

**EXECUTIVE
COMMITTEE**

18th December 2012

**SICKNESS ABSENCE PERFORMANCE AND HEALTH FOR PERIOD
ENDING 30TH SEPTEMBER 2012**

Relevant Portfolio Holder	Councillor Phil Mould – Portfolio Holder for Corporate Management
Relevant Head of Service	Teresa Kristunas, Head of Finance and Resources
Non-Key Decision	

1 SUMMARY OF PROPOSALS

To report to Executive Committee on Redditch Borough Council's performance for the second quarter (July – September 2012) in relation to sickness absence.

2 RECOMMENDATIONS

**The Executive Committee is requested to RESOLVE that
the data relating to the quarter be noted.**

3 KEY ISSUES

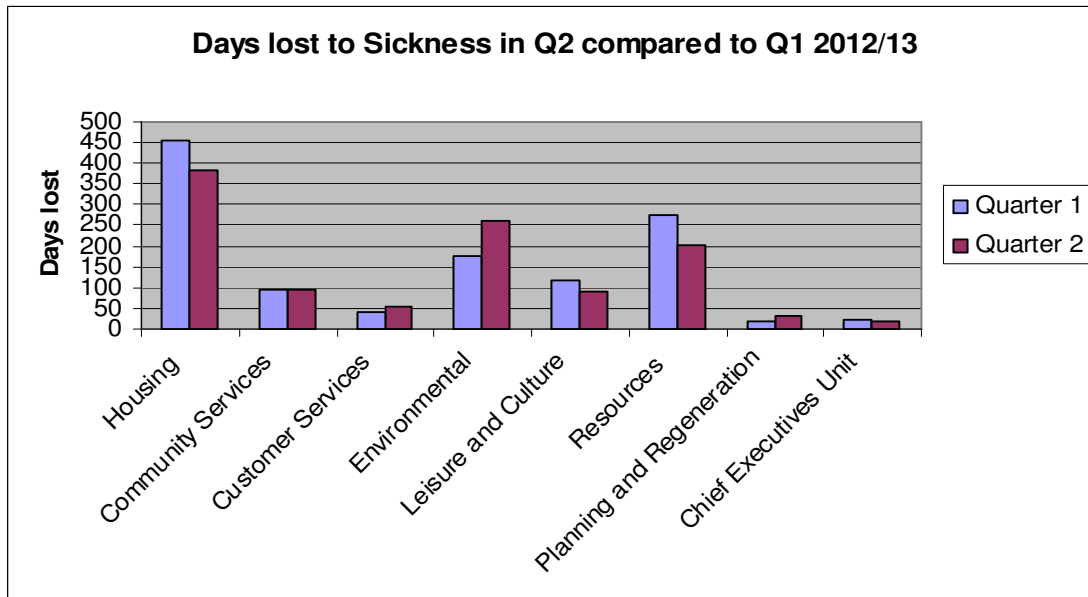
Analysis of the monthly statistics for the quarter

Statistics for the quarter July – September 2012 compared to the previous quarter

- 3.1 The graph below shows the sickness absence for Redditch Borough Council employees in the second quarter July – September 2012, compared to the first quarter (April – June 2012).

