	11	6	5	3
Back pain	5	3	6	6	–
Musculo-skeletal injuries	5	4	4	7	6
Minor illness	3	4	3	2	–
injuries/accidents not related to work	3	5	3	2	3
Home/family responsibilities	1	1	1	–	–
Work-related injuries/accidents	–	–	–	–	–
Other absences not due to genuine ill health	–	–	–	–	–
Drink-or drug-related conditions	–	–	–	–	–

Managing absence

Employers are increasingly involving line managers in absence management to combat short-term absence and are making greater use of occupational health professionals to curb long-term absence problems. Nearly nine in ten organisations have a written absence management policy and three-quarters have changed their approach in the past two years.

Absence management policy

Nearly nine in ten of organisations have a written absence management policy. This is more likely to be the case in public services and non-profit organisations than in private services or manufacturing and production. Organisations with fewer than 100 staff are the least likely to have a written policy, while the overwhelming majority of companies with more than 500 staff possess a policy.

Changes in approach

Three-quarters of employers have introduced changes to their approach to absence management in the past two years. This was more likely to have happened in organisations employing more than 250 staff (77–83%) than in smaller businesses (65–67%).

The most frequently mentioned changes are introducing or revising monitoring procedures and introducing or revising absence management policies. Half of respondents have introduced return-to-work interviews, more than a third have involved occupational health professionals and a quarter of employers have introduced Bradford points or another trigger system. See Figure 3.

The Bradford Factor

The Bradford Factor identifies persistent short-term absence for individuals, by measuring the number of spells of absence, and is therefore a useful measure of the disruption caused by this type of absence.

It is calculated using the formula: $S \times S \times D$

S = number of spells of absence in 52 weeks taken by an individual

D = number of days of absence in 52 weeks taken by that individual

For example:

10 one-day absences: $10 \times 10 \times 10 = 1,000$

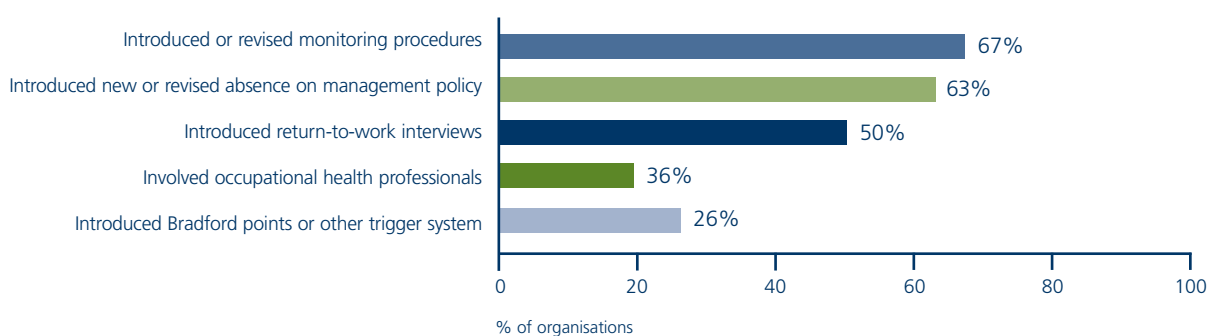
1 ten-day absence: $1 \times 1 \times 10 = 10$

5 two-day absences: $5 \times 5 \times 10 = 250$

2 five-day absences: $2 \times 2 \times 10 = 40$

The trigger points will differ between organisations. As for all unauthorised absence, the underlying causes will need to be identified.

Figure 3: Changes made to absence policy



Tools for managing short-term absence

The survey highlights the importance of the line manager in tackling short-term absence. From a list of 18 tools, four emerged as almost equally popular in tackling short-term absence and all directly involve the line manager:

- disciplinary procedures for unacceptable absence
- providing sickness absence information to line managers
- line management involvement in absence management
- return-to-work interviews.

Two other tools that are also frequently employed are the use of trigger mechanisms to review attendance, and leave for family circumstances. See Table 18.

