Agenda Item No:7

Meeting of:	**Resources Scrutiny Committee**
Date of Meeting:	**Wednesday, 11 November 2026**
Relevant Scrutiny Committee:	Resources Scrutiny Committee
Item which the Chair has decided is urgent (Part I) **(If yes, why)**	**Not Applicable**
Urgent Decision Procedure Used (15.14 of the Constitution) **(If yes, why)**	Not applicable
Item Type	Part I
Report Title:	Q2 Sickness Absence Report 2026/27
Portfolio Holder:	Executive Leader and Cabinet Member for Performance and Resources
Strategic Leadership Team:	Chief Executive
Lead Officer:	Head of Human Resources & Organisational Development

1.0 What is this report about?

1.1 The report sets out the sickness absence figures for the period 1st April 2026 to 30th September 2026 as part of the agreed performance management arrangements.

2.0 What are the Recommendations?

That Resources Scrutiny Committee endorse the following recommendations for Cabinet and refer the report to Cabinet along with any additional recommendations the committee may have:

	Recommendations – What and How?	**Reason for Recommendation – Why?**
2.1	That the report and the April 2026 to September 2026 sickness absence figures provided in Appendix A-D be noted.	To bring matters to the attention of Scrutiny and Cabinet, in line with corporate objectives.

	Recommendations – What and How?	Reason for Recommendation – Why?
2.2	That the report be referred to Resources Scrutiny Committee for consideration, with any Recommendations referred back to Cabinet.	To enable Scrutiny to maintain a continued focus on the management of sickness absence throughout all services of the Council, to consider the report and to report any recommendations to Cabinet.

3.0 What is the background to this report?

3.1 The levels of sickness absence within the Council are reported to Scrutiny/Cabinet every six months.

3.2 This report sets out the sickness absence information for the period 1st April 2026 to 30th September 2026, including corporate and school employees. It also includes details of sickness absence figures for previous years for comparison.

3.3 Sickness rates have reduced for both Corporate and Schools, based on the same period last year.

3.4 This report acknowledges the work and commitment of all managers, employees and trade union colleagues in relation to the continual management of sickness absence.

3.5 Data for this report is based on sickness absence across the Council's Directorates and Services. During 2026/27, a significant organisational restructure took place as part of the Corporate Landlord programme, resulting in staff from across the Council transferring to Corporate Resources. As the majority of these changes came into effect on 1st October 2026, the impact on sickness absence data is not fully reflected in this report. Updated figures will be evident in future reports; however, it is important to note these organisational changes now, given that they occurred part way through the reporting year.

4.0 What issues are there to be considered?

4.1 A number of initiatives have been introduced by the Council to manage the key drivers in tackling presenteeism, such as – improving digital applications/access, lifestyle and wellbeing programmes and managing the use of annual leave. Line managers are always instrumental in looking after employee health and wellbeing.

4.2 The Council considers it very important that staff are given the support they require and work with colleagues within Health & Safety, HR Business Partnership, Occupational Health and Organisational Development & Learning to support our staff who are working from home. Support is also provided to staff that have continued to work in the front line, especially in our Waste, Social Care and Schools teams.

4.3 The Human Resources Business Partnership team continues to work closely with Occupational Health and Managers on an individual case management basis and the prompt action of Managers is prioritised to keep absences within target. A HR absence

dashboard has been created to assist with the monitoring of absences within services.

4.4 Members will be aware that in all cases of stress or anxiety, employees are automatically referred to occupational health for advice, offered counselling support and managers are offered training and support in completing stress risk assessments. The Mental Health & Wellbeing Procedures have been updated they incorporate advice and guidance to all line managers, as well as the introduction of stress risk assessments and wellbeing action plans. The Procedures recognise that mental health in the workplace is a wellbeing issue and acknowledges the importance of identifying and reducing workplace stressors.

4.5 Westfield Health are providing a 24-hour advice line for staff. The service can be used for a variety of confidential guidance for staff such as Family Issues, Consumer Issues, Housing Concerns, Bereavement etc.

Positive Health Promotion

4.6 We continue to work on health promotion across different areas of expertise, including Occupational Health, Health and Safety and Organisational Development and Learning, to deliver a positive impact on staff wellbeing and safe working environment. Striving to deliver against our People Strategy theme to make the Vale Council a great place to work with a supportive, inclusive and engaging working environment. Through a coordinated and proactive approach, we aim to provide information, resources and development opportunities that support resilience, encourage healthy behaviours and help colleagues thrive both personally and professionally. The below information describes both cyclical aspects of health promotion (which run all year) and topical aspects, which can depend on varying elements, for example seasons and professions.

4.7 The Occupational Health Department offer Wellbeing/Health Screening to all employees, subject to other work commitments, prioritising those in greatest need. This includes height, weight, BMI, Blood Pressure, Cholesterol and Blood Sugar Tests. Appointments, when available, can be made via contacting Occupational Health. Alternatively, employees can contact the OH Department directly to book an appointment. Wellbeing appointments are also available; these can be booked by contacting OH Admin. During Autumn and Winter 2026 we have commenced our programme of flu vaccinations for staff. Prioritising those who deliver critical services to our frontline providing the service at their place of work, for example care home or school. Last year over 1500 flu vaccinations were delivered.

4.8 An extended Wellbeing package was rolled out to all employees across the Council from November 2020 focusing on physical, mental and financial wellbeing. This offering was reviewed and refreshed in 2025, and the review will again take place in winter 2026. Across the period the offering has included online virtual fitness sessions (during Covid) in addition to sessions on mindfulness, resilience and coping at times of change. This has continued during the last 6 months with activities and benefits promoted to staff. Recent benefits have included WHA Cash Plans helping staff to support wellbeing during a cost-of-living crisis enabling them to claim money back on everyday health costs such as dental, eye checks and physiotherapy.

4.9 The Health, Safety and Wellbeing (HSW) team promote, monitor and review workstation assessments for all staff whether they are working from home, a council building or elsewhere. The Display Screen Equipment and Eye test procedures has been updated to support this work and the team have been instrumental in developing. Supporting line managers and rolling out the stress risk assessment and wellbeing action plan process. Working with our HR Business Partner Team to seek to support employees who may be experiencing elements of stress, anxiety or depression to support them continuing to work and mitigating the need for time away from work.

