

East Herts Council

SICKNESS ABSENCE REPORT

1 APRIL 2010 – 31 MARCH 2011

1. Executive Summary

The following information outlines East Herts sickness absence levels for the financial year 2010/2011.

2. Sickness Absence Overview

Figure 1

Year	Sickness Absence Days per FTE Staff in Post							
	Local Authority Average (Source: IRS Employment Review)	Herts District Group Average	East Herts Target			East Herts Outturns		
2006/7	10.6	9.3	7.0			9.6		
2007/8	9.8	9.3	6.0			9.6		
2008/9	9.8	No longer reporting outturns	Short-term 6	Long-term 2.5	Total 8.5	Short-term 4.91	Long-term 3.03	Total 7.94
2009/10	9 (source Local Government Sickness Absence Survey 2008-2009, shire district outturn)	No longer reporting outturns	Short-term 5	Long-term 3	Total 8	Short-term 4.43	Long-term 2.04	Total 6.47
2010/11	8.64 (EELGA survey November 2010)	No longer reporting outturns	Short-term 5	Long-term 2.5	Total 7.5	Short-term 4.73	Long-term 2.06	Total 6.79

Sickness Absence Data Calculations

The sickness records for all permanent employees and those on fixed-term contracts are included. Agency staffs are excluded from the calculation.

All calculations (sick days and staff in post) are based on Full Time Equivalents (FTE). The FTE of staff in post is an average for the financial year. This is calculated by obtaining the FTE as at April 1st 2010 and the FTE as at 31st March 2011 and averaging the two figures.

In 2009/10 the point at which a sickness absence was classed as long-term changed from 43 to 29 days and the sickness targets were changed to reflect this.

Comparisons

The outturns for East Herts have been compared to local authority averages. The comparison

for 2010/11 is taken from an East of England Local Government Association (EELGA) Survey 2010. The survey encompasses the data from 11 district/borough councils and 2 county councils. The average sickness absence is 8.64 FTE days per employee per year. The Local Government Sickness Absence Report is biennial and therefore the outturns for 2008/9 are still the most recent. At 6.47 days, the East Herts outturn is significantly below the average for local authorities.

Sickness absence and the recession

The Office of National Statistics reported in February 2011 that the recession had initially coincided with a decrease in sickness absence. However by the last quarter of 2010 the rate had returned to pre-economic downturn levels.

East Herts Council outturns 2010/11

In 2010/11 the overall level sickness absence has increased slightly, from 6.47 sickness absence days per FTE 2009/10 to 6.79 days 2010/11. However it is worth noting that this equates the actual number of FTE sickness absence days for the authority has decreased from 2079 in 2009/10 to 2057 in 2010/11. In the last financial the actual FTE of the Council had decreased. In April 2010 there was an FTE of 313.81 and by March 2011 this had reduced to 302.62. As an average for the year is used to calculate sickness absence days per FTE this reduction, which mainly occurred in the latter half of the year may account for the increased outturn despite decrease in actual sickness absence days.

Figure 2 below compares the percentage of employees on absence triggers in 2009/10 and 2010/11. Both triggers have seen a reduction in the last financial year when compared to 2009/10. The number of staff on the '10 days in a rolling year' trigger increased slightly throughout 2010/11. However this increase may be explained by the reduction of FTE between April 2010 and March 2011 as detailed above.

Figure 2

Sickness Absence Management Triggers	Staff on triggers			
	2009/10		2010/11	
	Apr-09	Mar-10	Apr-10	Mar-11
3 Occurrences in 6 months	11.59%	11.32%	11.54%	9.62%
10 days in a rolling year	19.68%	15.36%	14.29%	14.84%

3. Short-Term Sickness Absence

The short-term absence level increased slightly in 2010/11 to 4.73 days per FTE. The outturn is below the target of 5 days.