Case study

Training and involving line managers in absence management has played an essential role in the reduction of employee absence at the Civilian Personnel Management Organisation.

Peter Day, Civilian Personnel Manager at the military support agency, said training was particularly important because many line managers are military officers who manage clerical and technical civilian support staff.

Many of these managers have no experience of management outside the armed forces and are not used to dealing with issues surrounding managing absence in a civilian workforce.

The organisation uses a training provider to educate its line managers in all aspects of absence management. The training seminars often use role-play to demonstrate clearly the sorts of situations that might occur.

'There is sometimes some reluctance to take part [in the training] because there is a perception among certain officers that they are already experts in management and that there is no difference between managing soldiers and managing civilian members of staff,' said Day.

The organisation also uses its appraisal system to emphasise to line managers that they have primary responsibility for managing short-term absence.

This is supported by a computer system which monitors attendance across the 13,000-strong organisation so all managers are aware of the absence levels in their areas of responsibility, who is absent, and why.

Managers receive an alert if any member of staff has been absent for more than ten days. They must also carry out a return-to-work interview with any member of staff who has taken time off sick.

Line managers may need training in the following areas:

- the organisation's absence policies and procedures
- their role in the absence management programme
- the legal and disciplinary aspects of absence
- the role of occupational health services
- the operation (where applicable) of trigger points
- the development of return-to-work interview skills
- the development of counselling skills.

Table 18: Absence management tools for short-term absence

	Percentage of organisations using this tool
Disciplinary procedures for unacceptable absence	83
Providing sickness absence information to line managers	81
Line management involvement in absence management	81
Return-to-work interviews	81
Use of trigger mechanisms to review attendance	71
Leave for family circumstances	68
Managers are trained in absence handling	54
Occupational health professional involvement	54
Restricting sick pay	50
Attendance record is a recruitment criterion	42
Changes to work patterns or environment	37
Stress counselling	31
Health promotion	28
Employee assistance programmes	26
Rehabilitation programme	18
Attendance bonuses or incentives	15
Physiotherapy services	15
Nominated absence case manager/management team	12

Respondents were also asked to identify the three most effective methods. The most effective are, in order, return-to-work interviews, use of disciplinary procedures for unacceptable absence, line management involvement in absence management and use of trigger mechanisms to review attendance.

The same four interventions were identified as the most effective interventions in last year's survey, but there has been a measurable increase in the proportion of employers that identified these as making an impact. There has been a 2.5% increase in the number of employers rating return-to-work interviews as effective, an almost 4% increase in the rating of disciplinary procedures, a 3% improvement in effectiveness ratings for line management involvement, and a 2% increase in the rating for use of trigger mechanisms.

Return-to-work interviews can help ensure that short-term absence problems are identified at an early stage. They also provide managers with an opportunity to start a dialogue with staff over underlying issues that might be causing the absence.

There is considerable variation between sectors in how employers rate the effectiveness of absence management tools, aside from return-to-work interviews, which are rated as the best intervention by all employer groups.

Manufacturing and production employers rate the use of disciplinary procedures much higher than other sectors (50%), particularly public services, where this intervention is rated as a most effective tool by just 17% of respondents. Public services rate the use of trigger mechanisms as the second most effective intervention (44%), significantly higher than the other three sector groupings. See Table 19.

Case study

There is a multi-disciplinary approach to managing absence at Eurotunnel. The firm's operational planning team, line managers, HR team and the occupational health department work together to try and minimise absence and help employees return to work.

The company uses a very structured procedure to control unacceptable levels of absence based on trigger points monitored by the operational planning team. Employees who take five or more days off work sick, or who have two or more separate periods of absence over a 13-week period, have an absence review meeting with their manager.

At the same time, the firm reviews absence over a 52-week period on a rolling basis and employees who have eight days off, or five or more periods of absence, also attend an absence review meeting. Workers breaching these standards are given a first informal warning and up to four cautions. If ever an employee reaches a fourth caution dismissal is considered.

Sheila Seabourne, Eurotunnel's HR Manager, said absence review meetings are used to try and identify any underlying causes of absence and where necessary refer staff to the occupational health department.

