Human Resources Committee

16 November 2007

Sickness Absence: Quarterly Performance Monitoring

Report of Kim Jobson, Head of Human Resources

Purpose of the Report

1   To report the performance of the Council and of individual Services on sickness absence during the quarter 1 July to 30 September 2007.

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 30 September 2007, in comparison with our annual target.

DCC Performance for the Quarter Only to 30.09.07	2.06 days per FTE
DCC BV12 for the Twelve Months to 30.09.07	**9.65 days per FTE**
DCC Annual Target for 2007 - 2008	9.75 days per FTE

Figure 1: Headline BVPI12 Figures for Quarter ending 30September 2007

4   During the quarter to 30 September 2007, sickness absence levels have increased very slightly to **2.06 days** lost per full time equivalent (FTE) County Council employee. This compares with 2.04 days over the previous quarter to 30 June 2007 and 2.00 days in the equivalent quarter to September 2006.

5   The sickness figure for the twelve months to 30 September 2007, based on the requirements of BVPI12[1], has, this reporting quarter, also shown a slight increase to **9.65 days** lost per Council FTE employee. However this figure is still below our target figure of 9.75 days. *Figure 2* identifies how this total has been reached. This compares with 9.58 days for the twelve months to 30 June 2007 and 9.59 days for the corresponding twelve months to 30 September 2006.

---

[1] 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.

Number of days lost to sickness absence between 01/10/06 and 30/09/07		142,463
Number of FTE staff at 30/09/06	14,383.71	
Number of FTE staff at 30/09/07	15,142.20	
Average number of FTE staff over 12 month period		147,62.96
Number of days lost per FTE - BVPI 12		9.65

Figure 2: Calculation of current BVPI figure

6　　This quarter, four out of the seven Services have unfortunately recorded an increase in their sickness absence figures. It is worth pointing out that individual Service figures may show a variation on previous trends which in part could be due to the fact that, for reporting processes, further movement of staff has taken place during this quarter, as demonstrated below:

Staff Grouping	Moved from:	Moved to:
Customer Services	Chief Executive's Office	County Treasurer's
Regeneration	Chief Executive's Office	Environment
Strategic Human Resources	Corporate Services	Chief Executive's Office

　　　Comments from the individual Services can be found in this report under the 'Service Performance and Action' section.

7　　The Resource Link Payroll/HR monitoring system has again been partially utilised in the collection of this quarter's data. The transferring of data from a series of older recording systems to Resource Link is still progressing. It is still anticipated that this development should ultimately generate more consistent data across the Council. At present, services are still required to complete the Sickness Absence Pro-forma for collation by the Strategic Human Resources Division.

8　　*Figure 3* below shows the recent trend in performance against our current target.

BVPI	Jul – Sep 2006	Oct – Dec 2006	Jan – Mar 2007	Apr – Jun 2007	**Jul – Sep 2007**	07-08 target
12	**9.59 days**	**9.96 days**	**9.84 days**	**9.58 days**	**9.65 days**	**9.75 days**

Figure 3: BVPI comparisons

9　　A breakdown of the absences into short and long term periods[2] can be found through Appendix *2.*

10　　Appendix 3 shows the quarterly returns for the Service structure for this quarter and the previous three quarters. Following the internal reorganisation of Services, we have now reached a point where we can demonstrate trends for a full year within the revised structure, although as stated above, certain groups of staff are still moving from one Service to another resulting in the sickness figures not being directly comparable from quarter to quarter.

---

[2] Short-term absences are defined as up to 20 days.

11   The formal BVPI calculation requires the inclusion of all permanent local authority employees. However, following feedback at CMT on 27 February 2007, staff who work in aided schools will continue to be excluded from the return from Children and Young Peoples Services – they are classed as employees of the school.

