

## Human Resources Committee

16 March 2007



### Sickness Absence: Quarterly Performance Monitoring

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#### Report of Kim Jobson, Head of Human Resources

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##### Purpose of the Report

- 1 To report the performance of the Council and of individual Services on sickness absence during the quarter 1 October 2006 to 31 December 2006.

##### Background

- 2 This is the regular quarterly report to the Human Resources Committee as part of the management of Council performance on sickness absence.

##### Corporate Performance

- 3 *Figure 1* identifies our current rate of sickness absence for the last quarter and for the 12 months to December 2006, in comparison with our annual target. Due to the recent reorganisation of Services, particularly the variations affecting Adult & Community Services and Children & Young People's Service, it is not practical to make realistic Service comparisons between this quarter and the reporting profile in 2005 and the early part of 2006. *Figure 1* shows this quarter's performance alongside the annual target.

DCC Performance for the Quarter Only to 31.12.06	2.99 Days per FTE
<b>DCC BV12 for the Twelve Months to 31.12.06</b>	<b>9.96 days per FTE</b>
DCC Annual Target for 2006 - 2007	9.50 days per FTE

*Figure 1: Headline BVPI12 Figures for Quarter ending 31 December 2006*

- 4 During the quarter to 31 December 2006, sickness absence levels have increased to **2.99 days** lost per full time equivalent (FTE) County Council employee. This compares with 2.00 days over the previous quarter to 30 September 2006 and 2.64 days in the equivalent quarter to December 2005.

- 5 The sickness figure for the twelve months to 31 December 2006, based on the requirements of BVPI12<sup>1</sup>, has risen to **9.96 days** lost per Council FTE employee. *Figure 2* identifies how this total has been reached. This compares with 9.59 days for the twelve months to 30 September 2006 and 9.78 days for the twelve months to 31 December 2005.

Number of days lost to sickness absence between 1/01/06 and 31/12/06		<b>142653.07</b>
Number of FTE staff at 31/12/05	<b>14216.60</b>	
Number of FTE staff at 31/12/06	<b>14436.97</b>	
Average number of FTE staff over 12 month period		<b>14326.79</b>
Number of days lost per FTE - BVPI 12		<b>9.96</b>

*Figure 2: Calculation of current BVPI figure*

- 6 This disappointing increase moves us back towards the figure reported early in 2006. Although the largest increase is shown in Children and Young People's Services, this is partially explained by this quarter including the return from the summer school holiday period. Advice from Occupational Health suggests that there is currently no specific health problem affecting the community at large.
- 7 Out of the seven services only Chief Executive's and Service Direct have recorded a decrease in the number of days lost to sickness during this quarter. Comments from the individual services can be found in this report under the Service Performance and Action section.
- 8 The newly introduced Resource Link Payroll/HR monitoring system has been partially utilised in the collection of this quarter's data. Some information from experience at other Local Authorities suggests that the introduction of a major new system can result in a rise in sickness statistics.
- 9 To comply with BVPI requirements, we set a target absence rate for the end of each financial year. Overall reduction in recent years has generally been positive and we met our targets for 2003-4 (11 days per FTE) and 2004-05 (10 days). The target for 2005-06 was 9 days. However, last year brought a series of more fluctuating returns and an end to the period of steady decline. As a result of the disappointing end of year figure in March, the 2006-07 target was revised to 9.50 days per FTE. *Figure 3* gives an idea of the trends alongside targets in the last year.

BVPI	Jul-Sep 2005	Oct-Dec 2005	Jan-Mar 2006	Apr-Jun 2006	Jul – Sep 2006	Oct – Dec 2006	06-07 target
<b>12</b>	<b>9.84</b>	<b>9.78</b>	<b>10.02</b>	<b>9.55</b>	<b>9.59</b>	<b>9.96</b>	<b>9.5 days</b>

*Figure 3: BVPI comparisons 2005-06*

<sup>1</sup> The Audit Commission requirement for calculating this figure is based around the number of working days/shifts lost to sickness absence based around FTE staffing.