Eurotunnel trains all its managers in attendance management, including the use of return-to-work interviews.

'One of the things we are conscious of is that, because we have quite a mechanistic approach to attendance management, the quality of line management intervention must be high,' said Seabourne.

Part of the firm's performance bonus is based on an absence target of 2.75% of working time being met – highlighting to its staff the importance that the company places on keeping absence to a minimum.

Monthly meetings are held involving the HR and occupational health departments to review absence figures so any worrying trends are picked up early.

Table 19: Most effective absence management tools for short-term absence

	Percentage of respondents citing this tool as one of the most effective				
	All	Manufacturing and production	Private services	Public services	Non-profit
Return-to-work interviews	63	67	59	64	61
Disciplinary procedures for unacceptable absence	35	50	32	17	16
Line management involvement	30	27	28	37	36
Use of trigger mechanisms to review attendance	29	26	23	44	27
Restricting sick pay	23	25	32	3	14
Providing sickness absence information to line managers	15	12	17	18	23
Managers are trained in absence handling	11	9	10	16	9
Occupational health professional involvement	10	12	6	16	9
Leave for family circumstances	6	5	6	7	16
Attendance bonuses or incentives	3	5	3	–	–
Changes to work patterns or environment	3	*	5	4	–
Attendance record as a recruitment criterion	3	3	4	1	5
Nominated absence case manager/management team	1	1	2	*	–
Stress counselling	1	–	1	2	5
Employee assistance programmes	1	*	2	1	–
Physiotherapy services	1	1	–	1	–
Health promotion	*	*	1	*	–
Rehabilitation programme	*	1	–	–	–

Note: Organisations could cite up to three tools.

Methods for managing long-term absence

Respondents were asked to choose which methods, from a list of 18, they use to manage long-term absence. Return-to-work interviews have overtaken the provision of sickness absence information to line managers as the most commonly used absence management intervention since the previous year's survey.

The next most commonly used interventions, in order, and unchanged from the previous year, are the involvement of line management in absence management, the use of occupational health professionals and the use of trigger mechanisms to review attendance.

There has been a slight increase in the percentage of organisations employing all of the top five most commonly used absence management tools since the previous year. Rehabilitation programmes are more commonly used to manage long-term absence (33%) than for short-term absence (18%). Changes to work patterns or environment are also much more likely to be used to manage long-term rather than short-term absence. Disciplinary procedures for unacceptable absence are less likely to be used to tackle long-term absence than short-term. See Table 20.

The involvement of occupational health professionals (60%) is very clearly considered the most effective tool for managing long-term absence. This emerged when respondents were asked which were their three most effective tools. A greater proportion of employers rate the use of occupational health as an effective tool for combating long-term absence compared to last year's survey, when 54% of respondents identified this as one of the most effective interventions.

Occupational health professionals should be able to play a major role in evaluating the reason for absence, carrying out health assessments and assisting HR professionals and line managers in planning a return to work.

The involvement of occupational health professionals is, however, rated as effective by fewer private services employers (43%) than in the other main sectors, where its effectiveness rating ranged from 66% to 77% of employers. Restricting sick pay is considered an effective tool among more private services respondents than employers in other industries. Respondents among manufacturing and production rate the effectiveness of training managers in managing absence less highly than those in private or public services. Employee assistance programmes are more likely to be rated as effective among private services and non-profit organisations than in the other main sectors. See Table 21.

Case study

Rotherham General Hospitals NHS Trust has revised its absence management policy to put a greater emphasis on the potential for redeploying employees who have been off work sick for long periods into different roles.

The trust's Assistant Director of Personnel, Jonathan Ainsworth, hopes this will enable more staff, who might formerly have had to be retired on the grounds of ill health or be dismissed on the grounds of capability, to find work in other areas of the organisation.

The revised policy also highlights the role of its occupational health department, to encourage managers to refer members of staff with absence problems at an earlier stage.

Changes have been made to the way return-to-work interviews are used to promote greater dialogue between the manager and the member of staff who has returned to work following absence.

