

**To:** Joint Consultative Board: Non-Teaching

**On:** 25 October 2017

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**Report by:** Tinu Olowe, Interim Head of HR

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**Heading:** Absence Statistics – 2017/18 Quarter 1

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**1. Summary**

- 1.1 The purpose of this report is to advise the Audit, Risk and Scrutiny Board of the absence statistics for the period 1 April 2017 to 30 June 2017. The report details the absence statistics by service and by category of staff.
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**2. Recommendations**

- 2.1 It is recommended that the Board notes the content of this report and that this report reflects the annual absence statistics for the period 1 April 2016 to 31 March 2017.

**4. Absence Statistics - Quarter Ending 30th June 2017**

- 4.1 Service and Council overall absence performance for the quarters are detailed in the table below. In line with the reporting requirements for Scottish Councils, absence is expressed as a number of work days lost per full time equivalent (FTE) employee.

Service/Area	Quarter Ending September 2015	Quarter Ending December 2015	Quarter Ending 23 March 2016	Quarter Ending June 2016	Quarter Ending September 2016	Quarter Ending December 2016	Quarter Ending March 2017	Quarter Ending June 2017
Chief Executive's Services	1.70	0.67	0.77	1.17	1.82	1.72	3.41	1.78
Education and Leisure Services	1.04	0	0	0	0	0	0	0
Children's Services	0	2.20	2.50	1.85	1.16	2.29	2.17	2.07
Community Resources	2.26	2.88	2.79	2.96	2.49	3.75	3.34	3.67
Finance and Resources	2.25	2.69	2.73	2.02	2.29	2.59	2.37	2.29
Development and Housing Services	1.26	1.73	1.93	1.79	2.78	1.75	2.18	1.73
Health and Social Care Partnership	0	4.15	3.68	4.29	3.95	5.03	3.65	2.36
Social Work Services	3.48	0	0	0	0	0	0	0
<b>Council Overall</b>	<b>1.96</b>	<b>2.64</b>	<b>2.70</b>	<b>2.46</b>	<b>2.12</b>	<b>2.93</b>	<b>2.68</b>	<b>2.54</b>
<b>Council Overall targets</b>	<b>1.79</b>	<b>2.69</b>	<b>2.69</b>	<b>1.79</b>	<b>1.79</b>	<b>2.69</b>	<b>2.69</b>	<b>1.79</b>

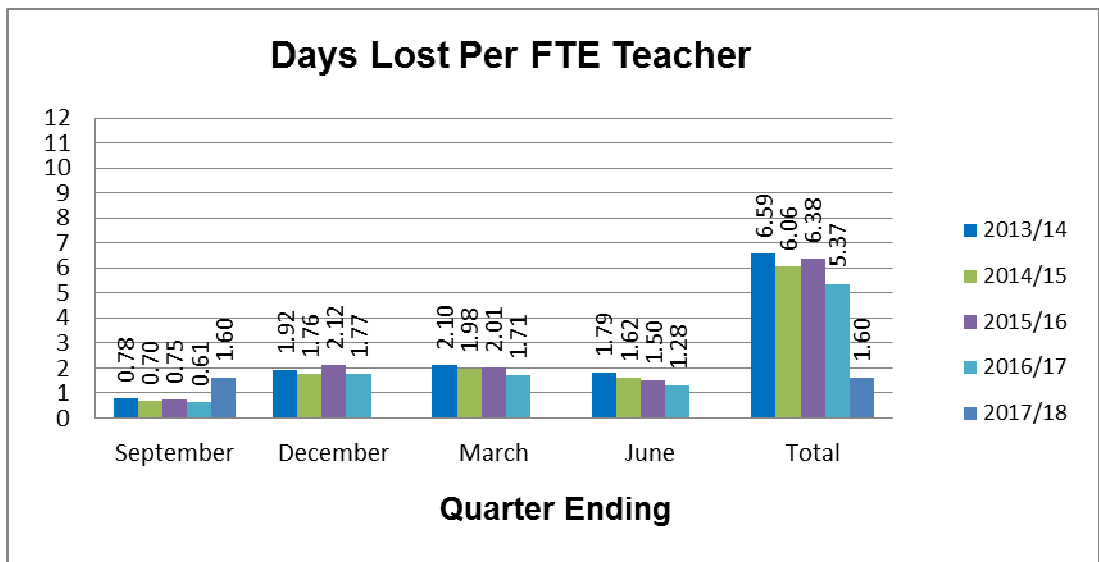
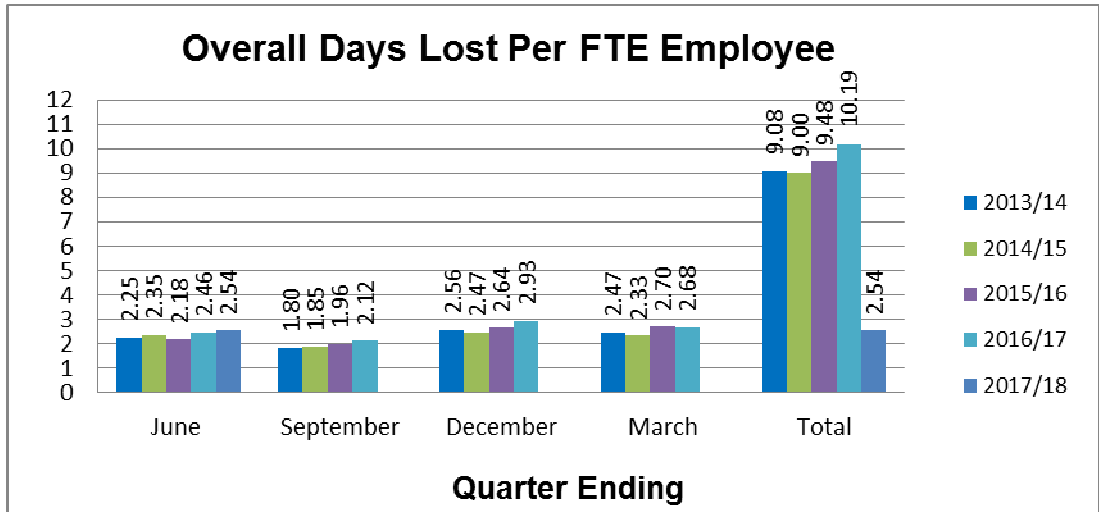
\* Education and Leisure/ Social work services no longer exist, they are now within Children's Services and The Health and Social Care Partnership.