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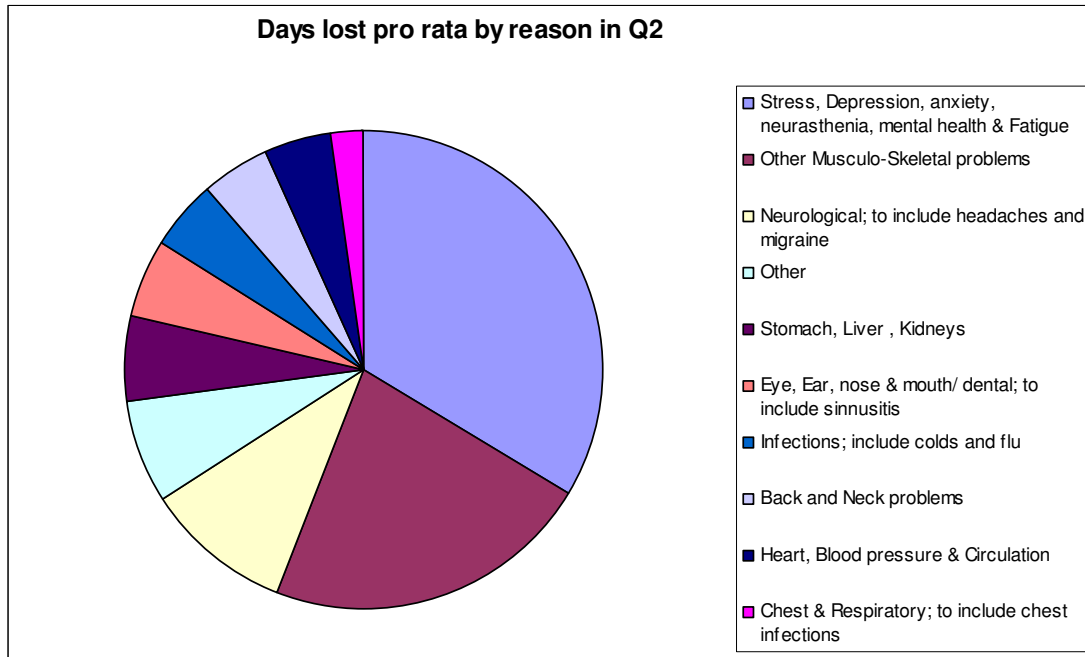
- 3.2 The average days lost per person for this quarter is 2.03 days per person compared to 2.14 days in the previous quarter. This represents a drop in absence levels for the third quarter in a row. It also indicates a predicted outturn for the year of 8.32 days, compared to 8.59 for the previous quarter.
- 3.3 The main contributing factor for the overall reduction in absence is due to levels in Housing and Resources declining, particularly in relation to long-term absence. Overall figures for short-term absence have also reduced since the last quarter. Further information in relation to long-term and short-term absence levels are detailed later in the report.

Breakdown of absence by sickness type

- 3.4 As agreed, the standard Local Government Sickness categories have been used from the start of the reporting year to record sickness absence.
- 3.5 Previously there were more than 30 categories of absence. These have been replaced with just 12, allowing absences to be grouped by type, providing a more useful way to analyse data and decide where resources should be focused. A copy of the absence categories can be provided to members on request.
- 3.6 The graph below shows the top ten absences broken down by sickness type for the second quarter (July to September 2012).

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- 3.7 As the chart demonstrates, by grouping absence type it is possible to see that the largest proportion of absence is as a result of mental health-related illness. Whilst this quarter's absence has actually improved compared to the previous quarter, the new method for categorisation provides more useful data.
- 3.8 It is important to recognise that although mental health-related absence is the largest category, and therefore it may be inferred there is an issue with work-related absence, this category incorporates several different conditions including, work and non-work related stress, depression, bereavement, fatigue and conditions such as SAD and ME.
- 3.9 When analysed further, there is one long-term absence case that is directly attributed to work-related stress and 13 cases over the quarter of non-work related stress.
- 3.10 As a result of this data, and the ability to now focus resource more specifically, the Council has successfully introduced an Employee Assistance Programme. We have also undertaken a review of the current Occupational Health provisions and have worked closely with our local external provider to ensure the Occupational Health service meets our requirements.

