Agenda Item 13

![Leicestershire County Council logo]

EMPLOYMENT COMMITTEE: 12 JUNE 2014

REPORT ON SICKNESS ABSENCE

REPORT OF THE DIRECTOR OF CORPORATE RESOURCES

Purpose

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 2013/14 (1st April 2013 to 31st March 2014)

Background

2. The absence target for 2013/14 was 7.5 days per fte. The overall absence figure (number of days of absence per fte) for the County Council in 2013/14 was 9.47 days per fte. The absence target for 2013/14 has therefore not been achieved.

Absence data

3. The table below shows the out turn figures for 2011/12, 2012/13, 2013/14 and for Q3 of 2012/13.

4.

Department	2011/12 Out turn	2012/13 Out turn	Q3 2013/14 (1st Oct – 31st Dec 2013	2013/14 Out turn
Chief Executive's	5.09	6.47	6.70	7.51
E&T	7.37	8.29	9.73	10.06
CYPS	7.20	8.30	8.97	9.84
Corporate Resources	6.24	8.35	7.34	7.11
Adults and Communities	10.61	11.36	10.92	11.16
Public Health	-	-	8.47	5.29
Total	**7.46**	**9.22**	**9.15**	**9.47**
ESPO	10.41	9.14	8.46	8.58

Key Issues

5.   The outturn position for 2013/14 of 9.47 days per fte is an increase of 0.25 days per fte since the 2012/13 out turn position and is 1.97 days above the target of 7.5 days per fte. A number of urgent actions are required to address this and these are detailed later in the report.

6.   Absence levels increased from 7.46 days per fte at the out turn position in 2011/12 to 9.22 days in 2012/13 (an increase of 1.76 days per fte). The increase of 0.25 days between 2012/13 and 2013/14 demonstrates that whilst absence has increased during the last financial year it is not increasing at the same rate as the previous year.

7.   Other than ESPO and Corporate Resources, departmental absence levels have increased since the 2012/13 out turn position. Absence levels for Public Health were not previously reported.

Reasons for Absence

8.   The table below shows the reasons recorded for absence for the 2011/12, 12/13, 13/14 out turn position and Q3 of 2013/14. The percentage of absences recorded as Stress/depression, mental health and fatigue has reduced by 2.82% since the 2011/12 out turn position.

9.   The impact of Mental Health First Aid (MHFA), as reported to CMT in October 2013, may account for some of this reduction with managers reporting how they are using the MHFA approach to support staff to remain at work rather than using sickness absence, as well as supporting staff to return to work from sick leave. Managers also report using MHFA to support the health, well-being and welfare of their staff.

10. Other musculo-skeletal problems have decreased by 1.85% since the 2011/12 outturn position. A large number of absences can also be attributed to viral infections and Stomach, Liver, Kidney, Digestion. However the percentage of absences for which the reason is 'not known' has decreased significantly.

11. Viral infections have decreased since the 2012/13 outturn position but remain high.

Reason for Absence	2011/12 Out turn %	2012/13 Out turn %	2013/14 Q3 %	2013/14 Out turn %
Back and Neck Problems	4.89	5.12	4.95	4.82
Other Musculo-Skeletal Problems	8.27	6.14	6.62	6.42

Stress/depression, Mental Health and Fatigue	8.73	5.52	5.33	5.91
Viral Infection	21.38	26.87	23.99	24.79
Neurological	4.48	5.03	6.17	6.23
GenitoUrinary/Gynaecological	2.74	2.22	2.93	2.79
Pregnancy Related	1.57	1.32	1.03	0.99
Stomach, Liver, Kidney, Digestion	15.65	17.61	19.10	18.31
Heart, Blood Pressure, Circulation	1.26	0.79	1.00	1.00
Chest, Respiratory	2.75	3.53	4.14	4.31
Eye, Ear, Nose & Mouth/Dental	3.86	3.73	4.89	5.32
Other	8.32	7.33	10.43	10.21
Not Known	16.10	14.80	9.45	8.90

Current and Future Action

12. There are a range of actions which are being undertaken to reduce levels of sickness absence:

- Due to the diverse nature of the workforce, establish departmental / service / team absence targets; set these as key performance indicators and monitor at a departmental level on a quarterly basis.
- Detailed HR monthly monitoring of absence data to be introduced in line with the attendance management policy, highlighting where individual, team and service levels of absence are above the targets.
- Examine data to identify trends, patterns of absence and their possible causes across the Authority, targeting sickness absence hot spots.
- Remind managers about the support available to deal with absence issues,
- Reinforce best practice for managing absence across the Council e.g:

  o Reinforce sickness reporting requirements
  o Line managers must keep in touch on a regular basis with those on long term absence.
  o Return to work interviews conducted following every period of sickness
  o Implementing flexible and creative approaches which enable members of staff who have suffered more serious illness or injury to return to work earlier than otherwise possible
  o Continued use of our retained Occupational Health Service to support suitable return to work arrangements.
  o Appropriate use of the Health, Safety and Wellbeing service to access the Employee counselling service, stress risk assessments, workplace adjustments, ergonomics advice etc

- o Ensure our managers are aware of the Council's policies in support of caring responsibilities, domestic crises and bereavement.

- Consider how wider issues may impact on sickness absence, for example, job design, employee relations, communication, quality of working relationships and flexible working arrangements.
- Culture: Continue to develop our managers to operate on the basis of trust, being innovative and accessible to members of staff as this can reduce absence rates. Staff who enjoy their job, feel motivated and are productive take less time off sick.
- Promote healthier lifestyles: continue to develop the Council's Well-Being service to promote good practice and innovations to maintain health and wellbeing.
- Dedicated resources will be used to ensure the above actions are undertaken.

Conclusion

13. Absence levels have increased during 2013/14. Whilst there has been an increase generally across departments, there has been a reduction in sickness absence levels in Corporate Resources and ESPO. Corporate Resources and Public Health have also achieved the corporate target.

14. Absences related to stress stress/depression, mental health and fatigue have decreased quite significantly from the 2011/12 outturn position but will need to be monitored carefully in view of the number of expected service reviews which will impact on staff.

15. There has been an improvement in the recording of reasons for absence since the 2012/13 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.

Recommendations

17. Employment Committee is requested to:

   (a) Note the contents of the report.

   (b) Note that the Council will ensure that managers maintain a focus on managing attendance and that they proactively tackle and address poor attendance.

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