

REOURCES SCRUTINY COMMITTEE



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PORTFOLIO	Resources and Performance Management
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Sickness Absence – Update

PURPOSE

1. To report on the sickness absence statistics for April to September 2013, Service Unit's compliance with the Managing Attendance Policy and health and wellbeing initiatives.

RECOMMENDATION

2. That the sickness days per employee for the first half of the year, measured against the agreed target is noted, together with trends, compliance data and activities being undertaken to reduce employee absence and support well being.

REASONS FOR RECOMMENDATION

3. The reduction of sickness absence is a key performance indicator for the Council in order to continually improve performance. In addition to managing attendance the Council has a responsibility for employee welfare which in part can be met by encouraging and supporting employees to look after their own health and well being.

SUMMARY OF KEY POINTS

Statistical Data

4. The Council's sickness absence target for 2013-14 is 6 days absence per employee, set at this level following our lowest ever figure of 5.76 days per employee in 2011/12 and our outturn last year of 7.32 d/e.

The total absence for the April to September period is 2.56 days per employee (0.98 days short term and 1.58 days long term). This compares well with the same period in 2011/12 (2.48 d/e). Comparative figures are shown on **Appendix 1**. The statistics also show that in this period we are maintaining our lower levels of short term absence, reaffirming the effectiveness of the Council's Managing Attendance Policy.

Short term absence in this half year period is the lowest it has ever been on our records.

- Housing and Development Control, People Law and Regulation and Finance and Property Management had the highest absence total from April to September. In all instances this is mainly due to long term absence. Facilities Management and Customer and IT Services had the highest short term absence.

At the time of preparing this report we had 4 employees in the authority meeting the long term absence trigger as measured in October 2013. All are being managed and monitored by managers, supported by the People and Development Team. Of the long term absent employees in services with the highest absence rates mentioned above, all have either returned to work after serious illness or are being progressed through the Managing Attendance Policy.

- Analysis on the absence data continues to be done on a quarterly basis by the P&D Team and reports provided to Management Team. Managers are reminded on a monthly basis of the reports available on HR21 in regard to managing the attendance of their employees. A monthly email goes to Heads of Service to highlight any outstanding SARs and FARs where appropriate.
- The position at the end of September 2013 was reported to Management Team. Any non compliance with procedures was highlighted for their action.
- Between the period July - September 2013, 293 staff had 100% attendance (70.2%) compared to 296 staff between April to June. The chart below shows quarterly comparisons for the last two years.

Quarterly Comparison

Quarter	2011-12	2012-13	2013-14
Q1	69.9%	69.4%	69.9%
Q2	72.8%	65.7%	70.2%
Q3	71.9%	65.7%	
Q4	64.8%	60.2%	

9. Causes of Absence

The top cause of absence for April to September continues to be Stress / Depression / Anxiety at 0.72 d/e. Other Musculo Skeletal (0.35 d/e) and Back and Neck (0.35 d/e) were the second and third highest. Stress and Other Musculo Skeletal related illnesses are consistently in the top three categories in common with other organisations however the volume of these absence categories continues to be at much lower levels than in previous years.

The percentage of days lost to stress, depression or anxiety as an expression of the absence total is less (28%) than detailed in the previous report (29.4%). Days per employee are down to 0.37 d/e compared to 0.39 d/e in April to June.

Compliance

- The People and Development Team provide information and reports to managers. The majority of managers now have ready access to information such as sickness absence records, sickness absence reviews, special and annual leave via HR21, which enables them to better manage their employees' attendance. The People and Development team are on hand to provide additional information, advice and support as required.

11. **Sickness Absence Reviews (SARs)**

At the time of compiling the September quarter statistics, 26 employees (excluding those at the formal stage) were on the review system compared to 25 in June. There were 2 SAR's outstanding at the time of running the reports and these were reported to Management Team.

