

Report to Personnel Committee

11th September 2013

Agenda Item: 5

REPORT OF THE SERVICE DIRECTOR HR AND CUSTOMER SERVICE

SICKNESS ABSENCE PERFORMANCE AS AT 30th JUNE 2013

Purpose of the Report

1. To provide a further quarterly update for Members about Nottinghamshire County Council's performance in relation to current levels of sickness absence across its workforce.

Information and Advice

Background:

- 2. One of the Council's strategic priorities continues to be to reduce the number of working days lost to employee sickness absence.
- 3. At the Personnel Committee meeting on 12th June 2013 Members received updated data and analysis of the Council's performance against this key corporate performance indicator. This set out that the level of absence at the year end 2012/13 was **8.25 days** absence on average, per employee, per annum, a level of performance which achieved the Council's established target for 2012/13, also **8.25 days**.
- 4. This was achieved through the adoption of a strategic approach which refocused absence management onto proactive, preventative employee health and wellbeing and the delivery of key actions for improvement.
- 5. The established target for incremental improvement during the current financial year 2013/14 is **8.17 days** absence per employee per annum.
- 6. Moving forward, the priority is to maintain the overall trend of performance improvement achieved since 2010 whilst building in sustainability through increased employee engagement.
- 7. As part of the Council's ambition to position the authority, as the largest employer in the County, as an exemplar of good employment practice, work is now in progress on developing a refreshed Workforce Health and Wellbeing action plan for the Council's direct employees.
- 8. This delivery plan will be developed working in partnership with Public Health and the recognised trade unions and will form a key part of a strategic response to

developing and improving employee engagement. A draft of the action plan will be bought to a future meeting of this Committee.

Performance:

- 9. The data set out in detail in **Appendix A and B** to this report reflects the position at the end of the first quarter of the current financial year, that is the period 1st April to 30th June 2013.
- 10. With the completion of the programme of implementation of the Business Management System in April 2013, all of the data in this report has been drawn for the first time from a single SAP system, including that relating to the Council's schools.
- 11. Staggered migration means that the data for the small percentage of NCC staff that remained on the old Cyborg system up to 31st March 2013 will gradually become fully consistent with the majority of data collected through SAP over the next rolling 12 month period.
- 12. The validated data for Q1 indicates that the current level of sickness absence is
 8.14 days sickness per employee on average per annum, an improvement of 0.11 days on the previous quarter and 0.03 days above the in-year target.
- 13. Compared to the position 12 months ago at the end of Q1 2012/13, when it stood at **8.16 days**, an overall improvement of **0.02 days** is maintained.
- 14. The charts attached to this report (**Appendix A and B**), for the first time include data for Public Health. These illustrate that, whilst on an individual basis there are departments which are currently on or over, target overall and others that remain below, the aggregate performance across the Council continues to meet and exceed its established performance target.
- 15. The Local Government Association (LGA) has recently released an update of its annual Workforce Survey report (2011/12), which highlights that the mean average sickness absence level across the whole sector is 8.40 days per full-time employee (FTE) per annum, for comparable County authorities this is 9.10 days. Nottinghamshire County Council's current performance compares well against both of these benchmark indicators.
- 16. The next update report to Personnel Committee will set out the known situation as at the end of the second quarter of 2013/14, that is as at 30th September 2013.

Reasons for absence:

The current LGA Workforce Survey reports that the top three causes of reported sickness absence were stress, depression, anxiety; mental health and fatigue (21.70%) followed by other muscular skeletal problems (14.70%) and back and neck problems (12.30%).

- 18. This reflects the position within Nottinghamshire County Council with regard to stress where it is also the most prevalent reason for absence; however the second most prevalent reason in this authority is currently surgical operations and post-operative recovery which may reflect the age profile of the workforce, followed by illness attributable to "other" reasons.
- 19. HR intends to address the relatively high level of non-specific reason reporting under the "other" category in order to ensure a more accurate reflection of actual reasons for absence. This will be undertaken through the issue of guidance to managers to ensure that they accurately assess and record the cause of illness in line with the Council's reporting categories which reflect those used nationally for Local Government benchmarking purposes.

