

EMPLOYMENT COMMITTEE – 7 MARCH 2013

MANAGING ATTENDANCE – QUARTERS 2 AND 3

REPORT OF THE DIRECTOR OF CORPORATE RESOURCES

Purpose of Report

1. The purpose of this report is to provide the Employment Committee with an update on the overall County Council and departmental performance in relation to sickness absence for the period 1 July to 30 September 2012 (Q2) and 1 October to 31 December 2012 (Q3).

Key Issues

2. The overall absence figure (number of days of absence per FTE) for the County Council in 2011/12 was 7.46 days. The absence target for 2012/13 is 7.5 days per fte.

Absence data

3. The table below shows the out turn figures for 2010/11 and 2011/12. It also shows the Q1 (April – June 2012), Q2 (July – Sept 2012) and the Q3 (Oct – Dec 2012) projected out turn figures for 2012/13:

Department	2010/11 Out turn	2011/12 Out turn	April – Jun 2012 (Q1)	July - Sept 2012 (Q2)	Oct- Dec 2012 (Q3)
Chief Executive's	5.75	5.09	5.38	6.67	6.70
E&T	7.16	7.37	6.00	6.95	7.31
CYPS	7.57	7.20	10.44	8.55	8.21
Corporate Resources	7.52	6.24	6.29	6.18	7.36
Adults and Communities	10.25	10.61	12.10	11.46	10.58
Total	7.85	7.46	8.72	8.79	8.62
ESPO	Not known	10.41	7.32	9.07	9.22

4. The projected outturn figure for the County Council is 8.62 days per FTE. Including ESPO absence data the projected out turn figure would be 8.66 days per FTE.

5. Sickness absence levels did increase during Quarter 2 (July – Sept 2012). The trend has been that absence levels increase during Quarter 3 (Oct – Dec) due to seasonal illnesses, however absence levels have reduced slightly during the third quarter of 2012/13.
6. HR Business Partners are continuing to identify where absence levels have increased within their departments and will progress this with Departmental Management Teams.

Days Lost

7. The table below shows the number of days lost through absence both long term and short term and the cumulative number of days lost:

Department	Average No of FTEs	Long Term Absence FTEs	Short Term Absence FTEs	Cumulative No of Days Lost FTEs
Chief Executive's	330.99	716.12	922.60	1638.73
Adults & Communities	1686.96	7894.95	5491.47	13386.42
Corporate Resources	971.53	2758.26	2601.74	5360.01
E & T	734.63	1854.51	2171.95	4026.66
CYPS	1134.88	4069.81	2971.73	6987.64
ESPO	340.30	1294.49	1059.35	2353.84

8. The days lost through long term absences (excluding ESPO) represent 55.08% of absences and the days lost through short term absences (excluding ESPO) represent 44.92% of absences.

Reasons for Absence

11. The table below shows the reasons recorded for absence for the 2010/11 and 2011/12 out turns positions. It also shows the Q1 (April – Jun 2012), Q2 (July – Sept 2012) and Q3 (Oct – Dec 2012) projected out turn positions. During Q2 Stress/depression, mental health and fatigue, back and neck problems and other musculo-skeletal problems decreased significantly, however the percentage of absences for which the reason is 'not known' had increased which may be why these two categories appeared to have reduced.

12. During Q3, the “reasons unknown” have decreased along with “other”, whereas stress/depression, mental health and fatigue, back and neck problems and other musculo-skeletal problems have increased slightly. It may be that the figures for Q3 are more accurate in respect of reasons for absence.

13. The data shows that stress/depression, mental health and fatigue has reduced quite significantly from Q1. The Mental Health First Aider approach may have resulted in this decrease, however it is too early to know whether this has had a definite impact:

Reason for Absence	2010/11 %	2011/12 %	April – Jun 2012 (Q1) %	July – Sept 2012 (Q2) %	Oct- Dec 2012 (Q3)
Back and Neck Problems	3.67	4.89	6.46	4.33	5.61
Other Musculo-Skeletal Problems	6.16	8.27	9.70	5.56	6.43
Stress/depression, Mental Health and Fatigue	5.76	8.73	9.58	4.55	5.84
Viral Infection	22.41	21.38	17.76	19.75	24.74
Neurological	3.94	4.48	5.57	5.32	5.28
GenitoUrinary/Gynaecological	3.03	2.74	2.85	2.60	2.45
Pregnancy Related	1.20	1.57	3.01	1.51	1.47
Stomach, Liver, Kidney, Digestion	12.60	15.65	14.39	14.70	14.39
Heart, Blood Pressure, Circulation	0.78	1.26	1.20	0.87	1.20
Chest, Respiratory	2.80	2.75	3.01	2.98	3.20
Eye, Ear, Nose & Mouth/Dental	3.56	3.86	3.17	4.30	3.98
Other	10.23	8.32	9.62	12.17	7.55
Not Known	26.22	16.10	13.67	21.35	14.55

15. The table below details the departmental percentage of employee's sickness absence which is recorded as a "Not Known" for previous out turn positions and the year to date position:

Department	2010/11 Out turn %	2011/12 Out turn %	April - Jun 2012 %	July – Sept 2012 %	Oct- Dec 2012 %
Chief Executive's	8.48	6.70	7.07	8.00	8.40
E & T	14.70	12.50	7.04	8.17	7.42
CYPS	15.81	22.94	21.29	23.00	25
Resources	13.67	18.57	17.33	15.00	14.40
Adult and Communities	9.42	14.10	10.71	12.58	12.81

17. Oracle Managers Self Service will ensure that reasons for absence are captured as this is a mandatory field, however this facility will not be available until the new financial year.

Conclusion

18. Absence levels have decreased slightly during Q3 overall. Whilst there has been an increase generally across departments, there has been a reduction in sickness absence levels in CYPS and Adults and Communities.

19. Absences related to stress stress/depression; mental health and fatigue have decreased quite significantly from Q1 (April – June 2012).

Recommendations

The Employment Committee is asked to note the performance of sickness absence levels across the Council for Q3 (October – December 2012) of 8.62 per fte.

Background Papers

None.

Circulation under the Local Issues Alert Procedure

None.

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Equal Opportunities Implications

None.