

Committee: **Corporate Overview Scrutiny Committee**  
Date of meeting: **10<sup>th</sup> September 2021**  
Report Subject: **Sickness Absence Performance 2020/21**  
Portfolio Holder: **Councillor Daniels, Leader / Executive Member**  
Report Submitted by: **Andrea J Prosser, Head of Organisational Development**

Reporting Pathway								
Directorate Management Team DMT	Corporate Leadership Team	Portfolio Holder / Chair	Audit Committee	Democratic Services Committee	Scrutiny Committee	Executive Committee	Council	Other (please state)
25.08.21	26.08.21	29.08.21			10.09.21	22.09.21		

## 1. Purpose of the Report

- 1.1 The purpose of this report is to provide Elected Members the opportunity to scrutinise and challenge the sickness absence performance for 2020/21, the continued actions to support improvement in attendance and recognise the positive attendance of the majority of the workforce.

## 2. Scope and Background

- 2.1 Staff attendance is critical in delivering Council priorities and is a key performance indicator reflected in the quarterly Finance and Performance report. Whilst sickness levels remain high, it is important to note that the majority of staff have little or no sickness absence and attend work regularly.
- 2.2 Improving attendance remains a key priority and is identified as a key risk for the Council as it is acknowledged that high levels of sickness absence will have a detrimental impact on the ability of the Council to deliver services.
- 2.3 During 2020/21 the Council like all workplaces had to rise to the enormous challenge of responding to the coronavirus (COVID-19) pandemic and the dramatic impact it had on the way the Council had to work, prompting a transformation to working practices on an unprecedented scale to safeguard people's health, safety and wellbeing. This resulted in delivery of critical services only, with other available resources being redeployed to support the response.

### 2.4 Managing Sickness Absence

- 2.4.1 The Council has in place a range of measures to assist in the effective management of sickness absence which are outlined below:
- An Attendance Management Policy.
  - Training/briefing sessions for managers.
  - A policy and toolkit for managing stress.
  - An extensive range of flexible working arrangements.
  - Regular discussion and learning nationally and regionally.
  - Managers recognising good attendance and supporting wellbeing.

- Sickness absence targets set by the Corporate Leadership Team.
- Development of iTrent to provide sickness absence data to managers in real time and access to a dashboard of sickness absence data.
- Performance data provided to the Corporate Leadership Team, Heads of Service and Elected Members on a quarterly basis.
- Sickness performance on Directorate Management Teams, team meetings and an objective for managers as part of annual performance coaching.
- Reviews of 'hot spots', and top 20 long terms cases within services.
- Health, Safety and Welfare Corporate Group.

## 2.5 **Employee Wellbeing**

2.5.1 Employee wellbeing is intrinsically linked to levels of attendance. Wellbeing is more than an avoidance of becoming physically sick. It represents a broader concept that includes physical, mental and social health.

2.5.2 The Council has an Employee Assistance Programme (EAP) for employees which provides a range of services including counselling, advice and information. During the pandemic the Council has actively promoted well-being sessions and the opportunity to access the EAP.

2.5.3 The Occupational Health Service which supports managers with employee wellbeing and the management of sickness absence operated remotely during the pandemic. This new model of service delivery will continue as there has been no detrimental impact on outcomes and the service is more accessible for staff with attendance at clinics improved.

2.5.4 In addition, the Council has introduced a weekly wellbeing bulletin for staff branded 'Wellbeing Wednesday' which provides a range of wellbeing information and resources.

2.5.5 The Council working in partnership with the Trade Unions and other partners delivered Mental Health Awareness training to establish a base of knowledge that can be used on which to build greater development and resources. To date the following activities have been completed;

- Mental Health Awareness courses for employees (76 attendees)
- Mental Health Awareness for Managers (49 attendees)
- i-act Mental Health Awareness for Managers (47 attendees)

2.5.6 Awareness training for employees and managers will continue to be delivered and this will enable a cohort of employees able to understand and identify colleagues who may be at risk of, or are experiencing, mental health issues.

## 2.6 **Workforce Strategy 2021-26**

2.6.1 The Workforce Strategy 2021-26 aims to build on existing good practice and to promote the Council as a safe, healthy and supportive environment in which to work and will have a strategic focus on wellbeing which will play a significant role in supporting attendance at work.