Managers are now required to ensure return-to-work interviews happen within five days of the employee returning to work. The self-certification form has also been changed to include a number of questions that managers might ask during the return-to-work interview.

Table 20: Absence management tools for long-term absence

	Percentage of organisations using this tool
Return-to-work interviews	77
Providing sickness absence information to line managers	74
Line management involvement in absence management	73
Occupational health professional involvement	69
Use of trigger mechanisms to review attendance	60
Disciplinary procedures for unacceptable absence	58
Managers are trained in absence handling	49
Changes to work patterns or environment	48
Restricting sick pay	46
Leave for family circumstances	44
Stress counselling	37
Attendance record as a recruitment criterion	35
Rehabilitation programme	33
Employee assistance programmes	29
Health promotion	28
Nominated absence case manager/management team	18
Physiotherapy services	18
Attendance bonuses or incentives	11
Nominated absence case manager/management team	12

Table 21: Most effective absence management tools for long-term absence

	Percentage of respondents citing this tool as one of the most effective				
	All	Manufacturing and production	Private services	Public services	Non-profit
Occupational health professional involvement	60	66	43	77	71
Line management involvement in absence management	20	19	21	22	18
Rehabilitation programme	19	23	14	19	13
Return-to-work interviews	18	17	19	18	18
Restricting sick pay	17	16	24	10	7
Changes to work patterns or environment	17	17	19	14	20
Use of trigger mechanisms to review attendance	11	12	7	14	9
Managers are trained in absence handling	9	4	10	16	7
Employee assistance programmes	7	3	12	4	11
Providing sickness absence information to line managers	6	5	6	8	9
Nominated absence case manager/management team	6	5	6	9	4
Stress counselling	6	4	6	9	9
Disciplinary procedures for unacceptable absence	5	5	5	3	7
Physiotherapy services	3	6	1	2	–
Attendance record as a recruitment criterion	2	2	3	1	2
Health promotion	1	1	1	–	2
Leave for family circumstances	1	1	2	–	–
Attendance bonuses or incentives	*stars?	*	1	–	–

Note: Organisations could cite up to three tools.

Workplace stress

More than half of employers have noticed an increase in stress-related absence in the past year, with the main causes being workload, management style/relationships at work and organisational change/restructuring. In response, three-quarters of organisations are taking steps to identify and reduce stress. The main obstacle to managing stress is that the condition is not clearly defined and is difficult to identify.

Changes in stress-related absence

In all, 52% of respondents report an increase in stress-related absence in the past year, with just 8% identifying a decrease. The increase is particularly noticeable in public services (60%) and private services (57%) but is significant across all sectors. See Table 22.

Organisations with more than 1,000 employees are more likely to report increases in stress-related absences in the last year than smaller employers. Between 73% and 77% of organisations with 1,000 and more staff report an increase, compared to just 39% among organisations employing between 100 and 249 employees. Only 21% of employers with fewer than 100 members of staff have seen stress-related absence increase.

Causes of stress at work

Respondents were asked to indicate the three main causes of stress at work. Workload/volumes of work and management style/relationships at work stand out as the leading causes of stress. Organisational change and pressure to meet targets are the next most frequently identified causes of stress. See Table 23.

More public services (77%) and non-profit organisations (71%) identify workload as a significant cause of stress than other sector groups. Management style/relationships at work are also more likely to be seen as a major cause of stress among public services and non-profit employers than for private services organisations or manufacturing and production businesses.

Organisational change/restructuring issues are seen as more likely to create stress in manufacturing and production (49%) and public services (47%) than among other sectors. Respondents in non-profit organisations (21%) are least likely to identify pressure to meet targets as a significant cause of stress.

Steps being taken

In total, more than three-quarters of employers (77%) are taking steps to identify and reduce stress in the workplace. This is particularly the case in public services (93%) and non-profit organisations (86%). In those organisations where there are more than 2,000 employees, more organisations (93%) are taking action than employers with between 499–1,999 employees (75–80%). Employers with fewer than 250 employees are least likely to be addressing the issue of stress-related absence.

