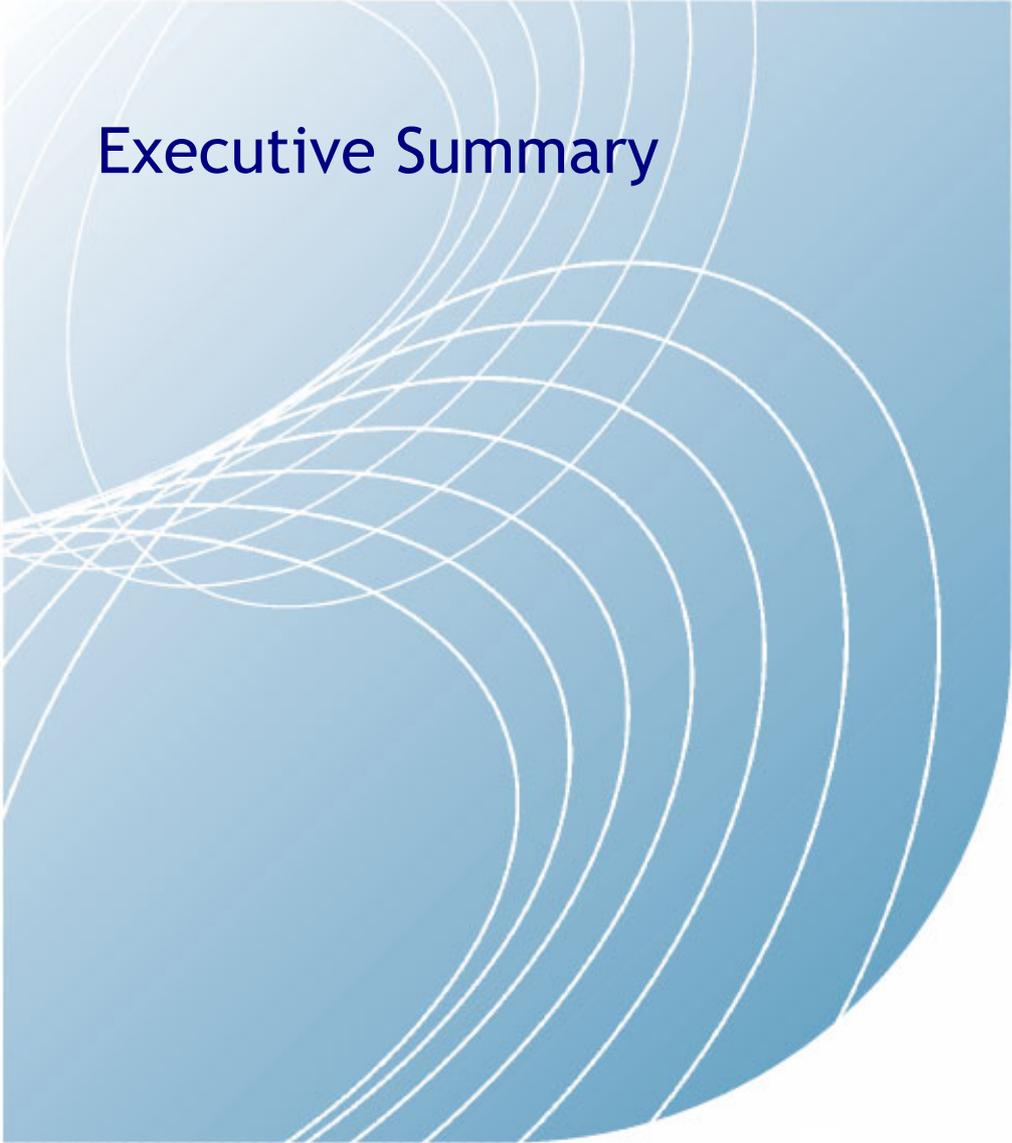

Scoping the Development of Work and Cancer Support for SMEs

a report prepared for *Macmillan Cancer Support*

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Executive Summary

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*National Cancer
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Executive Summary

Macmillan commissioned this scoping research with small and medium-sized enterprises (SMEs) to identify the challenges particular to smaller businesses who are managing employees affected by cancer. The aim was to provide an evidence base to determine what Macmillan can do to help SMEs and how this might differ from what they currently, or plan to, offer large employers.

The work was conducted using in-depth interview methodology. A total of 35 employers were involved in the study all of whom had some experience of managing people affected by cancer. The sample was inclusive of micro, small and medium-sized businesses operating in a range of sectors. Interviews with 14 professionals who work closely with small businesses ('intermediaries') were conducted to obtain views from a broader, expert perspective.

