

# NEATH PORT TALBOT COUNTY BOROUGH COUNCIL

## POLICY AND RESOURCES SCRUTINY COMMITTEE

18 February 2016

### Report of the Head of Human Resources – Sheenagh Rees

#### Matter for Monitoring

Wards Affected: All Wards

### SICKNESS ABSENCE MONITORING REPORT

#### Purpose of Report

1. The purpose of this report is to provide Member's with information in relation to sickness absence to inform Member scrutiny of the management of sickness absence across the Council.

#### Monitoring Data

2. In November, Members at this Committee received historical data, as well as data on a national, Council wide and service level. It was agreed with Members that on an on-going basis quarterly monitoring reports would be presented to this committee. Today's report therefore focuses on Quarter 3 sickness data for 2015 / 2016, for the period April to December 2015, with data provided in Appendix 1.
3. For ease of reference I have included two tables in Appendix 1 which were also previously included in the November report. **Table 1** provides Members with the all Wales benchmarking figures for 2014 / 2015, and **Table 2** sets out the average FTE sick days in 2014 / 2015 for each service, measured against the Council average for the period (9.4 days) and the 2015 / 2016 target of 8.7 days. I have included these tables again to help Members benchmark against last year's performance.

4. **Table 3** provides Members with an overview of the Council's absence pattern and the ratio of days lost to short term and long term absence in Quarter 3 2015 / 2016. The data for 2014 / 2015 is also provided, and Members can see that whilst the overall numbers of days lost has reduced, the ratios remain consistent.
5. **Table 4** provides an overview of the Council average working days lost per FTE employee in Quarter 3 each year from 2009 / 2010 to 2015 / 2016.
6. **Table 5** provides the Quarter 3 monitoring data for 2015 / 2016 for each service, compared with the Quarter 3 monitoring data for 2014 / 2015 (2014 / 2015 is the left hand column, 2015 / 2016 is the right hand column).
7. Whilst minor fluctuations can be expected, some services showed significant increases or decreases in absence rates in Quarter 3. So, for example, Corporate Strategy and Democratic Services show a 61% decrease in absence rates. Transformation, whilst sickness rates remain the third highest in the Council, show a decrease in the Quarter of 34%. Human Resources show an increase in absence rates of 24% and Business Strategy of 19%, but Members should note that both services still remain below the Council average.
8. **Table 6** provides Members with head count and full time equivalent figures for each service. Members requested this information at the November meeting, in order to help Members understand how sickness data compares with the number of employees employed within each service. Members should note that these figures are subject to change, particularly where cross-directorate change takes place.
9. **Table 7** sets out the number of employees who were absent on 3 or more occasions in each service during Quarters 1 to 3 of 2015 / 2016, and **Table 8** sets out the number of working days lost by these employees.
10. **Table 9** then sets out the number of employees who were absent for 28 consecutive days or more in each service during Quarters 1 to 3 of 2015 / 2016, and **Table 10** sets out the number of working days lost by these employees.

11. **Table 11** provides Members with information in relation to why employees were absent from work in 2014 / 2015. Members can compare this with the top ten reasons for absence in 2015 / 2016, set out in **Table 12**. Cancer related absence increased significantly by 53% compared with last year and absence related to bereavement increased by 58%. Stress related absence increased by 21%, and back pain related absence, by 24%. This information will help inform targeted strategies in relation to managing absence and promoting health and well-being.
12. To help Members understand how the reasons for absence relate to patterns of absence, **Table 13** then sets out the top ten reasons for short term absence in 2015 / 2016, and **Table 14**, sets out the top ten reasons for long term absence. Members will be interested to note that this is the first time that Arthritis has appeared in the top ten reasons for long term absence. As can be expected with an increasingly aging workforce, associated health conditions will have an impact on the patterns we can expect to see in absence.
13. **Table 15** provides data in relation to employees leaving employment as a result of ill health. 32 employees left the Council's employment in 2014 / 2015 as a result of ill health and in the current year to December 2015, 30 employees have left the Council's employment for ill health reasons.
14. Finally, and sadly, Members are advised that during Quarters 1 to 3 of 2015 / 2016, 5 employees died in service following periods of ill health.

### **Ongoing scrutiny**

15. Members will continue to receive sickness monitoring information on a quarterly basis. This will enable Members, over time, to monitor absence rates and patterns across the Council.
16. The data presented in this report will raise questions for Members, so for example, whether Members see fluctuations in sickness absence levels in particular services, they may want to take the opportunity to refer this to the relevant scrutiny committee for further investigation.

## **Recommendation**

17. It is RECOMMENDED that Members NOTE the sickness absence monitoring report and continue to receive further monitoring reports on a quarterly basis.

## **Equality impact assessment**

18. There is no requirement for an equality impact assessment.

## **Workforce impacts**

19. This report will be shared with recognised trade unions in respective consultative forums for discussion and consideration.

## **Legal impacts**

20. There are no legal impacts arising from this report.

## **Risk management**

21. Sickness absence must continue to be managed effectively or there is the risk that sickness rates will increase with associated loss of productivity and budgetary impact.

## **Consultation**

22. There is no requirement under the Constitution for external consultation on this item.

## **Appendices**

Appendix 1 – Sickness absence Quarter 3 2015/2016 Monitoring Data

## **Background Papers**

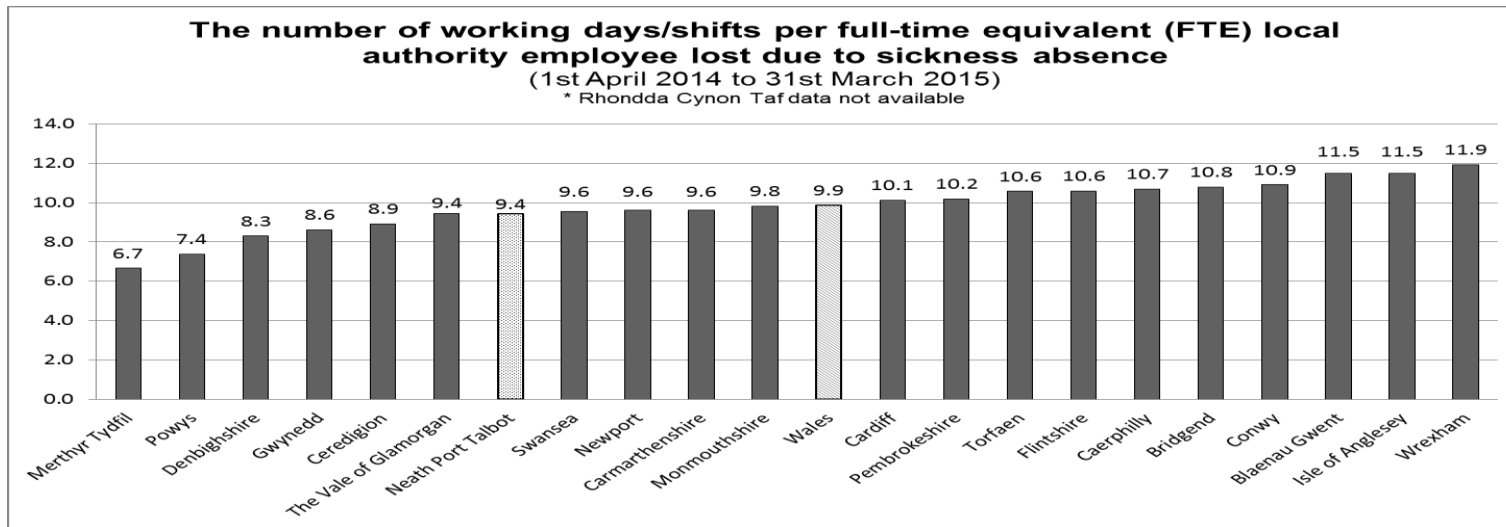
The Maximising Attendance Policy and Procedure.

