

Staffing Committee

Dorset County Council



Date of Meeting	10 April 2017
Officer	Head of Human Resources and Organisational Development
Subject of Report	Management of Attendance 2016/17 – Quarter 3
Executive Summary	<p>DCC reports a mixed set of sickness results for quarter 3 October to December 2016 as absence rates remain relatively unchanged at 8.79 days per fte. Environment and Economy have reduced absence this quarter by 1.10 days to 8.03 days, their lowest rate for 2 years. Childrens' Services report a slight fall to 9.97 days but Adults sickness has risen by 0.49 days to 9.49 days. Chief Executives sickness is a mixed picture with lower absence in Legal Services and HR+OD but higher absence in Governance and Financial Services.</p> <p>This report is provided in a new format. Directorate commentary has been replaced by case studies for services who have successfully reduced sickness absence, as well as in-depth commentary for services with higher sickness levels. Dorset Direct explains how sickness absence was halved from 20 to 10 days whilst Dorset Travel provide insight to their sickness levels. A verbal report will be given by Children's Services Care and Protection at this committee meeting.</p> <p>The report highlights our new Health and Wellbeing intranet site which provides a plethora of videos, smart phone applications, information, advice and training materials for all managers and employees.</p> <p>This paper is the last one which reports using DES sickness data. Management Dashboard data will be used for the next committee report which excludes data from employees who have left in the last twelve months.</p>

Management of Attendance 2016/17 – Quarter 3

Impact Assessment:	<p>Equalities Impact Assessment:</p> <p>No separate EQIA has been conducted / required although the County Council's policy on the management of attendance is itself subject to EQIA considerations.</p> <p>Use of Evidence:</p> <p>The report is wholly evidence based. Sickness targets have been established on a common basis applicable to all categories and groups of staff.</p> <p>Budget:</p> <p>There are no direct costs implications arising from this report. The rolling 12 month sickness absence shows an annual cost of £2 million for DCC (excluding schools) based on current reporting. This amount does not cover the cost of additional temporary staff where necessary.</p> <p>Risk Assessment:</p> <p>No specific decision is requested in the relation to this report. The associated risk is low.</p> <p>Other Implications:</p> <p>Not applicable.</p>
Recommendation	<p>It is recommended that Staffing Committee request:-</p> <ul style="list-style-type: none"> i) The learning from Dorset Direct is communicated widely to all DCC managers as a case study to assist other services in managing sickness. ii) Dorset Passenger Transport produces a follow up report to Staffing Committee, which includes the new system for reporting PA absence and managing return to work interviews. iii) For the next Staffing Committee, Adults and Community Services are asked to update Staffing Committee in person. Finance and Governance and Assurance Services are asked to produce written commentary on their high absence levels and their proposals to resolve.
Reason for Recommendation	<p>To ensure the effective management of attendance within the authority</p>
Appendices	<p>Appendix 1: Quarterly Directorate Sickness Report Appendix 2: Quarterly Sickness report – target v actual</p>

Management of Attendance 2016/17 – Quarter 3

Background Papers	None
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Management of Attendance 2016/17 – Quarter 3

1. Introduction

- 1.1 This report considers quarter 3 sickness data (October 2016 to December 2016) and makes reference to DCC's quarterly and annual sickness data trends.

2. DCC sickness absence: a yearly perspective

Table 1: Sickness absence in DCC for the last year

Date	DCC Non Schools (excl. DWP + PH)	DCC Non Schools (incl. DWP + PH)
December 2015	8.46	8.74
March 2016	8.52	8.84
June 2016	8.76	9.35
September 2016	8.83	9.53
December 2016	8.79	9.55

3. Long Term v Short Term sickness absence within DCC

- 3.1 Levels of long term sickness and short term sickness are similar for the last 12 months. Long term absence stands at 4.63 days and short term at 4.16 days per fte.
- 3.2 The highest ratios of long term sickness as compared to short term are in Dorset Waste Partnership (9.81/ 5.88 days) and Children's Services (6.06 / 3.91 days).
- 3.3 The highest ratios of short term sickness absence as compared to long term are in the Chief Executives Department - Legal, Democratic, HR+OD, Transformation (3.96 / 0.97 days) and in Public Health (4.29 / 1.51 days)

4. Ill health retirements and dismissals

- 4.1 For the twelve month period (Q4 2015 to Q3 2016) DCC actioned 23 dismissals due to medical incapability plus 4 ill health retirements. This compares with 26 dismissals and 4 ill health retirements for (Q3 2015 to Q2 2016). For each individual directorate:-
- Adult and Community Services actioned 2 dismissals due to medical incapability and 1 ill health retirement.
 - Children's Services actioned 7 dismissals due to medical incapability and 1 ill health retirement.
 - Economy and Environment actioned 8 dismissals due to medical incapability and 1 ill health retirement.

