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## **ABSTRACT**

Absenteeism is an area of concern for most organisations as it means a great cost for the company. This paper will compile and discuss the most relevant areas that any organisation should take into consideration when analysing absenteeism. Absence management should be tailored to the organisational context and therefore, a detailed analysis of quantitative and qualitative data should be carried out before being able to decide the best policies and procedures for a specific company. This research will focus its attention on a case study for a medical organisation in the Irish market with the purpose of understanding absenteeism in a multicultural context and suggesting possibilities to better manage that behavior. The essence of using the case study to support this research is to replicate the process that HR should follow to better manage absence hoping that this research supports HR professionals on the ground.

## **DEDICATION**

To the two people that made me the ambitious person that I am my mother and  
my first boss

## **AKNOWLEDGEMENTS**

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## INTRODUCTION

Absence management in the workplace has been a popular concern in many organisations across the globe due to many reasons but the common one is the cost that absenteeism causes to any organisation. Absenteeism is by nature related to health issues however there can be contextual factors that could cause poor health to our employees such as financial or personal circumstances (Taylor 2011). Absenteeism is therefore a complex concept to study and it has to be constantly linked to the context of the employee. So, how controllable is absenteeism? This paper will try to identify those areas where the company has any input with the purpose of reducing the cost of absenteeism and it will take a case study in Covidien as a sample organisation. Once the company has identified what could be improved, the following question is what actions to take to reduce absences. Not all the policies or all the leadership styles have the same results so a research of how best practice procedures can be applied to our specific case study will be required. Due to the complexity of this matter and the nature of the circumstances that affect absenteeism, it is difficult to extrapolate results on absenteeism studies from one company to another. This extrapolation has to be done in any case with extreme attention to detail and with constant readjustments.

Previous studies on absenteeism have highlighted a new concept in recent years. It is the concept of presenteeism (Aronsson et al, 2000). This concept indicates that employees can be feeling unwell at work and that could reduce the productivity. We could put in practice policies and procedures to reduce the absenteeism at work but it could result in a productivity loss because the employees attend work being sick. There is no general solution for this matter that could be applicable to any company. There is not a

clear definition of how to measure the cost associated to presenteeism therefore it has been more difficult to engage senior managers in putting measures in place to reduce this cost. In many cases employees suffer in silence because they are afraid of losing their jobs if they are absent (Cunningham et al, 2007). There have been many studies (we will review some of them at a later stage) on presenteeism but very little indications on how to prevent or reduce it in the actual workplace.

Even though it is general knowledge that levels of absenteeism are different in every sector, organisation and country (CIPD, 2011) there are no indications on how to consider different cultural backgrounds when developing an absence management policy. It sounds unrealistic having to consider people's backgrounds to understand why they are absent but the environment is changing, the workforce is changing too and HR has to be able to accommodate these changes to succeed.

This paper is going to focus on a case study in Covidien customer care contact centre for Europe, Middle East and Asia (EMEA) that is responsible for managing the order processing, returns and customer queries. The contact centre and call centre industry is known as one of the sectors with the highest turnover and absenteeism rates. The reasons have been discussed by many authors (Schalk & Rijchevorsel, 2007) who mentioned that personal, job, contract and workplace attitudes were highly relevant to predict absenteeism rate for a specific employee. The customer service activity is highly important and considered as a source of competitive advantage for many organisations (Dobbins, 1996) the jobs are often described as repetitive, with highly controlling performance management systems that doesn't allow much autonomy to the employees (Bain and Taylor, 2000). This could be argued as the call centre industry has changed.

radically from its origins. Considering the current economic climate all the sectors expect an increase in employee's performance and that could result in loss of autonomy.

Some studies indicate that the call centre industry lacks in career development opportunities for the employees ( Taylor et al , 2002 Deery and Kinnie, 2004) and that affects the absenteeism rates and turnover. In some cases the call centre has been used by employees as a first job to gain experience or an 'in between' job while waiting to find some other opportunity. In the outsourcing industry there are not many career development opportunities however not all the call/contact centers are outsourced and that would open the possibility to interdepartmental movements to employees.

## **COVIDIEN CASE STUDY THE CONTEXT**

This dissertation is going to take a case study for a medical organisation and analyze the absenteeism behavior and factors related to this behavior for permanent customer services representatives (CSRs) in the contact centre based in Dublin, Ireland

### **History and business description**

Covidien was previously part of Tyco founded in Massachusetts in 1960 by Arthur J. Rosenberg. It was originally founded to provide the US government with laboratory services and in 1962 it started specializing in research for laboratory materials and energy use. The company became public in 1964 and its business strategy changed buying many different brands expanding and manufacturing its product portfolio. In 1974 the company had a net growth of \$140 million. Tyco has not just been focused on the healthcare industry but also in fire protection and safety alarms systems. Tyco (2012)

In 1960 Tyco created a group of companies named Tyco Healthcare. Between 1994 and 2006 Tyco Healthcare acquired several medical companies such as Kendall, Uni-Patch, Paragon etc. In 2007 Tyco Healthcare became Covidien, giving a new name to the already existing group of companies. Covidien (2012). This name is a combination for two Latin words: 'Co' means together in Latin and 'Vi' means life. The name Covidien captures some of the values of the organisation that we will review at a later stage. The company logo includes two 'C's that come from compassion and collaboration. Covidien (2009)

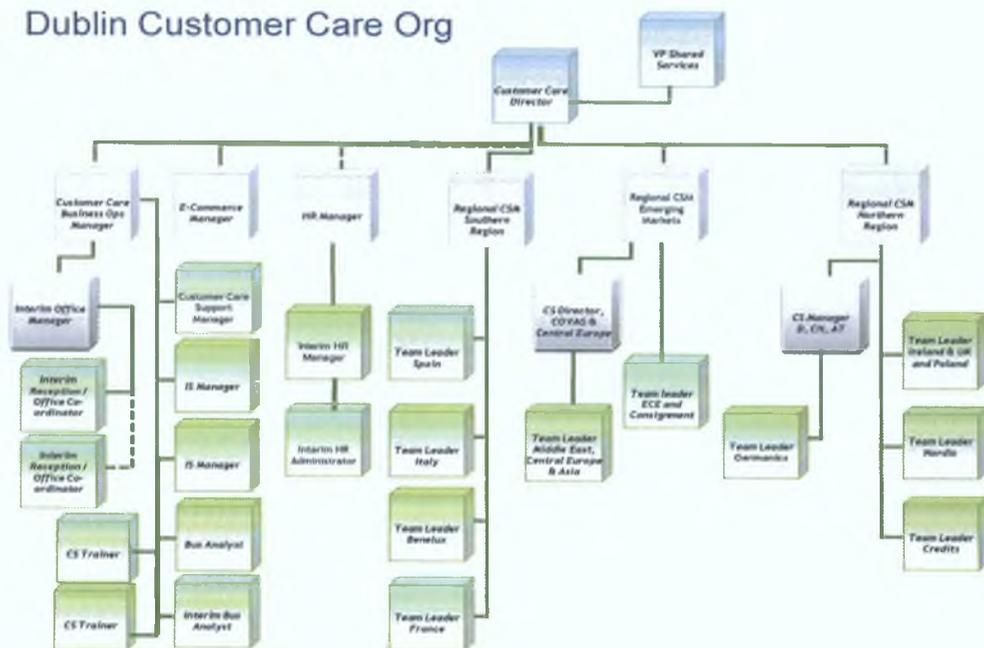
By 2010 Covidien was one of the top five medical organisations in the world with more than 41 000 employees, more than 50 000 different products and annual sales of \$10 4 million dollars Covidien manufactures medical and pharmaceutical products and distributes them all over the world Almost two thirds of the employees are dedicated to manufacturing working in one of the 53 manufacturing plants that the company has The company sells its products in more than 65 countries Some of the products that the company manufactures are surgical devices, radiopharmaceuticals, laparoscopy, electro surgery, monitoring or nursery products In some cases the products are sold directly from Covidien, in some other cases they are sold through distributors There are countries where the products are just exported directly to the customers Almost half of the sales of the company are done outside the U S Covidien customers are professionals in the Healthcare industry such as nurses, doctors in the private and public sectors Covidien (2012)

Quality and regulations are a very important part of the day to day activity in Covidien as the healthcare industry is highly regulated The different sites have to comply with national and international standards and regulations in order to sell the products An example of legislation that Covidien complies with is the Sarbanes-Oxley Act S7 (2006) Quality is highly important in the Healthcare industry as any mistake of any type could put lives at risk The company strives to not just avoid errors but to provide excellent service Covidien is able to deliver to most of the places in 42 hours or less and to answer the calls in less than 30 seconds In many cases the speed and accuracy in the services is essential for hospitals that order goods to perform specific operations scheduled

depending on the product availability. There are products for emergency operations that need to be delivered with extreme urgency. Covidien New Hire Orientation (2012).

**Organisation of the company:**

The workforce is divided in three main groups: manufacturing, sales and support services. Almost two thirds of the employees are dedicated to manufacturing in any of the 16 countries where Covidien manufactures its products. The structure of the organisation is divided by product segments: Medical Devices, Pharmaceutical and Medical Supplies. Each one of the previous segments are divided by different families of products cascading down the distribution of the sales force. Covidien (2012).



Covidien has contributed to create innovation and to improve patients' lives throughout the years. The company has invested in the development of laparoscopy products and stapling resulting in less invasive operations and less risk of infections. Covidien also developed mechanical ventilation products as life-sustaining technology, and contrast media for better diagnostics. Medical Devices is the biggest segment with \$7.8B net sales followed by Pharmaceuticals with \$2B and Medical Supplies with \$1.8B. Covidien New Hire Orientation (2012)

### **Corporate Strategy**

The Mission of the organisation is transmitted to employees in the induction and they are encouraged to put it into practice in the day to day activity as follows:

*“ Create and deliver innovative healthcare solutions, developed in ethical collaboration with medical professionals, which enhance the quality of life for patients and improve outcomes for our customers and our shareholders ”* Covidien (2012)

This Mission is fulfilled with the Vision that states:

*“ Deliver unmatched value to our customers by providing solutions that improve patient outcomes and healthcare delivery through clinically relevant and economically valuable innovation ”* Covidien (2012)

The mission of the organisation is mainly focused on creating innovative products to save lives in an ethical environment. The vision is focused on creating collaboration with healthcare professionals to find out about their daily needs and to fulfill those needs before any other company in the market and with a competitive value. This mission highlights the adaptability of the company to the economic environment.

The values of the organisation are accountability, collaboration, compassion and diversity Covidien (2012)

### **Business Strategy**

Covidien business strategy has the following focus areas (Covidien New Hire Orientation, 2012)

- Customer Focus all departments in the organisation strive to work having the customers and patients constantly in mind
- Globalization trying to understand the requirements for each market and developing logistics needs to reach any customer
- Innovation thinking outside the box and understanding our customers' needs to create new products
- Being a high performance organisation the company provides employees with the communication and tools necessary to accelerate the achievement of results

### **Operational Strategy**

The company launched a program called Covidien 2.0 that encourages every employee to embed the operational strategy to their day to day activity through Innovation, dispassionate portfolio management, creating sustainable productivity, emerging markets opportunities and talent management

## **Covidien Contact Centre**

This paper is going to take the case study of Covidien contact centre based in Dublin, Ireland. This contact centre provides services to the EMEA area and it is relatively new. The centre opened in 2008 with the relocation of the customer services activities from in-country into one office based in Dublin. The purpose of this relocation was to unify all the different processes and procedures so all the customers experienced the same level of customer services. The migration of the different markets resulted as follows: UK, Netherlands, Norden, Austria, Poland, Switzerland, Germany, Belgium, Portugal, France, Italy, Spain, Exports and credits team. The centre is responsible for order processing, customer services queries and credit notes issuing (Covidien New Hire Orientation, 2012).

