

Framework agreement on the reform of Agenda for Change – Joint agreement to a variation of Annex C, Management of attendance in Wales

Reduction in levels of sickness absence

Paragraph 5 of Annex C, set out the Welsh Partnership Forum’s “joint commitment to delivering effective policies and making a practical change for staff through this work by setting a series of targets and progress check points for the reduction of sickness absence levels”. The paragraph stated that the “key objective is to deliver the equivalent of a 1% reduction in the rolling national average sickness rate by April 2019. The baseline level against which improvements will be measured was the December 2017 rolling average which was 5.1%”.

Following discussion, the WPF partners have agreed to move the required reduction on by six months from a delivery date of March 2019 to September 2019, retaining the expected improvement trajectory so that sickness levels are reduced to a 4.75% rolling average (4.21% in month) figure by the end of September 2019 as set out in the left-hand table (below). Monitoring will continue to be assessed against the 12 month rolling average sickness absence figure and “in month” position to ensure a consistent and sustained pattern of improvement.

Paragraph 5 also set out the commitment to deliver a further 0.25% sickness absence rate reduction each year until the rates in Wales at least equal the sickness absence rates of comparable staff groups in England. This commitment has now been re-set from October 2019 and is reflected in the right-hand table.

	12 month Rolling	Monthly
Jan-19	5.29%	5.45%
Feb-19	5.30%	5.24%
Mar-19	5.30%	5.03%
Apr-19	5.26%	4.82%
May-19	5.19%	4.61%
Jun-19	5.09%	4.51%
Jul-19	4.93%	4.41%
Aug-19	4.83%	4.31%
Sept-19	4.75%	4.21%

	12 month Rolling	Monthly
Oct-19	4.70%	4.19%
Nov-19	4.65%	4.17%
Dec-19	4.59%	4.15%
Jan-20	4.48%	4.13%
Feb-20	4.39%	4.11%
Mar-20	4.31%	4.09%
Apr-20	4.24%	4.06%
May-20	4.20%	4.04%
Jun-20	4.16%	4.02%
Jul-20	4.12%	4.00%
Aug-20	4.10%	3.98%
Sept-20	4.07%	3.96%

Assessment

The assessment of the delivery of the required reduction in sickness absence rates will be undertaken in late November/early December 2019, when the data outlining the level of sickness absence across NHS Wales, as at the end of September 2019, will be known. From 1st October 2019, the WPF partners have agreed that the payments during

occupational sick leave of “regularly paid supplements” as defined in section 14.4¹ of the NHS Terms and Conditions of Service Handbook will be “held” pending the assessment as to whether the delivery of the required reduction in sickness absence rates has been met. During the period from 1st October 2019, until November/early December, the “regularly paid supplements”, as noted above, will continue to be made to those staff earning a cash value (basic salary) of £18,160 or lower and where staff have been continuously absent for a period of sickness absence exceeding three months. In addition we will ensure that if an individual receives a diagnosis that they have a time specified terminal illness during this period, any allowances or payments linked to working patterns or additional work commitments will continue to be paid or backdated to the first day of sickness absence

Once the outcome and assessment of the September 2019 position is known then, if the required level of reduction i.e. the rolling sickness absence figure has been achieved, all “held” payments will be made at the earliest opportunity. Should the required reduction not be achieved then the variation to section 14 as set out in Annex C paragraph 6 of the Framework Agreement will automatically apply with effect from 1st October 2019.

Ongoing delivery

There is significant partnership work underway to support the managing of attendance at work. The WPF are working in partnership on a range of measures and initiatives to meet the required trajectory for the reduction in sickness absence as noted in the table above, i.e. to achieve a 12-month rolling average of 4.07% (monthly sickness absence rate of 3.96%) by September 2020.

The Framework Agreement outlined the commitment of all parties to support the delivery of a sustained improvement in attendance on an ongoing basis. Should the required level of improvement not be achieved in September 2019, but the continued sustained reduction (as set out in the table above) be subsequently achieved over a sustained 3 month period, then the WPF Business Committee will re-visit the variation to section 14 to enable the reintroduction of “regularly paid supplements” during all or part of the first three months of sickness absence. Similarly, should the required level of improvement be achieved in September 2019, but subsequently the continued sustained reduction is not delivered over a 3-month period then the WPF Business Committee will re-visit the variation to section 14 to enable the cessation of “regularly paid supplements” during all or part of the first three months of sickness absence.

Monitoring

The WPF Business Committee have established by a Data Monitoring sub group to oversee the delivery of this revised agreement and this group will be supported by a jointly agreed monthly monitoring framework which will additionally include fields demonstrating progress with Rapid Access for staff and the Dying to Work campaign.

9th April 2019

¹ 14.4 The definition of full pay will include regularly paid supplements, including any recruitment and retention premia, payments for work outside normal hours and high cost area supplements. Sick pay is calculated on the basis of what the individual would have received had he/she been at work. This would be based on the previous three months at work or any other reference period that may be locally agreed.² Local partnerships can use virtual rotas showing what hours the employee would have worked in a reference period had he or she been at work.