

**REPORT OF THE SERVICE DIRECTOR HR AND CUSTOMER SERVICE**

**SICKNESS ABSENCE PERFORMANCE AS AT 31<sup>ST</sup> MARCH 2012**

**Purpose of the Report**

1. The purpose of this report is to update Members about Nottinghamshire County Council's performance in relation to the levels of sickness absence across its workforce and the key actions that are being taken to further improve attendance levels .

**Information and Advice**

**Absence data:**

2. Sickness Absence data for the Council is reported on a quarterly cycle on a "rolling" basis. The most recent data available reflects the position at the end of the last quarter of 2011/12, Quarter 4, that is the 1<sup>st</sup> January to the 31<sup>st</sup> March 2012.
3. Data has been validated as far as possible, however this is the first occasion on which some of the information has been drawn direct from the Business Management System (BMS) for those directly employed staff whose records were migrated into the new system at 1<sup>st</sup> December 2011.
4. Pending the implementation of Phase 2 of the system later in 2012, which will join up all sickness absence data, the available data from BMS has been combined with a separate rolling report from the existing payroll system which covers school based staff and approximately 900 other staff not covered by BMS Phase 1.
5. Moving forward, one of the main improvements to arise from the new system will be the capacity for managers to take direct ownership for recording and reporting their employee's absence through the Management Self Service facility. This will enable them to take direct "real time" action to ensure that trigger level interviews are held with employees who meet the thresholds set out in the Council's Attendance Management Procedure.

## Performance:

6. A full set of Quarter 4 absence data is set out in **appendix A** to this report.
7. Since June 2010, there has been a gradual and sustained trend of improvement across the authority. This has resulted overall in a **1.72 day** reduction in absence levels, falling from a peak of **10.15 days** per employee on average per year at the end of the first quarter of 2010/11 (30<sup>th</sup> June 2010) to the current level of **8.43 days** per employee on average per year as at 31<sup>st</sup> March 2012.
8. This has been achieved by the implementation of a holistic Employee Wellbeing and Attendance Management Strategy designed to impact positively on absence rates and support the achievement of the Council's stretch targets for improvement. An associated Action Plan is in place which has been reviewed and updated as actions are implemented.

## Long term absence:

9. "Long term absence" is defined as that exceeding four consecutive weeks. The final graph in **appendix A** illustrates the relationship between long and short term sickness absence and shows that currently **57.04%** of all absence across the Council is long term. There is a positive trend of reduction of **2.36%** since this data was first reported to Members in December 2010.
10. The level of long term absence in Nottinghamshire County Council is broadly comparable with the performance of other councils as indicated by the most recent national information available (source Local Government Association Workforce Survey 2010/11), which shows that for Shire Counties in England long term absence accounted for **54.76%** of the total.
11. The current strategic focus on reducing the duration of absence by ensuring that employees are supported by their managers to return to work at the earliest opportunity will be maintained and strengthened to secure further improvement.

## Targets:

12. The most recent national statistics available which are as at 31<sup>st</sup> March 2011 (source Local Government Association Workforce Survey 2010/11), indicate that the average sickness absence level for all local authorities in England is **8.60 days** per full-time employee (FTE). For Shire Counties this is **8.40 days**.
13. The County Council's targets for incremental improvement were **8.75 days** in 2010/11 reducing to **8.50 days** sickness on average per employee per year for 2011/12, and are **8.25 days** by the end of 2012/13 and **8.17 days** by 31<sup>st</sup> March 2014. These targets have reflected an aspiration for Nottinghamshire to reach a position which broadly equates to the national average for County Councils.

14. Quarter 4 data indicates that, at **8.43 days** per employee on average per year, the Council's target for 2011/12 has been achieved and that the Council is now on track to meet its longer term stretch target.

### **Employee Wellbeing and Attendance Management Strategy:**

15. During 2010/11 a fresh strategic focus was placed on employee health and wellbeing as being vital to improving attendance . Focussing on early intervention and effecting early return to work where absence occurs, this approach aims to build a positive well-being culture and a healthier, more resilient, engaged and productive workforce who are better prepared to deal with change and uncertainty at work.
16. To support this work the HR service reprioritised resource to create a temporary post at Team Manager level to focus on the proactive promotion of employee wellbeing and health improvement across the Council , working in partnership with colleagues in Public Health where appropriate, to develop and deliver the Employee Wellbeing Action Plan. .
17. The key achievements arising from the implementation of the action plan to date are:
  - a service review of the Council's Occupational Health service to ensure it is better aligned with the wider wellbeing agenda.
  - the appointment of an initial 26 Workplace Health Champions from a wide range of different job roles across the county who have been trained and accredited to support and encourage colleagues to make positive lifestyle changes.
  - a series of countywide employee Health and Wellbeing Roadshow events to raise awareness of what actions can support individuals to take personal responsibility for building and maintaining good health.
  - targeted interventions such as a smoking cessation workshop at Trent Bridge House to coincide with national No Smoking Day , free weight management session for NCC staff countywide and lunchtime awareness sessions on key health topics such as bowel cancer.
  - the development of a range of advice and information on health and wellbeing topics and themes on the Council's Intranet and in the "Frontline" magazine for those without access to a computer at work.
18. An updated Employee Wellbeing action plan for 2012/13 will be presented to Personnel Committee at its next meeting for consideration by Members.