Communication is a very important area for the company. There are different online (intranet) tools to share information between employees in any part of the globe. There are blogs with discussion groups and projects. There is a biweekly memo from the CEO on a specific topic, videos interviewing senior managers and expert employees, quarterly state of the company online meetings with the CEO, local newsletters, departmental global/local meetings and informal meetings held in every department (Covidien New Hire Orientation, 2012). There are many tools available for employees to access communication however it could be argued that having the tools available doesn't mean that there is a real flow of information. The information should cascade down giving the opportunities for employees to respond. This cascade down of information is informally done by team leaders and supervisors and it is left to their discretion to do it or not. The team leaders' understanding of what is productive in the

department and pressure could result in communication loss. We will discuss how communication affects employee attitudes at the workplace and their behavior at a later stage.

There are 145 employees in the centre, 120 customer services representatives and 25 support services that includes team leaders, training department, HR function, data analysts, IT department, office manager and reception, and senior managers. Every team leader has one or two different markets depending on the team size. The biggest teams are Spain, UK, Germanics (Austria, Switzerland, Germany), Italy and France. (New Hire Orientation, 2012)

The centre is located in Dublin South just beside the Luas station. It is also accessible by bus. There are shops and restaurants in the area and a crèche 10 minutes walking distance from the centre. The offices are designed with high quality standards. There are mood lights on the panels around the desk areas, large desks and screens, a sea view from the canteen, free car park, a cyber cafe, a subsidised restaurant and two relax areas with leather reclinable sofas. Health and safety is highly important in the centre having a designated committee of employees supporting this function. The chairs are fully adjustable and there is an ergonomic assessment provided to all employees when they start. As part of the company benefits all employees are covered with a life insurance and offered a voluntary free Healthcare insurance (employees are charged just the normal BIK on a monthly basis). This healthcare insurance offers an Employee Assistance Program with a 24hr phone helpline and up to 5 face to face counseling sessions. The company makes available to employees a 24hr line to an independent party that any employee can contact in the case they need to escalate any issue that they

wouldn't be able to solve in the centre. There is also an internal phone number to escalate ethical issues or to discuss conflicts of interest. Employees are encouraged to solve any issue or conflict that they might face in their future employment in an informal way before escalating it or making a formal complaint (New Hire Orientation, 2012)

There is an online time management system for employees that help organising shifts and time off requests. The starting time is agreed with the team leaders (operating hours are Monday to Friday from 6am-9pm) depending on the market requirements and the breaks are calculated automatically for every employee by the system considering the workload statistics from previous weeks at specific times. These breaks can change every week and employees have no input in their organisation. Employees are entitled to have 25 holiday days plus 9 public holidays. The centre operates all year (bank holidays are different in every country) closing only on Christmas and New Years day. There is a holiday entitlement in the system for all the year and employees can allocate these hours making different requests into a calendar. The availability to make requests in the calendar will depend on the amount of people requesting that date at the same time and locked dates. There are certain dates such as the last week of every month, quarter-end or year-end periods when only under exceptional situations an employee can take time off. Once the request is made in the calendar it follows a workflow of approvals. On some occasions team leaders can approve the time off, if the request has to be escalated the customer services manager would need to approve it. Any request must be done 2 weeks prior to taking the time off, it needs to be in blocks of half day, requests can't exceed two weeks and employees can only bring a maximum of 5

holiday days to next's year entitlement having to use those days before the 1<sup>st</sup> of April of that calendar year (Covidien Employee Handbook, 2012 See appendix 5)

There are policies that provide employees with additional time off paid or unpaid under specific circumstances. There is a bereavement leave of up to 5 paid working days to attend the funeral of a family member or relative. The employees also have the option of taking parental leave for each child under the age of 8 years. This leave is unpaid up to a maximum of 14 weeks per child that could be divided in two groups of a minimum of 6 weeks. All employees are entitled to one moving day (paid) every 5 years and to have paid time off to attend jury services. The company can provide unpaid time off to employees to attend public duties (Covidien Employee Handbook, 2012)

### **Absence Policy**

All employees are legally entitled to have up to 3 working days in a period of 12 months and no more than 5 working days within 36 months for force majeure. This leave is due to unforeseen and urgent family reasons that require the employees presence. This is covered under the parental leave acts 1998 and 2006. See appendix 1 for benefit summary (Citizens Information, 2012)

After the first year of employment employees are paid combining the Social Welfare benefit and the company sick pay scheme. This would result in employees having the normal monthly salary in their banks after being sick considering the following conditions

Length of employment	Pay for any 12 month in a row	Pay	Total days paid
Under 1 Year	Nil	Nil	Nil
1-3 Years	15 days x 100%, 5 days x 50%	4 weeks	17.5 days
4-6 Years	18 days x 100%, 5 days x 50%	4 weeks and 3 days	20.5 days
7-9 Years	20 days x 100%, 5 days x 50%	5 weeks	22.5 days
10-14 Years	22.5 days x 100%, 5 days at 50%	5 weeks and 2.5 days	25 days
15 + Years	25 days x 100%, 5 days at 50%	6 weeks	27.5 days

For an employee to start qualifying for a sick leave pay in Covidien Services Centre, he/she must have one year of employment with no more than 10 sick days. In many cases employees start in Covidien working through an agency and they become permanent when a permanent member of the team leaves. That period of time doesn't qualify for the first year as a requirement to qualify for sick leave pay. The company has the right to cancel paying the sick leave if the policy is being abused and the company can send to the company doctor any employee for a medical report. If the absences

persist, the employee doesn't cooperate or the policy is abused in any way, it could result in disciplinary action or dismissal. The sick pay would automatically stop while the duration of any disciplinary action towards an employee (Covidien Employee Handbook, 2012)

Employees must notify personally that they are not attending work if possible prior to the start of their shift and no later than two hours after they should have started. They are provided with the telephone numbers for all the team leaders and customer services managers on the first day of employment. Notification of being sick by text or through a colleague is not accepted. Before or on the third day of sickness all employees have to provide the company with a medical certification with the details of the employee, the doctors' opinion of the illness or accident, the nature of the sickness, the expected recovery time, date and the doctors' signature. In the event of routine hospitalization, employees have to inform their supervisor prior to admission and they would be advised on how to proceed. Communication with the team leaders must persist while being sick (Covidien Employee Handbook, 2012)

A return to work interview will be carried out normally on the first day when the employee is back from sick leave (Appendix 1). This interview is carried out by the team leader. The company keeps records of any certification from the doctors or return to work interviews in a private manner. A certificate from the doctor confirming that the employee is fit to work will be requested after a serious illness or accident. After the first 3 days of absence, the company reserves the right of paying for leave due to accident reasons during the investigation time. The accident must be reported and the safety processes followed. Employees are paid for medical appointments up to 2 hours under

presentation of a medical certificate. The company encourages employees to attend medical appointments outside of work hours. In case it is not possible, medical appointments should be arranged for early in the morning or before the end of the shift (Covidien Employee Handbook, 2012)

## LITERATURE REVIEW

### Definition and reasons for absenteeism

Absenteeism has been defined in different ways depending on what it includes. The definition that this paper is going to use is “Any failure to report for or remain at work as scheduled, regardless of the reason” (Cascio, 2000). There are many different categories of absence, unauthorised/authorized, lateness, certified/non certified, personal leave/sickness, anticipated/unanticipated etc (ACCAS, Advisory Booklet). There are absences that are unavoidable by nature such as bereavement leave, jury leave, chronic illnesses, hospitalization, force majeure. In other cases absences could be avoided in some way. Researches estimate that 52% of the total absences could be avoided with the right processes at work that reduces stress, supports mental health and facilitate work life balance (Cascio, 2000, Van Der Wall, 1998). These absences are often short term ones. As it will be reviewed later, the role of the leader is highlighted by many studies as a key factor that can affect absenteeism behavior as part of employee attitudes towards the company. Communication between supervisor and employee is therefore a very important factor (De Boer et al, 2002, Gellatly, 1995, Mayfield & Mayfield, 1998, Reina & Reina, 1999, Robbins, 2005, Yukl, 2006). Having the right policies and procedures is important in absence management.

The reasons for absenteeism can be grouped in three main streams (CIPD, 2006)

- Job and organizational characteristics

- Health factors and injuries at work
- Environmental and social factors

These previous groups are subdivided in the following causes of short term absence (CIPD, 2011)

- Minor Illnesses (cold/flu, stomach issues, headache/migraine)
- Musculoskeletal injuries (back and articulation pain)
- Stress (the most popular reason for short term absences for non manual workers)
- Home/family responsibilities
- Non genuine illness (reported by one in every five employees in the private sector)

For long term illness the most popular reasons for absence are (CIPD, 2011)

- Stress
- Chronic medical conditions
- Musculoskeletal injuries
- Mental health

When analysing absenteeism behavior in the workplace, the previous reasons are just the ‘tip of the iceberg’ Once a company has identified the main absence reasons in the centre, the reasons have to be analysed in order to identify where the company has an input The analysis of the causes can also underline presenteeism cases or help HR professionals calculating the cost of absenteeism For example stress is often seen as a result of one or more circumstances Recent studies indicate that fear for job losses,

longer working hours to achieve performance expectations, financial difficulties, work life balance complications or increasing competition are the cause for many cases of stress (Kim et al, 2006) Long exposure to stress can cause back pain, neck pain, headaches, stomach issues, depression, etc (Kim, 2006, Sorhaundo & Garman 2006) Many employees with depression are not able to carry out their normal activity at work as the job demands are seen as too big Organisations with an Employee Assistance Programme have lower levels of absenteeism than the ones that don't have it (Miller, 2007) Obesity is becoming a subject of concern in many companies as there are studies that state that up to 15% of absenteeism in the workplace is related to obesity and associated diseases (Preidt, 2009) Migraine is another concern when talking about absenteeism As previously mentioned, it could be associated with stress but it is a reason for absenteeism and to have lower performance while working The cost of the impact of migraine on the workplace was calculated for the American Headache Society as \$24 billion per year for American organisations (Boyles, 2009) Studies carried out in the UK show that up to 16% of the absences are non-genuine (the reason for the absence given to the company was different than the real one) with an annual cost of £2.7 billion (Coleman, 2011) Contextual changing factors such as the lifestyle, increase in obesity and the delay in the retirement age (Trumbull English, 2005), are quite relevant to forecast changes in HR related matters The population in Ireland is the youngest population in Europe however it is calculated that 67.3% of the general population in the European Union is between 15 and 64 years of age Ireland has also a much diversified population with only 87.4% of Irish nationals (CSO, 2011)

But why is absenteeism so important in any organisation? Absenteeism is causing high costs to many organisations and public institutions. There are frequent estimations of the cost of absenteeism per company and per country. In some cases, absenteeism costs the government a high amount of money. For example, in America, the calculated cost of absenteeism is \$118 billion (Weaver, 2010). In 2011, IBEC stated that the cost of absenteeism in Ireland in 2009 was \$2 billion per year (Kelly, 2011). Calculations of absenteeism costs frequently include not just the hour lost but temporary manpower, overtime, training for new staff, supervisors' time, recruitment costs, burn out of existing employees that have to assume extra workload. There are direct and indirect costs of absenteeism (Prater & Smith, 2011).

Absence management is a complicated subject to study due to the lack of common definition, difficulties to calculate the real costs involved and the sensibility of the information managed. This complexity to get a full picture of the matter makes it difficult for HR professionals to engage senior management in any action required that could involve a cost or time.

### **Absenteeism and presenteeism**

Presenteeism is when employees think they “must show up for work, even if one is too sick, stressed or distracted to be productive, the feeling that one needs to work extra hours, even if one has no extra work to do” (Middaugh, 2007, p 172).

The reasons underlining presenteeism are quite similar to the ones of absenteeism: medical conditions, personal and financial worries, working conditions. These reasons probably interact with work demands, personal characteristics and the current economic

climate. In many cases employees are feeling the pressure due to higher demands than before the economic crisis and they fear for their jobs if they perform poorly (Prater & Smith, 2011). The difficulty for many organisations is to find the balance to promote high attendance policies while reducing the impact on presenteeism.

There is a new concept called extensionism which is when an employee works longer hours than expected to compensate for gaps in performance such as sick leave or personal leave. This is mentioned as a cause of stress and loss of work life balance (Hilton, Sheridan, Cleary & Whiterford, 2009).