12   The County Council now participates in a Local Authority Benchmarking Club co-ordinated by PriceWaterhouseCoopers (PWC) that measures all BVPIs against other County Councils. Recently, they produced a profile of sickness statistics for the first quarter (April to June) of the 2007/08 reporting period. Of the measured grouping of 15 County Councils, we were only placed 10th – our absence for that quarter showed 2.04 days per FTE against Hertfordshire at 1.19 days (the best) and Cumbria at 2.28 days (the worst).

13   Although recognising that we must continue to utilise and develop measures and procedures to improve our record on sickness absence, it remains important to recognise wider influential factors when evaluating overall performance alongside this straightforward comparison of statistics. For example, County Council structures and workforce constitution can be essentially very different. A number of County Councils over the years have chosen to outsource large elements of their 'blue collar' activities in areas like direct labour and care services. Whereas we have retained many such services in-house. Sickness rates in blue-collar groupings are higher than 'white-collar' jobs. Thus the occupational mix of some other County Councils will be more conducive to lower rates of absence.

14   In addition, the Government's most recent indices of deprivation shows that 19 of the 34 county councils are in the upper quartile of front line Councils[3] – in other words, the least deprived areas of the Country. This includes 10 of the 15 County Councils that are included in the PWC comparison mentioned above. County Durham is the only County Council of the 34 that figures in the quartile identifying those areas of the highest deprivation. A project underway in our Occupational Health Service has demonstrated that the levels of deprivation have a significant impact on the sickness rates of a Local Authority. The PWC table actually shows we are performing better than three of the County Council's who are in the least deprived quartile[4].

15   Although we do not compare favourably on the national indices as demonstrated by the PWC comparator, our performance remains more positive when considered from a geographic perspective. *Appendix 4* compares our sickness rate for front-line Authorities in the North-East at the end of 2006/07 (to the end of March 2007).

Corporate Action

16   A huge amount of activity has taken place, in all Services, over the past couple of years to raise the profile of health in the workplace and to support the work towards the attainment of the Bronze Health at Work Award presented to the Council earlier this year.

---

[3] Front line authorities giving us a complete geographical spread of England, including county, unitaries and metropolitan councils.
[4] Shropshire, Bedfordshire and Warwickshire.

17   The national ban on smoking in enclosed places came into effect on 1 July 2007, however the revised Smoking at Work Policy was implemented within the Council on 1 April 2007, making all Council buildings, grounds, car parks and Council vehicles smoke-free. National research shows that smokers take more sick leave than non-smokers. Therefore, the policy includes measures to try and support those employees wishing to give up smoking, for example, advising on the NHS Stop Smoking Services as well as the opportunity to seek advice through our Occupational Health Service. In addition, a limited amount of time away from work may be granted to individuals who can demonstrate that it is difficult for them to attend such classes outside normal working hours.

18   Managing Sickness Absence training continues to be an integral part of a manager's development. The Induction Programme specifically designed for newly appointed managers reviews the role of the manager in reducing sickness absence. All managers are given a copy of the Managing Sickness Absence policy and procedure and the Managers' Information Toolkit, which includes general guidance and details of all the forms. In addition, the Corporate Induction programme for new employees covers their role in return to work and sickness interviews linked to the trigger points.

19   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.

20   The Stress Management Policy, supported by a manager's toolkit, now forms an additional module within the managing attendance training session. The Policy and Toolkit is being reviewed by the Stress in the Workplace Scrutiny Working Group which will look at the impact of the policy and the action plan and data from other organisations regarding stress management.

21   This policy will only be effective if it is comprehensively implemented within Services as its effectiveness is dependent upon commitment from managers from the top level to anyone who has a supervisory responsibility for others as well as by individual employees taking responsibility for their own wellbeing. It is important that managers now make use of the toolkit that supports the policy when identifying and discussing stress related issues with individual employees, whether attending or absent from work and draw up action plans to address issues where possible.

22   Corporate actions include a project with the NHS Primary Care College to develop a 'Training the Trainers' programme as well as raising awareness with employees through leaflets, health promotional events e.g. healthy eating and fitness, smoking and exercise activities. In addition the First Line Manager's Programme includes a specific half day module of learning devoted to Stress Management linked to the following objective:

      "Understand and where applicable apply the main principles of stress management and prevention."

