

Centre for Mental Health

Realising a better future

# Managing presenteeism: a discussion paper

## What is presenteeism?

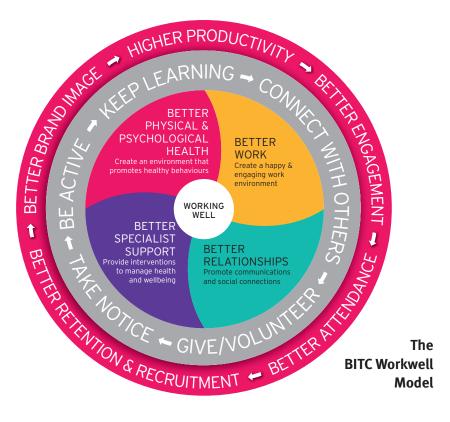
Presenteeism means reduced productivity when employees come to work and are not fully engaged or perform at lower levels as a result of ill health.

## Why manage it?

Centre for Mental Health calculated that presenteeism from mental ill health alone costs the UK economy £15.1 billion per annum, while absenteeism costs £8.4 billion.

Research shows that presenteeism is hugely costly to employers, but all too often ignored. Managing it well not only saves money in both the short and longer term, but also contributes to the development of an engaged and productive workforce. This paper discusses ways in which employers might be able to respond to presenteeism based on research and experience, as exemplified in the BITC Workwell Model (see right) for creating the conditions in which people can flourish.

We hope it will stimulate further debate and more evidence of how to manage presenteeism in practice.



## **Better Work**

### Build a resilient organisation

Culture has a strong influence on health and wellbeing. These include job control and design, a feeling of being treated fairly and job security. Some organisations develop cultures of absenteeism or presenteeism which have a detrimental effect on productivity.

In the present economic climate, it is unlikely that many organisations can provide guarantees on job security, but there are actions they can take to minimise any threat to the health and wellbeing of employees. **ACTION**: Organisations should ensure that all their employees are treated fairly and that managers understand how to administer corporate policies in an equitable manner.

Organisations need to be aware of any cultural trends towards absenteeism or presenteeism and be prepared to address them.

Organisations can minimise the potential damage of job loss to employees by being open and honest about their own financial position and by providing employees with transferable skills to improve their prospects in the job market. In addition, when redundancies have to take place, organisations can provide outplacement support to assist employees in finding alternative employment. Putting these in place will not only minimise the risks of ill health but will also help boost employee engagement.

#### Be aware of presenteeism

Recognise that presenteeism will be a problem in any business and move focus away from purely absenteeism and accident rates. While sickness absence is visible and easily measured, presenteeism is not. Managers need to be aware of the growing evidence that presenteeism is the more significant cause of lost output. Focusing only on sickness absence gives a misleading picture and also means that the business case for workplace health interventions will be systematically understated.

**ACTION**: Employers should ensure that managers and employees understand the relationship between absenteeism and presenteeism. Managers should be encouraged to adopt a more flexible approach to sickness absence in order to avoid causing further presenteeism.

#### **Measure rates of presenteeism**

Organisations rarely measure presenteeism. This may be for a number of reasons. For example, they may not realise how important it is or they may not know how to measure it.

**ACTION**: Measuring presenteeism is not easy, particularly on a routine basis. One possibility is to add some questions on health and attendance at work to existing staff surveys. This might be

supplemented by more detailed and focused surveys undertaken on an occasional basis, using specially designed instruments for measuring presenteeism, such as the WHO Health and Work Performance Questionnaire (see resources). Organisations should also ensure that they have systems to collect both sickness absence data and information about the prevalence and impact of chronic illness.

Performance measures should be in place which are sophisticated enough to pick up any significant change in individual performance and these measures should be monitored alongside sickness absence.

## **Better Relationships**

## Make it possible to talk about health in the workplace

Employees with health problems often do not receive support in the workplace as they feel unable to disclose these problems to their manager, nor are managers trained how to respond if they do. In addition, employees may not know how to manage their health conditions or how to support colleagues with health problems.

Many of life's challenges – family issues, financial difficulties, job insecurity – can contribute to presenteeism. Organisational stressors can be minimised through good work design and good management, but work pressure cannot and should not be totally eliminated.

**ACTION**: Training and awareness raising should be provided for both managers and employees so that they can have a better understanding of health in the workplace, including actions they can take themselves. This will also help to reduce the stigmatising of health conditions like depression, and will facilitate a more open approach to disclosing health conditions.

In financially challenging times, training employees to manage their personal finances can be beneficial and staff could also be offered resilience training to help build their personal resources.

## Identify emerging mental health problems early on

Depression and anxiety are more likely to lead to presenteeism than absenteeism.

Line managers and supervisors need to be able to recognise and understand the signs of distress, recognise that performance issues may be health-related and be confident enough to have a supportive conversation with an employee.

