

Cabinet Member for (Strategic Finance & Resources)

13th December 2018

Name of Cabinet Member:

Cabinet Member for Strategic Finance and Resources – Councillor J Mutton

Director Approving Submission of the report:

Deputy Chief Executive People

Ward(s) affected:

None

Title:

Sickness Absence to Year Ending 30th September 2018

Is this a key decision?

No

Executive Summary:

To enable the Cabinet Member for Strategic Finance and Resources to monitor:

- Levels of sickness absence for the year ending 30th September 2018.
- The actions being taken to manage absence and promote health at work across the City Council.

Reporting methodology for 2018/19

This year in order to enable us to report more effectively and consistently, we have based the report on:

- A rolling 12-month period
- The removal of schools workforce data (schools data is inconsistent with the data of the workforce as a whole)
- Sickness absence as days lost per Full Time Equivalent (FTE) employee as the main measure.

Recommendations:

Cabinet Member for Strategic Finance and Resources is asked to:

- 1) Receive this report providing sickness absence data for the year ending 30th September 2018 and endorse the actions taken to monitor and manage sickness.
- 2) Note the need to review our sickness and absence policies and procedures and invest in sickness absence management training in order to deliver a sustained reduction of absence levels.

Other useful background papers:

None.

Has it or will it be considered by Scrutiny?

No.

Has it, or will it be considered by any other Council Committee, Advisory Panel or other body?

No

Will this report go to Council?

No.

Report title: Sickness Absence to Year Ending 30th September 2018

1. Background

Performance

- 1.1 This report provides the sickness absence figures for the Council as days lost per employee (FTE) for the year ending 30th September 2018 and for the previous year.

Coventry City Council (excluding Schools)		
	Up to Sept 2018	Up to Sept 2017
People	12.42	10.87
Place	9.77	10.63
CCC	11.5	10.79

- 1.2 This information is based on full time employee equivalent (FTE) average days lost per person against the FTE average days per person available for work.

This is the method that was previously required by the Audit Commission for annual Best Value Performance Indicator reporting. The City Council continues to use this method to ensure consistency with figures published by other authorities.

- 1.2.1 The above figures are different to those previously reported in that data for school based employees is excluded. This is because school based employees have less working days in the year and therefore absence figures are not comparable.

As a result of this change the previous target of 8 days is under review.

1.4 Reasons for Absence

- 1.4.1 The top 3 reasons for absence (shown as a percentage of the days lost) for 2018 and 2017 are as follows:

Coventry City Council (excluding Schools)	End of Sept 2018	End of Sept 2017
Stress, Depression, Anxiety	30.30%	27.75%
Other Musculoskeletal Problems	20.27%	20.62%
Infections, Colds & Flu	9.60%	8.92%

People Directorate	End of Sept 2018	End of Sept 2017
Stress, Depression, Anxiety	32.42%	30.97%
Other Musculoskeletal Problems	18.53%	16.68%
Infections, Colds & Flu	9.71%	9.04%

Place Directorate	End of Sept 2018	End of Sept 2017
Stress, Depression, Anxiety	25.22%	21.42%
Other Musculoskeletal Problems	24.44%	28.37%
Stomach, Liver, Gastroenteritis	10.22%	8.12%

- The main reason for absence is Stress, Depression, and Anxiety. However, at present we do not have information on the extent to whether this is work related or for other reasons.
- The other main reasons for days lost is due to sickness absence were Other Musculo-Skeletal Problems, and Infections, Colds and Flu.

1.4.2 The following table compares reasons for absence in 2018 with those for 2017.

Coventry City Council (excluding Schools)			
Sickness Reason	End Sept 2018	End of Sept 2017	Total Percentage Difference of days lost
Stress	30.30%	27.75%	Increase 2.55%
Musculo-skeletal	20.27%	20.62%	Reduction 0.35%
Infections, Colds & Flu	9.60%	8.92%	Increase 0.68%
Stomach, Liver, Gastroenteritis	8.40%	8.61%	Reduction 0.21%
Back & Neck problems	6.61%	6.38%	Increase 0.22%

1.5 Short Term and Long Term Absence

The following table shows the breakdown between long term and short term absence for the year ending 30th September 2018, expressed as a percentage of total days lost.