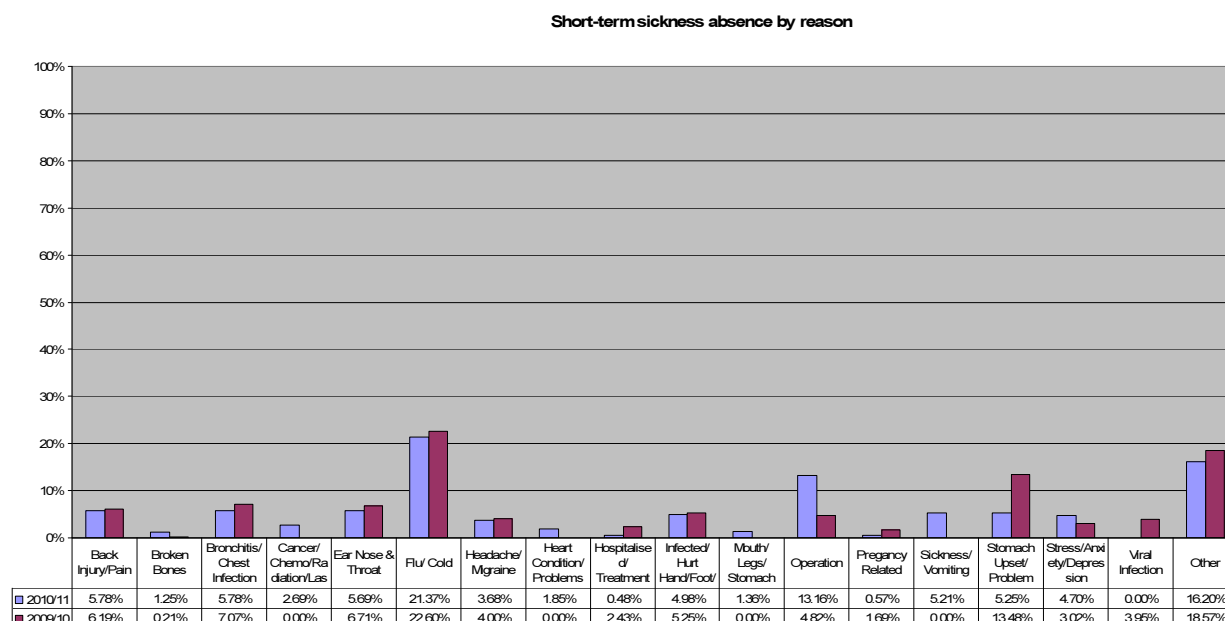
Figure 3 below compares the number of short-term sickness absence days per FTE over the last four financial years. However it must be remembered that in 2009/10 the definition of short-term sickness changed from absences up to 42 days to absences up to 28 days. There has been a slight increase from 2009/10. Earlier years cannot be used for a true comparison due to the change in definition.

Figure 3

Year	Short-Term Sickness Absence Days per FTE staff in post
2007/8	5.42
2008/9	4.91
2009/10	4.43
2010/11	4.73

Figure 4 outlines the main reasons for short-term sickness absence in 2010/11 compared with 2009/10.

Figure 4

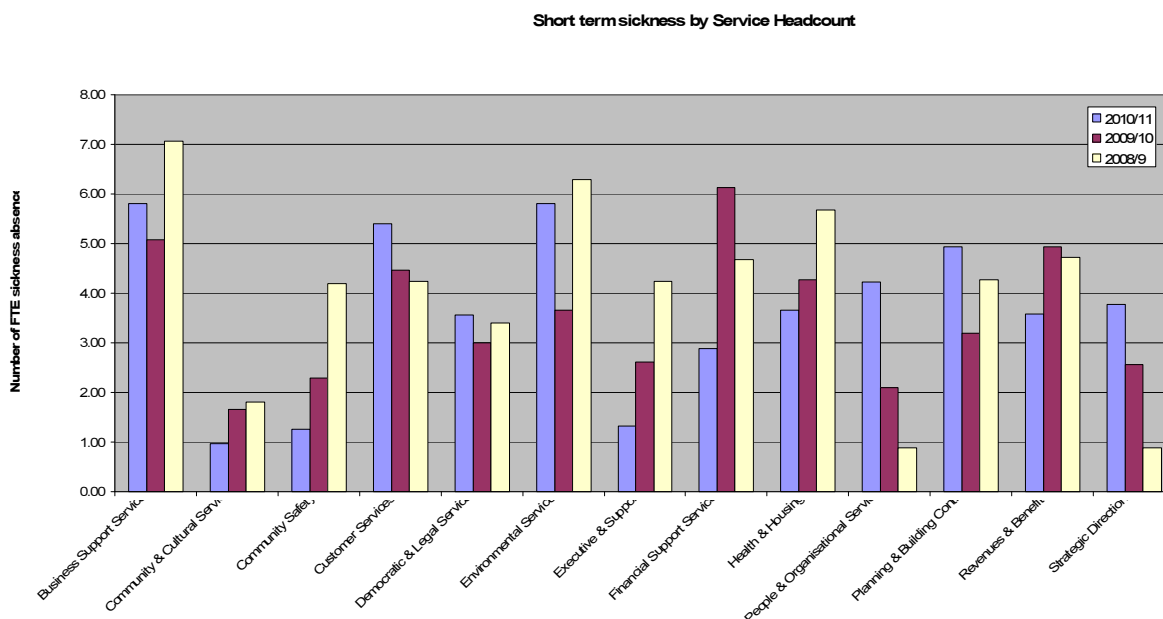


Flu/Cold remains the most common reason for short-term absence in 2010/11 at 21.37%, which is consistent when compared to either the Local Government of CIPD surveys. Back pain/Injury is the second most common reason, a change from previous years where it has consistently been stomach upset/problem.

