

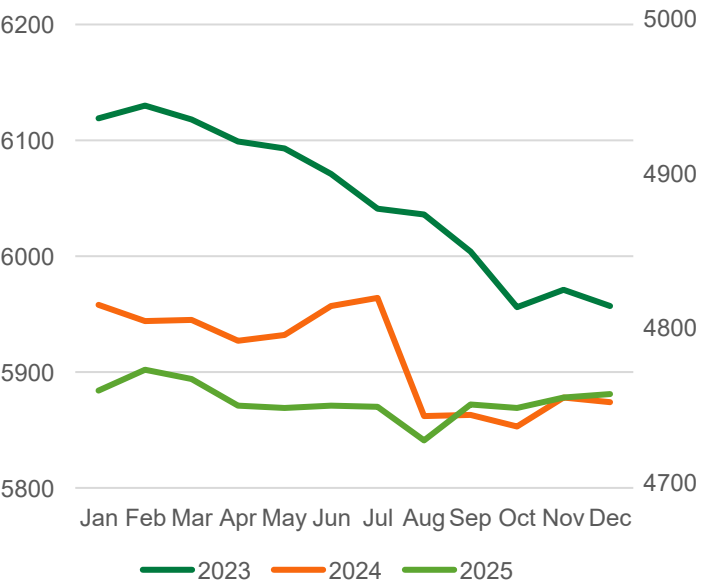
Workforce Report Q3 2025-2026 Update

Employment Committee

2025/26 LCC Headcount and FTE – Q3

As December 2025 - headcount of 5881, which is a full time equivalent (FTE) of 4916.39. Increase of 28 staff from Q1 and 16 staff in Q2 2024/25.

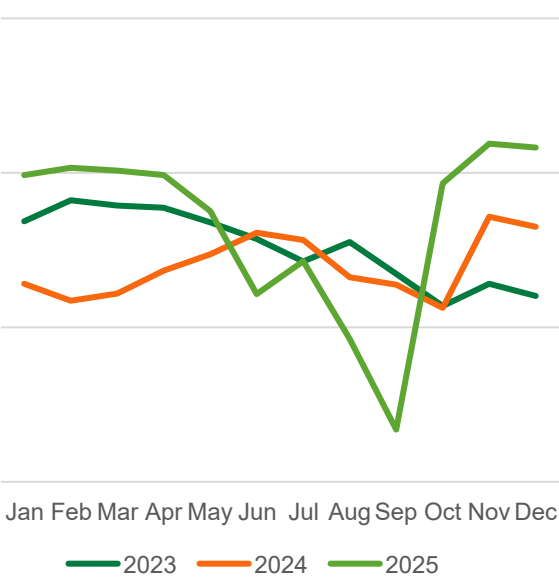
Headcount



Graph 1.

Headcount refers to the total number of LCC employees. It provides a snapshot of workforce size (excluding agency staff)

FTE



Graph 2.

FTE tells you how many full-time employees your workforce is equal to, by adding up everyone's hours—even if some people work part-time or different hours.

What does the data show?

Headcount: From 6,119 in January 2023 to 5881 in December 2025.

FTE: From 4,868.6 in January 2023 to 4916.39 in December 2025

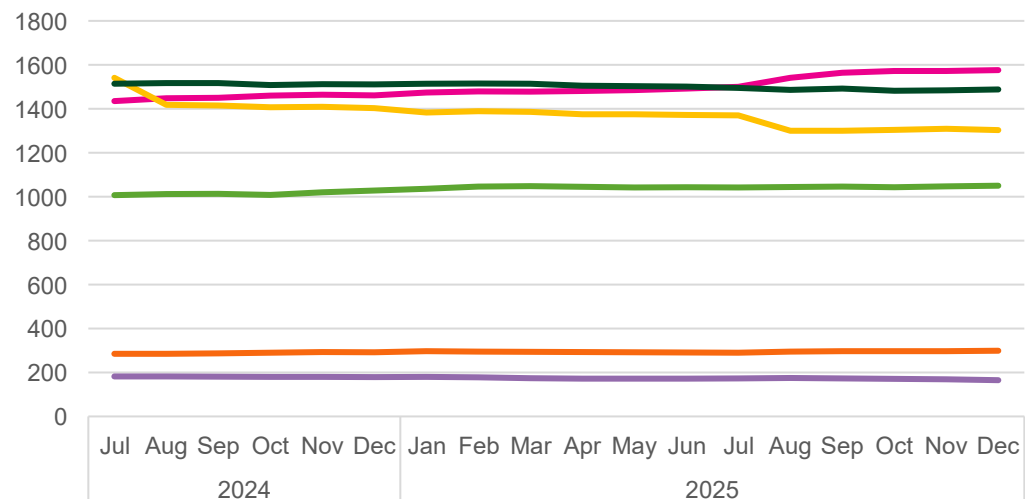
Shows a reduction in the total number of employees, but a slight increase in overall workforce capacity.

