

EMPLOYMENT COMMITTEE - 23 MAY 2024 ATTENDANCE MANAGEMENT REPORT OF THE DIRECTOR OF CORPORATE RESOURCES

Purpose of the Report

1. The purpose of this report is to update the Employment Committee on the Council's overall position on sickness absence, as at the end of March 2024 (quarter 4, 2023/24).

Policy Framework and Previous Decisions

2. The Attendance Management Policy supports this report. No changes to this policy are proposed.

Background

3. On 1 February 2023, the Committee considered the Council's absence position as at the end of December 2023 (quarter 3 2023/24).

Sickness absence - current position

4. The table below details the end of year sickness absence levels of the previous three years, and guarter 1, 2, 3 and 4, 2023/24.

	20/21	21/22	22/23	23/24 Q1 Jun 23	23/24 Q2 Sept 23	23/24 Q3 Dec 23	23/24 Q4 Mar 24	Total FTE days lost 01/04/23- 31/03/24	Total cost of absence 01/04/23 – 31/03/24
Chief Executive's	4.41	3.13	4.14	4.41	6.05	5.90	5.91	1,485.36	£223k
Environment & Transport	7.04	8.34	11.44	11.31	11.51	10.80	10.21	8,592.98	£993k
Children & Family Services	7.94	10.44	10.14	10.01	9.88	9.31	8.91	10,911.43	£1,544k
Corporate Resources	5.54	9.92	8.84	8.64	10.50	10.72	9.57	10,841.40	£1,193k
Adults & Communities	10.18	8.24	8.84	8.61	9.27	9.53	10.06	12,101.46	£1,483k
Public Health	5.08	5.65	5.58	5.85	5.38	4.83	4.64	788.78	£97.7k
LCC total	7.51	8.87	9.27	9.11	9.80	9.62	9.27	44,721.41	£5,474k

ESPO	6.80	8.64	8.28	7.50	7.97	7.16	7.87	2,514.11	£261k
EMSS	9.26	9.10	6.26	6.08	6.16	6.27	6.86	710.32	£81k

- 5. At the end of quarter 4 2023/24, the Chief Executive's and Public Health departments are below the corporate target of 7.5 days per FTE. Children & Family Services, Corporate Resources, Environment & Transport, Public Health departments and ESPO, have all made improvements since the end of quarter 3, 2023/24.
- 6. The County Council total is at 9.27 FTE days lost per FTE, an improvement from quarter 3 2023/24 of 0.35 FTE days per FTE.
- 7. Attendance management activity is still required across departments to achieve and maintain the corporate target of 7.5 days per FTE.

Reasons for sickness absence

8. Displayed in order of highest percentage of time lost, the table below details the top ten reasons for absence.

Percentage of FTE days lost 12 months cumulative	2021/22 Mar 2022 Q4	2022/23 Mar 2023 Q4	2023/24 Jun 2023 Q1	2023/24 Sept 2023 Q2	2023/24 Dec 2023 Q3	2023/24 Mar 2024 Q4
Stress/depression, mental health	28.4%	26.8%	27.8%	28.5%	30.0%	31.4%
Other musculo- skeletal	8.8%	12.4%	12.9%	12.8%	13.1%	13.2%
Combined covid- 19 & cough/cold & flu	19.7%	17.3%	15.5%	13.4%	11.9%	11.5%
Gastro-stomach, digestion	6.1%	6.1%	6.7%	7.4%	6.9%	6.2%
Cancer	4.7%	4.3%	5.2%	5.4%	5.2%	4.7%
Chest & respiratory	3.3%	6.0%	5.3%	5.4%	4.9%	4.6%
Eye, ear, nose & mouth/dental & throat	4.3%	2.8%	2.9%	3.3%	3.6%	3.4%
Back and neck	4.1%	3.8%	3.8%	3.6%	4.3%	4.4%
Neurological	4.6%	4.4%	4.4%	4.0%	4.3%	4.3%
Not disclosed	5.7%	5.8%	5.0%	4.4%	3.0%	3.7%

- 9. The table shows that the levels of mental health/stress/depression related sickness absence has increased from quarter 3 to 4 2023/24, and this remains the highest reason for lost time due to sickness absence.
- 10. The mental health/stress/depression related sickness absence figures have been updated for the periods March 2023 quarter 4 through to December 2023 quarter 3 to correct an underreporting error that has been identified.