Stress:

- 20. As set out in paragraph 18 above, the absence reasons report for Quarter 1 2012/14 (**Appendix C**), shows that, absence attributed to stress and stress related illness continues to be the single greatest cause of sickness absence in the Council.
- 21. Relatively high levels of stress related absence across the local authority sector reflect the operating environment of budget reductions and change which have resulted in post reductions and increased demands on those who remain in the service; over the past few years levels of stress related absence in the Council have fluctuated at around **20%** of all recorded absence, just below the reported national average for County Councils.
- 22. There is an improving trend reported in Q1 of 2013/143 with stress and stress related illness accounting for 18.31 % of all recorded absence, compared to 20.24% at the previous quarter and below the reported local government average of 21.70%.
- 23. It is vital that this trend is maintained and responding to the identified need to further reduce levels of stress and stress related illness will form a key element of the Council's on-going focus on proactive and preventative workforce health and wellbeing.
- 24. This work will include an emphasis on early intervention as part of a wider strategic approach to workforce and organisational development. HR are currently in discussion with Public Health colleagues and the trade unions to develop and deliver approaches and activities to support this.
- 25. Assisting individual employees to maximise their capacity to find solutions in response to the challenges of workplace change and changing demands at work will form a key part of this response. This will be balanced against an appropriate organisational response through early intervention which involves engaging managers in effectively planning and prioritising workloads and having timely and effective dialogue with their employees to reduce stress at source.

Long term absence:

- 26. The Q1 2013/14 data indicates that **45.46%** of all absence is currently long term, that is of four weeks or more in duration (**Appendix D**), indicating that the Council is performing well against a target of **50.00%** or less.
- 27. Overall the position compared with the previous quarter is improved by **8.77%** on the previous quarter when it stood at **54.23%**, evidencing that HR working with managers to ensure early intervention where absence does occur is having some positive impact. There remains however a need to reinforce HR support for managers to ensure that absent employees are facilitated to return to work at the earliest possible opportunity.

Other Options Considered

28. No other options are currently being considered.

Reason for other Options Considered

29. No other options are currently being considered.

Reasons for Recommendations

30. The recommendation in this report will enable Members to review the current levels of performance and direction of travel set out in this report and the actions that are in place to maintain a level of performance which meets the Council's identified targets and supports continuous improvement in levels of attendance across the Council. Regular update reports will be submitted on a quarterly basis.

Statutory and Policy Implications

31. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Human Resources Implications

The human resources implications are implicit in the body of the report. The trade unions are engaged in the further development of employee health and wellbeing initiatives through the Joint Wellbeing and Attendance Management Steering Group.

The Trade Unions have confirmed that they acknowledge the figures contained within this report.

Equalities Implications

The Council's Attendance Management policy and procedure applies equally to all directly employed staff. There is separate policy which is applicable to all Community Schools and is recommended to all schools with different governance arrangements. These procedures contain guidance which ensures that appropriate management of the sickness absence of employees with a disability complies with the requirements of the Equality Act 2010.

Financial Implications

The financial cost of sickness is significant and, along with increased productivity and engagement, there are significant savings to be drawn down from further reducing absence rates.

Establishing the true cost of absence to the Council is a complex calculation which needs to take into account a range of related factors, including the cost of providing cover in front line service areas.

Following the successful migration of all employee data into the Business Management System, during 2013/14, active consideration is being given to a mechanism for undertaking detailed analysis and accurate breakdown of the actual cost of absence to the authority.

RECOMMENDATIONS

It is recommended that Members note:

- 1. the on-going trend of continuous improvement
- 2. the current level of performance in respect of sickness absence levels
- 3. the responses under development for 2013/14 to ensure that performance is further improved and the in-year target is achieved.

Marjorie Toward Service Director HR and Customer Service For any enquiries about this report please contact: Claire Gollin, Group Manager HR, on 0115 9773837 or <u>claire.gollin@nottscc.gov.uk</u>

Constitutional Comments (KK 01/08/13)

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

Financial Comments (CB 02/08/13)

33. There are no specific financial implications arising from the report. As stated above, planned development of the Business Management System will provide more comprehensive financial information.