4.10 The Council's Stress Management Procedures have been updated so that they can be more effectively monitored and managed, and staff can access the support that they need. The update consolidates the difference between work related stress risk assessments which provide action planning for issues and well-being action plans which provide staff with support and reasonable adjustments for health issues.

4.11 In addition, the HSW Team and Occupational health team have commenced a joint piece of work to normalise menopause across the Council following attendance of a menopause conference provided by Senedd insight. Menopause one to one sessions can now be booked via the Occupational Health Team.

4.12 Our OD and Learning Teams have launched a new training platform (iDev powered by Thinki) with the further development of on online Learning Café digital calendar. This brings together a wider learning platform, including training and learning opportunities from trusted partners, for example New Local and Academi Wales. The forthcoming winter programme has learning centred around financial aspects (Money Matters, supporting you with Winter Bills) and courses on Mental Toughness and Resilience. Our iDev course on Understanding Wellbeing has received over 300 views during the summer period and focuses on aspects such as Understanding Stress and its Impact and Building Resilience in the Workplace.

4.13 A new training course has been offered to managers, supervisors and team leaders for supporting wellbeing and attendance at work which takes place in November 2026.

The session explores a number of areas such as:-

a) How wellbeing can affect attendance at work.
b) How to spot early signs that someone may be struggling.
c) How to start supportive conversations about absence.
d) How to balance the needs of individuals with those of the wider team.
e) What support and adjustments may help colleagues stay well at work.
f) Where to find help when you need it.

Absence Policy

4.14 The Council’s absence Policy has been updated to ensure information relating to contact information and access to Westfield Health is up-to-date.

4.15 A wholescale review of the policy commenced in the summer, which, supported by our trade union colleagues, will be rolled out during Winter 2026 and Spring 2027.

Additional Support Offered

4.16 Redeployment - early engagement to search for redeployment if OH identify staff members cannot undertake duties. This scheme looks at issuing notice in substantive roles sooner rather than waiting for 30 week meeting whilst working in partnership with the line manager and staff member to seek alternative employment within the Council. Through the dedicated work of our HR projects officer our redeployment and retention rates have grown significantly during 2026 with many positive comments received from staff to thank the officer for the person centred support.

4.17 Reasonable adjustments i.e - home working , phased returns, allowing annual leave to extend phased returns if required. Support is provided from the Health, Safety and Wellbeing Team.

4.18 Informal redeployment for temp period within same service area which allows period for recovery then revert back to substantive post. Only applies where vacant position is being covered by agency worker.

4.19 Compassionate Management approach (in some cases this has been beneficial)

4.20 Counselling services – ensure staff are able to access the appropriate support mechanism.

4.21 Payment for private health appointments e.g – MRI Scans, Physio appt or Consultant appt (not in many cases but have had a number previously which has assisted a sooner return).

4.22 Consider Career Break Scheme in consultation with the staff member as required.

5.0 How has evidence been used to inform the report, including the views of others?

5.1 A full report containing the breakdown of sickness absence levels per FTE across all Directorates and services continues to be reviewed by the Council's Strategic Leadership Team each quarter and any required action is taken. The main performance management elements of the management of sickness absence is set out below.

a. All Directorates continue to review absence levels within Directorate management Teams on a monthly basis and in accordance with a service-based action plan

b. The focus on absence has been based on the scrutiny of priority absence reports within each directorate and service area. This has been helpful in focusing attention and support on particular absence cases

c. Long-term absence cases continue to be dealt with on an individual case management basis. Human Resource Business Partners work closely with

managers to maintain communication with employees, along with Occupational Health, to support employees' wellbeing and their return to work

d. The management of sickness absence continues to be a high priority for the Council and an important 'Corporate Health' indicator

e. Absence information is now input directly into fusion, and therefore, real time data is available to HR and Managers, including schools

6.0 What are the next steps if the recommendations are approved?

6.1 The reporting and management of sickness absence continues to be a key objective as part of Senior Leadership Team discussions

6.2 The Attendance and Wellbeing Policy continues to have regular reviews to ensure it is up-to-date and relevant

7.0 How does this report support Vale 2030 and Reshaping?

7.1 The sickness absence report supports Vale 2030 and the Reshaping programme by providing insight into workforce health and capacity, enabling targeted actions to improve wellbeing, productivity, and financial sustainability so the Council can deliver modern, resilient services.

8.0 How does this demonstrate the Five Ways of Working?

8.1 Long-term
By analysing absence trends over time, the report supports early intervention and sustainable workforce planning to reduce future impacts on services.

8.2 Prevention
The management of sickness absence together with wellbeing initiatives will help support service delivery including the meeting of corporate / service objectives.

8.3 Integration
The management of absence identifies a range of issues that affect all areas of the Council's workforce. The objectives aim to identify what can be achieved when absence is managed effectively.

8.4 Collaboration
Effective sickness absence management relies on collaboration between the Corporate Management Team, managers, HR, Occupational Health, and Trade Unions.

8.5 Involvement
Regular reporting and management of absence ensures that we are open and transparent in relation to our approach to sickness absence. Any changes to the Attendance and

Wellbeing Policy will be subject to the usual consultation process with Cabinet, Scrutiny, Managers and Trade Unions.

Resources

9.0 Finance

9.1 The need to continue to maintain reasonable levels of absence will be important as the Council responds to ongoing financial pressures.

10.0 Workforce

10.1 The incidence of high levels of absence has significant resource implications and places constraints on the continued delivery of high-quality service provision.

11.0 Legal and Equalities

11.1 **Does an Equalities Impact Assessment need to be completed? If not, why?** An Equalities Impact Assessment has not been completed as the report relates to workforce management data and does not propose any new policy or change that would impact individuals differently based on protected characteristics.

11.2 All legal implications including the Equality Act, Human Rights Act and General Data Protection Regulations have been considered within the implementation of policy provisions.

12.0 Key Contacts

12.1 **Who are the primary officers to contact with any comments and/or queries on the report?**

Lead Officer: Laithe Bonni, Operational Manager HR Employee Services, Lsbonni@valeofglamorgan.gov.uk	Democratic Services Officer Matthew Swindell, Cabinet and Committee Services Officer, mlswindell@valeofglamorgan.gov.uk

Appendix

Appendix A Breakdown of Absence by Service Area.