Short-term absence due to stress/ anxiety and depression has increased from 3.02% in 2009/10 to 4.70%. This is not uncommon in times of change and East Herts still compares favourably to other Local Authorities. The Local Government Sickness Absence Survey 2009 (the most recent data) states that Stress and related illnesses account for 7.8% of all short-term absence. The Council has a Stress Management Policy which ensures that employees who are diagnosed with stress are seen by Occupational Health at the earliest opportunity. The employee assistance programme (PPC) offers counselling and useful information about dealing with change and stress. All managers who attended the Management Development Training received stress awareness training, equipping them to recognise and address stress in the workplace.

Figure 5 shows the number of FTE sickness absence days by the headcount in each service, compared with 2009/10 and 2008/9.

Figure 5



Business Support Services and Environmental Services have the highest level of absence per headcount at 5.18 FTE sickness days. A large proportion of the absence in both services was due to Flu/Cold and Stomach Upsets.

Community & Cultural Services, Community Safety, Executive & Support, Financial Support Services, Health & Housing and Revenues & Benefits have all improved their absence levels in the last year. Revenues and Benefits' sickness absence has reduced by 1.33 FTE sickness days this year. This service have been the first to fully embrace home-working, and this may have had an effect on absence rates. As more services take up home-working in 2011/12 further analysis of its affect on sickness absence could be undertaken.

4. Long-Term Sickness Absence

Figure 6 compares the number of long-term sickness absence days over the last four financial years. Long-term sickness is defined as a period of sickness lasting over 28 days, in-line with best practice.

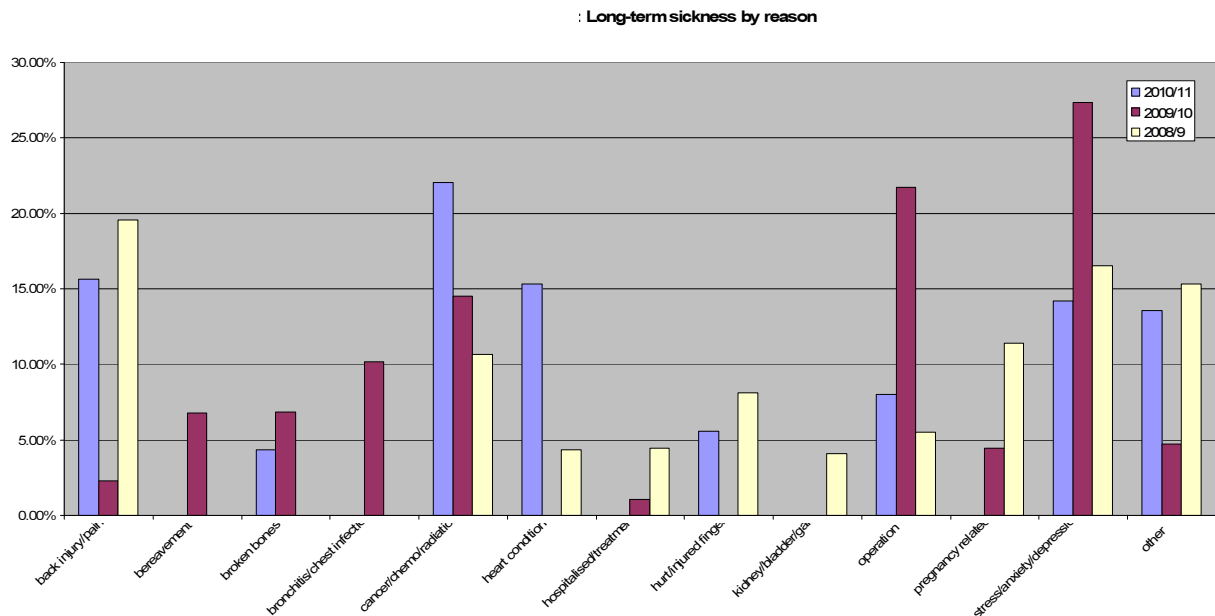
Of the 2057 FTE days sick in 2010/11, 627 are due to long-term sickness. This has resulted in a slight increase per employee when compared to 2009/10. The long term sickness in 2010/11 was accrued by 17 people (compared to 20 people in 2009/10). Two of these people have now left the Council. HR are working with managers and Occupational Health on the ongoing cases.