Management of Attendance 2016/17 – Quarter 3

- Chief Executives actioned 2 dismissals due to medical incapability and 1 ill health retirement.
- Dorset Waste Partnership (DWP) actioned 4 dismissals due to medical incapacity but no ill health retirements.

5. Table 2: Reasons for sickness absence across DCC: (Q3: Oct 2016 to Dec 2016)

Sickness Category	Cost Q3 (salary costs only)	Previous Quarter costs (Q2) for comparison
Mental Health	176,650	165,158
Musculoskeletal	169,672	133,719
Digestive	74,935	54,154
Ear Nose Throat	71,559	38,941
Cancer Tumours	20,077	37,161
Nervous system	33,617	33,333
Reproduction / Urinary	30,646	28,402
Respiratory	71,301	22,943
Cardiovascular	12,735	12,799
Other reasons	14,121	12,313
TOTAL	675,313	538,923

Note:

- i) Mental Health: includes stress, anxiety, depression, other mental health
- ii) Musculoskeletal: includes neck, back, strains, sprains, carpal tunnel, RSI, frozen shoulder, arthritis and rheumatism

Management of Attendance 2016/17 – Quarter 3

The costs of absence depends on the salary levels of absent employees during the quarter and may not be a direct correlation with the total number of sickness days lost.

- 5.1 The more significant changes in sickness reasons for Q3 are due to increases in absences due to respiratory, ear nose throat, musculoskeletal and digestive, with cancer and tumours reporting a decrease. This change in sickness is fairly typical as we take into account the change from Summer to Autumn reporting periods.

6. Focus on Dorset Passenger Transport (DPT)

- 6.1 Peter Colvin, Fleet Operations Manager, reports on Dorset Passenger Transport which is a service with higher sickness absence levels (currently at 13.62 days).

6.2 Background

Drivers: DPT employ 87 permanent and 14 casual drivers. Casual drivers sickness absence data is not included as there are no pay implications. Drivers are responsible for the safety of passengers on the bus, securing wheelchairs, assisting service users on and off the vehicle and in to their homes. Service users with dementia require particular care and assistance.

The length of service for drivers varies between 3 months and 31 years with an age range of 29 to 79 years old. Employee turnover is not an issue as most tend to stay for several years, albeit a few people start and then leave as the role is not as expected. The majority of drivers are semi-retired and have a background in the Police, Fire, or Armed forces.

Passenger Assistants (PA's): DPT employs 196 permanent and 57 casual PAs. Passenger assistants are responsible for the safe transportation of children with special education needs (SEN) from home to school and back and the safe carriage of their medication. The current length of service varies from a few months to over 30 years. PA turnover is not a major concern as most PA's choose this job when their children progress to middle school or when they retire from full time work. Predominately PA's are female and their age range is from mid 20's to late 70's.

6.3 Medical or cultural reasons for absence

The medical reasons for absence for Drivers and PAs are predominantly respiratory, colds, viruses and chest infections etc. Passenger Assistants work in a schools context where germs and viruses are passed around quickly and there are frequent cases of diarrhoea and vomiting. Most of the musculoskeletal sickness reported for Drivers and PA's are due to surgical operations for knees, hips and carpal tunnel. When employees are absent long term, regular contact is made to see how things are progressing.

6.4 Reporting system for sickness absence

Drivers are managed by Peter Colvin and the Compliance Officers are responsible for PAs in their geographical area of duty. The reporting of sickness absence for Drivers works well as this is carried out by the Lead Drivers at the depot which then gets passed to the Fleet Operations Manager, on a daily basis for action.

For PA's, the fact that the employee is off sick that day is not always fed to the Compliance Officer on the day and therefore the Compliance Officer will not always

Management of Attendance 2016/17 – Quarter 3

know immediately that a PA has reported sick. Instead, it is picked by an office administrator who immediately arranges replacement PA cover.