## **Officer Contact**

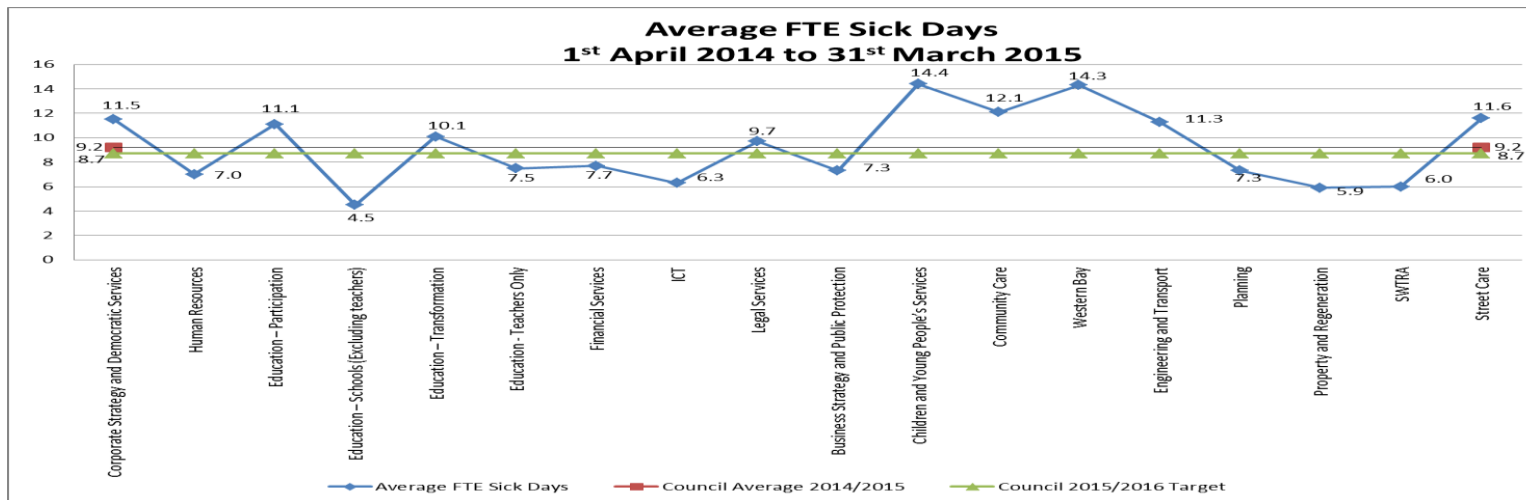
Sheenagh Rees, Head of Human Resources on Ext. 3315 or e-mail [s.rees5@npt.gov.uk](mailto:s.rees5@npt.gov.uk)