#### **Absenteeism and job characteristics:**

Job content and job characteristics are often linked with absenteeism rates. Theories such as the 'Job characteristics theory' (Hackman & Oldham, 196, 1980) indicate that if the job is rewarding for the employee they tend to be more engaged than if it's not and therefore they would be absent less. Other studies relate skills variety and task significance with absenteeism (e.g., Fried & Ferris, 1987; Rentsch & Steel, 1998; Taber & Taylor, 1990). As this paper mentioned before, stress or non safe job characteristics are frequently associated to absenteeism.

#### **Absenteeism and supervisor-employee relationship:**

Recent trends show a more positive approach to conflict as it is seen as a source of improvement (Amason, 1996; de Dreu and Weingart, 2003; Jehn, 1995) however in relation to absenteeism it could be argued as conflicts increase stress levels (Baer, 2006; Giebels and Janssen, 2005). Stress is one of the most frequent reasons for absenteeism (CIPD, 2006) and identifying the reasons is interesting for the company as it highlights

possible ways to increase attendance. Some of the reasons mentioned by CIPD as a source of stress are: excessive workload, difficult working conditions and working relationships (could include conflict at work), autonomy at work or non engaging tasks.

Supervisors approach to conflict management seems to be often mentioned in relation to absenteeism ( De Reuver & Van Woerkom, 2009). Conflict is a reality when there is different people working together but supervisors can adopt different approaches to its management. Some supervisors adopt an authoritative approach imposing their decisions not even considering other peoples' opinions. In other cases supervisors negotiate the outcome considering their subordinates' income on the issue (De Reuver & Van Woerkom, 2009). Frequently conflict style is categorized within four groups (domination, collaboration, compromise, smoothing and avoiding) and two dimensions (concern for the workload, concern for the others) (Blake & Mouton, 1964, 1970). Relationships with managers can influence employees' engagement with the organisation as a whole (Simons & Peterson, 2000). There are different theories such as the Social Exchange Theory (Emerson, 1964; Molm et al., 1999) and the Organisational support theory (Eisengerger et al., 1986) that discuss the importance of the relationship employee-supervisor as direct managers are seen often as representatives of the company. The social exchange theory states that employees with higher affective commitment are more engaged and willing to perform better in their jobs. Employees with lower affective commitment are disengaged, with low morale and it could affect their attendance as a way to express their disagreements with the environment at work (Gaziel, 2004). This model is not very comprehensive to understand absenteeism as a whole as it doesn't consider any health issue further than the stress related ones. It could be argued that these

theories abolish all type of self achievement drive in employees and it seems to put all the stress of employee engagement in one main stream, their relationship with their managers. On the other hand, differences in management styles could explain different patterns of absence by department.

Analysing the supervisor-employee relationship we find another interesting concept which is PBI (perceived behavioral integrity). This is claimed to affect trust and commitment in employees and it is the perceived consistency on verbal statements and actions. Trust would be related to the psychological contract and engagement which would link this model with the social exchange and the organisational support theory (Simons, 1999, 2002). Perceived similarity with the manager actions as a reflection of their values is very important and this could bring us to a discussion of cultural differences between managers and employees. This idea was developed under the assumption of everyone considering himself/herself trustworthy and consistent with their values that are 'the right ones' and a clash with the supervisors' values would make employees think negatively about their managers integrity (Chatman, 1991, O'Reilly et al, 1991). Would this mean that for employees to be engaged with the company, they have to have a manager that shares their own values? Would cultural differences affect employee engagement? Brought to a higher level, would company values be determining for employee engagement and related to absence behavior? Kristof-Brown et al's (2005) and Verquer et al (2003) stated in their meta-analysis that value-based congruence was positively related to engagement and job satisfactions and negatively related to intention to leave. If we said before that engagement is related to absence behavior, we could say

that employees that live the company values as their own would have lower absence rates than the ones that don't feel the same.

### **Personal and cultural differences and absenteeism:**

Even though personal and cultural differences have been analysed in many HR related studies, there are not many studies focused on linking these differences to absenteeism. There is an interesting study that analyse two factors and tries to relate it to absenteeism: perceived organisational value of diversity and supervisor-subordinate racial/ethnic similarity (Avery, McKay, Wilson, Tonidandel, 2007). This study is based on the idea that employees not feeling supported (resulted from factors such as: supervisory support, work attitudes and withdrawal behaviors), tend to be absent more frequently (Rhoades & Eisengerger, 2002). There are other theories that state that employees with similar supervisors frequently felt more support than the ones with dissimilar supervisors (Jeanquart-Barone, 1996; Kirby & Jackson, 1999). This could explain how we find lower absence rates in smaller groups. These bring us to the idea that employees belonging to specific minorities or ethnic groups could understand the signals, communications and work environment in a very personal way influenced by their own emotions resulting in different attitudes and feeling less supported than the rest of the employees (Avery, McKay, Wilson, Tonidandel, 2007). Researches show that similarity between employees enacts interpersonal attraction and cohesion (e.g., Tsui & O'Reilly, 1989; Wesolowski & Mossholder, 1997). This is an interesting factor as Covidien employees belong to many different nationalities and sometimes the nationality of the team leader don't match the subordinate's one.

### **Financial bonuses in absence management:**

There have been different studies to evaluate the impact of financial bonuses in the absence behavior of employees. There is one study that analysed the impact of a monthly lottery incentive on workforce attendance. The company took every month the employees that had no absence records in the last three months and they qualified them for a monthly recognition by a lottery system. From the employees that they qualified every month they selected seven of them randomly giving them a €75 voucher. These winners were excluded from future lotteries so that would spread the vouchers better across the employees with no absences. The characteristics of the lottery programme are: probabilistic game, economic recognition scheme, highlights the relation between financial bonuses and absenteeism. The result of this study carried out in a Dutch manufacturing company in 2002, were significant as the lottery reduced absenteeism records by 4.3% over the first seven months and by 1% over the following 7 months (Hassink & Koning, 2009). There is no doubt of the interest of this study however it highlights three questions: How genuine were the absences in the centre before the study? wouldn't this programme promote presenteeism? Is the result the product of the lottery or the employees feeling observed?

### **How to analyse absenteeism:**

To be able to analyse absence behavior and to be able to proactively manage it, companies need to keep appropriate records. Records must be kept in a confidential manner and employees must be informed of the purpose of these records. One of the purposes of collecting data is to identify patterns of absenteeism through, individuals,

departments, functions, groups or the whole organisation if necessary. CIPD recommends analysing the data as per the previous Covidien charts: overall absence rates, departmental rates, absence reasons and incidence across the employees. Data must be compared and benchmarked against the sector, industry and competitors. Statistical analysis should not be used by itself, in many cases interviews with employees and managers should be held in order to get enough information to make conclusions. The size of the organisation, the population where the issue concentrates or the possibility of getting biased answers due to lack of honesty on such a sensible matter should be taken into consideration. Focus groups can help to add the employee point of view to the analysis without compromising the quality of the information brought up. Confidential questionnaires can provide good honest answers. Interviews with managers can provide us with information about their attitudes, their understanding of the background for each specific situation, their experiences, their procedures to identify patterns etc. CIPD (2006)

There are numerous approaches to how to measure absence. The most popular approach to absence measuring is the time loss analysis which is calculated for specific individuals or for the company as a whole as follows:

*Total absence in a period/total working hours in that period x 100 = lost time rate*

To evaluate the spread of absenteeism in an organisation sometimes the frequency rate is used. It is calculated as follows:

*Number of spells of absence /number of workers x 100 = frequency rate*

The Bradford Factor helps to evaluate the absence behavior mixing the time lost and the number of spells. The Bradford Factor index is calculated as follows:

*Number of absences x Number of absences x Total Hours absent = Index*

Any absence management measure should ensure CIPD (2006)

- Good working conditions
- Ergonomical education to employees
- Training for new starters and continuous development
- Teamwork environment
- Job satisfaction
- Positive supervision
- Equal opportunities policy
- Health and Safety standards

Absence rates are different depending on the sector and the environment. In 2010 there are records of an average absence rate of 7.7 days lost per employee per year, the public sector being the one with the highest levels, 9.1 days per employee per year. The non-profit sector is surprisingly high on absenteeism too with an average of 8.8 days lost per employee. This could question previous theories that state that values and integrity in the organisation are key factors determining absence levels. If this was a relevant factor, non-profit organisations should have low absence as traditionally are value based organisations, but reports show the opposite reaction. With the exception of the public sector, the bigger the organisation is, the higher the absence rates are. The trend in the last years of companies reporting a reduction in absence levels is growing and that includes the public sector. Up to two thirds of the absenteeism is short term related (up to 7 days) (CIPD, 2011).

### **Absence management initiatives:**

When a company identifies that they have an absenteeism issue and they start analysing the data available, the following question is how to manage absenteeism. This is a complicated task as it has to be customized for the specific absence behavior and the environment of the organisation. Sometimes absence management programmes require some level of investment and senior management have to be engaged in the project. Some authors indicate some characteristics required in any absence management programme (Anderson, 2004):

- Considering organisational or centre absence behavior and not individual.
- Focusing on absence incidence.
- Connection with the causes of the absence.
- Measurements through technology.

Anderson proposes to focus on HR policies review: attendance policy, work life balance, time off policies etc; disability management and health promotion.

CIPD proposes the previous considerations when developing an absence management program in an organisation. Short term absences are mostly managed through a number of initiatives put in practice generally and long term absences require individual evaluation.

### **Summary:**

There is much information related to absenteeism behavior but it is common to all studies to highlight the complexity of the issue. Even though there are many factors

affecting absenteeism and it is difficult to analyse them due to the resistance from employees to provide genuine information, it is an attractive topic for HR professionals due to the cost of absenteeism in many organisations and governments. The context is claimed to be a key factor when managing absence not just at the departmental or organisational level but also external to the company. New legislations about the retirement age, changes in the economic environment are forcing HR professionals to review constantly the reasons behind the absence behavior in their centres having to be creative with new solutions to manage this matter.

## **RESEARCH AIMS AND OBJECTIVES**

The aim of this research is consultative evaluating the current policies and procedures and modifying them if necessary to better suit the organisation goals and the employee needs. The data collection and analysis could establish new data collection and reporting methods providing feedback to senior and middle management. This research will analyse the data to propose at a later stage possible initiatives to better suit employee and employer needs. As per our literature review, these possible initiatives could have an impact on employee satisfaction, cost control and other HR related matters.

## RESEARCH QUESTIONS AND METHODOLOGY

### Research questions

The research questions that we are going to use for our research are

- What are the absenteeism trends for permanent (excludes temp agency workers) CSRs in Covidien Services Centre? This paper is going to analyse the absenteeism behavior in Covidien collecting and reviewing the data related to absenteeism in the last six months. This analysis will use the last six months as a reference in order to have recent and realistic information. As absence behavior is very sensitive to changes in the environment and turn over, looking into data from past years wouldn't add any light to our research. The data will be filtered by departments, days of the week, times of the year and other possible patterns.
- What are the personal or group differences that predict absenteeism in Covidien Services Centre? This paper will analyse any personal characteristics or attitudes that are relevant for the analysis of the absence behavior.
- What are the factors determining absenteeism in Covidien Services Centre? This research will review the internal and external context of the organisation taking into consideration the factors that are affecting absenteeism in Ireland and extrapolate it to Covidien, each department, units, individuals etc.
- What initiatives could be implemented to better manage the absenteeism rates? The purpose of this research is to identify areas of improvement and to propose new initiatives based on the data collected that aims the organisation to better manage its absenteeism behavior.

### **Research Methodology:**

The research methodology for this paper will be exploratory as it is going to investigate the factors related to the absenteeism behavior in a context not deeply explored in the past in order to understand the factors related to it (Robson, 2002). As we will be bringing to the light new facts, the research will have to be constantly adapted to better answer our research questions (Adam and Schvaneveldt, 1991). The adaptability of this research might require therefore constant adjustments depending on the results from our data analysis, questionnaires and interviews. This might make the research quite complex but it will answer the research questions.

