

East Herts Council

EMPLOYEE HEALTH AND WELLBEING REPORT

2018/2019

1. Introduction

- 1.1 The Chartered Institute of Personnel and Development (CIPD) 'Health and Wellbeing at Work Survey 2018' states that 'Average absence levels are just one indicator of the health and well-being of employees within an organisation. 'Presenteeism' (working when unwell) and 'leaveism' (for example, employees using allocated time off such as annual leave to work or if they are unwell, or working outside contracted hours) can also indicate organisational issues (such as a long-hours culture or excessive workloads). These behaviours can adversely affect employees' health and well-being: working when ill or not taking opportunities to relax outside work may have far greater impact on employees' long-term physical and mental health, as well as organisational productivity, than their absence'.
- 1.2 For this reason the previously titled 'Sickness Absence Management' Report has changed to 'Employee Health and Wellbeing' Report.

2. Sickness Absence Levels

- 2.1 The table below shows that the council's short and long term sickness absence levels are lower than UK local authority averages. Short term and overall absence levels have met the council's targets, however the long term absence rate has not.

	Short Term	Long	Total
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		Term	
Sickness Absence days per FTE	3.6	2.9	6.5
Council's Target	4.5	2.0	6.5
UK Local Authority Average	3.9	4.1	8.1

The UK Local Authority Average figure is the mean for shire districts. It is taken from the 2016/17 Local Government Survey which is the latest available at the time of writing the report.

2.1 Charts 1 to 3 in Essential Reference Paper C (ERP C) show the council's overall, short and long term absence levels over the last 5 years.

3. Short Term absence

3.1 Short term¹ absences per FTE have increased from 3.1 days in 2017/18 to 3.6 days in 2018/19. Chart 4 in ERP C shows a breakdown of the causes.

3.2 Minor illnesses such as colds/flu, headaches/migraines, stomach upsets, and minor operations, were by far the most common causes (65.2%) for short term absence in the council in 2018/19. This is similar in other public sector organisations where 84% reported that minor illnesses were in their top three causes of short term absence².

3.3 Acute medical conditions, such as stroke, heart attack and cancer, were the second most common cause of short term absence (9.9%). This is similar in other public sector organisations where 8% reported that acute medical conditions were in their top three causes of short term absence.

3.4 Stress was the third most common cause of short term absence (7.5%). This has increased from 3.4% in 2017/18. 66% of public sector organisations responding to their survey reported that stress was in their top three causes of short term absence.

¹ Short Term are absences that are less than 20 calendar days

² Chartered Institute of Personnel and Development (CIPD) 'Health and Wellbeing at Work Survey 2018'

4. Long Term Absence

- 4.1 Long term³ absences per FTE have fallen from 3.1 days in 2017/18 to 2.9 days in 2018/19. Chart 6 in ERP C shows a breakdown of causes.
- 4.2 Stress was by far the most common cause (55%) of long term absences in the council in 2018/19. This has increased from 10% in 2017/18. This is similar to other public sector organisations where 72% reported that stress was in their top three causes of long term absence⁴.
- 4.3 Seven employees were off with stress in 2018/19. All employees have received support from Occupational Health (OH), managers and HR. All cases have been resolved: 6 employees have returned to work and 1 employee has left the council. 2 of these employees went off for stress in relation to being subject to disciplinary investigations which were then substantially delayed as the employees were assessed as unfit to participate in the process by OH, making it more challenging to manage and seek an earlier return to work. Stress risk assessments are now being undertaken at an earlier stage and with HR involvement.
- 4.4 Mental Health was the second most common cause of long term absence (17%, 2 employees). This has increased from 6.4% in 2017/18. 73% of public sector organisations reported that mental health was in their top three causes of long term absence.
- 4.5 Acute Medical Conditions, such as stroke, heart attack and cancer, were the third most common cause of long term absence (12%, 3 employees). This has fallen considerably since 2017/18 (43%). 44% of public sector organisation responding to

³ Long Term are absences that are 20 or more calendar days

⁴ Chartered Institute of Personnel and Development (CIPD) 'Health and Wellbeing at Work Survey 2018'

the survey reported that acute medical conditions were in their top three causes of long term absence.

- 4.6 Work-related injuries/accidents account for 3% of all long term absence. This relates to 1 employee who had an accident out on a site visit. A risk assessment has been undertaken and remedial action put in place. The employee has returned to work.