### **Reasons for absence:**

19. Over recent years across local authorities in England the top causes of sickness absence have consistently been reported as being stress and

depression followed by muscular skeletal problems. The reasons for absence at Nottinghamshire County Council are set out in **appendix B** of this report.

**a) Stress:**

20. The Local Government Association Workforce Survey 2010/11 reported that stress and stress related illness accounted for **19.4%** of all reported absence across all local authorities as at 31<sup>st</sup> March 2011.
21. This trend has continued to be reflected in the County Council's performance data. The absence reason report for Quarter 4 2011/12 (**appendix B**), shows that absence attributed to stress and stress related illness continues to be the single greatest cause of sickness absence in the Council, having now stabilised over 2011/12 at around 20 to 21% and currently accounts for **20.65%** of all absence.
22. The Council's current Employee Wellbeing action plan to support the delivery of its Wellbeing and Attendance Management Strategy therefore places a significant emphasis on preventing, reducing and managing stress.
23. This strategic approach provides a toolkit for managers to enable them to proactively prevent, reduce and manage stress at source with a focus on supporting their employees who are absent due to stress to return to work at the earliest opportunity with appropriate measures in place to ensure they are able to remain in work. This toolkit includes:
  - an agreed policy on the Management of Stress
  - an online Stress Risk Management tool and survey which helps managers identify the sources of stress in their workplace and action plan to reduce and eliminate these
  - a counselling service through which managers can refer employees experiencing work related stress
  - an e-learning training package on Stress Management as part of the leadership development package
  - mandatory Attendance Management courses for all managers which include a focus on supporting employees who are absent due to stress to return to work and put measures in place to ensure they are able to remain in work
  - targeted management intervention, with HR support, in identified stress hotspot service areas.
24. In addition, as part of a wider Health and Wellbeing resource, advice and guidance for employees is published on line and in the front line employee magazine which encourages employees to take personal responsibility for recognising and managing their own stressors.

**b) Muscular Skeletal:**

25. The Local Government Association Workforce Survey 2010/11 reported that absence attributed to muscular skeletal problems accounted for **15.3%** of all

reported absence in Councils across England. Currently **10.59%** of reported absence across the County Council is attributable to muscular skeletal problems

26. In any authority with significant front line services delivered in house there is higher potential that the physical nature of many of these occupations will present a significant risk of muscular skeletal injuries and conditions.
27. The fact that the rate of the Council's absences reported as arising from muscular skeletal problems compares favourably with the national average is an indicator that the assessment and management of risk of physical injury, along with training and awareness raising in the service areas concerned, is having a positive, preventative, impact .

### **Future Developments:**

27. The Wellbeing and Stress Management action plan will be refocused for 2012/13 and linked to the new leadership and management competencies relating to people management. This will ensure that managers take responsibility and are accountable for proactively promoting a healthy and safe working environment and preventing, eliminating and reducing stress at source.
28. Work is also ongoing on a proposed repositioning of the current emphasis on "Stress Management" to reflect a new approach to stress through a proactive refocus on organisational "Resilience Building" which is being adopted by many other local authorities.
29. In this context resilience is the ability of people to cope with stress at work and crisis situations in their personal life, which can impact on their work. Employees who have learnt resilience skills have an increased chance of coping and maintaining good health and attendance at work.
30. This approach therefore directly engages employees in managing their own individual reaction to the pressures of change and to changing demands at work and engages managers in effectively planning and prioritising workloads to reduce stress at source.
31. Revised policy, guidance and learning materials focussing on Resilience will be developed which will be linked into wider work on cultural change as the most appropriate vehicle to plan for and mitigate the impact of reductions on remaining staff, linked to performance management and competency assessment.
32. This will reinforce the Council's continuing commitment to maximising attendance and driving down absence rates in all areas of service.

## **Other Options Considered**

A range of activities are set out within the report.

## **Reason/s for Recommendation/s**

The recommendations 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.

It is proposed that update reports are submitted to Personnel Committee on a quarterly basis.

## **Statutory and Policy Implications**

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 within the body of the report.