23   The programme also takes an in depth look into appropriate management styles and interpersonal skills including assertion techniques and conflict handling approaches. Feedback remains extremely positive about the usefulness of the programme.

24   Services have been asked to link this work with Staff Survey/IIP Action Plans through the Corporate OD Group as these issues have significant developmental links. Services are now beginning to request specific development interventions to address areas of concern e.g. Stress Awareness Raising Sessions, Bullying and Harassment Training. The opportunity to utilise the Resource Link reporting process to pin-point areas of hot spots is being explored. It is envisaged that these Service based reports will be available from April 2008.

Service Performance and Action – commentary provided by the Services

a) Adult & Community Services

25   In <u>Libraries, Learning & Culture</u> days lost up to 20 days have decreased from 285.5 down to 217 days - this decrease represents 1.07 FTE. Days lost 20 days or more has decreased from 330.5 to 305.5 days. The net result is a move overall from 2.37 FTE to 2.03 FTE which is better than the same quarter in 2006, although up on the same quarter in 2005. Our main cause of sickness is still Mental Health at 49.28% of absences. Most of this is not work related, but it is still a cause for concern.

26   Sickness absence is due to be discussed at the next Service Management Team to ensure all sickness absence interviews and other appropriate action is taking place. All members of staff on long-term sick are moving through the sickness absence procedure.

27   One member of staff on long-term sick leave has managed to return to work, although on a job-share basis. A member of staff who was at the final sickness absence interview stage has met the targets and had no sickness for a month.

28   In <u>Adult Care/Community Support</u> there has been an increase in the days lost per employee from 3.51 up to 4.37 days. This figure is also a slight increase on the same period last year. The reason for the increase is largely due to the growth in Mental Health related sick leave. This growth coincides with the increase in long-term sickness absence days. There has been a slight decrease in the number of Capability Hearing leavers from the last quarter (however that period was above average). The number of staff absent for 18 months' duration is now nil, demonstrating the ongoing work in the management of long-term sickness absence.

29   The targeting of specific action aimed at reducing long-term and short-term sickness absences continues, complimenting the on-going activities within the Sickness Absence Management Group (SAMG) meetings. The SAMG meeting planned for November includes the item 'Stress Management Toolkit' – to be discussed and used towards tackling the increasing Mental Health related sickness absence. There is on-going monitoring of the sickness absence interviews, working with managers to ensure interviews are held in accordance with procedures. Tables are produced and discussed that contain teams with the highest number of sickness absence days with particular attention to those with an increasing trend. Quarterly SAMG and Performance Monitoring Days are held, with analysis and monitoring of sickness absence trends/statistics. Workshops are planned for December 2007 (5th & 12th) to work with mangers in managing persistent sickness absenteeism following a well received trial whilst in the former SC&H.

30   The meetings/monitoring planned has progressed accordingly, important in maintaining the level of sickness absence management. The monitoring of long-term sickness absence along with the on-going work with the Strategic HR Division has resulted in a large number of Final Stage Interviews being held/planned and the consistent number of leavers following Capability Hearings.

b) *Chief Executive's Office*

31   As indicated earlier, there has been some movement of staff between Services as part of ongoing reorganisation and this has contributed towards some fluctuation in returns. The quarterly figure for the Chief Executive's Office has now returned to the levels it was at earlier in the year. Sickness monitoring procedures are followed and return to work interviews are carried out by line managers and followed up by referrals to Occupational Health where necessary. Strategic HR, who have just joined Chief Executive's, have produced a monthly report and discussed it at CSMT to ensure that it remains a Service priority. Most problems are down to a small number of long-term absentees and appropriate action is being taken.

