

**WEST DUNBARTONSHIRE COUNCIL****Report by Strategic Lead – People and Technology****Corporate Services Committee: 13 November 2019**

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**Subject: Employee Wellbeing: Attendance Management  
Corporate Services Bi-Annual Update (April – September 2019)****1. Purpose**

- 1.1** The purpose of this report is to provide Committee with detailed analysis on employee wellbeing and attendance from 1st April – 30<sup>th</sup> September 2019 for the Strategic Lead areas covered by Corporate Service Committee and a bi-annual update on Council wide attendance for the same period.

**2. Recommendations**

- 2.1** It is recommended that Committee notes the findings, namely:

- The increase of 493.62 full time equivalent (FTE) days lost (approx. 20.5%) in service areas covered by this report compared to the same period last year as outlined in Appendices 3-5;
- The increase in Council wide sickness absence of 3471.84 FTE days lost (approx. 13.6%) compared to the same period last year as outlined in Appendices 1 and 2; and
- A number of services were restructured in quarter 1 2019 and so any historical comparisons should be considered as indicative and not an absolute figure. Further information regarding the services impacted is available in section 4.1 of this report.

**3. Background**

- 3.1** The Council is committed to supporting the health and wellbeing of all employees. This is driven by the 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

### April – September 2019

**4.1** From 1<sup>st</sup> April to 30<sup>th</sup> September 2019, a total of 2406.07 days were lost due to sickness absence across the services covered by this report. This represents an increase of 493.62 FTE days lost compared to the same period in 2018/19. However, it should be noted that there were significant changes to the FTE figures in Communication, Culture, Communities and Facilities (CCCF) and Resources during the period. At the start of quarter 2 2019/20, Resources had approximately 20 FTE removed from its establishment and this service began reporting separately as Procurement. CCCF had approximately 310 FTE added to their establishment as a result of Facilities Management transferring from the Environment and Neighbourhood Strategic Lead area.

**4.1.2** Table 1 details benchmarking information to enable comparison to the previous year, the service's best performance in the last 3 years as well as the CIPD (Chartered Institute of Personnel and Development) benchmark for the public sector. The FTE figure is shown to provide context of the service size.

**4.1.3** 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 4 of the services covered by this report have a strong probability of reporting annual absence levels that are lower than the CIPD benchmark. People and Technology and Regulatory may also be in a position to report annual absence levels in line with 2018/19 which was their best performing year.

Table 1 – Benchmarking Information

Strategic Lead Area	FTE as at 30 Sept 2018	Average FTE days lost per FTE employee - April – Sept 2018/19	FTE as at 30 Sept 2019	Average FTE days lost per FTE employee April – Sept 2019/20	Service Best Annual Performance	Public Sector Benchmark 2018/19*
Council Wide	4643.15	4.78	4784.47	5.37	10.47 (2016/17)	8.4
People & Technology	95.29	1.48	93.07	0.62	3.38 (2018/19)	
Regulatory	92.05	1.99	96.72	0.55	3.02 (2018/19)	
Resources	269.97	3.69	226.81**	5.60	7.66 (2017/18)	
CCCF	131.88	4.43	432.36***	4.76	4.7 (2016/17)	
Procurement	NA	NA	20.53	0.43****	NA	

\*Source 2019 CIPD Health and Wellbeing at Work report

\*\* FTE attributed to Procurement was included in Q1 FTE but is now reported separately

\*\*\* Increase in FTE is attributed to Facilities Management joining this Strategic Lead area in

\*\*\*\*Q2 data only, Q1 data was reported as part of Resources Strategic Lead area

**4.1.4** Table 2 details the variance in reported sickness absence levels between April – September 2019 and April – September 2018. Again it is positive to note that both People & Technology and Regulatory have reported significant decreases in sickness absence levels, whilst Resources and CCCF have reported increases. However, CCCF had a significant number of employees added to the establishment and this is a contributing factor to the increase in sickness absence.

**4.1.5** Resources has reported the most significant increase in sickness absence in terms of total FTE days lost and this can be attributed to the majority of absence cases being long term, resulting from underlying health conditions and being managed accordingly.

