

The Vale of Glamorgan Council

Cabinet Meeting: 4 July, 2016

Report of the Leader

Annual Sickness Absence Report - April 2015 to March 2016

Purpose of the Report

1. To provide an update to Members on the sickness absence outturn figures for the period 1st April 2015 to 31st March 2016 and general progress in relation to the management of attendance action plan.

Recommendations

1. That the report, and the sickness absence outturn provided in [Appendix A](#) be noted.
2. That Members note the progress of the action plan as attached in [Appendix B](#).
3. That the report be referred to Scrutiny Committee (Corporate Performance and Resources) for consideration.

Reasons for the Recommendations

1. To bring matters to the attention of Members of the Cabinet in line with corporate objectives.
2. To inform Members of the Cabinet of the progress in relation to the agreed management of attendance action plan.
3. To enable the Scrutiny Committee to maintain a focus on the management of sickness absence across all services of the Council.

Background

2. The management of attendance and the levels of sickness absence are reported to Cabinet every six months. An action plan was outlined in the report to Cabinet on 27th July 2015 to address the issue of sickness absence given the increase in absence levels in the previous 12 months. An update on progress in respect of the action plan is set out in detail in [Appendix B](#) of this report.
3. This report sets out the sickness absence information for the period 1st April 2015 to 31st March 2016 across all Directorates/Services, including corporate and schools employees. It also includes details of sickness absence figures for the previous financial year (2014/15) for comparative purposes.

4. This report acknowledges the work and commitment of all managers and employees in relation to the continual management of sickness absence.

Relevant Issues and Options

5. The overall sickness absence rates (working time lost per full time equivalent employee) for the current financial year, in comparison to the previous financial year, is set out in the table below:

	April 2014 - March 2015	April 2015 - March 2016	Target
Average days/shifts lost (per FTE)	9.44	9.56	8.9

6. The total absence figures for the period April 2015 to March 2016 indicates an increase on last year's figures, from 9.44 to 9.56 days lost per FTE. This represents an increase in absence of 0.12 days lost per FTE employee. This is disappointing given the intensive work programme that has taken place as outlined in the management of attendance action plan.

Sickness absence by Directorate

7. A summary of the absence within each Directorate is set out below. A further breakdown of absence in each service area is included in [Appendix A](#).

Directorate	2014/15	2015/16	Annual target
	Average days / shifts lost per FTE	Average days / shifts lost per FTE	
Social Services	12.65	13.57	11.6
Environment & Housing Services	13.61	12.16	11.7
Resources	8.36	5.80	7.5
Learning and Skills	9.06	10.04	8.3
Total - excluding Schools	11.00	10.79	8.9
Schools	7.91	8.26	
Total - including Schools	9.44	9.56	8.9

8. Members will be pleased to note that there has been an overall reduction in the total corporate sickness absence levels from 11 days lost in 2014/15 to 10.79 days lost during 2015/16. It is felt that this is the result of the targeted approach taken to sickness absence during 2015/16.
9. Members will be pleased to note that the sickness absence levels in the Environment and Housing Directorate and the Resources Directorate are lower in comparison to the last financial year (2014/15). There has however, been an increase in the sickness absence levels in Social Services, Learning and Skills and Schools in comparison to last financial year.
10. Members will note the action plan that is attached in [Appendix B](#) has been amended to show those actions that have been completed, along with those actions that remain ongoing to address sickness absence within each Directorate, including service specific considerations.
11. The annual sickness absence target for 2016/17 has been retained at 8.9 days per employee with appropriate adjustments to Directorate targets (based on performance during 2015/16).