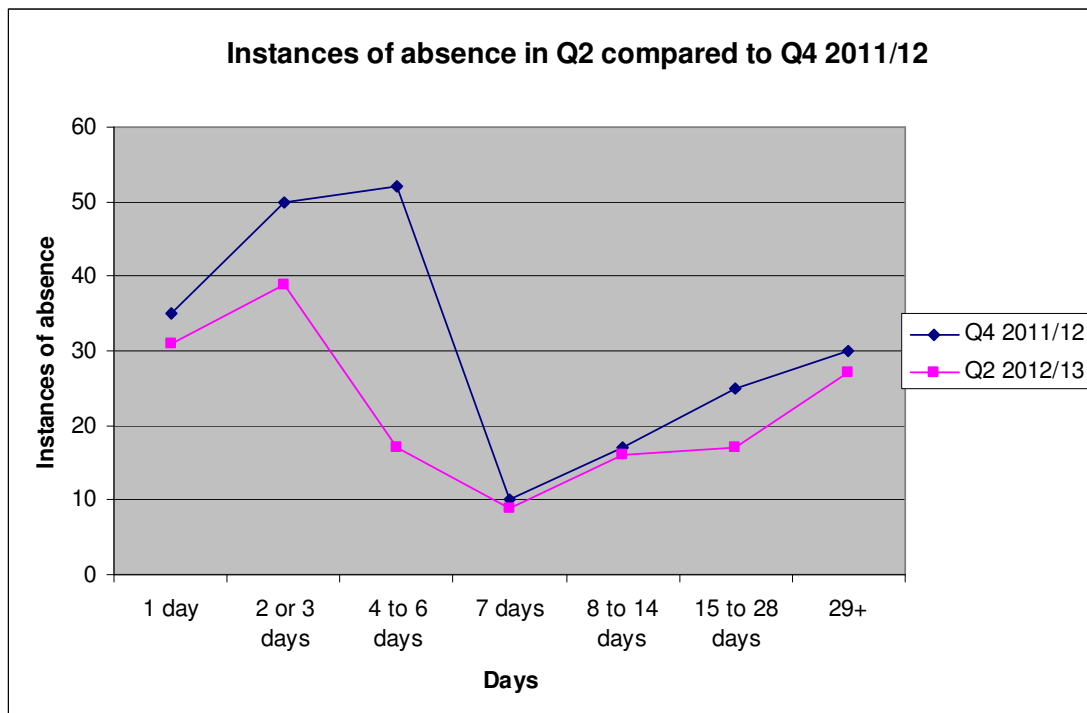
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- 3.11 It has also been agreed that on a trial basis we will employ a Wellbeing Officer, specifically tasked with developing and implementing initiatives tailored to address the trends identifiable through sickness data. The introduction of this position is actively supported by the Corporate Health, Safety and Wellbeing Committee.
- 3.12 The Human Resources and Organisational Development Team has also developed two workshops for Managers; one on self-management, the other focussing on Wellbeing, not just the Manager's but also the Wellbeing of their teams. These will be rolled-out in the next few months.
- 3.13 Irrespective of whether absence due to mental health-related illness is work-related or not, the impact on individuals of the national uncertainty regarding future local government funding and the subsequent change the Council is continuing to experience should not be underestimated. Wherever possible the Council should seek to support its employees in whatever way it is able to.

Incidences of absence by duration

- 3.14 The graph below shows the number of incidences of absence by duration for this quarter compared to Q4 2011/12, which was when this data was last reported.



