Staffing Committee

Dorset County Council



Date of Meeting	28 January 2019
Officer	Service Director for Organisational Development
Subject of Report	Management of Attendance 2018/19 – Quarter 3 (October to December 2018)
Executive Summary	Sickness absence in DCC remains below the average for local authorities, albeit there has been a quarterly rise in absence from 7.7 to 8.3 days per person. Mental health related absence has fallen slightly, but seasonal related absence (including ear, nose, throat and respiratory) has risen.
	As we move towards the creation of the unitary councils, many employees are combining their substantive duties with additional activities related to the new council. Sickness absence continues to be closely monitored by leadership teams and appropriate support and interventions are being made.
Impact Assessment:	Equalities Impact Assessment:
	No separate EqIA has been conducted / is required, although the Council's policy on the management of attendance is itself subject to EqIA considerations.
	Use of Evidence:
	The report is wholly evidence-based. Sickness targets have been established on a common basis applicable to all categories and groups of staff.
	Budget:
	There are no direct cost implications arising from this report.

	Risk Assessment:
	No specific decision is requested in the relation to this report. The associated risk is low.
	Other Implications:
	Not applicable.
Recommendation	Staffing committee members note the sickness trends and the actions being taken to improve health, wellbeing and attendance.
Reason for Recommendation	To provide a focus for the effective management of attendance within the Council.
Appendices	Appendix: DCC Management Dashboard as 2.1.19
Background Papers	None
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1. Introduction

1.1 This report considers Quarter 3 sickness data (October to December 2018), and refers to the Council's quarterly and annual sickness data trends.

2. DCC sickness absence: a yearly perspective

Table 1: Sickness absence in DCC for the last 24 months.

Date	DCC (excluding schools) Average days lost per full time equivalent (FTE)
December 2016	9.55 *
March 2017	8.35
June 2017	8.44
September 2017	8.53
December 2017	7.95
March 2018	8.25
June 2018	8.24
September 2018	7.70
December 2018	8.30

Note: where indicated *, the data report parameters included sickness data from leavers. From March 2017, sickness reports exclude leaver's sickness absence

- 2.1 Sickness absence has increased by 0.60 days in the last quarter. This is the largest quarterly rise in 2 years, albeit from the lowest rate of absence.
- 2.2 Sickness absence remains lower than December 2016, but 0.35 days higher than December 2017.

3. Ill-health retirements and dismissals

3.1 For the twelve month period ending Q3 2018/19, the Council dismissed 11 employees due to medical incapability plus 2 ill health retirements. This compares with 16 medical

incapability dismissals and 1 ill health retirement for the previous twelve month period ending Q2 2018/19. For each individual directorate:

- Adult and Community Services dismissed 1 employees due to medical incapability, no ill-health retirement.
- Children's Services dismissed 2 employees due to medical incapability, 2 ill-health retirements.
- Economy and Environment dismissed 5 employees due to medical incapability, no ill-health retirements.
- Chief Executives dismissed no employees due to medical incapability, no ill-health retirements.
- Dorset Waste Partnership (DWP) dismissed 3 employees due to medical incapability, no ill-health retirements.

4. Table 2: Reasons for sickness absence: (Q3: October to December 2018). All DCC (excl. Tricuro and Schools).

This report is used to track sickness absence trends and instigate preventative interventions.

