Standard operating procedure (SOP) · WRK-SOP-008 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 2E.7

At a glance

- Analyse sickness and leaving data every quarter, by team and by reason.
- Look for patterns, not single cases.
- Agree at least one action for any pattern found.
- 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

Term	Meaning
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

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

5. Responsibilities

Role	Responsibility	Competence
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. Materials and equipment

Item	Requirement	Condition
Sickness absence and turnover register (WRK-REG-002)	Current	Updated monthly

7. Safety

- 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

Step 1. Extract the data.

- Take the quarter’s entries from WRK-REG-002.
- Check each entry has a team and a category.

Key point: Missing categories make the analysis useless.

Step 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.

Key point: A rate needs a comparison to mean something.

Step 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.

Key point: A pattern in two quarters is the trigger for action.

Step 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.

Key point: The report closes the learning loop.

10. Decision points

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

11. Special situations

Situation	Action
Outbreak-related absence	Analysed separately and not counted as a team pattern.

12. Escalation

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

13. Monitoring

Measure	Target	Frequency	Owner	If not met

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

14. Records

Record	Kept in	Retention
Quarterly analysis report	Governance files	Employment plus 6 years

15. Training

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

16. Related documents

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

17. Evidence

Reference	Note
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

E-learning for this document

No e-learning course is linked to this document yet.

Planned course: New course planned.

References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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