WEST DUNBARTONSHIRE COUNCIL

Report by Strategic Lead – People and Technology

Corporate Services Committee: 22 May 2019

Subject: Employee Wellbeing: Attendance Management Corporate Services Annual Update 2018-2019

1. Purpose

1.1 The purpose of this report is to provide Committee with detailed analysis on employee wellbeing and annual attendance performance for 2018/19 for the Strategic Lead areas covered by Corporate Service Committee and an annual update on Council wide attendance performance for 2018/19.

2. Recommendations

- 2.1 It is recommended that Committee notes the below annual findings for reported absence in 2018/19:
 - The increase in annual sickness absence of 462.19 FTE days lost compared to the previous year for the Strategic Lead areas covered by Corporate Services Committee.
 - The increase in Council wide annual sickness absence of 2932.45 FTE days lost compared to the previous year.

3. Background

3.1 The Council is committed to supporting the health and wellbeing of all employees. This is driven by our Employee Wellbeing Strategy and supported by initiatives and projects delivered through the Employee Wellbeing Group. The aim of this work is to improve employee morale and engagement, promote a healthier and more inclusive culture and lower sickness absence rates.

4. Main Issues

Annual (2018/2019) Service Performance

- 4.1 In 2018/19, a total of 4231.22 days were lost due to sickness absence across the services covered by this report. This represents an increase of 462.19 FTE days lost compared to 2017/18.
- **4.1.1** Table 2 details benchmarking information to enable comparison to the previous year, the service's best performance in the last 3 years is stated as is the CIPD (Chartered Institute of Personnel and Development) benchmark for

the public sector. The FTE figure is shown to provide context to the scale of the service in terms of employees.

4.1.2 The table shows that all of the services considered in this report have lower levels of absences than the Council average. It is encouraging to note that 2 of the services listed, People & Technology and Regulatory have recorded their lowest level of absence in the last 3 years. Additionally, these 2 services reported levels of absence significantly lower than the CIPD benchmark for public sector.

Table 2 – Benchmarking Information

Strategic Lead Area	FTE as at 31st March 2019	Annual 2017/18	Annual 2018/19	Service- Best Annual Performance	Public Sector Benchmark 2018/19*
Council Wide	4525.34	10.67	11.52	10.47 (2016/17)	
Communications, Culture & Communities	124.62	5.29	9.56	4.70 (2016/17)	8.4
People & Technology	91.65	5.16	3.38	3.38 (2018/19)	
Regulatory	87.75	3.75	3.02	3.02 (2018/19)	
Resources	259.17	7.66	9.51	7.66 (2017/18)	

^{*}Source 2019 CIPD Health and Wellbeing at Work report

- 4.1.3 Table 3 details the variance in reported sickness absence levels between 2017/18 and 2018/19. Again it is positive to note that both People & Technology and Regulatory have reported significant decreases in sickness absence levels, whilst Resources and Communications, Culture and Communities have reported increases. However, Table 2 (above) does highlight that the services covered by this report have a relatively small head count and so any variance expressed as a percentage will appear more significant. To provide further context the variance is also expressed in total FTE days lost.
- **4.1.4** The increase in Resources can attributed to significantly higher levels of sickness absence occurring from October 2018 through to March 2019 as illustrated in Table 1, whilst the increase in Communications, Culture & Communities can largely be attributed to a small number of long term cases.

Table 3 – Variance in days lost due to sickness absence

Strategic Lead Area	Total FTE days lost 17/18	Total FTE days lost 18/19	Variance in 17/18 vs 18/19 (%)*	Variance 17/18 vs 18/19 (total FTE days lost)
Council Wide	49199.61	52132.06	5.63%	2932.45
Communications, Culture & Communities	799.24	1191	32.89%	391.76
People & Technology	508.39	310.2	-63.89%	-198.19
Regulatory	356.8	264.93	-34.68%	-91.87
Resources	2104.6	2465.09	14.62%	360.49

^{*}This is calculated based on the variance of actual FTE days lost and not the variance in average FTE days lost per FTE employee as shown in the Headline figure in Appendix 1.

4.2 Absence Reasons – Service Performance

- **4.2.1** Appendix 1 provides a detailed breakdown of the reasons for absence Council Wide.
- 4.2.2 Table 4 below shows the top 3 reasons for absence in 2018/19 for the areas covered by this report and compares these to the Council Wide results for the same period. The top 3 reasons for absence Council wide are not reflected in the services below. Whilst acute medical conditions and minor illness do feature, they do not appear in all of the services or in the same ranking. Minor illness is featured in each of the service's top 3 reasons but they experience a lower incidence of this than the Council overall. Acute medical conditions also features in each service's top 3 reasons and all services report a higher incidence than the Council overall. Personal stress is featured in 3 of the services detailed below to varying degrees.
- **4.2.3** To support employees experiencing stress or mental health challenges, the Employee Wellbeing Group has had a particular focus on mental health and promoting the services that are available. Further details of this are provided in section 4.4 of this report. Work will continue in this area to establish what additional supports may be beneficial to staff and assist them in maintaining their health and wellbeing.