The research will adopt different ontology approaches to better suit the research questions. In order to understand the absence behavior in Covidien we have to first analyse the data collected till the date. As absence behavior is highly changeable, this research is going to focus on the data collected in the last six months. This is a very objective part of the analysis and both the collection and interpretation of this data will be carried out with as minimum bias as possible. At a second stage the research will be focused on more subjective information. This will include questionnaires in relation to the absence behavior that will help us doing a first screening on the employees' perceptions and experiences. We say this is subjective information because the same facts can be understood differently by two employees depending on their backgrounds, personal situations, cultural characteristics, financial situation, perceived support from managers... The understanding of the epistemology for this research is mixed with both observable information and social phenomena tending to put more strength on the second one. The interpretation of the environment is related to absenteeism behavior and

therefore it depends on the individual interpretation of the environment. This might result in observable data however it is again up to the managers, researchers, HR professionals to interpret those results. The approach that this research is going to adopt is the radical humanist paradigm that understands information as subjective and as a product of the participation of social actors. We are going to ask our CSRs and supervisors for their experiences but these are not the facts, these are the result of their interpretation of the facts (Saunders, Lewis, Thornhill, 2009)

The strategy for this research will be a mix between action research where managers will be consulted, classic research with the contribution of employees and archival research with the analysis of data (Saunders, Lewis and Thornhill, 2009). This strategy will ensure the research questions are addressed because it will analyze the quantitative data and it will also give the opportunity to add qualitative information that could bring us to unexpected outcomes (Research Proposal, Calvo, 2012)

This research is going to first analyse the data collected of the last six months to identify patterns. Then, there are going to be questionnaires focused on identifying conflict areas or important factors for employees. These questions will be taken from previous researches on the subject and best practice procedures. To make sure we have all the information required we will carry out interviews with employees and supervisors which could add new unexpected information to the research or confirm the previously found from the questionnaires round. The information collected from the questionnaires and the interviews will be analysed with an inductive approach which will help us connecting results

This methodology aims our research answering our previous questions. The analysis of the quantitative data will help us identifying patterns that could be confirmed at a later stage with the qualitative data. The survey and the interviews will identify personal differences and factors in the context affecting absenteeism. Finally interviews could help forecasting the impact of some possible initiatives to manage absenteeism.

Methodology	To evaluate	Finality
<b>Analysis of quantitative data</b>	Trends among time, markets, age, workload.	Studying the circumstances of the behavior
<b>Questionnaire to collect employee attitudes and experiences</b>	Factors affecting absenteeism and personal differences.	To be able to extrapolate results in a scientific way to the workforce
<b>Interviewing a sample of employees</b>	Factors affecting absenteeism, confirming results from survey and adding open information.	Using open questions to get as many factors as possible
<b>Analysis of quantitative data collected after affecting the factors that correlates with absenteeism</b>	Changes in the behavior and success of measures put in place	To provide us with a better understanding of the absenteeism organizational behavior

The first part of the research will be data collection and analysis. The data is going to be focused on permanent CSRs (will exclude agency temporary employees) based on the Covidien Services Centre based in Dublin. The data collection will include the first semester of 2012 as relevant data for our research.

The questionnaires will be completed on a voluntary basis by CSRs. It will be an online questionnaire that should not take more than 5 minutes to complete. This questionnaire will be anonymous and held in the first week of August which is a quiet month in operational terms. The interviews will include again a voluntary basis both CSRs and team leaders. It will not be anonymous at this time as the interviews will be held by a member of the HR department however any information will be managed with the highest level of confidentiality. Both the questionnaires and the interviews will be carried out in the office and the interviews will take place in private rooms. No recording will be necessary for the interviews to be held in a minimally invasive environment.

## RESEARCH RESULTS

### Analysis of Quantitative Data: Covidien Services Case Study

#### Absence records in the centre:

There are records kept electronically in the online time management system for all the absences in the centre and they can be downloaded massively at any stage. Time off is approved by HR on a monthly basis when the payroll is being done. This includes reviewing that all personal leaves and sick days have been properly documented. These documents are saved in the electronic personal folders for each employee. Team Leaders are responsible to complete any documentation with employees and make sure communication flows at all times in relation to absences. Team Leaders are also responsible to codify correctly the absences for each employee in the online system (Verint), to count the number of absences in any 12 month block, to decide based on the company policy if it is a sick paid or unpaid and to start disciplinary procedures if necessary. Personal leaves are codified as per the following reasons (in an email from Michiel Klapwijk, 2012. Subject "Verint Reason Codes"):

Code in Verint	Absence Reason
Personal Leave 1	Bereavement Leave
Personal Leave 2	Force Majeure
Personal Leave 3	Jury Duty
Personal Leave 4	No Call/No Show

The amount of organisations that are currently keeping records of absenteeism is considerably increasing due to the focus on productivity and cost control. Larger organisations tend to keep more exhaustive records of this matter (CIPD & Simply Health, 2011). A report published shows a slight increase in the average time loss for all employees between 2010 and 2011. The average time loss across all industries and sectors in 2011 is 3.8%, and 25.8% for call centres however this last percentage was calculated over a very small sample (CIPD & Simply Health, 2011). A report published by IBEC based on Irish business, highlights the call centre industry as the one with the highest absenteeism, 3.67% calculating the cost of absenteeism in Ireland as €1.5 billion a year (RTE News, Aug 2011). The percentage of time loss for permanent CSRs in Covidien for the first semester of the calendar year 2012 is 2.97%. This is below the previously percentages revealed in UK and Irish surveys. It could be argued that our case study in Covidien is not a call centre as such as CSRs dedicate most of their time to order management and not answering calls.

The following table breaks down the percentage of time loss for the first semester of the calendar year 2012 per market. The average in January and February for Spain, France and Italy is higher than for the rest of the months due to 3 long term sickness/hospitalizations. With the purpose of defining the absenteeism behavior in the centre, we have defined long term sickness as longer than two weeks. The table below indicates that there are markets that have an absence rate quite below average while there are other departments that have very high rates and increase the general rate. For instance, the Exports team is below average for all months while the Germanics are marked red every month. There are markets that have a tendency to decrease such as the

French team and there are others such as the Nordics that are up and down constantly. In January and February there were 5 and 6 teams above average and in June, there are only two markets.

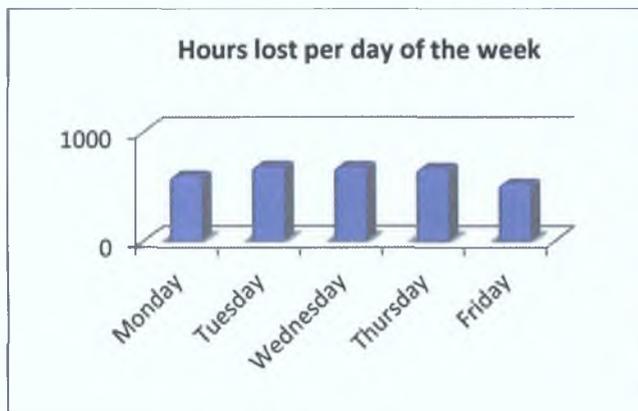
Percentage of time loss per market		*Marked red if above average				
Market	Jan	Feb	March	April	May	June
Benelux	4.55%	1.90%	3.25%	3.18%	0.60%	2.04%
Debits & Credits	1.74%	3.90%	0.83%	0.87%	1.52%	1.30%
ECE	0.00%	0.00%	0.00%	1.59%	0.00%	0.00%
Exports	1.24%	0.65%	0.11%	0.40%	0.54%	1.44%
French	9.79%	3.66%	0.76%	2.39%	2.78%	1.30%
Germanics	4.55%	3.36%	4.09%	5.59%	3.44%	2.91%
Italian	3.54%	10.05%	5.84%	1.36%	3.13%	5.95%
Nordics	0.91%	1.90%	3.45%	1.17%	4.08%	2.86%
Polish	0.00%	0.00%	0.00%	0.00%	2.03%	0.00%
Portugal	0.00%	0.00%	0.00%	2.39%	0.00%	2.38%
Spanish	14.17%	3.97%	3.12%	5.48%	2.69%	1.54%
UK & Ireland	0.44%	3.13%	0.08%	4.00%	3.99%	2.47%
Average per month	3.41%	2.71%	1.79%	2.37%	2.07%	2.02%
Percentage of time loss for the CSRs for the first six months of the calendar year = 2.97%						

The following chart identifies the type of absence being with a big difference short term absence the one with higher occurrence levels. As personal leave day we have included force majeure days, moving days and bereavement days which are paid. In some

cases, employees can request a career break or compassionate leave, both of them unpaid and the company would evaluate each case on an individual basis. Data analysis has shown that 72.5% of all the CSRs have been sick at least once over the last 6 months. This shows that even though the average absenteeism rate is not extremely high, the short term sicknesses are concerning spread across all the markets.



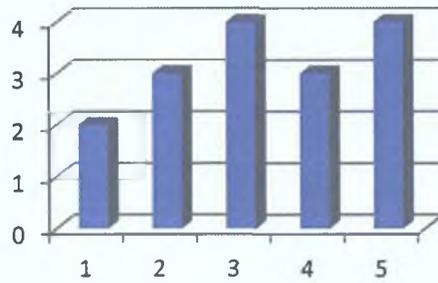
We have analyzed the trends in absence behavior for CSRs in the centre trying to identify any patterns in relation of days of the week. The two days with the lowest absence rates are Mondays and Fridays.



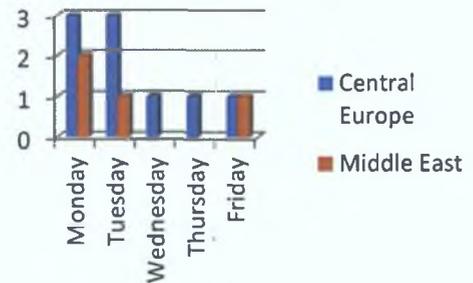
Hours lost per day of the week	
Day of the week	Hours Lost
Monday	588.8
Tuesday	676
Wednesday	671.5
Thursday	659
Friday	514
<b>Total</b>	<b>3109.3</b>

Looking into the specific departments we can identify different patterns but this must be carefully studied as there could be very small markets with not enough number of absences for the pattern to be significant.