## APPENDIX 1 – SICKNESS ABSENCE QUARTER 3 2015 / 2016 MONITORING DATA

**TABLE 1**

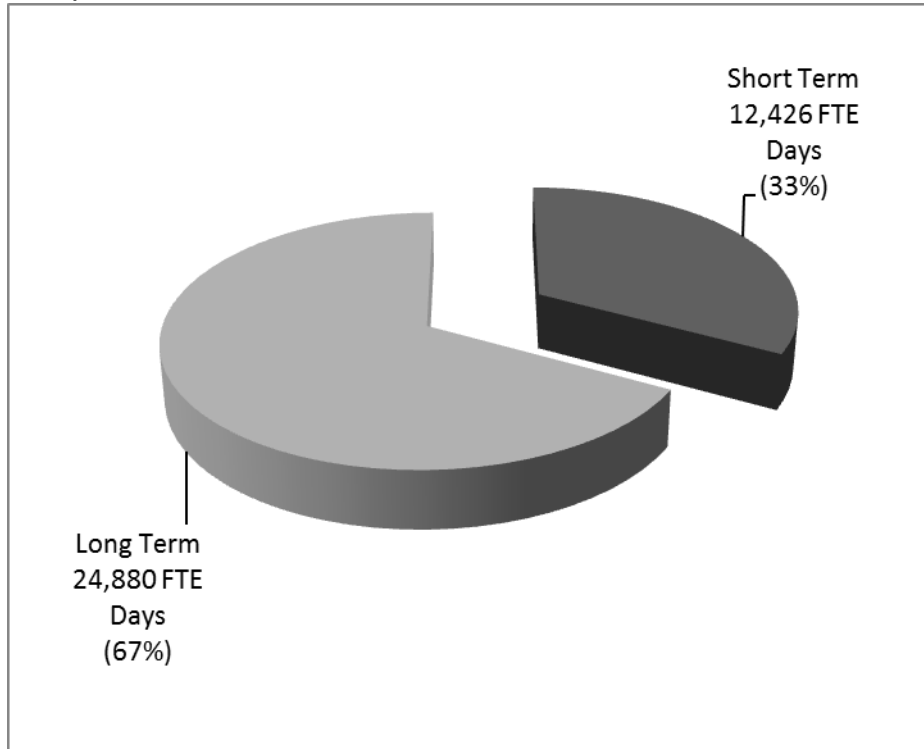


**TABLE 2**

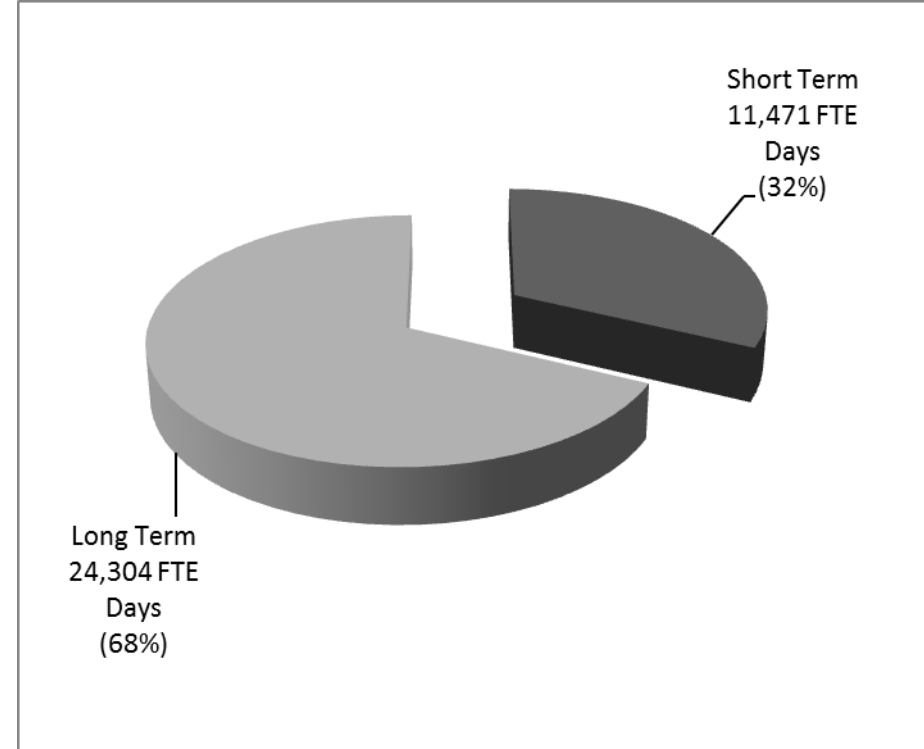


**Ratio of short and long term sickness – number of FTE days lost  
(including teachers)**

1<sup>st</sup> April 2014 to 31<sup>st</sup> December 2014



1<sup>st</sup> April 2015 to 31<sup>st</sup> December 2015



**TABLE 4**

**Quarter 3 Average Sickness Rates**

<b>Overall Sickness (Including Teachers)</b>	<b>Quarter 3 2009/10</b>	<b>Quarter 3 2010/11</b>	<b>Quarter 3 2011/12</b>	<b>Quarter 3 2012/13</b>	<b>Quarter 3 2013/14</b>	<b>Quarter 3 2014/15</b>	<b>Quarter 3 2015/16</b>
The number of working days/shifts per full time equivalent (FTE) local authority employee lost due to sickness absence.	8.4	7.0	7.3	7.1	6.6	6.7	6.8

TABLE 5

### Average number of Working Days/Shifts Lost per Full-Time Equivalent Employee

(1<sup>st</sup> April to 31<sup>st</sup> December 2014 and 1<sup>st</sup> April to 31<sup>st</sup> December 2015)