Almost two-thirds of respondents taking action to manage stress are using flexible working options/improved work–life balance, more than half of employers have introduced risk assessments/stress audits, and 55% are training their managers or staff. Half of employers surveyed have also introduced staff surveys, increased the involvement of occupational health professionals and brought in employee assistance programmes to try and tackle stress. See Table 24.

Public services employers are more likely to have introduced any of the listed methods for tackling stress than organisations in the other main sectors. Employers in manufacturing and production and in private services are least likely to have introduced methods for identifying or tackling stress.

Case study

Laboratory supplier Fisher Scientific UK is to use its plans to improve the way it identifies and tackles stress in the workplace as an opportunity to consider more efficient ways of working.

Personnel Manager Paul Wilkinson said the company, which employs 520 people, is taking action to manage stress now to prevent problems in the future.

'Stress is not one of the issues that we feel is a huge problem at the moment but it could become more of a problem. Our business is changing. The daily routine is speeding up and people are required to be more flexible,' said Wilkinson.

In response, the company is launching a workplace culture survey this summer following consultation with staff. The survey will incorporate questions on demand, control, support, roles, relationships and change.

There will then be a second-phase survey designed to explore issues raised in the first survey in more depth, followed by more qualitative investigation of the issues through focus groups and one-to-one interviews.

Wilkinson said the work on managing stress would also be used to try and improve business performance by highlighting areas where improvements can be made, for example, internal communication, or by identifying outdated ways of working.

Obstacles to addressing stress at work

Respondents were asked to choose the three main obstacles to addressing stress at work. These have been analysed to identify the frequency with which each was mentioned. Difficulty defining and identifying stress is the most frequently mentioned obstacle, with more than three-quarters of employers seeing this as an issue. Increasing performance targets/workloads (55%) and the lack of skills for dealing with stressed staff (47%) are the next two most common problems identified by respondents.

Non-profit organisations are most likely to highlight problems in defining and identifying stress, with 84% reporting that this is an obstacle. The increase in performance targets and workloads is seen as most significant among respondents from the public services, with 74% selecting this as an issue.

Non-profit organisations (64%) express more concern about a lack of skills to deal with stressed staff than those in public services (54%) or those in other main sectors (43–45%). See Table 25.

Table 22: Whether stress-related absence has increased or decreased over the last year

Percentage of respondents saying stress-related absence has ...

Major sector	Increased	Decreased	Stayed the same
Manufacturing and production	44	10	46
Private services	57	5	38
Public services	60	11	29
Non-profit	48	15	38
Survey average	52	8	39

Table 23: The causes of stress at work

Percentage of respondents citing this reason

	Any mention	Main cause
Workloads/volume of work	68	35
Management style/relationships at work	60	27
Organisational change/restructuring	45	17
Pressure to meet targets	41	11
Lack of control over how work is carried out	18	3
Lack of support/training	16	2
Job insecurity	16	3
Poorly designed jobs/poorly designed roles	8	1
Lack of consultation	7	1

Table 24: The methods being used to identify and reduce stress in the workplace

	Percentage of respondents citing this method
Flexible working options/ improved work–life balance	61
Risk assessments/stress audits	57
Training for managers/staff	55
Staff surveys	51
Greater involvement of occupational health specialists	51
Employee assistance programmes/counselling	50
Written stress policy guidance	47
Changes in work organisation	21
Focus groups	15

Table 25: The obstacles to addressing stress at work

	Percentage of respondents citing this obstacle	
	Any mention	Main cause
Stress not clearly defined and difficult to identify	76	52
Increasing performance targets/workloads	55	18
Lack of skills for dealing with stressed staff	47	10
Increasing competitive/cost pressures	35	6
Lack of organisational commitment/issue not taken seriously enough	32	11
Difficulty building business case for investment in stress management	23	5

Sick notes and non-genuine absence

More than 90% of employers think that GPs issue sick notes too easily. Nevertheless, 60% want GPs to continue to administer the sick-note system. If an alternative system was adopted, respondents believe it should be administered by specialist NHS occupational health centres or private-sector- or NHS-employed occupational health professionals, working with individual employers.