5. How is the council addressing absence

- 5.1 Short term absences due to minor illnesses are mostly unavoidable. Managers are managing them through holding return-to-work meetings after every absence, providing support, monitoring absences against the council's triggers⁵ and taking the appropriate action in line with procedures.
- 5.2 Managers are supporting employees with acute medical conditions by e.g. allowing them time off to attend medical appointments/treatment and allowing flexible working where possible.
- 5.3 It is important that managers recognise the signs of stress at an early stage so that action can be taken to support employees. Employees experiencing stress are referred to the council's occupational health service. Managers use the Health and Safety Executive's (HSE) stress risk assessment tool which looks at the key causes of stress (e.g. demands of the job, control over their work, support from their manager and colleagues, relationships at work, the role, and organisational change) and identifies actions to help reduce the stress. Employees can also seek confidential support from the council's Employee Assistance Programme (EAP).

⁵ The council's absence triggers are: 7 days in any 12 month period, 3 occasions in 6 months or a pattern of absence which causes concern, such as frequent absenteeism on a Monday or Friday, or avoiding particular work tasks

- 5.4 The CIPD Survey states that “a heavy workload remains by far the most common cause of stress at work, across all sectors. Management style remains the second and relationships at work the third cause”.
- 5.5 The council has taken considerable action to manage employee mental health in 2018/19 e.g. training employees to become Mental Health First Aiders (MHFAs), promoting mental health awareness through events such as Time to Talk, and arranging wellbeing sessions such as mindfulness. Please see Section 7 for further information on how the council is supporting employees experiencing mental health issues.
- 5.6 Managers and HR are supporting employees with health issues through e.g. home visits, referrals to Occupational Health, making adjustments to their work/workplace to assist them in returning to work at the appropriate time, and offering flexible working.

6. Financial Wellbeing

- 6.1 The CIPD have said that ‘money worries can contribute directly to employee mental stress, and the financially stressed are more likely to suffer conditions such as fatigue and heart attacks as well as alcohol and drug abuse’. It found that 24% of organisations believe that poor financial well-being is a significant cause of employee stress in their organisation.
- 6.2 Recent CIPD research (2017) has identified the importance of financial well-being for employees and organisations, yet their findings⁶ show that financial well-being is a relatively neglected area of organisations’ health and well-being activity.
- 6.3 The council recognises the importance of financial wellbeing support for employees. It provides a fair and equitable pay

⁶ Chartered Institute of Personnel and Development (CIPD) ‘Health and Wellbeing at Work Survey 2018’

system and pay rates are above the national living wage and the living wage foundation national rates. It offers phased retirement and pre-retirement courses and has a good pension plan. The Employee Assistance Programme (EAP) offers financial support e.g. with debt management and budgeting. The MyRewards site provides advice, tips and tools such as a budget planner, loan calculator, how to get free debt advice, and how to check your credit report.

7. Health and Wellbeing activities

- 7.1 The CIPD reported that, 'overall, three-quarters of respondents reported benefits from their health and well-being activity over the last 12 months, most noticeably better morale and engagement, a healthier and more inclusive culture, and lower sickness absence'. It added that 'organisations that critically evaluate the impact of their well-being activity, particularly those that take a continuous improvement/feedback loop approach, are much more likely to report their activity has resulted in positive organisational outcomes.'
- 7.2 The Community Wellbeing and Partnerships Team in conjunction with HR have developed and delivered a comprehensive programme of employee wellbeing events throughout 2018/19. To understand what events employees were interested in, Staff Forum representatives were asked to consult their colleagues. Wellbeing sessions have included lunch time health walks, Reiki and Crystal healing sessions, reflexology sessions, short 'TED-style'⁷ talks on topics such as Mindfulness; and wellness talks on e.g. hydration. Other initiatives have included free flu vaccinations for employees at the workplace and setting up a carer's support group. All events were free for employees and the majority were arranged at no

⁷ TED talks are short powerful talks on a variety of topics

or little cost to the council. The council has further demonstrated its commitment to wellbeing by stating that all wellbeing events can be attended during council work time. The feedback from employees attending the events has been positive.

- 7.3 In November 2018, twenty two employees were trained to become Mental Health First Aiders (MHFAs). MHFA's are available across the council to support employees experiencing mental health through listening, empathising and providing further sources of support.
- 7.4 In March 2019 a wellbeing page was set up on the intranet to bring together in one place information for employees on wellbeing e.g. how to contact a MHFA, details of upcoming lunchtime health walks, and links to The Wellbeing Centre on MyRewards. The latter provides education, support and tools for employees e.g. helping improve their quality of sleep, healthy recipes and advice on how to improve financial wellbeing.
- 7.5 The council has continued to offer an Employee Assistance Program (EAP) which supports health and wellbeing however it has significantly developed further support.
- 7.6 The council will monitor absence levels throughout the year to see if the wellbeing activities have had a positive effect. It can also monitor any improved morale and engagement as a result of wellbeing activities e.g. through a survey.