Appendix B Overall Sickness Rates - The total days/shifts lost per FTE for the period April 2026 to September 2026 indicate a decrease in absence levels compared to same period last year.

Appendix C Sickness Breakdown by Directorate - Data showing the top 5 reasons for sickness absence for each Directorate, including the breakdown of reason for stress related absence.

Appendix D Sickness by Age

Background Documents

n/a

Appendix A - Sickness Absence Breakdown by Service Area (2026/27)

Period 01-JULY-2026 to 30-SEPTEMBER-2026

Directorate	Service	Average FTE	Short Term Days Lost per FTE	Long Term Days Lost per FTE	26/27 Days Lost per FTE	26/27 Annual Target	Q2 COMPARISON 25/26 Days Lost per FTE	Q2 COMPARISON 24/25 Days Lost per FTE
Environment & Housing Services Totals		**672.80**	**1.28**	**4.67**	**5.95**	**14.00**	**6.75**	**7.45**
Environment & Housing Services	Building Services	122.85	1.26	4.78	6.04	14.00	8.26	6.66
	Director's Office - **EHS**	33.77	0.00	5.30	5.30	6.33	1.82	2.92
	Housing Services	78.36	1.06	4.35	5.41	18.50	5.03	12.40
	Neighbourhood Services and Transport	267.48	1.71	4.79	6.49	18.50	7.73	9.56
	Shared Regulatory Services	170.35	0.96	3.77	4.73	8.50	5.56	3.78
Place Totals		**90.27**	**0.70**	**0.78**	**1.48**	**4.50**	**3.07**	**2.09**
Place	Directors Office - Place	37.46	1.17	0.00	1.17	2.25	3.58	0.00
	Regeneration and Planning	52.80	0.38	1.33	1.70	5.75	2.72	2.20
Resources Totals		**363.37**	**0.93**	**3.64**	**4.57**	**10.00**	**4.20**	**4.34**
Resources	Digital	81.48	1.11	6.67	7.79	16.79	2.52	2.86
	Director's Office - **RES**	24.82	0.00	3.06	3.06	4.00	0.67	0.04
	Financial Services	150.66	1.36	2.89	4.25	12.50	5.58	4.35
	Human Resources Service	46.74	0.23	2.46	2.68	7.45	1.75	1.76
	Legal and Democratic Services	42.46	0.71	3.59	4.30	10.24	6.08	5.42
	Policy and Business Transformation	17.21	0.00	0.00	0.00	4.50	5.01	8.29
Learning & Skills Totals		**226.32**	**1.14**	**2.31**	**3.44**	**8.45**	**5.06**	**4.09**
Learning & Skills	Additional Learning Needs and Wellbeing	61.75	0.79	1.72	2.51	9.35	3.48	2.68
	Director's Office - **L&S**	13.77	1.74	0.00	1.74	6.17	4.19	0.30
	Standards and Provision	61.30	1.73	3.36	5.08	10.56	3.82	9.67
	Strategy, Community Learning and Resources	89.50	0.88	2.35	3.23	7.70	7.05	2.22
Social Services Totals		**718.57**	**1.72**	**4.95**	**6.67**	**17.25**	**7.73**	**8.22**
Social Services	Adult Services	240.21	1.98	6.11	8.08	23.91	7.73	10.09
	Children and Young People Services	261.36	1.54	4.39	5.93	18.00	8.01	7.96
	Director's Office - **SS**	19.00	1.16	0.26	1.42	5.50	3.47	2.39
	Resource Management and Safeguarding	198.00	1.71	4.73	6.44	21.59	7.73	6.79
Corporate Total - Excluding Schools		**2071.33**	**1.33**	**4.16**	**5.49**	**11.04**	**6.31**	**6.53**
Schools		**2214.49**	**1.32**	**2.30**	**3.62**	**10.45**	**3.78**	**3.77**
Total Including Schools		**4285.82**	**1.32**	**3.20**	**4.52**	**10.75**	**4.99**	**5.10**

Overall Sickness Rates

The overall sickness absence rates [i.e. working time lost per Full Time Equivalent (FTE)] for 1st April 2026 to 30th September 2026 are set out in the table below with comparative data for the same period in 2024/2025 and 2025/2026.

Total days / shifts lost per FTE (total days lost)	April to September			Target 2026 Q2 (Annual Target ÷ 2.3)
	2024/2025	2025/2026	2026/2027	
Environment & Housing	7.45 (5143)	6.75 (4676)	5.95 (4002)	6.09
Learning and Skills	4.09 (922)	5.06 (1148)	3.44 (780)	3.68
Corporate Resources	4.34 (1491)	4.20 (1397)	4.57 (1659)	4.35
Place	2.09 (209)	3.07 (288)	1.48 (134)	1.96
Social Services	8.22 (5490)	7.73 (5337)	6.67 (4793)	7.50
Corporate Total - excluding Schools	6.53 (13156)	6.31 (12845)	5.49 (11367)	4.80
Schools	3.77 (8159)	3.78 (8464)	3.62 (8014)	4.54
Total Absence	5.10 (21315)	4.99 (21309)	4.52 (19381)	4.67

A more detailed breakdown of absence in each Service area is included within Appendix A.

The following table shows a breakdown of each month in Quarter 2 in 2024 / 2025 / 2026. The figures show a slight decrease in sickness cases year on year from 2024 to 2026.

