

Report of the Assistant Director - Customers and Employees

Sickness Absence

Summary

1. This report sets the context for the Effective Organisation Overview and Scrutiny Committee review of staff sickness.

Background & Context

2. At a recent Scrutiny Event for Members, members of the Effective Organisation Overview and Scrutiny Committee agreed they wished to carry out a scrutiny review on staff sickness, specifically to:
 - i. identify ways of reducing staff sickness levels by identifying what would make the most impact on those levels;
 - ii. looking at trends in York as well as other authorities and;
 - iii. finding out if external practices would work best for CYC.
3. This idea originated from seeing the Year End Performance Report 2010-11 at their last formal meeting.
4. This report provides the Committee with details of the current situation across CYC Directorates including time lost statistics and the causes of staff sickness within specific Directorates.

Historical Performance

5. The council's levels of sickness absence the past five years were as follows:
 - 2006/07 – 12.93 days per full time equivalent (FTE);
 - 2007/08 - 9.54 days per FTE;
 - 2008/09 – 9.08 days per FTE;

- 2009/10 – 8.98 days per FTE;
 - 2010/11 – 10.48 days per FTE.
6. In comparative terms, in 2006/07, York was the worst performing unitary authority in this area and one of the worst in the country. The 2007/08 and 2008/09 performances both placed the council in the third quartile and 2009/10 second quartile performance was achieved with the improvements being significant both in real and relative terms.

Current Position

7. Annex A shows sickness absence levels across the council and by Directorate for 2010/11 and quarter 1 of 2011/12. Annex A also shows the top five reasons for absence, broken down in the same way across the same period of time.

Previous action

8. Since 2006/07, reducing sickness absence levels has been a key priority for the council with constant monitoring of absence levels in the quarterly and annual performance reports, alongside a strategic review of how the council manages absence and attendance at work, based on detailed diagnostic work of the type and amount of absence, analysed by Directorate and also compared to public and private sector organisations. Across this time regular reports were received by both Members and Officer groups, as follows:

Date	Meeting
7 th March 2006	Personnel Committee
6 th June 2007	Corporate Management Team (CMT)
10 th October 2007	CMT
21 st May 2008	CMT
10 th September 2008	CMT
24 th September 2008	Audit & Governance Committee
7 th October 2008	Executive
5 th October 2010	Executive

9. This work was supported by audits of sickness absence in 2005/06, 2007/08 and 2009/10.
10. The aforementioned work in October 2007 involved a full diagnostic of sickness absence levels and types, comparing across sector as well as with other local authorities. The review found that York's reasons for absence were typical of local authorities, with no distinguishing features other than the overall amount. Given the length of time since that work was undertaken, the Committee might consider it worthwhile for it to be repeated. The Committee should however be aware that such detailed diagnostic work represents a significant piece of work, with the work in 2008 taking 24 days of dedicated officer time. It would therefore be useful if any diagnostic work commissioned was closely defined in order to ensure that the data collection and analysis meets the Committee's requirements.
11. As a direct result of the performance in 2006/07 a strategic review of sickness absence was undertaken. This initially involved a full review of the council's policies and procedures for managing sickness absence. Research was undertaken of best practice in this area and the council's policies were amended accordingly. The council's processes for managing sickness absence are best of breed and contain all of the interventions and processes used by organisations with low levels of sickness absence.
12. Subsequent work focused on maximising attendance at work as well as managing sickness absence when it occurred and on the 1st October 2007 a new Attendance at Work Policy came into effect which provided staff and managers with detailed guidance and support on sickness absence management. This new approach lead to significant improvements in sickness absence rates across the council.
13. In order to support the new strategic approach, long term attendance at work initiative was launched with a view to facilitating attendance at work, involving the following areas of work:

Area of work	Current position
Management training	A specific module on managing attendance was developed and included in the Effective Manager Programme, supplemented by bespoke training to provide managers with the skills to deal with sickness absence casework.

Health and Well-being Promotion Activities	A range of health and well-being promotional activities have taken place designed to maximise the physical, psychological and social health of all employees, focusing areas such as healthy eating, back care, smoking cessation and fitness. For instance the Communities and Neighbourhood Services directorate ran a month of healthy lifestyle and wellbeing promotional activities as part of the Excellence in Everything programme.
Occupational Health Service	Work has taken place with council's contracted occupational health service, York Hospitals NHS Foundation Trust to provide additional services such as flu vaccinations, physiotherapy/ osteopathy, influenza and Hepatitis B jabs, specialist display screen equipment (DSE) and workplace assessments, ergonomics and rehabilitation programmers, amongst others.
Work/life balance	The council's current work/life balance provisions have been reviewed with a view to extending and re-marketing them, thereby making it easier for staff to attend work and to use the correct provisions for unavoidable absence. The revised provisions were piloted as part of the Office of the Future work being undertaken by the Accommodation Project, which has resulted in recommendations being made for amendments to some existing policy provisions and for the development of some new policies. The revised policy provisions were launched in November 2010 and a push is planned to further embed them across the council.

