

Progetto Governance delle Risorse Umane-Modelli Innovativi

Attività dirette al rafforzamento degli Uffici addetti alle politiche e alla gestione del personale delle Amministrazioni degli Enti Locali delle Regioni Obiettivo 1, dell'Abruzzo e del Molise attraverso l'assistenza organizzativa

FORUM EUROPEO DELLE DIREZIONI DEL PERSONALE

**Modelli di direzione e politiche di gestione delle risorse umane
nella Pubblica Amministrazione europea**

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**Analisi comparata dei principali processi di HRM nel Regno Unito,
Francia, Italia**

Sviluppo Carriere

Good Practice Case Study: *The Whittington Hospital NHS Trust*

Beverley Bustin

North Central London Strategic Health Authority

Good Practice Case Study

Trust Name: *The Whittington Hospital NHS Trust*

Region: *North Thames*

SHA: *North Central London*

Type of Trust: *Acute*

Executive Summary: This case study sets out the actions and results achieved by the Whittington Hospital to reduce sickness absence rates.

Background:

The Whittington Hospital is a teaching hospital of the University College London and Middlesex University. The hospital has traditionally served the population of North Islington and West Haringey, which gives a combined total population of approximately 300,000, comprising diverse ethnicity and affluence. The Trust employs over 2,000 staff.

In June 2005 the Board decided to establish a specific project to reduce sickness absence rates, as sickness levels were 6% during the preceding fifteen months, and as such were the highest sickness rates within the north central sector of London. The aim of the project was to address the detrimental consequences of employee absence in the organisation, in terms of quality of patient care, staff morale and the significant cost implications.

Solutions:

- Chief Executive and directors' sponsorship and commitment
- Designated HR Project Manager to act as expert and champion
- Agreed project plan with targets:
 - *Demonstrably reduce sickness absence within the Trust, by a minimum of 1% reduction over a six-month period and in stages working initially to the local target of 4% and thereafter to the target of 2.7%.*
 - *Ensure that managers fully understand and undertake their managerial responsibilities to effectively manage and reduce sickness absence.*
 - *Enhance links between Occupational Health, Human Resources, Staff Side, Health and Safety and IM&T, working in partnership with managers to reduce sickness absence.*
 - *Revise current Human Resources policies to contribute to the effective management of sickness absence.*
 - *To contribute towards making the hospital a healthier workplace for staff by continuing with the Improving Working Lives philosophy and building upon the hospital's success in IWL Practice Plus validation.*

Key features of the project

The project looked at identifying the Trust's 'top 50' absences, which consisted of 15 long-term sickness absence cases.¹ The other absences were made up of 35 individual's with the highest Bradford scores in the Trust.² The Bradford Score system was introduced to the Trust in the summer of 2004 following initial piloting of the tool.

Individual plans were developed jointly between managers and HR Project Manager to reduce the top 50 highest absentees and estimated savings tracked. These savings were calculated based on the reduced reliance on temporary additional staffing, and percentage of sickness absence.

Key activities

- streamlining our IT systems, which capture sickness absence data, particularly concentrating on the Bradford score system
- identifying training needs and delivering training across the Trust to enhance manager's skills to effectively manage sickness absence
- communicating the project widely for example through hospital wide staff briefings by the Chief Executive and director of HR and the staff magazine
- revising and implementing changes in policy and procedures e.g. updating the sickness absence guidelines, introducing a capability policy and procedure
- Working in partnership with staff side colleagues has been a crucial part of this project. A partnership steering group was set up to not only identify and agree policy changes but also to actively review the progress of the project

Outcome

Since the project was launched in June 2005 there have been a considerable number of positive outcomes, which have included:

- ✓ A decrease in the overall Trust sickness rate as compared to previous year's figures – from 6% down to 5%.
- ✓ Increased management buy-in to address sickness absence and better monitoring and action.
- ✓ Enhanced partnership working with staff side colleagues to work together to reduce sickness absence
- ✓ Improved sickness data and usage of the Bradford Score system.
- ✓ Managers skills enhanced through additional training
- ✓ Approximately 700 working days saved from the 35 High Bradford scorers in the review with considerable cost savings
- ✓ Enhanced links between HR, Occupational Health, Health & Safety and staff-side in working together to reduce sickness absence across the Trust.
- ✓ Better policy framework in place to support managers

¹ Definition of long-term sickness described as a period of 4 or more weeks of continuous absence

² The Bradford Score System is a method of recording and setting a trigger point for action. An individual Bradford score – which measures irregularity of attendance is calculated as:

$S \times S \times D = \text{Bradford points score}$

S= Spells of absence D= days absent over last 365 days

We believe that a cultural shift has been achieved within the Whittington Hospital, embedding the principles of good sickness absence management so much so that the Trust has agreed to extend the project for a further six months to ensure the benefits are sustained.