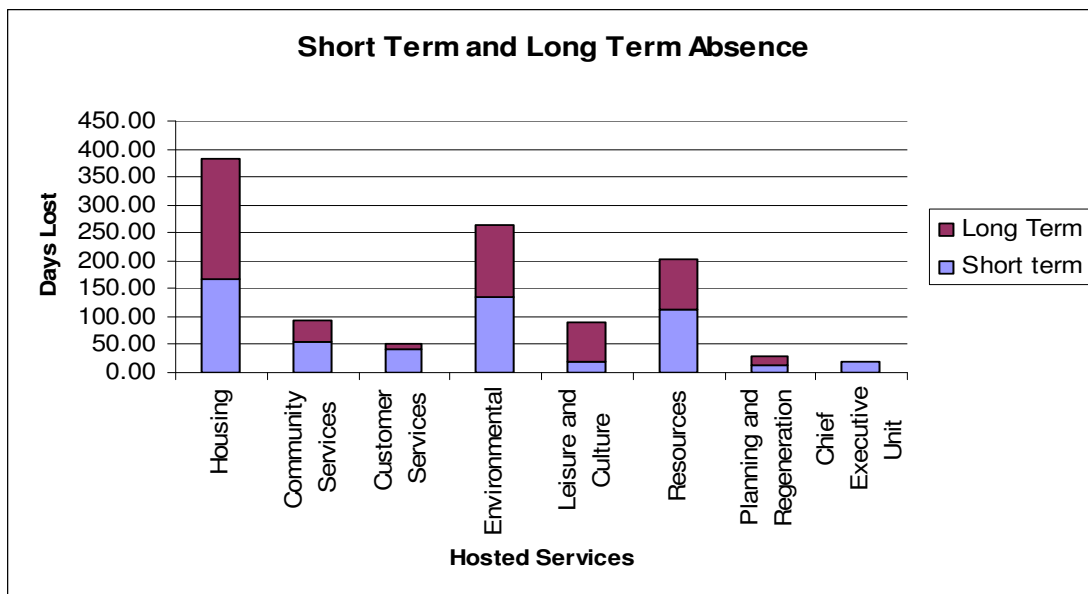
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- 3.15 The graph shows there is still a peak in duration of absence time between 2 to 3 days, although absences of 4 to 6 days have significantly dropped.
- 3.16 The amount of longer-term absences remains consistent, although a small decrease has been achieved. The HR Advisors continue to work closely with line-mangers, particularly in relation to long-term absences.
- 3.17 The recently proposed changes to the Council's Sickness Policy, particularly the introduction of a staged process for the management of long-term absence should assist in continuing this downward trend.

Long term and short term absence comparisons

- 3.18 The following graph shows a comparison between long-term and short-term absence for the quarter.

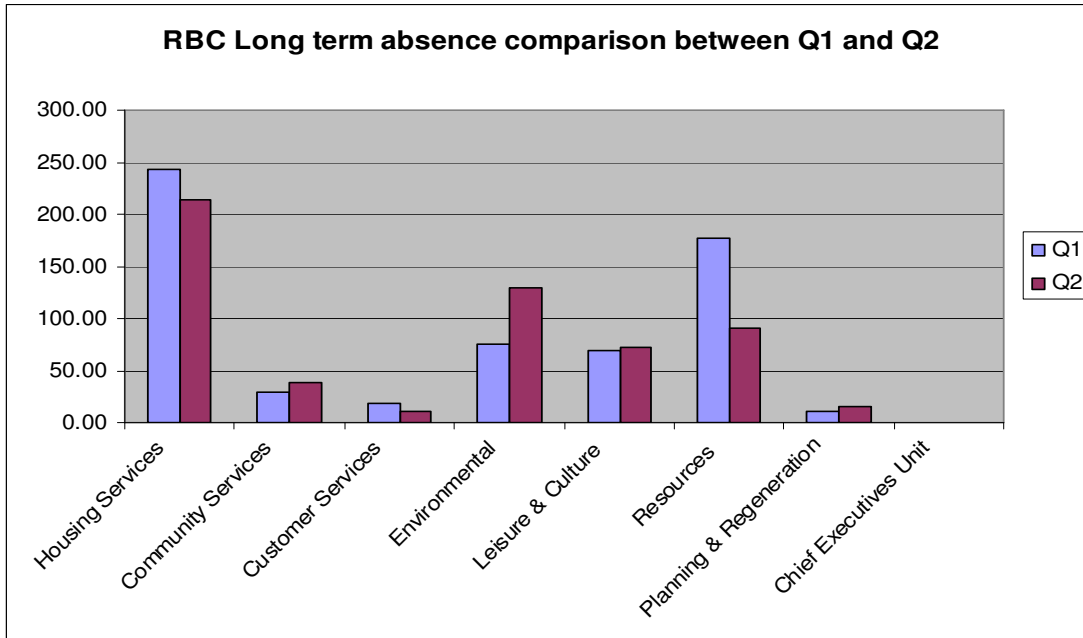


- 3.19 There is not a significant difference between the amounts of long-term and short-term absence. The slightly higher proportion of long-term absence in Leisure and Culture is as a direct result of significantly lower levels of short-term absence for the quarter.