The trade unions have been engaged in discussions concerning absence levels, proposed actions to reduce absence and the overall approach and strategy being adopted through the Joint Wellbeing and Attendance Management Working Group.

### **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 the appropriate management response to the sickness absence of employees with a disability in compliance with the requirements of the Equality Act 2010.

## **Financial Implications**

The financial cost of sickness to any large organisation will clearly be significant and, along with increased productivity and engagement, there are significant savings to be drawn down from reducing absence rates.

It has not to date been possible to establish the true cost of absence to the Council as this 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 migration of all employee data into the Business Management System post Phase 2 implementation, it is anticipated that, during the next financial year, one of the benefits arising will be that the system will be able to provide the range of information necessary to inform a detailed analysis and accurate breakdown of the actual cost of absence to the authority.

## **RECOMMENDATIONS**

It is recommended that Members:

- a) Note the current levels of performance and actions for improvement set out in this report.
- b) Agree to receive quarterly performance updates on absence.
- c) Consider the Employee Wellbeing and Stress Management Action Plan for 2012/13 at the next meeting of Personnel Committee on the 26<sup>th</sup> September 2012.

**MARJORIE TOWARD**  
**SERVICE DIRECTOR HR AND CUSTOMER SERVICE.**

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### **Constitutional Comments (GS 15/05/2012)**

Members should accordingly consider and note the position as set out in this report.

### **Financial Comments (MA 15/05/2012)**

As noted above, following further developments within BMS, the financial implications of employee absence will be quantified and included in future reports accordingly.

## **Background Papers**

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.

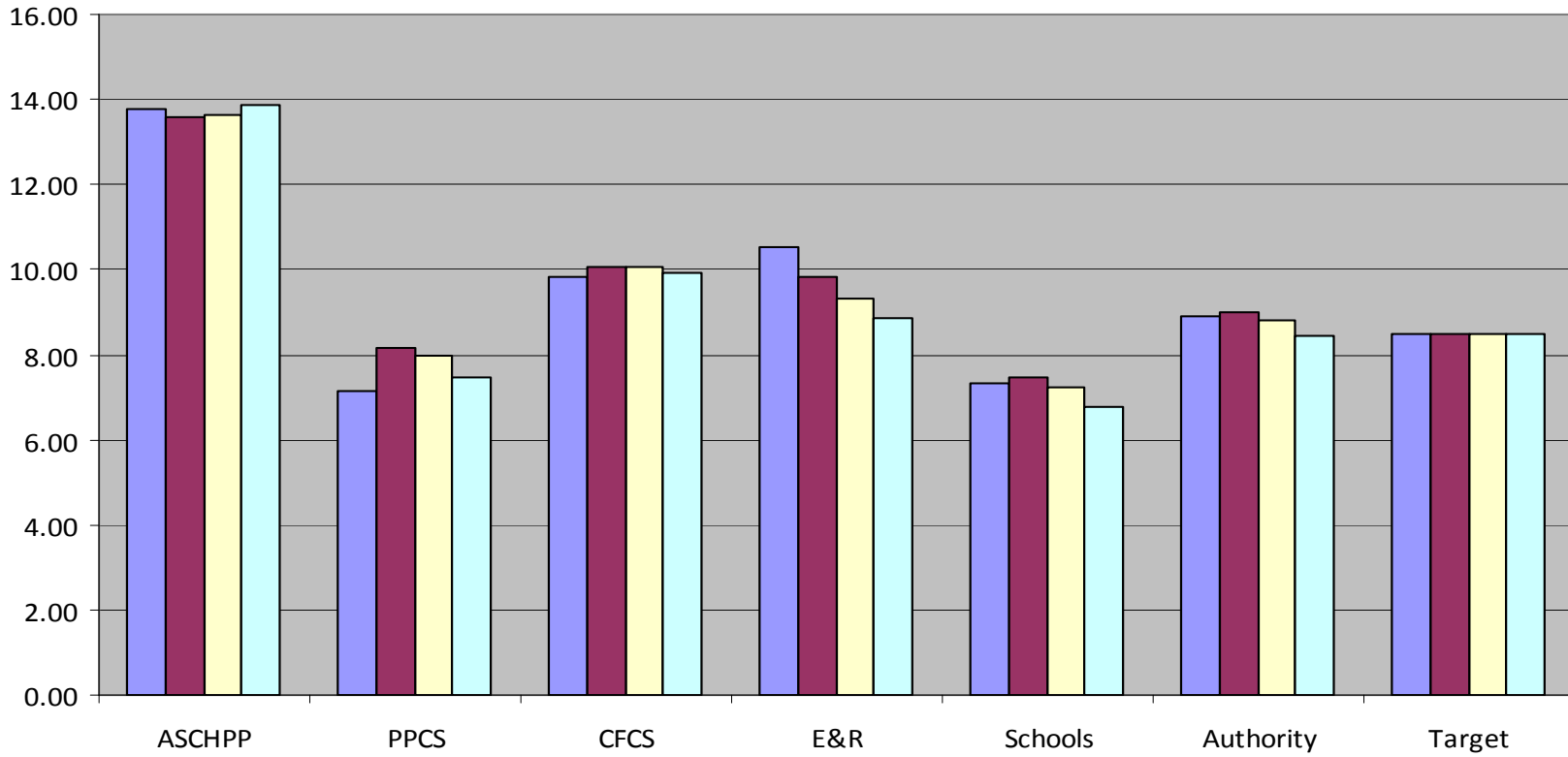
## **Electoral Division(s) and Member(s) Affected**