Background Papers None

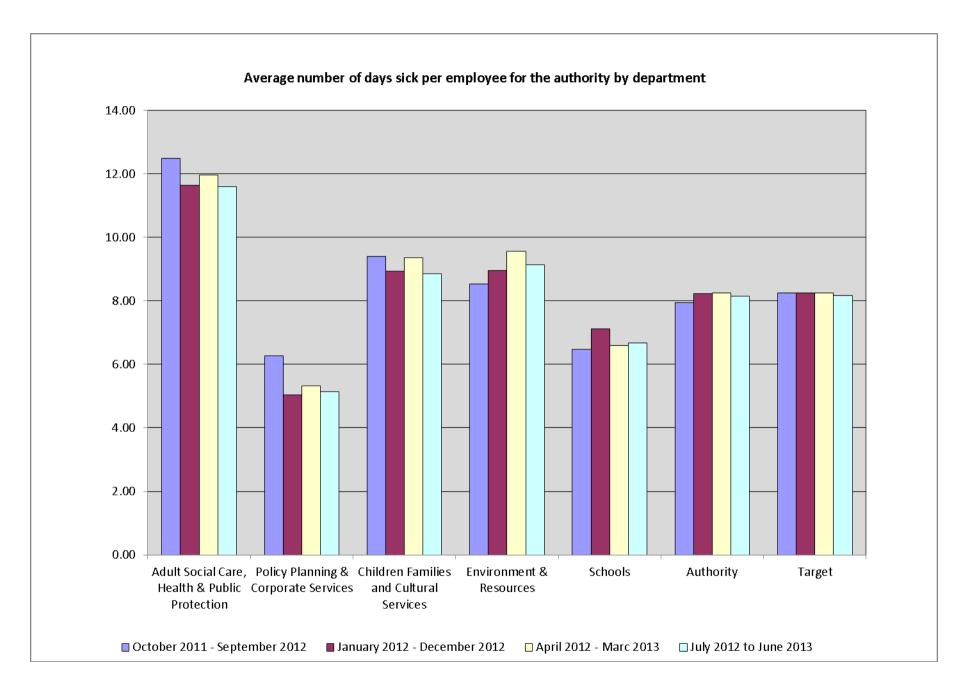
Electoral Division(s) and Member(s) Affected

All

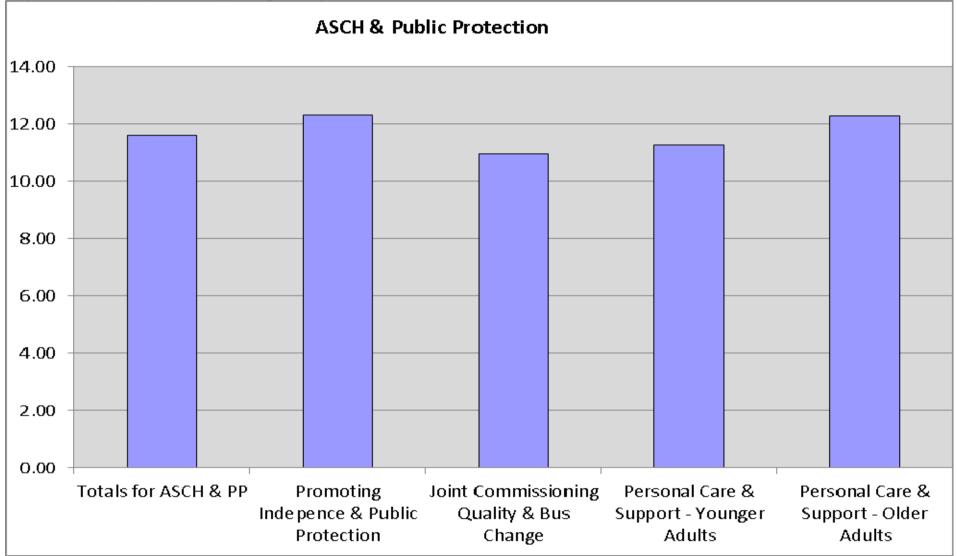
Appendix A: Overall Performance (rolling basis):