8. 'Presenteeism' and 'Leavism'

- 8.1 As mentioned in the introduction, 'presenteesim' and 'leaveism' are also indicators of the health and well-being of employees within an organisation.

8.2 'Presenteesim' is working when unwell. The CIPD reported⁸ that a quarter of all organisations said that 'presenteeism' had increased. It added that 'buy-in from senior leaders and line managers is critical for tackling 'presenteeism' as they have a significant role to play in creating a culture where people do not work when ill and are encouraged to go home if they are unwell. Just over a third of organisations report their leaders are role-modelling by not working when ill. Making efforts to identify the causes of 'presenteeism' is a vital step to dealing with the issue for the long term'.

8.3 Leaveism is defined as:

(1) employees using allocated time off such as annual leave entitlements, flexi hours banked and so on, to take time off when they are in fact unwell;

(2) taking work home that cannot be completed in normal working hours;

(3) working while on annual leave to catch up.

8.4 In the same report, nearly two-thirds of respondents report they have observed some form of 'leaveism' over the past 12 months. Half have observed employees working outside contracted hours to get work done and over a third report employees use allocated time off (such as annual leave) when unwell.

8.5 There is currently no evidence that the council has a culture of 'presenteesim' or 'leaveism' however it would be useful to seek employees views on this by e.g. conducting a wellbeing survey.

9. Summary

⁸ Chartered Institute of Personnel and Development (CIPD) 'Health and Wellbeing at Work Survey 2018'

- 9.1 The council has effective measures in place to support employee health and wellbeing e.g. support from Occupational Health, advice from the EAP, articles and advice on the MyRewards site, a flexible working culture, tools such as the HSE Stress Risk Assessment, free wellbeing events for employees and trained MHFAs.
- 9.2 However it could take a more holistic approach by focussing on all aspects of wellbeing including physical, mental, emotional, financial and social. Developing an Employee Health and Wellbeing Strategy would help the council to have a more integrated approach to wellbeing.

10. Actions planned in 2019/20 to improve health and wellbeing

- 10.1 In light of the findings from the CIPD's Survey and the council's absence data for 2018/19, the primary focus for 2019/20 should be on taking preventative measures to help reduce the number of employees experiencing stress or mental health issues. The following actions have been planned:
- Develop an Employee Health and Wellbeing Strategy to ensure that the council is taking an integrated approach
 - Train managers in the importance of wellbeing, managing sickness absence effectively, and spotting the early signs of stress
 - Continue with the roll out of the Wellbeing programme – i.e. lunchtime health walks, Bike to Work week, workplace NHS Health checks, reflexology etc.
 - Sign up to the Time to Change initiative which is a pledge to demonstrate the council's commitment to change how it

thinks and acts about mental health in the workplace and make sure that employees who are facing these problems feel supported

- Promote Mental Health Awareness Week (13-19 May 2019) by sharing stories from employees who would like to share their personal experience of mental health
- Support the financial wellbeing of employees through promoting the various support available e.g. debt counselling from EAP, financial tips and advice available on MyRewards, signpost to external sources of free advice e.g. debt charities, citizens advice
- Deliver sessions to help employees build personal resilience (such as coping techniques and mindfulness)
- Monitor and evaluate employee health and wellbeing in the council, including the effectiveness of the council's wellbeing activities and signs of 'presenteesim' and 'leavism' e.g. through post-event surveys and annual wellbeing surveys
- Review the council's Sickness Absence Management Policy and the notification of sickness absence process as well as reviewing related leave policies
- HR Officers to continue to meet regularly with managers to ensure managers are consistently and proactively managing sickness absence
- HR to increase support to managers to ensure they manage employees who are absent with stress by completing stress risk assessments at an earlier stage

- Review the council's Occupational Health Provider and identify a more effective provider in terms of supporting employees to participate in formal procedures which they state are causing them stress. The advice from OH is normally that the best way to resolve the stress is to complete the process but this has been overly delayed especially in 2018/19. A more proactive provider is being sought to improve timescales/outcomes
- Promote the council's new Employee Assistance Programme (EAP), Workplace Wellness, from 1 April 2019. The programme has a number of additional features which will help the council to support employee wellbeing e.g. it provides proactive intervention from the first day of absence where the employee is absent due to stress. The EAP will contact the employee and discuss options, treatments, concerns and barriers to returning to work and provide the manager with recommendations to facilitate a return to work. The EAP also now provides face to face counselling which can support employees experiencing stress.

11. Absence Targets for 2019/20

11.1 A decision was made by HR Committee on 3 October 2018 that the council's short term absence target should be reduced from 4.5 days to 4 days, reducing the overall target from 6.5 days to 6 days. The Long Term target was not changed and remains at 2 days. It was agreed that these changes could take effect from 1 April 2019.