



Report to:	Employment & Staffing Committee	15 July 2021
Lead Cabinet Member:	Cllr John Williams	
Lead Officer:	Susan Gardner-Craig – Head of HR and Corporate Services	

SICKNESS ABSENCE 1 JANUARY 2021 TO 31 MARCH 2021

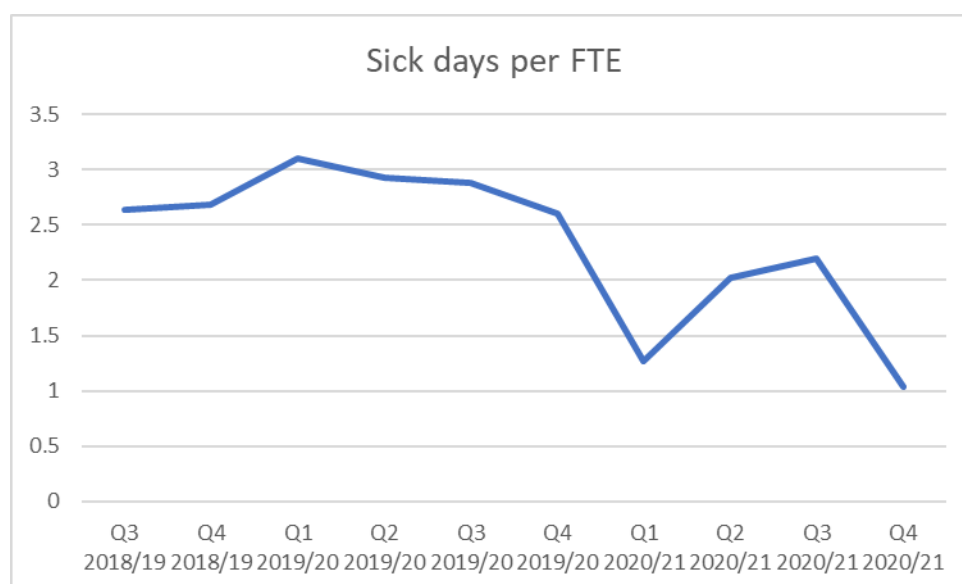
Purpose

1. The purpose of this report is to provide high-level information on sickness absence for the period 1st January 2021 to 31st March 2021 and is a quarterly performance monitoring report.

This is not a key decision because it is for information only.

2. Summary

Our BVPI figure is 1.04 days per FTE (based on 602.13 FTE), which is 47.27% decrease compared to Q3 figure (2.2 days per 572.3 FTE). This is also a 40% decrease compared to Q4 2019-20 (2.6 days per 553.3 FTE).



Please note that all of the data in this Report was obtained using our previous HR System. This changed to Itrent on 1st April 2021. The data in this report was run on 31st March 2021, and there may be a small discrepancy between the data reported; this may be where managers or employees have subsequently completed RTW or submitted Fit Notes.

Our absence figures decreased dramatically since the last quarter and compared to last year. Whilst part of that can be attributed to various measures taken by SCDC and outlined in this report, our results are in line with national data for sickness absence over the past 12 months. The UK sickness absence rate fell to 1.8% to the end of 2020, the lowest level since records began in 1995¹.