2.6.2 The COVID-19 pandemic has changed the way we work with staff having worked away from the office during lockdown. The Workforce Strategy will support the workforce to transition from responding to the emergency situation and act as a key lever to facilitate transformational change and performance improvement.

## 2.7 Workforce Engagement

2.7.1 The Council recognises the critical need to communicate and engage staff, detailed below are a range of the mechanisms used to engage staff:

- Regular 121s / performance coaching / team meetings
- Weekly Managing Director newsletter and wellbeing bulletin
- Staff newsletter/Managers brief
- A dedicated engagement and consultation framework with trade unions
- Bi-annual staff surveys and pulse surveys
- Engagement and communication plan for agile working

## 2.8 Recovery following the Pandemic

2.8.1 Workforce is a key theme as part of the Council's Recovery Plan, it is acknowledged that COVID-19 will not disappear and a continuing priority will be to manage the capacity of the workforce to ensure that services are delivered.

2.8.2 A new Council Operating Model was agreed at Council in March 2021 to include moving to an Agile Working Policy which is a key enabler in delivering this new operating model. The Recovery Plan and the Workforce Strategy will link to the Council's vision for sustainable development including sustainable economic growth, de-carbonisation and the health and well-being of both staff and the community.

2.8.3 The health, safety and wellbeing of staff has remained a key priority as we move to more business as usual with the following in place:

- Workplace risk assessments to manage the risk of COVID-19.
- Staff to continue to work from home where possible.
- Encouraging and supporting staff to take up the COVID-19 vaccination
- Asymptomatic Lateral Flow Testing.
- Ongoing wellbeing support for staff impacted by the pandemic.
- Promotion and encouragement for staff to take up the flu jab.

2.8.4 It is also anticipated that the Council's workforce will be impacted by the NHS treatment waiting lists which could lead to an increase in sickness levels. Also anticipated is a surge in seasonal illnesses with increased prevalence of influenza, winter bugs etc.

## 3. Options for Recommendation

CLT in consideration of the performance information will continue to keep sickness under review, through Directorate Management Teams, ensuring the effective and timely management of cases.

- 3.1 **Option 1**  
That the Scrutiny Committee having scrutinised the sickness absence performance information and the ongoing actions to support improved attendance within the Council identify any further areas for improvement in order to drive forward performance improvement.
- 3.2 **Option 2**  
That the Scrutiny Committee endorse the report and the ongoing actions to support improvement in attendance.
4. **Evidence of how does this topic supports the achievement of the Corporate Plan / Statutory Responsibilities / Blaenau Gwent Well-being Plan**
- 4.1 The management of attendance is a critical strand in managing the capacity of the workforce to deliver services to the community of Blaenau Gwent and achieve the priorities laid out in the Council's strategic planning documents.
- 5 **Implications Against Each Option**
- 5.1 **Impact on Budget (short and long term impact)**  
There are direct and indirect costs of sickness absence which are a key driver in the Council's approach to effectively improve attendance at work.
- 5.2 **Risk including Mitigating Actions**  
The underperformance in relation to the high levels of sickness absence does present a significant risk in terms of the impact on front line service delivery and continuity through lost time and staffing changes. In addition, the financial implications associated with sickness absence directly impact on the Council's budget. Mitigating actions are detailed within the report.
- 5.3 **Legal**  
There are no legal implications arising from this report.
- 5.4 **Human Resources**  
The staffing implications are detailed within the content of the report.
6. **Supporting Evidence**
- 6.1 **Performance Information and Data**
- 6.1.1 The overall year end outturn figure for the Council of 11.67 days per full time equivalent (FTE) employee (9.98 days excluding COVID-19 sickness) sees a decrease from the previous year's outturn of 13.91 days (13.48 days excluding COVID-19 sickness) however exceeds the target set of 10.50 days. When comparing the overall outturn with the previous year, there has been a decrease of 2.24 days.
- 6.1.2 When excluding sickness absence related to COVID-19 which includes confirmed cases and those with symptoms the outturn figure reduces to 9.98 days an overall reduction of 3.93 days bringing the outturn figure below the corporate target.