**ACTION**: Managers should be trained to identify the early warning signs of common mental health problems in the workplace to help them to intervene as early as possible and to speak supportively with employees who are experiencing difficulties. Impact on Depression, training offered by Centre for Mental Health, has been shown to increase managers' willingness and confidence to support employees with common mental health conditions.

Managers' competences should also include understanding the role that work and organisational factors can play in enhancing or damaging mental health and the people skills to promote positive engagement and wellbeing.

## **Better Specialist Support**

## Promote the flexible management of sickness absence

Sickness absence and presenteeism are to some degree substitutes for each other and the main consequence of bearing down on the former is likely to be an increase in the latter. A low level of absence is not necessarily a sign of good management.

Aggressive absence policies can do more harm than good, particularly those with fixed trigger points for a certain number of absence episodes that lead to disciplinary action. They can lead to presenteeism which may subsequently result in higher levels of sickness absence in the longer term and reduced productivity.

**ACTION**: Ensure that absence management policies are flexible and that managers are trained and supported in implementing them. Managers should be clear about any flexibilities or areas of managerial discretion that they can utilise to manage an employee with a health problem. Where there is a longer period of absence, make sure that the return to work is planned with all relevant parties. Be extra vigilant about employee wellbeing during periods of downsizing and restructuring.

#### Provide specialist support

There is increasing evidence that investment in specialist support such as employee health screening and counselling pays dividends in terms of increased productivity and employee engagement. Failure to recognise that these interventions may have a substantial impact on presenteeism as well as sickness absence may lead organisations to underestimate the return on such investment.

**ACTION**: Provide evidence-based interventions to manage health and wellbeing including specialist services such as occupational health, EAPs and counselling, and ensure that in assessing the business case for these measures full account is taken of the impact on presenteeism.

### Better Physical & Psychological Health

#### Promote health and wellbeing

There is a good business case for implementing simple wellbeing programmes in the workplace that address both physical and mental health. Emerging research demonstrates that such schemes have a positive impact on wellbeing, engagement and productivity.

**ACTION**: Review your current wellbeing strategy and consider what additional mechanisms can be put in place to further promote health and wellbeing at work. The BITC Workwell Model (see resources) is a useful aid for employers who are trying to improve their overall approach to wellbeing.

#### Limit job stress

While only a small proportion of mental ill health in the workforce is directly caused by work, employers still have important responsibilities. Work related risks to physical health are generally well understood; those affecting mental health are not. **ACTION**: Employers can take a number of steps to reduce risks to health and wellbeing at work. These include using the Health and Safety Executive (HSE) Management Standards for work related stress. Other tools are also available to help employers manage mental health issues in the workplace more effectively (see below).

#### Manage the problem, not the symptoms

Both sickness absence and presenteeism are symptoms of an underlying health problem. Good management of ill health in the workplace consists of minimising the risks and the adverse consequences of poor health, both for the individual and for the organisation.

**ACTION:** Develop a health and wellbeing strategy that deals with all aspects of employee wellbeing and tackles both presenteeism and absenteeism, not just the symptoms of when things go wrong.

### Useful practical resources

- BITC Workwell Model and the Managing Emotional Wellbeing tool - <u>www.bitc.org.uk</u>
- Health, Work and Wellbeing's Workplace Wellbeing Tool - <u>www.dwp.gov.uk/</u> <u>health-work-and-well-being</u>
- HSE website and government occupational health advice line <u>www.hse.gov.uk</u>
- WHO Health and Work Performance Questionnaire <u>www.hcp.med.harvard.edu/hpq/</u>
- HSE Management Standards for work related stress <u>www.hse.gov.uk/stress/standards/</u>
- DWP Fit Note Guidance <u>www.dwp.gov.uk/fitnote</u>

Further evidence and resources are available at www.centreformentalhealth.org.uk/presenteeism

## Evidence

While more evidence is needed about this crucial topic, published research highlights good reasons to take presenteeism seriously:

- The costs to business caused by health-related presenteeism appear to be are larger, perhaps significantly so, than the costs of sickness absence.
- Health problems in their early stages often manifest themselves mainly in the form of increased presenteeism, which then acts as a strong predictor of future sickness absence. More presenteeism today means more absenteeism tomorrow.
- Productivity losses caused by health problems are more likely to take the form of presenteeism rather than absenteeism among white-collar workers, particularly professional and executive staff, than they are among blue-collar workers. This is pushing up the costs of presenteeism, as the balance of employment shifts away from manual to non-manual jobs.
- Presenteeism tends to go up and absenteeism down when jobs are at risk, as employees seek to reduce their chances of being made redundant by maintaining a good attendance record even when unwell. The current weak state of the labour market is therefore increasing presenteeism and its associated costs.
- Mental health problems such as depression are particularly likely to take the less visible form of presenteeism, perhaps because employees wish to avoid being labelled mentally ill.
- Finally, all employers should be aware that only a small part of ill health in the workforce is actually caused by work, which on the whole is good for health.

#### **Business in the Community**

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