Staff and Pensions Committee 22 July 2014

Employee Sickness Absence Management Report

Recommendations

- 1) That the Committee notes and supports the performance information in relation to the management of employee sickness absence during 2013/14
- 2) Supports a proactive approach to managing absence which includes ongoing training of managers.

1.0 Introduction

- **1.1** This report covers information on sickness absence for:
 - a) the financial year April 2013 March 2014 and
 - b) compares data with previous years at Corporate level only
 - c) the figures exclude absence for non-sickness reasons such as annual leave, maternity, paternity, or adoption leave, unpaid leave and leave for compassionate reasons.

2.0 Sickness days lost per employee (FTE)

2.1 A summary of corporate comparative sickness absence figures since 2006/07 is as set out below: -

Year Ending	2006/	2007/	2008/	2009/	2010/	2011/	2012/	2013/
	2007	2008	2009	2010	2011	2012	2013	2014
Days Lost per Employee*	9.51	8.51	8.50	8.32	8.80	8.82	9.61	9.60*

^{*} The 2013/14 figure excludes schools. Those figures in the above table up to 2012/13 include schools. The overall sickness absence level for the County Council during 2013/14 when including schools was 8.47 FTE days per employee.

The public service sector average is 8.7 days per employee per year (CIPD2013).

- 2.2 The high levels of change and uncertainty still being experienced by staff make it essential for the County Council to have a proactive focus on employee wellbeing in order to reduce sickness absence levels.
- 2.3 Warwickshire County Council continues to offer flexible working opportunities to



help respond to the different needs of the workforce. Examples of these include older employees wanting to work in different ways and hours as they approach retirement, staff with disabilities who may require reasonable adjustments to their working patterns, and staff with caring responsibilities needing to work more flexibly.

2.4 Sickness absence levels by Group and by Business Unit are as follows

WCC (excluding schools)	9.60
WCC (including schools)	8.47
Communities Group	8.51
Economic Growth	7.46
Transport & Highways	8.90
Localities & Community Safety	8.95
Public Health	4.55
People Group	12.38
Business Management	3.91
Early Intervention	14.88
Learning & Achievement	9.65
Safeguarding	10.83
Social Care & Support Services	12.58
Strategic Commissioning	11.79
Resources Group	8.41
Customer Service	7.01
Finance	6.66
HR &OD	10.10
Information Assets	7.08
Law & Governance	8.48
Physical Assets	8.91
SICM	6.67
Fire & Rescue	5.58

Please note all the data for the Fire and Rescue Service excludes operational Firefighters

3.0 Percentage of employees with no absences

3.1 The average percentage of employees with no absence has risen from 36.3% previously reported in 2013 to 39.9% in 2014.

WCC (excluding schools)	39.9%
WCC (including schools)	41.4%
Communities Group	41.3%
Economic Growth	43.6%
Transport & Highways	39.8%
Localities & Community Safety	41.2%
Public Health	57.1%



People Group	40.0%
Business Management	0.0%
Early Intervention	30.3%
Learning & Achievement	44.5%
Safeguarding	46.2%
Social Care & Support Services	29.3%
Strategic Commissioning	31.0%
Resources Group	36.6%
Customer Service	40.8%
Finance	35.7%
HR &OD	38.4%
Information Assets	35.7%
Law & Governance	47.2%
Physical Assets	41.1%
SICM	37.0%
Fire & Rescue	50.8%

4.0 Average number of episodes of sickness per employee

4.1 The average number of episodes of sickness absence per employee in 2013/14 is reported in the table below.

WCC (excluding schools)	1.42
WCC (including schools)	1.44
Communities Group	1.42
Economic Growth	1.32
Transport & Highways	1.43
Localities & Community Safety	1.52
Public Health	1.14
People Group	1.51
Business Management	2.63
Early Intervention	1.66
Learning & Achievement	1.34
Safeguarding	1.21
Social Care & Support Services	1.71
Strategic Commissioning	1.68
Resources Group	1.45
Customer Service	1.50
Finance	1.66
HR &OD	1.86
Information Assets	1.43
Law & Governance	1.42
Physical Assets	1.32
SICM	1.36
Fire & Rescue	0.83



5.0 Percentage of time lost due to short term / long term sickness

- 5.1 Short term absence is defined as an absence of below 20 working days. Long term absence is defined as absence of longer than four weeks and which often requires a medical intervention to aid recovery and return to work.
- 5.2 All figures within this report relate only to sickness absence as reported through the appropriate procedures and managed through the Council's management of attendance procedure. In the very rare occasions where there is strong evidence that employees are not genuinely sick then this would be dealt with as a disciplinary issue and would not be included in the sickness figures.
- **5.3** Overall, 40.1% of working time lost to absence is accounted for by short-term absences whilst 59.9% is attributed to long-term absences (20 working days or more).

WCC	Short Term	Long Term
2013/14	40.1%	59.9%

Group	Comm	unities	Fire & Rescue		People		Resources	
	Short Term	Long Term	Short Term	Long Term	Short Term	Long Term	Short Term	Long Term
2013/14	47.7%	52.3%	44.5%	55.5%	32.6%	67.4%	49.8%	50.2%

The rate of long term absence is consistent with trends within other public sector and larger private sector organisations.