Should GPs continue to be responsible for issuing sick notes?

Our survey asked HR professionals for their views on the sick-note system, which is under review by the Department for Work and Pensions. There are concerns that the system does not function effectively, with sick notes issued too easily because GPs don't have enough time or the necessary expertise in fitness-for-work issues. In all, 60% of respondents believe that GPs should continue to have the responsibility for issuing sick notes.

Do GPs issue sick notes too easily?

A total of 93% of respondents think GPs issue sick notes too easily. This view is more likely to be held by employers in manufacturing and production (97%) than in the other main sectors (90–92%).

Alternative approaches

The survey asked respondents' opinions on four alternatives to the current system if the responsibility for issuing sick notes is taken away from GPs.

One of these, due to be piloted by the Department of Health in conjunction with the British Medical Association this year, would see company-employed occupational health professionals taking responsibility for issuing sick notes.

The other three alternatives for sick-note provision included in the survey are: NHS specialised occupational health centres; private-sector- or NHS-employed occupational health professionals working with individual employers; and self-certification.

Two of the four alternatives presented to respondents received much more support than the others. Nearly half (45%) of employers think that if the sick-note system was taken away from GPs, it should be administered by NHS specialised health centres, and 35% believe it should be done by private-sector- or NHS-employed occupational health professionals working with individual employers.

Rather fewer wanted in-house certification by the employer's own occupational health professionals (21%), while only 3% supported self-certification. See table 26.

There are considerable differences between the sectors in their views on the four alternative approaches suggested by the survey. Non-profit organisations are the most keen on NHS specialised occupational health centres. Manufacturing and production and private services are more interested than the other main sectors in private-sector- or NHS-employed health professionals working with individual employers. Public services provide more support than the other main sectors for in-house certification by the employer's own health professionals. Organisations with fewer than 100 staff are the most interested in NHS specialised occupational health centres. See Table 26.

View from one HR professional

Some GPs do issue sick notes too easily but transferring the responsibility for issuing sick notes to occupational health professionals would not improve the way the system is administered, according to one senior public sector HR professional.

Jonathan Ainsworth, Assistant Director of Personnel at Rotherham General Hospitals, thinks employees would be sceptical about the objectiveness of company-employed occupational health professionals and might view them as a tool of management. He is also concerned about a possible conflict of opinions between individuals' GPs and other health care professionals who might be making fitness-for-work judgements. In addition Ainsworth is not convinced that there would be enough specialised occupational health professionals to meet the demand under the proposals.

He would like to see GPs continue to issue sick notes but suggests that they possibly need further training in fitness-for-work issues.

Absence that is not genuine

There is a wide range of views among employers on the proportion of absence that is not genuine. Almost a third of employers believe that more than 20% of absence is not genuine. A similar proportion of respondents think between 6% and 10% of absence is not genuine and 19% of employers believe less than 5% of absence is not genuine.

Public service employers are more likely to believe absence is genuine, with 24% of these respondents estimating that less than 5% of absence is not genuine. A higher-than-average proportion of non-profit employers (40%) believe that 6–10% of absence is not genuine. When looking at these two figures together ie non-genuine absence of up to 10%, it reveals that public services and non-profit organisations believe that they have less absence that is not genuine than the other two main sectors.

Private services employers are the most likely to believe that more than 30% of absence is not genuine. The 8% of respondents who estimate that absence that is not genuine exceeds 40% are also more likely to be found in the private services sector and manufacturing and production. See Table 27.

Size of organisation appears to have an impact on the level of absence that is not genuine. Confidence in genuine absence is greatest among organisations with fewer than 100 staff and lowest among employers with 1,000–1,500 staff. Confidence in genuine absence increases again among organisations with more than 2,000 staff.