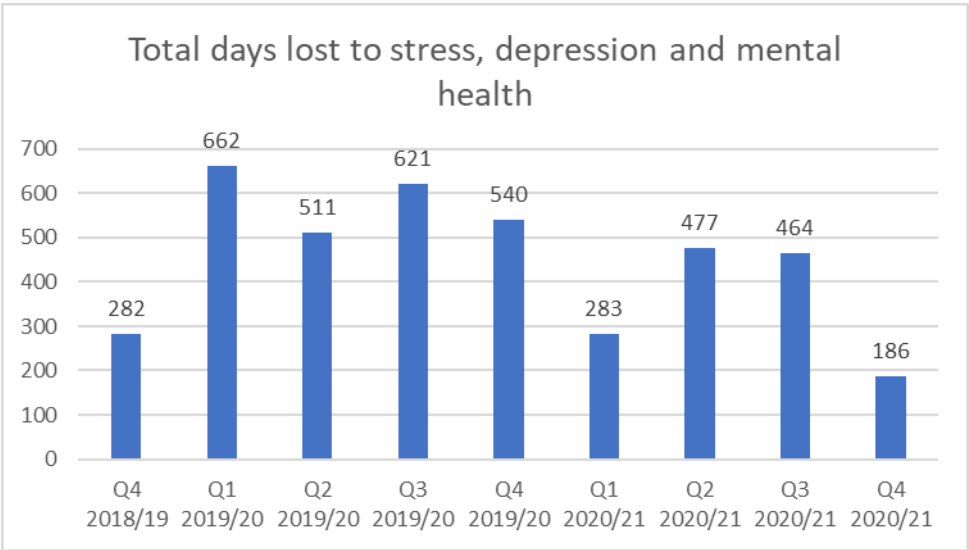
In addition, it is worth noting that according to the ONS, since April 2020-December 2020, coronavirus accounted for 14.0% of all occurrences of sickness absence. This figure is a lot lower in the Council. A significant factor contributing to this is the fact that as many staff are working from home as possible. This ensures that there is limited opportunity for transmission of Covid amongst staff, particularly non-GCSWS staff.

Within this Quarter, 75 employees have had absences due to sickness, meaning 529 employees have not had any absences within this period.

The total days lost in Q4 for SSWS account for 40.1% of total day's absences (243 days from a total of 606 days). This was down from Q3 (767 days from a total of 1258.6 days).

In terms of the reasons behind absences across SCDC, the highest categories for absence are stress, depression & mental health (186), Stomach, liver, kidney & digestion (115), other (82) and Heart, blood pressure, circulation (79). These 4 reasons account for 76% of the total absence for the Quarter. Reasons 2, 3 and 4 have changed from the top reasons from Q3.

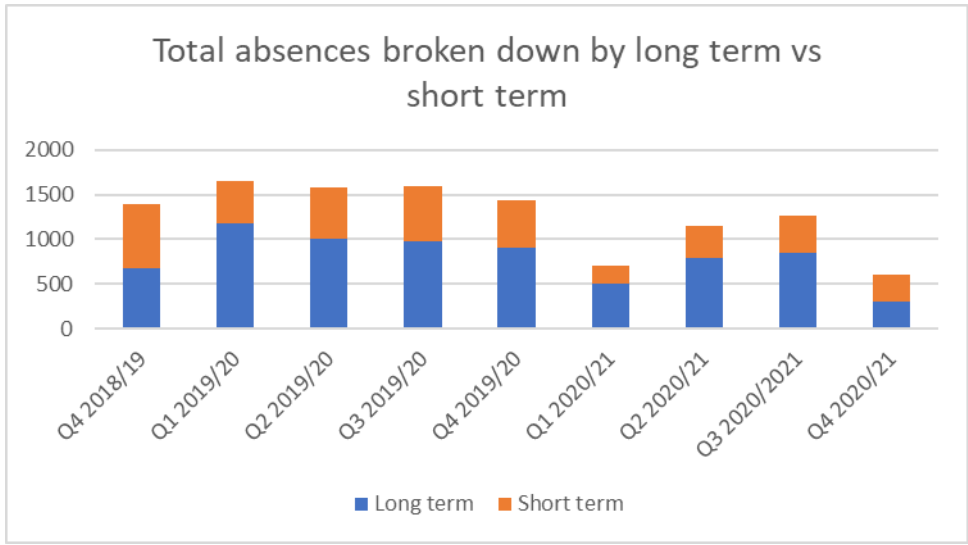
The chart below shows the number of days absence attributed to stress/depression & mental health.