Why track both?

Headcount shows the number of individuals, while FTE reflects actual workforce capacity, accounting for part-time and flexible arrangements. This distinction is essential for budgeting, resource planning, and compliance.

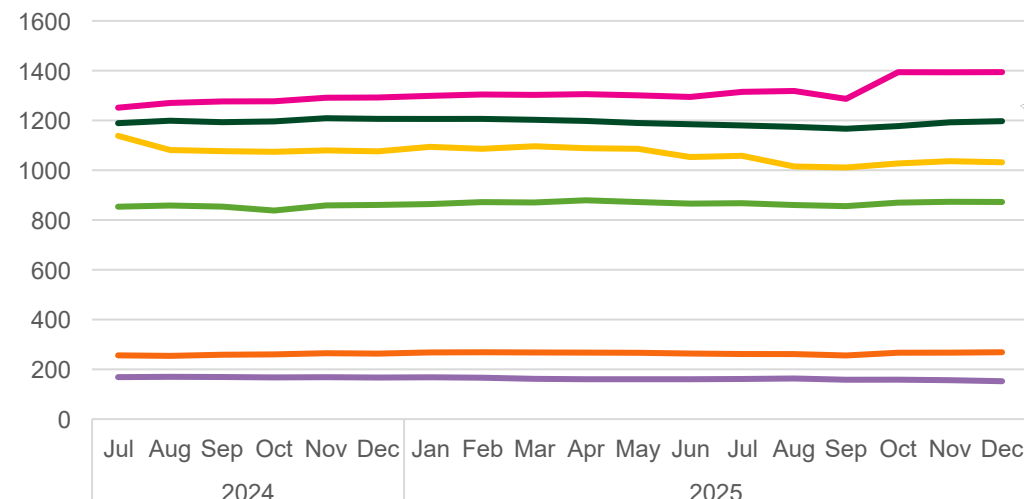
2025/26 Departmental Headcount and FTE

Headcount by Department



Graph 3.