Reasons for absence

12. The most common reasons for sickness absence (according to the number of days lost) in the Council (including Schools) over the reporting period April 2015 to March 2016 are listed below, along with a comparison of the previous period in 2014/2015:

	Absence reason	2014/15	2015/16
1	Stress	28.1%	29.0%
2	Operations and Recovery	18.1%	16.2%
3	Viral Infection	16.5%	15.9%
4	Musculoskeletal Disorders	12.2%	11.9%

13. Stress continues to be the primary reason for sickness absence in the Council and accounts for 29% of absence.
14. The increase in such absence is to a degree understandable given the current pace of change and challenge within the Council. Members will note however, that current levels of absence due to stress remain lower than the UK average of 35%, as reported by the Health & Safety Executive in 2014/15.
15. It is, however, important that we continue to respond to the above and implement appropriate measures as part of a commitment to the wellbeing of our workforce.
16. Members will be aware that any absence attributed to stress or anxiety triggers an automatic referral to occupational health. This is to ensure that appropriate support and advice is offered to both the employee and the manager, including counselling support and advice for managers in completing stress risk assessments.
17. It will be also noted that the Council have launched a new Employee Assistance Programme on the 1 June 2016 which will help to respond positively to the increase in stress related absence. This is referred to in more detail in paragraphs 26-27.
18. Stress awareness training continues to be provided for all employees across the Council. Such support is offered to employees to manage personal stress and managers to manage stress within teams. Seven courses have been run over the reporting period 2015/16, with a total of 101 attendees. This is an increase from 63 attendees on equivalent courses run in 2014/15.
19. Absence due to stress was the primary reason for sickness absence in each of the Directorates and also in Schools, as shown in the table below. Musculoskeletal related sickness was the second highest reason for absence in the Environment and Housing Directorate. This is perhaps unsurprising given the significant number of employees who undertake front-line/ physical work in that Directorate.

	Social Services		Environment and Housing Services		Resources		Learning and Skills		Schools	
Stress	1	33.4%	1	24.3%	1	28.1%	1	39.2%	1	27.8%
Operations and Recovery	2	16.9%	4	11.8%	2	26.2%	3	12.3%	2	17.3%
Viral Infection	3	13.7%	3	15.2%	3	16.6%	2	15.8%	3	17.1%
Musculoskeletal Disorders	4	12.1%	2	23.8%	5	5.5%	4	10.8%	4	6.4%

20. The reasons for long-term absence mirror the reasons for total sickness absence in the Council with stress remaining the main reason for long-term absences. This has increased only marginally from last year's reporting period, from 37.2% to 37.4% of all long-term absences attributed to stress. This is followed by Operations and Recovery and Musculoskeletal Disorders, as outlined below:

Long Term absence	Absence reason	2014/15	2015/16
1	Stress	37.2%	37.4%
2	Operations and Recovery	23.0%	20.7%
3	Musculoskeletal Disorders	13.8%	13.6%

21. Members will be aware of the revised Managing Attendance at Work Policy which aims to focus attention on long-term absences. This is outlined in more detail in paragraphs 32 - 34.
22. Viral infections remain the main reason recorded for short-term intermittent absences. This has reduced from last year's reporting period, from 38.9% to 36.7% of all short-term absences attributed to a viral infection. This is followed by Stomach Ailments and Stress, as outlined below:

Short Term absence	Absence reason	2014/15	2015/16
1	Viral Infection	38.9%	36.7%
2	Stomach Ailments	13.1%	11.4%
3	Stress	9.2%	10.9%

Improvement Actions

23. Members will be aware of the range of actions that have been put in place over the last year to support the management of attendance and which will help to improve attendance levels over the next year. These are set out in the action plan at [Appendix B](#) to this report and summarised below:

Performance Management

24. Over the last year there has been a significant strengthening of the performance management approach to sickness absence both corporately and within Directorates. This has included :
- The development of actions plans within Directorates focusing on particular issues within discrete service areas.
 - The reporting and consideration of absence levels on a monthly basis.
 - The development of priority case reports to help focus on ways to support and resolve long-standing absence issues
 - The strengthening of collective intervention approaches between managers, occupational health employees and the human resources teams.
 - The development of sickness absence monitoring reports.