c) *Children and Young People's Services*

32   This Service continues to highlight comparisons between some staff groupings over the year:

	1 Jul – 30 Sep 2006	1 Jul – 30 Sep 2007
Support Staff in Schools	1.28	1.36
Teaching Staff in Schools	1.00	0.88
Headquarters Staff	1.53	3.46

33   Managers have continued to work within the Sickness Absence procedures concerning all staff within Children & Young People's Services. School-based staff absences are scrutinised at regular meetings chaired by senior mangers and involving a representative from Occupational Health and colleagues from School & Governor Support and Strategic HR. Advice and guidance is available to school-based mangers, dealing with sickness related absences from various sources within the Service, by telephone and in person. Some long-term absences have been able to return to work on a phased basis with the necessary support structures in place.

34   Figures from former Education and former Social Care & Health are now shown within this report as CYPS statistics, where all absences continue to be addressed via the Procedures. This quarter takes account of school holidays from mid-July to early September, and the figures as compared against the last quarter reflect this, with a reduction in school-based absences accordingly. Work will continue to focus on reducing absences due to ill-health and supporting school-based managers to do the same.

d) Corporate Services

35   There has been a decrease in sickness absence in the quarter (1.19 days) as compared to the previous quarter ended 30 June 2007 (1.92 days). This also compares favourably with the figures against the same quarter in the previous year (2006) when sickness levels stood at 1.87 days.

36   Strategic HR have now moved to within the remit of the Chief Executive's Office and the sickness absence information is now reported separately.

37   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.

38   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 was taken and some have now returned to work.

e) County Treasurer's

39   Customer Services staff are included in the County Treasurer's statistics for the first time. Therefore, second quarter data is not directly comparable to quarter one. However, four County Treasurer's staff with medical conditions, necessitating an absence of over one month, returned to work in recent weeks.

40   Ongoing monitoring is taking place in accordance with sickness absence procedures and advice sought from Occupational Health where appropriate.

41   A decision was taken at a capability hearing to terminate the employment of a member of staff from 4 October 2007 on the grounds of ongoing sickness absence.

f) Environment

42   There has been a very small increase in the number of days lost per FTE, however long-term absences now account for 59% of the total compared with 37% in the previous quarter.

43   Management continue to be informed when staff hit the trigger points. A capability hearing is about to be held with one member of staff. Another member of staff on long-term sick has been made redundant due to changes in transport contracts, and a further 2 members of staff are planning a return to work in the next 4 weeks following lengthy absences. Hopefully this will help to reduce time lost due to long-term absences during the next quarter.

g) Service Direct

44   The sickness ratio for the quarter at 3.28 days lost per FTE shows an increase from the previous quarter which was at a previously all time low of 2.53 days lost per FTE. The current quarter is still less than the equivalent quarter of September 2006 which was 3.40 days. Long-term sickness has increased from the previous quarter from 1.69 to 2.23 days. The September quarter in 2006 was 2.24 days.

45   The focus on this next quarter will be to continue to look at the long-term absences as this is where the increase has arisen from the previous quarter.

46   Capability reviews have continued during this last quarter and resulted in two employees leaving on grounds of capability.

Next steps

47   The next planned report will come to the HR Committee of 14 March 2008 covering the period October to December 2007.

Recommendation

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

Contact: Kim Jobson, Head of Human Resources
Tel: (0191) 3833240 or e-mail kim.jobson@durham.gov.uk or
Julie Burgess (HR Adviser) Tel: (0191) 3834198 or e-mail
julie.burgess@durham.gov.uk

Appendix 1: Implications

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.