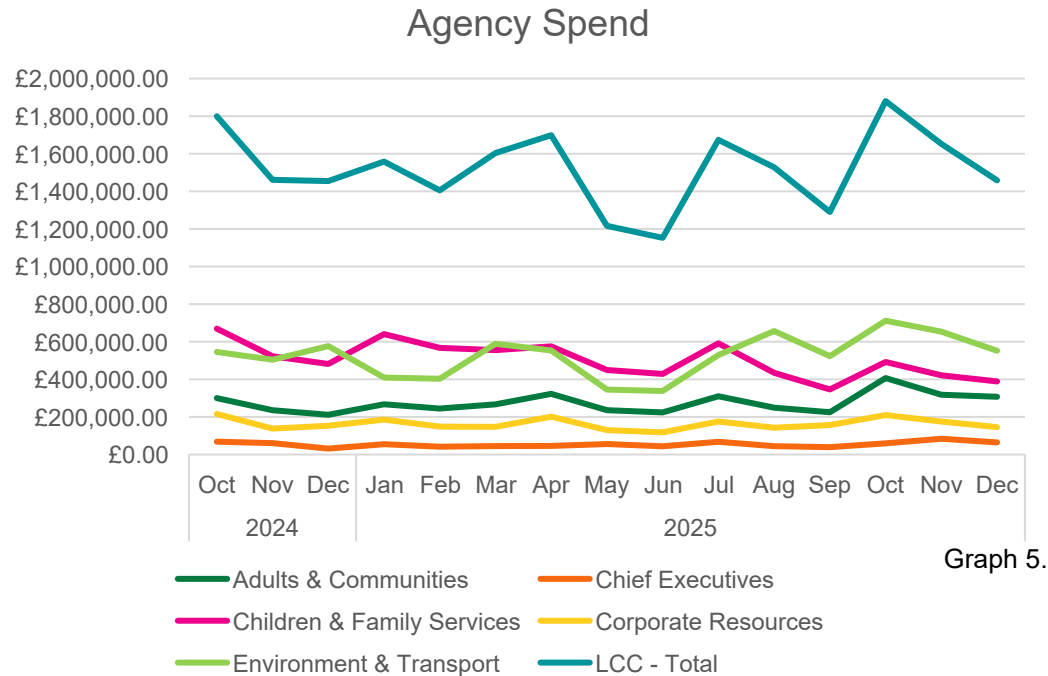
FTE by Department



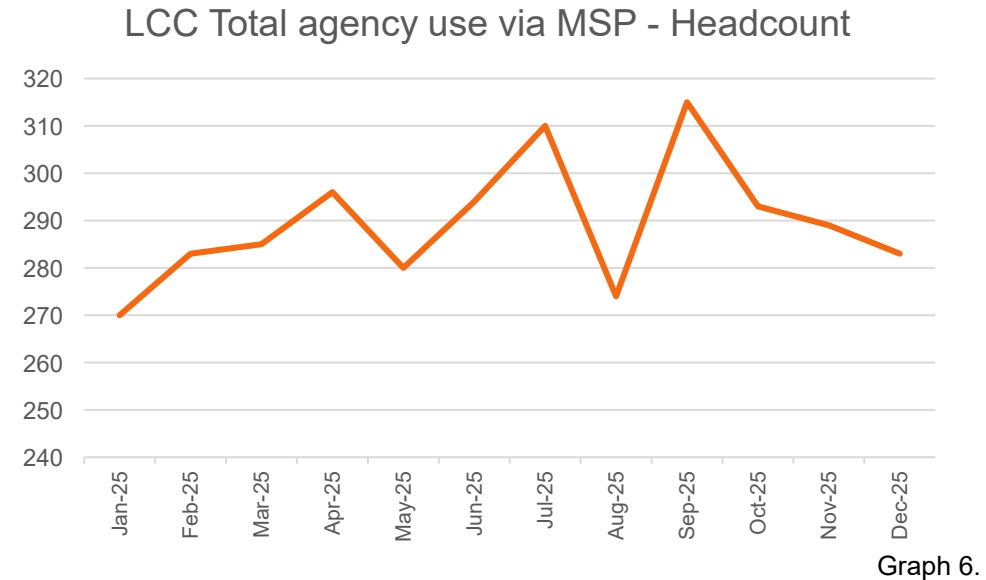
Graph 4.

- Chief Executive's (299 headcount, 268.66 FTE)
- Environment and Transport (1,050 headcount, 872.37 FTE)
- Children and Family Services (1,576 headcount, 1394.17 FTE)
- Public Health (165 headcount, 152.21 FTE)
- Corporate Resources (1,303 Headcount, 1031.89 FTE)
- Adults and Communities (1,488 Headcount, 1197.34 FTE)

Agency use

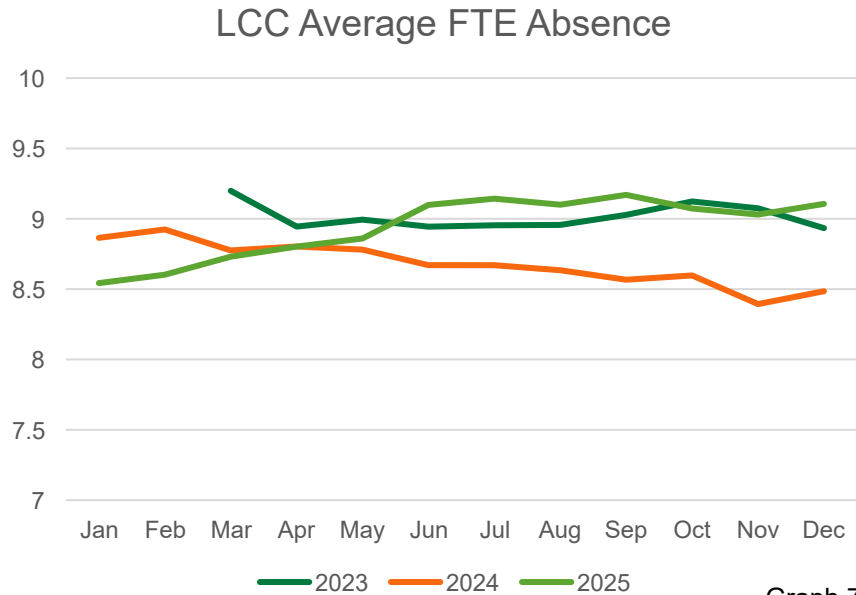


- LCC spent approx. £1.5M a month on temporary workforce last year
- No agency spend in Public Health
- Reduction in agency spend in Children's and family services corresponds to an increase workforce headcount and FTE



- MSP = Manged Service Provider of agency staff
- Agency spend and headcount can be different as headcount is based on when resources is used and spend is when it is paid
- MSP headcount excludes service contracts

Q3 2025/26 LCC Absence



Graph 7.