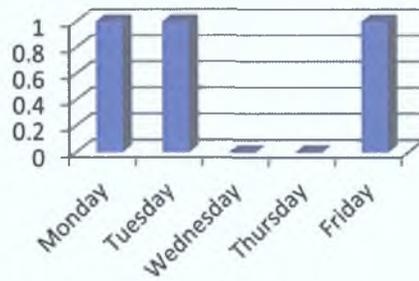
### Austria



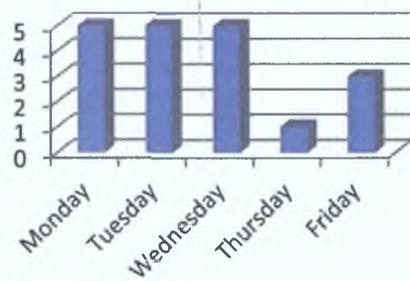
### Exports



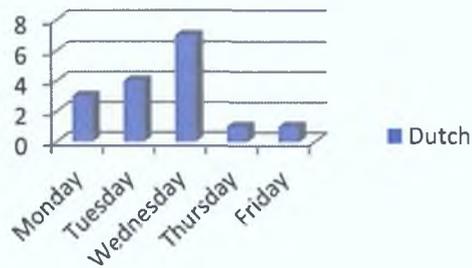
### Danish



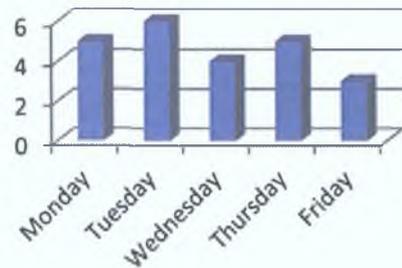
### Debits & Credits



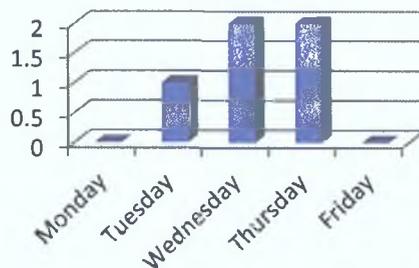
### Dutch



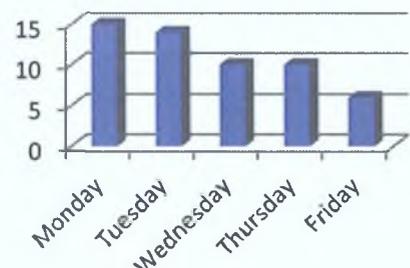
### English



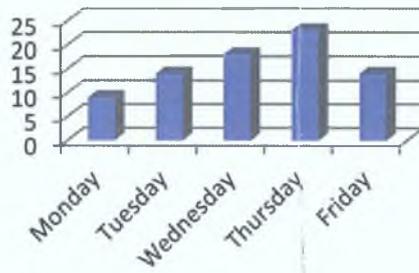
### Finnish



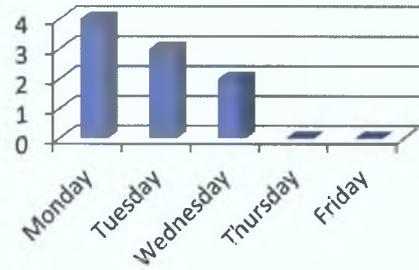
### French



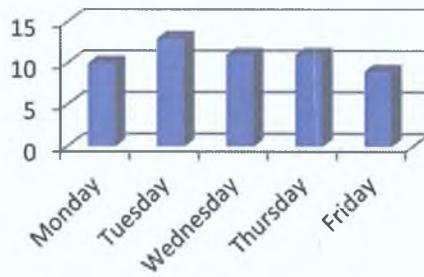
### German



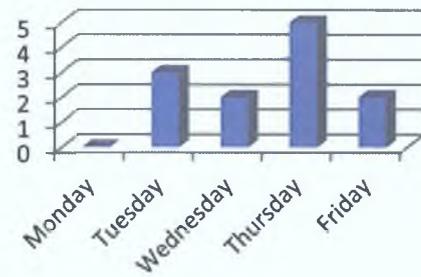
### Ireland



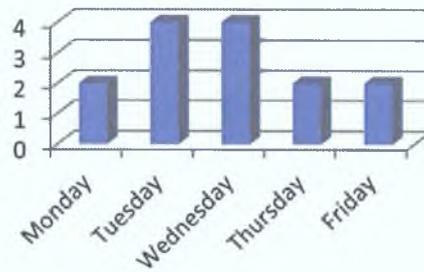
### Italian



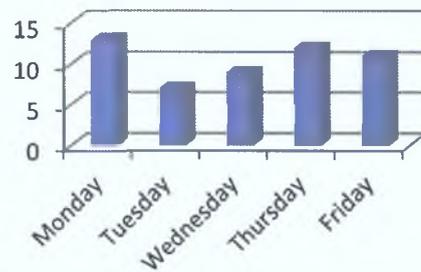
### Norwegian



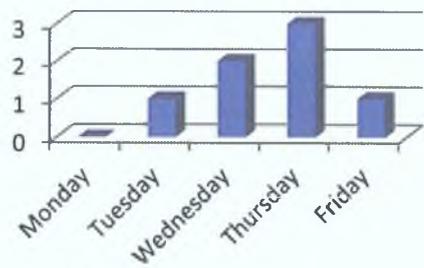
### Swedish



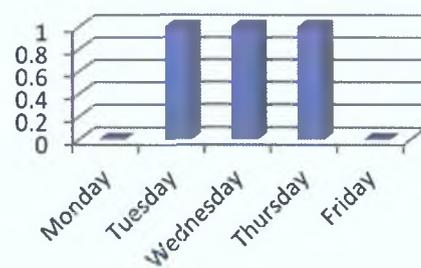
### Spanish



### Swiss German



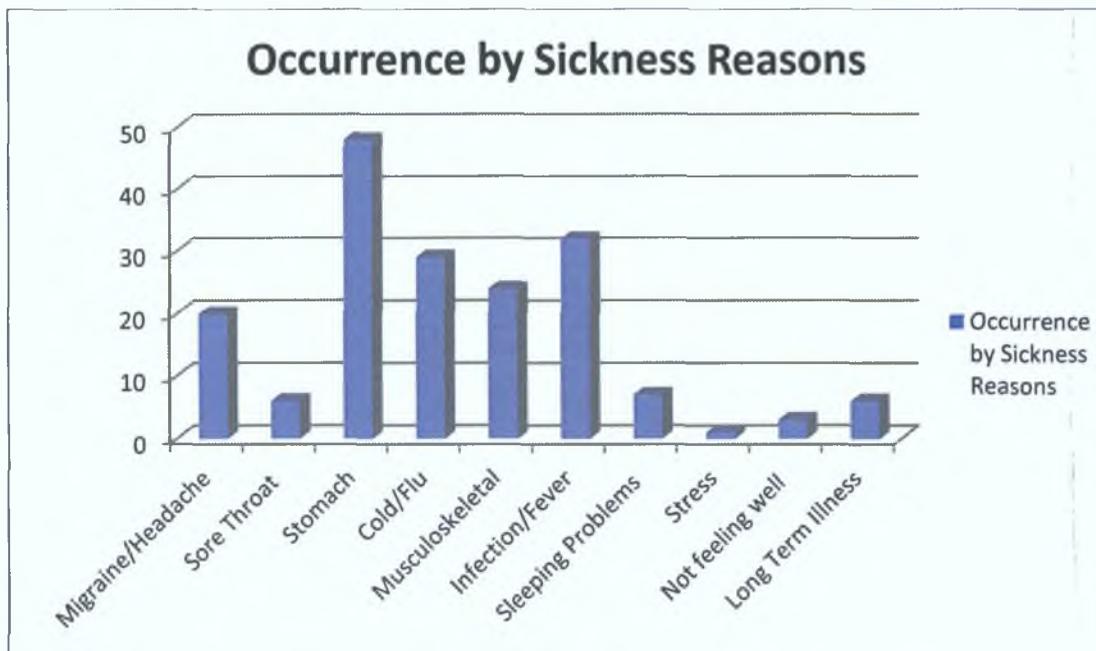
### Polish



There is a tendency in Austria to be more absent from Wednesday onwards being Monday the lowest day in absenteeism for this department. In the opposite way, in the Exports department there is a tendency to be more absent at the beginning of the week and it is quite remarkable.

There are some interesting patterns that could be highlighted such as the Danish market where all the absences are on Monday, Tuesday or Friday, the French market where they are very high on Mondays and decrease as the week goes by and this also applies to Ireland, and some middle week peaks such as in the German market, Finnish, Norwegian or Swedish. It is important for managers to be aware of these patterns to correctly manage these absences.

In order to analyse the absence behavior in the centre the HR department have been collecting the sickness reasons for the last six months indicated in the return to work interviews. The below chart indicates that there are 5 significant reasons for sickness and other ones with less impact but still important.



The most frequent absence reasons are in order of importance: Stomach issues, Infection/Fever, Cold/Flu, Musculoskeletal problems (back and wrist pain) and finally Migraine/Headache. There are other reasons mentioned such as sleeping problems or stress that would be subject to analyse. The fact that there are no specific responses complicates the analysis of reasons. This lack of specific information should be highlighted by team leaders when completing the return to work interviews. In many cases employees indicate that they have sleeping problems, musculoskeletal pains or stress and the origin is not investigated by team leaders who might just want to finish the paperwork rather than genuinely caring for their CSRs. Return to work interviews are not even completed at all times. The incorrect use of the return to work interviews by both parties might minimize the impact in absence management and it can impede a proper documentation of future disciplinary actions.

### **CSR Questionnaire (Appendix 3) Results:**

To be able to understand the absence behavior in any organisation an analysis of the data is essential however it shouldn't be used solely. Quantitative data analysis can give the HR department an idea of the trends or focus the attention into specific departments which could help to identify specific issues at a further stage. This analysis would not add the point of view of the employees. For instance, in our case study we wouldn't be able to make the assumption that there is an issue with the Verint time management system just by analysing absence records. To bring the investigation to a further stage, the feedback from employees is required. Because it is a very sensitive subject both for management and employees a confidential survey or in our case, a questionnaire would add the information required.

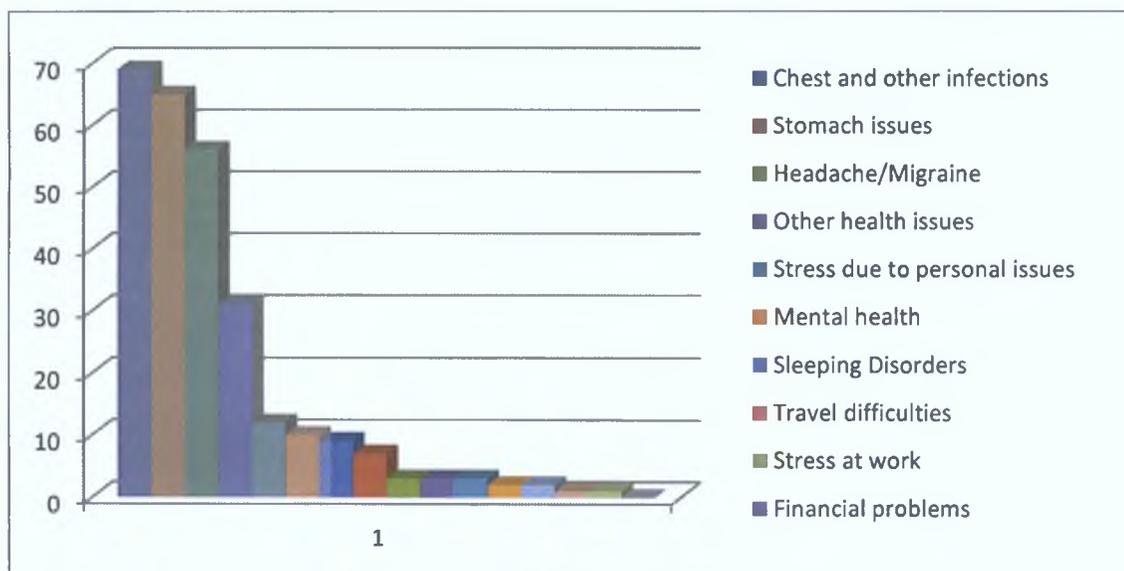
With the purpose of bringing to light information that wouldn't be previously acknowledged by management, this research carried out a questionnaire targeting Customer Services Representatives from all across the centre. The sample was selected randomly making sure the questionnaire was distributed in all the markets. The purpose of the questionnaire was explained personally by the researchers and carried out on paper allowing 1 hour for collection. It was a volunteer and confidential contribution from the CSRs and if they didn't want to complete the questionnaire they just had to return it blank. The questionnaire was completed on the same day in all departments and the day was selected on purpose being low in operational demands due to the summer season avoiding adding any additional pressure to complete the questions. Carrying out the questionnaire on a summers day had the previous advantage however there were less people targeted as it was holiday season.

The questionnaire had the purpose of adding the CSRs point of view to the research and for that reason it had some specific questions but it also had open ones so they could say anything they felt was relevant when talking about absenteeism. This questionnaire helps answering the research questions adding information about factors affecting absenteeism behavior.

The questionnaire had some control questions (gender, age, children/dependants, length of service, long term medical conditions), 4 open questions and 2 closed questions. The questionnaire targeted 86 people and it was answered by 74 of them which mean that it had 87% participation. This was an excellent result considering the nature of the subject.

The control questions help us describing the population that completed this questionnaire. From the 74 responses, 39 of them were females, 28 of them were males and 7 didn't select any of them. From the 39 females, 34 of them didn't have any children or dependants, 2 had at least one dependant and 3 didn't answer at this question. From the 28 males, only four of them had any dependants. From the non specified gender responses, none of them had dependants. From the employees with dependants, half of them mentioned fatigue and personal issues as their reasons to be absent from work. Only two of the total responses had long term medical conditions and the average days off sick in the last 6 months was very similar for both genders, 2.6 days for males and 2.3 days for females. In terms of the length of service, 47% of all responses had been in the company for longer than 12 months and 53% had been less than 12 months.