Drivers are contacted within 2-3 days of returning to work to ensure they are well and offer any assistance that may be required, for example counselling or Occupational Health support. In respect of PA's, Peter Colvin is working with the Environment and Economy Business Manager to improve the passage of information for reporting PA sickness absence. Compliance Officers are keeping contact with those on long term sickness absence. A process for ensuring return to work interview forms completed for all instances of sickness is work in progress.

6.5 Plans to resolve

It is planned to get a better system for PA sickness reporting in place which will assist the monitoring of sickness trends and the completion of return of work forms. I would expect this to be in place by end of May/June 2017. I am happy that the driver sickness reporting/RTW is in place now.

6.6 Is there any assistance you need from others to make the change?

I have asked Compliance Officers to regularly check on PA's and for all Dorset Travel employees to report sickness the same day. There is already progress in this respect and I am confident that reporting will improve.

7. Learning from Success: Dorset Direct

Antony Palumbo, Manager of Dorset Direct, explains how sickness absence rates were reduced from 20 days per FTE to the current rate of 10 days per FTE in the service.

Dorset Direct is the Customer Services Centre for Dorset County Council with a headcount fluctuating between 64 to 71 staff depending upon peak periods throughout the year. Dorset Direct has been operating almost 10 years. The average length of service across the Centre is 4 years with staff turnover from the permanent and fixed contract workforce averaging at 5 staff per year.

The Centre delivers a broad variety of services across a diverse range of Teams handling external enquiries ranging from Adult Social Care, Highways, Dorset Waste Partnership requests and many more, to internal services handling demand for HR, Accounts Payable and Dorset Procurement interactions.

Customer Service Centre staff handle enquiries over extended periods of time and, as first point of contact for many services, they are frequently exposed to unreasonable complainants, angry callers and on occasions abusive comments. Over periods of peak demand the situation is intensified with many staff experiencing both short and long term absence with causes for absence triggered by stressful situations e.g. depression, anxiety. The actions taken to reduce sickness absence are:-

7.1 Consistent approach

The corporate review of the Management of Attendance policy provided us with the opportunity to take ownership and control of absence. It was also clear the managers across the centre had very different ways of interpreting the information

Management of Attendance 2016/17 – Quarter 3

available to help support them with management of absence, and clarity of process and procedures was required in consolidated view for the Centre's use.

7.2 Common understanding of process for supervisors and managers

The Management team pulled together a simple guide, working closely with HR+OD to ensure it followed policy, with clear flow diagrams to help in understanding next steps in managing both short and long term absence. This guidance enabled managers to easily navigate through the information required at each stage of the process so that absence could be handled in a timely and effective way. This involved defining clear trigger points as well as uniformity for terms that were open to interpretation e.g. 'significant improvement expected'.

7.3 Prioritise Health and Wellbeing

Our focus on supporting the health and wellbeing of staff was an essential part of the process. We listened to what the team were telling us in Return to Work Interviews, Staff Surveys, Team Meetings etc., to ensure that we were learning how best to support the Team and adopted an Early Help and Preventative approach that started to see absence reduce across the Centre. Supervision meetings were changed to a 'strength based' approach with emphasis placed on officers looking at ways in which they could improve their daily working experience with Managers providing coaching to help overcome difficult situations.

Other pre-emptive support methods were also put into place, i.e. additional training (telephone techniques to handle difficult customers and contentious situations), support methods in ending calls etc.

7.4 Listen to Employees

To encourage a supportive and inclusive environment in change activities, all officers were engaged in setting up a system to raise matters about their working environment with Suggestions, Issues, Improvements, Ideas & Problems (Siiip's) entered on a register for all officers to contribute towards and help in finding solutions. Removing frustration has been effectively handled through the Control Dartboard with officers encouraged to get involved in change and development activities to add variety to their working days, breaking the constant pressure of taking enquiry after enquiry.

Officers are also given the opportunity to discuss experiences, supporting methods and techniques in regular 'Food for Thought' sessions whereby staff take time off the phone to discuss ideas in a relaxed environment with their peers over a hot drink and a light snack (personally funded by the management team) i.e. making the workplace a fun and enjoyable experience.

