

**THE MINUTES OF THE MEETING**  
**OF THE RESOURCES SCRUTINY COMMITTEE**  
**HELD ON TUESDAY, 10TH MAY, 2005**

**Present:** Councillor A Burnip (Chair)  
Councillors A Collinson,  
Mrs E M Connor, Mrs J Maitland,  
Mrs S Mason, R Taylor and  
P G Ward

**Also Present:** Councillor D Myers – Executive Member  
for e-government and Scrutiny Liaison  
Councillor S Huntington – Executive Member  
for Corporate Services  
Councillor J Goodwin – Executive Member  
for Community and Culture

**Apologies:** Councillor D Armstrong

1. **THE MINUTES OF THE LAST MEETING** held on 19th April, 2005, a copy of which had been circulated to each Member, were confirmed.
2. **THE MINUTES OF THE MEETING OF THE EXECUTIVE** held on 26th April, 2005, a copy of which had been circulated to each Member, were submitted.

**RESOLVED** that the information contained within the Minutes, be noted.

3. **PUBLIC QUESTION AND ANSWER SESSION**

There were no members of the public present.

4. **COMMUNICATION AND PUBLICITY**

There were no items to report.

5. **WORK PROGRAMME ISSUES**

(i) **Sickness Monitoring**

The Chair welcomed Mr R Gott, Head of Personnel, who was in attendance at the meeting to discuss sickness absence.

Members were advised that the authority categorised short term sickness as absences of less than a month and long term as absences over a month. In 2003 61% of all days lost to sickness were short term and 39% were long term. However, in 2004 short term sickness had reduced to 43% but long term had increased to 57%. Further analysis of sickness records for 2005 would be undertaken and it was expected that the trend would continue to be a decline in short term sickness and an increase in long term.

In respect of how sickness absence affected resources and service delivery, it was explained that in non-manual occupations employees were not temporarily

replaced. Other employees would normally cover the work using flexi time, acting-up arrangements and where necessary over time.

This was also the case for most manual occupations, with the exception of Building Cleaning where a pool of relief cleaners were used to bring the team up to full complement. Care Services also utilised a pool of relief wardens to maintain a full complement of staff.

Members were provided with details of sickness data for individual service areas which outlined the average number of days lost to sickness per employee from November 2002 to March 2005.

R Gott proceeded to give an explanation for the following units which had previously been identified as having a poor sickness record.

(i) **Asset and Property Management**

Members were advised that this unit had 8 employees and a BVPI rate of 19 days per employee lost to sickness, 44% of which related to short term sick and 56% to long term. Within this unit, one member of staff had been on long term sick for approximately 74 days.

(ii) **Planning and Building Control**

It was reported that this unit had 18 employees and a BVPI rate of 19 days per employee lost to sickness, 24% of which related to short term sick and 76% to long term. Within this unit 1 employee had been on long term sick for 216 days.

(iii) **Building Cleaning**

R. Gott explained that this unit had 38 employees. Short term sickness in the unit amounted to 23% and long term 77%. The unit had 4 employees on long term sick which totalled 445 days.

(iv) **Refuse Collection**

Members were advised that this unit employed 32 members of staff. Short term sick in the unit amounted to 40% and long term 60%. The unit had 7 employees who had been on long term sick for 335 days.

(v) **Cleansing**

It was explained that this unit had 39 employees. Short term sick amounted to 53% and long term 47%. Within the unit there was 4 employees who had been on long term sick for 385 days.

In relation to the Planning and Building Control Unit, it was explained that market forces supplements had been applied to posts and the Building Control Section was now fully staffed. Both units were looking to "grow their own" staff and had employed a number of technical staff who would be fast tracked.

In relation to the Benefits Unit, the Chair asked if the improved statistics were a direct result of improved working methods. R Gott advised that posts within the Benefits Unit were repetitive and managers had tried to diversify the roles.

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However, in terms of reduced sickness levels, it was difficult to isolate one particular reason.

Councillor Mrs E M Connor queried if the authority provided a professional counselling service for employees. R Gott advised that the authority employed the services of an experienced counsellor through the PCT. The service provided was confidential and the Personnel Unit were not advised of the particulars of any case. They were, however, provided with statistics identifying the nature of problems being experienced i.e. if they were work related or personal.

Councillor Mrs J Maitland queried if the statistics for the Cleansing Unit were a result of specific accidents. R Gott advised that during 2003/2004 there had been a spate of accidents involving manual operations. In response the Authority had provided manual handling training to ensure this type of work was carried out safely. Whilst the sickness figures were still very high these were expected to improve as the incidences of accidents had reduced dramatically.

P Ward queried if employees on long term sick were regularly interviewed and assessed. R Gott confirmed this was the case.

Councillor Mrs J Maitland sought an assurance that “fast tracking” planning staff would not result in lower standards. R Gott gave an assurance that once qualified, home grown professionals would meet the required educational and experience requirements to move into any professional vacancies. In the meantime standards would not be lowered and there would be no detriment to the level of service provided.

P Ward asked if sickness records were analysed to see if there were any seasonal patterns. R Gott advised that managers were trained to look for certain pointers when monitoring sickness levels.

Councillor Mrs E M Connor asked if the programme of flu jabs had resulted in reduced sickness levels. R Gott advised that the success of the flu jabs would be assessed when the next round of statistics were analysed.

The Chair queried if the figures provided included East Durham Homes and if not, who monitored their sickness levels. R Gott advised that the figures did not include East Durham Homes. He explained that the Personnel Unit currently monitored and provided sickness figures for East Durham Homes Senior Managers. East Durham Homes’ figures for the year end was 15.8% and whilst this was disappointing it was an improvement on 17.4% which had been the figure when the Company was first established. It was suggested that future reports could include statistics for East Durham Homes.

**RESOLVED** that the information given, be noted.

### 6. **ADDITIONAL URGENT ITEM OF BUSINESS**

In accordance with the Local Government Act, 1972, as amended by the Local Government (Access to Information) Act 1985 Section 100B (4b) the Chair, following consultation with the Proper Officer agreed that the following item of business, not shown on the agenda, be considered as a matter of urgency.

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7. **WORK PROGRAMME(AOB)**

The Chair made reference to future meetings and suggested that Members give consideration to areas of work they would like the committee to consider in the future.

**RESOLVED** that the information given, be noted.

CERTIFIED TRUE RECORD

CHAIR .....

Date .....

JW/KA/COM/RESOURCES/050501  
11 May 2005