

# Improving Sickness Management

## **‘A View from the Middle’**

How a ‘typical’ Fire & Rescue Service manages the issues

# Improving Sickness Management

It's not about sickness - it's about people

It's how people respond to management

It's about style

It's about culture – norms, values and the working environment – who sets the tone?

# Improving Sickness Management

It's about patience, consistency and investment

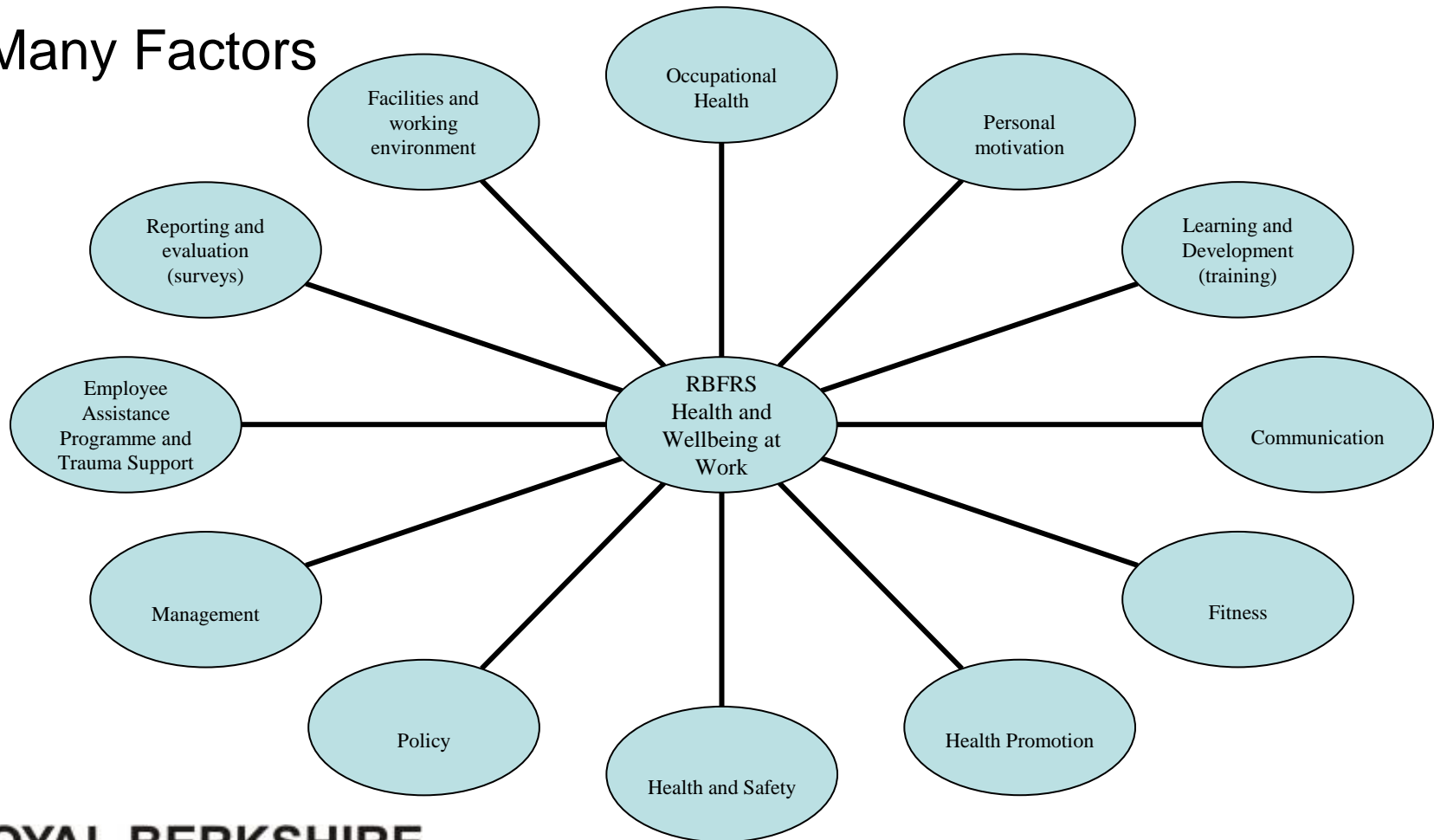
It's about trainers - both the shoes and the people

