

MINISTERIAL TASK FORCE

ON HEALTH, SAFETY AND PRODUCTIVITY  
THE WELL MANAGED ORGANISATION

**GUIDELINES** FOR HR DIRECTORS AND  
SENIOR MANAGERS OF BUSINESS UNITS

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## THE WELL MANAGED ORGANISATION - GUIDELINES FOR HR AND BUSINESS UNIT MANAGERS

Workplace absence and productivity are highly important issues. They affect our competitiveness and productivity as a player in the global economy. They can be seen as an indicator of how well an organisation is managed. And, not least, they have an impact on individuals in the workplace – their health, well-being and motivation.

Across the public sector we need to attract, retain and develop high performing staff who can contribute to the delivery of world class services to the public.

I chair a Task Force on Health, Safety and Productivity in the public sector. Its work is closely linked to the Government's Health Work and Well-being strategy which sets out a blueprint for change to create healthier working environments while making sure that people get the help and support they need to stay in work if they do become ill. We want the public sector to lead by example in offering healthy workplaces and good quality jobs to well motivated staff.

Stakeholders have told us that securing lasting improvements and culture change needs sustained management commitment. Effective absence management is a core discipline for any well-run organisation, but it needs a "whole systems" approach - well managed organisations tend to have low levels of sickness absence and to deliver first rate services. So we want Boards, Chief Executives and HR Directors across the public sector to see absence management and staff well-being as one of their core functions.

To help senior managers across the public sector meet the challenges, the Task Force asked The Work Foundation to produce a clear profile for the well managed organisation. The approach focuses on understanding information about absence, managing sickness absence when it happens, tackling the underlying causes and promoting a culture that encourages attendance.

I hope that these guidelines will help you respond to the challenge and warmly commend them to you.

Lord Hunt of Kings Heath  
DWP  
Chair, Ministerial Task Force on Health, Safety and Productivity.

## THE WELL MANAGED ORGANISATION

### GUIDELINES FOR HR DIRECTORS AND SENIOR MANAGERS OF BUSINESS UNITS

#### Why should you care about absence and what should you do about it?

##### Introduction

Why should public service organisations worry about sickness absence?

Simply put:

- Absence is a cost - and a good measure of overall organisational efficiency;
- Absence affects the public reputation of your organisation;
- Absence is a good indicator of the health of your organisation. It reflects overall levels of employee well-being.

The government has placed the reduction of absence at the heart of the public management agenda. Ministers have given the matter detailed attention in the report of the *Task Force for Health Safety and Productivity*. It is clear that organisations will find it more difficult to meet the target of 2.5% efficiency savings over the next three years if they continue to accept high levels of sickness absence.

These guidelines are intended to reinforce the ministerial initiative. They supplement the high level guidelines for boards and are designed to give you a framework for thinking about the reduction of absence and the promotion of healthy attendance. Much that is presented here may look familiar, but the intention is to offer avenues that you may not have thought of and a reassurance that what you are doing follows best practice.

The guidelines do not offer you a comprehensive statement of every aspect of good health and safety management. For more information about these wider issues you should consult the guidance produced by the Health and Safety Executive - [www.hse.gov.uk](http://www.hse.gov.uk)

In practice an effective sickness absence and healthy attendance strategy will have four strands:

- Monitoring, measuring and understanding information about absence;
- Managing sickness absence when it happens;
- Promoting a healthy environment; tackling the underlying causes of absence;
- Promoting a culture that encourages attendance.

Your board will have considered developing a strategy along these lines and will expect you to report on progress.

These guidelines do not stand alone. They are part of a “whole systems” approach, which links top level commitment to operational delivery, to tackling problems that are organisational rather than individual and to the involvement of employees and their representatives. In particular, they are underpinned by diagnostic tools, which will enable you to:

- Assess whether operational managers have the skills to manage absence effectively and promote a culture of healthy attendance;
- Identify the underlying causes of absence and work with operational managers to address systemic problems;
- Develop a strategy for communicating with your workforce and trade union representatives.

These diagnostic tools are deliberately designed to reflect the challenges you may face in implementing a new sickness absence strategy. They address the questions and challenges that arise from any effort to make progress with each of the four strands outlined above.

### **The national framework**

High sickness absence is a symptom of something wrong in your organisation. Managing it is not just about managing the symptom: you need to get at the causes.

A good place to start is the report of the Ministerial Task Force. A management framework is already in place across Whitehall that should enable departments, agencies and NDPBs to manage health, safety and sickness (see box).

