



**EMPLOYMENT COMMITTEE – 11 JULY 2013**

**SICKNESS ABSENCE – QUARTER 4 UPDATE**

**REPORT OF THE DIRECTOR OF CORPORATE RESOURCES**

**Purpose of Report**

1. The purpose of this report is to provide Employment Committee with an update on the overall County Council and departmental performance in relation to sickness absence for the financial year 2012/13 (1<sup>st</sup> April 2012 to 31<sup>st</sup> March 2013)

**Background**

2. The absence target for 2012/13 was 7.5 days per FTE (full-time employee). The overall absence figure (number of days of absence per FTE) for the County Council in 2012/13 was 9.22 days per FTE. The absence target for 2012/13 has therefore not been achieved. As previously agreed by CMT, absence reporting no longer includes school data.

**Absence data**

3. The table below shows the out turn figures for 2011/12 and for each quarter of 2012/13:

<b>Department</b>	<b>2011/12 Out turn</b>	<b>April – Jun 2012 (Q1)</b>	<b>July - Sept 2012 (Q2)</b>	<b>Oct- Dec 2012 (Q3)</b>	<b>Jan – Mar 2013 (Q4)</b>
Chief Executive's	5.09	5.38	6.67	6.70	6.47
E&T	7.37	6.00	6.95	7.31	8.29
CYPS	7.20	10.44	8.55	8.21	8.30
Corporate Resources	6.24	6.29	6.18	7.36	8.35
Adults and Communities	10.61	12.10	11.46	10.58	11.36
<b>Total</b>	<b>7.46</b>	<b>8.72</b>	<b>8.79</b>	<b>8.62</b>	<b>9.22</b>
ESPO	10.41	7.32	9.07	9.22	9.14

### **Key Issues**

4. The out turn position for 2012/13 of 9.22 days per FTE is an increase of 1.76 day per FTE since the 2011/12 out turn position of 7.46 days and 1.72 days above the target of 7.5 days per FTE. A number of actions are required to address this, and these are detailed later in the report.
5. The trend has been that absence levels increase during Q3 (Oct – Dec) due to seasonal illnesses, however absence levels decreased during Q3 but increased during Q4 by 0.6 days per FTE.
6. Following changes to the Oracle system prior to the running of the sickness absence report, it was identified that a number of ‘return to work dates’ had been entered onto the system but were not picked up by the report. In addition where there staff have left the organisation whilst on sick leave, it has been necessary to close these records manually. Whilst these two issues have been rectified, the quality of the data for Q4, together with the marked increase compared to Q1 – Q3 figures, has caused some concern.

### **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 at 31<sup>st</sup> March 2013:

<b>Department</b>	<b>Average No of FTEs</b>	<b>Long Term Absence FTEs</b>	<b>Short Term Absence FTEs</b>	<b>Cumulative No of Days Lost FTEs</b>
Chief Executive's	329	838	1289	2127
Adults & Communities	1623	10347	8090	18437
Corporate Resources	1020	4813	3710	8523
E & T	735	3266	2823	6089
CYPS	1086	5349	3668	9017
ESPO	339	1740	1356	3096

8. The days lost through long term absences represent 56% of absences and the days lost through short term absences represent 44% of absences. This is consistent with Q3.

### **Reasons for Absence**

9. The table below shows the reasons recorded for absence for the 2011/12 out turn position and each quarter of 2012/13. During Q2 Stress/depression, mental health and fatigue, back and neck problems and other musculo-skeletal problems decreased significantly from Q1,

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.

10. During Q3, the 'reasons unknown' decreased along with 'other' whereas stress/depression, mental health and fatigue, back and neck problems and other musculo-skeletal problems increased slightly.
11. The data shows that stress/depression, mental health and fatigue has reduced quite significantly from Q1. However whilst there is a slight decrease from Q3 to Q4, there has been an increase in viral illness which may be 'hiding' stress related illness. Absences attributed to viral infections have increased each quarter.

<b>Reason for Absence</b>	<b>2011/12 %</b>	<b>April – Jun 2012 (Q1) %</b>	<b>July – Sept 2012 (Q2) %</b>	<b>Oct-Dec 2012 (Q3) %</b>	<b>Jan-Mar 2013 (Q4) %</b>
Back and Neck Problems	4.89	6.46	4.33	5.61	5.12
Other Musculo-Skeletal Problems	8.27	9.70	5.56	6.43	6.14
Stress/depression, Mental Health and Fatigue	8.73	9.58	4.55	5.84	5.52
Viral Infection	21.38	17.76	19.75	24.74	26.87
Neurological	4.48	5.57	5.32	5.28	5.03
GenitoUrinary/Gynaecological	2.74	2.85	2.60	2.45	2.22
Pregnancy Related	1.57	3.01	1.51	1.47	1.32
Stomach, Liver, Kidney, Digestion	15.65	14.39	14.70	14.39	17.61
Heart, Blood Pressure, Circulation	1.26	1.20	0.87	1.20	0.79
Chest, Respiratory	2.75	3.01	2.98	3.20	3.53
Eye, Ear, Nose & Mouth/Dental	3.86	3.17	4.30	3.98	3.73
Other	8.32	9.62	12.17	7.55	7.33
Not Known	16.10	13.67	21.35	14.55	14.80

15. The table below details the departmental percentage of employee's sickness absence which is recorded a 'Not Known' for previous out turn positions and the year to date position. There has been some improvement in the % of 'reasons unknown' since the out turn position in 2011/12.

Department	2011/12 Out turn %	April - Jun 2012 (Q1) %	July – Sept 2012 (Q2) %	Oct- Dec 2012 (Q3) %	Jan – Mar 2013 (Q4) %
Chief Executive's	6.70	7.07	8.00	8.40	6.40
E & T	12.50	7.04	8.17	7.42	6.67
CYPS	22.94	21.29	23.00	25	25.87
Resources	18.57	17.33	15.00	14.40	12.08
Adult and Communities	14.10	10.71	12.58	12.81	14.60

### **Future Action**

17. As a result of the increase in absence levels a dedicated resource has been identified to work with middle managers within departments to improve attendance and to reduce sickness. This resource will be used to:
- ensure that all long term absence cases have a support plan in place;
  - ensure that managers undertake 'return to work' interviews consistently with all returning employees in line with the Managing Attendance policy;
  - create a 'Star Chamber' system in which managers will be accountable for progressing individual sickness absence cases, and provide details of how they intend to reduce the general level of sickness absence in their area.
18. There is also an option to review the Managing Attendance policy and the trigger points contained within it.

### **Conclusion**

19. Absence levels have increased during 2012/13. This will be the first time that the County Council has exceeded 8 days average absence per employee since 2008. Whilst there has been an increase generally across departments, there has been a reduction in sickness absence levels in Chief Executive's.
20. Absences related to stress stress/depression, mental health and fatigue have decreased quite significantly from Q1 (April – June 2012).
21. There has been an improvement in the recording of reasons for absence since the 2011/12 out turn position. However the percentage of absences 'not known' needs to be reduced further to ensure that accurate data is available on reasons for absence.

**Recommendation**

That the level of sickness absence levels across the Council be noted.

**Background Papers**

None.

**Circulation Under the Local Issues Alert Procedure**

None.

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**Equal Opportunities Implications**

None.

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