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3.20 Long-term absence for the quarter July – September 2012, compared to the previous quarter



3.21 Overall there has been another decrease in the number of days lost due to long term absences.

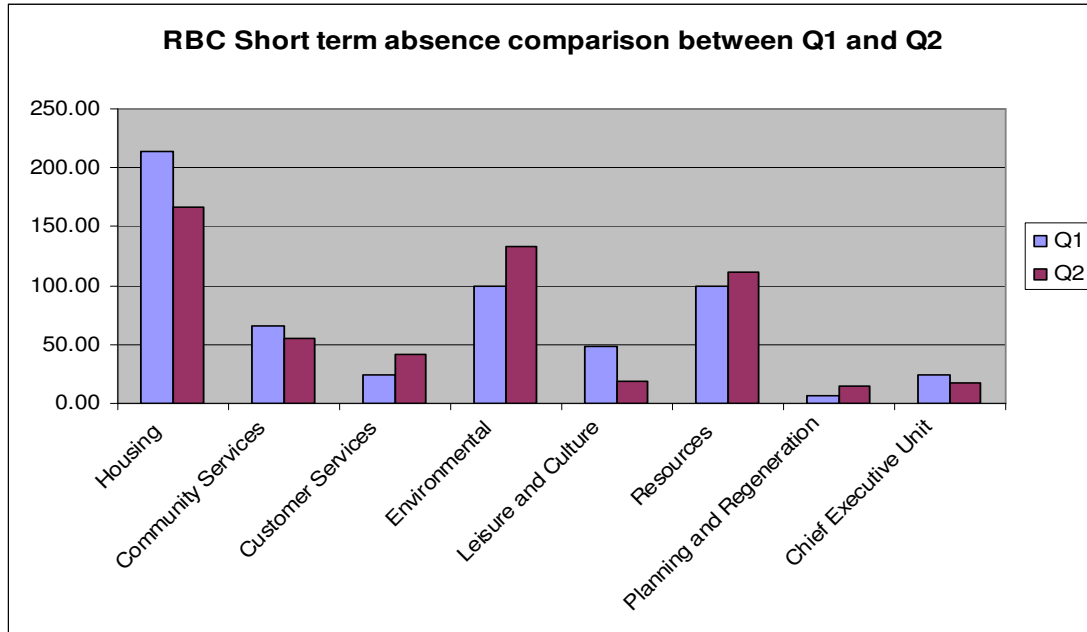
3.22 Environmental Services shows the most significant increase compared to the previous quarter, however, it should be noted that the figures for the previous quarter were unusually low, with this quarter's figures, although still low, more akin to historical data.

3.23 As already referred to, the HR Advisors are working closely with Manager's to encourage effective and fair management of cases with the proposed changes to policy also assisting with this.

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**3.24 Short-term absence for the quarter July – September 2012,
compared to the previous quarter**