It's about measuring the right things

It's about co-ordinating many things

# Improving Sickness Management

## Many Factors



# Improving Sickness Management

## National Framework & Support:

CFOA Occupational Health Group

Sharing best practice – Having an effect in:

- Prevention
- Protection
- Response

Other Partners

ALAMA

Fire Fighters Charity

National Disabled Fire Association

FireFit

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## **Sickness Levels:**

Cannot be zero

Current Sickness Level = 7 days/employee/year  
(Rolling Average 7.9)

CIPD (2009) Figures:

Average for all sectors = 7.4\*

Average for Public Sector = 9.7

(\* Lowest for 10 years)

# Improving Sickness Management

Know Thy Enemy

Musculo-Skeletal

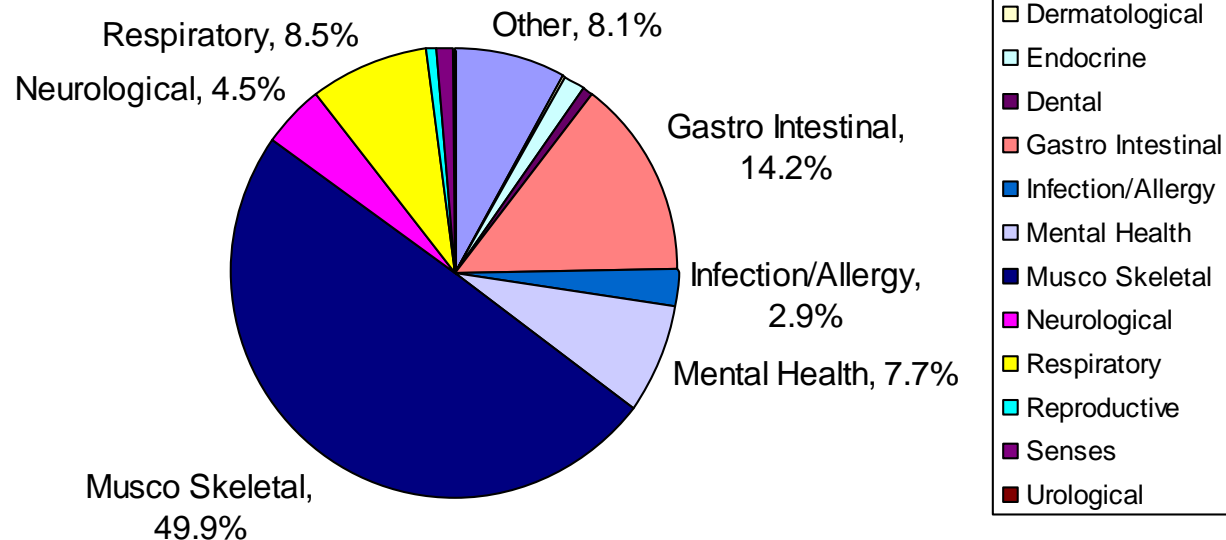
Mental Health

The two are often linked and there are strong links to the working environment

# Improving Sickness Management

## Percentage of Duty Days Lost by Absence Reason

April 2010 to September 2010





# Improving Sickness Management

- **Joined up Health Management**

- Occupational Health and Employee Assistance Programmes
- Annual Health Promotion Plan
- Manual Handling Techniques
- Physical Education Supervisors, trained & ARA
- Health and Welfare Committee with widespread representation
- Case Management - focus on individual.

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## Occupational Health:

This is cited as the most effective method for managing long-term absence and in the top five most effective methods for managing short term absence (CIPD Managing Absence Survey 2009).

107 management referrals to Occupational Health took place from April to September 2010. There were also 87 face-to-face reviews (for existing cases) and 26 hearing tests/reviews.

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## Training:

- Stress awareness for managers
- Staff stress awareness by E-Learning.
- Absence management workshops for Crew and Watch Managers
- BTEC Management Training

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## **Employee Responsibility:**

- Continual Professional Development payments
- Linked to Performance Development Interviews

## **Communication:**

- via newsletters, via routine orders, email, posters, leaflets, policy, intranet, word of mouth.

## **Leadership:**

- Lead by Example
- All Officers Fitness Tested.

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## **Education:**

**Wellbeing Guide** signs and symptoms of stress, nutrition, sleep and advice on work life balance leaflets on drugs, alcohol, bereavement, cancer etc.

**Wellbeing Days** cholesterol and blood pressure checks, advice on smoking cessation, healthy lifestyle advice and chair massage, mole checks, etc.