All



**Appendix A: Performance (rolling basis):**

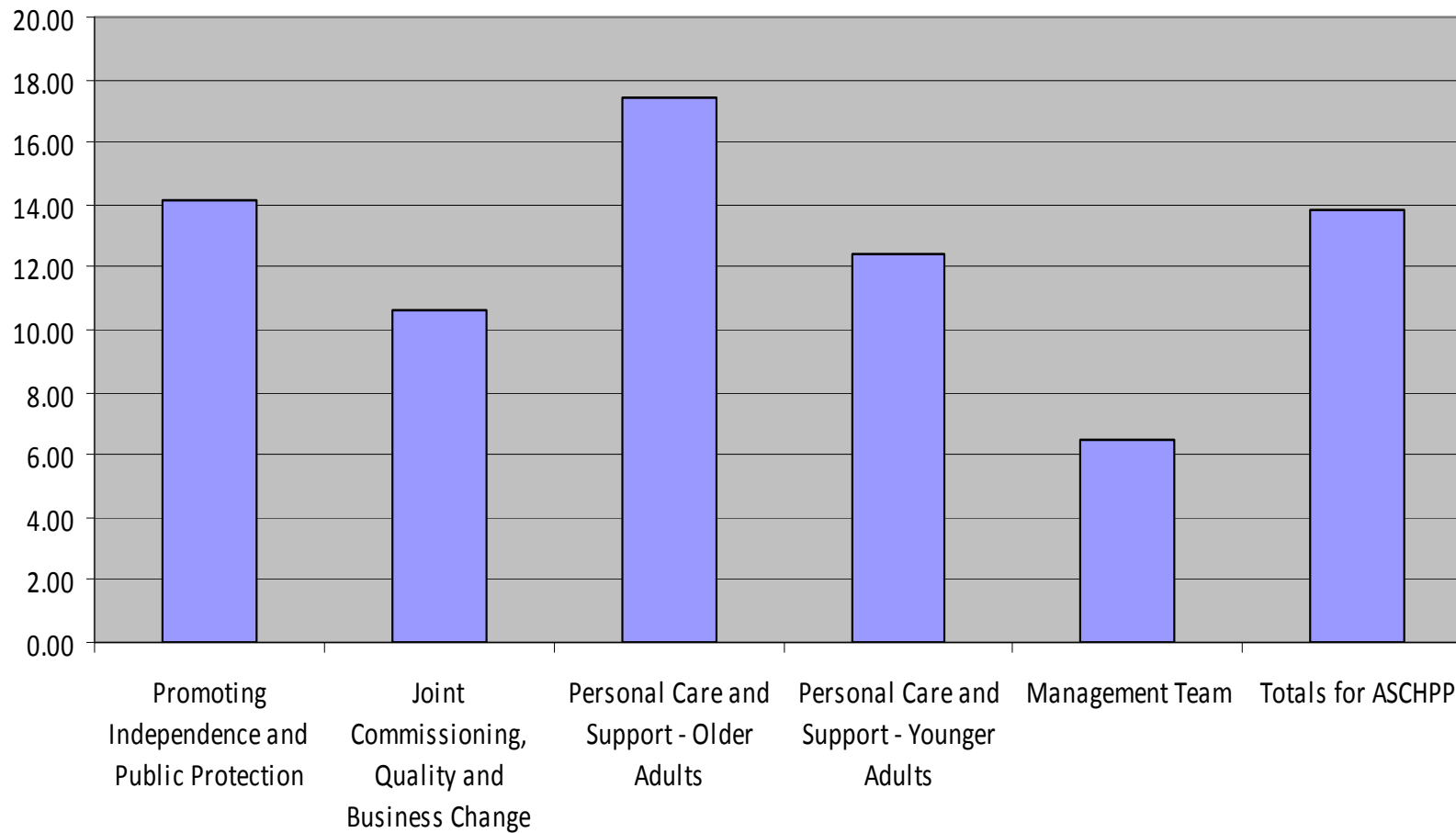
**Average number of days sick per employee for the authority by department**



