

SLOUGH BOROUGH COUNCIL

REPORT TO: Employment & Appeals Committee **DATE:** 24th June 2014

CONTACT OFFICER: Kevin Gordon, Assistant Director Professional Services

WARD(S): All

PART 1 FOR INFORMATION

REDUCING SICKNESS ABSENCE PERFORMANCE UPDATE

1 Purpose of Report

To provide members with an update on progress of reducing the Council's Sickness absence, and includes appendices with the latest performance figures and the Council's Overall Sickness Absence Balanced Scorecard. A report to CMT was presented which gave a summary of action taken to date to improve employee wellbeing and sickness absence with some recommendations – Attached as Appendix 3.

2 Recommendation(s)/Proposed Action

The report is submitted to the Employment and Appeals Committee for information only.

3 Supporting Information

Appendix 1 - graph showing sickness absence rates per month (expressed as Full Time Equivalent Days lost FTE) up to April 2014.

Appendix 1 shows that since our last report to Committee in April there has been an increase in the data for the months of February, March and April which increased by 0.3 days (February 14) and 0.2 days (March 14) and 0.1 days (April 14). Although this shows an increase it should be noted that sickness absence monitoring and recording for 2012 / 2013 was not as stringent and may have led to low reporting figures. For the period February – April 2014, the average of 0.66 fte absence is being reported, a reduction from the previous report.

The sick days per fte from 1st May 2013 to 30th April 2014 report **8.4 days** lost per fte in comparison with the same period for the previous year of 8.9 days per fte. This figure is still showing an improvement in our sickness days lost however is above our target of 6.8 days by September 2014. It has been recognised that due to the nature of the work within the Wellbeing Directorate the sickness absence rate will be higher than the other directorates. Therefore the target for this directorate is being re-profiled in conjunction with the Strategic Director and the Assistant Directors of Wellbeing.

In addition the previous committee report in April gave a comparison against Local Authority and National Statistics data that was available and is given below.

Unitary Authorities	10.22 days lost
District / Borough	7.54 days lost
County Council	8.61 days lost
Labour Market	4.4 days lost

From the data analysed above, Slough's sickness days lost per fte has improved and is better than its comparators. However, it is still above the National average.

The sickness absence balanced scorecard has continued to be reported at CMT and DMT's to monitor the progress of sickness absence in service areas. It also enables managers to report on absence and ensure relevant action is being taken, in accordance with the absence policy.

Appendix 2 provides a summary of the balanced scorecards by Directorate over the last year up to March 2014.

For the period of reporting, none of the directorates have fallen below the 60 management score however 3 out of the 4 directorates have fallen below the 65 management score. RHR are performing well with a management score for March 2014 reporting at 81.7 however they have less staff than the other directorates (with the exception of CE). The overall management score for the Council is 68.1 therefore this indicates that as a Council we are managing sickness absence.

All managers and supervisors who manage staff are required to attend the Sickness Absence Training. Whilst the majority of managers are now trained across all directorates there is still a constant need to run training as new managers join the organisation, and further training courses have been scheduled into the summer. From the data shown on the Balanced Scorecard, 2 out of the 4 directorates are below the 90% target for attendance on the Sickness Training although this only relates to a handful of managers (below 10). Human Resources are making direct contact with these managers to ensure that they are booked on the next available training, subject to operational pressures. The overall percentage of attendance for the Council is currently 90.7% therefore we have achieved our target.

In order to support managers with absence management, Occupational Health is a vital component to ensure that relevant medical advice is sought. The data below identifies the number of staff that did not attend their appointments which unfortunately has shown an increase.

Month	%	Number	Management Action
Feb	7.3%	3 DNAs *	1 MI and 1 SSP (person on SSP dna'd twice so remained on SSP)
March	1.96%	1 DNA *	SSP
April	7.4%	4 DNAs *	3 MI's and 1 SSP

** NB: DNA's are calculated based on the number of booked appointments.*

To address the fluctuating nature of DNA's, managers are being advised to ensure their staff understand the implications of not attending an OH appointment in accordance with the Absence Policy. This is also being reflected in the training and is also being reaffirmed in communications to the management teams.

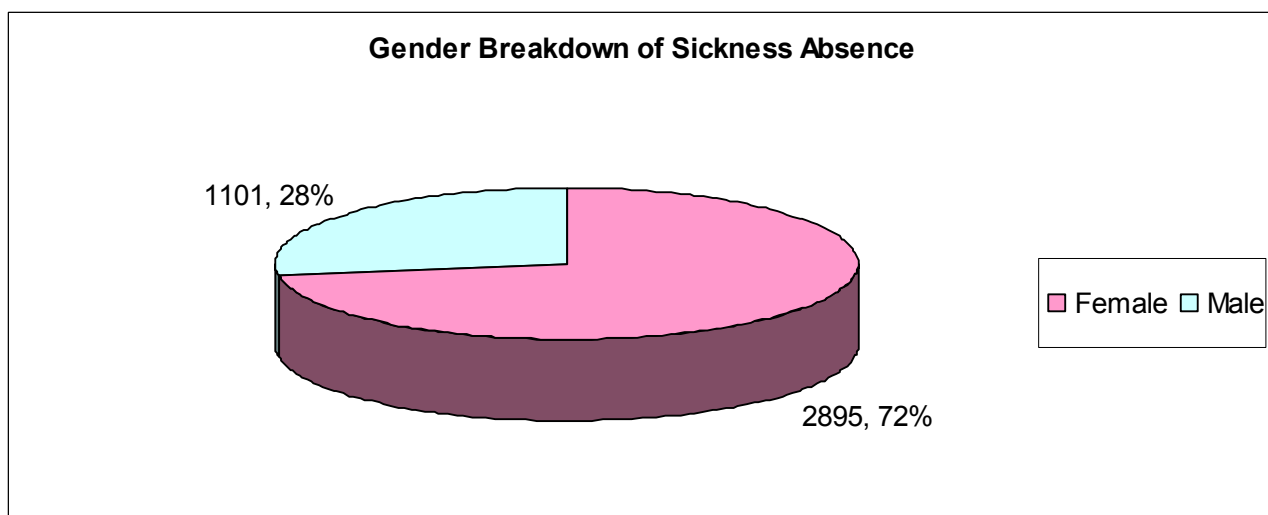
Appendix 3 is a report that was presented to CMT in May to provide a further breakdown about the causes of absence. Neil Fraser was asked to undertake a review on this subject as part of his professional study to set into context Slough Borough Council's absence incidences in comparison to the National absence statistics, in conjunction with Slough Borough Council's absence and wellbeing policies, so that conclusions can be reached and recommendations for further improvements can be made.

Since the last report in April, members have asked for an indication of the breakdown of sickness absence by gender. As you will read from Appendix 3, on average, women have more sickness absence than men and the public sector employs a higher proportion of female workers. Of the current Slough Borough council employees, circa 70% are women.

A breakdown is as follows:

Gender	Actual Days Sick*
Female	2895
Male	1101
TOTAL	3996

*Data excludes Business Admin Apprentices, Leavers and School based staff.



The workforce profile as at 30th April, 2014 shows a 69.9% Female/30.1 Male gender split. Sickness therefore mirrors this trend in terms of percentage share.