7.5 Utilise technology

Our ICT colleagues were also instrumental in providing the technology we needed to make home working a reality to allow Officers to work from home in exactly the same way as if they were operating from the office. Whilst we would not encourage working away from the Centre for extended periods of time, as the social interaction with others is an important part in motivating wellbeing, there have been occasions where Officers cannot attend work due to the risk of spreading infections and viruses. So they have continued to work in handling customer enquiries through the phone, via email, Webchat and Social Media, whereas previously they would have called in sick.

Management of Attendance 2016/17 – Quarter 3

7.6 The results.

A significant reduction in both Short and Long term absence has been seen. In terms of Long Term absence, where it was evident that officers were unable to fulfil their contractual obligation, they were moved through the process in a fair and mutually agreed way. Clear communication on next steps facilitated the process with a consistent approach to 'exiting' officers from the organisation.

For short term absence, officers have embraced the support mechanisms available to help in increasing attendance. Where attendance has not improved, Officers have been issued with First and Final Written Warnings with continued encouragement and support in getting them to a sustainable level of attendance.

Overall, the guidance and simple approach to managing absence, specifically created by the managers for their needs, has facilitated the managers in navigating through what can initially be seen as a complicated and daunting process. It has also allowed us to manage sickness issues more effectively, consistently and timely which has resulted in improvements in attendance seen in absence levels at 9.17 days lost per FTE. If you remove absence for officers no longer in Dorset Direct (absence takes 12-months to be removed from the calculations), then this would mean that our absence rate would be 6.59 days lost per FTE.

7.7 Top tips:

- Use the process and resources available to you.
- Ensure sickness is entered into DES in a timely manner.
- Liaise and refer to HR&OD for support where necessary.
- Have a consistent and clear approach to how you handle Management of Attendance.
- Follow the guidance given via HR guides and SharePoint.
- Do not underestimate how general health and wellbeing, as well as the impact of the working environment can effect sickness levels.
- Hold regular and comprehensive supervision meetings with your Officers.
- Hold Return to Work Interviews as soon as the employee has returned to work.
- Use all stages of the Management of Attendance process correctly and ensure that timescales are agreed and met.
- Make coming to work a fun, enjoyable and progressive environment

8. Organisational initiatives to reduce sickness absence

8.1 A new Health and Wellbeing intranet site was launched in March 2017, which includes a range of advice, information and interactive resources for all employees. This includes:-

Table 4: New Health and Wellbeing Intranet Site

Resource	Examples of Content (not a complete list)
Short Videos (for viewing by employees or at team meetings)	<ul style="list-style-type: none">• Mental health: Top tips for self-care• Mindfulness• Time Management: making time for you• Relationships & connecting with the community• Managing your stress: the Stress Bucket• Women's Wellbeing / Health and Fitness• Fitness and Exercise Videos

Management of Attendance 2016/17 – Quarter 3

Five Steps to Wellbeing	<ul style="list-style-type: none"> • Connect • Keep Learning • Be Active • Take Notice • Give to others
Talking to Someone	<ul style="list-style-type: none"> • Counselling • Staff Support Groups • Bereavement • Carers Group • Live Well Dorset • Mindful Employer
Learning and Development	<ul style="list-style-type: none"> • Learning on Line: Lots of internal DCC courses • External courses: Skills and learning Dorset Bournemouth and Poole • Books on Prescription: borrow self-help books covering a range of conditions from anxiety and depression through to self-esteem.
Get Active	<ul style="list-style-type: none"> • Get 'Apptive': Dorset AONB have produced a set of three apps that bring the landscape of the South Dorset Ridgeway to life. Download to your phone and switch on your GPS and – once you hit the right spot – you'll be immersed in a pool of music, natural sounds and voices echoing down the years. The first takes in Chapel Coppice and the Grey Mare and her colts, a long barrow and burial chamber. The second app covers Hardy's Monument and the Bronkham Hill Barrow and the third features soundscapes around Kingston Russell and the Culliford Tree Barrow. • Natural Choices: offers activities with a focus on nature to help you get fit and feel good. • Step or activity apps: Couch to 5k, Spotify Running, •S health (Samsung), Fitbit, Google Fit, 7 minute Workout
Take Notice	<ul style="list-style-type: none"> • The Worry tree • Stress Action Plan • Mindfulness • Moodgym • Samaritans • Cognitive Behavioural therapy (CBT)
Give to others	<ul style="list-style-type: none"> • Volunteer via DCC • Dorset Volunteer Centre • Events: e.g. Race for Life or Weldmar Hospice care Trust's Colour run or Midnight Walk.