	2024*		2025 *		2026*	
Month	Number of Absences	Days Lost	Number of Absences	Days Lost	Number of Absences	Days Lost
April	547	3571	512	3146	519	3282
May	606	3916	555	3494	593	3496
June	603	3759	606	3847	575	3353
July	616	3801	494	3413	424	2914
August	285	2853	280	3066	258	2521
September	540	3415	659	4343	683	3815

* Reported at Q2

Number of Absences = Number of Absent Employees in each individual month (i.e. an absence 15th July to 2nd September will be reported in July / August / September respectively)

Days Lost = this is the total days lost in each individual month

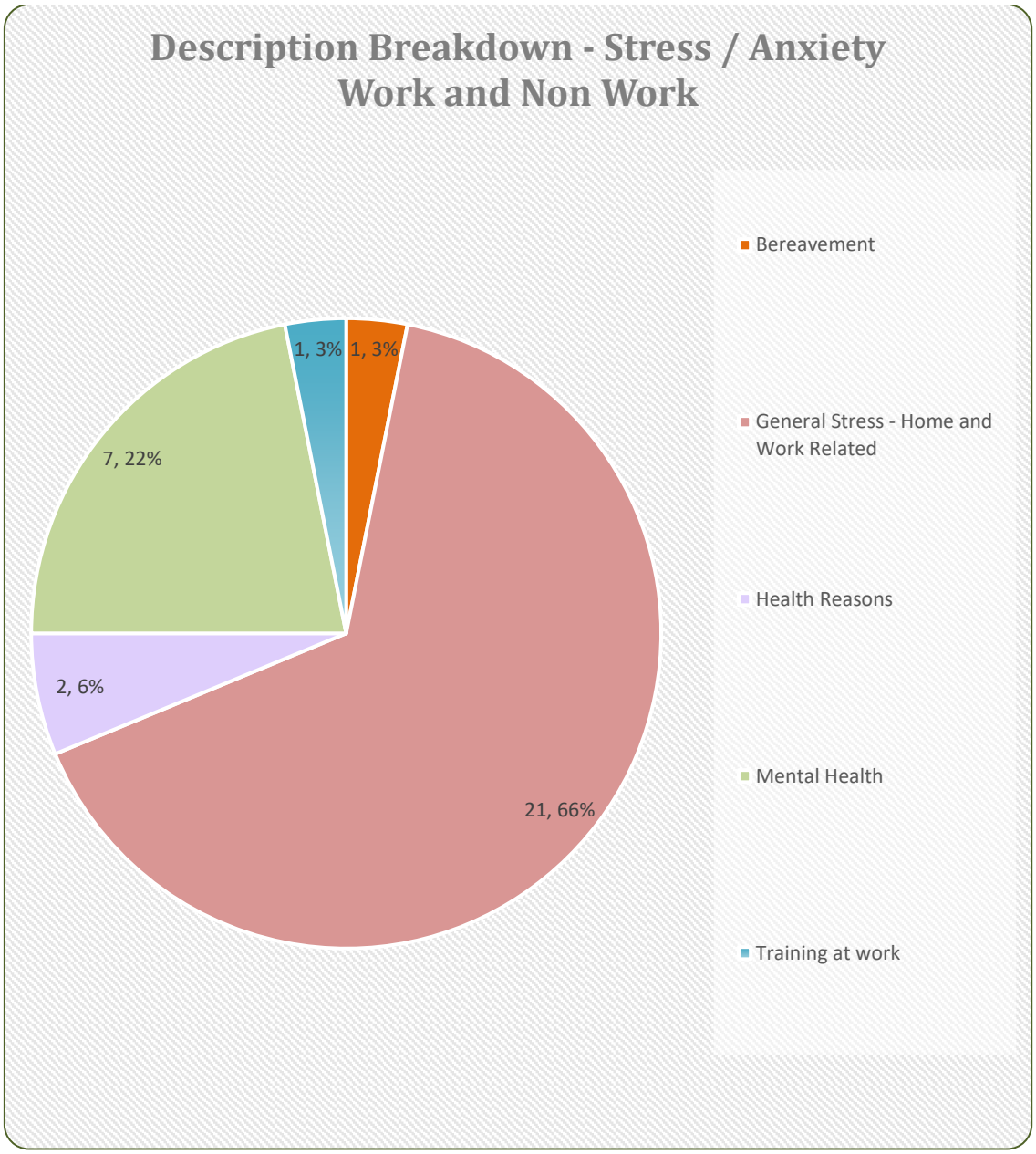
- The reasons for sickness absence across the authority (including in Schools) over the period April 2026 to September 2026 are listed in the below table compared to 2024 and 2025. The figures include both the total FTE days lost and percentages.

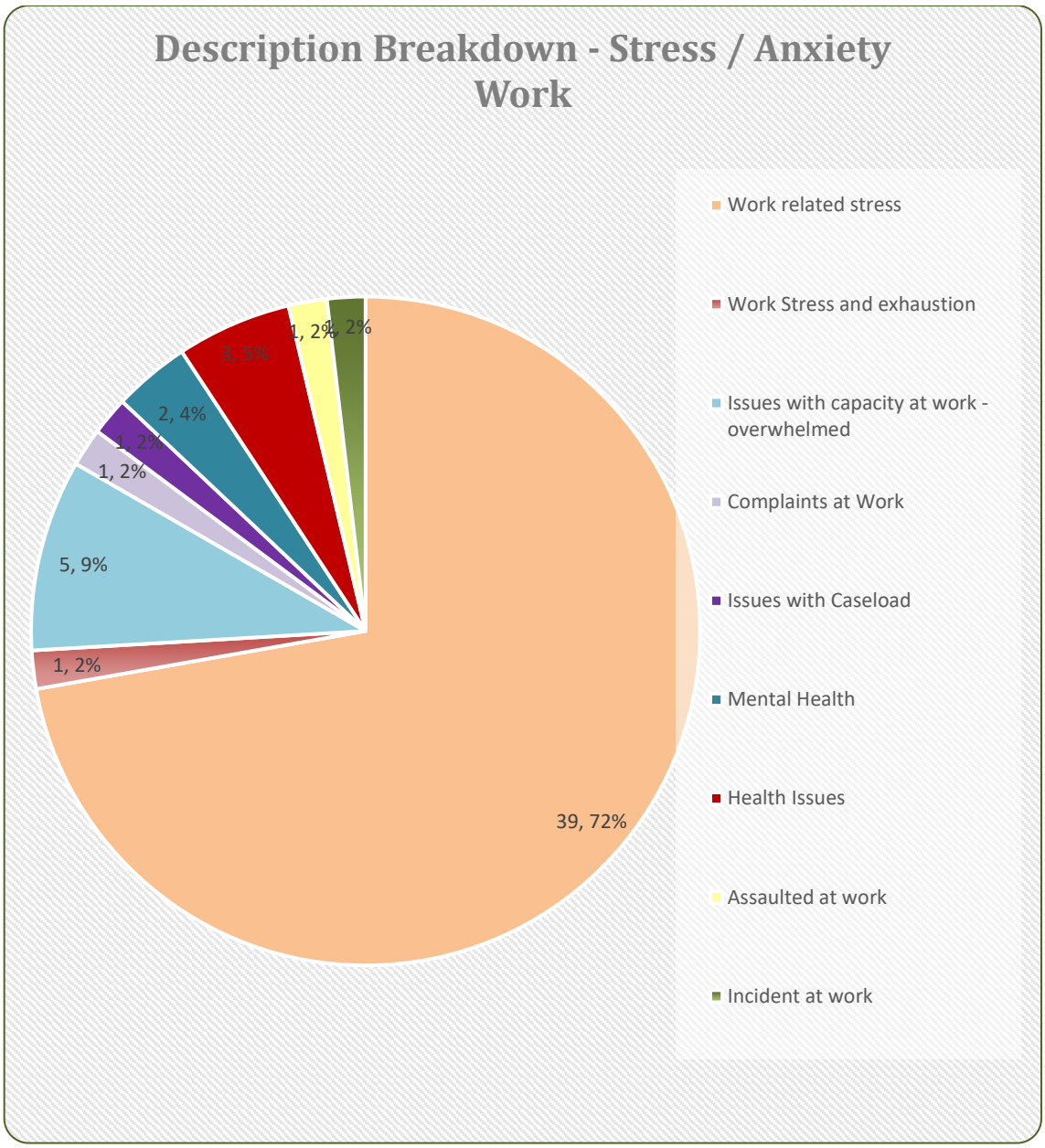
- In reference to the length of absence, members will note from the below table that 71% of all absence are categorised as long term (i.e. over 4 weeks in duration), compared with 29% short term absence.