LCC Average FTE Absence by Month	2023	2024	2025
Jan	9.01	8.86	8.54
Feb	9.14	8.92	8.60
Mar	9.20	8.78	8.73
Apr	8.94	8.80	8.80
May	8.99	8.78	8.86
Jun	8.94	8.67	9.10
Jul	8.95	8.67	9.14
Aug	8.96	8.63	9.10
Sep	9.03	8.57	9.17
Oct	9.12	8.60	9.07
Nov	9.07	8.39	9.03
Dec	8.93	8.49	9.11

Absence FTE	Quarter 1	Quarter 2	Quarter 3
2017	9.72	9.6	10.37
2018	9.64	9.59	9.55
2019	9.26	9.25	9.65
2020	9.48	8.94	8.20
2021	9.51	8.5	9.05
2022	9.55	9.44	9.27
2023	8.96	8.98	9.62
2024	8.75	8.62	8.5
2025	8.92	9.17	9.11

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The public sector usually report absence by calculating the average number of Full-Time Equivalent (FTE) days lost to sickness per employee over a given timeframe. At the end of December 2025, the average FTE absence was **9.11 days**.

The private sector report their absence by a percentage of days lost to absence:

Absence Rate (%) = (Total Days Lost Due to Absence ÷ Total Available Workdays) × 100

The absence rate (%) for LCC at the end of December was **3.47%**

Overall Absence Trend:

The average number of FTE absence days per employee had gradually decreased from 2023 to 2024, but in 2025, there has been an increase, from June onwards

Seasonal Patterns: Absence rates are lowest in spring (April/May) and rise during the summer and autumn months (June to October), peaking in September and October each year

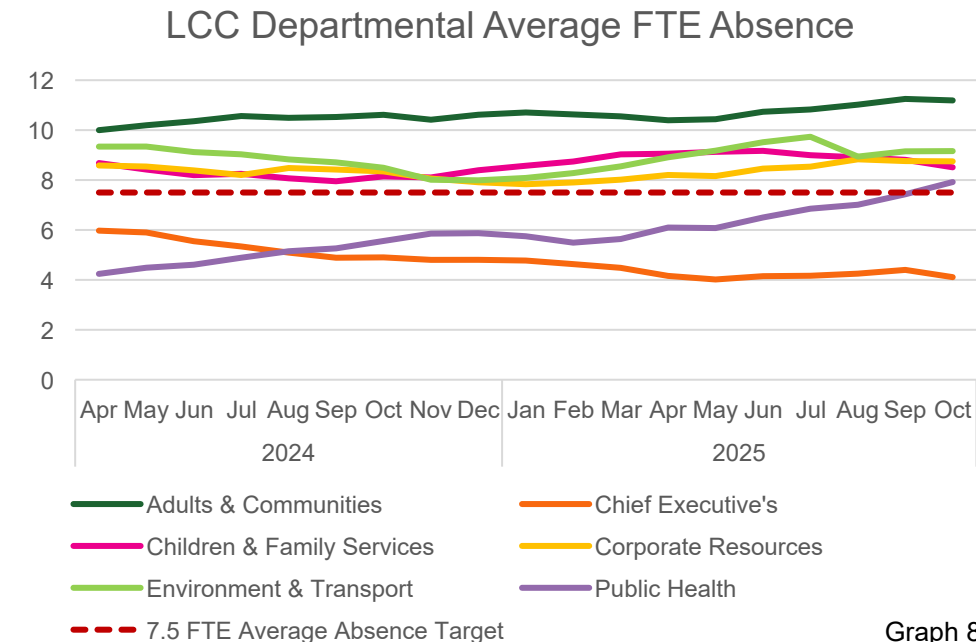
Year-on-Year Comparison:

2023: Absence rates start high and remain fairly stable.

2024: Slight improvement, with lower absence rates throughout most months.

2025: Absence rates begin lower but increase sharply in the summer and autumn, reaching the highest point in September (9.17 days)

Q2 2025/26 Departmental Absence



Graph 8.

LCC Average FTE Absence by Month	Adults & Communities	Chief Executive's	Children & Family Services	Corporate Resources	Environment & Transport	Public Health
Jan-25	10.71	4.77	8.57	7.83	8.08	5.75
Feb-25	10.63	4.63	8.74	7.90	8.28	5.49
Mar-25	10.55	4.48	9.03	8.01	8.55	5.64
Apr-25	10.39	4.16	9.06	8.20	8.91	6.10
May-25	10.44	4.02	9.13	8.16	9.18	6.08
Jun-25	10.74	4.15	9.17	8.46	9.52	6.50
Jul-25	10.83	4.17	9.00	8.54	9.73	6.85
Aug-25	11.02	4.25	8.91	8.83	8.94	7.01
Sep-25	11.25	4.40	8.81	8.76	9.15	7.43
Oct-25	11.19	4.11	8.51	8.75	9.16	7.92
Nov-25	11.03	3.96	8.59	8.66	9.12	8.35
Dec-25	10.89	3.91	8.76	8.75	9.23	9.04

Dec-25 % Sickness Absence	4.15%	1.49%	3.34%	3.33%	3.52%	3.44%
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Departmental Absence Analysis – Key Insights

Adults & Communities consistently records the highest average FTE absence, rising from 10.42 in Nov-24 to 11.19 in Oct-25, with a peak sickness absence rate of 11.25% in September 2025.