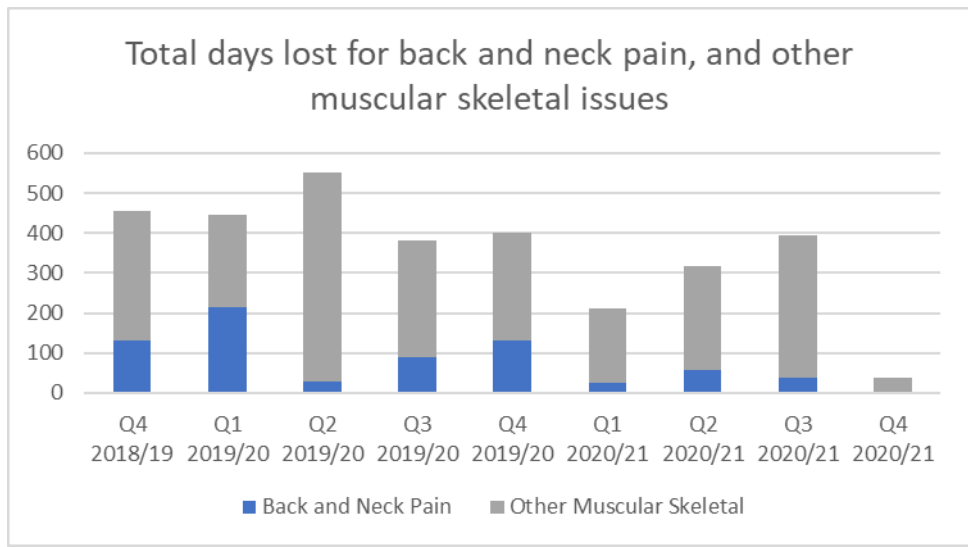
Looking at the breakdown in terms of long-term absences, there were 8 employees with long term absences within the quarter, and they accounted for 308 days (50.7% of the total absence)..

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<https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/labourproductivity/articles/sicknessabsenceinthelabourmarket/2020>



The chart below shows the number of day's absence attributed to Back and Neck Pain, and Other Muscular-Skeletal over that last year. This is usually in the top 3 reasons for absence, including this table for reference.



Summary of isolation and days lost to Covid by department

Department	Number of employees self isolating - in work	Number of employees self isolating unable to work	Working days lost to Covid isolation
Affordable Homes	3	1	5
Sheltered Housing			
Chief Executive Team			
Finance, Policy & Performance			
Business & Customer Services	2		
HR			
Facilities			
Democratic Services & Elections		1	14
Revenues & Benefits			
Health & Environment (ex. GCSW)	2		
GCSW		26	158
GCSPS			
Total	7	28	177

The table above shows working days lost to Covid isolation. Most employees affected were from the GCSWS at the Depot – 158 days. These employees would have been self-isolating at home (not necessarily physically unwell). The 177 days were not recorded as part of the sickness absence, unless, for those who were firstly able to work from home and then secondly they were too unwell to work from home – this would have been very few cases).

During Q4, the HR team have been continuing to work alongside managers, introducing a new way of working/new tools to try to assist managers in proactively managing long term absence. Virtual welfare visits are carried out with all long-term sickness cases. The HR team have also been carrying out weekly checks on

absence rates and highlighting where an absence is due to stress, depression and mental health, to ensure the necessary support has been put in place.

Online Training sessions were scheduled for Q4 entitled “Managing Stress”, however turnout was limited. HR will continue to advertise future sessions via Insite. This follows on from the training session which was held at the Waterbeach depot in December on the use of the stress identification tool and best practise.

We have also been supporting employees during the change to working practices following the Covid-19 outbreak and have been especially focussing on supporting our employee’s mental health through offering weekly wellbeing sessions, circulating useful information, and promoting access to support services such as counselling or the Mental Health First Aid team.

We have also continued to advertise our Employee Assistance Programme (EAP) to all staff and managers, through Insite posts and inclusion on the new monthly HR newsletter. In this quarter we also offered employees the choice of Telephone Counselling (provided through EAP) or Video Counselling (provided by Evolve). There has been some uptake of the Video Counselling, where staff felt uncomfortable having telephone-only sessions.

With respect to muscular skeletal absences HR have been encouraging all staff to undertake a DSE assessment on their home set up and sending out wellbeing tips about regular breaks and additional equipment. As of 31st March, 359 employees have used the DSE training/assessment tool (+41), 19 employees are yet to complete the assessment (-5) and 121 employees have not yet started (-25).

We have also been promoting our new Employee Assistance Programme (Vivup) which includes free confidential counselling for all staff, as well as access to additional resources such as CBT guides. During Q 14 employees accessed the CBT resources (-16 vs Q3), 2 employees had telephone assessments (-4), and 16 telephone counselling sessions took place (+13).

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