11. The tables below show the percentage of top thee reason for sickness absence by department for the twelve-month periods ending quarters 1, 2, 3 and 4 2023/24 and the twelve-month periods at the end of years 2022/23 and 2021/23.

Chief Executive's department

Percentage of FTE days lost 12 months cumulative	2021/22 Mar 2022 Q4	2022/23 Mar 2023 Q4	2023/24 Jun 2023 Q1	2023/24 Sept 2023 Q2	2023/24 Dec 2023 Q3	2023/24 Mar 2024 Q4
Stress/depression, mental health	19.92%	20.61%	18.44%	19.54%	22.0%	27.77%
Other musculo- skeletal	20.40%	21.45%	26.14%	25.82%	20.5%	13.22%
Combined covid- 19 & cough/cold & flu	32.52%	25.51%	22.3%	16.48%	13.8%	11.72%

Environment & Transport

Percentage of FTE days lost 12 months cumulative	2021/22 Mar 2022 Q4	2022/23 Mar 2023 Q4	2023/24 Jun 2023 Q1	2023/24 Sept 2023 Q2	2023/24 Dec 2023 Q3	2023/24 Mar 2024 Q4
Stress/depression, mental health	20.48%	21.04%	19.63%	23.54%	26.9%	30.50%
Other musculo- skeletal	14.38%	17.23%	18.10%	16.86%	18.7%	17.06%
Combined covid- 19 & cough/cold & flu	23.74%	16.55%	15.26%	13.54%	11.8%	12.22%

Children & Families Services

Percentage of FTE days lost 12 months cumulative	2021/22 Mar 2022 Q4	2022/23 Mar 2023 Q4	2023/24 Jun 2023 Q1	2023/24 Sept 2023 Q2	2023/24 Dec 2023 Q3	2023/24 Mar 2024 Q4
Stress/depression, mental health	39.73%	35.78%	41.25%	42.42%	43.6%	40.43%
Other musculo- skeletal	5.64%	9.16%	8.20%	7.63%	8.0%	8.94%
Combined covid- 19 & cough/cold & flu	17.78%	15.68%	12.26%	10.99%	9.2%	9.36%

Corporate Resources

Stress/depression, mental health	18.58%	16.23%	17.41%	21.13%	23.46%	18.59%
Other musculo- skeletal	11.09%	15.36%	16.67%	17.11%	16.25%	16.07%
Combined covid- 19 & cough/cold & flu	18.82%	14.70%	13.07%	11.21%	10.77%	10.35%

Adults & Communities

Percentage of FTE days lost 12 months cumulative	2021/22 Mar 2022 Q4	2022/23 Mar 2023 Q4	2023/24 Jun 2023 Q1	2023/24 Sept 2023 Q2	2023/24 Dec 2023 Q3	2023/24 Mar 2024 Q4
Stress/depression, mental health	33.52%	32.89%	30.49%	27.03%	26.54%	28.55%
Other musculo- skeletal	6.63%	7.91%	8.38%	8.05%	9.37%	10.30%
Combined covid- 19 & cough/cold & flu	19.87%	21.63%	21.21%	17.63%	22.14%	13.30%

Public Health

Percentage of FTE days lost 12 months cumulative	2021/22 Mar 2022 Q4	2022/23 Mar 2023 Q4	2023/24 Jun 2023 Q1	2023/24 Sept 2023 Q2	2023/24 Dec 2023 Q3	2023/24 Mar 2024 Q4
Stress/depression, mental health	26.50%	30.03%	32.86%	32.88%	31.89%	12.05%
Other musculo- skeletal	3.72%	10.06%	14.31%	17.06%	16.62%	32.82%
Combined covid- 19 & cough/cold & flu	21.07%	18.40%	16.54%	17.52%	19.85%	18.46%

- 12. Reviewing the three-year end period positions, the key observation is that the covid-19 and cough/cold & flu category has reduced across all departments. This is a reflection in reductions in Covid-19 related absence, following the pandemic period. As this has decreased, the percentages in other categories have proportionately increased; principally either mental health or musculo-skeletal.
- 13. From periods 3 to 4 2023/24 mental health absence as a percentage has reduced in Children & Families, Corporate Resources and Public Health but increased in Adults & Communities, Environment & Transports and the Chief Executives department.

Long and Short-term absence split

14. The table below details the number of FTE days lost due to absence and the percentage split of FTE days lost as at the end of March 2024.

