

EMPLOYMENT COMMITTEE - 18 JUNE 2015

SICKNESS ABSENCE

REPORT OF THE DIRECTOR OF CORPORATE RESOURCES

Purpose

1. The purpose of this report is to provide the Employment Committee with an update on the Council's overall position on sickness absence as at 31st March 2015. Although this is now reported on a rolling year basis, this date can still be used to mark an 'out turn position' for the period April 2014 – March 2015.

Background

2. The Committee regularly receives a report which details the most recent sickness absence figures, and describes the actions that have been taken in an attempt to reduce sickness absence. Although these will have had some impact in individual cases on reducing the time lost, overall sickness absence has continued to increase. As a consequence this report details a proposed revised corporate approach for member consideration.

Absence Data

3. The Council's sickness absence figure as of 31st March 2015 is 9.83 FTE days. As stated above, this indicates that when compared with the figures for the previous two years, sickness absence continues to increase. According to the last Local Government Workforce Survey published in February 2014, the median figure across the public sector is 8.8 FTE days.
4. The corporate target which is 7.50 FTE days has only been achieved by one department, Chief Executive's. EMSS have also reached the target but they are not included in the Council's overall figure.
5. It should be noted that provisional April figures are now available. The rolling 12-month figure shows a drop to 9.66 days, with all departments apart from Adults & Communities showing a reduction.

Department	2012/13 Out turn	2013/14 Out turn	2014/15 Position	2014/15 Days lost
Chief Executive's	6.47	7.51	5.55	1127
E&T	8.29	10.06	8.23	6273
C&FS	8.30	9.84	10.37	10007
Corporate Resources	8.35	7.11	7.86	8967
Adults and Communities	11.36	11.16	12.24	18505
Public Health	-	7.11	9.14	531
Total	9.22	9.47	9.83	
Department	2012/13 Out turn	2013/14 Out turn	2014/15 Position	
ESPO	9.14	8.58	12.07	3729
EMSS	-	-	6.65	1094

Data Quality

- The data output in system reporting terms is as accurate as it can be, and it should be noted that a revised reporting system and managers' dashboard will be rolled out from August 2015. It is important to note however that the data is reliant on managers inputting absence accurately, and also closing absence off when individuals return to work.

Reasons for Absence

- The highest two reported causes of sickness absence are viral infections and stomach problems, accounting for 26.7% and 18.2% of absence respectively. The data shows that stress /depression and mental health and fatigue account for 5.2% of absence. The 'nothing stated' category has seen a slight improvement with 7.2% of absences recorded in 2014/15, compared to last year's figure of 8.9%.
- At the last Committee meeting, Members asked whether the 'not known' category on Oracle was essential. To clarify, during self-certification an individual has the right not to declare the reason for absence (although we ensure that managers ask for this as a matter of routine). However, from the 8th day of absence, the fit for work note from the GP would confirm the reason, which should be entered retrospectively. The category of 'other' will be removed from the new reporting system.

Actions Taken to Date

9. The following actions have or are about to be taken to assist in reducing the amount of time lost due to sickness in the Council:-
 - (i) Each department receives a monthly report detailing sickness absence. This goes to each DMT for information/action;
 - (ii) An HR Advisor based within the Strategic HR Service has been specifically deployed to work with managers to assist, in particular managing the more complex cases;
 - (iii) HR Workshops have been held for managers, and the feedback was that managers found these informative;
 - (iv) Communications in the Managers' Digest;
 - (v) The Managing Absence Policy has been revised to allow managers to proceed to a hearing when an employee meets their attendance target but then lapses back (previously there was a requirement to start the process again). Additionally, in cases where the employee will not be able to return to work, a manager can move straight to the final employment hearing.
 - (vi) Commitment to work towards Public Health England's Workplace Wellbeing Charter.
 - (vii) Improvements are being made to the Oracle recording and reporting of sickness absence. It is intended that these will assist managers further in managing absence.

Proposed Way Forward

10. It is recognised that in addition to the actions already outlined in this report the Council, including ESPO and EMSS, have to adopt a far stronger and more formal performance management approach, placing a greater level of responsibility and accountability on senior managers. The following approach, although outline only at this stage, has been agreed in principle by officers:-
 - (i) Appoint a HR Strategic Lead to lead a corporate project group who will be responsible for developing a revised Managing Sickness Absence Project Plan. This will have a much sharper focus on working with DMT's and Heads of Service to implement initiatives, assessing their impact and where possible, assessing their outcomes.
 - (ii) Overall progress on the final action plan will be presented to the People Strategy Board in the form of regular update reports.

(iii) Consideration has started as to what may be included in the project plan. Proposed initiatives to date include:-

a) Implementation of Star Chamber sessions within each department.

The proposal is to hold a session with each Assistant Director and for their Heads of Service to be present. The purpose of Star Chambers is to determine what actions have been, and are being taken to manage particular absence cases, e.g. whether return to work and trigger point interviews have been held; whether referrals have been made to occupational health; to ensure that improvement plans have been put in place with targets and whether or not any formal action is being planned or taken. By undertaking these meetings it will also become evident whether or not managers need any further support in this area, such as absence management training.

b) Bespoke training sessions for each department. Strategic HR is in the process of developing a set of training sessions for managers based on identified departmental requirements and feedback on those areas where they require more information and additional support. The first training session will be run for Adults and Communities, and will be practical in application with a focus on writing improvement plans and referrals to occupational health. Part of the session is also devoted to how to approach potentially difficult and sensitive discussions on sickness absence.

c) The subject of sickness absence to be included as a regular part of departmental managers' meetings, where presentations and discussions can be supported by Strategic HR.

d) Include sickness absence targets in managers' PDR's and performance against these targets to be monitored in supervision sessions.

e) Working with the Communications Unit to develop a targeted campaign on health and wellbeing.

f) Consider further how the Council's flexible working policy can be used to assist employees in managing health issues which would lead to improved attendance.

Recommendations

The Committee is asked to:-

- (a) Note the contents of this report;
- (b) Support the proposed approach to performance managed sickness absence through corporate and departmental project plans.

Officer to Contact

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Background Papers

None

Equalities and Human Rights Implications

The attendance management policy has been subject to an equality and human rights impact assessment, and this was published in 2014. There are no equalities and human rights issues arising directly from this report.