The second question in the questionnaire listed a number of reasons and the employees had to select the three most important for them. The following chart shows the results as per the importance given to the reasons. These results match with the ones from the rest of the questions and the return to work interviews however stress due to personal issues, mental health and sleeping disorders also appear in the results.



One of the factors reviewed in the literature review was the culture in the organisation. The culture defines what is important and accepted in the organisation and what is not, it also affects the employee attitudes. Personal attitudes and culture in the organisation are important when deciding whether to call in sick or not. If any organisation wants to affect those decisions in some way, they would need to know how employees make the decision of calling in sick. This was an open question in our questionnaire and the results were grouped in four groups: reasons related to the sickness

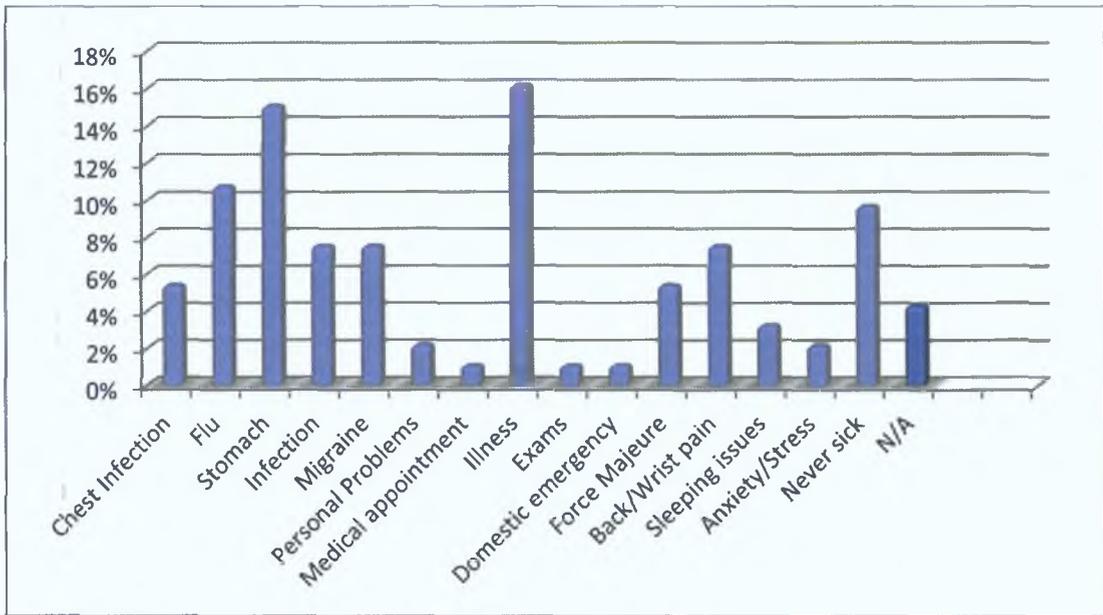
(72% of the responses), related to the company (13% of the responses), related to the team (11% of responses) and related to the person (4% of responses).

Reasons considered when calling in sick		
Feeling fit enough to get to work/perform well	50	Related to sickness
How contagious the sickness is	7	Related to sickness
If sickness would get worse	4	Related to sickness
if use of pain killers would help	3	Related to sickness
Money	4	Related to the person
Need of going to the doctor	1	Related to sickness
Negative impact of workload on my peers	10	Related to team
Negative impact on my employment/commitment to the company	3	Related to the company
Workload	8	Related to the company

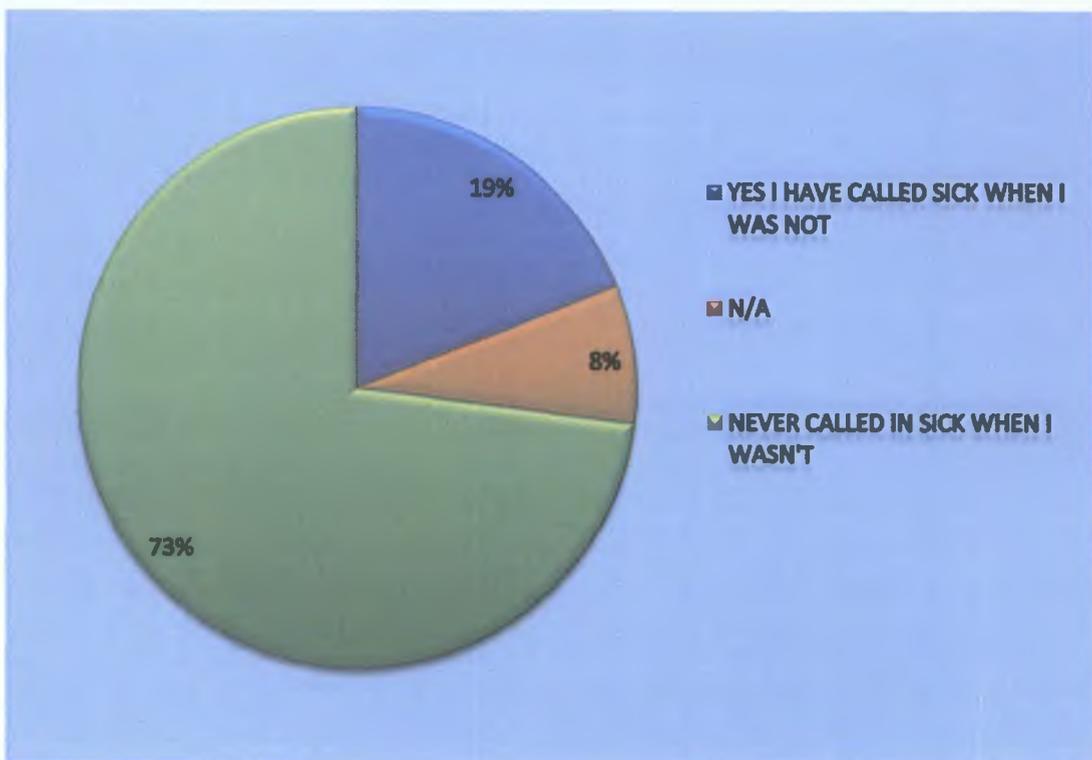
The previous results show that the employees are very much focused on their personal reasons and how they feel when calling in sick. The workload and the negative impact of the workload on the team are highlighted but not broadly. This is interesting as

it could highlight a lack of team involvement or teamwork in the centre. The negative impact of the sickness records in their employment is not very much considered which could be because they are not very engaged with the organisation. This is a feasible theory however it not supported by the results of the last question explained at a further stage in this paper where job engagement is not a highly important reason for being absent. It is interesting in the overall results on the previous question that there is certain effort to go to work even when they get up not feeling fully fit.

Based on the quantitative data analysis there were some reasons for absence extracted from the return to work interviews. With the purpose of investigating how genuine those reasons were, we asked the CSRs to list the reasons why they missed work. The chart below summarizes the reasons given being interesting the high amount of stomach problems, infections, anxiety/stress and migraine. There is a high amount of responses as illnesses. This is a very generic response given which could be analysed as not being genuine or employees don't feel comfortable disclosing details on their sicknesses. It is interesting that some employees mention personal problems as one of the reasons and this is something to consider when suggesting initiatives to improve attendance. Another remarkable reason given is force majeure. These absences could be improved by offering a range of work life balance initiatives. Finally, it is interesting that there are some reasons that could be considered related to stress if not stress itself: sleeping problems, migraine, anxiety etc. This could be related to personal issues or stress at work and it could be interesting also when proposing new initiatives to improve absenteeism.



The next question was very directly focused on the real reasons behind absenteeism in the centre. The question said: “Have you ever called in sick when you were not sick? If so, why were you not able to work on that occasion?”



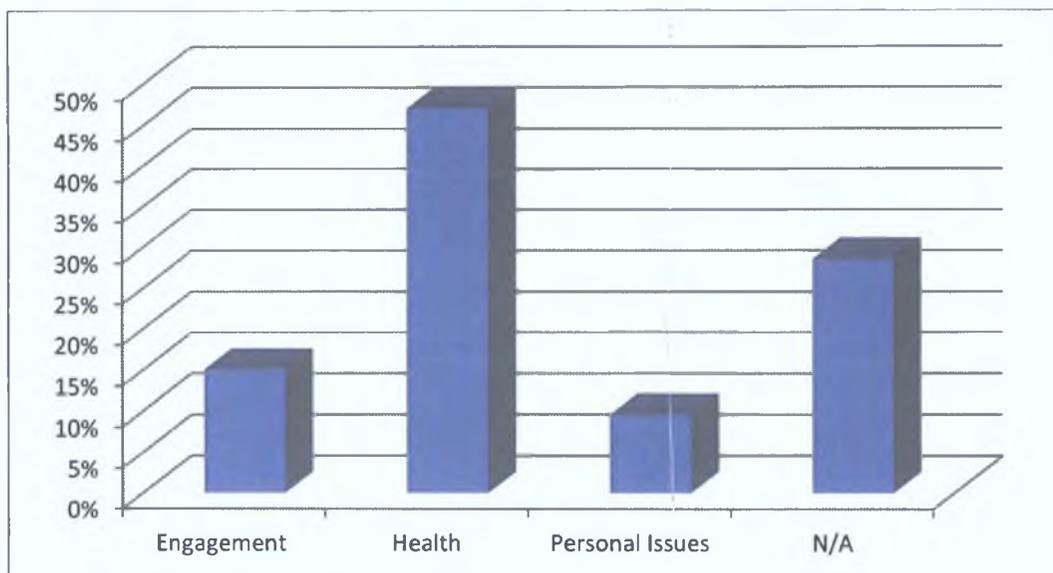
As per the previous chart, 19% of the sicknesses were not genuine. This is interesting as it is a percentage that could determine the target area of improvement for future years. There are always non-genuine sicknesses in all organisations as this paper stated previously in the literature review; however, this doesn't mean that it should be popularly accepted.

The last question was oriented to identify the main reasons for absenteeism and how the company could improve absenteeism levels. The question was as follows:

*Please mark with a circle the sentence that better reflects your experience*

- a) My attendance would be better if I was more satisfied with my job*
- b) My attendance would be better if my health was better*
- c) My attendance would be better if my personal issues improved*

The responses are clearly focused on health; however, there is part of the population that selected personal issues and job satisfaction as the main areas of improvement.



As expected considering the responses for the previous questions, health is the main area of concern followed by engagement and personal issues. There is a high amount of blank responses that could mean that they consider their attendance acceptable, or that there are other factors not listed that could improve their attendance. This second possibility is less likely as there was a comments box at the end of the questionnaire and no further mentions in any of the questionnaires.

#### **Interviews with Line Managers (Appendix 4).**

After reviewing the data resulting from the questionnaires carried out by CSRs, this research focused its attention on the line managers. We had collected the feedback from CSRs through different methods (return to work interviews and questionnaire) and now this research needed to acquire a different perspective, the one from the line managers. As proposed in the research methodology, the researcher waited until they had the information from the questionnaires to elaborate the interview questions for line

managers. In this way, the researcher allowed new information to come up unexpectedly and directed the research in a very flexible way.

There were five line managers targeted from different markets across the centre selected randomly. The first step in the interview was sharing the results from the questionnaires with them and then asking them some open and general questions. The questions were designed to be open so the line managers could understand the data presented to them and add their point of views. More specific questions wouldn't have suited our research philosophy and methodology as we would be limiting the information that line managers could give us.

The first question was "What are the main factors that in your opinion affect absenteeism?" The reasons listed included health, family/personal problems, motivational factors, paid sick days and attendance policies, lifestyle and contextual factors in the office (culture, relationships, time off availability).