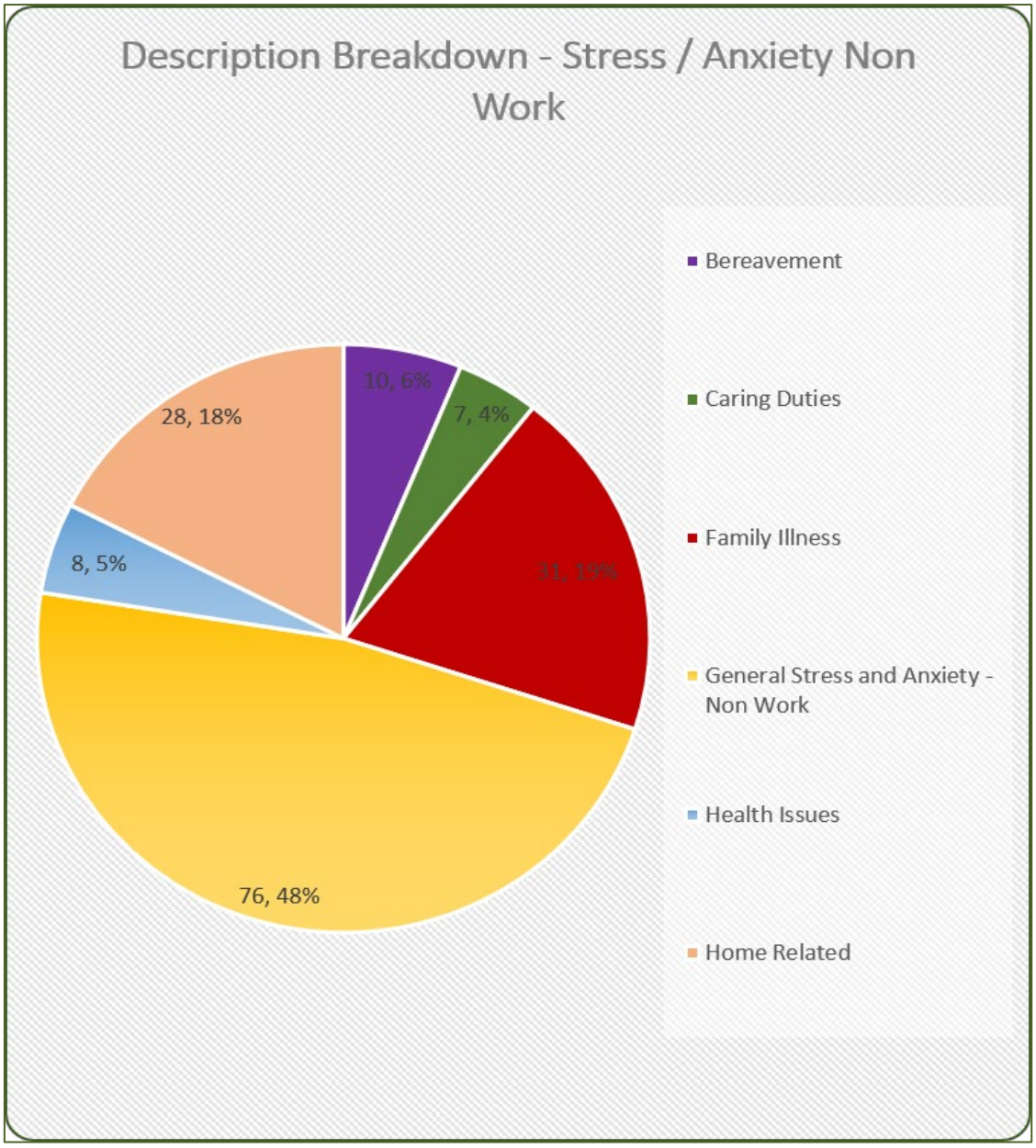
Days Lost (%)	Short Term			Long Term			Total Absence		
Absence Reason	2024	**2025**	**2026**	2024	**2025**	**2026**	2024	**2025**	**2026**
Stress Non Work	245 4.4%	470 8.2%	436 7.7%	3226 20.5%	2379 15.3%	**2632.7** **19.2%**	3471 16.3%	2849 13.4%	3069.1 15.8%
Musculo-skeletal	277 5.0%	574 10%	606 10.7%	1621 10.3%	1620 10.4%	2213.1 16.1%	1898 8.9%	2193 10.3%	2818.7 14.5%
Infections	1745 31.5%	15955 27.8%	**1493** **26.3%**	699 4.4%	697 4.5%	421.7 3.1%	2444 11.5%	2292 10.8%	1915.2 9.9%
Operations / Recovery	299 5.4%	350 6.1%	277.8 4.9%	1770 11.2%	1978 12.7%	1359.7 9.9%	2070 9.7%	2328 10.9%	1637.5 8.4%
Stress Work	81 1.8%	133 2.3%	102.9 1.8%	2016 12.8%	1094 7.0%	1403.0 10.2%	2097 9.8%	1227 5.8%	1505.9 7.8%
Gastrointestinal	864 15.6%	818 14.3%	813.8 14.4%	507 3.2%	516 3.3%	257.2 1.9%	1371 6.4%	1334 6.3%	1071.0 5.5%
Mental Health	0%	99 1.7%	115.4 2.0%	0%	349 2.2%	856.3 6.2%	0%	448 2.1%	971.8 5.0%
Undisclosed	179 3.2%	399 7.0%	318.3 5.6%	248 1.6%	2901 18.6%	645.8 4.7%	427 2.0%	3300 15.5%	964.1 5.0%
Genito-Urinary	101 1.8%	120 2.1%	170.3 3.0%	150 1.0%	60 0.4%	540.2 3.9%	251 1.2%	180 0.8%	710.5 3.7%
Headache / Migraine	266 4.8%	281 4.9%	221.8 3.9%	469 3.0%	579 3.7%	449.5 3.3%	735 3.5%	860 4.0%	671.3 3.5%