With the support of the HR Service, managers across all of the Groups are working to proactively manage sickness absence in accordance with the Council's Management of Absence Policy. Throughout 2013/14, 13 employees were dismissed due to sickness absence or reasons related to the absence triggers. Added to that, a further 17 employees left the County Council on ill health retirement grounds (NB. These figures exclude Fire & Rescue and Schools).

6.0 Reasons for sickness absence

6.1 The reasons for sickness absence during the last 3 years are reported below.

WCC	2011/12	2012/13	2013/14
Chest or Respiratory	4.2%	5.0%	5.0%
Digestive System	7.5%	7.7%	6.3%
Eye, Ear, Nose, Mouth	4.2%	3.9%	3.3%
Heart & Circulation	1.6%	1.4%	2.0%
Musculo-skeletal	19.0%	16.8%	18.0%



Neurological	4.0%	4.0%	3.9%	
Operation or Post-Op	10.4%	12.3%	11.1%	
Stress / Mental Health	20.2%	17.4%	23.7%	
Viral	12.5%	14.4%	12.8%	
Swine Flu	NIL	NIL	NIL	
Other reason	9.4%	11.1%	7.5%	
Reason Withheld	7.0%	6.6%	6.5%	

6.2 The top 4 reasons for sickness absence in 2013/14 are shown in the table below.

Days Lost (%)	Musculo- Skeletal	Stress& Mental Health	Viral	Operation or Post-Op
Communities	1105(19.4%)	1314(23.1%)	827(14.5%)	550(9.6%)
People	3611(16.7%)	6221(28.7%)	2592(12.0%)	1905(8.8%)
Resources	1731(14.9%)	2066(17.7%)	1687(14.5%)	1844(15.8%)
Fire & Rescue	1059(40.2%)	157(6.0%)	223(8.5%)	350(13.3%)

- 6.3 The most common cause of short-term absence is minor illness, including colds, flu, stomach upsets, headaches and migraines. Acute medical conditions, stress, mental ill-health and musculoskeletal injuries are most commonly responsible for long-term absence.
- 6.4 A breakdown of the specific reasons for sickness absence shows that the "top four" reasons for sickness absence remain unchanged from the previous year. These relate to absences categorised as being for stress/mental health issues (23.7%), musculo-skeletal disorders (18.0%), viral infections (12.8%) and operation or post-operative conditions (11.1%).
- 6.5 Musculo-Skeletal Disorders (MSD) remains the second main reason for sickness absence across the Council accounting for 18.0% of all absences.

7.0 Occupational Health & short term support and counselling

- 7.1 Team Prevent, the Occupational Health service, provides pre-employment health assessment, management referrals, medicals, health surveillance and monitoring where necessary. This is a proactive service to ensure that employees are protected against risks of work-related ill health, to assist with reducing sickness absence, and to get people back to work sooner.
- 7.2 To assist with this proactive approach, Team Prevent works closely with the HR and OD Service, including the HR Advisory team, the Health & Safety & Wellbeing team and the Staff Care Service.



- **7.3** The Fire & Rescue Service has its own in-house Occupational Health service which includes counselling support provided by the Staff Wellbeing Adviser & Counsellor.
- **7.4** For those staff who were seen by Occupational Health, the top 5 reasons for new referrals were musculo-skeletal, medical conditions, depression, work-related stress, and non-work related stress.
- 7.5 In 2013/14 the Staff Care Service received 241 new referrals (down from 257 in 2012/13), and the Fire & Rescue Staff Wellbeing Advisor and Counsellor received 36 new referrals (up from 32 in 2012/13).
- **7.6** The top 4 reasons for referral to the Staff Care Service and the Staff Wellbeing Adviser & Counsellor in the Fire Rescue Service were:-
 - Relationships/Personal,
 - Stress/anxiety
 - Depression, and Bereavement

8.0 Support and Advice for Managing Absence

- 8.1 The Health, Safety and Wellbeing Service has procured and introduced the 'Tackling Work-Related Stress A Manager's Role' training, and 'Developing Resilience' training sessions to the corporate training menu. This training is provided to support the WCC Management of Work-Related Stress and Wellbeing Policy. Both courses have been well attended and well received.
- 8.2 In response to the organisational changes, and the impact it has had upon the workforce, the HR and OD Service has responded by offering a wide range of face to face e- learning activities and bite-size programmes. These include the 'The Skills of Managing Change', 'Delivering the Message', 'Supporting Teams Through Change', 'Crest the Curve' and 'Developing Personal Resilience'.

9.0 Conclusion

- **9.1** This report has compiled all relevant and available statistics for sickness absence management within WCC. The statistics demonstrate that the monitoring and management of sickness absence remains essential.
- **9.2** The average sickness absence levels of WCC staff (excluding schools) in 2013/14 were 9.60 per employee.
- 9.3 As with 2012/13, stress and mental health remains the top reason for sickness absence. The economic pressures that have resulted in redundancies and the continuous changes in the workplace have a clear impact on the anxiety and stress levels experienced by staff. As a consequence, the County Council must remain committed to the health and wellbeing of its staff.



9.4 The focus will remain on managing absence, ensuring managers are aware of their roles and responsibilities, and proactively managing cases before employees are absent from work on long term sick. The County Council will continue to train its managers to develop their capability in managing sickness absence effectively, including conducting effective return-to-work interviews.

Background Papers

None

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