Chief Executive's department maintains the lowest absence rates throughout the year, ending at 3.91 FTE days and 1.48% sickness absence in October 2025—well below the council target.

Children & Family Services, **Corporate Resources**, and **Environment & Transport** show absence rates, generally between 8 and 9 FTE days, with slight increases over the year. Their December sickness absence is 3.34%.

Public Health shows a notable upward trend, reaching 9.04 FTE days and 3.44% sickness absence by December 2025.

All departments except Chief Executive's exceed the council's target absence rate (7.5 FTE) in December 2025, highlighting areas for improvement.

Seasonal increases are evident across most departments, with higher absence rates observed in the summer and autumn months (Jun–Oct). We have Adults and Communities coming to present a private agenda item at Employment Committee given their high absence rate.

Absence Reason

Percentage of FTE days lost by absence reason	21/22 Year End	22/23 Year End	23/24 Year End	24/25 Year End	Q1 25/26	Q2 25/26	Q3 25/26
Stress/depression, mental health	25.40%	26.80%	31.40%	25.78%	29.32%	23.83%	27.92%
Other musculo-skeletal	17.90%	12.40%	13.20%	12.77%	14.26%	16.41%	11.39%
Combined covid-19 & cough/cold & flu	18.20%	17.30%	11.50%	11.83%	10.19%	17.24%	14.19%
Gastro-stomach, digestion	6.30%	6.10%	6.20%	8.09%	7.74%	12.23%	7.38%
Chest & respiratory	6.20%	6.00%	4.60%	4.98%	4.19%	4.92%	3.67%
Back and neck	11.10%	3.80%	4.40%	4.39%	3.94%	9.12%	3.25%
Neurological	4.30%	4.40%	4.30%	4.43%	4.20%	5.07%	4.20%
Cancer	4.50%	4.30%	4.70%	3.52%	5.20%	1.08%	5.20%
Eye, ear, nose & mouth/dental & throat	3.00%	2.80%	3.40%	3.01%	5.10%	6.04%	5.10%
Not disclosed	4.40%	5.80%	3.70%	6.63%	5.43%	3.57%	5.43%

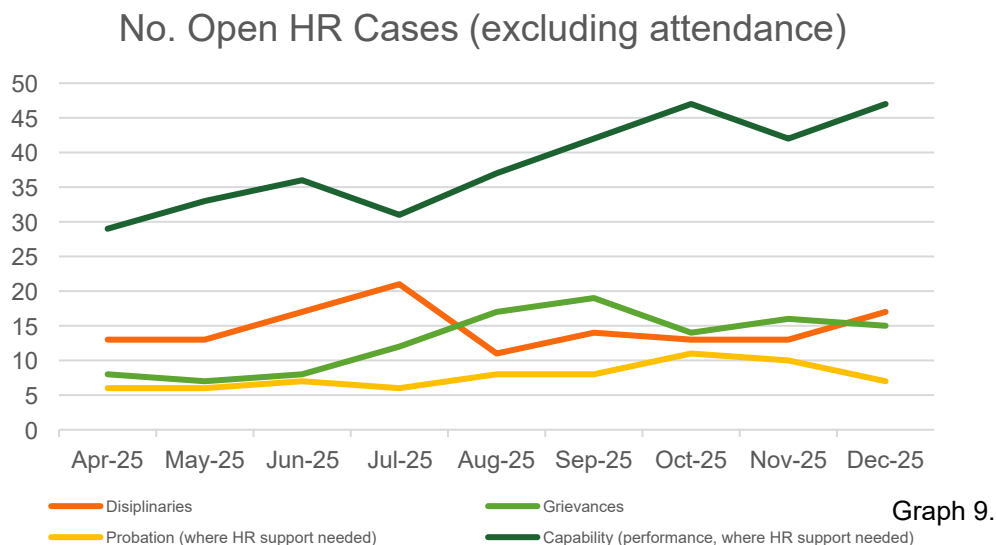
The data shows that absence is concentrated in a small number of recurring reasons. In Q3 2025/26, over half of all absence days (around 54%) were attributed to three categories: stress, depression and mental health; Covid-19/coughs, colds and flu; and musculo-skeletal conditions. This pattern is consistent across previous years and indicates that these are ongoing, structural drivers of absence.