## **A FRAMEWORK FOR MANAGING HEALTH, SAFETY AND SICKNESS ABSENCE IN THE PUBLIC SERVICE**

### **Departmental Commitment.**

- Department to demonstrate its general intention, approach and objectives for the management of health and safety within the Department.
- Board Member (Champion) with responsibility for delivering improvements in each department.

### **Accurate data collection on the causes of ill health, injury and sickness absence.**

- Systems in place to ensure that, at every level, staff are aware of their responsibilities to submit injury, illness and sickness absence data.
- Monitoring and analysis of data takes place at organisational and ‘team’ level so that trends can be identified and addressed.
- Monitoring/identification of costs of absences.

### **Setting of targets for reduction.**

- Establish departmental baselines.
- Targets and milestones to achieving them to be agreed in conjunction with employee representatives (TU, etc).
- Public reporting against progress to achieving targets in Departmental Annual Reports.

**Implementation of measures to reduce ill health, injury and sickness absence.**

- Identify key areas from data sources.
- Establish what works.
- Put in place relevant employee assistance schemes and provide training to equip managers with the right skills to deal with issues and implement systems and procedures.
- Identification and use of tools for addressing issues.
- Put in place procedures for the rehabilitation of sick or injured employees to get them back to work as soon as possible.
- Develop and implement measures (with employee involvement) with built in evaluation aspects.

**Arrangements in place for monitoring and evaluating success of 'measures' in meeting targets.**

- Systems in place for checking against agreed milestones.
- Board 'Champion' provided with regular reports on progress.
- Evidence collated on whether measures are working and warrant further dissemination.

**Reporting progress on meeting targets to Task Force/ PSX Committee.**

- Report on progress towards overall Task Force targets.
- Share examples of best practice across Task Force/Public Sector.

**What do Managers Find Difficult**

You should also be aware throughout this process of the issues that managers find difficult – set out in the box below. Some suggestions are offered later that will enable you to overcome these difficulties.

## What do managers find difficult?

### **Managers often report that they are uncertain about their role and responsibilities:**

This is not so much a concern about skills as a question of organisational mission and purpose. In this situation, managers may be uncertain about their objectives, may be unclear about the limits of their authority and may believe that they will not receive the support they need if they take action to reduce absence. The remedy here is straightforward, although difficult to implement: boards must be clear about their objectives for the organisation, must make this relevant to operational managers and must give a clear account of the limits of managerial authority. The performance management system could be used here to set objectives and monitor performance. Managers will know what they are supposed to be doing, how they are supposed to do it and when action is expected or required.

### **There is a lack of sustained support for managers to help them manage**

**absence effectively:** Organisations often find themselves implementing large scale initiatives designed to generate significant culture change. Sickness absence is no exception. So, for example, an effort to make sickness absence an organisational priority is often associated with some kind of training for managers. Unfortunately, this is frequently a “one-off”, which takes no account of staff turnover. Training managers to handle absence is a continuous process. Newly promoted managers must have easy access to the support they need to develop the appropriate skill set. There must also be a sustained focus on sickness as a priority, which demands a recognition of the other pressures to which managers are subject. Simply put, in many organisations training for managers is patchy and inconsistent. Organisations must ensure that they have a programme in place which guarantees continued management competence in handling absence issues.

### **Line managers may feel poorly equipped to manage long-term absence:**

This is perhaps the issue that managers find the most difficult since it demands sensitive communication skills, including an ability to listen sympathetically and act decisively. For example, some managers find aspects of mental ill-health awkward and embarrassing. They may be concerned about making home visits to discuss the situation directly with employees and may be nervous about telephoning staff at home for fear that they may be accused of harassment. The same might equally be said of serious medical conditions like cancer and male managers may find it difficult to talk to women about their medical condition.

### **Line managers are unsure about when long-term absence becomes a capability issue:**

In part this is a result of a lack of clarity in procedures or, even if the procedure is clear, managers may not be able to identify the stage that in this case represents the appropriate stage in the procedure. If an employee has been absent from work for a considerable time then a manager may feel more comfortable engineering a dismissal or ill-health retirement than resolving the issue more positively.

**Line managers find it difficult to deal with medical issues and are uncertain when to make a reference to occupational health:** If an employee has been “signed off” by a GP then managers often find it difficult to discuss these judgments. In part it may be a result of a lack of confidence in examining the opinion of a professional, but it may also be a matter of allowing somebody else to make a decision in a field where managers feel poorly equipped. This is not to suggest that operational managers need to become medical experts, and indeed managers are not necessarily allowed access to the relevant medical information, but it does mean that managers must begin with the understanding that for many if not most employees the most effective rehabilitation is a return to work.