- 10 As indicated earlier, the reorganisation within the Council invalidates most of the Service trends from earlier in the year. However, Appendix 3 shows the quarterly returns for the new Service structure for this quarter and the previous two quarters.
- 11 A breakdown of the absences into short and long term periods<sup>2</sup> can also be found through Appendix 2.

### **Corporate Action**

- 12 Working for Health is a local award scheme for County Durham and Darlington. The Council has recently achieved the Working for Health Bronze Award. The award recognises DCC as an organisation which aims to protect and promote the health of its employees by creating a healthier workplace and organisation. A celebratory ceremony took place at County Hall on Wednesday 24 January 2007 when Professor Andrew Gray (PCT Deputy Chairperson) presented Mark Lloyd with the Bronze Award.
- 13 A huge amount of activity has taken place, in all Services, over the past twelve months to raise the profile of health in the workplace and to support the work towards the Bronze Award. This included:
- The signing of the Smoke Free Charter and the launch of the Health at Work initiative on National No Smoking Day;
  - The September events programme which launched on 6 September 2006 included a series of roadshows and mini exhibitions around the County;
  - The introduction of the 'Working on Well-Being' Intranet pages for staff.
- 14 The 'Working on Well Being' programme of events continues to run and recent introductions have been:
- The One Step Programme – free exercise and relaxation classes in different venues across the County;
  - A Healthy Eating Support Group – commenced on 10 January 2007;
  - Discounted rates have been negotiated for DCC staff with various organisations throughout the region;
  - Aykley Heads Sports Centre Membership – this is now available to all DCC staff.
- 15 Managing Sickness Absence training continues to be an integral part of a manager's development and as the training is now identified in the corporate training programme, newly appointed managers are encouraged to attend at an early stage of their employment. All managers are given a copy of the policy and procedures and the Managers Information Toolkit, which includes general guidance and details of all the forms. In addition, the Corporate

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<sup>2</sup> Short-term absences are defined as up to 20 days.

Induction programme for new employees covers their role in return to work and sickness interviews linked to the trigger points.

- 16 The Occupational Health Service continues to support the delivery of the training programme offering guidance on the role of the OHS in sickness absence management.
- 17 The revised Smoking at Work Policy has now been approved by CMT and a report has been prepared for HR Committee and Cabinet. This policy will be implemented from 1 April 2007. This was an important element in the attainment of the Bronze Award (see the separate report on this subject).
- 18 Turning to the subject of managing stress in the workplace, the Health and Safety Executive see senior management commitment as being the starting point for tackling stress in the workplace. As you are aware, CMT approved a Stress Management Policy on 3 October 2006. The development of the policy was also an integral element of achieving the Bronze Health Award.
- 19 The Stress Management Project Planning Group is currently looking at ways of putting the policy into action alongside the HSE Stress Management Standards. They are looking at linking with existing work that will support policy implementation and identifying other tasks that we need to do as a Council. These include ensuring management commitment and appropriate interventions as well as developing employee understanding of how they can help to address the issue.
- 20 The stress management process will also see an inclusion in the sickness management training and the related toolkit of guidance to managers on how to systematically identify stress related illness issues leading to the production of an agreed individual action plan. The questionnaire and analysis is linked to the Health and Safety Executive Management Standards on work related stress and provides the opportunity for managers and the employee to consider appropriate actions to be taken.

## **Service Performance and Action**

### ***a) Adult & Community Services***

- 21 In Community Support the division is still experiencing high volumes of absence and a pattern has emerged since the divisional move to Rivergreen. This has been highlighted to the Senior Management Team and the Rivergreen Steering Group for further investigation. Further Investigation in the amount of absence is required before action can be taken to address the absence issue.
- 22 Within the Culture and Leisure Division days lost up to 20 days has increased from 201 to 267 which represents 0.99 FTE. Days lost 20 days or more has increased from 386 to 526 which represents the continued absence of

previously noted staff. The net result of this is a move, quarter to quarter, from 1.43 FTE to 1.95 FTE. This raises the overall from 2.18 FTE to 2.95 FTE, which is the second quarter in a row of absences have increased. The main reasons for the long term illnesses are either cancer related or mental illness. Mental health related absences have increased by 9%, Musculo-skeletal problems by 2%, and Heart/BP/Circulation by 1.5%. These three causes account for the majority of increase in absences.