Short and Long-term Sickness Absence 01.07.07 - 30.09.07					
	Number of Days Lost				
Service	**Up to 20 days**	**%**	**More than 20 days**	**%**	**Total No. of Days**
Adult and Community Services	2876.3	30.7	6478.4	69.3	9354.7
Chief Executive's Office	74	33.3	148	66.7	222
Children and Young People's Services	7186.2	43.1	9479.43	56.9	16665.63
Corporate Services	252	74.6	86	25.4	338
County Treasurer's	245.5	36.6	426	63.4	671.5
Environment	739.5	58.9	517	41.1	1256.5
Service Direct	917	33.6	1810	66.4	2727
COUNCIL	**12290.5**	**39.3**	**18944.8**	**60.7**	**31235.3**

Short and Long-term Sickness Absence 01.04.07 - 30.06.07					
	Number of Days Lost				
Service	**Up to 20 days**	**%**	**More than 20 days**	**%**	**Total No. of Days**
Adult and Community Services	2529.4	33.1	5121	66.9	7650.4
Chief Executive's Office	146	46.8	166	53.2	312
Children and Young People's Services	7591.03	41.6	10663.08	58.4	18254.11
Corporate Services	411.5	64.1	230	35.9	641.5
County Treasurer's	107.5	37.7	178	62.3	285.5
Environment	438.5	37.1	742	62.9	1180.5
Service Direct	692	33.3	1388	66.7	2080
COUNCIL	**11915.9**	**39.2**	**18488.1**	**60.8**	**30404.0**

Durham County Council Sickness Absence

Service:	Quarter			Quarter			Quarter			Quarter		
	1 Oct - 31 Dec 2006			1 Jan - 31 Mar 2007			1 Apr - 30 Jun 2007			1 Jul - 30 Sep 2007		
	FTE	Days Lost	Days Lost per Emp	FTE	Days Lost	Days Lost per Emp	FTE	Days Lost	Days Lost per Emp	FTE	Days Lost	Days Lost per Emp
A & CS	2364.70	9600.40	4.06	2345.30	8833.60	3.77	2290.20	7650.40	3.34	2293.90	9354.70	4.08
Adult Care	2031.70	8542.40	4.20	2013.30	7824.10	3.89	1964.30	6892.20	3.51	1972.40	8614.30	4.37
Adult LD Services												
Libraries, Learning & Culture	269.00	793.00	2.95	270.00	746.50	2.76	260.00	616.00	2.37	258.00	522.50	2.03
Community Support	64.00	265.00	4.14	62.00	263.00	4.24	65.90	142.20	2.16	63.50	217.90	3.43
Chief Executive's Office	212.00	689.00	3.25	223.00	590.00	2.65	267.00	312.00	1.17	83.25	222.00	2.67
C&YPS	10034.82	27853.59	2.78	10065.77	23470.17	2.33	10562.58	18254.11	1.73	10838.30	16665.63	1.54
Support Staff in Schools	3838.56	13030.55	3.39	3877.45	8503.57	2.19	4051.69	6945.92	1.71	4188.22	5688.51	1.36
Teachers	4455.45	9518.34	2.14	4449.24	8999.90	2.02	4561.14	6286.36	1.38	4668.79	4121.92	0.88
Headquarters Staff	768.11	944.50	1.23	764.38	1469.20	1.92	975.25	1489.50	1.53	1981.29	6855.20	3.46
Former SC & H Staff	972.70	4360.20	4.48	974.70	4497.50	4.61	974.50	3532.33	3.62			
Corporate Services	342.05	810.00	2.37	343.41	745.50	2.17	334.11	641.50	1.92	285.12	338.00	1.19
County Treasurer's	148.00	458.00	3.09	147.09	409.00	2.78	153.10	285.50	1.86	289.20	671.50	2.32
Environment	459.40	860.00	1.87	457.20	971.00	2.12	504.25	1180.50	2.34	539.43	1256.50	2.33
Service Direct	876.00	2912.00	3.32	859.00	2622.00	3.05	821.00	2080.00	2.53	813.00	2725.00	3.35

Performance in 2006/07

■ 12 - Working days lost to sickness   ☐ Durham CC

Northumberland CC		
Durham CC		
South Tyneside		
Middlesbrough		
Newcastle upon Tyne		
Darlington		
Redcar and Cleveland		
Stockton-on-Tees		
North Tyneside		
Sunderland		
Hartlepool		
Gateshead		

Family

Appendix 4