Table 4 – Reasons analysis – Service performances

	1		2		3	
	Reason	%	Reason	%	Reason	%
Council Wide	Minor Illness	21.89	Acute Medical Conditions	17.79	Musculo Skeletal Injuries	15.51
Communications, Culture & Communities	Stress - Work Related	17.25	Minor Illness	16.86	Mental Health	16.12
People & Technology	Stress - Personal	41.6	Acute Medical Conditions	33.33	Minor Illness	24.78
Regulatory	Acute Medical Conditions	27.26	Stress - Personal	21.19	Minor Illness	20.19
Resources	Acute Medical Conditions	28.96	Minor Illness	22.56	Stress Personal	12.05

4.3 Absence Duration – Service Performance

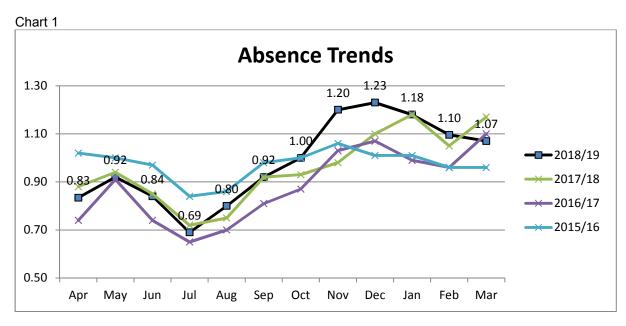
- 4.3.1 Table 5 shows the duration profile for the services covered by this report and compares to the overall Council-wide duration profile. Long term absence accounts for approximately 73.21% of Council-wide absence for 2018/19, which is a small increase compared to the same period in the previous year. People and Technology, Regulatory and Resources all report that the percentage of total absence attributed to long term cases is lower than the Council overall. Communications, Culture & Communities report a higher proportion of their absence as long term when compared to the Council wide figure.
- **4.3.2** It should also be noted that as these services have relatively low levels of sickness, the proportion of short/long term absence may only be attributable to a small number of cases.

Table 5 – Duration analysis – Service performances

	Annual 2	2017/18	Annual 2018/19		
	Short Term (% of total absence)	Long Term (% of total absence)	Short Term (% of total absence)	Long Term (% of total absence)	
Council Wide	28.74%	71.26%	26.79%	73.21%	
Communications, Culture & Communities	50.05%	49.95%	23.52%	76.48%	
People & Technology	34.35%	65.65%	32.33%	67.67%	
Regulatory	33.26%	66.74%	45.53%	54.47%	
Resources	31.60%	68.40%	32.52%	67.48%	

4.4 Annual 2018/19 Council-wide Performance

4.4.1 Chart 1 below shows the Council's absence trend for the year compared with the previous 3 years. In 2018/19 absence levels increased by approx. 8% compared to 2017/18. This can be attributed to the significantly higher levels of absence due to minor illness reported during November/December 2018. With the exception of November and December 2018, the absence trend in 2018/19 has largely followed the same pattern as in previous years with peaks in May followed by a reduction in absence levels in June and July and a gradual increase through the autumn and winter months. To date 2016/17 reported the lowest levels of absence Council wide.



4.4.2 Table 6 (below) shows year end absence levels, by Strategic Lead Area, 2018/19, and associated year-end figures for 2017/2018 to allow comparison. Please note that the year-end Annual FTE days lost per FTE employee which is reported for each Strategic Lead Area is based on where employees were located as at 31 March 2019.

Table 6

2018/19 – Actual FTE days lost per FTE employee

empioyee		2017/18
Service	2018/19Total	7017/18 Total
Child Healthcare & Criminal Justice	15.55	15.22
	24.24	10.60
Community Health & Care	21,24	18.68
Finance and Resources	0.00	0.00
Mental Health, Addiction & Learning Disabilities	14.71	16.14
Strategy, Planning & Health Improvement	6.48	2.54
Health & Social Care Partnership	18.88	17.26
Environment &	40.00	44.70
Neighbourhood	10.38	11.76
Housing & Employability	10.31	10.04
Regeneration	13.72	10.23
Regeneration, Environment & Growth	11.43	10.94
Communications, Culture & Communities	9.56	5.29
Education Learning & Attainment (Support Staff)	9.97	9.65
People & Technology	3.38	5.16
Regulatory	3.02	3.75
Resources	9.51	7.66
Transformation & Public	_	
Service Reform (excl.	8.86	7.90
Teachers) TOTAL		
Local Government Employee Total	12.77	11.83
Transformation & Public Service Reform (Teachers)	6.24	5.70
COUNCIL-WIDE TOTAL	11.52	10.67