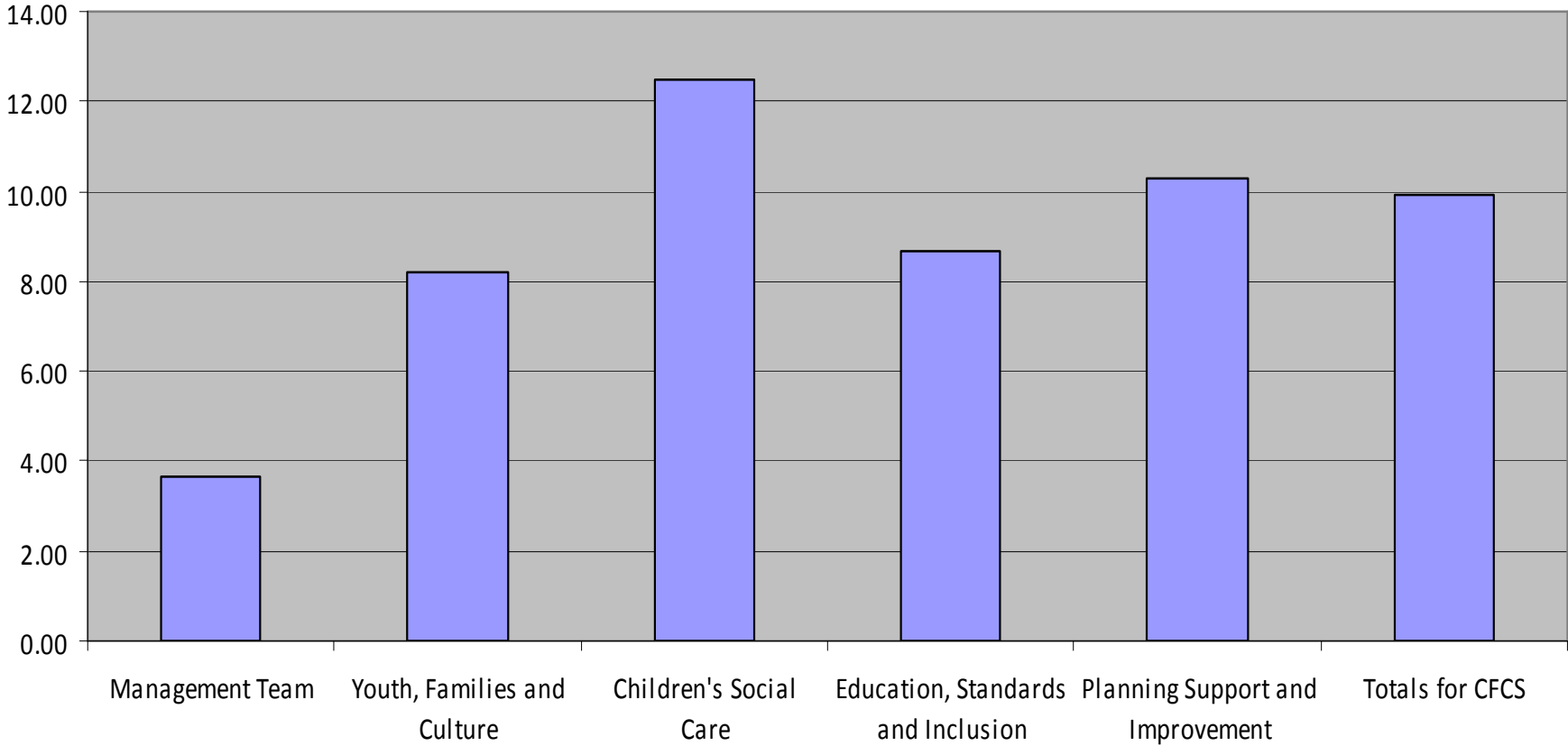
■ July 2010 - June 2011                      ■ October 2010- September 2011  
■ December 2010 - November 2011           ■ April 2011 - Mar 2012