Stress, depression and mental health remains the single largest reason for absence, accounting for nearly 28% of all days lost in Q3 2025/26. While this has fluctuated over time, it has consistently been the most common reason reported by employees when absent from work.

Physical health conditions, particularly musculo-skeletal **issues**, also contribute a significant proportion of absence and show some quarter-to-quarter volatility, often reflecting changes in a small number of longer-term cases. Infectious and seasonal illness, including coughs, colds, flu and Covid-19, continues to be a material contributor and is subject to seasonal variation.

A small proportion of absence is recorded as “not disclosed”, which slightly limits full understanding of absence causes.

Q3 2025/26 LCC HR Open cases



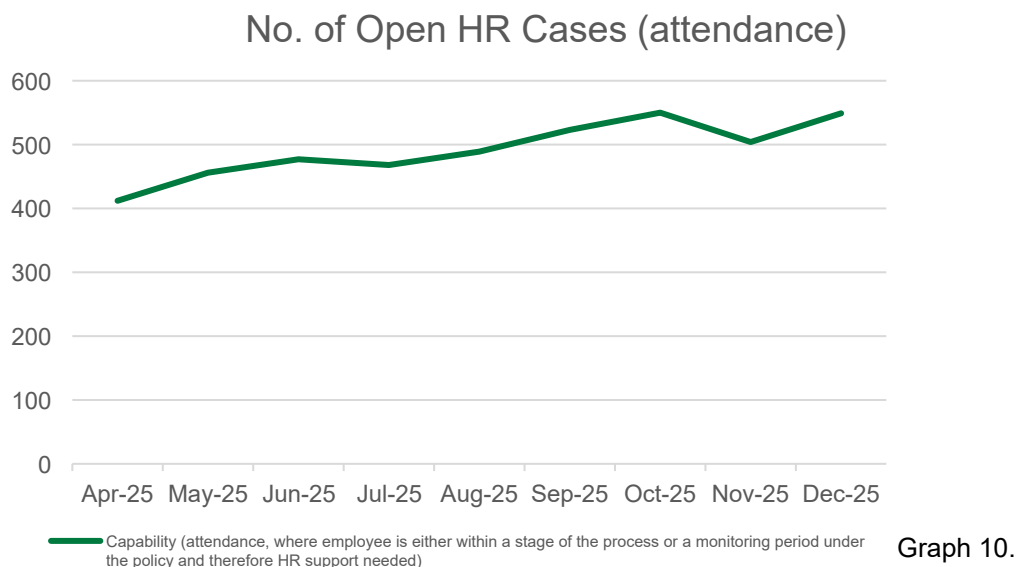
- Both formal Performance and Absence management cases have risen in the last 9 months.
- We have 15 active Disiplinaryies and 17 Grievances cases as of end of December 2025.
- Note - low case numbers.

Reason for termination	2023	2024	2025
Dismissal - Conduct	3	14	11
Dismissal - Capabiliy (Performance / Probation/Attendance)	20	19	20
Ill health (Dismissal/Retirement)	20	9	14

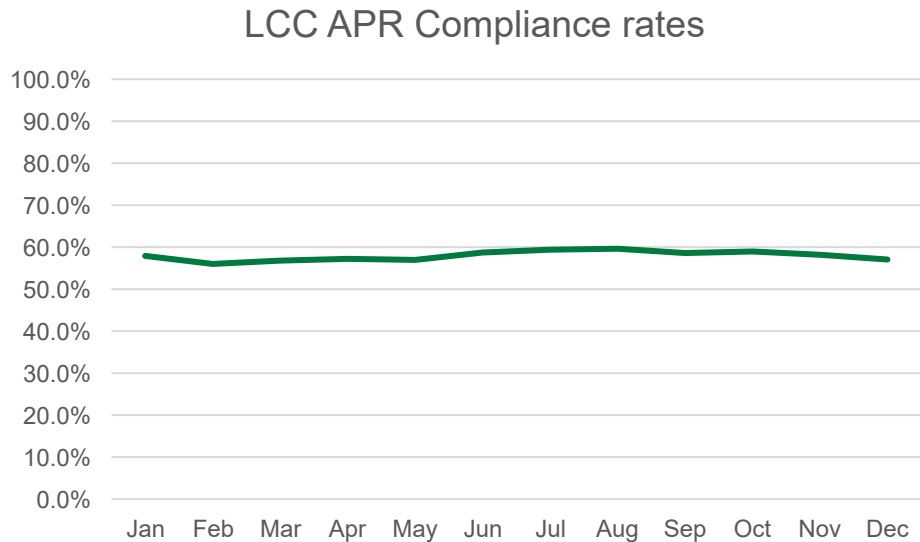
The number of employees recorded as dismissed due to poor attendance is drawn from our capability process outcomes. We have summarised capability cases as factors often overlap and contribute jointly to the final decision.