The second question was "Is there anything you would do to improve attendance? What is your feedback in relation to attendance policies?" There were varied comments to this question. The first comment was related to implementing a clause in the attendance policy that would ask employees to bring a medical certificate from any sickness from day one. There were two responses supporting this initiative and three not supporting it. Three of them thought it would decrease the level of performance as it would promote employees attending work while being sick. All of the line managers agreed in introducing some sort of condition that would avoid abusing the policies in specific for the paid days. Some of the proposals included considering long term and

short term sickness under different conditions, reducing the amount of paid days to 10 per year and using the Bradford factor to manage absenteeism and not to pay sick days if this factor is over a specific limit. It was highlighted that any standard must be clear and easy to implement so it would force consistency in the implementation by team leaders.

The third question was about the team leaders understanding of the return to work interviews and more specifically, how they manage personal problems as a reason to be absent. The question was “What actions would you take if an employee tells you they are absent because of personal reasons?” All of them agreed that very rarely had this case in the past and they all would ask for details to identify the issue and evaluate possible ways to help the employee. All of them knew that there is an Employee Assistance Programme available for employees and the services provided but they never offered it to any employee in the past.

The last question was a generic question to make sure any feedback was collected and it said “What are the main areas that you would highlight based on your experience in absence management?” The main area mentioned was the proper use of return to work interviews. They all agreed that they should be performed as soon as the employee is back to the office, that they are used to make sure the employee is fit to work and to allow a two way communication discussion caring for the employees health. Line managers mentioned that it is very important as part of their responsibilities to find trends on the absence rates and in one case it was highlighted that there was no clarity on the warning process and the triggers for the disciplinary process start.

## DISCUSSION

The quantitative data analysis of the last six months shows a difference across the centre between markets. There are markets such as Germanics, Spanish and Italy that were above the average for four months or more. In Italy (two months) and Spain (one month) there are two separate long term sicknesses which increase significantly the average of those markets. Interestingly these are three of the five biggest markets in the centre. As mentioned in the literature review, sometimes big departments have the higher absenteeism rates as the employees know the workload will be spread and their absence will not have a negative impact on their peers. This assumption could be argued with the results from the questionnaires that show that only 11% of the respondents considered the team when calling in sick. There seems not to be any specific trends across the months however it would be interesting comparing this data with the summer months as there could be a trend of increasing absences.

Even though there are no specific patterns in the day of the week for the whole centre, there are some trends in specific markets. This is an interesting detail to take into consideration for absence management however the size of the team has to be taken into consideration. It wouldn't be the same analysing the days of the week trend in a 10 person team with multiple events of sickness, than in a 2 person team where there were only two events of sickness.

It seems clear that the vast majority of the absences are due to short term sickness and more specifically, to 1 or 2 sick days and this is the reason why some line managers would like to implement the medical certificate from day one. Even though there is a very

high amount of short term sickness in the centre which could make the researchers think that they can't be all genuine, the responses from the questionnaires show that most of them are genuine. There is an absence reason given in the questionnaires that doesn't appear in the return to work interviews, the personal issues. This shows that in some cases employees don't feel confident disclosing the reasons behind their absences with the managers. This could also explain why some employees just give non specific answers or no answer in relation to their absences. Could it be the case that the relationships between line managers and employees have to be looked after? Could it be a trust issue between company and employees? It could be the case, however the responsibility of establishing good trusting relationships with employees is not completely held by line managers. Any message that the company sends directly or indirectly, through verbal communication or the company policies could affect this relationship. Line managers are often seen by employees as representatives of the company but the employees receive more inputs in the context of the organisation that could determine their attitudes.

From the results of the questionnaires there seems to be an important concern about health issues followed by engagement levels and personal issues. This information must be taken into consideration when proposing new initiatives as any amendment in the policy that shows a lack of trust, could result in lower levels of engagement and have a negative impact either on absenteeism or attrition rates. There is an evidence of personal issues that should be also acknowledged. Are we offering enough support to employees in this regards? It is complicated as employees are not disclosing directly this information to their team leaders but resources such as the Employee Assistance Programme don't

seem to be offered by line managers. Could it be the case that line managers view of return to work interviews is just paperwork to complete and they don't ask for too many details of the absence in it? This could be a theory that would be backed by the reduced amount of details on the return to work interviews or the lack of analysis done by team leaders. There are no questions being asked by team leaders in relation to the assistance that the employees need so as not to be absent again. For example, there are back and wrist pain absences but team leaders are not trying to arrange an ergonomics assessment for those employees. Another example is absence reasons that could be stress related such as migraine or sleeping disorders. Line managers are not proactively enquiring about the reasons behind these health issues.

Absenteeism rates are not extremely high in the centre but short term sickness is very widespread in the centre. There would be an opportunity for the company to reduce those short term sicknesses. One of the reasons is because 19% of those sicknesses wouldn't be genuine and assuming that they are genuine, short term sickness could be reduced with healthier life styles. What must be acknowledged is that even when an employee is not being genuine with the reason behind their absences, still there is a reason.

Absence management is not done just by having appropriate policies in place. Absence management is the result of different elements that could include also processes, communication and culture in the organisation. As there is not just one owner for absence management it makes it a complex matter. Being able to provide employees a cohesive and coherent message in a consistent way across all the markets is difficult but important but personal differences must be taken into consideration too. There is not just one

solution for absence management but constant reviews must be done This paper shows the process that any organisation could follow when reviewing attendance in the workplace and it is a key element to be able to implement positive initiatives to address specific issues

## **RECOMMENDATIONS**

After the information previously stated we could say that the absence behavior in Covidien Services Europe is in better shape than many other contact centre organisations in Ireland. There are many positive areas already highlighted however there are also areas where some development could be done. The majority of the absences are due to short term illness which could be greatly affected by modifications in the policies and the environment (CIPD, 2006). This paper would like to propose a number of initiatives that could be implemented.

### **Introduction of a Healthy Life Style programme**

When employees are not healthy they can either miss time from work or have a poor performance in their work due to low energy or difficulties in paying attention to what they are doing. As this research has shown previously it could even affect stress levels and sleeping at night. Absence and health related issues in the workplace are a high cost for any organisation. For that reason and to show genuine care for employees, organisations should support employees having a healthy lifestyle. More often more organisations offer Lifestyle programs for employees as part of their benefits. The services included are varied but they could be grouped in physical activity promotion, healthy eating and general health and wellbeing. As part of the new initiatives proposed to better manage absenteeism in Covidien, this paper would suggest introducing a new healthy lifestyle programme for employees. The different activities included could be decided by a focus group created for this project. Covidien already offers some benefits

such as ergonomics assessments, medical insurance or massages for relaxation but a more comprehensive programme would ensure better results not just in the health of the employees but establishing a trusting relationship too.

### **Amendments on the attendance policy**

As part of the new implementations this paper would recommend two changes in the attendance policy. The first one would be related to the pay leave and the second one is related to absence management as such.

The attendance policy states that the employees are entitled to up to 17.5 paid sick days per year between the 1<sup>st</sup> and the 3<sup>rd</sup> years, 20.5 sick days between the 3<sup>rd</sup> and the 4<sup>th</sup> years and so increasingly with the length of service. This entitlement starts with the first anniversary of service in the company and renews its entitlement by the same date every year. As a result, there might be employees that have had high records of absenteeism using more than the paid entitlement, and after the due date they are entitled to the previous amount of days so the company has to start paying for the sick days again. This fact makes absence management quite difficult in cases of frequent absences especially when they are short term sicknesses in different months as the data shows. This paper would suggest amending the policy making the previous entitlement of paid days for “any 12 rolling months”. In this case, employees that have been sick frequently in different months would have to be sickness free for a period of time before they are paid again for any sick leave. Team Leaders would need to look back for 12 months every time that a CSR is out sick and depending on if they have exceeded or not the entitlement, processing the leave in the system as paid or unpaid.

The second implementation is focused on the number of incidents in a period of time. There should be a specific grievance procedure for employees with a high amount of sickness incidents. This could be done through the Bradford factor calculation or simply by implementing verbal/written warnings and dismissal by a specific amount of sickness incidents in a period of time. This procedure should be stated in the absence policy and be available for all employees to be informed. A possible benefit of using the Bradford factor would be a reduction in the sick paid days if this factor gets to certain levels.

The purpose of these implementations is to reduce both the amount of sickness days and the amount of incidents. Because most of the absences in the centre are due to minor illnesses, these amendments in the policy should have an impact in the levels of attendance.

#### **Attendance and Return to Work Workshops with Team Leaders**

After reviewing the comments from the TLs and employees we noticed that there are many differences in the return to work interviews. In many cases the reasons provided by employees for the absence were not specific at all. An example would be “I didn’t feel well”. In other cases, employees provide absence reasons such as “I didn’t sleep well last night”, “stress” or “back/wrist pains” and TLs do not enquire about the reasons behind them. If TLs know the reasons behind the absences, they are able to offer different resources for employees such as ergonomic assessments or the employee assistance programme (EAP). The EAP could be a good resource to offer to those employees that answered in the survey that their attendance would be better if their personal issues improved.

Return to work interviews should be a two way communication tool where employees' needs are heard. If there is good communication, employees would feel the company really cares for their health or personal situation.

### **Promotion of Work-Life balance**

As the data collected shows there are employees whose attendance could be better if their personal issues improved. In the cases where employees had children/dependants, fatigue was mentioned as a reason to be away from work. Implementing policies such as flexi time or part time working could improve not just attendance rates but also engagement and performance. It is important to take into consideration the indirect messages that the company sends to employees through the policies and procedures in the workplace. Showing genuine interest for their work-life balance and their health is a must to maintain a positive environment and to keep employees engaged.

## CONCLUSIONS

The analysis of the previous quantitative and qualitative data has highlighted the most important factors that affect the absenteeism behavior in Covidien Services Centre. We could say that collecting the most adequate data to understand absence in the workplace is the first step in absence management. Engaging senior management is essential but complex as normally they are more focused on the results than on the analysis process. We have to mention that it is important going to the front line employees to collect their feedback but it is interesting to hear the feedback of middle and senior management too as they can add a broader vision of the subject that could help us focusing the research on the most relevant factors. Collecting qualitative data could sometimes bring up interesting areas of development but some level of compromises and sometimes drastic changes are necessary.

The process of analysing absence to develop further management initiatives seems to be clearly focused on the collection of information from different sources. However this process is complex due to the nature of the subject. Sometimes employees don't feel comfortable disclosing information about their absences even if they do it in a confidential manner.

Once the areas of improvement have been identified and new initiatives implemented, a continuous reviewing process is needed to monitor the results and make amendments if necessary.

The research carried out in our case study has identified areas that could be improved for a more comprehensive absence management. Even though absence rates are

not above the average of the industry, there are specific departments that have higher absence rates than others. Having absence policies that allow managers to manage this behavior in a coherent way across all departments could reduce absences in the centre and in the previous specific departments. To make sure all employees have the same experience of the absence policies and procedures, line managers must be trained on absence management and possibly join workshops to review their experiences.

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## **APENDIX**

### **1) Benefit Summary**

## Your Benefit Summary

### Standard:

#### Your Basic Salary

Total earnings representing one calendar year. Please note that salary increases are awarded annually from 1st January and is performance related.

Your	Annual	Bonus	Potential
12.5%			

Current structure based on LAIP bonus plan set at 12.5% of basic salary. (Amount will vary in accordance with annual salary increases.)

#### Your Life Assurance

3x salary

The Company provides all employees with Life Assurance cover (death in service). This amounts to 3x basic salary. Due to this standard benefit – many employees do not take out other life assurance cover, which provides a saving.

#### Your Holiday

34 days

You will receive 34 days annual leave per calendar year. Up to 5 days may be carried forward to the following calendar year. (Amount will vary in accordance with annual salary increases.)

#### Your Ergonomic Assessment

All new employees are ergonomically assessed at their workstation to ensure they are working comfortably & safely. Eye tests are also conducted and referral made should corrective lenses be required for VDU.

#### Your Share Save Scheme

The Company invites new employees to buy Covidien shares and matches 15% of contribution made.

#### Your Employee Assistance Programme

All employees have access to a confidential 24 hours support service provided by Quinn, offering total life support 365 days a year.