- 6.1.3 The total days lost represents a loss in productivity equating to 115 extra employees being available to work for the full year. The calculation applied is based on 220 working days per year per FTE employee.
- 6.1.4 Over the last five years the Council has had sustained absence levels with three of the last five years exceeding 12 days sickness absence per FTE employee. Since 2017/18 the Council has experienced year on year increases in the levels of absence up to 13.91 days lost at its highest in 2019/20, with 2020/21 seeing a reduction of over 2 days per FTE employee. Table 1 appended sets out the trend over the current and previous years.
- 6.1.5 74% of all absence in the Council is more than 4 weeks and is classed as long term which has been the pattern over the last few years, with short term absence accounting for 26% of overall absence. Table 2 appended details the breakdown of short and long term absence by directorate.
- 6.1.6 Table 3 appended details the number of formal warnings, dismissals and ill health retirements during 2020/21 and the previous two years.
- 6.1.7 The top 5 cause of days lost in the Council equate to over 81% of all sickness absence with mental health (stress, anxiety and depression) being the top cause at 38%. Table 4 appended sets out the top five causes of absence which mirrors closely the previous year, however COVID-19 accounted for 14.4% of all sickness coming above cancer and gastro – intestinal conditions.
- 6.1.8 A breakdown of sickness absence by service area is appended at Table 5 the key headlines are detailed below:

- 14 services came within target - of which 10 saw a reduction from the previous year (9 of the 10 having more than a 25% reduction in sickness), 1 stayed the same with no sickness and 3 services had increasing levels of sickness in comparison to the previous year and are detailed below:

Services within target with increase in sickness	20/21	19/20	
Commercial Services - Benefits / Comm, Marketing & Customer/ICT/Procurement/Transformation.	4.33	3.98	↑
Governance & Partnerships	8.14	6.45	↑
Legal Services	4.75	4.07	↑

- 5 services exceeded the target and are detailed below. (2 services whilst exceeding the target saw a reduction in sickness from the previous year)

Services exceeding target	20/21	19/20	
Community Services	11.57	19.35	↓
Adults Services ( excluding Provider Services)	12.84	N/A	
Provider Services	39.25	N/A	
Adult Services (Total for comparative purposes)*	29.64	22.12	↑
Children's Services	14.68	11.87	↑
School based staff excluding teachers	12.03	13.98	↓

\*Included to enable year on year comparison

- 6.1.9 The COVID-19 pandemic has affected sickness absence in a number of ways; while the virus may have led to sickness absence including 'Long COVID', measures such as the furloughing of staff, social distancing, shielding and increased homeworking appear to have helped to reduce other causes of absence, which has resulted in a general downtrend on sickness absence. However, the impact on those sick with longer term conditions which makes up over 74% of all sickness has been negatively affected where treatments may have stopped or been delayed.
- 6.1.10 Homeworking increased significantly during 2020/21 with the introduction of the lock down measures in March 2020 and which continued throughout 2020/21. This, together with the other measures introduced by the Government led to less exposure to germs and minimised some of the seasonal sickness such as winter bugs, cold and coughs and influenza. Homeworking also allows employees to work when they may be a little unwell, they might not travel to a workplace to work but feel well enough to work from home.
- 6.1.11 Occupational groups will have been affected differently by the pandemic, which might have an effect on their sickness absence rates, in addition the ability to work from home would be very different across these groups. Key workers within the Council continued to work on the front line delivering services to the community throughout the pandemic.
- 6.1.12 The all Wales comparative data for 2019/20 and 2020/21 is detailed in Appendix 2. This data has been anonymised as the 20/21 information has not been published. In 2020/21 the Council reports the highest days lost, with the best performing reporting 5.41 days.
- 6.1.13 Available data for 2021/22 indicates an increase in sickness absence in the first quarter (outturn 3.26 days) in comparison to the same period in 2020/21 (outturn 2.41 days).
- 6.2 **Expected outcome for the public**  
Information included within the report will provide opportunity for the public to scrutinise the Council's performance and provide accountability across the Council.
- 6.3 **Involvement (consultation, engagement, participation)**  
The Trade Unions believe it is everyone's interest to reduce sickness absence levels to an acceptable level and will continue to work positively with the Council to achieve this.
- 6.4 **Thinking for the Long term (forward planning)**  
Options detailed in this report contribute directly to enabling the workforce for the future.
- 6.5 **Preventative focus**  
The Workforce Strategy 2021-2026 will focus on prevention.
- 6.6 **Collaboration / partnership working**  
There are regular discussions with the national Human Resources Directors Network and regionally in terms of good practice or emerging practice in reducing sickness absence.