Details of how to access the Health and Wellbeing website has been sent to employees and Managers via a variety of communication methods.

Targeted work is also undertaken with teams recording high levels of absence related to mental health. This approach will be a feature of the Employee Wellbeing Programme for 2017/18.

9. Comment / Observation

Whilst there are peaks and troughs of sickness over quarters, there is a consistent pattern of services with higher and lower sickness absence rates. By focusing on areas of best practice and sharing the learning managers have further opportunity to apply the learning from their peers. In a similar vein, focusing on areas with high sickness rates provides further impetus for managers to find a solution for their

Management of Attendance 2016/17 – Quarter 3

service. Next quarters sickness data excludes sickness from leavers and is more reflective of the immediate situation.

10. Recommendations

- 10.1 The learning from Dorset Direct is communicated widely to all DCC managers as a case study to assist other services in managing sickness.
- 10.2 Dorset Passenger Transport produces a follow up report to Staffing Committee, which includes the new system for reporting PA absence and managing return to work interviews.
- 10.3 For the next Staffing Committee, Adults and Community Services are asked to update Staffing Committee in person. Finance and Governance and Assurance Services are asked to produce written commentary on their high absence levels and their proposals to resolve.

Sheralyn Huntingford
Head of Human Resources and Organisational Development

April 2017

**Staffing Committee
Quarterly Directorate Sickness Report - December 2016**

The figures quoted below are calculated on a quarterly, rolling-year basis.

Annual Sickness Performance			Sickness Performance Targets 2016/17	
FTE working days lost per FTE employee			FTE working days lost per FTE employee	
Year	Target	Actual	Directorate	Target
2005 / 2006	8.00	8.16	Adult & Community Services	7.11
2006 / 2007	7.50	8.48	Children's Services	6.75
2007 / 2008	7.75	8.27	Environment & The Economy	7.65
2008 / 2009	6.85	8.74	Chief Executive's Department – PPC and Business Development	4.50
2009 / 2010	8.20	7.98	Chief Executive's Department – Support Services	5.94
2010 / 2011	8.20	8.26	Dorset Waste Partnership	9.74
2011 / 2012	8.09	8.33	Public Health	4.50
2012 / 2013	7.69	8.38	DCC (Non-Schools) (excl. DWP & PH)	6.87
2013 / 2014	7.81	7.36	DCC (Non-Schools) (incl. DWP & PH)	7.16
2014 / 2015	7.20	8.24		
2015 / 2016	7.15	7.30		

Actual Performance against Sickness Targets								
FTE working days lost per FTE employee								
Directorate	2014/15	2015/16				2016/17		
	Mar 15	Jun 15	Sep 15	Dec 15	Mar 16	Jun 16	Sep 16	Dec 16
Adult & Community Services	9.92	9.77	8.40	7.68	8.09	8.67	8.94	9.49
Children's Services	9.84	9.87	9.71	9.42	9.23	9.51	10.12	9.97
Environment & The Economy	8.91	9.18	8.55	9.04	9.49	9.73	9.13	8.03
Chief Executive's Department - Support Services	7.30	7.82	8.00	7.74	6.96	6.54	6.27	-
Chief Executive's Department - CD	5.37	5.01	3.98	3.65	3.83	4.65	5.97	6.82
CED-Finance & Procurement	-	-	-	-	-	-	-	8.87
CED-Legal, Democratic, HR&OD, Transformation	-	-	-	-	-	-	-	4.93
Dorset Waste Partnership	13.47	13.02	12.54	11.56	11.82	14.44	15.66	15.69
Public Health	3.51	4.70	5.37	4.28	4.42	4.10	3.88	5.79
DCC (Non-Schools) (excl. DWP & PH)	9.25	9.30	8.64	8.46	8.52	8.76	8.83	8.79
DCC (Non-Schools) (incl. DWP & PH)	9.56	9.57	9.00	8.74	8.84	9.35	9.53	9.55