Table 2 – Variance in days lost due to sickness absence

Strategic Lead Area	Total FTE days April - Sept 18/19	Total FTE days lost April - Sept 19/20	Variance in April - Sept 18/19 vs April - Sept 19/20 (%)*	Variance April - Sept 18/19 vs April - Sept 19/20 (total FTE days lost)
Council Wide	22127.23	25599.07	13.56%	3471.84
People & Technology	141.35	99.87	-41.53%	-41.48
Regulatory	180.38	95.41	-89.06%	-84.97
Resources	1004.35	1334.23	24.72%	329.88
CCCF	586.37	876.56	33.11%	290.19
Resources (Procurement)	NA	8.73*	NA	NA

\*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 and 2 provide a detailed breakdown of the reasons for absence Council Wide.

**4.2.2** Table 3 below shows the top 3 reasons for absence from April – September 2019 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 entirely reflected in the services covered by this report. Minor illness and acute medical conditions do feature in several of the services top 3 reasons but the order they appear and the percentage of total absence attributed to them varies greatly. It should also be noted that the headcount of these services vary significantly and so whilst services such People and Technology appear to report relatively high levels of minor illness, Appendix 3, 4 and 5 demonstrate that the actual level of absence is low. This is also the case for Procurement, the level of absence attributed to Mental Health is low and is linked to a long term absence but when expressed as a percentage it can appear relatively high.

**4.2.3** The percentage of absence attributed to minor illness and acute medical conditions is unsurprising given that these absence categories have been

established in the top 3 reasons for absence Council wide for some time. Absence attributed to acute medical conditions can often be caused by underlying health conditions and as such can be challenging to reduce. Strategic HR, management, Trade Unions and Occupational Health work closely together to ensure that reasonable adjustments are made whenever possible in order to assist employees in remaining at work or returning to work following an absence.

**4.2.4** The level of sickness absence attributed to mental health and personal stress is a concern and as such the Employee Wellbeing Group continues to have a particular focus on mental health and wellbeing. Key activities include, but are not limited to, regular promotion of the support services available. Further details of the work of the Employee Wellbeing Group 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 3 – Reasons analysis – Service performances

	1		2		3	
	Reason	%	Reason	%	Reason	%
Council Wide	Minor Illness	21.4%	Acute Medical Conditions	21.1%	Personal Stress	15.5%
People & Technology	Minor Illness	43%	Mental Health	24%	Non work related accident/injury	17%
Regulatory	Minor Illness	51%	Musculo - skeletal injuries	40%	Acute Medical Conditions	9%
Resources	Acute Medical Conditions	25%	Musculo - skeletal injuries	18%	Minor Illness	17%
CCCF	Minor Illness	28%	Personal Stress	22%	Acute Medical Conditions	20%
Procurement	Mental Health	96%	Minor Illness	4%	NA	0%

### **4.3** Absence Duration – Service Performance

**4.3.1** Table 4 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 78% of Council-wide absence from April – September 2019, which is an increase compared to the same period in the previous year. With the exception of Resources and Procurement, all services covered by this report show that the percentage of total absence attributed to long term cases is lower than 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.

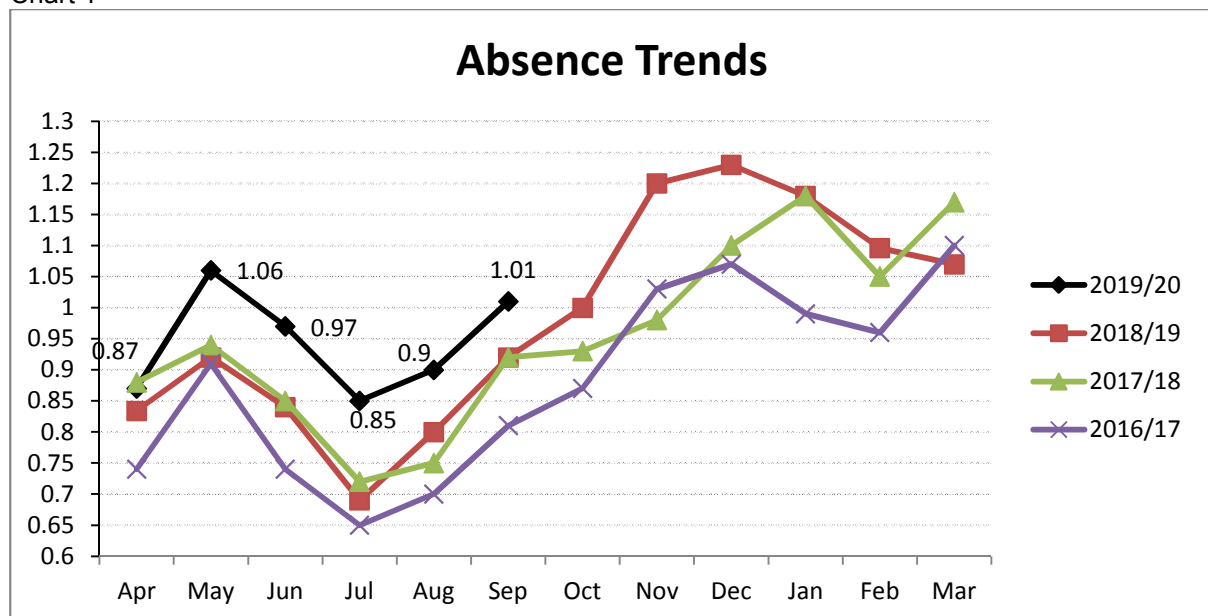
Table 4 – Duration analysis – Service performances