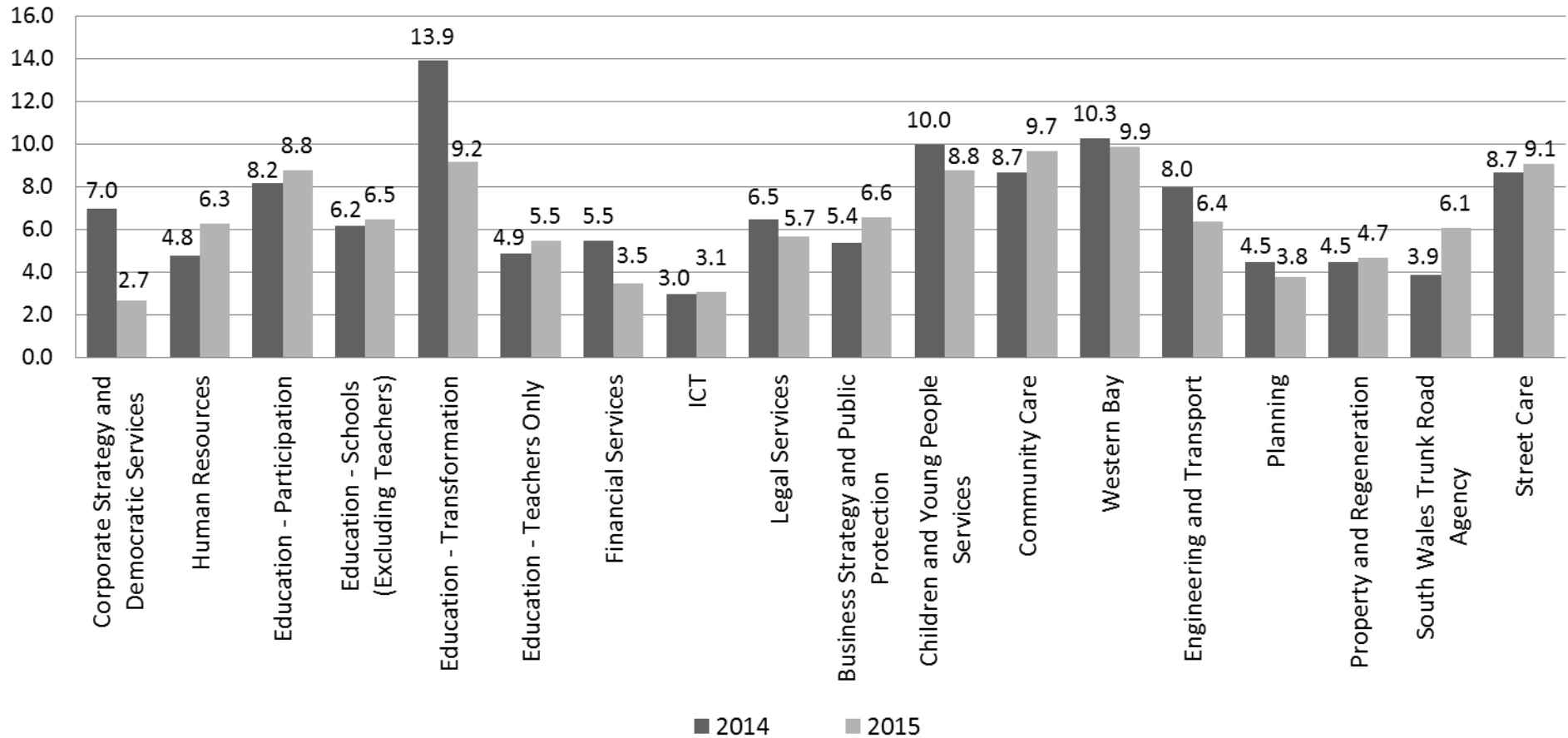


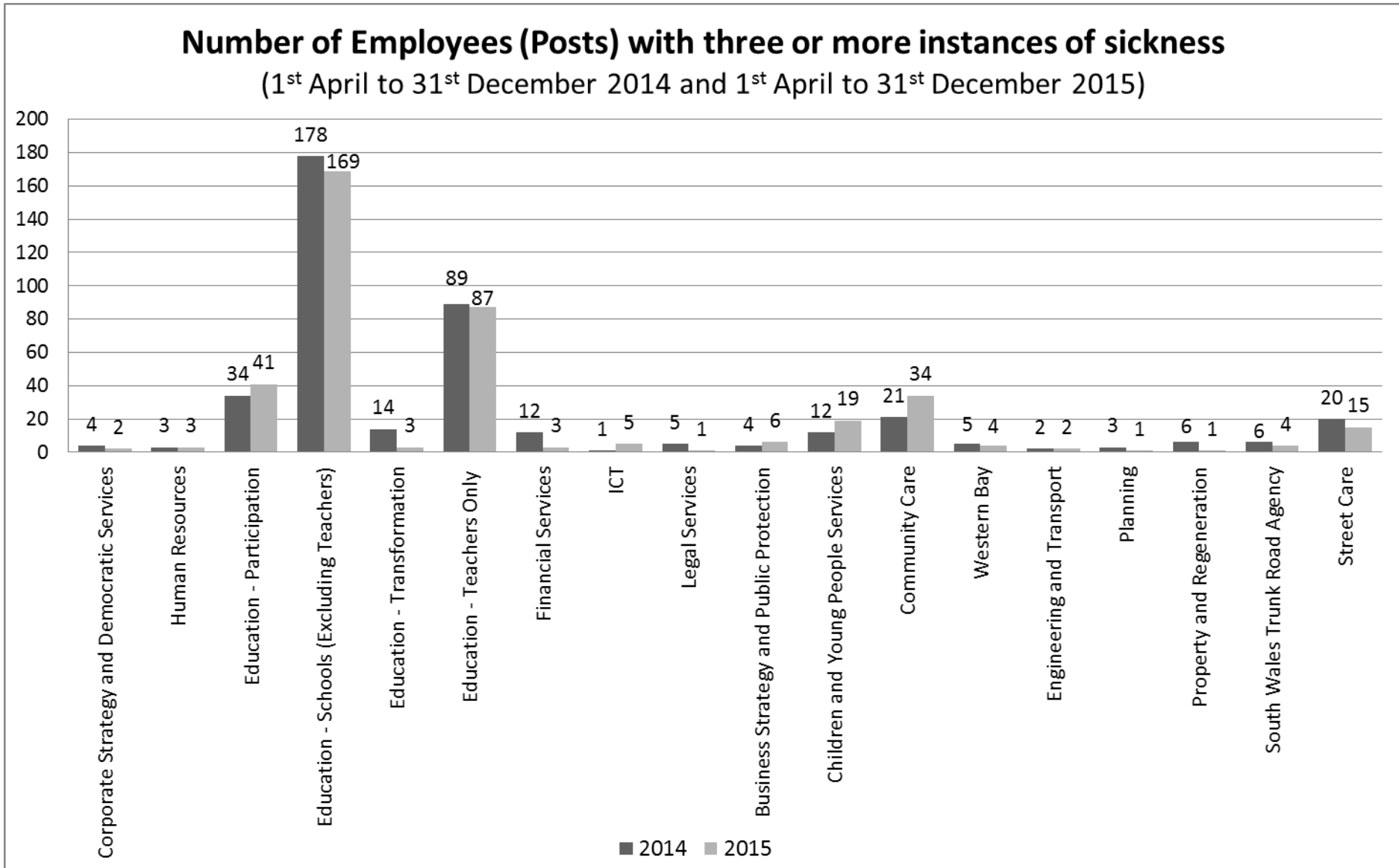


TABLE 6

## NUMBERS OF EMPLOYEES EMPLOYED IN EACH SERVICE (JANUARY 2016)

SERVICE	HEAD COUNT	FULL TIME EQUIVALENT
HUMAN RESOURCES	79	69
CORPORATE STRATEGY AND DEMOCRATIC SERVICES	91	77
FINANCE	185	164
ICT	99	97
LEGAL SERVICES	81	69
CHILDREN & YOUNG PEOPLE	316	287
BUSINESS STRATEGY	251	229
COMMUNITY CARE	737	539
ENGINEERING & TRANSPORT	167	133
PLANNING	55	54
PROPERTY & REGENERATION	148	101
STREETCARE	457	450
SWTRA	103	101
PARTICIPATION	1024	429
TRANSFORMATION	121	100
SCHOOLS (EXCLUDING TEACHERS)	1836	991
TEACHERS	1260	1167
<b>TOTAL</b>	<b>7010</b>	<b>5057</b>