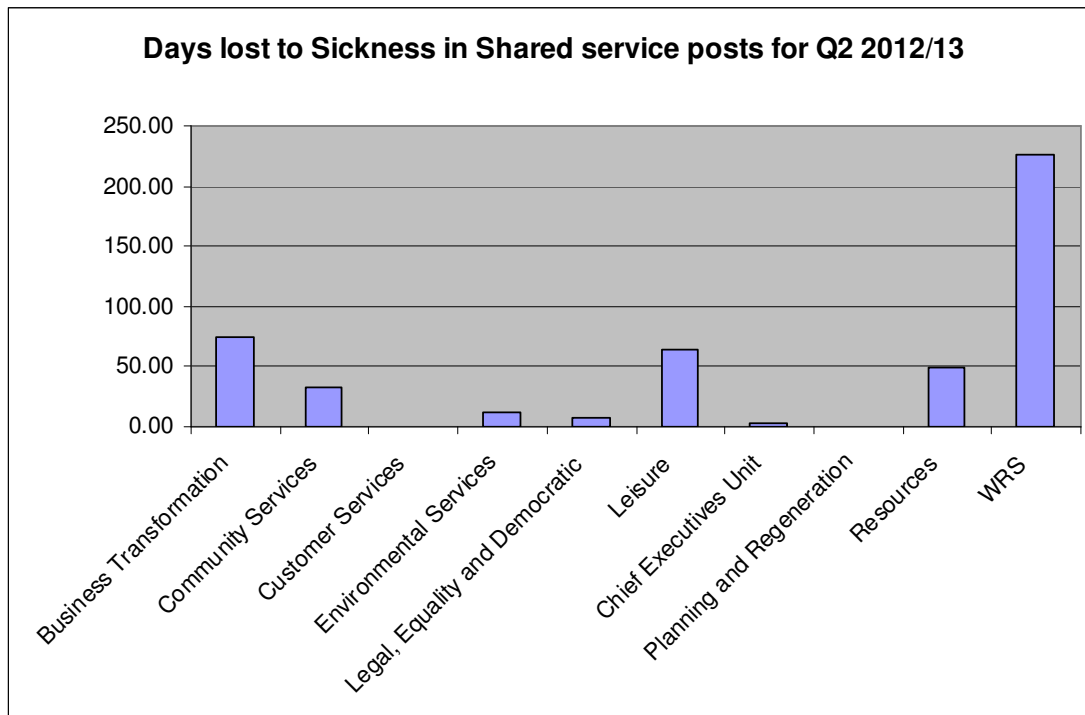
3.25 Short-term absences have also shown a further decrease compared to the previous quarter. This is particularly evident in Housing Services.

3.26 Shared Service Information

The graph below provides an overview of sickness absence levels for all employees who specifically work within shared services for the quarter July – September 2012. Individuals may be employed by either Bromsgrove District or Redditch Borough Council.

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- 3.27 This is the first quarter where this data has been available in this format and so a quarter for comparison does not yet exist.
- 3.28 The average days lost per person in shared services for this quarter is 1.3 days, compared to a Council average of 2.03 days.
- 3.29 As a service fully shared, comparative figures are available for Worcestershire Regulatory Services which appears to show high-levels of absence based on the chart above. However, the average days lost per person is in fact 1.94, which again is less than the overall average of the Council.
- 3.30 It should be recognised that WRS has a high number of employees and therefore is likely to show more days lost compared to other services, as demonstrated in the chart above. Long-term absence has almost halved when compared to the previous quarter.
- 3.31 As well as the ongoing support provided by the Human Resources team, new initiatives as already detailed in the report, including changes to the Occupational Health provision and the appointment of a Wellbeing Officer will continue to assist the Council in the ongoing management of sickness absence and the promotion of Wellbeing amongst employees.

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Financial Implications

- 3.32 The effective management of sickness absence is key in controlling the costs associated with sickness pay and service cover. There are no other financial implications identified.

Legal Implications

- 3.33 There are no legal implications identified.

Service/Operational Implications

- 3.34 The effective management of sickness absence is key to ensuring service delivery is maintained and associated operational issues are recognised and addressed. There are no other service/operational implications identified.

Customer / Equalities and Diversity Implications

- 3.35 The effective management of sickness absence is key to maintaining high levels of customer service and should always be carried out in a fair and consistent manner. There are no further customer, equalities and diversity implications identified.

4. RISK MANAGEMENT

There are none identified.

5. APPENDICES

Appendix 1 – Standard Local Government Sickness Categories

6. BACKGROUND PAPERS

None.

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