Some line managers are uncertain about when to make a reference to occupational health: Even if a reference to OH is made, managers may not be sure what to do if the advice they receive challenges the diagnosis made by the employee’s GP. At this point the support of the HR department is essential and clarity about the procedures at board level is a prerequisite for the effective delivery of occupational health.

**Line managers are uncomfortable with the idea of rehabilitation:** The Disability Discrimination Act requires employers to make “reasonable adjustments” to accommodate employees with long-term illness or injury. Many line managers find this a difficult process and may be uncertain about how to reorganise work and redesign jobs to meet the requirements of the DDA. Similarly, they may be uncertain about how to give effect to the new statutory responsibility on public service organisations to promote equal opportunity for those with disabilities.

It is not surprising that managers find these issues difficult to deal with, which is why the diagnostic tool on management skills has been designed to enable you to answer the following questions:

- Is it clear what questions managers can and should ask about sickness consistent with medical confidentiality?
- Is it clear what assessments managers are required to make, without expecting them to question medical judgements or implying that they are expressing medical opinions?
- Are the criteria clear for when managers should refer a case to HR, occupational health or occupational welfare specialists?

### **Taking the workforce with you**

An underpinning principle is that successful implementation demands effective managerial oversight alongside engagement with the workforce and their representatives. Employees need to see that you care about the quality of the working environment, want to know why staff are absent and are determined to treat not just symptoms but causes.

In particular you must be clear that:

- The workforce and operational managers understand that you are serious about reducing sickness absence; and
- This is high on your agenda in discussions with trade union or other representatives of the workforce.

Employees and their representatives can sometimes feel threatened by an initiative to manage attendance more effectively. You should be clear about how you will present the initiative to trade unions and communicate with employees. In particular, it is essential that employees see the system as fair. A perceived sense of injustice can give rise to conflict and make it much more difficult to make progress.

Further information about how to engage the workforce can be found at [insert ref to Cabinet Office material on *Driving Change*].

Having established these ground rules, we now turn to the four strands of successful sickness absence management.

### Monitoring, Measuring and Understanding

Good information systems are essential for effective absence management. To manage absence effectively you need to understand it. An effective flow of information on sickness absence will include:

- The overall number of days lost to absence;
- The cost of absence to the organisation;
- Absence broken down by:
  - occupational group/ grade
  - geographical location
  - gender
  - ethnicity
  - age
  - length of service
  - duration, so that a clear distinction can be drawn between long-term and short-term absence;
- Analysis by type of absence.

In addition, you should ensure that:

- The process for collecting data is clear, simple and reliable. For instance, whether you are measuring calendar days sick, working days lost, how you are treating part timers and shift workers;
- It is clear who is responsible for recording the absence of their staff and the quality of data is assured. Best practice is usually for line managers to be responsible for absence reporting.

Your board will probably give you a mandate to develop a system that can provide high quality and accurate information about absence. They will expect you to ensure that operational managers can use the system effectively and they will also expect regular reports of progress towards the delivery of targets.

For more information see [www.hse.gov.uk/gse/sickness.pdf](http://www.hse.gov.uk/gse/sickness.pdf) [www.hse.gov.uk/gse/deliveryplan.pdf](http://www.hse.gov.uk/gse/deliveryplan.pdf) and [www.theworkfoundation.com/pdf/attendance\\_management\\_research.pdf](http://www.theworkfoundation.com/pdf/attendance_management_research.pdf)

Once you have an effective information system in place you need to decide:

- How managers will be provided with this information; and
- What they are expected to do with it.

In particular you will need to ensure that:

- The board understands the information that can be supplied by the system;
- Targets for reducing absence have been agreed by the board;
- It is clear what remedial action you will take if targets are not met;
- Line managers understand the information that they will receive;
- Line managers know what action should be taken if targets are not being met.

Before you reach this point you should have considered:

- How targets should be selected;
- Who is accountable for the delivery of the targets;
- Whether the information system can identify persistent problems so that managers are able to respond;
- Whether the information system or some other method can be used to give you an accurate picture of the costs of absence.