- 23 These absences have been addressed at the service monthly management team meetings with reporting back on agreed staff support action. In this last quarter one member of staff has been taken through a capability hearing and their contract of employment terminated. A further capability hearing is diaried early in February to resolve an absence that currently accounts for over 30% of the long term absence figure. Staff are referred to Occupational Health on a regular basis and OH continue to make home visits where it has proved difficult for individuals to come to County Hall.
- 24 All actions have been implemented with improved communication at SMT, and involvement on managing absences at the middle management level. Of the 11 staff that are monitored by the process, 7 remain absent on long term basis and 4 have returned to work.
- 25 In the Social Care Division the current sickness figure is less than that for the same period in the previous year, although a slight increase on the last quarter. The increase was caused by both short-term and long-term absences, the larger increase being in short-term. This rise in short-term absence days coincides with the increase in Infection related sick leave, nearly 100% increase in the number of days in the last quarter. Mental health related sickness recorded a decrease for the first time this year although still remains the main reason for sickness absence. 'Other Musculo-skeletal problems' recorded an increase in number of days compared to the last quarter. The number of long term absentees (9 months/18 months) remains static and there was a slight decrease in the number of leavers due to capability or permanent ill Health.
- 26 The targeting of specific action aimed at reducing long-term and short-term sickness absences continues. Quarterly Sickness Absence Management group and Performance Monitoring days are held, with analysis and monitoring of sickness absence trends/statistics. Further Managing Sickness briefing sessions are planned for Social Care staff in January 2007. A meeting was held (and further meetings planned) with colleagues from Sure Start to ensue consistency when applying the Corporate Sickness Absence Management procedures across services.
- 27 The process monitoring exercises within Social Care continue, at present 11 final stage interviews are planned in accordance with the Corporate Sickness Absence Management Procedures.

**b) Chief Executive's Office**

- 28      Sickness is still high due to five people on long-term sick. All staff on long-term sick are being monitored and management is still following the corporate procedure and Resource Link in practice.

**c) Children and Young People's Services**

- 29      Although this service has been one of those significantly affected by structural reorganisation they have highlighted comparisons between some staff groupings over the year:

	<b>1 Oct – 31 Dec 2005</b>	<b>1 Oct – 31 Dec 2006</b>
<b>Support Staff in Schools</b>	2.42	3.39
<b>Teaching Staff</b>	1.94	2.14
<b>Former Education Staff</b>	1.04	1.23

- 30      There is a system to flag up when school-based colleagues have hit sickness absence management trigger points (email to Head Teachers/phone call to the Chair of Governors followed up by letter if appropriate). Regular meetings are held with colleagues in HR and Occupational Health Service (OHS) to review all long term absences in schools and agree strategies to encourage schools to resolve the absences. A review is currently being undertaken of OHS which will lead to a revision to the SLA for schools and the establishment of key performance indicators for the OHS SLA for schools.
- 31      The following points have been raised with regard to centrally employed staff. The strategy includes:
- Close monitoring of situations.
  - Ongoing attendances at Sickness Absence Management Training as required.
  - Some long-term sickness absences have inflated the figures (this relates to former Social Care & Health staff).
  - Targeting of specific action aimed at reducing long-term and short-term sickness absences continue. Quarterly Sickness Absence Management Group and Performance Monitoring Days have been held, with analysis and monitoring of sickness absence trends/statistics. Further managing sickness briefing sessions were held for Social Care Staff in October.
  - In relation to absence trends, evidence within former Social Care and Health shows that there has been a slight increase in sickness absence days, the main reason being the increase in long-term absences. The main cause for sickness absence continues to be mental health, with an increase in the number of days from the previous quarter. There has been a rise in the number of leavers (ill-health and capability related) in comparison to the previous period, demonstrating the on-going sickness management activity.