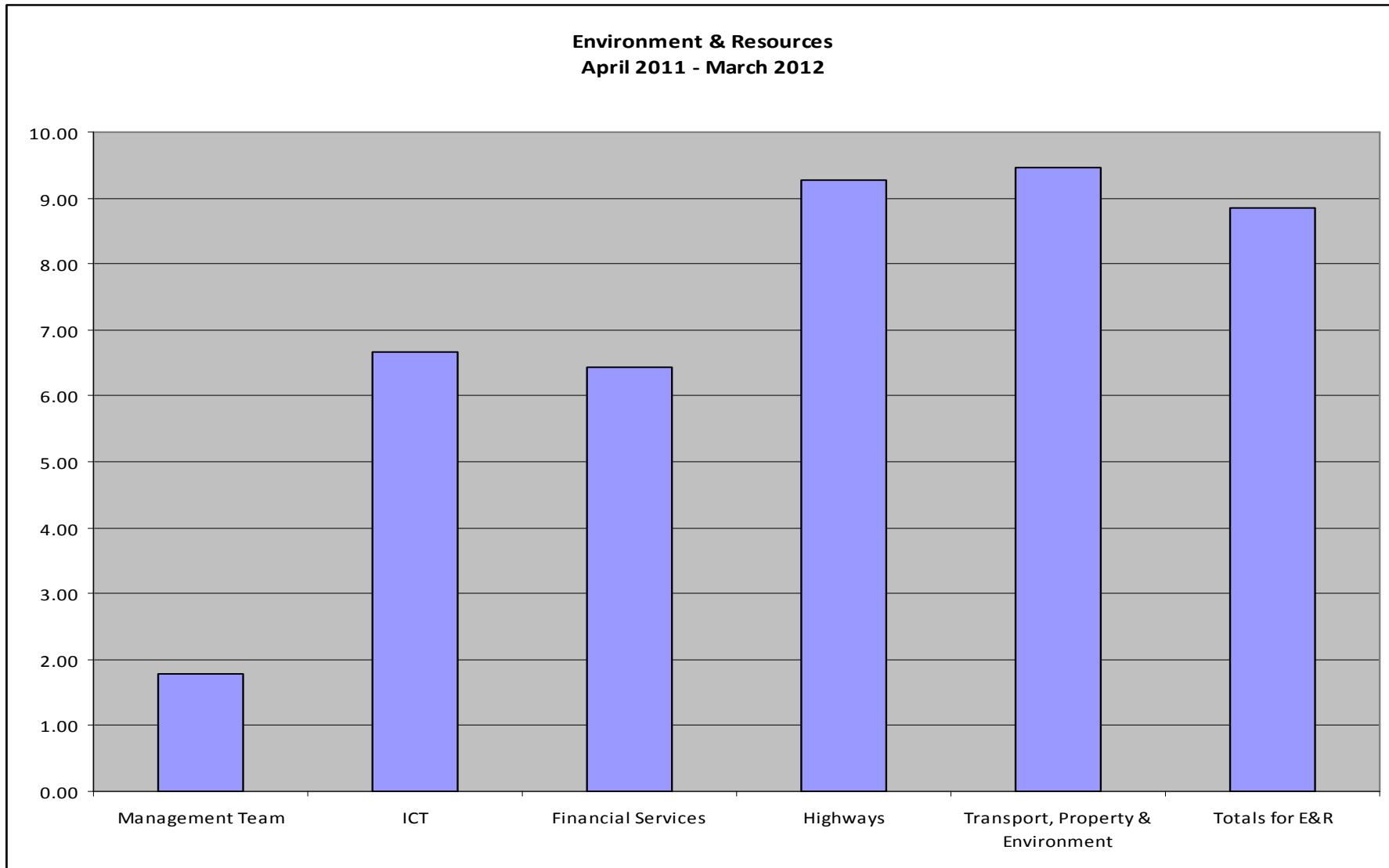
<b>Performance (rolling basis)</b>	<b>July 2010 - June 2011</b>	<b>October 2010-September 2011</b>	<b>December 2010 - November 2011</b>	<b>April 2011 - Mar 2012</b>
ASCHPP	13.78	13.61	13.63	13.86
PPCS	7.12	8.15	7.99	7.47
CFCS	9.85	10.07	10.05	9.94
E&R	10.55	9.81	9.32	8.85
Schools	7.32	7.45	7.25	6.77
<b>Authority</b>	8.91	8.99	8.81	<b>8.43</b>
<b>Target 2011/12</b>	8.50	8.50	8.50	<b>8.50</b>