6.7 **Integration (across service areas)**

NA

6.8 **Decarbonisation and Reducing Carbon Emissions**

The Workforce Strategy and the Council's Recovery plans will link to the Council's agenda for de-carbonisation.

6.9a **Socio Economic Duty Impact Assessment**

The Council is the largest employer in Blaenau Gwent and the management of the well-being of the workforce will most certainly directly impact on communities.

6.9b **Equality Impact Assessment**

The Managing Attendance Policy is equally applied to the Council's workforce.

7. **Monitoring Arrangements**

7.1 Sickness absence statistics are reported to the Corporate Leadership Team (CLT) and Scrutiny Committee on a quarterly basis and an annual performance report is presented to Corporate Overview Scrutiny Committee. Biannual workforce profiles are discussed with Managers and Headteachers.

**Background Documents /Electronic Links**

Appendices 1 and 2

**Table 1 – Sickness Days Lost Per Full Time Equivalent Employee**

Council - Days Lost per FTE							
2016/17	2017/18	2018/19	2019/20	2020/21 All sickness	2020/21 Excl. COVID		
12.49	11.23	12.66	13.91	11.67	9.98		
Directorate - Days Lost per FTE							
Directorate (Historical)	2016/17	2017/18	Directorate	2018/19	2019/20	2020/21 All sickness	2020/21 Excl. COVID
Resources	5.46	7.38	Corporate Services	8.29	8.81	5.67	5.38 ↓
Corporate Services	11.08	6.65					
Education	8.19	6.11	Education	6.94	8.07	4.13	3.40 ↓
School based (Teachers)	11.82	9.07	School based (Teachers)	12.20	11.57	6.45	5.67 ↓
School based (excluding Teachers)	9.77	9.71	School based (excluding Teachers)	10.64	13.98	12.03	10.18 ↓
Environment	18.67	19.19	Regeneration & Community Services	11.21	16.15	10.20	8.74 ↓
Social Services	14.45	13.60	Social Services	18.19	17.81	22.98	19.23 ↑

**Table 2 - Short and long term sickness absence by Directorate.**

Directorate	Short Term %	Long Term %
Corporate Services	22.34	77.66
Regeneration & Community Services	31.36	68.64
Social Services	23.47	76.53
Education	58.29	41.71
Schools	26.26	73.72
BGCBC	26.03	73.97

**Table 3 - Number of formal warnings, dismissals and ill health retirements**

	2018/19	2019/20	2020/21
Number of formal warnings issued	28	22	4
Dismissals	12	6	0
Number of ill health retirements	9	8	2

**Table 4 – Sickness Absence Reasons – Top 5**

Rank 2020/21	Category	% sickness	Rank 2019/20
1	Psychiatric / Mental Health	38.0%	1
2	Musculoskeletal & Injuries	16.9%	2
3	COVID-19 ( confirmed / symptoms)	14.4%	-
4	Cancer	6.6%	3
5	Gastro-intestinal	5.47%	4