**Health promotion events** e.g. National Bike Week, National Men's Health Week and Blood Pressure Association 'Know Your Numbers', etc.

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## **Example: Communication**

As a substitute for a promotional campaign Occupational Health ran drop in sessions to check blood pressure, cholesterol etc four key Stations and the training centre during April.

This was in response to feedback that events were too focused on HQ.

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## **Example: Incentivisation**

Cycle to Work Scheme:

2 'Windows' for applicants

A total of 93 people are currently on the scheme..

13% of the total organisation

*Some had bikes already!*

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## **Example: Leadership**

Report to Members in every 6 months

Comparative data examined

Gave total reduction in the 'operational waistline'

*Equivalent to Millenium Wheel!*



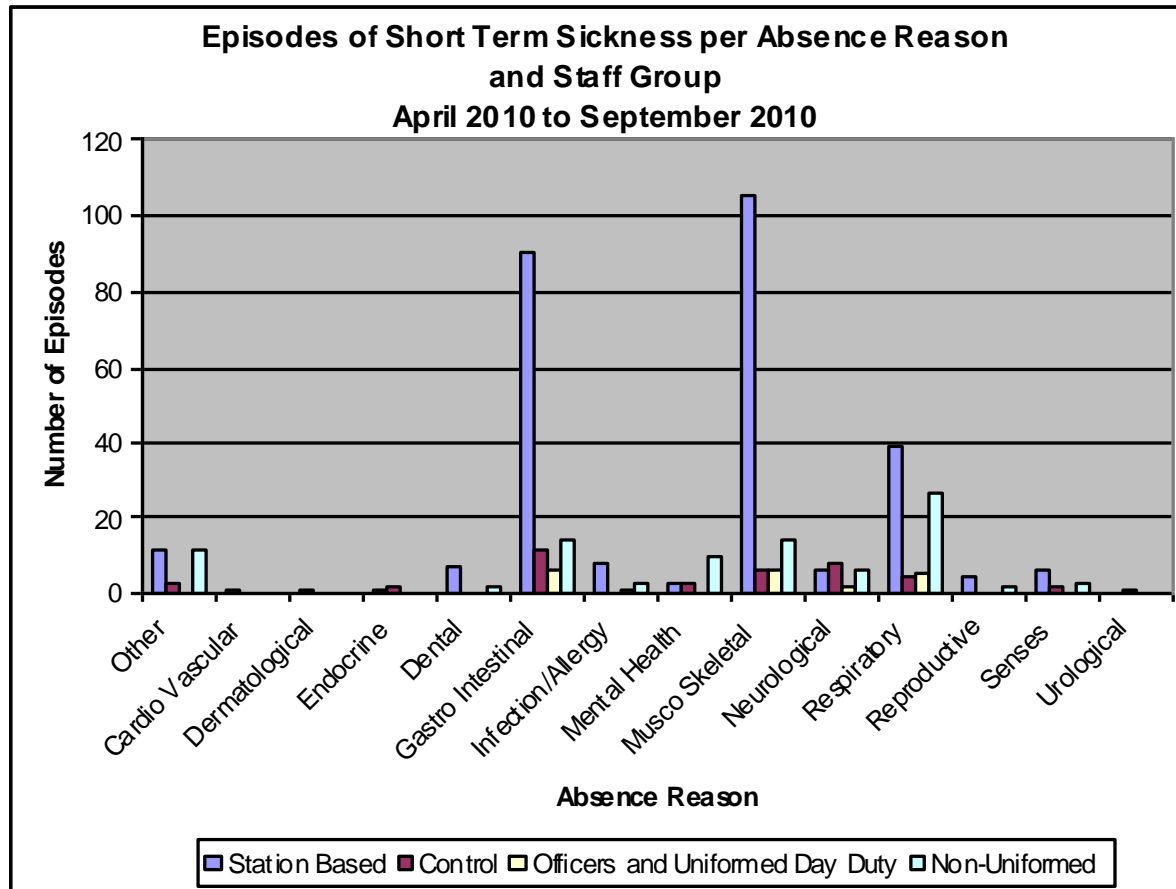
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## Measurement

Still difficulties in comparative measurements -

e.g. 'shifts' lost .v. 'days' lost  
definition of 'long term'