DCC Staffing Figures								
Full-Time Equivalent (FTE) figures by Directorate								
Directorate	2014/15	2015/16				2016/17		
	Mar 15	Jun 15	Sep 15	Dec 15	Mar 16	Jun 16	Sep 16	Dec 16
Adult & Community Services	1,510.55	1,466.07	724.44	705.68	688.93	666.85	665.85	675.09
Children's Services	934.19	939.08	911.23	902.47	893.62	885.24	821.61	812.89
Chief Executive's Department	591.30	593.40	578.63	566.37	544.11	544.10	530.31	318.52
Environment & The Economy	796.01	800.19	774.17	769.06	784.87	775.63	786.10	987.29
Dorset Waste Partnership	358.45	340.01	340.64	358.09	361.09	366.09	353.19	367.77
Public Health	35.42	35.02	36.03	37.03	34.03	35.44	35.57	35.09
DCC (Non-Schools) (excl. DWP & PH)	3,832.05	3,798.75	2,988.47	2,943.58	2,911.53	2,871.82	2,803.87	2,793.79
DCC (Non-Schools) (incl. DWP & PH)	4,225.91	4,173.79	3,365.14	3,338.7	3,306.65	3,273.35	3,192.63	3,196.65

Management of Attendance 2016/17 – Quarter 3

APPENDIX TWO

Quarterly Directorate and Service Sickness Report – Target vs. Actual

The below figures have been taken from DES as at 20 January 2017 for the period 1 January 2016 to 31 December 2016

Directorate	Directorate Target 2016/17 (Pro Rata days lost per FTE)	Directorate Actual (Pro Rata days lost per FTE)	Increased/decreased by	Pro Rata Days Lost per FTE (Long Term)	Pro Rata Days Lost per FTE (Short Term)	Service	Service Target 2016/17 (Pro Rata days lost per FTE)	Service Actual (Pro Rata days lost per FTE)	Pro Rata Days Lost per FTE (Long Term)	Pro Rata Days Lost per FTE (Short Term)	
Adult & Community Services	7.11	9.49	↑	0.55	5.03	4.46	Adult Care	7.75	11.84	6.53	5.32
							Business Development and Performance	7.11	6.39	2.82	3.58
							Commissioning - Adult Care and Carers	7.11	9.45	4.70	4.75
							Commissioning - LD, MH, Housing & Prevent	7.11	4.02	0.00	4.02
							Early Help & Community Services	5.50	5.93	2.62	3.31
							Safeguarding and Quality	7.11	10.98	7.72	3.26
Children's Services	6.75	9.97	↓	0.15	6.06	3.91	Care and Protection	7.50	13.25	8.78	4.47
							Design & Development	6.00	10.49	4.65	5.84
							Partnership & Prevention	6.50	6.98	3.95	3.03
Chief Executive's Department – Corporate Development (formerly Chief Executive's Office)	4.50	6.82	↑	0.85	3.92	2.90	Corporate Development	4.50	7.10	4.15	2.96
CED- Legal, Democratic, HR&OD, Transformation	5.00	4.93	N/A	N/A	0.97	3.96	Governance & Assurance Services	4.50	9.09	4.97	4.12
							Legal and Democratic Services	5.00	4.62	0.71	3.91
							Human Resources & Organisational Development	5.75	4.72	0.76	3.96
CED-Finance & Procurement	7.00	8.87	N/A	N/A	3.16	5.71	Financial Services	7.00	8.87	3.16	5.71
Environment & the Economy	7.65	8.03	↓	1.10	3.95	4.08	Business Improvement Team	4.50	2.89	0.00	2.89
							Crew & Compliance	10.00	13.62	8.69	4.93
							Economy (excluding C&C)	7.00	10.64	6.84	3.80
							Environment	7.00	5.87	2.57	3.30
							Highways	7.00	7.97	3.59	4.38
							ICT & Customer Services (excluding DD)	4.25	4.26	0.55	3.71
							Dorset Direct	10.00	10.01	2.93	7.08
Dorset Waste Partnership	9.74	15.69	↑	0.03	9.81	5.88					
Public Health	4.50	5.79	↑	1.91	1.51	4.29					
DCC Total (excl. DWP& PH)	6.87	8.79	↓	0.09	4.63	4.16					
DCC Total (incl. DWP& PH)	7.16	9.55	↑	0.02	5.19	4.36					

Note: Quarterly comparison is not possible with the CEX data this quarter due to the the recent reorganisation