	2023/24 as at end of March 2024									
12 months cumulative										
Department		Long ter	m		Short ter	m				
	FTE days lost	% FTE days lost	Individual occurrences	FTE days lost	% FTE days lost	Individual occurrences				
Chief Executive's	977.92	65.84%	20	507.44	34.16%	156				
Environment and Transport	5540.64	64.48%	117	3052.34	35.52%	800				
Children and Family Services	7753.44	71.06%	159	3157.99	28.94%	759				
Public Health	343.84	43.59%	8	444.94	56.41%	121				
Corporate Resources	7168.16	66.12%	169	3673.24	33.88%	1430				
Adults and Communities	7389.74	61.06%	146	4711.72	38.94%	1170				

Note: Long term is categorised as over 4 weeks of continuous absence.

Service level data

15. The table below provides details of the days lost per FTE at the end of the last three years and at the end of quarters 1, 2, 3 and 4 2023/24, for service areas by department.

Department	2020/21	2021/22	2022/23	2023/24	2023/24	2023/24	2023/24
Days per FTE	Year end	Year end	Year end	Q1	Q2	Q3	Q4
12 months cumulative	(Mar 21)	(Mar 22)	(Mar 23)	(Jun 23)	(Sept 23)	(Dec 23)	(Mar 24)
Chief Executive's	4.41	3.13	4.14	4.41	6.05	5.90	5.91
Planning and Historic and Natural Environment	0.79	0.71	3.52	4.19	10.96	8.35	5.43
Regulatory Services	6.30	6.74	9.40	8.43	11.13	11.38	9.98
Strategy and Business Intelligence	3.86	1.87	3.47	3.95	5.08	4.95	6.91
Democratic Services	1.07	2.67	1.43	4.24	4.96	4.90	2.40
Legal Services	5.82	3.05	1.34	1.49	1.57	1.62	1.86
Environment and Transport	7.04	8.34	11.44	11.31	11.51	10.80	10.21

Department	2020/21	2021/22	2022/23	2023/24	2023/24	2023/24	2023/24
Days per FTE	Year end	Year end	Year end	Q1	Q2	Q3	Q4
12 months cumulative	(Mar 21)	(Mar 22)	(Mar 23)	(Jun 23)	(Sept 23)	(Dec 23)	(Mar 24)
Highways and Transport	3.99	9.40	15.01	14.93	14.12	13.37	12.95
Environment and Waste Management	7.68	7.54	9.26	9.11	11.82	111.48	10.46
Development and Growth	n/a	n/a	5.49	5.32	5.70	5.20	4.65
Children and Family Services	7.95	10.44	10.14	10.01	9.88	9.31	8.91
Education and SEND	7.57	12.24	8.40	7.71	8.94	9.24	7.44
Children's Social Care & Targeted Early Help	9.15	10.11	10.52	10.31	10.14	9.90	10.00
Corporate Resources	5.45	9.92	8.84	8.64	10.50	10.72	9.57
Finance, Strategic Property & Commissioning	2.88	3.99	3.37	3.16	3.58	3.85	3.55
Corporate Services	4.07	7.83	5.07	5.55	7.48	6.64	7.39
IT, Comms & Digital, Commercial and Customer Services	6.77	11.69	11.31	11.02	13.44	13.95	13.83
Adults and Communities	10.18	8.24	8.84	8.61	9.27	9.53	10.06
Operational commissioning	n/a	n/a	9.74	11.31	11.13	11.67	11.06
Integration, access & prevention	n/a	n/a	10.27	8.11	7.66	7.78	11.21
Commissioning and Quality	4.66	11.90	10.83	6.11	6.12	5.57	10.22
Personal Care and Support	21.15	7.07	6.28	4.99	7.18	7.08	12.11
Communities and Wellbeing	4.65	5.38	5.41	5.16	5.57	5.73	6.25
Public Health	5.80	5.65	5.58	5.85	5.38	4.83	4.64

Recommendations

16. The Committee is asked to note the update provided on the Council's overall position on sickness absence as at the end of March 2024.

Background Papers

17. Report to the Employment Committee 1 February 2024 – Attendance Management: https://democracy.leics.gov.uk/documents/s180996/Attendance%20Management%2 0-%20Employment%20Committee%20010224.pdf

Circulation under the Local Issues Alert Procedure

18. None

Equality Implications/Other Impact Assessments

19. There are no equality implications arising from the recommendations in this report.

Human Right Implications

20. There are no human rights implications arising from the recommendations in this report.

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