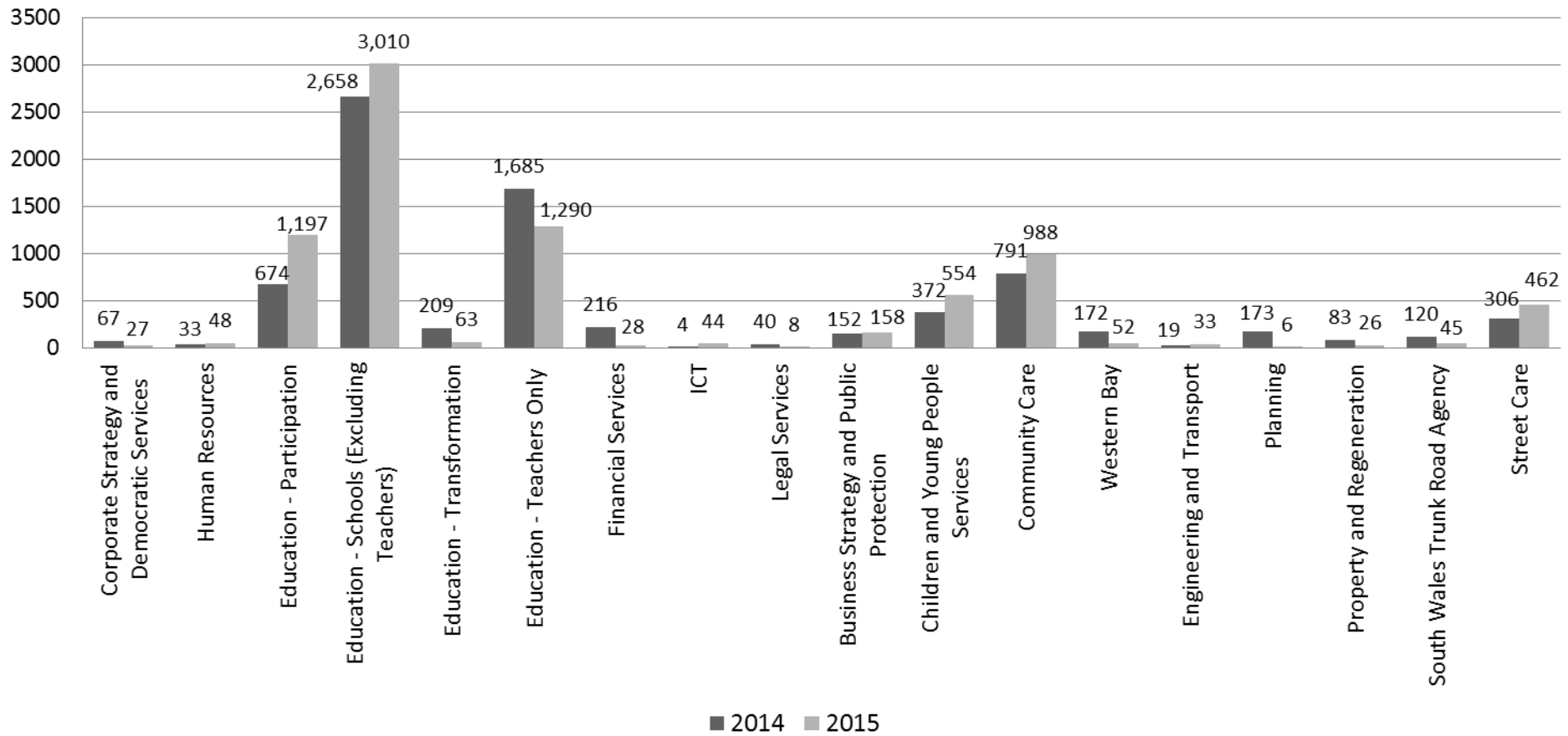
TABLE 7



**TABLE 8**

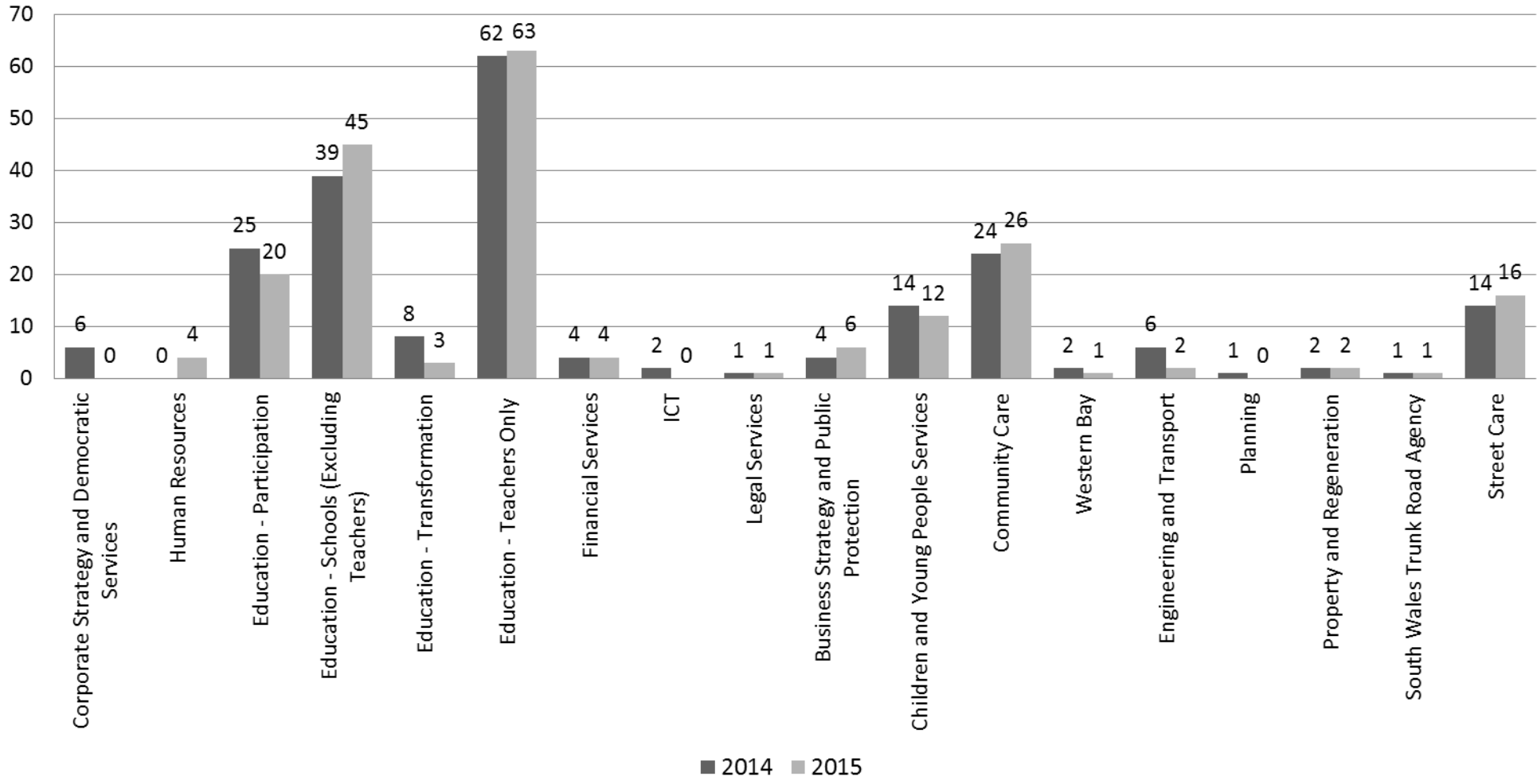
### Number of Working Days Lost for Employees with three or more instances of sickness

(1<sup>st</sup> April to 31<sup>st</sup> December 2014 and 1<sup>st</sup> April to 31<sup>st</sup> December 2015)