- 32 The number of absences has increased over the quarter for school-based staff. This is to be expected due to the period of the school holidays from mid-July to early September. Efforts continue in respect of bringing long-term absences to conclusion by working with colleagues in schools (this relates to former Education staff).
- 33 There has been a decrease in the number of absences for former Education staff who are centrally employed – this is due to on-going work by managers in applying the sickness management procedures.
- 34 The progress monitoring exercises continue, demonstrated by the number of final stage interviews and capability hearings conducted. A workshop was held to discuss the management of persistent short-term sickness absence with positive feedback from attendees (supervisors and managers) (former SC&H staff).

**d) Corporate Services**

- 35 There has been an increase in sickness absence in the quarter (2.37 days) as compared to the previous quarter ended 30 September 2006 (1.87 days). This also compares unfavourably with the figures against the same quarter in the previous year (2005) when sickness levels stood at 2.02 days.
- 36 All absences are actively managed in line with the County Council policy on sickness absence. A detailed monthly report is produced and discussed at CSMT to ensure that it remains a service priority. This information is also shared with staff.
- 37 Sickness reviews and appropriate referrals to Occupational Health have been undertaken. Most of the problems are down to a small number of long-term absentees and appropriate action is being taken, while some have now returned to work.

**e) County Treasurer's**

- 38 There has been an increase in the level of sickness, partly due to seasonal factors. In addition, five staff were on long-term sickness absence, one of whom has now returned to work.
- 39 Ongoing monitoring is taking place in accordance with sickness absence procedures and advice sought from Occupational Health where appropriate.

**f) Environment**

- 40 The figures show a 9% increase on the previous quarter caused by an increase in the number of days lost in respect of 20 days or more. However based on the same quarter last year there is a 20% decrease in the number of days lost.

- 41 Management are still encouraged to carry out sickness monitoring interviews according to the County Council's procedures.

***g) Service Direct***

- 42 In order to improve the accuracy of sickness reporting, contact points have been identified within each operational area who will maintain basic sickness information. This will eliminate the time lag which sometimes occurs in getting information back to the centre where the reports are compiled. The first stage of the sickness absence process therefore will be started earlier. All employees have been contacted regarding this change which also requests daily contact unless the absence is covered by a sick note or prior arrangement. These changes are in place from January 2007 and it is hoped they will have an effect in the next quarter.
- 43 Capability interviews continue to take place in all areas which will help maintain some of the long-term reductions seen above.

**Next steps**

- 44 The next planned quarterly report will come to the HR Committee of 15 June 2007 covering the period January to March 2007.

**Recommendation**

- 45 You are asked to note the data and the commentaries on progress given by Services and corporately.

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## **Appendix 1: Implications**

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### **Finance**

None directly.

### **Staffing**

Short-term absences have a continuing impact on provision of adequate cover across the services. The spasmodic and unpredictable nature of this type of absence affects satisfactory provision in the short term.

### **Equality and Diversity**

The Council may consider the equalities monitoring of sickness absence levels as such, and is required to monitor formal action affecting employees.

### **Accommodation**

None specific.

### **Crime and disorder**

None.

### **Sustainability**

None

### **Human rights**

None specific.

### **Localities**

None

### **Young people**

None specific.

### **Consultation**

Chief Officers may wish to share data in this report within their Services to promote awareness of the issues.

### **Health**

It is anticipated that strategies such as the Working on Well Being will contribute to an improvement in the health of its workforce and subsequently assist in an improvement in sickness absence levels.