	Pro Rata Days	Sickness Cost	% Days Lost Q3 by Sickness	% Days Lost previous	Change since	
Sickness Reason	Lost Q3	Q3 £	Reason	Quarter	last Quarter	
ANXIETY/DEPRESSION	1,044	103,701	14.1%	14.5%	-0.4%	
CANCERS/TUMOURS	475	47,361	6.4%	10.2%	-3.8%	
CARDIOVASCULAR	164	13,773	2.2%	1.7%	0.5%	
DIGESTIVE SYSTEM	757	62,089	10.3%	13.3%	-3.0%	
EAR,NOSE, THROAT	823	78,596	11.2%	6.2%	5.0%	
ENDOCRINE/GLANDULAR	27	2,446	0.4%	0.5%	-0.1%	
FROZEN SHOULDER	4	256	0.0%	0.0%	0.0%	
INFECTIOUS DISEASES	87	5,852	1.2%	0.9%	0.3%	
MISCELLANEOUS	95	14,725	1.3%	0.7%	0.6%	
NECK/BACK PROBLEMS	498	48,245	6.8%	6.5%	0.3%	
NERVOUS SYSTEM	147	13,190	2.0%	4.0%	-2.0%	
OTHER MENTAL HEALTH	206	15,390	2.8%	2.2%	0.6%	
OTHER MUSCLOSKELTAL	1,005	69,848	13.6%	13.7%	-0.1%	
REPRODUCTIVE AND URI	295	25,007	4.0%	5.0%	-1.0%	
RESPIRATORY	661	57,636	9.0%	4.6%	4.4%	
RHEUMATISM/ARTHRITIS	27	882	0.4%	0.1%	0.3%	
RSI/UPPER LIMB DISOR	65	5,564	0.9%	1.6%	-0.7%	
SKIN RELATED	102	7,140	1.4%	2.0%	-0.6%	
STRAINS/SPRAINS	125	9,244	1.7%	1.2%	0.5%	
STRESS	765	88,750	10.4%	10.9%	-0.5%	
TENNIS ELBOW	4	698	0.1%	0.0%	0.1%	
Grand Total	7,377	670,393	100.0%	100.0%		

- 4.1 Mental Health related absence has reduced from 34.7% of all absences in Q1, 27.6% in Q2, to 27.3% in Q3
- 4.2 The sickness reasons for Q3 are similar to Q2, other than a rise in seasonal related absence (e.g. ear, nose, throat and respiratory).
- 4.3 The cost of absence in Q3 is £670,393 (Q2 costs were £551,245)
- 4.4 The number of sickness days absence in Q3 is 7,377 (Q2 absence was 6,266 days)

5. Mental Health-related sickness

Table 3: Mental health related sickness October 2018 - December 2018

	Non Wor	k Related	Work	Related	TOTAL		
Directorate		Sum of		Sum of	TOTAL Pro-	TOTAL	
Directorate	Pro Rata Days	Sickness Cost	Pro Rata	Sickness Cost	Rata Days	Sickness	
	Lost	£	Days Lost	£	Lost	Cost £	
Adult & Community Services	202	19,767	49	8,957	251	28,724	
Children's Services	561	63,775	191	22,510	752	86,285	
Dorset Waste Partnership	350	28,469	3	194	353	28,663	
Environment & Economy	368	38,116	163	15,275	531	53,391	
Finance & Procurement	15	1,132	29	2,413	44	3,545	
Organisational Development	16	1,138	0	0	16	1,138	
Public Health	50	4,189	19	1,907	69	6,096	
Grand Total	1,562	156,586	454	51,256	2,015	207,841	

5.1 Employees can record their mental health related sickness as either work related or non-work related. Approximately three-quarters of mental health absences in DCC are non-work related.

6. Musculoskeletal absence

Table 5: Musculoskeletal related sickness (January 2018 to December 2018 v October 2017 to September 2018)

			Previous results	Previous results	
	Pro Rata Days Lost	Sickness Cost (Jan	(Pro-rata days lost	(Sickness Costs Oct	
Directorate	(Jan 18 to Dec 18)	18 to Dec 18) £	Oct 17 to Sept 18)	17 to Sept 18) £	
Adult & Community Services	784	64,521	815	68,489	
Children's Services	1,274	122,744	1,215	113,507	
Dorset Waste Partnership	2,132	147,972	2,138	144,703	
Environment & Economy	1,678	119,152	1,586	113,703	
Finance & Procurement	52	4,015	53	4,253	
Organisational Development	74	7,118	51	4,556	
Programme	0	0	1	86	
Public Health	78	11,242	74	10,984	
Grand Total	6,071	476,764	5,933	460,262	

- 6.1 There has been a 2% increase in musculoskeletal absence for in the current reporting period.
- 6.2 There are a number of preventative measures in place to reduce musculoskeletal absence, including selection exercises, induction, risk assessments and manual handling and lifting training.
- 6.3 The detailed data on musculoskeletal absence has been shared with Health and Safety, senior managers and Occupational Health who are all reviewing the need for any additional interventions.