We also include cases that resulted in ill health dismissal / retirement. These indicate where there was an underlying health condition that cause the absence.

These figures do not include employees who chose to resign voluntarily while going through the capability process.



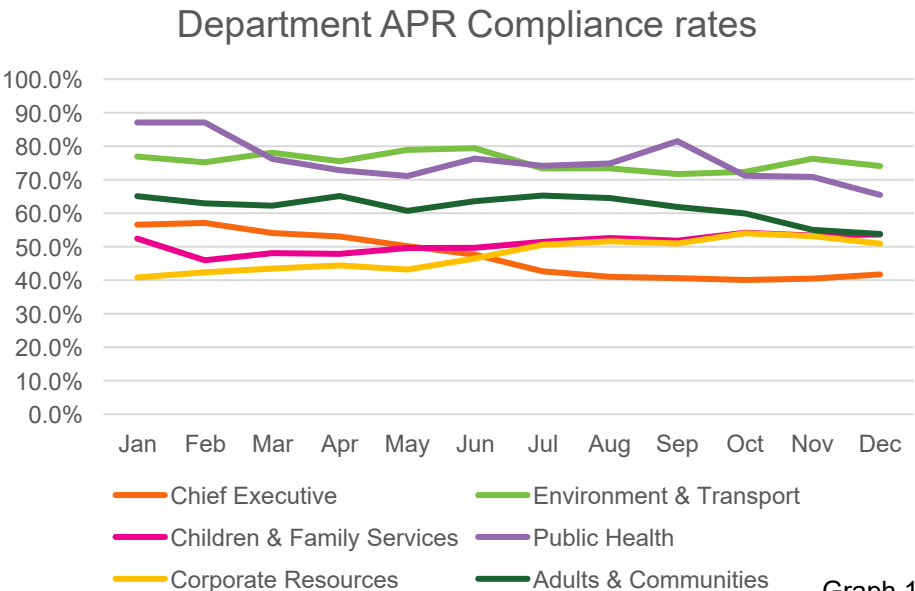
Q2 2025/26 LCC and Department APR Compliance rates



Graph 11.

Annual Performance Reviews (APR) should be completed once a year. A higher compliance rate shows that most employees are receiving regular feedback, which can help improve their performance and development. Conversely, a lower compliance rate might suggest that many employees are missing out on valuable feedback, potentially impacting their growth and the overall effectiveness of the organisation.

We have identified that APR's are being conducted; however, there completion is not consistently being recorded on our central recording system. To address this issue, the HR is working on a solution to simplify the recording and reporting process. This includes implementing automated reminders to ensure that all APRs are promptly and accurately recorded in the system. This initiative aims to enhance compliance and provide a more streamlined and efficient way to manage performance reviews.



Graph 12.

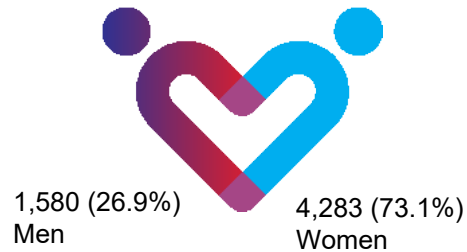
Q3 Performance

Adults and Communities – 53.8%
Chief Executive's recorded – 41.7%
Children and Family Services – 53.6%
Corporate Resources – 50.9%
Environment and Transport – 74.1%
Public Health – 65.5%