Table 26: Alternative approaches to administering the issuing of sick notes

	Percentage of respondents citing this approach
NHS specialised occupational health centres	45
Private-sector- or NHS-employed occupational health professionals working with individual employers	35
In-house certification by employers' own occupational health professionals	21
Self-certification	3

Case study

The biggest challenge in managing absence for mobile phone retailer The Link is reducing short-term absence levels among its predominantly young shop-floor sales force.

HR Manager Karen McKeever believes that an unacceptable proportion of short-term sickness absence is not genuine. She believes this is mainly because a high proportion of its retail employees are in their early 20s or younger.

'I think this generation typically feels less loyalty to employers. This might be because they have more opportunities and options open to them,' said McKeever.

In response to the challenges it faces, The Link has revised its absence policies and procedures and also switched from a paper-based system to an electronic one using the intranet to help managers monitor absence more effectively.

The system allows managers to access accurate absence reports on their areas of responsibility more easily than in the past.

The company, which employs 2,500 people, has trained its managers in using the absence policy and put them through two-day behavioural training using role-play to help bring the policies to life. Areas covered include recruitment, conduct in the workplace and return-to-work interviews.

McKeever said the business has changed its approach to managing long-term absence and uses a specialist service provider to implement rehabilitation programmes for members of staff who have been off work with health problems for more than six weeks.

Table 27: The proportion of absence that is not genuine

	Percentage of respondents citing this proportion of non-genuine absence
Less than 5%	19
6–10%	30
11–20%	19
21–30%	16
31–40%	7
41–50%	5
Over 50%	3

Methodology

In February 2004 approximately 7,000 questionnaires were sent out to a sample of people management specialists. The questionnaire included 30 detailed questions on the level, causes and cost of absence, the ways of managing both short- and long-term sickness absence, workplace stress and sick notes. Many of the questions were the same as, or similar to, those asked in previous CIPD surveys of employee absence.

A total of 1,110 usable replies were received – a response rate of 16%. Last year's survey had 1,330 usable replies. Over 2.9 million people are employed by the organisations that responded to the survey – around 11.9% of total UK employees (based on figures from the Labour Force Survey).

Compared to last year's survey, public services (up from 18% to 21%) and private services (up from 36% to 38%) account for a larger proportion of survey responses, while manufacturing and production accounts for a smaller proportion (down from 42% to 37%). The incidence of non-profit organisations remains unchanged.

Analysis has been based on the number of people answering the question concerned. Percentages have been rounded to the nearest whole number.

Table 28 shows the distribution of responses by sector, and Table 29 breaks down responses by workforce size.


Table 28: Distribution of responses, by sector

	Number of responses	Percentage of survey responses
Agriculture and forestry	3	*
Chemicals	25	2
Construction	33	3
Electricity, gas and water	11	1
Engineering and metals	91	8
Food, drink and tobacco	67	6
General manufacturing	57	5
Mining and quarrying	5	*
Paper and printing	13	1
Textiles	13	1
Other manufacturing and production	90	8
All manufacturing and production	406	37
Consultancy	18	2
Financial services	77	7
Hotels, restaurants, leisure	31	3
IT services	40	4
Legal and property services	31	3
Media and publishing	23	2
Retail and wholesale	74	7
Telecommunications	10	1
Transport and storage	38	3
Other private sector	90	8
All private services	427	38
Central government (including defence)	16	1
Education	49	4
Health	65	6
Local government (including police and fire)	62	6
Other public sector	39	4
All public services	228	21
Non-profit organisation	51	5
Not known	3	*
Total	1,110	100

Note: A very small number of respondents indicated more than one activity within a sector, while some also answered in more than one sector.

Table 29: Distribution of responses, by workforce size

	Number of responses	Percentage of survey responses
1–99	93	8
100–249	260	23
250–499	227	20
500–749	119	11
750–999	63	6
1,000–1,499	62	6
1,500–1,999	39	4
2,000+	164	15
Not known	83	7
Total	1,110	100



The CIPD explores leading-edge people management and development issues at a strategic level. Our aim is to share knowledge to increase learning and understanding. Our purpose is to make people more effective in their jobs and enhance their contribution to the business.

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