25. Early indications within the current financial year (2016/17), demonstrate that interventions identified within the action plan are taking effect. The overall sickness absence rates for April and May 2016 are shown below, in comparison with April and May 2015, and the pro rata target:

	2015/16	2016/17	Target (pro rata)
	Average days / shifts lost per FTE	Average days / shifts lost per FTE	
April	0.73	0.67	0.74
May	1.49	1.32	1.48

Employee Assistance Programme

26. As part of the continuing response to improve employee attendance and wellbeing, a new Employee Assistance Programme (EAP) provided by Care First was launched in June 2016. This is available to all Council employees and provides a tangible benefit to help improve attendance and complement the Council's approach to employee engagement and their continued wellbeing.
27. A full outline of the service can be found in [Appendix C](#), with the main elements of the service being set out below:
- Telephone counselling service on a 24/7 basis, face to face counselling following clinical assessment of need.
 - General telephone information and advice service between 8.00 am and 8.00 pm Monday to Friday to include for example: advice on debt management, divorce, benefits, and child care issues.
 - Advice and support for managers on health and sickness issues relating to staff, to complement current Occupational Health and Human Resource Services.
 - Online resources including a personalised health and personal fitness portal offering advice on exercise, weight, diet and general health issues, and regular information, advice and articles on general "life" issues ranging from relationships, childcare and consumer rights, through to stress, health and fitness.

Positive health promotion

28. Work is continuing to develop positive health support mechanisms in line with the action plan ([Appendix B](#)). A summary of developments is as follows:
- The Occupational Health Nurse Manager and Corporate Health and Safety Officer have now visited each Directorate Management Team meetings. This has been to discuss the support available from the Occupational Health Service, how to best streamline processes and to raise the profile of wellness in work.
 - A variety of health events are planned to coincide with National Event Days to promote positive health. These include, for example: No Smoking Day, Stress Awareness Day, blood pressure sessions etc. as well as a Health Fair and health screening. The aim of this is to raise the visible profile of health issues, offer guidance and support on common topics, and provide an opportunity for the engagement of employees on the promotion of their health and general wellbeing to complement the approach of the EAP.

- A set of tool-kits / guidance notes are being developed to help managers to respond to the top reasons for absence (i.e. stress, operations/recovery, viral infections and muscular skeletal disorders). These will also be supported by Care First.
29. All job roles and activities have been and continue to be risk assessed and all accidents and incidents are investigated by managers and where appropriate, by the Corporate Health and Safety Team. This approach aims to identify and implement measures to prevent accidents or the potential for accidents or incidents to occur in the future.
 30. Manual handling training is provided on an ongoing basis to minimise the risk of musculoskeletal disorders in the workplace. Competency assessments have been introduced to monitor the implementation and compliance of appropriate manual handling techniques.
 31. The flu vaccination programme has been popular again this year. Flu vaccinations were offered to all employees and are carried out by the Occupational Health team, with the costs being recharged to the appropriate departments. This initiative was aimed to minimise the levels of sickness absence due to seasonal flu. The number of flu vaccinations that were administered to employees during last autumn/winter 2015/16 in each Directorate are shown in the table below:

Directorate	2015/16	
	Number of flu vaccinations	% of average headcount
Social Services	137	21%
Environment and Housing Services	105	12%
Resources	148	31%
Learning and Skills	40	8%
Totals - excluding Schools	430	17%
Schools	723	25%
Totals - including Schools	1153	21%

Revised Managing Attendance at Work Policy

32. Members will be aware that a revised Managing Attendance at Work Policy was approved by Cabinet in May 2016.
33. The Policy increases the focus on the management of long term absence, which accounts for nearly 70% of all sickness absence whilst continuing to support the Council's performance management approach to this issue.
34. A programme of training for managers on the revised Managing Attendance at Work Policy will take place between July and September 2016 and prior to the formal launch of the new Policy in October 2016. These training courses will aim to support managers to effectively manage absence, reinforcing the importance of the return to work interviews, exploring underlying issues or trends and identifying appropriate means to promote and sustain the employee's return and retention at work.