Turning to each of these questions in turn:

#### *Targets*

- The board will probably have agreed the level at which targets should be set – corporate, team or individual?
- It is for you to ensure that targets reflect real circumstances. You may need to differentiate targets for short-term and long-term absence. Managers at different levels of the organisation may need different targets that reflect the composition of the workforce, the nature of the work and the mix of grades and gender. Absence in a prison may be rather different from absence in a Whitehall department.

#### *Accountability*

You must be clear about who is responsible for the delivery of targets and to whom they are accountable. In particular you should consider how the management of absence is incorporated into your performance management arrangements for line managers

#### *Analysis and diagnosis*

The information system should be designed so that managers are able to interpret the data and identify:

- Unusual levels or types of absence;
- Where absence seems to reflect particular factors – gender, age, occupation, work organisation/job design, shift patterns, location, management unit etc;
- Trends in patterns of absence.

While this may be useful in identifying systemic problems you also need a sense of how you are performing in comparison to other public services. This suggests that you should benchmark so far as possible against:

- Wider departmental or public service targets;
- Patterns in similar organisations;
- Typical levels for grades, gender, age, location, job type etc.

Information about your own organisation should be available from the HR department. Wider information about sickness absence may be available from the following sources:

- The Cabinet Office ([www.cabinetoffice.gov.uk](http://www.cabinetoffice.gov.uk)),
- The Health and Safety Executive ([www.hse.gov.uk](http://www.hse.gov.uk))
- The Chartered Institute of Personnel and Development ([www.cipd.co.uk](http://www.cipd.co.uk)).
- The CBI also publish data on the costs of absence across the economy ([www.cbi.org.uk](http://www.cbi.org.uk))
- The National Audit Office ([www.nao.gov.uk](http://www.nao.gov.uk))

You might also refer to the second report of the Ministerial Task Force on Health Safety and Productivity, see <http://www.hse.gov.uk/gse/live.htm>.

### Costs

High levels of sickness absence are a cost to the organisation – resources that might otherwise be used to deliver public services. For a simple and straightforward tool that will enable you to calculate the costs of absence see [http://www.unumprovident.co.uk/Home/Employers/Cost\\_of\\_Absence\\_Calculator.htm](http://www.unumprovident.co.uk/Home/Employers/Cost_of_Absence_Calculator.htm) This has been developed by Unum Provident, the leading UK insurer and The Work Foundation.

You can use the calculator to answer the following questions:

- Do you know how much absence is costing you today?
- Can you break down these costs by department/operational unit?
- What action do you need to take to get a better understanding of the costs of absence?

If you have a clear sense of the costs of absence then your operational managers will be able to conduct more effective appraisals and back to work interviews with employees. They can make clear just how damaging absence is to the organisation. You will also be able to make a strong case for investment in management training to manage absence more effectively in the future. You may have to spend to save.

### Managing Sickness Absence When it Happens

The Ministerial Task Force has set out some useful guidelines for dealing with absences when they occur. These are:

- Ensure that staff contact their line manager on each day of self-certificated absence;
- Require an informal return to work interview after every period of short-term absence;
- Require a formal return to work interview (which is documented) where absence is over seven days in duration;
- Insist on certification if the number of short-term absences exceeds five in twelve months;
- Introduce a compulsory reference to occupational health (where possible) if absence reaches a “trigger” level in a twelve month period, to pick up early signs of longer term problems and issues;
- Check on persistent Monday or Friday absence;
- Consider pay effects for staff who fail to certificate after absences of more than five working days;
- Offer more sensitive arrangements for special and compassionate leave so that parents and carers are not compelled to take sick days to meet their domestic responsibilities – and ensure that these arrangements are properly implemented.

Your board will probably have agreed that absence procedures should be redesigned to comply with these principles.

You should ensure that managers have very precise guidance, and the necessary training, to know what they are meant to do in response to sickness absence – particularly given the difficulties that many managers face in dealing with these issues. In practical terms this means that you should:

#### *Reporting in sick*

- Be clear about the questions that managers should ask when absence is first reported;
- Consider whether staff should report their symptoms to a nurse – some organisations have found this effective in discouraging doubtful cases and in identifying trends and causes;
- Have clear rules about certification;
- Have clear processes for managers to keep in touch with absent employees.