<b>Short and Long-term Sickness Absence 01.10.06 - 31.12.06</b>					
	<b>Number of Days Lost</b>				
<b>Service</b>	<b>Up to 20 days</b>	<b>%</b>	<b>More than 20 days</b>	<b>%</b>	<b>Total No. of Days</b>
Adult and Community Services	3282.2	34.2	6318.2	65.8	9600.4
Chief Executive's Office	376	54.6	313	45.4	689
Children and Young People's Services	13835.45	49.7	14018.14	50.3	27853.59
Corporate Services	549	67.8	261	32.2	810
County Treasurer's	212	46.3	246	53.7	458
Environment	553	64.3	307	35.7	860
Service Direct	1016	34.9	1896	65.1	2912
<b>COUNCIL</b>	<b>19823.7</b>	<b>45.9</b>	<b>23359.3</b>	<b>54.1</b>	<b>43183.0</b>

<b>Short and Long-term Sickness Absence 01.07.06 - 30.09.06</b>					
	<b>Number of Days Lost</b>				
<b>Service</b>	<b>Up to 20 days</b>	<b>%</b>	<b>More than 20 days</b>	<b>%</b>	<b>Total No. of Days</b>
Adult and Community Services	2602.81	30.2	6017.29	69.8	8620.1
Chief Executive's Office	376	47.8	411	52.2	787
Children and Young People's Services	8154.99	56.1	6382.37	43.9	14537.36
Corporate Services	229	34.9	428	65.1	657
County Treasurer's	106	27.4	281	72.6	387
Environment	477.5	61.7	296.5	38.3	774
Service Direct	1010	34.1	1948	65.9	2958
<b>COUNCIL</b>	<b>12956.3</b>	<b>45.1</b>	<b>15764.2</b>	<b>54.9</b>	<b>28720.5</b>

## Durham County Council Sickness Absence

Service:	Quarter			Quarter			Quarter		
	1 Apr - 30 Jun 2006			1 Jul - 30 Sep 2006			1 Oct - 31 Dec 2006		
	FTE	Days Lost	Days Lost per Emp	FTE	Days Lost	Days Lost per Emp	FTE	Days Lost	Days Lost per Emp
<b>Adult &amp; Community Services</b>	2336.90	7979.90	3.41	2315.06	8620.10	3.72	2364.70	9600.40	4.06
<i>Adults Services (former SC &amp; H)</i>	1990.40	7395.90	3.72	1966.40	7774.10	3.95	2031.70	8542.40	4.20
<i>Adult LD Services (former Education)</i>	14.50	70.00	4.83	16.66	53.50	3.21			
<i>Culture &amp; Leisure</i>	269.00	412.00	1.53	269.00	587.50	2.18	269.00	793.00	2.95
<i>Community Support Division</i>	63.00	102.00	1.62	63.00	205.00	3.25	64.00	265.00	4.14
<b>Chief Executive's Office</b>	200.00	520.00	2.60	214.00	787.00	3.68	212.00	689.00	3.25
<b>Children &amp; Young People's Services</b>	9892.80	18890.47	1.91	10029.13	14537.36	1.45	10034.82	27853.59	2.78
<i>Support Staff in Schools</i>	3728.82	7110.99	1.91	3780.83	4830.96	1.28	3838.56	13030.55	3.39
<i>Teachers</i>	4387.48	6807.78	1.55	4452.25	4452.30	1.00	4455.45	9518.34	2.14
<i>Former Education Staff</i>	714.10	1165.50	1.63	760.55	1165.50	1.53	768.11	944.50	1.23
<i>Former SC &amp; H Staff</i>	1062.40	3806.20	3.58	1035.50	4088.60	3.95	972.70	4360.20	4.48
<b>Corporate Services</b>	345.36	739.00	2.14	351.99	657.00	1.87	342.05	810.00	2.37
<b>County Treasurer's</b>	159.33	415.50	2.61	151.13	387.00	2.56	148.00	458.00	3.09
<b>Environment</b>	467.51	483.00	1.03	452.40	774.00	1.71	459.40	860.00	1.87
<b>Service Direct</b>	870.00	2976.00	3.42	870.00	2958.00	3.40	876.00	2912.00	3.32