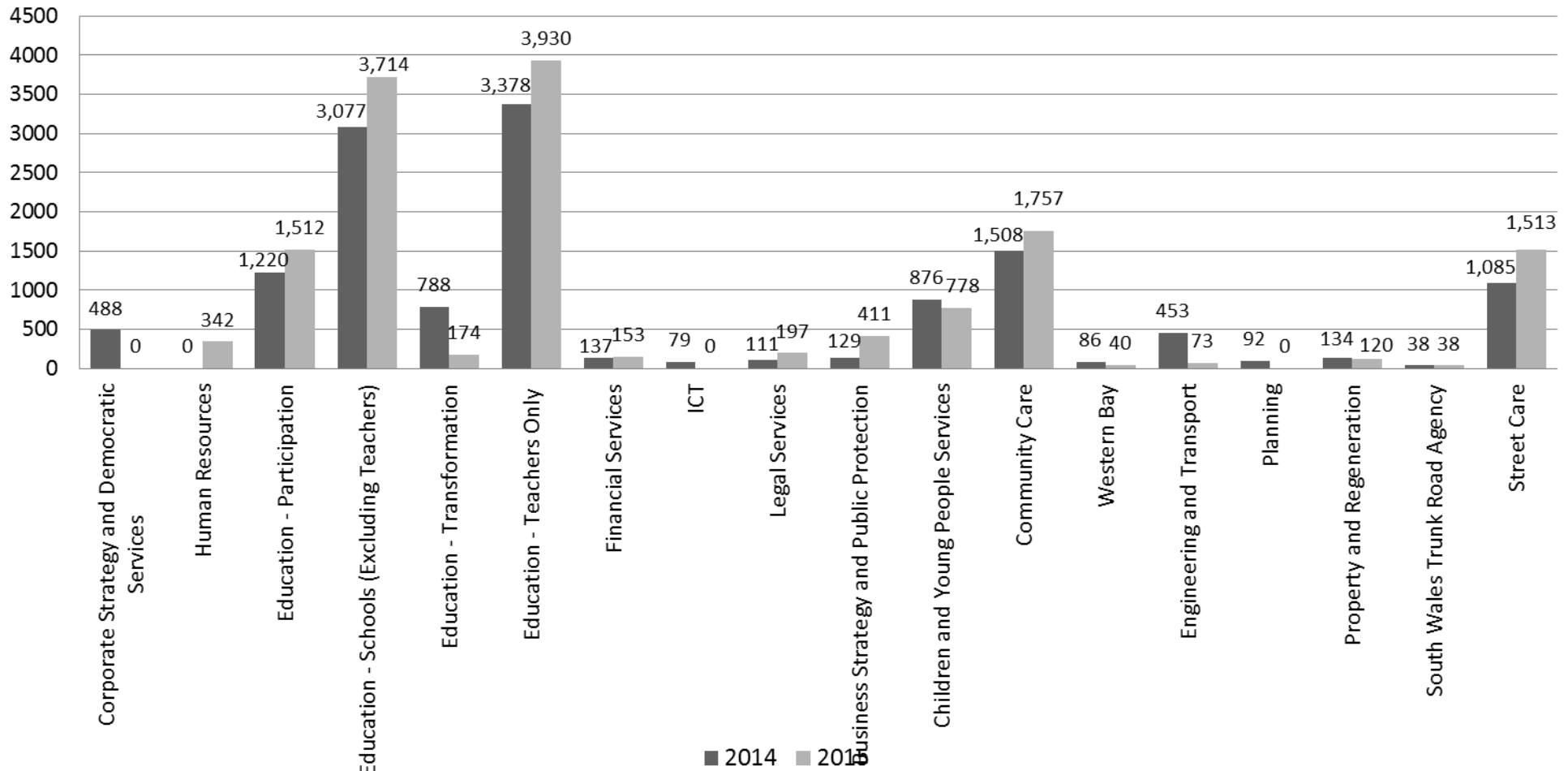
**TABLE 9**

**Number of Employees (Posts) consecutively sick for 28 Calendar Days or more**  
 (1<sup>st</sup> April to 31<sup>st</sup> December 2014 and 1<sup>st</sup> April to 31<sup>st</sup> December 2015)



**TABLE 10**

**Number of Working Days/Shifts lost for those employees who are  
consecutively sick for 28 Calendar Days or more  
(1<sup>st</sup> April to 31<sup>st</sup> December 2014 and 1<sup>st</sup> April to 31<sup>st</sup> December 2015)**