Your	Employee	Referral	Scheme
€1,000.00			

Should you refer a friend or acquaintance in connection with a vacancy and the Company successfully employs them. You have the possibility to receive a reward of €1,000 for making the referral.

### Optional:

#### Your Private Medical Insurance

Quinn Healthcare cover is offered to all employees and is available from the day you join the Company.

#### Your Pension Scheme

4%

All employees may join the Company pension scheme. If you join the scheme 4% of your salary is invested and matched by the Company on your behalf and is available from the day you join. (Amount will vary in accordance with annual salary increases & service.)

#### Your Sports & Social Club

€5.00

All employees may join the club for €5 per month deducted from salary. As a member you may enjoy local & company event discounts.

## 2) Return To Work Interview Template



### RETURN TO WORK MEETING

The team leader or line manager completes this form in conjunction with the employee immediately on their return to work from sickness absence.

Market / Dept: \_\_\_\_\_ Manager/Team Leader: \_\_\_\_\_

Name of Employee: \_\_\_\_\_ Date of Meeting: \_\_\_\_\_

Yes / No

Please tick relevant box: Was absence 3 days or more?

If **yes** doctors sick cert is required (please attach)

Yes / No

Was a MC1 form completed for this absence?

If **yes** copy of MC1 form is required (please attach)

Date of first day of absence: \_\_\_\_\_ Date of last day of absence: \_\_\_\_\_

Date employee back to work: \_\_\_\_\_ Number of Days Absent

=====

The purpose of this discussion is to make you aware of your recent day(s) absent and the importance of good attendance. The health and welfare of every employee is of concern to the Company. If there is any particular issue causing your absence please do not hesitate to bring it to our attention. We will do our best to assist in whatever way we can. However, you must be aware that any absence does cause disruption to our Company activity and to your working colleagues/team.

**Employee section to complete**

Please give Reason/Explanation of Absence (please be as specific as you can)

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Additional Employee's Comments (if any) \_\_\_\_\_

**Team leader or manager section to complete**

Team leader or Manager Comments \_\_\_\_\_

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Recommended Action by Team Leader or Manager \_\_\_\_\_

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

Line Manager \_\_\_\_\_ Date \_\_\_\_\_

**Next Step** Please submit to HR attaching any medical certificate where applicable to be kept on file

### 3) Absence Questionnaire

The purpose of this questionnaire is to understand better the absenteeism behavior of employees in Covidien Cherrywood and factors related to this behavior. This questionnaire is totally confidential and your opinion on this subject is highly appreciated.

Gender Female/Male  
 Age 18-25 / 25-30 / 30-35 / 35-40 / 40+  
 Diabetes) Yes / No  
 Service in Covidien Less than 6 months / 6-12 months / 12 months-24 months / More than 24 months  
 Position  
 Children or Dependants Yes/No  
 Long Term Medical Conditions (Ex  
 Temp / Perm

- 1 How many absence days (sickness or personal leave) have you had in the last 6 months? Were those days paid or unpaid?
- 2 Could you rank the four more relevant reasons for absenteeism in your case from 1-4 and the four least relevant from 5-8 in order of importance being 1 the most important and 8 the least?

Headache/Migraine	Stress due to personal issues	Conflict with your colleagues	Travel difficulties
Stomach issues	Stress at work	Job characteristics	Drugs/drinking Disorders
Chest and other infections	Financial problems	Work-life balance difficulties	Ethical Conflicts
Sleeping Disorders	Conflict with your team leader	Mental health (Depression, Anxiety etc)	Other health issues

<p><b>3 When you are not feeling well and you have to decide whether attending work or not, what factors do you take into consideration before calling in sick?</b></p>
<p><b>4 Please list below the reasons that you have missed work in the past 12 months</b></p>
<p><b>5 Have you ever called in sick when you were not sick? If so, why were you not able to work on that occasion?</b></p>

**6 Please mark with a circle the sentence that better reflects your experience**

- d) My attendance would be better if I was more satisfied with my job
- e) My attendance would be better if my health was better
- f) My attendance would be better if my personal issues improved

**Comments\***

**4) Interview Line Managers**

**Interviews with Line Managers**

**1) What are the main factors that in your opinion affect absenteeism?**

**2) Is there anything you would do to improve the attendance policies? What is your feedback in relation to the attendance policies?**

**3) What actions would you take if an employee tells you is absent because of personal reasons?**

**4) What are the main areas that you would highlight based on your experience in absence management?**

## **ILLNESS**

### **Sickness Payments, Procedures (Contractual) & Social Welfare**

The purpose of the sick pay scheme is to alleviate personal hardship experienced by employees who are absent from work due to sickness. The scheme is designed to supplement the social welfare system (Illness Benefit) and each employee is responsible for availing of any social welfare entitlement. Company Sick pay is a benefit and not an automatic entitlement.

Payment by the company will be such that when combined with social welfare payments it will be the same as a normal week's net pay. A normal week's pay is basic pay. Overtime is not included. Social welfare and Company sick pay scheme will not pay for the first 3 days of every sickness absence. Employees are expected to claim social welfare payment by completing a MC 1 (blue) social welfare form that will be signed by their doctor, and sending it to Social Welfare.

During a prolonged spell of absence, one of these is required to be completed every week by your doctor and sent to social welfare. When the sickness absence is over, an MC2 (yellow) social welfare form must be filled out by their doctor and sent to social welfare. This will cease social welfare payments. The Company will apply a standard amount of social welfare when calculating the amount of sick pay applicable. Anyone who has a different amount to the welfare standard amounts will be handled on an exception basis.

## The Scale

The following will be the maximum benefit from the sick pay scheme in a rolling 12 month period

Service			Actual Days Paid
Under 1 year	Nil	Nil	Nil
1-3 years	15 days @ 100%, 5 days @ 50%	4 weeks	17 5 days
4-6 years	18 days @ 100%, 5 days @ 50%	4 weeks, 3 days	20 5 days
7-9 years	20 days @ 100%, 5 days @ 50%	5 weeks	22 5 days
10-14 years	22 5 days @ 100%, 5 days at 50%	5 weeks, 2 5 days	25 days
15+ years	25 days @ 100%, 5 days at 50%	6 weeks	27 5 days

## Medical Certification

## Sickness absence-reporting procedure

Any employee out sick is expected to provide a sick certificate to the supervisor on or before the 3rd day of absence. These will then be stored confidentially. The medical certificate should include

- Name and address of Doctor
- Name and address of patient
- The opinion of the doctor that the patient is incapacitated due to an illness or accident
- The nature of the illness
- The expected duration of incapacity
- The date of issue
- The doctor's signature (not just a rubber stamp)

This information will be treated confidentially. Follow up certificates should be provided on a weekly basis. In the case of hospitalisation this may not be practicable but these situations will be dealt with on an individual basis.

### **Hospital Stays**

If you are to be admitted routinely to hospital, you should make this fact known to your Team Leader/Manager prior to your admission. You will then be advised of any Company procedures that you will be required to follow.

### **Staying in Touch Whilst Out Sick**

In order to ensure correct cover can be organised for a team during a sickness absence, an employee must speak personally (not leave a message) to their supervisor or Team Leader/Manager, ideally prior to the start of their shift, but not later than one hour after the shift start.

If your Team Leader / Manager is not in, you must contact his/her Line Manager. If they are not available then contact HR. If you get voicemail please leave a message and a contact number where they can reach you if necessary and you will be contacted as soon as possible. If your contact number changes in the future please update your record in HR.

For a prolonged absence of a week, or more, the employee must keep in touch with their Line Leader / Manager weekly by phone. This will allow the Line Leader / Manager to know how long the employee will be out and what contingency plans need to be made on the team. There is also the opportunity for the Line Leader/ Manager to provide assistance if required.

### **Scheme Rules & Conditions**

- Length of service is calculated from actual start date with the Company
- Payment will always be reviewed at 15 days for any employee. Further payment may only be made if the following specific criteria are met. However, this further payment is not automatic and is subject to management review.
- Employees must have at least one year's service with the Company and must have an absence level of less than 10 days absence in the previous 12 months rolling year to be eligible.
- Payment of sick pay is subject to the correct reporting procedures having been followed and submission of all appropriate certificates.
- The Company reserves the right to suspend sick pay payment if it is considered that the scheme is being abused by any employee e.g. not following the rules of the scheme or if they have an unacceptable level of absence.
- The Company reserves the right to refer an employee to the Appointed Company Doctor at any time. It is expected that the employee will co-operate with the Appointed Company Doctor.
- The employee must continually co-operate with the Company and Appointed Company Doctor as required and follow the rules of the scheme.
- Abuse of the sick pay scheme, failure to follow the rules of the scheme or unacceptable levels of absence may lead to disciplinary action following the company discipline procedure, up to and including dismissal.
- Any employee in the disciplinary process for their absence level or for failure to comply with reporting rules will not be entitled to sick pay for the duration of their disciplinary action i.e. while on a verbal warning, written warning or final written warning.

### **Return to work after a Sickness Leave**

Upon return to work after any absence employees must contact their Team Leader / Manager before recommencing work

### **Return to Work Interviews**

It is Company policy to conduct return to work interviews following any period of absence. These will normally occur on the same date the individual returns to work. They will be conducted by your Team Leader/Manager and the interview will be documented and retained.

The company reserves the right to request a 'fitness to return to work' certificate from employees following absence. This will automatically be expected if an employee has been in hospital, had an operation or had a serious accident. This is to ensure that the return to work does not negatively compromise an employee's recovery. In the event of an employee receiving a compensation payment for an illness or injury, it is a term of this scheme that the employee must reimburse the company any monies paid out under the terms of the sick pay scheme.

### **Work Accidents**

Absence from work due to accidents at work will be treated as normal sickness absence in relation to reporting absence on a daily and weekly basis. The first 3 days, however, will be paid upon investigation but the company reserves the right not to pay. Every case of accident leave pay will be dealt with on an individual basis. The following conditions must be met for payment:

- The accident must be reported immediately to your Line Manager or onsite H&S. The accident must not have been caused through carelessness or neglecting to follow safety rules. The employee must co-operate with the Company and Company appointed representative as required.
- Payment of sick leave due to an accident at work is not an admission of liability by the Company but it recognises that the employee is in a time of need.

### **Review of Sick Pay Scheme & Policy**

In operating the scheme, the Company hopes to balance its commitments to support employees who are absent and unable to work, and, at the same time encourage regular attendance. The basic expectation of all employees is that they are in work every day on time. The sick pay scheme will be reviewed when appropriate and the Company reserves the right to change its terms and conditions at any time, particularly in the event that absenteeism levels increase.

### **Long-Term Sickness**

Employees absent for periods in excess of 4 weeks will be reviewed on a regular basis through Human Resources. However, employees may be reviewed before this time if it is felt necessary or helpful.

### **Illness of Family**

In circumstances where it is essential for an employee to remain at home or in hospital because of serious illness in the family please refer to the Force Majeure Policy available from Human Resources for further detail.

### **Leave of Absence**

It is recognised that there are certain times when you may need to be absent from work. You are required to follow the procedures set out below, as any absence that has not been approved or notified to the Company will be regarded as unauthorised absence, which will be unpaid and may result in disciplinary action being taken.

### **Medical Appointments**

This procedure only applies to Doctor, Dentist and Hospital appointments or for Well Person Clinics, which are only open during normal working hours. Time off is not normally given for Chiropodists, Opticians, Family Planning or private medical examinations.

Employees must make appointments in their own time. However, if this is not possible time off up to 2 hours maximum may be allowed providing the following procedure is followed

- Present an appointment card as soon as possible to your Team Leader/Manager
- The appointment time must be kept to a minimum. Any appointments exceeding the 2 hour limit will be recorded as sickness absence
- Employees undergoing physiotherapy treatment must report to the OHD prior to their first appointment for a fuller explanation of procedure and for signing out

All appointments should be made outside of work where possible or at the beginning or the end of a working day to minimise the disruption caused

Time off for emergency appointments is at the discretion of the Team Leader/Manager and Human Resources and unreasonable requests may be refused