Stress	131 2.4%	58 1.0%	78.1 1.4%	862 5.5%	1186 7.6%	549.4 4.0%	993 4.7%	1243 5.8%	627.5 3.2%
Bereavement Related	0%	131 2.3%	200.1 3.5%	0%	765 4.9%	383.3 2.8%	0%	896 4.2%	583.4 3.0%
Cancer	0%	63 1.1%	34.6 0.6%	0%	233 1.5%	497.7 3.6%	0%	238 1.1%	532.3 2.7%
Cardiovascular	31 0.6%	96 1.7%	113.4 2.0%	68 0.4%	370 2.4%	373.9 2.7%	99 0.5%	466 2.2%	487.4 2.5
Pregnancy Related	85 1.5%	116 2%	179.8 3.2%	143 0.9%	195 1.3%	302.5 2.2%	227 1.1%	311 1.5%	482.3 2.5%
Neurological	0%	29 0.5%	97.9 1.7%	0%	191 1.5%	367.7 2.7%	0%	219 1.0%	465.6 2.4%
Respiratory	208 3.8%	171 3%	163.9 2.9%	472 3.0%	224 1.4%	107.0 0.8%	680 3.2%	395 1.9%	270.9 1.4%
Ophthalmology	0%	130 2.3%	138.2 2.4%	0%	59 0.4%	96.2 0.7%	0%	189 0.9%	234.5 1.2%
RTA / Whiplash	10 0.2%	45 0.8%	71.0 1.3%	0 0%	0 0%	75.1 0.5%	10 0.2%	45 0.8%	146.0 0.8%
Other	761 13.7%	51 0.9%	0	2686 17.0%	233 1.5%	114.0 0.8%	3446 16.2%	284 1.3%	114.0 0.6%
Menopause Related	0%	11 0.2%	37.5 0.7%	0%	0%	65.0 0.5%	0%	11 0.2%	102.5 0.5%
% of overall absence (Total Days)	**5543**	**5739**	**5670**	**15772**	**15570**	**13711**	**21315**	**21309**	**19381**

The following graphs show the breakdown of Stress / Anxiety Work Related, Stress / Anxiety Non-Work and Stress / Anxiety Work and Non Work Related descriptions for the Council from April 2026 – September 2026




Description Breakdown - Stress / Anxiety Work
Work related stress
Work Stress and exhaustion
Issues with capacity at work - overwhelmed
Complaints at Work
Issues with Caseload
Mental Health
Health Issues
Assaulted at work
Incident at work
39, 72%
1, 2%
5, 9%
1, 2%
1, 2%
2, 4%
3, 5%
1, 2%
1, 2%


Description Breakdown - Stress / Anxiety Non Work
Bereavement
Caring Duties
Family Illness
General Stress and Anxiety - Non Work
Health Issues
Home Related
10, 6%
7, 4%
31, 19%
76, 48%
8, 5%
28, 18%

All Wales Comparative Sickness Data 2021/22, 2022/23, 2023/24 and data from 2024/25 where available				
	2021/22	**2022/23**	**2023/24**	**2024/25 (sorted)**
Powys	11.2	10.3	9.2	9.2
Isle of Anglesey	8.8	9.2	9.5	9.3
Vale of Glamorgan	**11.4**	**12.8**	**10.3**	**10.2**
Denbighshire	9.8	10	9.9	10.4
Pembrokeshire	10	10.1	10	10.9
Carmarthenshire	11.4	11.6	11.1	11
Torfaen	12.4	12.5	11.1	11
Ceredigion	8.7	12.7	11.1	11.4
Flintshire	-	11.8	11	11.7
Newport	10	12.4	11.3	11.7
Monmouthshire	13.1	12.7	11.7	11.9
Rhondda Cynon Taf	-	18	17	12
Wrexham	13.6	12.7	12.6	12.3
Swansea	12	16.5	10.7	12.3
Cardiff	12.7	12	11.7	12.5
Conwy	10.5	10.4	11.7	12.5
Gwynedd	10.1	10.2	10.3	12.9
Blaenau Gwent	16.5	15.45	12	13.9
Neath Port Talbot	13.3	12.8	12.7	13.9
Bridgend	12.4	13.2	12.4	14
Caerphilly	14.1	14	13.6	14.7
Merthyr Tydfil	9.2	8.7	9.9	14.7

Sickness Breakdowns by Directorate

Environment and Housing - Top 5 Reasons - April 2026 to September 2026

The Top 5 reasons for Environment and Housing show that Musculo-skeletal continues to be highest reported reason for absence in Q2 for 2026/27 (27%). It can be noted that this is based on an increase in long term sickness related to this absence type. Infections is the highest short-term reason at 27.8%. Stress / Anxiety - Work has moved into 4th place.