**Table 5 – Sickness Absence breakdown by Service**

Attendance Management - Number of days lost per full time equivalent employee											2019/20	
Service Area	FTE as at 31.03.21	Cumulative Qtr 1 Outturn	Cumulative Qtr 1 Outturn (excluding COVID19 ***)	Cumulative Qtr 2 Outturn	Cumulative Qtr 2 Outturn (excluding COVID19 ***)	Cumulative Qtr 3 Outturn	Cumulative Qtr 3 Outturn (excluding COVID19 ***)	Cumulative Qtr 4 Outturn	Cumulative Qtr 4 Outturn (excluding COVID19 ***)	Annual Target	Quarter 4	Quarter 4 (excluding COVID 19)
											Quarter 4	Quarter 4 (excluding COVID 19)
<b>Corporate Services Directorate</b>												
Commerical Services - OD / Social Care Workforce Development /Business Support	124.24	0.50	0.40	1.50	1.39	3.52	3.31	5.94	5.73	8.5	11.56	11.48
Commercial Services - Benefits / Communications, Marketing & Customer Access / ICT / Procurement / Strategy Transformation & Culture	44.83	1.59	1.15	2.10	1.63	3.14	2.67	4.33	3.65	8.5	3.98	3.67
<b>Commercial Services Total</b>	169.07	0.79	0.60	1.67	1.46	3.38	3.08	5.34	4.96	8.5	9.55	9.41
Resources	64.26	1.24	1.17	2.74	2.68	4.48	4.42	6.29	6.23		9.14	8.85
Governance & Partnerships	27.33	6.57	6.57	8.51	8.51	8.08	8.08	8.14	8.14		6.45	6.45
Legal & Corporate Compliance	10.42	0.29	0.00	1.34	1.06	2.84	1.92	4.75	3.82		4.07	3.06
Senior Management *	6.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		3.33	3.33
	277.08	1.41	1.26	2.50	2.35	3.95	3.70	5.67	5.38		8.81	8.62
<b>Regeneration &amp; Community Services Directorate</b>												
Regeneration & Development	89.91	0.85	0.84	1.76	1.67	3.87	2.91	5.56	4.32		7.47	7.00
Community Services	329.46	2.49	2.09	4.24	3.71	7.73	6.32	11.57	9.89		19.35	18.37
Public Protection	42.30	4.21	4.21	7.49	7.41	8.29	8.04	9.11	8.87		11.33	10.91
Senior Management *	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00
<b>Regeneration &amp; Community Services Total</b>	464.67	2.33	2.04	4.05	3.65	7.02	5.81	10.20	8.74		16.15	15.32
<b>Social Services Directorate</b>												
Adult Services (excluding Provider Services)	95.63	3.85	3.33	7.22	6.66	10.15	9.44	12.84	11.91	11	22.12	21.64
Provider Services	174.48	6.84	6.47	14.94	14.36	27.98	23.36	39.25	32.19	22		
Children's Services	201.06	2.90	2.62	6.03	5.62	10.86	9.52	14.68	12.28	11	11.87	11.31
Senior Management *	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0	1.00	1.00
<b>Social Services Total</b>	474.17	4.50	4.14	9.43	8.93	16.78	14.40	22.98	19.23		17.81	17.30
<b>Education Directorate</b>												
School based staff (excluding Teachers)	401.29	2.36	2.19	4.19	3.85	8.48	6.77	12.03	10.18	8.5	13.98	13.70
Teachers	471.69	1.21	1.09	2.64	2.43	5.11	4.46	6.45	5.67	8.5	11.57	11.31
<b>Schools Total</b>	872.98	1.74	1.59	3.35	3.08	6.66	5.53	9.03	7.75	8.5	12.68	12.42
Education Transformation	34.59	0.37	0.36	0.47	0.46	1.65	1.30	4.45	3.52	6	9.42	9.41
School Improvement & Inclusion	14.62	1.09	1.09	1.44	1.44	2.69	2.69	3.87	3.54	6	5.87	4.86
Senior Management *	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6	2.50	2.50
<b>Corporate Education Total</b>	50.21	0.57	0.56	0.74	0.73	1.91	1.68	4.13	3.40	6	8.07	7.76
<b>Education Totals</b>	923.19	1.68	1.54	3.21	2.95	6.39	5.31	8.75	7.50		12.44	12.17
<b>Corporate Totals</b>	2139.11	2.41	2.18	4.67	4.34	8.42	7.15	11.67	9.98	10.50	13.91	13.48

\* Senior Management includes all positions at JNC3 and above

\*\* RAG status is set against service targets however where no targets have been provided the corporate target will be used. In the case of an Amber RAG this is taken as being within 0.5 of a day above the target

\*\*\* COVID19 sickness includes those employee who were unable to work from home and either tested positive for COVID19 or had symptoms

## All Wales Comparative Data

Local Authority	2019/20 Published data	2020/21 Unpublished Data	Movement Year on Year
1	9.4	5.41	3.99↓
2	9.8	6.30	3.50↓
3	8.1	6.50	1.60 ↓
4	8.8	6.68	2.12 ↓
5	8.9	7.16	1.74 ↓
6	10.7	7.70	3.00 ↓
7	9.3	7.73	1.57 ↓
8	9.5	7.80	1.70↓
9	11.4	7.90	3.50 ↓
10	12	7.94	4.06 ↓
11	11	8.08	2.92 ↓
12	12.1	8.13	3.97 ↓
13	11.5	8.41	3.09 ↓
14	10.5	8.59	1.91 ↓
15	11.8	8.60	3.20 ↓
16	12.2	8.65	3.55 ↓
17	12.2	8.80	3.40↓
18	11.9	9.16	2.74↓
19	13.1	9.16	3.94 ↓
20	-	9.30	-
21	12	10.00	2.00↓
Blaenau Gwent	13.9	11.67	2.23↓