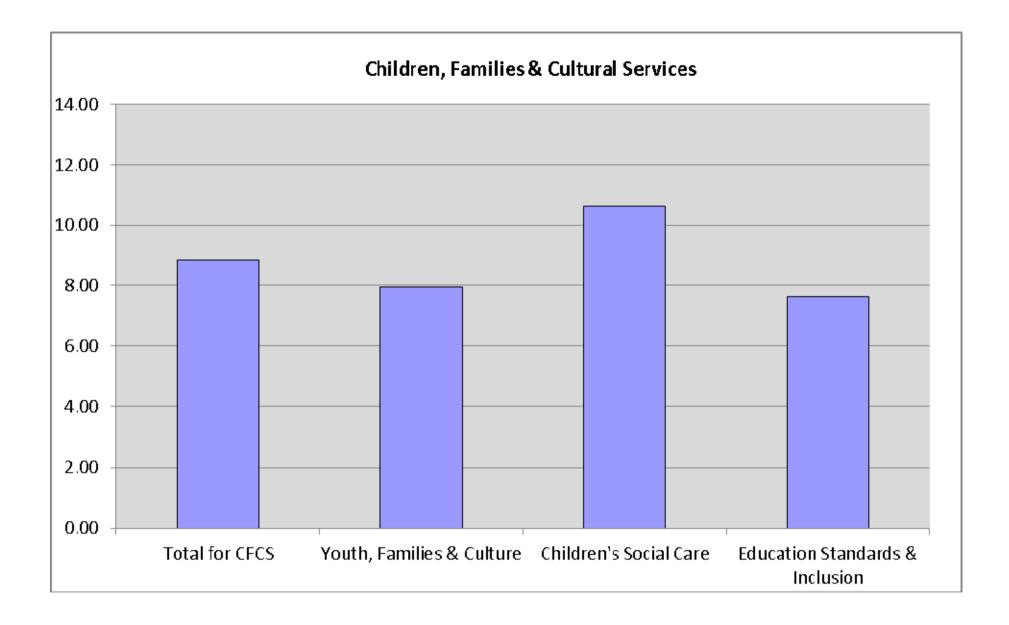
	October 2011 - September 2012	January 2012 - December 2012	April 2012 - Marc 2013	July 2012 to June 2013
Adult Social Care, Health & Public				
Protection				
	12.48	11.63	11.96	11.60
Policy Planning and Corporate Services				
	6.27	5.05	5.32	5.13
Children Families and Cultural Services				
	9.40	8.93	9.36	8.85
Environment and Resources				
	8.52	8.94	9.56	9.13
Public Health*				
	NA	NA	NA	4.23
Schools				
	6.48	7.12	6.59	6.68
Authority				
-	7.94	8.22	8.25	8.14
Target				
	8.25	8.25	8.25	8.17

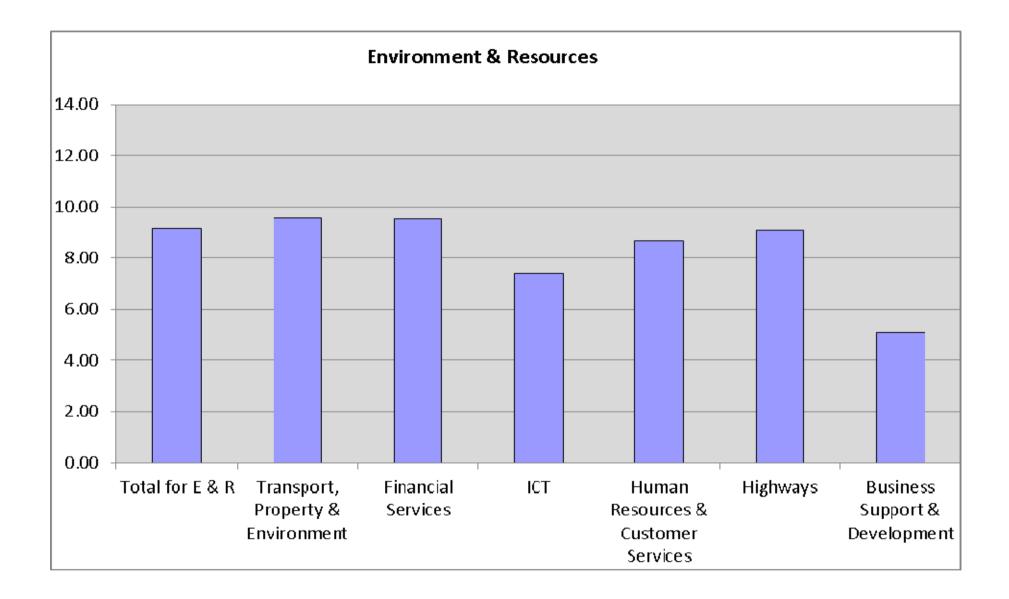
*Public Health employees became part of Nottinghamshire County Council on 1st April 2013. The number of days lost due to sickness has been calculated accordingly on a 3 month pro-rata basis. As Public Health currently has 58 FTE's it has not been possible to portray this graphically in the charts in Appendix B.

