

## Summary of conference to launch CIPD Absence Management Survey 10 October 2012

### “Here but not here: Addressing the negative effects of presenteeism”

This event was hosted by Simply Health at the Royal College of Physicians in Regents Park. It was very well attended by a variety of professionals from HR, OH, Legal practice and industry. The report was launched by Dr Jill Miller, Research Adviser CIPD, and she introduced the first session.

Summary findings of report based on replies from 667 organisations across the UK employing 1.7m employees:

- The average level of employee absence has fallen in 2012 compared to 2011 from 7.7 days to 6.8 days
- Public sector absence has fallen to lowest level recorded
- On average public and non-profit employees have approx. 2 days more absence per year than private sector.
- Manual workers have one more days absence on average than non-manual workers.
- Absence increases with organisational size
- 2/3rds of working time lost is short absence of up to 7 days
- Average annual cost of absence has many variables but median level for 2012 £600
- Causes of absence
  - Short term: colds, ‘flu’ stomach upsets, headaches and migraines then MSD, back pain and stress
  - Non genuine absence more common in private service organisations
  - Long term: stress, acute medical conditions eg stroke, heart disease and cancer; mental ill health, MSD and back pain
  - Public sector rates mental ill health and MSD’s amongst top recorded reasons for absence.
  - Stress is now the biggest cause of absence with workload cited as top reason.
- Most surveyed organisations have a written policy on attendance management
- Is the reduction due to more management intervention or fear of losing job in current economic climate.

Report available through [www.cipd.co.uk](http://www.cipd.co.uk) or e-mail [cipd@cipd.co.uk](mailto:cipd@cipd.co.uk)

Presentation from Cary L. Cooper Distinguished Professor of Organizational Psychology and Health Lancaster University.

He argued that looking purely at sickness absence figures was not necessarily an accurate way to judge an organisation’s health due to the employee’s presenteeism. Stress management is now being called ‘wellbeing’ and is being promoted in job titles and workplace programmes. He recommended referring to NICE Guidance PH22 Promoting mental wellbeing at work (<http://publications.nice.org.uk/promoting-mental-wellbeing-at-work-ph22>) and his book - Well-being: Productivity and Happiness at Work

Also available is a test for organisational resilience at [www.robertsoncooper.com](http://www.robertsoncooper.com)

Presentation from Stephen Levinson, RadcliffesLeBrasseur, one of the UK's leading employment lawyers. He discussed the range of cases on dismissal and how absence can be used in this and in redundancy

Case Study 1: Presented by Hilary Bright. Norfolk Education implemented a wellbeing programme after assessing their absence across the County using the Bradford factors (The Bradford Factor is a systems used to calculate a score for each employee's absence is a year. The higher the score, the more disruption the employees absence can cause in a company.) They introduced a wellbeing programme and benefits package which had a dramatic effect on their absence levels and productivity

Case Study 2: presented by Antrim Council. Due to a sudden reduction in council finance, they had to implement a new process for managing costs and based this on a dramatic reappraisal of people management to save costs. Centring their focus on their staff they introduced a wellbeing programme that took into account – work life policy, employee services (OH, on call advice, health screening), individual action plans, coaching, attendance at work, rehab. They demonstrated a reduction in absence, an increase in productivity and better customer service.

Simply Health website:

<https://www.simplyhealth.co.uk/sh/pages/homepage.jsp?source=ppc&cid=9703>

Thanks

Susanna Everton