4.5 Employee Wellbeing Group

4.5.1 The Employee Wellbeing Group continues to make progress through wellbeing initiatives, employee support mechanisms and joint working with trade unions and local partners to identify and address areas for improvement. Updates on progress are reported to Change Board on a monthly basis. A summary of some of the actions which have been completed since the last report to this Committee in November 2018, or which are currently being progressed, include the following:

- Various promotions including alcohol awareness, mental health, national no smoking day and discounted leisure membership.
- The new Disability Passport guidance was launched and is now available on the intranet. This guidance complements the existing policies and supports that are already in place and it is intended to help managers feel more confident in supporting employees with disabilities throughout the employment cycle.
- A review of the attendance management policy has been undertaken; focus groups have been held with management and Trade Union representatives and the updated policy is now being finalised.
- The 12 month pilot Headtorch Programme continues; senior leadership and HR & OD have completed the training with being rolled out to 2 further areas in the summer period, additionally a session will also be delivered to Trade Union colleagues in April. A full evaluation of the programme will be completed.
- A joint communication was developed with the Trade Unions which
 promotes the wide range of supports that are currently available; this was
 shared with Trade Union colleagues and managers. Trade Union
 colleagues have also been asked to share this with their members.
- An event was held in Church St to promote Time to Talk day, the
 Chaplaincy attended and were on hand to speak to any employees who
 wished to access the service. The event encouraged people to take a
 break and talk about their mental health with colleagues and friends to
 help break the stigma. A presentation was also ran on the Atrium screen
 in Church St promoting the support services and employee benefits
 available to all staff throughout the day.
- As part of the above event, the Council's partnership with Access to Work's Mental Health service was also launched. This service is designed to complement existing support services and enables employees and their family members to access support for up to 9 months via a dedicated worker to will support them to develop a care plan and provided dedicated mental health support. Further information is available on the Employee Wellbeing Intranet pages which have been updated to reflect the new service.
- An exercise to review the platform used to host the Employee Wellbeing Intranet pages has also started and as part of this an alternative platform for the pages is being considered. Moodle, which is the new platform for I-Learn, is being considered as this would allow for online resources to be more accessible to those who have a mobile devise either as part of their role or at home. As such the details of all supports available to staff would be opened up to a wider audience.
- A review of the Carer's group is also being undertaken as part of the EWG remit and based on feedback from those who attend and the Carer's Network, this support service will become a signposting service to enable employees to access more specialist support as required. The EWG intranet pages are currently being updated to reflect this and the Carer's Network will continue to work in partnership with the group to support employees.

A number of employees have been trained to be Mental Health First
Aiders through training provided by our Trade Union colleagues, a
promotion of who these people are is now being planned to ensure that
employees are aware of who they can approach for assistance in their
service.

5. People Implications

5.1 Effective and robust management of absence can have a positive impact upon employees, promoting early return to good health and work. The results for 2018/2019 indicate that several of the services covered by this report have improved since the previous year and all services continue to out perform the Council overall. However, when the reasons for absence are considered the results suggest that there may be further support required to assist employees to maintain their mental health and wellbeing.

6. Financial and Procurement Implications

6.1 Based on the estimated cost of a day's absence of £124, table 6 provides the estimated cost of absence across the Council and the Strategic Lead area. This does not include any associated costs such as cover or overtime.

Table	6 –	Cost	Ωf	absence
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Strategic Lead Area	2018/19 Cost (approx.)		
Council	£6,464,375		
Communications, Culture & Communities	£147,684		
People & Technology	£38,465		
Regulatory	£32,851		
Resources	£305,671		

6.2 There are no procurement implications.

7. Risk Analysis

- **7.1** There is a risk that managers do not fulfil their role and comply with the policy and in turn Council-wide absence continues to increase.
- **7.2** While it is evident in many instances that the necessary and proactive steps are being undertaken, such as early referral to occupational health, there is still a significant amount of work to do to continue to reduce absence.
- **7.3** Without maintaining and continuing to improve attendance there continues to be a risk of detrimental impact on service delivery, loss of productivity and reduced team performance.

8. Equalities Impact Assessment (EIA)

8.1 This report is for noting only, therefore no EIA is required. Any associated policies are subject to Equalities Impact Screening and Assessment if required.

9. Consultation

9.1 Consultation is on-going with trades unions in the main through the Wellbeing Group, the local Joint Consultative Committees, Employee Liaison Group and, for more strategic matters, through Joint Consultative Forum.

10. Strategic Assessment

10.1 Effective attendance management will support the Council's aim to make best use of both financial and human resources resulting in a positive impact upon service provision.

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Date: 11 April 2019

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Appendices: Appendix 1 Council Wide Annual 2018/19 Absence

Summary

Background Papers: None

Wards Affected: None