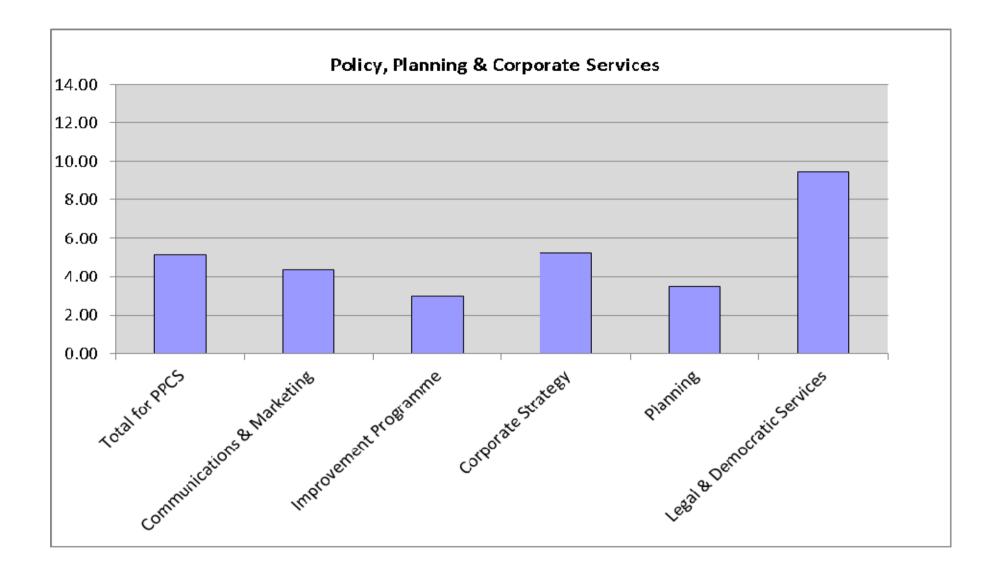


Appendix B: By department (rolling basis):









Appendix C: Reasons for Absence 1st April – 30th June 2013:

	Back Problems	Cold/Flu/ Sore Throat	Headache/ Migraine	Heart/ Circulati on	Infection	Muscula r/Skeleta I	Op/Post Op Recover y	Other	Pregnancy Related	Respirat ory	Skin Disorder	Stomach /Digestio n	Stress/ Depressi on	Not assigne d
Authority	7.34%	8.79%	1.63%	2.11%	2.85%	12.83%	15.77%	13.90%	1.04%	2.78%	0.51%	7.11%	21.29%	2.05%
Policy, Planning & Corporate Services	6.81%	16.91%	2.24%	0.27%	5.12%	2.89%	3.31%	4.09%	0.63%	2.23%	0.00%	9.90%	45.22%	0.40%
ASCH & Public Protection	6.82%	8.79%	1.05%	1.06%	2.32%	10.52%	16.56%	12.63%	1.15%	3.77%	0.37%	7.19%	24.61%	3.17%
Environment & Resources	8.76%	7.20%	1.80%	3.42%	3.33%	16.27%	16.94%	14.62%	0.65%	1.97%	0.69%	7.43%	15.35%	1.55%
Children, Families & Cultural Services	5.51%	10.99%	1.90%	1.04%	2.45%	9.98%	13.59%	14.61%	1.61%	3.18%	0.38%	6.32%	26.58%	1.84%
Public Health	0.00%	15.38%	0.00%	12.82%	3.85%	0.00%	53.85%	0.00%	0.00%	0.00%	0.00%	2.56%	11.54%	0.00%
Schools	4.35%	13.17%	2.45%	1.55%	3.23%	7.98%	21.59%	11.44%	1.63%	3.66%	0.38%	14.17%	14.28%	0.12%

Totals

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Appendix D: Long and Short Term Absence:

