

# **Report to Personnel Committee**

26 January 2022

Agenda Item: 8

REPORT OF SERVICE DIRECTOR - CUSTOMERS, GOVERNANCE AND EMPLOYEES

NOTTINGHAMSHIRE COUNTY COUNCIL WORKFORCE AVAILABILITY, SICKNESS ABSENCE PERFORMANCE AND SUPPORT TO MAINTAIN EMPLOYEE HEALTH AND WELLBEING

# **Purpose of the Report**

 To provide Elected Members with an update on the current position of workforce availability and sickness absence for quarter 3 2021/22 and to seek approval for the ongoing actions contained in the Employee Health and Wellbeing Action Plan and any new actions identified as part of the Workforce Resilience and Recovery workstream.

#### Information

- 2. Members last received a report at September's Committee which demonstrated that the level of workforce availability throughout the Covid-19 pandemic had remained relatively stable other than around known public holidays where there was a greater level of employees using annual leave. The level of availability fluctuated between 85 and 89% of the workforce and took into account people unavailable to work due to sickness absence, annual leave or for any other approved reason. This figure has dipped more recently due to increased numbers of people self-isolating and including those who are absent with Covid or other sickness. Although workforce availability reporting had moved to weekly reports, this has returned to daily information being shared with the Corporate Leadership Team, to allow effective resource planning using realtime data to continue.
- 3. The current situation continues to have an impact on people's mental and physical wellbeing and monitoring of this is ongoing. The Workforce Resilience and Recovery Group, chaired by Marje Toward, Service Director Customers, Governance and Employees, has an identified workstream on employee health and wellbeing. This is being led by a manger from Children and Families department with input from colleagues from across the Council. A regular Newsletter has received positive feedback; it provides tips and information on how employees can manage their health and wellbeing whilst at work, at home, in an office or in our communities. An example of the wellbeing Newsletter is attached at Appendix F for Members' information to illustrate the tone and subject matter covered in these bulletins.

- 4. Further developments include renewing our lapsed membership of the Business Disability Forum (BDF) which provides a range of advice and information on how managers can support people with long term health conditions whether they fall under the legal definition of the Equality Act 2010 or not. The work with the BDF supports our recent accreditation as a Disability Confident Leader. We will do further analysis on usage of the BDF knowledge hub and telephone helpline after 6 months of membership to determine whether it is delivering the anticipated benefits of our membership.
- 5. Current sickness absence for Quarter 3 2021/22 is 8.89 days, up by 0.77 days, excluding Covid related sickness absence and 10.38 days, up 0.93 days including Covid related sickness absence. The figures for Q2 2021/22 with Covid removed is 8.12 days and including Covid related absence is 9.45 days. The figures for Q1 were 7.34 and 8.49 days respectively.
- 6. The table below shows the breakdown by department of Quarter 3 figures.

Quarter 3	BVPI12 (excluding Coronavirus)	BVPI12 (all)	Coronavirus BVPI12
NCC Directly employed	10.86	12.21	1.34
Adult Social Care & Health	15.33	16.89	1.55
Children and Families	10.73	12.72	1.99
Place	10.24	11.02	0.77
Chief Executive's	5.68	6.43	0.75
Schools	6.39	8.06	1.68

NCC & Schools	8.89	10.38	1.49	
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- 7. Casework arising from the application of the council's various employment procedures continues and there have been **6 dismissals** under the Attendance Management procedure and **25 ill health retirements** in Quarter 3. Work continues with managers to ensure the focus on improving attendance is not diminished whilst attention is concentrated on the response to the pandemic and absences requiring attention continue to be highlighted to managers and HR surgeries continue to be offered virtually.
- 8. There is further concern about the use of "Other" as an absence reason and further work with managers to understand and reduce this is required so that we have a proper understanding of the nature of all absences. Work is underway by the HR Business Partners who support ASCH to look at every incidence of absence where "other" is the attributed reason and this work will be developed across any service area where this is a feature.
- 9. Members have previously expressed a particular interest in the mental health and wellbeing of the workforce. We have begun our partnership with a local National Lottery funded charity Bipolar Lift from 1 December 2021. We are also utilising our Mental Health First Aiders to run further Time to Talk events, the most recent took place on 6 January 2022. This was to provide an opportunity to those experiencing low mood and depression to attend an interactive session offering practical information, advice and practical strategies for these conditions.

- 10. Appendix E provides additional information on the nature of absences across our workforce. It is important to note that in quarter 3 over 70.5% of employees had no sickness absence at all in the previous 12 months and of the remainder, 6.3% of recorded absence had extended beyond 28 days, classified as long term absence. Whilst we do not ignore long term absence and the figures in paragraph 7 indicate continued management of longer term cases, managers need to focus on the 23% of absences ranging from 1 to 28 days to wherever possible prevent this from becoming long term. We are aware of issues where employees are awaiting surgery or treatment for chronic conditions but are experiencing delay in their treatment due to the pressure on the NHS in responding to the continuing impact of Covid. This as well as any other relevant factors are always taken into consideration when determining the outcome of any attendance management process.
- 11. The employee health and wellbeing action plan, previously approved by Members, forms the basis of the workstream in the Workforce Resilience and Recovery Group with a view to further refreshing the offer. Discussions are continuing with the recognised Trades Unions and the various self-managed groups to ensure our support package meets the needs of all, any gaps in provision can be identified and the action plan retains its currency.

## **Other Options Considered**

12. The Council continues to recognise that its workforce is its most valuable asset and needs to be prepared and protected during the Covid emergency and beyond through the range of activities identified here. We continue to build on the existing guidance, toolkits and risk assessments available to assist managers to support their team members. The Council's employee wellbeing offer is kept under constant review and has been extended throughout the pandemic as new needs are identified and fresh resources become available. However, we recognise that the impact of the pandemic as we approach two years of this unprecedented event, is taking a toll on the resilience of all our employees, particularly those engaged in frontline services. It is therefore critical to ensure employee health and wellbeing retains a significant priority in the work that we do and is a key feature of the People Strategy, also to be considered at today's Committee.

#### **Reasons for Recommendations**

13. The Council seeks to maximise the attendance and contribution of each employee to ensure it has the capacity to continue providing essential services to its most vulnerable citizens as the pandemic extends beyond 2021 into the New Year. The provision of an extensive support package for employees is one way to ensure the workforce remains engaged and continues to work effectively to meet the aims and objectives outlined in the new Council Plan and various departmental strategies. It is also recognised as a positive recruitment and retention tool.

# **Statutory and Policy Implications**

14. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below.

Appropriate consultation has been undertaken and advice sought on these issues as required.

#### **Data Protection and Information Governance**

15. There are no data protection or GDPR issues arising from this report as all the information contained is generic and cannot be attributed to individual employees.

## **Financial Implications**

16. There are no direct financial implications arising from the content of this report. However, there is clearly a cost to the measures put in place to support and protect the workforce during the current situation. Developing a comprehensive package of support has contributed to making employees feel valued and ultimately will have a positive impact on turnover and recruitment.

# **Human Resources Implications**

17. The Council recognises that its most valuable asset is its employees and it would have been unable to deliver and continue to provide services to its most vulnerable citizens without their invaluable and continuing contribution. The range of activities outlined in this report in terms of support and protection has enabled every individual to make their own contribution and ensured their positive engagement throughout. The work commissioned through the Workforce Resilience and Recovery Group is identifying what the future of work will look like and what tools are required to successfully deliver this. The health and wellbeing of our employees is essential to assist the workforce move forward in a flexible and supported way, to take on new responsibilities, be enabled to utilise technology and to maximise the organisational and individual benefits of agile working.

## **Public Sector Equality Duty implications**

18. Work has been undertaken to understand the potential additional risk factors presented by Covid-19 to specific groups of employees. Targeted actions have been identified to address these specific issues most recently the promotion of Vaccination Conversation Events arranged by health partners to dispel concerns regarding the vaccines to people who may be hesitant. We continue to engage with the recognised Trade Unions and Council's self-managed groups and support networks to ensure we take full account of the concerns and needs of the entire workforce.

#### RECOMMENDATIONS

It is recommended that Members:

- 1) Agree to the continuing work to deliver the identified actions in the Employee Health and Wellbeing Action Plan and to the inclusion of any additions arising from the relevant workstream of the Workforce Resilience and Recovery Group.
- 2) Agree to receive a further report in April 2022 which provides information on Quarter 4 2021/22 absence figures and workforce availability.

# Marjorie Toward Service Director – Customers, Governance and Employees Chief Executives Department

## For any enquiries about this report please contact:

Gill Elder, Head of Human Resources, on gill.elder@nottscc.gov.uk or 0115 9773867

## **Constitutional Comments (KK 11/01/2022)**

19. The proposals in this report are within the remit of the Personnel Committee.

## Finance Comments (SES 07/01/2022)

20. There are no specific financial implications arising directly from this report.

## HR Comments (JP 11/01/2022)

21. The human resources implications are set out in the body of the report. Significant activity has been undertaken to provide support and develop initiatives to maximise employee attendance.

#### **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

None

## Electoral Division(s) and Member(s) Affected

All