Days Lost (%)	Short Term			Long Term			Total Absence		
EHS - Top 5 Absence	2024/ 2025	2025/ 2026	2026/ 2027	2024/ 2025	2025/ 2026	2026/ 2027	2024/ 2025	2025/ 2026	2026/ 2027
Musculo-skeletal	70 7.0%	128 14.8%	166 19.3%	811 19%	645 16.9%	885 29.2%	881 17%	773 16.5%	1051 27.0%
Stress/Anxiety Non Work	46 5.0%	66 7.6%	59 9.9%	549 13.0%	413 10.8%	581 19.2%	595 12.0%	479 10.2%	641 16.5%
Infections	299 30.9%	283 32.8%	239 27.8%	70 1.7%	278 7.3%	142 4.7%	369 7.2%	561 12.0%	381 9.8%
Stress/Anxiety Work	15 1.5%	27 3.1%	19 2.2%	803 19.2%	227 6%	275 9.1%	818 15.9%	254 5.4%	294 7.6%
Genito-Urinary	30 3.1%	16 1.8%	28 3.3%	0 0%	0 0%	262 8.7%	30 0.6%	16 0.3%	290 7.5%

There have been 26 instances of absences due to Stress/Anxiety Non-Work Related from April 2026 – September 2026, the descriptions for these include Mental Health, General Stress, Home Related, Pregnancy related, Family Illness and Health Issues.

There have been 8 instances of absences due to Stress/Anxiety Work Related from April 2026 – September 2026, the descriptions for these include Work related stress, Complaints at work, Mental Health and Health Issues.

There have been 8 instances of absences due to Stress/Anxiety Work and Non-Work Reason from April 2026 – September 2026, the descriptions for these include General Stress, Mental Health, and Stress due to training.

Learning and Skills - Top 5 Reasons - April 2026 to September 2026

The Top 5 reasons for Learning and Skills show that Stress/Anxiety Work related has moved to the top position at 15.9%. An additional two new reasons have moved into the top 5 reasons, Pregnancy Related at number 3 – 11.0% and Genito-Urinary has moved to the 4th position – 10.2%. Operations and Recovery in the highest short-term reason, but is at 15.2%.

Days Lost (%)	Short Term			Long Term			Total Absence		
LS - Top 5 Absence	2024/ 2025	2025/ 2026	2026/ 2027	2024/ 2025	2025/ 2026	2026/ 2027	2024/ 2025	2025/ 2026	2026/ 2027
Stress/Anxiety Work	0 0%	34 19.6%	0 0%	20 2.5%	20 2.1%	124 23.7%	20 2.2%	54 4.7%	124 15.9%
Operations and Recovery	9 7.0%	12 6.7%	39 15.2%	78 10.0	179 10.0%	50 9.6%	87 9.0%	191 16.6%	89 11.4%
Pregnancy Related	0 0%	0 0%	25 9.7%	0 0%	0 0%	61 11.7%	0 0%	0 0%	86 11.0%
Genito-Urinary	0 0%	4 2.0%	0 0%	0 0%	0 0%	80 15.3%	0 0%	4 0.3%	80 10.2%
Stress/Anxiety Non Work	0 0%	24 13.8%	37 14.4%	198 25.0%	369 37.9%	32 6.1%	198 22.0%	393 34.2%	69 8.8%

There have been 7 instances of absences due to Stress/Anxiety Non-Work Related from April 2026 – September 2026, the descriptions for these include General Stress, Home Related, Bereavement, Caring Duties, Family Illness and Health Issues.

There have been 3 instances of absences due to Stress/Anxiety Work Related from April 2026 – September 2026, the descriptions for these is Work related stress.

There have been 1 instance of absences due to Stress/Anxiety Work and Non-Work Reason from April 2026 – September 2026, the description is General Stress.

Corporate Resources - Top 5 Reasons - April 2026 to September 2026

The Top 5 reasons for Resources shows Operations and Recovery has moved to top reason for absence during Q2. Stress Non-Work Related has moved to the 3rd reason at 15.7. erm reason at 34.1%. Two new reasons have moved into the top 5, Musculo-skeletal has moved into the 2nd reason at 16% and is the highest contributor to shot term sickness and Mental Health has moved into the 4th reason at 11.7%

Days Lost (%)	Short Term			Long Term			Total Absence		
RES - Top 5 Absence	2024/ 2025	2025/ 2026	2026/ 2027	2024/ 2025	2025/ 2026	2026/ 2027	2024/ 2025	2025/ 2026	2026/ 2027
Operations and Recovery	54 6.0%	92 12.5%	38 11.3%	178 10.9%	231 11.2%	270 20.5%	232 9.1%	323 11.5%	308 18.6%
Musculo-skeletal	0 0%	20 7.5%	53 15.8%	25 2.2%	0 0%	213 16.1%	25 1.7%	20 1.4%	266 16.0%
Stress/Anxiety Non Work	39 11.0%	5 1.8%	22 6.6%	355 31.0%	224 19.9%	238 18.0%	393 26%	229 16.4%	261 15.7%
Mental Health	0 0%	5 1.9%	18 5.3%	0 0%	20 1.7%	177 13.4%	0 0%	25 1.8%	195 11.7%
Stress/Anxiety Work and Non	3 0.8%	5 1.8%	0 0%	75 6.6%	196 17.4%	144 10.9%	78 5.2%	201 14.4%	144 8.7%

There have been 19 instances of absences due to Stress/Anxiety Non-Work Related from April 2026 – September 2026, the descriptions for these include Mental Health, General Stress, Home Related, Caring Duties, Bereavement, Family Illness and Health Issues.

There have been 4 instances of absences due to Stress/Anxiety Work Related from April 2026 – September 2026, the descriptions for these is Work related stress.