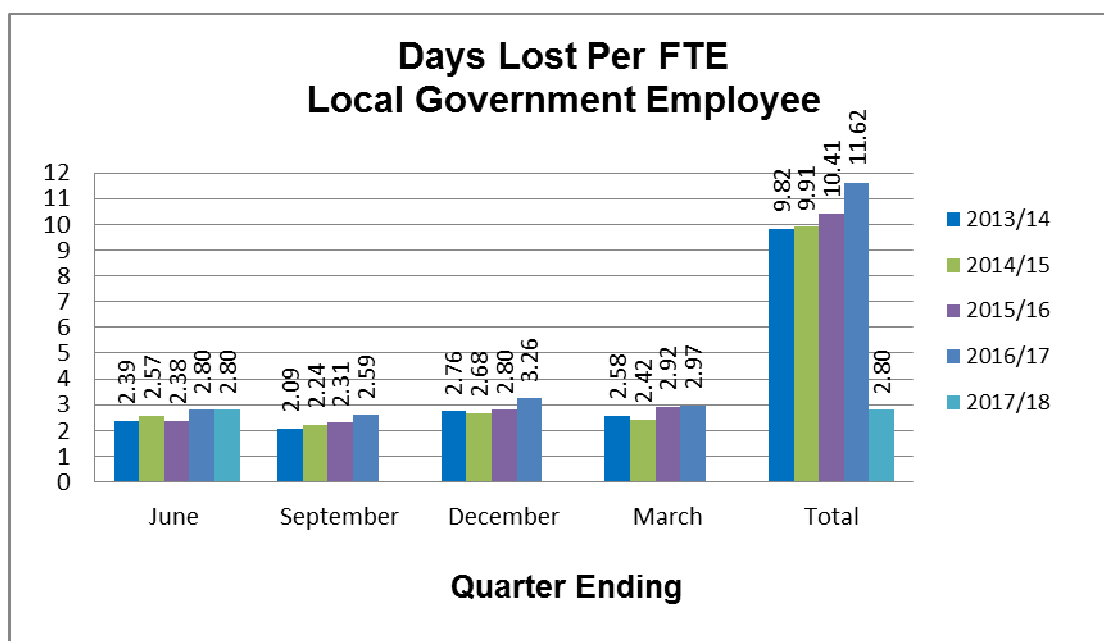
## 5. Analysis and Trends - Quarters Ending 30th September 2015 to 30 June 2017

5.1 The number of days lost per FTE employee due to absence is as follows:-

Quarter ended	Days lost per FTE	Quarter ended	Days lost per FTE	Variance
September 2015	1.96	September 2016	2.12	+0.16
December 2015	2.64	December 2016	2.93	+0.29
March 2016	2.70	March 2017	2.68	- 0.02
June 2016	2.46	June 2017	2.54	+0.08

5.2 The following tables detail the percentage absence levels by employee category for the quarter ending 30<sup>th</sup> June 2017 namely: overall, teachers and local government employees.