	April - Sept 18/19		April - Sept 19/20	
	Short Term (% of total absence)	Long Term (% of total absence)	Short Term (% of total absence)	Long Term (% of total absence)
Council Wide	30%	70%	22%	78%
People & Technology	25%	75%	42%	58%
Regulatory	43%	57%	30%	70%
Resources	41%	59%	20%	80%
CCCF	27%	73%	27%	73%
Procurement	NA	NA	4%	96%

**4.4 April – September 2019 Council-wide Performance**

**4.4.1** Chart 1 below shows that, in quarters 1 and 2, the Council’s absence performance deteriorated by approx. 11% compared to the same period in the previous year. Based on historic performance it is likely that absence levels will continue to increase during quarter 3 and potentially decrease again in quarter 4. However, given the higher levels of absence in the first half of 2019/20, it is likely that the total absence levels for 2019/20 will be higher than in previous years.

Chart 1



**4.4.2** Table 5 (below) shows absence levels for quarters 1 and 2 (2019/20), by Strategic Lead Area, and associated bi-annual figures for 2018/2019 to allow comparison. Please note that the FTE days lost per FTE employee which is

reported for each Strategic Lead Area is based on where employees were located as at 30 September 2019.

**4.4.3** It should be noted that a restructure took place in quarter 1 2019 and as such a number of services either moved to another Strategic Lead area or are now reported as a stand alone service. As such any historical comparisons in relation to these services should only be considered as an indication.

Table 5 – Total FTE days lost April – Sept 2019 and levels of Variance

Strategic Lead Area	Total FTE days April - Sept 18/19	Total FTE days lost April - Sept 19/20	Variance in April - Sept 18/19 vs April - Sept 19/20 (%)*	Variance April - Sept 18/19 vs April - Sept 19/20 (total FTE days lost)
Council Wide	22127.23	25599.07	13.56%	3471.84
People & Technology	141.35	99.87	-41.53%	-41.48
Regulatory	180.38	95.41	-89.06%	-84.97
Resources	1004.35	1334.23	24.72%	329.88
Chief Exec Office Total	NA	785.91*	NA	NA
Child Healthcare & Criminal Justice	1797.83	1789.36	-0.47%	-8.47
Community Health & Care	6824.65	8831.06	22.72%	2006.41
Finance & Resources	0	0	0.00%	0
Mental Health, Addiction & Learning Disabilities	928.03	895.86	-3.59%	-32.17
Strategy, Planning & Health Improvement	28.23	184.11	84.67%	155.88
HSCP Total	9599.29	11700.39	17.96%	2101.1
Environment & Neighbourhood	3202.58	2873.04	-11.47%	-329.5441216
Housing & Employability	1027.82	1144.49	10.19%	116.6715385
Regeneration	2204.91	2782.07	20.75%	577.16
Roads & Transportation	NA	221.87**	NA	NA
Regeneration, Environment & Growth Total	6435.31	7021.47	8.35%	586.16
Strategic Management	0	6.94	100.00%	6.937857143
Strategic Management Total	0	6.94	100.00%	6.937857143
CCCF	586.37	876.56	33.11%	290.185
Education Learning & Attainment (Support Staff)	2311.11	2658.85	13.08%	347.737168
Resources (Pro)	NA	8.73***	NA	NA
Transformation & Public Service Reform (Excl. Teachers)	4223.56	4287.73	1.50%	64.17
Local Government Employees Total	20258.16	23892.2	15.21%	3634.04
Transformation & Public Service Reform (Teachers)	1869.08	1706.81	-9.51%	-162.27