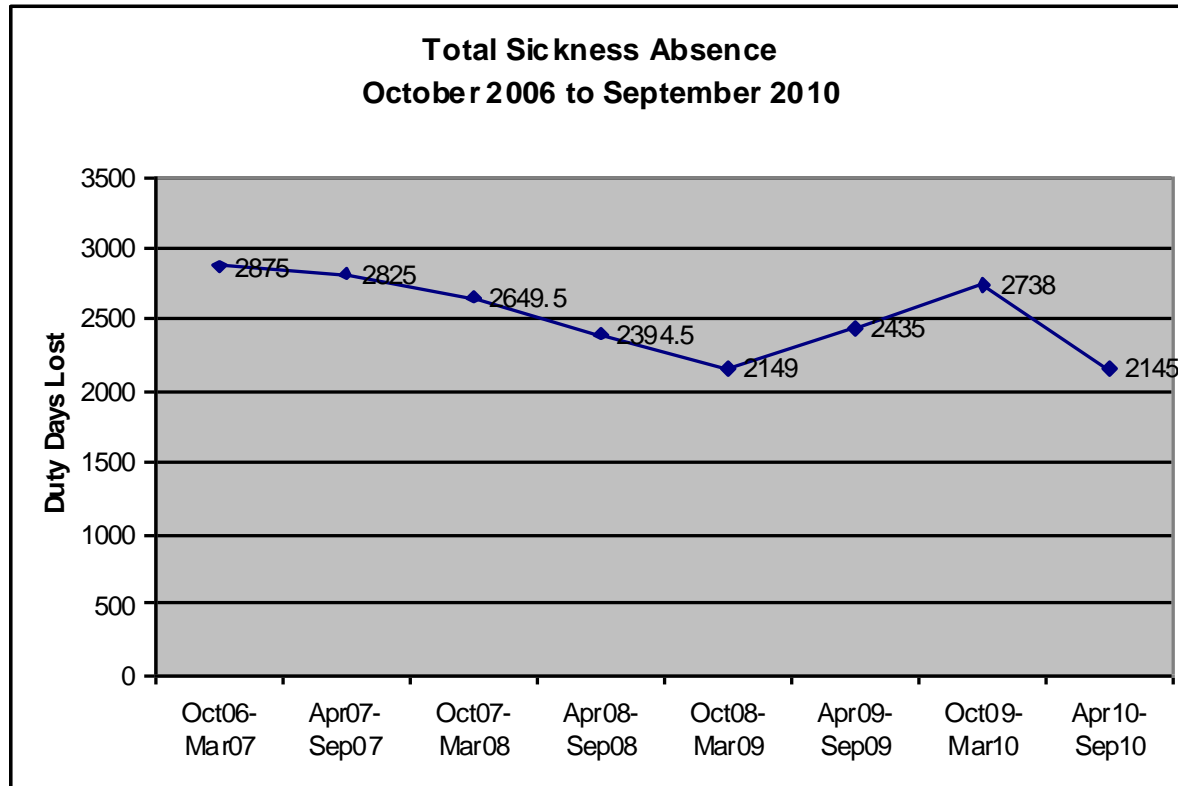
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It's a long term issue

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## “Fitness Rules”

	Total Personnel	No. Tested	Pass	Develop. Range	Below 34 VO2 max	Not Tested After Wash Up	Pass Rate	Fail Rate
Wholetime	366	349	345	4	0	17	98.9%	1.1%
RDS	82	76	63	13	0	6	82.9%	17.1%
Officers	64	51	46	5	0	13	90.2%	9.8%
Trainees	6	6	6	0	0	0	100.0%	0.0%
<i>Total</i>	<i>518</i>	<i>482</i>	<i>460</i>	<i>22</i>	<i>0</i>	<i>36</i>	<i>95.4%</i>	<i>4.6%</i>
				100%	0%	7.5%		

Fitness Advisor  
PTI's  
Training Facilities  
Training Shoes

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## **Top Down:**

Member Support - Investment

Member Scrutiny - Regular Reports

Senior Champions - setting the tone

## **Bottom Up:**

It's individual

Attitude (Mind over Matter)

Accountability

Challenge

# Improving Sickness Management

## Reality Check:

- People will be sick Probability is not Predictability
- It can be managed - it can't be eradicated
- Inverse Relationship between Ill-Health Retirements
- and Long Term Sickness

(1 W/T medical retirement since April 2007)

*You can only save if you have room to improve*

# Improving Sickness Management

Thank You – I have told you the issues we face and what we do about them – but there is no single ‘right answer’

The aim of this workshop is to engender debate.

Over to you!