Coventry City Council (excluding Schools)			
Directorate	Long Term (30 Calendar Days+) <i>(Number of employees)</i>	Short Term (below 30 Days) <i>(Number of employees)</i>	Total
People	70.23% (383)	29.77% (1546)	100%
Place	64.55% (162)	35.45% (730)	100%
CCC	68.56% (545)	31.44% (2273)	100%

Each column also includes the number of employees who have had a period of sickness in each category.

1.6 Sickness Absence Costs (excluding Agency costs)

Coventry City Council (excluding Schools)		
Directorate Totals	Total Cost of Absence (£000) (Includes Employers NI & Pension)	Days lost (FTE)
People	3,673	30626
Place	1,406	12788
CCC Totals:	5,079	43414

The sickness figures reported are not comparable to those reported previously because they exclude the data and costs for school based employees

1.7 Outcomes of the Promoting Health at Work Corporate Procedure

1.7.1 During 12 months to end of September **2018** there have been a total of **20** employees who left the Council in accordance with the Promoting Health at Work Corporate Procedure. **12** have been due to ill health retirement and **8** are due to the required standards of attendance not being met.

2. Activities during the current year

2.1 HR Support Team

The HR Teams aim to ensure a consistent approach to sickness absence management and to provide information on sickness absence to Management Teams/Senior Managers on a monthly basis. HR colleagues also support managers in the application of the Council's Promoting Health at Work procedure.

2.1.2 Management Teams review summary sickness absence reports on a monthly basis to monitor progress and determine actions needed to address any hotspots.

2.1.3 HR Teams undertake proactive strategies to support the managers in the reduction of sickness absence levels. This includes:

- Robust approach in the management of sickness absence casework with the application of a revised model, resulting in no more than 4 meetings having to take place before a decision is made about an employees continued employment.
- A monthly system to alert senior managers when employees trigger a sickness absence point and have not been seen as part of the Promoting Health at Work Procedure.

- Training is provided to managers to support dealing with both practical and procedural issues. An on-going programme of training is taking place across the Council as a whole. This includes receiving the absence phone call, conducting effective Return to Work Interviews, supporting employees with a disability, and understanding the rationale for making reasonable adjustments in the work place to facilitate an employee's return to work.
 - Training has enabled managers the opportunity to refresh their knowledge and understanding of the Promoting Health at Work procedure.
- 2.1.4 A number of service areas across Coventry City Council hold regular 'performance summits / clinics' on a monthly, quarterly or as needed basis. These incorporate both the management of sickness cases as well as areas of performance concerns, which in some cases have a direct link.
- 2.1.5 These serve as a useful mechanism to safeguard the general well-being of the organisation ensuring performance and attendance are well-managed for all parties. This guarantees absence levels remain a high priority with the aim to reduce these levels for the Council and to enable services to be cost-effectively delivered to the public.
- 2.1.6 The purpose of 'performance clinics', are to provide an opportunity for Management with the relevant Head of Service /Directors, to review sickness and performance patterns and cases within a given area. This is to ensure cases are being addressed in a timely manner and are being robustly, consistently, fairly and appropriately managed through the application of the Promoting Health at Work process and other relevant processes.
- 2.1.7 The clinics provide an opportunity for Managers to share good practice and experience in managing absence levels, as well as to gain further advice, support and updates from HR on changes to procedure and the full support that's available to its employees and managers.
- 2.1.8 One of the particular key benefits of performance clinics has been to identify hotspot areas, or key issues/reasons for absence within service areas. This enables the advice, support and resources to be tailored to ensure these issues are addressed and managed and that our employees are appropriately supported. This has proved to be very useful in making a positive impact in the working environments and on attendance levels.
- 2.1.9 In addition to the above a process mapping exercise is currently being undertaken as a preliminary measure to reviewing the Promoting Health at Work procedure.
- 2.1.10 There are no significant risks arising from sickness absence levels in any service area of the Council.

2.2 Occupational Health, Safety and Wellbeing Service

Activities from the Occupational Health Team

- **Managers Annual Health and Safety Self-Assessment Audit update.**
The Managers Annual Health and Safety Self-Audit has been completed. Health and Safety Plans have now been shared with Directors. The summary report was shared at the Health and Safety Strategy Group on 25th October 2018.
- **Wellbeing Events:**
A wellbeing event has been organised for Whitley Depot for 12th December. There will be healthy lifestyle, skin and MSK checks, podiatry, vision screening, mental wellbeing advice and therapies.
- **The Corporate Health and Safety Training Programme**
From the outcome of the Managers Annual Self Audit there appears to be gaps in the receipt of mandatory health and safety training. The Service will undertake a topic audit of health and safety training, reviewing uptake from 1st November 2017 to 31st October 2018 and making recommendations.