## 4.5 Employee Wellbeing Group

**4.5.1** The Employee Wellbeing Group continues to make progress through wellbeing initiatives, employee support mechanisms and working with trade unions and local partners to identify and address areas for improvement. Updates on progress are reported to Performance and Monitoring Group on a monthly basis. Actions completed since the last report to this Committee in May 2019, or which are currently being progressed, include the following:

- Regular meetings for both the Managers' group for Employee Wellbeing and the Wellbeing Advocates group have been established and taking place quarterly . These groups look ahead to the Employee Wellbeing theme for the next quarter and work together to identify appropriate actions in support of same.
- Throughout quarters 1 and 2, activities took place including an Employee Wellbeing Information Event where providers displayed stalls, employees had an opportunity to participate in health checks and learn more about the Employee Supports available. This was well attended and a follow up event is planned for the Senior Management Network.
- Digital skills were an area highlighted by Wellbeing Advocates and the Wellbeing Managers' group as a source of anxiety for some employees. In order to ensure that employees feel supported to develop these skills and thereby reduce any related anxiety, a range of communications were shared highlighting the learning and development opportunities available including Microsoft Outlook and Excel training.
- A new Menopause guidance document has been launched to support employees and managers which was followed up with training intended to raise awareness about the impact of the menopause. This was delivered in conjunction with the Trade Union Learning Fund.
- The Disability Passport Guidance was launched; this replaces the Tailored Adjustment guidance and provides employees and managers with guidance regarding supporting employees who have a disability.
- A range of promotional communications highlighting the importance of physical activity including walks in Levensgrove Park, the Cycle to Work scheme and a summer walking challenge.
- West Dunbartonshire Leisure Trust continue their regular visits to Council premises to promote their discounted membership deals for employees and carry out health checks.
- The pilot project with Headtorch has continued with selected groups of employees and managers receiving training on mental health awareness.
- The Council's submission for Healthy Working Lives Award was successful and the Gold standard award has been maintained.
- A number of communications were shared during Suicide Prevention week and on Mental Health day to highlight the support available to employees in relation to mental health. This included additional resources that have been added to the Employee Wellbeing Intranet pages for advice on mental health and financial wellbeing.



- Training sessions designed to raise awareness of mental health were delivered in conjunction with the Trade Union Learning Fund and it is our intention to ask these employees to become Wellbeing Advocates
- Further developments have taken place to enhance the functionality of HR21; this marked the start of a programme of work to automate the administration of sickness absence reporting for managers where possible. This work will continue into quarter 3 and 4.
- A review of the current Attendance Management policy has now been concluded with Trade Union colleagues. It was agreed that the new policy sees a change in focus with more emphasis on support and developing a different tone in dealing with absence. A communication plan to support the roll out is currently being developed.
- Following a review, HR data used to inform workforce planning and supporting managers with attendance management is now being used to better effect.
- The Council was awarded the Gold Award for the support provided to Reservists and their family.
- Following a tendering exercise, a new provider was secured for the provision of the Employee Counselling Service. The change in provider, now the same as the OH provision, took effect in September and a range of communications were shared with employees and management to inform them of the change.

## 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 April – September 2019 indicate a deterioration for the areas covered by this Committee. However, levels remain below the Council average. The services are engaged with the Employee Wellbeing Group and are committed to supporting employee wellbeing through the implementation of actions developed through the group.

## 6. Financial and Procurement Implications

- 6.1** Based on the average cost of a day (£138), table 6 provides the estimated productivity loss associated with absence across the Council and the Strategic Lead areas. This does not include any associated costs such as cover or overtime.

Table 6 – Cost of absence

<b>Strategic Lead Area</b>	<b>April - September 19/20 Approx. loss of productivity</b>
Council Wide	£3,053,558
People & Technology	£19,506
Regulatory	£24,892
Resources	£138,600
CCCF	£120,965
Resources (Procurement)	£1,725

6.3 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, Convenor meetings and, for more strategic matters, through the 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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**Appendices:** Appendix 1 Council Wide Q1 2019/20 Absence Summary  
Appendix 2 Council Wide Q2 2019/20 Absence Summary

- Appendix 3 Transformation & Public Service Reform Q1  
2019/20 Absence Summary
- Appendix 4 Chief Executive Officer Q2 2019/20  
Absence Summary
- Appendix 5 Transformation & Public Service Reform Q2  
2019/20 Absence Summary

**Background Papers:** None

**Wards Affected:** None