12. **Formal Attendance Reviews (FARs)**

Also in the September quarter 7 employees (compared to 11 in June) were in the formal absence review process. One FAR was overdue at the time of the analysis and details were reported to Management Team.

13. **Long Term Absence**

Long Term sickness has accounted for 62% of the absence total in the year to date (an increase on last quarter – 55%) which is higher than the full year outcomes in the last 5 years. However, the true measure in days per employee at 1.58 indicates a potential outcome lower than 2012/13 and, as detailed in para 4, short term absence is correspondingly lower. There are 4 employees absent long term at present and all are being appropriately monitored and progressed. Two employees are in the managing health review process and one employee has been dismissed on the grounds of capability.

14. **Summary**

Short term absence levels are being maintained and are at their lowest level ever recorded for the same period. This is a significant factor in maintaining lower absence levels overall and improving performance in the organisation. It is also evidence of the improved effectiveness of attendance management. The successful achievement of the IIP Health and Wellbeing Good Practice Award in the summer of 2012 provides external verification that the Council is effectively managing the wellbeing of its employees.

Long term absence is running at levels below last year but slightly up on 2011/2012.

Regular contact, support from managers and the People and Development Team, Occupational Health advice and agreed return to work plans are used as appropriate to assist employees in returning to work as soon as possible.

Stress/Anxiety/Depression, Other Musculo Skeletal and Back & Neck absences are the highest causes of absence for the first half of the year but the percentage of stress related illnesses is being maintained at lower levels.

15. **Well Being Strategy and Action Plan**

The recent staff survey included an optional Wellbeing Survey which had 247 responses. 65% of respondents considered their health to be very good or excellent and over 80% agreed or strongly agreed that they were able to deal with stress.

In terms of conditions that employees suffer from, the top 3 match the Council's top 3 causes of absence and only 20% of respondents eat the recommended 5+ fruit or vegetable per day.

60% of respondents had accessed or supported Council organised MOT events and an average of a quarter of respondents had accessed or supported each of the following: national initiatives, lunchtime learning, healthy mind events, employee organised clubs and other schemes e.g. Buy a Bike, Burnley Credit Union.

As a result of the survey the Council's Health and Wellbeing group will revise its action plan for 2014 which is being worked on currently. This will include further interventions on the main 3 causes of absence.

Events coming up include Dementia Awareness, Men's Health, Bowel Cancer Awareness and Christmas Singalong. The recent Macmillan Coffee morning raised £136 and we have also raised £57.00 the breast cancer campaign

Having been awarded IIP Champion status the Council is continuing to share information with other organisations, in the public and private sector around our work on health and wellbeing and the impact this has had on our organisation. A forthcoming conversation is planned with the Raphael Healthcare organisation.

FINANCIAL IMPLICATIONS AND BUDGET PROVISION

16. Improved employee attendance and employees who are healthy and well enable the Council to have a more productive and cost efficient workforce. Expenditure on health and wellbeing training and promotions is managed from within agreed People and Development or service unit budgets.

POLICY IMPLICATIONS

17. The Council's Managing Attendance policy and procedures were revised earlier in 2013. Associated policies e.g. Grievance, Dignity at Work, Stress Management and Health and Safety policies are reviewed and revised in line with agreed timeframes. The Wellbeing Strategy and Action Plan are being delivered as part of People, Law and Regulation's agreed service plan. Policies referred to are available on the Council's Intranet (Hub).

DETAILS OF CONSULTATION

18. The People and Development Team are in regular contact with Service Units to support the management of employee absences. Trade Union members are part of the corporate Well Being Group.

BACKGROUND PAPERS

19. Employee records containing exempt information
Previous reports to Management Team and Better Services and Resources Scrutiny Committee.
Managing Attendance policy and procedures
Wellbeing Strategy

FURTHER INFORMATION

PLEASE CONTACT:

ALSO:

General information, including statistics and this report can be found on the Hub under "Ask HR"

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