Employee Engagement Strategy

35. Members will be aware of the Council's increased focus on employee engagement and attendance management over the last 12 months. The positive engagement,

attendance and performance of our workforce will become more important as we respond to increasing financial constraints.

36. The employee engagement strategy began in June 2015 as a key part of the Council's Reshaping Services Strategy and to help employees understand the challenges facing the Council, feel involved and supported and ultimately seek their support in shaping a new employment relationship. It has also helped to refine and improve approaches to issues such as internal communications, training and development and the continued involvement and engagement of our employees.
37. The Staff Charter has now been consulted upon with all staff, with the final product summarising the outputs from the nine month engagement process. The Charter sets out the mutual expectations of staff and managers in a "reshaped" working environment and, following consultation during May/June 2016, has been endorsed by 90% of staff who expressed a view.
38. Members will appreciate the importance of the Charter in improving the resilience, flexibility and engagement of the Council's workforce and ultimately the effect it will have on improving attendance levels across the Council.

Absence in wider comparison

39. Overall sickness absence levels within the Vale of Glamorgan Council (including Schools) remains lower at 9.56 working days/shifts lost per full-time equivalent (FTE) than the average sickness absence levels for local authorities in Wales of 9.9 working days/shifts lost per full-time equivalent (FTE) (2014/2015). It is worth noting that the measure used by the Council (and all other local authorities in Wales) for comparison purposes is determined on the basis of days/shifts lost per FTE.
40. Comparative research on sickness absence rates (see below in paragraphs 46 and 47) are calculated by headcount (rather than by FTE). In 2015/2016, the Vale of Glamorgan Council (including Schools) had an average of 6.85 days lost per employee when analysing absence by headcount rather than by FTE.
41. The Chartered Institute of Personnel and Development (CIPD) reported in 2015 that the mean average number of days lost per employee per year was 8.3. This is in comparison to 7.4 days lost through sickness absence in 2014. In local government, an average of 7.9 days were lost per employee and 9.9 days were reported as being lost per employee in organisations with more than 5,000 employees.
42. XpertHR survey (2015) found that the national average absence rate stood at 6.5 days per employee in 2014. This has increased from 6.0 days per employee in 2013. 8.0 days were reported as being lost per employee through sickness absence for public sector organisations in 2014, 8.4 days were lost per employee in local government, and 8.3 days per employee were recorded for organisations with more than 1,000 employees.

Resource Implications (Financial and Employment)

43. The incidence of high levels of absence has resource implications and places constraints on the continued delivery of high quality service provision. The need to continue to maintain reasonable levels of absence will be important as the Council responds to ongoing financial pressures and the implementation of the Reshaping Services Programme.

Sustainability and Climate Change Implications

44. There are no sustainability or climate change implications arising as a result of this report.

Legal Implications (to Include Human Rights Implications)

45. All legal implications including the Human Rights Act and Data Protection Act will have been considered within the implementation of policy provisions.

Crime and Disorder Implications

46. There are no crime and disorder implications arising as a result of this report.

Equal Opportunities Implications (to include Welsh Language issues)

47. In progressing the Attendance Policy the Council will remain compliant with its obligations under the Equality Act.

Corporate/Service Objectives

48. The Council will be unable to deliver corporate objectives without keeping absence levels to a minimum.

Policy Framework and Budget

49. This is a matter for Executive decision.

Consultation (including Ward Member Consultation)

50. The overall sickness absence figures are reported quarterly through the Corporate Performance Indicators.

Relevant Scrutiny Committee

51. Corporate Performance and Resources

Background Papers

[Appendix A](#) - Breakdown of Directorate absence by Services (April 2015 - March 2016)

[Appendix B](#) - Management of attendance action plan 2015/2016

[Appendix C](#) - Care First information sheet

[Appendix D](#) - Revised Managing Attendance at Work Policy

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Officers Consulted

Corporate Management Team

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