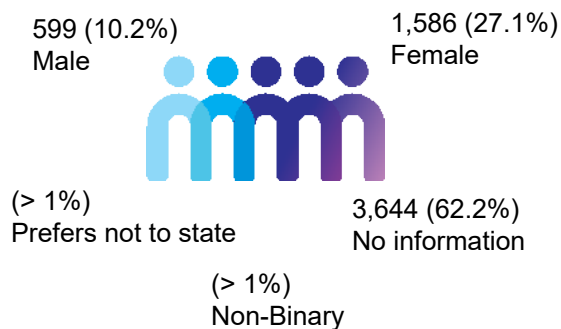
Workforce Demographic Profile

Based on effective date of 01 January 2026

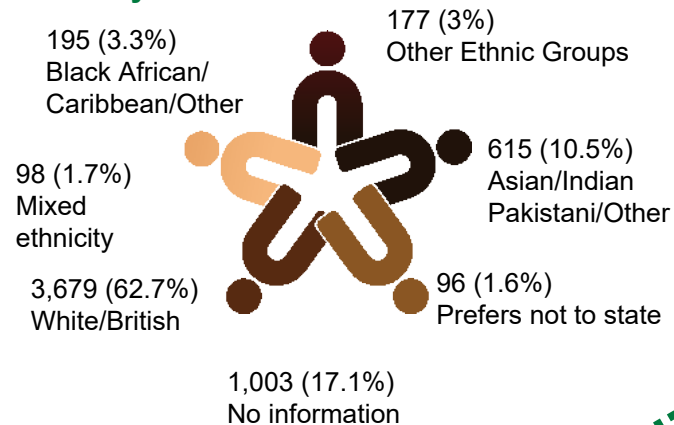
Gender



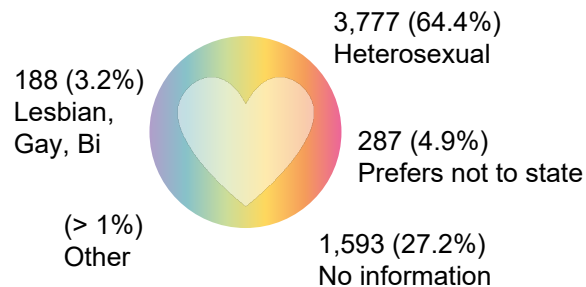
Gender identity



Ethnicity

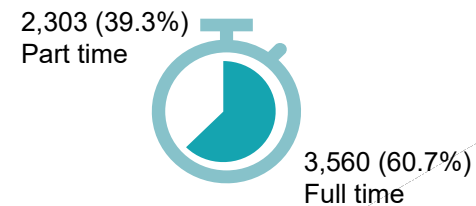


Sexual orientation

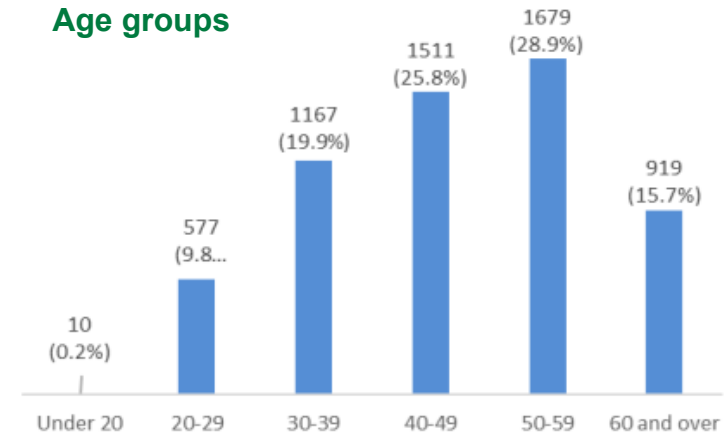


Working hours

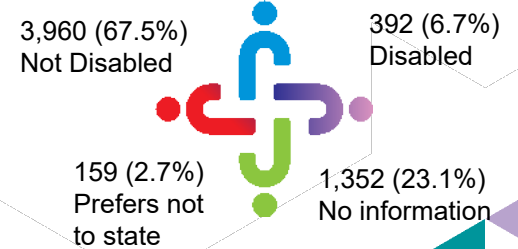
(37 hours Full Time Equivalent)



Age groups



Disability status



Workforce Demographic Profile (cont)

Comparing 2025 with 2026 workforce data

Gender



For Information only
Shift +0.4% Men
(which relates to +30 men and -12 women)

In 2025 a member of our Team received a national award for their contribution and support relating to LCC approach to Menopause.

Ethnicity



Improved performance
Increase in capturing information i.e. reduction of -1.6% No ethnicity information, which is an increase of 102 declarations.

Age groups

For Information only
44.6% of workforce is within 15 year or less of reaching retirement age which is a +0.1% compared with last year

Disability status



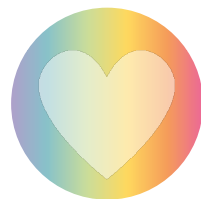
Improved performance
Increase in capturing information i.e. reduction of -0.7% No Disability information, which is an increase of 55 declarations.

Gender identity



Improved performance
Increase in capturing workforce data on gender identity i.e. reduction in -9.9% No gender identity information. Which is an increase of 581 declarations

Sexual orientation



Improved performance
Increase in capturing information i.e. reduction of -3.3% for staff with No LGBT information recorded, which is an increase of 204 declarations.

Working hours (37 hours Full Time Equivalent)



For Information only
Shift +1.2% Full time, which is a shift of 80 headcount

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