#### *The Role of Managers*

- Set clear expectations for managers. They need to know what they should do and when they should do it;
- Identify what managers should ask employees and how they should use this information
  - is there a pattern of absence that suggests there may be a problem with attendance in the future?
  - Are there particular work-related factors driving this employee's absence?
  - Should occupational health be involved in this case?
- Set clear “triggers” for management intervention and be clear too about the processes that should be used in handling difficult case of absence. You may find it useful to develop a simple and straightforward guide for line managers so that they are clear about what they must do and when they must do it. This can reinforce any initial training in handling absence. In particular you should give managers clear guidance about when to call upon the assistance of your occupational health provider;
- Assess your managerial skills base to identify gaps and develop an action programme to ensure that managers can deal with their responsibilities. For further information on how this can be done see the diagnostic tool on Management Skills and Training Needs;
- Ensure that managers have clear objectives for the management of and reduction of absence. These should be included in your performance management framework and should be part of regular appraisal discussions between operational managers and those to whom they are accountable.

### **Promoting a healthy environment: tackling the underlying causes of absence**

An effective information system will allow you to identify patterns of absence, not just for individuals but also for the organisation as a whole. Sometimes these problems may be an expression of employee dissatisfaction with the behaviour of individual managers, but persistently high absence rates suggest that there is something wrong with the organisation.

Staff need to be persuaded that you are not just interested in managing absence when it happens, but in promoting the well-being of staff.

More specifically you will need to determine:

- How you will assess whether you have a systemic problem – diagnosis;
- What further action you can take to promote health in the workplace – prescription.

### *Diagnosis*

- Are you measuring the kinds of illness that seem to be causing you a problem? What specific management action can you take to reduce the incidence of such illnesses?
- Are you taking advice from occupational health specialists about action to reduce health risks?
- Is this integrated into your normal processes for health and safety risk management? Can you be confident that the health of the workforce and the organisation is fully integrated into strategic management thinking?

### *Health promotion*

Employers have a duty of care to employees to minimise risks to health in the workplace. Some organisations have adopted this principle by making a deliberate effort to promote workplace health. These initiatives have often focused on changing employee behaviour to reduce the incidence of:

- Smoking;
- Obesity;
- Unhealthy eating;
- Alcohol consumption;
- Stress;
- Back injury;
- Work related upper limb disorders (RSI and similar conditions);
- Sedentary lifestyle.

More specifically, employers have often considered the following in trying to reduce absence:

- Assessments of workplace comfort and the appropriateness of workstations;
- Action to make reasonable adjustments to comply with the Disability Discrimination Act (DDA);
- Action to improve the mental health of the workforce;
- Programmes to encourage health check ups and guidance on healthy lifestyles – “well man” and “well woman” clinics for example;
- Specific programmes to offer or arrange access to inoculations – flu jobs in the winter, for example.
- Action to make managers more aware of the factors that drive absence and the steps that can be taken to manage this effectively – especially in times of rapid change.

Further information on compliance with the DDA can be found at:

**[www.drc-gb.org/documents/employment\\_occupation.pdf](http://www.drc-gb.org/documents/employment_occupation.pdf)**

**[www.drc-gb.org/documents/psd\\_summary.doc](http://www.drc-gb.org/documents/psd_summary.doc)**

More general information about equality for disabled people can be found on the Disability Rights Commission website – **[www.drc-gb.org](http://www.drc-gb.org)**.

## Promoting a Culture that Encourages Attendance

It will be clear that, more than anything else, low levels of sickness absence depend on good management. Nothing that has been said so far is “rocket science” but organisations have often treated absence as a specific problem that can be effectively reduced through better information gathering, processes and procedures. Obviously putting attendance at the top of the management agenda is itself likely to generate some improvement, but process improvements are not solutions in themselves.

Factors that can drive high levels of absence include:

- Employment insecurity;
- Monotonous and repetitive work;
- Autonomy and job control;
- Imbalances between effort and reward – this is not just about money, but embraces the idea that workers will be healthier and happier if they are praised for good performance and treated with respect by the employer;
- Procedural justice in the workplace – are employees confident that they will be treated fairly by the employer?

Addressing all these issues successfully raises some profound questions about the nature of the employment relationships in your organisation, the way in which change is managed and the ability of managers to create an open and inclusive culture.

For further details about how you can develop an action plan to tackle the causes of sickness absence see the diagnostic tool *Addressing the Underlying Causes of Absence: Work Organisation and Job Design*.

In practice, getting at the root causes will require you to:

- Ensure that workers have a voice in difficult processes of change;
- Give employees more varied work, potentially extend their responsibilities to make work more interesting, improve productivity and potentially increase pay;
- Give employees more control over the pace of their work and the opportunity to influence decisions that affect them directly;
- Ensure that your employees get regular feedback from managers, are praised for good performance and are supported if they need to improve their performance.