7. Update on sickness management at Dorset Travel Team

At the last meeting, Staffing Committee asked for an update on sickness management at the Dorset Travel team. Members may recall Dorset Travel has a new sickness monitoring system, where employees who are absent have a conversation with their manager normally within 24 hours of their absence. This improved monitoring system is an essential building block for improved attendance, but its success can best be measured on a longer-term basis. This system won't reduce the sickness of individuals who already are on long term sickness which remains stubbornly high. The Service Director and Dorset Travel Manager are reviewing each long-term sickness case to ensure that appropriate support and interventions are being made.

8. Comment / Observation

Although the quarterly rise in sickness absence is disappointing, absence continues to be well managed and below local authority average rates. As we move towards the creation of the unitary councils, many employees are combining their substantive duties with additional activities related to the new council. Employees continue to access Health and Wellbeing services which are designed to increase resilience and health during a time of transition and change.

Grace Evans Service Director for Organisational Development

January 2019

APPENDIX

High Level DCC Dashboard as at 1.1.19

Organisation	Manager	RTW	RTW	Sickness	Headcount	% of working	Sickness Days	Sickness Days	
		Interviews	Interviews	Days Lost	FTE	days lost per	Lost Per FTE	Lost per FTE	Direction of
			%			fte 1.1.19*	1.1.19	1.10.18	Travel
Dorset County Council	Mr Michael Harries	4,929	79%	26,475	3,180	3.6%	8.3	7.7	<u> </u>
Adult & Community Services	<vacant position=""></vacant>	1,044	89%	4,635	620	3.3%	7.5	6.8	
Adult Care	<vacant position=""></vacant>	705	89%	3,268	417	3.4%	7.8	6.4	1
Commissioning, Partnership & Quality	Mr Paul Leivers	339	88%	1,366	203	2.9%	6.7	6.8	ļ
Children's Services	Mr Nicholas Jarman	1,239	79%	6,801	798	3.7%	8.5	7.6	Ţ
Care and Protection	Mr Kevin Peers	504	76%	3,084	319	4.2%	9.6	8.9	T T
Commissioning & Partnerships	Miss Claire Shiels	349	81%	1,782	211	3.7%	8.4	7.7	†
Schools & Learning Service	Mr Andrew Reid	354	85%	1,474	227	2.9%	6.5	5.9	<u>†</u>
Dorset Waste Partnership	Ms Karyn Punchard	693	90%	4,390	437	4.4%	10.0	9.3	Ť
DWP Finance and Commercial	Mr Paul Ackrill	34	94%	237	13	8.1%	18.5	15.7	1
DWP Operations	Mr Michael Moon	603	89%	3,959	387	4.5%	10.2	9.4	
DWP Strategy	Mrs Gemma Clinton	54	98%	172	36	2.1%	4.8	5.5	1
Environment & Economy	<vacant position=""></vacant>	1,251	66%	8,125	931	3.8%	8.7	8.3	T T
Corporate Development	Mrs Karen Andrews	65	88%	211	51	1.8%	4.1	4.6	1
Environment, Infrastructure & Economy	Mr Matthew Piles	867	60%	6,533	664	4.3%	9.8	n/a	restructured
ICT and Customer Services	Mr Richard Pascoe	319	89%	1,381	215	2.8%	6.4	7.1	1
Finance & Procurement	Mr Richard Bates	344	90%	1,006	179	2.5%	5.6	6.4	1
Estate & Assets	Mr Peter Scarlett	64	79%	154	30	2.3%	5.2	5.3	1
Financial Services	Mr W illiam Mcmanus	180	91%	616	107	2.5%	5.8	7.1	1
Organisational Development	Mr Jonathan Mair	315	93%	1,151	146	3.5%	7.9	7	<u>†</u>
Democratic Services	Mr Lee Gallagher	22	81%	166	11	6.8%	15.6	8.5	T T
Governance & Assurance Services	Mr Mark Taylor	13	100%	29	6	2.1%	4.9	7.9	<u>†</u>
HR Operations	Mr Christopher	183	95%	347	62	2.5%	5.6	5.4	<u> </u>
	Matthews						J.0	3.4	'
HR Specialist Services	Mr Carl Wilcox / Mrs	33	94%	71	30	1.0%	2.3	3	<u> </u>
Legal Services	Miss Grace Evans	62	90%	534	35	6.6%	15.1	12.9	<u>†</u>
Public Health	Doctor David Phillips	40	50%	362	57	2.8%	6.4	4.6	1

^{*%} of working days lost = 365 - 137 non working days (104 weekends, 25 days leave, 8 days public hols) = 228 working days