**ASCHPP**  
**April 2011 - March 2012**



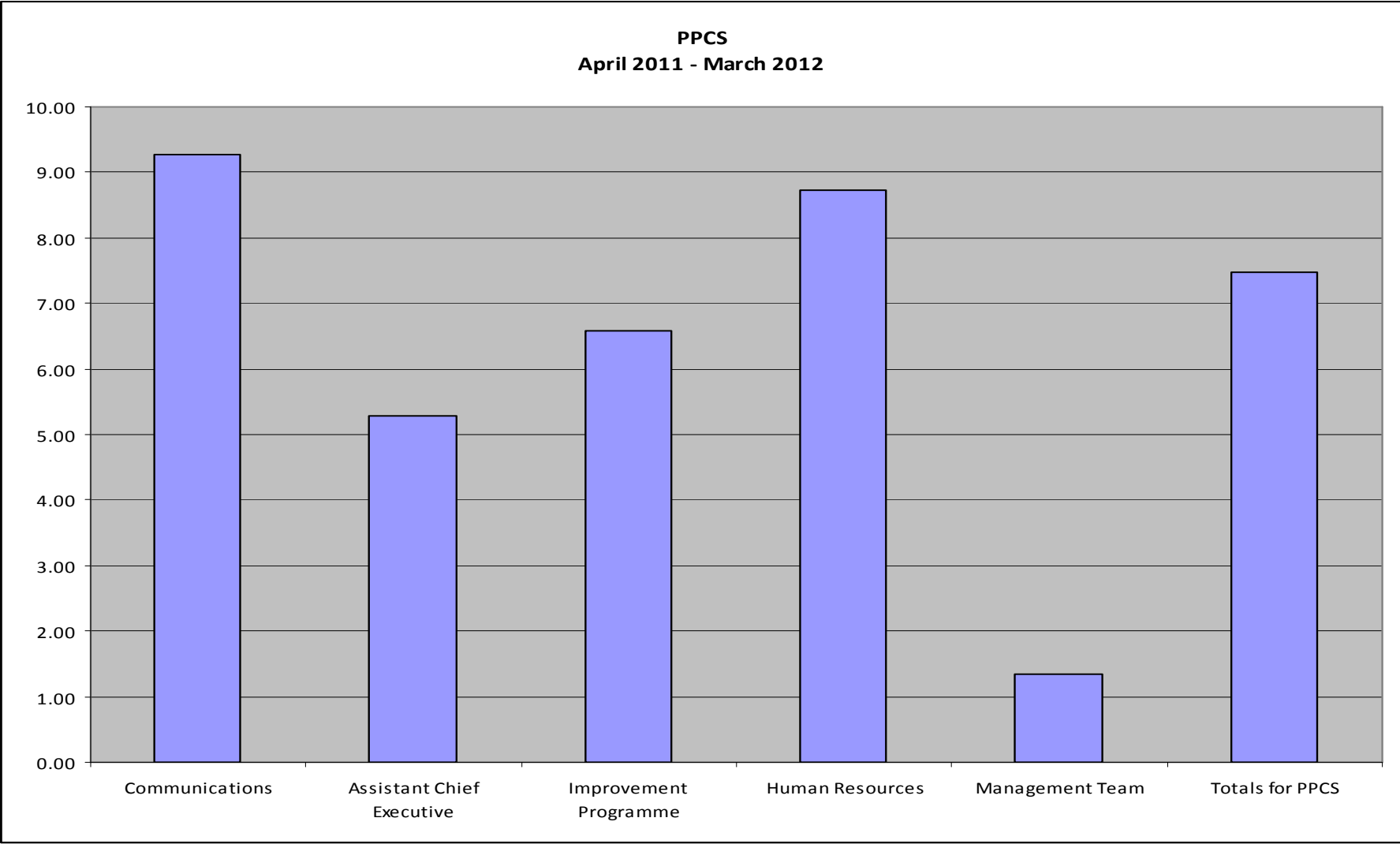
**CFCS**  
**April 2011 - March 2012**



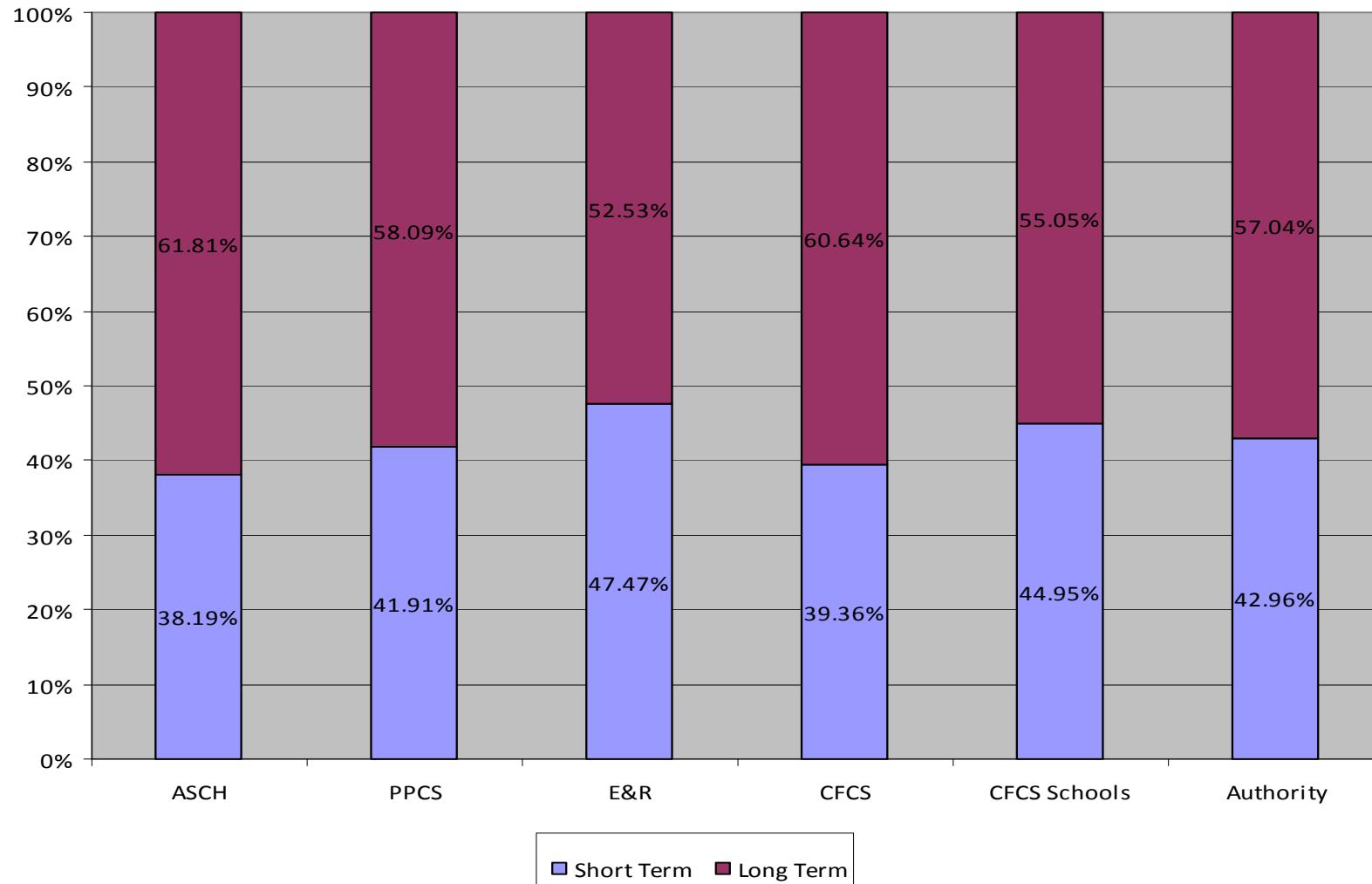


**Note:** From Quarter1 2012/13 the Environment and Resources department will include HR and Customer Services which will be reflected in the data from that quarter onward.

**Note:** From Quarter1 2012/13 HR and Customer Services ceased to be part of the Policy, Planning and Corporate Services department.



Distribution of sickness type  
Apr 2011 - Mar 2012





Appendix B: Reasons for Absence 1<sup>st</sup> January – 31<sup>st</sup> March 2012.

	BACK PROBLEM	OTHER MUSC PROBLEM	STRESS / DEPRESSION	COLD / FLU / SORE THROAT	HEADACHE / MIGRAINE	OPERATION / POST OP	CHEST / RESPIRATORY	PREGNANCY RELATED	STOMACH / DIGESTION	HEART / BLOOD PRESSURE	INFECTION	SKIN DISORDER	OTHER	NOT SUPPLIED
Adult Social Care & Health	8.70%	13.12%	22.78%	5.95%	1.64%	17.04%	2.89%	1.77%	7.84%	2.13%	2.84%	0.53%	11.56%	1.21%
Child Families & Cultural Services	3.69%	10.15%	27.82%	7.58%	2.77%	13.98%	3.03%	1.81%	7.69%	1.25%	2.64%	0.29%	15.47%	1.82%
Environment & Resources	10.20%	13.40%	13.74%	7.63%	1.28%	21.18%	3.12%	0.71%	7.24%	2.72%	3.11%	0.27%	14.03%	1.38%
Policy, Planning & Corp Services	1.92%	13.64%	36.65%	9.33%	2.83%	9.76%	0.93%	2.77%	9.05%	1.87%	1.83%	0.15%	8.86%	0.41%
Schools	4.86%	8.43%	18.43%	11.45%	2.97%	18.04%	2.96%	2.00%	11.87%	1.61%	3.66%	0.54%	11.05%	2.14%
<b>Totals</b>	6.21%	10.59%	<b>20.65%</b>	9.04%	2.40%	17.42%	2.93%	1.75%	9.57%	1.84%	3.19%	0.44%	12.26%	1.73%