## 6. Absence Targets Analysis: Quarter 1, ending 30 June 2017.

- 6.1 **Appendix A** details the absence performance of services, the Council overall and employee groups against the set absence targets for quarter ending 30th June 2017.
- 6.2 The Council has recorded an overall absence rate of 2.54 days lost per FTE employee, which is 0.75 days **above** the target figure of 1.79 days.

In addition the Teacher absence level of 1.60 days lost per FTE employee is 0.06 days above the target of 1.54 days.

The absence performance of Local Government employees at 2.80 days lost per FTE employee is 0.88 days **above** the target of 1.92 days.

## 7. Reasons for Absence overview

- 7.1 The illness categories with the highest level of absence, compared to the same quarter in the previous year are as follows:

Quarter Ending	Illness categories
June 2016	Musculoskeletal and Joint Disorders – 26.3%. Psychological (non work related) – 23.6%,
June 2017	Psychological (non work related) – 24.7%, Musculoskeletal and Joint Disorders – 23.6%.

- 7.2 To address Psychological (non work related) absences the Council continue to provide a range of support services that employees can be referred to at an

early stage for assistance. There are also Council policies, guidance and training to assist managers and employees that are specific to stress related issues.

The current Mental Health and Well-being in the Workplace policy is under review and, where appropriate, will reflect the outcomes within the Scottish Government's Mental Health Strategy 2017 -2027.

HR and OD are currently exploring the option to deliver the mental health first aid course to services across the council. This will equip the officers with the skills to identify the early stages of an employee who may be suffering from mental health issues and also provide them with support mechanisms in the workplace.

- 7.3 In relation to addressing musculoskeletal and joint disorders the Council offers a physiotherapy service through the Council's Occupational Health Provider, this service can be accessed by all employees.

As part of the Council's Health and Safety Management system, occupations which include manual handling activities as part of the role, the task risk assessments have been reviewed and as part of their ongoing training a number of courses and interventions to ensure that safe working practices are maintained.

## **8. Supporting Attendance Activity**

- 8.1 Recent and planned actions to improve absence performance include the following:-

- HR operational teams have been working closely with service's management teams to identify areas that require greater support. This will result in strategies to support the employees in those areas to return to work.
- A review of the current supporting attendance policies covering all staff, including teachers, is under way. Meetings have taken place with the respective trades unions to ensure this is a fully collaborative process.
- HR operational teams continue to proactively contact and support managers who have absence cases of 2 to 4 weeks in duration, to monitor action taken to date and proposed next steps.
- Continued delivery of supporting attendance training at a corporate level for managers, with the provision of tailored training for managers and employees at a service level on request;
- Ongoing health promotion activities aimed at raising employee awareness of health issues continue, the latest campaign focused upon diabetes;

- Ongoing work to improve the absence information available to managers and to streamline supporting attendance related processes to facilitate prompt absence reporting, recording and updating of relevant systems;
- Monthly meetings continue with Directors to discuss their service's supporting attendance performance.

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## **Implications of this Report**

**1 Financial Implications** - Improvement in attendance impacts on the financial costs of absence.

**2 HR and Organisational Development Implications** - HR and Organisational Development Practitioners will continue to work with service managers and consult with the Trade Unions, on the implementation of the Supporting Attendance at Work Policy and Guidance and initiatives detailed in this report.

## **3 Community Planning**

**Children and Young People** - none.

**Jobs and the Economy** - none.

**Community care, health and wellbeing** - provides for continuous improvement in health and attendance.

**Safer and Stronger** - provides for improved service performance across the Council.

**Greener** - none.

**Empowering our Communities** - none.

**4 Legal Implications** - none.

**5 Property/Asset Implications** - none.

**6 Information Technology Implications** - none.

**7 Equality and Human Rights Implications** - none.

**8 Health and Safety Implications** - it is integral to the Council's aim of securing the health and well being of employees.

**9 Procurement Implications** - none.

**10 Risk Implications** - Without continued effective supporting attendance focus, there is a risk that sickness absence levels will adversely impact on the Council both financially and in terms of service delivery. Consequently supporting attendance activities are monitored via the Corporate Risk Register.

**11 Privacy Impact Implications** : none

**List of Background Papers**

(a) None

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