**TABLE 11**

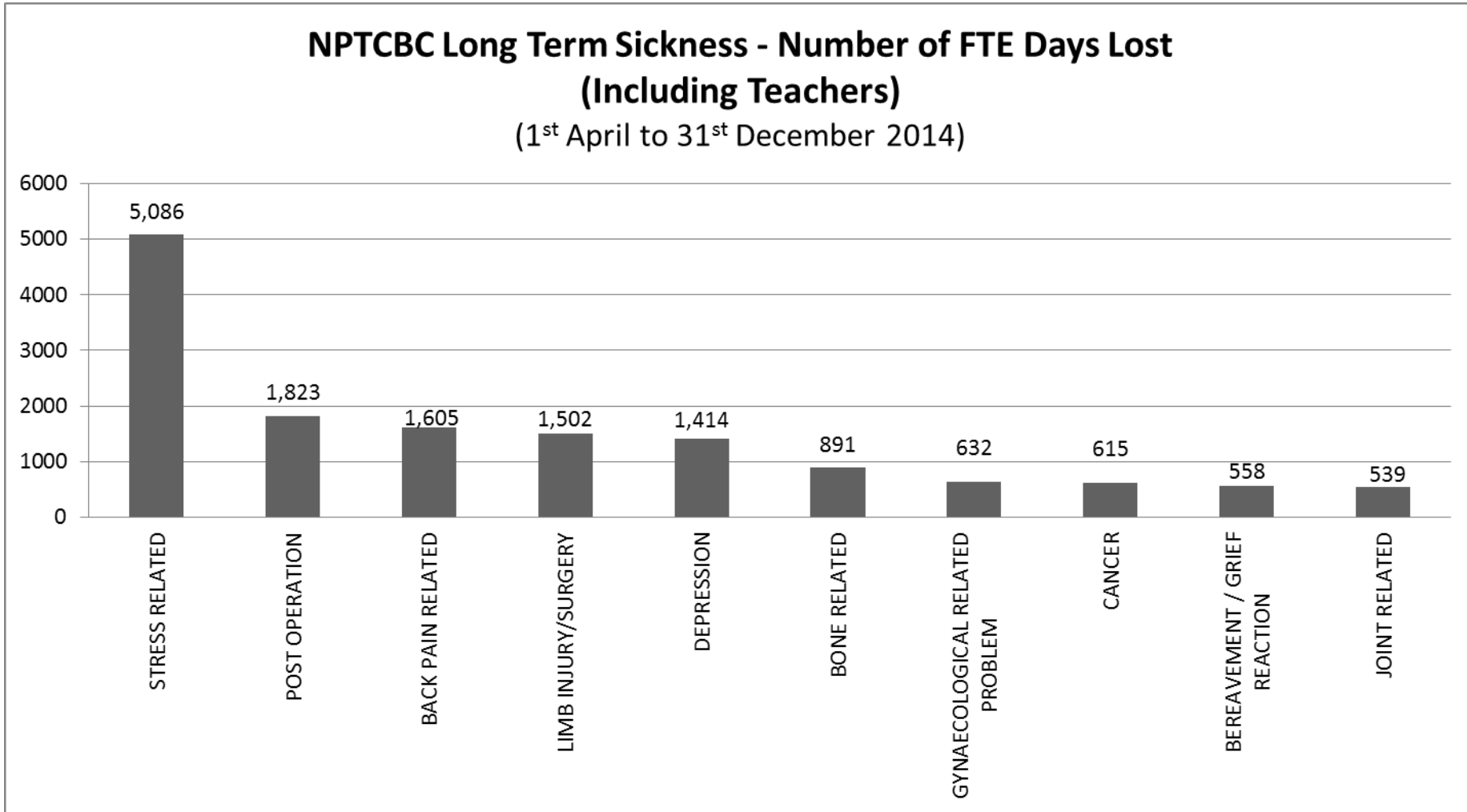


TABLE 12

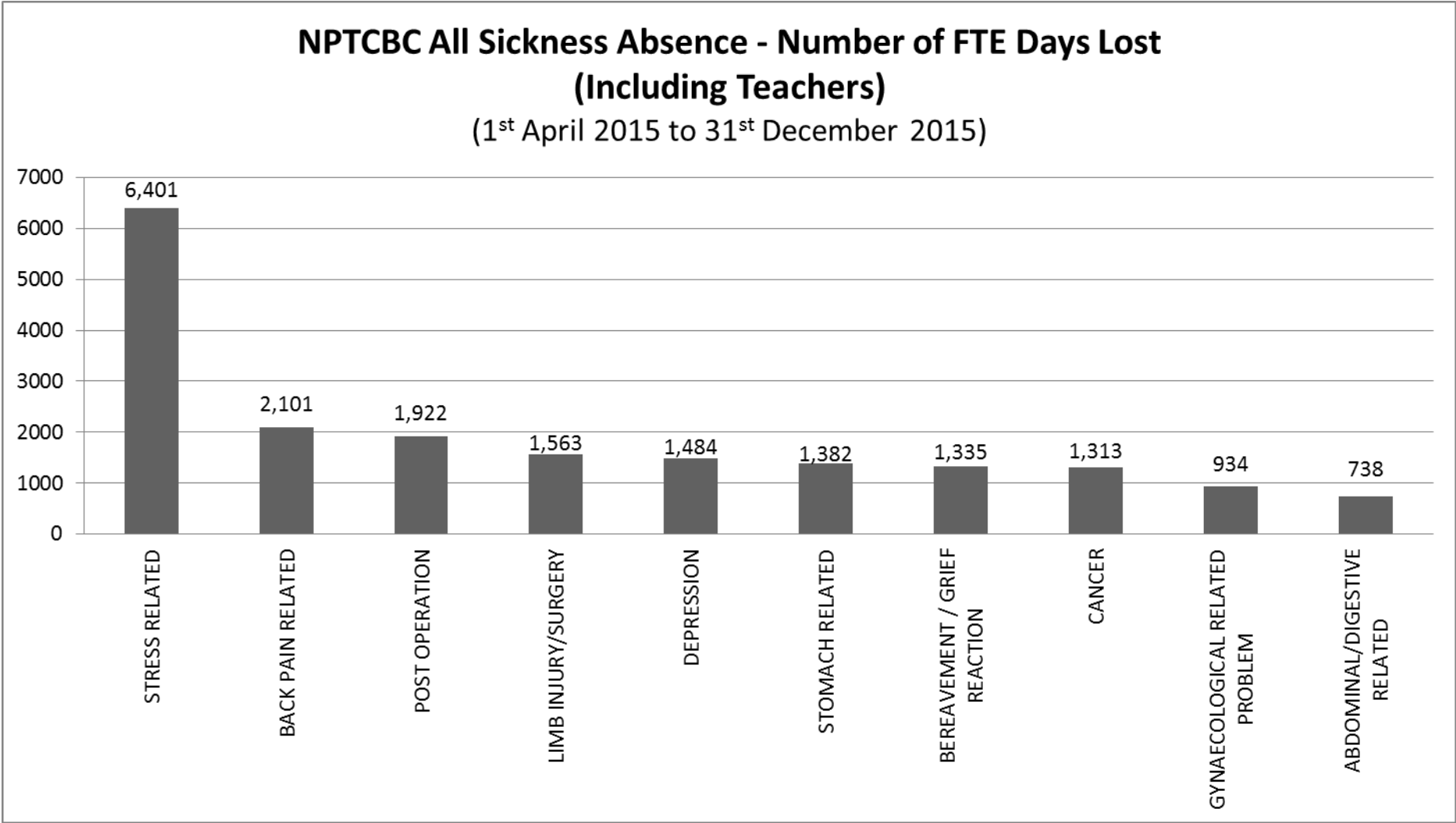


TABLE 13

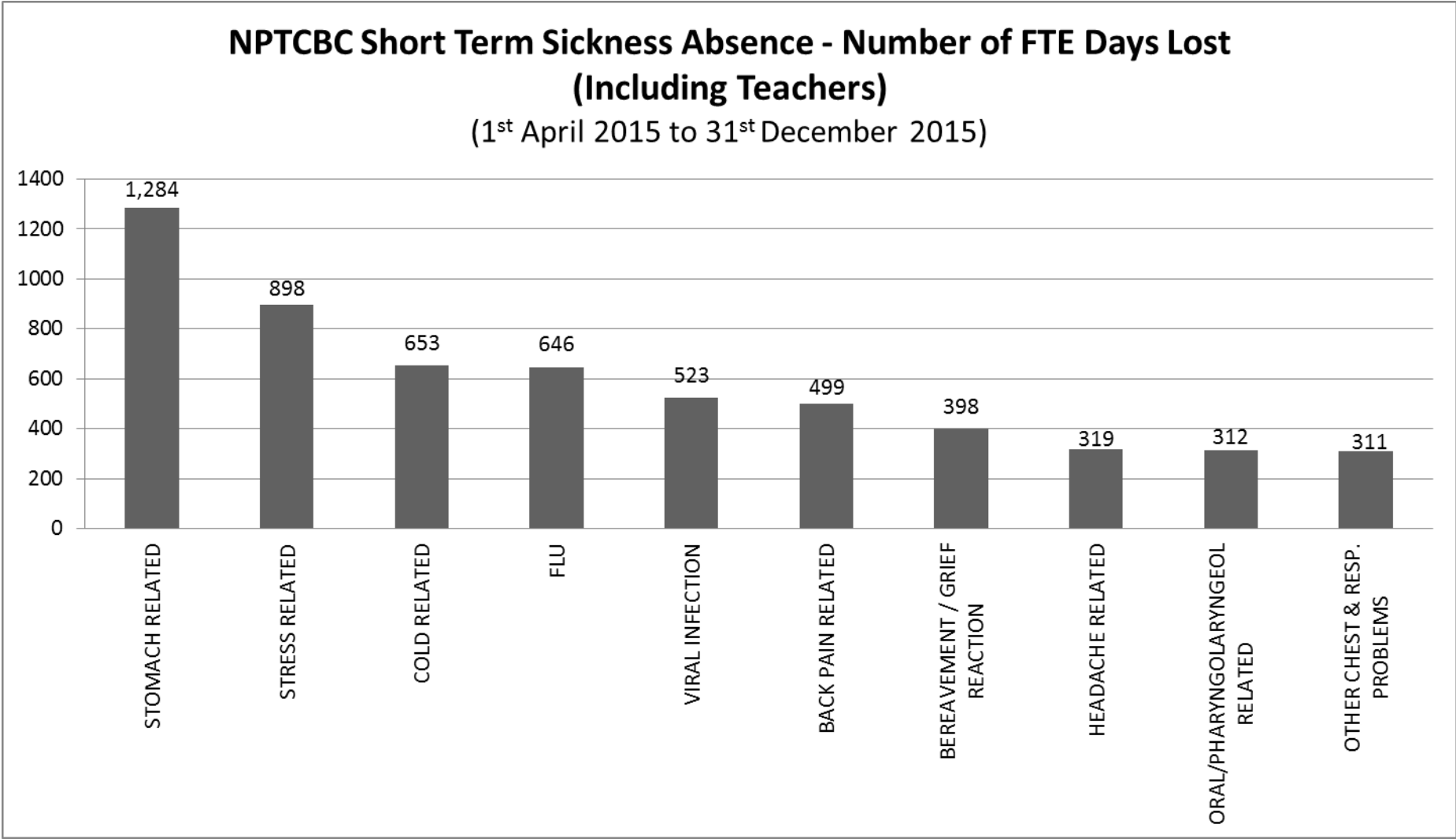




TABLE 14

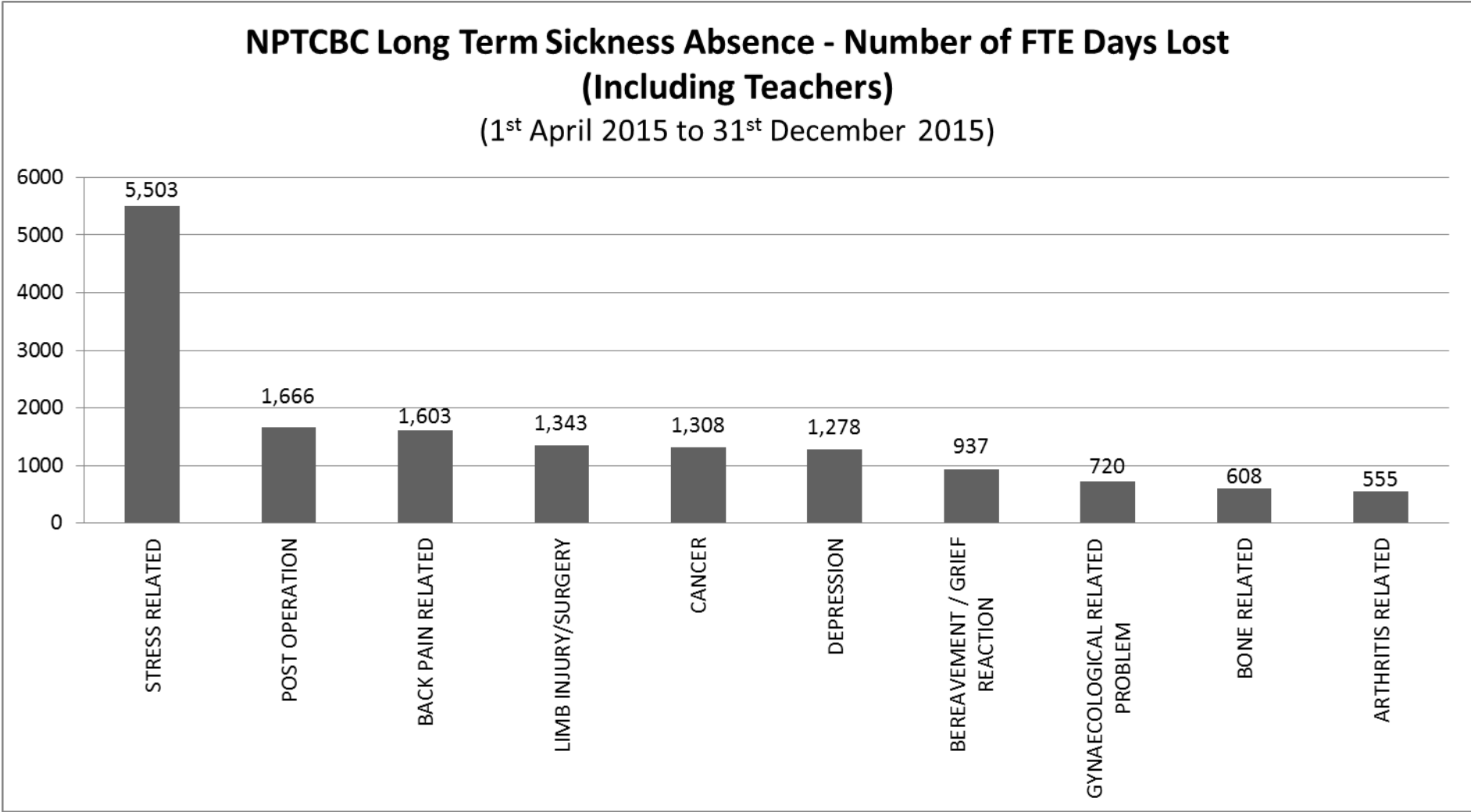


TABLE 15

## Ill health leavers 2014 / 2015 (April to March)

Directorate	Resignation (Health Reasons)	Ill Health Retirement Tier 1	Ill Health Retirement Tier 2	Ill Health Retirement Tier 3	Dismissal – inability to attend work on a regular basis
ELLL	1	3	0	1	1
SCHOOLS	1	5	0	0	4
SSHH	1	6	0	0	4
ENV	1	2	0	0	2
FCS	0	0	0	0	0
<b>Totals</b>	<b>4</b>	<b>16</b>	<b>0</b>	<b>1</b>	<b>11</b>

## Ill health leavers 2015 / 2016 (April to December)

Directorate	Resignation (Health Reasons)	Ill Health Retirement Tier 1	Ill Health Retirement Tier 2	Ill Health Retirement Tier 3	Dismissal – inability to attend work on a regular basis
ELLL	4	1			3
SCHOOLS	3		1		4
SSHH		1	1	2	3
ENV		5			1
FCS		1			
<b>Totals</b>	<b>7</b>	<b>8</b>	<b>2</b>	<b>2</b>	<b>11</b>