This executive summary presents findings from the study that may be useful for employers and professionals dealing with long term conditions and sickness absence. This information may also be of interest to non-specialists wishing to learn more about the potential impact of cancer in the workplace.

Managing health, well-being and absence in SMEs

The study identified a number of potential benefits that small and medium-sized enterprises (SMEs) are able to offer employees with health-related problems. In particular, the 'family mentality' often seen in smaller companies can provide a supportive environment for a member of staff dealing with a long-term illness. Sharing information with an employer about personal circumstances may also occur more naturally than it would in a larger organisation.

However, SMEs can struggle with managing absence and health issues in a general sense, particularly aspects that benefit from having relevant experience and expertise to draw upon. The smaller the business the less likely it is to offer any formal occupational health (OH) provision, either in-house or outsourced. Also within some smaller SMEs the function of OH professionals and services is not well understood. Similarly, businesses that are too small to have an HR team or specialist HR professional can find responding to issues such as long-term absence difficult; managers in smaller companies without a specialist HR function can find it challenging to balance their other responsibilities with managing issues around health and absence.

Many smaller businesses operate in relative isolation and have few points of reference when approaching scenarios with which they are unfamiliar. In contrast with large companies whose staff can consult with a head office or other branches, contact between SME managers and the wider business world can be limited to day-to-day contact with a small number of clients and suppliers. As a result there can be limited opportunity for managers within SMEs to update their skills or become aware of sources of support.

The above factors can lead to a typically reactive approach to absence and health issues within SMEs: many do not have policies in place that they can bring to bear on health or absence issues and they respond to individual cases on an 'ad hoc' basis. Few of the SMEs who participated in the IES study had taken decisions with reference to an absence policy or any other policy.

Experiences of SMEs who have managed employees affected by cancer

In a survey of SMEs linked to the study 16% of employers reported having experience of managing an employee affected by cancer directly while 11% of employers reported managing someone who had cared for someone with cancer; 24% reported experience of managing one or both of these scenarios.¹ These figures would indicate that a significant proportion of SMEs managers will be required to manage someone affected by cancer during the lifetime of their business.

SMEs can offer some advantages when employees need to talk about their illness; the more personable approach of some SME managers can help conversations go well that may otherwise be difficult. The majority of the employers participating in the study were satisfied that they handled difficult conversations well, such as those around disclosure of the employee's illness. SMEs also tend to approach absence management more informally than larger businesses. Where there are close relationships between managers and their staff, the process of keeping in contact can often reflect genuine concern for someone who matters to them.

The flipside to the caring 'family' mentality of many small firms is that a colleague's illness or death can have an emotional impact on the entire workforce. Even when an employee has been too ill to attend work for some time the knowledge that they are in the final stages of their illness can be difficult for close colleagues to deal with. An instance of cancer can affect a relatively high proportion of the total workforce on a professional as well as an emotional level. Employers who were interviewed frequently referred to impact on other workers who may be affected by an increased workload and/or a change of duties.

Many employers wanted to do the 'right thing' and had a genuine desire to help the affected employee remain in work productively. However, some can find it very difficult to get the balance right between supporting the employee and making decisions that are in the interests of the business. The cost of long-term absence is difficult for many SMEs to absorb and it is not always viable for them to hold a job open for an unwell member of staff. Also the inconvenience of unpredictable absence can have a disproportionate effect upon staff in small organisations due to their size.

Intermediaries felt that SMEs can fall down on managing return to work following absence as this process is best handled expertly. Also some employers may be uncomfortable with someone coming into work who is not fully fit. There is a risk that

¹ BDRC Business Opinion Omnibus Survey (October/December 2011)

in wanting to help a person stay working through cancer, employees can 'flounder'. The absence of policies which can be applied to employees who have cancer or develop other long-term health conditions can further compromise decision-making for managers who are affected by an employee's situation on an emotional level. For example, there was a concern among some managers that taking a decision to hire temporary staff to manage absence could signal to an employee that they were not expected to recover. Having a policy to refer to can help demonstrate to an employee that decisions are being made on a business rather than a personal basis, and that they are not related to subjective opinions about their health status.

SME employers tend not to be familiar with sources of support or advice that might facilitate the implementation of suitable adjustments, such as Access to Work or the Department for Work and Pensions (DWP) Health for Work Adviceline (or its equivalents in Scotland and Wales). Intermediaries also held the view that small employers may not be aware that people can be assisted inexpensively and without compromising the operation of the business. Among employers who had sought help, there was a tendency for them to seek advice from 'trusted sources' who they may have consulted in the past in regard to non health-related scenarios, such as solicitors specialising in employment law, Employers who reported accessing support cited Acas, the Federation of Small Businesses (FSB) and the Health and Safety Executive (HSE) as sources.