Well-being survey

14. In addition the above work, Effective Organisation Overview and Scrutiny Committee should also be aware that the council carried out an employee Wellbeing Survey throughout May and June 2011. The survey was facilitated by Health'e'Solutions, an external provider, and involved a range of electronic and paper surveys.
15. The findings from the survey were being presented to CMT by Health'e'Solutions in August and the next steps are:

- The information provided by Health'e'Solutions will be used to generate a short summary of the results of the survey to be made available to all staff.
- Further data analysis work will be undertaken, for instance to identify any specific issues from an equalities perspective and alongside the Business Intelligence Unit to benchmark the outcomes.
- The Joint Health & Safety Committee (JHSC) will oversee the production of a council wide action plan to resolve the issues identified, this will be a combination of individual Directorate plans along with an over arching council wide plan. The plans will be produced and presented to CMT for approval by the end of October 2011.
- Health'e'Solutions will run individual feedback and workshops for each Directorate during September 2011.
- The Health & Safety team will work with each Directorate Health & Safety Champion to produce a Directorate action plan that will feed into the over arching council wide plan.
- The council wide action plan will include reviewing existing relevant policies and procedures relating to Workplace Stress to ensure that they are consistent with the action plans developed. As well as promoting existing policies where they exist but aren't been implemented.
- Progress against the action plan will be monitored quarterly by JHSC through out 2011-12 to ensure the milestones identified are achieved.
- A communication strategy will be developed in conjunction with marketing and communications to ensure that members of staff are fully aware of the results both council wide and locally as well as the next steps and the timescales. It is envisaged that the communication channels that will be used will be all user emails; Buzz; Directorate Management Channels, Newsletters and local meetings.

Future Developments

16. The work undertaken on this subject previously highlighted that one key factor in the effective management of sickness absence is the provision of good quality, real time management information, which allows early interventions. At present this is not possible due to the

constraints of the current HR/payroll system and although HR do provide management information to directorates on a regular basis, it is not in real time.

17. As the Committee may know, the council is in the process of replacing the current HR/Payroll system (Delphi) with a new system (iTrent). The new system is scheduled to be in place by the end of the financial year and, amongst other things, will allow manager self-service. This means that managers will input their teams' sickness directly in to the system as it occurs, meaning that the system will be operating in real time. A suite of reports will also be available to managers to interrogate their teams' sickness absence themselves, rather than having to request a report from the HR team. Both of these developments are expected to have a positive impact of sickness absence levels as they will allow managers to identify issues earlier than at present and take timely action to address any emerging issues.

Benefits

18. The benefits of reducing sickness absence levels are:
 - increased productivity;
 - reduced costs where cover is required;
 - increased wellbeing of the wider workforce;
 - increased motivation amongst the workforce if they see absenteeism being tackled.
19. In addition to the above, 80% of staff live in the council's area so a more healthy workforce also brings wider benefits to the wellbeing of the council's population and the City.

Conclusions

20. The council's performance in this area has improved over the past five years, although there is clearly still scope for additional improvement. It was disappointing that performance declined in 2010/11 however that may be a reflection of the size and scale of organisational change underway.
21. It is undeniable that the causes of sickness absence are complex and multifaceted, often reflecting the culture and context of the organisation. There is no single solution to the council's performance in this area and Effective Organisation Overview and

Scrutiny Committee are advised to be cognisant of the work already undertaken when scrutinising this matter.

Contact Details

Author:

Chris Tissiman
Head of Strategic
Workforce Planning &
Resourcing
Human Resources
Ext 1715

Chief Officer Responsible for the report:

Pauline Stuchfield
Assistant Director - Customers and
Employees

Report **Date** 4th September
Approved 2011

Ian Floyd
Director - CBSS

Report **Date** 4th September
Approved 2011

Specialist Implications Officer(s):

Wards Affected: *List wards or tick box to indicate all* **All**

For further information please contact the author of the report

Background Papers: See main body of report

Annexes

Annex A - Sickness absence levels and reasons – 2010/11 and Q1 2011/12