## Visit to Cheshire Constabulary's Occupational Health Unit (OHU) 25<sup>th</sup> October 2018

The level of sickness in the Constabulary for both Police Officers and Staff has been raised as a matter of concern by the Police and Crime Panel for a number of years. This is particularly relevant with regards to the level of medium and long term sickness where at one time the numbers of hours/days lost equated to at least 11 Police Officers being absent from duty for a whole year. In spite of continuous monitoring by the PCC at his quarterly Scrutiny Meetings and further challenges from members of the Panel, no significant changes in the sickness figures appear to have taken place and the levels are still worryingly high.

At the invitation of the Constabulary the Panel Chairman and Mrs Sally Hardwick visited the OHU in order to seek a better understanding of the issues relating to sickness and well-being and how they are being dealt with.

In modern and bright facilities, with a staff of three Occupational Health Physicians, Occupational Health Nurse, Counsellor and an in house Physiotherapist, the OHU provides a 'doctor led' service coupled to a 'triage' facility by which the Constabulary aims to provide employees with an appropriate and (equally important), timely response to their sickness and well-being needs.

The statistics show that most mid to long term reasons for officers and staff being off work are related to skeletal/muscular injuries or psychological problems, whether work related or by causes outside of the work place. Whilst the OHU may not be the panacea for all ills, it can and does offer advice and guidance aimed at facilitating a quick recovery and return to work.

In addition, a regime of training in 'Managing Attendance' has been rolled out across the Constabulary to ensure that line managers are aware of their responsibilities and HR's responsibilities in dealing with sickness management in an efficient and timely manner. This also includes the management and support of personnel returning to work, particularly after a long absence.

It is very clear from the visit to the OHU and the amount of information that is provided to the officers and staff on a plethora of sickness and well-being issues, that the Constabulary is very much focused on the health of its workforce and very proactive in its aim to reduce the level of sickness.

However, the visit also raised a number of issues that may present challenges to the Constabulary:

• The impression is that the OHU is becoming a victim of its own success in that there is a belief that one or two personnel are seeing the Unit as an alternative to having sickness dealt with by their own doctors and trying to use the facility in order to circumnavigate long waiting lists. In fact, it was suggested that as employees, some saw it as a right.

- Social and economic pressures from outside of the workplace appear to represent a growing mental health, sickness problem. This raises the question "How much responsibility for dealing with this problem should the Constabulary bear?
- Whilst ideal for Headquarters staff, there was no clear indication as to how readily accessible the OHU is to the rest of the Constabulary, particularly to personnel in outlying stations, where problems of transport and time away can become barriers to accessing the service.
- It was felt that the culture of the Constabulary was possibly moving too much towards the use of a 'carrot' rather than the 'stick' in its dealings with sickness and that a more hard-line approach may achieve what it has been unable to, to date (this latter point may be more a reflection of the age of the visitors and a generational hang up from times of real austerity!)

It was clear from the visit, talking to staff, the Head of HR and the Acting Chief Constable that reducing the level of sickness in the Constabulary represent an insurmountable challenge as the reasons for absence are many and varied. But it is also clear that the challenge is certainly not being ignored.

Bob Fousert Sally Hardwick

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