Director briefings

A series of health and safety briefings have been undertaken with Directors on health and safety responsibilities and the formal health and safety communication process.

- **Current Friargate Activities**

Due to the level of interest, the yoga sessions have continued at lunch times. On 19th June, Specsavers were on site and employees attended sessions on eye health and avoiding eye strain.

On 8th August a holistic therapist provided 15 minute foot/ankle, neck/shoulder or arm/wrist massages to employees in the wellbeing room

Alzheimer day took place on 21st September. Public Health and the OH&W Service organised for the Alzheimer Society to run one to one sessions for employees who may wish to discuss their concerns around dementia.

On 28th September and 12th October the Dementia Friends Society ran a group session on Alzheimer's and dementia for employees, at the Ellen Terry Suite.

Musculoskeletal

- The 75 (42% of referrals) incidents of musculoskeletal problems assessed as caused or made worse by work, were distributed across directorates and schools, no single area was represented as a hot spot. No single condition was significantly represented.
- The Fast Care Clinics at 3 City Arcade and Whitley Depot will continue to support high risk areas for musculoskeletal problems
- 172 cases were closed in Q1, having been provided with advice and self-help support

Mental Wellbeing

- The Mental Wellbeing Programme continues with one to one counselling, debriefings, mediation and resilience training.
- The Mandatory Mental Wellbeing Audit continues to be delivered, currently sickness absence statistics are being reviewed to identify appropriate interventions.
- 67 referrals were made to the Counselling Service in Quarter 1 and 59 cases were closed. Of the 59 closed cases, 41 had said they were experiencing work related stress

3. Results of consultation undertaken

Trade union colleagues are kept up to date on the latest absence figures and are actively involved in casework regarding sickness absence management.

Absence from work is also as part of the reported Health & Safety Governance arrangements.

4. Timetable for implementing this decision

None.

5. Comments from Director of Finance and Corporate Resources

5.1 Financial Implications

The cost of sickness shown in section 1.6 is a calculation of the pay cost of individuals who have been absent from work due to sickness. The actual impact on the Council is the financial cost of replacement cover where this is required in specific service areas plus the notional cost of the effect of the absence on the Council's ability to deliver its services.

5.2 Legal implications

Employees are able to make a claim against the Council if they can demonstrate that the Council has failed in its duties as an employer when dealing with sickness absence.

6. Other implications

There are no other specific implications

6.1 How will this contribute to achievement of the Council's key objectives/corporate priorities (corporate plan/scorecard)/organisational blueprint/LAA (or Coventry SCS)?

Sickness absence is one of the Council's corporate plan targets and performance is reported to Cabinet Member (Strategic Finance & Resources) twice a year at the end of Q2 and the end of Q4.

6.2 How is risk being managed?

The Promoting Health at Work strategy will require further development to examine more intensively issues such as working conditions, accidents, work related ill health, and industrial injuries in addition to managing absence. This will involve liaison with colleagues in the areas of safety management and Occupational Health, and will also include analysis of sickness data to identify the relationship between specific causes of absence and occupational groups.

The CIPD (Chartered Institute of Personnel) findings suggest average days lost to be 6.6 days, which represents an increase in 2018 for the majority of organisations (as per the Health and Well-being at Work Survey Report May 2018)

6.3 What is the impact on the organisation?

Human Resources

The HR/OD teams support absence management across the whole City Council. The teams support managers to deal with sickness promptly and consistently within all directorates.

Information and Communication Technology

Data warehouse: Throughout 2018/19 HR data including sickness absence will be stored on the Data warehouse enabling us to use the latest corporate reporting tools improving consistency, timeliness, analyses and presentation of statistics.

6.4 Equalities/EIA

The application of the sickness absence management processes are continually reviewed to ensure compliance with the Council's duty under Section 149 of the Equality Act 2010.

6.5 Implications for (or impact on) the environment

None.

6.6 Implications for partner organisations

None

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