None of the SME managers involved in the study were able to draw on relevant training they had received and did not see training as a viable solution for dealing with health-related work scenarios that rarely occurred. Managers working in non-unionised workplaces can be at a disadvantage as union representatives can potentially influence company policies and shape management approaches through their worker advocacy role.

Issues specific to carers

A significant proportion of the employers who contributed to the study had experience of managing a person who cared for someone with cancer. A number had managed or co-managed a smaller business while undertaking caring responsibilities themselves. A range of approaches and strategies had been used to manage care-related absence. There were some examples of carers taking sick leave while others had taken compassionate leave, annual leave, unpaid leave or some combination of these.

Where a period of caring for someone with cancer had ended with their death, employees tended to need a lot of support over an extended period. Employers struggled to provide this support without compromising the operation of their business. In many respects it was more difficult to manage a newly bereaved carer than one who was actively caring. While employers were always sympathetic, there was concern about the 'open-ended' nature of the timeframe that the person would need to be supported through. Employers were generally unsure how to handle an employee who was grieving over the longer term. Some managers felt themselves acting as proxy counsellors and this could take up a significant amount of their time. Without access to occupational health, it is not usually possible for a small employer to offer counselling to an employee, and costs can prohibit outsourcing this.

SMEs had frequently experienced difficulties keeping the business afloat when a senior member of staff with a role in running the business had been absent as a result of caring responsibilities. The responses of other key parties, such as franchisers, co-partners, and junior staff providing cover, had not always been supportive.

Policies can help give backing to the management approach to issues such as time off and bereavement. However, it appears that SMEs do not generally formulate or apply policies specifically for employees who are carers and could benefit from support on this.

The business case for supporting people affected by cancer to remain in or return to work

SMEs who have managed a worker affected by cancer were strongly motivated by a desire to 'do the right thing'. Close personal and/or working relationships appear to intensify an employer's sense of responsibility towards an employee. Staff retention appears to be a strong driver for applying good practice; many employers highlighted the unique contribution offered by individual members of staff and the negative impact of their absence in business terms.

There was some concern that some staff may be treated differently; recent recruits could find their needs are not considered to the same extent as employees with a long history with the company. Intermediaries felt that this highlighted the need for companies to develop policies that outline how all employees with cancer (and other long-term illnesses) and carers should be treated.

Efforts to support SMEs to manage work and cancer issues need to acknowledge the practical considerations of 'keeping the business going' and employers' concerns regarding the financial viability of retaining staff who are not able to perform their usual duties. Compliance is important to SMEs and a key driver for them to demonstrate good practice in managing people affected by cancer. In challenging economic circumstances some SMEs are likely to do only what they are compelled to do by law.

Delivering support to SMEs

The study showed a clear need for, and an interest in, sources of support that are suitable for SMEs dealing with employees affected by cancer. Many SMEs had struggled without appropriate support and did not know where to go to access help. Intermediaries stressed that without reliable sources of information and support, SMEs lose out on a view that is independent and balanced as well as informed. Several aspects of managing someone affected by cancer were highlighted as particularly significant for SMEs, including legal obligations, drawing up and implementing policies, financial considerations and supporting workers affected by bereavement. There was also a strong preference among both employers and intermediaries for any package of support regarding cancer not to be linked to other conditions. Cancer is seen as a special case due to the combination of emotional impact, the physical toll of treatment and (in some cases) uncertain prognosis.

There were mixed views among employers regarding the format of information and support they would prefer to receive. Some expressed a preference for web-based support while others who did not routinely use the internet felt that paper-based materials would be more helpful. The research underlined the need to provide information suitable for smaller employers in a choice of formats. Intermediaries felt that some employers would not have the time to read through detailed booklets containing large blocks of text and suggested that factsheets, or materials containing checklists, would be viewed as more accessible by some groups. Many employers, however, stressed the need for information sources to be comprehensive. There also appeared to be a significant level of demand for bespoke support delivered over the telephone. Interestingly, many of the employers who participated in the study were not aware of the various DWP advice lines in England, Scotland and Wales that provide occupational health support to smaller businesses.

There was general agreement that SMEs could be 'hard to reach'. Intermediaries agreed that ideally SMEs should be able to access work and cancer materials through the 'trusted sources' they would normally consult for help. There were also suggestions that GPs and other health professionals could distribute work-related information to people affected by cancer for them to pass on to their employer as appropriate.

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