There have been 2 instances of absences due to Stress/Anxiety Work and Non-Work Reason from April 2026 – September 2026, the descriptions for these include General Stress, and Bereavement

Social Services - Top 5 Reasons - April 2026 to September 2026

The Top 5 reasons for Social Services shows Stress / Anxiety Non work has moved to the top reason, and Infections has moved to the 2nd place, but continues to be the highest contributor to short term sickness at 28.4%. Two new reasons have moved into the top 5, Headache / Migraine has moved into the 5th position at 7.1% and Stress / Anxiety – Work related has moved to the 3rd position at 11.6%

Days Lost (%)	Short Term			Long Term			Total Absence		
SS - Top 5 Absence	2024/ 2025	2025/ 2026	2026/ 2027	2024/ 2025	2025/ 2026	2026/ 2027	2024/ 2025	2025/ 2026	2026/ 2027
Stress/Anxiety Non Work	12 1.0%	113 9.2%	117 9.5%	994 29.0%	658 16.0%	798 22.4%	1006 19.0%	771 14.5%	915 19.1%
Infections	291 28.0%	319 25.9%	351 28.4%	273 6.0%	139 3.4%	226 6.4%	561 11.0%	459 8.6%	577 12.0%
Stress/Anxiety Work	36 4.5%	27 2.2%	29 2.3%	417 9.6%	378 9.2%	527 14.8%	451 8.4%	406 7.6%	556 11.6%
Musculo-skeletal	53 5.1%	166 13.4%	147 11.9%	302 7.0%	437 10.6%	361 10.2%	355 6.6%	602 11.3%	508 10.6%
Headache, Migraine	50 4.8%	59 4.8%	55 4.5%	302 7%	278 6.8%	287 8.1%	355 6.6%	337 6.3%	342 7.1%

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There have been 46 instances of absences due to Stress/Anxiety Non-Work Related from April 2026 – September 2026, the descriptions for these include Mental Health, General Stress, Home Related, Caring Duties, Bereavement, Pregnancy related, Family Illness and Health Issues.

There have been 14 instances of absences due to Stress/Anxiety Work Related from April 2026 – September 2026, the descriptions for these include Work related stress, Work stress and exhaustion, Issues with capacity at work – overwhelmed, Issues with Caseloads, Assaulted at Work, Incident at work and Health Issues.

There have been 6 instances of absences due to Stress/Anxiety Work and Non-Work Reason from April 2026 – September 2026, the descriptions for these include General Stress and Mental Health.

Place - Top 5 Reasons - April 2026 to September 2026

The Top 5 reasons for Places shows that Musculo-skeletal has moved into the top position at 55.7%, it is also the only long-term reason at 100%. An additional two reasons have moved into the top 5 position, Genito-Urinary has moved to the 3rd position at 11.2% and Gastrointestinal has moved to the 5th position at 3.7%

Days Lost (%)	Short Term			Long Term			Total Absence		
PLC - Top 5 Absence	2024/ 2025	2025/ 2026	2026/ 2027	2024/ 2025	2025/ 2026	2026/ 2027	2024/ 2025	2025/ 2026	2026/ 2027
Musculo-skeletal	1 1.8%	0 0%	4 6.9%	0 0%	0 0%	70 100%	1 0.5%	0 0%	74 55.7%
Infections	10 18.9%	21 44.0%	16 24.9%	0 0%	0 0%	0 0%	10 4.8%	21 7.4%	16 11.8%
Genito-Urinary	0 0%	0 0%	15 23.6%	0 0%	0 0%	0 0%	0 0%	0 0%	15 11.2%
Bereavement	0 0%	0 0%	11 17.3%	0 0%	0 0%	0 0%	0 0%	0 0%	11 8.2%
Gastro-intestinal	27 49.4%	0 0%	5 7.9%	0 0%	0 0%	0 0%	27 13%	0 0%	5 7.9%

No instances of Stress / Anxiety in Q2 2026/2027 for the Directorate of Place.

Schools - Top 5 Reasons - April 2026 to September 2026

The Top 5 reasons for Schools shows Stress/Anxiety Non Work is now the highest contributor to absence in Q2 2026/2027 (14.8%), this is also the highest long term reason at 19.3%. The highest short term reason continues to be Infections at 27.9%. Musculo-skeletal has moved into the top 5 reasons at number 4 – 10.8%

Days Lost (%)	Short Term			Long Term			Total Absence		
SCH - Top 5 Absence	2024/ 2025	2025/ 2026	2026/ 2027	2024/ 2025	2025/ 2026	2026/ 2027	2024/ 2025	2025/ 2026	2026/ 2027
Stress/Anxiety Non Work	139 5.0%	263 8.3%	201 6.9%	1004 19.0%	621 11.7%	983 19.3%	1143 14.0%	884 10.4%	1184 14.8%
Operations & Recovery	130 4.0%	215 6.8%	144 4.9%	740 14.0%	957 18.0%	828 16.2%	869 11.0%	1172 13.8%	972 12.1%
Infections	999 33.0%	844 26.8%	814 27.9%	329 6.0%	96 1.8%	54 1.1%	1328 16.0%	940 11.1%	867 10.8%
Musculo-skeletal	152 5.1%	258 8.2%	226 7.8%	483 9.4%	537 10.1%	636 12.5%	636 7.8%	795 9.4%	863 10.8%
Undisclosed	86 2.9%	309 9.8%	291 10.0%	198 3.8%	1567 29.5%	473 9.3%	285 3.5%	1975 22.2%	764 9.5%

There have been 73 instances of absences due to Stress/Anxiety Non-Work Related from April 2026 – September 2026, the descriptions for these include Mental Health, General Stress, Home Related, Caring Duties, Bereavement, Family Illness and Health Issues.

There have been 25 instances of absences due to Stress/Anxiety Work Related from April 2026 – September 2026, the descriptions for these include Work related stress, Work stress and Health Issues.

There have been 15 instances of absences due to Stress/Anxiety Work and Non-Work Reason from April 2026 – September 2026, the descriptions for these include General Stress Health Reasons and Mental Health.

Sickness by Age Range (Q2 2026/27)

The following showing a comparison related to age groups across the Council and Schools.

Age Group	FTE number	FTE Sickness Days Lost	Days lost per person (FTE days lost / FTE)	Top Absence Reason Short term	Top Absence Reason Long term
16-25	172	638	3.7	Infections – Bacterial / Viral	Cancer
26-35	852	3394	4.0	Infections – Bacterial / Viral	Stress/Anxiety - Non Work
36-45	1059	4060	3.8	Infections – Bacterial / Viral	Stress/Anxiety - Non Work
46-55	1216	4959	4.1	Infections – Bacterial / Viral	Musculoskeletal
56-64	865	5465	6.3	Infections – Bacterial / Viral	Stress/Anxiety - Non Work
65+	97	865	8.9	Musculoskeletal	Operations and Recovery