

Analysis of sickness and attrition data

Standard operating procedure (SOP) | WRK-SOP-008

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Replaces	None (new document)
Standards and criteria supported	Standard 2E, criterion 2E.7
Evidence basis	E-006, E-009
Status of this document	Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria.

At a glance: what to do

1. Analyse sickness and leaving data every quarter, by team and by reason.
2. Look for patterns, not single cases.
3. Agree at least one action for any pattern found.
4. Report the analysis and actions to the governance meeting twice a year.

Stop and get help straight away if: sickness and leaving data is not analysed for 6 months or more.

1. Purpose

To turn absence and turnover data into organisational learning, so that patterns causing harm to staff are found and changed [EC].

2. Scope

Applies to	All workforce data held by the organisation
Locations	All services
When	Quarterly analysis; twice-yearly report to governance
Does not apply to	Individual medical information, which stays confidential with occupational health

3. Definitions and abbreviations

Term	Meaning in this SOP
Sickness absence rate	Days lost to sickness as a share of days worked, for a period
Attrition	Leavers as a share of the workforce in a period

4. Background and rationale

High sickness or turnover is often a warning about safety, workload or management. Without analysis, the warning is missed.

5. Responsibilities

Role	Duties in this SOP	Competence needed
Human resources lead	Runs the analysis and writes the report	HR analysis
Occupational health lead	Advises on patterns linked to health and safety	Occupational health
Governance committee	Reviews the report and agrees actions	Governance

6. Equipment, materials and resources

Item	Specification or standard	Check before use
Sickness absence and turnover register (WRK-REG-002)	Current	Updated monthly

7. Safety and infection prevention

- Individual medical details are never shared in the analysis. Only team and category data is used.

8. Before you start

- Confirm the reason categories are agreed and used consistently.

9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

Step	Action	How to do it	Key point
1	Extract the data.	- Take the quarter's entries from WRK-REG-002. - Check each entry has a team and a category.	Missing categories make the analysis useless.
2	Calculate the rates.	- Work out the sickness rate and the attrition rate for each team. - Compare with the previous quarter and the same quarter last year.	A rate needs a comparison to mean something.
3	Look for patterns.	- Find teams or categories above the organisation average for two quarters or more. - Identify the likely cause with the team manager.	A pattern in two quarters is the trigger for action.
4	Act and report.	- Agree one action for each pattern, with an owner and a date. - Include the analysis and actions in the twice-yearly report.	The report closes the learning loop.

Decision points

- If a team's sickness rate indicates a safety risk, the clinical director decides on immediate review.

10. Special situations

Situation	What to do
Outbreak-related absence	Analysed separately and not counted as a team pattern.

11. Problems and escalation

- A pattern linked to a safety concern is escalated to the chief executive within 2 weeks.

12. Monitoring and compliance

What is checked	Target	How often	Who	If the target is missed
Quarterly analysis done	100%	Quarterly	Human resources lead	Escalate to chief executive
Patterns with an agreed action	100%	Each quarter	Human resources lead	Escalate to governance

13. Records

Record	Where it is kept	Kept for
Quarterly analysis report	Governance files	Employment plus 6 years

14. Training and competence

- Managers are briefed on how to read the report and act on it.

15. Related documents

ID	Title	Relationship
WRK-REG-002	Sickness absence and turnover register	Source data
WRK-POL-003	Occupational health, safety and wellbeing policy	Policy this supports

16. Evidence

ID	Source and status
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

17. Change history

Version	Date	What changed	Approver and signature
1.0	{{document.effective_date}}	First version	Pending Expert Committee approval