It is important to understand all aspects of management style can affect absence levels. Set out below are some specific areas where you may wish to focus your attention, which could potentially generate much lower levels of absence:

### *Working patterns*

Working patterns that affect absence include excessive working time and insufficient access to flexible working so that people can balance work and their domestic responsibilities. Those working very long hours are far more likely to be absent by reason of sickness. Parents may take a day's sick leave to care for their child if there is no opportunity to access more flexible working arrangements.

### *Time management*

Is the time spent at work seen to matter? If work is badly organised and time use is not well planned then employees may believe that they can take time off sick without any adverse consequences for the organisation – or their own workload

### *Job Quality*

Organisations should make use of all the opportunities available to improve job quality. Making jobs more interesting is critical in reducing sickness absence. Giving employees the opportunity to develop their skills – and offering them an appropriate reward – can improve their commitment to the organisation, help to increase productivity, encourage employees to take pride in their work and therefore improve attendance.

### *Communication*

Change is invariably unsettling for workers. They often feel that they are subject to impersonal forces beyond their control. Political rhetoric and management behaviour often emphasise an unavoidable acceleration in the pace of change. If nothing more is done then employees may feel more stressed, ignored and less committed to the organisation. Communicating effectively with individual employees and their trade unions is a significant factor in driving lower levels of absenteeism – not least because in a high trust environment unions will be concerned about levels of absenteeism too.

### *Performance*

Absence will fall if:

- employees know that they are expected to achieve high standards,
- are praised for doing so; and
- are supported by managers where improvements in performance are needed.

In other words there is a clear correlation between an attendance culture and a performance culture. Linking individual objectives to team objectives and the achievement of organisational mission and purpose can create a sense of shared endeavour that sustains a strong attendance culture.

### *Conduct and behaviour*

Management style is crucial in promoting and sustaining an attendance culture. Rigid hierarchies or command and control are more likely to be associated with higher levels of absenteeism. Giving people a sense that they have control over their working lives and that their contribution is properly valued are essential in a healthy workplace.

For further information see:

**[www.hse.gov.uk/stress/standards/index.htm](http://www.hse.gov.uk/stress/standards/index.htm)** - handling workplace stress

**[www.mentality.org.uk/services/promotion.htm](http://www.mentality.org.uk/services/promotion.htm)** - mental health promotion

**[www.dh.gov.uk](http://www.dh.gov.uk)** and **[www.nice.org.uk](http://www.nice.org.uk)** - general information on health promotion and public health.

## Sustaining your commitment

All of the above will only prove effective if you maintain your focus on managing attendance. It is easy for managers to be distracted by other priorities, many of which will seem more pressing. Nevertheless a low level of absence ensures that resources are being used for their intended purpose – the delivery of high quality public services.

Sustaining your commitment means that you must:

- ensure that managers make effective use of the information system;
- equip managers with the skills they need to identify patterns of absence and deal with the underlying causes;
- ensure that managers understand that good absence management is a powerful indicator of a “well managed organisation”.

To assist you in this process these guidelines are accompanied by a series of diagnostic tools, all of which are designed to help you implement the four elements of an effective sickness absence and healthy attendance strategy.

The toolkit includes:

- A diagnostic tool for the assessment of management skills so that you can identify weaknesses and take remedial action. The diagnostic can help you to deliver the first two elements of the strategy:
  - Monitoring, measuring and understanding absence information; and
  - Managing sickness when it happens.

Furthermore, the diagnostic will also enable you to assess whether managers are able to use the information system to achieve the third objective:

- Promoting a healthy working environment and tackling the underlying causes of absence.
- A diagnostic tool to assess employees’ perceptions of their working environment, thinking particularly about factors that drive high levels of absence (autonomy, job control, insecurity etc) and make it more difficult to achieve a positive culture of attendance. This diagnostic is therefore designed to help you achieve the third and fourth elements of the strategy
  - Promoting a healthy environment: tackling the underlying causes of absence; and
  - Promoting a culture that encourages attendance.
- The final element in the toolkit is addressed to the underpinning principle that you need to engage the workforce and their representatives in any initiative to reduce sickness absence. Specifically, it offers you some guidelines for communicating with employees supplemented by:
  - a method to benchmark your performance on a continuum from “best practice” to poor practice; and
  - a process for identifying those areas where you must take action to improve communication with the workforce and their representatives.

This tool will enable you to deliver the final element in the strategy:

- promoting a culture that encourages attendance

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## **The Well Managed Organisation**

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