Figure 6

Year	Long-Term Sickness Absence Days per FTE staff in post
2007/8	4.14
2008/9	3.03
2009/10	2.04
2010/11	2.07

Figure 7 outlines the reasons for Long-Term sickness in 2010/11 compared with 2009/10 and 2008/9.

Figure 7



The most common reason for long-term sickness in 2010/11 was cancer related. This accounted for over 22.06% of all long-term sickness. This is due to three cases within the Council.

The second and third most common reason for absence were back injury/pain (15.63%) and heart conditions (15.31%)

Stress Anxiety and Depression accounted for 14.21% of long-term sickness. This outturn shows a dramatic decrease from last year's outturn of 27.37%. It was in 2009/10 that the definition of long-term sickness absence was reduced from over 42 days to over 28 days. Now that this is imbedded within sickness management it is clear that stress-related sickness is being captured and managed at the short-term stage and less is progressing to long-term sickness.

5. Occupational Health Services

The Council's Occupational Health Adviser visits the offices (Hertford or Bishop's Stortford) once a fortnight, although additional visits are possible if required. The current cost of the service is circa £5,900 per annum, compared to circa £4,700 per annum in 2009/10. This figure is inclusive of the visits and associated administration and reports. HR are still reviewing the potential savings of changing the service to one managed as part of a Shared Service.

The Council continues to support staff well-being. Staff are entitled to discounts in all East Herts leisure centres.

The Cycle to Work scheme will be launched in Autumn 2011. This will support the Council's wellbeing and green policies.

6. Employee Assistance Programme

The Employee Assistance Programme (EAP) provided by PPC provides a variety of services to East Herts employees. These include, telephone debt counselling, formal telephone counselling, face-to-face counselling and online guides and fact sheets.

East Herts Council joined with Herts County Council's pathfinder initiative when it engaged PPC to deliver the EAP. As more Councils join the group the cost of EAP provision drops. In 2009/10 it cost the Council £8.34 per employee. In 2010/11 this has reduced to £6.98.

A Team Update (staff magazine) article was produced in 2010/11 publicising the services to staff, posters and leaflets were distributed. All employees involved in restructures, under formal procedures or on long-term or stress-related sick are reminded of PPC services.

During the period April 2010 – March 2011 the following EAP services were used by employees:

- Webpage Hits – 10 hits
- Factsheets – 12 downloads
- Face to Face Counselling – 3 cases
- Telephone Counselling – 0 cases
- Information Requests – 2 cases

Employees using the face-to-face counselling service in 2010/11 gave positive feedback and found this to be a useful resource.

The utilisation rate for East Herts Council is 4.29%, which is lower than the average utilisation rate of 11.4% recorded by PPC. Human Resources will continue to work with PPC to devise publicity alerting employees to the services offered.

7. Absenteeism Management Internal Audit Report August 2011

Internal Audit reviewed the Council's absenteeism management as part of the annual audit plan. The Audit brief was to assess the adequacy and effectiveness of internal controls, processes and records. The report concluded that 'moderate assurance' could be given that effective controls are in operation. Whilst performance management was considered good concerns were raised that not all staff were being treated in accordance with the policy when reaching an absence trigger.

Three recommendations were given:

- Managers to be reminded of the absence management policy and actions associated with trigger points - *Actioned September 2011*
- Heads of Service to ensure monthly sickness statistics are reviewed and discussed with managers - *Actioned September 2011*
- The Absence Management Policy should include guidance on conducting Health Review Meetings - *To be actioned in 2012 under policy review timetable*

8. 2009/10 Recommendations- Progress

Targets

The Council's long-term sickness and overall sickness targets were reduced in 2010/11. The Council has remained on target for sickness.

Stress-related sickness

Employees are now being referred to Occupational Health when stress related sickness is cited (whether or not it is work-related) however stress related absence has increased in 2010/11.

Further work with Occupational Health, Managers and the support available from PPC is required to ensure the outturn does not increase this year.

9. Moving Forward- Recommendations for 2010/11

Targets

It is recommended the targets for sickness absence 2011/12 remain at 5 days FTE for short term absence, 2.5 days FTE long term absence and 7.5 days FTE total sickness absence.

Stress Related Sickness

Further training on the stress awareness for managers may be beneficial as short-term stress-related sickness has increased this year. Exploring further support available by Occupational Health and PPC is also recommended.

The affect of Home-Working

As the move to Wallfields encourages more services to take up home-working it would be beneficial for the Council to analyse its effect on absence rates when compared to office-based staff.

Absence Management Policy

To be reviewed in 2012, incorporating best practice, legislation and recommendations from the Internal Audit report 2011